

Outpatient Pharmacy (PSO)

Version 7.0

Pharmacist's User Manual



**December 2007
(Revised July 2024)**

**Department of Veterans Affairs (VA)
Office of Information and Technology (OIT)
Enterprise Program Management Office (EPMO)**

Revision History

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

Date	Patch	Description
07/2024	PSO*7*704	Renamed Sex to Birth Sex and added Self-Identified Gender after Birth Sex on the following ePharmacy screens: <ul style="list-style-type: none"> • Reject Information Screen • Reject Notification Screen • ePharmacy Patient Comment
05/2024	PSO*7*703	<ul style="list-style-type: none"> • Updated the following tables: <ul style="list-style-type: none"> ○ Reason for Service Code ○ Professional Service Code ○ Result of Service Code
04/2024	PSO*7*736	OneVA Pharmacy migration from IBM Websphere (VIERS) to Veterans Data Information Exchange (VDIF) <ul style="list-style-type: none"> • Updated Chapter 1: Introduction • Updated Chapter 11: Using the Medication Profile • Updated Chapter 23: Ordering/Processing a Prescription • Updated Acronyms and Abbreviations • Updated Glossary
02/2024	PSO*7*739	<ul style="list-style-type: none"> • Added a note for Titration
12/2023	PSO*7*700	<ul style="list-style-type: none"> • Added Inbound ePrescribing Section
11/2023	PSO*7*731	Removed all instances of Detox number (#). <ul style="list-style-type: none"> • Updated Changes to Releasing Orders function - Digitally Signed Orders Only • Updated Restrictions on Providers Placing Controlled Substances Orders • Updated Hash Counts and DEA Certification
11/2023	PSO*7*712	<ul style="list-style-type: none"> • Added a note for Parked prescription refill • Adjusted heading levels globally
11/2023	PSO*7*702	<ul style="list-style-type: none"> • Updated format for the Reject Information Screen • Updated the Professional Service Code Table
08/2023	PSO*7*728	Updated section
06/2023	PSO*7*545	Added tables containing DEA file and field information to sections: Restrictions on Providers Placing Controlled Substances Orders
04/2023	PSO*7*643	<ul style="list-style-type: none"> • Added description of The OneVA Pharmacy patch, PSO*7*643 provides Pharmacists the ability to send a OneVA prescription refill or partial fill to the Outpatient Pharmacy Automated Interface (OPAI)

Date	Patch	Description
		<p>supported external automated dispensing robot. The activity log is updated to provide an audit trail and various dispensing information for a OneVA prescription refill or partial fill.</p> <ul style="list-style-type: none"> Updated Error! Reference source not found. section screenshots and notes Updated Error! Reference source not found. section Updated section screenshots and notes Added Duplicate Drug Order Check The Duplicate Drug warning displays the following information for a local or remote outpatient medication order: <p><u>Example: Local Rx</u></p> <pre> 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 </pre> <hr/> <pre> 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 </pre> <p>Medication Route: MOUTH</p>

Date	Patch	Description
		<p style="text-align: center;">Start Date: <NOT ENTERED> CPRS Order #: XXXXX</p> <p style="text-align: center;"><u>Documented By: PSOPROVIDER,TEN on Mar 24, 2008@14:44:15</u></p> <p>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</p> <p>The finished order will have a status of non-verified</p> <p><u>When the VERIFICATION outpatient site parameter is set to NO, the clerk will not be allowed to finish the order</u></p> <p>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 system 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.</p> <p>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</p>

Date	Patch	Description
		<p>system will delete the active order and reinstate the discontinued order.</p> <ul style="list-style-type: none"> • 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. <ul style="list-style-type: none"> ○ Example: Duplicate Pending Order ○ Pending OP Orders (ROUTINE) Mar 24, 2008@13:52:04 Page: 1 of 2 ○ PSOPATIENT,FOUR ALLERGY ASSESSMENT> <NO ○ PID: REDACTED Ht(cm): 168.91 (04/11/2006) ○ DOB: REDACTED Wt(kg): 68.18 (09/06/2006)

Date	Patch	Description
		<ul style="list-style-type: none"> ○ SEX: MALE ○ CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95 ○ <ul style="list-style-type: none"> ▪ Order Checks: <ul style="list-style-type: none"> ▪ 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

Date	Patch	Description
		<ul style="list-style-type: none"> ○ 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 <p>Processing Status: Released locally on 3/24/08@08:55:32 (Window)</p> <p style="text-align: center;">Days Supply: 30</p> <p>-----</p> <p>Discontinue RX ##### ASPIRIN 325MG EC TAB? Y/N NO - Prescription was not discontinued...</p> <p><u>Pending OP Orders (ROUTINE) Mar 24, 2008@13:52:45</u> <u>Page: 1 of 2</u></p> <div style="background-color: #e0e0e0; padding: 5px;"> <p>PSOPATIENT, FOUR <NO ALLERGY ASSESSMENT> PID: REDACTED Ht (cm) : 168.91 (04/11/2006)</p> </div>

Date	Patch	Description
		<p>DOB: REDACTED Wt(kg): 68.18</p> <p>(09/06/2006)</p> <div style="background-color: #f0f0f0; padding: 5px; border: 1px solid #ccc;"> <p>SEX: MALE CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95</p> </div> <p>Order Checks:</p> <p style="padding-left: 40px;">Duplicate drug order: ASPIRIN TAB,EC 325MG TAKE ONE TABLET BY MOUTH EVERY</p> <p style="padding-left: 40px;">MORNING [ACTIVE]</p> <p style="padding-left: 40px;">Overriding Provider: PSOPROVIDER,TEN</p> <p style="padding-left: 40px;">Overriding Reason: TESTING DUPLICATE THERAPY FUNCTIONALITY</p> <p>* (1) Orderable Item: ASPIRIN TAB,EC</p> <p>(2) Drug: ASPIRIN 325MG EC TAB <DIN></p> <p style="padding-left: 40px;">NDC: #####-####-##</p> <p>(3) *Dosage: 325 (MG)</p> <p style="padding-left: 40px;">Verb: TAKE</p> <p style="padding-left: 40px;">Dispense Units: 1</p> <p style="padding-left: 40px;">NOUN: TABLET</p> <p style="padding-left: 40px;">*Route: ORAL</p> <p style="padding-left: 40px;">*Schedule: QAM</p> <p>+ Enter ?? for more actions</p> <p>AC Accept ED Edit DC Discontinue</p> <p>Select Item(s): Next Screen//</p> <p>.</p> <p>OR</p>

Date	Patch	Description
		<p>Discontinue RX ##### ASPIRIN 325MG EC TAB? Y/N <u>YES</u></p> <p>RX ##### ASPIRIN 325MG EC TAB will be discontinued after the acceptance of the new order.</p> <p>Rx # ##### 03/24/08</p> <p>PSOPATIENT,FOUR #30</p> <p>TAKE ONE TABLET BY MOUTH EVERY MORNING</p> <p>ASPIRIN 325MG EC TAB</p> <p>PSOPROVIDER,TEN PSOPHARMACIST,ONE</p> <p># of Refills: 11</p> <p>SC Percent: 100%</p> <p>Disabilities: NONE STATED</p> <p>Was treatment for a Service Connected condition? YES// YES</p> <p>Are you sure you want to Accept this Order? NO// YES</p> <p>WAS THE PATIENT COUNSELED: NO// NO</p> <p>Do you want to enter a Progress Note? No// NO</p>

Date	Patch	Description															
		<p>-Duplicate Drug Rx ##### ASPIRIN 325MG EC TAB has been discontinued...</p> <p>Press Return to Continue:</p> <p>Example: New Order Entry Backdoor – Duplicate Drug</p> <p>Eligibility: SERVICE CONNECTED 50% to 100% SC%: 100</p> <p>RX PATIENT STATUS: OPT NSC//</p> <p>DRUG: aspirin</p> <p>Lookup: DRUG GENERIC NAME</p> <table border="0"> <tr> <td>1</td> <td>ASPIRIN 325MG EC TAB</td> <td>CN103</td> </tr> <tr> <td>2</td> <td>ASPIRIN 325MG SUPPOSITORY</td> <td>CN103</td> </tr> <tr> <td>3</td> <td>ASPIRIN 325MG TAB</td> <td>CN103</td> </tr> <tr> <td>4</td> <td>ASPIRIN 650MG/BUTALBITAL 50MG TAB</td> <td>CN103</td> </tr> <tr> <td>5</td> <td>ASPIRIN 81MG EC TAB</td> <td>CN103</td> </tr> </table> <p>Press <RETURN> to see more, '^' to exit this list, '^'^' to exit all lists, OR</p> <p>CHOOSE 1-5: 1 ASPIRIN 325MG EC TAB CN103</p> <p>Restriction/Guideline(s) exist. Display? : (N/D): No// NO</p> <p>-----</p> <p>Duplicate Drug in Local Rx:</p> <p>RX #: #####</p> <p>Drug: ASPIRIN 325MG EC TAB</p>	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
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															

Date	Patch	Description
		<p style="text-align: center;">SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING</p> <p style="text-align: center;">QTY: 30 Refills remaining: 11</p> <p style="text-align: center;">Provider: PSOPROVIDER,TEN Issued: 03/24/08</p> <hr/> <p style="text-align: center;">Status: Active Last filled on: 03/24/08</p> <div style="background-color: #e0e0e0; padding: 5px;"> <p>Processing Status: Released locally on 3/24/08@08:55:32 (Window) Days Supply: 30</p> <p>-----</p> <p>Discontinue RX #### ASPIRIN 325MG EC TAB? Y/N <u>NO</u> -Prescription was not discontinued...</p> <p>RX DELETED</p> <p style="text-align: center;">OR</p> <p>Discontinue RX #### ASPIRIN 325MG EC TAB? Y/N <u>YES</u></p> <p>RX #### ASPIRIN 325MG EC TAB will be discontinued after the acceptance of the new order.</p> <p>Now doing remote order checks. Please wait...</p> <p>Now doing allergy checks. Please wait...</p> <p>Now processing Clinical Reminder Order Checks. Please wait ...</p> <p>Now Processing Enhanced Order Checks! Please wait...</p> <p>VERB: TAKE</p> <p>There are 2 Available Dosage(s):</p> <p style="padding-left: 20px;">1. 325MG</p> <p style="padding-left: 20px;">2. 650MG</p> <p>Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list: 1 325MG</p> <p>You entered 325MG is this correct? Yes// YES</p> <p>VERB: TAKE</p> <p>DISPENSE UNITS PER DOSE(TABLET): 1// 1</p> <p>Dosage Ordered: 325MG</p> <p>NOUN: TABLET</p> <p>ROUTE: PO// ORAL PO MOUTH</p> <p>Schedule: BID</p> <p>Now searching ADMINISTRATION SCHEDULE (#51.1) file...</p> <p style="padding-left: 20px;">BID BID TWICE A DAY</p> <p style="padding-left: 40px;">...OK? Yes// (Yes)</p> <p style="padding-left: 20px;">(TWICE A DAY)</p> <p>LIMITED DURATION (IN DAYS, HOURS OR MINUTES):</p> <p>CONJUNCTION:</p> <p>PATIENT INSTRUCTIONS:</p> <p style="padding-left: 20px;">(TAKE ONE TABLET BY MOUTH TWICE A DAY)</p> <p>DAYS SUPPLY: (1-90): 30//</p> </div>

Date	Patch	Description
		<p> 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 </p>

Date	Patch	Description
		<p>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</p>


Date	Patch	Description
		<pre> ----- 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 </pre>


Date	Patch	Description
		<p>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</p> <p>ISSUE LAST REF DAY # RX # DRUG QTY ST DATE FILL REM SUP</p> <p>-----ACTIVE-----</p> <p>1 #### ASPIRIN 81MG EC TAB 30 A 03- 24 03-24 11 30</p> <p>-----NON-VERIFIED-----</p> <p>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</p> <p>-----</p> <p>Duplicate Drug in a Non-VA Med Order for</p> <p>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</p> <p>-----</p> <p>Press Return to Continue:</p> <p>VERB: TAKE There are 2 Available Dosage(s): 1. 300MG 2. 600MG</p> <p>Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list: 1 300MG</p> <p>You entered 300MG is this correct? Yes// Example: Duplicate Drug with Pending Order Another New Order for PSOPATIENT,FOUR? YES//</p> <p>Eligibility: SERVICE CONNECTED 50% to 100% SC%: 100 RX PATIENT STATUS: OPT NSC// DRUG: ALLOPURINOL Lookup: GENERIC NAME 1 ALLOPURINOL 100MG TAB #####</p>



Date	Patch	Description
		<pre> 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 </pre>

Date	Patch	Description
		<p>TAKE ONE TABLET BY MOUTH EVERY MORNING</p> <p>ALLOPURINOL 300MG TAB PSOPROVIDER, TEN PSOPHARMACIST, ONE # of Refills: 11</p> <p>SC Percent: 100% Disabilities: NONE STATED</p> <p>Was treatment for a Service Connected condition? y YES Is this correct? YES//</p> <p>- Duplicate Drug Pending Order for ALLOPURINOL 300MG has been discontinued... Example: Copying an Existing Order RN Renew Select Action: Next Screen// CO CO</p> <p>OP Medications (ACTIVE) Mar 12, 2008@09:15:48 Page: 1 of 2 PSOPATIENT, TWO <A></p> <p>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</p> <p>Rx #: ##### (1) *Orderable Item: AMLODIPINE/ATORVASTATIN TAB (2) Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB NDC: #####-####-##</p> <hr/> <p style="text-align: center;"><u>Verb: TAKE</u></p> <hr/> <p style="text-align: center;"><u>(3) *Dosage: ONE TABLET</u></p> <hr/> <p style="text-align: center;"><u>*Route: ORAL</u></p> <hr/> <p style="text-align: center;"><u>*Schedule: QAM</u></p> <p>(4) Pat Instructions: SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING + Enter ?? for more actions</p> <p>AC Accept ED Edit</p> <p>New OP Order (COPY) Mar 12, 2008@09:15:48 Page: 1 of 2 PSOPATIENT, TWO <A></p> <p>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</p> <p>Orderable Item: AMLODIPINE/ATORVASTATIN TAB (1) Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB (2) Patient Status: OPT NSC</p>

Date	Patch	Description
		<pre> (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 </pre>
		<p style="text-align: center;">Status: ACTIVE Last filled on: 03/12/07</p>
		<p style="text-align: center;"><u>Processing Status: Released locally on 3/12/07@08:55:32</u> <u>(Window)</u></p>
		<pre> 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 </pre>

Date	Patch	Description
		<p>Was treatment for Service Connected condition? NO//</p> <p>Is this correct? YES// ...</p> <p>Duplicate Drug Rx ##### AMLODIPINE 5MG/ATORVASTATIN 10MG TAB has been discontinued...</p> <p>The CPRS Auto Refill field can be updated using the <i>Pharmacy Systems Parameter Edit</i> [PSS MGR] option. This parameter works in conjunction with the PSOATRUF security key.</p> <p>When the CPRS Auto Refill field is set to YES and the PSOATRUF 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 PSOATRUF security key is not assigned, the manual refill process is required.</p> <p>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 PSOATRUF 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.</p> <p>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 <i>Patient Prescription Processing, Complete Orders from OERR</i>, and <i>Action Profile (132 COLUMN PRINTOUT)</i> 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.</p> <p>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.</p>  <p>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..."</p> <p>The following will not be included in order checks (after patch PSO*7*243):</p> <ul style="list-style-type: none"> 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. <p><u>Remote order checking added (after patch PSO*7*243):</u></p>

Date	Patch	Description
		<p><u>For drug class when orders are placed for locally defined drugs.</u></p> <p>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.</p>  <p>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.</p> <p>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...</p> <p>Veteran Prescription ##### successfully submitted to ECME for claim generation.</p> <p>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):</p> <pre> : : : REF DAY ISSUE LAST # 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 : : : </pre>

Date	Patch	Description
		 <p>Note: A prescription can be unmarked as Titration/Maintenance by invoking the same TM action on an already marked prescription.</p>  <p>Note: Marking a controlled substance Rx as a Titration prescription will prevent refills and renewals. You will not be able to convert the Rx to maintenance prescription by the TR Hidden Action.</p> <p>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:</p> <ul style="list-style-type: none"> - 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) <p>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):</p> <pre style="font-family: monospace;"> : : REF DAY ISSUE LAST # 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 : : </pre> <ul style="list-style-type: none"> • OneVA Refill/Partial Fill Activity Log Entries section • Updated OneVA Pharmacy Prescription Report • Changed Acronyms and Abbreviations from Appendix C to Appendix A • Added Outpatient Pharmacy Automated Interface (OPAI) to Acronyms and Abbreviations

Date	Patch	Description
11/2022	PSO*7*679	Modified description of the PSO VCC REFILL menu option to contain information on additional refill source in Chapter 23. Added VSE-CS abbreviation to the Acronyms and Abbreviations Table
09/2022	PSO*7*441	Added two rows to table “Hidden Actions”: Park (PK) , Unpark(UPK) Updated section Entering a New Order with “ Example: Entering a New Order with Indication ” and accompanying description Added new section: Update an Indication on an Active Order , including description and one example Added new section: Park and UnPark a Prescription , including description and six examples Added new section: Finishing a Pending Order with Indications , including description and one example Added Glossary item to table: Active/Parked
06/2022	PSO*7*685	<ul style="list-style-type: none"> 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 <p>REDACTED</p>
05/2022	PSO*7*647	<ul style="list-style-type: none"> Updated the Professional Service Code Table with a new value. Updated Title Page date and footers MCCF EDI TAS ePharmacy Development Team
02/2022	PSO*7*642	Added description of the PSO VCC REFILL menu option in Chapter 23. Added VCC abbreviation to the Acronyms and Abbreviations Table .
01/2022	PSO*7*562	Added Reject Code 943 to DUR Rejects (pp. 7 , 45 , 130 , 251)
12/2021	PSO*7*653	<ul style="list-style-type: none"> 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 : <ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> • 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	<p>Updated copay activity log for Fixed Medication Copayment Tiers (FMCT)</p> <p>Updated Title Page to current OI&T Standards</p> <p>Updated Revision History</p> <p>Updated Table of Contents</p> <p>Updated footer date to March 2014 per business request.</p> <p>REDACTED</p>
08/2016	PSO*7*448	<p>Updated Title Page to current OI&T Standards</p> <p>Updated Revision History</p> <p>Updated Table of Contents</p> <p>Updated Using the Copy Action section</p> <p>Updated Holding and Unholding a Prescription section</p> <p>Updated examples to read "Veteran Prescription"</p> <p>Updated [PSO LM BACKDOOR ORDERS]</p> <p>Updated [BPS RPT VIEW ECME RX]</p> <p>Updated [PSO EPHARMACY MENU]</p> <p>Updated [PSO IGNORED REJECTS REPORT]</p> <p>Updated [POS REJECTS VIEW/PROCESS]</p>
06/2016	PSO*7*444	<p>Added Ex. 5 re Medication Profile list item with Bad Address Indicator</p> <p>Max Day Supply has been added and now Days Supply can be entered from 1-365 for a drug.</p> <p>Added table comparing MAXIMUM DAYS SUPPLY values in files 50.68 and 50. Displaying the effect on the days supply. REDACTED</p>
01/2016	PSO*7*427	<p>Updated cover page.</p> <p>pg 223-224: added DC 9Discontinued RX0 hidden action; added available actions to Resolving open</p> <p>Rejects screen</p> <p>Pg 226: added screenshot of Resolve Open Rejects Responded/updated NDC numbers to match sample prescriptions as well as other customer comments throughout.</p> <p>Updated View Prescription, Edit Prescription, Screens, Medication Profile, Open/Unresolved Bulletin,</p> <p>View/Process Third Party Reject, and Third Party</p> <p>Rejects Worklist in accordance with new functionality associated with PSO*7*427.</p> <p>REDACTED</p>

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 <i>Dosing Order Check User Manual</i> 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	<p>Removed incorrect listing of View Additional Reject Info (ARI) action</p> <p>Added signature alerts</p> <p>Updated wording for ¾ Days Supply Hold</p> <p>Added rounding functionality for ¾ Days Supply Hold</p> <p>Added new actions Submit Multiple Actions (SMA) and Suspense Date Calculation (SMA)</p> <p>Added new option View ePharmacy Rx (VER)</p> <p>Corrected earlier formatting errors</p> <p>Corrected typos</p> <p>Updated Service Code values</p> <p>Updated changed security key names</p> <p>Added TRICARE and CHAMPVA examples of rejects on a new order</p> <p>Updated name of TRICARE CHAMPVA Bypass/Override Report</p> <p>Updated screen shots related to patch changes</p> <p>Updated wording based on reviewer feedback</p> <p>Added CHAMPVA functionality</p> <p>Added separate section to list changes to security keys</p> <p>Added CHAMPVA to Glossary</p> <p>REDACTED</p>
10/2011	PSO*7*359	<p>Added new action View Additional Reject Info (ARI)</p> <p>Expanded ECME Numbers to twelve digits</p> <p>Updated screen shots related to patch changes</p> <p>Added TRICARE to Glossary</p> <p>Corrected typos</p> <p>Corrected formatting errors from 11/10 reissue</p> <p>REDACTED</p>
09/2011	PSO*7*382	<p>Added information regarding the new [PSO HRC PROFILE/REFILL] option.</p> <p>REDACTED</p>
04/2011	PSO*7*343	<p>To add functionality to Outpatient Pharmacy for the On-Demand Displaying of FDA Medication Guides.</p> <p>Display FDA Medication Guide [MG] added to Other OP Actions [OTH]</p> <p>Updates to Index</p> <p>REDACTED</p>

Date	Patch	Description
04/2011	PSO*7*251	<p>The following changes are included in this patch:</p> <ul style="list-style-type: none"> - 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 <p>REDACTED</p>
11/2010	PSO*7*358	<p>Added information regarding TRICARE Active Duty Bypass/Override details</p> <p>REDACTED</p>

Preface

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

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Chapter 1: Introduction

The Outpatient Pharmacy (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 delivered the ‘ONEVA PHARMACY FLAG (#101)’ in the 'off' state. When this flag is in the 'off' state, the National HL7 HealthConnect 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.

```





The OneVA Pharmacy patch, PSO*7*643 provides Pharmacists the ability to send a OneVA prescription refill or partial fill to the Outpatient Pharmacy Automated Interface (OPAI) supported external automated dispensing robot. The activity log is updated to provide an audit trail and various dispensing information for a OneVA prescription refill or partial fill.

The OneVA Pharmacy patch PSO*7*736 replaces the query to the Health Data Repository/Clinical Data Service (HDR/CDS) repository with a query to the Veterans Data Information Exchange (VDIF). This patch includes modifications to the "PROVIDER HOLD" status abbreviation from "PH" to "HP" and also adds "DISCONTINUED BY PROVIDER", "DISCONTINUED (EDIT)", and "NON-VERIFIED" statuses for display on the patient's medication profile for remote prescriptions.

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

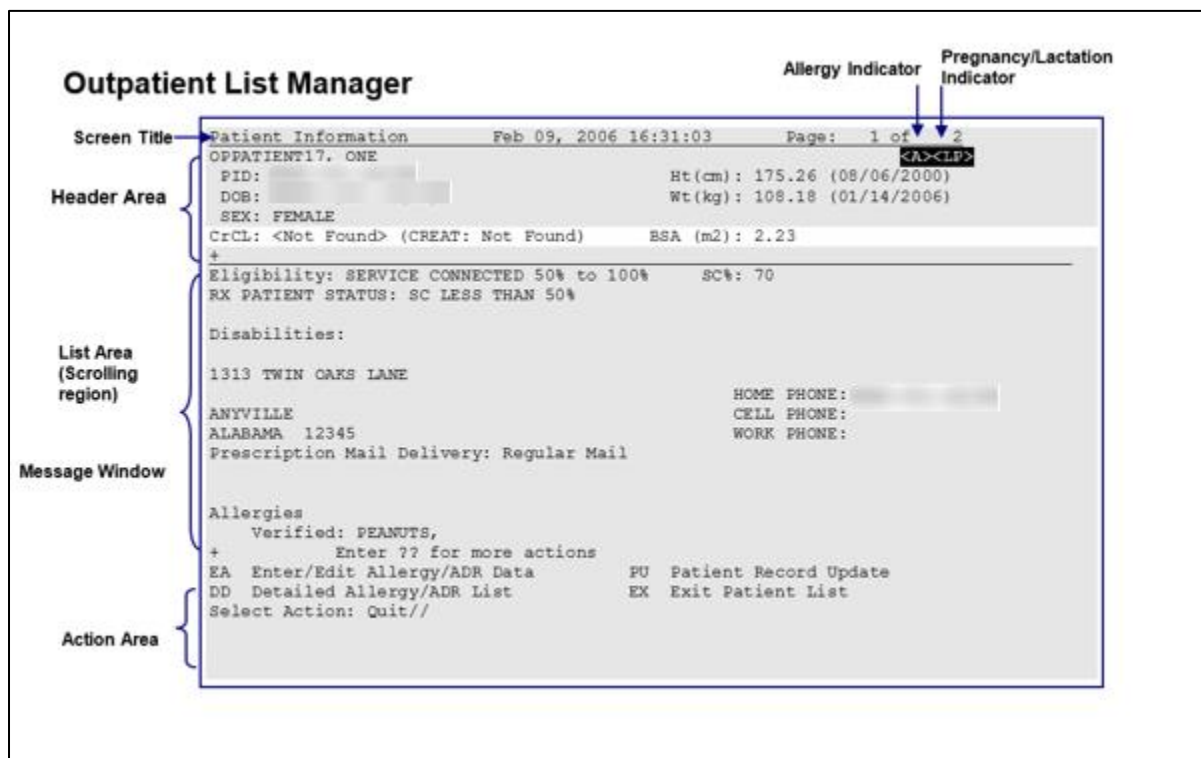


Table 2: Outpatient List Manager

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

Medication Profile May 22, 2006 10:44:56 Page: 1 of 1

OPPATIENT16,ONE

PID: [REDACTED] Ht (cm): 177.80 (02/08/2004)

DOB: [REDACTED] Wt (kg): 90.45 (02/08/2004)

SEX: MALE Non-VA Meds on File

CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 2.11

Last entry on 01/13/01

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

Enter ?? for more actions

PU Patient Record Update NO New Order

PI Patient Information SO Select Order

Select Action: Quit//

All orders are sub-grouped by like statuses and then listed alphabetically within the sub-group.

Order Status:

The current status of the order. These statuses include:

New Status

- 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
- PK Park
- UPK Unpark



Park and Unpark only available if Park is enabled at the System or Division level.

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, which have not been finished by Outpatient Pharmacy.
Non-VA Meds:	Any over the counter (OTC) medications, herbal supplements, medications.
Orders:	Prescribed by providers outside the VA, and medications prescribed by the VA, but purchased by the patient at an outside pharmacy are displayed here. Non-VA Meds orders cannot be placed or updated in Outpatient Pharmacy. The user can input information about a patient's use of Non-VA Meds only through CPRS. However, the user can use either CPRS or Outpatient Pharmacy menu options to view Non-VA Meds data in a patient's medical records.
Third Party Rejects	Any prescriptions that are rejected by third-party payers because of Refill Too Soon (code 79) or Drug Utilization Review (DUR - code 88 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
                                QTY ST  DATE  FILL REM SUP
#  RX #          DRUG
-----REFILL TOO SOON/DUR REJECTS (Third Party)-----
1 #####          DIGOXIN (LANOXIN) 0.05MG CAP          90 A> 02-16 02-16 3 90
2 #####          OXYBUTYNYNIN 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]]
Park [PK]	Places a prescription that is part of the patient's current expected medication regimen on hold until the filled is requested
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.
Unpark [UPK]	Removes a prescription from hold and fills the prescription.
Verify [VF]	Allows the pharmacist to verify an order a pharmacy technician has entered.

Action	Description
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.

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----ACTIVE-----								
1	XXXXXXXXXX	AMOXAPINE 50MG TAB	30	S	09-26	09-26	1	30
2	XXXXXXXXXX	AMOXICILLIN 250MG CAP	30	A	08-18	08-18	11	30
3	XXXXXXXXXX	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 <i>Update Patient Record</i> menu option. If implementing Other Language Modifications, either can be used to set a patient's other language preference.
New Order [NO]	Allows new orders to be entered for the patient.
Exit Patient List [EX]	Exit patient's Patient Information screen so that a new patient can be selected.
Refill Rx from Another VA Pharmacy (RF)	<p>OneVA Pharmacy (patch PSO*7*454) introduced the RF action item on the new 'REMOTE OP Medications' profile. The RF action item allows the Pharmacist to refill a prescription order that originated from another VA Pharmacy location.</p>  <p>Note: For additional information regarding OneVA Pharmacy RF processing, please see Appendix A, OneVA Pharmacy User Manual.</p>
Partial from Another VA Pharmacy (PR)	<p>OneVA Pharmacy (patch PSO*7*454) introduced the PR action item on the new 'REMOTE OP Medications' profile. The PR action item allows the Pharmacist to partial a prescription order that originated from another VA Pharmacy location.</p>  <p>Note: For additional information regarding OneVA Pharmacy PR processing, please see Appendix A, OneVA Pharmacy User Manual.</p>
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 patient's name or number from the monitor.

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

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

Enter New Patient

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.

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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 OneVA Pharmacy, the Medication Profile displays all active medications from other facilities. The medications are retrieved from VDIF 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 the [Patient Demographics and Clinical Alerts](#) section of this document 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 includes 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): _____

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF	DAY 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		POLIC 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)-----								
GINKGO EXT 1 TAB ONCE A DAY BY MOUTH					Date Documented: 01/13/01			
Enter ?? for more actions								
PU	Patient Record Update			NO	New Order			
PI	Patient Information			SO	Select Order			
Select Action: Quit//								



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

OneVA Pharmacy and Medication Profile

The OneVA Pharmacy displays the Medication Profile with all active medications from other facilities. The medications are retrieved from VDIF 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 the *OneVA Pharmacy User Manual* located in the [Outpatient](#) section of the [VDL](#).

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): _____		
#	RX #	DRUG	ISSUE LAST REF DAY 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): _____		
#	RX #	DRUG	ISSUE LAST REF DAY QTY ST DATE FILL REM SUP
+ Enter ?? for more actions			
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): _____		
#	RX #	DRUG	ISSUE LAST REF DAY QTY ST DATE FILL REM SUP
+ Enter ?? for more actions			
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# xxxxxxxx. 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 # xxxxxxxx. 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 # xxxxxxxx.

- 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 IEN.

Missing VA Product IEN. 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# #####. 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					
# Rx#	DRUG [^]	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY 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
ANYTOWN                      HOME PHONE:
NEW YORK #####-####         CELL PHONE:
Prescription Mail Delivery: Regular Mail WORK PHONE:
Cannot use safety caps.

```

```

Allergies
  Verified: PENICILLIN,

Adverse Reactions

+      Enter ?? for more actions
DD Detailed Allergy/ADR List      EX Exit Patient List
Select Action: Next Screen//

```

Example 4: Medication Profile with SIG expanded

Enter SIG at the “Select” prompt to show/hide the Rx SIG.

```

Patient Medication Profile      Jun 04, 2007@19:22:16      Page: 1 of 1
OPPATIENT,ONE                  <A>
  PID: 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

```

# Rx#	DRUG [^]	QTY	ST	DATE	ISSUE	LAST FILL	REF REM	DAY SUP
1	ALBUTEROL INHALER SIG: TAKE 1 PUFF BY MOUTH EVERY DAY FOR 10 DAYS	1	A	04-21-07	04-21-07	04-21-07	11	7
2	ALPRAZOLAM 0.25MG TABS SIG: TAKE ONE CAPSULE BY MOUTH EVERY MORNING	30	DC	06-14-07	06-14-07	06-14-07	11	30
3	AMITRIPTYLINE 10MG TAB SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING	60	A	04-21-07	04-21-07	04-21-07	11	30
4	CABERGOLINE 0.5MG TAB SIG: TAKE 2 TABLET(S) BY MOUTH EVERY 12 HOURS	7	E	05-18-05	05-18-05	05-18-05	6	7
5	DESIPRAMINE 25MG SIG: TAKE 2 TABLET(S) BY MOUTH EVERY 12 HOURS	90	S	02-00-07	02-11-07	02-11-07	11	90
6	DIGOXIN 0.05MG/ML ELIX (60CC) SIG: INJECT 1000IM EVERY DAY	30	A	02-01-07	02-20-07	02-20-07	10	90
7	METAPROTERENOL 5% SOLUTION 10ML SIG: INJECT 1000 IM EVERY DAY	15	DC	06-02-07	06-03-07	06-03-07	11	15
8	METAPROTERENOL 5% SOLUTION 10ML SIG: INJECT 1000 IM EVERY DAY	10	DC	06-02-07	06-03-07	06-03-07	11	10
9	METAPROTERENOL 5% SOLUTION 10ML SIG: INJECT 1000 IM EVERY DAY	15	A>	06-02-07	06-00-07	06-00-07	11	15
10	NICOTINE 10MG/ML SOLN NASAL SPRAY SIG: APPLY 1 PATCH ON SHOULDER DAILY	1	A>	06-02-07	06-00-07	06-00-07	11	15
11	SIMVASTATIN 20MG TAB SIG: TAKE 2 TABLET(S) PO FOUR TIMES A DAY	5	DC	05-28-05	04-27-07	04-27-07	3	30
12	SODIUM CHLORIDE 0.9% NASAL SOLN(O) SIG: TAKE 2 PUFFS EACH NOSTRIL EVERY 8 HOURS	1	A	05-10-07	05-10-07	05-10-07	11	30
13	VALSARTAN 80MG TAB SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING	5	S	06-28-07	05-31-07	05-31-07	11	30
PENDING (2 order)								
14	ALBUTEROL INHALER SIG: 1 PUFF BY MOUTH EVERY DAY FOR 5 DAYS		RF	06-03-07			2	30
15	AMITRIPTYLINE 10MG TAB SIG: TAKE 2 TABLET(S) PO FOUR TIMES A DAY		RN	06-02-07			3	10
Non-VA MEDS (Not dispensed by VA) (1 order)								
16	TAMOXIFEN CITRATE 10MG TABS SIG: TAKE 2 TABLET(S) PO FOUR TIMES A DAY							
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 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.

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF	DAY 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):

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

#	Rx#	DRUG [^]	QTY	ST	ISSUE DATE	LAST FILL	REF	DAY 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// RF Refill								
Barcode Refill? NO//								
Select Orders by number: (1-16): ?								

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 # #####, 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 (TIU) 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](#).

- 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
- To accept the default value, type “Both” or press Return.
- 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.

- To accept the default value, type “1-5” or press Return.
- 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

Causative Agent Lookup

Enter causative agent for Allergy or Adverse Drug Reaction:

(Enter the FIRST FEW LETTERS of the causative agent (minimum of 3) to allow for a comprehensive search. Only one reactant may be entered at a time)

Search for:
LIDOCA Search

Select one of the following items No Known Allergies

[-] 112 matches found.

- VA Allergies File (no matches)
- National Drug File - Generic Drug Name (8)**
 - LIDOCAINE**
 - LIDOCAINE/SODIUM CHLORIDE
 - LIDOCAINE/POVIDONE IODINE
 - LIDOCAINE/PRILOCAINE
 - LIDOCAINE/NEOMYCIN/POLYMYXIN
 - LIDOCAINE/TETRACAINE
 - LIDOCAINE/MENTHOL
 - LIDOCAINE/MENTHOL/METHYL SALICYLATE
- National Drug file - Trade Name (103)
- Local Drug File (no matches)
- Drug Ingredients File (1)
- VA Drug Class File (no matches)
- Add new free-text allergy (1)

OK Cancel

Select from the matching entries on the list, or search again.

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
    
```


REACTANT	VER.	MECH.	OBS/ HIST	TYPE
PENICILLIN Reactions: RASH	NO	UNKNOWN	OBS	DRUG
ASPIRIN Reactions: ANXIETY	YES	PHARM	OBS	DRUG FOOD
CHOCOLATE (FLAVOR) Reactions: ANXIETY	AUTO	UNKNOWN	HIST	DRUG FOOD

Enter Causative Agent: GENTAMICIN

Checking existing PATIENT ALLERGIES (#120.8) file for matches..

Now checking GMR ALLERGIES (#120.82) file for matches..

Now checking the National Drug File - Generic Names (#50.6)

1 GENTAMICIN
2 GENTAMICIN/PREDNISOLONE
3 GENTAMICIN/SODIUM CHLORIDE
CHOOSE 1-3: 1 GENTAMICIN
GENTAMICIN OK? Yes// (Yes)

(O)bserved or (H)istorical Allergy/Adverse Reaction: O OBSERVED
Select date reaction was OBSERVED (Time Optional): T-15 (JAN 05, 2016) JAN 05, 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, 2016)

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

REACTANT                VER.    MECH.    OBS/
-----                ----    ----    ----
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/SYMPOM
  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.



Note: 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.

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- 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.
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- 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: OPPOVIDER, ONE
RECOMMENDATION: NO CHANGE

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

Would you like to edit this intervention ? N// 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 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 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, McGoan DC, Pluth JR, Puga FJ, Wallace RB, Danielson GK, Orszulak TA, Piehler JM, Schaff HV. Trial of combined warfarin plus dipyridamole or aspirin therapy in prosthetic heart valve replacement: danger of aspirin compared with dipyridamole. Am J Cardiol 1983 May 15;51(9):1537-41.

12. Chow WH, Cheung KL, Ling HM, See T. Potentiation of warfarin anticoagulation by topical methylsalicylate ointment. J R Soc Med 1989 Aug;82(8):501-2.

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Do you want to Intervene? Y// NO

Press Return to Continue...

VERB: TAKE

There are 2 Available Dosage(s):

- 1. 5MG
- 2. 10MG

.
.
.

OR

Do you want to Intervene? Y// ES

Press Return to Continue...

Now creating Pharmacy Intervention
for WARFARIN 5MG TAB

PROVIDER: OP PROVIDER, ONE OPP 119
RECOMMENDATION: NO CHANGE

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

Would you like to edit this intervention ? N// 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// YES

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...

```



```

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: OP PROVIDER, ONE OPP 119
RECOMMENDATION: NO CHANGE

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

Would you like to edit this intervention ? N// 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: OPPOVIDER, 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:   OP PROVIDER, ONE      OPP      119
RECOMMENDATION: NO CHANGE

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

Would you like to edit this intervention ? N// 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 #####

          RX #          DRUG          ISSUE  LAST REF DAY
          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

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

-----
RX # DRUG QTY ST ISSUE LAST REF DAY
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): _____

#  RX #          DRUG          QTY  ST  ISSUE  LAST REF DAY
                                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:    OPPOVIDER, 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
PID: REDACTED          Ht (cm) : _____ (_____)
DOB: REDACTED          Wt (kg) : _____ (_____)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)      BSA (m2) : _____

#  RX #      DRUG      QTY ST  ISSUE  LAST REF DAY
                                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
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 EFFECTS

Display Professional Interaction Monograph? No// Yes

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

Professional Monograph
Drug Interaction with WARFARIN and IBUPROFEN

MONOGRAPH TITLE: Anticoagulants/NSAIDs

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

MECHANISM OF ACTION: The exact mechanism is unknown. Some NSAIDs may displace anticoagulants from plasma protein binding sites. NSAIDs also have the potential to produce gastrointestinal ulceration and bleeding. Some NSAIDs may impair platelet function and prolong bleeding times.

CLINICAL EFFECTS: In some patients, NSAIDs have been associated with an increase in the hypoprothrombinemic effect to anticoagulants.

PREDISPOSING FACTORS: None determined.

PATIENT MANAGEMENT: If concurrent therapy with anticoagulants and NSAIDs is warranted, patients should be monitored for an increased hypoprothrombinemic response when NSAIDs are added to the patient's drug regimen. In addition to routine monitoring of INR values, the patient should be observed for signs of increased effect, including bruising or bleeding. The time of highest risk for a coumarin-type drug interaction is when the precipitant drug is initiated or discontinued. Consult with the prescriber before initiating, altering the dose of, or discontinuing either drug.

DISCUSSION: The effects of NSAIDs on the hypoprothrombinemic response to anticoagulants appears to vary between patients as well as with different NSAIDs. Documentation is frequently contradictory - while studies have shown several NSAIDs to have no effect on the pharmacokinetics of warfarin, case reports have documented increased effects with and without bleeding when these same NSAIDs were administered concurrently with warfarin. While celecoxib has been shown not to affect platelet aggregation or bleeding times and had no effects on the anticoagulant effect of warfarin in healthy subjects, increased prothrombin times and bleeding episodes, some of which were fatal, have been reported, predominantly in the elderly, in patients receiving concurrent therapy with celecoxib and warfarin. Rofecoxib has been shown to increase prothrombin times in subjects who received concurrent warfarin

therapy. If concurrent therapy with anticoagulants and NSAIDs is warranted, it would be prudent to monitor patients closely for increased anticoagulant effects.

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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: XXXXXX (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
          QTY ST  DATE  FILL REM SUP
-----
1 #####          IBUPROFEN 600MG TAB          270 A  03-03 03-04  3  90
-----
2 #####          WARFARIN 5MG TAB          90 N  03-04 03-04  3  90
-----
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): _____

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST REF DATE	FILL	REM	DAY 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: WARFARIN
  Lookup: GENERIC NAME
    1  WARFARIN (COUMADIN) NA 2.5MG TAB          BL110
    2  WARFARIN 5MG TAB                          BL110
CHOOSE 1-2: 1  WARFARIN (COUMADIN) NA 2.5MG TAB          BL110

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

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

Now Processing Enhanced Order Checks! Please Wait...

-----

***Critical*** Drug Interaction with Prospective Drug:
WARFARIN 2.5MG TAB and

Local RX#: #####
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: OPPOVIDER, ONE
RECOMMENDATION: NO CHANGE

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

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

.
. .
.

Now Processing Enhanced Order Checks! Please wait...

Critical Drug Interaction with Prospective Drug:
WARFARIN (COUMADIN) 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 (COUMADIN) 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 (COUMADIN) 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 (COUMADIN) 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 (COUMADIN) NA 5MG TAB: P// ROCESS

Enter your Current Signature Code: SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for WARFARIN (COUMADIN) NA 5MG TAB

PROVIDER:
RECOMMENDATION: NO CHANGE

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

Would you like to edit this intervention ? N// 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
ANTAGONISTS (H2 ANTAGONISTS)
=====
```

If there is more than one remote, local, pending or Non-VA med order involved in the therapeutic duplication, the order details will be displayed one after the other.

If the same drugs are involved in multiple therapeutic duplications, a single therapeutic duplication warning will be displayed and multiple therapeutic classes will be listed.

If the CANCEL DRUG IN SAME CLASS outpatient site parameter is set to 'No', no discontinue action prompt will be presented.

After all the therapeutic duplication warnings are displayed and if the CANCEL DRUG IN SAME CLASS outpatient site parameter is set to 'Yes', the user will be asked if they want to discontinue any of the orders.

See Examples:

```
Discontinue RX ##### 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 Yes

  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 Yes

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 #30
TAKE ONE TABLET BY MOUTH EVERY EVENING

SIMVASTATIN 20MG TAB
PSOPROVIDER,ONE PSOPHARMACIST,ONE
of Refills: 6

This Rx has been flagged by the provider as: NO COPAY

```

Was treatment related to Agent Orange exposure? YES//

Are you sure you want to Accept this Order? NO// YES

METHOD OF PICK-UP:
WAS THE PATIENT COUNSELED: NO// NO

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

-Duplicate Therapy RX ##### 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 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//

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...

RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----	-----	-----	-----	-----	-----	-----	-----
#####	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, 2008 Printed: 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
ANTAGONISTS (H2 ANTAGONISTS)
=====
VERB: TAKE
There are 2 Available Dosage(s):
1. 150MG
2. 300MG

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

```

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 from 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 #  : XXXXXXXX
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 # 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 than the current prescription NDC.
- NDC CODE field values in the SYNONYM sub-file in the DRUG file, if valid and different than the current prescription NDC.

If the NDC dispensed is not on the list to select, the user must contact the ADPAC or other designated person to add the NDC in a synonym multiple for that drug in 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 the *OneVA Pharmacy User Manual* located on the [VDL](#).

OneVA Pharmacy provides messaging to query VDIF for prescriptions from other VA Pharmacy locations and displays them in the Medications Profile view.

The 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 query VDIF, 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 VDIF will not execute if the patient has only one entry in the 'TREATING FACILITY LIST file (#391.91)'.



The system identifies and queries VDIF for all the prescriptions that are active, suspended, on hold, expired (within 120 days), or discontinued (within 120 days).



If the query connection to VDIF 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."

The OneVA Pharmacy patch PSO*7*643 introduces the sending of OneVA Rx refills/partial fills to the OPAI to be filled by an external automated dispensing robot when a OneVA Rx refill or partial is processed. The user is not prompted with whether or

not to send the refill/partial fill to the OPAI. Whether or not the OneVA Rx refill/partial fill is sent to the OPAI is determined by the EXTERNAL INTERFACE parameter setting in the OUTPATIENT SITE File (#59). Additional parameters in the OUTPATIENT SITE File (#59) and DRUG File (#50) determine which external automated dispensing robot the refill/partial fill is routed to.



The initial ability to send OneVA refill/partial fill to the OPAI excludes the release functionality regardless of whether or not the parameter 'FILE RELEASE DATE/TIME' in the OUTPATIENT SITE File (#59) is set to 'Yes'. Specific release functions for a dispensing site versus a host site will be provided in a future release.

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 (000-00-0000)
      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
                                     QTY ST  DATE  FILL REM SUP
#  RX #      DRUG
<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//
```




At the device prompt, if a user enters a printer that is not defined in the DISPENSING SYSTEM PRINTER parameter field, the prescription will not be sent to the OPAI for dispensing. A label will however print. An exception to this is if a laser label device is not selected, the label will also NOT print.



At the device prompt, if a user enters a printer and no printers are defined in the DISPENSING SYSTEM PRINTER parameter field, the prescription will be sent to the OPAI for dispensing for a single external automated dispensing robot setup. For a multi robot setup, if no printers are defined in the DISPENSING SYSTEM PRINTER Field (#2008), and the DISPENSE DNS NAME Field (#2006) and the DISPENSE DNS PORT Field (#2007) are not defined, the prescription WILL NOT be sent to the OPAI. If the DISPENSE DNS NAME and DISPENSE DNS PORT Fields are populated for the multi external automated dispensing robot setup, the prescription will be sent to the robot defined by the fields. In all three cases the label will print. An exception to this is if a laser label device is not selected, the label will also NOT print in all three cases.

OneVA Pharmacy remote refill and remote partial fill actions at times receives the following exception message:

MESSAGE SENT TO TARGET VISTA; TIMED 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.

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 database.

Prescription label provided for illustration below. The label is identical to what would have printed out at the host site.

VAMC ANYTOWN, OH 45428-0415 984 937-267-0000 (35783/) 27,2016@10:7 Rx# 2718862 JUL 27,2016 Fill 2 of 12 Fill2 PSOPATIENT,SIX TAKE ONE TABLET BY MOUTH TWICE A DAY AS NEEDED TWIC --TAKE WITH FOOD IF GI UPSET OCCURS/DO NOT UPSET CRUSH OR CHEW-- PSOPROVIDER,ONE Qty: 60 TAB IBUPROFEN 800MG TAB PO BOX 415 ANYTOWN, OH 45428-0415 ADDRESS SERVICE REQUESTED ***DO NOT MAIL***	VAMC ANYTOWN, OH 45428-0415 984 937-267-0000 (35783/) Rx# 2718862 JUL 27,2016 Fill 2 of 12 PSOPATIENT,SIX TAKE ONE TABLET BY MOUTH TWICE A DAY AS NEEDED --TAKE WITH FOOD IF GI UPSET OCCURS/DO NOT CRUSH OR CHEW-- PSOPROVIDER,ONE Qty: 60 TAB IBUPROFEN 800MG TAB 10 Refills remain prior to JUN 1,2017 COPAY Days Supply: 30	984 (35783/) JUL Rx# 2718862 JUL 27,2016 PSOPATIENT,SIX TAKE ONE TABLET BY MOUTH --TAKE WITH FOOD IF GI CRUSH OR CHEW PSOPROVIDER,ONE Qty: 60 TAB IBUPROFEN 800MG TAB Mfg _____ Lot# _____ Tech _____ RPh _____ Read FDA Med Guide Routing: WINDOW Days supply: 30 Cap: SAFETY
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

```

1,27
PSOPATIENT,SIX
CINCI
*Indicate address change on back of this form
[ ] Permanent
[ ] Temporary until __/__/__
Signature
PSOPATIENT,SIX
Rx# 2718862
IBUPROFEN 800MG TAB
DRUG WARNING:
DO NOT DRINK ALCOHOLIC BEVERAGES
when taking this medication.
TAKE WITH FOOD OR MILK.
This is the same medication you
have been getting. Color, size
or shape may appear different.
Last Fill: 05/31/2016
Pat. Stat ONSC Clinic:
DRUG WARNING 8,10,19
PSOPATIENT,SIX
Verified Allergies
-----
Non-Verified Allergies
-----
Verified Adverse Reactions
-----
Non-Verified Adverse
-----
Reactions
---
PSOPATIENT,SIX JUL 27,2016
Pharmacy Service (119)
VAMC ANYTOWN, OH
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.

```

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 a future OneVA Pharmacy project.

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 Rx from Another VA Pharmacy* process and perform the transaction again.

OneVA Pharmacy Patch PSO*7*643 removed the 'REPRINT' notation on the refill/partial fill labels. It was also removed from the Label log section in the Activity log.

```

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// 1

REMOTE OP Medications (ACTIVE) Oct 19, 2021@16:57:03 Page: 1 of 1
PSOPATIENT,SIX <A>

PID: REDACTED Ht (cm) : _____ (_____)
DOB: REDACTED Wt (kg) : _____ (_____)
SEX: FEFEMALE
CrCL: <Not Found> BSA (m2) : _____

Site #: XXX (ANYTOWN,OH)
Rx #: XXXXXXXX
Drug Name: CETIRIZINE HCL 10MG TAB
Days Supply: 30
Quantity: 30
Refills: 7
Expiration Date: 05/22/17
Issue Date: 05/21/16
Stop Date: 05/22/17
Last Fill Date: 05/03/17
Sig: TAKE ONE TABLET BY MOUTH EVERY DAY

Enter ?? for more actions
RF Refill Rx from Another VA Pharmacy
PR Partial Fill Rx from Another VA Pharmacy
Select Action:Quit// PR Partial Fill Rx from Another VA Pharmacy

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: ONEVARPH,ONE// ONEVARPH,ONE 192 ANYTOWN,OH
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...

TRANSACTION SUCCESSFUL... The partial for RX #2718861 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: ONEVA

1 ONEVA NULL NUL
2 ONEVAPRT\$PRT BAY PINES TEST LAB
Choose 1-2> 1 ONEVA NULL NUL

Label queued!
Partial complete for RX #2718861.
Press RETURN to continue:

Updating prescription order list...

<Prescription label provided for illustration below. The label is identical to what would have
printed out at the host site.>

VAMC ANYTOWN, OH 45428-0415
984 000-267-0000 (35783/)
27,2016@10:0
Rx# 2718861 JUL 27,2016 Fill 2 of 9
Fill 9
PSOPATIENT,SIX

VAMC ANYTOWN, OH 45428-0415
984 000-267-0000 (35783/)
Rx# 2718861 JUL 27,2016 Fill 2 of 9
PSOPATIENT,SIX

(PARTIAL)
984 (35783/) JUL
Rx# 2718861 JUL 27,2016
PSOPATIENT,SIX

TAKE ONE TABLET BY MOUTH DAILY DAILY	TAKE ONE TABLET BY MOUTH DAILY	TAKE ONE TABLET BY MOUTH
PSOPROVIDER,ONE Qty: 10 TAB CETIRIZINE HCL 10MG TAB	PSOPROVIDER,ONE Qty: 10 TAB CETIRIZINE HCL 10MG TAB 7 Refills remain prior to MAY 22,2017 Days Supply: 10	PSOPROVIDER,ONE Qty: 10 TAB CETIRIZINE HCL 10MG TAB Mfg _____ Lot# _____ Tech _____ Rph _____
PO BOX 415 ANYTOWN, OH 45428-0415		
ADDRESS SERVICE REQUESTED		
DO NOT MAIL		Routing: WINDOW Days supply: 10 Cap: SAFETY Isd: MAY 21,2016 Exp: MAY
22,2017 PSOPATIENT,SIX	*Indicate address change on back of this form [] Permanent	Last Fill: 05/23/2016 Pat. Stat ONSC Clinic:
CINCI	[] Temporary until __/__/__	DRUG WARNING 1,8
	Signature _____ PSOPATIENT,SIX Rx# 2718861 CETIRIZINE HCL 10MG TAB DRUG WARNING: -MAY CAUSE DROWSINESS- Alcohol may intensify this effect. USE CARE when driving or when operating dangerous machinery. DO NOT DRINK ALCOHOLIC BEVERAGES when taking this medication.	PSOPATIENT,SIX Verified Allergies ----- Non-Verified Allergies ----- Verified Adverse Reactions ----- Non-Verified Adverse -----
Reactions ---		
	PSOPATIENT,SIX JUL 27,2016	
Pharmacy Service (119) ANYTOWN P.O. BOX 415 ANYTOWN, OH 45428-0415		
Use the label above to mail the computer copies back to us. Apply enough postage to your envelope to ensure delivery.		
The VA Notice of Privacy Practices, IB 10-163, which outlines your privacy rights, is available online at http://www1.va.gov/Health/ or you may obtain a copy by writing the VHA Privacy Office (19F2), 810 Vermont Avenue NW, Washington, DC 20420		



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 be refilled until MM/DD/YYYY.

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

Table with columns: #, RX #, DRUG, QTY, ST, DATE, ISSUE, LAST, REF, DAY, FILL, REM, SUP. Includes rows for ASPIRIN 81MG EC TAB and ASPIRIN 325MG EC TAB.

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: OPPOVIDER, ONE Issued: 03/12/07
Status: ACTIVE Last filled on: 03/12/07
Processing Status: Released locally on 3/12/07@08:55:32 (Window)
Days Supply: 30
-----
Discontinue Rx ##### 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 PSOAUTRF 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):

```
      :                               :                               :
#  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: Marking a controlled substance Rx as a Titration prescription will prevent refills and renewals. You will not be able to convert the Rx to maintenance prescription by the TR Hidden Action.

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

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

Before the new Maintenance Rx can be accepted, the user is prompted to validate the QTY field for the new Rx, which may or may not be automatically re-calculated. Only the last dose from the original prescription is carried over to the new Maintenance Rx, and the # of Refills field is decreased by 1 because the new Maintenance Rx counts as a fill. Once the user verifies the information for the Maintenance Rx is accurate, they can accept the Maintenance Rx. This action will trigger a Duplicate Drug check against the original complex order, which must be discontinued before the new Maintenance Rx can be accepted.

After the new Maintenance Rx is accepted, it will have the new indicator 'm' on the right side of the Rx # in the patient's Medication Profile as seen below (entry #1):

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----ACTIVE-----								
1	#####	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
:	:	:	:	:	:	:	:	:

OneVA Refill/Partial Fill Activity Log Entries

Patch PSO*7*643 brought in new activity log entries to provide an audit trail for OneVA refills and partial fills sent through the OPAI to an external automated dispensing robot for dispensing. Activity log and label log entries document the facility name and station number where the

OneVA refill/partial fill was dispensed. The ‘Initiator of Activity’ was corrected to reflect the remote pharmacist’s name instead of ‘Postmaster’. Entries 4-5 illustrate a OneVA refill filled at a dispensing site DAYTSHR TEST LAB (984). Entries 6-9 illustrate a OneVA partial filled at a dispensing site, CHYSHR (983) which has multiple external automated dispensing robots.

Host Site Activity Log entries for a OneVA refill and Partial filled at dispensing facility.

Rx Activity Log		Nov 30, 2021@11:31:15		Page: 1 of 3		
PSOPATIENT,ONE		<NO ALLERGY ASSESSMENT>				
PID: REDACTED		Ht(cm): 167.64 (11/05/2021)				
DOB: REDACTED		Wt(kg): 72.57 (11/05/2021)				
]Rx #: XXXXXXX1		Original Fill Released: 10/25/21				
Routing: Mail		Finished by: PHARMACIST,TWO				
Refill Log:						
#	Log Date	Refill Date	Qty	Routing	Lot #	Pharmacist
1	11/15/21	11/15/21	30	Window	5188	PHARMACIST, DAYTSHR
Division: 984		Dispensed: 11/15/21		Released: NDC: 63653-1171-05		
Partial Fills:						
#	Log Date	Date	Qty	Routing	Lot #	Pharmacist
1	11/30/21	11/30/21	7	Window	5188	PHARMACIST, CHYSHR
Division: 983		RELEASSED:				
REMARKS: Ran out of meds						
Activity Log:						
#	Date/Time	Reason	Rx Ref	Initiator Of Activity		
1	10/25/21@16:42:21	X-INTERFACE	ORIGINAL	PHARMACIST, LOCAL		
Comments: Prescription sent to external interface						
2	10/25/21@16:42:23	X-INTERFACE	ORIGINAL	POSTMASTER		
Comments: HL7 ID - 98468021393 MESSAGE TRANSMITTED TO OPTIFILL2 (10.000.00.000)						
3	10/25/21@16:42:30	DISP COMPLETED	ORIGINAL	PHARMACIST, LOCAL		
Comments: External Interface Dispensing is Complete. Filled By: TECH, TWO						
Checking Pharmacist: PHARMACIST, TWO						
Mail Tracking Info.: REGULAR MAIL3211025 received at 10/25/21@16:42:30						
4	11/15/21	X-INTERFACE	REFILL 1	PHARMACIST, DAYTSHR		
Comments: Refill sent to external interface						
Processed at DAYTSHR TEST LAB (984)						
5	11/15/21	DISP COMPLETED	REFILL 1	PHARMACIST, DAYTSHR		
Comments: External Interface Dispensing is Complete.						
Processed at DAYTSHR TEST LAB (984)						
Filled By: PERSON, ONE Checking Pharmacist: PHARMACIST, ONE						
6	11/30/21	PARTIAL	REFILL 1	PHARMACIST, CHYSHR		
Comments: Ran out of meds Processed at CHYSHR (983)						
7	11/30/21	X-INTERFACE	PARTIAL	PHARMACIST, CHYSHR		
Comments: Partial sent to external interface.						
Processed at CHYSHR (983)						
8	11/30/21@16:39:04	X-INTERFACE	ORIGINAL	PHARMACIST, CHYSHR		
Comments: HL7 ID - 98468540591 MESSAGE TRANSMITTED TO OPTIFILL2 (10.000.00.000) at CHYSHR(983)						
9	11/30/21	DISP COMPLETED	PARTIAL	PHARMACIST, CHYSHR		
Comments: External Interface Dispensing is Complete.						
Processed at CHYSHR (983)						
Filled By: PERSON, THREE Checking Pharmacist: PHARMACIST, THREE						

The label log entries 2-3 below display the facility name and station number where the OneVA refill/partial fills were dispensed. The ‘Printed By was corrected in Patch PSO*7*643 to reflect the remote pharmacist’s name instead of ‘Postmaster’.

```

=====
Label Log:
#   Date       Rx Ref                Printed By
=====
1   10/25/21   ORIGINAL                PHARMACIST,LOCAL
Comments: From RX number XXXXXXXX
2   11/15/21   REFILL 1                PHARMACIST,DAYTSHR
Comments: From RX number XXXXXXXX
        Printed at DAYTSHR TEST LAB (XXX)
3   11/30/21   REFILL 98               PHARMACIST,CHYSHR
Comments: From RX number XXXXXXXX (Partial)
        Printed at CHYSHR(983)
=====

Enter ?? for more actions

Select Action:Quit//

```

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: XXXXXXXXXXXX
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

#  RX #          DRUG                                ISSUE  LAST REF DAY
#  #          #          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

```

Example: Entering a New Order with Indication

With patch PSO*7*441, the user will be prompted for Indication. The list of indications listed is retrieved from the Pharmacy Orderable item file (#50.7) field #14 MOST COMMON INDICATION FOR USE and field #13 INDICATION FOR USE subfile (#50.713). Indication is not a required field in backdoor but is a required field in CPRS. Once an indication is selected or free text entered, the user is prompted to copy the indication to the SIG. Patch PSS*1*187 added the prompt for Copy INDICATION into the SIG? YES/NO. The prompt is retrieved from the Pharmacy System file (#59.7) field #96 COPY INDICATION TO SIG.

```
PATIENT INSTRUCTIONS: //
INDICATION:
1 TO LOWER CHOLESTEROL
2 FOR CHOLESTEROL
3 FOR CHOLESTEROL TREATMENT
99 Free Text entry

Select INDICATION from the list: 1 TO LOWER CHOLESTEROL
TO LOWER CHOLESTEROL

Copy INDICATION into the Sig? YES//

(TAKE ONE TABLET BY MOUTH EVERY MORNING TO LOWER CHOLESTEROL)
```

Patch PSO*7*441 added if Park is enabled, then Mail/Window Routing will list Park as an option.

```
Select one the following:
M Mail
W WINDOW
P PARK

MAIL/WINDOW/PARK: WINDOW// <Enter> WINDOW
```

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) : _____

#  RX #          DRUG          ISSUE  LAST REF DAY
          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(###-##-####)          DOB: REDACTED
Birth Sex: M          Self-Identified Gender:
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)   DOB: REDACTED
Birth Sex: M                      Self-Identified Gender:
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)   DOB: REDACTED
Birth Sex: M                      Self-Identified Gender:
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)           DOB: REDACTED
Birth Sex: M                                     Self-Identified Gender:
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(###-##-###)           DOB: REDACTED
Birth Sex: M                                     Self-Identified Gender:
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) DOB: REDACTED
Birth Sex: M Self-Identified Gender:
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//  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)         DOB: REDACTED
Birth Sex: M                                     Self-Identified Gender:
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(###-##-####)           DOB: REDACTED
Birth Sex: M                                     Self-Identified Gender:
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  : 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 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(###-##-####)           DOB: REDACTED
Birth Sex: M                                     Self-Identified Gender:
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(###-##-####)           DOB: REDACTED
Birth Sex: M                                     Self-Identified Gender:
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(###-##-####)           DOB: REDACTED
Birth Sex: M                                     Self-Identified Gender:
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//  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(###-##-####) DOB: REDACTED
Birth Sex: M Self-Identified Gender:
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 to 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 ADMINISTRATION SCHEDULE file. The NAME, SYNONYM, and OLD MED INSTRUCTION NAME(S) fields will be used for lookup from the MEDICATION INSTRUCTION file. The user will first be presented with selections from the ADMINISTRATION SCHEDULE file based on the value entered at the schedule prompt. If the user selects an entry, the lookup is complete. If the user chooses not to select a value from the ADMINISTRATION SCHEDULE file, the software displays selections from the MEDICATION INSTRUCTION file. If a selection is made, the lookup is complete. If the user chooses not to select a value, the software informs the user that the value as entered will be accepted at the schedule prompt as a free text entry. 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 CONJUNCTION field is used to join dosing sequences in complex orders. Entries are limited to AND or THEN. AND is used for concurrent doses, such as “Take 1 tablet every morning AND take 2 tablets at bedtime.” THEN is used for consecutive doses, such as “Take 2 tablets daily for one week THEN take 1 tablet for five days.” See Chapter 2 in the *User Manual - Supplemental* for examples.

```
CONJUNCTION: <Enter>
```

Any entry in the PATIENT INSTRUCTIONS field will first be checked to see if it contains any abbreviations that can be expanded. The entry will be added to the end of the Sig, after the dosing information, and the entire Sig will be displayed.

```
PATIENT INSTRUCTIONS: WF          WITH FOOD
(TAKE 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 external automated dispensing robot 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
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
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
  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: OP PROVIDER4,TWO      (13) Copies: 1
(14) Remarks: New Order Created by editing Rx # #####.
      Entry By: OP PROVIDER4,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
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 redisplay with the changes and the order can be accepted or edited again.

If the order is accepted, the prescription is checked for drug/drug interactions and, if none exist, prompts follow for nature of order and whether the patient was counseled.

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
VERBAL                    x           x           x
TELEPHONED                x           x           x
SERVICE CORRECTION
POLICY                     x           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) : _____

#  RX #          DRUG          ISSUE  LAST REF DAY
          QTY ST  DATE  FILL REM SUP
-----
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 transmission 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
  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/Unmark	IN	Intervention Menu	PS	Print Screen

RP	Reprint (OP)	DA	Display Drug Allergies	PT	Print List
HD	Hold (OP)	DIN	Drug Restr/Guide (OP)	QU	Quit
UH	Unhold (OP)	+	Next Screen	RD	Re Display Screen
PI	Patient Information	-	Previous Screen	SL	Search List
PP	Pull Rx (OP)	<	Shift View to Left	UP	Up a Line
IP	Inpat. Profile (OP)	>	Shift View to Right		
OTH	Other OP Actions	ADPL	Auto Display (On/Off)		



If the order utilizes the EXCEPT conjunction, copy will no longer be allowed. The message bar will display: Cannot COPY. Invalid 'except' conjunction!

Copy is a hidden action used to 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
  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 #          DRUG          ISSUE  LAST REF DAY
#  #          #          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
  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
  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: OPPOVIDER4,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

#  RX #          DRUG          ISSUE  LAST REF DAY
          QTY ST  DATE  FILL REM SUP
-----ACTIVE-----
1  #####          AMPICILLIN 250MG CAP          80 A  06-04 06-04  0 10
2  #####          LISINAPRIL 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
ANYTOWN
ALABAMA

HOME PHONE:
CELL PHONE:
WORK PHONE:

Prescription Mail Delivery: Regular Mail

Allergies:

Adverse Reactions:

Enter ?? for more actions

EA Enter/Edit Allergy/ADR Data PU Patient Record Update
DD Detailed Allergy/ADR List EX Exit Patient List
Select Action: Quit// <Enter> QUIT

Medication Profile Nov 04, 2005@09:23:47 Page: 1 of 1

OPPATIENT,FOUR

PID: REDACTED Ht (cm) : _____ (_____)
DOB: REDACTED Wt (kg) : _____ (_____)
SEX: MALE

CrCL: <Not Found> (CREAT: Not Found) BSA (m2) : _____

#	RX #	DRUG	QTY	ST	DATE	ISSUE	LAST REF	DAY	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

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
  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-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE
```

View of RX:

```
Medication Profile      Nov 04, 2005@09:25:14      Page: 1 of 1
OPPATIENT,FOUR
  PID: REDACTED          Ht (cm) : _____ (_____)
  DOB: REDACTED          Wt (kg) : _____ (_____)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2) : _____
                                           ISSUE  LAST REF DAY
                                           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/Unmark	IN	Intervention Menu	PS	Print Screen
RP	Reprint (OP)	DA	Display Drug Allergies	PT	Print List
HD	Hold (OP)	DIN	Drug Restr/Guide (OP)	QU	Quit
UH	Unhold (OP)	+	Next Screen	RD	Re Display Screen
PI	Patient Information	-	Previous Screen	SL	Search List
PP	Pull Rx (OP)	<	Shift View to Left	UP	Up a Line
IP	Inpat. Profile (OP)	>	Shift View to Right		
OTH	Other OP Actions	ADPL	Auto Display (On/Off)		

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
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
  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
  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
  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: OP PROVIDER4,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: OP PROVIDER4,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: PSUSER,ONE//                BIRMINGHAM  ALABAMA  OP          PHARMACIST
... order flagged.

```

When an order is flagged, “FL-” is placed in front of “Pending OP Orders” in the upper left corner, and the flagged reason is listed below the patient identifying information.

Example: A Flagged New Pending Order

```

FL-Pending OP Orders (ROUTINE)March 13, 2008 16:31:33      Page: 1 of 2
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
PXXXXXXXXM,M
  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:

```

Update an Indication on an Active Order

When updating an Indication on an Active Order, the Indication field can be edited using the PATIENT INSTRUCTION item 4 in the screen below.

Example: Updating an Indication on an Active Order

```
OP Medications (ACTIVE)      Feb 04, 2022@08:16:27      Page: 1 of 3
CPRSPATIENT,ONE
PID: 666-06-1001            Ht (cm): _____ (_____)
DOB: APR 15,1953 (68)      Wt (kg): _____ (_____)
SEX: MALE                  Non-VA Meds on File  Last entry on 02/02/22
CrCL: <Not Found> (CREAT: Not Found)  BSA (m2): _____
+
      Verb: TAKE
      Dispense Units: 1
      Noun: TABLET
      *Route: ORAL (BY MOUTH)
      *Schedule: QPM
(4) Pat Instructions:
      Indications: TO REDUCE CHOLESTEROL
      SIG: TAKE ONE TABLET BY MOUTH EVERY EVENING TO REDUCE CHOLESTEROL
(5) Patient Status: SC
(6) Issue Date: 02/02/22      (7) Fill Date: 02/04/22
      Last Fill Date: 02/04/22 (Mail)
+      Enter ?? for more actions
DC Discontinue              PR Partial              RL Release
ED Edit                    RF Refill              RN Renew
Select Action: Next Screen// 4

PATIENT INSTRUCTIONS:

INDICATION:

  1  REDUCE CHOLESTEROL
  2  TO TREAT HIGH CHOLESTEROL
  99 Free Text entry

Select INDICATION from the list: 99// 2 TO TREAT HIGH CHOLESTEROL
TO TREAT HIGH CHOLESTEROL

Copy INDICATION into the Sig? YES//
Are You Sure You Want to Update Rx 502569? Yes// OP Medications (ACTIVE)      Feb 04,
2022@08:18:59      Page: 1 of 3

CPRSPATIENT,ONE
PID: 666-06-1001            Ht (cm): _____ (_____)
DOB: APR 15,1953 (68)      Wt (kg): _____ (_____)
SEX: MALE                  Non-VA Meds on File  Last entry on 02/02/22
CrCL: <Not Found> (CREAT: Not Found)  BSA (m2): _____
+
      Verb: TAKE
      Dispense Units: 1
      Noun: TABLET
      *Route: ORAL (BY MOUTH)
      *Schedule: QPM
(4) Pat Instructions:
      Indications: TO TREAT HIGH CHOLESTEROL
      SIG: TAKE ONE TABLET BY MOUTH EVERY EVENING TO TREAT HIGH CHOLESTEROL
(5) Patient Status: SC
(6) Issue Date: 02/02/22      (7) Fill Date: 02/04/22
      Last Fill Date: 02/04/22 (Mail)
+      Enter ?? for more actions
DC Discontinue              PR Partial              RL Release
ED Edit                    RF Refill              RN Renew
Select Action: Next Screen//
```

Park and UnPark a Prescription

The Park function must be enabled at the System or Division level in order for a prescription to be Park or UnPark.

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)   OTH Other OP Actions   > Shift View to Right
VF Verify (OP)         REJ View REJECT        ADPL Auto Display(On/Off)
CO Copy (OP)           VER View ePharmacy Rx  DN Down a Line
TR Convert Titration Rx RES Resubmit Claim        FS First Screen
TM Titration Mark/UnmarkREV Reverse Claim          GO Go to Page
RP Reprint (OP)        IN Intervention Menu   LS Last Screen
HD Hold (OP)          DA Display Drug AllergiesPL Preg/Lact Display
UH Unhold (OP)        DIN Drug Restr/Guide (OP)PS Print Screen
PK Park (OP)        EP Print eRx           PT Print List
UPK Unpark (OP)    ECS Edit Claim Submitted QU Quit
PI Patient Information JE Jump to eRx           RD Re Display Screen
PP Pull Rx (OP)       + Next Screen          SL Search List
IP Inpat. Profile (OP) - Previous Screen      UP Up a Line
BY Bypass 3/4 Day Supply< Shift View to Left

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

Use the Park (PK) action to put a prescription that is part of the patient’s current expected medication regimen on hold until the filled is requested. Use the Unpark (UPK) action to remove a prescription from hold and fill the prescription.



Park is only valid for drugs that are not marked as ‘D’ in the DEA Special Handling field in the drug file.



If a Parked prescription original fill or the refill is not released (i.e., the label not printed, or it is not processed by CMOP) the refill options through backdoor, CPRS, Audiocare, MyHealthVet, and Customer Relationship Manager (CRM) etc., are processed and the prescription status is set to Suspended. Otherwise, the current logic in refilling the prescription is followed.

Only key holders of the PSORPH security key or the PSO TECH ADV security key can Park or Unpark a prescription.

Each time a user Park or Unpark a prescription, an entry is created in the Activity Log.

Example: PARK Message on the Status Line with PSO TECH ADV or PSORPH Security Key

```
OP Medications (ACTIVE)      Feb 04, 2022@07:46:24      Page: 1 of 3
CPRSPATIENT,ONE             <A>
PID: 666-06-1001             Ht (cm) : _____ (_____)
DOB: APR 15,1953 (68)       Wt (kg) : _____ (_____)
SEX: MALE                    Non-VA Meds on File      Last entry on 02/02/22
CrCL: <Not Found> (CREAT: Not Found)      BSA (m2) : _____
```



```

Rx #: XXXXXX
(1) *Orderable Item: SIMVASTATIN TAB
(2) CMOP Drug: SIMVASTATIN 80MG TAB
    NDC: XXXXX-XXXX-XX
(3) *Dosage: 80 (MG)
    Verb: TAKE
    Dispense Units: 1
    Noun: TABLET
    *Route: ORAL (BY MOUTH)
    *Schedule: QPM
(4) Pat Instructions: PSO PAT INSTRUCTION
    Indications: PSO PSO FOR CHLOLESTROL
+ Enter ?? for more actions
DC (Discontinue) PR Partial RL Release
ED (Edit) RF Refill RN Renew
Select Action: Next Screen// PK PK
-----

Medication Profile Feb 04, 2022@07:52:12 Page: 1 of 3
CPRSPATIENT,ONE <A>
PID: 666-06-1001 Ht(cm): _____ (_____)
DOB: APR 15,1953 (68) Wt(kg): _____ (_____)
SEX: MALE Non-VA Meds on File Last entry on 02/02/22
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): _____
ISSUE LAST REF DAY
# RX # DRUG QTY ST DATE FILL REM SUP
-----ACTIVE-----
1 502174 DANTROLENE NA 25MG CAP 30 S> 02-18 02-17 1 30
2 502175 FLUPHENAZINE HCL 1MG TAB 30 A> 03-31 03-31 3 30
3 502476 LORATADINE 10MG TAB 117 AP>12-27 - 3 30
4 502382 NIACIN 50MG TAB 90 AP>04-13 - 3 90
5 502245 SIMVASTATIN 80MG TAB 30 AP>05-21 - 2 30
6 502246 WARFARIN (COUMADIN) NA 1MG TAB 30 AP 05-25 - 5 30
-----DISCONTINUED-----
7 502147 SIMVASTATIN 5MG TAB 30 DA>10-09 10-09 3 30
-----PENDING-----
+ RX# 502245 placed in Active/Parked status.
PU Patient Record Update NO New Order
PI Patient Information SO Select Order
Select Action: Next Screen//
-----

```

Example: UNPARK Message on the Status Line with PSO TECH ADV or PSORPH Security Key

```

OP Medications (ACTIVE/PARKED) Feb 04, 2022@07:52:12 Page: 1 of 3
CPRSPATIENT,ONE <A>
PID: XXX-XX-XXXX Ht(cm): _____ (_____)
DOB: APR 15,1953 (68) Wt(kg): _____ (_____)
SEX: MALE Non-VA Meds on File Last entry on 02/02/22
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): _____
Rx #: XXXXXX
(1) *Orderable Item: SIMVASTATIN TAB
(2) CMOP Drug: SIMVASTATIN 80MG TAB
    NDC: XXXXX-XXXX-XX
(3) *Dosage: 80 (MG)
    Verb: TAKE
    Dispense Units: 1
    Noun: TABLET
    *Route: ORAL (BY MOUTH)
    *Schedule: QPM
(4) Pat Instructions: PSO PAT INSTRUCTION
    Indications: PSO PSO FOR CHLOLESTROL
+ Enter ?? for more actions
DC (Discontinue) PR Partial RL Release

```

```

ED (Edit) RF Refill RN Renew
Select Action: Next Screen// UPK UPK
FILL DATE: FEB 4,2022// (FEB 04, 2022)

Select one of the following:

M MAIL
W WINDOW

MAIL/WINDOW: MAIL//

Medication Profile Feb 04, 2022@07:55:57 Page: 1 of 3
CPRSPATIENT,ONE <A>
PID: 666-06-1001 Ht (cm): ( )
DOB: APR 15,1953 (68) Wt (kg): ( )
SEX: MALE Non-VA Meds on File Last entry on 02/02/22
CrCL: <Not Found> (CREAT: Not Found) BSA (m2):

# RX # DRUG QTY ST DATE FILL REM SUP
-----ACTIVE-----
1 502174 DANTROLENE NA 25MG CAP 30 S> 02-18 02-17 1 30
2 502175 FLUPHENAZINE HCL 1MG TAB 30 A> 03-31 03-31 3 30
3 502476 LORATADINE 10MG TAB 117 AP>12-27 - 3 30
4 502382 NIACIN 50MG TAB 90 AP>04-13 - 3 90
5 502245 SIMVASTATIN 80MG TAB 30 A> 05-21 02-04 2 30
6 502246 WARFARIN (COUMADIN) NA 1MG TAB 30 AP 05-25 - 5 30
-----DISCONTINUED-----
7 502147 SIMVASTATIN 5MG TAB 30 DA>10-09 10-09 3 30
-----PENDING-----
+ RX# 502245 removed from Park status.
PU Patient Record Update NO New Order
PI Patient Information SO Select Order
Select Action: Next Screen//

```

A prescription can be marked as Park using the Label prompt

Example: PARK a Prescription using the Label Prompt

```

Label Printer: TELNET
LABEL: QUEUE/CHANGE PRINTER/HOLD/SUSPEND/PARK(PK) or '^' to bypass Q// ?

Enter 'Q' to queue labels to print
Enter 'H' to hold label until Rx can be filled
Enter 'PR' for Rx profile
Enter 'S' to suspend labels to print later
Enter 'PK' to Park prescription(s)
Enter 'C' to select another label printer
Enter '^' to bypass label functions

Select one of the following:

PR PROFILE
Q QUEUE
C CHANGE PRINTER
H HOLD
S SUSPENSE
PK PARK

Label Printer: TELNET
LABEL: QUEUE/CHANGE PRINTER/HOLD/SUSPEND/PARK(PK) or '^' to bypass Q//

```

A prescription can be marked as Park using the Pickup Routing prompt.

Example: PARK a Prescription using the Pickup Routing prompt

```
Select one the following:
M      Mail
W      WINDOW
P      PARK

MAIL/WINDOW/PARK: WINDOW// <Enter> P
PARK
Are You Sure You Want To Update RX 502245? Yes//
```

Example: Activity Log Entry for Park

```
Activity Log:
#      Date/Time          Reason          Rx Ref          Initiator Of Activity
=====
1      2/4/22@09:21:26     EDIT           ORIGINAL       PHARMACYUSER,ONE
Comments: Rx placed in Parked status (02-04-22) (W)
2      2/4/22@09:21:26     EDIT           ORIGINAL       PHARMACYUSER,ONE
Comments: MAIL/WINDOW/PARKED (W),FILL DATE (02-04-22),
```

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 OPTHALMIC OPPTH  
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 HealthVet. The system will prompt the user for the information as shown in the following example. The user enters the appropriate response for each prompt by pressing Enter on the keyboard to accept the default setting for a prompt. The user must type the appropriate word or letter to enter a response contrary to the default.



The recommended usage of this option is three times a day to ensure the requested refills are processed in a timely manner.

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: CAPTOPRIL 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.

PSO VCC REFILL

[PSO VCC REFILL]



The purpose of this menu option is to register remote procedure calls (RPCs) that are used in the refill process performed via the Department of Veterans Affairs (VA) Health

Connect (HC) Customer Relationship Management (CRM) and VistA Scheduling Enhancements (VSE) for Clinical Staff (CS) applications.

The VAHC-CRM application is to support the Veterans Contact Center (VCC). The VAHC-CRM application runs on a platform outside of VistA but utilizes the appropriate VistA pharmacy for the actual processing of refills requested by patients. Below is an example of what will display in the activity log for a prescription that has been refilled via the VAHC-CRM.

```

Rx Activity Log                               Mar 02, 2022@14:29:13           Page: 1 of 1
PSOPATIENT,ONE                               <A>
  PID: XXX-XX-XXXX                             Ht (cm) : _____ (_____)
  DOB: REDACTED                               Wt (kg) : _____ (_____)

Rx #: XXXXXXXX   Original Fill Released:
Routing: Window   Finished by: PSOPHARMACIST,ONE

Activity Log:
#   Date/Time           Reason           Rx Ref           Initiator Of Activity
=====
1   2/9/22@16:39:24     PROCESSED       ORIGINAL        VAHCCRMUSER,ONE
Comments: Label never queued to print by User
2   2/28/22@09:14:52     SUSPENSE       REFILL 1        PSOVCC,APPLICATION PROXY
Comments: RX Placed on Suspense until 03-01-22 VCC Auto Refill
        Enter ?? for more actions
Select Action:Quit//
  
```

The purposed of the VSE-CS application is to support clinical staff in any scheduling related duties. The VSE-CS application runs on a platform outside of VistA, but utilizes the appropriate VistA pharmacy for the actual processing of refills requested by patients. Below is an example of what will display in the activity log for a prescription that has been refilled via the VSE-CS.

```

Rx Activity Log                               Mar 02, 2022@14:29:13           Page: 1 of 1
PSOPATIENT,ONE                               <A>
  PID: XXX-XX-XXXX                             Ht (cm) : _____ (_____)
  DOB: DEC 1,1952 (69)                       Wt (kg) : _____ (_____)

Rx #: 10951420   Original Fill Released:
Routing: Window   Finished by: PSOPHARMACIST,ONE

Activity Log:
#   Date/Time           Reason           Rx Ref           Initiator Of Activity
=====
1   2/9/22@16:39:24     PROCESSED       ORIGINAL        VSEUSER,ONE
Comments: Label never queued to print by User
2   2/28/22@09:14:52     SUSPENSE       REFILL 1        VSEUSER,ONE
Comments: RX Placed on Suspense until 03-01-22 VSE
  
```

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+SCHEDULES 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
OPPACIENT16,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: PSUSER,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
OPPACIENT16,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) CMOF Drug: ACETAMINOPHEN 500MG TAB      create a new order
  Drug Message: NATL FORM
(3) *Dosage: 500 (MG)
  Verb: TAKE
  Dispense Units: 1
  *Route: ORAL
  *Schedule: BID
(4) Pat Instruct:
  Provider Comments: ProvComments
                SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
(5) Patient Status: SERVICE CONNECTED
(6) Issue Date: MAR 13,2008      (7) Fill Date: MAR 13,2008
(8) Days Supply: 30              (9) QTY (TAB): 60
+ Enter ?? for more actions
BY Bypass          DC Discontinue    FL Flag/Unflag
ED Edit           FN Finish
Select Item(s): Next Screen//

```

After pending orders have been unflagged, they can be processed.



If you attempt to process a flagged order, you are prompted “Unflag Order? NO//”. If you respond **YES**, enter comments to unflag the order and continue with processing. If you respond **NO**, you cannot process the order because it is still flagged.

Finishing a Pending Order with Indications

On finishing a pending order, the indication field is prompted along with Copy Indications into the SIG. The user can edit the indication and can add it to the SIG when prompted. Patch

PSS*1*187 added a new field, COPY INDICATION TO SIG (#96) to PHARMACY SYSTEM File (#59.7) that allows the site to select the default for this prompt to be Y/N.

The Indication field can also be edited using the PATIENT INSTRUCTION item 4 in the screen below.

Example: Finishing a Pending Order with Indications

```
* (1) Orderable Item: SIMVASTATIN TAB
(2)      CMOP Drug: SIMVASTATIN 5MG TAB
(3)      *Dosage: 5 (MG)
          Verb: TAKE
          Dispense Units: 1
          Noun: TABLET
          *Route: ORAL (BY MOUTH)
          *Schedule: QPM
(4)      Pat Instruct: FOR CHOLESTEROL
          Provider Comments:
          Indications: TO REDUCE CHOLESTEROL
          Instructions: TAKE ONE TABLET PO QPM
+        Enter ?? for more actions
BY Bypass          DC Discontinue          FL Flag/Unflag
ED Edit           FN Finish
Select Item(s): Next Screen//

On finishing, here are new prompts:

Select Item(s): Next Screen// FN Finish

Indication: TO REDUCE CHOLESTEROL
Copy Indication into the Sig? YES//

(TAKE ONE TABLET BY MOUTH EVERY EVENING FOR CHOLESTEROL TO REDUCE
CHOLESTEROL)

Select Item(s): Next Screen// 4
PATIENT INSTRUCTIONS: FOR CHOLESTEROL// FOR CHOLESTEROL
FOR CHOLESTEROL

INDICATION:

1 FOR CHOLESTEROL
2 TO TREAT HIGH CHOLESTEROL
99 Free Text entry

Select INDICATION from the list: 99// 2 TO TREAT HIGH CHOLESTEROL
TO TREAT HIGH CHOLESTEROL

Copy INDICATION into the Sig? YES//
```

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
  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 Partial for this Prescription

Activity Log:
# Date      Reason      Rx Ref      Initiator Of Activity
=====
1 05/25/01      ORIGINAL
Comments: Patient Instructions Not Sent By Provider.
2 05/25/01      PROCESSED      ORIGINAL      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

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

Nature of Order Activity      Require      Print      Print on
-----            E.Signature  Chart Copy  Summary

```

```

WRITTEN                                     x
VERBAL                                     x   x   x
TELEPHONED                               x   x   x
SERVICE CORRECTION
POLICY                                     x   x
DUPLICATE
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:
      Expires: 05/27/17
(9)   Days Supply: 90              (10) QTY (CAP): 90
(11)  # of Refills: 3              Remaining: 3
(12)  Provider: XXXX,XXXXX
(13)  Routing: WINDOW              (14) Copies: 1
      Method of Pickup:
(15)  Clinic: Not on File
(16)  Division: 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:
    Expires: 05/26/17
(8) Lot #:
    MFG:
(9) Days Supply: 90          (10) QTY (CAP): 90
(11) # of Refills: 3         Remaining: 3
(12) Provider: XXXX,XXXXX
(13) Routing: WINDOW        (14) Copies: 1
    Method of Pickup:
(15) Clinic: Not on File
(16) Division: 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:
    Expires: 05/26/17                (8) Lot #:
    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//
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 OPHPHARM, 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
Sorted by PATIENT, DRUG
Date Range: 03/06/2007 - 06/14/2007
Division: ANYTOWN
Run Date: Jun 15, 2007@15:26:35
Page: 1

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 an 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.
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: Edit Transfer Reject Code (ET) 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: Edit Rej. Resolution Required Code (ER) 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: Copy Parameters (CP) 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 (###-##-####)  DOB: REDACTED
Birth Sex: M  Self-Identified Gender:
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 / XXXXXXXXXXXXXXXX

-----
+ Enter ?? for more actions
VW View Rx  IGN Ignore Reject  OVR Submit Override Codes
MP Medication Profile  RES Resubmit Claim  CSD Change Suspense Date
Select: Next Screen//  IGN Ignore Reject
  
```

These options are available on the screen above:

- VW (View RX) – Takes the user to the *View Prescription* option to review details for that prescription.
- MP (Medication Profile) – Invokes the patient’s list of medication.
- IGN (Ignore Reject) – Allows the user to close or resolve the DUR/REFILL TOO SOON/REJECT 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 Addtl 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/MO/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(###-##-####)          DOB: REDACTED (##)
Birth Sex: M              Self-Identified Gender:
Rx#      : #####/#          ECME#: #####          Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA          NDC Code: #####-###-##

```

```

REJECT Information
Reject Received: NOV 15, 2005@14:11:51
Reject Type      : 88 - DUR REJECT
Reject Status   : OPEN/UNRESOLVED
Next Avail Fill: NOV 20,2005
Payer Adtl 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:

<u>Code</u>	<u>Description</u>
00	NO INTERVENTION
AS	PATIENT ASSESSMENT
CC	COORDINATION OF CARE
DE	DOSING EVALUATION/DETERMINATION
DP	DOSAGE EVALUATED
GP	GENERIC PRODUCT SELECTION
M0	PRESCRIBER CONSULTED
MA	MEDICATION ADMINISTRATION
MB	MEDICATION BENEFIT OUTWEIGHS RISK
MP	PATIENT WILL BE MONITORED
MR	MEDICATION REVIEW

NM	NON-MEDICATION COUNSELING
P0	PATIENT CONSULTED
PA	PREVIOUS PATIENT TOLERANCE
PE	PATIENT EDUCATION/INSTRUCTION
PM	PATIENT MONITORING
PT	PERFORM LABORATORY REQUEST
R0	PHARMACIST CONSULTED OTHER SOURCE
RT	RECOMMENDED LABORATORY TEST
SC	SELF-CARE CONSULTATION
SW	LITERATURE SEARCH/REVIEW
TH	THERAPEUTIC PRODUCT INTERCHANGE
ZZ	OTHER ACKNOWLEDGEMENT

Available codes for “Result of Service Code” include:

<u>Code</u>	<u>Description</u>
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
4R	DISPENSED, SICKLE CELL DISEASE

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
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
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
SE	SIDE EFFECT
SF	SUBOPTIMAL DOSAGE FORM
SR	SUBOPTIMAL REGIMEN
SX	DRUG-GENDER
TD	THERAPEUTIC DUPLICATION
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/Unmark	IN	Intervention Menu	GO	Go to Page
RP	Reprint (OP)	DA	Display Drug Allergies	LS	Last Screen
HD	Hold (OP)	DIN	Drug Restr/Guide (OP)	PS	Print Screen
UH	Unhold (OP)	EP	Print eRx	PT	Print List
PI	Patient Information	ECS	Edit Claim Submitted	QU	Quit
PP	Pull Rx (OP)	+	Next Screen	RD	Re Display Screen
IP	Inpat. Profile (OP)	-	Previous Screen	SL	Search List
OTH	Other OP Actions	<	Shift View to Left	UP	Up a Line

Resubmit Claim is a hidden action used to resubmit a claim to the third-party payer. Claims are almost always resubmitted by the ePharmacy Site Manager and not by untrained Pharmacy staff members. A resubmission is not allowed for the following:

- TRICARE non-billable prescription with a pseudo-rejection of eT
- CHAMPVA non-billable prescription with a pseudo-rejection of eC
- Any prescription with a primary and secondary claim

The action will prompt for a fill number with a default value of the most recent fill.

If a user resubmits a claim and resolves a Reject Resolution Required rejection, additional information will display below the claim processing message. The additional information only displays if the resubmit occurs from Outpatient Pharmacy, not ECME.

If a user resubmits a claim that is marked as non-billable in Claims Tracking a message "Reason Not Billable (RNB) must be removed from Claims Tracking prior to resubmitting" is displayed.

If a user attempts to resolve a reject that has a bill in Claims Tracking a message "OPECC to Cancel Existing Bill in IB & Resubmit Claim" is appended to the existing message of "Existing IB Bill in CT".

Example: Resubmitting an ePharmacy Claim to Resolve a Reject Resolution Required rejection

```
Veteran Prescription 100937 successfully submitted to ECME for claim generation.

Processing Primary claim...

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
E PAYABLE

Total Amount Paid: 40.00          Ingredient Cost Paid: 0.00
Amount of Copay/Coinsurance: 9.00    Dispensing Fee Paid: 0.00
Amount Applied to Periodic Deductible: 0.00
Remaining Deductible Amount: 0.00

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

Example: Edit Claim Submitted

The following is an example of a prescription being resolved with Edit Claim Submitted. The prescription does not have to be rejected to use this action.

```
Select: Quit// ??

The following actions are also available:
COM Add Comments          UP Up a Line          ADPL Auto Display(On/Off)
CLA Submit Clarif. Code  FS First Screen      QU Quit
ED Edit Rx                LS Last Screen      ARI View Addtnl Rej Info
PA Submit Prior Auth.    GO Go to Page        SDC Suspense Date Calc
SMA Submit Mult. Actions RD Re Display Screen  VER View ePharmacy Rx
+ Next Screen            PS Print Screen     ECS Edit Claim Submitted
- Previous Screen        PT Print List
DN Down a Line           SL Search List

Select: Quit// ECS

Enter ^ at any prompt to exit

When you confirm, a new claim will be submitted for
the prescription and this REJECT will be marked
resolved.

Confirm? YES//

Rx is not released. Date of Service will be 7/20/2018.

Submit NCPDP Field Not on Payer Sheet (Y/N)? N// YES

Enter a valid NCPDP Field name or number. Enter '??' for
a list of possible choices. Fields already on the payer sheet
are excluded from the list of possible choices. Also excluded
are any fields that do not have logic to pull data from Vista
(i.e. fields that will always be <blank>).

NCPDP Field Name or Number: PRESCRIBER DEA NUMBER ### PRESCRIBER DEA NUMBE
R
Value to transmit: XXXXXXXX
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)ject 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 AC/N	#####	#####	02/13/10	C RT	
02/13/10 POSTMASTER		45.00	180	#####	
METFORMIN HCL 500MG TAB CHAMPVA INPATIENT/DISCHARGE					
CVAPATIENT, THREE/xxxx AC/N	#####	#####	02/13/10	C RT	
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 AC/N	#####	#####	02/13/10	C RT	
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 07/27/11	2719140	0/N/A	07/27/11	W ** AC/N	
PSOUSER, THREE		8.18	60		
##### ACETAMINOPHEN 325MG TAB eC:CHAMPVA-NON BILLABLE CHAMPVA Partial Fill					
OPCVA, TWO/272P 07/27/11	#####	#####	07/27/11	W ** AC/N	
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 09/08/11	#####	0/N/A	09/08/11	W ** AC/N	
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          OPHPARM,ONE          20.00          180
##### DOCUSATE NA 100MG CA
          eT:TRICARE-NON BILLABLE
          Fill Per Provider

          OPHPARM,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          OPHPARM,ONE          20.00          180
##### DOCUSATE NA 100MG CA
          50:Non-Matched Pharmacy Number
          25:M/I Prescriber ID

          OPHPARM,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

OPPHARM, 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   OPPHARM, 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 ADMINISTRATORS
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
Drug           RE  Sort by Reason          RX  Sort by Prescription          DR  Sort by
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 a TRICARE or CHAMPVA inpatient prescription is auto-reversed by the ECME NIGHTLY BACKGROUND JOB, the prescription will be recorded to the TRICARE CHAMPVA Override Report as payment will not be received for this prescription

In the following example a TRICARE patient has Military Sexual Trauma The system displays the Non-Billable Reason “MILITARY SEXUAL TRAUMA” on the screen.

```

ISSUE DATE: JAN 27,2015// (JAN 27, 2015)
FILL DATE: (1/27/2015 - 1/28/2016): JAN 27,2015// (JAN 27, 2015)
Nature of Order: WRITTEN// W
WAS THE PATIENT COUNSELED: NO//
Do you want to enter a Progress Note? No// NO

Rx # ##### 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) : _____ (_____)
+

```

#	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)            DOB: REDACTED
Birth Sex: M                          Self-Identified Gender:
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)             DOB: REDACTED
Birth Sex: F                                     Self-Identified Gender:
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 : 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:

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)     DOB : REDACTED
Birth Sex: M                          Self-Identified Gender:
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) DOB: REDACTED
Birth Sex: M Self-Identified Gender:
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 Adtl 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) DOB: REDACTED
Birth Sex: F Self-Identified Gender:
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 Adtl Msg : Not ECME Billable: DRUG NOT BILLABLE
Reason Code :
DUR Text :

COMMENTS - REJECT

- SEP 16, 2010@13:07:12 - Transferred by (XXXXXXXX,XXXX)

INSURANCE Information
Insurance :
Contact :
BIN / 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) DOB: REDACTED
Birth Sex: M Self-Identified Gender:
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) DOB: REDACTED
Birth Sex: M Self-Identified Gender:
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 : XXXXXXXX

Enter ?? for more actions
VW View Rx FIL Fill Rx CSD Change Suspense Date
```

MP Medication Profile DC Discontinue Rx IGN Ignore Reject
 RES Resubmit Claim OVR Submit Override Codes
 Select Item(s): Quit//**FIL**

You are bypassing claims processing. Do you wish to continue (Y/N)? **No//Yes**

Enter your Current Signature Code: **SIGNATURE VERIFIED**
 TRICARE Justification: **Patient required medication**

- If the user does not hold the security key “PSO TRICARE/CHAMPVA”, an on screen alert to the user will display “Action Requires <PSO TRICARE/CHAMPVA> security key” as displayed in the 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) DOB: REDACTED
Birth Sex: M Self-Identified Gender:
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 Adtl Msg :
Reason Code :
DUR Text : _____

COMMENTS - REJECT.
- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

INSURANCE Information
Insurance : EXPRESS SCRIPTS
Contact :
BIN / PCN : ##### / XXXXXXXXXX
Group Number : #####
Cardholder ID : XXXXXXXX
+ Action Requires <PSO TRICARE/CHAMPVA> Security Key
VW View Rx FIL Fill Rx CSD Change Suspense Date
MP Medication Profile DC Discontinue Rx IGN Ignore Reject
RES Resubmit Claim OVR Submit Override Codes
Select Item(s): Next Screen//
```

- The person who 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) DOB: REDACTED
Birth Sex: M Self-Identified Gender:
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 : ##### / XXXXXXXXXX
Group Number : ####
Cardholder ID : XXXXXXXX
Enter ?? for more actions
VW View Rx          FIL Fill Rx          OVR Submit Override Codes
MP Medication Profile DC Discontinue Rx    CSD Change Suspense Date
Select Item(s): Quit// FIL  Fill Rx
                [Closing all rejections for prescription #####:
                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 : OPATIENT,FOUR(XXX-XX-XXXX)      DOB: REDACTED
Birth Sex: M          Self-Identified Gender:
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: OP PROVIDER, 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: OP PROVIDER, 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 : OP PATIENT, FOUR (XXX-XX-XXX) DOB: REDACTED
Birth Sex: M Self-Identified Gender:
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 Adtl Msg :
Reason Code :
DUR Text :

OTHER REJECTS
79 - Refill Too Soon

COMMENTS - REJECT
- JUL 30, 2008@14:32:16 - Automatically transferred due to override for reject code. (OPHARM, ONE)

+ Enter ?? for more actions
VW View Rx IGN Ignore Reject OVR Submit Override Codes
MP Medication Profile RES Resubmit Claim CSD Change Suspense Date
Select: Next Screen// 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
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) : _____

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST REF 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(###) DOB: REDACTED
Birth Sex: M Self-Identified Gender:
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 Adml 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	FLUORESCHEIN 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	FLUORESCHEIN 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)      REDACTED (##)
Birth Sex: M      Self-Identified Gender:
# 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.

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

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)

5 #####/#      OPPATIENT,THREE(0001)  CASTOR OIL 60ML          7/10/14  7/10/14
  Rx Status: ACTIVE
  Reason: eT :

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, see the *OneVA Pharmacy User Manual* located in the [PSO](#) section on the [VDL](#).



Note: To account for copay billing, insurance billing, and subsequent refill capabilities, all sites are asked to print to OneVA Pharmacy Reports and manually release prescriptions filled by other stations. Recommended frequency of printing report is no less than weekly.

The 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

```
FEE Patient Prescription Processing
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//

FEE Patient Prescription Processing
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
666018227	NO	NSC VETERAN

No Patient Warnings on file for PSOPATIENT,THREE.

Press RETURN to continue...

Search by: SITE

Select INSTITUTION NAME: ?

Answer with INSTITUTION NAME, or STATUS, or STATION NUMBER, or OFFICIAL VA NAME, or CURRENT LOCATION, or CODING SYSTEM/ID PAIR, or NPI, or STATUS, or NAME (CHANGED FROM), or CODING SYSTEM
Do you want the entire INSTITUTION List?

Search by: SITE

Select INSTITUTION NAME: DAYTON

- 1 REDACTED OH VAMC 552
- 2 REDACTED (NHC) OH NHC 5529AA
- 3 REDACTED NATIONAL CEMETARY OH NC 810
- 4 REDACTED BEACH OPC FL OPC 573BZ
- 5 REDACTED VETERANS NURSING HOME FL STNB 573DT

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	FLUTICASON PROPR 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	FLUTICASON PROPR 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): 3
```

Patch PSO*7*643 added new fields from the REMOTE PRESCRIPTION LOG File (#52.09) to the detailed display below. There are some minor differences between the request type(s) of outside refill/ outside partial fill for the host site and refill/partial fill for the dispensing site. The Internal Entry Number (IEN) of the Local (matched) drug displays next to the drug name in parenthesis for a Dispensing site entry. The Remote Filling Person, Remote Checking Pharmacist, OPAI Message ID, DISP ADD Name, and DISP ADD DNS are found for both Dispensing and Host site entries. Patch PSO*7*643 corrected an issue that caused the Quantity and Days Supply not to display in the detailed view.

Dispensing Site Entry Example:

```
OneVA PHARMACY RX DETAILS      Jul 27, 2016@11:37:33      Page: 1 of 1
Detailed report of Prescriptions dispensed for other Host Pharmacies

Request Date/Time:              JUL 27, 2016@11:36:17
Patient:                        PSOPATIENT,SIX
RX #:                           10001164
Rx Hosted at Site:              CHYSHR TEST LAB
Request Type:                    PARTIAL FILL
Requesting Pharmacist:          PHARMACIST, DAYTSHR
Quantity:                       10
Days Supply:                    10
Dispensed Date:                 JUL 27, 2016
Drug Name at Host site:         CETIRIZINE HCL 10MG TAB
Local (matched) drug:           CETIRIZINE HCL 10MG TAB (6519)
Cost of Local Refill/Partial:   $11.90
Remote Filling Person:          TECHNICIAN, DAYTSHR
Remote Checking Pharmacist:     PHARMACIST, DAYTSHR
OPAI Message ID:                98473896894
Disp ADD Name:                  OPTIFILL1
Disp ADD DNS:                   10.000.00.000

Enter ?? for more actions
Select Action:Quit//
```

The Host site entry will not have a value for the local (matched) drug label. The additional field displayed for the Host site will be the Host Refill IEN or the Host Partial IEN depending on whether a refill or partial fill was dispensed.

Host Site Entry Example:

```

OneVA PHARMACY RX DETAILS      Dec 13, 2022@11:42:08      Page: 1 of 1
Detailed report of All OneVA Pharmacy Prescription Activity

Request Date/Time:             DEC 13, 2021@11:35:09
Patient:                       ONEVAPATIENT,NINE
RX #:                           10001090
Rx Dispensed by Site:          DAYTSHR TEST LAB
Request Type:                   OUTSIDE REFILL
Requesting Pharmacist:         PHARMACIST,DAYTSHR
Quantity:                       30
Days Supply:                   30
Dispensed Date:                DEC 13, 2021
Drug Name at Host site:        FUROSEMIDE 20MG TAB
Local (matched) drug:
Cost of Local Refill/Partial:   $0.00
Remote Filling Person:         TECHNICIAN,DAYTSHR
Remote Checking Pharmacist:    PHARMACIST,DAYTSHR
Host Refill IEN:               1
OPAI Message ID:              98473896884
Disp ADD Name:                 OPTIFILL1
Disp ADD DNS:                  10.000.00.000

Enter ?? for more actions

Select Action:Quit//          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
OPPROVIDER30,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
OPPACIENT,TEN          #7

TAKE ONE TABLET BY MOUTH EVERY DAY FOR 7 DAYS

BACLOFEN 10MG TABS
OPPHARMACIST,FOUR          OPPHARMACIST,NINE
# of Refills: 7

Select LABEL DEVICE: LEXMARK5$PRT

LABEL(S) QUEUED TO PRINT

PRESCRIPTIONS SENT TO:
SCRIPTPRO1
#####          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 on Providers Placing Controlled Substances Orders

As part of patch PSO*7*545, the Kernel patch XU*8*688 introduced the DEA NUMBERS file (#8991.9) and the NEW DEA#'s multiple field (#53.21) in the NEW PERSON file (#200).

The DEA NUMBERS file (#8991.9) contains DEA numbers and details related to each DEA number. The fields are:

Field #	Field Name	Field Description
.01	DEA NUMBER	The Drug Enforcement Agency (DEA) number.
.02	BUSINESS ACTIVITY CODE	The DEA code used to identify various categories of DEA registrants.
.03	DETOX NUMBER	The ID number used to identify providers that are authorized to place an order for a Controlled Substance (CS) Detoxification drug.
.04	EXPIRATION DATE	The expiration date of the DEA number.
.06	USE FOR INPATIENT ORDERS?	A flag indicating the DEA number may be used for Inpatient Medications CS orders.
.07	TYPE	Identifies the DEA number as an individual or Institutional DEA number.
1.1	NAME (PROVIDER OR INSTITUTION)	The name of the facility or person who is associated with this DEA Number.
1.2	ADDITIONAL COMPANY INFO	The additional company information of the person or institution associated with this DEA Number.
1.3	STREET ADDRESS 1	The first line of the street address of the permanent address of the person or institution associated with this DEA Number.
1.4	STREET ADDRESS 2	The second line of the street address of the permanent address of the person or institution associated with this DEA Number.
1.5	CITY	The city of the permanent address of the person or institution related to this DEA Number.
1.6	STATE	The state of the permanent address of the person or institution associated with this DEA Number.
1.7	ZIP CODE	The postal ZIP code of the person or institution associated with this DEA Number.

Field #	Field Name	Field Description
2.1	SCHEDULE II NARCOTIC	Used to determine if the provider has privileges for Schedule II drugs.
2.2	SCHEDULE II NON-NARCOTIC	Used to determine if the provider has privileges for Schedule II non-narcotic drugs.
2.3	SCHEDULE III NARCOTIC	Used to determine if the provider has privileges for Schedule III drugs.
2.4	SCHEDULE III NON-NARCOTIC	Used to determine if the provider has privileges for Schedule III non-narcotic drugs.
2.5	SCHEDULE IV	Used to determine if the provider has privileges for Schedule IV drugs.
2.6	SCHEDULE V	Used to determine if the provider has privileges for Schedule V drugs.
10.1	LAST UPDATED BY	The person from the NEW PERSON file who last initiated an update to this DEA record.
10.2	LAST UPDATED DATE/TIME	The date/time of the last update to this DEA record.
10.3	LAST DOJ UPDATE DATE/TIME	The date/time the Department of Justice (DOJ) data was used to update this DEA record.

The NEW DEA#'s multiple field (#53.21) in the NEW PERSON file (#200) provides a way to link one or more DEA number to a provider's profile. The fields are:

Field #	Field Name	Field Description
.01	DEA NUMBER	The provider's Drug Enforcement Administration (DEA) number(s). The first letter for practitioners (physicians, dentists, veterinarians, pharmacies, etc.) is either "A", "B", "F", or "G". The first letter for mid-level practitioners (physician assistants, nurse practitioners, etc.) is usually an "M". This field is designed to accept any upper case alphabetic letter. The second letter should be the first letter of the practitioner's last name.
.02	INDIVIDUAL DEA SUFFIX	The provider's individual DEA suffix related to an institutional DEA number. This field is required if the DEA is an institutional DEA number.
.03	DEA POINTER	Pointer field to the DEA NUMBERS FILE #8991.9 that contains DEA number information, including controlled substance schedule permissions.

With the new file and fields, more than one DEA number may be assigned to a provider's profile.

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.

The fields above in the NEW PERSON file (#200) are used any time a provider uses a facility or institutional DEA number to place a controlled substance order.

- When a provider uses their VA number in conjunction with a local VA facility DEA number from the FACILITY DEA NUMBER field (#52) in the INSTITUTION file (#4) to authorize a controlled substance order, the provider's personal DEA schedules in the fields above are used, rather than the DEA schedules associated with the facility or institution. When a provider uses an institutional DEA number to authorize a controlled substance order, the provider's CS DEA schedules in the NEW PERSON file (#200) are used.

The fields in the DEA NUMBERS file (#8991.9) are used any time a provider uses an individual DEA number to place a controlled substance order.

- When a provider uses an individual DEA number (a DEA number that was created by the Drug Enforcement Agency specifically for their personal use) to authorize a controlled substance order, the CS DEA schedules in the DEA NUMBERS file (#8991.9) are used.

When placing a controlled substance 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."

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.)

Date      # of      # of
-----  Non-verified Rx's  Different Patients
07-27-98      1          1
05-18-99      2          1
06-22-00      2          2
TOTAL          5          4

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

Rx Verification by Clerk [PSO VR]

This option verifies prescriptions in the non-verified status by entering the clerk.

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
```

Finishing Person	Prescriptions 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 cleans 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  [#XXXXXXX]
      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) - XXXXXXXX

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 # 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	"Signature Failed- Order Auto Discontinued".	Hash Mismatch	Original digitally signed CS order placed in CPRS is checked to ensure data fields are not altered from the time the order is signed in CPRS and later selected for processing in backdoor pharmacy.
System	"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 <i>Enable/Disable Dosing Order Checks</i> [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 the ability to display individual FDA Medication Guides 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 #: XXXXXXXX
(1) *Orderable Item: ALPRAZOLAM TAB <DIN>
(2)      CMOP Drug: ALPRAZOLAM 0.25MG TAB <DIN>
(3)      NDC: XXXXX-XXXX-XX
(4)      *Dosage: 0.25 (MG)
          Verb: TAKE
          Dispense Units: 1
          Noun: TABLET
          *Route: ORAL
          *Schedule: TID
(5) 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://XX.X.XX.XX:XXXX/').

FDA MED GUIDE PRINT SERVER URL: http://XX.XXX.XXX.XX:XXXX/
```

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// xxxxxx  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: REDACTED//
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.

Chapter 31: Inbound ePrescribing

The Inbound ePrescribing functionality was released in December 2017 to enable the Department of Veterans Affairs (VA) to receive and process prescriptions from external providers. Given the complexity of this functionality it has been described in separate user manuals listed below, which can be found on the [VA Software Document Library](#) (VDL).

Inbound ePrescribing User Manual (Unit 1 & Unit 2)

Inbound ePrescribing User Manual (Unit 3 & Part 1)

Inbound ePrescribing User Manual (Unit 3 & Part 2)

Inbound ePrescribing User Manual (Unit 4 & Part 1)

Inbound ePrescribing User Manual (Unit 4 & Part 2)

Inbound ePrescribing User Manual (Unit 5 & Part 1)

Inbound ePrescribing User Manual (Unit 5 & Part 2)

Inbound ePrescribing User Manual (Unit 6)

Inbound ePrescribing User Manual (Unit 7 & Part 1) – eRx Holding Queue Processing Option – Part 1

Inbound ePrescribing User Manual (Unit 7 & Part 2) – eRx Holding Queue Processing Option – Part 2

Appendix A: Acronyms and Glossary

Acronyms and Abbreviations

The following table provides the list of acronyms used throughout the document along with their descriptions.

Table 16: 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
OIT	Office of Information and Technology
OMB	Office of Management and Budget
OP	Outpatient Pharmacy
OP	OneVA Pharmacy Partial Fill
OPAI	Outpatient Pharmacy Automated Interface
OR	OneVA Pharmacy Refill

Acronym/Abbreviation	Description
PII	Personally Identifiable Information
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
VCC	Veterans Contact Center
VDIF	Veterans Data Information Exchange
VDL	VA Software Document Library
VHA	Department of Veterans Health Administration
VistA	Veterans Health Information Systems and Technology Architecture
VSE-CS	VistA Scheduling Enhancements for Clinici Staff

Glossary

The following table provides definitions for common acronyms and terms used in this manual.

Table 17: 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.
Active/Parked	A prescription with this status is part of the patient's current expected medication regimen, but it will not be filled until requested.
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.
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

Acronym/Term	Definition
APSP	Originally Indian Health Service Pharmacy's name space now owned by the Outpatient Pharmacy software.
BSA	Body Surface Area. The Dubois formula is used to calculate the Body Surface Area using the following formula: $BSA (m^2) = 0.20247 \times \text{Height (m)}^{0.725} \times \text{Weight (kg)}^{0.425}$ The equation is performed using the most recent patient height and weight values that are entered into the vitals package. The calculation is not intended to be a replacement for independent clinical judgment.
Bypass	Take no action on a medication order.
CHAMPVA	CHAMPVA (Civilian Health and Medical Program of the Department of Veterans Affairs) is a cost-shared health benefits program established for the dependents and survivors of certain severely disabled and/or deceased veterans.
Clinical Reminder Order Checks (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

Acronym/Term	Definition
DoD	Department of Defense
DOJ	Department of Justice
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	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.

Acronym/Term	Definition
Medication Instruction File	The MEDICATION INSTRUCTION file is used by Unit Dose and Outpatient Pharmacy. It contains the medication instruction name, expansion and intended use.
Medication Order	A prescription
Medication Profile	A list of all active or recently canceled or expired prescriptions for a patient sorted either by date, drug, or classification. Unlike the action profile, this profile is for information only and does not provide a signature line for a physician to indicate action to be taken on the prescription.
Medication Routes File	The MEDICATION ROUTES file contains medication route names. The user can enter an abbreviation for each route to be used at the local site. The abbreviation will most likely be the Latin abbreviation for the term.
Med Route	The method in which the prescription is to be administered (e.g., oral, injection).
NCCC	Acronym for National Clozapine Coordinating Center.
Non-Formulary Drugs	The medications, which are defined as commercially available drug products not included in the VA National Formulary.
Non-VA Meds	Term that encompasses any Over-the-Counter (OTC) medications, Herbal supplements, Veterans Health Administration (VHA) prescribed medications but purchased by the patient at an outside pharmacy, and medications prescribed by providers outside VHA. All Non-VA Meds must be documented in patients' medical records.
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.

Acronym/Term	Definition
Pharmacy Narrative	OUTPATIENT NARRATIVE field that may be used by pharmacy staff to display information specific to the patient.
Polypharmacy	The administration of many drugs together.
POE	Acronym for Pharmacy Ordering Enhancements (POE) project. Patch PSO*7*46 contains all the related changes for Outpatient Pharmacy.
Possible Dosages	Dosages that have a numeric dosage and numeric dispense units per dose appropriate for administration. For a drug to have possible dosages, it must be a single ingredient product that is matched to the DRUG file. The DRUG file entry must have a numeric strength and the dosage form/unit combination must be such that a numeric strength combined with the unit can be an appropriate dosage selection.
Prescription	This term is now referred to throughout the software as medication orders.
Prescription Status	<p>A prescription can have one of the following statuses.</p> <p>Active - A prescription with this status can be filled or refilled.</p> <p>Canceled - This term is now referred to throughout the software as Discontinued. (See Discontinued.)</p> <p>Discontinued - This status is used when a prescription was made inactive either by a new prescription or by the request of a physician.</p> <p>Discontinued (Edit) - Discontinued (Edit) is the status used when a medication order has been edited and causes a new order to be created due to the editing of certain data elements.</p> <p>Deleted - This status is used when a prescription is deleted. Prescriptions are no longer physically deleted from the system, but marked as deleted. Once a prescription is marked deleted no access is allowed other than view.</p> <p>Expired - This status indicates the expiration date has passed.</p> <p>*Note: A prescription that was canceled or has expired more recently than the date specified by the cutoff date, typically 120 days in the past, can still be acted upon.</p> <p>Hold - A prescription that was placed on hold due to reasons determined by the pharmacist.</p> <p>Non-verified - There are two types of non-verified statuses. Depending on a site parameter, prescriptions entered by a technician do not become active until a pharmacist reviews them. Until such review, they remain non-verified and cannot be printed, canceled, or edited except through the Verification menu.</p> <p>The second non-verified status is given to prescriptions when a drug/drug interaction is encountered during the new order entry or editing of a prescription.</p> <p>Pending - A prescription that has been entered through OERR.</p> <p>Refill - A second or subsequent filling authorized by the provider.</p> <p>Suspended - A prescription that will be filled at some future date.</p>
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.

Acronym/Term	Definition
Schedule	The frequency by which the doses are to be administered, such as Q8H, BID, NOW, etc.
Sig	The instructions printed on the label.
Significant	The potential for harm is either rare or generally known so that it is reasonable to expect that all prescribers have taken this information into account.
Speed Actions	See Actions.
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, which 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.
VDIF	Veterans Data Integration and Federation
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.