Outpatient Pharmacy (PSO)

Version 7.0

Pharmacist's User Manual

December 2007
(Revised June 2022)

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.

See the unredacted version in SOFTWARE to view REDACTED information that isn't personally identifying.

Date	Patch	Description
06/2022	PSO*7*685	• Updated the link to the FDA Med Guides • Removed the third paragraph in the **Displaying an FDA Medication Guide** section since the guides will not be displayed but can be navigated to by using the URL in the screen prompt • Updated paragraph 1 with, "the ability to display individual" and removed the word "new" from paragraph 2 in the **Displaying an FDA Medication Guide** section • Replaced the existing 3 examples with 3 new examples **When a VA Product has a Medication Guide Associated** and **When a VA Product does not have a Medication Guide Associated** and **When a Drug is not matched to National Drug File** • Updated the Title page, Revision History, Table of Contents, List of Figures, List of Tables, and Footers Booz Allen Hamilton
05/2022	PSO*7*647	• Updated the Professional Service Code Table with a new value. • Updated Title Page date and footers MCCF EDI TAS ePharmacy Development Team
01/2022	PSO*7*562	Added Reject Code 943 to DUR Rejects (pp. 7, 45, 130, 251)
12/2021	PSO*7*653	• Updated Chapter 23: added Process Telephone Refills to Barcode Rx Menu
12/2021	PSO*7*622	Added information about displaying pregnancy and lactation status in chapters 2 and 10: • Added the Pregnancy/Lactation Indicator to the Outpatient List Manager screenshot and table, and to the Indicators and Definitions screenshot. • Added the Preg/Lact Display to the table, updated the screenshot. • Updated the Medication Profile-Short Format table, screenshot and notes. • Added information about the Women's Health label.

Date	Patch	Description
09/2021	PSO*7*561	• Added new section for 3 to the ePharmacy Menu. • Updated section ¾ Days Supply Hold 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
07/2021	PSO*7*630	Updated PIV Card Certificate revoked and expired messages: 164-165, 282, 382-383, 386 Added Chapter 26: Meds by Mail – Virtual Pharmacy Services
07/2021	PSO*7*524	Added Hazardous Medication Warnings – Order Checks: 294-299
12/2020	PSO*7* 549	Update Third Party Payer Rejects – View/Process: 304 Updated Result of Service Code Table: 314 Updated Reason for Service Code Table: 315 Updated Title Page date, footers, Table of Contents page numbers MCCF EDI TAS ePharmacy Development Team REDACTED
06/2020	PSO*7*477	Update title page, Footers Added several notes about the EXCEPT conjunction: 173, 248, 268, 284 Remove reference to EXCEPT conjunction: 238 REDACTED
05/2020	PSO*7*608	Updated Print From Suspense option for consistency with other manuals: 54 REDACTED
04/2020	PSO*7*544	Added two new messages for the Resubmit Claim action: 317 Updated Reporting criteria for Productivity/Revenue Report: 348 Updated Title Page, Revision History, and Footers REDACTED
07/2019	PSO*7*528	Updated Revision History Updated TRICARE CHAMPVA Override report: 291, 292, 307,309, 316, 318, 319, 321, 324, 333, 388 REDACTED
07/2019	PSO*7*457	Updated title page Updated footers throughout Updated Revision History Updated note in section "Entering a New Order" referencing Chapter 9 in Manager's User Manual for new clozapine orders REDACTED

Date	Patch	Description
02/2019	PSO*7*532	Update System Message under Use Case: Dispense Order from another VA Pharmacy Location. Updated the OneVA Pharmacy System Not Responding Message Replaced “Steps to Turn On ONEVA PHARMACY FLAG (#101)” with “Pharmacy System Parameters Edit” Updated references of ONEVA PHARMACY FLAG (#3001) to (#101) throughout. Updated references of Outpatient Site file (#59) to PHARMACY SYSTEM File (#59.7) throughout. REDACTED
12/2018	PSO*7*522	Added ‘Sending Drug File (#50) Data” subsection to “Using the Software” section. (REDACTED) Pg 438
01/2019	PSO*7*512	Ignored Rejects Report: 292 Information text to Edit Transfer Reject Code: 300 Look up by ECME# in View/Process: ### Edit Claim Submitted (ECS): 306, 310, 314, 315-316 Dual Eligible Submit from WL: 307 REDACTED
11/2018	PSO*7*525	Updated available options at Medication Route Prompt. Added Medication Route Prompt section under Chapter 23. 170, 235, 265 REDACTED
11/2018	PSO*7*452	Updated information about the Medication Profile [PSO P] and a related example, View Prescriptions [PSO VIEW], Patient Prescription Processing [PSO LM BACKDOOR], and Complete Orders from OERR [PSO LMOE FINISH] options to include enhanced patient demographic information and new Clinical Alerts displayed in the List Manager header area. Added information about the capability to filter by category when printing from the Suspense file using the Print from Suspense File [PSO PNDLBL] option. REDACTED
10/2018	PSO*7*507	Updated Hidden Menu Actions: 9-10 Updated Lookup List display of Administration Schedule: 211 REDACTED
08/2018	PSO*7*482	Update title page, Footers, View Prescription screen, Activity Log: 332 Ignored rejects from Reject Notification Screen and Reject Information Screen: 294, 295, 299, 320-321, 322 Add Ignored Rejects Threshold to ePharmacy Site Parameters:287, 289 Add Patient Billing Notes: 219, 220, 224, 225, 295, 297, 299, 321, 324, 325, 326, 327, 328, 330, 333 Add PSO ePharmacy Patient Comments: 280, 305, 335-336 REDACTED

Date	Patch	Description
08/2018	PSO*7*505	Titration and Maintenance blocked for CS prescriptions Complete Orders from OERR, added sort selections Complete Orders from OERR, added secondary filter Edit CS prescription enhancements REDACTED
04/2018	PSO*7*519	Updates to OneVA Pharmacy Prompt Updates to Continuity of Operations REDACTED
04/2018	PSO*7*502	Updates for ScripTalk enhancement Included ScripTalk Mapping Error Message 508 & OIT Compliance update throughout REDACTED
02/2018	PSO*7*402	Updated title page to reflect month/year of revision Updated Patient Demographic Header Displays: 4-5, 7, 32, 38, 40-43, 57, 60,81,84, 85-86, 88, 90, 92-94, 97, 100, 101,102, 108, 110, 115, 124, 132-133, 162, 171, 174, 177, 179, 185, 190, 193, 195, 196-198, 206, 211, 218, 221-222, 226, 227, 228-230, 232, 234, 236, 238, 240-243, 247, 251-252, 254, 260-263, 315, 330 Updated Available Dosage List displays: 70, 72, 74-77, 79, 103, 106, 115-116, 122, 132, 133-135, 159, 169, 174, 177-178, 188-190, 193, 196, 202, 206-207, 222 Updated Schedule Displays: 115, 124, 133, 135, 159, 174, 179, 190, 196, 203 Updated text for Schedule changes: 206-207, 222 Updated text for Available Dosage List Changes Updated Chapter 18 – Dosing Checks Updated Error Information table: 159, 344 REDACTED
01/2018	PSO*7*497	Update with OneVA Pharmacy Medication Permissions and Dispensing Upgrades REDACTED
11/2017	PSO*7*478	Update title page, Reject Information screen and add Print action to VER REDACTED
09/2017	PSO*7*422	Removed “Do You want to Edit the SIG?” REDACTED
05/2017	PSO*7*479	Modifies the prompt to the user when printing a OneVA Pharmacy label. REDACTED
12/2016	PSO*7*460	Updated title page to reflect December as new month to release. REDACTED

Date	Patch	Description
11/2016	PSO*7*460	Updated copay activity log for Fixed Medication Copayment Tiers (FMCT) Updated Title Page to current OI&T 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 OI&T Standards Updated 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] Updated [BPS RPT VIEW ECME RX] Updated [PSO EPHARMACY MENU] Updated [PSO IGNORED REJECTS REPORT] Updated [POS REJECTS VIEW/PROCESS]
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
01/2016	PSO*7*427	Updated cover page. pg 223-224: added DC 9Discontinued RX0 hidden action; added available actions to Resolving open Rejects screen Pg 226: added screenshot of Resolve Open Rejects Responded/updated NDC numbers to match sample prescriptions as well as other customer comments throughout. Updated View Prescription, Edit Prescription, Screens, 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

Date	Patch	Description
04/2016	PSO*7*411	Updated Revision History Updated Table of Contents Added Allergy Order Checks section Updated Allergy Display Screens Added Clinical Reminder Order Checks section Updated Screen Captures Updated Glossary and Index REDACTED
03/2015	PSO*7*438	Updated help text for patient lookup. REDACTED
03/2014	PSO*7*421 PSO*7*433	Renumbered pages throughout entire document. Changed November 2010 footer dates to December 1997 per client instructions. Renumbered pages throughout entire document. Modified Revision History. Print from Suspense File Entering a New Order – ePharmacy (Third Party Billable) ePharmacy Menu NDC Validation Third Party Payer Rejects – View/Process Third Party Payer Rejects – Worklist (Discontinued TRICARE and CHAMPVA prescriptions no longer appear on the Third Party Payer Rejects - Worklist [PSO REJECTS WORKLIST]). Reject Resolution Required Rejects Added material throughout relating to new Reject Security Keys PSO EPHARMACY SITE MANAGER Access to the EPHARMACY SITE PARAMETERS [PSO ePHARM SITE PARAMETERS] option requires the new PSO EPHARMACY SITE MANAGER security key. Revised table showing Site Parameter actions and screen-shot showing related dialog. Added option names throughout. Added revised ePharmacy Site Parameters Screen and related subscreen sections; removed discontinued functionality. Added additional index references. Added Lookup National Clean-Up Utility Data REDACTED

Date	Patch	Description
09/2013	PSO*7*372 PSO*7*416	Added two new documents to Related Documentation section Added Order Check information to Chapter 14 Changed Chapter 14 heading to Processing Order Checks Updated screen captures with new checking messages Added Chapter 14.5: Dosing Order Checks Added references to the *Dosing Order Check User Manual* Updated Index (REDACTED)
05/2013	PSO*7*391	Updated Revision History Updated Table of Contents New security key named "PSDRPH" introduced. Updated Changes to OERR. Added Changes to Processing a Prescription section. Added Hash Counts and DEA Certification section. Added two System Error messages. Updates to Index REDACTED
01/2013	PSO*7*390	Added Check Drug Interaction Added Creatinine Clearance (CrCl) and Body Surface Area (BSA) to the Patient and Medication Profile displays. Added drug allergy changes Added Clinic Order section Updated Glossary Updated Index REDACTED
09/2012	PSO*7*386	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*367	To add functionality to Outpatient Pharmacy for the printing and storing of FDA Medication Guides. Updates to Index REDACTED
03/2012	PSO*7*354	Update to TOC Automated Dispensing Device (ADD) enhancement ADD, DNS, OPAI added to Glossary. REDACTED

Date	Patch	Description
02/2012	PSO*7*385	Removed incorrect listing of View Additional Reject Info (ARI) action Added signature alerts Updated wording for ¾ Days Supply Hold Added rounding functionality for ¾ Days Supply Hold Added new actions Submit Multiple Actions (SMA) and Suspense Date Calculation (SMA) Added new option View ePharmacy Rx (VER) Corrected earlier formatting errors Corrected typos Updated Service Code values Updated changed security key names Added TRICARE and CHAMPVA examples of rejects on a new order 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 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*343	To add functionality to Outpatient Pharmacy for the On-Demand Displaying of FDA Medication Guides. Display FDA Medication Guide [MG] added to Other OP Actions [OTH] Updates to Index REDACTED

Date	Patch	Description
04/2011	PSO*7*251	The following changes are included in this patch: - Outpatient List Manager Screen Views - Added HP and H to Hold Status - Removed DC code; Added DF,DE,DP,DD and DA - Added to Hidden Action List: IN - Removed DC code; Added DF,DE,DP,DD and DA, and - Added HP and H to Hold Status - Replaced Medication Short Profile - Inserted enhanced Order checks, Outpatient Pharmacy generated order checks - Added IN to Screen Scrape - Modified New Order Screen Scrape - Inserted Drug Allergy Screens -Updated Glossary and Index to start on odd pages 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

Outpatient Pharmacy (PSO) i

Version 7.0 i

Pharmacist's User Manual i

Chapter 1: Introduction 1

Documentation Conventions 2
Getting Help 3
Related Manuals 3

Chapter 2: List Manager 4

Using List Manager with Outpatient Pharmacy 7
Entering Actions 8
Outpatient Pharmacy Hidden Actions 8
Speed Actions 10
Other Outpatient Pharmacy ListMan Actions 11
Other Screen Actions 11
Patient Demographics 12

Chapter 3: Using the Pharmacist Menu 14

Patient Lookup 14

Chapter 4: Using the Bingo Board 16

Bingo Board User 16
Enter New Patient 16
Display Patient's Name on Monitor 16
Remove Patient's Name from Monitor 17
Status of Patient's Order 17
ScripTalk Mapping Error Messages 18

Chapter 5: Changing the Label Printer 19

Change Label Printer 19

Chapter 6: Changing the Suspense Date 20

Change Suspense Date 20

Chapter 7: Check Drug Interaction 21

Check Drug Interaction 21

Chapter 8: Evaluating Drug Usage 23

DUE Supervisor 23
Enter a New Answer Sheet 23
Edit an Existing Answer Sheet 23
Create/Edit a Questionnaire 24
Batch Print Questionnaires 24
DUE Report 24

Chapter 9: Enter/Edit Clinic Sort Groups 25
Enter/Edit Clinic Sort Groups 25
Chapter 10: Using the Interface Menu 26
External Interface Menu 26
Purge External Batches 26
Reprint External Batches 26
View External Batches 27
Chapter 11: Using the Medication Profile 29
Medication Profile 29
Medication Profile: Short Format 29
OneVA Pharmacy and Medication Profile 31
OneVA Pharmacy Exception Messages 33
Medication Profile: Long Format 35
Chapter 12: Using the Medication Reconciliation Tools 42
Medication Reconciliation 42
Chapter 13: Using the Pharmacy Intervention Menu 43
Pharmacy Intervention Menu 43
Enter Pharmacy Intervention 43
Edit Pharmacy Intervention 43
Print Pharmacy Intervention 43
Delete Intervention 44
View Intervention 44
Chapter 14: Print from Suspense File 45
Print from Suspense File 45
Chapter 15: Allergy Order Checks 58
CPRS Allergy/Adverse Reaction Entry Process 60
VistA Outpatient Allergy/Adverse Reaction Entry Process 61
Chapter 16: Clinical Reminder Order Checks 66
Chapter 17: Processing Order Checks 67
Processing Order Checks 67
Allergy/ADR Order Checks (PSO*7*251) 109
Therapeutic Duplication 113
Chapter 18: Dosing Order Checks 131
Chapter 19: Pull Early from Suspense 132
Pull Early from Suspense 132
Chapter 20: Queue CMOP Prescription 134
QUEUE CMOP Prescription 134

Chapter 21: Releasing Medication 135

Release Medication 135
Fixed Medication Copayment Tiers (FMCT) 137
Changes to Releasing Orders function - Digitally Signed Orders Only 138
Changes to Releasing Orders function - ScripTalk® 140
Changes to Releasing Orders Function – Signature Alert 141
Changes to Releasing Orders function – HIPAA NCPDP Global 141

Chapter 22: Returning Medication to Stock 144

Return Medication to Stock 144

Chapter 23: Ordering/Processing a Prescription 145

Rx (Prescriptions) 145
Patient Prescription Processing 146
OneVA Pharmacy Processing within Patient Prescription Processing 151
Duplicate Drug Order Check 158
Titration 170
Entering a New Order 171
Entering a New Order - ePharmacy (Third Party Billable) 178
CPRS Order Checks 191
Clinic Orders 200
Editing a New Order 205
Using the Copy Action 211
Holding and Unholding a Prescription 217
Flagging and Unflagging Pending Orders 224
Medication Route Prompt 227
Barcode Rx Menu 228
Process Telephone Refills 228
Barcode Batch Prescription Entry 230
Check Quality of Barcode 231
Process Internet Refills 231
Complete Orders from OERR 233
Flagging and Unflagging Pending Orders 237
Changes to Finishing Pending Orders Process - Digitally Signed Orders Only 240
Finishing an Order from OERR with Multiple Institutions 240
Finishing an ePharmacy Order 241
Activity Log 241
Discontinue Prescription(s) 244
Edit Prescriptions 246
Hazardous Medication Warnings – Order Checks 251
ePharmacy Menu 255
Ignored Rejects Report 257
ePharmacy Medication Profile (View Only) 258
NDC Validation 260
ePharmacy Medication Profile Division Preferences 261
ePharmacy Site Parameters 262
Third Party Payer Rejects - View/Process 267
Third Party Payer Rejects - Worklist 272
TRICARE/CHAMPVA Eligible Outpatient Override Function 294
Other Rejects 301

Reject Resolution Required Rejects *305*
View ePharmacy Rx *306*
Bypass 3/4 Day Supply *306*
Productivity/Revenue Report 307
ePharmacy Patient Comment 309
MailMan Message for Open/Unresolved Rejects *310*
Alerts for Discontinued CMOP Prescription *311*
Discontinued by a Background Process 311
Discontinued by a Foreground Pharmacy Process 312
List One Patient's Archived Rx's *312*
Manual Print of Multi-Rx Forms *312*
OneVA Pharmacy Prescription Report *313*
Reprint an Outpatient Rx Label *317*
Signature Log Reprint *318*
View Prescription *319*
Restrictions to Providers on Controlled Substances Orders *319*

Chapter 24: Updating a Patient's Record 320

Update Patient Record 320

Chapter 25: Verifying Prescriptions 322

Verification 322
List Non-Verified Scripts *322*
Non-Verified Counts *323*
Rx Verification by Clerk *324*
Verifying ePharmacy Orders *324*

Chapter 26: Meds by Mail – Virtual Pharmacy Services 325

Chapter 27: CPRS Order Checks: How They Work 327

Introduction 327
Order Check Data Caching 327
Hash Counts and DEA Certification *328*

Chapter 28: Error Messages 331

Chapter 29: FDA Medication Guides 333

Displaying an FDA Medication Guide *333*
Printing an FDA Medication Guide *334*
Site Parameters 335
FDA Medication Guide Printer Selection 335
The Default FDA Medication Guide Printer 336
Reprinting an FDA Medication Guide 336
Changing the FDA Medication Guide Printer 338
Prompt During Label Print 339
Label Log and CMOP Event Log Display 339
Audit Trail for FDA Medication Guide Printing 339
Automatically Printing FDA Medication Guides is Optional 339

Chapter 30: Security Keys 341
Security Keys 341
PSO TRICARE/CHAMPVA 341
PSO TRICARE/CHAMPVA MGR 341
PSO TECH ADV 341
PSO EPHARMACY SITE MANAGER 341
Appendix A: OneVA Pharmacy User Manual PSO*7*479 342
Introduction 342
Purpose 342
Document Orientation 342
National Service Desk and Organization Contacts 345
System Summary 346
System Configuration 348
Host Site OneVA Pharmacy Flag Not Set On Message 348
Pharmacy System Parameters Edit 348
Data Flows 352
Use Case: View Orders 352
Use Case: Dispense Order from another VA Pharmacy Location 354
Use Case: OneVA Pharmacy Prescription Report 357
User Access Levels 358
Continuity of Operation 358
New OneVA Pharmacy Checking for Prescriptions Message 358
New OneVA Pharmacy System Down or Not Responding Message 359
OneVA Pharmacy Patient Found No Rxs Informational Message 359
Getting Started 359
Logging On 359
System Menu 360
Changing User ID and Password 360
Exit System 360
Caveats and Exceptions 360
Label Reprinting 360
Target VistA Time Out Awaiting Reply Message 360
Host Site OneVA Pharmacy Flag Not Set On 360
Using the Software 361
Patient Prescription Processing [PSO LM BACKDOOR ORDERS] 361
Selecting a Patient 361
View Order Rxs from Other VA Pharmacy Locations 361
Patient Information View 363
Medication Profile View 363
Dispense (Local) Order Originating from Dispensing (Local) Site 366
Dispense Rx Order from another VA Pharmacy Location 367
OneVA Pharmacy Prescription Report [PSO REMOTE RX REPORT] 377
OneVA Pharmacy Report Menu 377
Accessing OneVA Pharmacy Reports 378
Selecting a Report and Report Search Options 379
OneVA Pharmacy Report Content 383
Sending Drug File (#50) Data 385
Troubleshooting 385
Special Instructions for Error Correction 386

Appendix B: Frequently Asked Questions (FAQ) 387

Appendix C: Acronyms and Glossary 390

Acronyms and Abbreviations 390
Glossary 391

List of Figures

Figure 1: Screen Overview 4
Figure 2: Indicators and Definitions 5
Figure 3: Short Format 29
Figure 4: Medication Profile Short format 31
Figure 5: Allergies Dialog 60
Figure 6: Example of Observed Allergy 61
Figure 7: OneVA Pharmacy Flag: VA FileMan 349
Figure 8: OneVA Pharmacy Flag: Enter FM Prompt 349
Figure 9: OneVA Pharmacy Flag: VA FileMan Menu Prompt 349
Figure 10: OneVA Pharmacy Flag: Enter <EN> to Enter or Edit File Entries Prompt 349
Figure 11: OneVA Pharmacy Flag: Input to What File Prompt 350
Figure 12: OneVA Pharmacy Flag: Edit Which Filed Prompt 350
Figure 13: OneVA Pharmacy Flag: Then Edit Field Prompt 350
Figure 14: OneVA Pharmacy Flag: Select OUTPATIENT SITE NAME Prompt 350
Figure 15: OneVA Pharmacy Flag: ^LOOP Command 350
Figure 16: OneVA Pharmacy Flag: Edit Entries by: NAME// Prompt 351
Figure 17: OneVA Pharmacy Flag: Start with Name Prompt 351
Figure 18: OneVA Pharmacy Flag: Loop Command Example 352
Figure 19: Informational Message Patient Exists but Has No Remote Prescriptions 359
Figure 20: Select PATIENT NAME Prompt 361
Figure 21: Patient Found Press RETURN to Continue Prompt 361
Figure 22: Allergy Assessment Message 361
Figure 23: Query Prescription from other OneVA Pharmacy Locations Prompt 362
Figure 24: Executing OneVA Pharmacy Query Message 362
Figure 25: System is Down or Not Responding Exception Message 362
Figure 26: Patient Status Message: Update or Press RETURN to Continue Prompt 363
Figure 27: Medication Profile (Page 1 of 3) Example (Remote Rxs) 364
Figure 28: Medication Profile (Page 2 of 3) Example (Remote Rxs) 364
Figure 29: Medication Profile (Page 3 of 3) Example (Remote Rxs) 365
Figure 30: Medication Profile (Page 1 of 2) Example (Non-VA MEDS) 366
Figure 31: Medication Profile (Page 2 of 2) Example (Non-VA MEDS) 366
Figure 32: Action Options for Local/Dispensing Orders 367
Figure 33: Medication Profile view with no 'local' Prescriptions (Remote Rxs Only) 367
Figure 34: Select Action 'SO' and Select Order by number Prompts Example 368
Figure 35: Remote OP Medications view for a prescription 368
Figure 36: Remote OP Medication RF Refill Action Item Example 369
Figure 37: Remote OP Medication RF Refill Action Item Results Example 369
Figure 38: Remote Drug Match Response Example 369
Figure 39: Remote Refill Processing Message 369
Figure 40: Successful Refill Status Message 370
Figure 41: System Message: Updating Prescription Order List 370
Figure 42: Refill Successful: Medication Profile View Updated 371
Figure 43: Remote OP Medication PR Partial Action Item Example 371
Figure 44: Remote Drug Match Response Example 371
Figure 45: Partial Fill Example: Quantity 372
Figure 46: Partial Fill Example: Days Supply 372
Figure 47: Partial Fill Example: Pharmacist 372
Figure 48: Partial Fill Example: Remarks 373
Figure 49: Partial Fill Example: Remarks Example 373

Figure 50: Remote Refill Processing Message 373
Figure 51: Successful Partial Fill Status Message 374
Figure 52: System Message: Updating Prescription Order List 374
Figure 53: Drug Matching: One-to-One Match 374
Figure 54: Drug Matching: One-to-Many - Select matching local drug Prompt 375
Figure 55: Drug Matching: One-to-Many 375
Figure 56: Drug Matching: One-to-Many – Select from List of Possible Matches 375
Figure 57: Drug Matching: One-to-Many – Select Drug 2042 Example 375
Figure 58: Drug Matching: No Drug Match 376
Figure 59: OneVA Pharmacy Prescription Report [PSO REMOTE RX REPORT] Menu 377
Figure 60: OneVA Pharmacy Menu and Reports 378
Figure 61: Example: Select 1 for Prescriptions dispensed for other Host Pharmacies 379
Figure 62: Report Search Options 379
Figure 63: Report Date Range Search Example: End Date 380
Figure 64: Report Date Range Search Example: End Date Image 2 380
Figure 65: Report Date Range Search Example Results: Summary Report 380
Figure 66: Report Patient Search Example: Patient Name 381
Figure 67: Report Patient Search Example: Patient Name Display 381
Figure 68: Report Patient Search Example: Results Summary Report 381
Figure 69: Report Site Search Example 382
Figure 70: Report Site Search Example: Select Site from Multiple List 382
Figure 71: Report Site Search Example: Results Summary Report 383
Figure 72: OneVA Pharmacy Report Example: Summary Page 383
Figure 73: OneVA Pharmacy Report Example: Select Item 384

List of Tables

Table 1: Conventions 2
Table 2: Outpatient List Manager 4
Table 3: Indicators 6
Table 4: Actions 8
Table 5: Hidden Actions 9
Table 6: Speed Actions 11
Table 7: Other Outpatient ListMan Actions 11
Table 8: Other Screen Actions 11
Table 9:Status of Patient's Order 17
Table 10: Error Messages 18
Table 11: Errors 148
Table 12: NCPDP Codes 209
Table 13: MAXIMUM DAYS SUPPLY VA Product File (#50.68) vs Local Drug File (#50) 249
Table 14: Site Parameter Actions 263
Table 15: Error Level Messages 331
Table 16: Documentation Symbols and Descriptions 344
Table 17: OneVA Pharmacy Support Entities 346
Table 18: Terms 390
Table 19: Glossary 391

Chapter 1: Introduction

The Outpatient Pharmacy (OP) software provides a way to manage the medication regimen of veterans seen in the outpatient clinics and to monitor and manage the workload and costs in the Outpatient Pharmacy. The Pharmacy Ordering Enhancements (POE) project (patch PSO*7*46 for Outpatient Pharmacy) improves the flow of orders between Inpatient and Outpatient Pharmacy as well as between Computerized Patient Record System (CPRS) and backdoor pharmacy.

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 request a reprint of the label when no error messages is returned when retrieving the label information from the host system.

The OneVA Pharmacy patch PSO*7*497 provides Pharmacists new functionality to fix the auto-suspend defect, remedy current OneVA Pharmacy functionality to limit refill permissions to only those personnel who have the correct key(s), block prescriptions that contain a trade name in the "TRADE NAME", identify titration prescriptions at the host site and to disallow refills of such titration prescriptions at the dispensing site.

The OneVA Pharmacy patch, PSO*7*479 requires the patch PSS*1*212 which delivers the 'ONEVA PHARMACY FLAG (#101)' in the 'off' state. When this flag is in the 'off' state, the HDR/CDS Repository is not queried for external prescriptions and other VistA instances will not be able to refill prescriptions that belong to the VistA instance with the flag set to the 'off' state. When in the 'on' state, all prescription queries and actions may be taken for remote queries, refills, and partial fills. In order to process prescriptions from another VistA instance, that instance will also need to have its 'ONEVA PHARMACY FLAG (#101)' set to the 'on' state.

The OneVA pharmacy flag can be turned on/off using the Pharmacy System Parameters Edit [PSS SYS EDIT] option:

```
Select OPTION NAME: PSS SYS EDIT       Pharmacy System Parameters Edit
Pharmacy System Parameters Edit

PMIS PRINTER: PP8//
PMIS LANGUAGE: English//
WARNING LABEL SOURCE: NEW//
```

```
CMOP WARNING LABEL SOURCE: NEW//
OPAI WARNING LABEL SOURCE: NEW//
AUTOMATE CPRS REFILL:
ONEVA PHARMACY FLAG: ON// <- The flag can be turned on/off here.
```

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

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.
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).

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

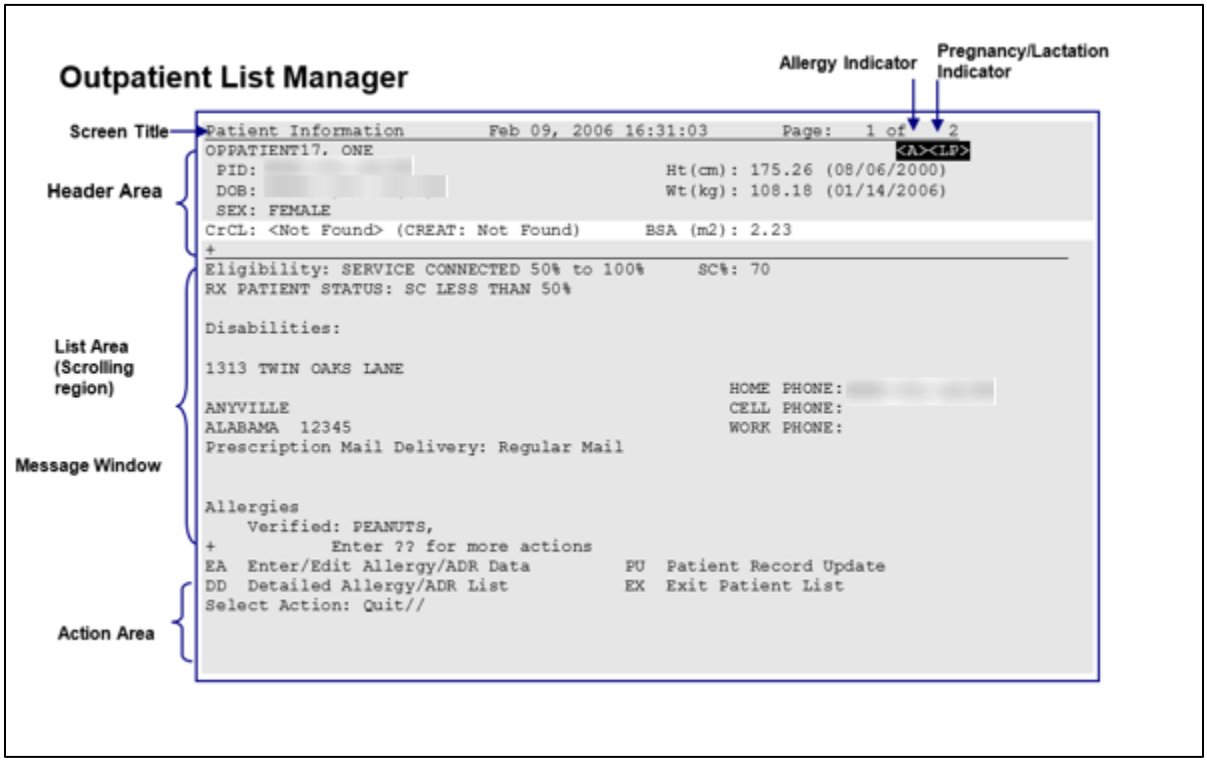
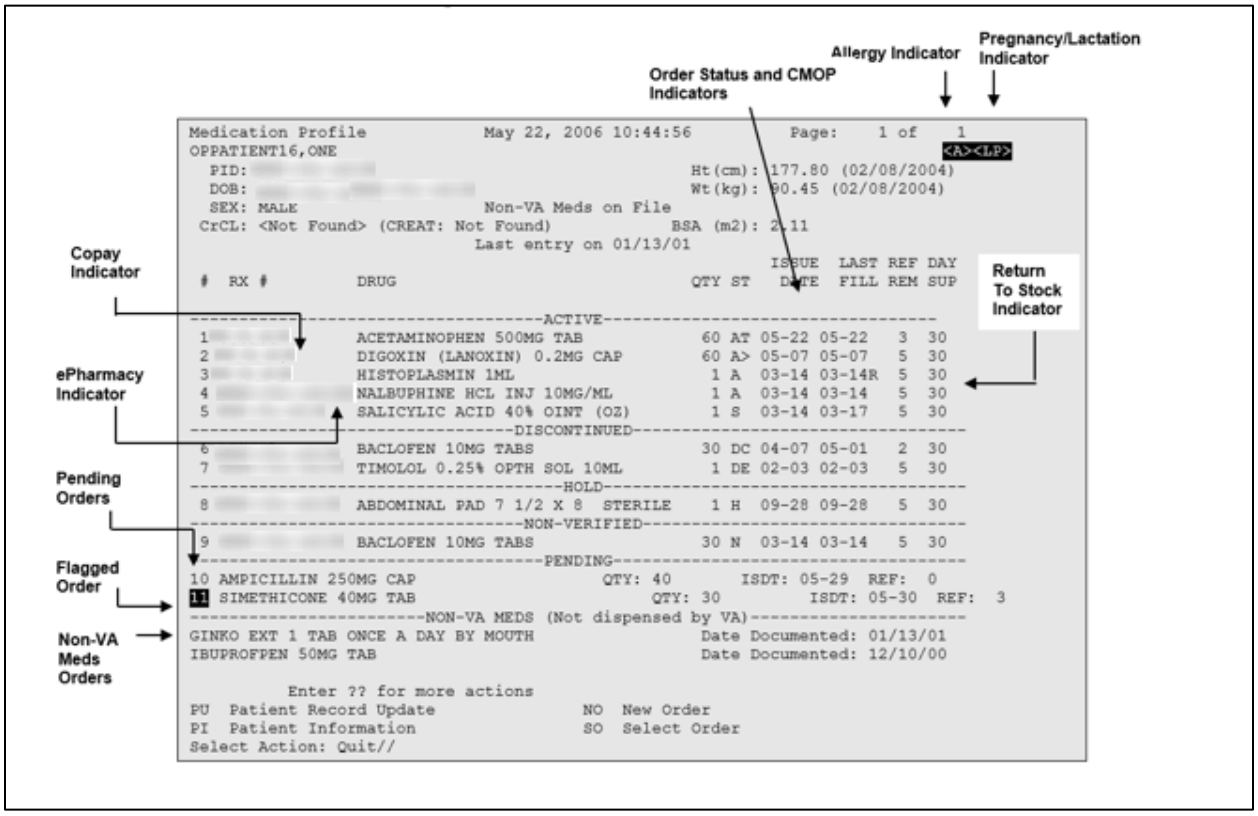


Table 2: Outpatient List Manager

Position	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.

Position	Description
Header area	The header area is a "fixed" (non-scrollable) area that displays patient information, including patient 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 sub-grouped by like statuses and then listed alphabetically within the sub-group.

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
- DA Auto discontinued due to admission
- DP Discontinued by provider through CPRS

The Status column may also reflect the type of Discontinue action performed on the order:

- DF Discontinued due to edit by a provider through CPRS
- DE Discontinued due to edit via backdoor Pharmacy
- DC Discontinued via backdoor Pharmacy
- DD Discontinued due to death

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

Indicator	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 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.

Indicator	Description
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 or code 943) 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: REDACTED                                      Ht(cm): 177.80 (02/08/2005)
  DOB: REDACTED                                      Wt(kg): 90.45  (02/08/2005)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)                                BSA (m2): 2.11
                                                      ISSUE   LAST  REF  DAY
#  RX #          DRUG                                 QTY ST  DATE  FILL REM  SUP

----------------REFILL TOO SOON/DUR REJECTS (Third Party)----------------------
1 ##########     DIGOXIN (LANOXIN) 0.05MG CAP          90 A>  02-16 02-16  3  90
2 ##########     OXYBUTYNIN CHLORIDE 15MG SA TAB      180 S>  02-15 05-06  0  90
---------------------------------ACTIVE-----------------------------------------
3 ##########     ABSORBABLE GELATIN FILM                1 A   11-04 11-04  5  31
4 ##########     ACETAMINOPHEN 650MG SUPPOS.           10 A>  11-04 11-04  1  10
5 ##########     ALBUMIN 25% 50ML                       2 A   08-01 08-01  5   5
-------------------------------------DISCONTINUED-------------------------------
6 ##########     ANALGESIC BALM 1 POUND                 1 A   01-08 01-08  3  90
7 ##########     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//
```

Using List Manager with Outpatient Pharmacy

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

For Outpatient Pharmacy, the List Manager does the following:

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

Entering Actions

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

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

Table 4: Actions

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

Outpatient Pharmacy Hidden Actions

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

The following hidden actions appear on the Medication Profile screen 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.
Drug Message [DM]	Displays dispense drug information during data entry. This hidden action will display key information about the order to help aid in the verification process of an order. This action can only be used on a pending order
IN	Intervention Menu
Hold [HD]	Places an order on a hold status.
Other OP Actions [OTH]	Allows the user to choose from the following sub-actions: Progress Note [PN] Action Profile [AP] Print Medication Instructions [MI] Display Orders' Statuses [DO] Non-VA Meds Report [NV] Display FDA Medication Guide [MG] Reprint FDA Medication Guide [RM]]
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.
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.
View Provider [VP]	Displays Provider information during data entry. This action will display key information about the PROVIDER to help aid the verification process. This action can only be used on a pending order.

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 XXXXXXXXX   AMOXAPINE 50MG TAB           30 S  09-26 09-26   1  30
 2 XXXXXXXXX   AMOXICILLIN 250MG CAP        30 A  08-18 08-18  11  30
 3 XXXXXXXXX   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: Other Outpatient ListMan Actions

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

Other Screen Actions

Table 8: Other Screen 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.

Action	Description
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, please see Appendix A, OneVA Pharmacy User Manual.
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, please see Appendix A, OneVA Pharmacy User Manual.
Preg/Lact Display [PL]	Displays a detailed listing of the patient's current pregnant and current breastfeeding/lactating episodes.

Patient Demographics

Patient demographic information and Clinical Alerts display in the List Manager header area when using certain Pharmacy options. The heading "Extended Patient Demographics" immediately precedes the demographic details to orient users and preserve a logical flow.

The extended demographics are derived from existing patient information and include such details 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 assigned or recent facility where care is received.

Note: The Assigned or Most Recent Facility is derived from information in the patient's profile. If the patient has a Primary Care (PC) team, the assigned facility is the one where PC team members practice. If the patient does not have a PC team, the current facility is derived from the visit history; usually, the facility where care was received most recently becomes the patient's assigned facility. If the patient has no PC team and no recent visits, the Assigned or Most Recent Facility field is blank.

Clinical Alerts are used to convey important patient care information, such as 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. For more information about using Clinical Alerts, refer to the *Outpatient Pharmacy (PSO) Manager's User Manual*.

Patient demographics and any Clinical Alerts are prominently displayed in the List Manager header area when using any of the following Outpatient Pharmacy options:

- Medication Profile [PSO P]
- View Prescriptions [PSO VIEW]
- Patient Prescription Processing [PSO LM BACKDOOR ORDERS]
- Complete Orders from OERR [PSO LMOE FINISH]

If Extended Patient Demographics and Clinical Alerts cannot be displayed on a single page, the prompt "Type <Enter> to continue or '^' to exit Clinical Alerts:" displays. Demographics and Clinical Alerts remain displayed until the Enter key is pressed, giving the user time to review the information before scrolling to the next page.

Example: Patient Demographics and Clinical Alerts displayed in the List Manager Header

```
OPPATIENT16,ONE                                                  <A><P>
 PID: REDACTED                              Ht(cm): 175.26 (08/06/2000)
 DOB: REDACTED                              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: XXXXX TEAM           Phone: ###-###-####
PC Provider: REDACTED         Position: PROV XXXXX 7
Pager: 12345                               Phone: ###-###-####
Remarks: **PURPLE HEART RECIPIENT**
Assigned or Most 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

Type <Enter> to continue or '^' to exit Clinical Alerts:
```

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.

Chapter 3: Using the Pharmacist Menu

The options on the *Pharmacist Menu* are intended for use by pharmacists.

Example: Accessing the *Pharmacist Menu*

```
Select OPTION NAME: PSO USER1       Pharmacist Menu
Outpatient Pharmacy software - Version 7.0
```

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

- *Bingo Board User ...*
- *Change Label Printer*
- *Change Suspense Date*
- *Check Drug Interaction*
- *DUE Supervisor ...*
- *Enter/Edit Clinic Sort Groups*
- *External Interface Menu ...*
- *Medication Profile*
- *Pharmacy Intervention Menu ...*
- *Print from Suspense File*
- *Process Drug/Drug Interactions*
- *Pull Early from Suspense*
- *Queue CMOP Prescription*
- *Release Medication*
- *Return Medication to Stock*
- *Rx (Prescriptions) ...*
- *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.

- *Bingo Board User ... [PSO BINGO USER]*
- *Medication Profile [PSO P]*

- *Rx (Prescriptions) ... [PSO RX]*
- *Update Patient Record [PSO PAT]*

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 Bingo Board

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

Bingo Board User

[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 patients 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

Use this option to manually enter the name of a new patient 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. Enter the ticket number and at the next prompt enter each of the prescription numbers for that patient.

Display Patient's Name on Monitor

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, remove the name or ticket number from the display either manually or through the barcode reader.

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

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 9:Status of Patient's Order

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    ###########    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 #: ######,

Pending:
     Orderable Item: ACETAMINOPHEN              Provider: OPPROVIDER24,TWO
     Entered By: OPCLERK28,FOUR                  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 #: #######,

Enter Patient Name: <Enter>
```

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 10: Error Messages

Error Level	Error Message	Why is this Message 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 5: 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>

ALBANY's FDA Medication Guide Printer(s) on file:

     BIRM1$PRT
     L8150$PRT

Select FDA MED GUIDE PRINTER: HOME// SUP

 1 SUPPORT LEXMARK LASERJET   SUP HALLWAY - LINE 111
 2 SUPPORT LINE PRINTER   ROOM 273
 3 SUPPORT TEST PRINTER   ROOM 269
Choose 1-3> 1  SUPPORT LEXMARK LASERJET  SUP HALLWAY - LINE 111    Right Margin:
 96//

This device cannot be used for printing FDA Medication Guides.
Please, contact your IRM and ask them to update the Windows
Network Printer Name for this device.

Select FDA MED GUIDE PRINTER: HOME// L8150$PRT
```

Chapter 6: Changing the Suspense Date

This chapter describes the *Change Suspense Date* option.

Change Suspense Date

[PSO PNDCHG]

This option allows the suspense date to be changed for a specific prescription or all prescriptions for a patient. The new suspense date will become the fill/refill date automatically. The opportunity is also given 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.

When processing a drug/drug interaction, the profile will list the status of the interacting drugs as pending (P).

Chapter 7: Check Drug Interaction

This chapter describes the Check Drug Interaction option shown on 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 Pharmacist Menu Option: CHECK Drug Interaction
Drug 1:    WARFARIN 2MG TAB         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 TAB

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 TAB
     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 TAB

     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 TAB

     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 TAB
     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 8: 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. An answer sheet can also be printed for the provider's use in answering the questionnaire. The answer sheet can be 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:

- *Enter a New Answer sheet*
- *Edit an Existing Answer Sheet*
- *Create/Edit a Questionnaire*
- *Batch Print Questionnaires*
- *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 automatically generated by the computer 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 file can be searched if the provider, drug, or questionnaire is known by typing ^S at the "SEQUENCE NUMBER" prompt. The search displays all of 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 automatically print 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 for 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, showing the number of answer sheets, number of questionnaires, and a breakdown of all yes/no/unknown type questions is available. 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 9: 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 a group of clinics to be identified 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 #
  Are you adding 'CLINIC #' as
    a new OUTPATIENT CLINIC SORT GROUP (the 6TH)? Y  <Enter> (Yes)
NAME: CLINIC #// <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: # EAST
  Are you adding '# EAST' as a new SORT GROUP (the 1ST for this OUTPATIENT CLINIC SORT
GROUP)? Y  (Yes)
Select SORT GROUPS: <Enter>
```

Chapter 10: Using the 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:         ALBANY
------------------------------------------------------------------------------

  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

Reprint the FDA Medication Guide? No// YES

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

[PSO INTERFACE VIEW]

With this option, batches of prescriptions that have printed from the external interface can be viewed.

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
------------------------------------------------------------------------------
####              NADOLOL 40MG TAB                          ACTIVE

Enter RETURN to continue or '^' to exit: <Enter>
RX #              NAME -> OPPATIENT9,ONE                    BATCH 6
------------------------------------------------------------------------------
####              MICONAZOLE NITRATE 2% LOT 60ML            ACTIVE
END OF LIST
```

Chapter 11: 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 particular patient. The profile display includes 'local' and all Non-VA Med orders. 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 when using this option. Refer to Patient Demographics and Clinical Alerts for more information.

Medication Profile: Short Format

The short format displays the following information:

Figure 3: Short Format

- patient name
- eligibility
- reactions
- pregnancy/lactation status
- prescription number
- Sig
- quantity
- last fill date
- address
- DOB
- narrative
- prescriptions
- drug name
- Status
- issue date
- refills remaining.

The short report format of the fields for Non-VA Med orders include the drug name or orderable item name, dosage, schedule, and date documented.

The short format displays the status in an abbreviated form. The following is an explanation of the codes:

Code	Status/Description
A	Active
B	Bad Address Indicated

DF	Discontinued due to edit by a provider through CPRS
DE	Discontinued due to edit via backdoor Pharmacy
DP	Discontinued by provider through CPRS
DC	Discontinued
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)

For the *Patient Prescription Processing, Complete Orders from OERR*, and *Action Profile (132 COLUMN PRINTOUT)* options, 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))".\

Figure 4: Medication Profile Short format

Example: Medication Profile – Short Format

```
Medication Profile            Jun 12, 2006@22:33:13          Page:    1 of    1
OPPATIENT16, ONE
  PID:                                                  Ht(cm): _______ (______)
  DOB:                                                  Wt(kg): 100.00 (06/24/2003)
  SEX: MALE                    Non-VA Meds on File - Last entry on 1-20-05
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                DIGOXIN (LANOXIN) 0.05MG CAP            90 A> 02-16 02-16   3  90
 2                OXYBUTYNIN CHLORIDE 15MG SA TAB        180 S> 02-15 05-06   0  90
-------------------------------------ACTIVE-------------------------------------
 3          AMPICILLIN 250MG CAP                    40 A> 06-12 06-12   0  10
 4          AZATHIOPRINE 50MG TAB                   90 E  06-10 05-03   3  90
---------------------------------DISCONTINUED----------------------------------
5           FOLIC ACID 1MG TAB                  90 DD> 05-03 05-03R  3  90
 6          HYDROCORTISONE 1%CR                  1 DE> 05-03 05-03R 11  30
 7          IBUPROFEN 400MG TAB 500'S          270 DC  05-03 05-03   3  90
 8          MVI CAP/TAB                         90 DP> 05-03 05-03R  3  90
 9          TEMPAZEPAM 15MG CAP                 30 DF  06-01 06-01   5  30
10          THIAMINE HCL 100MG TAB              90 DA> 05-03 05-03R  3  90
-------------------------------------HOLD-------------------------------------
11          WARFARIN 5MG TAB                    90 H   05-03   -     3  90
12          FUROSEMIDE 40MG TAB                 90 HP  05-03   -     2  90
 ----------------------------------NON-VERIFIED-------------------------------
13          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) ---------------------
GINKO 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//
```

Orders #5, 7, 10 are highlighted (reverse video) to indicate that they were recently discontinued. Hold Type display codes are showh in **blue**. Discontinue Type display codes are shown in **blue**.

OneVA Pharmacy and 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, please see Appendix A, OneVA Pharmacy User Manual.

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: REDACTED 1                                  Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
  SEX: FEMALE
 CrCL: <Not Found>                               BSA (m2): _______
                                                           ISSUE  LAST REF DAY
 #  RX #         DRUG                                 QTY ST  DATE  FILL REM SUP

-------------------------------------ACTIVE-------------------------------------
 1 ##########      FLUTICAS 100/SALMETEROL 50 INHL DISK 60  E> 06-01 02-02  11  45
                                                    Qty: 2
 2 ##########      NIACIN 250MG TAB                     270 S> 06-08 08-27   2  90
 3 ##########      RAMIPRIL 5MG CAP                      30 A> 05-31 05-31   8  30
-----------------------------------DISCONTINUED-----------------------------------
 4 ##########      HYDROCHLOROTHIAZIDE 25MG TAB          60 DC>02-01 02-02   5  60
--------------------------------------HOLD--------------------------------------
 5 ##########      LISINOPRIL 2.5MG TAB                  90 H> 03-10   -     3  90
------------------------------DAYTON (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: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
  SEX: FEMALE
 CrCL: <Not Found>                               BSA (m2): _______
                                                           ISSUE  LAST REF DAY
 #  RX #         DRUG                                 QTY ST  DATE  FILL REM SUP
+
 6 ##########      IBUPROFEN 800MG TAB                   30 A  06-09 07-19   0  10
 7 ##########      OMEPRAZOLE 10MG SA CAP                30 A  02-02 06-10  11  30
 8 ##########      VERAPAMIL HCL 120MG TAB               60 A  06-15 06-15   5  60
----------------------------DAYTON (552) DISCONTINUED-----------------------------
 9 ##########      ASPIRIN 325MG BUFFERED TAB           300 DC 03-15 03-15   2  90
--------------------------------DAYTON (552) HOLD--------------------------------
10 ##########      ALBUTEROL 0.5% INHL SOLN               2 H  06-09 -   1  14
------------------------------DAYTON (552) SUSPENDED------------------------------
11 ##########      CALCIUM GLUCONATE 500MG TAB           30 S  05-25 07-14   3  30
-------------------------DAYTSHR TEST LAB (###) 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: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
  SEX: FEMALE
 CrCL: <Not Found>                               BSA (m2): _______
                                                           ISSUE  LAST REF DAY
 #  RX #         DRUG                                 QTY ST  DATE  FILL REM SUP
+
12 ##########      BANDAGE, GAUZE, ROLLER 2 IN X 6 YD     3 A  04-19 04-19   9  29
13 ##########      OMEPRAZOLE 10MG SA CAP                60 A  05-03 05-03   5  60
----------------------DAYTSHR TEST LAB (###) DISCONTINUED-----------------------
14 ##########      QUINAPRIL 20MG TAB                    30 DC 03-04 03-04  11  30
-------------------------DAYTSHR TEST LAB (###) EXPIRED-------------------------
15 ##########      AMOXICILLIN 250MG CAP                 30 E  06-01 05-04   0  10
--------------------------DAYTSHR TEST LAB (###) HOLD---------------------------
16 ##########      CETIRIZINE HCL 10MG TAB               45 H  04-23 -   4  45
-----------------------DAYTSHR TEST LAB (###) SUSPENDED-----------------------
17 ##########      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 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.

The OneVA Pharmacy patch PSO*7*497 updates the 'REMOTE OP Medications' display and introduces the new view for prescription orders that originated from other VA Pharmacy locations, the dispensing Pharmacy only has two actions available. They are:

- RF Refill Rx from Another VA Pharmacy
- PR Partial Fill Rx from Another VA Pharmacy

```
REMOTE OP Medications (ACTIVE)Jul 27, 2016@10:12:37          Page:    1 of    1
PSOPATIENT,SIX                                  <NO ALLERGY ASSESSMENT>
  PID: REDACTED                                     Ht(cm): _______ (______)
  DOB: REDACTED                                     Wt(kg): _______ (______)
  SEX: FEFEMALE
 CrCL: <Not Found>                                 BSA (m2): _______

         Site #: ###(DAYTSHR TEST LAB)
           Rx #: ##########
      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 Fill Rx from Another VA Pharmacy
Select Action:Quit//
```

Users with PSORPH key will be able to use the above Remote OP Medications option. For users without the PSORPH key the system will display the following message for remote fill.

>>> Refill Rx from Another VA Pharmacy may not be selected at this point.

For users without the PSORPH key the system will display the following message for partial fill.

>>> Partial Fill Rx from Another VA Pharmacy may not be selected at this point.

OneVA Pharmacy Exception Messages

The OneVA Pharmacy patch contains specific business rules to prevent refill and/or partial orders that originated at other VA Pharmacy locations from being processed. They include the following list:

- Patient's prescription that originated from another VA Pharmacy location cannot be refilled before the next refill date.

  Unable to complete transaction.

  Cannot refill Rx# xxxxxxx. Next possible fill date is MM/DD/YYYY

- Patient's prescription that originated from another VA Pharmacy location is not fully or partially dispensed when the prescription status is 'discontinued', 'expired', is on 'hold', or 'suspended'.

  Only 'ACTIVE' remote prescriptions may be refilled at this time.

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refilled) when there are zero remaining refills. Note: Partial fills are allowed.

  Unable to complete transaction. Cannot refill Rx # xxxxxxx. No refills left.

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when the drug is classified as a controlled substance on the dispensing site.

  This is a controlled substance. Cannot refill Rx # xxxxxxx.

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when the drug is classified as a controlled substance on the host site.

  Unable to complete transaction. Rx #xxxxxxx cannot be refilled.

  The associated drug is considered a controlled substance at the host facility.

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when the drug is inactive on the dispensing site.

  Matched Drug <DRUG NAME> is inactive. Cannot refill.

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when the drug has no dispensing site match.

  No local match could be found for <DRUG NAME>

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when no drug on the dispensing site has a matching VA Product ID.

  Missing VA Product ID. Rx #xxxxxxx cannot be refilled.

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refilled or partial fill) when the prescription has a trade name.

  This prescription cannot be refilled or partial filled because it has a value entered in the Rx trade name field. Please follow local policy for obtaining a new prescription.

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refilled or partial fill) when the prescription type is Titration.

  Cannot refill prescription - type is Titration. You may request a partial fill.

- Patient's prescription that originated from another VA Pharmacy location will deny the request for a prescription refill to be completed if it is requested "too soon" after the last refill so that prescriptions are not over-distributed.

  Unable to complete transaction.

  Cannot refill Rx# XXXXXX**. Next possible fill date is 11/9/2017**

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:

For a refill:

```
TRANSACTION SUCCESSFUL...  The refill for RX ####### 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 ####### 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:
```

Note: For additional information regarding OneVA Pharmacy processing, please see Appendix A, OneVA Pharmacy User.

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    #########     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:   REDACTED
ANYTOWN                              PHONE: ###-####
TEXAS  #####                         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 #:  ############              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: ############ Filled: 01-14-06 (M)
  Last Released:                             Original Release:
  Refilled: 02-19-04 (M)      Released:
  Remarks:
  Division: ALBANY (500)               Active              4 Refills Left
--------------------------------------------------------------------------------
                      Non-VA MEDS (Not Dispensed by VA)
GINKO BILLOBA TAB
  Dosage: 1 TABLET
  Schedule: ONCE A DAY
  Route: MOUTH
  Status: Discontinued (10/08/03)
  Start Date: 09/03/03     CPRS Order #: #####
  Documented By: OPCLERK21,FOUR on 09/03/03
  Statement of Explanation: Non-VA medication not recommended by VA provider.
```

```
ACETAMINPHEN 325MG CT
  Dosage: 325MG
  Schedule:
  Route:
  Status: Active
  Start Date: 09/03/03     CPRS Order #: #####
  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, will appear. It 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. An example of the Women's Health label is listed below:

```
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 "Using The Pharmacy Intervention Menu" for more details. 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 similar to 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: REDACTED                                        HEIGHT(cm): 175.26 (11/21/2006)
  DOB: REDACTED                                        WEIGHT(kg): 108.18 (08/09/2007)
CrCL: 78.1(est.) (CREAT:1.0mg/dL 2/19/99)               BSA (m2): 2.29
  SEX: MALE                                  EXP/CANCEL CUTOFF: 120 DAY
                                                        ISSUE    LAST     REF  DAY
  # Rx#           DRUG [^]                        QTY ST  DATE     FILL     REM  SUP
  1 ########      ALBUTEROL INHALER                 1 A   04-21-07 04-21-07  11    7
  2 ########      ALPRAZOLAM 0.25MG TABS           30 DC  06-14-07 06-14-07  11   30
  3 ########      AMITRIPTYLINE 10MG TAB           60 A   04-21-07 04-21-07  11   30
  4 ########      CABERGOLINE 0.5MG TAB             7 E   05-18-05 05-18-05   6    7
  5 ########      DESIPRAMINE 25MG                 90 S   02-00-07 02-11-07  11   90
  6 ########      DIGOXIN 0.05MG/ML ELIX (60CC)    30 A   02-01-07 02-20-07  10   90
  7 ########      METAPROTERENOL 5% SOLUTION 10ML  15 DC  06-02-07 06-03-07  11   15
  8 ########      METAPROTERENOL 5% SOLUTION 10ML  10 DC  06-02-07 06-03-07  11   10
  9 ########      METAPROTERENOL 5% SOLUTION 10ML  15 A>  06-02-07 06-00-07  11   15
 10 ########      NICOTINE 10MG/ML SOLN NASAL SPRAY 1 A>  06-02-07 06-00-07  11   15
 11 ########      SIMVASTATIN 20MG TAB              5 DC  05-28-05 04-27-07   3   30
 12 ########      SODIUM CHLORIDE 0.9% NASAL SOLN(O 1 A   05-10-07 05-10-07  11   30
 13 ########      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 (ALBANY):
     ----------------------------------------
     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: REDACTED                                  Ht(cm): _______ (______)
  DOB: REDACTED                                  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  #####-####                             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: REDACTED                                  HEIGHT(cm): 175.26 (11/21/2006)
  DOB: REDACTED                                  WEIGHT(kg): 108.18 (08/09/2007)
  SEX: MALE                                EXP/CANCEL CUTOFF: 120 DAY
 CrCL: <Not Found> (CREAT: Not Found)              BSA (m2): 2.29
                                                          ISSUE    LAST     REF  DAY
  # Rx#           DRUG [^]                          QTY ST  DATE     FILL     REM  SUP
  1 ########      ALBUTEROL INHALER                   1 A   04-21-07 04-21-07  11    7
    SIG: TAKE 1 PUFF BY MOUTH EVERY DAY FOR 10 DAYS
  2 ########      ALPRAZOLAM 0.25MG TABS             30 DC  06-14-07 06-14-07  11   30
    SIG: TAKE ONE CAPSULE BY MOUTH EVERY MORNING
  3 ########      AMITRIPTYLINE 10MG TAB             60 A   04-21-07 04-21-07  11   30
    SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
  4 ########      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 ########      DESIPRAMINE 25MG                   90 S   02-00-07 02-11-07  11   90
    SIG: TAKE 2 TABLET(S) BY MOUTH EVERY 12 HOURS
  6 ########      DIGOXIN 0.05MG/ML ELIX (60CC)      30 A   02-01-07 02-20-07  10   90
    SIG: INJECT 1000IM EVERY DAY
  7 ########      METAPROTERENOL 5% SOLUTION 10ML    15 DC  06-02-07 06-03-07  11   15
    SIG: INJECT 1000 IM EVERY DAY
  8 ########      METAPROTERENOL 5% SOLUTION 10ML    10 DC  06-02-07 06-03-07  11   10
    SIG: INJECT 1000 IM EVERY DAY
  9 ########      METAPROTERENOL 5% SOLUTION 10ML    15 A>  06-02-07 06-00-07  11   15
    SIG: INJECT 1000 IM EVERY DAY
 10 ########      NICOTINE 10MG/ML SOLN NASAL SPRAY   1 A>  06-02-07 06-00-07  11   15
    SIG: APPLY 1 PATCH ON SHOULDER DAILY
 11 ########      SIMVASTATIN 20MG TAB                5 DC  05-28-05 04-27-07   3   30
    SIG: TAKE 2 TABLET(S) PO FOUR TIMES A DAY
 12 ########      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 ########      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 actually 90 and it displays as 9.

```
                                                          ISSUE  LAST   REF DAY
 #  RX #         DRUG                                QTY ST  DATE  FILL   REM SUP
 ---------------------------------DISCONTINUED-------------------------------
 1 ##########    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: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    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 ########      ALBUTEROL INHALER                    66 A  09-02 09-02   1  40
                                                        *** Bad Address ***
2 ########      INSULIN NPH U-100 INJ (PORK)         59 S  08-28 12-14   3  59
                                                        *** Bad Address ***
3 ########      LOMUSTINE 10MG CAP                   30 A  09-09 09-09   5  60
                                                        *** Bad Address ***
4 ########      PARALDEHYDE ORAL LIQUID (OZ)          1 A  08-28 09-09   0  90
                                                        *** Bad Address ***
5 ########      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: REDACTED                                  HEIGHT(cm): 175.26 (11/21/2006)
  DOB: REDACTED                                  WEIGHT(kg): 108.18 (08/09/2007)
  SEX: MALE                                EXP/CANCEL CUTOFF: 120 DAY
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 2.29
                                                          ISSUE    LAST     REF  DAY
  # Rx#           DRUG [^]                          QTY ST  DATE     FILL     REM  SUP
ACTIVE (6 orders)
  1 ########      ALBUTEROL INHALER                   1 A   04-21-07 04-21-07  11    7
  2 ########      AMITRIPTYLINE 10MG TAB             60 A   04-21-07 04-21-07  11   30
  3 ########      DIGOXIN 0.05MG/ML ELIX (60CC)      30 A   02-01-07 02-20-07  10   90
  4 ########      METAPROTERENOL 5% SOLUTION 10ML    15 A>  06-02-07 06-00-07  11   15
  5 ########      NICOTINE 10MG/ML SOLN NASAL SPRAY   1 A>  06-02-07 06-00-07  11   15
  6 ########      SODIUM CHLORIDE 0.9% NASAL SOLN(O   1 A   05-10-07 05-10-07  11   30
DISCONTINUED (4 orders)
```

```
  7 ########      ALPRAZOLAM 0.25MG TABS             30 DC  06-14-07 06-14-07  11   30
  8 ########      METAPROTERENOL 5% SOLUTION 10ML    15 DC  06-02-07 06-03-07  11   15
  9 ########      METAPROTERENOL 5% SOLUTION 10ML    10 DC  06-02-07 06-03-07  11   10
 10 ########      SIMVASTATIN 20MG TAB                5 DC  05-28-05 04-27-07   3   30
SUSPENDED (2 orders)
 11 ########      DESIPRAMINE 25MG                   90 S   02-00-07 02-11-07  11   90
 12 ########      VALSARTAN 80MG TAB                  5 S   06-28-07 05-31-07  11   30
EXPIRED (1 order)
 13 ########      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# ########    Drug: AMITRIPTYLINE 10MG TAB

Qty: 120           Sig: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY

RX# ######## has been suspended until 07-01-11.
```

NOTE: The system has the flexibility to sort the Medication Profile by different columns (RX, drug name, date, etc.). When selecting a range of prescriptions from the Medication Profile to be refilled, selection is not limited to active prescriptions. If discontinued or expired prescriptions are included in a range, the system will display a message stating the status of each prescription as they are processed within the range.

For example:

Cannot refill Rx # XXXXXXXX, Rx is in DISCONTINUED status.

Chapter 12: Using the Medication Reconciliation Tools

This chapter describes the tools available to perform Medication Reconciliation functions via the CPRS Reports tab and CPRS Notes tab.

Medication Reconciliation

The Medication Reconciliation functions may be performed via the use of four tools. The tools utilize Health Summary components and Text Integrated Utility (TUI) data objects to create a list of current medications. These Medication Reconciliation tools also leverage the Remote Data Interoperability (RDI) software to include medication data from other sites.

Tool 1 is a Medication Reconciliation Profile health summary component. This report creates an alphabetical list of outpatient prescriptions, unit dose medications, documented non-VA medications, and remote VA medications. This summary can be used at transition points in a patient's care, (admission, discharge, etc.) to identify medications that need to be continued, new items to be ordered, old items to be discontinued, or orders that need to be changed.

Tool 2 is a Medication Worksheet component. This report provides a grid-formatted list of active and pending medications suitable for giving to a patient at a clinic visit or upon discharge from the hospital.

Tool 3 is a TIU data object provided as an alternative to the Medication Chart health summary process. The unique aspect of this object is that the list, generated for the patient, includes recently expired medications but not recently discontinued medications.

Tool 4 is a series of TIU data objects and health summary components that retrieve remote active medications and remote allergy/ADR data.

For a complete list of functionality, please refer to Medication Reconciliation Tools Implementation Guide. Upon completion of the steps listed in the Implementation Guide, users will be able to retrieve reports useful for Medication Reconciliation by selecting the newly created Health Summaries on the CPRS Reports tab or by using the newly created TIU templates and objects from the CPRS Notes Tab's Templates Drawer and/or any progress note titles in which they have been embedded.

Chapter 13: 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* 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]

Using this option, an already existing entry in the APSP INTERVENTION file can be edited.

Print Pharmacy Intervention

[PSO INTERVENTION PRINTOUT]

Print a captioned printout of pharmacy interventions for a certain date range with this option. The report prints out on normal width paper and 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 on the screen. More than one intervention can be viewed at a time.

Chapter 14: Print from Suspense File

This chapter describes the *Print from Suspense File* option used for printing suspended prescriptions.

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) in 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 set 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.

A label will not print if the Label Log shows that the label has already printed unless the suspense queue indicates that a user has requested a reprint of the suspended prescription.

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.

Prescriptions with an FDA Medication Guide associated will automatically print along with the labels (if one is available). In order to ensure that the documents are sent to an actual printer users will be required to enter a valid printer for printing the FDA Medication Guides at this option if one has not been selected when they logged on to the Outpatient Pharmacy Division.

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 a prescription is determined to be an ePharmacy prescription (e.g., third party electronically billable), an electronic claim will be sent by the Electronic Claims Management Engine (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) or Drug Utilization Review (88 or 943) reject, the label is not printed for the prescription and it is moved to the Refill Too Soon/DUR 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. If the claim submission returns a Reject Resolution Required reject, the label is not printed for the prescription and it is moved to the Reject Resolution Required section of the Third Party Payer Reject – Worklist.

Print from Suspense by Category

Suspended prescription labels can be printed by category when using the Print from Suspense File [PSO PNDLBL] option.

The new prompt "Select Print Category: (A/N/C/S/R/D/V/E): ALL//" allows users to specify the prescription labels to be printed from the RX SUSPENSE file (#52.5) by selecting from the categories All (A), Non-Controlled Drugs (N), Controlled Substances (C), Supplies (S), Refrigerated Items (R), Drugs (D), and VA Classifications (V). To leave the prompt without choosing a print category, select Exit (E). Typing "?" at the prompt displays help text describing the available print categories.

Note: Refrigerated Items are designated by the presence of a "Q" in the DEA Special Handling field (#3) of the Drug File (#50).

Important: To ensure that all suspended prescriptions have been printed when printing from the suspense file by a category other than "ALL," either run Print from Suspense by Category "ALL" after printing other categories, or print the Log of Suspended Rx's by Day (this Division) using the VistA option [PSO PNDLOG]. This step ensures that no prescriptions are unintentionally left on suspense.

Example: Print from Suspense by Category Prompt and Help Text

```
Select Print Category: (A/N/C/S/R/D/V/E): ALL//" ?

Enter 'A' ALL Prescriptions on Suspense for the Division
      'N' Non-Controlled RX or OTCs (Special Handling Code 6 or 9)
      'C' Controlled Substance Prescriptions (DEA 1, 2, 3, 4, 5)
      'S' Supply Prescriptions (Special Handling Code 'S')
      'R' Refrigerated Prescriptions (Special Handling Code 'Q')
      'D' Prescriptions by Selected Drugs
      'V' Prescriptions by Selected VA Classifications
   Or 'E' or '^' to Exit

   Select one of the following:

        A         ALL
        N         Non-Controlled Drugs
        C         Controlled Substances
        S         Supplies
        R         Refrigerated Items
        D         Drugs
        V         VA Classifications
        E         Exit

Select Print Category:  (A/N/C/S/R/D/V/E):  ALL//
```

A variety of additional prompts follow. Extra help text is added to the Refrigerated Items and Supplies prompts to clarify expected results when using the Include or Exclude functionality:

- Selecting Include enables refining the labels to print.
- Selecting Exclude enables refining those labels that should not be sent to print.

Example: Print from Suspense by Category (Include Non-Controlled Drugs)

The following example shows both a summary and the full expanded path with available help text when including Non-Controlled Drugs.

Without help text:

```
Select Print Category:  (A/N/C/S/R/D/V/E): ALL//" n  Non-Controlled Drugs
Non-Controlled Drugs: Include//  Non-Controlled Drugs
Include: Mail (M), Window (W), Both (B): Both//  Mail and Window
Include the following:  (Rx/OTC/Both): Both//  Rx and OTC
```

```
Include Refrigerated Items? YES//
Include Supplies? YES//

Print Suspended 'Non-Controlled Drugs' selections? NO// YES
```

With expanded help text:

1. At the "Print Category: (A/N/C/S/R/D/V/E): ALL//" prompt, type "N" to select Non-Controlled Drugs and then follow the subsequent prompts:

   a. The "Non-Controlled Drugs: Include//" prompt displays. Type "?" to display the help text:

      - Select one of the following:
        - Include Non-Controlled Drugs
        - Exclude Non-Controlled Drugs

   b. Type "Include" or press Return to accept the default value "Include."

Note: All subsequent prompts shown below further refine the selection of "Include Non-Controlled Drugs." For an example of Exclude functionality, refer to the example Excluding Non-Controlled Drugs.

   c. The "Include: Mail (M), Window (W), Both (B): Both//" prompt displays. This selection refines the labels to print by delivery method. Type " ?" to display the help text:

      - Select one of the following:

        M Mail

        W Window

        B Both Mail and Window

   d. To accept the default value, type "Both" or press Return.

   e. The "Include the following: (Rx/OTC/Both): Both//" prompt displays. This selection refines the labels to print by drug type. Type "?" to display the help text:

      - Enter 'RX' Prescriptions for Legend Drugs (Special Handling Code 6)
      - 'OTC' Prescriptions for OTC Drugs (Special Handling Code 9)
      - 'Both' Prescriptions for BOTH Legend and OTC Drugs
      - Select one of the following:

        Rx Rx

        OTC OTC

        Both Both RX and OTC

f. To accept the default value, type "Both" or press Return.

g. The "Include Refrigerated Items? YES//" prompt displays. Type "?" to display the help text:

- "Enter 'NO' to EXCLUDE refrigerated Non-Controlled Drugs from printing."

Note: Drug File entries with a DEA Special Handling Code of "Q" will NOT print from Suspense using this category (absent the additional codes "6" or "9" and depending on user responses to the Non-Controlled Category prompts). To print prescriptions from suspense with a DEA Special Handling Code of "Q" only, use the Refrigerated Category.

h. The "Include Supplies? YES//" prompt displays. Type "?" to display the help text:

- "Enter 'NO' to EXCLUDE Non-Controlled supplies from printing."
- "Enter 'YES' to print Non-Controlled supplies."

Note: Drug File entries with a DEA Special Handling Code of "S" will NOT print from Suspense using this category (absent the additional codes "6" or "9" and depending on user responses to the Non-Controlled Category prompts). To print prescriptions from suspense with a DEA Special Handling Code of "S" only, use the Supply Category.

Example: Print from Suspense by Category (Exclude Non-Controlled Drugs)

The following example shows both a summary and expanded path with available help text when excluding Non-Controlled Drugs.

Without help text:

```
Select Print Category:  (A/N/C/S/R/D/V/E): n  Non-Controlled Drugs
Non-Controlled Drugs: Include// Exclude Non-Controlled Drugs
Exclude: Mail (M), Window (W), Both (B): Both//  Mail and Window
Exclude the following:  (Rx/OTC/Both): Both//  Rx and OTC
Exclude Refrigerated Items? YES//
Exclude Supplies? YES//

Print Suspended 'Non-Controlled Drugs' selections? NO// YES
```

With expanded help text:

1. At the "Print Category: (A/N/C/S/R/D/V/E): ALL//" prompt, type "N" to select Non-Controlled Drugs and then follow the subsequent prompts:

   a. The "Non-Controlled Drugs: Include//" prompt displays. Type "?" to display the help text:

- Select one of the following:
    - Include Non-Controlled Drugs
    - Exclude Non-Controlled Drugs

b. Type "Exclude" to exclude Non-Controlled Drug labels from printing.

Note: All subsequent prompts shown below further refine the selection of "Exclude Non-Controlled Drugs." For an example of Include functionality, refer to the example Including Non-Controlled Drugs.

c. The "Exclude: Mail (M), Window (W), Both (B): Both//" prompt displays. This selection refines the labels to print by delivery method. Type " ?" to display the help text:

- Select one of the following:

    M Mail

    W Window

    B Both Mail and Window

d. To accept the default value, type "Both" or press Return.

Note: A "Both" response will exclude both Mail and Window Non-Controlled prescriptions from printing. A "Mail" response will ONLY exclude Mail Non-Controlled prescriptions from printing. A "Window" response will ONLY exclude Window Non-Controlled prescriptions from printing.

e. The "Exclude the following: (Rx/OTC/Both): Both//" prompt displays. This selection refines the labels to print by drug type. Type "?" to display the help text:

- Enter 'RX' Prescriptions for Legend Drugs (Special Handling Code 6)
- 'OTC' Prescriptions for OTC Drugs (Special Handling Code 9)
- 'Both' Prescriptions for BOTH Legend and OTC Drugs
- Select one of the following:

    Rx Rx

    OTC OTC

    Both Both RX and OTC

f. To accept the default value, type "Both" or press Return.

Note: A "Both" response will exclude both Rx and OTC Non-Controlled prescriptions from printing. An "Rx" response will ONLY exclude Non-Controlled prescriptions from printing. An "OTC" response will ONLY exclude Non-Controlled OTCs from printing.

g. The "Exclude Refrigerated Items? YES//" prompt displays. Type "?" to display the help text:

- "Enter 'YES' to EXCLUDE refrigerated Non-Controlled Drugs from printing."
- "Enter 'NO' to print refrigerated Non-Controlled Drugs in addition to the other categories."

Note: A 'YES' response excludes refrigerated Non-Controlled Drug labels for printing. All Non-Controlled Drugs, including refrigerated items, are excluded.

A "NO' response includes refrigerated Non-Controlled Drug labels for printing, but non-refrigerated Non-Controlled Drugs labels will remain excluded.

h. The "Exclude Supplies? YES//" prompt displays. Type "?" to display the help text:

- "Enter 'YES' to EXCLUDE Non-Controlled supplies from printing."
- "Enter 'NO' to print Non-Controlled supplies in addition to the other categories."

Note: A 'YES' response excludes Non-Controlled Supplies labels from printing.

A 'NO' response includes Non-Controlled Supplies labels for printing. Non-Controlled Drugs remain excluded.

Example: Print from Suspense by Category (Include Controlled Substances)

The following example shows both a summary and the full expanded path with available help text when including Controlled Substances.

Without help text:

```
Select Print Category:  (A/N/C/S/R/D/V/E): Controlled Substances
Controlled Substances: Include// Controlled Substances
Include: Mail (M), Window (W), Both (B): Both//  Mail and Window
Enter a list or range of CS Federal Schedules to INCLUDE (1-5): 1-5//
Include Refrigerated Items? YES//

Print Suspended 'Controlled Substances' selections? NO//
```

With expanded help text:

1. At the "Print Category: (A/N/C/S/R/D/V/E): ALL//" prompt, type "C" to select "Controlled Substances" and follow the subsequent prompts.

   a. The "Controlled Substances: Include//" prompt displays. Type "?" to display the help text:

      - Select one of the following:
        - Include Controlled Substances
        - Exclude Controlled Substances

Note: All subsequent prompts further refine the selection of "Include Controlled Substances." For an example of Exclude functionality for Controlled Substances, refer to the example Excluding Controlled Substances.

   b. The "Include: Mail (M), Window (W), Both (B): Both//" prompt displays. This selection refines the labels to print by delivery method. Type " ?" to display the help text:

      - Select one of the following:

        M Mail

        W Window

        B Both Mail and Window

   c. To accept the default value, type "Both" or press Return.

   d. The "Enter a list or range of CS Federal Schedules to INCLUDE (1-5): 1-5//" prompt displays. Type "?" to display the help text:

      - This response must be a list or range, e.g., 2,4 or 3-5.

Note: Controlled Substances are specified by typing a range, for example "1-5." Labels for all Controlled Substances with a schedule number included in this range will print.

Schedule numbers can also be specified in a list. For example, typing "1,3,5" at this prompt will include Controlled Substances from Schedule 1, Schedule 3, and Schedule 5.

   e. To accept the default value, type "1-5" or press Return.

   f. The "Include Refrigerated Items? YES//" prompt displays. Type "?" to display the help text:

      - "Enter 'NO' to EXCLUDE refrigerated Controlled Substances of the selected range from printing."

- "Enter 'YES' to print refrigerated Controlled Substances of the selected range."

There are no supplies associated with Controlled Substances.

Example: Print from Suspense by Category (Exclude Controlled Substances)

The following example shows both a summary and expanded path with available help text when excluding Controlled Substances.

Without help text:

```
Select Print Category:  (A/N/C/S/R/D/V/E): Controlled Substances
Controlled Substances: Include// Exclude Controlled Substances
Exclude: Mail (M), Window (W), Both (B): Both//  Mail and Window
Enter a list or range of CS Federal Schedules to INCLUDE (1-5): 1-5//
Exclude Refrigerated Items? YES//

Print Suspended 'Controlled Substances' selections? NO//
```

With expanded help text:

1. At the "Print Category: (A/N/C/S/R/D/V/E): ALL//" prompt, type "C" to select "Controlled Substances" and follow the subsequent prompts:

    a. The "Controlled Substances: Include//" prompt displays. Type "?" to display the help text:

        - Select one of the following:
            - Include Controlled Substances
            - Exclude Controlled Substances

Note: All subsequent prompts further refine the selection of "Exclude Controlled Substances." For an example of Include functionality for Controlled Substances, refer to the example Including Controlled Substances.

    b. The "Exclude: Mail (M), Window (W), Both (B): Both//" prompt displays. This selection refines the labels to print by delivery method. Type " ?" to display the help text:

        - Select one of the following:

            M Mail

            W Window

            B Both Mail and Window

    c. To accept the default value, type "Both" or press Return.

Note: A "Both" response will exclude both Mail and Window Controlled Substance prescriptions from printing. A "Mail" response will ONLY exclude Mail Controlled Substances from printing. A "Window" response will ONLY exclude Window Controlled Substances from printing.

d. The "Enter a list or range of CS Federal Schedules to EXCLUDE (1-5): 1-5//" prompt displays. Type "?" to display the help text:

   - "This response must be a list or range, e.g., 2,4 or 3-5."

Note: Controlled Substances are specified by typing a range, for example "1-5." Labels for all Controlled Substances with a schedule number included in this range will be excluded from printing.

Schedule numbers can also be specified in a list. For example, typing "1,3,5" at this prompt will exclude Controlled Substances from Schedule 1, Schedule 3, and Schedule 5.

e. To accept the default value, type "1-5" or press Return.

f. The "Exclude Refrigerated Items? YES//" prompt displays. Type "?" to display the help text:

   - "Enter 'YES' to EXCLUDE refrigerated Controlled Substances of the selected range from printing."
   - "Enter 'NO' to print refrigerated Controlled Substances of the selected range in addition to the other categories."

Note: A 'YES' response excludes refrigerated Controlled Substance drug labels from printing. No Controlled Substances labels in the selected range will print (refrigerated or non-refrigerated).

A 'NO' response includes refrigerated Controlled Substances in the selected range when printing. Labels for non-refrigerated Controlled Substances remain excluded and do not print.

There are no supplies associated with Controlled Substances.

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. To reduce refill-too-soon third party claim rejections for new prescriptions, prior prescriptions are checked for the same

patient and product to verify that ¾ of the days supply has elapsed on the prior prescriptions before the new prescriptions may be filled. 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). With the release of PSO*7*367, this rounding functionality will also be available for local mail suspense.

- 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 will state the date/time that the Rx will be allowed to be removed from suspense. The activity log will be 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 Chapter 23,"Bypass 3/4 Supply" 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.

Chapter 15: 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 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 a Severe Allergy the user is required to enter an intervention and their electronic signature
3. 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.
4. 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`.
5. Remote/HDR allergy Signs/Symptoms are now displayed when doing Allergy/ADR Order Checks.
6. 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 (ANYTOWN VAMC -
                     02/09/15)
Historical/Observed: OBSERVED
           Severity: SEVERE
        Ingredients: ACETAMINOPHEN
     Signs/Symptoms: DIARRHEA, NAUSEA AND VOMITING, RASH
   Drug Class: CN103 NON-OPIOID ANALGESICS

  Provider Override Reason: N/A - Order Check Not Evaluated by Provider


Do you want to Intervene? YES// n  NO

With a SEVERE reaction, an intervention is required!
```

Note: "With a severe reaction, an intervention is required"

Severe with Intervention:

```
A Drug-Allergy Reaction exists for this medication and/or class!

   Prospective Drug: ACETAMINOPHEN 325MG TAB
    Causative Agent: ACETAMINOPHEN/ ASPIRIN/ CAFFEINE (ANYTOWN 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: REDACTED REDACTED       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 5: Allergies Dialog

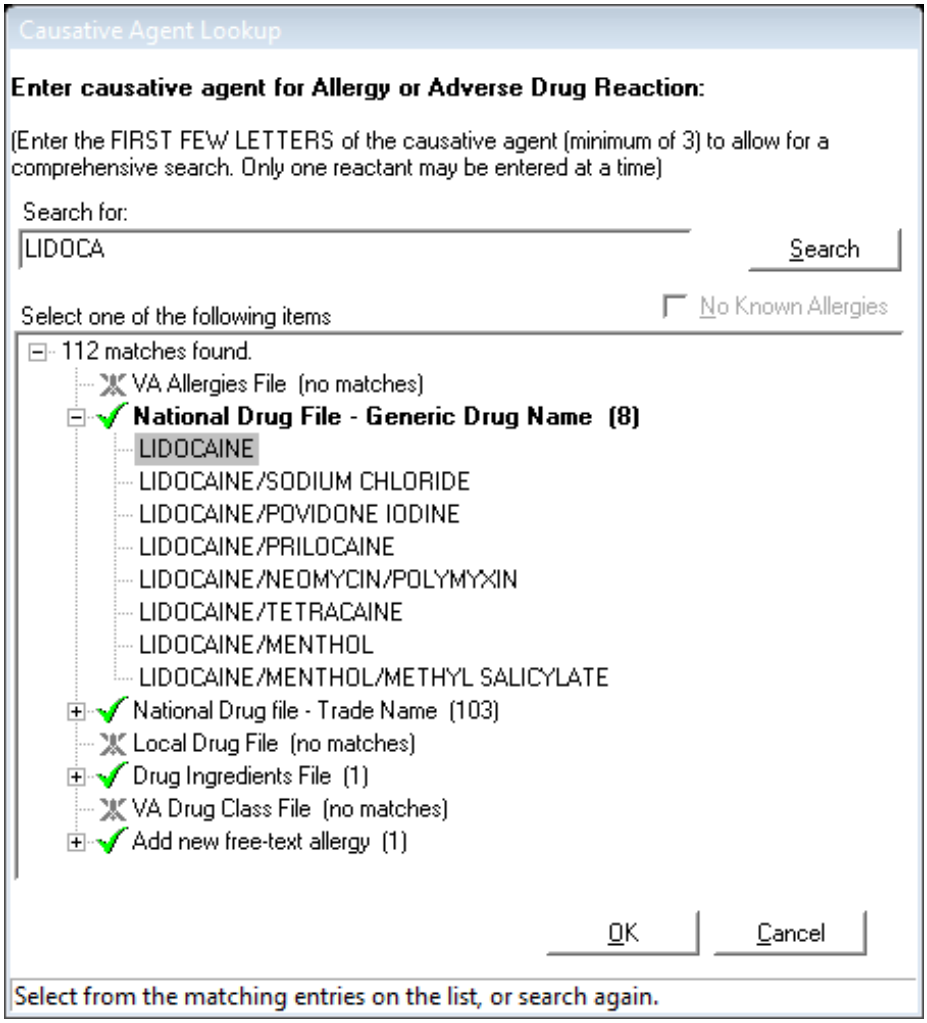
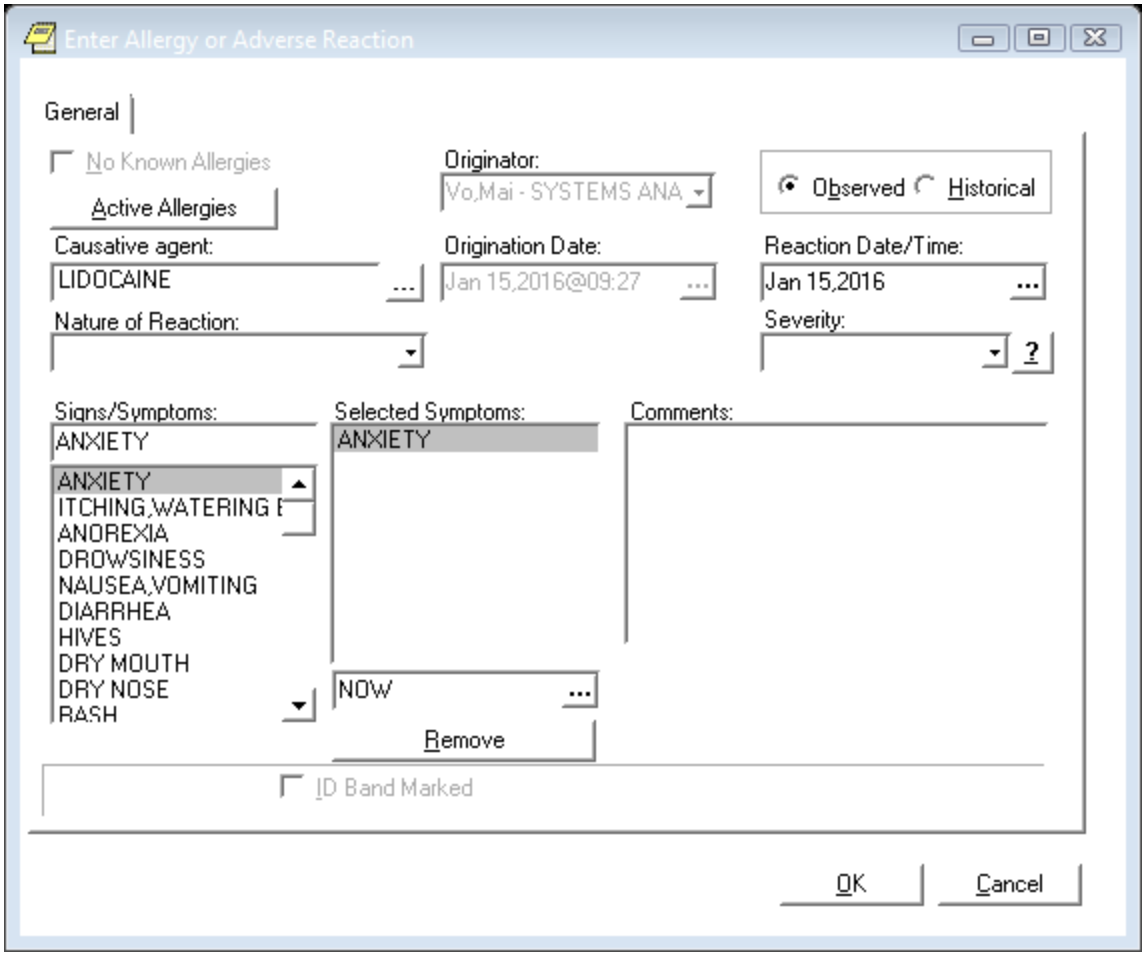


Figure 6: Example of Observed Allergy



VistA Outpatient Allergy/Adverse Reaction Entry Process

Observed Allergy example:

```
Patient Information          Jan 20, 2016@16:50:39          Page:    2 of    2
ROWPATNM,BOAT                                                        <A>
  PID: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
  SEX: FEMALE
 CrCL: <Not Found> (CREAT: Not Found)           BSA (m2): _______
+
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: REDACTED// REDACTED       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: REDACTED
                                                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: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      Wt(kg): _______ (______)
  SEX: MALE                      Non-VA Meds on File - Last entry on 08/04/15
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): _______
```

```
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 16: Clinical Reminder Order Checks

This chapter describes the display of Clinical Reminder Order Checks that appear prior to Enhanced Order Checks. Patch PSO*7*411 brings in new Clinical Reminder Order Checks functionality.

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.

```
Now processing Clinical Reminder Order Checks. Please wait ...

============================================================
*** Clinical Reminder Order Check | Severity: SEVERE ***

Potentially Teratogenic Medication (FDA Category D or C)

Concern has been raised about use of this medication during pregnancy.

1) Pregnancy status should be determined. Discuss use of this medication on the
context of risks to the mother and child of untreated disease. Potential
benefits may warrant use of the drug in pregnant women despite risks.

2) The patient must be provided contraceptive counseling on potential risk vs.
benefit of taking this medication if she were to become pregnant.

**********************************************************************

Press Return to Continue...:


The 'Teratogenic Medications' Order Check will display for female patients
between the ages of 12 and 50, except those with a known exclusion criterion
(e.g., hysterectomy), or those with a documented IUD placement that is more
recent than a documented IUD removal.
```

Chapter 17: Processing Order Checks

This chapter describes the option used for processing order checks.

Processing Order Checks

[PSO ORDER CHECKS VERIFY]

Using this option, information for medications that have been marked as a drug/drug interaction or a dosing order check warning can be processed. 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 Maximum Single Dose Check enhancement in PSO*7*372.

Legacy VistA Drug/Drug Interactions have been enhanced to utilize First DataBank's (FDB) Drug Information Framework (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.

FDB custom Drug Interaction tables will be used to store custom changes to FDB standard reference Drug Interaction tables. FDB Drug Interactions that are designated as critical in VistA will have their severity level modified to '1'. All FDB Drug Interactions that are designated as significant in VistA will have their severity level modified to '2'. Any Drug Interaction in VistA that is not in FDB will be added to the FDB custom tables. For these interactions a custom monograph will be created with a clinical effects section.

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 which 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:

Example: Critical Drug Interaction with Local Rx

```
***CRITICAL*** Drug Interaction with Prospective Drug:
                    INDINAVIR 400MG CAP and

        Local Rx#: ####
             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.
```

Example: Significant Drug Interaction with Local Rx

```
***SIGNIFICANT*** Drug Interaction with Prospective Drug:
                    WARFARIN 5MG TAB and

        Local RX#: ####
             Drug: ASPIRIN 325MG 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

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS
```

Example: Significant Drug Interaction with Remote Rx

```
*** Significant*** Drug Interaction with Prospective Drug:
                    WARFARIN 5MG TAB and

          LOCATION: <VA or DOD facility>  Remote RX#: ########
              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
```

Example: Critical Drug Interaction with Remote Rx

```
***CRITICAL*** Drug Interaction with Prospective Drug:
                    INDINAVIR 400MG CAP and

        LOCATION: <VA or DOD Facility>   Remote Rx#: ########
              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.
```

Example: Critical Drug Interaction with Non-VA Med Order

```
***Critical*** Drug Interaction with Prospective Drug:
                       WARFARIN 5MG TAB and

            Non-VA Med: CIMETIDINE 200MG TAB
                SIG: ONE TABLET     Schedule: AT BEDTIME

The pharmacologic effects of warfarin may be increased resulting in severe bleeding.
```

Example: Significant Drug Interaction with Non-VA Med Order

```
***Significant*** Drug Interaction with Prospective Drug:
                       WARFARIN 5MG TAB and

            Non-VA Med: ASPIRIN 325MG TAB
                SIG: ONE TABLET     Schedule: <NOT ENTERED>

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS
```

Example: 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.
```

Example: 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
```

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, Non-VA med or remote medication order, users not holding a PSORPH key shall be presented with the next prompt in the current order entry dialog. They shall 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

Example: Critical Drug Interaction with Local Rx – No Monograph –Backdoor New Order Entry

```
***CRITICAL*** Drug Interaction with Prospective Drug:
                    INDINAVIR 400MG CAP and

         Local RX#: ####
              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// NO
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
```

Example: Significant Drug Interaction with Local Rx – With Monograph – Backdoor New Order Entry

```
*** Significant *** Drug Interaction with Prospective Drug:
                    WARFARIN 5MG TAB and

         Local RX#: ####
              Drug: ASPIRIN 325MG EC TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
     Processing Status: Released locally on 11/08/06@08:55:32  (Window)
    Last Filled On: 11/08/06

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// Yes

Device: Home// <Home would print to screen, or a specific device could be specified>

Professional Monograph
Drug Interaction with WARFARIN and ASPIRIN

This information is generalized and not intended as specific medical advice. Consult your
healthcare professional before taking or discontinuing any drug or commencing any course of
treatment.

MONOGRAPH TITLE:  Anticoagulants/Salicylates

SEVERITY LEVEL:  2-Severe Interaction: Action is required to reduce the risk of severe
adverse interaction.

MECHANISM OF ACTION:  Multiple processes are involved:  1) Salicylate doses greater than 3 gm
daily decrease plasma prothrombin levels. 2) Salicylates may also displace anticoagulants
from plasma protein binding sites. 3) Salicylates impair platelet function, resulting in
prolonged bleeding time. 4) Salicylates may cause gastrointestinal bleeding due to
irritation.

CLINICAL EFFECTS:  The concurrent use of anticoagulants and salicylates may result in
increased INR values and increase the risk of bleeding.

PREDISPOSING FACTORS:  None determined.
```

```
PATIENT MANAGEMENT:  Avoid concomitant administration of these drugs. If salicylate use is
necessary, monitor prothrombin time, bleeding time, or INR values closely.  When possible,
the administration of a non-aspirin salicylate would be preferable.

DISCUSSION:  This interaction has been reported between aspirin and warfarin and between
aspirin and dicumarol.  Diflunisal, sodium salicylate, and topical methyl salicylate have
been shown to interact with anticoagulants as well.  Based on the proposed mechanisms, other
salicylates would be expected to interact with anticoagulants as well. The time of highest
risk for a coumarin-type drug interaction is when the precipitant drug is initiated, altered,
or discontinued.

REFERENCES:
1.Quick AJ, Clesceri L. Influence of acetylsalicylic acid and salicylamide on the coagulation
of blood. J Pharmacol Exp Ther 1960;128:95-8.
2.Watson RM, Pierson RN, Jr. Effect of anticoagulant therapy upon aspirin-induced
gastrointestinal bleeding. Circulation 1961 Sep;24:613-6.
3.Barrow MV, Quick DT, Cunningham RW. Salicylate hypoprothrombinemia in rheumatoid arthritis
with liver disease. Report of two cases. Arch Intern Med 1967 Nov;120(5):620-4.
4.Weiss HJ, Aledort LM, Kochwa S. The effect of salicylates on the hemostatic properties of
platelets in man. J Clin Invest 1968 Sep; 47(9):2169-80.
5.Udall JA. Drug interference with warfarin therapy. Clin Med 1970 Aug; 77:20-5.
6.Fausa O. Salicylate-induced hypoprothrombinemia. A report of four cases. Acta Med Scand
1970 Nov;188(5):403-8.
7.Zucker MB, Peterson J. Effect of acetylsalicylic acid, other nonsteroidal anti-inflammatory
agents, and dipyridamole on human blood platelets. J Lab Clin Med 1970 Jul;76(1):66-75.
8.O'Reilly RA, Sahud MA, Aggeler PM. Impact of aspirin and chlorthalidone on the
pharmacodynamics of oral anticoagulant drugs in man. Ann N Y Acad Sci 1971 Jul 6;179:173-86.
9.Dale J, Myhre E, Loew D. Bleeding during acetylsalicylic acid and anticoagulant therapy in
patients with reduced platelet reactivity after aortic valve replacement. Am Heart J 1980
Jun;99(6):746-52.
10.Donaldson DR, Sreeharan N, Crow MJ, Rajah SM. Assessment of the interaction of warfarin
with aspirin and dipyridamole. Thromb Haemost 1982 Feb 26;47(1):77.
11.Chesebro JH, Fuster V, Elveback LR, McGoon DC, Pluth JR, Puga FJ, Wallace RB, Danielson
GK, Orszulak TA, Piehler JM, Schaff HV. Trial of combined warfarin plus dipyridamole or
aspirin therapy in prosthetic heart valve replacement: danger of aspirin compared with
dipyridamole. Am J Cardiol 1983 May 15;51(9):1537-41.
12.Chow WH, Cheung KL, Ling HM, See T. Potentiation of warfarin anticoagulation by topical
methylsalicylate ointment. J R Soc Med 1989 Aug;82(8):501-2.
13.Meade TW, Roderick PJ, Brennan PJ, Wilkes HC, Kelleher CC. Extra-cranial bleeding and
other symptoms due to low dose aspirin and low intensity oral anticoagulation. Thromb Haemost
1992 Jul 6;68(1):1-6.

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Do you want to Intervene? Y// NO
Remote data not available - Only local order checks processed.

Press Return to Continue...

VERB: TAKE
There are 2 Available Dosage(s):
       1. 5MG
       2. 10MG
.
.
.
  OR

Do you want to Intervene? Y// YES
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     XXX
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
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
```

Example: 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#: ########
              Drug: ASPIRIN 325MG EC TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING)
    Last Filled On: 11/08/06

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// Yes

Device: Home// <Home would print to screen, or a specific device could be specified>

Professional Monograph
Drug Interaction with WARFARIN and ASPIRIN

MONOGRAPH TITLE:  Anticoagulants/Salicylates

SEVERITY LEVEL:  2-Severe Interaction: Action is required to reduce the risk of severe
adverse interaction.

MECHANISM OF ACTION:  Multiple processes are involved:  1) Salicylate doses greater than 3 gm
daily decrease plasma prothrombin levels. 2) Salicylates may also displace anticoagulants
from plasma protein binding sites. 3) Salicylates impair platelet function, resulting in
prolonged bleeding time. 4) Salicylates may cause gastrointestinal bleeding due to
irritation.

CLINICAL EFFECTS:  The concurrent use of anticoagulants and salicylates may result in
increased INR values and increase the risk of bleeding.

PREDISPOSING FACTORS:  None determined.

PATIENT MANAGEMENT:  Avoid concomitant administration of these drugs. If salicylate use is
necessary, monitor prothrombin time, bleeding time, or INR values closely.  When possible,
the administration of a non-aspirin salicylate would be preferable.

DISCUSSION:  This interaction has been reported between aspirin and warfarin and between
aspirin and dicumarol.  Diflunisal, sodium salicylate, and topical methyl salicylate have
been shown to interact with anticoagulants as well.  Based on the proposed mechanisms, other
salicylates would be expected to interact with anticoagulants as well. The time of highest
risk for a coumarin-type drug interaction is when the precipitant drug is initiated, altered,
or discontinued.
```

```
REFERENCES:
1.Quick AJ, Clesceri L. Influence of acetylsalicylic acid and salicylamide on the coagulation
of blood. J Pharmacol Exp Ther 1960;128:95-8.
2.Watson RM, Pierson RN, Jr. Effect of anticoagulant therapy upon aspirin-induced
gastrointestinal bleeding. Circulation 1961 Sep;24:613-6.
3.Barrow MV, Quick DT, Cunningham RW. Salicylate hypoprothrombinemia in rheumatoid arthritis
with liver disease. Report of two cases. Arch Intern Med 1967 Nov;120(5):620-4.
4.Weiss HJ, Aledort LM, Kochwa S. The effect of salicylates on the hemostatic properties of
platelets in man. J Clin Invest 1968 Sep; 47(9):2169-80.
5.Udall JA. Drug interference with warfarin therapy. Clin Med 1970 Aug; 77:20-5.
6.Fausa O. Salicylate-induced hypoprothrombinemia. A report of four cases. Acta Med Scand
1970 Nov;188(5):403-8.
7.Zucker MB, Peterson J. Effect of acetylsalicylic acid, other nonsteroidal anti-inflammatory
agents, and dipyridamole on human blood platelets. J Lab Clin Med 1970 Jul;76(1):66-75.
8.O'Reilly RA, Sahud MA, Aggeler PM. Impact of aspirin and chlorthalidone on the
pharmacodynamics of oral anticoagulant drugs in man. Ann N Y Acad Sci 1971 Jul 6;179:173-86.
9.Dale J, Myhre E, Loew D. Bleeding during acetylsalicylic acid and anticoagulant therapy in
patients with reduced platelet reactivity after aortic valve replacement. Am Heart J 1980
Jun;99(6):746-52.
10.Donaldson DR, Sreeharan N, Crow MJ, Rajah SM. Assessment of the interaction of warfarin
with aspirin and dipyridamole. Thromb Haemost 1982 Feb 26;47(1):77.
11.Chesebro JH, Fuster V, Elveback LR, McGoon DC, Pluth JR, Puga FJ, Wallace RB, Danielson
GK, Orszulak TA, Piehler JM, Schaff HV. Trial of combined warfarin plus dipyridamole or
aspirin therapy in prosthetic heart valve replacement: danger of aspirin compared with
dipyridamole. Am J Cardiol 1983 May 15;51(9):1537-41.
12.Chow WH, Cheung KL, Ling HM, See T. Potentiation of warfarin anticoagulation by topical
methylsalicylate ointment. J R Soc Med 1989 Aug;82(8):501-2.

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Do you want to Intervene? Y// NO

Press Return to Continue...

VERB: TAKE
There are 2 Available Dosage(s):
       1. 5MG
       2. 10MG
.
.
.
  OR

Do you want to Intervene? Y// ES

Press Return to Continue...


Now creating Pharmacy Intervention
for WARFARIN 5MG TAB

PROVIDER: OPPROVIDER,ONE       OPP     XXX
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
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
```

Example: 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#: #######
              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

    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

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// NO
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
```

Example: 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 ...

Now Processing Enhanced Order Checks!  Please Wait...

------------------------------------------------------------------------------
***Critical*** Drug Interaction with Prospective Drug:
                        WARFARIN 5MG TAB and

            Non-VA Med: CIMETIDINE 200MG TAB
                SIG: 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//
```

Example: 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// NO
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
```

Example: Significant Drug Interaction with Pending Rx – With Monograph – Backdoor New Order Entry

```
*** Significant *** Drug Interaction with Prospective Drug
                    WARFARIN 5MG TAB and

      Pending Drug: ASPIRIN 325MG EC TAB
               SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// Yes

Device: Home// <Home would print to screen, or a specific device could be specified>


Professional Monograph
Drug Interaction with WARFARIN and ASPIRIN

This information is generalized and not intended as specific medical advice. Consult your
healthcare professional before taking or discontinuing any drug or commencing any course of
treatment.

MONOGRAPH TITLE:  Anticoagulants/Salicylates

SEVERITY LEVEL:  2-Severe Interaction: Action is required to reduce the risk of severe
adverse interaction.

MECHANISM OF ACTION:  Multiple processes are involved:  1) Salicylate doses greater than 3 gm
daily decrease plasma prothrombin levels. 2) Salicylates may also displace anticoagulants
from plasma protein binding sites. 3) Salicylates impair platelet function, resulting in
prolonged bleeding time. 4) Salicylates may cause gastrointestinal bleeding due to
irritation.

CLINICAL EFFECTS:  The concurrent use of anticoagulants and salicylates may result in
increased INR values and increase the risk of bleeding.

PREDISPOSING FACTORS:  None determined.
```

```
PATIENT MANAGEMENT:  Avoid concomitant administration of these drugs. If salicylate use is
necessary, monitor prothrombin time, bleeding time, or INR values closely.  When possible,
the administration of a non-aspirin salicylate would be preferable.

DISCUSSION:  This interaction has been reported between aspirin and warfarin and between
aspirin and dicumarol.  Diflunisal, sodium salicylate, and topical methyl salicylate have
been shown to interact with anticoagulants as well.  Based on the proposed mechanisms, other
salicylates would be expected to interact with anticoagulants as well. The time of highest
risk for a coumarin-type drug interaction is when the precipitant drug is initiated, altered,
or discontinued.

REFERENCES:
1.Quick AJ, Clesceri L. Influence of acetylsalicylic acid and salicylamide on the coagulation
of blood. J Pharmacol Exp Ther 1960;128:95-8.
2.Watson RM, Pierson RN, Jr. Effect of anticoagulant therapy upon aspirin-induced
gastrointestinal bleeding. Circulation 1961 Sep;24:613-6.
3.Barrow MV, Quick DT, Cunningham RW. Salicylate hypoprothrombinemia in rheumatoid arthritis
with liver disease. Report of two cases. Arch Intern Med 1967 Nov;120(5):620-4.
4.Weiss HJ, Aledort LM, Kochwa S. The effect of salicylates on the hemostatic properties of
platelets in man. J Clin Invest 1968 Sep; 47(9):2169-80.
5.Udall JA. Drug interference with warfarin therapy. Clin Med 1970 Aug; 77:20-5.
6.Fausa O. Salicylate-induced hypoprothrombinemia. A report of four cases. Acta Med Scand
1970 Nov;188(5):403-8.
7.Zucker MB, Peterson J. Effect of acetylsalicylic acid, other nonsteroidal anti-inflammatory
agents, and dipyridamole on human blood platelets. J Lab Clin Med 1970 Jul;76(1):66-75.
8.O'Reilly RA, Sahud MA, Aggeler PM. Impact of aspirin and chlorthalidone on the
pharmacodynamics of oral anticoagulant drugs in man. Ann N Y Acad Sci 1971 Jul 6;179:173-86.
9.Dale J, Myhre E, Loew D. Bleeding during acetylsalicylic acid and anticoagulant therapy in
patients with reduced platelet reactivity after aortic valve replacement. Am Heart J 1980
Jun;99(6):746-52.
10.Donaldson DR, Sreeharan N, Crow MJ, Rajah SM. Assessment of the interaction of warfarin
with aspirin and dipyridamole. Thromb Haemost 1982 Feb 26;47(1):77.
11.Chesebro JH, Fuster V, Elveback LR, McGoon DC, Pluth JR, Puga FJ, Wallace RB, Danielson
GK, Orszulak TA, Piehler JM, Schaff HV. Trial of combined warfarin plus dipyridamole or
aspirin therapy in prosthetic heart valve replacement: danger of aspirin compared with
dipyridamole. Am J Cardiol 1983 May 15;51(9):1537-41.
12.Chow WH, Cheung KL, Ling HM, See T. Potentiation of warfarin anticoagulation by topical
methylsalicylate ointment. J R Soc Med 1989 Aug;82(8):501-2.
13.Meade TW, Roderick PJ, Brennan PJ, Wilkes HC, Kelleher CC. Extra-cranial bleeding and
other symptoms due to low dose aspirin and low intensity oral anticoagulation. Thromb Haemost
1992 Jul 6;68(1):1-6.

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Do you want to Intervene? Y// NO
Remote data not available - Only local order checks processed.


Press Return to Continue...

VERB: TAKE
There are 2 Available Dosage(s):
       1. 5MG
       2. 10MG
.
.
.
  OR

Do you want to Intervene? Y// ES
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention
for WARFARIN 5MG TAB

PROVIDER: 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// 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//   YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 5MG

NOUN: TABLET
ROUTE: PO//   ORAL      PO  MOUTH
```

Example: 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#: ####
              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// NO

Rx ####              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//
```

Example: 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#: ####
              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: REDACTED                                    Ht(cm): 187.96 (07/05/1994)
  DOB: REDACTED                                    Wt(kg): 77.27 (07/05/1994)
  SEX: MALE                Non-VA Meds on File      Last entry on 06/17/15
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 2.07

CPRS Order Checks:
```

```
       SIGNIFICANT drug-drug interaction: ASPIRIN & IBUPROFEN (ASPIRIN TAB,EC  325MG
       TAKE ONE TABLET BY MOUTH EVERY MORNING  [ACTIVE])
     Overriding Provider: OERRPROVIDER, ONE
     Overriding Reason: TESTING

      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
IBUPROFEN 600MG TAB : P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for IBUPROFEN 600MG 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// NO

Rx # ####              10/19/07
OPPATIENT, ONE              #90
TAKE ONE TABLET BY MOUTH THREE TIMES A DAY WITH FOOD OR MILK

IBUPROFEN 600MG 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//

Example: 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// NO

Rx # ####              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//
```

Example: 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#: ####
              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: REDACTED                                    Ht(cm): 187.96 (07/05/1994)
  DOB: REDACTED                                    Wt(kg): 77.27 (07/05/1994)
  SEX: MALE                 Non-VA Meds on File      Last entry on 06/17/15
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 2.07

CPRS Order Checks:
       SIGNIFICANT drug-drug interaction: ASPIRIN & IBUPROFEN (ASPIRIN TAB,EC  325MG
      TAKE ONE TABLET BY MOUTH EVERY MORNING  [ACTIVE])
     Overriding Provider: OERRPROVIDER, ONE
     Overriding Reason: TESTING

      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
IBUPROFEN 600MG TAB : P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for IBUPROFEN 600MG 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// NO
```

```
Rx # ####              10/19/07
OPPATIENT, ONE              #90
TAKE ONE TABLET BY MOUTH THREE TIMES A DAY WITH FOOD OR MILK

IBUPROFEN 600MG 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//
```

Example: Critical Interaction –Renewing an Order

```
OP Medications (ACTIVE)       Feb 14, 2008@07:25:28          Page:  1 of  3
OPPATIENT,THREE                                                          <A>
  PID: REDACTED                                    Ht(cm): 167.64 (10/16/1993)
  DOB: REDACTED                                    Wt(kg): 68.18 (10/16/1993)
  SEX: MALE                 Non-VA Meds on File      Last entry on 06/17/15
 CrCL: <Not Found> (CREAT: Not Found)           BSA (m2): _______

                Rx #: #####
 (1) *Orderable Item: WARFARIN TAB
 (2)             Drug: WARFARIN 2.5MG TAB
                  NDC: #####-####-##
 (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
+         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 # ####   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#: ####
              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// YES

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// NO

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//
```

Example: Significant Interaction – Renewing an Order

```
OP Medications (ACTIVE)       Feb 14, 2008@07:15:31          Page:    1 of    3
OPPATIENT,THREE                                                              <A>
  PID:  REDACTED                                   Ht(cm): 167.64 (10/16/1993)
  DOB: REDACTED                                    Wt(kg): 68.18 (10/16/1993)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

                Rx #: #####
 (1) *Orderable Item: INDOMETHACIN CAP,ORAL
 (2)            Drug: INDOMETHACIN 25MG CAP
                 NDC: #####-####-##
 (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 # ####   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#: ####
              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//
```

Example: Copying An Order – Critical Interaction

```
OP Medications (ACTIVE)       Feb 14, 2008@09:20:04       Page:    1 of    3
OPPATIENT,TWO                                                            <A>
  PID: REDACTED                                    Ht(cm): 167.64 (10/16/1993)
  DOB: REDACTED                                    Wt(kg): 68.18 (10/16/1993)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

                Rx #: #####
 (1) *Orderable Item: WARFARIN TAB
 (2)            Drug: WARFARIN 2.5MG TAB
                 NDC: #####-####-##
 (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
+         Enter ?? for more actions

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@09:20:04          Page:    1 of    2
OPPATIENT,TWO                                                            <A>
  PID: REDACTED                                    Ht(cm): 167.64 (10/16/1993)
  DOB: REDACTED                                    Wt(kg): 68.18 (10/16/1993)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.78

      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 #: ####
             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 ##### WARFARIN 2.5MG TAB? Y/N  YES

Rx ##### 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:
                   WARFARIN 2.5MG TAB and

         Local RX#: ####
              Drug: AMIODARONE 200MG TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY
     Processing Status: Released locally on 02/18/06@08:55:32  (Window)
    Last Filled On: 02/18/08

The pharmacologic effects of warfarin may be increased resulting in severe bleeding.

Display Professional Interaction Monograph? No// No

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
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention
for WARFARIN 2.5MG TAB

PROVIDER:    OPPROVIDER,ONE     OPP     XXX
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
Nature of Order: WRITTEN//
.
.
.
   OR


Do you want to Continue? Y// NO
Duplicate Drug Rx ##### WARFARIN 2.5MG TAB was NOT Discontinued.
```

Example: Copying an Order – Significant Interaction

```
Medication Profile            Feb 14, 2008@08:56:40          Page:    1 of    1
OPPATIENT,TWO                                                          <A>
  PID: REDACTED                                    Ht(cm): 167.64 (10/16/1993)
  DOB: REDACTED                                    Wt(kg): 68.18 (10/16/1993)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.78
                                                            ISSUE  LAST REF DAY
 #  RX #         DRUG                                QTY ST  DATE  FILL REM SUP

-------------------------------------ACTIVE-------------------------------------
 1 #####         AMINOPHYLLINE 200MG TAB             120 A  02-13 02-13  11  30
 2 #####         ASPIRIN 325MG EC TAB                 30 A  02-13 02-13  11  30
 3 #####         CIMETIDINE 300MG TAB                 30 A  02-13 02-13  11  30
 4 #####         INDOMETHACIN 25MG CAP                90 A  02-13 02-13  11  30
 5 #####         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: REDACTED                                      Ht(cm): 167.64 (10/16/1993)
  DOB: REDACTED                                      Wt(kg): 68.18 (10/16/1993)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.78

      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 #: ####
             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 ##### ASPIRIN 325MG EC TAB? Y/N  YES

Rx ##### 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#: ####
             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// NO
Nature of Order: WRITTEN//
```

Example: Verifying an Order – Critical Drug Interaction

```
OP Medications (NON-VERIFIED) Feb 13, 2008@08:49:48          Page:    1 of    2
PSOPATIENT,TWO                                                          <A>
  PID: REDACTED                                    Ht(cm): 167.64 (10/16/1993)
  DOB: REDACTED                                    Wt(kg): 68.18 (10/16/1993)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

                Rx #: #####
 (1) *Orderable Item: AMINOPHYLLINE TAB
 (2)            Drug: AMINOPHYLLINE 200MG TAB
                 NDC: #####-####-##
 (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
+         Enter ?? for more actions
DC   Discontinue          PR   (Partial)            RL   (Release)
ED   (Edit)               RF   (Refill)             RN   (Renew)
Select Action: Next Screen// VF   VF


PSOPATIENT,TWO                                   ID#:XXX-XX-XXXX  RX #####

                                                                ISSUE  LAST REF DAY
    RX #         DRUG                                    QTY ST  DATE  FILL REM SUP
-------------------------------------------------------------------------------
----------------------------------NON-VERIFIED---------------------------------
 1 #####         AMINOPHYLLINE 200MG TAB                 120 N  02-13 02-13  11  30
 2 #####         ASPIRIN 325MG EC TAB                     30 N  02-13 02-13  11  30
 3 #####         CIMETIDINE 300MG TAB                     30 N  02-13 02-13  11  30
 4 #####         INDOMETHACIN 25MG CAP                    90 N  02-13 02-13  11  30
 5 #####         WARFARIN 2.5MG TAB                       30 N  02-13 02-13  11  30
```

```
Press RETURN to Continue:

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

***CRITICAL*** Drug Interaction with Prospective Drug:
                   AMINOPHYLLINE 200MG TAB and

        Local RX#: ####
             Drug: CIMETIDINE 300MG (ACTIVE)
              SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
    Processing Status: Released locally on 11/08/08@08:55:32  (Window)
   Last Filled On: 11/08/08

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


Medication Profile            Feb 13, 2008@08:50:04          Page:    1 of    1
PSOPATIENT,TWO                                                          <A>
  PID: REDACTED                                  Ht(cm): 167.64 (10/16/1993)
  DOB: REDACTED                                  Wt(kg): 68.18 (10/16/1993)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.78

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

----------------------------------NON-VERIFIED----------------------------------
 1 #####         AMINOPHYLLINE 200MG TAB             120 N  02-13 02-13  11  30
 2 #####         ASPIRIN 325MG EC TAB                 30 N  02-13 02-13  11  30
 3 #####         CIMETIDINE 300MG TAB                 30 N  02-13 02-13  11  30
 4 #####         INDOMETHACIN 25MG CAP                90 N  02-13 02-13  11  30
 5 #####         WARFARIN 2.5MG TAB                   30 N  02-13 02-13  11  30


          Enter ?? for more actions

ED   (Edit)               RF   (Refill)             RN   (Renew)
.
.

    OR

Do you want to Continue? Y// YES

Do you want to Process or Cancel medication?
Rx #####  DRUG: AMINOPHYLLINE 200MG TAB: PROCESS//

Enter your Current Signature Code:    SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for AMINOPHYLLINE 200MG TAB

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

RX: ####            PATIENT: PSOPATIENT,TWO (XXX-XX-XXXX)
STATUS: Non-Verified   CO-PAY STATUS
      DRUG: AMINOPHYLLINE 200MG TAB
       QTY: 120     30 DAY SUPPLY
       SIG: TAKE ONE TABLET BY MOUTH EVERY 6 HOURS
    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: PSOPHARMACIST,ONE             VERIFIED BY:


LABEL LOG:
#  DATE       RX REF                    PRINTED BY
================================================================================

1  02/13/08   ORIGINAL                  OPCLERK,ONE
COMMENTS: From RX number #### Drug-Drug interaction
PATIENT STATUS : OPT NSC                 COPIES : 1
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...

EDIT:  (Y/N/P): N// O
VERIFY FOR PSOPATIENT,TWO ? (Y/N/Delete/Quit): Y// YES
```

Example: Verifying an Order – Significant Drug Interaction

```
OP Medications (NON-VERIFIED) Feb 13, 2008@08:51:40          Page:    1 of    2
PSOPATIENT,TWO                                                          <A>
  PID: REDACTED                                    Ht(cm): 167.64 (10/16/1993)
  DOB: REDACTED                                    Wt(kg): 68.18 (10/16/1993)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

               Rx #: #####
 (1) *Orderable Item: INDOMETHACIN CAP,ORAL
 (2)            Drug: INDOMETHACIN 25MG CAP
                 NDC: #####-####-##
 (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


PSOPATIENT,TWO                                  ID#:XXX-XX-XXXX  RX #####

                                                                ISSUE  LAST REF DAY
    RX #         DRUG                                    QTY ST  DATE  FILL REM SUP
--------------------------------------------------------------------------------
-------------------------------------ACTIVE-------------------------------------
 1 #####         AMINOPHYLLINE 200MG TAB                 120 A  02-13 02-13  11  30
 2 #####         ASPIRIN 325MG EC TAB                     30 A  02-13 02-13  11  30
-----------------------------------NON-VERIFIED---------------------------------
 3 #####         CIMETIDINE 300MG TAB                     30 N  02-13 02-13  11  30
```

```
 4 #####         INDOMETHACIN 25MG CAP                90 N  02-13 02-13  11  30
 5 #####         WARFARIN 2.5MG TAB                   30 N  02-13 02-13  11  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:
                     INDOMETHACIN 25MG CAP and

  Local RX#: #####
             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

RX: ####            PATIENT: PSOPATIENT,TWO (XXX-XX-XXXX)
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
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

RX: ####            PATIENT: PSOPATIENT,TWO (XXX-XX-XXXX)
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
VERIFY FOR PSOPATIENT,TWO ? (Y/N/Delete/Quit): Y// YES
```

Example: Reinstating A Discontinued Order – Critical Interaction

```
                Rx #: ####
 (1) *Orderable Item: AMINOPHYLLINE TAB
 (2)             Drug: AMINOPHYLLINE 200MG TAB
                  NDC: #####-####-##
 (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
===============================================================================

####  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#: ####
              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


Medication Profile            Feb 14, 2008@11:43:17          Page:    1 of    1
PSOPATIENT, TEN                                                      <A>
  PID: REDACTED                                     Ht(cm): _______ (______)
  DOB: REDACTED                                     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 ####          CIMETIDINE 300MG TAB                 60 A  06-25 02-12  11  30
 2 ####          INDINAVIR 400MG CAP                  90 A  02-12 02-12  11  30
 3 ####          RIFAMPIN 300MG CAP                  120 A  06-25 02-12  11  30
 4 ####          WARFARIN 5MG TAB                     30 A  02-12 02-12  11  30
----------------------------------DISCONTINUED----------------------------------
 5 ####          AMINOPHYLLINE 200MG TAB             120 DC 06-25 02-12  11  30
 6 ####          AMIODARONE 200MG TAB                180 DC 02-14 02-14  11  30
 7 ####          ASPIRIN 325MG EC TAB                 30 DC 06-25 02-12  11  30
 8 ####          CARBAMAZEPINE 200MG TAB              90 DC 06-25 02-12  11  30
 9 ####          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// NO

Prescription #2473 REINSTATED!
   Prescription #2473 Filled:  JUN 25, 2007Printed: JUN 25, 2007Released:
     ** Do you want to print the label now? N// NO


ED   (Edit)               RF   (Refill)             RN   Renew
```

Example: Reinstating A Discontinued Order – Significant Interaction

```
               Rx #: ####
 (1) *Orderable Item: ASPIRIN TAB,EC
 (2)            Drug: ASPIRIN 325MG EC TAB <DIN>
                 NDC: #####-####-##
 (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: REINSTATING
Nature of Order: SERVICE CORRECTION//        S
================================================================================

####  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#: ####
              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 ##### REINSTATED!
   Prescription ##### Filled: FEB 12, 2007Printed:      Released:
     Either print the label using the reprint option
       or check later to see if the label has been printed.
.
.

   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// NO

Prescription #XXXX REINSTATED!
   Prescription #XXXX Filled:  JUN 25, 2007Printed: JUN 25, 2007Released:
     ** Do you want to print the label now? N// NO
```

Example: Creating a New Order – Editing the Orderable Item – Duplicate Drug

```
Medication Profile           Feb 14, 2008@12:26:38          Page:    1 of    2
OPPATIENT, ONE                                                      <A>
  PID: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    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 ####          AMINOPHYLLINE 200MG TAB              120 A  06-25 02-12  11  30
2 ####          ASPIRIN 325MG EC TAB                  30 A  02-14 02-14  11  30
3 ####          CARBAMAZEPINE 200MG TAB               90 A  06-25 02-12  11  30
4 ####          CIMETIDINE 300MG TAB                  60 A  06-25 02-12  11  30
5 ####          INDINAVIR 400MG CAP                   90 A  02-12 02-12  11  30
6 ####          RIFAMPIN 300MG CAP                   120 A  06-25 02-12  11  30
-----------------------------------DISCONTINUED---------------------------------
7 ####          AMIODARONE 200MG TAB                 180 DC 02-14 02-14  11  30
8 ####          DIPYRIDAMOLE 25MG TAB                 30 DE 02-14 02-14  11  30
9 ####          WARFARIN 2.5MG TAB                    90 DC 02-12 02-12  11  30
+         Enter ?? for more actions

     PU  Patient Record Update                NO  New Order
PI  Patient Information               SO  Select OrderSelect Action: Next Screen// 2


OP Medications (ACTIVE)      Feb 14, 2008@12:26:38          Page:    1 of    2
OPPATIENT, ONE                                                      <A>
  PID: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): _______

               Rx #: ####
 (1) *Orderable Item: ASPIRIN TAB,EC
 (2)            Drug: ASPIRIN 325MG EC TAB <DIN>
                 NDC: #####-####-##
 (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: 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...
```

```
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...

------------------------------------------------------------------------------
Duplicate Drug in Local Rx:

               Rx #: ####
               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
------------------------------------------------------------------------------

Discontinue RX ##### AMIODARONE 200MG TAB? Y/N NO -Prescription was not discontinued...


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

***CRITICAL*** Drug Interaction with Prospective Drug:
                      AMIODARONE 200MG TAB and

            Local RX#: ####
                 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


OP Medications (ACTIVE)       Feb 14, 2008@12:27:09          Page:    1 of    2
OPPATIENT, ONE                                                        <A>
  PID: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): _______
                Rx #: ####
 (1) *Orderable Item: ASPIRIN TAB,EC
 (2)            Drug: ASPIRIN 325MG EC TAB <DIN>
                 NDC: #####-####-##
 (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: 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
```

Example: Editing An Order – Creating a New Order – Significant Interaction

```
OP Medications (ACTIVE)       Feb 14, 2008@12:27:09          Page:    1 of    2
OPPATIENT,TWO                                                      <A>
  PID:  REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                     Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): _______

                Rx #: ####
 (1) *Orderable Item: ASPIRIN TAB,EC
 (2)            Drug: ASPIRIN 325MG EC TAB <DIN>
                 NDC: #####-####-##
 (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: 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!

Enter RETURN to continue or '^' to exit:

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...

--------------------------------------------------------------------------------
```

```
Duplicate Drug in Local Rx:

               Rx #: ####
               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:

-------------------------------------------------------------------------------
***SIGNIFICANT*** Drug Interaction with Prospective Drug:
                      AMIODARONE 200MG TAB and

            Local RX#: ####
                 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
```

Example: 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
                SIG: 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#: ####
              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 EFFFECTS

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.

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Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for WARFARIN 5MG TAB

PROVIDER: OPPROVIDER,ELEVEN   EPP
RECOMMENDATION: NO CHANGE

```
See 'Pharmacy Intervention Menu' if you want to delete this
intervention or for more options.

Would you like to edit this intervention ? N// O
.
.

   OR
Do you want to Intervene? Y// NO


VERB: TAKE
There are 2 Available Dosage(s):
       1. 5MG
       2. 10MG

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list:
```

Example: Finishing a Pending Order by Non-Pharmacist

```
------------------------------------------------------------------------------

***Critical*** Drug Interaction with Prospective Drug:
                        WARFARIN 5MG TAB and

            Non-VA Med: CIMETIDINE 300MG TAB
                SIG: 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#: ####
              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


Rx # ####              03/04/08
OPPATIENT,ONE               #90
TAKE ONE TABLET BY MOUTH EVERY EVENING

WARFARIN 5MG TAB
```

```
OERRPROVIDER,ONE     PSOPHARMACIST,ONE
# of Refills: 3


       SC Percent: 80%
     Disabilities: NONE STATED

Was treatment for a Service Connected condition? YES//
```

Example: Pharmacist Verifying Order with Two Drug Interactions

```
OP Medications (NON-VERIFIED) Mar 04, 2008@11:55:21          Page:    1 of    2
OPPATIENT,ONE                                                          <A>
  PID: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): _______

                Rx #: ####
 (1) *Orderable Item: WARFARIN TAB
 (2)            Drug: WARFARIN 5MG TAB
                 NDC: #####-####-##
 (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: ####            PATIENT: OPPATIENT,ONE (XXX-XX-XXXX)
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: XXXXXX CLINIC
   EXPIRES: 03/05/09                    DIVISION: XXXXX (499)
       CAP: SAFETY                       ROUTING: WINDOW
  ENTRY BY: OERRPROVIDER,ONE            VERIFIED BY:

EDIT:  (Y/N/P): N// O



OPPATIENT,ONE                                      ID#:REDACTED     RX #####

                                                                ISSUE  LAST REF DAY
    RX #         DRUG                                  QTY ST  DATE  FILL REM SUP
-------------------------------------------------------------------------------
-----------------------------------ACTIVE--------------------------------------
 1 ####          IBUPROFEN 600MG TAB                   270 A  03-03 03-04   3  90
---------------------------------NON-VERIFIED----------------------------------
 2 ####          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 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
                SIG: 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#: ####
              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// NO

RX: ####            PATIENT: OPPATIENT,ONE (XXX-XX-XXX)
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: XXXXXX CLINIC
   EXPIRES: 03/05/09                     DIVISION: XXXXX (###)
       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
VERIFY FOR OPPATIENT,ONE ? (Y/N/Delete/Quit): Y// ES




Medication Profile            Mar 04, 2008@11:55:31          Page:    1 of    1
OPPATIENT,ONE                                                        <A>
  PID: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      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 ####         IBUPROFEN 600MG TAB                 270 A  03-03 03-04   3  90
 2 ####         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.

Example: 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#: ####
              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#: ####
              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 Processing Enhanced Order Checks!  Please wait...

-------------------------------------------------------------------------------
  ***Critical***  Drug Interaction with Prospective Drug:
                       WARFARIN (C0UMADIN) NA 5MG TAB and

            Local Rx#: ######
                 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#: ######
                 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
       SIG: 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#: ######
                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
              SIG: 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// NO
```

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 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...

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

A Drug-Allergy Reaction exists for this medication and/or class!

    Prospective Drug: DILTIAZEM (DILACOR XR) 240MG SA CAP
     Causative Agent: DILTIAZEM (SITE REPORTING ALLERGY - DATE REPORTED)
 Historical/Observed: OBSERVED
            Severity: MODERATE
         Ingredients: DILTIAZEM
      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 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...

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

A Drug-Allergy Reaction exists for this medication and/or class!

    Prospective Drug: SEPTRA DS TAB
     Causative Agent: SULFADIAZINE/SULFAMERAZINE/SULFAMETHAZINE(SITE REPORTING ALLERGY - DATE
REPORTED)
 Historical/Observed: HISTORICAL
            Severity: Not Entered
      Signs/Symptoms: ITCHING,WATERING EYES, ANOREXIA, NAUSEA,VOMITING,
                      ANXIETY, DROWSINESS,
          Drug Class: AM650 SULFONAMIDE/RELATED ANTIMICROBIALS
   Provider Override Reason: N/A - Order Check Not Evaluated by Provider

Do you want to Intervene? YES//

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: REDACTED                                 Ht(cm): 167.64 (06/10/1993)
  DOB: REDACTED                                 Wt(kg): 68.18 (06/10/1993)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)           BSA (m2): 1.95
+

*(1) Orderable Item: SULFAMETHOXAZOLE/TRIMETHOPRIM TAB
 (2)           Drug: SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
               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 24,200
+         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...

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

A Drug-Allergy Reaction exists for this medication and/or class!

    Prospective Drug: SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
     Causative Agent: SULFADIAZINE/SULFAMERAZINE/SULFAMETHAZINE(SITE REPORTING ALLERGY - DATE
REPORTED)
 Historical/Observed: HISTORICAL
           Severity: Not Entered
        Ingredients: SULFAMETHOXAZOLE, TRIMETHOPRIM
      Signs/Symptoms: ITCHING,WATERING EYES, ANOREXIA,
                      NAUSEA,VOMITING, ANXIETY, DROWSINESS,
         Drug Class: AM650 SULFONAMIDE/RELATED ANTIMICROBIALS

   Provider Override Reason: Patient says has taken before

Do you want to Intervene? YES//

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 # ####              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
```

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 120 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 as 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:

Example: Local RX

```
================================================================================
*** THERAPEUTIC DUPLICATION(S) *** FAMOTIDINE 20MG TAB with

            Local Rx#: ####
                 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)
================================================================================
```

Example: Remote Rx

```
================================================================================
*** THERAPEUTIC DUPLICATION(S) *** SUCRALFATE 1GM TAB with

        LOCATION: <VA OR DOD FACILITY>   Remote Rx#: #####
                 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
================================================================================
```

Example: 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
================================================================================
```

Example: Non-VA Med Order

```
================================================================================

*** THERAPEUTIC DUPLICATION(S) *** FAMOTIDINE 20MG TAB with

           Non-VA Med: CIMETIDINE 300MG TAB
               SIG: 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 ##### (ACTIVE) for CIMETIDINE 300MG TAB

   Local Rx ##### (PROVIDER HOLD) for SUCRALFATE 1MG TAB

   Remote Rx ##### (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
ANTAGOINSTS (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 ###### 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 ##### 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 ##### AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
    2. RX ##### CHOLESTYRAMINE 9GM PACKETS

Select (1-2):  1  Duplicate Therapy RX ##### AMLODIPINE 5MG/ATORVASTATIN 10MG TAB will be
discontinued after the acceptance of the new order.
Discontinue order(s)? Y/N  Y es

    1. RX ##### 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 shall not discontinue the order(s) selected.

The message displayed to the user shall 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 'NOT Discontinued.'

See examples below:

```
Duplicate Therapy  RX ##### 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 shall inform the user when the discontinuation occurs.

The message displayed to the user shall 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 ##### CIMETIDINE 300MG TAB has been discontinued...

Duplicate Therapy  Pending Order RANITIDINE  150MG TAB has been discontinued…
```

See Therapeutic Duplication examples below:

Example: 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: #####-####-##
 (3)        *Dosage: 20 (MG)
               Verb: TAKE
     Dispense Units: 1
               Noun: TABLET
             *Route: ORAL
+         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) *** FAMOTIDINE 20MG TAB with

            Local Rx#: ####
                 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
               SIG: 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 # ####              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//
```

Example: 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#: ####
                 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...

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:
.

         OR

Discontinue order(s)? Y/N  Y es

    1. Pending Order FAMOTIDINE 20MG TAB
    2. RX ##### CIMETIDINE 300MG TAB

Select (1-2):  2  RX ##### CIMDTIDINE 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:    XXXXXX 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 # ####              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 ##### CIMETIDINE 300MG TAB has been discontinued...


Another New Order for PSOPATIENT,ONE? YES//
```

Example: 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: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      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#: ####
                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#: ####
                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 ##### AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
    2. RX ##### CHOLESTYRAMINE 9GM PACKETS

Select (1-2):  1  RX ##### AMLODIPINE 5MG/ATORVASTATIN 10MG TAB will be discontinued after
the acceptance of the new order.
```

```
Rx # ####              03/12/08
TEST,D                          #XX
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 ##### AMLODIPINE 5MG/ATORVASTATIN 10MG TAB has been discontinued...

Press Return to Continue:
```

Example: 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 # ####   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#: ####
                 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#: ####
                 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#: #####
```

```
                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 ##### NIZATIDINE 150MG CAP? Y/N  No

Press Return to Continue:

2580A        SUCRALFATE 1MG TAB               QTY: 360
# OF REFILLS: 3  ISSUED: 03-01-08
SIG: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY
FILLED: 03-01-08
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//
```

Example: Verification of Non-Verified Order

```
OP Medications (NON-VERIFIED) Dec 20, 2011@14:45:54          Page:    1 of    2
PSOPATIENT,ONE                                                      <A>
  PID: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): _______


               Rx #: #####
 (1) *Orderable Item: NIZATIDINE CAP,ORAL
 (2)            Drug: NIZATIDINE 150MG CAP
                 NDC: #####-####-##
 (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: ####            PATIENT: PSOPATIENT,ONE (XXX-XX-XXXX)
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#:REDACTED  RX#: ####
```

```
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...

                                                          ISSUE  LAST REF DAY
    RX #         DRUG                                QTY ST  DATE  FILL REM SUP
------------------------------------------------------------------------------
-------------------------------------ACTIVE-----------------------------------
   #####         ACETAMINOPHEN 325MG TAB U.D.         540 A  12-20 12-20   3  90
   #####         WARFARIN 2.5MG TABS                   90 A  12-20 12-20   3  90
-----------------------------------DISCONTINUED-------------------------------
   #####         INDOMETHACIN 25MG CAP                270 DC 12-20 12-20   3  90
   #####         WARFARIN 10MG TABS                  2160 DC 12-20 12-20   3  90
---------------------------------NON-VERIFIED---------------------------------
   #####         NIZATIDINE 150MG CAP                 180 N  12-20 12-20   3  90
   #####         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#: ####
             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 ##### SUCRALFATE 1 GM TAB Y/N ? NO

PSOPATIENT,ONE                          ID#:XXX-XX-XXXX  RX#: ####
NIZATIDINE 150MG CAP

VERIFY FOR PSOPATIENT,ONE ? (Y/N/Delete/Quit): Y// YES
```

Example: Copying an Existing Order

```
New OP Order (COPY)          Mar 12, 2008@09:15:48        Page:    1 of    2
PSOPATIENT,TWO                                                        <A>
  PID: REDACTED                                    Ht(cm): 182.88 (04/13/2005)
  DOB: REDACTED                                    Wt(kg): 77.27 (04/13/2005)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

      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 #: ####
             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 ##### AMLODIPINE 5MG/ATORVASTATIN 10MG TAB? Y/N YES

Rx ##### AMLODIPINE 5MG/ATORVASTATIN 10MG 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...

==============================================================================
*** 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  Pending Order NIFEDIPINE 10MG CAP will be discontinued after the
acceptance of the new order.
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 # ####              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 #### 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…
```

Example: Reinstating a Discontinued Order

```
                Rx #: ####
 (1) *Orderable Item: CIMETIDINE TAB
 (2)            Drug: CIMETIDINE 300MG TAB
                 NDC: #####-####-##
 (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#: ####
                 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 # #### SUCRALFATE 1GM TAB? Y/N NO - Prescription was not discontinued...


Prescription #XXXX REINSTATED!
   Prescription #XXXX Filled: MAR 12, 2008Printed:      Released:
     Either print the label using the reprint option
       or check later to see if the label has been printed.
```

Example: Creating a New Order – Editing the Orderable Item

```
               Rx #: ####
 (1) *Orderable Item: ENALAPRIL TAB ***(N/F)***
 (2)            Drug: ENALAPRIL 5MG TAB ***(N/F)***
                 NDC: #####-####-##
 (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#: ####
                 Drug: WAFFARIN 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 # #### WAFFARIN 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: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    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 # ####              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// ...
```

Example: Cancel drug in same class parameter set to No

```
PSOPATIENT,ONE                                                          <A>
  PID: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    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 ####       AMINOPHYLLINE 200MG TAB              360 A  03-04 03-04   3  90
 2 ####       CAPTOPRIL 12.5MG TAB                 180 A  03-06 03-06   3  90
 3 ####       CISAPRIDE 10MG                        90 A  03-06 03-06   3  90
 4 ####       DIGOXIN 0.125MG                       30 A  03-06 03-06   3  90
 5 ####       IBUPROFEN 600MG TAB                  270 A  03-03 03-04   3  90
 6 ####       WARFARIN 5MG TAB                      90 A  03-04 03-04   3  90
---------------------------------DISCONTINUED-------------------------------
 7 ####       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)

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 ##### (ACTIVE) for CIMETIDINE 300MG TAB

   Local Rx ##### (PROVIDER HOLD) for SUCRALFATE 1MG TAB

   Remote Rx ##### (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
ANTAGOINSTS (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:
```

Example: 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           #####
         ...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#: #####
              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#: ####
              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 ##### for RANITIDINE HCL 150MG TAB Y/N ? YES

Duplicate Therapy RX ##### 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 #### RANITIDINE HCL 150MG TAB NOT Discontinued.
```

Chapter 18: 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.

Note: Please refer to the Dosing Order Checks User Manual for a detailed description of dosing order checks.

Chapter 19: Pull Early from Suspense

This chapter describes the option for pulling prescriptions early from the SUSPENSE file.

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. A label cannot be reprinted with the *Reprint Batches from Suspense* option if the prescription has been pulled early suspense. In addition, Method of Pickup can be edited. Also, there is no longer a "DELETE FROM SUSPENSE PROMPT." That prompt has been changed to "Pull Rx(s) and delete from Suspense." Yes must be answered to this prompt to pull the prescriptions, and they will always be deleted from suspense. 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.

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#1###### Fill#0 has already been printed
Do you want to continue? No//   NO
Reprint Flag is on.  Prescription left on suspense.
```

If the prescription being pulled from suspense has an FDA Medication Guide associated, the user will be required to enter a valid FDA Medication Guide printer.

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 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. 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) or Drug Utilization Review (88 or 943) reject, the label is not printed for the prescription and it is moved to the Refill Too Soon/DUR 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.

Chapter 20: Queue CMOP Prescription

This chapter describes the option for suspending prescriptions for mail-routed CMOP drugs.

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: ######
```

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.

Chapter 21: 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)    ANYTOWN 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# ###### (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>
```

Example: MailMan Message (continued)

```
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 for whatever reason (e.g. prescription fill is returned to stock and copay charges cancelled), a patient falls below the annual copayment cap, the Integrated Billing package can initiate copay charges to bring the patient back up to the annual copayment cap. Integrated billing software will go back and bill a copay charge for those fills previously not charged due to the annual cap, bringing the patient's total copayment up to the cap. Whenever this occurs an entry will be placed in the copay activity log.

Example: Copay Activity Log With IB-Initiated Charge

```
Copay Activity Log:
#   Date        Reason               Rx Ref         Initiator Of Activity
================================================================================
1   10/23/01    ANNUAL CAP REACHED   ORIGINAL       OPPHARMACIST11,THREE
Comment:  NO BILLING FOR THIS FILL
2   10/23/01    IB-INITIATED COPAY   ORIGINAL       OPPHARMACIST11,THREE
Comment: PARTIAL CHARGE
```

If a prescription is not in a releasable status, the user will be given an error message, such as:

- Prescription has a status of (status) and is not eligible for release.
- Prescription was deleted.
- Improper barcode format.
- Non-existent prescription.

Copay is not charged for a partial fill.

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

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 #: #########   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
```

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* option in the *Controlled Substances* (CS) menu. If PIV/PKI is activated and an order is digitally signed, the user will be advised that the order must be released through the *Outpatient Rx* 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 Medications* 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 '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".

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      : ANYTOWN CLINIC
CPRS Order #  : XXXXXXX
Issue Date    : MAR 7,2012
Patient       : TEST,PATIENT (0908)
Address       : P.O. BOX 31
                ANYTOWN, CA  XXXXX
Drug          : CODEINE SULFATE 60MG TAB
Dosage Ordered: 120(MG)
Dosage Form   : TABLETS
Quantity      : 54
Provider      : TEST,PROVIDER
DEA#          : #########
Site Address  : #### E PERSHING BLVD
                #### East Pershing Boulevard
                ANYTOWN
```

```
Differences in CPRS and Pharmacy Pending File

Data Name           CPRS File         Pharmacy Pending File
---------           ---------         ---------------------

QTY PRESCRIBED      15                30
```

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.

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 ######## Released
       No Refill(s) to be Released
       No Partial(s) to be Released
```

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 file 50.

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 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: #########
NDC: #####-####-## // ?

Select one of the following valid NDC code(s) below:

          1 - 00580-0277-10

NDC: #####-####-## // <Enter> #####-####-##
       Prescription Number ######### Released
       No Refill(s) to be Released
       No Partial(s) to be Released
```

Example: Releasing an ePharmacy Order – Selecting Different NDC

```
Select Outpatient Pharmacy Manager Option: RELEASE Medication

Enter PHARMACIST: OPPHARMACIST4,THREE

Enter/#####-####-##// ?

Select one of the following valid NDC code(s) below:

          1 - #####-####-##
          2 - #####-####-##

NDC: #####-####-## //  2 #####-####-##

Veteran Prescription ######### 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 ######## Released
      No Refill(s) to be Released
      No Partial(s) to be Released
```

Chapter 22: 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 if the 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: Returning Medication to Stock

```
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 23: Ordering/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 display for possible dosages, schedules, 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.

Patient demographics and Clinical Alerts display in the header area when using this option. Refer to Patient Demographics and Clinical Alerts for more information.

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, Maximum Single Dose, Duplicate Drug Therapy, Drug-Drug Interaction, and Drug-Drug Allergy.

With the introduction of enhanced Order checks (PSO*7*251) , 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.

3. There are two reasons that a drug level error is generated; the drug is not matched to NDF or the drug is matched to NDF, but the VA Product to which it is matched does not have a GCNSEQNO assigned or the GCNSEQNO assigned does not match up to the GCNSEQNO in the COTS database. The latter (GCNSEQNO mismatch) is rare.

4. 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 11: Errors

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.
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.

Example: 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/BENAZAPRIL 20MG TAB           CV400
     2   AMLODIPINE 5MG/ATORVASTATIN 10MG TAB           CV200
CHOOSE 1-2: 1  AMLODIPINE 10MG/BENAZAPRIL 20MG TAB         CV400

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...

No Enhanced Order Checks can be performed.
   Reason:  Vendor database cannot be reached.

Press Return to Continue...

There are 2 Available Dosage(s):

1 TABLET
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:
```

Example: 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//
```

Example: 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 # ####   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…

Order Checks could not be done for Drug: RANITIDINE 150MG TAB, please complete a manual check
for Drug Interactions and Duplicate Therapy.

================================================================================
*** THERAPEUTIC DUPLICATION(S) *** SUCRALFATE 1GM TAB with

                  Local Rx#: ####
                Drug: CIMETIDINE 300MG TAB (DISCONTINUED)
                 SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
                 QTY: 180               Days Supply: 90
       Processing Status: Released locally on 03/07/08@08:55:32  (Window)
      Last Filled On: 11/08/06

--------------------------------------------------------------------------------
                  Local Rx#: ####
                Drug: NIZATIDINE 150MG CAP (ACTIVE)
                 SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
                 QTY: 180               Days Supply: 90
       Processing Status: Released locally on 03/07/08@08:55:32  (Window)
      Last Filled On: 11/08/06

 --------------------------------------------------------------------------------
           Local Rx#: ####
                Drug: FAMOTIDINE 20MG TAB (PROVIDER HOLD)
                 SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
                 QTY: 180               Days Supply: 90
       Processing Status: Released locally on 03/07/08@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
================================================================================
Discontinue RX ##### NIZATIDINE 150MG CAP? Y/N  No

Press Return to Continue:

2580A        SUCRALFATE 1GM TAB               QTY: 360
# OF REFILLS: 3  ISSUED: 03-01-08
```

```
SIG: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY
FILLED: 03-01-08
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//
```

OneVA Pharmacy Processing within Patient Prescription Processing

Note: For information regarding OneVA Pharmacy processing, please see Appendix A, OneVA Pharmacy User Manual.

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 answer '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. Could not query prescriptions at other VA Pharmacy locations. 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          2-00-61    #########     NO
NSC VETERAN

No Patient Warnings on file for PSOPATIENT,SIX.

Press RETURN to continue...

          PSOPATIENT,SIX (000-00-0001)
     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: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    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 (###) ACTIVE--------------------------
 1 #######       CETIRIZINE HCL 10MG TAB              30 A  05-21 07-07   7  30
 2 #######       HYDRALAZINE HCL 25MG TAB             60 A  05-11 05-11   5  60
 3 #######       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: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
```

```
  SEX: FEFEMALE
 CrCL: <Not Found>                              BSA (m2): _______

        Site #: ###(DAYTSHR TEST LAB)
          Rx #: #######
     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//

Select Action:Quit// RF

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)
   ### ###-###-####   (35783/ )                     ### ###-###-####   (35783
/ )                   984 (35783/ ) JUL 27,2016@10:14:57
Rx# #######  JUL 27,2016  Fill 2 of 12               Rx# #######  JUL 27,2016
Fill 2 of 12          Rx# #######  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--
REDACTED                                        REDACTED
                      REDACTED
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# #######

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


                      Non-Verified Adverse Reactions

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

                                                  PSOPATIENT,SIX   JUL 27,20
16



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




Use the label above to mail the computer
copies back to us. Apply enough postage
to your envelope to ensure delivery.

The VA Notice of Privacy Practices, IB 10-163, which outlines your privacy
rights, is available online at http://www.va.gov/Health/ or you may obtain
a copy by writing the VHA Privacy Office (19F2), REDACTED,
Washington, DC 20420.

Rx # ####### 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: REDACTED                                       Ht(cm): _______ (______)
  DOB: REDACTED                                       Wt(kg): _______ (______)
  SEX: FEFEMALE
 CrCL: <Not Found>                                 BSA (m2): _______
                                                             ISSUE  LAST REF DAY
 #  RX #         DRUG                                  QTY ST  DATE  FILL REM SUP

<No local prescriptions found.>
-------------------------DAYTSHR TEST LAB (###) ACTIVE--------------------------
 1 #######       CETIRIZINE HCL 10MG TAB                30 A  05-21 07-07   7  30
 2 #######       HYDRALAZINE HCL 25MG TAB               60 A  05-11 05-11   5  60
 3 #######       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: REDACTED//        REDACTED     192     ANYTOWN 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

   VAMC ANYTOWN, OH  45428-0415                       VAMC ANYTOWN, OH  45428-041
5                     (REPRINT)(PARTIAL)
   ###  ###-###-####  (35783/ )                      ###  ###-###-####     (35783
/ )                   984 (35783/ ) JUL 27,2016@10:29:20
Rx# #######  JUL 27,2016  Fill 2 of 9                Rx# #######  JUL 27,2016
Fill 2 of 9           Rx# #######  JUL 27,2016  Fill 2 of 9
PSOPATIENT,SIX                                      PSOPATIENT,SIX
                      PSOPATIENT,SIX
TAKE ONE TABLET BY MOUTH DAILY                      TAKE ONE TABLET BY MOUTH D
AILY                  TAKE ONE TABLET BY MOUTH DAILY


REDACTED                                          REDACTED
                      REDACTED
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# #######

                                                  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 m
achinery.
                                                  DO NOT DRINK ALCOHOLIC BEV
ERAGES                Verified Adverse Reactions
                                                  when taking this medicatio
n.                    --------------------------



                      Non-Verified Adverse Reactions

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

                                                  PSOPATIENT,SIX   JUL 27,20
16



Pharmacy Service (###)
ANYTOWN
P.O. BOX XXX
ANYTOWN, OH  XXXXX-XXXX



Use the label above to mail the computer
copies back to us. Apply enough postage
to your envelope to ensure delivery.

The VA Notice of Privacy Practices, IB 10-163, which outlines your privacy
rights, is available online at http://www.va.gov/Health/ or you may obtain
a copy by writing the VHA Privacy Office (19F2), REDACTED,
```

```
Washington, DC 20420.

Partial complete for RX #######.
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: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
  SEX: FEFEMALE
 CrCL: <Not Found>                              BSA (m2): _______
                                                           ISSUE  LAST REF DAY
 #  RX #         DRUG                                QTY ST  DATE  FILL REM SUP

<No local prescriptions found.>
-------------------------DAYTSHR TEST LAB (###) ACTIVE--------------------------
 1 #######       CETIRIZINE HCL 10MG TAB              30 A  05-21 07-07   7  30
 2 #######       HYDRALAZINE HCL 25MG TAB             60 A  05-11 05-11   5  60
 3 #######       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: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
  SEX: FEMALE
 CrCL: <Not Found>                              BSA (m2): _______
                                                           ISSUE  LAST REF DAY
 #  RX #         DRUG                                QTY ST  DATE  FILL REM SUP

-------------------------------------ACTIVE-------------------------------------
 1 ########      FLUTICAS 100/SALMETEROL 50 INHL DISK 60  E> 06-01 02-02  11  45
                                                    Qty: 2
 2 ########      NIACIN 250MG TAB                    270 S> 06-08 08-27   2  90
 3 ########      RAMIPRIL 5MG CAP                     30 A> 05-31 05-31   8  30
-----------------------------------DISCONTINUED---------------------------------
 4 ########      HYDROCHLOROTHIAZIDE 25MG TAB         60 DC>02-01 02-02   5  60
-------------------------------------HOLD---------------------------------------
 5 ########      LISINOPRIL 2.5MG TAB                 90 H> 03-10   -     3  90
------------------------------DAYTON (552) ACTIVE-------------------------------
+         Enter ?? for more actions
PU  Patient Record Update              NO  New Order
PI  Patient Information                SO  Select Order
```

Note: Patient's prescription that originated from another VA Pharmacy location will deny the request for a prescription refill to be completed if it is requested "too soon" after the last refill so that prescriptions are not over-distributed.

Unable to complete transaction.

Cannot refill Rx# ######. Next possible fill date is 11/9/2017

Duplicate Drug Order Check

The Duplicate Drug warning displays the following information for a local or remote outpatient medication order:

Example: Local Rx

```
Duplicate Drug in Local Rx:

                 Rx #: ####
                 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
```

Example: Remote Rx

```
Duplicate Drug in Remote Rx:

        LOCATION NAME: <NAME OF FACILITY>
                 Rx #: ####
                 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:

Example: 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: <only if data present>
```

Duplicate Drug order check for Non-VA Medications

Example: Non-VA Med Order

```
Duplicate Drug in a Non-VA Med Order for


               Drug: CIMETIDINE 300MG TAB
            SIG: 300MG
          Schedule: AT BEDTIME
   Medication Route: MOUTH
         Start Date: <NOT ENTERED>     CPRS Order #: XXXXX
      Documented By: PSOPROVIDER,TEN on Mar 24, 2008@14:44:15
```

Duplicate Drug Order Check business rules:

- 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.

- 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.

- 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.

- If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO, and a clerk (no PSORPH key) is finishing a pending order:

    - 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.
    - When the VERIFICATION outpatient site parameter is set to YES and the duplicate drug is a remote order
        - A duplicate drug warning will be displayed
        - The clerk will be allowed to finish the order
        - The finished order will have a status of non-verified
    - When the VERIFICATION outpatient site parameter is set to NO, the clerk will not be allowed to finish the order,
    - 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,

- 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.

- 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 #### 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.

Example: Duplicate Pending Order

```
Pending OP Orders (ROUTINE)   Mar 24, 2008@13:52:04          Page:    1 of    2
PSOPATIENT,FOUR                                  <NO ALLERGY ASSESSMENT>
  PID: REDACTED                                     Ht(cm): 168.91 (04/11/2006)
  DOB: REDACTED                                     Wt(kg): 68.18 (09/06/2006)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

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: #####-####-##
 (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 #: ####
                 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 #### 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: REDACTED                                   Ht(cm): 168.91 (04/11/2006)
  DOB: REDACTED                                   Wt(kg): 68.18 (09/06/2006)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

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: #####-####-##
 (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 #### ASPIRIN 325MG EC TAB? Y/N  YES

RX #### ASPIRIN 325MG EC TAB will be discontinued after the acceptance of the new order.


Rx # ####              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 #### ASPIRIN 325MG EC TAB has been discontinued...

Press Return to Continue:
```

Example: 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 #: ####
             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 #### ASPIRIN 325MG EC TAB? Y/N  NO -Prescription was not discontinued...

RX DELETED

   OR

Discontinue RX #### ASPIRIN 325MG EC TAB? Y/N  YES

RX #### 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...

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 # ####              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 ##### ASPIRIN 325MG EC TAB has been discontinued...


Another New Order for PSOPATIENT,FOUR? YES//
```

Example: 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 #: ####
              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 ####

Another New Order for PSOPATIENT,FOUR? YES//
```

Example: 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 #: #####
                 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: .
```

Example: 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: REDACTED                                   Ht(cm): 168.91 (04/11/2006)
  DOB: REDACTED                                   Wt(kg): 68.18 (09/06/2006)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

CPRS 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: #####-####-##
 (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 #: ####
                 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: REDACTED                                  Ht(cm): 168.91 (04/11/2006)
  DOB: REDACTED                                  Wt(kg): 68.18 (09/06/2006)
```

```
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

CPRS 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: #####-####-##
 (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: REDACTED                                     Ht(cm): 168.91 (04/11/2006)
  DOB: REDACTED                                     Wt(kg): 68.18 (09/06/2006)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

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

-------------------------------------ACTIVE-------------------------------------
 1 ####          ASPIRIN 81MG EC TAB                    30 A  03-24 03-24  11  30
---------------------------------NON-VERIFIED---------------------------------
 2 ####          ASPIRIN 325MG EC TAB                   30 N  03-24 03-24   5  30
```

Example: Duplicate with Non-VA Med – No Action Required

```
DRUG: CIMETIDINE
  Lookup: GENERIC NAME
     1   CIMETIDINE 100MG TAB           ####
     2   CIMETIDINE 200MG TAB           ####
     3   CIMETIDINE 300MG TAB           ####         90 DAY SUPPLY
     4   CIMETIDINE 400MG TAB           ####
     5   CIMETIDINE 800MG TAB           ####1
CHOOSE 1-5: 3  CIMETIDINE 300MG TAB         GA301         90 DAY SUPPLY
-------------------------------------------------------------------------------
Duplicate Drug in a Non-VA Med Order for


               Drug: CIMETIDINE 300MG TAB
             SIG: 300MG
           Schedule: AT BEDTIME
    Medication Route: MOUTH
          Start Date:                  CPRS Order #: 13554
```

```
       Documented By: PSOPROVIDER,TEN on Mar 24, 2008@14:44:15
--------------------------------------------------------------------------------

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//
```

Example: 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           #####
     2   ALLOPURINOL 300MG TAB           #####
CHOOSE 1-2: 2  ALLOPURINOL 300MG TAB         #####
--------------------------------------------------------------------------------
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
--------------------------------------------------------------------------------
Discontinue Pending Order for ALLOPURINOL 300MG? Y/N  YES

Pending Order for ALLOPURINOL 300MG 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...

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 # ####              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...
```

Example: 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: REDACTED                                    Ht(cm): 182.88 (04/13/2005)
  DOB: REDACTED                                    Wt(kg): 77.27 (04/13/2005)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)           BSA (m2): 1.95

               Rx #: #####
 (1) *Orderable Item: AMLODIPINE/ATORVASTATIN TAB
 (2)            Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
                NDC: #####-####-##
               Verb: TAKE
 (3)         *Dosage: ONE TABLET
              *Route: ORAL
           *Schedule: QAM
 (4)Pat Instructions:
                SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
+         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: REDACTED                                    Ht(cm): 182.88 (04/13/2005)
  DOB: REDACTED                                    Wt(kg): 77.27 (04/13/2005)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)           BSA (m2): 1.95

      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 #: ####
             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 ##### AMLODIPINE 5MG/ATORVASTATIN 10MG TAB? Y/N YES

Rx ##### AMLODIPINE 5MG/ATORVASTATIN 10MG 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 # ####              03/12/08PSOPATIENT,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 ##### 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 appears asking if the user wants to update the address. Also, for the *Patient Prescription Processing, Complete Orders from OERR*, and *Action Profile (132 COLUMN PRINTOUT)* options, if a temporary address has no end date, the following text is now displayed: "(Temp address from XXX 99,9999 till (no end date))".

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.

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.

Once the above patches have been installed, a new comment for remote order checks, "Now doing remote order checks. Please wait..." has been added to the screen. The previous comment, "Now doing order checks. Please wait… " is replaced by: "Now doing drug interaction and allergy checks. Please wait..."

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.
```

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. However, future patches are planned to send/receive the drug class to the HDR, and then it will be possible to use non-standardized remote orders for duplicate drug class checks.

When an order is an ePharmacy order (determined to be third party billable), the billing data is sent to the Electronic Claims Management Engine (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 ########## has been discontinued...

Veteran Prescription ######### 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 ##########  AMOXAPINE 50MG TAB          30 S  09-26 09-26   2  30
  2 #########   AMOXICILLIN 250MG CAP       30 A  08-18 08-18  11  30
  3 #########   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.

Note: With the release of PSO*7*505, the 'Titration and Maintenance' functionality is blocked for all controlled substance prescriptions.

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 ##########  AMOXAPINE 50MG TAB           30 S  09-26 09-26   1  30
  2 ##########  AMOXICILLIN 250MG CAP        30 A  08-18 08-18  11  30
  3 #########   KALETRA                       3 A  09-29 09-29   0   3
          :                   :                             :
```

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 one of the hidden actions is selected and it is invalid, a message will display in the message window.

Example: Entering a New Order

```
Select Option: RX (Prescriptions)

          Orders to be completed for all divisions: 14

Do you want an Order Summary? No//
```

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 ...
          Check Drug Interaction
          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,ONE  OPPATIENT16,ONE   4-3-41    #########
 YES     SC VETERAN
Patient is enrolled to receive ScripTalk 'talking' prescription labels.

Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED//  <Enter>
```

A detailed explanation of the different parts of the screen can be found under "List Manager Options" at the beginning of this manual. The Patient Information screen displays the information on two pages. Only the second screen is shown in this example.

Example: Entering a New Order (continued)

```
Patient Information           May 22, 2001 10:44:38          Page:    2 of    2
OPPATIENT16,ONE
  PID: REDACTED                                    Ht(cm): 177.80 (02/08/1999)
  DOB: REDACTED                                    Wt(kg): 90.45 (02/08/1999)
  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, 2001 10:44:56          Page:    1 of    1
OPPATIENT16,ONE
  PID: REDACTED                                    Ht(cm): 177.80 (02/08/1999)
  DOB: REDACTED                                    Wt(kg): 90.45 (02/08/1999)
  SEX: MALE
Eligibility: SERVICE CONNECTED 50% to 100%     SC%: 70
RX PATIENT STATUS: SC LESS THAN 50%

Extended Patient Demographics

Primary Care Team: XXXXX TEAM          Phone: (XXX)XXX-XXXX
PC Provider: REDACTED        Position: PROV XXXXX X
Pager: 12345                              Phone: XXXXXXXXXX
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


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

------------------------------------ACTIVE-----------------------------------
 1 ######        ACETAMINOPHEN 500MG TAB              60 A> 05-22 05-22   3  30
 2 #######       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


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

If a double question mark (??) is entered at the above "Select Action" prompt, the following hidden actions display in the action area.

```
The following actions are also available:
RP   Reprint (OP)          OTH  Other OP Actions     DR   Display Remote
RN   Renew (OP)            DN   Down a Line          QU   Quit
DC   Discontinue (OP)      RD   Re Display Screen    LS   Last Screen
RL   Release (OP)          PT   Print List           FS   First Screen
RF   Refill (OP)           PS   Print Screen         GO   Go to Page
PP   Pull Rx (OP)          >    Shift View to Right  +    Next Screen
IP   Inpat. Profile (OP)   <    Shift View to Left   -    Previous Screen
RS   Reprint Sig Log       SL   Search List          ADPL Auto Display(On/Off)
IN   Intervention Menu     CM   Manual Queue to CMOP RDD  Fill/Rel Date Disply
UP   Up a Line
Select Action: Quit// OTH   OTH
                    --- Other OP Actions ---
```

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#: #######
             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 ######## 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.

If the new order is for Clozapine, there are additional restrictions for filling a prescription. See Chapter 9: Controlling the Dispensing of Clozapine" in the Outpatient Pharmacy Manager's Manual for more information.

Note: More than one ingredient and more than one VA Drug Class may be associated with an Allergy/ADR.

See output below:

```
A Drug-Allergy Reaction exists for this medication and/or class!

    Prospective Drug: DILTIAZEM 120MG SA CAP
     Causative Agent: DILTIAZEM (LOCAL or REMOTE SITE - 12/23/13)
 Historical/Observed: OBSERVED
            Severity: MODERATE
         Ingredients: DILTIAZEM
      Signs/Symptoms: ITCHING,WATERING EYES, ANOREXIA, NAUSEA,VOMITING,
                      ANXIETY, DROWSINESS, DRY MOUTH, DRY NOSE, RASH,
          Drug Class: CV200 CALCIUM CHANNEL BLOCKERS

   Provider Override Reason: N/A - Order Entered Through VistA
```

After the Allergy/ADR warning is displayed, the system ask the user if they want to intervene.

If the user chooses to intervene after the Allergy/ADR warning is displayed, the intervention dialog will launch.

If the user chooses not to intervene after the Allergy/ADR warning is displayed, the order entry dialog will start.

Note: If the Severity is 'Severe', an intervention is REQUIRED.

Example: 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 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...

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

A Drug-Allergy Reaction exists for this medication and/or class!

    Prospective Drug: DILTIAZEM 120MG SA CAP
     Causative Agent: DILTIAZEM (LOCAL or REMOTE SITE - 12/23/13)
 Historical/Observed: OBSERVED
            Severity: MODERATE
         Ingredients: DILTIAZEM
       Signs/Symptoms: ITCHING,WATERING EYES, ANOREXIA, NAUSEA,VOMITING,
                       ANXIETY, DROWSINESS, DRY MOUTH, DRY NOSE, RASH,
          Drug Class: CV200 CALCIUM CHANNEL BLOCKERS

   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
```

```
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...

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:
```

Example: 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 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...

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

A Drug-Allergy Reaction exists for this medication and/or class!

    Prospective Drug: SEPTRA DS TAB
     Causative Agent: SULFADIAZINE/SULFAMERAZINE/SULFAMETHAZINE (SITE REPORTING ALLERGY -
DATE REPORTED)
  Historical/Observed: HISTORICAL
           Severity: Not Entered
     Signs/Symptoms: ITCHING,WATERING EYES, ANOREXIA, NAUSEA,VOMITING,
                     ANXIETY, DROWSINESS
         Drug Class: AM650 SULFONAMIDE/RELATED ANTIMICROBIALS

   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

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 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):.
```

Example: 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: REDACTED                                      Ht(cm): 167.64 (06/10/1993)
  DOB: REDACTED                                      Wt(kg): 68.18 (06/10/1993)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95
+

*(1) Orderable Item: SULFAMETHOXAZOLE/TRIMETHOPRIM TAB
 (2)           Drug: SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
                NDC: #####-####-##
               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 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...
-------------------------------------------------------------------------------

A Drug-Allergy Reaction exists for this medication and/or class!

    Prospective Drug: SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
     Causative Agent: SULFADIAZINE/SULFAMERAZINE/SULFAMETHAZINE (SITE REPORTING ALLERGY -
DATE REPORTED)

 Historical/Observed: HISTORICAL
           Severity: Not Entered
        Ingredients: SULFAMETHOXAZOLE TRIMETHOPRIM
     Signs/Symptoms: ITCHING,WATERING EYES, ANOREXIA
```

```
                     NAUSEA,VOMITING, ANXIETY, DROWSINESS,
          Drug Class: AM650 SULFONAMIDE/RELATED ANTIMICROBIALS

   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 # ####              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
```

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 happens 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 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
 (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 # #########         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 ######### 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// NO
```

View of RX:

```
Medication Profile            Nov 02, 2005@07:33:29          Page:    1 of    1
OPPATIENT,FOUR
  PID: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      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  ##########   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)), Reject Resolution Required, or Refill Too Soon, the prescription will be marked as "REJECTED", and the user will have the opportunity to resolve before continuing.

The following example shows a sample ECME transmission rejection, and how to resolve the rejection error.

Example: Handling a Rejected New Order for ePharmacy Billing

```
Veteran Prescription ###### 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 : ALBANY                        NPI#: ##########     NCPDP: #######
   Patient  : OPPAT.,FOUR(###-##-####)  Sex: M       DOB: REDACTED
   Prescription : ########/# - TESTOSTERONE (ANDROD   ECME#: ############
   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: XXX XXX-XXXX
   Group Name   : RXINS                        Group Number: XXXXX
   Cardholder ID: ##########
   ------------------------------------------------------------------------

     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 ######## 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 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 rejects cannot be filled until the reject is resolved. See following example.

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: ########      NCPDP: #######
   Patient  : OP,FOUR(XXX-XX-XXXX)  Sex: M      DOB: REDACTED
   Rx/Drug  : ########/# - TESTOSTERONE (ANDROD       ECME#: ############
   Reject(s): 76 - Plan Limitations Exceeded  Received on REDACTED
   Payer Message: DAYS SUPPLY IS MORE THAN ALLOWED BY PLAN
   Insurance    : TEST INS                        Contact: XXX-XXX-XXXX
   Group Name   : XXXX                         Group Number: ####
   Cardholder ID: ###########

   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//
```

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 ###### 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 : ALBANY                              NPI#: ##########
   Patient  : OPTRICARE,ONE(XXX-XX-XXXX)  Sex: M        DOB: REDACTED
   Rx/Drug  : ######/# - NAPROXEN 250MG S.T.          ECME#: ############
   Reject(s): REFILL TOO SOON (79), 14 - M/I Eligibility Clarification Code (14).
              Received on REDACTED.

   Insurance    : TRICARE                         Contact: ###-###-####
   Group Name   : XXXXXXXXXXXXX              Group Number: #####
   Cardholder ID: #########
   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 ###### 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                                NPI#: ##########
   Patient  : OPTRICARE,ONE(XXX-XX-XXXX)  Sex: M        DOB: REDACTED
   Rx/Drug  : ######/# - SIMETHICONE 40MG TAB         ECME#: ############
   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   : XXXXXXXXXXXXX              Group Number: ######
   Cardholder ID: #######
   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                                NPI#: ##########
   Patient  : OPTRICARE,ONE(###-##-####)  Sex: M        DOB: REDACTED
   Rx/Drug  : ######/# - 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: ######       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 # ######            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                                NPI#: ##########
   Patient  : OPTRICARE,ONE(XXX-XX-XXXX)  Sex: M        DOB: REDACTED
   Rx/Drug  : ######/# - 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: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)           BSA (m2): _______

               Rx #: #####
 (1) *Orderable Item: ACETAZOLAMIDE PILL
 (2)            Drug: ACETAZOLAMIDE 500MG SEQUELS
                 NDC: #####-####-##
               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: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): _______

               Rx #: #######
 (1) *Orderable Item: ACETAZOLAMIDE PILL
 (2)            Drug: ACETAZOLAMIDE 500MG SEQUELS
                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                              NPI#: ##########
   Patient  : OPTRICARE,ONE(XXX-XX-XXXX)  Sex: M        DOB: REDACTED
   Rx/Drug  : #####/# - 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 # ######            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 ###### 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.

```
CHAMPVA Prescription ###### 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                                NPI#: ##########
   Patient  : OPCHAMPVA,ONE(###-##-####)  Sex: M        DOB: REDACTED
   Rx/Drug  : ######/# - NAPROXEN 250MG S.T.          ECME#: ############
   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   : XXXXXXXXXXXX              Group Number: ######
   Cardholder ID: #########
   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 ###### 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                                NPI#: ##########
   Patient  : OPCHAMPVA,ONE(###-##-####)  Sex: M        DOB: REDACTED
   Rx/Drug  : ######/# - SIMETHICONE 40MG TAB         ECME#: ############
   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   : C             Group Number: ######
   Cardholder ID: #######
   ------------------------------------------------------------------------

     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                                NPI#: ##########
   Patient  : OPCHAMPVA,ONE(###-##-####)  Sex: M        DOB: REDACTED
   Rx/Drug  : ######/# - 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 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: ######       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 # ######            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                                  NPI#: ##########
   Patient  : OPCHAMPVA,ONE(###-##-####)  Sex: M        DOB: REDACTED
   Rx/Drug  : ######/# - 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: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): _______

               Rx #: #######
 (1) *Orderable Item: ACETAZOLAMIDE PILL
 (2)            Drug: ACETAZOLAMIDE 500MG SEQUELS
                 NDC: #####-####-##
               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: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): _______

               Rx #: #######
 (1) *Orderable Item: ACETAZOLAMIDE PILL
 (2)            Drug: ACETAZOLAMIDE 500MG SEQUELS
               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                                NPI#: ##########
   Patient  : OPCHAMPVA,ONE(###-##-####)  Sex: M        DOB: REDACTED
   Rx/Drug  : ######/# - 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 # ######            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 ###### 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 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 such as the following example.

```
Remote Facilities Visited     Dec 30, 2008@17:26:47          Page: 1 of 1

Patient: PSOPATIENT,ONE            (###-##-####)      DOB: REDACTED

  Station
  HDR ANYTOWN



          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 such as the following example.

```
Medication Profile - Remote   Dec 30, 2008@17:29:43       Page: 1 of 2

Patient: PSOPATIENT,ONE             (###-##-####)      DOB: REDACTED

  RX#         DRUG                              ST QTY ISSUED  LAST FILLED
HDR ANYTOWN
######        AMOXICILLIN TRIHYDRATE 250MG CAP   A  90 11/06/08  11/06/08
              SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
              PROVIDER: REDACTED
######        DILTIAZEM (INWOOD) 240MG CAP,SA    A  30 11/28/08  11/28/08
              SIG: TAKE ONE CAPSULE BY MOUTH EVERY DAY
              PROVIDER: REDACTED
######        LABETALOL HCL 200MG TAB            A  60 12/30/08  12/30/08
              SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
              PROVIDER: REDACTED
######        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 INTRUCTION ON SIG1 TESTING FOR
                   PATIENT INTRUCTION ON SIG1 TESTING FOR PATIENT
                   REPLACE IENT WITH IENT TESTING FOR PATIENT
+         Enter ?? for more actions

Select Action:Next Screen//
```

CPRS Order Checks

Three CPRS order checks have been added to the list of order checks performed within the Outpatient Pharmacy application.

- Aminoglycoside Ordered
- Dangerous Meds for Patient >64
- Glucophage –Lab Results

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 which 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.

The following information is displayed for the Aminoglycoside Ordered order check:

- Order Check Name
- Text message displaying an estimated CrCL if available or a message that it is not.

```
***Aminoglycoside Ordered***

Aminoglycoside - est. CrCl: <VALUE> (CREAT: <result>  BUN: <result>) [Est. CrCl
Based on modified Cockcroft-Gault equation using Adjusted Body Weight (if ht > 60 in)].
```

-OR-

```
***Aminoglycoside Ordered***

Aminoglycoside – est. CrCl: <Unavailable> (<Results Not Found>)  [Est. CrCl
Based on modified Cockcroft-Gault equation using Adjusted Body Weight (if ht > 60
```

The following information is displayed for the Dangerous Meds for Patient >64 order check:

- Order Check Name
- Text message displaying a message if patient is greater than 64 and has been prescribed Amitriptyline.

```
***Dangerous Meds for Patient >64***

Patient is <age>.  Amitriptyline can cause cognitive impairment and loss of balance in older
patients.  Consider other antidepressant medications on formulary.
```

-OR-

Text message displaying a message if patient is greater than 64 and has been prescribed Chlorpropamide.

```
***Dangerous Meds for Patient >64***
```

```
Patient is <age>.  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.
```

-OR-

Text message displaying a message if patient is greater than 64 and has been prescribed Dipyridamole.

```
***Dangerous Meds for Patient >64***

Patient is <age>.  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.
```

The following information is displayed for the Glucophage Lab Results order check:

- Order Check Name
- Text message displaying a serum creatinine does not exist or it is greater than 1.5

```
***Metformin Lab Results***

Metformin - no serum creatinine within past 60 days.
```

-OR-

```
***Metformin Lab Results***

Metformin – Creatinine results: <creatinine greater than 1.5 w/in past <x> days>
```

Examples of CPRS Order Checks

Example: 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


Now doing remote order checks. Please wait...

Now doing allergy checks.  Please wait...

***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.

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks!  Please wait...


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//
```

Example: 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: REDACTED                                    Ht(cm): 177.80 (10/14/2005)
  DOB: REDACTED                                    Wt(kg): 136.36 (10/14/2005)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

*(1) Orderable Item: AMITRIPTYLINE TAB
 (2)           Drug: AMITRIPTYLINE 25MG TAB
                NDC: #####-####-##
 (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


Now doing remote order checks. Please wait...

Now doing allergy checks.  Please wait...

***Dangerous Meds for Patient >64***

  Patient is 79. Amitriptyline can cause cognitive impairment and loss of
  balance in older patients. Consider other antidepressant medications on
  formulary.

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks!  Please wait...

Rx # ####              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//
```

Example: Renewing an Order – Dangerous Meds for Patient >64 for Chlorpropamide

```
               Rx #: #####
 (1) *Orderable Item: CHLORPROPAMIDE TAB
 (2)            Drug: CHLORPROPAMIDE 250MG TAB
                 NDC: ####-####-##
 (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 # ####   Drug: CHLORPROPAMIDE 250MG TAB

Now doing remote order checks. Please wait...

Now doing allergy checks.  Please wait...

***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.

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks!  Please wait...

2613A        CHLORPROPAMIDE 250MG TAB          QTY: 60
# OF REFILLS: 3  ISSUED: 03-25-08SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
```

Example: Creating New Order from Edit – Glucophage Lab Results for Metformin

```
*(1) Orderable Item: METFORMIN TAB,ORAL
 (2)           Drug: METFORMIN 500MG TAB
                NDC: #####-####-##
 (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: REDACTED                                    Ht(cm): 177.80 (10/14/2005)
  DOB: REDACTED                                    Wt(kg): 136.36 (10/14/2005)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95
+
     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: XXXXXX 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: REDACTED                                    Ht(cm): 177.80 (10/14/2005)
  DOB: REDACTED                                    Wt(kg): 136.36 (10/14/2005)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)           BSA (m2): 1.95


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
 (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

Now doing remote order checks. Please wait...

Now doing allergy checks.  Please wait...
```

```
***Metformin Lab Results***

  Metformin - no serum creatinine within past 60 days.

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks!  Please wait...

Rx # ####              03/25/08
PSOPATIENT,NINE                      #####
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//
```

Example: 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: REDACTED                                      Ht(cm): 177.80 (10/14/2005)
  DOB: REDACTED                                      Wt(kg): 136.36 (10/14/2005)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

                Rx #: #####
 (1) *Orderable Item: DIPYRIDAMOLE TAB
 (2)            Drug: DIPYRIDAMOLE 25MG TAB
                 NDC: ####-####-##
 (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: ####            PATIENT: PSOPATIENT,NINE (###-##-####)
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: XXXXXX 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:
```

```
Now doing remote order checks. Please wait...

Now doing allergy checks.  Please wait...


***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.

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks!  Please wait...

EDIT:  (Y/N/P): N// O
VERIFY FOR PSOPATIENT,NINE ? (Y/N/Delete/Quit): Y// ES
```

Example: 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: REDACTED                                    Ht(cm): 177.80 (10/14/2005)
  DOB: REDACTED                                    Wt(kg): 136.36 (10/14/2005)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

               Rx #: #####
 (1) *Orderable Item: GENTAMICIN INJ,SOLN
 (2)            Drug: GENTAMICIN 40MG/ML 2ML VI
                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: REDACTED                                    Ht(cm): 177.80 (10/14/2005)
  DOB: REDACTED                                    Wt(kg): 136.36 (10/14/2005)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

      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: #####-#
 (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 # ####              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//
```

Example: Reinstating a Discontinued Order – Glucophage Lab Results for Metformin

```
               Rx #: #####
 (1) *Orderable Item: METFORMIN TAB,ORAL
 (2)            Drug: METFORMIN 500MG TAB
                 NDC: #####-####-##
 (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...


***Metformin Lab Results***

Metformin - Creatinine results: <creatinine greater than 1.5 w/in past <x> days>

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks!  Please wait...

Prescription #XXXX REINSTATED!
   Prescription #XXXX 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.
```

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 1 Enhancement 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 OVER 30 MINUTES
            Schedule: Q8H
          Order Date: NOV 20, 2012@11:01
          Start Date: ********
           Stop Date: ********

        Clinic Order: CEFAZOLIN SOD 1GM INJ (EXPIRED)
         Solution(s): 5% DEXTROSE 50 ML OVER 30 MINUTES
            Schedule: Q12H
          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 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.

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. The 500 mg Dosage Ordered will require two 250 mg capsules. The Dosage Ordered is re-displayed after the Dispense Units to allow the entry to be double-checked.

```
DISPENSE UNITS PER DOSE(CAPSULES): 2// <Enter> 2
Dosage Ordered: 500MG
```

With PSO*7*525, if there is no default Medication Route defined for the Orderable Item, the user is prompted to enter a route. Please see section Medication Route Prompt for a detailed description of the Medication Route lookup functionality . The Route is not required to complete a prescription. If the abbreviation entered is found in the MEDICATION ROUTES file, the entry will be expanded in the Sig based on the OUTPATIENT EXPANSION field.

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. Patch PSO*7*507 introduces the ability for users to view if an Administration Schedule is Inactive.

```
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  **INACTIVE**
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)
```

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 an "H" to specify hours or an "M" to specify minutes.

Do not use the LIMITED DURATION field for Days Supply.

Example: Entering a New Order (continued)

```
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10 (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 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 Chapter 2 in the *User Manual - Supplemental* for more information on QUANTITY calculations.

```
DAYS SUPPLY:  (1-90): 30// 10
QTY ( CAP ) : 80// <Enter> 80
```

Example: Entering a New Order (continued)

```
COPIES: 1// <Enter> 1
# OF REFILLS:  (0-11): 11// 0
PROVIDER:    OPPROVIDER4,TWO
CLINIC:    OUTPT NURSE XXXXX TEAM
MAIL/WINDOW: WINDOW// <Enter>  WINDOW
METHOD OF PICK-UP: <Enter>
REMARKS: <Enter>
ISSUE DATE: TODAY// <Enter>   (MAY 30, 2001)
FILL DATE:  (5/30/2001 - 6/9/2001): TODAY//  <Enter>  (MAY 30, 2001)
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.

```
Do you want to enter a Progress Note? No// <Enter>

Rx # ######            05/30/01
OPPATIENT16,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?
```

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 it the first applies to the order. In this example, the user is first asked if the order is being prescribed for any of the service-connected conditions displayed. If yes had been entered at this prompt, the fill would have been set for No Copay and no other exemption questions would have been asked. In this 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 OPPATIENT16,ONE? YES//
```

Medications with non-numeric dosages, such as ointments and creams, will display non-numeric possible dosages as a default. Because the dosage is non-numeric, values for dispense units per dose and quantity cannot be calculated.

Example: Entering a New Order (continued)

```
DRUG:    HYDROCORTISONE 0.5% CREAM        DE200     VISN FORM; 30 GM/TUBE (IEN)
         ...OK? Yes//   (Yes)
Now doing order checks.  Please wait...

There are 4 Available Dosage(s):
       1. SMALL AMOUNT
       2. MODERATE AMOUNT
       3. LIBERALLY
       4. LARGE AMOUNT

Select from list of Available Dosages (1-4), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 2 MODERATE AMOUNT

You entered MODERATE AMOUNT is this correct? Yes// <Enter> YES
ROUTE: TOPICAL// <Enter> TOPICAL
```

During prescription processing, if the label printer selected has an Automated Dispensing Device (ADD) defined, then Rx will be routed to the appropriate automated dispensing devices. A message will be displayed indicating the automated dispensing devices where the Rx will be routed. Below is an example of the routing message.

```
PRESCRIPTIONS SENT TO:
        OPTIFILL1
          #########      ACETAMINOPHEN 325MG C.T.
          #########      AMOXICILLIN 250MG CAP
          #########      AMOXAPINE 50MG TAB

        SCRIPTPRO1
          #########      CIMETIDINE 200MG TAB
```

Editing a New 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 used to construct the Sig 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.

Note: 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 a New Order

```
OP Medications (ACTIVE)       May 30, 2001 16:48:05          Page:    1 of    3
OPPATIENT16,ONE                                                        <A>
  PID: REDACTED                                    Ht(cm): 177.80 (02/08/1999)
  DOB: REDACTED                                    Wt(kg): 90.45 (02/08/1999)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

               Rx #: ######
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
```

```
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
                 NDC: #####-####-##
 (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
```

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.

Edits to fields that are not starred (*), like Patient Instructions, will not create a new order. Note that the new Patient Instruction text now appears at the end of the Sig.

Example: Editing a New Order (continued)

```
OP Medications (ACTIVE)       May 30, 2001 16:54:25          Page:    1 of    3
OPPATIENT16,ONE                                                          <A>
  PID: REDACTED                                     Ht(cm): 177.80 (02/08/1999)
  DOB: REDACTED                                     Wt(kg): 90.45 (02/08/1999)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

                Rx #: ######
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
                 NDC: #####-####
 (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//
```

When a starred field, like Dosage, is changed, a new order is created. The dispense units per dose and quantity are recalculated, if possible, and the new order includes a remark noting the original prescription number.

```
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: <Enter> 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, 2001 17:11:44          Page:    1 of    2
OPPATIENT16,ONE                                                        <A>
  PID: REDACTED                                    Ht(cm): 177.80 (02/08/1999)
  DOB: REDACTED                                    Wt(kg): 90.45 (02/08/1999)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

      Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
  (1)           Drug: AMPICILLIN 250MG CAP ***(N/F)***
  (2) Patient Status: SERVICE CONNECTED
  (3)     Issue Date: MAY 30,2001             (4) Fill Date: MAY 30,2001
  (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
:
  (7)    Days Supply: 10                    (8)   QTY (CAP): 120
  (9)   # of Refills: 0                     (10)  Routing: WINDOW
 (11)         Clinic: OUTPT NURSE XXXXX TEAM
 (12)       Provider: OPPROVIDER4,TWO       (13)   Copies: 1
 (14)        Remarks: New Order Created by editing Rx # ######.
   Entry By: OPPROVIDER4,TWO                Entry Date: MAY 30,2001 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.

```
New OP Order (ROUTINE)        May 31, 2001 12:57:06          Page:    2 of    2
OPPATIENT16,ONE                                                        <A>
  PID: REDACTED                                    Ht(cm): 177.80 (02/08/1999)
  DOB: REDACTED                                    Wt(kg): 90.45 (02/08/1999)
+
  (7)    Days Supply: 30                    (8)   QTY (CAP): 120
  (9)   # of Refills: 0                     (10)  Routing: WINDOW
 (11)         Clinic: OUTPT NURSE XXXXX TEAM
 (12)       Provider: OPPROVIDER4,TWO       (13)   Copies: 1
 (14)        Remarks: New Order Created by editing Rx # ######.
   Entry By: OPPROVIDER4,TWO                Entry Date: MAY 31,2001 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.

Example: Editing a New Order (continued)

```
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// ??

                              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>  WRITTEN
WAS THE PATIENT COUNSELED: NO// Y  YES
WAS COUNSELING UNDERSTOOD: NO// Y  YES
```

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: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    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  ##########   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 12: NCPDP Codes

Code	Description
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

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: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

(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
Select fields by number:  (1-21): 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 transmi
ssion 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 #########? 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: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95


(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: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

+
  (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 # #########.
   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
Rx # #########         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
```

This status refers to the original prescription.

```
Is this correct? YES// <Enter> YES...
Claim has status E REJECTED.  Not reversed.

Veteran Prescription ######### 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
```

This status refers to the newly created prescription

Using the Copy Action

When a double question mark (??) is entered at the "Select Action" prompt above, the hidden actions below 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)
```

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 create a new order exactly like the original order. Any field of the new order can be edited. This action does not affect the status of the original order but the duplicate order checks will occur.

Example: Using the Copy Action

```
Medication Profile           Jun 04, 2001 15:49:09          Page:    1 of    1
OPPATIENT6,ONE                                                      <A>
  PID: REDACTED                                    Ht(cm): 175.26 (08/10/1999)
  DOB: REDACTED                                    Wt(kg): 75.45 (08/10/1999)
```

```
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 2.15

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

-------------------------------------ACTIVE-----------------------------------
 1 #######       AMPICILLIN 250MG CAP                  80 A  05-25 06-01   0  10
 2 ######        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
```

Actions in parentheses, like Refill in the example below, are not available for the order.

```
OP Medications (ACTIVE)       Jun 04, 2001 15:50:49          Page:    1 of    3
OPPATIENT6,ONE                                                          <A>
  PID: REDACTED                                    Ht(cm): 175.26 (08/10/1999)
  DOB: REDACTED                                    Wt(kg): 75.45 (08/10/1999)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 2.15

               Rx #: #######
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
                 NDC: #####-####-##
 (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
```

After "CO" is entered, the heading on the screen changes to "New OP Order (COPY)" and the available actions are limited to "Accept" or "Edit".

Example: Using the Copy Action (continued)

```
New OP Order (COPY)           Jun 04, 2001 15:51:32          Page:    1 of    2
OPPATIENT6,ONE                                                          <A>
  PID: REDACTED                                    Ht(cm): 175.26 (08/10/1999)
  DOB: REDACTED                                    Wt(kg): 75.45 (08/10/1999)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 2.15

     Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
  (1)           Drug: AMPICILLIN 250MG CAP ***(N/F)***
  (2) Patient Status: OUTPT NON-SC
  (3)     Issue Date: JUN 4,2001             (4) Fill Date: JUN 4,2001
  (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.

```
Duplicate Drug in Local Rx:

                 Rx #: ######
                 Drug: AMPICILLIN 250MG CAP
                  SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV COMMENTS
                  QTY: 80              Refills remaining: 0
             Provider: OPPROVIDER4,TWO            Issued: 05/25/01
               Status: Active             Last filled on: 06/01/01
    Processing Status: Released locally on 06/01/01@11:34:13  (Window)
                                           Days Supply: 10
Discontinue Rx # ######? YES

Duplicate Drug 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...

Press Return to Continue:


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, once verified, the old order is discontinued.

Example: Using the Copy Action (continued)

```
Rx # ######           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 ###### has been discontinued...


      SC Percent: 10%
     Disabilities:
PROSTATE GLAND CONDITION                     10% - SERVICE CONNECTED
INGUINAL HERNIA                               0% - SERVICE CONNECTED

Was treatment for Service Connected condition: N
```

The Medication Profile screen is redisplayed at this point. The dollar sign after the first prescription number means that a copay charge is associated with that order. The default printer is displayed and the user can queue the label to print, change the default printer, or hold, suspend, or bypass printing.

```
Medication Profile            Jun 04, 2001 16:03:55          Page:    1 of    1
OPPATIENT6,ONE                                                          <A>
  PID: REDACTED                                      Ht(cm): 175.26 (08/10/1999)
  DOB: REDACTED                                      Wt(kg): 75.45 (08/10/1999)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.92

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

-------------------------------------ACTIVE-------------------------------------
 1 #######       AMPICILLIN 250MG CAP                  80 A  06-04 06-04   0  10
 2 ######        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>
```

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.

```
Patient Information           Nov 04, 2005@09:19:26          Page:    1 of    1
OPPATIENT,FOUR                                                          <A>
  PID: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): _______


Eligibility: NSC, VA PENSION

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: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      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 ##########    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

OP Medications (ACTIVE)       Nov 04, 2005@09:24:17          Page:    1 of    3
OPPATIENT,FOUR                                                          <A>
  PID: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): _______

                Rx #: ##########
 (1) *Orderable Item: PREDNISONE TAB
 (2)       CMOP Drug: PREDNISONE 5MG TAB
                 NDC: #####-####
 (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
```

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: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2):

      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
-------------------------------------------------------------------------------
```

```
Duplicate Drug in Local Rx:

               Rx #: #########
                 Drug: PREDNISONE 5MG TAB
                  SIG: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY FOR 30
                       DAYS WITH FOOD AVOIDING DAIRY FOODS
                  QTY: 30                  Refills remaining: 5
             Provider: OPPROVIDER4,TWO            Issued: 11/04/05
               Status: Active                 Last filled on: 11/04/05
    Processing Status: Released locally on 11/04/05@11:34:13  (Mail)
                                                Days Supply: 30
-------------------------------------------------------------------------------

Discontinue Rx # ##########? YES

Duplicate Drug 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// YES
WAS COUNSELING UNDERSTOOD: NO// YES

Do you want to enter a Progress Note? No//  <Enter> NO

Rx # ##########         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 #########.

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 ######### has been discontinued...

Veteran Prescription ######### successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Transmitting
IN PROGRESS-Transmitting
E PAYABLE
```

View of RX:

```
Medication Profile            Nov 04, 2005@09:25:14          Page:    1 of    1
OPPATIENT,FOUR
  PID: REDACTED                                      Ht(cm): _______ (______)
```

```
  DOB: REDACTED                                    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 ##########    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  ########### 05/06 #######     #/########## 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.
```

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)

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)

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: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2):______

                Rx #: #########
 (1) *Orderable Item: FLUOXETINE CAP,ORAL
 (2)       CMOP Drug: EFFEXOR
                NDC: #####-####
 (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)
```

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, 2001 16:14:40          Page:    1 of    3
OPPATIENT29,ONE                                                        <A>
  PID: REDACTED                                      Ht(cm): 175.26 (06/07/2000)
  DOB: REDACTED                                      Wt(kg): 79.09 (06/07/2000)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

                Rx #: ######
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
                 NDC: #####-####
 (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: Quit// RN  Renew
FILL DATE:  (6/4/2001 - 7/4/2001): TODAY// <Enter>  (JUN 04, 2001)
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 # ######   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//
```

If the order is not edited, the order is renewed and the display returns to the Medication Profile screen.

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: REDACTED                                    Ht(cm): 175.26 (06/07/2000)
  DOB: REDACTED                                    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 XXXXX TEAM
  (6)        Provider: OPPROVIDER4,TWO
  (7)          Copies: 1
  (8)         Remarks: RENEWED FROM RX # ######
   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 XXXXX TEAM //OUT
     1   OUTPT NURSE BLUE TEAM
     2   OUTPT NURSE XXXXX TEAM
     3   OUTPT NURSE YELLOW TEAM
CHOOSE 1-3: 1  OUTPT NURSE BLUE TEAM
Prescription Renew            Jun 04, 2006 16:24:32          Page:    2 of    2
OPPATIENT29,ONE                                                      <A>
  PID: REDACTED                                    Ht(cm): 175.26 (06/07/2000)
```

```
  DOB: REDACTED                                    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 # ######
   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# ####### has been suspended until 06-20-01.
```

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). 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: REDACTED NNN                                 Ht(cm): _______ (______)
  DOB: REDACTED                                     Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)             BSA (m2): ________

               Rx #: ###########
 (1) *Orderable Item: SIMETHICONE TAB,CHEWABLE
 (2)            Drug: SIMETHICONE 40MG TAB
                 NDC: #####-####-#
 (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 # #########   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…

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

##########   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, 2001 16:18:17          Page:    2 of    2
OPPATIENT,FOUR
  PID: REDACTED                                       Ht(cm): _______ (______)
  DOB: REDACTED                                       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 # #########
   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: REDACTED
Prescription Renew            Jun 04, 2001 16:24:32          Page:    2 of    2
OPPATIENT,FOUR
  PID: REDACTED                                       Ht(cm): _______ (______)
  DOB: REDACTED                                       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 # #########
   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>
Reversing prescription #########.
```

```
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 ######### has been discontinued...
```

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: REDACTED                                      Ht(cm): 177.80 (02/08/2007)
  DOB: REDACTED                                      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-------------------------------------
 # #########     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: REDACTED                                       Ht(cm): 177.80 (02/08/2007)
  DOB: REDACTED                                       Wt(kg): 90.45 (02/08/2007)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

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: REDACTED                                        Ht(cm): _______ (______)
  DOB: REDACTED                                        Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2):

Flagged by PHARMACY,USER on 6/12/12@14:00: test

                Rx#: ##########
     Orderable Item: ACETAMINOPHEN TAB
          CMOP Drug: THIORIDAZINE 30MG/ML CONC.
                NDC: #####-###-##
     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: REDACTED                                       Ht(cm): 177.80 (02/08/2007)
  DOB: REDACTED                                       Wt(kg): 90.45 (02/08/2007)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

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: REDACTED                                       Ht(cm): _______ (______)
  DOB: REDACTED                                       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#: ##########
```

```
      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:
```

Medication Route Prompt

PSO*7*525 added a medication route "short list" and "long list" for selection of a medication route during the order finishing and order entry process. The short list includes only the routes associated with the dosage form for the selected medication in the PHARMACY ORDERABLE ITEM file (#50.7). When entering an outpatient prescription, entering "?" at the Medication Route prompt will display the short list of routes. Entering "??" at the Medication Route prompt will display the long list of routes. The system will allow either partial matches for routes that are found in the short list, or exact full-text matches or abbreviation matches for other routes in the MEDICATION ROUTES file (#51.2).

Prescriptions may be entered without medication route, such as prescriptions for supplies.

Prior to PSO*7*525 if no default med route was defined, the system set the med route to PO or ORAL. This patch removes that automatic PO or ORAL default and leaves the route blank if the prompt is unanswered.

If a route entered does not match any of the defined medication routes, then "??" displays.

Example: Short List for Route

Numeric selection from the short list:

```
ROUTE: OPHTHALMIC//?
          1  OPHTHALMIC  OPHTH
          2  LEFT EYE  OS
          3  RIGHT EYE  OD
          4  BOTH EYES  OU
Select MED ROUTE: 4  BOTH EYES        OU  BOTH EYES
```

Leading character selection from the short list:

```
ROUTE: OPHTHALMIC//?
          1  OPHTHALMIC  OPHTH
          2  LEFT EYE  OS
          3  RIGHT EYE  OD
          4  BOTH EYES  OU
Select MED ROUTE: BOTH EYES          OU  BOTH EYES
Schedule: ONCE DAILY//
```

Here is another example of two same leading character:

```
ROUTE: OPHTHALMIC//?
          1  OPHTHALMIC  OPHTH
          2  LEFT EYE  OS
          3  RIGHT EYE  OD
          4  BOTH EYES  OU
          5  BOTH EARS  AU
Select MED ROUTE: B
     1   BOTH EARS
     2   BOTH EYES
CHOOSE 1-2:
```

In the short list you can either select by entering the leading character or by selecting the number from the displayed list.

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: ###  REDACTED TEST CLINIC  ###

          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: REDACTED 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 then process the refill and renewal prescriptions just copied into the new PHARMACY TELEPHONE REFILLS file (#52.444).
    a. User prompts are identical to the current Class III Option, A3A PHONE REFILLS.
    b. Prescriptions are to be updated in PHARMACY TELEPHONE REFILLS file (#52.444) the same as they are in the current Class III global array, ^VEXHRX.
    c. On-screen messages are displayed indicating the status of each refill and renewal request.
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.

   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.

   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".

6. 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. Select either refills or renews. Then fill in information for the prescriptions to be batch barcode, i.e., fill date, route, etc. Next, use a barcode wand to enter the barcodes for the prescriptions to be refilled or renewed.

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 the 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 the 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.

1. Barcode too faint (change printer ribbon)
2. Improper scanning (move the wand at a steady rate)
3. 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.

Example: Process Internet Refills Screen

```
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 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, regardless of the user's input at the "Process internet refills for all divisions?" prompt, only the refills for the user's division will be filled.

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 example below.

Example: Process Internet Refills for all Divisions?

```
Process internet refills for all divisions?  NO// Y YES

Now refilling Rx# #########       Drug: CAPTROPRIL  100MG TABS

Qty: 60             Sig: TAKE ONE TABLET BY MOUTH TWICE A DAY

      Rx # ########## is for (ANYTOWN) division.
Continue? N// Y YES
```

◄ 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, 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 then completes and verifies the order. The *Complete Orders from OERR* option is used to complete orders entered into the patient record through Order Entry Results Reporting (OERR) V. 3.0. This option uses the List Manager features. PSO*7*391 added a new sort selection, 'CS' enabling users to select digitally signed CS orders separately.

Patient demographics and Clinical Alerts display in the header area when using this option. Refer to Patient Demographics and Clinical Alerts for more information.

Patch PSO*7*505 adds new sort selection 'SU', enabling users to select supply item orders separately. This patch also adds new sort selections under the 'CS' controlled substances sort. Users may now choose NON-CS+SCHEDUELS III-V, or NON-CS ONLY orders.

PSO*7*505 also introduces a new secondary sort feature, allowing users to further sort the list of orders that will be presented in option Complete Orders from OERR. After a user has selected a primary sort filter, a prompt will appear asking if the user would like to select a secondary sort filter. If the user answers yes, a new prompt appears for the user to again select from the list of sort selections. This secondary list does not include the item selected as the primary sort filter. For example, if the user chooses to first sort by 'PA' (Patient), the 'PA' (Patient) sort item will not appear in the secondary list.

The user may select orders by patient, route, priority, clinic, flag, supply items, 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.

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 the Electronic Claims Management Engine (ECME). ECME 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 ...
          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
          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.

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    #########
  YES     SC VETERAN

Do you want to see Medication Profile? Yes//
```

The user may enter a question mark at the "Select Patient" prompt to view 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.

After selecting a primary sort filter, the user will be asked if they wish to select a secondary sort filter. The filter chosen in as the primary filter will not appear in the secondary filter list.

```
Select Patient: ZZTEST,PATIENTONE        5-20-70    ##########     YES
     SC VETERAN
Would you like to select a secondary filter? N// YES
Select another filter:  (RT/PR/CL/FL/CS/SU/C/E): ROUTE// ?


Enter:
      'RT' to process orders by route (mail/window)
      'PR' to process orders by priority
      'CL' to process orders by clinic
      'FL' to process flagged orders
      'CS' to process digitally signed CS orders
      'SU' to process supply item orders
   or 'C' to continue with one filter
   or 'E' or '^' to exit

     Select one of the following:
```

```
          RT        ROUTE
          PR        PRIORITY
          CL        CLINIC
          FL        FLAGGED
          CS        CONTROLLED SUBSTANCES
          SU        SUPPLY
          C         CONTINUE W/PRIMARY
          E         EXIT


Select another filter:  (RT/PR/CL/FL/CS/SU/C/E): ROUTE//
```

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.

Example: Finishing an Order from OERR (continued)

```
  OPPATIENT16,ONE        4-3-41    ##########
  YES     SC VETERAN

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
  PID: REDACTED                                      Ht(cm): 177.80 (02/08/2007)
  DOB: REDACTED                                      Wt(kg): 90.45 (02/08/2007)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

*(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.

Example: Finishing an Order from OERR (continued)

```
Select Drug by number:  (1-2): 1
```

If the user chooses to copy Provider Comments into the Patient Instructions, they will be displayed 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.

```
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 # ######            05/22/01
OPPATIENT16,ONE               #60
TAKE ONE TABLET BY MOUTH TWICE A DAY WITH A FULL MEAL

ACETAMINOPHEN 500MG 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 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.

Flagged orders will not be processed. They are not a part of any pending orders. 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 ...
          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
          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 ALBANY>

Select By:  (PA/RT/PR/CL/FL/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    #########
  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: REDACTED                                      Ht(cm): 177.80 (02/08/2007)
  DOB: REDACTED                                      Wt(kg): 90.45 (02/08/2007)
  SEX: MALE                                                                    .
 CrCL: <Not Found> (CREAT: Not Found)             BSA (m2): _______
                                                             ISSUE  LAST REF DAY
 #  RX #         DRUG                                 QTY ST  DATE  FILL REM SUP

-----------------------------------ACTIVE-----------------------------------
 1 #########     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//        ANYTOWN     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: REDACTED                                      Ht(cm): 177.80 (02/08/2007)
  DOB: REDACTED                                      Wt(kg): 90.45 (02/08/2007)
```

```
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)           BSA (m2): 1.95

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: REDACTED                                     Ht(cm): 177.80 (02/08/2007)
  DOB: REDACTED                                     Wt(kg): 90.45 (02/08/2007)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)           BSA (m2): 1.95

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 re-validated 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 will result 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 will no longer delete unverified prescriptions.

Finishing an Order from OERR with Multiple Institutions

Multiple Institution entries can be added using the *Site Parameter Enter/Edit* option. If the local site has multiple entries in the CPRS ORDERING INSTITUTION field the user will be prompted for an Institution when entering the *Complete Orders from OERR* option. After an Institution is selected, then the Pending Orders that will be 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: ANYTOWN, AL.// <Enter> ANYTOWN, AL.521

You have selected ANYTOWN, AL..
After completing these orders, you may re-enter this option and select again.

Select By:  (PA/RT/PR/CL/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.

```
Is this correct? YES// <Enter>
 -Rx ########## has been discontinued...

Veteran Prescription ######### 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
```

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, 2001 11:01:29          Page:    1 of    3
OPPATIENT29,ONE                                                        <A>
  PID: REDACTED  N                                  Ht(cm): 175.26 (06/07/2000)
  DOB: REDACTED                                     Wt(kg): 79.09 (06/07/2000)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): 1.95

                Rx #: ######
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
                 NDC: #####-##
 (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, 2001 11:02:51       Page:    1 of    2
OPPATIENT16,ONE
  PID: REDACTED                              Ht(cm): 177.80 (02/08/1999)
  DOB: REDACTED                              Wt(kg): 90.45 (02/08/1999)

Rx #: ######   Original Fill Released: 5/25/01
Routing: Window      Finished by: OPPHARMACIST4,THREE

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       OPPHARMACIST4,THREE
Comments: Label never queued to print by User

Label Log:
#   Date        Rx Ref                    Printed By
==========================================================================
1   09/25/06    ORIGINAL                  OPPHARMACIST31,THREE
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 displays 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:

```
Rx Activity Log             Jul 06, 2006 09:54:24          Page:    2 of    2
OPPATIENT2,ONE
  PID: REDACTED                                    Ht(cm):  188.40  (12/02/00)
  DOB: REDACTED                                    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: ##########

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 will 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: REDACTED                                        Ht(cm): _______ (______)
  DOB: REDACTED                                        Wt(kg): _______ (______)

Rx #: ##########   Original Fill Released:
Routing: Window      Finished by: OPPHARMACIST4,THREE

ECME Log:
#   Date        Rx Ref         Initiator Of Activity
================================================================================
1   5/16/07@14:40:40     ORIGINAL       OPPHARMACIST4,THREE
Comments: ECME:WINDOW FILL(NDC: #####-####-##)-E PAYABLE-pOPP INSURANCE
2   5/16/07@14:40:40    ORIGINAL        OPPHARMACIST4,THREE
Comments: Billing quantity submitted through ECME: 25.000 (ML)
3   5/20/07@14:21:52     ORIGINAL        OPPHARMACIST4,THREE
Comments: ECME:REJECT WORKLIST-DUR OVERRIDE CODES(AD/AS/1B)-E
 REJECTED-pOPP INSURANCE
4   5/20/07@14:21:52     ORIGINAL        OPPHARMACIST4,THREE
Comments: Billing quantity submitted through ECME: 25.000 (ML)

================================================================================
          Enter ?? for more actions

Select Action:Quit// <Enter>
```

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: REDACTED                                        Ht(cm): _______ (______)
  DOB: REDACTED                                        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
5   05/04/11    DISP COMPLETED ORIGINAL
Comments: External Interface Dispensing is Complete.   Filled By: OPTECH,ONE
          Checking Pharmacist: OPPHARMACIST4,FOUR
```

```
          Mail Tracking Info.: USPS ########## 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 #########
2   05/04/11    ORIGINAL                OPPHARMACIST4,FOUR
Comments: From RX number ######### (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: #########


Maintenance Rx:
--------------
#   Date        Reason         Rx Ref         Initiator of Activity
=========================================================================
1   09/29/08    EDIT           ORIGINAL       OPUSER,TWO
Comments: Titration Dose Rx: #########
```

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

This option is used either to discontinue a prescription without deleting its record from the files, or to 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    #########
     YES     SC VETERAN

                                                                ISSUE  LAST REF DAY
    RX #         DRUG                                    QTY ST  DATE  FILL REM SUP
-------------------------------------------------------------------------------
-------------------------------------ACTIVE-----------------------------------
 1 #########     AMPICILLIN 500MG CAP                     10 A  05-11 05-11   5  30
 2 #########     PREDNISONE 5MG TAB                       30 A  05-30 05-30   3  10
 3 ##########    TRIPROLIDINE & PSEUDOEPHEDRINE           10 A  05-01 05-01   5  31
---------------------------------DISCONTINUED----------------------------------
 4 ##########    AMPICILLIN 10GM INJ. M.D.V.              30 DC 05-07 05-07   5  30
 5 #########     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
#########  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 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 EXEDIT]

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, the claim for that fill will be reversed. A new claim is created 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: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): _______
--------------------------------------------------------------------------------
               Rx #: ##########
 (1) *Orderable Item: ASPIRIN TAB
 (2)            Drug: ASPIRIN BUFFERED 325MG TAB
                 NDC: #####-####-##
 (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: ALBANY (500)
+---------Enter ?? For more actions-----------------------------------------------
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// 9
DAYS SUPPLY:  (1-90): 90//
```

Example: DAYS SUPPLY: (1-265): 90// (Active Order)

MAXIMUM DAYS SUPPLY in the Drug File (#50) is greater than the MAXIMUM DAYS SUPPLY in the VA PRODUCT File (#50.68).

The MAXIMUM DAYS SUPPLY for the Drug File (#50) is 365.

The MAXIMUM DAYS SUPPLY for the VA PRODUCT File (#50.68) is null.

After an update from the Pharmacy Product System for a maximum days supply of 265 the following would occur:

The MAXIMUM DAYS SUPPLY for the Drug File (#50) is 365.

The MAXIMUM DAYS SUPPLY for the VA PRODUCT File (#50.68) is 265.

In this scenario, the value in the VA PRODUCT File (#50.68) takes priority since it is the lower of the two values.

The DAYS SUPPLY for this prescription can be set to a maximum of 265.

```
OP Medications (ACTIVE)       May 25, 2016@17:18:47          Page:    1 of    3
TEST,PATIENT                                        <NO ALLERGY ASSESSMENT>
  PID: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): _______
------------------------------------------------------------------------------
                Rx #: ##########
 (1) *Orderable Item: ASPIRIN TAB
 (2)            Drug: ASPIRIN BUFFERED 325MG TAB
                 NDC: #####-####-####
 (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: ALBANY (500)
+---------Enter ?? for more actions---------------------------------------------
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// 9
DAYS SUPPLY:  (1-265): 90//
```

Example: DAYS SUPPLY: (1-250): 90// (Active Order)

MAXIMUM DAYS SUPPLY in the VA PRODUCT File (#50.68) is greater than the MAXIMUM DAYS SUPPLY in the Drug File (#50).

The MAXIMUM DAYS SUPPLY for the Drug File (#50) is 250.

The MAXIMUM DAYS SUPPLY for the VA PRODUCT File (#50.68) is 365.

In this scenario, the value in the Drug File (#50) takes priority since it is the lower of the two values.

The DAYS SUPPLY for this prescription can be set to a maximum of 250.

```
OP Medications (ACTIVE)       May 25, 2016@16:37:28          Page:    1 of    3
TEST,PATIENT                                        <NO ALLERGY ASSESSMENT>
  PID: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)             BSA (m2): _______
------------------------------------------------------------------------------
               Rx #: ##########
 (1) *Orderable Item: ASPIRIN TAB
 (2)            Drug: ASPIRIN BUFFERED 325MG TAB
                 NDC: #####-####-##
 (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: ALBANY (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: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      Wt(kg): _______ (______)
  SEX: MALE
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2):
------------------------------------------------------------------------------
*(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: ###
(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 13: 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//

Days Supply	VA Product File	Local Drug File	Outpatient Pharmacy 'Days Supply' Prompt
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).

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)

These are additional status results 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
```

Hazardous Medication Warnings – 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         #####         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: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      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: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      Wt(kg): _______ (______)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)           BSA (m2): _______

               Rx #: #######
 (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: REDACTED                                        Ht(cm): _______ (______)
  DOB: REDACTED                                        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: REDACTED                                        Ht(cm): _______ (______)
  DOB: REDACTED                                        Wt(kg): _______ (______)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)              BSA (m2): _______

                Rx #: ######
 (1) *Orderable Item: HYDROXYUREA CAP,ORAL
 (2)            Drug: HYDROXYUREA 500MG CAP
                 NDC: #####-####-##
 (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: ######          PATIENT: OUTPATIENT,FOUR (###-##-####)



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#:###-##-####  RX#: ######

                                                            ISSUE  LAST REF DAY
    RX #         DRUG                                 QTY ST  DATE  FILL REM SUP
-------------------------------------------------------------------------------
----------------------------------NON-VERIFIED---------------------------------
   ######        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: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      Wt(kg): _______ (______)
  SEX: FEMALE
  CrCL: <Not Found> (CREAT: Not Found)           BSA (m2): _______

                Rx #: ######
 (1) *Orderable Item: SPIRONOLACTONE TAB
 (2)            Drug: SPIRONOLACTONE 25MG S.T. <DIN>
                 NDC: #####-####-##
 (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 # ######  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...
```

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 ePharmacy

Site Parameters [PSO ePHARM SITE PARAMETERS] menu is locked with the PSO EPHARMACY SITE MANAGER Key.

The following menu items allow the user to perform ePharmacy specific functions including rejections by third party payers including DUR/RTS and has the following options:

- *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 or 943 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, Reject Resolution Required, and Refill Too Soon are moved to the REFILL TOO SOON/DUR REJECT RESOLUTION REQUIRED (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
------------------------------------------------------------------------------
########       SODIUM CHLORIDE 0.9% OPPATIENT,ONE(####)  04/18/07  OPUSER,ONE
Insurance:   OPIinsurance One
Reject:      79:Refill Too Soon
Billed Amount: 14.18
     Comments: PATIENT WAS RUNNING OUT OF DRUG.
Payer Message: NEXT RFL 041907,DAYS TO RFL 1,LAST FILL 112706 VIA MAIL,REFILL
               TOO SOON.
#######        ALENDRONATE 70MG/75M OPPATIENT,TWO(####)  05/20/07  OPUSER,ONE Insurance:
OPIinsurance Two
Reject:      88:DUR Reject ErrorBilled 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: REDACTED                                HEIGHT(cm): 175.26 (11/21/2006)
  DOB: REDACTED                                WEIGHT(kg): 108.18 (08/09/2007)
  SEX: MALE                                EXP/CANCEL CUTOFF: 120 DAY                  .
                                                              ISSUE    LAST     REF  DAY
  # Rx#           DRUG [^]                            QTY ST  DATE     FILL     REM  SUP
  1 ##########    ALBUTEROL INHALER                     1 A   04-21-07 04-21-07  11    7
  2 #######       ALPRAZOLAM 0.25MG TABS               30 DC  06-14-07 06-14-07  11   30
  3 ##########    AMITRIPTYLINE 10MG TAB               60 A   04-21-07 04-21-07  11   30
  4 ##########    CABERGOLINE 0.5MG TAB                 7 E   05-18-05 05-18-05   6    7
  5 #########     DESIPRAMINE 25MG                     90 S   02-00-07 02-11-07  11   90
  6 ###########   DIGOXIN 0.05MG/ML ELIX (60CC)        30 A   02-01-07 02-20-07  10   90
  7 #########     METAPROTERENOL 5% SOLUTION 10ML      15 DC  06-02-07 06-03-07  11   15
  8 #########     METAPROTERENOL 5% SOLUTION 10ML      10 DC  06-02-07 06-03-07  11   10
  9 ##########    METAPROTERENOL 5% SOLUTION 10ML      15 A>  06-02-07 06-00-07  11   15
 10 ##########    NICOTINE 10MG/ML SOLN NASAL SPRAY     1 A>  06-02-07 06-00-07  11   15
 11 #########     SIMVASTATIN 20MG TAB                  5 DC  05-28-05 04-27-07   3   30
 12 ##########    SODIUM CHLORIDE 0.9% NASAL SOLN(O     1 A   05-10-07 05-10-07  11   30
 13 ##########    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 (ALBANY):
     ---------------------------------------
     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: REDACTED                                HEIGHT(cm): 175.26 (11/21/2006)
  DOB: REDACTED                                WEIGHT(kg): 108.18 (08/09/2007)
  SEX: MALE                          EXP/CANCEL CUTOFF: 120 DAY            .
                                                        ISSUE    LAST     DAY
  # Rx#           DRUG [^]                        QTY ST DATE     FILL     SUP
  1 ##########    ALBUTEROL INHALER                 1 A  04-21-07 04-21-07   7
```

```
    SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
  2 #######       ALPRAZOLAM 0.25MG TABS            30 DC 06-14-07 06-14-07  30
    SIG: TAKE 2 CAPSULES BY MOUTH TAKE
  3 ##########    AMITRIPTYLINE 10MG TAB            60 A  04-21-07 04-21-07  30
    SIG: TAKE TWO BY MOUTH EVERY DAY
  4 ##########    CEFOPERAZONE                       7 E  05-18-05 05-18-05   7
    SIG: TAKE 1 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
  5 #########     DESIPRAMINE 25MG                  90 S  02-00-07 02-11-07  90
    SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
  6 ########      DIGOXIN 0.05MG/ML ELIX (60CC)     30 A  02-01-07 02-20-07  90
    SIG: 300 LB BY MOUTH EVERY FOUR HOURS
  7 #########     METAPROTERENOL 5% SOLUTION 10ML   15 DC 06-02-07 06-03-07  15
    SIG: TAKE 1 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
  8 ##########    METAPROTERENOL 5% SOLUTION 10ML   10 DC 06-02-07 06-03-07  10
    SIG: TAKE 2 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
  9 ##########    METAPROTERENOL 5% SOLUTION 10ML   15 A  06-02-07 06-00-07  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 a RTS/DUR 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 a RTS/DUR rejection, the pharmacist will be presented with a Reject Processing screen at release.

Example: Matched NDC:

```
Select ePharmacy Menu Option: NV  NDC Validation

Prescription: ######       DIPYRIDAMOLE 25MG TAB
Rx: ######          Fill: 0             Patient: OPPATIENT,ONE
Drug: DIPYRIDAMOLE 25MG TAB             NDC: #####-####-##
```

```
Prescription label NDC: #####-####-##
Stock NDC: #####-####-##

NDC match confirmed

Prescription:
```

Example: Non-matched NDC:

```
Prescription:    101341     BIPERIDEN 2MG TAB
Rx: ######          Fill: 0             Patient: OPPATIENT,ONE
Drug: BIPERIDEN 2MG TAB                 NDC: #####-####-##
Prescription label NDC: #####-####-##
Stock NDC: ###########
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

     ALBANY'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 14: Site Parameter 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.

Action	Description
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: ANYTOWN VAM&ROC

Pharmacy Division: ANYTOWN 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     #####
   ANYTOWN CLINIC     #####
   MOC - ANYTOWN      #####
   ANYTOWN CLINIC     #####

Select a Pharmacy Division to be overwritten: ANYTOWN CLINIC    #####

ANOTHER ONE:

The parameters from Pharmacy Division ANYTOWN 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         ANYTOWN     ILLINOIS       Y
CHOOSE 1-2: 2  TEST INSURANCE     123 MAIN ST         ANYTOWN     ILLINOIS
 Y   TEST INSURANCE

ANOTHER ONE:
```

Next, the user can choose to display either Unresolved, Resolved, or Both types of rejects.

```
     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...
```

Example: Viewing and Resolving Open Rejects (continued)

```
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 #########    OPPATIENT,FOUR(1322P         A AND Z OINTMENT     DUR:
    Payer Message:
  2 #########    OPPATIENT,FOUR(1322P         PHYTONADIONE 5MG TAB 79 :REFILL TOO SO
    Payer Message:
  3 #########    OPPATIENT,FOUR(1322P         PHYTONADIONE 5MG TAB DUR:
    Payer Message:
  4 #########    OPPATIENT,TEN(3222)  ALBUMIN 5% 250ML     DUR:
    Payer Message:
  5 #########    OPPATIENT,TEN(3222)  ALBUTEROL INHALER    DUR:
    Payer Message:
  6 #########    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 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#: #########    NCPDP: ########  TAX ID: ##-#######
Patient  : OPPATIENT,FOUR (###-##-####)  Sex: M            DOB: REDACTED
Rx#      : #########/#      ECME#: ############ Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA                           NDC Code: #####-####-##

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
DUR Add Msg    : THIS IS THE DUR ADDITIONAL TEXT._____________________________

OTHER REJECTS
29 - M/I Number Refills Authorized
39 - M/I Diagnosis Code

INSURANCE Information
Insurance      : TEST INS
Contact        : ###-###-####
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 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 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) – 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. The 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.

- 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 prior prescriptions for the same patient and drug to allow calculation of a suspense date for a new prescription.

- 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.

- 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: REDACTED                                          Ht(cm): _______ (______)     DOB:
REDACTED (##)                            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 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.

Discontinued TRICARE and CHAMPVA prescriptions no longer appear on the Third Party Payer Rejects - Worklist [PSO REJECTS 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 #########    OPPATIENT,TWELVE(####)   ACETYLCYSTEINE 20% 3 79 :REFILL TOO SO
    Payer Message: PLAN = 8906    NEXT FILL: 20050429
  2 #########    OPPATIENT,TWELVE(####)   ACETYLCYSTEINE 20% 3 79 :REFILL TOO SO
    Payer Message: RTS - Rx: ####### DT: 31-MAR-2005 DS: 30 RD: 23-APRIL 2005
  3 ##########   OPPATIENT,FOUR(####)    A AND Z OINTMENT     DUR:
    Payer Message: DUR Reject Error
                          REJECT RESOLUTION REQUIRED
  4 #########    OPPATIENT,FOUR(####)    A AND Z OINTMENT     07 :M/I Cardholde
    Payer Message:
                             CHAMPVA - Non-DUR/RTS
  5 ######       OPCVACARE,ONE(####)      BACLOFEN 10MG TABS   07 :M/I Cardholde
    Payer Message:
  6 ######       OPCVACARE,TWO(####)      LORAZEPAM 1MG TAB    07 :M/I Cardholde
    Payer Message:
                             TRICARE - Non-DUR/RTS
  7 ######       OPTRICARE,ONE(####)      BACLOFEN 10MG TABS   07 :M/I Cardholde
    Payer Message:
  8 ######       OPTRICARE,TRI(####)      LORAZEPAM 1MG TAB    07 :M/I Cardholde
    Payer Message:
                                  OTHER REJECTS
  9 ######       OPPATIENT,THREE(####)      FENOPROFEN 300MG CAP 08 :M/I Person Co
    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
```

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(UNRESOLVED)Nov 21, 2005@09:51:15          Page:    1 of    1
Division : ANYTOWN   NPI#: #########    NCPDP: ########  TAX ID: XX-XXXXXXX
Patient  : OPPATIENT,FOUR(###-##-####)  Sex: M             DOB: REDACTED (##)
Rx#      : #########/#      ECME#: ############ Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA                          NDC Code: #####-####-##
_____________________________________________________________________________
REJECT Information___________________________________________________________
Reject Type    : 88 - DUR REJECT received on NOV 15, 2005@14:11:51
Reject Status  : OPEN/UNRESOLVED
Next Avail Fill: NOV 20,2005
Payer Addl Msg : DUR Reject Error
Reason Code    :
DUR Text       :_____________________________________________________________

INSURANCE Information________________________________________________________
Insurance      : TEST INS
Contact        :  ###-###-####
BIN / PCN     : ###### / ##########
```

```
Group Number   : ######
Cardholder ID  : ##########_____________________________________________________

          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
```

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 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. This option is active for DUR rejects only.

- 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 a 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. These comments are local to the Reject Worklist and View/Process options and are not transmitted to ECME. The comments also display in the ECME Log section of the Activity Log.

- 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
NM	COUNSELING SVCS NOT RELATED TO MED THERAPY OR DX
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

     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>

Prescription ######### 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-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: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
+
#   Date/Time           Rx Ref          Initiator Of Activity
================================================================================
1   5/16/07@14:40:40     ORIGINAL       OPPHARMACIST4,THREE
Comments: Submitted to ECME:WINDOW FILL(NDC: #####-####-##)
2   5/16/07@14:40:40    ORIGINAL        OPPHARMACIST4,THREE
```

```
Comments: Billing quantity submitted through ECME: 25.000 (ML)
3   5/20/07@14:21:52     ORIGINAL        OPPHARMACIST4,THREE
Comments: Submitted to ECME:REJECT WORKLIST-DUR OVERRIDE CODES(AD/AS/1B)-E
 REJECTED
4   5/20/07@14:21:52     ORIGINAL        OPPHARMACIST4,THREE
Comments: Billing quantity submitted through ECME: 25.000 (ML)



ECME REJECT Log:
#   Date/Time Rcvd       Rx Ref    Reject Type      STATUS    Date/Time Resolved
================================================================================
1   5/16/07@14:40:40     ORIGINAL    DUR                RESOLVED   5/20/07@14:21:52
Comments: CLAIM RE-SUBMITTED

          Enter ?? for more actions

Select Action:Quit//TRICARE CHAMPVA Override Report
```

Example: Resubmitting an ePharmacy Claim

Select ED (Edit Rx) and the following hidden actions are available for use.

```
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  ###     PRESCRIBER DEA NUMBE
R
    Value to transmit: XXXXXXX
Transmit with claim (Y/N)? Y// ES

NCPDP Field Name or Number:

Fields entered to transmit:
    D01-KV PRESCRIBER DEA NUMBER: #######

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//
```

[PSO TRI CVA Override Report]

This menu option is locked with the PSO TRICARE/CHAMPVA MGR security key.

This option provides information in a detail or summary report format that will list prescriptions where the 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; 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.

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): ANYTOWN
  Selected:
          ANYTOWN
Select ECME Pharmacy Division(s): GRAND RAPIDS    MI  CBOC  #####    VA GRAND RAPIDS OPC
#####    VA ANYTOWN OPC
  Selected:
          ANYTOWN
          VA ANYTOWN OPC
Select ECME Pharmacy Division(s):

Select one of the following:

          T         TRICARE
          C         CHAMPVA
          A         ALL

Select Eligibility (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
          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 include 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   X INFO
    ACTION DATE        USER NAME                         $BILLED       QTY         NDC#
DRUG
================================================================================================
=================

------------------------------------------------------------------------------------------------
-----------------
DIVISION: DIVISION ONE

****************************   CHAMPVA INPATIENT   *********************************

CVAPATIENT,TWO/xxxx                ##########        #/############    02/13/10   C  RT
AC/N
    02/13/10           POSTMASTER                        45.00         180        ##########
METFORMIN HCL 500MG TAB
    CHAMPVA INPATIENT/DISCHARGE
```

```
CVAPATIENT,THREE/xxxx               ##########        #/############    02/13/10   C  RT
AC/N
   02/13/10            POSTMASTER                          30.00         180        ##########
METFORMIN HCL 500MG TAB
   CHAMPVA INPATIENT/DISCHARGE

    CHAMPVA INPATIENT
    SUBTOTALS                                    75.00
    RX COUNT                                     2
    MEAN                                         37.50

*****************************   CHAMPVA NON-BILLABLE *********************************

CVAPATIENT,ONE/xxxx                 ##########        #/############    02/13/10   C  RT
AC/N
   02/13/10            POSTMASTER                          20.00         180
########## 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
########## ACETAMINOPHEN 325MG TAB
    eC:CHAMPVA-NON BILLABLE
    CHAMPVA Partial Fill

OPCVA,TWO/272P                      #######           #/############    07/27/11   W ** AC/N
    07/27/11          PSOUSER,THREE                      8.02          1
########## 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                    #######           0/N/A            09/08/11   W ** AC/N
    09/08/11          PSOUSER,FOUR                       8.00          1
########## ACETAMINOPHEN 325MG TAB
    CHAMPVA Partial Fill

          PSOUSER,TWO
          SUBTOTALS                              8.00
          RX COUNT                               1
          MEAN                                   8.00


TCOUSER,TWO/265P                    #######           #/############    09/08/11   W ** AC/N
    09/08/11          PSOUSER,FOUR                      23.58          30
########## 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               #######        #/############     09/10/10  C  RT  AC/N
    09/10/10          POSTMASTER                        45.00          180
########## METFORMIN HCL 500MG TAB
    TRICARE Inpatient/Discharge

     TRICARE INPATIENT
     SUBTOTALS                                  45.00
     RX COUNT                                   1
     MEAN                                       45.00

******************************   TRICARE NON-BILLABLE *********************************

OPPATIENT,TRITWO/XXXX               #######        #/############     09/10/10  C  RT  AC/N
    09/10/10          OPPHARM,ONE                       20.00          180
########## 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              #######        #/############     09/10/10  C  RT  AC/N
    09/10/10           OPPHARM,ONE                      20.00          180
########## 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                ######        #/############    02/13/10   C  RT  AC/N
   02/13/10          POSTMASTER                       10.00         180
########## METFORMIN HCL 500MG TAB
   CHAMPVA INPATIENT/DISCHARGE
      SUB-TOTALS                            10.00
      RX COUNT                              1
      MEAN                                  10.00

CVAPATIENT,THREE/xxxx              ######        #/############    02/13/10   C  RT  AC/N
   02/13/10          POSTMASTER                       40.00         180
########## 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                ######        #/############    02/13/10   C  RT  AC/N
   02/13/10          POSTMASTER                       60.00         180
########## 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                     ######          0/N/A           07/27/11   W ** AC/N
    07/27/11          OPUSER,THREE                     8.18         60
########## ACETAMINOPHEN 325MG TAB
    eC:CHAMPVA-NON BILLABLE
    CHAMPVA Partial Fill

OPCVA,TWO/272P                     ######          #/############    07/27/11   W ** AC/N
    07/27/11          OPUSER,THREE                     8.02         1
########## 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              #######        #/#############     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            #######        #/#############     09/10/10  C  RT  AC/N
    09/10/10          POSTMASTER                        40.00          180
########## 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            #######        #/#############     09/10/10  C  RT  AC/N
    09/10/10 OPPHARM,THREE                            60.00          180
########## 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           #######        #/#############     09/10/10     C  RT  AC/N
    09/10/10 OPHARM,TWO                               20.00          180
########## 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 at the end of the displayed information. 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
Selection : ALL UNRESOLVED REJECTS
  # Rx#          PATIENT(ID) [^]          DRUG                  REASON
  1 ######       ECMEIBTEST,ONE(####)     MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
    Payer Message:
  2 ######       ECMEPAT,TWO(####)        BENZTROPINE 2MG TAB  79 :REFILL TOO SO
    Payer Message:
  3 ######       OPTRICARE,ONE(####)      ACETAZOLAMIDE 250MG  79 :REFILL TOO SO
    Payer Message:
                            CHAMPVA - Non-DUR/RTS
  4 ######       OPCVACARE,ONE(####)      BACLOFEN 10MG TABS   07 :M/I Cardholde
    Payer Message:
  5 ######       OPCVACARE,TWO(####)      LORAZEPAM 1MG TAB    07 :M/I Cardholde
    Payer Message:
                            TRICARE - Non-DUR/RTS
  6 ######       OPTRICARE,ONE(####)      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
Selection : ALL UNRESOLVED REJECTS
  # Rx#          PATIENT(ID) [^]          DRUG                  REASON
  1 ######       ECMEIBTEST,ONE(####)     MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
    Payer Message:
  2 ######       ECMEPAT,TWO(####)        BENZTROPINE 2MG TAB  79 :REFILL TOO SO
    Payer Message:
```

```
  3 ######       OPCVACARE,ONE(####)      BACLOFEN 10MG TABS   07 :REFILL TOO SO
    Payer Message:
  4 ######       OPTRICARE,ONE(####)      ACETAZOLAMIDE 250MG  79 :REFILL TOO SO
    Payer Message:
  5 ######       OPTRICARE,ONE(####)      ATENOLOL 100MG TAB   79 :REFILL TOO SO
    Payer Message:
                            CHAMPVA - Non-DUR/RTS
  6 ######       OPCVACARE,ONE(####)      BACLOFEN 10MG TABS   07 :M/I Cardholde
    Payer Message:
  7 ######       OPCVACARE,TWO(####)      LORAZEPAM 1MG TAB    07 :M/I Cardholde
    Payer Message:
                            TRICARE - Non-DUR/RTS
  8 ######       OPTRICARE,ONE(####)      DANTROLENE 25MG CAP  14 :M/I Eligibili
    Payer Message:
  9 ######       OPTRICARE,ONE(####)      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 that displays at the end of the listing.

Example with GI action toggled on:

```
Insurance Rejects-Worklist    Aug 13, 2008@16:12:46          Page:    1 of    1
Division  : ANYTOWN
Selection : ALL UNRESOLVED REJECTS GROUPED BY INSURANCE
  # Rx#          PATIENT(ID) [^]          DRUG                  REASON
                            BLUE CROSS BLUE SHIELD
  1 ######       ECMEPAT,TWO(####)        BENZTROPINE 2MG TAB  79 :REFILL TOO SO
    Payer Message:
                                    CHAMPVA
  2 ######       OPCVACARE,ONE(####)      BACLOFEN 10MG TABS   07 :REFILL TOO SO
    Payer Message:
                                    TRICARE
  3 ######       OPTRICARE,ONE(####)      ACETAZOLAMIDE 250MG  79 :REFILL TOO SO
    Payer Message:
                             ZENITH ADMINISTATORS
  4 ######       ECMEIBTEST,ONE(####)     MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
    Payer Message:

 5 ######       OPTRICARE,ONE(####)      ATENOLOL 100MG TAB   79 :REFILL TOO SO
   Payer Message:
                            CHAMPVA - Non-DUR/RTS
  6 ######       OPCVACARE,ONE(####)      BACLOFEN 10MG TABS   07 :M/I Cardholde
    Payer Message:
  7 ######       OPCVACARE,TWO(####)      LORAZEPAM 1MG TAB    07 :M/I Cardholde
    Payer Message:
                            TRICARE - Non-DUR/RTS
  8 ######       OPTRICARE,ONE(####)      DANTROLENE 25MG CAP  14 :M/I Eligibili
    Payer Message:
  9 ######       OPTRICARE,ONE(####)      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 appear 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 at the end of 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
Selection : ALL UNRESOLVED REJECTS
  # Rx#          PATIENT(ID) [^]          DRUG                  REASON
  1 ######       ECMEIBTEST,ONE(####)     MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
    Payer Message:
  2 ######       ECMEPAT,TWO(####)        BENZTROPINE 2MG TAB  79 :REFILL TOO SO
    Payer Message:
  3 ######       OPTRICARE,ONE(####)      ACETAZOLAMIDE 250MG  79 :REFILL TOO SO
    Payer Message:
                             CHAMPVA - Non-DUR/RTS
  4 ######       OPCVACARE,ONE(####)      BACLOFEN 10MG TABS   07 :M/I Cardholde
    Payer Message:
                             TRICARE - Non-DUR/RTS
  5 ######       OPTRICARE,ONE(####)      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
Selection : ALL UNRESOLVED REJECTS
  # Rx#          PATIENT(ID) [^]          DRUG                  REASON
  1 ######       ECMEIBTEST,ONE(####)     MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
    Payer Message:
  2 ######       ECMEPAT,TWO(####)        BENZTROPINE 2MG TAB  79 :REFILL TOO SO
    Payer Message:
  3 ######       OPTRICARE,ONE(####)      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// ??
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
```

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 an 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 # ######            01/27/15
OPTRICARE,TWO                  #360
TAKE TWO TABLETS BY MOUTH TWICE A DAY

BACLOFEN 10MG TABS
REDACTED             REDACTED
# 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: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      Wt(kg): _______ (______)
+
ECME Log:
#   Date/Time           Rx Ref          Initiator Of Activity
================================================================================
1   1/27/15@15:28:54    ORIGINAL        REDACTED
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.

- The Reject Action prompt will be updated to a default of "Quit".

Example of Reject Notification Screen Non-DUR/RTS with the default 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#: ##########
 Patient  : TRICARE,ONE(XXXX)  Sex: M           DOB: REDACTED
 Rx/Drug  : ######/# - AMOXICILLIN 250MG CA         ECME#: ############
 Reject(s): M/I Product/Service ID (21)  Received on NOV 01, 2010@09:30:03.

 Insurance    : EXPRESS SCRIPT                 Contact: ###-###-####
 Group Name   : XXXXXX                    Group Number: ####
 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//Discontinue

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.

Example of Reject Notification Screen DUR/RTS

```
88 - DUR Reject Error

           *** TRICARE - REJECT RECEIVED FROM THIRD PARTY PAYER ***
   ------------------------------------------------------------------------
   Division : XXXXXX                                    NPI#: ##########
   Patient  : OPPATIENT,TRICARE (XXXX)           Sex: F DOB: REDACTED
   Rx/Drug  : ######/# - BALNETAR 7.5 OZ             ECME#: ############
   Reject(s): DUR REJECT (88).  Received on NOV 01, 2010@07:08:44.

   Insurance    : EXPRESS SCRIPTS                 Contact: ###-###-####
   Group Name   : XXXXXXX                    Group Number: ####
 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 CLAI
M 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 also 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//

DRUG NOT BILLABLE

                  *** TRICARE - NON-BILLABLE ***
   ---------------------------------------------------------------------
   Division : XXXX DIVISION                          NPI#: ##########
   Patient  : TRICARE,ONE(XXX-XX-XXXX)  Sex: M        DOB: REDACTED
   Rx/Drug  : ######/# - 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
Selection : ALL UNRESOLVED REJECTS
  # Rx#          PATIENT(ID) [^]          DRUG                 REASON
  Payer Message:
                             TRICARE - Non-DUR/RTS
 13 ######       OPTRICARE,ONE(4789)      DIAZOXIDE 300MG INJ  eT : TRICARE-NON B
    Payer Message:
 14 ######       OPTRICARE,ONE(4789)      MANNITOL 15% S.S. LV 22 :M/I Dispense
    Payer Message:
 15 #######      OPTRICARE,ONE(4789)      METHOCARBAMOL 750MG  34 :M/I Submissio
    Payer Message:
 16 ######       OPTRICARE,ONE(4789)      BENZTROPINE 2MG TAB  07 :M/I Cardholde
    Payer Message:
 17 ######       OPTRICARE,ONE(4789)      DEXAMETHASONE 0.5MG  07 :M/I Cardholde
    Payer Message:
 18 ######       TRICARE,ONLYTRICAR(3939) NEODECADRON OPHTMALI 07 :M/I Cardholde
    Payer Message:
 19 ######       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#: #########    NCPDP: ########  TAX ID: XX-XXXXXXX
Patient  : TRICARE,TWO(XXX-XX-XXXX)  Sex: M                      DOB: REDACTED
Rx#      : ######/#        ECME#:                   Date of Service: Mar 16, 2009
CMOP Drug: DOCUSATE NA 100MG CA                         NDC Code: #####-####-##
                                                                                .
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    :
DUR Text       :_____________________________________________________________


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#: #########    NCPDP: ########  TAX ID: XX-XXXXXXXPatient  :
OPPATIENT,TRICARE(XXX-XX-XXXX)  Sex: F                 DOB: REDACTED
Rx#      : ######/#         ECME#:                  Date of Service: Sep 16, 2010
Drug     : ALUMINUM HYDROXIDE GEL 320MG/5ML SUSP             NDC Code: #####-####-##

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 / BIN      :
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 display in the TRICARE or CHAMPVA section of the Pharmacy Third Party Payer Rejects – Worklist, as applicable.

In the following example, a prescription is processed for a TRICARE patient without an active TRICARE insurance policy on file. The Reject Action prompt defaulted to Q (Quit) and the prescription will be sent to the Pharmacy Third Party Payer Rejects – Worklist with an internal reason code "eT".

Example of TRICARE reject due to an active TRICARE insurance policy is not on file

```
•  Not Insured:
                      *** TRICARE - NON-BILLABLE ***
   ------------------------------------------------------------------------
   Division : XXXXXXXX XXX&XXX     NPI: #########    NCPDP: #######
   Patient  : XXXX,XXXXX(XXPX)  Sex: M                DOB: REDACTED
   Rx/Drug  : ######/# - 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#: #########    NCPDP: ########  TAX ID: XX-XXXXXXX
Patient  : TRICARE,TWO(XXX-XX-XXXX)  Sex: M                    DOB: REDACTED
Rx#      : ######/#        ECME#: ############    Date of Service: Feb 08, 2009
CMOP Drug: ACARBOSE 25MG TAB                            NDC Code: #####-####-##

REJECT Information (TRICARE)                                                    .
Reject Type    : M/I Cardholder ID (07) received on JUL 10, 2010@12:22:10
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      : ###### / XXXXXXXXX
Group Number   : ####
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 below example. 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)  Sep 30, 2010@10:25:13              Page:   1 of     1
Division : ANYTOWN   NPI#: #########    NCPDP: ########  TAX ID: XX-XXXXXXX
Patient  : TRICARE,TWO(XXXX)  Sex: M                            DOB: REDACTED
Rx#      : ######/#        ECME#: ############    Date of Service: Feb 08, 2009
CMOP Drug: ACARBOSE 25MG TAB                              NDC Code: #####-####-##

REJECT Information (TRICARE)                                                    .
Reject Type    : M/I Cardholder ID (07) received on JUL 10, 2010@12:22:10
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      : ###### / XXXXXXXXX
Group Number   : ####
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): Next Screen//
```

- 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 which 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 that will prompt for label print.

```
Reject Information (TRICARE)  Sep 30, 2010@10:25:13              Page:   1 of     1
Division : ANYTOWN   NPI#: #########    NCPDP: ########  TAX ID: XX-XXXXXXX
Patient  : TRICARE,TWO(XXXX)  Sex: M                            DOB: REDACTED
Rx#      : ######/#      ECME#: ############      Date of Service: Feb 08, 2009
CMOP Drug: ACARBOSE 25MG TAB                              NDC Code: #####-####-##

REJECT Information (TRICARE)                                                    .
Reject Type    : M/I Cardholder ID (07) received on JUL 10, 2010@12:22:10
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      : ###### / XXXXXXXXX
  Group Number   : ####
  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 ######:
                         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 contain non-clinical rejects and are resolved in the same manner as DUR/RTS rejects. The comments section denotes whether the reject was transferred automatically as is the case in the example below or "Transferred by OPECC" will 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.

```
Reject Information(Veteran)Jul 30, 2008@14:54:51          Page:    1 of    2
Division : ANYTOWN   NPI#: #########    NCPDP: ########  TAX ID: XX-XXXXXXX
Patient  : OPPATIENT,FOUR(XXX-XX-XXXX)  Sex: M              DOB: REDACTED
Rx#      : #######/#        ECME#: ############ Date of Service: Jul 15, 2008
CMOP Drug: DANAZOL 50MG CAP                        NDC Code: #####-####-##

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

               Rx #: #########
 (1) *Orderable Item: DANAZOL CAP,ORAL
 (2)       CMOP Drug: DANAZOL 50MG CAP
                  NDC: #####-####-##
 (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: ANYTOWN VAM&ROC (442)
(17)      Pharmacist:
(18)         Remarks: New Order Created by copying Rx # #######
(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: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      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 #######? Yes//   YES



OP Medications (SUSPENDED)    Jul 30, 2008@14:55:21          Page:    2 of    3
OPPATIENT,FOUR
  PID: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      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: ANYTOWN VAM&ROC (442)
(17)      Pharmacist:
(18)         Remarks: New Order Created by copying Rx # #######.
(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 : ANYTOWN VAM&ROC                                  NPI#: #########
Patient  : OPPATIENT,FOUR(XXX-XX-XXX)  Sex: M              DOB: REDACTED
Rx#      : #######/#        ECME#: ############ Date of Service: Jul 15, 2008
CMOP Drug: DOCUSATE NA 100MG CA                   NDC Code: #####-####-##

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// RES   Resubmit Claim


     When you confirm, a new claim will be submitted for
     the prescription and this REJECT will be marked
     resolved.

     Confirm? YES//
TRICARE Prescription ####### 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  : ANYTOWN VAM&ROC
Selection : ALL UNRESOLVED REJECTS
  # Rx#          PATIENT(ID) [v]          DRUG                  REASON
    Payer Message:
 13 #######      OPPATIENT,FOUR(####)     BACLOFEN 10MG TAB     79 :REFILL TOO SO
    Payer Message:
 14 #######      OPPATIENT,FOUR(####)     BENAZEPRIL HCL 40MG   79 :REFILL TOO SO
    Payer Message:
                                 OTHER REJECTS
15 #########     OPPATIENT,FOUR(####)     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: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      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 ########     BACLOFEN 10MG TAB                     14 S> 07-08 12-12  11   3
 2 ########     BENAZEPRIL HCL 40MG TAB                1 S> 06-24 06-26  10   1
 3 #########    CALCIUM GLUCONATE 650MG TAB            4 A> 06-16 07-30  10   2
-------------------------------------ACTIVE---------------------------------------
 4 #########     ACEBUTOLOL HCL 200MG CAP               1 S> 06-26 06-27  11   1
 5 #########     BACITRACIN 500 UNT/GM OPHTHALMIC OINT  1 AT 06-13 06-14  10  30
 6 #########     DANAZOL 50MG CAP                       6 S> 07-11 07-15  10   3
 7 #########     FAMCICLOVIR 125MG TAB                  2 AT 06-26 06-26  11   2
 8 ########      GABAPENTIN 100MG CAP                   6 S> 07-30 07-30  11   3
 9 #########     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   Renew
Select Action: Next Screen// AL   AL
OP Medications (SUSPENDED)    Jul 30, 2008@15:03:25          Page:    1 of    3
OPPATIENT,FOUR
  PID: REDACTED                                      Ht(cm): _______ (______)
  DOB: REDACTED                                      Wt(kg): _______ (______)
  SEX: MALE                                                                  .
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): _______

               Rx #: #########
 (1) *Orderable Item: DANAZOL CAP,ORAL
 (2)       CMOP Drug: DANAZOL 50MG CAP
                 NDC: #####-####-##
 (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 #: #######   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: #####-####-##)-E PAYABLE-p OPP INSURANCE
2   7/30/08@14:32:17    REFILL 1        OPPHARM,TWO
Comments: ECME:PULLED FROM SUSPENSE(NDC: #####-####-##)-E REJECTED-p OPP INSURANCE
3   7/30/08@14:55:56    REFILL 1        OPPHARM,TWO
Comments: Submitted to ECME:REJECT WORKLIST-E PAYABLE
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//
```

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#: #########    NCPDP: ########    TAX ID: XX-XXXXXXX
Patient  : OPORVET,TEST(###)  Sex: M                       DOB: REDACTED
Rx#      : #######/#      ECME#: ############   Date of Service: May 28, 2013
Drug     : AMPICILLIN 1GM INJ                          NDC Code: #####-####-##


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: ############FILL:2013-05-28 BIN: ######
                 PCN:TEST
Reason Code    :
+DUR Text      :
```

```
INSURANCE Information
Insurance      : EPOR7                          Coord. Of Benefits: PRIMARY
Contact        : ###-###-####
BIN / PCN      : ###### / XXXXXXXX
Group Number   : #####
Cardholder ID  : #########
          Enter ?? for more actions
Cardholder ID  : #########
          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)
```

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.

- The 3/4 Day Supply bypass will take precedence over a date entered into the Change Suspense Date from the Worklist. If the suspense date is in the future, suspense date will be changed to current date at the time the user sets the Bypass to "YES".
- 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 #: ######       METFORMIN HCL 500MG 24HR SA TAB
Another one: ########      METFORMIN HCL 500MG 24HR SA TAB
Another one: #######      ??
Another one:       ######
        RX is not on CMOP suspense queue
Another one: ######
        RX is not ePharmacy billable
Another one: #######       METFORMIN HCL 500MG 24HR SA TAB
Another one: ######        Aspirin
Another one: ######        Aspirin
    Remove RX ###### from your list? Yes//
Another one: <enter>

Prescriptions Selected:
```

```
  ######     METFORMIN HCL 500MG 24HR SA TAB    Last Name, First Name
  ########   METFORMIN HCL 500MG 24HR SA TAB    Last Name, First Name
  #######    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
  ######     METFORMIN HCL 500MG 24HR SA TAB    Last Name, First Name      (NOV 19, 2020)
  ########   METFORMIN HCL 500MG 24HR SA TAB    Last Name, First Name      (NOV 19, 2020)
  #######    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
================================================================================================
==================
######/#              09/29/11     08/18/15     REDACTED    CLAIM RE-SUBMITTED     0.00
EPHARM INSURA
    FLUORESCEIN 10% 5ML INJ          79 - Refill Too Soon          ANYTOWN
ECMEPATIENT,DAVE
######/#              09/03/15     09/03/15     REDACTED   CLAIM RE-SUBMITTED      0.00
EXPRESS SCRIP
    DIGITOXIN 0.1MG S.T.             88 - DUR Reject Error         ANYTOWN        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
================================================================================================
==================
######/#              09/29/11     08/18/15     REDACTED    CLAIM RE-SUBMITTED    0.00
EPHARM INSURA
    FLUORESCEIN 10% 5ML INJ          79 - Refill Too Soon          ANYTOWN
ECMEPATIENT,DAVE
######/#              09/03/15     09/03/15     REDACTED   CLAIM RE-SUBMITTED     0.00
EXPRESS SCRIP
    DIGITOXIN 0.1MG S.T.             88 - DUR Reject Error         ANYTOWN        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: REDACTED (##)
#   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.

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) in the REJECT WORKLIST DAYS field.

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 ######/#     OPPATIENT,ONE(0001)  NITROGLYCERIN 0.3MG S.  2/28/13   11/11/14
     Rx Status: ACTIVE
     Reason:  79 :Refill Too Soon

  2 ######/#     OPPATIENT,ONE(0001)  AMYL NITRITE 0.3ML INH  11/12/14  11/12/14
     Rx Status: ACTIVE
     Reason:  79 :Refill Too Soon

                            CHAMPVA - Non-DUR/RTS
  3 ######/#     OPPATIENT,ONE(0001)  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 ######/#     OPPATIENT,ONE(0001)  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 ######/#     OPPATIENT,THREE(0001)  CASTOR OIL 60ML         7/10/14   7/10/14
     Rx Status: ACTIVE
     Reason:  eT :

                                OTHER REJECTS
  6 ######/#     OPPATIENT,THREE(0001)  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 ######### TRANSMITTED  [#####]
03/03/09@17:37 8 lines
From: POSTMASTER  In 'IN' basket.   Page 1  *New*
-------------------------------------------------------------------------
             Rx #: #########   Fill: 0
```

```
           Patient: OUTPATIENT,DCONE (####)
              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 in Local Rx:

               Rx #: #########
                 Drug: A AND Z OINTMENT
                  SIG: APPLY 1 TUBE TO AFFECTED AREA TWICE A DAY
                  QTY: 1                    Refills remaining: 5
             Provider: OPPROVIDER, PROV           Issued: 11/27/09
               Status: Active                Last filled on: 11/27/09
    Processing Status: Transmitted to CMOP on 11/27/09
                                                Days Supply: 5
------------------------------------------------------------------------------
```

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), please see Appendix A, OneVA Pharmacy User Manual.

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) <TEST ACCOUNT> 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
 #########     NO     NSC VETERAN

No Patient Warnings on file for PSOPATIENT,THREE.

Press RETURN to continue...


Search by: SITE
Select INSTITUTION NAME: ?444ONE
 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: XXXXX
     1   REDACTED               OH  VAMC      ###
     2   REDACTED (NHCU)        OH  NHC       ######
     3   REDACTED NATIONAL CEMETARY    OH  NC  ###
     4   REDACTED BEACH OPC     FL  OPC       #####
     5   REDACTED VETERANS NURSING HOME    FL  STNB  #####
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1  REDACTED          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 #:                                ###########
Rx Hosted at Site:                   XXXX 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@10:29:21
Patient:                             PSOPATIENT,SIX
RX #:                                ###########
Rx Hosted at Site:                   ########### 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: ######       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
Reprint the FDA Medication Guide? No// YES
Comments:

Rx # ######            06/27/03
OPPATIENT16,ONE                    #1

AS DIR ON AFFECTED AREA

ADHESIVE TAPE WATERPROOF 1IN ROLL
```

```
OPPROVIDER3O,TWO            OPPHARMACIST4,THREE
# of Refills: 2

Select LABEL DEVICE: L8150$PRT  COPY ROOM 1A


REDACTED's FDA Medication Guide Printer(s) on file:

     BIRM1$PRT(Default)
     L8150$PRT


Select FDA MED GUIDE PRINTER: BIRM1$PRT// <Enter>


LABEL(S) QUEUED TO PRINT
```

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: #########       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 # #########         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
     #########      BACLOFEN 10MG TABS

STORAGE DEVICES
   SCRIPTCENTER
     #########      BACLOFEN 10MG TABS
```

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:    ##########     PREDNISONE 20MG S.T.

Select LABEL DEVICE: LEX2  LEX2$PRT  Bay Pines

Signature Log Reprint queued
```

View Prescription

[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 using this option. 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 24: 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. Patient records can also be updated while 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    REDACTED    REDACTED    YES     SC VETERAN

OPPATIENT, ONE                          ID#:   ####-##-####
4500 S MAIN ST                          DOB:   REDACTED
ADDRESS LINE2
LINE 3 OF ADDRESS
ANYTOWN                                 PHONE: ###-###-####
WISCONSIN  #####                        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         REDACTED*

CITY: ANYTOWN// <Enter> *
STATE: WISCONSIN
COUNTY: DANE
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:

Temporary Address:


TEMPORARY ADDRESS ACTIVE?: NO//  <Enter> NO

Press Return to continue: <Enter>

PHONE NUMBER [CELLULAR]:
CNH CURRENT:
FEE HOSPITAL I.D.:
TEMPORARY ADDRESS ACTIVE?: NO//
REMARKS:

     >>PHARMACY PATIENT DATA<<

CAP:
MAIL:
MAIL STATUS EXPIRATION DATE:
DIALYSIS PATIENT:
NARRATIVE:
Eligibility: COLLATERAL OF VET.
Disabilities:
PATIENT STATUS: SERVICE CONNECTED//
COMMUNITY NURSING HOME:
NURSING HOME CONTRACT:
LAST DATE OF CONTRACT:
RESPITE PATIENT START DATE:
RESPITE PATIENT END DATE:
OTHER LANGUAGE PREFERENCE:
PMI LANGUAGE PREFERENCE:
```

Chapter 25: Verifying Prescriptions

This chapter describes the option and methods used for verifying prescriptions.

Verification

[PSO VER]

The *Verification* menu is used by pharmacists 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. Once 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.

When the VERIFICATION outpatient site parameter is set to 'No', a user who does not hold the PSORPH key will not be allowed to finish a pending order.

The *Patient Prescription Processing* [PSO LM BACKDOOR ORDERS] and *Complete Orders from OERR* [PSO LMOE FINISH] options have been modified to incorporate the above functionality.

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 Critical Drug Interaction)
   Patient name                                                    Page: 1
Rx #         Issued    Drug                                       Entry By
------------------------------------------------------------------------------

  OPPATIENT,FIVE
##########   04/01/04  ACETAMINOPHEN 1000MG TABLET               ###########

  OPPATIENT,FOUR
##########   07/27/98  ASPIRIN BUFFERED 325MG TAB                     #####

  OPPATIENT,ONE
#########    10/23/02  ERYTHRITYL TETRANIT. 10MG TAB              ###########

  OPPATIENT,TWELVE
#########    11/25/02  ACETAMINOPHEN 1000MG TABLET                ###########
##########   04/19/99  INSULIN NPH U-100 INJ (PORK)                       ###


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.

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: ######   PATIENT: OPPATIENT,FOUR (###-##-####)
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: REDACTED (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
VERIFY FOR OPPHARMACIST4,THREE ? (Y/N/Delete/Quit): Y// <Enter>


Veteran Prescription ######### 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 26: 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, the creation of a Class I menu option was delivered with patch PSO*7*630 to improve and standardize the experience of 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 27: 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 expired, the API will return the appropriate error code.

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".

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      : ANYTOWN CLINIC
CPRS Order #  : #######
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#          : #########
Site Address  : #### E PERSHING BLVD
                #### East Pershing Boulevard
                REDACTED

Differences in CPRS and Pharmacy Pending File

Data Name           CPRS File         Pharmacy Pending File
---------           ---------         ---------------------
QTY PRESCRIBED      ##                ##
```

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.

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.

Patch PSO*7*505 introduces enhancements to editing of Controlled Substance prescriptions. Fields that would create a new prescription such as Orderable Item, Dose, Provider, and Refills are no longer editable on CS prescriptions. Additionally, controlled substance prescription can no longer be finished if the prescription is for a patient that does not have a zip code in their patient profile.

Chapter 28: 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

- 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 (GCNSQENO 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 15: Error Level 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.

Error Level	Error Message	Reason	Why message is being displayed.
System	"Signatured 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	"Rx processed: PIV Card Cert Expired - NO ACTION REQ"	Validity of the PIV card certificate.	Kernel API check for the validity of the PIV card 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 29: FDA Medication Guides

Medication Guides are paper handouts that come with many prescription medicines. These guides address issues that are specific to particular drugs and drug classes, and they contain FDA approved information that can help patients avoid serious adverse events. The FDA requires that medication guides be issued with certain prescribed drugs and biological products when the agency determines that: certain information is necessary to prevent serious adverse effect; patient decision-making should be informed by information about a known serious side effect with a product; or patient adherence to directions for the use of a product are essential to its effectiveness. The VA maintains a web-enabled repository of all approved FDA Medication Guides, both current and archived versions of the documents. See the repository:

REDACTED/VistA_MedGuides/

Displaying an FDA Medication Guide

The system provides users with the location of the FDA Medication Guide for a specific prescription when one is available.

Outpatient Pharmacy provides an option under the OTH hidden action within the Patient Prescription Processing [PSO LM BACKDOOR] option, aka 'Backdoor Pharmacy', allowing users to retrieve the Medication Guide associated with a prescription similar to the reprint of the PMI. Users may retrieve an FDA Mediation Guide for a specific prescription by invoking the OTH (Other OP Actions) hidden action and selecting the action, MG Display FDA Medication Guide.

When a VA Product has a Medication Guide Associated:

```
OP Medications (NON-VERIFIED) Jul 19, 2021@10:45:25          Page:    1 of 3
EDIS,BFMALE TWO                                  <NO ALLERGY ASSESSMENT>
  PID: XXX-XX-XXXX                                  Ht(cm): 508.00 (05/07/2019)
  DOB: XXX XX,XXXX                                  Wt(kg): 99.79 (05/07/2019)
  SEX: FEMALE                    Non-VA Meds on File      Last entry on 05/03/21
  CrCL: <Not Found> (CREAT: Not Found)           BSA (m2): 4.66

                Rx #: 2297988$
 (#) *Orderable Item: ALPRAZOLAM TAB <DIN>
 (#)       CMOP Drug: ALPRAZOLAM 0.25MG TAB <DIN>
 (2)            NDC: 43353-0357-60
 (3)         *Dosage: 0.25 (MG)
                Verb: TAKE
     Dispense Units: 1
                Noun: TABLET
              *Route: ORAL
           *Schedule: TID
 (4)Pat Instructions:
                 SIG: TAKE ONE TABLET PO THREE TIMES A DAY
+         Enter ?? for more actions
DC   (Discontinue)        PR   (Partial)           RL   (Release)
ED   (Edit)               RF   (Refill)            RN   (Renew)
Select Action: Next Screen// OTH   OTH

                                  --- Other OP Actions ---

PN   Progress Note (OP)
AP   Action Profile (OP)
```

```
MI   Print Medication Instructions
DO   Display Orders' Statuses
MG   Display FDA Medication Guide
RM   Reprint FDA Medication Guide
RR   eRx Refill Request
RR   RxRenewal Request

Select Item(s): MG   Display FDA Medication Guide

The following URL provides the link to the FDA Medication Guide associated
with this medication. Copy/paste the URL below into a browser to access
the FDA Medication Guide for this drug:

REDACTED/VistA_MedGuides/Alprazolam_(Xanax)_(2016).pdf

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

When a VA Product does not have a Medication Guide Associated:

```
                                  --- Other OP Actions ---

PN   Progress Note (OP)
AP   Action Profile (OP)
MI   Print Medication Instructions
DO   Display Orders' Statuses
MG   Display FDA Medication Guide
RM   Reprint FDA Medication Guide
RR   eRx Refill Request
RR   RxRenewal Request

Select Item(s): MG   Display FDA Medication Guide

There is no FDA Medication Guide associated with this medication.

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

When a Drug is not matched to National Drug File:

```
Select Item(s): MG   Display FDA Medication Guide

ALBUTEROL 90/IPRATROP 18MCG 200D PO INHL not matched to the National Drug File (
NDF)

Enter RETURN to continue:
```

Printing an FDA Medication Guide

The Outpatient Pharmacy application automatically prints an FDA Medication Guide on a separate, designated printer after printing the prescription label and PMI sheet, if one is available, for the medication being dispensed. Anytime a label is printed, the system ensures that if the specific drug has an associated medication guide, it will be printed whether the script is a normal fill, a partial fill, or a refill.

When an FDA medication guide is sent to the printer, information is included in the footer of the document to identify the Patient, the Rx# and the date it was printed.

The system indicates when an associated medication guide exists on the prescription label printout. The printout contains the following statement on the same line where Additional Warnings appear: “Read FDA MED Guide.”

Site Parameters

[PSO SITE PARAMETERS]

There are new site parameters related to the automatic printing of FDA Medication Guides.

Example 1: Updating the FDA Medication Guide Print Server URL

```
Select Outpatient Pharmacy Manager Option: MAINtenance (Outpatient Pharmacy)

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

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

NAME: REDACTED//
MAILING FRANK STREET ADDRESS: 114 HOLLAND AVE//
AREA CODE: ###//
PHONE NUMBER: ###-####//
MAILING FRANK ZIP+4 CODE: 12180//
SITE NUMBER: ###//
NCPDP NUMBER: ^FDA
     1   FDA MED GUIDE PRINT SERVER URL
     2   FDA MED GUIDE PRINTER
CHOOSE 1-2: 1  FDA MED GUIDE PRINT SERVER URL
FDA MED GUIDE PRINT SERVER URL: ??
        This is the Uniform Resource Locator (URL) and Port Number for the Print

        Server running the Java Application responsible for automatically
        printing of the Food and Drug Administration (FDA) Medication Guides for

        the division (e.g., 'http://10.4.21.22:8092/').

FDA MED GUIDE PRINT SERVER URL: http://10.234.173.93:8092/
```

FDA Medication Guide Printer Selection

Upon logging into outpatient pharmacy, in addition to selecting the Label and Profile printers, the user is prompted to select the FDA Medication Guide printer as well. Only devices with a WINDOWS NETWORK PRINTER NAME field (#135) defined in the DEVICE file (#3.5) are selectable. The FDA Medication Guide printer can be changed at any point of the dispensing process. The user can also change the FDA Medication Guide printer through the Change Label Printer option [PSO CHANGE PRINTER].

Example 2: Selecting the Printer

```
Select OPTION NAME: REDACTED
     1   PSO MANAGER       Outpatient Pharmacy Manager
     2   PSO MANUAL AUTO EXPIRE       Manual Auto Expire Rxs
CHOOSE 1-2: 1  PSO MANAGER     Outpatient Pharmacy Manager
Outpatient Pharmacy software - Version

Division:    REDACTED  500

          You are logged on under the REDACTED division.

Select PROFILE PRINTER: HOME//   GENERIC INCOMING TELNET

Select LABEL PRINTER: HOME//   GENERIC INCOMING TELNET

OK to assume label alignment is correct? YES//

ALBANY's FDA Medication Guide Printer(s) on file:
```

```
     BIRM1$PRT
     L8150$PRT

Select FDA MED GUIDE PRINTER: XXXXX FDA MED GUIDE PRINTER//   XXXXX


Bingo Board Display: OUTPATIENT//
```

The Default FDA Medication Guide Printer

[PSO SITE PARAMETERS]

Only one printer from the PHARMACY DIVISION file (#59) list of available printers used to print FDA Medication Guides may be selected as the default printer. The use of the list by the sites is optional. The user also has the ability to change the default FDA Medication Guide printer through the Site Parameter Enter/Edit option [PSO SITE PARAMETERS].

Example 3: Setting the Default FDA Medication Guide Printer

```
Select Outpatient Pharmacy Manager Option: MAINtenance (Outpatient Pharmacy)

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

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

NAME: ALBANY//MAILING FRANK STREET ADDRESS: REDACTED//
AREA CODE: 518// ^FDA     #   FDA MED GUIDE PRINT SERVER URL
     2   FDA MED GUIDE PRINTER
CHOOSE 1-2: 2  FDA MED GUIDE PRINTER
Select FDA MED GUIDE PRINTER: REDACTED FDA MED GUIDE PRINTER
         // ?
    Answer with FDA MED GUIDE PRINTER
   Choose from:
   SUPPORT LINE PRINTER
   BIRM1$PRT
   XXXXX FDA MED GUIDE PRINTER
   BAY PINES MED GUIDE PRINTER

        You may enter a new FDA MED GUIDE PRINTER, if you wish
        Enter the FDA Medication Guide printer for the division.
        Only devices with a Windows Network Printer Name are allowed.

 Answer with DEVICE NAME, or LOCAL SYNONYM, or $I, or VOLUME SET(CPU), or
     SIGN-ON/SYSTEM DEVICE, or FORM CURRENTLY MOUNTED
 Do you want the entire DEVICE List? N  (No)
Select FDA MED GUIDE PRINTER: REDACTED MED GUIDE PRINTER
         // BIRM1  BIRM1$PRT    BHM     |PRN|\\REDACTEDLAB5\BIRM1
         ...OK? Yes//   (Yes)

  FDA MED GUIDE PRINTER: BIRM1$PRT//
  DEFAULT PRINTER: ?
     Indicate whether the printer is the default FDA Medication Guide Printer
     for the division.
     Choose from:
       1        YES
  DEFAULT PRINTER: 1  YES
Select FDA MED GUIDE PRINTER:
```

Reprinting an FDA Medication Guide

[PSO LM BACKDOOR ORDERS]

The system allows the user to reprint the associated FDA Medication Guide for a given prescription fill (or the latest FDA Medication Guide available for the medication on the

prescription when reprinting a prescription label) and for prescription fills sent to CMOP by invoking the RM action under the OTH (Other OP Actions) after selecting a specific prescription in Backdoor Pharmacy, as seen below. The system prompts the user whether to reprint a medication guide, if an FDA Medication Guide is associated with a Prescription, when reprinting a label. The Default is set to 'NO'.

Example 4: Drug Not matched to National Drug File

If a user tries to use this option for a medication that is not matched to the National Drug File, the following message will display:

```
--- Other OP Actions ---

PN   Progress Note (OP)
AP   Action Profile (OP)
MI   Print Medication Instructions
DO   Display Orders' Statuses
MG   Display FDA Medication Guide
RM   Reprint FDA Medication Guide
Select Item(s): RM   Reprint FDA Medication Guide
ACETAMINOPHEN 325MG C.T. not matched to the National Drug File (NDF)

Enter RETURN to continue:
```

Example 5: No FDA Medication Guide Associated with Drug

If a user tries to use this option for a medication that does not have an FDA Medication Guide on file, the following message will display:

```
--- Other OP Actions ---

PN   Progress Note (OP)
AP   Action Profile (OP)
MI   Print Medication Instructions
DO   Display Orders' Statuses
MG   Display FDA Medication Guide
RM   Reprint FDA Medication Guide

Select Item(s): RM   Reprint FDA Medication Guide

No FDA Medication Guide on file for this Rx.
Enter RETURN to continue:
```

Example 6: Reprinting an FDA Medication Guide for a Medication that has an FDA Medication Guide on File

```
--- Other OP Actions ---

PN   Progress Note (OP)
AP   Action Profile (OP)
MI   Print Medication Instructions
DO   Display Orders' Statuses
MG   Display FDA Medication Guide
RM   Reprint FDA Medication Guide

Select Item(s): RM   Reprint FDA Medication Guide

REDACTED's FDA Medication Guide Printer(s) on file:

     BIRM1$PRT
     L8150$PRT

Select FDA MED GUIDE PRINTER: SUPPORT LINE PRINTER//   ROOM 234
```

```
Select FDA Medication Guide to reprint:

------------------------------------------------------------------------------
 # FL  FDA MED GUIDE FILE NAME                                    TYPE   DATE
------------------------------------------------------------------------------
 1  0  Lindane_Lotion_(Generic)_(2008).pdf                       WINDOW 07/02/11
 2  P1 Lindane_Lotion_(Generic)_(2008).pdf                       WINDOW 08/16/11
 3  1  Lindane_Lotion_(Generic)_(2008).pdf                       WINDOW 09/21/11

 4     Lindane_Lotion_(Generic)_(2008).pdf                       LATEST

Select FDA Med Guide (1-4): 3 Lindane_Lotion_(Generic)_(2008).pdf

FDA Medication Guide sent to printer.

Enter RETURN to continue:Example 7: Reprinting FDA Medication Guide from Profile
OP Medications (ACTIVE)       Oct 04, 2011@10:52:23          Page:    1 of    2
OUTPATNM,REDACTED                                <NO ALLERGY ASSESSMENT>
  PID: REDACTED                                    Ht(cm): _______ (______)
  DOB: REDACTED                                    Wt(kg): _______ (______)
  SEX: FEMALE                                                                 .
 CrCL: <Not Found> (CREAT: Not Found)            BSA (m2): _______

------------------------------------------------------------------------------
               Rx #: #######
 (1) *Orderable Item: LINDANE SHAMPOO
 (2)            Drug: LINDANE 1% SHAMPOO
                Verb: SHAMPOO
 (3)         *Dosage: 1
              *Route: ORAL (BY MOUTH)
           *Schedule: QD
 (4)Pat Instructions:
                 SIG: SHAMPOO 1 BY MOUTH EVERY DAY
 (5)  Patient Status: SC LESS THAN 50%
 (6)      Issue Date: 09/02/11              (7)  Fill Date: 09/02/11
     Last Fill Date: 09/02/11 (Window)
   Last Release Date:                        (8)      Lot #:
            Expires: 09/02/12                           MFG:
+---------Enter ?? for more actions-------------------------------------------
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// rp   RP
Number of Copies? :  (1-99): 1//
Print adhesive portion of label only? No//   NO
Reprint the FDA Medication Guide? No// YES
Comments: TESTING SINGLE RX REPRINT

Rx # ######            09/02/11
OUTPATNM,REDACTED             #1
SHAMPOO 1 BY MOUTH EVERY DAY

LINDANE 1% SHAMPOO
ROBERTSON,MARK           REDACTED
# of Refills: 5

Press Return to Continue:
```

Changing the FDA Medication Guide Printer

[PSO CHANGE PRINTER]

Users have the ability to change the currently selected FDA Medication Guide printer through the Change Label Printer option [PSO Change Printer.]

Example 8: Changing the FDA Med Guide Printer

```
Select Outpatient Pharmacy Manager Option:  Change Label Printer
Select PROFILE PRINTER: TELNET-IN//   GENERIC INCOMING TELNET
```

```
Select LABEL PRINTER: TELNET-IN//   GENERIC INCOMING TELNET

OK to assume label alignment is correct? YES//

REDACTED's FDA Medication Guide Printer(s) on file:

     BIRM1$PRT     L8150$PRT
Select FDA MED GUIDE PRINTER: BIRM1$PRT// xxxxx  XXXXX FDA MED GUIDE PRINTER  HINES
```

Prompt During Label Print

The system prompts the user to select a different FDA Medication Guide printer when printing labels, if at least one FDA Medication Guide is associated with a Prescription label being printed.

Label Log and CMOP Event Log Display

The Label Log as well as the CMOP Event Log displays the FDA MED Guide URL under the Comments line to denote that an FDA Medication Guide printed along with the label or that there was one associated with the medication when the prescription fill was transmitted to CMOP.

Example 9: Label Log and CMOP Event Log Display

```
Label Log:
#   Date        Rx Ref                    Printed By
================================================================================
1   10/04/11    ORIGINAL                  REDACTED
Comments: From RX number ######
FDA Med Guide: Lindane_Lotion_(Generic)_(2008).pdf

CMOP Event Log:
Date/Time             Rx Ref  TRN-Order       Stat             Comments
================================================================================
10/04/11@0943         Orig    15-1            TRAN
FDA Med Guide: NSAIDs_(Class)_(2009).pdf
```

Audit Trail for FDA Medication Guide Printing

The system stores the unique FDA Medication Guide document name for each fill being transmitted to CMOP in the PRESCRIPTION file (#52).

Automatically Printing FDA Medication Guides is Optional

The FDA Medication Guide automatic printing functionality is an **optional** functionality. Each pharmacy division may choose to turn this functionality ON or OFF. Reasons a pharmacy division might choose to turn the FDA Medication Guide automatic printing functionality OFF are:

FDA Medication Guides print on a different printer than the prescription labels. High-volume window prescription dispensing sites may not have the necessary resources for collating FDA Medication Guides with their corresponding prescription labels.

Automated-dispensing systems such as Optfill also perform the prescription label printing, which usually happens at a later time than when the labels are printed in VistA. Since FDA Medication

Guides automatically print at the same time labels print from VistA, medication guides may print too early in the dispensing process, causing confusion.

To turn the FDA Medication Guide automatic printing functionality OFF or to not turn it ON for a specific pharmacy division, make sure the FDA MED GUIDE PRINT SERVER URL field has no value. This field can be edited via the Site Parameter Enter/Edit [PSO SITE PARAMETERS] option, as shown below.

Whether the functionality is being turned ON or OFF, the prescription label printed from VistA will still include the note "Read FDA Med Guide" when one is associated with the medication being dispensed.

Example 10: Updating the FDA Med Guide Print Server URL Field

```
Select Outpatient Pharmacy Manager Option: SUPERvisor Functions

          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
          Monthly Rx Cost Compilation
          Patient Address Changes Report
          Pharmacist Enter/Edit
          Purge Drug Cost Data
          Recompile AMIS Data
          Site Parameter Enter/Edit
          View Provider

Select Supervisor Functions Option: SITE Parameter Enter/Edit

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

NAME: REDACTED//
MAILING FRANK STREET ADDRESS: RECACTED//
AREA CODE: ###//
PHONE NUMBER: ###-####//
MAILING FRANK ZIP+4 CODE: #####//
SITE NUMBER: ###//
NCPDP NUMBER:

...

LOGICAL LINK: PSO DISP//
PROCESS AUTO REFILLS FOR INPAT:
PROCESS AUTO REFILLS FOR CNH:
FDA MED GUIDE PRINT SERVER URL: ??
      This is the Uniform Resource Locator (URL) and Port Number for the Print
      Server running the Java Application responsible for automatically
      printing of the Food and Drug Administration (FDA) Medication Guides for
      the division (e.g.,'http://10.4.21.22:8092/').

FDA MED GUIDE PRINT SERVER URL:    ◄ Make sure this field is blank (no value).
```

Chapter 30: 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.

Appendix A: OneVA Pharmacy User Manual PSO*7*479

Revision History

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

Date	Revised Pages	Patch Number	Description
05/2017	ii, 14, 26, 27, and 30	PSO*7*479	Modifies the prompt to the user when printing a OneVA Pharmacy label. (REDACTED, TW)
11/2016	All	PSO*7*454	Initial Issue

Introduction

Purpose

The purpose of the OneVA Pharmacy User Manual is to describe the new capability that will allow a Pharmacist from any VA Pharmacy location to refill or partial a patient's prescription that originated from another VA Pharmacy location, contingent on the host site status where the prescription originated.

In addition, this User Manual will provide instructions on how to obtain the details of the prescriptions dispensed by another VA Pharmacy location by introducing the new OneVA Pharmacy report menu.

Lastly, Frequently Asked Questions (FAQs) are addressed regarding the new OneVA Pharmacy capabilities and limitations.

Document Orientation

Organization of the Manual

The OneVA Pharmacy User Manual contains the following sections:

- 'Introduction' section that includes the assumed experience and skill level a user will have in order to use the software patch and provides the specifics related to the support of the software. This section also lists the references, resources, documentation conventions, disclaimers, and the organization of the manual.

- ‘System Summary’ section that includes the system configuration steps necessary to turn on the OneVA Pharmacy software and the data flow diagrams for the View Orders, Dispense Order from another VA Pharmacy Location, and OneVA Pharmacy Prescription Report Use Cases. This section also lists specific messages for the user regarding continuity of operation.

- ‘Getting Started’ section provides the overview of logging into the system, introduces the system menu, and lists the caveats and exceptions for this software patch.

- ‘Using the Software’ section provides the detailed steps for using the OneVA Pharmacy capability within both the ‘PATIENT PRESCRIPTION PROCESSING [PSO LM BACKDOOR ORDERS]’ and the ‘ONEVA PHARMACY PRESCRIPTION REPORT [PSO REMOTE RX REPORT]’ menus.

- ‘Troubleshooting’ section includes common system messages and actions to take if a significant error occurs.

- ‘Acronyms and Abbreviation’ section lists all acronyms and abbreviations used throughout this document.

- ‘Appendix’ details the Frequently Asked Questions (FAQs) associated with the new capabilities and provides the programs limitations.

Assumptions

The OneVA Pharmacy User Manual assumes the user has the following experience/skills:

- User has basic knowledge of the Veterans Health Information Systems and Technology Architecture (VistA) system (such as the use of commands, menu options, and navigation tools).

- User has access to the ‘Rx (PRESCRIPTIONS) [PSO RX]’ menu within VistA and holds appropriate security keys for their user role, such as PSORPH, to identify the user as a Pharmacist.

- User has completed any prerequisite training.

Coordination

The Veterans Affairs Medical Center (VAMC) VistA Coordinator responsible for the implementation of OneVA Pharmacy patch will address the ability of Pharmacists to fulfill non-controlled substance prescriptions from any VA Pharmacy location where a prescription originated at another VA Pharmacy site.

The Audience for this User Manual is the Pharmacist and anyone else eligible to fulfill prescriptions (non-controlled).

The OneVA Pharmacy Implementation Manager and the Implementation team will coordinate with the Regional VistA Services teams for a National Rollout using a phased approach. As part of the distribution and installation of the OneVA Pharmacy patch, the deployment will include a checklist to confirm that the site connects to VAs Enterprise Messaging Infrastructure (eMI) Enterprise Service Bus (ESB) located in the Austin Information Technology Center (AITC).

Disclaimers

- **Software Disclaimer:** Employees of the Federal Government in the course of their official duties developed this software at the Department of Veterans Affairs (VA). Pursuant to title 17 Section 105 of the United States Code this software is not subject to copyright protection and is in the public domain. VA assumes no responsibility whatsoever for its use by other parties, and makes no guarantees, expressed or implied, about its quality, reliability, or any other characteristic. We would appreciate acknowledgement if the software is used. This software can be redistributed and/or modified freely if any derivative works bear some notice that they are derived from it, and any modified versions bear some notice that they have been modified.

- **Documentation Disclaimer:** The appearance of external hyperlink references in this manual does not constitute endorsement by the VA of this Web site or the information, products, or services contained therein. VA does not exercise any editorial control over the information found at these locations. Such links are consistent with the stated purpose of VA.

Documentation Conventions

All patient data displayed on screen images within this document consists of mocked up test data therefore there is no concern regarding misuse or violation of Personally Identifiable Information (PII) as defined in Office of Management and Budget (OMB) Memorandum M-07-1616.

Various symbols used throughout the documentation to alert the reader to special information. The following table gives a description of each of these symbols.

Table 16: Documentation Symbols and Descriptions

Symbol	Description
	NOTE: Used to inform the reader of general information including references to additional reading material
	CAUTION: Used to caution the reader to take special notice of critical information

References and Resources

References and resources for the OneVA Pharmacy patch available on the VA Software Document Library (VDL) and are as follows:

- Pharm: Outpatient Pharmacy: Technical Manual/Security Guide

- OneVA Pharmacy Release Notes: provides an overview of features and functions that are new with this patch.
- Pharm: Outpatient Pharmacy: Deployment, Installation, Rollback, and Back-out Plan - provides information necessary to install the software.
- Pharm: Outpatient Pharmacy: User Manual – Manager: includes the processing and functions for the Manager.
- Pharm: Outpatient Pharmacy: User Manual – Pharmacist Menu: includes the processing and functions for the Pharmacist.
- Pharm: Outpatient Pharmacy: User Manual – Supplemental: includes information about the OneVA Pharmacy label printing.
- Pharm: Outpatient Pharmacy: User Manual – Technician: includes the processing and functions for the Technician.
- Pharm: Outpatient Pharmacy: User Manual – Technician: includes the processing and functions for the Technician.

OneVA Pharmacy training videos are available and can be found by following these links:

- Training Video – View Order Use Case:
  - https://thebitsgroup.sharepoint.com/sites/Collab/OneVA/_layouts/15/guestaccess.aspx?guestaccesstoken=tcfMDx1L5KCE%2bYwXcpVhzOZWY6TLA0MlcqvRG0d5lJs%3d&docid=1a8fecf5b24e441c49e0bef5343c64d3c&rev=1
- Training Video – Dispense Order from Another Location:
  - https://thebitsgroup.sharepoint.com/sites/Collab/OneVA/_layouts/15/guestaccess.aspx?guestaccesstoken=WWtW%2bGtN3d19wif%2bjOArtKlt5OrRY6v7m1ptnxa8Sbc%3d&docid=16ec25932acc149a487fc7dbb1d8fa255&rev=1

National Service Desk and Organization Contacts

The following table lists the Operational Tier 1 through Tier 5 Support resources for the OneVA Pharmacy VistA patch including the National Service Desk (NSD), Regional Application Service Line, Clinical Product Support team, OneVA Pharmacy Development team, and VistA maintenance support team.

The support entities listed in the following table does not include support for the integration areas that are part of the OneVA Pharmacy software but not part of the OneVA Pharmacy patch. Not included is support for eMI ESB, HL7, nor for the HDR/CDS Repository.

Table 17: OneVA Pharmacy Support Entities

Name	Role	Gov or non-Gov	FTE	Org	Contact Info
Tier 1: National Service Desk	NSD Tier 1 Support	Gov	No change to existing VistA support FTE	NSD	REDACTED
Tier 2: National Service Desk	NSD Tier 1 Support	Gov	No change to existing VistA support FTE	NSD	REDACTED
Tier 3: Regional Application Service Line	Install Patch – Tier 3	Gov	No change to existing VistA support FTE	OI&T Field Operations	REDACTED
Tier 4: EPMO – Clinical Product Support Team – Clin 1	Clin 1 Support/Provider Systems	Gov	No change to existing VistA support FTE	EPMO, OI&T	SDM trouble tickets
Tier 5: Development Team for first 30-days after National Release	Support defect fixing if identified after National Release. The development team is responsible for development and release of all fix patches for defects occurring with the first 30-days of release.	Non-Gov	No change to existing VistA support FTE	VHA Innovations Program	REDACTED
Tier 5: VistA Maintenance Team subsequent to first 30-days	Support defect fixing if identified 30-days after National Release. The VistA Maintenance team is an existing long-term team that works closely with application services line representatives to implement patches beyond the 30-day warranty period.	Non-Gov	No change to existing VistA support FTE	EPMO, OI&T	REDACTED

System Summary

OneVA Pharmacy software provides the Department of Veterans Health Administration (VHA) the capability to allow Veterans traveling across the United States to refill or partial their active VA non-controlled substance prescriptions at any VA Pharmacy location regardless of where the prescription originated. The patch expands available pharmacy information in VistA to Pharmacists, providing direct access to any active and refillable prescription from any VA Pharmacy location.

OneVA Pharmacy software provides a foundation to build and extend new capabilities to the Veteran.

Patch PSO*7.0*454 is being released to enhance VistA's "Patient Prescription Processing [PSO LM BACKDOOR ORDERS]" menu (found within the VistA Pharmacy Outpatient Pharmacy package). The OneVA Pharmacy patch will allow the Pharmacist to query for and refill patient's active and refillable prescriptions from other VA Pharmacy VistA instances.

The overall OneVA Pharmacy software design has several components. They are:

1. Veterans Health Information Systems and Technology Architecture (VistA) (Patch PSO*7.0*454)
2. Health Level 7 (HL7) Messaging
3. Enterprise Messaging Infrastructure (eMI) Enterprise Service Bus (ESB)
4. Health Data Repository/Clinical Data Service (HDR/CDS) Repository

VistA is the user interface where a pharmacist uses the "Patient Prescription Processing [PSO LM BACKDOOR ORDERS]" menu (found within the VistA Pharmacy Outpatient Pharmacy package) to query for and refill patient's active and refillable prescriptions from other VA Pharmacy VistA instances. Patch PSO*7.0*454 uses Health Level 7 (HL7) messaging to query and receive remote prescription details to and from the Health Data Repository/Clinical Data Services (HDR/CDS) Oracle Repository.

The VistA instance where the Veteran is requesting the refill or partial is considered the 'dispensing' VistA instance. This patch allows a Pharmacist, using a 'dispensing' VistA instance, to refill or partial prescription that originated from another VA Pharmacy VistA instance and print a prescription label. The VA Pharmacy VistA instance where the prescription originated and currently exists is the 'host' VistA instance. The host VistA instance is where the update to the prescription record is made once the fill is processed. The label data elements are extracted from the host VistA instance and returned to the dispensing site via HL7 creating the OneVA Pharmacy label. The bar code on the label will be valid at the host site but not at the dispensing site.

The OneVA Pharmacy patch sends the HL7 query message through the Enterprise Service Bus (ESB) Enterprise Messaging Services (eMI). eMI executes a Web Service call to query the HDR/CDS Repository for specific medication information obtained from all VA Pharmacy's VistA sites. The eMI configuration contains filtering processes that applies specific business rules against the HDR/CDS Web Service call to return the appropriate prescriptions to the dispensing VistA. VistA and eMI communicate using HL7 v2.5.1 over Minimal Layer Protocol (MLLP). Communication to the HDR/CDS Repository takes place via Simple Object Access Protocol (SOAP) Web Services.

The medication data elements return to the dispensing site via HL7 messaging. Once the prescriptions arrive at the dispensing site, they display below any 'local' prescriptions on the Medication Profile view. The prescriptions displayed to the Pharmacist sort by VA Pharmacy site and status. The dispensing Pharmacist can view the remote prescriptions and select one to refill or partially fill. For label printing, VistA triggers the HL7 message stream that executes during the refill or partial fill prescription processes. The host label data elements are returned to the dispensing site within the HL7 segment. The event triggers the Pharmacist to select the dispensing sites printing device to print a host label.

System Configuration

To use OneVA Pharmacy, the user turns on the 'ONEVA PHARMACY FLAG (#101)'. The 'ONEVA PHARMACY FLAG (#101)' is located on the 'PHARMACY SYSTEM File (#59.7)' file. This field will allow each division to toggle the OneVA Pharmacy logic 'on' or 'off' depending on current needs. The user changes the field by using 'FILEMAN [FM]' and editing the 'ONEVA PHARMACY FLAG (#101)' field. The software patch delivers the 'ONEVA PHARMACY FLAG (#101)' in the 'off' state. When this flag is in the 'off' state, the HDR/CDS Repository is not queried for external prescriptions and other VistA instances will not be able to refill prescriptions that belong to the VistA instance with the flag set to the 'off' state. When in the 'on' state, all prescription queries and actions may be taken for remote queries, refills, and partial fills. In order to process prescriptions from another VistA instance, that instance will also need to have its 'ONEVA PHARMACY FLAG (#101)' set to the 'on' state.

Host Site OneVA Pharmacy Flag Not Set On Message

If the 'ONEVA PHARMACY FLAG (#101)' is not set to the 'on' state at the host site, the dispensing site will receive the following message:

The OneVA Pharmacy flag is turned 'OFF' at this facility. Unable to process refill/partial fill requests. Queries will NOT be made to other VA Pharmacy locations.

Pharmacy System Parameters Edit

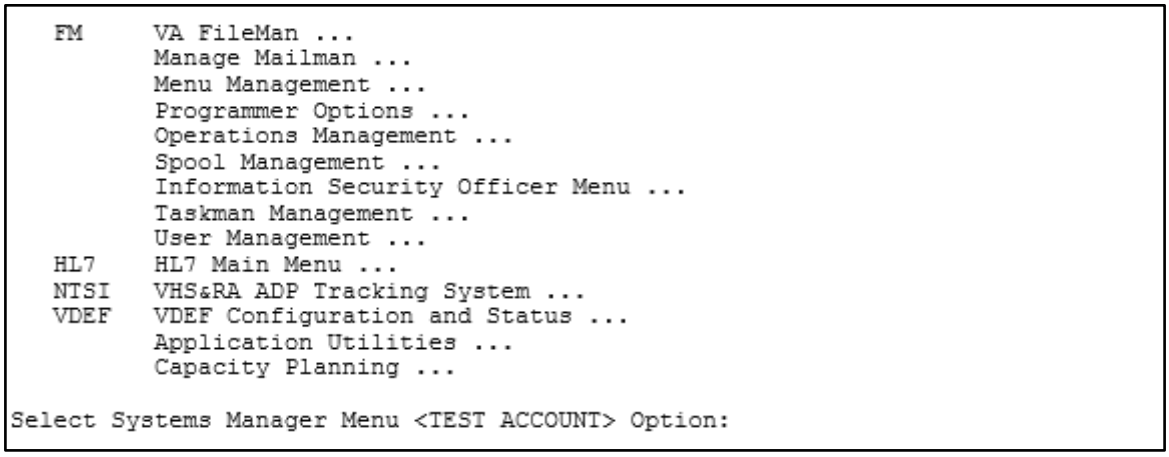
DO NOT turn on the OneVA Pharmacy Flag until directed to do so. The software will be released, deployed, and installed with the activation flag set to the "off" position. The Existing Product Intake Program (EPIP) Implementation Team will coordinate with the sites Pharmacy Automatic Data Processing Application Coordinator (ADPAC) on the specific date in which to activate the software.

To turn on the 'ONEVA PHARMACY FLAG (#101)' for all the divisions, use the 'VA FILEMAN [DIUSER]' utility and perform the following steps.

To turn on the 'ONEVA PHARMACY FLAG (#101)' for all the divisions, use the 'VA FILEMAN [DIUSER]' utility and perform the following steps.

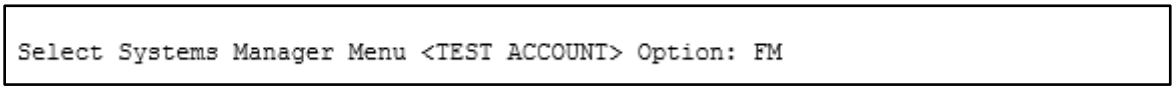
1. Sign-in to the VistA system and select the menu option: VA FILEMAN [DIUSER].

Figure 7: OneVA Pharmacy Flag: VA FileMan



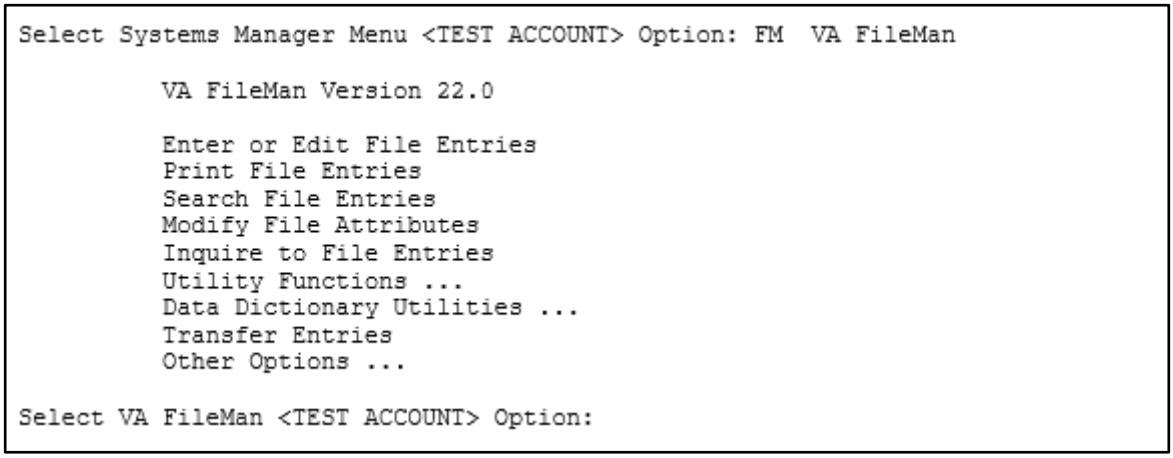
2. Enter <**FM>** and press **<ENTER>.**

Figure 8: OneVA Pharmacy Flag: Enter FM Prompt



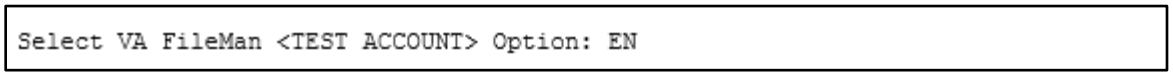
The system displays the option name and the prompt for the specific FileMan feature, as displayed in the following image.

Figure 9: OneVA Pharmacy Flag: VA FileMan Menu Prompt



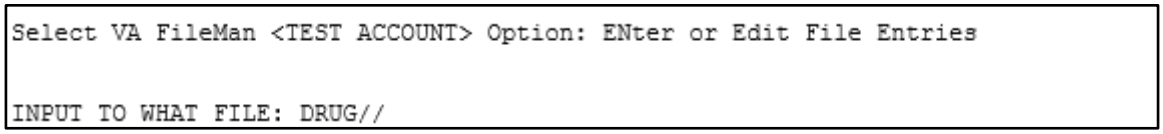
3. Enter <**EN>** and press **<ENTER>.**

Figure 10: OneVA Pharmacy Flag: Enter <EN> to Enter or Edit File Entries Prompt



The system displays the option name and the prompt for the 'INPUT TO WHAT FILE', as displayed in the following image.

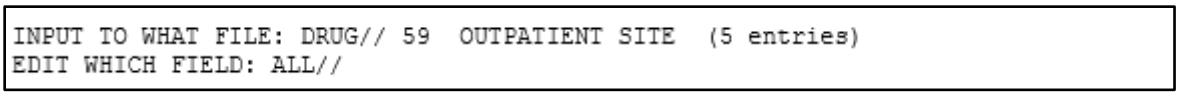
Figure 11: OneVA Pharmacy Flag: Input to What File Prompt



4. Enter <**59>** for the 'PHARMACY SYSTEM File (#59.7)' file and press **<ENTER>.**

   The system displays the option name and the prompt for the 'EDIT WHICH FILE', as displayed in the following image.

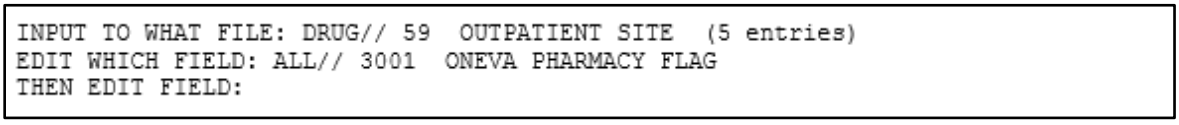
Figure 12: OneVA Pharmacy Flag: Edit Which Filed Prompt



5. Enter <**3001>** for the 'ONEVA PHARMACY FLAG (#101)' field and press **<ENTER>.**

   The system displays the option name and the prompt for the 'THEN EDIT FIELD', as displayed in the following image.

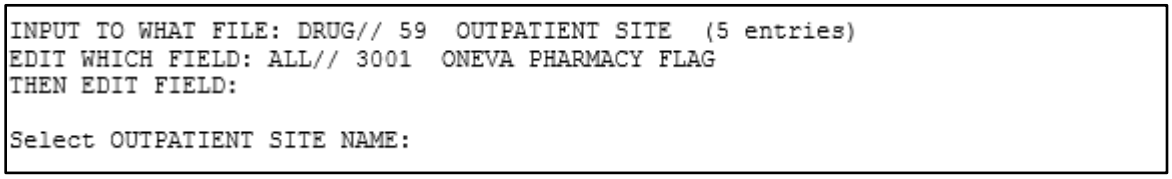
Figure 13: OneVA Pharmacy Flag: Then Edit Field Prompt



6. Press **<ENTER>.**

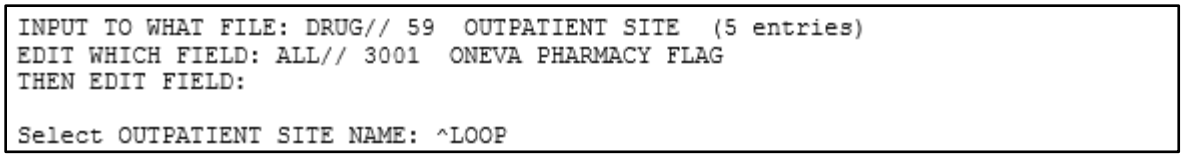
   The system displays the option name and the prompt for the specific 'OUTPATIENT SITE NAME', as displayed in the following image.

Figure 14: OneVA Pharmacy Flag: Select OUTPATIENT SITE NAME Prompt



7. Enter the following command <**^LOOP>** and press **<ENTER>.**

Figure 15: OneVA Pharmacy Flag: ^LOOP Command



The system displays the option name and the prompt for the specific 'EDIT ENTRIES BY: NAME//', as displayed in the following image.

Figure 16: OneVA Pharmacy Flag: Edit Entries by: NAME// Prompt

```
INPUT TO WHAT FILE: DRUG// 59  OUTPATIENT SITE  (5 entries)
EDIT WHICH FIELD: ALL// 3001  ONEVA PHARMACY FLAG
THEN EDIT FIELD:

Select OUTPATIENT SITE NAME: ^LOOP
EDIT ENTRIES BY: NAME//
```

8. Press **<ENTER>.**

   The system displays the option name and the prompt for the specific 'START WITH NAME: FIRST//', as displayed in the following image.

Figure 17: OneVA Pharmacy Flag: Start with Name Prompt

```
INPUT TO WHAT FILE: DRUG// 59  OUTPATIENT SITE  (5 entries)
EDIT WHICH FIELD: ALL// 3001  ONEVA PHARMACY FLAG
THEN EDIT FIELD:

Select OUTPATIENT SITE NAME: ^LOOP
EDIT ENTRIES BY: NAME//
START WITH NAME: FIRST//
```

   The '^LOOP' command causes the system to display each division, one by one, allowing the user to set the 'ON' option for the 'ONEVA PHARMACY FLAG' for each division. After pressing the return key, the next division will display until the 'LOOP ENDED!' message displays.

9. Enter <**ON**> for each division press **<ENTER>** as displayed in the example for a test VistA instance in the following image.

Figure 18: OneVA Pharmacy Flag: Loop Command Example

```
INPUT TO WHAT FILE: DRUG// 59  OUTPATIENT SITE  (5 entries)
EDIT WHICH FIELD: ALL// 3001  ONEVA PHARMACY FLAG
THEN EDIT FIELD:

Select OUTPATIENT SITE NAME: ^LOOP
EDIT ENTRIES BY: NAME//
START WITH NAME: FIRST//

    [redacted] VAM&ROC  442
ONEVA PHARMACY FLAG: ON  ON

    [redacted] TEST LAB  983
ONEVA PHARMACY FLAG: ON// ON

    [redacted] [redacted] CLINIC  442GC
ONEVA PHARMACY FLAG: ON  ON

    [redacted] CLINIC  442GD
ONEVA PHARMACY FLAG: ON  ON

   OneVA Pharmacy  983  Inactive as of: May 7,2016
ONEVA PHARMACY FLAG: ON// ON

    [redacted] CLINIC  442GB
ONEVA PHARMACY FLAG: ON  ON

    LOOP ENDED!
```

Data Flows

Use Case: View Orders

When the Pharmacist enters a request to display the Medication Profile view from a dispensing VistA instance, a query message is sent to eMI. eMI will harvest the necessary information to send a request to the HDR/CDS Repository for the patient's prescriptions. The response is transformed into another message that contains the patient's prescription data. The patient's prescription data is returned to the dispensing VistA instance and displayed on the Medication Profile screen on VistA. This process is refered to as the OneVA Pharmacy View Orders Use Case.

The 'View Orders' Use Case describes the process for users to view all of a patient's active, suspended, on hold, discontinued, or expired prescription orders. This process allows a user to view prescription order information in one place whether the order originated from a dispensing or host VistA instance.

The OneVA Pharmacy's feature to query the HDR/CDS Repository (step 2 in the flow of events) will not execute if the patient has not been treated at more than one VA Medical Center.

Actors

- User (e.g. Pharmacist)
- Dispensing VistA Instance
- HDR/CDS Repository
- eMI ESB (proxy to host VistAs)

Pre-Conditions

- Patient must have an Integration Control Number (ICN)
- Patient must have information populated in the system
- User must have accessed the 'RX (PRESCRIPTIONS) [PSO RX]' menu within VistA and hold the appropriate security keys for their user role, such as PSORPH to identify the user as a Pharmacist. (No separate Security Key required.).

Flow of Events

1. User enters the Medication Profile view.
2. The dispensing VistA instance will retrieve the prescriptions from HDR/CDS Repository.
3. The dispensing VistA instance will send a request via the eMI ESB to the HDR/CDS Repository with the patient identifiers to retrieve the prescriptions with a status of '**Suspended'**, '**Active'**, '**Hold',** "**Discontinued** (within the past 120 days)" or "**Expired** (within the past 120 days)" from all previous treatment facilities ***excluding*** local facility.
4. The eMI ESB will exclude the Clinical Data Health Care Repository/Department of Defense (CHDR/DoD) prescriptions that are available in the HDR/CDS Repository for active dual patients.

Exceptions

- 2a. Patient Not Found
- 2b. Patient Found, No Prescription Records
- 2c. eMI ESB is not accessible.
- 2d. HDR/CDS Repository is not accessible.
- 2e. Multiple Patients Found
- 3a. Patient Found, No Prescription Records Matching Filter

System Message

- 1a. Please wait. Checking for prescriptions at other VA Pharmacy locations. This may take a moment…
- 1b. Eligibility: RX PATIENT STATUS: OPT NSC
- 2a. Patient Identifier Not Found
- 2b. Patient Found with no Prescription Records
- 2c. The system is down or not responding. Press RETURN to continue.
- 2d. The RX Database is not Responding to the Request
- 2d. The RX Database responded with an error
- 2e. Multiple Patient Matches Found – Correct MVI (note: MVI is the Master Veteran Index. Please know the acronym is not spelled out in the error message.)
- 3a. Patient Found with no Prescription Records Matching Search Criteria

Use Case: Dispense Order from another VA Pharmacy Location

When a Pharmacist selects a prescription from the Medication Profile screen on a dispensing VistA instance (to refill a prescription for a Veteran visiting this location), an HL7 'Pharmacy Treatment Dispense' message transmits via eMI. eMI will receive the request, determine the destination facility, and forward the message to the host VistA instance. The host VistA instance will process the message, decrement the number of refills remaining, update the last fill date, and if a partial request, update the partial information. The host VistA will create an HL7 message (Prescription Refill/Partial Services Response) which contains the prescription label information. eMI will route the HL7 message back to the dispensing VistA instance, displaying the completion of the transaction to the Pharmacist on the screen. The Medication Profile view refreshes by executing the View Order Use Case again. The refilling or partial filling of a prescription order is referred to as the OneVA Pharmacy Dispense Order from another VA Pharmacy Location Use Case.

The 'Dispense another VA Pharmacy Order' Use Case describes the process for users to dispense an order that originated from another VA Pharmacy location. Once the user executes the View Order Use Case, the user can select an active prescription from the Medication Profile view that originated in another VA Pharmacy VistA instance to dispense. After selecting the prescription and executing the fill order request, the system will send a message to the originating host VistA instance. This request will decrement the prescription count, but will not affect the inventory of the host facility. When the decrement is successful, communication is made back to the dispensing VistA instance to complete the process and to print a prescription label.

Actors

- User (e.g. Pharmacist)
- Dispensing VistA Instance
- eMI ESB
- Host VistA Instance

Pre-Conditions

- Patient must have an ICN.
- Patient must have information populated in the system
- Dispensing VistA instance has the required amount of prescribed medication inventory on-hand.
- User must have accessed the 'RX (PRESCRIPTIONS) [PSO RX]' menu within VistA and hold the appropriate security keys for their user role, such as PSORPH to identify the user as a Pharmacist. (No separate Security Key required.)

Flow of Events

1. User selects a prescription that originated from another VA Pharmacy VistA instance and RF (Refill) from the Medication Profile view.
2. The prescription must be in 'Active' status.
3. The dispensing VistA instance will send a refill order request to the eMI ESB.
4. The eMI ESB will route the refill order request to the host VistA instance.
5. The host VistA will conduct order checks.
6. The host VistA will update the prescription order and decrement refills.
7. The host VistA will create a prescription label.
8. The dispensing VistA instance will dispense medication.

The dispensing VistA instance will print the label to the dispensing location printer.

Alternate Flow

1. User selects a prescription that originated from another VA Pharmacy VistA instance and PF (Partial fill) from the Medication Profile view.
2. The prescription must be in 'Active' status.
3. The dispensing VistA instance will send a partial fill order request to the eMI ESB.

4. The eMI ESB will send a partial fill order request to the host VistA instance.
5. The host VistA will conduct order checks.
    a. The host VistA will update the prescription order and update partial fill date.
    b. The host VistA will create a prescription label.
6. The dispensing VistA instance will dispense medication.
7. The dispensing VistA instance will print the label to the dispensing location printer.

Exceptions

- Status is not 'Active'
- 3a. eMI ESB is not accessible.
- 4a. The host VistA is not accessible
- 4b. The prescription is a controlled substance
- 5a. The host VistA instance fails the order.

System Message

- 1a. Please wait. Checking for remote prescriptions. This may take a moment…
- 1b. Eligibility: RX PATIENT STATUS: OPT NSC//
- Only 'ACTIVE' remote prescriptions may be actioned at this time.
- 3a. The system is down or not responding. Press RETURN to continue.
- 3b. Invalid HL7 Data Format
- 4a. The system is down or not responding. Could not query other VA Pharmacy locations. Press RETURN to continue.
- 4b. Cannot refill Rx# xxxxxxx. This is a controlled substance.
- 5a. The following are the various standard system messages that could display
    - *** Drug is inactive for Rx # xxxxxxx cannot be refilled ***" (refill prescription not allowed on inactive drugs)
    - Can't refill Rx # xxxxxxx it is not for this patient.
    - Cannot refill, Rx is discontinued or expired. Later Rx may exist.
    - Can't refill, no refills remaining.
    - This drug has been changed, No refills allowed.

- The system is down or not responding (Connection Failed). Could not query prescriptions at other VA Pharmacy locations. Press RETURN to continue:
- The system is down or not responding. The other VA Pharmacy location has not installed the OneVA Pharmacy functionality.
- The system is down or not responding. The other VA Pharmacy location has installed the OneVA Pharmacy software, but is currently not accepting refill or partial fill request.

Use Case: OneVA Pharmacy Prescription Report

The 'OneVA Pharmacy Prescription Report' Use Case allows the user to access reports related to the orders created from the OneVA Pharmacy process. Once the user executes the OneVA Pharmacy Prescription Report Use Case, the user can generate three different reports. The reports allow the user to view prescriptions filled by another VA Pharmacy location or what other VA Pharmacy locations filled prescriptions for a targeted facility.

Actors

- User (e.g., Pharmacist)
- Dispensing VistA Instance

Pre-Conditions

- User has accessed the OneVA Pharmacy Prescription Report [PSO REMOTE RX REPORT] menu
- User must have accessed the 'RX (PRESCRIPTIONS) [PSO RX]' menu within VistA and hold the appropriate security keys for their user role, such as PSORPH to identify the user as a Pharmacist. (No separate Security Key required.)

Flow of Events

1. User selects a report option from the 'OneVA Pharmacy Prescription Report' menu.
   a. User selects 'Prescriptions we have filled for other facilities' report.
   b. User selects 'Our prescriptions, filled by other facilities' report.
   c. User selects 'All activity for Other VA Pharmacy locations' report
2. User selects 'D' – 'Date Range' or go to step 3 or step 4
   a. User enters start date.
   b. User enters end date.
3. User selects 'P' - 'Patient' or go to step 4.
   a. User enters Patient Name
4. User selects 'S' - 'Site'.
   a. User enters Institution Name.

Alternate Flow

N/A

Exceptions

N/A

System Message

N/A

User Access Levels

To access the OneVA Pharmacy software the user must have access to the 'RX (PRESCRIPTIONS) [PSO RX]' menu within VistA and hold the appropriate security keys for their user role, such as PSORPH to identify the user as a Pharmacist. (No separate Security Key required.).

Continuity of Operation

New OneVA Pharmacy Checking for Prescriptions Message

The OneVA Pharmacy software uses a new service call to the HDR/CDS Repository each time the Medication Profile view activates via the 'PATIENT PRESCRIPTION PROCESSING [PSO LM BACKDOOR ORDERS]' menu. This new service call activates if the patient has been treated at more than one VA Medical Center. This additional service call retrieves all prescriptions associated with the patient from the repository, which requires additional time. In order to execute the query to the HDR/CDS Repository, the user must answer 'YES' to the 'Would you like to query prescriptions from other OneVA Pharmacy locations?' prompt and displayed in the following image.

Query Prescription from other OneVA Pharmacy Locations Prompt

```
Would you like to query prescriptions from other OneVA Pharmacy
locations? NO//
```

The user will receive the following message while the query processes:

OneVA Pharmacy Checking for Prescriptions Message

```
Please wait. Checking for prescriptions at other VA Pharmacy locations. This may take a
moment…
```

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 (#391.91)'. Prior to validating the 'TREATING FACILITY LIST' entries, the process filters on the following list of valid facility types: VAMC, M&ROC, M&ROC(M&RO), OC, OPC, CBOC, PRRTP, DOM, HCS, MC(M), MC(M&D), MORC, NHC, VANPH, SOC, SARRTP.

If there are not two or more valid entries, the system will not display the 'Executing OneVA Pharmacy Query Message' listed in the figure above nor will medications that originated from another VA Pharmacy location display on the Medication Profile view.

New OneVA Pharmacy System Down or Not Responding Message

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 connection fails, the system is down message will display as shown in the following image.

OneVA Pharmacy System Not Responding Message

```
The system is down or not responding (Connection Failed).
Could not query prescriptions at other VA Pharmacy locations.

Press RETURN to continue:
```

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 prescriptions will not display on the Medication Profile view.)

OneVA Pharmacy Patient Found No Rxs Informational Message

The system identifies and queries the HDR/CDS Repository but if the patient does not have any prescription records from other VA Pharmacy locations, matching the search criteria, the following informational message displays:

Figure 19: Informational Message Patient Exists but Has No Remote Prescriptions

```
When trying to query prescriptions at other VA Pharmacy
Locations the following message was encountered:
***
PATIENT FOUND WITH NO PRESCRIPTION RECORDS MATCHING SEARCH CRITERIA
***

Press RETURN to continue:
```

Getting Started

Logging On

The OneVA Pharmacy patch is an enhancement to the VistA 'PHARMACY [PS MENU]' > 'OUTPATIENT PHARMACY' package. To access the application, the user must enter access and verify codes to login.

System Menu

The OneVA Pharmacy patch is an enhancement to the VistA 'PHARMACY [PSO MENU]' > 'OUTPATIENT PHARMACY MANAGER [PSO MANAGER]' > 'RX (PRESCRIPTION) [PSO RX]' menu. The user must have access to these menus in order to execute the OneVA Pharmacy software.

Changing User ID and Password

The OneVA Pharmacy feature occurs fully within the context of VistA and as such relies on the pre-existing procedures to log in and change the user password.

Exit System

The OneVA Pharmacy feature occurs fully within the context of VistA and as such relies on the pre-existing functionality to exit the system. The VistA application will also close if the user is inactive.

Caveats and Exceptions

Label Reprinting

The OneVA Pharmacy patch retrieves the prescription information for the label from the host site and transmits the data back to the dispensing site for printing. As of this writing, there is no 'REMOTE REPRINT' option available for OneVA Pharmacy orders. The 'REPRINT' action is not operational for the OneVA Pharmacy refills or partials, however, plans are being made to release a new action option as part of the OneVA Pharmacy Phase II initiative.

In order to reprint a label due to a paper jam, a malfunction of the printer, or the need to label multiple packages like inhalers, it is suggested to use the OneVA Pharmacy 'Partial Fill Prescription Order' process and perform the transaction again.

Target VistA Time Out Awaiting Reply Message

OneVA Pharmacy remote refill and remote partial fill actions at times receives the following exception message:

> MESSAGE SENT TO TARGET VISTA; TIME OUT AWAITING REPLY
>
> Press RETURN to continue:

The user pressed RETURN and must execute the transaction steps for a second time. If the user repeats the transaction, the process successfully executes.

Host Site OneVA Pharmacy Flag Not Set On

As stated in the 'Systems Configuration' section of this document, if the 'ONEVA PHARMACY FLAG (#101)' is not set to the 'on' state at the host site, the dispensing site will receive the following message:

The OneVA Pharmacy flag is turned 'OFF' at this facility. Unable to process refill/partial fill requests. Queries will NOT be made to other VA Pharmacy locations.

Using the Software

Patient Prescription Processing [PSO LM BACKDOOR ORDERS]

Selecting a Patient

Sign-in to the VistA system and select the menu option:

PATIENT PRESCRIPTION PROCESSING [PSO LM BACKDOOR ORDERS]

1. **Enter** a patient identifying information at the 'Select PATIENT NAME:' prompt.

Figure 20: Select PATIENT NAME Prompt

```
Select PATIENT NAME: PSOPATIENT,SIX
```

The process for selection a patient is unchanged. The system responds with the patient name, date of birth, and other patient information.

2. Press **<ENTER>** if this is the correct patient.

Figure 21: Patient Found Press RETURN to Continue Prompt

```
Select PATIENT NAME:    PSOPATIENT,SIX          2-13-61    666012136     NO
NSC VETERAN

No Patient Warnings on file for PSOPATIENT,SIX.

Press RETURN to continue...
```

3. Press **<ENTER>** if the 'Allergy Assessment' message is received:

Figure 22: Allergy Assessment Message

```
          PSOPATIENT,SIX ([redacted])
     No Allergy Assessment!

Press Return to continue:
```

View Order Rxs from Other VA Pharmacy Locations

The system begins to execute the OneVA Pharmacy query for prescriptions from all other VA Pharmacy locations if it meets the conditions documented in the 'Continuity of Operation' section of this document.

Press <ENTER> and accept the default of 'Yes' at the 'Query Prescription from other OneVA Pharmacy locations' prompt.

Figure 23: Query Prescription from other OneVA Pharmacy Locations Prompt

```
Would you like to query prescriptions from other OneVA Pharmacy
locations? YES//
```

1. After entering yes, the 'OneVA Pharmacy Checking for Prescriptions' information message displays.

   The system will display the checking for prescriptions message as shown in the following image.

Figure 24: Executing OneVA Pharmacy Query Message

```
Please wait. Checking for prescriptions at other VA Pharmacy locations. This may
 take a moment...
```

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 (#391.91)'. Prior to validating the 'TREATING FACILITY LIST' entries, the process filters on the following list of valid facility types: VAMC, M&ROC, M&ROC(M&RO), OC, OPC, CBOC, PRRTP, DOM, HCS, MC(M), MC(M&D), MORC, NHC, VANPH, SOC, SARRTP.

If there are not two or more valid entries, the system will not display the 'Executing OneVA Pharmacy Query Message' listed in the figure above nor will medications that originated from another VA Pharmacy location display on the Medication Profile view.

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 connection fails, the system is down message will display as shown in the following image.

Figure 25: System is Down or Not Responding Exception Message

```
The system is down or not responding. Could not query prescriptions at other VA
Pharmacy locaitons.
Press RETURN to continue:
```

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 prescriptions will not display on the Medication Profile view.)

Press <ENTER> if the 'system is down' message displays.

As mentioned in the 'Systems Summary' section, the OneVA Pharmacy program was an initiative from the grassroots Innovation Program. As such, development requirements were limited, and specific software areas were to remain untouched; kept 'as-is'.

An example can be found in the following figure where the original 'REMOTE PRESCRIPTION AVAILABLE – DISPLAY REMOTE DATA' prompt still remains. The user bypasses the display of remote data once the OneVA Pharmacy patch is available by entering 'No'.

Enter <N> to accept the 'Display Remote Data? N//' prompt.

Press <ENTER> to accept the default or enter a valid status code change to the status.

Figure 26: Patient Status Message: Update or Press RETURN to Continue Prompt

```
REMOTE PRESCRIPTIONS AVAILABLE!
Display Remote Data? N// N

Eligibility:
RX PATIENT STATUS: OUTPT NON-SC//
```

Patient Information View

After selecting a patient, the system displays the first page of the 'Patient Information' view.

Press <ENTER> to continue to the second page of the 'Patient Information' view.

Medication Profile View

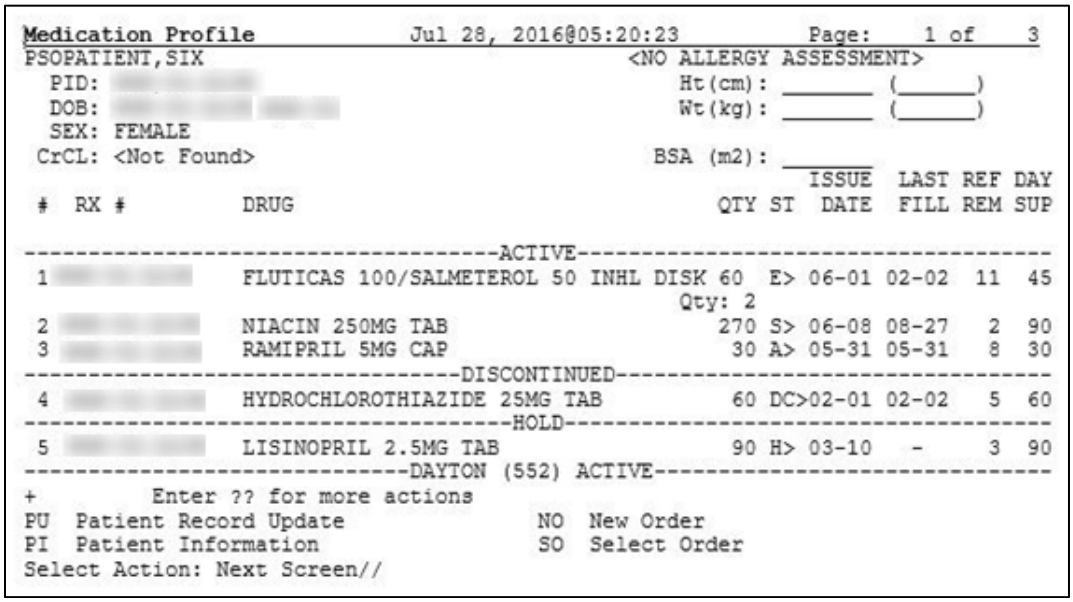
Press <ENTER> to continue to the 'Medication Profile' view.

The 'Medication Profile' view lists all prescriptions that originated at the dispensing Pharmacy first, followed by 'Non-VA MEDS (Not Dispensed by VA)', then by the prescriptions retrieved from the HDR/CDS Repository that originated at other VA Pharmacy locations. The prescriptions originating from other VA Pharmacy locations display under a divider header line showing the site name, site number, and status.

The first page of the Medication Profile view, in the example displayed in the following image, displays the 'dispensing site' (aka 'local') prescription orders. The divider heading displays 'ACTIVE' and includes the 'Active', 'Suspended', and 'Expired' medications (no changes were made to this format), followed by the orders listed as 'Discontinued' medications, then prescriptions in the 'Hold' status.

The following image also shows the divider heading for the first 'other' VA Pharmacy location site and displays: 'DAYTON (552) ACTIVE'.

Figure 27: Medication Profile (Page 1 of 3) Example (Remote Rxs)



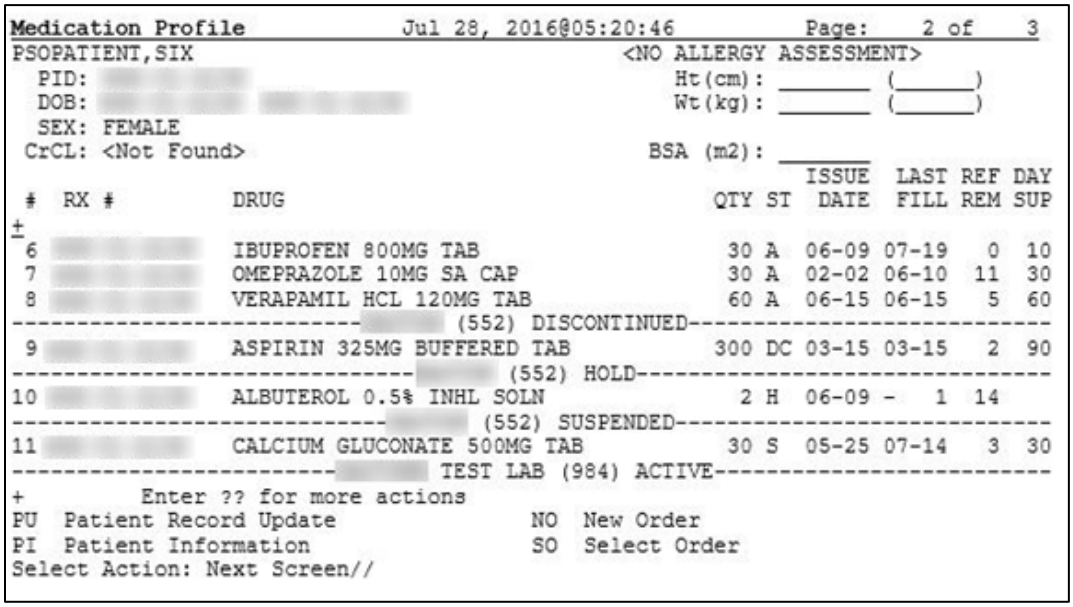
```
Medication Profile            Jul 28, 2016@05:20:23          Page:    1 of    3
PSOPATIENT,SIX                                   <NO ALLERGY ASSESSMENT>
  PID: [illegible]                                   Ht(cm): _______ (______)
  DOB: [illegible]                                   Wt(kg): _______ (______)
  SEX: FEMALE
 CrCL: <Not Found>                                BSA (m2): _______
                                                              ISSUE  LAST REF DAY
 #  RX #         DRUG                                   QTY ST  DATE  FILL REM SUP

-------------------------------------ACTIVE-------------------------------------
 1 [illegible]    FLUTICAS 100/SALMETEROL 50 INHL DISK 60  E> 06-01 02-02  11  45
                                                    Qty: 2
 2 [illegible]    NIACIN 250MG TAB                      270 S> 06-08 08-27   2  90
 3 [illegible]    RAMIPRIL 5MG CAP                       30 A> 05-31 05-31   8  30
----------------------------------DISCONTINUED----------------------------------
 4 [illegible]    HYDROCHLOROTHIAZIDE 25MG TAB           60 DC>02-01 02-02   5  60
---------------------------------------HOLD---------------------------------------
 5 [illegible]    LISINOPRIL 2.5MG TAB                   90 H> 03-10   -     3  90
------------------------------DAYTON (552) ACTIVE------------------------------
+         Enter ?? for more actions
PU  Patient Record Update              NO  New Order
PI  Patient Information                SO  Select Order
Select Action: Next Screen//
```

Press <ENTER> to continue to the next 'Medication Profile' view.

Page 2 of the Medication Profile view, in the example displayed in the following image, displays the 'Active', 'Discontinued', prescriptions in the 'Hold' status, and 'Suspended' medications for the 'DAYTON (552)' site.

The following image also shows the divider heading for the second 'other' VA Pharmacy location site and displays: 'DAYTSHR TEST LAB (984) ACTIVE'.

Figure 28: Medication Profile (Page 2 of 3) Example (Remote Rxs)



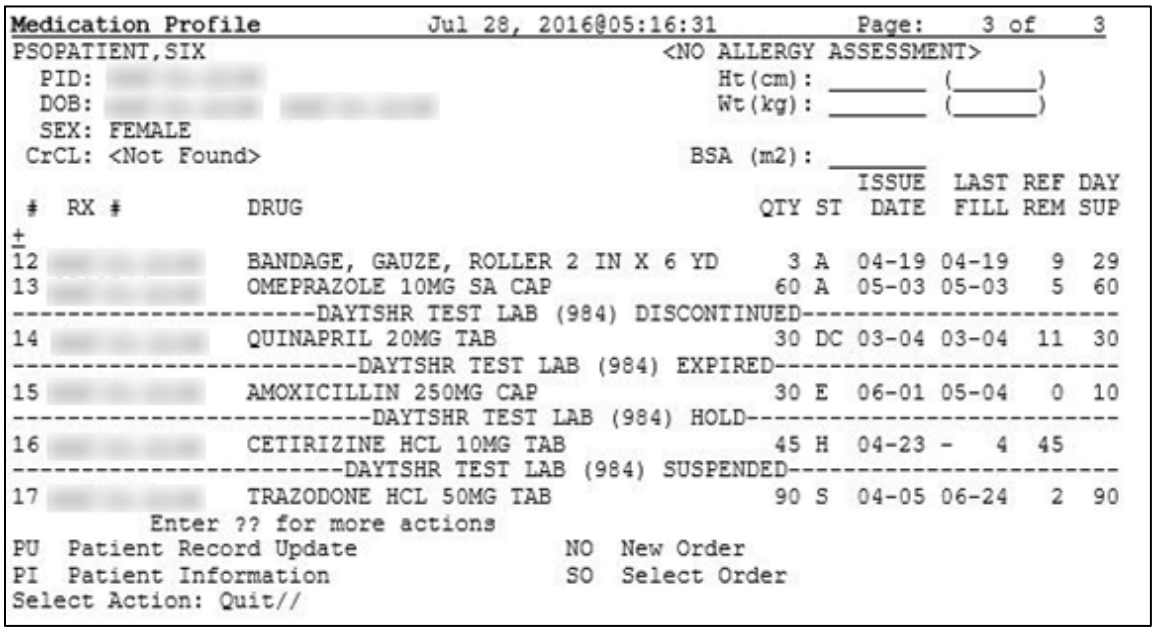
```
Medication Profile            Jul 28, 2016@05:20:46          Page:    2 of    3
PSOPATIENT,SIX                                   <NO ALLERGY ASSESSMENT>
  PID: [illegible]                                   Ht(cm): _______ (______)
  DOB: [illegible]                                   Wt(kg): _______ (______)
  SEX: FEMALE
 CrCL: <Not Found>                                BSA (m2): _______
                                                              ISSUE  LAST REF DAY
 #  RX #         DRUG                                   QTY ST  DATE  FILL REM SUP
+
 6 [illegible]    IBUPROFEN 800MG TAB                    30 A  06-09 07-19   0  10
 7 [illegible]    OMEPRAZOLE 10MG SA CAP                 30 A  02-02 06-10  11  30
 8 [illegible]    VERAPAMIL HCL 120MG TAB                60 A  06-15 06-15   5  60
---------------------------[illegible] (552) DISCONTINUED----------------------------
 9 [illegible]    ASPIRIN 325MG BUFFERED TAB            300 DC 03-15 03-15   2  90
-------------------------------[illegible] (552) HOLD-------------------------------
10 [illegible]    ALBUTEROL 0.5% INHL SOLN                2 H  06-09 -   1  14
-----------------------------[illegible] (552) SUSPENDED-----------------------------
11 [illegible]    CALCIUM GLUCONATE 500MG TAB            30 S  05-25 07-14   3  30
-------------------------[illegible] 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//
```

Press <ENTER> to continue to the next 'Medication Profile' view.

Page 3 of the Medication Profile view, in the example displayed in the following image, displays the 'Active', 'Discontinued', prescriptions in the 'Hold' status, and 'Suspended' medications for the 'DAYTON (###)' site.

The following image also shows the divider heading for the second 'other' VA Pharmacy location site and displays: 'DAYTSHR TEST LAB (984) ACTIVE'.

Figure 29: Medication Profile (Page 3 of 3) Example (Remote Rxs)



```
Medication Profile            Jul 28, 2016@05:16:31          Page:    3 of    3
PSOPATIENT,SIX                                    <NO ALLERGY ASSESSMENT>
  PID:                                               Ht(cm): _______ (______)
  DOB:                                               Wt(kg): _______ (______)
  SEX: FEMALE
 CrCL: <Not Found>                                  BSA (m2): _______
                                                              ISSUE  LAST REF DAY
 #  RX #         DRUG                                  QTY ST  DATE  FILL REM SUP
+
12               BANDAGE, GAUZE, ROLLER 2 IN X 6 YD      3 A  04-19 04-19   9  29
13               OMEPRAZOLE 10MG SA CAP                 60 A  05-03 05-03   5  60
----------------------DAYTSHR TEST LAB (984) DISCONTINUED----------------------
14               QUINAPRIL 20MG TAB                     30 DC 03-04 03-04  11  30
-------------------------DAYTSHR TEST LAB (984) EXPIRED-------------------------
15               AMOXICILLIN 250MG CAP                  30 E  06-01 05-04   0  10
--------------------------DAYTSHR TEST LAB (984) HOLD---------------------------
16               CETIRIZINE HCL 10MG TAB                45 H  04-23 -       4  45
----------------------DAYTSHR TEST LAB (984) SUSPENDED----------------------
17               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//
```

Medication Profile View Example with 'Non-VA MEDS'

The 'Medication Profile' views, displayed in the following two images, show the format when 'Non-VA MEDS (Not Dispensed by VA)' are available. The dispensing site prescriptions display first, followed by the 'Non-VA MEDS (Not Dispensed by VA)', then by prescriptions that originated from other VA Pharmacy locations.

Figure 30: Medication Profile (Page 1 of 2) Example (Non-VA MEDS)

```
Medication Profile            Jul 28, 2016@11:01:57          Page:    1 of    3
PSOPATIENT,SEVEN                                                        <A>
  PID:                                                 Ht(cm): 177.80 (08/05/2010)
  DOB:                                                 Wt(kg): 95.91 (01/10/2011)
  SEX: MALE                      Non-VA Meds on File    Last entry on 08/05/10
 CrCL: 64.0(est.) (CREAT:1.30mg/dL 1/10/11)      BSA (m2): 2.14
                                                          ISSUE  LAST REF DAY
 #  RX #         DRUG                                 QTY ST  DATE  FILL REM SUP

------------------------------------ACTIVE-------------------------------------
 1               ASPIRIN 325MG EC TAB                  90 S> 03-07 04-11   2  45
 2               BALSALAZIDE DISODIUM 750MG CAP        30 A> 04-25 04-25  11  30
 3               CALCIUM POLYCARBOPHIL 625MG TAB       30 A> 05-09 05-09  11  30
 4               CETIRIZINE HCL 5MG TAB                30 A> 05-03 05-03   4  30
 5               HCTZ 50/TRIAMTERENE 75MG TAB          30 A> 02-02 02-03  11  30
 6               TRAZODONE HCL 50MG TAB                15 A> 05-09 06-09  10  30
---------------------------------DISCONTINUED----------------------------------
 7               ATORVASTATIN CALCIUM 20MG TAB         30 DC>02-01 02-01  11  30
 8               FLUTICASONE PROP 50MCG 120D NASAL INHL   DC>04-27 04-27   1  30
+         Enter ?? for more actions
PU  Patient Record Update              NO  New Order
PI  Patient Information                SO  Select Order
Select Action: Next Screen//
```

Figure 31: Medication Profile (Page 2 of 2) Example (Non-VA MEDS)

```
Medication Profile            Jul 28, 2016@10:52:26          Page:    2 of    3
PSOPATIENT,SEVEN                                                        <A>
  PID:                                                 Ht(cm): 177.80 (08/05/2010)
  DOB:                                                 Wt(kg): 95.91 (01/10/2011)
  SEX: MALE                      Non-VA Meds on File    Last entry on 08/05/10
 CrCL: 64.0(est.) (CREAT:1.30mg/dL 1/10/11)      BSA (m2): 2.14
                                                          ISSUE  LAST REF DAY
 #  RX #         DRUG                                 QTY ST  DATE  FILL REM SUP
+
                                                      Qty: 2
------------------------------------HOLD---------------------------------------
 9               IBUPROFEN 800MG TAB                   90 H> 02-01   -    11  30
----------------------Non-VA MEDS (Not dispensed by VA)-----------------------
  ASCORBIC ACID 500MG TAB 500MG ONCE DAILY          Date Documented: 08/05/10
  ASPIRIN 81MG EC TAB 81MG ONCE DAILY               Date Documented: 08/05/10
  CALCIUM 250MG/VITAMIN D 125 UNT TAB ONE TABLET AS DIRECTED
                                                    Date Documented: 08/05/10
  CHONDROITIN/GLUCOSAMINE CAP/TAB ONE TAB ONCE DAILY
                                                    Date Documented: 08/05/10
+         Enter ?? for more actions
PU  Patient Record Update              NO  New Order
PI  Patient Information                SO  Select Order
Select Action: Next Screen//
```

Dispense (Local) Order Originating from Dispensing (Local) Site

The dispensing process for filling a prescription order that originated locally from the dispensing site was unaffected by the OneVA Pharmacy patch.

The software still provides access to all previously available actions – no changes were made to the action options related to the dispensing/local prescription refill process. To refill a

prescription, the action id is 'RF'. The action option to execute a partial fill for a prescription order is 'PR'.

The following lists all action options available from the 'OP Medication Profile' view.

Figure 32: Action Options for Local/Dispensing Orders

```
AL   Activity Logs (OP)    OTH  Other OP Actions      FS   First Screen
VF   Verify (OP)           REJ  View REJECT           GO   Go to Page
CO   Copy (OP)             IN   Intervention Menu     LS   Last Screen
TR   Convert Titration Rx  DA   Display Drug Allergies PS  Print Screen
TM   Titration Mark/Unmark DIN  Drug Restr/Guide (OP) PT   Print List
RP   Reprint (OP)          +    Next Screen           QU   Quit
HD   Hold (OP)             -    Previous Screen       RD   Re Display Screen
UH   Unhold (OP)           <    Shift View to Left    SL   Search List
PI   Patient Information   >    Shift View to Right   UP   Up a Line
PP   Pull Rx (OP)          ADPL Auto Display(On/Off)
IP   Inpat. Profile (OP)   DN   Down a Line

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

Dispense Rx Order from another VA Pharmacy Location

The 'Medication Profile' view displays both the dispensing Pharmacy's medications that originated on the local VistA instance followed by the prescriptions originating from other VA Pharmacy locations.

In the example that follows, there are no prescriptions for the patient at the dispensing site. The message '<No local prescriptions found>' displays before the first divider header.

Figure 33: Medication Profile view with no 'local' Prescriptions (Remote Rxs Only)

```
Medication Profile          Jul 27, 2016@10:11:28          Page:    1 of    1
PSOPATIENT,SIX                                  <NO ALLERGY ASSESSMENT>
  PID:                                             Ht(cm): _______ (______)
  DOB:                                             Wt(kg): _______ (______)
  SEX: FEMALE
 CrCL: <Not Found>                                BSA (m2): _______
                                                            ISSUE  LAST REF DAY
 #  RX #         DRUG                                  QTY ST  DATE  FILL REM SUP

<No local prescriptions found.>
-------------------------DAYSHR TEST LAB (984) ACTIVE-------------------------
 1               CETIRIZINE HCL 10MG TAB                30 A  05-21 07-07   7  30
 2               HYDRALAZINE HCL 25MG TAB               60 A  05-11 05-11   5  60
 3               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//
```

To access prescriptions originating on other sites, the same process is used.

The user can either enter <SO> and press <ENTER> at the 'Select Action' prompt or use the short cut feature to enter <3> and press <ENTER> as displayed in the following image.

Figure 34: Select Action 'SO' and Select Order by number Prompts Example

```
Select Action: Quit// SO   Select Order
Select Orders by number:  (1-3): 3
```

The system displays the REMOTE OP Medications view.

For the following example, note the two data fields:

- Refills
- Last Fill Date

Press <ENTER> to continue.

During the remote refill or partial fill of a prescription order that originated from another VA Pharmacy location, the number of refills remaining is decremented by one and the last refill date is updated with the current date on the host VistA. In the example displayed in the following image, the patient has '11' refills remaining and the last refill date was '05/31/16'.

Figure 35: Remote OP Medications view for a prescription

```
REMOTE OP Medications (ACTIVE)Jul 27, 2016@10:12:37          Page:    1 of    1
PSOPATIENT,SIX                                    <NO ALLERGY ASSESSMENT>
  PID:                                               Ht(cm): _______ (______)
  DOB:                                               Wt(kg): _______ (______)
  SEX: FEMALE
 CrCL: <Not Found>                                  BSA (m2): _______

         Site #:          R TEST LAB)
           Rx #:
     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//
```

For prescription orders that originated from other VA Pharmacy locations, the dispensing Pharmacy only has two actions available. They are:

- RF Refill Remote Order
- PR Partial

Refill Prescription Order

1. Enter **<RF>** and press **<ENTER>** at the Select Action prompt as shown in the following image.

Figure 36: Remote OP Medication RF Refill Action Item Example

```
Select Action:Quit// RF
```

The system confirms the action selected by showing Refill Remote Order on the prompt line as displayed in the following image.

Figure 37: Remote OP Medication RF Refill Action Item Results Example

```
Select Action:Quit// RF   Refill Rx from Another VA Pharmacy
```

The system then checks for a local drug that matches the remote drug description and if found, displays a question asking the user if the matched drug is acceptable. The prompt is expecting a 'Yes' or 'No' response. The system provides 'No' as the default, as displayed in the following image. In order to process the refill, the user enters 'Yes'.

For various reasons, there may not be a one to one match of the drug matching between the host and the dispensing sites therefore the message displayed in the following image may change. See the 'Drug Matching Process' section for drug matching messages, prompts, and instructions.

Figure 38: Remote Drug Match Response Example

```
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//
```

Press <ENTER> to continue.

The system displays the processing refill request message as shown in the following image.

Figure 39: Remote Refill Processing Message

```
Processing refill request. Please be patient as it may take a moment
for the host site to respond and generate your label data...
```

The system completes the remote refill process and generates the label data for printing. The 'LABEL DEVICE' message displays as shown in the following image.

Label Device Prompt

```
TRANSACTION SUCCESSFUL...  The refill for RX ##### 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:
```

The user enters the dispensing site printer information to print the label.

IMPORTANT: The OneVA Pharmacy requires stock prescription labels and a laser printer that is accessible at the Select LABEL DEVICE: prompt. If either one of the requirements are lacking, then the label will not print as programmed.

IMPORTANT: If the user enters an "^" at the Select LABEL DEVICE: prompt, the prescription label will not be printed and at this time. There is no way to do a reprint of the refill or partial fill label.

The label prints and the system displays a message to indicate the prescription order process completed as shown in the following image.

Figure 40: Successful Refill Status Message

```
Rx #      refilled.
Press RETURN to continue:
```

Press <ENTER> to continue.

The system displays a message informing that the prescription list is updating. The background process is executing the 'View Order Use Case' and retrieving the updated information about the patient's prescription orders from the HDR/CDS Repository.

The system displays the following message while the query to the HDR/CDS Repository is executing.

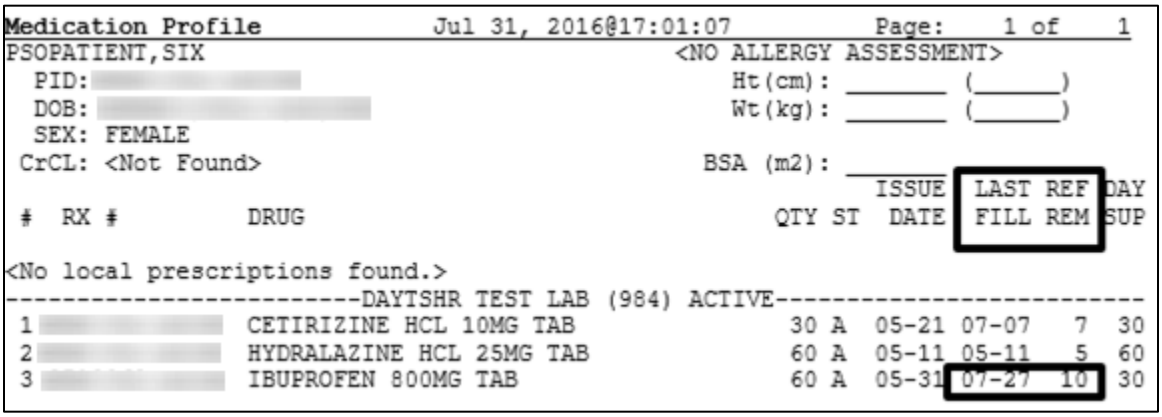
Figure 41: System Message: Updating Prescription Order List

```
Updating prescription order list...
```

The system will retrieve all prescriptions from the HDR/CDS repository and redisplay the Medication Profile view showing the updated prescription information.

In the following image the example shows the last refill date has been updated to be '07/27' and the refills remaining is now set to '10'.

Figure 42: Refill Successful: Medication Profile View Updated



```
Medication Profile            Jul 31, 2016@17:01:07          Page:    1 of    1
PSOPATIENT,SIX                                  <NO ALLERGY ASSESSMENT>
  PID:                                              Ht(cm): _______ (______)
  DOB:                                              Wt(kg): _______ (______)
  SEX: FEMALE
 CrCL: <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                CETIRIZINE HCL 10MG TAB                 30 A  05-21 07-07   7  30
 2                HYDRALAZINE HCL 25MG TAB                60 A  05-11 05-11   5  60
 3                IBUPROFEN 800MG TAB                     60 A  05-31 07-27  10  30
```

Partial Fill Prescription Order

Enter <PR> and press <ENTER> at the Select Action prompt as shown in the following image.

Figure 43: Remote OP Medication PR Partial Action Item Example

```
Select Action:Quit// PR   Partial
```

The system checks for a local drug that matches the remote drug description. If the system matches the drug, a 'Yes' or 'No' prompt displays. The system provides 'No', as the default, as displayed in the following image. In order to fill this partial prescription, order the user enters 'Yes'.

For various reasons, there may not be a one to one match of the drug matching between the host and the dispensing sites therefore the message displayed in the following image may change. See the 'Drug Matching Process' section for drug matching messages, prompts, and instructions.

Figure 44: Remote Drug Match Response Example

```
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//
```

Enter <Y >and press <ENTER>.

The system displays 'YES' and the 'Enter Quantity' prompt displays as shown in the following image.

Figure 45: Partial Fill Example: Quantity

```
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:
```

Enter <10> and press <ENTER>.

The system displays '10' and the 'DAYS SUPPLY' prompt displays as shown in the following image.

Figure 46: Partial Fill Example: Days Supply

```
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:
```

Enter <10> and press <ENTER>.

The system displays '10' and the 'Pharmacist' prompt displays defaulting to the name of the Pharmacist as shown in the following image.

Figure 47: Partial Fill Example: Pharmacist

```
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:  [redacted] //        TJC     192     [redacted] TEST LA
B
```

Press <ENTER>.

The system displays the name of the Pharmacist, the Site, and the 'Remarks' prompt displays as shown in the following image.

Figure 48: Partial Fill Example: Remarks

```
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:  [redacted] //        TJC     192     [redacted] TEST LA
B
REMARKS:
```

1. Enter <LAST REFILL LOST> and press <ENTER>.

   The system displays 'LAST REFILL LOST' as shown in the following image.

Figure 49: Partial Fill Example: Remarks Example

```
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:  [redacted] //        TJC     192     [redacted] TEST LA
B
REMARKS: LAST REFILL LOST
```

   The system displays the processing refill request message as shown in the following image.

Figure 50: Remote Refill Processing Message

```
Processing refill request. Please be patient as it may take a moment
for the host site to respond and generate your label data...
```

   The system completes the remote partial fill process and generates the label data for printing. The 'LABEL DEVICE' message displays as shown in the following image.

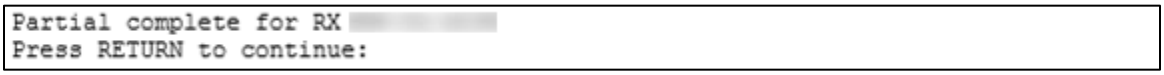
Label Device Prompt

```
TRANSACTION SUCCESSFUL...  The refill for RX ##### 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:
```

   The user enters the dispensing site printer information to print the label.

   The label prints and the system displays a message to indicate the prescription order process completed as shown in the following image.

Figure 51: Successful Partial Fill Status Message



Press <ENTER> to continue.

The system displays a message informing that the prescription list is updating. The background process is executing the 'View Order Use Case' and retrieving the updated information about the patient's prescription orders from the HDR/CDS Repository.

The system displays the following message while the query to the HDR/CDS Repository is executing.

Figure 52: System Message: Updating Prescription Order List

The system will retrieve all prescriptions from the HDR/CDS repository and redisplay the Medication Profile view showing the updated prescription information.

Use the OneVA Pharmacy Prescription Reports capability to review the partial fill activity for both the dispensing and host sites transactions. See the OneVA Pharmacy Report section for details.

Drug Matching Process

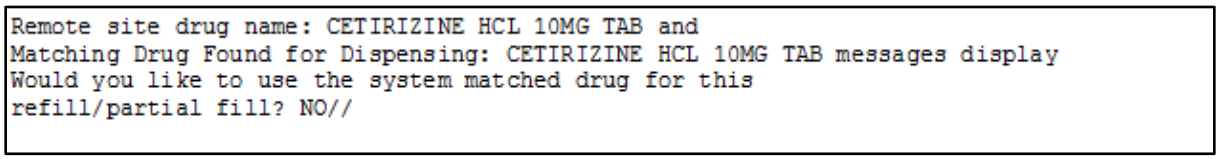
Overall, three outcomes occur during the OneVA Pharmacy Drug Matching function. They are:

1. One-to-One Match
2. One-to-Many Match
3. No Drug Match

Drug Matching: One-to-Many

When the drug matching logic identifies a one-to-one match at the dispensing site for the selected host prescription, the systems displays the 'Remote site drug name:' and the 'Matching Drug Found for Dispensing:' and prompts the user to respond 'YES' or 'NO' as displayed in the following image.

Figure 53: Drug Matching: One-to-One Match



Drug Matching: One-to-Many

When the drug matching logic identifies a one-to-many match at the dispensing site for the selected host prescription, the system the 'Remote site drug name:' and the 'Select matching local drug:' prompt as displayed in the following image.

Figure 54: Drug Matching: One-to-Many - Select matching local drug Prompt

```
Remote site drug name: TRAZODONE HCL 50MG TAB message displays
Select matching local drug:
```

To display the list of possible entries, the user enters two questions marks <??> at the 'Select matching local drug' prompt and presses <ENTER> as displayed in the following image.

Figure 55: Drug Matching: One-to-Many

```
Remote site drug name: TRAZODONE HCL 50MG TAB message displays
Select matching local drug: ??
```

The system displays the list of possible drug matches and prompts the user to select a drug as shown in the following image.

Figure 56: Drug Matching: One-to-Many – Select from List of Possible Matches

```
Remote site drug name: TRAZODONE HCL 50MG TAB message displays
Select matching local drug: ??
   Choose from:
            TRAZODONE HCL  50MG TAB         CN609         NATL FORM *** AUTO
MED ***
            TRAZODONE HCL 50MG TAB U.D.         CN609       01-23-04     NAT
L FORM (NDC)       messages display
Select matching local drug:
```

In the following example, the user enters <2043> and presses <ENTER>. The system displays the selected drug and prompts the user to respond 'YES' or 'NO' as displayed in the following image.

Figure 57: Drug Matching: One-to-Many – Select Drug 2042 Example

```
Remote site drug name: TRAZODONE HCL 50MG TAB message displays
Select matching local drug: ??
   Choose from:
            TRAZODONE HCL  50MG TAB         CN609         NATL FORM *** AUTO
MED ***
            TRAZODONE HCL 50MG TAB U.D.         CN609       01-23-04     NAT
L FORM (NDC)       messages display
Select matching local drug:
TRAZODONE HCL  50MG TAB         CN609     NATL FORM *** AUTOMED ***
Would you like to use this drug?
```

Drug Matching: No Drug Match

When the drug matching logic does not identify any drug match the system at the dispensing site for the selected host prescription, the system the 'Remote site drug name:' and the 'Select matching local drug:' prompt as displayed in the following image.

Figure 58: Drug Matching: No Drug Match

```
Remote site drug name: CABERGOLINE 0.5MG TAB
No local match could be found for CABERGOLINE 0.5MG TAB.  messages display
Press RETURN to continue: prompt displays
```

Drug Matching: Exception Messages

The OneVA Pharmacy patch contains specific business rules to prevent refill and/or partial orders that originated at other VA Pharmacy locations from being processed. They include the following list:

The OneVA Pharmacy patch contains specific business rules to prevent refill and/or partial orders that originated at other VA Pharmacy locations from being processed. They include the following list:

- Patient's prescription that originated from another VA Pharmacy location cannot be refilled before the next refill date.

  Unable to complete transaction.

  Cannot refill Rx# xxxxxxx. Next possible fill date is MM/DD/YYYY

- Patient's prescription that originated from another VA Pharmacy location is not fully or partially dispensed when the prescription status is 'discontinued', 'expired', is on 'hold', or 'suspended'.

  Only 'ACTIVE' remote prescriptions may be refilled at this time.

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refilled) when there are zero remaining refills. Note: Partial fills are allowed.

- Unable to complete transaction. Cannot refill Rx # xxxxxxx. No refills left.

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when the drug is classified as a controlled substance on the dispensing site.

- This is a controlled substance. Cannot refill Rx # xxxxxxx.

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when the drug is classified as a controlled substance on the host site.

Unable to complete transaction. Rx #xxxxxxx cannot be refilled.

The associated drug is considered a controlled substance at the host facility.

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when the drug is inactive on the dispensing site.
- Matched Drug <DRUG NAME> is inactive. Cannot refill.
- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when the drug has no dispensing site match.
- No local match could be found for <DRUG NAME>
- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when no drug on the dispensing site has a matching VA Product ID.

  Missing VA Product ID. Rx #xxxxxxx cannot be refilled.

OneVA Pharmacy Prescription Report [PSO REMOTE RX REPORT]

OneVA Pharmacy Report Menu

The OneVA Pharmacy patch comes with a 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 as highlighted in the following image.

Figure 59: OneVA Pharmacy Prescription Report [PSO REMOTE RX REPORT] Menu

```
Select Rx (Prescriptions) <TEST ACCOUNT> Option: ??

          Patient Prescription Processing [PSO LM BACKDOOR ORDERS]
   FEE    Fee Patient Inquiry [FBAA PATIENT INQUIRY]
          Check Drug Interaction [PSO CHECK DRUG INTERACTION]
          Complete Orders from OERR [PSO LMOE FINISH]
          Discontinue Prescription(s) [PSO C]
          Edit Prescriptions [PSO RXEDIT]
          ePharmacy Menu ... [PSO EPHARMACY MENU]
          List One Patient's Archived Rx's [PSO ARCHIVE LIST RX'S]
          Manual Print of Multi-Rx Forms [PSO LM MULTI-RX PRINT]
          OneVA Pharmacy Prescription Report [PSO REMOTE RX REPORT]
          Reprint an Outpatient Rx Label [PSO RXRPT]
          Signature Log Reprint [PSO SIGLOG REPRINT]
          View Prescriptions [PSO VIEW]
```

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

Accessing OneVA Pharmacy Reports

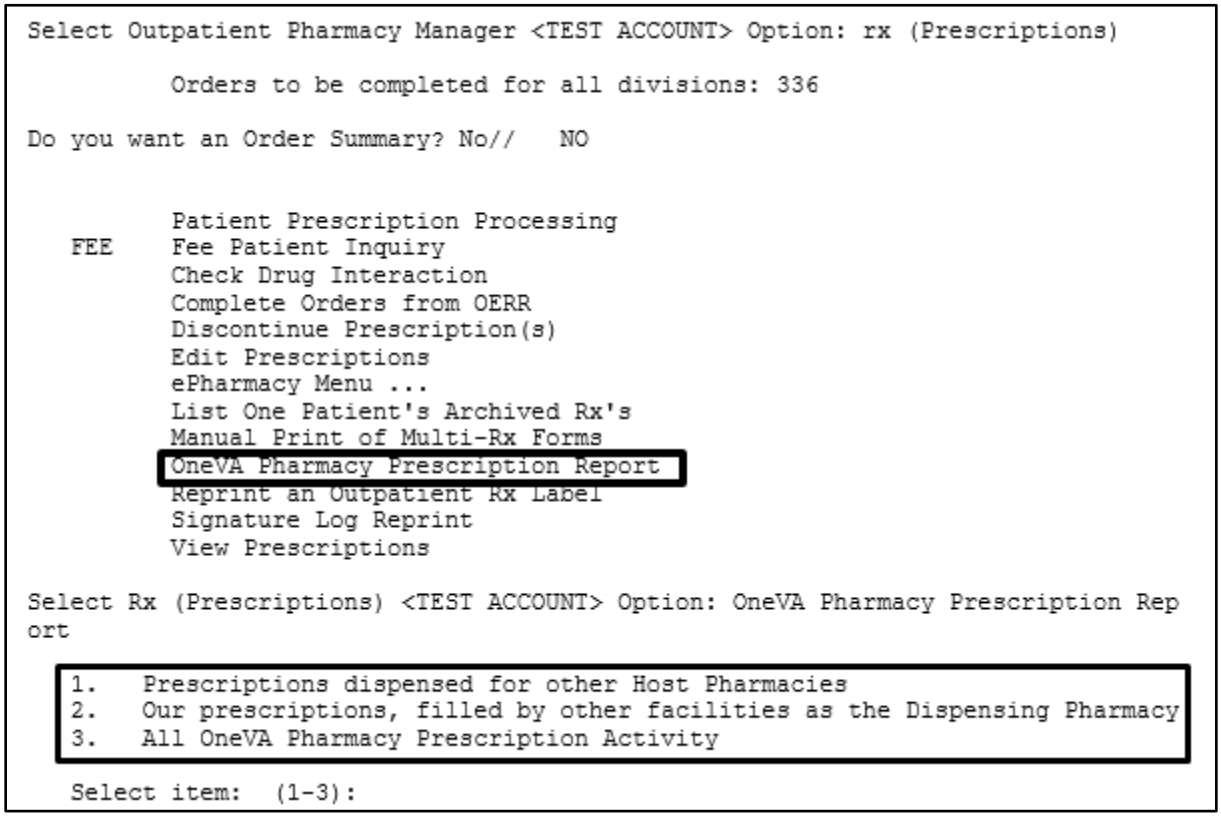
The following section provides the details to access the report menu, how to select specific refill information using various search options, and provides the description of the report content.

Sign-in to the VistA system and select the menu option:

ONEVA PHARMACY PRESCRIPTION REPORT [PSO REMOTE RX REPORT]

The system will display the three OneVA Pharmacy reports as shown in the following image:

Figure 60: OneVA Pharmacy Menu and Reports



Selecting <1> will display the list of prescriptions that our local facility has dispensed on behalf of other host Pharmacy locations.

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 we have filled for other Pharmacy locations as the dispensing site and all prescriptions other Pharmacy locations have filled on our behalf.

The user has the option to answer with <1>, <2>, or <3>.

Selecting a Report and Report Search Options

Use the report number to select the desired report.

Enter <1> to select the report 'Prescriptions we have dispensed for other Host Pharmacies' and press <ENTER>.

Figure 61: Example: Select 1 for Prescriptions dispensed for other Host Pharmacies

```
Select item:  (1-3): 1  Prescriptions dispensed for other Host Pharmacies
```

The system displays the name of the report selected, shows the three search options, and prompts for user to enter the date range, patient, or site as shown in the following image.

Figure 62: Report Search Options

```
   Select item:  (1-3):

   Select item:  (1-3): 1  Prescriptions dispensed for other Host Pharmacies

     Select one of the following:

          D         DATE RANGE
          P         PATIENT
          S         SITE

Search by:
```

Search Option D – DATE RANGE

When selecting the 'DATE RANGE' option 'D' search feature all refills or partial fills performed between ranges of dates display. When selecting this option, the user enters two additional data items. They are:

- Start date (defaults to 30-days prior to today's date)
- End date (defaults to today's date)

Enter <D> and press <ENTER>.

The system displays the option name and prompts for the start date.as displayed in the following image.

Examples of valid date entry options are available using the 'HELP' command '?' as displayed in the following image.

Press <ENTER> to accept the default start date.

The system displays the defaulted start date and prompts for the end date.as displayed in the following image

Figure 63: Report Date Range Search Example: End Date

```
Enter start date: Jul 01, 2016//  (JUL 01, 2016)
Enter end date: Jul 31, 2016//
```

Press <ENTER> to accept the default end date.

Figure 64: Report Date Range Search Example: End Date Image 2

```
Enter end date: Jul 31, 2016//  (JUL 31, 2016)
```

The system displays the 'Summary Report' for the selected report

Figure 65: Report Date Range Search Example Results: Summary Report

```
OneVA PHARMACY RX REPORT      Jul 26, 2016@18:55:44          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//
```

Search Option P – PATIENT

When selecting the 'PATIENT' option 'P' search feature all refills or partial fills performed for a single patient display. Select a patient by specifying the patient name, social security number, last 4-digits of the social security number, or the first initial of the last name with last 4-digits of social security numbers.

Enter <P> and press <ENTER>.

The system displays the option name and prompts for the patient's name as displayed in the following image.

Figure 66: Report Patient Search Example: Patient Name

```
Select PATIENT NAME:
```

1. Enter <PSOPATIENT, THREE> and press <ENTER>.

   If the text matches multiple patients, a list will display for the user to select a specific patient. If the text matches only one patient, the patient information displays as shown in the following image.

Figure 67: Report Patient Search Example: Patient Name Display

```
Select PATIENT NAME: PSOPATIENT,THREE  PSOPATIENT,THREE        8-22-57
                     NO     NSC VETERAN

No Patient Warnings on file for PSOPATIENT,THREE.

Press RETURN to continue...
```

Press <ENTER> to continue.

The system displays the 'Summary Report' for the selected report.

Figure 68: Report Patient Search Example: Results Summary Report

```
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//
```

Search Option S – SITE

The 'SITE' option 'S' selects all refills performed at a specific VA site. A site can be selected by specifying the Institution's Name, Status, Station Number, Official VA Name, Current Location,

Coding System/ID Pair, National Provider Identifier (NPI), Status, Name (Changed From), or Coding System.

Enter <S> and press <ENTER>.

The system displays the option name and prompts for site identification text as displayed in the following image.

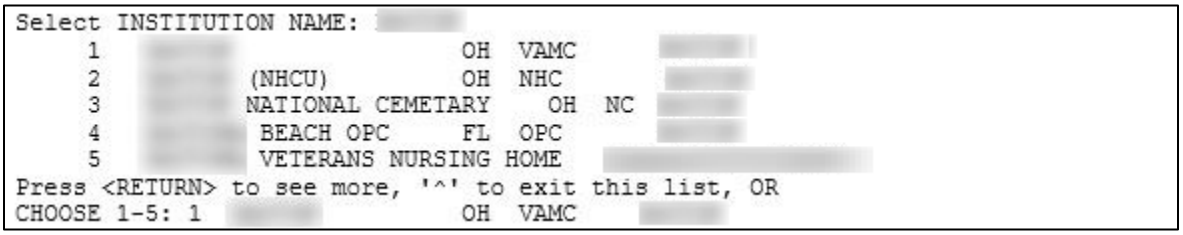
Figure 69: Report Site Search Example

```
Search by: SITE

Select INSTITUTION NAME:
```

1. Enter <DAYTON> and press <ENTER>.

   If the text matches only one site, the summary report page displays. If the text matches multiple sites, a list will display for the user to select a facility as shown in the following image.

Figure 70: Report Site Search Example: Select Site from Multiple List



The system displays the 'Summary Report' for the selected report.

Figure 71: Report Site Search Example: Results Summary Report

```
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 Report Content

All OneVA Pharmacy reports contain a summary page and a detailed page and all three reports have the same format and basic information regardless of the search option selected.

The following is an example of the summary page layout for the OneVA:

Figure 72: OneVA Pharmacy Report Example: Summary Page

```
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//
```

The type of report selected determines the refills shown on a report and the search option specified as described within this document. A row number identifies each refill/partial fill. For each row the date processed, patient name, drug name, quantity dispensed, and the quantity supplied displays. There are four refill type values. They are:

- RF – refills
- PR - partial refills
- OR – refills performed by other sites
- OP – partial fills performed by other sites

The total cost is the sum of the costs of all items included in this report and is available on the report 'Prescriptions we have dispensed for other Host Pharmacies'. The cost is calculated by using the dispensing sites 'Price Per Dispense Unit' and multiplying that by the quantity being dispensed.

To review more information about the orders, perform the following steps:

Enter <SI> at the 'Select Action' prompt and press <ENTER>.

The system displays the action name and prompts for the item to display:

Enter <11> at the 'Enter a number' prompt and press <ENTER>.

The following image displays the 'Select Action' and 'Enter a number' prompts.

Figure 73: OneVA Pharmacy Report Example: Select Item

```
SI       Select Item
Select Action:Quit//

Select Action:Quit// SI   Select Item
Enter a number (1-81): 11
```

The system displays the detail report for that item as displayed in the following image.

OneVA Pharmacy Report Example: Details Page

REDACTED

Press <ENTER> to return to the summary report view.

Continue to press <ENTER> to return to the report menu prompt.

1. Select a report and search options section to view another report.

Sending Drug File (#50) Data

The Send Drug File Entries to External Interface [PSS MASTER FILE ALL] option allows transmission of the entries in the DRUG file (#50) to an Outpatient Pharmacy Automated Interface (OPAI). Details on this option are in the Pharmacy Data Management User Manual.

Note: At the time of the OPAI release, none of the dispensing systems were using the Master File Updates. Sites should not use this option unless they ensure that the commercial dispensing system is ready to receive and acknowledge updates to the DRUG file (#50).

Troubleshooting

OneVA Pharmacy introduces new functionality that allows a Pharmacist to refill or partial fill a prescription from another VA Pharmacy location. This software patch uses HL7 messaging to send and receive remote prescription details from another VA Pharmacy location. This allows a 'dispensing' ('non-custodial' or 'local' pharmacy) to refill a prescription that originated from another VA Pharmacy location. The VA Pharmacy location where the prescription originated is the 'host' ('remote') facility.

VistA utilizes HL7 to send a query message to the eMI ESB. eMI sends the HL7 message to the HDR/CDS Repository and medications return to the querying site. The prescriptions display below any 'local' prescriptions on the Medication Profile view. The Pharmacist can then view and choose a 'host' prescription and will be able to refill or partially fill any active non-controlled substance prescription at either facility.

Entries log for all 'host' and 'dispensing' refills and partial fills into a new file called 'REMOTE PRESCRIPTION LOG (#52.09)'. The entries are viewable using the OneVA Pharmacy Prescription Report functionality.

With this integrated VistA patch, several points of failure could occur. The systems design will allow the process to continue if any of the various integration points fail, however, remote prescriptions will not display to the Pharmacist on the Medication Profile view.

There are application error messages that will display during the search for the patient and the patient's prescriptions. They are:

- No patient error message:

  PATIENT IDENTIFIER NOT FOUND

- Multiple patients returned error messages:

  MORE THAN ONE PATIENT RETURNED IN CALL TO HDR-CDS
  MORE THAN ONE PATIENT FOUND ON RX DATABASE, CHECK ICN

- Patient returned, no prescription data returned error message:

  PATIENT FOUND WITH NO PRESCRIPTION RECORDS

- Patient returned, no prescription data matching filters returned error message:

  PATIENT FOUND WITH NO PRESCRIPTION RECORDS MATCHING SEARCH CRITERIA

Special Instructions for Error Correction

Significant errors are errors or conditions that affect the system stability, availability, performance, or otherwise make the system unavailable to its user base. For any significant error, please contact your local support.

Appendix B: Frequently Asked Questions (FAQ)

1) What is the Value to me as the Veteran?

   The previous 'Coordinated Care for Traveling Veterans' handbook required either a visit to the Emergency Room/Urgent Care Center or a pharmacy clinic visit to obtain a new prescription. OneVA Pharmacy makes the best use of the prescription already on file at another VA medical center.

   Audience: Veteran

2) What if I have never been registered at the VA where I'm trying to pick up my prescription?

   Veterans must register/enroll at the VA medical center in order for the pharmacy to see their records.

   Audience: Veteran

3) Does OneVA pharmacy benefit me if I'm not traveling?

   Use existing processes to contact the VA where your prescription is on file to request a refill.

   Audience: Veteran

4) Do you still need to enter Allergies in to the Pharmacy profile?

   VistA pharmacy will display allergies and adverse reactions from all remote facilities.

   Audience: Pharmacy

5) Can we send the prescription to CMOP?

   OneVA Pharmacy is designed to provide an immediate fill at the Pharmacy window.

   Audience: Pharmacy

6) Can any prescription be filled by OneVA pharmacy?

   Controlled substances (CS at one or both facilities) cannot be filled via OneVA pharmacy. Drugs not matched to the National Drug file cannot be filled via OneVA Pharmacy. Prescriptions will no remaining refills, on suspense or on hold cannot be filled.

   Audience: Pharmacy, Veteran

7) What should I do if I do not have the medication in stock?

   Order the medication if the Veteran can return the next day, mail from CMOP to a temporary address, utilize the Coordinated Care for Traveling Veteran Handbook. "What would a prudent pharmacist do?"

   Audience: Pharmacy

8) What information is kept in my VistA system and what information is kept at the host VistA system?

   The dispensing VistA system tracks the information in a new OneVA Pharmacy file (not the prescription file) for reporting purposes. The refill or partial fill is tracked in the host system's prescription file and activity log.

   Audience: Pharmacy

9) What if it is too soon to fill?

   Prescription will not be available to refill. Partial fills will be an available option. Sites can use Remote Data Views to see the fill history from the host station, especially if there are concerns for frequent partial fill requests of the same Rx.

   Audience: Pharmacy

10) What is the dispensing name and address on the label?

    The host pharmacy will be the name and address printed on the label which is consistent with how CMOP processes prescriptions.

    Audience: Pharmacy

11) Are there any responsibilities for the host pharmacy in OneVA pharmacy?

    To account for copay billing, insurance billing and subsequent refill capabilities all sites are asked to print to an OneVA Report and manually release prescriptions filled by other stations. Recommended frequency of printing report is no less than weekly.

    Audience: Pharmacy

12) Does this affect the routine process of finishing prescriptions from the Pending file (ordering from OERR)?

    Yes, OneVA pharmacy will bring in prescriptions from other VA treating facilities to create the first enterprise-wide patient-centric actionable medication profile.

    Audience: Pharmacy

13) How does OneVA pharmacy select the drug from my drug file?

    The original prescription resides in the Health Data Repository (HDR). OneVA pharmacy identifies the national drug file (NDF) "VA Product" for the prescription. Matching drugs in your local drug file are identified based on that NDF product. If there is a 1:1 match found, OneVA pharmacy will recommend that drug. If there are multiple possible matches found, OneVA pharmacy will present a pick list to select from.

    Audience: Pharmacy

14) How much information can you see from the Host prescription file?

OneVA pharmacy displays a limited subset of the prescription. Once the patient is registered, VistAWeb can be utilized to see details of the prescription.

Audience: Pharmacy

15) What if the original prescription uses an abbreviation that is not in our instruction file?

The prescription label is generated from the host prescription file. This is consistent with how CMOP processes prescriptions.

Audience: Pharmacy

16) OneVA pharmacy reports show cost information, which system is used to calculate medication cost?

The dispensing system's cost is used in the report.

Audience: Pharmacy

17) Can I send an OneVA Pharmacy prescription to automation via the Outpatient Pharmacy Automation Interfaces (OPAI)?

No, this is being evaluated for future functionality. Consider window processing workflows to dispense OneVA Pharmacy fills.

Audience: Pharmacy

18) If a patient is requesting a medication that requires in-clinic administration, could I use OneVA pharmacy?

OneVA pharmacy functionality is intended for outpatient prescriptions to be dispensed at the Pharmacy window.

Audience: Pharmacy

19) How will a patient be notified that their OneVA prescription is ready for pick up?

OneVA Pharmacy does not interface with prescription ready notification boards. Consider alternative processes and workflow.

Audience: Pharmacy

Appendix C: Acronyms and Glossary

Acronyms and Abbreviations

The following table provides the list of acronyms used throughout the document along with their descriptions.

Table 18: Terms

Acronym/Abbreviation	Description
[DIUSER]	FileMan Menu
[PSO LM BACKDOOR ORDERS]	Patient Prescription Processing Menu
[PSO MANAGER]	Outpatient Pharmacy Manager Menu
[PSO MENU]	Pharmacy Menu
[PSO REMOTE RX REPORT]	OneVA Pharmacy Prescription Report Menu
[PSO RX]	Rx (Prescriptions) Menu
AITC	Austin Information Technology Center
C/HDR	Clinical/Health Data Repository
CDS	Clinical Data Services
Clin1	Clinical Product Support Team 1
DAYTSHR	Dayton Test Laboratory VistA instance
DoD	Department of Defense
eMI	Enterprise Messaging Infrastructure
EPMO	Office of Information and Technology Enterprise Program Management Office
ESB	Enterprise Service Bus
GOV	Government
HDR	Health Data Repository
HL7	Health Level 7
ICN	Integrated Control Number
IOC	Initial Operating Capability
IT	Information Technology
MVI	Master Veteran Index
NPI	National Provider Identifier
NSD	National Service Desk
OI&T	Office of Information and Technology
OMB	Office of Management and Budget
OP	Outpatient Pharmacy
OP	OneVA Pharmacy Partial Fill
OR	OneVA Pharmacy Refill
PII	Personally Identifiable Information

Acronym/Abbreviation	Description
PR	Partial Refill (Local)
PSO	Outpatient Prescription Pharmacy
RF	Refill (Local)
Rx	Prescription
SDM	Service Desk Manager
VA	Department of Veterans Affairs
VAMC	Veterans Affairs Medical Center
VDL	VA Software Document Library
VHA	Department of Veterans Health Administration
VistA	Veterans Health Information Systems and Technology Architecture

Glossary

The following table provides definitions for common acronyms and terms used in this manual.

Table 19: Glossary

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 Checks	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.

Acronym/Term	Definition
BSA	Body Surface Area. The Dubois formula is used to calculate the Body Surface Area using the following formula: $BSA\ (m^2) = 0.20247 \times Height\ (m)^{0.725} \times Weight\ (kg)^{0.425}$ 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 (CROC)	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.
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 value which displays in the pharmacy header is identical to the CrCl value calculated in CPRS. The formula approved by the CPRS Clinical Workgroup is the following: Modified Cockcroft-Gault equation using Adjusted Body Weight in kg (if ht > 60in) This calculation is not intended to be a replacement for independent clinical judgment.
Critical	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 custom and standard commercial-off-the-shelf (COTS) vendor database changes to update the two centralized databases at Austin and Martinsburg.
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.
DNS	Domain Name Server.
DoD	Department of Defense.

Acronym/Term	Definition
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.
Enhanced Order Check	Drug – Drug Interaction, Duplicate Therapy, and Dosing order checks that are executed utilizing FDB's MedKnowledge Framework APIs and database.
ETC	Enhanced Therapeutic Classification.
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.
GUI	Acronym for Graphical User Interface.
HDR/CDS	Health Data Repository/Clinical Data Services Repository
HDR-Hx	Health Data Repository Historical.
HDR-IMS	Health Data Repository- Interim Messaging Solution.
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.
HFS	Host File Server.
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 which 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.

Acronym/Term	Definition
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.
OneVA Pharmacy	Prescriptions that originated from another VistA instance other than the site dispensing the prescription.
OPAI	Outpatient Pharmacy Automated Interface.
Order	Request for medication.
Order Check	Order checks (drug-allergy/ADR interactions, drug-drug, duplicate drug, duplicate therapy, and dosing) are performed when a new medication order is placed through either the CPRS or Outpatient Pharmacy applications. They are also performed when medication orders are renewed, when Orderable Items are edited, or during the finishing process in Outpatient Pharmacy. This functionality will ensure the user is alerted to possible adverse drug reactions and will reduce the possibility of a medication error.
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).
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).
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.

Acronym/Term	Definition
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. 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.

Acronym/Term	Definition
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.
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.
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.
Titration	Titration is the process of gradually adjusting the dose of a medication until optimal results are reached.
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).
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.