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*653	• Updated PSO BARCODE MENU section with Process Telephone Refills option • Updated the Site Parameter Enter/Edit section with the new parameter PROC TEL REFILLS ALL DIVISIONS.
12/2021	PSO*7*622	Updated Chapters 2 and 16: • Updated the Outpatient List Manager and Indicators and Definitions screenshots, described the Pregnancy/Lactation indicator. • Added a definition of Preg/Lact Display. • Updated the Medication Profile table, screenshot and notes. • Added information about the Women's Health Label.
09/2021	PSO*7*561	• Updated Outpatient Pharmacy Hidden Actions. • Updated CSD (Change Suspense Date) description. • Added new section for Option "BY" Bypass 3/4 Day Supply to the ePharmacy Menu. • Updated section *Using the Suspense Functions* to include the Hidden Action "BY" Bypass 3/4 Day Supply. • Updated scenario when TRICARE or CHAMPVA patient does not have an active insurance policy on file and corresponding screen displays. • Updated Title Page date, footers, Table of Contents MCCF EDI TAS ePharmacy Development Team
7/2021	PSO*7*630	Updated State Prescription Monitoring Program (SPMP) section Updated PSO PROVIDER ADD section Updated PSO PROVIDER EDIT section Updated PSO PROVIDER INQUIRE section Updated Appendix A for ASAP Version 4.2 with new PRE09 data element: 537-538 Updated PIV Card Certificate revoked and expired messages: 253-254, 522-523 Added Chapter 32: Meds by Mail - Virtual Pharmacy Services
7/2021	PSO*7*524	Added Chapter 19: Hazardous Medication Order Checks: 167-171
07/2021	PSO*7*636	• Added the Copay Menu Option, Reset Copay Status List Manager • Added the section, Reset Copay Status List Manager • Updated Title page, Footers, Revision History, Table of Contents, and Index Liberty ITS
03/2021	PSO*7*625	Updated State Prescription Monitoring Program (SPMP) section
12/2020	PSO*7*549	Updated Third Party Payer Rejects – View/Process: 380 Updated Result of Service Code Table: 367 Updated Reason for Service Code Table: 368

Date	Patch	Description
		Updated Title Page date, footers, Table of Contents page numbers MCCF EDI TAS ePharmacy Development Team REDACTED
09/2020	PSO*7*477	• Merged items from patches • Updated the Title page, Revision History, Index, and Footers REDACTED
06/2020	PSO*7*612	• Updated Register Clozapine Patient with enhancement information: 35 (Liberty ITS; REDACTED, Dev; REDACTED, TW)
06/2020	PSO*7*546	• Moved and updated the **Medication Status Check** section • Added the supervisor function, **Medication Status Check** • Updated the Title page, Revision History, Index, and Footers 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: • Pharmacy Manager Menu Options corrected: 32 • Register Clozapine Patient: 33 • Editable Fields in Pharmacy Screenshot: 40 Corrected Errors in Chapter 9: • Temporary number: 66 • Pharmacist Flow: 67 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

Date	Patch	Description
		REDACTED
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 prepays (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

Date	Patch	Description
		(REDACTED, SQA)
02/2018	PSO*7*402	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 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 Updated Schedule prompt displays: 178, 185, 187, 189, 206, 212, 214, 219, 226, 235-236, 239-240, 243, 258, 236, 239-240 Updated text for Schedule changes Updated Available Dosage list enhancement information: 236 Updated Chapter 22 – Dosing Order Checks Updated Error Information Table: 206, 448
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	Updated copay activity log for Fixed Medication Copayment Tiers (FMCT) Updated Title Page to current OIT Standards Updated Revision History Updated Table of Contents Updated footer date to March 2014 per business request. REDACTED
08/2016	PSO*7*448	Updated Title Page to current OIT standards Update Revision History Updated Table of Contents Updated Using the Copy Action section Updated Holding and Unholding a Prescription section Updated examples to read “Veteran Prescription” Updated [PSO LM BACKDOOR ORDERS] Added Resubmitting an ePharmacy Order section Added Reversing an ePharmacy Order section Updated [PSO EPHARMACY MENU] Updated [PSO IGNORED REJECTS REPORT] Updated [PSO REJECTS VIEW/PROCESS]

Date	Patch	Description
		Updated [PSO REJECTS WORKLIST] [PSO BYPASS/OVERRIDE REPORT] 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

Date	Patch	Description
		Added Appendix A: ASAP Definitions Added ASAP and SPMP to the Glossary 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.

Date	Patch	Description
		Added Hash Counts and DEA Certification section Added two System Error messages 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

Date	Patch	Description
		Updated wording for ¾ Days Supply Hold Added rounding functionality for ¾ Days Supply Hold 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).

Table of Contents

Chapter 1: Introduction 1
- **Documentation Conventions 1**
- **Getting Help 2**
- **Related Manuals 2**
  - Main Package Documentation 2
  - Additional Documentation 2

Chapter 2: List Manager 3
- **Patient Demographics and Clinical Alerts 6**
- **Using List Manager with Outpatient Pharmacy 7**
- **Entering Actions 7**
  - Outpatient Pharmacy Hidden Actions 8
  - Speed Actions 10
  - Other Outpatient Pharmacy ListMan Actions 10
  - Other Screen Actions 11

Chapter 3: Using the Outpatient Pharmacy Manager Menu 13
- **Patient Lookup 14**

Chapter 4: Using the Archive Menu Option 15
- **Archiving 15**
- **Find 15**
- **Save to Tape 15**
- **Tape Retrieval 15**
- **Archive to File 16**
- **File Retrieval 16**
- **Purge *Temporarily Out of Order* 18**
- **List One Patient's Archived Rx's 18**
- **Print Archived Prescriptions 18**

Chapter 5: Autocanceling 19
- **Autocancel Rx's on Admission 19**

Chapter 6: Using the Bingo Board Menu 20
- **Bingo Board 20**
- **Bingo Board Manager (BM) 20**
- **Enter/Edit Display 21**
- **Auto-Start Enter/Edit 22**
- **Print Bingo Board Statistics 22**
- **Print Bingo Board Wait Time 23**
- **Purge Bingo Board Data 25**
- **Start Bingo Board Display 25**

Stop Bingo Board Display **25**
Bingo Board User (BU) **26**
Enter New Patient 26
Display Patient's Name on Monitor 26
Remove Patient's Name from Monitor 27
Status of Patient's Order 27
ScripTalk Mapping Error Messages **28**
Chapter 7: Changing the Label Printer 29
Change Label Printer **29**
Chapter 8: Check Drug Interaction 30
Check Drug Interaction **30**
Chapter 9: Controlling the Dispensing of Clozapine 32
Clozapine Pharmacy Manager **32**
Display Lab Tests and Results 32
Edit Data for a Patient in the Clozapine Program 32
List of Override Prescriptions 33
Register Clozapine Patient 33
Clozapine Dispensing Overview **33**
Hierarchy for Addressing Clozapine Patient Override Conditions **34**
Clozapine Patient Authorization **35**
Safety Checks and Overrides **36**
Authorized Pharmacist with PSOLOCKCLOZ key **37**
Approving Member with PSOLOCKCLOZ key **38**
Auto-Notify Provider and Approving Member **39**
Edit Order (ED) – Safety Checks for New Order **39**
Editable fields in Pharmacy **39**
Default Expiration Dates 40
Default Expiration Date Management for Doses of Clozapine 40
Copy Order (CO) – Safety Checks for New Order **40**
Renew Order – Blocked in OP **41**
Override Reason Codes **41**
Request for Override of Pharmacy Lockout Form **42**
Total Daily Dose **43**
VistA Daily Clozapine Transmission **44**
Normal ANC – Overview **48**
Normal ANC – Pharmacy **48**
Mild Neutropenia – Overview **48**
Mild Neutropenia – Pharmacy 49
Moderate to Severe Neutropenia – Overview **50**
Moderate to Severe Neutropenia – Pharmacy (National Override expired) 50

Moderate to Severe – Pharmacy (National Override in Effect) 51
No ANC Results – Overview **52**
No ANC – Non-emergency Pending Order 53
No ANC – Non-emergency Written Order 55
No ANC Special Conditions for Emergency – Overview **56**
Provider Decision 56
No ANC – Emergency OP Special Conditions (Pharmacy View) 57
No Matching WBC (ANC present) – Overview **59**
No Matching WBC – Pharmacy (National Override in Effect) 59
No Matching WBC – Pharmacy (No National Override) 60
Emergency Registration Override – Overview **60**
Valid reasons for an Emergency Registration Override: **61**
Emergency Registration Override – VistA Backdoor Pharmacy **61**
Obsolete messages in Outpatient Pharmacy **61**
Other Scenarios **65**
National Override in Effect – Takes Precedence 65
Lab Changes after Pending Order Sent **66**
Chapter 10: Handling Copay Charges 69
Copay Menu **71**
CHAMPUS Billing Exemption **71**
Exempt Rx Patient Status from Copayment **71**
Reset Copay Status/Cancel Charges **72**
Reset Copay Status 73
Enter/Edit Medication Exemption Question Responses 74
Cancel Charges 75
Potential Charges and Partial Charges 76
IB-initiated Medication Copay Charge 78
Fixed Medication Copayment Tiers (FMCT) 78
Reset Copay Status List Manager **78**
Chapter 11: Evaluating Drug Usage 80
DUE Supervisor **80**
Enter a New Answer Sheet **80**
Edit an Existing Answer Sheet **80**
Create/Edit a Questionnaire **80**
Batch Print Questionnaires **81**
DUE Report **81**
Chapter 12: Enter/Edit Clinic Sort Groups 82
Enter/Edit Clinic Sort Groups **82**
Chapter 13: External Interface Menu 83
External Interface Menu **83**

Purge External Batches **83**
Reprint External Batches **83**
View External Batches **84**
Chapter 14: Label/Profile Monitor Reprint 86
Label Profile Monitor Reprint **86**
Chapter 15: Implementing and Maintaining Outpatient Pharmacy..... 87
Maintenance (Outpatient Pharmacy) **87**
Site Parameter Enter/Edit **87**
PSO RX Numbering Warning 95
RX Upper Bound Warning Limit..... 96
Edit Provider **96**
Add New Providers **99**
Queue Background Jobs **102**
Autocancel Rx's on Admission **103**
Bingo Board Manager (BM) **103**
Enter/Edit Display 103
Auto-Start Enter/Edit..... 105
Print Bingo Board Statistics 105
Print Bingo Board Wait Time 105
Purge Bingo Board Data..... 107
Start Bingo Board Display 107
Stop Bingo Board Display..... 107
Edit Data for a Patient in the Clozapine Program **107**
Enter/Edit Clinic Sort Groups **108**
Initialize Rx Cost Statistics **109**
Edit Pharmacy Intervention **109**
Delete Intervention **109**
Auto-delete from Suspense **109**
Automate Internet Refill **109**
Delete a Prescription **111**
Expire Prescriptions **111**
Manual Auto Expire Rxs **112**
Non-VA Provider Import **112**
Prescription Cost Update **114**
Purge Drug Cost Data **114**
Purge External Batches **114**
Recompile AMIS Data **115**
Chapter 16: Using the Medication Profile 116
Medication Profile **116**
Medication Profile: Short Format **116**

OneVA Pharmacy and the Medication Profile 118
Medication Profile: Long Format 120
Medication Reconciliation 121
Medication Profile and Refill 122
Chapter 17: About the Output Reports Menu 127
Output Reports 127
Action Profile (132 COLUMN PRINTOUT) 127
Alpha Drug List and Synonyms 131
AMIS Report 131
Bad Address Reporting Main Menu 131
Bad Address Suspended List 131
List Prescriptions Not Mailed 132
CMOP Controlled Substance Rx Dispense Report 132
Commonly Dispensed Drugs 132
Cost Analysis Reports 133
Clinic Costs 133
Division Costs by Drug 133
Drug Costs 133
Drug Costs by Division 133
Drug Costs by Division by Provider 133
Drug Costs by Provider 133
High Cost Rx Report 134
Patient Status Costs 134
Pharmacy Cost Statistics Menu 134
Pharmacy Statistics 134
Sort Statistics By Division 134
Provider by Drug Costs 135
Provider Costs 135
Request Statistics 135
Daily AMIS Report 135
Drug List By Synonym 135
Free Text Dosage Report 135
Inactive Drug List 136
Internet Refill Report 136
List of Patients/Prescriptions for Recall Notice 142
List Prescriptions on Hold 148
Management Reports Menu 148
Daily Management Report Menu 148
All Reports 149
Cost of Prescriptions 149
Count of Prescriptions 149

Intravenous Admixture 149
Type of Prescriptions Filled 149
Date Range Recompile Data 150
Initialize Daily Compile 150
Monthly Management Report Menu 150
All Reports 150
Cost of Prescriptions 150
Count of Prescriptions 151
Intravenous Admixture 151
Type of Prescriptions Filled 151
One Day Recompile Data 151
Purge Data 151
Medication Profile 151
Monthly Drug Cost 151
Narcotic Prescription List 152
Non-Formulary List 152
Non-VA Meds Usage Report 152
Poly Pharmacy Report 153
Released and Unreleased Prescription Report 154
Prescription List for Drug Warnings 154
Chapter 18: Using the Pharmacy Intervention Menu 156
Pharmacy Intervention Menu 156
Enter Pharmacy Intervention 156
Edit Pharmacy Intervention 156
Print Pharmacy Intervention 156
Delete Intervention 157
View Intervention 157
Chapter 19: Hazardous Medication Order Checks 158
Chapter 20: Allergy Order Checks 163
CPRS Allergy/Adverse Reaction Entry Process 165
VistA Outpatient Allergy/Adverse Reaction Entry Process 167
Chapter 21: Clinical Reminder Order Checks 172
Chapter 22: Processing Order Checks 173
Process Order Checks 173
Clinic Orders 176
Therapeutic Duplication 216
Allergy/ADR Order Checks (PSO*7*251) 232
Chapter 23: Dosing Order Checks 236
Chapter 24: Releasing Medication 237
Release Medication 237

Changes to Releasing Orders Function – Digitally Signed Orders Only 239
Changes to Releasing Orders Function – ScripTalk® 242
Changes to Releasing Orders Function – Signature Alert 242
Changes to Releasing Orders Function – HIPAA NCPDP Global 243
Chapter 25: Returning Medication to Stock 245
Return Medication to Stock 245
Chapter 26: Processing a Prescription 246
Rx (Prescriptions) 246
Patient Prescription Processing 246
Titration 266
CPRS Order Checks 267
Entering a New Order 273
Entering a new order with Local or Free-Text Dosage 283
Entering a new order – ePharmacy (third party billable) 287
Displaying a Patient's Remote Prescriptions 299
Editing an Order 300
Editing an ePharmacy Order 305
DAW/NDC Edit 308
Using the Copy Action 308
Copying an ePharmacy Order 312
Reversing an ePharmacy Claim 315
OneVA Pharmacy Processing within Patient Prescription Processing 316
Holding and Unholding a Prescription 322
Renewing a Prescription 325
Renewing an ePharmacy Order 327
Flagging and Unflagging Pending Orders 329
Barcode Rx Menu 332
Process Telephone Refills 332
[PSO PROCESS TELEPHONE REFILLS] 332
Barcode Batch Prescription Entry 334
Check Quality of Barcode 335
Process Internet Refills 335
Complete Orders from OERR 337
Flagging and Unflagging Pending Orders 342
Changes to Finishing Pending Orders Process - Digitally Signed Orders Only 345
Finishing an Order from OERR with Multiple Institutions 345
Finishing an ePharmacy Order 346
Activity Log 346
Discontinue Prescription(s) 350
Edit Prescriptions 351

ePharmacy Menu **355**
Ignored Rejects Report ... 356
ePharmacy Medication Profile (View Only) ... 358
NDC Validation ... 360
ePharmacy Medication Profile Division Preferences ... 361
ePharmacy Site Parameters ... 362
Third Party Payer Rejects – View/Process ... 366
Third Party Payer Rejects – Worklist ... 371
TRICARE CHAMPVA Override Report ... 385
TRICARE/CHAMPVA Reject Processing ... 397
TRICARE/CHAMPVA Eligible Outpatient Override Function ... 401
TRICARE/CHAMPVA Without an Active Insurance Policy ... 405
Other Rejects ... 408
View ePharmacy Rx ... 412
Bypass 3/4 Day Supply ... 413
Productivity/Revenue Report ... 414
ePharmacy Patient Comment ... 415
REJECT RESOLUTION REQUIRED Rejects ... 416
MailMan Message for Open/Unresolved Rejects **417**
Alerts for Discontinued CMOP Prescription **418**
Discontinued by a Background Process ... 418
Discontinued by a Foreground Pharmacy Process ... 419
List One Patient's Archived Rx's **419**
Manual Print of Multi-Rx Forms **419**
OneVA Pharmacy Prescription Report **420**
Reprint an Outpatient Rx Label **424**
Printing a OneVA Pharmacy Label **425**
Signature Log Reprint **426**
View Prescriptions **426**
Restrictions to Providers on Controlled Substances Orders **426**
Chapter 27: ScripTalk® 'Talking' Prescription Labels ... 428
ScripTalk Main Menu **428**
ScripTalk Patient Enter/Edit **429**
Queue ScripTalk Label by Barcode **429**
Queue ScripTalk Label by Rx# **429**
ScripTalk Reports **430**
ScripTalk Audit History Report ... 430
Report of ScripTalk Enrollees ... 430
Reprint a non-voided Outpatient Rx Label **431**
Set Up and Test ScripTalk Device **432**
ScripTalk Device Definition Enter/Edit ... 432

Print Sample ScripTalk Label 433
Test ScripTalk Device 434
Reinitialize ScripTalk Printer 434
Void Label Setup **434**
Chapter 28: Using the Supervisor Functions Menu 436
Supervisor Functions **436**
Add New Providers **436**
Daily Rx Cost **436**
Delete a Prescription **437**
Edit Provider **437**
Initialize Rx Cost Statistics **437**
Inter-Divisional Processing **437**
Inventory **437**
Look-up Clerk by Code **438**
Medication Status Check **438**
To Review: 440
Status Correction: 441
Lookup National Clean-Up Utility Data **441**
Monthly Rx Cost Compilation **441**
Patient Address Changes Report **441**
Pharmacist Enter/Edit **443**
Purge Drug Cost Data **443**
Recompile AMIS Data **443**
Site Parameter Enter/Edit **444**
State Prescription Monitoring Program (SPMP) Menu **452**
View Provider **491**
Chapter 29: Using the Suspense Functions 493
Suspense Functions **493**
Auto-delete from Suspense **493**
Change Suspense Date **494**
Count of Suspended Rx's by Day **494**
Delete Printed Rx's from Suspense **494**
Log of Suspended Rx's by Day (this Division) **495**
Print from Suspense File **495**
Print from Suspense by Category 496
¾ Days Supply Hold 497
Host Errors 498
TRICARE and CHAMPVA 499
Pull Early from Suspense **499**
Queue CMOP Prescription **500**

Reprint Batches from Suspense **500**
Chapter 30: Updating a Patient's Record 502
Update Patient Record **502**
Chapter 31: Verifying Prescriptions 504
Verification **504**
List Non-Verified Scripts **504**
Non-Verified Counts **505**
Rx Verification by Clerk **506**
Verification through Patient Prescription Processing **506**
Verifying ePharmacy Orders **509**
Chapter 32: Meds by Mail – Virtual Pharmacy Services 511
Chapter 33: CPRS Order Checks: How They Work 513
Introduction **513**
Order Check Data Caching **513**
Hash Counts and DEA Certification **514**
Chapter 34: Error Messages 517
Error Information **517**
Three Levels of Error Messages **517**
Chapter 35: Security Keys 519
Security Keys **519**
PSO TRICARE/CHAMPVA 519
PSO TRICARE/CHAMPVA MGR 519
PSO EPHARMACY SITE MANAGER 519
PSO SPMP ADMIN 519
Appendix A: ASAP Definitions 520
Glossary 532

List of Figures

Figure 1: Screen Overview 3
Figure 2: Indicators and Definitions ..... **Error! Bookmark not defined.**
Figure 3: Auto-notification 39
Figure 4: Editable Pharmacy Fields 40
Figure 5: Copy Order Example 41
Figure 6: Request for Override Form 43
Figure 7: Example of Daily Transmission 45
Figure 8: Retransmit Clozapine Roll-up Data 47
Figure 9: Retransmit Clozapine Roll-up Data #52 58
Figure 10: Causative Agent Lookup 165
Figure 11: Example of Historical Allergy 166
Figure 12: Example of Observed Allergy 167

List of Tables

Table 1: Conventions / Notations 1
Table 2: Screen Area Descriptions 3
Table 3: Indicators 5
Table 4: Actions 7
Table 5: Hidden Actions 8
Table 6: Speed Actions 10
Table 7: ListMan Actions 10
Table 8: Other Actions 11
Table 9: Print Bingo Board Report 23
Table 10: Patient Order Status 27
Table 11: Bingo Board Errors Messages 28
Table 12: Hierarchy for Addressing Clozapine Patients 35
Table 13: Clozapine Patient Status 36
Table 14: CPRS Pending Orders 36
Table 15: Key Requirement 38
Table 16: Approving Member 38
Table 17: Auto-notification Alerts 39
Table 18: Copy Order 40
Table 19: Renew Order 41
Table 20: Override Reason Codes 42
Table 21: ANC Results 48
Table 22: ANC Results 49
Table 23: Expired Override 50
Table 24: National Override 51
Table 25: ANC Levels 52
Table 26: Non-emergency Pending Order 54
Table 27: Non-emergency Written Order 55
Table 28: Emergency OP Special Conditions 57
Table 29: No Matching WBC ANC Result 59
Table 30: No Matching WBC ANC Result National Override in Effect 60
Table 31: Pharmacist Flow 63
Table 32: Potential Scenarios 65
Table 33: Pending Order Change 67
Table 34: Example 67
Table 35: Outpatient Site Parameter 87
Table 36: CPRS Ordering Institution 91
Table 37: Charge Location 92
Table 38: Print Patient Wait Time 105
Table 39: Internet Refill Options 110
Table 40: Enhanced Order Checking Error Messages 248
Table 41: NCPDP Codes 305
Table 42: MAXIMUM DAYS SUPPLY VA Product File (#50.68) vs Local Drug File (#50) 355
Table 43: Site Parameters Actions 363
Table 44: PSO Site Parameter 444
Table 45: Mailing Comments 444
Table 46: CPRS Ordering Institution 446
Table 47: Charge Location 448
Table 48: Category 451
Table 49: Error Messages 517
Table 50: Message Reasoning 517
Table 51: Terms 532

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 *Archiving* 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
Indicates especially important or helpful information.	Up to four of the last LAB results can be displayed in the message.
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.	This option requires the security key PSOLOCKCLOZ.

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

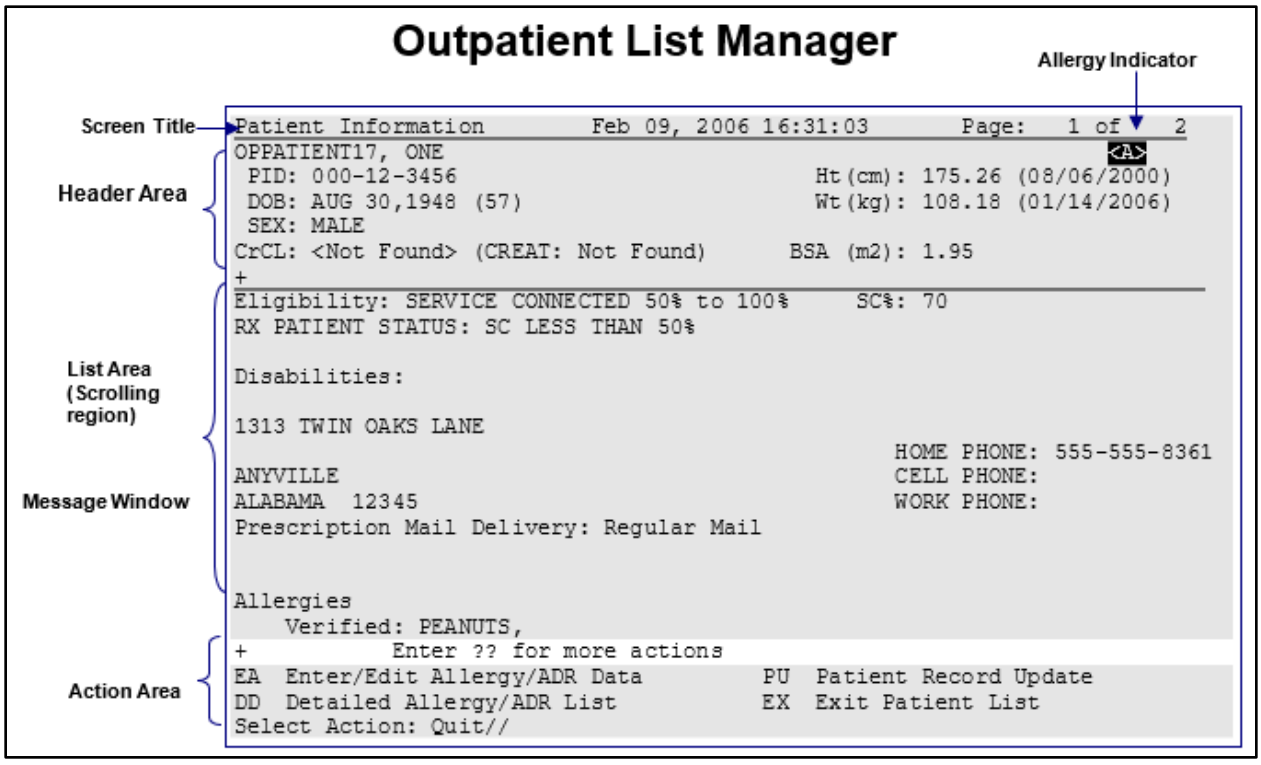
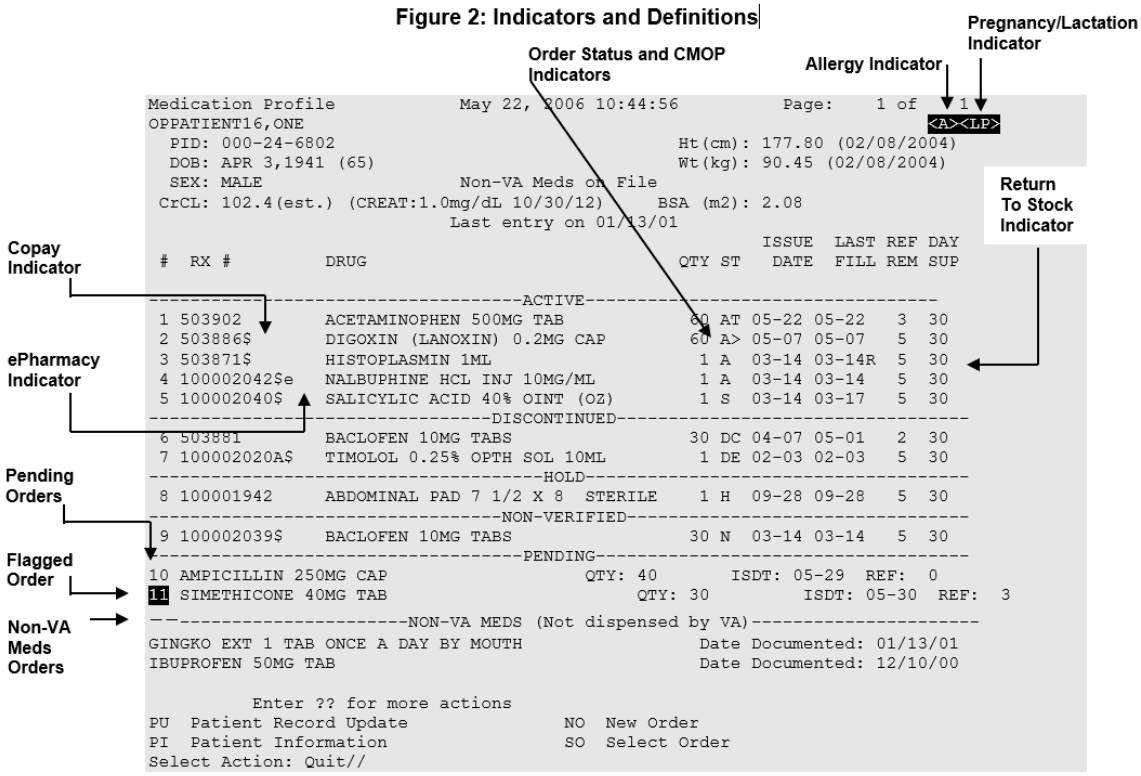


Table 2: Screen Area Descriptions

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.).
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.

Area	Description
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



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 discontinue type actions performed on the order. The codes and the action they represent are as follows:

DF Discontinued due to edit by a provider through CPRS
DD 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. > Drug for the prescription is marked for CMOP T Displayed when the last fill is either in a Transmitted or Retransmitted CMOP state. (This indicator can overwrite the ">" indicator.
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.
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
#  RX #          DRUG                               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      OXYBUTYNIN 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.

Action	Description
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.
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.

Action	Description
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.

```
          :                   :                             :
                                                  ISSUE  LAST REF DAY
 #  RX #       DRUG                        QTY ST  DATE  FILL REM 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.

Action	Description
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 *Update Patient Record* 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)	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. 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.
Partial from Another VA Pharmacy (PR)	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. 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.

Action	Description
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:    OPPATIENT,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
                              TIME      TIME                          WAIT
NAME                            IN       OUT         Rx#              TIME
------------------------------------------------------------------------------

        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

Error Level	Error Message	Why This Message is Being Displayed
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.

     Copyright 2012 First DataBank, Inc.

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

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

Status	Pharmacist View
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.	
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]

Option	Pharmacist View
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 inEmergency 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?	The following conditions require the primary pharmacist and an Approving member of the clozapine team to both have the PSOLOCKCLOZ key: • Mild neutropenia – Local Override • Moderate to Severe neutropenia – National Override • No ANC Results – National Override or Special Conditions Local Override • ANC with No Matching WBC – National Override • Unregistered Patient – Emergency Registration Local Override with written order
Verify pharmacist is authorized with PSOLOCKCLOZ key	When the pharmacist, who is processing the Pending or Written Prescription that includes an override, does not hold the PSOLOCKCLOZ key, this message displays: You Are Not Authorized to Override! See Clozapine Manager with PSOLOCKCLOZ key. Pending Orders return to pending status and written orders issue a hard stop and the prescription is deleted and not processed.

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	During processing of the prescription, the primary pharmacist will be prompted with the following message: Approving member of the clozapine team The pharmacist is required to select from a list of approved members with the PSOLOCKCLOZ key by entering a partial name or entering "??".

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.

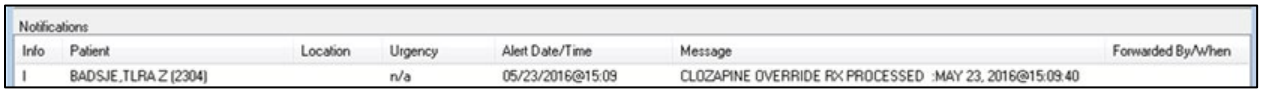
The VistA Alert message includes:

- 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	An auto-notification is sent when any National or Local Override is required to process the clozapine prescription. It is possible that an Approving Member of the clozapine team may not be aware that their name was used for the override. The alert is viewable in both GUI and VistA Backdoor Pharmacy.
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 2: Auto-notification



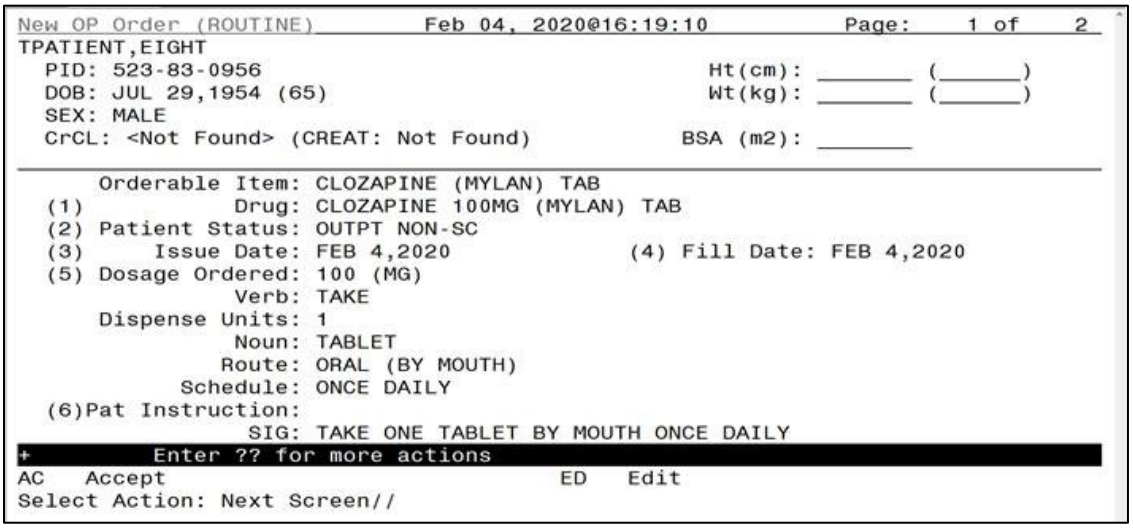
Edit Order (ED) – Safety Checks for New Order

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 3: Editable Pharmacy Fields



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 4: 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/UnmarkIN   Intervention Menu   GO   Go to Page
RP   Reprint (OP)         DA   Display Drug AllergiesLS  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.

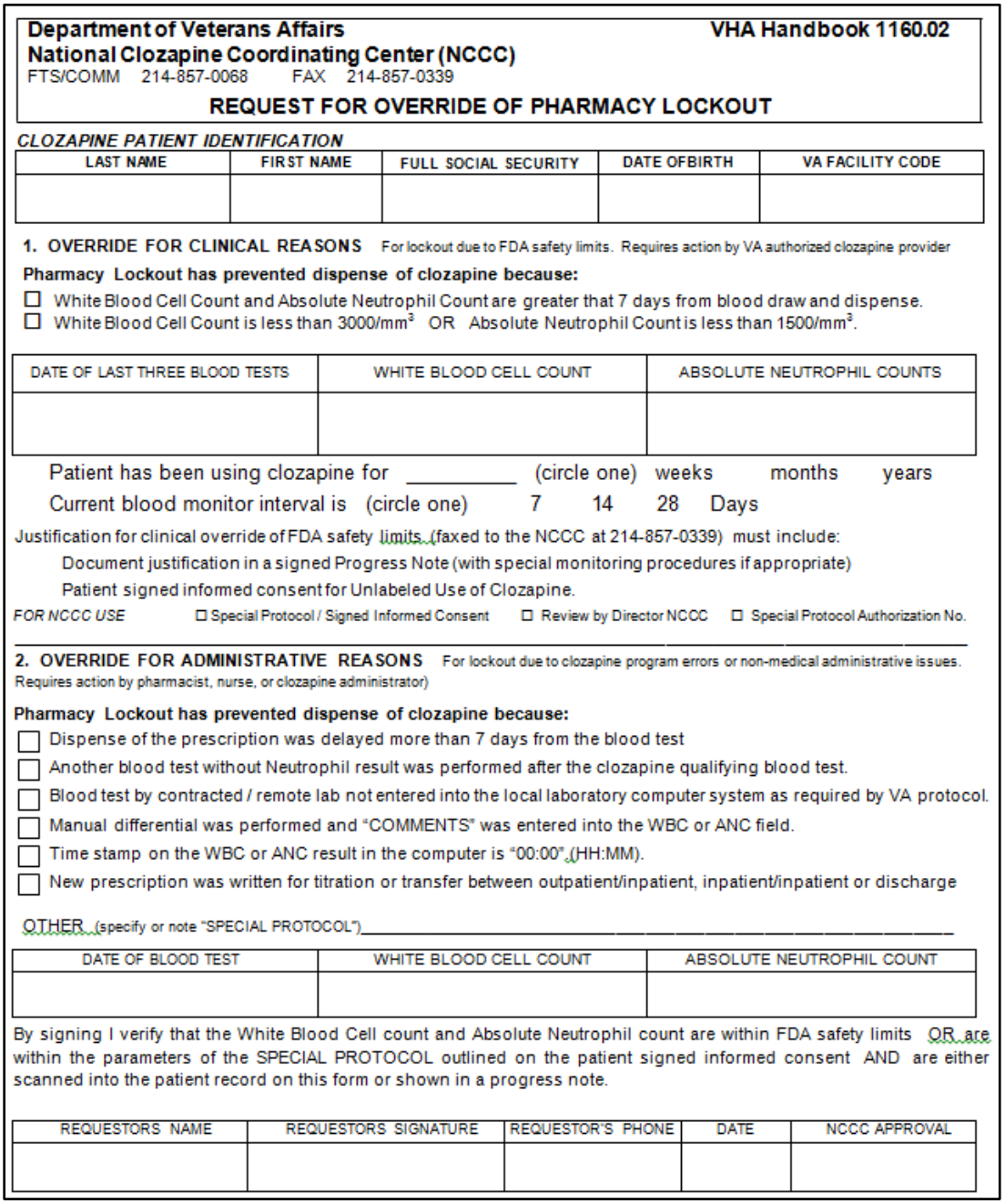
Table 20: Override Reason Codes

Code	Short Description	Long Description
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 5: Request for Override Form



Department of Veterans Affairs — **VHA Handbook 1160.02**
National Clozapine Coordinating Center (NCCC)
FTS/COMM 214-857-0068 FAX 214-857-0339

REQUEST FOR OVERRIDE OF PHARMACY LOCKOUT

CLOZAPINE PATIENT IDENTIFICATION

LAST NAME	FIRST NAME	FULL SOCIAL SECURITY	DATE OFBIRTH	VA FACILITY CODE

1. OVERRIDE FOR CLINICAL REASONS For lockout due to FDA safety limits. Requires action by VA authorized clozapine provider

Pharmacy Lockout has prevented dispense of clozapine because:

☐ White Blood Cell Count and Absolute Neutrophil Count are greater that 7 days from blood draw and dispense.
☐ White Blood Cell Count is less than 3000/mm³ OR Absolute Neutrophil Count is less than 1500/mm³.

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 ☐ Special Protocol / Signed Informed Consent ☐ Review by Director NCCC ☐ Special Protocol Authorization No.

2. OVERRIDE FOR ADMINISTRATIVE REASONS For lockout due to clozapine program errors or non-medical administrative issues. Requires action by pharmacist, nurse, or clozapine administrator)

Pharmacy Lockout has prevented dispense of clozapine because:

☐ Dispense of the prescription was delayed more than 7 days from the blood test
☐ Another blood test without Neutrophil result was performed after the clozapine qualifying blood test.
☐ Blood test by contracted / remote lab not entered into the local laboratory computer system as required by VA protocol.
☐ Manual differential was performed and "COMMENTS" was entered into the WBC or ANC field.
☐ Time stamp on the WBC or ANC result in the computer is "00:00".(HH:MM).
☐ 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.

REQUESTORS NAME	REQUESTORS 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 6: 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 7: 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	If the pharmacist is not authorized with the PSOLOCKCLOZ key, this message displays: 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.
Lab results returned	Lab results are returned to the pharmacist in the following message: Now doing clozapine Order checks. Please wait... *** Last xx WBC (EFF. mm-dd-yyyy) and ANC results were: *** WBC ANC mm/dd/yyyy@hh:mm Results: xxxx mm/dd/yyyy@hh:mm Results: xxxx <Displays up to last four results in the last 30 days>
Mild neutropenia override prompt	After the labs are displayed, the pharmacist is prompted to override the abnormal ANC results with this message: Override reason: MILD NEUTROPENIA PRESCRIBER APPROVED Test ANC labs 3x weekly until levels stabilize to greater than or equal to 1500. 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: 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

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
	WBC ANC mm/dd/yyyy@hh:mm Results: xxxx mm/dd/yyyy@hh:mm Results: xxxx <Displays up to last four results in the last 30 days> 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/mm3 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/mm3 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.
Hard stop	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.

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	When the National Override has been authorized by NCCC, the Pending or written prescription is available to process.
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. 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.

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: 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 for No ANC results	After the labs are displayed, the pharmacist is prompted to override the No ANC 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 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 '??' Approving member
Pharmacist enters Remarks/Special Instructions	The pharmacist is required to enter free text in the Remarks 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 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: (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 – 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.

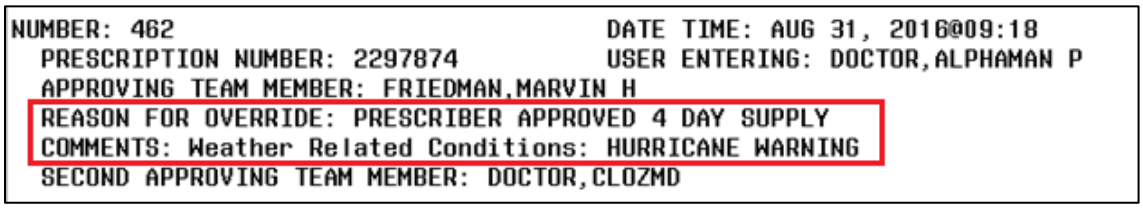
In this scenario, a National Override is NOT in effect because this situation requires a written prescription from the provider to the Outpatient Pharmacist, as well as a Local Override.

Table 28: Emergency OP Special Conditions

Status	Pharmacist View
Written prescription – Outpatient Special Conditions Local Override	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: <Displays up to the last 4 results within the past 30 days, if applicable> *** Permission to dispense clozapine has been denied based on the available lab tests related to the clozapine treatment program. *** 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). 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.
Pharmacist not authorized	If the pharmacist is not authorized with the PSOLOCKCLOZ key, this message displays: You Are Not Authorized to Override! See Clozapine Manager with PSOLOCKCLOZ key. The system issues a hard stop and the written order is deleted and not processed.
Prompted to override for Outpatient Special Conditions	The authorized pharmacist receives additional information and is prompted to override with a Special Conditions Local Override. This message displays to the pharmacist: Override reason: PRESCRIBER APPROVED 4 DAY SUPPLY Do you want to override and issue this order? Y/N

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 8: Retransmit Clozapine Roll-up Data #52



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 Request for Override of Pharmacy Lockout Form. 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 4th 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	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: Emergency Registration Local Override for non-registered clozapine patients requires ANC levels greater than or equal to 1500.
Pharmacist does not want to override	In the event the pharmacist selects 'No' and does not want to override the prescription, it 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
Real-time notification of temporary local authorization number to NCCC MailMan Group	Once the prescription is complete and dispensed, the system sends a **real-time** message to the NCCC MailMan Group which contains this information: Current date/time Add From Temporary local authorization number (e.g., Z442001) Station #. Social Security Number Dispense frequency (W) The only valid response for dispense frequency is W (Weekly)
Auto-notification to Provider and Approving Member	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.
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: (8) REGISTER NON-DUTY HR/WEEKEND (MAX4DAY) 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.

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	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: **NCCC AUTHORIZED** rather than **MILD NEUTROPENIA PRESCRIBER APPROVED**. When a National Override is in effect, it takes precedence over any other condition.
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.
Lab results returned	Lab results are returned to the pharmacist in the following message: Now doing clozapine Order checks. Please wait... <Displays up to last four results in the last 30 days>
Override prompt	After the labs are displayed, the pharmacist is prompted to override the abnormal ANC results with this message: Override reason: NCCC AUTHORIZED Do you want to override and issue this order? Y/N.

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	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.
Pharmacist requests National Override for Administrative Reasons	The pharmacist can request the National Override for Administrative Reasons by completing the Override Lockout Form and submitting to NCCC. The NCCC will review the standalone WBC and previous results and the circumstances prior to approval. Once the National Override is authorized, the pharmacist will continue processing the pending order.
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.
Lab results returned	Lab results are returned to the pharmacist in the following message: Now doing clozapine Order checks. Please wait... <Displays up to last four results in the last 30 days> **Table 34: Example** 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	With a National Override in effect, the pharmacist is prompted to override the results with this message: 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: 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

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: (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:
  - o A Service Connected (SC) condition
  - o Combat Veteran (CV)
  - o Vietnam-era herbicide/Agent Orange (AO) exposure
  - o Ionizing Radiation (IR) exposure
  - o Southwest Asia Conditions
  - o Shipboard Hazard and Defense (SHAD)
  - o Military Sexual Trauma (MST)
  - o 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

No Copay
Copay

```
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-------------------------------------
1 559163    FOSINOPRIL NA 20MG TAB              30 A> 10-24 10-24  11  30
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 prepays 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,XXXXXXX 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,XXXXXXX 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,XXXXXXX 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,XXXXXXX 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
```

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: OPPHARMACIST27,THREE

Copay Activity Log:
#   Date        Reason               Rx Ref         Initiator Of Activity
================================================================================
1   10/23/06    ANNUAL CAP REACHED   REFILL 2       OPPHARMACIST15,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       OPPHARMACIST15,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       OPPHARMACIST15,THREE
       Comment:  PARTIAL BILLING FOR THIS FILL
2   10/29/06    REMOVE COPAY CHARGE  REFILL 2       OPPHARMACIST15,THREE
       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.

Site Parameter	Description
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.
PROC TEL REFILLS ALL DIVISIONS	This parameter is used as a site's default response to the "Process telephone refills for all divisions?" prompt issued during the Process Telephone Refills option. If this field is not set, the prompt will have no default value and the end-user will be forced to enter a value or quit the option.

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.1`

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 issue d 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.

*****Important*****

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.

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: NHCU// <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
                                         CITY: AUSTIN
  STATE: TEXAS                           ZIP CODE: 78749
  PHONE (HOME): 555-555-1212             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            OFFICE PHONE: 800-800-80000
  PHONE #3: 888-888-8888                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
                              TIME      TIME                          WAIT
NAME                            IN       OUT         Rx#              TIME
------------------------------------------------------------------------------

        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.

	*****Important***** 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]

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.

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*
-------------------------------------------------------------------------
```

```
Please update Institutional DEA Certification Date. Expired on 2/19/12.
**********
```

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.

- 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: 1111111111
NPI: 1111111111            NPI ENTRY STATUS: DONE
AUTHORIZE RELEASE OF NPI: Yes
EFFECTIVE DATE/TIME: JUL 31, 2018@17:09:08
STATUS: ACTIVE            NPI: 1111111111
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
```

[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
- 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
                                                          ISSUE  LAST REF DAY
 #  RX #          DRUG                                QTY ST   DATE  FILL REM 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          OXYBUTYNIN 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
 4 2395           AZATHIOPRINE 50MG TAB                 90 E   06-10 05-03   3  90
----------------------------------DISCONTINUED----------------------------------
 5 2398           FOLIC ACID 1MG TAB                    90 DD> 05-03 05-03R  3  90
 6 2400           HYDROCORTISONE 1%CR                    1 DE> 05-03 05-03R 11  30
 7 2394           IBUPROFEN 400MG TAB 500'S            270 DC  05-03 05-03   3  90
 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
10 2392           THIAMINE HCL 100MG TAB                90 DA> 05-03 05-03R  3  90
--------------------------------------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
 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
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
 CrCL: <Not Found> (CREAT: Not Found)           BSA (m2): _______
                                                           ISSUE  LAST REF DAY
 #  RX #         DRUG                                 QTY ST  DATE  FILL REM SUP
+
 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): _______
                                                           ISSUE  LAST REF DAY
 #  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: OPPROVIDER16,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
                                                        ISSUE     LAST      REF  DAY
  # Rx#          DRUG [^]                          QTY ST  DATE      FILL      REM  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
                              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       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
                                                  HOME PHONE:
ANYTOWN                                           CELL PHONE:
NEW YORK    01280-7654                            WORK PHONE:
Prescription Mail Delivery: Regular Mail
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
                                                          ISSUE    LAST     REF  DAY
  # Rx#           DRUG [^]                         QTY ST  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
PENDING (2 order)
 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
Non-VA MEDS (Not dispensed by VA) (1 order)
 16 TAMOXIFEN CITRATE 10MG TABS                  Date Documented: 06/04/07
    SIG: TAKE 2 TABLET(S) PO FOUR TIMES A DAY


          Enter ?? for more actions
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.

```
                                                          ISSUE  LAST   REF DAY
 #  RX #         DRUG                                QTY ST  DATE  FILL   REM SUP
 ---------------------------------DISCONTINUED-------------------------------
 1 100005604$    TOBRAMYCIN 80MG/2ML INJ  100 DC>B01-21 01-21   0  9<<Truncated
```

```
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): _______
                                                          ISSUE  LAST REF DAY
#  RX #         DRUG                                  QTY ST  DATE  FILL REM 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    LAST     REF  DAY
  # Rx#          DRUG [^]                          QTY ST  DATE     FILL     REM  SUP
ACTIVE (6 orders)
  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
DISCONTINUED (4 orders)
  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
SUSPENDED (2 orders)
 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
EXPIRED (1 order)
 13 100004075e    CABERGOLINE 0.5MG TAB               7 E   05-18-05 05-18-05   6    7
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       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:

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                                                        Rx#
     Status
                Expiration
                           Provider

                     Date
Classification: RE400 - MUCOLYTICS

ACETYLCYSTEINE 20% 30ML                    Qty: 30 for 90 Days          501217
     Active
                  12-19-2013
                           RXXXXXXX,RXXXXXXX
         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: 03-20-2009Qty: 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: 03-20-2009Qty: 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)    3 TABLETS                          3
    OPPROVIDER24,TWO:3

ALCOHOL PREP PADS (3718)                1 PAD                              2
    OPPROVIDER13,TWO:2
                                        PAD                                1
    OPPROVIDER13,TWO:1

AMINOPHYLLINE 500MG SUPP (3422)        1 SUPPOSITORY(IES) 500MG           1
    OPPROVIDER13,TWO:1

ASPIRIN BUFFERED 325MG TAB (280)        1625MG                             2
    OPPROVIDER24,TWO:2
                                        975MG                              3
    OPPROVIDER24,TWO:2 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                      Rx #        Date
                    Reason
-------------------------------------------------------------------------------
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                         Rx #        Date
                    Reason
-------------------------------------------------------------------------------

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 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                      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                       Rx #        Date
                    Reason
------------------------------------------------------------------------------

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.

	*****Important***** Before printing the first management report, the *Initialize Daily Compile* 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.

- *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: OPPROVIDER21,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 reinstalled 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^PARMACIST 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.^TRAPATNM,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

                                                                ISSUE  LAST REF DAY
    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

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!
```

```
     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 9: Causative Agent Lookup

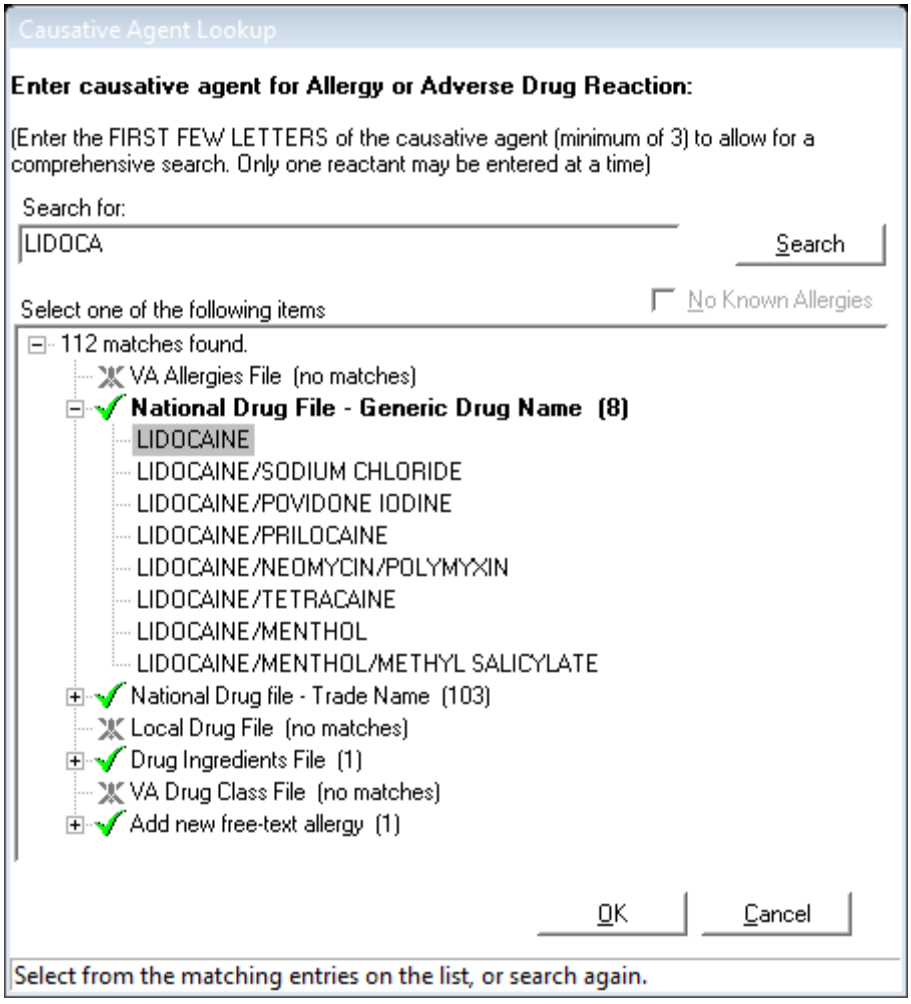


Figure 10: Example of Historical Allergy

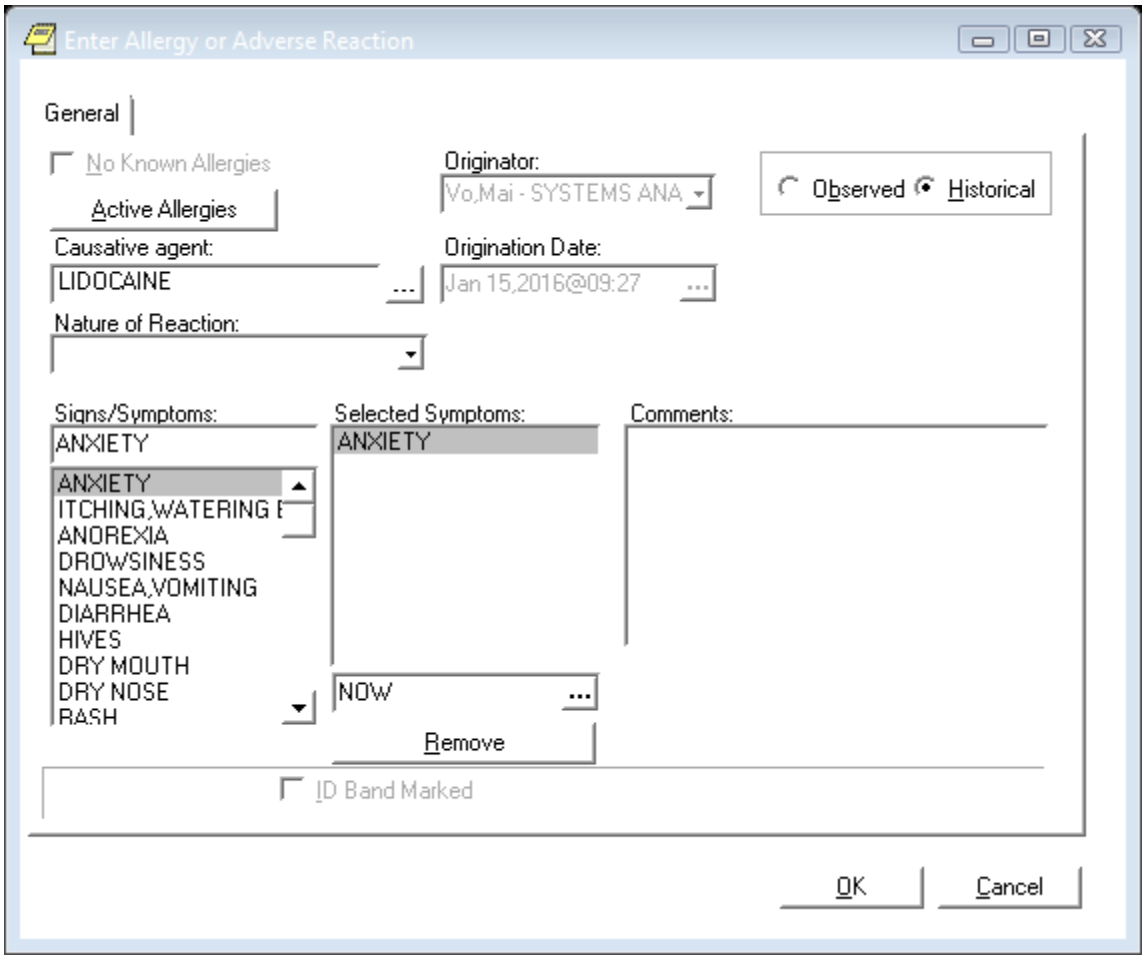
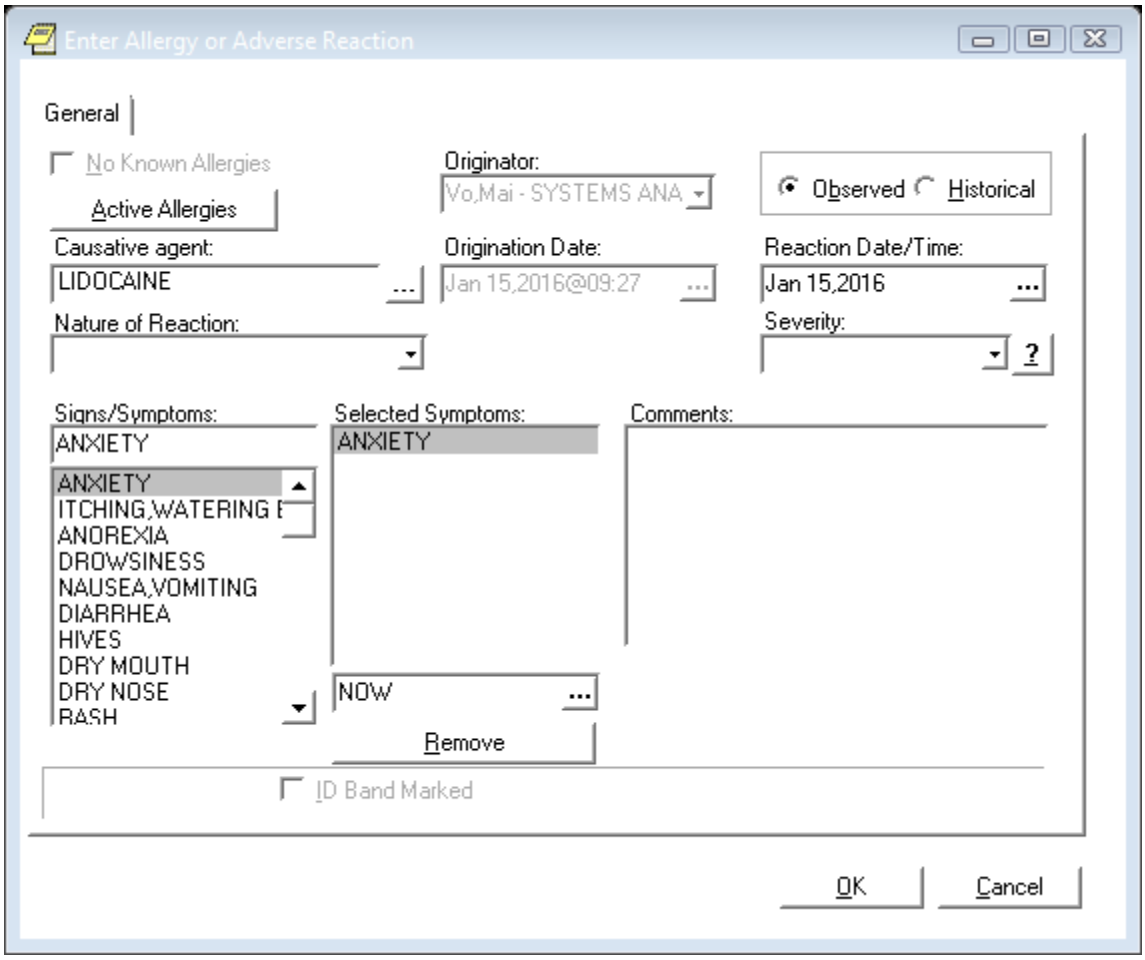


Figure 11: Example of Observed Allergy



VistA Outpatient Allergy/Adverse Reaction Entry Process

Observed Allergy example:

```
Patient Information          Jan 20, 2016@16:50:39          Page:    2 of    2

  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


                                                                  OBS/
REACTANT                                              VER.   MECH.   HIST  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/SYMPTOM
 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


                                                                 OBS/
REACTANT                                              VER.   MECH.   HIST  TYPE
--------                                              ----  -------  ----  ----
METFORMIN                                             AUTO  ALLERGY  OBS   DRUG
 (METFORMIN HYDROCHLORIDE)
    Reactions: ANXIETY, HIVES, ITCHING,WATERING EYES
OXYCODONE                                              NO   ALLERGY  OBS   DRUG
    Reactions: COMA, SHORTNESS OF BREATH
PENICILLIN                                            AUTO  ALLERGY  OBS   DRUG
    Reactions: ANAPHYLAXIS, RASH, NAUSEA,VOMITING,
               BELCHING
ASPIRIN                                               AUTO  ALLERGY  OBS   DRUG
    Reactions: DIARRHEA, NAUSEA,VOMITING, HIVES                            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

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, 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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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// Y es

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// Y es

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: 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
```

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// Y es

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: 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 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:    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//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: OPPROVIDER,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: OPPROVIDER,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: 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 #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
                                                           ISSUE  LAST REF DAY
 #  RX #         DRUG                                 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
 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       CIMETIDINE 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: CIMETIDINE 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

                                                                ISSUE  LAST REF DAY
    RX #         DRUG                                  QTY ST  DATE  FILL REM 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$        CIMETIDINE 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

                                                              ISSUE  LAST REF DAY
    RX #         DRUG                                  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                              ID#:000-00-0000  RX#: 2531
INDOMETHACIN 25MG CAP


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): _______
                                                            ISSUE  LAST REF DAY
 #  RX #         DRUG                                  QTY ST  DATE  FILL REM SUP
-------------------------------------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                 RF   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:    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

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:
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```

```
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Copyright <Insert Current Year>  First DataBank, Inc.

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

                                                          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
-----------------------------------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: WARFAR
  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: 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
.

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 (C0UMADIN) 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 (C0UMADIN) 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 (C0UMADIN) 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 (C0UMADIN) 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 (C0UMADIN) NA 5MG TAB: P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for  WARFARIN (C0UMADIN) 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 discontinue 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  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.

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 1MG 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

                                                                ISSUE  LAST REF DAY
    RX #         DRUG                                    QTY ST  DATE  FILL REM 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: OPPROVIDER, 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                                                      <A>
  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                                                      <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
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): _______

                                                      ISSUE  LAST REF DAY
 #  RX #      DRUG                               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 charge 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 <u>not</u> 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.

	*****Important***** This is a mandatory function that must be used by the pharmacy.

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 that the current prescription NDC.
- NDC CODE field values in the SYNONYM sub-file in the DRUG file, if valid and different that 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 (GCNSENO 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
                                                              ISSUE  LAST REF DAY
 #  RX #         DRUG                                  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: OPPROVIDER, 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 PSOUATRF security key.

- When the CPRS Auto Refill field is set to YES and the PSOAUTRF 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 PSOAUTRF 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 PSOAUTRF 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 1st 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):

```
          :                    :                              :
                                                   ISSUE  LAST REF DAY
  #  RX #       DRUG                        QTY ST  DATE  FILL REM SUP
 -------------------------------ACTIVE-------------------------------
  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):

```
                                                    ISSUE  LAST REF DAY
  #  RX #       DRUG                          QTY ST  DATE  FILL REM 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 25OMG 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 25OMG 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 25OMG 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 an 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
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)
  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
-----------------------------------PENDING-----------------------------------
 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/0 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/0 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 ADMNISTRATION 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// ??

                              Require        Print     Print on
  Nature of Order Activity   E.Signature   Chart Copy   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 TABLETA(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 ADMNISTRATION 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 CONJUCTION 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                                                      <A>
  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: PREDNISONE
  Lookup: GENERIC NAME
     1   PREDNISONE 1MG TAB           HS051
     2   PREDNISONE 20MG S.T.           HS051
     3   PREDNISONE 5MG TAB           HS051
CHOOSE 1-3: 3  PREDNISONE 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

-------------------------------------ACTIVE-------------------------------------
 1  100003840e   PREDNISONE 5MG TAB                   30 A> 11-02 11-02   5  30
```

^ 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 : 99999999/0 - 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// O  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// P   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// P   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                                                        <A>
  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                                                        <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

               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: OPPROVIDER4,TWO       (13)   Copies: 1
 (14)        Remarks: New Order Created by editing Rx # 503908.
   Entry By: OPPROVIDER4,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: OPPROVIDER4,TWO       (13)   Copies: 1
 (14)        Remarks: New Order Created by editing Rx # 503910.
   Entry By: OPPROVIDER4,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 redisplays 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// ??

                              Require        Print     Print on
  Nature of Order Activity   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 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/0 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:
```

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                                                      <A>
  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                                                              <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: 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: OPPROVIDER4,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
OPPROVIDER4,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/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)
```

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                                                        <A>
  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                                                        <A>
  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                                                        <A>
  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                                                      <A>
  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/0 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                                                        <A>
  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

                                                          ISSUE  LAST REF DAY
 #  RX #         DRUG                                QTY ST  DATE  FILL REM SUP

------------------------------------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                                                        <A>
  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                                                        <A>
  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                                                        <A>
  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                                                        <A>
  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                                                        <A>
  PID: 000-01-1322P                                 Ht(cm): _______ (______)
  DOB: JAN 13,1922 (83)                             Wt(kg): _______ (______)
```

```
               Rx #: 100003852e
 (1) *Orderable Item: PREDNISONE TAB
 (2)       CMOP 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: OPPROVIDER4,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
OPPATIENT,FOUR                    #30
TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY FOR 30 DAYS WITH FOOD
AVOIDING DAIRY FOODS

PREDNISONE 5MG TAB
OPPROVIDER4,TWO           OPPHARMACIST4,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

-------------------------------------ACTIVE-------------------------------------
 1 100003853e    PREDNISONE 5MG TAB                    30 A> 11-04 11-04   5  30




          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): _______
                                                                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 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
                      Qty: 60  TAB
IBUPROFEN 800MG TAB                                 IBUPROFEN 800MG TAB
                      IBUPROFEN 800MG TAB
                                                    10 Refills remain prior to
 JUN 1,2017           Mfg ________ Lot# ________
PO BOX 415                                          COPAY     Days Supply: 30
                      Tech__________RPh_________
ANYTOWN, OH  45428-0415



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
                      PSOPATIENT,SIX
                                                  Rx# 2718862

                                                  IBUPROFEN 800MG TAB
                      Verified Allergies
                                                  DRUG WARNING:
                      ------------------
                                                  DO NOT DRINK ALCOHOLIC BEV
ERAGES
                                                  when taking this medication.
                     Non-Verified Allergies
                                                  TAKE WITH FOOD OR MILK.
                      ----------------------
                                                  This is the same medication you
                                                  have been getting.  Color,  size
Verified Adverse Reactions
                                                  or shape may appear different.
--------------------------


                      Non-Verified Adverse Reactions

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

                                                  PSOPATIENT,SIX   JUL 27,20
16



Pharmacy Service (119)
ANYTOWN
P.O. BOX 415
ANYTOWN, OH  45428-0415




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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): _______
```

```
                                                                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//



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
AILY                  TAKE ONE TABLET BY MOUTH DAILY


GUIGLIA,MARY C                                        GUIGLIA,MARY C
                      GUIGLIA,MARY C
Qty: 10  TAB                                          Qty: 10  TAB
                      Qty: 10  TAB
CETIRIZINE HCL 10MG TAB                               CETIRIZINE HCL 10MG TAB
                      CETIRIZINE HCL 10MG TAB
                                                      7 Refills remain prior to
MAY 22,2017           Mfg ________ Lot# ________
PO BOX 415                                            Days Supply: 10
                      Tech__________RPh_________
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                                      *Indicate address change o
n back of this form Last Fill: 05/23/2016
                                                    [ ] Permanent
                    Pat. Stat ONSC Clinic: CINCI
                                                    [ ] Temporary until __/__/
__                  DRUG WARNING 1,8

                                                    Signature_________________
_________________
                                                    PSOPATIENT,SIX
                    PSOPATIENT,SIX
                                                    Rx# 2718861

                                                    CETIRIZINE HCL 10MG TAB
                    Verified Allergies
                                                    DRUG WARNING:
                    ------------------
                                                     -MAY CAUSE DROWSINESS-

                                                    Alcohol may intensify this
 effect.            Non-Verified Allergies
                                                    USE CARE when driving or
                    ----------------------
                                                    when operating dangerous machinery.
                                                    DO NOT DRINK ALCOHOLIC BEVERAGES.
                    Verified Adverse Reactions
                                                    when taking this medication.
                    --------------------------


                    Non-Verified Adverse Reactions

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

                                                    PSOPATIENT,SIX   JUL 27,2016



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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                                                        <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

                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                                                      <A>
  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: OPPROVIDER4,TWO
 (7)         Copies: 1
 (8)        Remarks: RENEWED FROM RX # 503910
   Entry By: OPPROVIDER4,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                                                      <A>
  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: OPPROVIDER4,TWO
 (7)         Copies: 1
 (8)        Remarks: RENEWED FROM RX # 503910
   Entry By: OPPROVIDER4,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
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 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: PSOUSER,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
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)      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// 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
           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)
            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*653 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. 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.
2. The new option will 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.
3. 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.

4. 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.
5. The Class III global array (^VEXHRX) shall be updated from PHARMACY TELEPHONE REFILLS (#52.444) that contains the results of the order processing.
6. 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." If this field does not contain a value, then a default will not exist at the prompt and the end-user will need to enter a value each time the prompt is issued. To enter a default value at the PROC TEL REFILLS ALL DIVISIONS field (#59,4.2), the end-user will need to use the Site Parameter Enter/Edit [PSO SITE PARAMETERS] option.
7. 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".

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
          2         RENEWS

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> O
Allow refills for CNH ? N// <Enter> O
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 Health*e*Vet. 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. The 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: PSOUSER,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)      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// 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)      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//
```

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                                                        <A>
  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 Partials 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
OUTPATIENT,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

                                                                ISSUE  LAST REF DAY
    RX #         DRUG                                    QTY ST  DATE  FILL REM SUP
-------------------------------------------------------------------------------
-----------------------------------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// ??

                              Require        Print     Print on
  Nature of Order Activity   E.Signature   Chart Copy   Summary
  ------------------------   -----------   ----------   --------
  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:                         (8)      Lot #:
            Expires: 05/27/17                          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:  (1-90): 90//
```

<u>Example: DAYS SUPPLY: (1-265): 90//</u> (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:                         (8)      Lot #:
            Expires: 05/26/17                            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//
```

<u>Example: DAYS SUPPLY: (1-250): 90//</u> (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:                         (8)      Lot #:
             Expires: 05/26/17                          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:  (1-250): 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                                              Page:   1
Sorted by PATIENT, DRUG                        Division: ANYTOWN
Date Range: 03/06/2007 - 06/14/2007            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
                                                           ISSUE    LAST     REF  DAY
  # Rx#           DRUG [^]                          QTY ST  DATE     FILL     REM  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
                                                           ISSUE    LAST     DAY
  # Rx#           DRUG [^]                          QTY ST DATE     FILL     SUP
  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)RESOLVED 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 Addl 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 / XXXXXXXXXXXXX_____________________________________________
+         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 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 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:

Code	Description
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:

Code	Description
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:

Code	Description
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 / 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
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#: 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 / 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 Addl 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-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 Addl 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 Addl 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 Addl Msg : DUR Reject Error
Reason         : UNNECESSARY DRUG
```

```
DUR Text       : RETAIL
```

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 Addl 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/UnmarkIN   Intervention Menu    GO   Go to Page
RP   Reprint (OP)         DA   Display Drug AllergiesLS  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)eject 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        06XXXXXXXXX        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        06XXXXXXXXX        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$        0/00000930XXXX     09/10/10         C  RT  AC/N
    09/10/10 OPHARM,TWO                               20.00          180        06XXXXXXXXX        METFORMIN HCL 500MG TAB
    Claim ID: VA2005-056XXXX-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:
                            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 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:
                            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//
```

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
  # Rx#          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
  # 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:
                           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
  # 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:




          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 Addl 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#      : 27XXXXX/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 Addl 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: 9999999999    NCPDP: 9999999
   Patient  : XXXX,XXXXX(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 Addl 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  : XXXXXXX                                                        .
```

```
          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  : XXXXXXX


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 Addl Msg  :
Reason Code     :
DUR Text        :

INSURANCE Information
Insurance       : EXPRESS SCRIPTS
Contact         :
BIN / PCN       : 741852 / XXXXXXXXX
Group Number    : DODA
Cardholder ID   : XXXXXXX


          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 Addl 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: 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: 1 - SUBSTITUTION NOT ALLOWED BY PRESCRIBER
         Finished By: OPHARM,ONE
+         Enter ?? for more actions
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 Addl 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    REL DATE  DT REJECTED  DT RESOLVED  RESOLVED BY      ACTION TAKEN            AMT PAID INSURANCE NAME
    DRUG                            REJECTION                     DIVISION          PATIENT NAME
=================================================================================================================
111822/0              09/29/11     08/18/15     DAWSON,MARK R    CLAIM RE-SUBMITTED          0.00  EPHARM INSURA
    FLUORESCEIN 10% 5ML INJ         79 - Refill Too Soon         ANYTOWN ISC        ECMEPATIENT,DAVE
111938/0              09/03/15     09/03/15     STILES,CINDY F   CLAIM RE-SUBMITTED          0.00  EXPRESS SCRIP
    DIGITOXIN 0.1MG S.T.            88 - DUR Reject Error        ANYTOWN ISC        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    REL DATE  DT REJECTED  DT RESOLVED  RESOLVED BY      ACTION TAKEN            AMT PAID INSURANCE NAME
    DRUG                            REJECTION                     DIVISION          PATIENT NAME
=================================================================================================================
111822/0              09/29/11     08/18/15     DAWSON,MARK R    CLAIM RE-SUBMITTED          0.00  EPHARM INSURA
    FLUORESCEIN 10% 5ML INJ         79 - Refill Too Soon         ANYTOWN ISC        ECMEPATIENT,DAVE
111938/0              09/03/15     09/03/15     STILES,CINDY F   CLAIM RE-SUBMITTED          0.00  EXPRESS SCRIP
    DIGITOXIN 0.1MG S.T.            88 - DUR Reject Error        ANYTOWN ISC        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 Addl 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.

                                                                 FILL      REJECT
  # RX/FILL      PATIENT(ID)         DRUG                      DATE      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

                             CHAMPVA - Non-DUR/RTS
  3 104520/1     OPPATIENT,ON(1111)  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)

                             TRICARE - Non-DUR/RTS
  5 104836/0     OPPATIENT,TH(3333)  CASTOR OIL 60ML         7/10/14   7/10/14
     Rx Status: ACTIVE
     Reason:  eT :

                                OTHER REJECTS
  6 104463/1     OPPATIENT,TH(3333)  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: OPPROVIDER, 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> 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 # 400693            06/27/03
OPPATIENT16,ONE                     #1
```

```
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
OPPATIENT,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
   Indication                                      Enrollment last updated
--------------            -----------             ----------------------

OPPATIENT11,ONE           000-46-8024
   BLIND VETERAN                                    Jun 16, 2003@11:57:39

OPPATIENT9,ONE            000-76-5432
   LOW VISION                                       Jun 15, 2003@18:17:30

OPPATIENT6,ONE            000-13-5790
   LOW VISION                                       Jun 18, 2003@03:52:18

OPPATIENT29,ONE           000-87-6543
   LOW VISION                                       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
OPPATIENT29,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: SCripTalk 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 LABLES (#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 inter face; 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.)

Site Parameter	Description
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.
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.

	*****Important***** 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

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 identities 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)
                                 $S(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: $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// 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 Pharmacis
                        AIR10 - First Name of Pharmacis
                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: $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
                    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)...
@@@
```

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*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  STANOZOLOL 2MG                                3 NEW
   5 10000####         1  STANOZOLOL 2MG                                3 NEW
   6 10000####         2  STANOZOLOL 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: CRTL 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
                                        CITY: Cheyenne
STATE: WYOMING                          ZIP CODE: 82009
PHONE (HOME): 8005551212
```

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 3/4 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 3/4 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 3/4 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 PNDLBL] 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 PNDRPT]

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.)

                   # of                  # of
     Date     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
```

```
                                                              ISSUE  LAST REF DAY
    RX #         DRUG                                    QTY ST  DATE  FILL REM 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

                                                              ISSUE  LAST REF DAY
    RX #         DRUG                                    QTY ST  DATE  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

                                              Prescriptions
       Finishing Person                         Finished
-------------------------------------------------------------------------------
       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	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 (GCNSENO mismatch) is rare.
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.

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.

Error Level	Error Message	Reason	Why message is being displayed.
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

Safety Updates for Medication/Prescription Management (SUMPM) 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: 99999999999)
(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
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(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)
```

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                    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)
```

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                        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
```

```
                    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
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                    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
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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 x Height $(m)^{0.725}$ x 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	A prescription can have one of the following statuses: Active – A prescription with this status can be filled or refilled. Canceled – This term is now referred to throughout the software as Discontinued. (See Discontinued) Discontinued – This status is used when a prescription was made inactive either by a new prescription or by the request of a physician. 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. 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. Expired – This status indicates the expiration date has passed. *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. Hold – A prescription that was placed on hold due to reasons determined by the pharmacist. 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 *Verification* menu. 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.

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 (3rd) 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).

Acronym/Term	Definition
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.