OUTPATIENT PHARMACY (OP)

USER MANUAL

Version 7.0
December 1997

(Revised August 2003)

Department of Veterans Affairs
V*IST***A** Health Systems Design and Development

Revision History

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

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

Date	Revised Pages	Patch Number	Description
08/2003	i-xiv 2 191-210	PSO*7*145	Updated Related Manuals list to reflect latest version of the *Outpatient Pharmacy V. 7.0 Technical Manual/Security Guide* and to include *Transitional Pharmacy Benefit Release Notes Phase I* and *Transitional Pharmacy Benefit Installation Guide Phase I.* Added Appendix D, which includes information regarding Phase I of the Transitional Pharmacy Benefit (TPB) project. Added TPB entry to Index. Renumbered pages from Revision History through TOC and from Appendix D to end. Added TPB entry to Table of Contents.
07/2003	2 69b 76 89-90 124b 144-145 168b	PSO*7*131	Added information on changes to finishing and releasing orders associated with the Electronic Order Entry for Schedule II Controlled Substances pilot project Noted new “F”/Non Refillable code added to DEA SPECIAL HANDLING field. NOTE: Changes to finishing pending orders and releasing orders associated with digitally signed orders will not be fully functional beyond the pilot test sites at this time.

Date	Revised Pages	Patch Number	Description
07/2003	Title page, i-xiv 16 75-77d 89 104-105 129-131 144 149 160-161 168b

Date	Revised Pages	Patch Number	Description
12/2002	i, ii; (35)-36.	PSO*7*122	Edited Section 5.1.4. to reflect that the Register Clozapine Patient option no longer checks for ZIP code, date of birth, race, and ethnicity.
12/2002	i.-ii.; (vii)-viii 95-(96), 97-98, 99-(100); (193)-194 195-196	PSO*7*127	Updated Revision History page, Table of Contents, and Index. Added the Patient Address Changes Report option to the Supervisor menu. Inserted a new subsection for the Patient Address Changes Report option, causing subsections to renumber.
02/2002	i.-ii.; v.-xii.; (1)-2; 9-(10), 13-(16); 38a-38b 93-94, (147)-(150); 193-194; (3)-6, 75-(76), (161b)-162, 167-(168), (185)-186, 190a,190b.	PSO*7*97	Reissued corrected pages released with patches PSO*7*71 and PSO*7*80. Corrected PSO*7*80 release date and updated changed/unchanged pages listed in Revision History; Corrected Table of Contents typographical errors (Change Pages document only); Corrected revised date for Technical Manual/Security Guide; Corrected error in header (pp. 9, 13 and 15); Corrected page numbering in full manual only; Renumbered subsections and corrected order of options to match menu list (pp. 148-149 only); Update Index for Free Text Dosage Report; Corrected footer information (date and patch number).
11/26/01	i., (ii), v-xii (1)-4, 5-6 37-38f (55)-(58), 61-(64), 69, 69a-b, 70, 75-78, 91-94, (119)-120, (123)-124b, 125-126, (129)-132 (145)-148, 157-(162), 167-168b 185-186 190a-190b	PSO*7*71 PSO*7*80 PSO*7*71 PSO*7*80 PSO*7*71	Updated Revision History and Table of Contents. Combined Copay menu Remove Copay Charge and Reset Copay Status options into a Reset Copay Status/Cancel Charges option. Updated Output Reports Menu Completely revised Section 6. “Handling Copay Charges.” Inserted new “Free Text Dosage Report [PSO DOSAGE REPORT]” option and adjusted subsequent report sections. Updated sections in “Outpatient Pharmacy Manager Menu”, “Pharmacist Menu”, and “Pharmacy Technician’s Menu” on copay checks, release functions and activity logs. Included expanded explanation of the CONJUNCTION field and that a default QTY is not calculated when EXCEPT is used in a complex order. Included unchanged pages needed for two-sided copying (shown in parentheses). NOTE: Inserted additional text shifted some unchanged text from original page locations.
09/24/01	All pages	N/A	Complete revision. Added Revision History Page. Re-formatted the entire manual to meet national and local documentation standards. Updated *Rx Processing* and *Patient Prescription Processing* options to reflect changes from the Pharmacy Ordering Enhancements (POE) project, for Outpatient Pharmacy, patch PSO*7*46. Updated Appendix A, “Creating the Sig,” and added Appendix B, “Calculating Qty.”
12/97			Original release of V. 7.0 User Manual.

(Page intentionally added for two-sided copying.)

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 VA Medical Center.

(Page intentionally added for two-sided copying.)

Table of Contents

Introduction **1**
Special Notations and Conventions 1
Related Manuals 2

Outpatient Pharmacy V. 7.0 Menus **3**
Outpatient Pharmacy Manager Menu 3
Pharmacist Menu 7
Pharmacy Technician's Menu 9

List Manager **11**

Using List Manager with Outpatient Pharmacy **12**
Entering Actions 13
Outpatient Pharmacy Hidden Actions 14
Speed Actions 15
Other Outpatient Pharmacy ListMan Actions 15
Other Screen Actions 16

SECTION ONE: Outpatient Pharmacy Manager 17

Outpatient Pharmacy Manager Menu 19

1. Using the Archive Menu Option 20
1.1. Find 20
1.2. Save to Tape 20
1.3. Tape Retrieval 21
1.4. Archive to File 21
1.5. File Retrieval 22
1.6. Purge *Temporarily Out of Order* 23
1.7. List One Patient's Archived Rx's 24
1.8. Print Archived Prescriptions 24

2. Autocanceling 25

3. Using the Bingo Board Menu 25
3.1. Bingo Board Manager (BM) 26
3.1.1. Enter/Edit Display 26
3.1.2. Auto-Start Enter/Edit 28
3.1.3. Print Bingo Board Statistics 28
3.1.4. Print Bingo Board Wait Time 29
3.1.5. Purge Bingo Board Data 30
3.1.6. Start Bingo Board Display 31
3.1.7. Stop Bingo Board Display 31
3.2. Bingo Board User (BU) 32
3.2.1. Enter New Patient 32
3.2.2. Display Patient's Name on Monitor 32
3.2.3. Remove Patient's Name from Monitor 32
3.2.4. Status of Patient's Order 33

4. Changing the Label Printer 34

5. Controlling the Dispensing of Clozapine 34
5.1. Clozapine Pharmacy Manager 34
5.1.1. Display Lab Tests and Results 35
5.1.2. Edit Data for a Patient in the Clozapine Program 35
5.1.3. List of Override Prescriptions 35
5.1.4. Register Clozapine Patient 36

6. Handling Copay Charges 37

7. Evaluating Drug Usage 39
7.1. DUE Supervisor 39
7.1.1. Enter a New Answer Sheet 39
7.1.2. Edit an Existing Answer Sheet 39
7.1.3. Create/Edit a Questionnaire 40
7.1.4. Batch Print Questionnaires 40
7.1.5. DUE Report 40

8. Enter/Edit Clinic Sort Groups 40

9. External Interface Menu 41
9.1. Purge External Batches 41
9.2. Reprint External Batches 42
9.3. View External Batches 43

10. Label/Profile Monitor Reprint 44

11. Implementing and Maintaining Outpatient Pharmacy 44
11.1. Maintenance (Outpatient Pharmacy) 44
11.1.1. Site Parameter Enter/Edit 44
11.1.2. Edit Provider 46
11.1.3. Add New Providers 46
11.1.4. Queue Background Jobs 46
11.1.5. Autocancel Rx's on Admission 47
11.1.6. Bingo Board Manager (BM) 47
11.1.7. Edit Data for a Patient in the Clozapine Program 52
11.1.8. Enter/Edit Clinic Sort Groups 53
11.1.9. Initialize Rx Cost Statistics 53
11.1.10. Edit Pharmacy Intervention 54
11.1.11. Delete Intervention 54
11.1.12. Auto-delete from Suspense 54
11.1.13. Delete a Prescription 54
11.1.14. Expire Prescriptions 54
11.1.15. Manual Auto Expire Rxs 55
11.1.16. Prescription Cost Update 55
11.1.17. Purge Drug Cost Data 55
11.1.18. Purge External Batches 56
11.1.19. Recompile AMIS Data 56

12. Medication Profile 56

13. About the Output Reports Menu 57
13.1. Action Profile (132 COLUMN PRINTOUT) 57
13.2. Alpha Drug List and Synonyms 58
13.3. AMIS Report 58
13.4. CMOP Controlled Substance Rx Dispense Report 59
13.5. Commonly Dispensed Drugs 59
13.6. Cost Analysis Reports 59
13.6.1. Clinic Costs 59
13.6.2. Division Costs by Drug 59
13.6.3. Drug Costs 59
13.6.4. Drug Costs by Division 60
13.6.5. Drug Costs by Division by Provider 60
13.6.6. Drug Costs by Provider 60
13.6.7. High Cost Rx Report 60
13.6.8. Patient Status Costs 60
13.6.9. Pharmacy Cost Statistics Menu 60

13.6.10. Provider by Drug Costs ... 61
13.6.11. Provider Costs ... 61
13.6.12. Request Statistics ... 61
13.7. Daily AMIS Report ... 61
13.8. Drug List By Synonym ... 61
13.8a Free Text Dosage Report ... 61
13.9. Inactive Drug List ... 62
13.10. List Prescriptions on Hold ... 62
13.11. Management Reports Menu ... 62
13.11.1. Daily Management Report Menu ... 63
13.11.2. Date Range Recompile Data ... 63
13.11.3. Initialize Daily Compile ... 64
13.11.4. Monthly Management Report Menu ... 64
13.11.5. One Day Recompile Data ... 65
13.11.6. Purge Data ... 65
13.12. Medication Profile ... 65
13.13. Monthly Drug Cost ... 66
13.14. Narcotic Prescription List ... 66
13.15. Non-Formulary List ... 66
13.16. Poly Pharmacy Report ... 66
13.17. Released and Unreleased Prescription Report ... 66

14. Pharmacy Intervention Menu ... 67
14.1. Enter Pharmacy Intervention ... 67
14.2. Edit Pharmacy Intervention ... 67
14.3. Print Pharmacy Intervention ... 67
14.4. Delete Intervention ... 67
14.5. View Intervention ... 68

15. Processing Drug/Drug Interactions ... 68

16. Releasing Medication ... 69

17. Returning Medication to Stock ... 70

18. Processing a Prescription ... 71
18.1. Rx (Prescriptions) ... 71
18.1.1. Patient Prescription Processing ... 71
18.1.2. Barcode Rx Menu ... 86
18.1.3. Complete Orders from OERR ... 86
18.1.4. Discontinue Prescription(s) ... 93
18.1.5. Edit Prescriptions ... 93
18.1.6. List One Patient's Archived Rx's ... 93
18.1.7. View Prescriptions ... 93
18.1.8. Reprint an Outpatient Rx Label ... 94

19. Using the Supervisor Menu 95
19.1. Supervisor Functions 95
19.1.1. Add New Providers 95
19.1.2. Daily Rx Cost 95
19.1.3. Delete a Prescription 96
19.1.4. Edit Provider 96
19.1.5. Initialize Rx Cost Statistics 96
19.1.6. Inter-Divisional Processing 96
19.1.7. Inventory 97
19.1.8. Look-up Clerk by Code 97
19.1.9. Monthly Rx Cost Compilation 97
19.1.10. Patient Address Changes Report 97
19.1.11. Pharmacist Enter/Edit 98
19.1.12. Purge Drug Cost Data 98
19.1.13. Recompile AMIS Data 99
19.1.14. Site Parameter Enter/Edit 99
19.1.15. View Provider 99

20. Using the Suspense Functions 100
20.1. Auto-delete from Suspense 100
20.2. Change Suspense Date 101
20.3. Count of Suspended Rx's by Day 101
20.4. Delete Printed Rx's from Suspense 102
20.5. Log of Suspended Rx's by Day (this Division) 102
20.6. Print from Suspense File 102
20.7. Pull Early from Suspense 103
20.8. Reprint Batches from Suspense 104

21. Update Patient Record 104

22. Verifying Prescriptions 104
22.1. List Non-Verified Scripts 105
22.2. Non-Verified Counts 105
22.3. Rx Verification by Clerk 105

SECTION TWO: Pharmacist Menu **107**

Pharmacist Menu **109**

23. Using the Bingo Board **111**
23.1. Bingo Board User 111
23.1.1. Enter New Patient 111
23.1.2. Display Patient's Name on Monitor 112
23.1.3. Remove Patient's Name from Monitor 112
23.1.4. Status of Patient's Order 112

24. Changing the Label Printer **113**

25. Changing the Suspense Date **113**

26. Evaluating Drug Usage **114**
26.1. DUE Supervisor 114
26.1.1. Enter a New Answer Sheet 114
26.1.2. Edit an Existing Answer Sheet 114
26.1.3. Create/Edit a Questionnaire 114
26.1.4. Batch Print Questionnaires 115
26.1.5. DUE Report 115

27. Enter/Edit Clinic Sort Groups **116**

28. Using the Interface Menu **117**
28.1. External Interface Menu 117
28.1.1. Purge External Batches 117
28.1.2. Reprint External Batches 117
28.1.3. View External Batches 118

29. Medication Profile **120**

30. Pharmacy Intervention **121**
30.1. Pharmacy Intervention Menu 121
30.1.1. Enter Pharmacy Intervention 121
30.1.2. Edit Pharmacy Intervention 121
30.1.3. Print Pharmacy Intervention 121
30.1.4. Delete Intervention 122
30.1.5. View Intervention 122

31. Print from Suspense File **122**

32. Process Drug/Drug Interactions **123**

33. Pull Early from Suspense **123**

34. Releasing Medication **124**

35. Returning Medication to Stock **125**

36. Ordering/Processing a Prescription 125
36.1. Rx (Prescriptions) 125
36.1.1. Patient Prescription Processing 126
36.1.2. Barcode Rx Menu 141
36.1.3. Complete Orders from OERR 142
36.1.4. Discontinue Prescription(s) 148
36.1.5. Edit Prescriptions 148
36.1.6. List One Patient's Archived Rx's 148
36.1.7. Reprint an Outpatient Rx Label 148
36.1.8. View Prescriptions 149

37. Update Patient Record 149

38. Verifying Prescriptions 149
38.1. Verification 149
38.1.1. List Non-Verified Scripts 150
38.1.2. Non-Verified Counts 150
38.1.3. Rx Verification by Clerk 150

SECTION THREE: Pharmacy Technician's Menu 151

Pharmacy Technician's Menu 153

39. Using the Bingo Board 154
39.1. Bingo Board User 154
39.1.1. Enter New Patient 154
39.1.2. Display Patient's Name on Monitor 154
39.1.3. Remove Patient's Name from Monitor 154
39.1.4. Status of Patient's Order 155

40. Changing the Label Printer 156

41. Creating, Editing, and Printing a DUE Answer Sheet 156
41.1. DUE User 156
41.1.1. Enter a New Answer Sheet 156
41.1.2. Edit an Existing Answer Sheet 156
41.1.3. Batch Print Questionnaires 157

42. Medication Profile 157

43. Processing a Prescription 158

44. Pull Early from Suspense 167

45. Releasing Medication 168

46. Update Patient Record 168b

Glossary 169

Appendix A 175
Creating A Sig Using Information From CPRS Order Entry 175

Appendix B 185
Calculating Default Quantity (QTY) values 185

Appendix C 190c
Tips for Working with Laser Printed Prescription Labels 190c

Appendix D 191
Transitional Pharmacy Benefit (TPB) Phase I (PSO*7*145 and SD*5.3*300) 191

Index 205

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.

Special Notations and Conventions

Certain symbols and formats are used in this manual to make it easier to read.

Required security key. This picture is shown for options that are locked and cannot be used unless the user holds the correct security key.

Take note. Helpful hints and information will be noted with this picture.

Important notices may be enclosed in a box.

- Menu options will be shown in italics, for example: *Patient Prescription Processing.*

- Screen captures, or examples of what the user should see on the computer screen, will be shaded.

- Responses typed in by the user will be shown as bolded and underlined.

```
Select Orders by number:  (1-6): 5
```

- <**Enter**> will be shown on examples when the user can press the Enter or Return key instead of typing in a response. Pressing the Enter key will accept any default value shown to the left of the double slash (//).

```
All Patients or Single Patient:  (A/S/E): SINGLE// <Enter> SINGLE
```

- One question mark will show a brief explanation. Two question marks will display more information and hidden actions. Three question marks will provide the most detail, which may include a list of possible responses.

Related Manuals

Outpatient Pharmacy V. 7.0 Release Notes
Outpatient Pharmacy V. 7.0 Technical Manual/Security Guide (revised November 2001)
Computerized Patient Record System Installation Guide
Computerized Patient Record System Set-up Guide
Pharmacy Ordering Enhancements (POE) Implementation Guide
Pharmacy Ordering Enhancements (POE) Installation Guide
Pharmacy Ordering Enhancements (POE) Phase Two Release Notes
Outpatient Medication Copay Release Notes
Laser Printed Prescription Labels with PMI Sheets Phase I Release Notes
Electronic Order Entry for Schedule II Controlled Substances Release Notes
Transitional Pharmacy Benefit Release Notes Phase I
Transitional Pharmacy Benefit Installation Guide Phase I

Outpatient Pharmacy V. 7.0 Menus

Outpatient Pharmacy Manager Menu

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

Autocancel Rx's on Admission

Bingo Board ...
- BM Bingo Board Manager ...
  - Enter/Edit Display
  - Auto-Start Enter/Edit
  - Print Bingo Board Statistics
  - Print Bingo Board Wait Time
  - Purge Bingo Board Data
  - Start Bingo Board Display
  - Stop Bingo Board Display
- BU Bingo Board User ...
  - Enter New Patient
  - Display Patient's Name on Monitor
  - Remove Patient's Name from Monitor
  - Status of Patient's Order

Change Label Printer

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

Copay Menu ...
- CHAMPUS Billing Exemption
- Exempt Rx Patient Status from Copayment
- Reset Copay Status/Cancel Charges

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

Enter/Edit Clinic Sort Groups
External Interface Menu ...
- Purge External Batches
- Reprint External Batches
- View External Batches

Label/Profile Monitor Reprint
Maintenance (Outpatient Pharmacy) ...
- Site Parameter Enter/Edit
- Edit Provider
- Add New Providers
- Queue Background Jobs
- Autocancel Rx's on Admission
- Bingo Board Manager ...
  - Enter/Edit Display
  - Auto-Start Enter/Edit
  - Print Bingo Board Statistics
  - Print Bingo Board Wait Time
  - Purge Bingo Board Data
  - Start Bingo Board Display
  - Stop Bingo Board Display
- Edit Data for a Patient in the Clozapine Program
- Enter/Edit Clinic Sort Groups
- Initialize Rx Cost Statistics
- Edit Pharmacy Intervention
- Delete Intervention
- Auto-delete from Suspense
- Delete a Prescription
- Expire Prescriptions
- Manual Auto Expire Rxs
- Prescription Cost Update
- Purge Drug Cost Data
- Purge External Batches
- Recompile AMIS Data

Medication Profile
Output Reports...
- Action Profile (132 COLUMN PRINTOUT)
- Alpha Drug List and Synonyms
- AMIS Report
- CMOP Controlled Substance Rx Dispense Report
- Commonly Dispensed Drugs
- Cost Analysis Reports ...
  - Clinic Costs
  - Division Costs by Drug
  - Drug Costs
  - Drug Costs by Division
  - Drug Costs by Division by Provider

- Drug Costs by Provider
- High Cost Rx Report
- Patient Status Costs
- Pharmacy Cost Statistics Menu ...
  - Pharmacy Statistics
  - Sort Statistics By Division
- Provider by Drug Costs
- Provider Costs
- Request Statistics

Daily AMIS Report
Drug List By Synonym
Free Text Dosage Report
Inactive Drug List
List Prescriptions on Hold
Management Reports Menu ...

- Daily Management Report Menu ...
  - All Reports
  - Cost of Prescriptions
  - Count of Prescriptions
  - Intravenous Admixture
  - Type of Prescriptions Filled
- Date Range Recompile Data
- Initialize Daily Compile
- Monthly Management Report Menu ...
  - All Reports
  - Cost of Prescriptions
  - Count of Prescriptions
  - Intravenous Admixture
  - Type of Prescriptions Filled
- One Day Recompile Data
- Purge Data

Medication Profile
Monthly Drug Cost
Narcotic Prescription List
Non-Formulary List
Poly Pharmacy Report
Released and Unreleased Prescription Report

Pharmacy Intervention Menu ...

Enter Pharmacy Intervention
Edit Pharmacy Intervention
Print Pharmacy Intervention
Delete Intervention
View Intervention

Process Drug/Drug Interactions
Release Medication
Return Medication to Stock

Rx (Prescriptions) ...
- Patient Prescription Processing
- Barcode Rx Menu ...
  - Barcode Batch Prescription Entry
  - Check Quality of Barcode
  - Process Internet Refills
- Complete Orders from OERR
- Discontinue Prescription(s)
- Edit Prescriptions
- List One Patient's Archived Rx's
- Reprint an Outpatient Rx Label
- View Prescriptions

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
- Monthly Rx Cost Compilation
- Patient Address Changes Report
- Pharmacist Enter/Edit
- Purge Drug Cost Data
- Recompile AMIS Data
- Site Parameter Enter/Edit
- View Provider

Suspense Functions ...
- Auto-delete from Suspense
- Change Suspense Date
- Count of Suspended Rx's by Day
- Delete Printed Rx's from Suspense
- Log of Suspended Rx's by Day (this Division)
- Print from Suspense File
- Pull Early from Suspense
- Reprint Batches from Suspense

Update Patient Record

Verification ...
- List Non-Verified Scripts
- Non-Verified Counts
- Rx Verification by Clerk

Pharmacist Menu

Bingo Board User ...
- Enter New Patient
- Display Patient's Name on Monitor
- Remove Patient's Name from Monitor
- Status of Patient's Order

Change Label Printer
Change Suspense Date
DUE Supervisor ...
- 1 Enter a New Answer Sheet
- 2 Edit an Existing Answer Sheet
- 3 Create/Edit a Questionnaire
- 4 Batch Print Questionnaires
- 5 DUE Report

Enter/Edit Clinic Sort Groups
External Interface Menu ...
- Purge External Batches
- Reprint External Batches
- View External Batches

Medication Profile
Pharmacy Intervention Menu ...
- Enter Pharmacy Intervention
- Edit Pharmacy Intervention
- Print Pharmacy Intervention
- Delete Intervention
- View Intervention

Print from Suspense File
Process Drug/Drug Interactions
Pull Early from Suspense
Release Medication
Return Medication to Stock
Rx (Prescriptions) ...
- Patient Prescription Processing
- Barcode Rx Menu ...
  - Barcode Batch Prescription Entry
  - Check Quality of Barcode
  - Process Internet Refills
- Complete Orders from OERR
- Discontinue Prescription(s)
- Edit Prescriptions
- List One Patient's Archived Rx's
- Reprint an Outpatient Rx Label
- View Prescriptions

Update Patient Record

Verification ...

- List Non-Verified Scripts
- Non-Verified Counts
- Rx Verification by Clerk

Pharmacy Technician's Menu

Bingo Board User ...
- Enter New Patient
- Display Patient's Name on Monitor
- Remove Patient's Name from Monitor
- Status of Patient's Order

Change Label Printer

DUE User ...
1. Enter a New Answer Sheet
2. Edit an Existing Answer Sheet
3. Batch Print Questionnaires

Medication Profile

Patient Prescription Processing

Pull Early from Suspense

Release Medication

Update Patient Record

(Page intentionally added for two-sided copying)

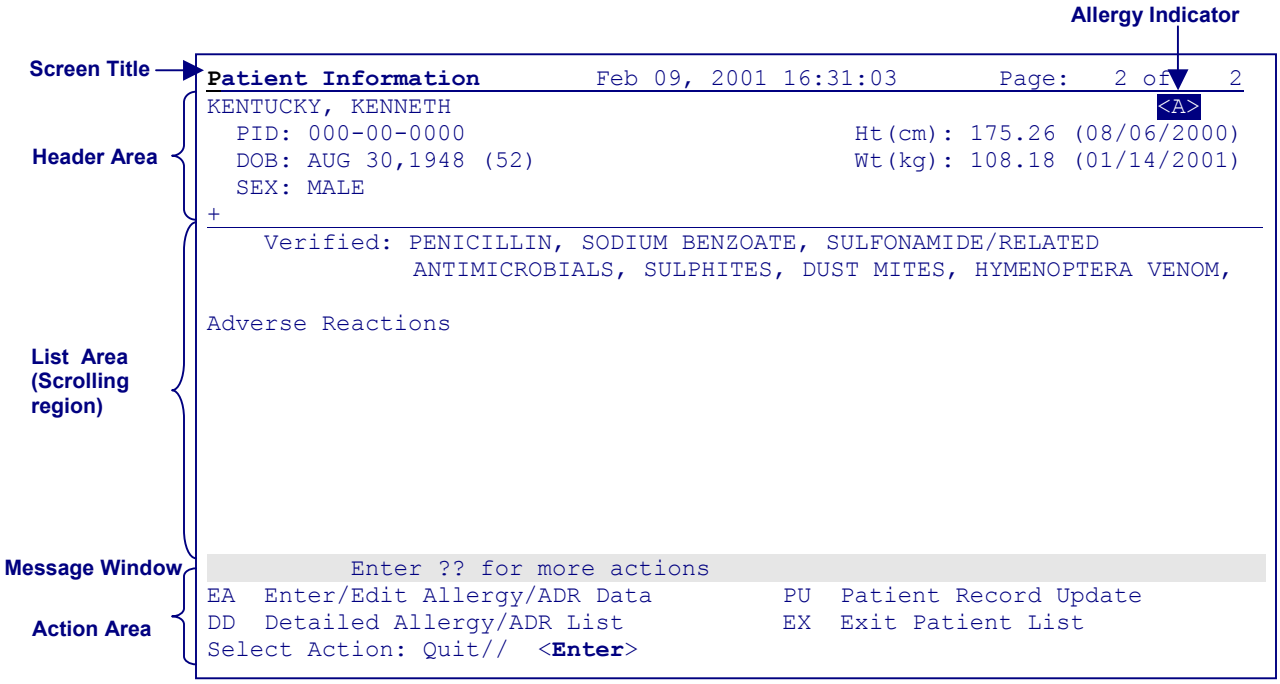
List Manager

The screen displayed when processing an order has changed dramatically from the previous version. 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.

Outpatient List Manager



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.

Header area: The header area is a "fixed" (non-scrollable) area that displays patient information.

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. Outpatient Pharmacy hidden actions are displayed with the letters (OP) next to the action.

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. Outpatient Pharmacy hidden actions are displayed with the letters (OP) next to the action.

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 OP 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 prescription profile screen and can only be applied to one order at a time.

Activity Logs [AL]	displays the Activity Logs.
Copy [CO]	allows the user to copy and edit an order.
DIN	displays available drug restriction/guideline information for the Dispense Drug and Orderable Item associated with the selected medication order.
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], or Display Orders' Statuses [DO].
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.
Unhold [UH]	removes an order from a hold status.
Verify [VF]	allows the pharmacist to verify an order a pharmacy technician has entered.

Speed Actions

These OP 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.

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.
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.

Other Outpatient Pharmacy ListMan Actions

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

Other Screen Actions

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, birthdate, address, phone, and outpatient narrative. Patient data can also be updated using the *Update Patient Record* menu option. If implementing Other Language Modifications, either can be used to set a patient's other language preference.
New Order [NO]	allows new orders to be entered for the patient.
Exit Patient List [EX]	Exit patient's Patient Information screen so that a new patient can be selected.

SECTION ONE: Outpatient Pharmacy Manager

(Page intentionally added for two-sided copying.)

Outpatient Pharmacy Manager Menu

The *Outpatient Pharmacy Manager* menu [PSO MANAGER] should be assigned to supervisors, package coordinators, and members of the Automated Data Processing (ADP)/Information Resources Management Service (IRMS) staff.

The Outpatient Pharmacy package provides a method for managing the medications given to veterans who have visited a clinic or who have received prescriptions upon discharge from the hospital. Prescription labels are automatically generated and refill request forms are printed. Medication histories are kept online to permit checks for potential interactions. Profiles can be generated to assist the clinician in managing the patient's medication regimen. Management reports aid the pharmacy in controlling inventory and costs.

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

The following menu contains the options for the Outpatient Pharmacy manager.

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

1. Using the Archive Menu Option

Archiving
[PSO ARCHIVE]

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

There are eight options on the *Archiving* menu.

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

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

1.1. Find
[PSO ARCHIVE FIND]

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

1.2. Save to Tape
[PSO ARCHIVE TAPE SAVE]

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

1.3. Tape Retrieval
[PSO ARCHIVE TAPE RETRIEVE]

This option reads information from the tape and prints a summary of all prescriptions for the selected patient. This printed copy should be directed to a printer with 132-column width. Since the retrieval option reads the index first to find the patient, the tape must be rewound before each retrieval. It should be emphasized that this retrieval simply prints the information about the prescriptions. It does not restore this information to the on-line database.

1.4. Archive to File
[PSO ARCHIVE FILE SAVE]

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

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

Example: Archive to File

```
Select Outpatient Pharmacy Manager Option: ARCHiving

Select Archiving Option: ARCHIve to File



13 Rx'S will be archived. Ok to continue Y/N? NO// <Enter> YES

Do you want a hardcopy of your archived prescriptions? NO// <Enter>


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


Recording information.............

Select Archiving Option: <Enter>
```

1.5. File Retrieval
[PSO ARCHIVE FILE RETRIEVE]

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

Example: File Retrieval

```
Select Archiving Option: FILE Retrieval



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



Output Device: [Select Print Device]


Do you want to print the file index? YES
&^NEW
GEORGIA,PAUL%010405376^4541C,5107A,
COLORADO,ALBERT.%721010168^5269A,
KANSAS,THOMAS.%215664701^4713,
KENTUCKY,KENNETH%456456678^628,629,630,631,981B,
ARKANSAS,MARY.%123092345^4778,
OHIO,RAYMOND%112334445^916A,
WASHINGTON,GEORGE%109287376^4631,
HAWAII,LOU W%321321321^450,
!


Enter Patient Name : KENTUCKY,KENNETH   01-01-09     456456678     NO     NSC
VETERAN


THE FOLLOWING SCRIPTS WERE ARCHIVED FOR :


KENTUCKY,KENNETH(456456678) - 628,629,630,631,981B,

KENTUCKY,KENNETH                                      ID#: 456456678      ELIG:

456 STREET                                              DOB: 01-01-1909
PHONE: 3456789
CARBON HILL
ALABAMA   32423
CANNOT USE SAFETY CAPS.
DISABILITIES:

REACTIONS: UNKNOWN
```

```
                            RX RETRIEVAL FOR KENTUCKY,KENNETH
07/17/97  PAGE 1


Rx: 628  DRUG: ACETAMINOPHEN W/CODEINE 15MG TAB             TRADE NAME: QTY: 90
30 DAY SUPPLY
       SIG: T1 TAB 23D PRN
    LATEST: JUN 8,1995               # OF REFILLS: 5  REMAINING: 5    PROVIDER:
TULSA,LARRY
    ISSUED: JUN 8,1995                     CLINIC: DR. ALBANY          DIVISION:
GENERAL HOSPITAL
    LOGGED: JUN 8,1995                    ROUTING: Window            CLERK CODE:
ATHENS,DEBBIE
   EXPIRES:                                   CAP: NON-SAFETY            STATUS:
Active
    FILLED: JUN 8,1995  PHARMACIST:                        VERIFYING PHARMACIST:
LOT #:
     NEXT: JUN 28,1995                     COPAY TYPE: PSO NSC RX COPAY NEWCOPAY
TRANSACTION #:
   REMARKS: New Order Created due to the editing of Rx # 479


                            RX RETRIEVAL FOR KENTUCKY,KENNETH
07/17/97  PAGE 2


Rx: 629       DRUG: ACETAMINOPHEN W/CODEINE 15MG TAB             TRADE NAME:
QTY: 90     30 DAY SUPPLY
       SIG: T1 TAB 23D PRN
    LATEST: JUN 8,1995               # OF REFILLS: 5  REMAINING: 5    PROVIDER:
TULSA,LARRY
    ISSUED: JUN 8,1995                     CLINIC: DR. ALBANY          DIVISION:
GENERAL HOSPITAL
    LOGGED: JUN 8,1995                    ROUTING: Window            CLERK CODE:
ATHENS,DEBBIE
   EXPIRES:                                   CAP: NON-SAFETY            STATUS:
Active
    FILLED: JUN 8,1995  PHARMACIST:                        VERIFYING PHARMACIST:
LOT #:
     NEXT: JUN 28,1995                     COPAY TYPE: PSO NSC RX COPAY NEWCOPAY
TRANSACTION #:
   REMARKS: New Order Created due to the editing of Rx # 479
```

```
LABEL LOG
#     DATE          REFERENCE    PRINTED BY                      COMMENT
==============================================================================
1     JUN 8,1995    ORIGINAL     ATHENS,DEBBIE                From RX number 629
```

[This report has been abbreviated to save space.]

1.6. Purge *Temporarily Out of Order* [PSO ARCHIVE PURGE]

NOTE: This option is inactivated until further notice.

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

1.7. List One Patient's Archived Rx's [PSO ARCHIVE LIST RX'S]

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

1.8. Print Archived Prescriptions [PSOARINDEX]

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

2. Autocanceling

Autocancel Rx's on Admission
[PSO AUTOCANCEL1]

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

3. Using the Bingo Board Menu

Bingo Board
[PSO BINGO BOARD]

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

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

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

3.1. Bingo Board Manager (BM) [PSO BINGO MANAGER]

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

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

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

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

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

3.1.1. Enter/Edit Display [PSO BINGO ENTER/EDIT DISPLAY]

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

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

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

Example: Enter/Edit Display

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

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

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

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

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

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

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

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

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

A time that is at least 2 minutes in the future must be entered at the "QUEUED TO RUN AT WHAT TIME" prompt. The software will convert it to today's date with the time entered. For example, to queue it to run later today and the current time is 8:00am, a time like 9:30am can be entered. It will default to today's date. To queue for tomorrow, enter a time like **T+1@00:00am/pm**. For example, to queue it for 8:30am and the current time is 3:00pm, **T+1(or tomorrow's date)@8:30am** must be entered.

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

3.1.2. Auto-Start Enter/Edit [PSO BINGO INITIALIZE]

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

Example: Auto-Start Enter/Edit

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

You want to edit Display Group(s) Start/Stop times? NO// Y  YES
Select GROUP DISPLAY NAME: MAIN

Enter Stop Time: 4:00PM// <Enter>

Select GROUP DISPLAY NAME: <Enter>
```

[See Enter/Edit Display option on the previous page for an example of the auto-start screen.]

3.1.3. Print Bingo Board Statistics [PSO BINGO REPORT PRINT]

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

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

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

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

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

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

Example: Print Bingo Board Wait Time

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

                  BINGO BOARD CONTROL PANEL

Select Bingo Board Manager Option: PRINT
    1    Print Bingo Board Statistics
    2    Print Bingo Board Wait Time
CHOOSE 1-2: 2  Print Bingo Board Wait Time
DEVICE: [Select Print Device]
.......................................(report follows).......................................

BINGO BOARD WAIT TIME PRINTOUT                MAY 21,1997  15:34    PAGE 1
                              TIME      TIME                          WAIT
NAME                            IN       OUT         Rx#              TIME
---------------------------------------------------------------------------

        DISPLAY: WAITING ROOM
VIRGINIA,SAMUEL               1503      1504         2004342            1
                              1503      1504         2004343            1
                              1503      1504         2004345            1
                              1509      1512         2004346            3
INDIANA,SUSAN                 1509      1512         2004350            3
                              1509      1512         2004354            3
MISSOURI,RAY                  1509      1512         2002744            3
                              1509      1512         2003376            3
                              1509      1512         2003377            3
MARYLAND, MARK                1524      1527         2002403            3
                              1524      1527         2003034            3
NEVADA,NORMAN                 1524      1527         2002365            3
                              1524      1527         2002573            3
                                                                     -----
TOTAL                                                                   33
COUNT                                                                   13
MEAN                                                                     3
MINIMUM                                                                  1
MAXIMUM                                                                  3
DEV.                                                                     1
```

3.1.5. Purge Bingo Board Data [PSO BINGO PURGE]

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

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

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

3.1.6. Start Bingo Board Display [PSO BINGO START]

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

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

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

3.1.7. Stop Bingo Board Display [PSO BINGO STOP]

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

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

3.2. Bingo Board User (BU) [PSO BINGO USER]

This menu enables the bingo board display to be used. 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.

3.2.1. Enter New Patient [PSO BINGO 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 appears if ticket number was chosen as the method of display in the *Enter/Edit Display* option on the *Bingo Board Manager* menu. The ticket number will be entered first, and at the next prompt each of the prescription numbers for that patient will be entered.

3.2.2. Display Patient's Name on Monitor [PSO BINGO DISPLAY PATIENT]

Use this option to begin displaying the name or number of a patient whose prescription is ready. The message, "PRESCRIPTIONS ARE READY FOR:" has been added as fixed text to the display screen.

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

After the patient picks up the prescription, the name or ticket number can be removed from the display either manually or through the barcode reader.

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

3.2.4. Status of Patient's Order [PSO BINGO STATUS]

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

1) Pending - Active order input via CPRS that is in the PENDING OUTPATIENT ORDERS file.

2) Being Processed - Order that is in the PATIENT NOTIFICATION (Rx READY) file but not displayed.

3) Ready For Pickup - Order that is in the PATIENT NOTIFICATION (Rx READY) file and is being displayed.

4) 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: KENTUCKY,KENNETH       02-23-53    231447629    NO   NSC
VETERAN


        KENTUCKY,KENNETH has the following orders for 10/31/96


Being Processed: ***Entered on OCT 31, 1996***
     Division: GENERAL HOSPITAL            Time In: 10:27    Time Out:
     Rx #: 500416,

Pending:
     Orderable Item: ACETAMINOPHEN              Provider: RICHMOND, ARTHUR
     Entered By: TOPEKA,MARK                   Time In: 10/31/96@06:46
     Drug: ACETAMINOPHEN 325MG TAB UD           Routing: MAIL

Ready For Pickup:
     Division: GENERAL HOSPITAL   Time In: 10:36    Time Out: 10:46
     Rx #: 1022731,


Enter Patient Name: <Enter>
```

4. Changing the Label Printer

Change Label Printer
[PSO CHANGE PRINTER]

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

5. Controlling the Dispensing of Clozapine

5.1. Clozapine Pharmacy Manager
[PSOL MANAGER]

Use this menu to control the dispensing of Clozapine. The manufacturer requires this dispensing information for Clozapine patients.

This option requires a security key, PSOLOCKCLOZ. All members of the Clozapine treatment team must be entered as users on the local system and must be given this key. All pharmacists who have the ability to override the lockouts in this option must also hold the key. These pharmacists should be identified by the pharmacy service representative of the Clozapine treatment team.

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

Before using the Clozapine options, pharmacy users must enter the site Drug Enforcement Agency (DEA) number and the site name (as listed in the OUTPATIENT SITE file) for each outpatient site, which will dispense Clozapine. The data is entered through the *Enter Facility Data for Clozapine* option, which is part of the Mental Health V. 5.01 (Patch YS*5.01*22) software product. At this time, not all dependent outpatient clinics are listed in this file. Use the name of the primary site if there is a dependent outpatient clinic dispensing Clozapine.

Any physician writing a prescription for Clozapine must have a DEA number entered in the NEW PERSON file. This DEA number can be added through the *Add New Providers* option on the *Supervisor's* menu. This must be done before the prescription is entered. The DEA number cannot be entered during the new prescription entry process.

Prescriptions for Clozapine are for a maximum 7- or 14-day supply and allow one to no refills, depending on patient-defined criteria. For a Clozapine prescription, the total daily dose must be entered. If the prescription is for pills to be taken at intervals, enter a number equal to the pill strength times the number of pills per day. If the prescription is for a dose pack, enter the daily

dose specified by the dose pack. This entry should be between 12.5 and 900, in increments of 12.5 mg/day. If it is not, a prompt will display asking for the dosage to be confirmed.

5.1.1. Display Lab Tests and Results [PSOLAB LIST]

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

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

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

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

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

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

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

5.1.3. List of Override Prescriptions [PSOLIST OVERRIDES]

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

5.1.4. Register Clozapine Patient [PSOL REGISTER PATIENT]

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

6. Handling Copay Charges

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

- ✓ The drug is marked as a supply item or for investigational use.
- ✓ The Rx Patient Status assigned to the prescription is exempt from copayment.
- ✓ The veteran is copay exempt based on income.
- ✓ The medication prescribed is used in the treatment of:
    - A Service Connected (SC) condition
    - Vietnam-era herbicide/Agent Orange (AO) exposure
    - Ionizing Radiation (IR) exposure
    - Environmental Contaminants (EC) exposure during Persian Gulf War service
    - Military Sexual Trauma (MST)
    - Cancer of the Head and/or Neck (HNC)

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

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

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

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

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

Rx # 559157            10/23/01
RICHMOND,ARTHUR               #30
TAKE ONE TABLET BY MOUTH EVERY DAY

NIACIN (NIASPAN-KOS) 500MG SA TAB
LANSING,EMILY            DES MOINES,DIANE
# of Refills: 11
Is this correct? YES//
```

Example of an order with medication copay exemptions but no responses entered

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

```
Rx # 3754648           10/24/01
RICHMOND,ARTHUR                #30
APPLY SMALL AMOUNT TO AFFECTED AREA TWICE A DAY

HYDROCORTISONE 1% CREAM
LANSING, EMILY           DES MOINES,DIANE
# of Refills: 11


       SC Percent: 30%
     Disabilities: NONE STATED

Is this Rx for a SERVICE CONNECTED condition? n  NO


Is this Rx for treatment of Vietnam-Era Herbicide
(Agent Orange) exposure? n  NO

Is this Rx for treatment of environmental contaminant exposure during the
Persian Gulf War? n  NO


Is this Rx for treatment of Military Sexual Trauma? n  NO

Is this correct? YES//
```

Even if more than one exemption is associated with an order, once the first one is answered “Yes” the order becomes No Copay and no further copay questions are asked.

```
       SC Percent: 30%
     Disabilities: NONE STATED

Is this Rx for a SERVICE CONNECTED condition? N// <Enter> O

Is this Rx for treatment of Vietnam-Era Herbicide
(Agent Orange) exposure? N// y  YES

Is this correct? YES//
```

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

```
Medication Profile            Oct 24, 2001@15:14:58     Page:    1 of    1
RICHMOND,ARTHUR
  PID: 143-12-0216P                          Ht(cm): _______ (______)
  DOB: DEC 2,1916 (84)                       Wt(kg): _______ (______)

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



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

6.1. Copay Menu [PSOCP MENU]

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

CHAMPUS Billing Exemption
Exempt Rx Patient Status from Copayment
Reset Copay Status/Cancel Charges

6.1.1. CHAMPUS Billing Exemption [PSOCP CHAMPUS EXEMPTION]

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

```
Select Copay Menu Option:  CHAMPUS Billing Exemption

Select RX PATIENT STATUS NAME:    ZZPOW   <Type a "?" at this prompt to list all available
choices

EXEMPT FROM CHAMPUS BILLING: ?
     Answer YES if this Rx Patient status is to be exempt from Champus billing.
     Choose from:
       0        NO
       1        YES
EXEMPT FROM CHAMPUS BILLING:
```

6.1.2. Exempt Rx Patient Status from Copayment [PSOCP EXEMPTION]

This option allows users to exempt an Rx Patient Status from copayment. A prescription assigned an Rx Patient Status that has been set as exempt from copay will not be charged copay. A warning is displayed describing the consequences of taking this action and then the user is asked to confirm the change. Holders of the PSORPH or PSO COPAY security key are sent a MailMan message any time the copay exempt status of an Rx Patient Status is changed.

```
Select RX PATIENT STATUS NAME: Inpatient   <Type "?" at this prompt to list all available choices

EXEMPT FROM COPAYMENT: NO// y  YES
                            **** WARNING ****
By setting the Exempt from Copayment for the Rx Patient Status of
INPATIENT to 'YES', every prescription entered
with this Rx Patient Status will NOT be charged a Copayment.

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

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

Setting INPATIENT Rx Patient Status to Exempt from Copayment.
```

The warning displayed when removing the copay exemption from an RX PATIENT STATUS differs slightly.

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

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

```
Subj: Exempt from Copayment  [#4072] 18 Oct 01 16:29  3 lines
From: OUTPATIENT PHARMACY  In 'IN' basket.   Page 1  *New*
-------------------------------------------------------------------------------
The INPATIENT Rx Patient Status has been marked as
Exempt from Copayment by AUGUSTA,DON.
Every prescription with this Rx Patient Status will not be charged a Copayment.

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

The text differs slightly when the copay exemption is removed.

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

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

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

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

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

Reset Copay Status

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

```
Select PRESCRIPTION RX #: 559157       NIACIN (NIASPAN-KOS) 500MG SA TAB

Rx # 559157 is a Copay prescription   <<The Rx's current status is shown.
Do you want to reset the status to NO COPAYMENT? N// YES  <<This prompt appears only if there
                                                           are no exemption flags set to 'Yes.'
Select Reason for Reset : 15  CHANGE IN ELIGIBILITY

Copay status of this Rx has been reset to NO COPAY.
```

Typing a "?"at the "Select Reason for Reset" prompt displays the following choices:

```
      Choose from:
   1            RX REFUSED
   2            RX NEVER RECEIVED
   3            RX RETURNED/DAMAGED (MAIL)
   4            ENTERED IN ERROR
   5            RX CANCELLED
   6            INPATIENT/PASS
   7            INVESTIGATIONAL DRUG
   8            RX DELETED
   9            EMPLOYEE
   10           CNH - 3 DAY
   11           PATIENT DECEASED
   12           SUPPLY ITEM
   13           BEDSIDE MEDICATIONS
   14           ELIGIBILITY INCORRECT
   15           CHANGE IN ELIGIBILITY
   16           RX EDITED
   21           RX COPAY INCOME EXEMPTION
   33           AGENT ORANGE RELATED
   34           IONIZING RAD RELATED
   35           ENV CONTAMINANT RELATED
   37           MILITARY SEXUAL TRAUMA
   38           COPAY CAP REACHED
   39           CANCER OF HEAD/NECK
   40           PHARMACY AUTO CANCELLED
```

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

```
Copay Activity Log:
#   Date        Reason                Rx Ref         Initiator Of Activity
==============================================================================
1   10/24/01    COPAY RESET           ORIGINAL       DES MOINES,DIANE
Comment: CHANGE IN ELIGIBILITY   Old value=Copay   New value=No Copay
```

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

Enter/Edit Medication Exemption Question Responses

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

In the example below, the <50% SC, Agent Orange (AO) exposure, and Military Sexual Trauma (MST) medication exemptions apply to the veteran for which Rx# 3754533 has been entered. Both SC and AO exemption defaults of "No" are displayed because values exist. The MST exemption is not displayed because a response has never been entered.

The user is asked to respond to the "Do you want to enter/edit any copay exemption flags?" prompt. If the user responds "Yes" each medication exemption that applies to the veteran will be

presented for editing. All three medication copay exemptions are presented for editing, including the MST exemption for which a response did not exist. In the screen capture below, "Yes" is entered for the MST exemption question and a message is displayed that the copay status of the Rx is reset to No Copay by this action.

```
Select Copay Menu Option: RESET Copay Status/Cancel Charges

Select PRESCRIPTION RX #:    3754533     HYDROCORTISONE 1.0% CREAM

Rx # 3754533 is a Copay prescription <Current copay status of Rx is displayed.

The following exemption flags have been set:
SC:   No      <If any exemption flags have values they will be displayed after the copay status
AO:   No

Do you want to enter/edit any copay exemption flags? ? Y// <Enter> ES
Is this Rx for a Service Connected Condition? N// <Enter> O
Is this Rx for treatment of Agent Orange exposure? N// <Enter> O
Is this Rx for treatment of Military Sexual Trauma?// YES
Editing of exemption flag(s) has resulted in a copay status change.
The status for this Rx will be reset to NO COPAY.

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

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

```
 Copay Activity Log:
#   Date        Reason                Rx Ref         Initiator Of Activity
==============================================================================
1   10/24/01    COPAY RESET          Refill 2       DES MOINES,DIANE
   Comment: MILITARY SEXUAL TRAUMA RELATED  Old value=Copay   New value=No copay
```

NOTE

The copay status of an Rx will not be reset from a No Copay to Copay status based strictly on a response to a medication exemption question.

Cancel Charges

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

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

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

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

Select 1:-5:5

Do you wish to continue (Y/N)? y
Select Reason for Reset or Charge Cancellation :
```

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

```
Editing of exemption flag(s) has resulted in a copay status change.
The status for this Rx will be reset to NO COPAY.
Select Reason for Reset or Charge Cancellation : 1  RX REFUSED
Copay status reset due to exemption flag(s)
The following exemption flags have been changed:
EC: Yes
MST: Yes
Rx # 3754533 - Refill 3 copay charge cancelled

Select PRESCRIPTION RX #:
```

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

```
Copay Activity Log:
#   Date        Reason               Rx Ref         Initiator Of Activity
================================================================================
1   11/02/01    REMOVE COPAY CHARGE  Refill 3       DES MOINES,DIANE
Comment: RX REFUSED
```

Potential Charges and Partial Charges

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

```
Rx Activity Log              Oct 23, 2001@13:53:02          Page:    1 of    1
BRSAHU,DAX U
  PID: 271-11-1850P                                Ht(cm): 169.55 (03/06/2001)
  DOB: NOV 18,1950 (50)                            Wt(kg): 125.45 (03/06/2001)

Rx #: 459166   Original Fill Released: 03/12/01
Routing: Mail      Finished by: BUI,KIM A

Copay Activity Log:
#   Date        Reason               Rx Ref         Initiator Of Activity
================================================================================
1   10/23/01    ANNUAL CAP REACHED   REFILL 2       LANSING,EMILY
Comment:  NO BILLING FOR THIS FILL
```

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

```
      1. Original fill    (03/06/01)
      2. Refill #1        (05/24/01)
      3. Refill #2        (10/23/01)           (Potential Charge *)

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

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

```
Copay Activity Log:
#   Date        Reason               Rx Ref         Initiator Of Activity
================================================================================
1   10/26/01    ANNUAL CAP REACHED   REFILL 2       LANSING,EMILY
       Comment:  PARTIAL BILLING FOR THIS FILL
```

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

```
      1. Original fill    (03/06/01)
      2. Refill #1        (05/24/01)
      3. Refill #2        (10/23/01)
```

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

```
      Copay Activity Log:
#   Date        Reason                Rx Ref         Initiator Of Activity
================================================================================
1   10/26/01    ANNUAL CAP REACHED    REFILL 2       LANSING,EMILY
      Comment:  PARTIAL BILLING FOR THIS FILL
2   10/29/01    REMOVE COPAY CHARGE   REFILL 2       LANSING,EMILY
      Comment: RX REFUSED
```

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

Example of an IB-initiated medication copay charge

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

```
Rx Activity Log              Nov 05, 2001@17:18          Page:    1 of    1
KANSAS, THOMAS
  PID: 411-04-0341P                                Ht(cm): _______ (______)
  DOB: APR 3,1941 (60)                             Wt(kg): _______ (______)

Rx #: 3754328   Original Fill Released: 10/09/01
Routing: Window      Finished by: ALBANY,ALBERT

Copay Activity Log:
#   Date        Reason                Rx Ref         Initiator Of Activity
================================================================================
1   10/09/01    ANNUAL CAP REACHED    ORIGINAL       ALBANY,ALBERT
Comment:  NO BILLING FOR THIS FILL
2   10/09/01    IB-INITIATED COPAY    ORIGINAL       ALBANY,ALBERT
Comment: FULL CHARGE
```

7. Evaluating Drug Usage

7.1. DUE Supervisor
[PSOD SUPERVISOR]

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

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

7.1.1. 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.

7.1.2. Edit an Existing Answer Sheet
[PSOD EDIT ANSWER SHEET]

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

7.1.3. Create/Edit a Questionnaire [PSO 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, in creating a questionnaire the user should strive to make each question a yes, no, 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.

7.1.4. 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.

7.1.5. DUE Report [PSOD DUE SORT AND PRINT]

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

8. Enter/Edit Clinic Sort Groups

[PSO SETUP CLINIC GROUPS]

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

9. External Interface Menu

[PSO EXTERNAL INTERFACE]

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

This menu contains options for using an external interface device.

Purge External Batches
Reprint External Batches
View External Batches

9.1. 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:  T-7  (FEB 28, 1997)

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

Purge queued to run in background.

Select External Interface Menu Option: <Enter>
```

9.2. 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: T-7  (FEB 28, 1997)

End date/time: T  (MAR 07, 1997)

Gathering batches, please wait...


 BATCH    QUEUED TO PRINT ON:           PATIENT:        BROWNS PLACE
-------------------------------------------------------------------------------

  1       FEB 28,1997@08:06:14          IDAHO,PETER
  2       FEB 28,1997@08:10:56          IDAHO,PETER
  3       FEB 28,1997@08:19:20          MISSISSIPPI,RANDALL
  4       FEB 28,1997@08:38:17          OREGON,ROBERT
  5       FEB 28,1997@08:50:32          FLORIDA,FRANK
  6       FEB 28,1997@09:15:35          FLORIDA,FRANK
  7       FEB 28,1997@09:33:48          MAINE,JOE
  8       FEB 28,1997@09:39:31          ALABAMA,CHRISTOPHER P
  9       FEB 28,1997@10:36:51          GEORGIA,PAUL
  10      FEB 28,1997@13:37:24          ARIZONA,ALICE
  11      FEB 28,1997@13:46:07          DELAWARE,DAVID

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

Batches selected for Reprint are:

Batch 5 Queued for FEB 28,1997@08:50:32 by BISMARK,ANDREW
Batch 6 Queued for FEB 28,1997@09:15:35 by BISMARK,ANDREW

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: <Enter>
```

9.3. View External Batches [PSOINTERFACE VIEW]

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

Example: View External Batches

```
Select External Interface Menu Option: View External Batches

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

Start date/time: T-7  (FEB 28, 1997)

End date/time: T  (MAR 07, 1997)

Gathering batches, please wait...
```

```
 BATCH    QUEUED TO PRINT ON:           PATIENT:        BROWNS PLACE
-----------------------------------------------------------------------------
  1       FEB 28,1997@08:06:14          IDAHO,PETER
  2       FEB 28,1997@08:10:56          IDAHO,PETER
  3       FEB 28,1997@08:19:20          MISSISSIPPI,RANDALL
  4       FEB 28,1997@08:38:17          OREGON,ROBERT
  5       FEB 28,1997@08:50:32          FLORIDA,FRANK
  6       FEB 28,1997@09:15:35          FLORIDA,FRANK
  7       FEB 28,1997@09:33:48          MAINE,JOE
  8       FEB 28,1997@09:39:31          ALABAMA,CHRISTOPHER P
  9       FEB 28,1997@10:36:51          GEORGIA,PAUL
  10      FEB 28,1997@13:37:24          ARIZONA,ALICE
  11      FEB 28,1997@13:46:07          DELAWARE,DAVID

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

Batches selected for Viewing are:

Batch 5 Queued for FEB 28,1997@08:50:32 by BISMARK,ANDREW
Batch 6 Queued for FEB 28,1997@09:15:35 by BISMARK,ANDREW

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

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

```
RX #              NAME -> FLORIDA,FRANK                      BATCH 5
-----------------------------------------------------------------------------
2820              NADOLOL 40MG TAB                         ACTIVE

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

```
RX #              NAME -> FLORIDA,FRANK                      BATCH 6
-----------------------------------------------------------------------------
2821              MICONAZOLE NITRATE 2% LOT 60ML           ACTIVE
END OF LIST

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

Start date/time: <Enter>

Select External Interface Menu Option: <Enter>
```

10. Label/Profile Monitor Reprint

[PSO B]

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

11. Implementing and Maintaining Outpatient Pharmacy

11.1. Maintenance (Outpatient Pharmacy)

[PSO MAINTENANCE]

The *Maintenance (Outpatient Pharmacy)* menu contains the options that are used for implementing and maintaining the Outpatient Pharmacy software. Some of these options are found under other menus, but the explanations are repeated here for convenience.

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

11.1.1. Site Parameter Enter/Edit

[PSO SITE PARAMETERS]

This option is used to establish and edit parameters for the Outpatient Pharmacy software application.

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

The following is an incomplete example showing only the new field found in this option.

```
Select CPRS ORDERING INSTITUTION: ANN ARBOR, MI// ?
 Answer with CPRS ORDERING INSTITUTION
Choose from:
   ANN ARBOR, MI
   ATLANTA, GA
   BIRMINGHAM, AL.
   DAYTON, OH

     You may enter a new CPRS ORDERING INSTITUTION, if you wish
     Enter the Institution for this Outpatient site for CPRS orders.
 Answer with INSTITUTION NAME, or STATION NUMBER, or CONTACT
 Do you want the entire 191-Entry INSTITUTION List? NO
```

11.1.2. Edit Provider [PSO PROVIDER EDIT]

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

11.1.3. Add New Providers [PSO PROVIDER ADD]

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

11.1.4. Queue Background Jobs [PSO AUTOQUEUE JOBS]

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

* Autocancel Rx's on Admission
* Initialize Rx Cost Stats
* Initialize Management Stats
* Compile AMIS Data (NIGHT JOB) with a default rescheduling frequency of every 24 hours.
* Expire Rx's
* Auto-delete from Suspense

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

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

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

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

Example: View of Queue Background Jobs Screen

```
Select Maintenance (Outpatient Pharmacy) Option: Queue Background Jobs

If time to run option is current do not edit.
```

11.1.5. Autocancel Rx's on Admission [PSO AUTOCANCEL1]

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

11.1.6. Bingo Board Manager (BM) [PSO BINGO MANAGER]

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

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

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

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

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

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

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

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

Example: Enter/Edit Display

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


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


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

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

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

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

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

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


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

At the "QUEUED TO RUN AT WHAT TIME" prompt a time must be entered that is at least 2 minutes in the future. The software will convert it to today's date with the time entered. For example, if the time is 8:00am, to queue it for later today 9:30am can be entered. It will default to today's date. To enter a time for it to queue tomorrow, “T+1@00:00am/pm” must be entered. For example, if the time is 3:00pm, to queue it for 8:30am, “ T+1(or tomorrow's date)@8:30am” must be entered.

Auto-Start Enter/Edit
[PSO BINGO INITIALIZE]

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

Example: Auto-Start Enter/Edit

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

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

Select GROUP DISPLAY NAME: <Enter>
```

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

Print Bingo Board Statistics
[PSO BINGO REPORT PRINT]

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

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

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

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

Name	The name of the patient. For a patient with multiple entries, his/her name is printed only once.
Time In	The time that the patient's name was entered in the computer.
Time Out	The time that the patient's name was entered on the bingo board monitor.
Rx#	The prescription number.
Wait Time	The amount of time it took to fill the prescription. It is the difference between Time In and Time Out. For orders with more than one prescription, the wait time is the same for each.
Display	The Display Group that the entries were entered under. Multiple site hospitals may have multiple display groups set up to coincide with each site.
Total	A summation of all the Wait Times in PATIENT NOTIFICATION (Rx READY) file. It includes the wait time of the patients with multiple entries. For example, if it took 3 minutes to fill 3 prescriptions for Missouri, Roy, the Total function sums up the Wait Time as though it took 9 minutes.
Count	The number of Wait Time entries. It counts the number of wait time entries for each prescription, not each patient.
Mean	The average or middle value of the Wait Time range of values.
Minimum	The least Wait Time value in the range.
Maximum	The greatest Wait Time value in the range.
Dev. (Deviation)	A relative number which signifies the overall departure from the average.

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

Example: Print Bingo Board Wait Time

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

                  BINGO BOARD CONTROL PANEL

Select Bingo Board Manager Option: PRINT
    1    Print Bingo Board Statistics
    2    Print Bingo Board Wait Time
CHOOSE 1-2: 2  Print Bingo Board Wait Time
DEVICE: [Select Print Device]
       report follows
BINGO BOARD WAIT TIME PRINTOUT                MAY 21,1997  15:34    PAGE 1
                              TIME      TIME                          WAIT
NAME                            IN       OUT         Rx#             TIME
-----------------------------------------------------------------------------

        DISPLAY: WAITING ROOM
VIRGINIA,SAMUEL               1503      1504         2004342            1
                              1503      1504         2004343            1
                              1503      1504         2004345            1
                              1509      1512         2004346            3
INDIANA,SUSAN                 1509      1512         2004350            3
                              1509      1512         2004354            3
CALIFORNIA,JAMES              1509      1512         2002744            3
                              1509      1512         2003376            3
                              1509      1512         2003377            3
MARYLAND, MARK                1524      1527         2002403            3
                              1524      1527         2003034            3
NEVADA,NORMAN                 1524      1527         2002365            3
                              1524      1527         2002573            3
                                                                     -----
TOTAL                                                                   33
COUNT                                                                   13
MEAN                                                                     3
MINIMUM                                                                  1
MAXIMUM                                                                  3
DEV.                                                                     1
```

Purge Bingo Board Data [PSO BINGO PURGE]

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

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

IMPORTANT

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

Start Bingo Board Display
[PSO BINGO START]

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

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

Stop Bingo Board Display
[PSO BINGO STOP]

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

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

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

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

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

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

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

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

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

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

Example: Enter Clinic Sort Group

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

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

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

11.1.9. Initialize Rx Cost Statistics [PSO COSTINIT]

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

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

11.1.10. Edit Pharmacy Intervention [PSO INTERVENTION EDIT]

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

11.1.11. 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.

11.1.12. Auto-delete from Suspense [PSO PNDEL]

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

11.1.13. Delete a Prescription [PSORXDL]

Using this option a prescription status can be changed to deleted. Deleted prescriptions do not appear on any profiles.

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

11.1.14. Expire Prescriptions [PSO EXPIRE INITIALIZE]

This option initializes a daily job that will mark any prescription as expired that has yesterday as an expiration date.

11.1.15. Manual Auto Expire Rxs [PSO MANUAL AUTO EXPIRE]

This job needs to be run only if expired prescriptions are showing up as active orders on the Orders tab in CPRS. This could happen if the *Expire Prescriptions* [PSO EXPIRE PRESCRIPTIONS] option was not queued as a daily task *AND* those prescription(s) were never accessed/viewed in *Patient Prescription Processing* [PSO LM BACKDOOR ORDERS] option.

Sites that have not queued the Expire Prescriptions job on the daily task schedule should do so by selecting the *Queue Background Jobs* [PSO AUTOQUEUE JOBS] option from the Maintenance (Outpatient Pharmacy) menu [PSO MAINTENANCE] option, making an entry in the Edit Option Schedule template for option PSO EXPIRE PRESCRIPTIONS and scheduling it to run daily.

11.1.16. Prescription Cost Update [PSO RXCOST UPDATE]

This options updates prescription costs in the DRUG COST file by generic drug name. Costs can be updated on refills and partials as well. Updates can be made only as far back as one year plus 120 days.

11.1.17. Purge Drug Cost Data [PSO PURGE DRUG COST]

To purge drug cost data from the DRUG COST file enter a starting and ending date. Then choose to run this job immediately or queue it.

Example: Purge Drug Cost Data

```
Select Maintenance (Outpatient Pharmacy) Option: PURGE Drug Cost Data

Purge Cost Data Starting: FEB 1997// <Enter> (FEB 1997)
Purge Cost Data Ending: 3/97  (MAR 1997)

Are you sure you want to purge cost data
from 02/00/97 to 03/00/97? NO// Y  YES

Do you want this option to run IMMEDIATELY or QUEUED? Q// <Enter> UEUED
Requested Start Time: NOW// <Enter> (MAY 06, 1997@10:31:23)
Task #223079 QUEUED.
```

11.1.18. 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:  T-7  (FEB 28, 1997)

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

Purge queued to run in background.

Select External Interface Menu Option: <Enter>
```

11.1.19. Recompile AMIS Data [PSO AMIS RECOMPILE]

To gather Automated Management Information System (AMIS) data from various sources, use this option. It is recommended that this job should be queued to run during off-peak hours (or at a time that is convenient for the site).

Month/day/year may be specified for a current month report, but only month and year can be specified for reports of past months.

12. Medication Profile [PSO P]

The Medication Profile displays a profile of all prescriptions on file for a particular patient. The user may view this information directly on the screen or request it to be printed.

The medication profile is available in two formats. The short format contains the patient name, address, SSN, DOB, eligibility, narrative, reactions, prescriptions, prescription number, drug name, Sig, status, quantity, issue date, last fill date, and refills remaining. The long format contains all information contained on the short format and the following additional fields: physician's name, clerk code, fill date, total allowable refills, dates of refills/partial fills, whether the prescription was filled at the pharmacy window or by mail, and which division filled it.

The short format displays the status in an abbreviated form. The following is an explanation of the codes: A (Active), DC (Discontinued), E (Expired), H (Hold), N (Non Verified), P (Pending due to drug interactions), and S (Suspended). A “$” next to the prescription number indicates that the prescription is copay eligible.

If the prescription has been returned to stock, the letter (R) will appear next to the last fill date.

13. About the Output Reports Menu

Output Reports
[PSO OUTPUTS]

The *Output Reports* menu generates a variety of management reports. These reports contain current medication profiles, utilization, cost, and workload information that help management maintain the highest level of patient care.

13.1. Action Profile (132 COLUMN PRINTOUT)
[PSO ACTION PROFILE]

This option provides a list of a patient's active prescriptions and the expired and canceled prescriptions that may be renewed. Each prescription is followed by a place for the provider to indicate the action, renew or discontinue. This profile can be printed for an individual patient, for all patients with appointments in a clinic, all patients in all clinics, or for a clinic group. In addition, a polypharmacy report can be printed with the action/informational profile. To get this report, answer “Yes” to the "POLYPHARMACY W/ACTION PROFILE" prompt in the *Site Parameter Enter/Edit* option to turn on this site parameter. This profile can be printed in an 80- or 132-column format. The Action Profile must be sent to a printer.

Barcodes may not show up on the action profile if the site parameters have not been set up for them.

If a prescription is for a drug marked for lab monitoring, the most recent lab result will be printed.

Copay affects the output report for this option. The letters SC (service connected) and NSC (non-service connected) will print on the same line as the RENEW/MD line only if the veteran is rated service connected less than 50% and the prescription is not a supply item. This allows the physician to indicate (circle) the correct veteran eligibility so that the veteran may be charged a copay for the prescription, if applicable.

If the prescription has been returned to stock, the letter (R) will appear next to the last fill date.

Example: Action Profile with the Polypharmacy Report

```
Select Outpatient Pharmacy Manager Option: Output Reports


Select Output Reports Option: Action Profile (132 COLUMN PRINTOUT)
Action or Informational (A or I): A// <Enter>   Action
Do you want generate a Polypharmacy report?: NO// YES
Minimum Number of Active Prescriptions:  (1-100): 7// <Enter>
By Patient, Clinic or Clinic Group (P/C/G): P// ?

Enter 'P' to print by patient
      'C' for printing by clinic
      'G' for printing by clinic group
      'E' to exit process

     Select one of the following:

          P         Patient
          C         Clinic
          G         Clinic Group
          E         Exit


By Patient, Clinic or Clinic Group (P/C/G): P// G  Clinic Group
Select Clinic Sort Group: WEST CLINIC
FOR DATE: T+1  (FEB 10, 1996)
Profile Expiration/Discontinued Cutoff:  (0-9999): 120// <Enter>
Select a Printer: [Select Print Device]
DO YOU WANT YOUR OUTPUT QUEUED? NO// <Enter>  (NO)

Select Clinic Sort Group: <Enter>
```

13.2. Alpha Drug List and Synonyms
[PSO ALPHA]

This report lists all drugs in alphabetical order by generic name. Any existing synonyms for each drug are listed in lowercase letters under the generic name.

13.3. AMIS Report
[PSO AMIS]

This report lists prescription statistics that are required by the VA Central Office. For a multidivisional site, the print device will report each division's statistics on a separate page with the grand totals on the last page. This report must be printed on a 132-column printer.

Month/day/year may be specified for a current month report, but only month and year can be specified for reports of past months.

13.4. CMOP Controlled Substance Rx Dispense Report
[PSO CMOP CS RX DISPENSE REPORT]

This report provides a log of controlled substance prescriptions dispensed by a Consolidated Mail Outpatient Pharmacy (CMOP). This report can be sorted by release date or alphabetically by drug name. It displays the Release Date, Patient Name, Prescription Number, CMOP Status, and CMOP facility at which the prescription was filled. This report is designed to print on a 132-column printer and it is recommended that the printing be queued.

13.5. Commonly Dispensed Drugs
[PSO COMMON]

This report lists the drugs with the greatest number of fills during a selected period of time. For multidivisional sites, the print device will report each division's statistics on a separate page.

13.6. Cost Analysis Reports
[PSO COMMON]

This menu contains twelve different reports of cost analysis using existing data. Data for these reports are already compiled, so they print relatively quickly.

13.6.1. Clinic Costs
[PSO CLINIC COSTS]

This report contains data on all the prescriptions filled during the user specified time period for a specific clinic or for clinics.

13.6.2. Division Costs by Drug
[PSO DIV COSTS BY DRUG]

This report contains data on all prescriptions filled during a user specified period of time for one or more pharmacy divisions at a single site.

13.6.3. Drug Costs
[PSO DRUG COSTS]

This report contains data on all prescriptions filled during a user specified time period for a specific drug or all drugs on file.

13.6.4. Drug Costs by Division [PSO COST BY DIVISION]

This report contains data on all prescriptions filled during a user specified period of time at a specific pharmacy division or for all pharmacy divisions.

13.6.5. Drug Costs by Division by Provider [PSO COST DIVISION BY PROVIDER]

This report contains drug costs during a user specified period of time sorted by division or divisions and within the division by provider.

13.6.6. Drug Costs by Provider [PSO COST BY PROVIDER]

This report contains data on all prescriptions filled during a specified period of time sorted by a drug or all drugs for each provider.

13.6.7. High Cost Rx Report [PSO HI COST]

This report lists all prescriptions filled during the specified time period that cost more than the user specified dollar limit.

13.6.8. Patient Status Costs [PSO COST BY PATIENT STATUS]

This report displays data on all prescriptions filled during a user specified period of time for a specific patient status.

13.6.9. Pharmacy Cost Statistics Menu [PSO COST STAT MENU]

This menu contains options for pharmacy cost statistics data.

13.6.9.1. Pharmacy Statistics [PSO COST STATISTICS]

This report contains cost information and other statistics for all prescriptions filled during a user specified period of time.

13.6.9.2. Sort Statistics By Division [PSO COST STATS BY DIVISION]

This report sorted by division contains cost information and other statistics for all prescriptions filled during a user specified period of time.

13.6.10. Provider by Drug Costs [PSO COST PROVIDER BY DRUG]

This report sorted by provider displays data on all prescriptions filled for each drug during a user specified period of time.

13.6.11. Provider Costs [PSO COST PER PROVIDER]

This report displays the total prescription and cost data for prescriptions sorted by provider for a user specified period of time.

13.6.12. Request Statistics [PSO REQ STATS]

This report displays the total number of requests for service, average cost for each request, and average number of fills per request for a user specified period of time.

13.7. Daily AMIS Report [PSO DAILY AMIS]

This report contains Automated Management Information System (AMIS) data for a selected day, month, and quarter. Output includes daily, monthly, and quarter AMIS totals.

13.8. Drug List By Synonym [PSO SYNONYM]

This report lists all active drugs in alphabetical order by synonym. The drug is listed once for each synonym.

13.8a Free Text Dosage Report [PSO DOSAGE REPORT]

This report provides a list of drugs for prescriptions having a Dosage Ordered entry that is free text or a dosage that results in the calculation of the number of tablets. This report is designed to help identify all such entries so that sites can determine if these dosages should be added to the Local Possible Dosages in the DRUG file, which would make them selectable during the medication order entry process.

```
Run Date: NOV 13,2001                                          Page 1
                    Free Text Dosage Entry Report
                for the Period: APR 27,2001 to NOV 13,2001
Drug                                    Free Text Entry                  Count
    Provider:Count
-------------------------------------------------------------------------------
ACETAMINOPHEN AND CODEINE 30MG (342)    3 TABLETS                         3
    RICHMOND,ARTHUR:3

ALCOHOL PREP PADS (3718)                1 PAD                             2
    JACKSON,ROBERT:2
                                        PAD                               1
    JACKSON,ROBERT:1

AMINOPHYLLINE 500MG SUPP  (3422)        1 SUPPOSITORY(IES) 500MG          1
    JACKSON,ROBERT:1

ASPIRIN BUFFERED 325MG TAB (280)        1625MG                            2
    RICHMOND,ARTHUR:2
                                        975MG                             3
    RICHMOND,ARTHUR:2 JACKSON,ROBERT:1
```

13.9. Inactive Drug List
[PSO INACTIVE]

This report lists those drugs on file that have been inactivated.

This report is sorted by VA FileMan. If the user does not have VA FileMan experience, it is strongly recommended that the local IRMS staff be contacted before running this report.

13.10. List Prescriptions on Hold
[PSO HOLDRPT]

This report lists prescriptions that have a hold status.

13.11. Management Reports Menu
[PSO MGMT REPORT MENU]

With this menu the user can compile data for daily or monthly management reports. When the data has been compiled, the reports can be viewed on screen (132 columns) or printed on a 132-column printer.

Important

Before printing the first management report, the *Initialize Daily Compile* option must be run. This option compiles past management data for a user specified date range and then queues a job to run every morning at 1:00 a.m. to compile the previous day's data.

13.11.1. Daily Management Report Menu
[PSO MGMT REPORT DAILY MENU]

This menu contains the options for printing the daily management reports.

13.11.1.1. All Reports
[PSO MGMT REPORTS ALL DAILY]

This option prints all of the daily management reports for Outpatient Pharmacy that include the Intravenous Admixture, Cost of Prescriptions, Prescription Count, and Type of Prescriptions Filled reports. They can be printed for a specific division or for all divisions if the site is multidivisional.

13.11.1.2. Cost of Prescriptions
[PSO MGMT REPORT RX COSTS]

This report contains the average cost and total cost for staff prescriptions, fee prescriptions, all prescriptions, equivalent fills, methadone prescriptions (if a methadone program exists), and participating pharmacies prescriptions.

13.11.1.3. Count of Prescriptions
[PSO MGMT REPORT RX COUNTS]

This report contains the total number of prescriptions filled during the specified month(s). It contains the patient category, number of equivalent fills, total prescriptions, total methadone prescriptions (if a methadone program exists), and patient requests.

13.11.1.4. Intravenous Admixture
[PSO MGMT REPORT IV]

This report contains the total, average cost for piggybacks and syringes, L.V.P., T.P.N., and Chemotherapy used for outpatients only. A grand total for each month is also provided.

13.11.1.5. Type of Prescriptions Filled
[PSO MGMT REPORT TYPE OF RX]

This report contains the total number of prescriptions filled by fee and staff physicians, new and refill prescriptions, prescriptions sent by mail or dispensed at the window, prescriptions filled by participating pharmacies, and investigation drug prescriptions.

13.11.2. Date Range Recompile Data
[PSO MGMT RPT RANGE COMPILE]

The management data for a user specified date range can be compiled/recompiled with this option. The data must be recompiled if prescription data has changed for prescriptions filled or refilled before today.

13.11.3. Initialize Daily Compile [PSO MGMT RPT DAILY COMPILE]

This option queues a job to run every day at 1:00 a.m. to compile the previous day's management report data. It also compiles the management data for a specific date range. When initializing the compiling of data prior to yesterday's date, the default date will be either today plus 1 at 1:00 a.m. (T+1@01:00) if the option has never been queued or the date and time this option has already been queued to run.

This option must be run to initialize the compiling of management report data before the management reports are printed.

13.11.4. Monthly Management Report Menu [PSO MGMT REPORT MONTHLY MENU]

This menu contains options for printing the monthly management reports. The monthly management reports can be printed for previous months, but not the current month.

13.11.4.1. All Reports [PSO MGMT MONTHLY ALL REPORTS]

Print all of the monthly management reports with this option. These reports include the Intravenous Admixture, Cost of Prescriptions, Count of Prescriptions, and Type of Prescriptions Filled reports.

13.11.4.2. Cost of Prescriptions [PSO MGMT MONTHLY RX COSTS]

This report contains the average and total cost for staff prescriptions, fee prescriptions, all prescriptions, equivalent fills, methadone prescriptions (if a methadone program exists), and participating pharmacies prescriptions.

13.11.4.3. Count of Prescriptions [PSO MGMT MONTHLY RX COUNTS]

This report contains the total number of prescriptions filled during the specified month(s). It includes the patient category, number of equivalent fills, total prescriptions, total methadone (if methadone program exists), and patient requests.

13.11.4.4. Intravenous Admixture
[PSO MGMT MONTHLY IV]

This report contains the total and average cost for piggybacks and syringes, L.V.P., T.P.N., and Chemotherapy, plus the grand total for each month.

13.11.4.5. Type of Prescriptions Filled
[PSO MGMT MONTHLY TYPE OF RX]

This report contains the number of prescriptions filled by fee and staff physicians, new and refill prescriptions, prescriptions sent by mail or dispensed at the window, prescriptions filled by participating pharmacies, and investigational drug prescriptions.

13.11.5. One Day Recompile Data
[PSO MGMT REPORT MONTHLY MENU]

The management data for a user specified day can be compiled/recompiled with this option.

13.11.6. Purge Data
[PSO MGMT DATA PURGE]

Delete data from the OUTPATIENT PHARMACY MANAGEMENT DATA file with this option. The default starting date will always be the first date in the file.

13.12. Medication Profile
[PSO P]

This report is the same as the “Medication Profile” described in Section 12.

13.13. Monthly Drug Cost
[PSO MONTHLYCOST]

This report lists the monthly drug costs. The report can be printed for a selected drug or all drugs. This report must be printed on a 132-column printer.

13.14. Narcotic Prescription List
[PSO NARC]

This report lists the quantity, provider, fill date, patient, and patient ID for each prescription for narcotic drugs filled during the specified time period. This report must be printed on a 132-column printer.

13.15. Non-Formulary List
[PSO NONFORM]

This report lists all active drugs that have been designated as non-formulary. Non-formulary drugs are those that have not been approved for routine use by the Pharmacy and Therapeutics Committee of the medical center. These items can be dispensed under special circumstances when approved by the designated authority.

13.16. Poly Pharmacy Report
[PSO POLY]

This report lists a patient or patients with a selected minimum amount of prescriptions within a selected number of days. This report only shows active prescriptions. The class column of this report is the drug classification from the DRUG file.

13.17. Released and Unreleased Prescription Report
[PSO RELEASE REPORT]

This report lists released and unreleased prescriptions by date range. The start date default is the date the package is installed and the end date default will be the current date.

14. 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.

This menu is locked with the PSORPH key.

14.1. 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.

14.2. Edit Pharmacy Intervention

[PSO INTERVENTION EDIT]

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

14.3. Print Pharmacy Intervention

[PSO INTERVENTION PRINTOUT]

A captioned report of pharmacy interventions for a certain date range can be printed with this option. The report prints out on normal width paper and it can be queued to print at a later time.

The “subtotal” on this report represents the number of interventions for a specific type of intervention where the recommendation for the intervention was accepted. The “total” is the sum of all interventions in which the recommendation was accepted.

The “subcount” 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.

14.4. 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.

14.5. View Intervention
[PSO INTERVENTION VIEW]

This option displays pharmacy interventions in a captioned format. More than one intervention can be viewed at a time.

15. Processing Drug/Drug Interactions

Process Drug/Drug Interactions
[PSO INTERACTION VERIFY]

This option can be used to process information for medications that have been marked as a drug/drug interaction. This allows prescriptions with drug/drug interactions 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. It will then be verified or non-verified. The *Electronic Signature Code Edit* option can be found under the *User's Toolbox* menu in Kernel V. 8.0.

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

16. Releasing Medication

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 environmental contaminants 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 of environmental contaminant exposure during the Persian Gulf War?' 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 of MailMan Message

```
Subj: RX COPAY STATUS REVIEW NEEDED  [#4271073] 28 Sep 01 08:37  17 lines
From: OUTPATIENT PHARMACY PACKAGE  In 'IN' basket.   Page 1  *New*
-------------------------------------------------------------------------------
 LRJLT,IHKUL BLN  (1963P)    CHEYENNE VAM&ROC
537455 (3)    COPAY
ABSORBASE TOP OINT

Due to a change in copay criteria, additional information listed below is
needed to determine the final copay status for this Rx so that appropriate
action can be taken by pharmacy personnel.

Is this Rx for a Service Connected Condition?

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.

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 copay charges.

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 of 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       HARRISBURG,HENRY
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 of 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       HARRISBURG,HENRY
Comment:  NO BILLING FOR THIS FILL
2   10/23/01    IB-INITIATED COPAY    ORIGINAL       HARRISBURG,HENRY
Comment: PARTIAL CHARGE
```

If a prescription is in a releasable status, the user will be given an error message, such as:
* Prescription has a status of (status) and is not eligible for release.
* Prescription was deleted.
* Improper barcode format.
* Non-existent prescription.

Copay is not charged for a partial fill.

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

Changes to Releasing Orders function - Digitally Signed Orders Only

The release function in the *Patient Prescription Processing* option has been modified with patch PSO*7*131 to require that all digitally signed orders for Schedule II controlled substances (CSII orders) be released through the *Outpatient Rx* option in the *Controlled Substances* (CS) menu. If DEA/PKI is activated and an order is digitally signed, the user will be advised that the order must be released through the *Outpatient Rx* 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.

NOTE: At this time the functionality for entering and processing digitally signed orders is part of a pilot project limited to only one site. System-wide implementation of this functionality requires further study and modifications.

17. Returning Medication to Stock

Return 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.

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.

```
Copay Activity Log:
#   Date        Reason               Rx Ref         Initiator Of Activity
==============================================================================
1   11/21/01    REMOVE COPAY CHARGE  REFILL 1       DES MOINES,DIANE
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.

18. Processing a Prescription

18.1. 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. Options (renew, refill, edit, release, etc.) that previously appeared in Outpatient Pharmacy V. 6.0 now appear as actions in the *Patient Prescription Processing* option found on this menu. Patch PSO*7*46 changes the way in which a Sig is built for an order. Instead of entering a free text Sig, data must be entered for the individual fields that are used to build a Sig. Default values are also displayed for possible dosages, schedules, med routes, and patient instructions. When possible, default quantities are calculated using data entered into specific fields during medication order entry.

Patient Prescription Processing
Barcode Rx Menu ...
Complete Orders from OERR
Discontinue Prescription(s)
Edit Prescriptions
List One Patient's Archived Rx's
Reprint an Outpatient Rx Label
View Prescriptions

18.1.1. Patient Prescription Processing
[PSO LM BACKDOOR ORDERS]

This option is used to process outpatient medication via 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

This option is also found on the *Pharmacy Technician's Menu,* but with limited actions. A pharmacy technician can only enter a new order, refill, copy, renew, reprint, release, order a partial, or pull early from suspense.

Actions are displayed in the action area of the screen. Actions with parentheses ( ) around them are invalid actions for that order. A double question mark (??) displays all the actions available, including the Outpatient Pharmacy actions described in the section "Using List Manager." If an invalid hidden action option is selected, a message will display in the message window. Outpatient Pharmacy hidden actions are displayed with the letters OP next to the action.

Example 1: Entering a New Order

```
Select Outpatient Pharmacy Manager Option: rx (Prescriptions)

          Orders to be completed for all divisions: 14

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

A summary list of the number of pending orders can be displayed by Division or by each Clinic within the Division where the user is signed on. This is helpful when completing batch orders. In this example, an individual patient name is entered.

```
          Patient Prescription Processing
          Barcode Rx Menu ...
          Complete Orders from OERR
          Discontinue Prescription(s)
          Edit Prescriptions
          List One Patient's Archived Rx's
          Reprint an Outpatient Rx Label
          View Prescriptions

Select Rx (Prescriptions) Option: patient Prescription Processing
Select PATIENT NAME: Kansas,t  KANSAS,THOMAS T        10-30-70    521339521
 YES     SC VETERAN

Enter RETURN to continue or '^' to exit: <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 is now displayed on two screens; only the second screen is shown in this example.

```
Patient Information          May 22, 2001 10:44:38          Page:    2 of    2
KANSAS,THOMAS T
  PID: 521-33-9521                                Ht(cm): 177.80 (02/08/1999)
  DOB: OCT 30,1970 (30)                           Wt(kg): 90.45 (02/08/1999)
  SEX: MALE
+
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 is Quit at the "Select Action" prompt, pressing the Enter key here quits the Patient Information screen and displays the Medication Profile.

```
Medication Profile           May 22, 2001 10:44:56          Page:    1 of    1
KANSAS,THOMAS T
  PID: 521-33-9521                                Ht(cm): 177.80 (02/08/1999)
  DOB: OCT 30,1970 (30)                           Wt(kg): 90.45 (02/08/1999)

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

-------------------------------------ACTIVE----------------------------------
 1 503902        ACETAMINOPHEN 500MG TAB              60 A> 05-22 05-22   3  30
 2 503886$       DIGOXIN (LANOXIN) 0.2MG CAP          60 A> 05-07 05-07   5  30
-------------------------------------PENDING-----------------------------------
 6 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 (??) had been entered at the above "Select Action" prompt, the following hidden actions would display in the action area. Actions that apply only to outpatient orders are followed by (OP).

```
The following actions are also available:
RP   Reprint (OP)          OTH  Other OP Actions     LS   Last Screen
RN   Renew (OP)            RD   Re Display Screen    FS   First Screen
DC   Discontinue (OP)      PL   Print List           GO   Go to Page
RL   Release (OP)          PS   Print Screen         +    Next Screen
RF   Refill (OP)           >    Shift View to Right  -    Previous Screen
PP   Pull Rx (OP)          <    Shift View to Left   ADPL Auto Display (On/Off)
IP   Inpat. Profile (OP)   SL   Search List          UP   Up a Line
DN   Down a Line           QU   Quit
```

Typing in the letters "NO" creates a new order. (The screen display has been shortened to fit on the page.)

```
Medication Profile            May 22, 2001 10:44:56          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
PATIENT STATUS: SERVICE CONNECTED//  <Enter>
DRUG: ampicillin
     1   AMPICILLIN  500MG INJ           AM052     N/F       NATL FORM (IEN)
     2   AMPICILLIN 250MG CAP           AM052     N/F       NATL N/F  (IEN)
     3   AMPICILLIN 250MG/5ML SUSPENSION 100ML  AM052     N/F    NATL N/F (IEN)
     4   AMPICILLIN SOD. 1GM INJ           AM052         NATL FORM (IEN)
CHOOSE 1-4:  AMPICILLIN 250MG CAP         AM052     N/F       NATL N/F  (IEN)

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

The software checks the medication selected for any interactions or allergies noted in the patient's record. Prior to the POE project, the next prompt was a free text Sig field. After POE is installed, the next prompts shown will be the new fields used to build a Sig.
The list of available possible dosages shown after order checks is linked to the drug ordered. One of the dosages listed may be chosen or a different, free text dosage may be entered. Confirmation of the dosage is required and the value entered is displayed again to allow the user to confirm that it is correct.

```
Available Dosage(s)
       1. 250MG
       2. 500MG
       3. 1000MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 3 500MG

You entered 500MG is this correct? Yes// <Enter> YES
```

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
```

If a Route has not been associated with the Dispense Drug, the default Route of PO or Oral will be displayed. A different Route can be entered or it can be deleted at this point if needed. The Route is not required to complete a prescription. If the abbreviation entered is in the stored list of possible routes, the entry will be expanded in the Sig.

```
ROUTE: PO// <Enter>   ORAL      PO  MOUTH
```

or

```
ROUTE: PO// @ <Enter to delete>
```

A default schedule associated with the drug ordered is displayed. The default can be accepted or a different free text schedule can be entered. Free text entries cannot contain more than two spaces or be more than twenty characters long. Entries will be compared against a list of common abbreviations and expanded if the entry matches. Any entry not found in the list of common abbreviations will be displayed in the Sig as entered.

```
Schedule: QID//  (FOUR TIMES A DAY)
```

The LIMITED DURATION field is used only when a medication should be taken for a limited period of time. Days are assumed for numeric entries. Follow the number with an "H" to specify hours or an "M" to specify minutes.

NOTE: Do not use this field for Days Supply.

```
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10 (DAYS)
```

The CONJUCTION field is used to join dosing sequences in complex orders. Entries are limited to AND, THEN, or EXCEPT. 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." EXCEPT is used to describe any dosing sequence that is not routine, such as "Take 1 tablet every day EXCEPT take no tablets Wednesday." See Appendix B 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
```

Patch PSS*1*47 adds two new optional fields, OTHER LANGUAGE PREFERENCE and PMI LANGUAGE PREFERENCE in the PHARMACY PATIENT file (#55) that stores 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 option Update Patient Record [PSO PAT] and the protocol Patient Record Update [PSO PATIENT RECORD UPDATE]. If the other language preference is indicated for a patient, the user will be prompted to enter OTHER PATIENT INSTRUCTIONS after selecting the PATIENT INSTRUCTIONS field to enter/edit. If a quick code is entered at the OTHER PATIENT INSTRUCTIONS prompt, the expansion entered at the OTHER PATIENT INSTRUCTIONS EXPANSIONS will print on the prescription label.

A default value for Days Supply based on patient status is displayed. A default quantity is calculated when possible. See Appendix B for more information on this calculation.

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

Pharmacy Data Management (PDM) V. 1.0 patch PSS*1.0*61 added the NON REFILLABLE ("F") code to values for the DEA SPECIAL HDLG field of the DRUG file (#50). No refills will be allowed for any Outpatient Pharmacy prescription for a drug that contains an "F" in that field. The remaining prompts have not changed.

```
COPIES: 1// <Enter> 1
# OF REFILLS:  (0-11): 11// 0
PROVIDER:    BISMARK,ANDREW
CLINIC:    OUTPT NURSE GREEN 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// ??

                              Require        Print     Print on
  Nature of Order Activity   E.Signature   Chart Copy   Summary
  ------------------------   -----------   ----------   --------
  WRITTEN                                                   x
  VERBAL                          x            x           x
  TELEPHONED                      x            x           x
  SERVICE CORRECTION
  POLICY                                       x           x
  DUPLICATE

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 # 503906            05/30/01
NEBRASKA,NICK                 #80
TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS WITH FOOD

AMPICILLIN 250MG CAP
BISMARK,ANDREW           BISMARK,ANDREW
# of Refills: 11

         SC Percent: 40%
       Disabilities: NONE STATED

Is this Rx for a SERVICE CONNECTED condition? NO
```

To determine if the order should be charged copay, eligible copay exemptions for the order are displayed one at a time. The user is asked if the order is being prescribed for the first service-connected condition displayed. If yes is entered at this point, the fill is set for No Copay and no other exemption questions are asked. Otherwise, the next eligible exemption is displayed and the question repeated. In the following example, the patient has reported exposure to herbicides during Vietnam-era service.

```
Is this Rx for treatment of Vietnam-Era Herbicide (Agent Orange) Exposure? NO
Is this correct? YES//  <Enter>
Another New Order for NEBRASKA,NICK? YES//
```

Example 1A for Entering a new order with Local or Free-Text Dosage

The software checks the medication selected for any interactions or allergies noted in the patient's record. Prior to patch PSO*7*46, the next prompt was a free text SIG field. After patch PSO*7*46 is installed, the next prompts shown will be the new fields used to build a Sig. The list of available possible dosages shown after order checks is linked to the drug ordered. One of the dosages listed may be chosen or a different, free text dosage may be entered. Confirmation of the dosage is required and the value entered is displayed again to allow the user to confirm that it is correct.

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

```
DRUG:    TYLENOL #3  ACETAMINOPHEN AND CODEINE 30MG         CN101
         ...OK? Yes//   (Yes)
Now doing order checks.  Please wait...
Available Dosage(s)
       1. 1 TABLET
       2. 2 TABLET(S)
       3. 3 TABLET(S)

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 2 2 TABLET(S)
You entered 2 TABLET(S) is this correct? Yes// <Enter> YES
OTHER LANGUAGE DOSAGE: DOS TABLETA(S)
```

Note: The OTHER LANGUAGE DOSAGE field is only prompted for if a local or free-text dosage is entered and the patient has been identified as having another language preference.

For local or free-text dosages, the Dispense Units Per Dose and Dosage Ordered are not prompted for.

Patch PSS*1*47 adds two new optional fields, OTHER LANGUAGE PREFERENCE in the PHARMACY PATIENT file (#55) that stores if a patient has another language preference. This field is accessed through the option Update Patient Record [PSO PAT] 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 LANGUAGE DOSAGE.

If a Route has not been associated with the Dispense Drug, the default Route of PO or Oral will be displayed. A different Route can be entered or it can be deleted at this point if needed. The Route is not required to complete a prescription. If the abbreviation entered is in the MEDICATION ROUTES file, the entry will be expanded in the Sig based on the OUTPATIENT EXPANSION field.

```
ROUTE: PO// <Enter>   ORAL      PO  MOUTH
```

or

```
ROUTE: PO// @ <Enter to delete>
```

A default schedule associated with the Orderable Item of the drug ordered is displayed at the "Schedule:" prompt. The default can be accepted or a different free text schedule can be entered. Free text entries cannot contain more than two spaces or be more than twenty characters long. Entries will be compared against a list of common abbreviations, first in the ADMINISTRATION SCHEDULE file and then in the MEDICATION INSTRUCTION file, and expanded if the entry matches. Any entry not found in the list of common abbreviations will be displayed in the Sig as entered.

```
Schedule: QID// <Enter> (FOUR TIMES A DAY)
```

The LIMITED DURATION field is used only when a medication should be taken for a limited period of time. Days are assumed for numeric entries. The user should follow the number with a "H" to specify hours or a "M" to specify minutes. NOTE: Do not use this field for Days Supply.

```
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 90 (DAYS)
```

The CONJUCTION field is used to join dosing sequences in complex orders. Entries are limited to AND, THEN, or EXCEPT. 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." EXCEPT is used to describe any dosing sequence that is not routine, such as "Take 1 tablet every day EXEPT take no tablets Wednesday." See Appendix B for examples.

```
CONJUNCTION: <Enter>
```

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

```
PATIENT INSTRUCTIONS: WF                WITH FOOD
(TAKE 2 TABLETS BY MOUTH FOUR TIMES A DAY FOR 90 DAYS WITH FOOD)
OTHER PATIENT INSTRUCTIONS: WF          CON ALIMENTO
```

Patch PSS*1*47 adds two new optional fields, OTHER LANGUAGE PREFERENCE and PMI LANGUAGE PREFERENCE in the PHARMACY PATIENT file (#55) that stores if a patient has another language preference and what language their PMI sheets should print at the CMOP. These fields are accessed through the option Update Patient Record [PSO PAT] 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 NOT calculated for local and free-text dosages. See Appendix B for more information on QUANTITY calculations.

```
DAYS SUPPLY:  (1-90): 30// 90
QTY ( CAP ):   720
```

The remaining prompts have not changed.

```
COPIES: 1// <Enter> 1
# OF REFILLS:  (0-1): 1// 1
PROVIDER:    BISMARK,ANDREW
CLINIC:    OUTPT NURSE GREEN 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 # 503908            05/30/01
NEBRASKA,NICK                 #80
TAKE 2 TABLETS BY MOUTH FOUR TIMES A DAY FOR 90 DAYS WITH FOOD

ACETAMINOPHEN AND CODEINE 30MG
BISMARK,ANDREW           BISMARK,ANDREW
# of Refills: 1


        SC Percent: 40%
      Disabilities: NONE STATED

Is this Rx for a SERVICE CONNECTED condition? NO

Is this correct? YES//
```

```
Another New Order for NEBRASKA,NICK? YES//
```

View of Rx

```
OP Medications (ACTIVE)       May 30, 2001 16:48:05          Page:    1 of    3
NEBRASKA,NICK                                                        <A>
  PID: 505-09-3368                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000) f

                 Rx #: 503908
 (1) *Orderable Item: ACETAMINOPHEN TAB
 (2)            Drug: ACETAMINOPHEN AND CODEINE 30MG
                Verb: TAKE
 (3)         *Dosage: 2 TABLET(S)
   Oth. Lang. Dosage: TRE TABLETA(S)
             *Route: ORAL
          *Schedule: QID
          *Duration: 10D (DAYS)
 (4)Pat Instructions: WITH FOOD
  Other Pat. Instruc: CON ALIMENTO
                 SIG: TAKE 2 TABLET(S) BY MOUTH FOUR TIMES A DAY FOR 90 DAYS
                      WITH FOOD
 (5)  Patient Status: SERVICE CONNECTED
```

Example 2: Editing an Order

An asterisk or star (*) is shown in front of each field that will create a new order if it is changed. The Sig field cannot be edited directly but it will change if the fields that are used to build it are edited.

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 <**Enter**> through *all* the order fields when editing to save the changes.

```
OP Medications (ACTIVE)        May 30, 2001 16:48:05          Page:    1 of    3
NEBRASKA,NICK                                                          <A>
  PID: 505-09-3368                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000) f

                 Rx #: 503908
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
 (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
```

(Page intentionally added for two-sided copying)

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

```
OP Medications (ACTIVE)       May 30, 2001 16:54:25          Page:    1 of    3
NEBRASKA,NICK                                                          <A>
  PID: 505-09-3368                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)

                 Rx #: 503908
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
 (3)         *Dosage: 500 (MG)
                Verb: TAKE
      Dispense Units: 2
                Noun: CAPSULES
              *Route: ORAL
           *Schedule: QID
           *Duration: 10D (DAYS)
 (4)Pat Instructions: WITH FOOD AVOIDING DAIRY FOODS
                 SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
                      WITH FOOD AVOIDING DAIRY FOODS
 (5)  Patient Status: SERVICE CONNECTED
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   (Refill)             RN   Renew
Select Action: Next Screen//
```

If a new order is created due to the editing of a field that affects copay, like Duration, the values previously entered display as defaults.

If editing the PATIENT STATUS field of a prescription results in a change to the copay status of that prescription, the copay status of the prescription is automatically updated and an entry made in the prescription copay activity log.

```
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// E   Edit
Select fields by number:  (1-18): 4
PATIENT STATUS: OPT NSC// AUT
     1   AUTH ABS +96
     2   AUTH ABS -96
CHOOSE 1-2: 2  AUTH ABS -96
11 refills are greater than 0 allowed for AUTH ABS -96 Rx Patient Status.


The last fill has been released, do you want a reprint label? Y// NO

Patient Status field for this Rx has been changed from a COPAYMENT ELIGIBLE
patient status to a COPAYMENT EXEMPT patient status. The copay status of this Rx
will be automatically adjusted. If action needs to be taken to adjust charges
you MUST use the Reset Copay Status/Cancel Charges option.
```

If a starred field, like Dosage, is changed a new order will be created that will include a remark noting the original prescription number. Note that when the dosage is changed the dispense units per dose and quantity are recalculated.

```
Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 500// 750MG 750MG

You entered 750MG is this correct? Yes// <Enter> YES
VERB: TAKE//  <Enter> TAKE
DISPENSE UNITS PER DOSE (CAPSULE(S)): 3//  <Enter> 3
Dosage Ordered: 750MG
NOUN: CAPSULE(S)// <Enter> CAPSULE(S)
ROUTE: ORAL//  <Enter> ORAL
Schedule: QID//  <Enter>  (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
NEBRASKA,NICK                                                          <A>
  PID: 505-09-3368                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)

      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
+         This change will create a new prescription!
AC   Accept                              ED   Edit
Select Action: Next Screen//
```

```
New OP Order (ROUTINE)        May 30, 2001 17:15:09          Page:    2 of    2
NEBRASKA,NICK                                                          <A>
  PID: 505-09-3368                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)
+
  (7)    Days Supply: 10                      (8)   QTY (CAP): 120
  (9)   # of Refills: 0                       (10)  Routing: WINDOW
 (11)         Clinic: OUTPT NURSE GREEN TEAM
 (12)       Provider: BISMARK,ANDREW                 (13)   Copies: 1
 (14)        Remarks: New Order Created by editing Rx # 503908.
   Entry By: BISMARK,ANDREW                    Entry Date: MAY 30,2001 17:11:44

          This change will create a new prescription!
AC   Accept                              ED   Edit
Select Action: Edit// AC
```

NOTE: 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
NEBRASKA,NICK                                                          <A>
  PID: 505-09-3368                                Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                           Wt(kg): 79.09 (06/07/2000)
+
  (7)    Days Supply: 30                     (8)   QTY (CAP): 120
  (9)   # of Refills: 0                      (10)  Routing: WINDOW
 (11)         Clinic: OUTPT NURSE GREEN TEAM
 (12)       Provider: BISMARK,ANDREW                (13)   Copies: 1
 (14)        Remarks: New Order Created by editing Rx # 503910.
   Entry By: BISMARK,ANDREW                   Entry Date: MAY 31,2001 12:57:06



          Enter ?? for more actions
AC   Accept                              ED   Edit
Select Action: Edit// <Enter>  Edit
Select Field to Edit by number:  (1-14): 7
DAYS SUPPLY:  (1-90): 10// 7
```

Once changes are entered the screen redisplays with the changes and the order can be accepted or edited again. If the order is accepted, the prescription is checked for drug/drug interactions and, if none exist, prompts follow for nature of order and whether the patient was counseled.

```
Checking for Drug/Drug Interactions !

Nature of Order: WRITTEN// ??

                                Require        Print     Print on
  Nature of Order Activity   E.Signature   Chart Copy   Summary
  ------------------------   -----------   ----------   --------
  WRITTEN                                                   x
  VERBAL                          x            x           x
  TELEPHONED                      x            x           x
  SERVICE CORRECTION
  POLICY                                       x           x
  DUPLICATE
  REJECTED

Nature of Order: WRITTEN// <Enter>  WRITTEN
WAS THE PATIENT COUNSELED: NO// Y  YES
WAS COUNSELING UNDERSTOOD: NO// Y  YES
```

Example 3: Using the Copy Action

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

```
The following actions are also available:
AL   Activity Logs (OP)   OTH  Other OP Actions     GO   Go to Page
VF   Verify (OP)          DIN  Drug Restr/Guide (OP)LS   Last Screen
CO   Copy (OP)            +    Next Screen          PS   Print Screen
RP   Reprint (OP)         -    Previous Screen      PT   Print List
HD   Hold (OP)            <    Shift View to Left   QU   Quit
UH   Unhold (OP)          >    Shift View to Right  RD   Re Display Screen
PI   Patient Information  ADPL Auto Display(On/Off) SL   Search List
PP   Pull Rx (OP)         DN   Down a Line          UP   Up a Line
IP   Inpat. Profile (OP)  FS   First Screen
```

Copy is a hidden action used to copy an order and edit any field.

```
Medication Profile            Jun 04, 2001 15:49:09          Page:    1 of    1
COLORADO,ALBERT                                                        <A>
  PID: 505-44-5034                                  Ht(cm): 175.26 (08/10/1999)
  DOB: FEB 8,1922 (79)                              Wt(kg): 75.45 (08/10/1999)

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

-------------------------------------ACTIVE-------------------------------------
 1 503911$       AMPICILLIN 250MG CAP                   80 A  05-25 06-01   0  10
 2 503901        LISINOPRIL 10MG TAB                   150 A> 05-17 05-17   2  30

          Enter ?? for more actions
PU  Patient Record Update                NO  New Order
PI  Patient Information                  SO  Select Order
Select Action: Quit// SO   Select Order  [Or enter the order number here, e.g. 1]
Select Orders by number:  (1-2): 1
```

Remember that actions in parentheses, like Refill in this example, are not available for the order.

```
OP Medications (ACTIVE)       Jun 04, 2001 15:50:49          Page:    1 of    3
COLORADO,ALBERT                                                        <A>
  PID: 505-44-5034                                  Ht(cm): 175.26 (08/10/1999)
  DOB: FEB 8,1922 (79)                              Wt(kg): 75.45 (08/10/1999)

                Rx #: 503911$
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
 (3)         *Dosage: 500 (MG)
                Verb: TAKE
      Dispense Units: 2
                Noun: CAPSULES
              *Route: ORAL
           *Schedule: QID
 (4)Pat Instructions: Prov Comments
   Provider Comments: Prov Comments
                 SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV COMMENTS
 (5)  Patient Status: OUTPT NON-SC
 (6)       Issue Date: 05/25/01                (7)  Fill Date: 06/01/01
+          Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   (Refill)             RN   Renew
Select Action: Next Screen//CO   CO
```

Once “Copy” is entered, the heading on the screen changes to “New OP Order (COPY)” and the available actions are limited to “Edit” or “Accept.”

```
New OP Order (COPY)          Jun 04, 2001 15:51:32          Page:    1 of    2
COLORADO,ALBERT                                                          <A>
  PID: 505-44-5034                                  Ht(cm): 175.26 (08/10/1999)
  DOB: FEB 8,1922 (79)                              Wt(kg): 75.45 (08/10/1999)

      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 and the user is asked whether to discontinue the original order.

```
-------------------------------------------------------------------------------
DUPLICATE DRUG AMPICILLIN 250MG CAP in Prescription: 503911

                Status: Active                          Issued: 05/25/01
                   SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV
                        COMMENTS
                   QTY: 80                        # of refills: 0
              Provider: BISMARK,ANDREW       Refills remaining: 0
                                                Last filled on: 06/01/01
                                                   Days Supply: 10
-------------------------------------------------------------------------------
Discontinue Rx # 503911? YES

Duplicate Drug will be discontinued after the acceptance of the new order.

Now doing order checks.  Please wait...
Nature of Order: WRITTEN// <Enter>       W
WAS THE PATIENT COUNSELED: NO// NO

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

The new order information is displayed and, if it is verified as correct, the old order is discontinued.

```
Rx # 503913            06/04/01
COLORADO,ALBERT                #80
TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV COMMENTS

AMPICILLIN 250MG CAP
BISMARK,ANDREW           BISMARK,ANDREW
# of Refills: 0

Is this correct? YES// <Enter>...
 -Rx 503911 has been discontinued...


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

Is this Rx for a SERVICE CONNECTED condition: N
```

The Medication Profile screen is redisplayed at this point. The dollar sign next to the first prescription number means a copay charge is associated with that order.

```
Medication Profile            Jun 04, 2001 16:03:55          Page:    1 of    1
COLORADO,ALBERT                                                        <A>
  PID: 505-44-5034                                Ht(cm): 175.26 (08/10/1999)
  DOB: FEB 8,1922 (79)                            Wt(kg): 75.45 (08/10/1999)

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

-------------------------------ACTIVE-----------------------------------
 1 503913$       AMPICILLIN 250MG CAP                   80 A  06-04 06-04   0  10
 2 503901        LISINOPRIL 10MG TAB                   150 A> 05-17 05-17   2  30




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

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

LABEL(S) QUEUED TO PRINT


Select PATIENT NAME: <Enter>
```

The label displays the copay status of the prescription except for a partial fill.

Example 4: Renewing a Prescription

This action allows the pharmacy manager, pharmacist, or pharmacy technician to process renewals for existing orders.

[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
NEBRASKA,NICK                                                          <A>
  PID: 505-09-3368                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)

                Rx #: 503910
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
 (3)         *Dosage: 500 (MG)
                Verb: TAKE
     Dispense Units: 2
                Noun: CAPSULES
               *Route: ORAL
           *Schedule: QID
           *Duration: 10D (DAYS)
 (4)Pat Instructions: with food
                 SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
                      WITH FOOD
 (5)  Patient Status: SERVICE CONNECTED
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   (Refill)             RN   Renew
Select Action: Next Screen// RN   Renew
FILL DATE:  (6/4/2001 - 7/4/2001): TODAY// <Enter>  (JUN 04, 2001)
MAIL/WINDOW: WINDOW// <Enter>  WINDOW
METHOD OF PICK-UP:   <Enter>
Nature of Order: WRITTEN//        W
WAS THE PATIENT COUNSELED: NO// NO

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

Now Renewing Rx # 503910   Drug: AMPICILLIN 250MG CAP

Now doing 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: BISMARK,ANDREW

Edit renewed Rx ? Y// <Enter> ES
```

(*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
NEBRASKA,NICK                                                          <A>
  PID: 505-09-3368                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)
+
                 SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
                      WITH FOOD
        Days Supply: 30
                QTY (CAP): 80
  (3)   # of Refills: 0
  (4)        Routing: WINDOW
  (5)         Clinic: OUTPT NURSE GREEN TEAM
  (6)       Provider: BISMARK,ANDREW
  (7)         Copies: 1
  (8)        Remarks: RENEWED FROM RX # 503910
   Entry By: BISMARK,ANDREW                     Entry Date: JUN 4,2001 16:16:27


          Enter ?? for more actions
AC   Accept                              DC   Discontinue
BY   Bypass                              ED   Edit
Select Item(s): Quit// ED   Edit   [Or enter the field(s), e.g., 1,5,7]

Select Field to Edit by number:  (1-8): 5
CLINIC: OUTPT NURSE GREEN TEAM //OUT
     1   OUTPT NURSE BLUE TEAM
     2   OUTPT NURSE GREEN TEAM
     3   OUTPT NURSE YELLOW TEAM
CHOOSE 1-3: 1  OUTPT NURSE BLUE TEAM
```

```
Prescription Renew            Jun 04, 2001 16:24:32          Page:    2 of    2
NEBRASKA,NICK                                                          <A>
  PID: 505-09-3368                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)
+
                 SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
                      WITH FOOD
        Days Supply: 30
                QTY (CAP): 80
  (3)   # of Refills: 0
  (4)        Routing: WINDOW
  (5)         Clinic: OUTPT NURSE BLUE TEAM
  (6)       Provider: BISMARK,ANDREW
  (7)         Copies: 1
  (8)        Remarks: RENEWED FROM RX # 503910
   Entry By: BISMARK,ANDREW                     Entry Date: JUN 4,2001 16:23:56


          Enter ?? for more actions
AC   Accept                              DC   Discontinue
BY   Bypass                              ED   Edit
Select Item(s): Quit// AC  Accept

RX# 503910A has been suspended until 06-20-01.
```

It is possible to renew more than one order on the same patient.

18.1.2. Barcode Rx Menu [PSO BARCODE MENU]

Using this menu, batch barcode refills and renewals of prescriptions and check the quality of the barcode print.

Barcode Batch Prescription Entry
Check Quality of Barcode
Process Internet Refills

18.1.2.1. 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 the user is going to 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.

18.1.2.2. Check Quality of Barcode [PSO BARCODE CHECK]

No action is taken on the prescription by using this option. Use this option to check the quality of printed barcodes or use it to practice using the barcode reader. After the barcode is scanned, the barcode number will echo back on the screen and screen will return to the "Read Barcode" prompt. No action is taken on the prescription by using this option.

The following are some common causes for failure of the barcode reader and how they can be corrected.

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

18.1.2.3. Process Internet Refills [PSO INTERNET REFILLS]

Process refills entered through the Internet with this option. Fill in the information required, i.e., fill date.

18.1.3. Complete Orders from OERR [PSO LMOE FINISH]

When a clinician has created an order for a patient, the pharmacist needs to finish and verify the order. This option is used to finish orders entered into the patient record via Order Entry Results Reporting (OERR) V. 3.0. This option uses the List Manager features.

Sites can enter multiple Institutions for an Outpatient Pharmacy site using the *Site Parameter Enter/Edit* [PSO SITE PARAMETERS] option. If a site enters multiple Institutions, the user will be prompted for an Institution when entering the *Complete Orders from OERR* option. After the user selects an Institution, the Pending Orders that will be shown to the user for completion will be those Pending Orders from clinics that are associated with the Institution selected.

Orders may be selected by patient, route, clinic, or priority. Orders can be finished by Clinic or by Clinic Sort Group. Within either of these sorts, orders will be Finished on a first in/first out basis by patient. Clinic Sort Groups can be added or edited in the *Enter/Edit Clinic Sort Groups* [PSO SETUP CLINIC GROUPS] option, which is found under the *Maintenance (Outpatient Pharmacy)* [PSO MAINTENANCE] 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.

”E” can be entered at the “Select By:” prompt to stop processing orders.

Example 1: Finishing an Order from OERR

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)

          Orders to be completed for all divisions: 16

Do you want an Order Summary? No//   <Enter> NO

          Patient Prescription Processing
          Barcode Rx Menu ...
          Complete Orders from OERR
          Discontinue Prescription(s)
          Edit Prescriptions
          List One Patient's Archived Rx's
          Reprint an Outpatient Rx Label
          View Prescriptions

Select Rx (Prescriptions) Option: COMPlete Orders from OERR

Select By:  (PA/RT/PR/CL/E): PATIENT// <Enter>
All Patients or Single Patient:  (A/S/E): SINGLE// <Enter>
Select Patient: KANSAS,THOMAS T  KANSAS,THOMAS T        10-30-70    521339521
  YES     SC VETERAN


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

A question mark can be entered at the “Select Patient” prompt to get a list of patients with pending orders.

(*The Patient Information and Medication Profile screens display next, but are not shown in this example.)*

```
Pending OP Orders (ROUTINE)   May 22, 2001 10:32:41          Page:    1 of    2
KANSAS,THOMAS T
  PID: 521-33-9521                                  Ht(cm): 177.80 (02/08/1999)
  DOB: OCT 30,1970 (30)                             Wt(kg): 90.45 (02/08/1999)

*(1) Orderable Item: ACETAMINOPHEN TAB
 (2)       CMOP Drug: ACETAMINOPHEN 500MG TAB
       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: MAY 22,2001        (7) Fill Date: MAY 22,2001
 (8)     Days Supply: 30                (9)   QTY (TAB): 60
+         Enter ?? for more actions
BY  Bypass                               DC  Discontinue
ED  Edit                                 FN  Finish
Select Item(s): Next Screen//// FN Finish
```

** Editing starred fields will create a new order*

After ”Finish“ is selected, the user will be prompted to fill in any information missing from fields needed to complete the order.

If an order is sent from OERR without a drug selected, and there is only one drug tied with this order item, that drug will be inserted in the DRUG field (#2 on the screen). If there is more than one drug tied with this order item, a “No Dispense Drug Selected” message will display in the DRUG field (#2 on the screen) and a drug will have to 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, a new orderable item should be selected or the order can be discontinued.

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

If the user chooses to copy Provider Comments into the Patient Instructions, they will display on the end of both the Patient Instructions and the Sig.

NOTE: If the patient has been identified as having another language preference, the Provider Comments will not be appended to the other language Sig.

```
Copy Provider Comments into the Patient Instructions? No//  Y   YES

(TAKE ONE TABLET BY MOUTH TWICE A DAY PROVCOMMENTS)

Rx # 503902            05/22/01
KANSAS,THOMAS T               #60
TAKE ONE TABLET BY MOUTH TWICE A DAY PROVCOMMENTS

ACETAMINOPHEN 500MG TAB
BISMARK,ANDREW           BISMARK,ANDREW
# 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
Is this Rx for a SERVICE CONNECTED condition: YES// <Enter>
Press Return to Continue:
```

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.

NOTE: 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 **V***IST***A** terminal session to use VT-320 will avoid this problem.

The provider's 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.

Example 2: Finishing an Order from OERR with Multiple Institutions

Multiple Institution entries can be added using the *Site Parameter Enter/Edit* option. If a site has multiple entries in the CPRS ORDERING INSTITUTION field, the user 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.

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)

          Orders to be completed for all divisions: 21

Do you want an Order Summary:? No// <Enter>  NO

Select Rx (Prescriptions) Option: COmplete Orders from OERR

There are multiple Institutions associated with this Outpatient Site for
finishing orders entered through CPRS. Select the Institution from which to
finish orders. Enter '?' to see all choices.
```

```
Select CPRS ORDERING INSTITUTION: BIRMINGHAM, AL.//  BIRMINGHAM, AL.521

You have selected BIRMINGHAM, AL..
After completing these orders, you may re-enter this option and select again.

Select By:  (PA/RT/PR/CL/E): PATIENT// PA
```

[See the previous example for completion of this option.]

Example 3: Activity Log

Use a hidden action to view the activity log once a completed or finished order is selected.

```
OP Medications (ACTIVE)        Jun 08, 2001 11:01:29          Page:    1 of    3
NEBRASKA,NICK                                                          <A>
  PID: 505-09-3368                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)

                 Rx #: 503915
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
 (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.  All Logs:  (1-6): 6// <Enter>
```

(Continued on next page.)

```
Rx Activity Log          Jun 08, 2001 11:02:51       Page:    1 of    2
KANSAS,THOMAS T
  PID: 521-33-9521                          Ht(cm): 177.80 (02/08/1999)
  DOB: OCT 30,1970 (30)                     Wt(kg): 90.45 (02/08/1999)

Rx #: 503904   Original Fill Released: 5/25/01
Routing: Window      Finished by: BISMARK,ANDREW

Refill Log:
#  Log Date   Refill Date  Qty          Routing  Lot #       Pharmacist
=========================================================================
There are NO Refills For this  Prescription

Partial Fills:
#   Log Date   Date     Qty         Routing    Lot #        Pharmacist
=========================================================================
There are NO Partials for this Prescription

Activity Log:
#   Date        Reason         Rx Ref         Initiator Of Activity
=========================================================================
1   05/25/01                   ORIGINAL
Comments: Patient Instructions Not Sent By Provider.
2   05/25/01    PROCESSED      ORIGINAL       BISMARK,ANDREW
Comments: Label never queued to print by User

Label Log:
#   Date        Rx Ref                     Printed By
=========================================================================
There are NO Labels printed.

Copay Activity Log:
#   Date        Reason         Rx Ref         Initiator Of Activity
=========================================================================
There's NO Copay activity to report
```

[This shows an extended view of what is seen on the screen.]

```
         Enter ?? for more actions

Select Action:Quit// <Enter>
```

If this were a CMOP prescription the prompt will display as follows:

```
Select Activity Log by number
1.  Refill     2.  Partial    3.  Activity
4.  Label      5.  Copay      6.  CMOP Events  7.  All Logs:  (1-7): 7// <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 what the CMOP Event Log will look like.

```
Rx Activity Log              Jul 06, 1996 09:54:24          Page:    2 of    2
ILLINOIS,ANNE
  PID: 123-14-1960                                Ht(cm):  188.40  (12/02/00)
  DOB: DEC 14,1960 (34)                           Wt(kg):  109.10  (12/02/00)

CMOP Event Log:
Date/Time             Rx Ref    TRN-Order      Stat             Comments
================================================================================
09/17/00@1526         Ref 1     267-4            DISP    NDC: 1234TEST5678

CMOP Lot#/Expiration Date Log:
Rx Ref               Lot #               Expiration Date
================================================================================
Ref 1                1234TST              07/07/00

          Enter ?? for more actions

Select Action:Quit// <Enter>
```

18.1.4. Discontinue Prescription(s) [PSO C]

The *Discontinue Prescription(s)* (previously *Cancel Prescription*) option is used to either discontinue a prescription without deleting its record from the files, or reinstate a prescription discontinued by pharmacy.

18.1.5. Edit Prescriptions [PSO RXEDIT]

This option allows changes to be made to entered orders. Newly entered orders can be edited before release by typing in the corresponding field number. Previously entered orders can be edited by entering the prescription number, then specifying the field to be edited. An asterisk or star (*) is shown in front of each field that will create a new order if it is changed. (See ”Patient Prescription Processing-Editing an Order” for an example.)

18.1.6. 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.

18.1.7. View Prescriptions [PSO VIEW]

View the most complete information available for a specific prescription. The activity log lists the date, reason, prescription reference (Rx Ref), the initiator of the activity, and comments. The label log lists the date, prescription (Rx Ref), the person who printed it, and comments. Prescriptions with a deleted status cannot be viewed.

18.1.8. 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.

19. Using the Supervisor Menu

19.1. Supervisor Functions
[PSO SUPERVISOR]

The options on this menu are used for the implementation as well as the maintenance of the various files for the basic running of the Outpatient Pharmacy software.

Add New Providers
Daily Rx Cost
Delete a Prescription
Edit Provider
Initialize Rx Cost Statistics
Inter-Divisional Processing
Inventory
Lookup Clerk by Code
Monthly Rx Cost Compilation
Patient Address Changes Report
Pharmacist Enter/Edit
Purge Drug Cost Data
Recompile AMIS Data
Site Parameter Enter/Edit
View Provider

19.1.1. Add New Providers
[PSO PROVIDER ADD]

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

19.1.2. Daily Rx Cost
[PSO COSTDAY]

This option is used to compile pharmacy daily costs.

19.1.3. Delete a Prescription [PSO RXDL]

Using this option, a prescription status can be changed to deleted. Deleted prescriptions do not appear on any profiles.

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

19.1.4. Edit Provider [PSO PROVIDER EDIT]

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

If the inactive date given for the provider passes, the provider can no longer be used when entering a new prescription. However, the provider will still be available for refills beyond the inactivation date.

19.1.5. Initialize Rx Cost Statistics [PSO COSTINIT]

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

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

19.1.6. Inter-Divisional Processing [PSO INTERDIV]

The user can permit or prevent processing between divisions with this option.

19.1.7. Inventory [PSO INVENTORY]

Use to update the current inventory or set up a starting count of inventory for the pharmacy.

The ORDER UNIT file does not come with data. You must populate this file with your own data.

19.1.8. Look-up Clerk by Code [PSO CLERK]

Identify the clerk by entering the identifying number. Clerk code filing uses the internal identifying number of the clerk, which is determined at sign-on time and does not change.

19.1.9. Monthly Rx Cost Compilation [PSO COSTMONTH]

Use this option to gather information for reports of monthly pharmacy costs.

19.1.10. Patient Address Changes Report [PSO ADDRESS CHANGE REPORT]

This option provides a report that displays changes made to address information and temporary address information in the PATIENT file (#2). It can either be run for one patient or for all patients over the specified date range.

Example: Patient Address Changes Report

```
Select Maintenance (Outpatient Pharmacy) Option: Patient Address Changes Report

This option provides a report that displays changes made to address information
and temporary address information in the PATIENT file (#2). Changes can only
be displayed if the edits were made using VA FileMan, and the Audit
function was turned on for the field(s) at the time of the edit.


Print report for a Single patient, or All patients:  (S/A): Single//

Select PATIENT:    TESTING,PATIENT        7-20-39       xxxxxxxxx    NSC VETERAN


This report will be sorted by Date/time of edit.
A beginning and ending date must now be entered for the search.

Beginning Date: T-100  (JUL 23, 2002)

Ending Date: T  (OCT 31, 2002)
```

```
DEVICE: HOME// <Enter>   GENERIC INCOMING TELNET <Enter>


Address changes for TESTING,PATIENT   (xx-xxxx)                          PAGE: 1
made between JUL 23, 2002 and OCT 31, 2002
-----------------------------------------------------------------------------

Date/time of edit: OCT 31, 2002@11:10:18
     Field edited: STREET ADDRESS [LINE 1]
        Edited by: USER,PHARMACY
  Option/Protocol: PSO LM BACKDOOR ORDERS/PSO PATIENT RECORD UPDATE
        Old Value: <no previous value>
        New Value: TEST ADDRESS LINE 1

Date/time of edit: OCT 31, 2002@11:10:21
     Field edited: STREET ADDRESS [LINE 2]
        Edited by: USER,PHARMACY
  Option/Protocol: PSO LM BACKDOOR ORDERS/PSO PATIENT RECORD UPDATE
        Old Value: <no previous value>
        New Value: TEST ADDRESS LINE 2

Date/time of edit: OCT 31, 2002@11:10:25
     Field edited: STREET ADDRESS [LINE 3]

Press Return to continue, '^' to exit:
```

19.1.11. Pharmacist Enter/Edit [PSO RPH]

This option allows pharmacists to be identified to the system. Enter the name of the new pharmacist at the "Select Pharmacist" prompt. When the PSORPH key is shown as a default, press return. This enters the pharmacist into the file and gives him/her the PSORPH security key. To delete a pharmacist, enter the name, then enter an @ symbol at the "KEY" prompt and press return.

19.1.12. Purge Drug Cost Data [PSO PURGE DRUG COST]

To purge drug cost data from the DRUG COST file enter a starting and ending date. Then choose to run this job immediately or queue it.

Example: Purge Drug Cost Data

```
Select Maintenance (Outpatient Pharmacy) Option: PURGE Drug Cost Data

Purge Cost Data Starting: FEB 1997// <Enter> (FEB 1997)
Purge Cost Data Ending: 3/97  (MAR 1997)

Are you sure you want to purge cost data
from 02/00/97 to 03/00/97? NO// Y  YES

Do you want this option to run IMMEDIATELY or QUEUED? Q// <Enter> UEUED
Requested Start Time: NOW// <Enter> (MAY 06, 1997@10:31:23)
Task #223079 QUEUED.
```

19.1.13. Recompile AMIS Data [PSO AMIS RECOMPILE]

Gather AMIS data from various sources with this option. It is recommended that this job should be queued to run during off-peak hours or at a time that is convenient for the site.

Month/day/year may be specified for a current month report, but only month and year can be specified for reports of past months.

19.1.14. Site Parameter Enter/Edit [PSO SITE PARAMETERS]

Establish and edit parameters for the Outpatient Pharmacy software application with this option.

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

The following is an incomplete example showing only the new field found in this option.

```
Select CPRS ORDERING INSTITUTION: ANN ARBOR, MI// ?
 Answer with CPRS ORDERING INSTITUTION
Choose from:
   ANN ARBOR, MI
   ATLANTA, GA
   BIRMINGHAM, AL.
   DAYTON, OH

     You may enter a new CPRS ORDERING INSTITUTION, if you wish
     Enter the Institution for this Outpatient site for CPRS orders.
 Answer with INSTITUTION NAME, or STATION NUMBER, or CONTACT
 Do you want the entire 191-Entry INSTITUTION List? NO
Select CPRS ORDERING INSTITUTION: ANN ARBOR, MI// ANN ARBOR, MI
```

19.1.15. View Provider [PSO PROVIDER INQUIRE]

This option provides a way to quickly look up basic data for a single provider.

20. Using the Suspense Functions

Suspense Functions
[PSOPND]

The *Suspense Functions* menu allows the user to print or delete various entries and print out statistics about entries in the RX SUSPENSE file. This file contains prescription labels that have been suspended for printing at a later time. Each prescription label has with it an associated suspense date which is the same as the fill or refill date.

There are eight *Suspense Functions* options that allow the user to manipulate the data in the RX SUSPENSE file.

Auto-delete from Suspense
Change Suspense Date
Count of Suspended Rx's by Day
Delete Printed Rx's from Suspense
Log of Suspended Rx's by Day (this Division)
Print from Suspense File
Pull Early from Suspense
Reprint Batches from Suspense

20.1. Auto-delete from Suspense
[PSO PNDEL]

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

Example: Auto-delete from Suspense

```
Select Suspense Functions Option: Auto-delete from Suspense
```

```
                          Edit Option Schedule
    Option Name: PSO PNDEL1
    Menu Text: Auto-delete from Suspense                TASK ID: 1091148
  ____________________________________________________________________________

  QUEUED TO RUN AT WHAT TIME: JUL 13,1997@01:00

DEVICE FOR QUEUED JOB OUTPUT:

 QUEUED TO RUN ON VOLUME SET:

      RESCHEDULING FREQUENCY: 8D

             TASK PARAMETERS:

            SPECIAL QUEUEING:

____________________________________________________________________________


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

20.2. Change Suspense Date [PSO PNDCHG]

This option allows the suspense date for a specific prescription or all prescriptions for a patient to be changed. The new suspense date will become the fill/refill date automatically. The user is also given the opportunity to delete a specific prescription, or all prescriptions for a patient, from suspense while in this option. If a refill is deleted from suspense that has not yet been printed, the refill information will be deleted from the prescription, and the various fill dates will be adjusted accordingly. This option does not produce a label.

20.3. Count of Suspended Rx's by Day [PSO PNDCNT]

This option allows printing of a list showing the total number of prescriptions in the RX SUSPENSE file for every day in the specified time period.

This option can help the pharmacy anticipate the workload for particular days.

20.4. Delete Printed Rx's from Suspense
[PSO PNDPRI]

With this option printed prescriptions can be deleted from suspense manually. Basically, it does the same thing as the *Auto-delete from Suspense* option, but it prompts the user to delete a single prescription, all prescriptions for one patient, all prescriptions for a given date range, or all prescriptions that have printed in a batch.

A batch is the group of labels that printed for a particular Print from Suspense File job. For example, if for one day, the *Print from Suspense File* option is queued 3 times, three batches will be printed for that day. (See the *Print from Suspense File* option.)

If it is necessary to reset and reprint the suspense labels and only selected labels are wanted, those not wanted can be deleted from the batch. The deleted labels will not be reprinted as part of the batch.

20.5. Log of Suspended Rx's by Day (this Division)
[PSO PNDLOG]

Using this option, the manager can print a report by division of all suspended prescriptions sorted either by patient or identification number. The log contains the prescription number, patient name, drug name, type, and print status.

20.6. 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 will be printed for the site parameter specified number of days to be pulled from suspense.

For example, if today's date is entered and Patient A has a prescription to be printed through the date entered, all of Patient A's prescriptions between the date entered plus the number of days set in the local site parameter will be printed. If there are no prescriptions for Patient A through the date entered, no labels will print.

Labels can be sorted by patient name, SSN, or DEA Special Handling. 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. The 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. The second group will contain all the prescriptions with drugs containing an “S” (supply) in the DEA Special Handling field. The third group will contain all others. If a patient has prescriptions in suspense that fall in all three categories, that patient's labels will be printed three times, once in each group.

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 time the job was queued until the time it actually runs will be included in the job.

Labels for each job printed from suspense will be part of a batch. Each batch is identified by the Division, the user who queued the batch, and the date/time that the job was queued to begin.

Prescriptions pulled early from suspense will not be part of a batch, so they will not be able to be reprinted through the *Reprint Batches from Suspense* option.

A short profile for every patient for whom a label for a new prescription is being printed will also be printed if the local Profile with New Prescriptions site parameter is set to yes.

If a patient has partial prescriptions with regular fills, only one set of trailing documents will print for that patient. (In V. 6.0 trailer documents were printed after each partial.)

20.7. 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. The user will not be able to reprint a label with the *Reprint Batches from Suspense* option if the prescription has been pulled early suspense. In addition, Method of Pickup can also 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." Answer “Yes” 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 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.

20.8. Reprint Batches from Suspense
[PSO PNDRPT]

This option enables the user to reset the RX SUSPENSE file so that labels in a batch that have already been printed once can be printed again. This option is useful if certain portions of the previously printed labels are unusable.

A prompt is shown for a date range, and within the date range entered all of the batches that have printed from suspense and all the labels associated with each batch are shown. Next, the user can choose to reprint any number of batches. Whichever batch or batches is chosen to reprint, only the labels printed with that batch will be reprinted in the same order they were printed originally. If a prescription or prescriptions have been deleted using the *Delete Printed Rx's from Suspense* option, it will be excluded from the batch to be reset and reprinted.

Prescriptions pulled early from suspense will not be part of a batch, so they will not be able to be reprinted through the *Reprint Batches from Suspense* option.

21. Update Patient 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* [PU] screen action. If implementing Other Language Modifications, use either to set a patient's other language preference.

22. Verifying Prescriptions

Verification
[PSO VER]

Pharmacists use the *Verification* menu to verify prescriptions with a non-verified status; obtain a listing of those remaining non-verified prescriptions; or calculate the number of non-verified prescriptions by entering the patient or the clerk.

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 autocanceled on admission, it can be reinstated, but it returns to the non-verified status.

22.1. List Non-Verified Scripts
[PSO VRPT]

By using this option, a list by patient or entering clerk of all prescriptions remaining in a status of non-verified can be obtained.

22.2. Non-Verified Counts
[PSO NVCNT]

This option provides a count of the number of prescriptions remaining in a status of non-verified.

22.3. Rx Verification by Clerk
[PSO VR]

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

(Page intentionally added for two-sided copying)

SECTION TWO: Pharmacist Menu

(Page intentionally added for two-sided copying)

Pharmacist Menu

The options shown in this chapter have been previously presented in other parts of this manual, but are being repeated here so that this section can be removed for the pharmacist assigned the PSO USER1 menu.

Bingo Board User ...
Change Label Printer
Change Suspense Date
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
Release Medication
Return Medication to Stock
Rx (Prescriptions) ...
Update Patient Record
Verification ...

(Page intentionally added for two-sided copying)

23. Using the Bingo Board

23.1. Bingo Board User
[PSO BINGO USER]

This menu enables use of the bingo board display. The options on this menu allow the user to display, enter, or remove a patient's name or a number 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 Computerized Patient Record System (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.

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

23.1.1. Enter New Patient
[PSO BINGO 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 appears 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.

23.1.2. Display Patient's Name on Monitor [PSO BINGO DISPLAY PATIENT]

Use this option to begin displaying the name or number of a patient whose prescription is ready. The message, "PRESCRIPTIONS ARE READY FOR:" has been added as fixed text to the display screen.

23.1.3. 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.

23.1.4. Status of Patient's Order [PSO BINGO STATUS]

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

1) Pending - Active order input via CPRS that is in the PENDING OUTPATIENT ORDERS file.

2) Being Processed - Order that is in the PATIENT NOTIFICATION (Rx READY) file, but not displayed.

3) Ready For Pickup - Order that is in the PATIENT NOTIFICATION (Rx READY) file and is being displayed.

4) 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: KENTUCKY,KENNETH       02-23-53    231447629    NO   NSC
VETERAN


        KENTUCKY,KENNETH has the following orders for 10/31/96


Being Processed: ***Entered on OCT 31, 1996***
     Division: GENERAL HOSPITAL            Time In: 10:27    Time Out:
```

```
     Rx #: 500416,

Pending:
     Orderable Item: ACETAMINOPHEN              Provider: RICHMOND, ARTHUR
     Entered By: TOPEKA,MARK                   Time In: 10/31/96@06:46
     Drug: ACETAMINOPHEN 325MG TAB UD           Routing: MAIL

Ready For Pickup:
     Division: GENERAL HOSPITAL   Time In: 10:36    Time Out: 10:46
     Rx #: 1022731,


Enter Patient Name: <Enter>
```

24. Changing the Label Printer

Change Label Printer
[PSO CHANGE PRINTER]

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

25. Changing the Suspense Date

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).

26. Evaluating Drug Usage

26.1. 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.

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

26.1.1. Enter a New Answer Sheet
[PSOD CREATE ANSWER SHEET]

In this option, answers are entered 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.

26.1.2. 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.

26.1.3. Create/Edit a Questionnaire
[PSOD DUE BUILD QUESTIONNAIRE]

To create a questionnaire, one or more drugs being evaluated must be selected. After selecting the drugs a set of questions to be used on the questionnaire is created. 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, in creating a questionnaire each question should be a yes, no, or unknown type. Questions having a free text or numeric type answer are ignored in the summary.

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

26.1.4. 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.

26.1.5. 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, a creator of a questionnaire should strive to make each question a yes/no/unknown type question. Questions having a free text or numeric type answer are ignored in the summary.

27. 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:

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

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

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

28. Using the Interface Menu

28.1. External Interface Menu [PSO EXTERNAL INTERFACE]

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

This menu contains options for using an external interface device.

Purge External Batches
Reprint External Batches
View External Batches

28.1.1. 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:  T-7  (FEB 28, 1997)

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

Purge queued to run in background.

Select External Interface Menu Option: <Enter>
```

28.1.2. 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: T-7  (FEB 28, 1997)

End date/time: T  (MAR 07, 1997)

Gathering batches, please wait...


 BATCH    QUEUED TO PRINT ON:           PATIENT:        BROWNS PLACE
-------------------------------------------------------------------------------

  1       FEB 28,1997@08:06:14          IDAHO,PETER
  2       FEB 28,1997@08:10:56          IDAHO,PETER
  3       FEB 28,1997@08:19:20          MISSISSIPPI,RANDALL
  4       FEB 28,1997@08:38:17          OREGON,ROBERT
  5       FEB 28,1997@08:50:32          FLORIDA,FRANK
  6       FEB 28,1997@09:15:35          FLORIDA,FRANK
  7       FEB 28,1997@09:33:48          MAINE,JOE
  8       FEB 28,1997@09:39:31          ALABAMA,CHRISTOPHER P
  9       FEB 28,1997@10:36:51          GEORGIA,PAUL
  10      FEB 28,1997@11:12:07          ALASKA,FRED
  11      FEB 28,1997@12:23:22          ALASKA,FRED
  12      FEB 28,1997@12:30:16          ALASKA,FRED
  13      FEB 28,1997@12:43:32          ALASKA,FRED
  14      FEB 28,1997@13:37:24          ARIZONA,ALICE
  15      FEB 28,1997@13:46:07          DELAWARE,DAVID

Select Batch(s) to reprint:  (1-15): 5,6

Batches selected for Reprint are:

Batch 5 Queued for FEB 28,1997@08:50:32 by BISMARK,ANDREW
Batch 6 Queued for FEB 28,1997@09:15:35 by BISMARK,ANDREW

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

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

Select LABEL DEVICE: [Select Print Device]


LABEL(S) QUEUED TO PRINT!


Select External Interface Menu Option: <Enter>
```

28.1.3. 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: T-7  (FEB 28, 1997)

End date/time: T  (MAR 07, 1997)

Gathering batches, please wait...


 BATCH    QUEUED TO PRINT ON:           PATIENT:        BROWNS PLACE
-------------------------------------------------------------------------------

  1       FEB 28,1997@08:06:14          IDAHO,PETER
  2       FEB 28,1997@08:10:56          IDAHO,PETER
  3       FEB 28,1997@08:19:20          MISSISSIPPI,RANDALL
  4       FEB 28,1997@08:38:17          OREGON,ROBERT
  5       FEB 28,1997@08:50:32          FLORIDA,FRANK
  6       FEB 28,1997@09:15:35          FLORIDA,FRANK
  7       FEB 28,1997@09:33:48          MAINE,JOE
  8       FEB 28,1997@09:39:31          ALABAMA,CHRISTOPHER P
  9       FEB 28,1997@10:36:51          GEORGIA,PAUL
  10      FEB 28,1997@11:12:07          ALASKA,FRED
  11      FEB 28,1997@12:23:22          ALASKA,FRED
  12      FEB 28,1997@12:30:16          ALASKA,FRED
  13      FEB 28,1997@12:43:32          ALASKA,FRED
  14      FEB 28,1997@13:37:24          ARIZONA,ALICE
  15      FEB 28,1997@13:46:07          DELAWARE,DAVID

Select Batch(s) to view:  (1-15): 5,6

Batches selected for Viewing are:

Batch 5 Queued for FEB 28,1997@08:50:32 by BISMARK,ANDREW
Batch 6 Queued for FEB 28,1997@09:15:35 by BISMARK,ANDREW

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

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


RX #              NAME -> FLORIDA,FRANK                      BATCH 5
-------------------------------------------------------------------------------
2820              NADOLOL 40MG TAB                          ACTIVE

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


RX #              NAME -> FLORIDA,FRANK                      BATCH 6
-------------------------------------------------------------------------------
2821              MICONAZOLE NITRATE 2% LOT 60ML            ACTIVE
END OF LIST

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

Start date/time: <Enter>

Select External Interface Menu Option: <Enter>
```

29. Medication Profile

[PSO P]

The Medication Profile displays a profile of all prescriptions on file for a particular patient. This information may be viewed directly on the screen or it can be printed.

The medication profile is available in two formats. The short format contains the patient name, address, SSN, DOB, eligibility, narrative, reactions, prescriptions, prescription number, drug name, Sig, status, quantity, issue date, last fill date, and refills remaining. The long format contains all information contained on the short format and the following additional fields: physician's name, clerk code, fill date, total allowable refills, dates of refills, and partial fills, whether the prescription was filled at the pharmacy window or by mail, and which division filled it.

The short format displays the status in an abbreviated form. The following is an explanation of the codes: A (Active), DC (Discontinued), E (Expired), H (Hold), N (Non Verified), P (Pending due to drug interactions), and S (Suspended). A “$” next to the prescription number indicates that the prescription is copay eligible.

If the prescription has been returned to stock, the letter (R) will appear next to the last fill date.

30. Pharmacy Intervention

30.1. 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.

This menu is locked with the PSORPH key.

Enter Pharmacy Intervention
Edit Pharmacy Intervention
Print Pharmacy Intervention
Delete Intervention
View Intervention

30.1.1. 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.

30.1.2. Edit Pharmacy Intervention
[PSO INTERVENTION EDIT]

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

30.1.3. 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 subcount 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.

30.1.4. 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.

30.1.5. 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.

31. Print from Suspense File [PSO PNDLBL]

This option allows labels to be printed from the 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 will be printed for the site parameter specified number of days to be pulled from suspense.

For example, if today's date is entered and Patient A has a prescription to be printed through the that date, all of Patient A's prescriptions between the date entered plus the number of days set in the local site parameter will be printed. If there are no prescriptions for Patient A through the date entered, no labels will print.

Labels can be sorted by patient name, SSN or DEA Special Handling. If the first sort is by DEA, the next level of sorting must be by patient name or SSN. Sorting by DEA will send the labels to the printer in three groups. The 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. The second group will contain all the prescriptions with drugs containing an S (supply) in the DEA Special Handling field. The third group will contain all others. If a patient has prescriptions in suspense that fall in all three categories, that patient's labels will be printed three times, once in each group.

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 needs to be undone. Any prescription that is put in suspense for the "Print Through Date" between the time the job was queued until the time it actually runs will be included in the job.

Labels for each job printed from suspense will be part of a batch. Each batch is identified by the Division, the user who queued the batch, and the date/time that the job was queued to begin.

Prescriptions pulled early from suspense will not be part of a batch, so they will not be able to be reprinted through the *Reprint Batches from Suspense* option.

A short profile for every patient for whom a label for a new prescription is being printed will also be printed if the 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.)

32. Process Drug/Drug Interactions

[PSO INTERACTION VERIFY]

Using this option, information for medications that have been marked as a drug/drug interaction can be processed. This allows prescriptions with drug/drug interactions to be processed, deleted, or bypassed. To complete any of these actions, an assigned signature code, which will not appear on the screen, must be entered. It will then be verified or non-verified. The *Electronic Signature code Edit* option can be found under the *User's Toolbox* menu in Kernel V. 8.0.

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

33. Pull Early from Suspense

[PSO PNDRX]

This option is used to pull a specific prescription or all prescriptions for a patient early. If a prescription is pulled early using this option, it will not be associated with any printed batch. A label cannot be reprinted with the *Reprint Batches from Suspense* option if the prescription has been pulled early suspense. In addition, Method of Pickup can be edited. Also, there is no longer a "DELETE FROM SUSPENSE PROMPT." That prompt has been changed to "Pull Rx(s) and delete from Suspense." Yes must be answered to this prompt to pull the prescriptions, and they will always be deleted from suspense. Since prescriptions that are pulled early from suspense do not belong to any printed batch and cannot be reprinted from suspense, there is no reason to leave them in suspense.

If the 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.

34. Releasing Medication

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 environmental contaminants 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 of environmental contaminant exposure during the Persian Gulf War?' 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 of MailMan Message

```
Subj: RX COPAY STATUS REVIEW NEEDED  [#4271073] 28 Sep 01 08:37  17 lines
From: OUTPATIENT PHARMACY PACKAGE  In 'IN' basket.   Page 1  *New*
-------------------------------------------------------------------------------
 LRJLT,IHKUL BLN  (1963P)    CHEYENNE VAM&ROC
537455 (3)    COPAY
ABSORBASE TOP OINT

Due to a change in copay criteria, additional information listed below is
needed to determine the final copay status for this Rx so that appropriate
action can be taken by pharmacy personnel.

Is this Rx for a Service Connected Condition?

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.

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 copay charges.

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 of 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       HARRISBURG,HENRY
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 of 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       HARRISBURG,HENRY
Comment:  NO BILLING FOR THIS FILL
2   10/23/01    IB-INITIATED COPAY    ORIGINAL       HARRISBURG,HENRY
Comment: PARTIAL CHARGE
```

If a prescription is in a releasable status, the user will be given an error message, such as:
* Prescription has a status of (status) and is not eligible for release.
* Prescription was deleted.
* Improper barcode format.
* Non-existent prescription.

Copay is not charged for a partial fill.

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

Changes to Releasing Orders function - Digitally Signed Orders Only

The release function in the *Patient Prescription Processing* option has been modified with patch PSO*7*131 to require that all digitally signed orders for Schedule II controlled substances (CSII orders) be released through the *Outpatient Rx* option in the *Controlled Substances* (CS) menu. If DEA/PKI is activated and an order is digitally signed, the user will be advised that the order must be released through the *Outpatient Rx* 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.

NOTE: At this time the functionality for entering and processing digitally signed orders is part of a pilot project limited to only one site. System-wide implementation of this functionality requires further study and modifications.

35. Returning Medication to Stock

Return 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.

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.

```
Copay Activity Log:
#   Date        Reason               Rx Ref         Initiator Of Activity
==============================================================================
1   11/21/01    REMOVE COPAY CHARGE  REFILL 1       DES MOINES,DIANE
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.

36. Ordering/Processing a Prescription

36.1. Rx (Prescriptions)

[PSO RX]

Actions are taken on prescriptions via this menu. Options (renew, refill, edit, release, etc.) that previously appeared in Outpatient Pharmacy V. 6.0 now appear as actions in the *Patient Prescription Processing* option found on this menu. Patch PSO*7*46 changes the way in which a Sig is built for an order. Instead of entering a free text Sig, data must be entered for the individual fields that are used to build a Sig. Default values are also displayed for possible dosages, schedules, med routes, and patient instructions. When possible, default quantities are calculated using data entered into specific fields during medication order entry.

Patient Prescription Processing
Barcode Rx Menu ...
Complete Orders from OERR
Discontinue Prescription(s)
Edit Prescriptions
List One Patient's Archived Rx's
Reprint an Outpatient Rx Label
View Prescriptions

36.1.1. Patient Prescription Processing [PSO LM BACKDOOR ORDERS]

This option is used to process outpatient medication via OERR V. 3.0. The *Patient Prescription Processing* option is found on the Outpatient Pharmacy Manager and the Pharmacist menus under the *Rx (Prescriptions)* option. This option uses List Manager features to allow the 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

This option is also found on the Pharmacy Technician's menu, but with limited actions. A pharmacy technician can only enter a new order, refill, copy, renew, reprint, release, order a partial, or pull early from suspense.

Actions are displayed 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. Outpatient Pharmacy hidden actions are displayed with the letters OP next to the action.

Example 1: 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 ...
          Complete Orders from OERR
          Discontinue Prescription(s)
          Edit Prescriptions
          List One Patient's Archived Rx's
          Reprint an Outpatient Rx Label
          View Prescriptions

Select Rx (Prescriptions) Option: patient Prescription Processing
Select PATIENT NAME: scheel, t  KANSAS,THOMAS T        10-30-70    521339521
 YES     SC VETERAN

Enter RETURN to continue or '^' to exit: <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 is now two pages long; only the second screen is shown in this example.

```
Patient Information          May 22, 2001 10:44:38          Page:    2 of    2
KANSAS,THOMAS T
  PID: 521-33-9521                                Ht(cm): 177.80 (02/08/1999)
  DOB: OCT 30,1970 (30)                           Wt(kg): 90.45 (02/08/1999)
  SEX: MALE
+
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 is Quit at the "Select Action" prompt, a return at this prompt means quit the screen and display the Medication Profile.

[Next Screen]

```
Medication Profile            May 22, 2001 10:44:56          Page:    1 of    1
KANSAS,THOMAS T
  PID: 521-33-9521                                Ht(cm): 177.80 (02/08/1999)
  DOB: OCT 30,1970 (30)                           Wt(kg): 90.45 (02/08/1999)

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

-------------------------------------ACTIVE----------------------------------
 1 503902        ACETAMINOPHEN 500MG TAB              60 A> 05-22 05-22   3  30
 2 503886$       DIGOXIN (LANOXIN) 0.2MG CAP          60 A> 05-07 05-07   5  30
-------------------------------------PENDING----------------------------------
 6 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. Actions that apply only to outpatient orders are followed by (OP).

```
The following actions are also available:
RP   Reprint (OP)          OTH  Other OP Actions     LS   Last Screen
RN   Renew (OP)            RD   Re Display Screen    FS   First Screen
DC   Discontinue (OP)      PL   Print List           GO   Go to Page
RL   Release (OP)          PS   Print Screen         +    Next Screen
RF   Refill (OP)           >    Shift View to Right  -    Previous Screen
PP   Pull Rx (OP)          <    Shift View to Left   ADPL Auto Display (On/Off)
IP   Inpat. Profile (OP)   SL   Search List          UP   Up a Line
DN   Down a Line           QU   Quit
```

Typing in the letters “NO” creates a new order.

(The screen display has been shortened to fit on the page.)

```
Medication Profile            May 22, 2001 10:44:56          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
PATIENT STATUS: SERVICE CONNECTED//  <Enter>
DRUG: ampicillin
     1   AMPICILLIN  500MG INJ           AM052     N/F       NATL FORM (IEN)
     2   AMPICILLIN 250MG CAP           AM052     N/F       NATL N/F  (IEN)
     3   AMPICILLIN 250MG/5ML SUSPENSION 100ML  AM052     N/F    NATL N/F (IEN)
     4   AMPICILLIN SOD. 1GM INJ           AM052         NATL FORM (IEN)
CHOOSE 1-4:  AMPICILLIN 250MG CAP         AM052     N/F       NATL N/F  (IEN)

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

The software checks the medication selected for any interactions or allergies noted in the patient's record. Prior to patch PSO*7*46, the next prompt was a free text SIG field. After patch PSO*7*46 is installed, the next prompts shown will be the new fields used to build a Sig. The list of available possible dosages shown after order checks is linked to the drug ordered. One of the dosages listed may be chosen or a different, free text dosage may be entered. Confirmation of the dosage is required and the value entered is displayed again to allow the user to confirm that it is correct.

```
Available Dosage(s)
       1. 250MG
       2. 500MG
       3. 1000MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 3 500MG

You entered 500MG is this correct? Yes// <Enter> YES
```

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
```

If a Route has not been associated with the Dispense Drug, the default Route of PO or Oral will be displayed. A different Route can be entered or it can be deleted at this point if needed. The Route is not required to complete a prescription. If the abbreviation entered is in the MEDICATION ROUTES file, the entry will be expanded in the Sig based on the OUTPATIENT EXPANSION field.

```
ROUTE: PO// <Enter>   ORAL      PO  MOUTH
```

or

```
ROUTE: PO// @ <Enter to delete>
```

A default schedule associated with the Orderable Item of the drug ordered is displayed at the "Schedule:" prompt. The default can be accepted or a different free text schedule can be entered. Free text entries cannot contain more than two spaces or be more than twenty characters long. Entries will be compared against a list of common abbreviations, first in the ADMINISTRATION SCHEDULE file and then in the MEDICATION INSTRUCTION file, and expanded if the entry matches. Any entry not found in the list of common abbreviations will be displayed in the Sig as entered.

```
Schedule: QID//  (FOUR TIMES A DAY)
```

The LIMITED DURATION field is used only when a medication should be taken for a limited period of time. Days are assumed for numeric entries. The user should follow the number with a "H" to specify hours or a "M" to specify minutes. NOTE: Do not use this field for Days Supply.

```
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10 (DAYS)
```

The CONJUCTION field is used to join dosing sequences in complex orders. Entries are limited to AND, THEN, or EXCEPT. 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." EXCEPT is used to describe any dosing sequence that is not routine, such as "Take 1 tablet every day EXEPT take no tablets Wednesday." See Appendix B 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
```

Patch PSS*1*47 adds two new optional fields, OTHER LANGUAGE PREFERENCE and PMI LANGUAGE PREFERENCE in the PHARMACY PATIENT file (#55) that stores 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 option Update Patient Record [PSO PAT] and the protocol Patient Record Update [PSO PATIENT RECORD UPDATE]. If the other language preference is indicated for a patient, the user will be prompted to enter OTHER PATIENT INSTRUCTIONS after selecting the PATIENT INSTRUCTIONS field to enter/edit. If a quick code is entered at the OTHER PATIENT INSTRUCTIONS prompt, the expansion entered at the OTHER PATIENT INSTRUCTIONS EXPANSIONS will print on the prescription label.

A default value for Days Supply based on patient status is displayed. A default quantity is calculated when possible. See Appendix B for more information on QUANTITY calculations.

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

The remaining prompts have not changed.

```
COPIES: 1// <Enter> 1
# OF REFILLS:  (0-11): 11// 0
PROVIDER:    BISMARK,ANDREW
CLINIC:    OUTPT NURSE GREEN 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 # 503906            05/30/01
NEBRASKA,NICK                  #80
TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS WITH FOOD

AMPICILLIN 250MG CAP
BISMARK,ANDREW           BISMARK,ANDREW
# of Refills: 11


         SC Percent: 40%
       Disabilities: NONE STATED

Is this Rx for a 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.

```
Is this Rx for treatment of Vietnam-Era Herbicide (Agent Orange) Exposure? No

Is this correct? YES//  <Enter>

Another New Order for NEBRASKA,NICK? 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.

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

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

Select from list of Available Dosages, 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
```

Example 2: 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.

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 <**Enter**> through *all* the order fields when editing to save the changes.

```
OP Medications (ACTIVE)        May 30, 2001 16:48:05          Page:    1 of    3
NEBRASKA,NICK                                                          <A>
  PID: 505-09-3368                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)

                 Rx #: 503908
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
 (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.

```
OP Medications (ACTIVE)       May 30, 2001 16:54:25          Page:    1 of    3
NEBRASKA,NICK                                                          <A>
  PID: 505-09-3368                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)

                 Rx #: 503908
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
 (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, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 500// 750MG 750MG

You entered 750MG is this correct? Yes// <Enter> YES
VERB: TAKE//  <Enter> TAKE
DISPENSE UNITS PER DOSE (CAPSULE(S)): 3//  <Enter> 3
Dosage Ordered: 750MG
NOUN: CAPSULE(S)// <Enter> CAPSULE(S)
ROUTE: ORAL//  <Enter> ORAL
Schedule: QID//  <Enter>  (FOUR TIMES A DAY)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10D//  <Enter> 10D (DAYS)
CONJUNCTION: <Enter>
```

(Order screens are merged to display all fields)

```
New OP Order (ROUTINE)        May 30, 2001 17:11:44          Page:    1 of    2
NEBRASKA,NICK                                                              <A>
  PID: 505-09-3368                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)

      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 GREEN TEAM
 (12)       Provider: BISMARK,ANDREW                 (13)   Copies: 1
 (14)        Remarks: New Order Created by editing Rx # 503908.
   Entry By: BISMARK,ANDREW                    Entry Date: MAY 30,2001 17:11:44

          This change will create a new prescription!
AC   Accept                              ED   Edit
Select Action: Edit// AC
```

NOTE: 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
NEBRASKA,NICK                                                          <A>
  PID: 505-09-3368                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)
+
  (7)    Days Supply: 30                      (8)   QTY (CAP): 120
  (9)   # of Refills: 0                       (10)  Routing: WINDOW
 (11)         Clinic: OUTPT NURSE GREEN TEAM
 (12)       Provider: BISMARK,ANDREW                 (13)   Copies: 1
 (14)        Remarks: New Order Created by editing Rx # 503910.
   Entry By: BISMARK,ANDREW                   Entry Date: MAY 31,2001 12:57:06





          Enter ?? for more actions
AC   Accept                              ED   Edit
Select Action: Edit// <Enter>  Edit
Select Field to Edit by number:  (1-14): 7
DAYS SUPPLY:  (1-90): 10// 7
```

Once changes are entered the screen redisplays with the changes and the order can be accepted or edited again.

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

```
Checking for Drug/Drug Interactions !

Nature of Order: WRITTEN// ??

                                Require        Print     Print on
  Nature of Order Activity   E.Signature   Chart Copy   Summary
  ------------------------   -----------   ----------   --------
  WRITTEN                                                   x
  VERBAL                          x            x           x
  TELEPHONED                      x            x           x
  SERVICE CORRECTION
  POLICY                                       x           x
  DUPLICATE
  REJECTED

Nature of Order: WRITTEN// <Enter>  WRITTEN
WAS THE PATIENT COUNSELED: NO// Y  YES
WAS COUNSELING UNDERSTOOD: NO// Y  YES
```

Example 3: Using the Copy Action

If 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)   OTH  Other OP Actions     GO   Go to Page
VF   Verify (OP)          DIN  Drug Restr/Guide (OP)LS   Last Screen
CO   Copy (OP)            +    Next Screen          PS   Print Screen
RP   Reprint (OP)         -    Previous Screen      PT   Print List
HD   Hold (OP)            <    Shift View to Left   QU   Quit
UH   Unhold (OP)          >    Shift View to Right  RD   Re Display Screen
PI   Patient Information  ADPL Auto Display(On/Off) SL   Search List
PP   Pull Rx (OP)         DN   Down a Line          UP   Up a Line
IP   Inpat. Profile (OP)  FS   First Screen
```

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.

```
Medication Profile            Jun 04, 2001 15:49:09          Page:    1 of    1
COLORADO,ALBERT                                                        <A>
  PID: 505-44-5034                                  Ht(cm): 175.26 (08/10/1999)
  DOB: FEB 8,1922 (79)                              Wt(kg): 75.45 (08/10/1999)

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

-------------------------------------ACTIVE-------------------------------------
 1 503911$       AMPICILLIN 250MG CAP                   80 A  05-25 06-01   0  10
 2 503901        LISINOPRIL 10MG TAB                   150 A> 05-17 05-17   2  30



          Enter ?? for more actions
PU  Patient Record Update                NO  New Order
PI  Patient Information                  SO  Select Order
Select Action: Quit// SO   Select Order   [Or enter the order number here, e.g. 1]
Select Orders by number:  (1-2): 1
```

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
COLORADO,ALBERT                                                          <A>
  PID: 505-44-5034                                  Ht(cm): 175.26 (08/10/1999)
  DOB: FEB 8,1922 (79)                              Wt(kg): 75.45 (08/10/1999)

                 Rx #: 503911$
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
 (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”.

```
New OP Order (COPY)            Jun 04, 2001 15:51:32          Page:    1 of    2
COLORADO,ALBERT                                                          <A>
  PID: 505-44-5034                                  Ht(cm): 175.26 (08/10/1999)
  DOB: FEB 8,1922 (79)                              Wt(kg): 75.45 (08/10/1999)

      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 AMPICILLIN 250MG CAP in Prescription: 503911

                Status: Active                          Issued: 05/25/01
                   SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV
                        COMMENTS
                   QTY: 80                       # of refills: 0
              Provider: BISMARK,ANDREW       Refills remaining: 0
                                                Last filled on: 06/01/01
                                                   Days Supply: 10
-------------------------------------------------------------------------------
Discontinue Rx # 503911? YES

Duplicate Drug will be discontinued after the acceptance of the new order.

Now doing order checks.  Please wait...
Nature of Order: WRITTEN// <Enter>        W
WAS THE PATIENT COUNSELED: NO// <Enter>  NO

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

The new order information is displayed and, once verified, the old order is discontinued.

```
Rx # 503913            06/04/01
COLORADO,ALBERT                #80
TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV COMMENTS

AMPICILLIN 250MG CAP
BISMARK,ANDREW           BISMARK,ANDREW
# of Refills: 0

Is this correct? YES//<Enter>   ...
 -Rx 503911 has been discontinued...


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

Is this Rx for a 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
COLORADO,ALBERT                                                        <A>
  PID: 505-44-5034                                  Ht(cm): 175.26 (08/10/1999)
  DOB: FEB 8,1922 (79)                              Wt(kg): 75.45 (08/10/1999)

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

-------------------------------ACTIVE-------------------------------------
 1 503913$       AMPICILLIN 250MG CAP                    80 A  06-04 06-04   0  10
 2 503901        LISINOPRIL 10MG TAB                    150 A> 05-17 05-17   2  30



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

Label Printer: TELNET
LABEL: QUEUE/CHANGE PRINTER/HOLD/SUSPEND or '^' to bypass Q//<Enter>

LABEL(S) QUEUED TO PRINT


Select PATIENT NAME: <Enter>
```

Example 4: Renewing a Prescription

This action allows the pharmacy manager, pharmacist, or pharmacy technician to process renewals for existing orders..

[This example begins after an order has been from the Medication Profile screen.]

```
OP Medications (ACTIVE)       Jun 04, 2001 16:14:40          Page:    1 of    3
NEBRASKA,NICK                                                          <A>
  PID: 505-09-3368                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)

                 Rx #: 503910
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
 (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 # 503910   Drug: AMPICILLIN 250MG CAP

Now doing 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: BISMARK,ANDREW

Edit renewed Rx ? Y//
```

At this point, the order can be edited as discussed in Example 2. If the order is not edited, the order is renewed and the display returns to the Medication Profile screen.

NOTE: It is possible to renew more than one order on the same patient by typing the desired order numbers separated by a comma (ex. 1,3,5).

36.1.2. Barcode Rx Menu [PSO BARCODE MENU]

Batch barcode refills and renewals of prescriptions and check the quality of the barcode print with this menu.

Barcode Batch Prescription Entry
Check Quality of Barcode
Process Internet Refills

36.1.2.1. 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.

36.1.2.2. 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)

36.1.2.3. Process Internet Refills [PSO INTERNET REFILLS]

Process refills entered through the Internet with this option. Fill in the information required, i.e., fill date.

36.1.3. Complete Orders from OERR [PSO LMOE FINISH]

When a clinician has created an order for a patient, the pharmacist needs to finish and verify the order. This option is used to finish orders entered into the patient record via Order Entry Results Reporting (OERR) V. 3.0. This option uses the List Manager features.

Orders may be selected by patient, route, or priority. ”E” can be entered at the “Select By:” prompt to stop processing orders.

Example 1: Finishing an Order from OERR

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)

          Orders to be completed for all divisions: 16

Do you want an Order Summary? No//   <Enter> NO

          Patient Prescription Processing
          Barcode Rx Menu ...
          Complete Orders from OERR
          Discontinue Prescription(s)
          Edit Prescriptions
          List One Patient's Archived Rx's
          Reprint an Outpatient Rx Label
          View Prescriptions

Select Rx (Prescriptions) Option: COMPlete Orders from OERR

Select By:  (PA/RT/PR/CL/E): PATIENT// <Enter>
All Patients or Single Patient:  (A/S/E): SINGLE// <Enter>
Select Patient: KANSAS,THOMAS T  KANSAS,THOMAS T        10-30-70    521339521
  YES     SC VETERAN


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

A question mark can be entered at the “Select Patient” prompt to get a list of patients for whom pending orders exist. 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..

(*The Patient Information and Medication Profile screens display next, but are not shown in this example.)*

```
Pending OP Orders (ROUTINE)   May 22, 2001 10:32:41          Page:    1 of    2
KANSAS,THOMAS T
  PID: 521-33-9521                                  Ht(cm): 177.80 (02/08/1999)
  DOB: OCT 30,1970 (30)                             Wt(kg): 90.45 (02/08/1999)

*(1) Orderable Item: ACETAMINOPHEN TAB
 (2)       CMOP Drug: ACETAMINOPHEN 500MG TAB
       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: MAY 22,2001        (7) Fill Date: MAY 22,2001
 (8)     Days Supply: 30                (9)   QTY (TAB): 60
+         Enter ?? for more actions
BY  Bypass                              DC  Discontinue
ED  Edit                                FN  Finish
Select Item(s): Next Screen//// FN Finish
```

** Editing starred fields will create a new order*

After "Finish" is selected, the user is prompted to fill in any information missing from fields needed to complete the order.

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, a new orderable item should be selected or the order can be discontinued.

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

If the user chooses to copy Provider Comments into the Patient Instructions, they will be display on the end of both the Patient Instructions and the Sig.

NOTE: If the patient has been identified as having another language preference, the Provider Comments will not be appended to the other language Sig.

```
Copy Provider Comments into the Patient Instructions? No//  Y   YES

(TAKE ONE TABLET BY MOUTH TWICE A DAY PROVCOMMENTS)

Rx # 503902            05/22/01
KANSAS,THOMAS T                #60
TAKE ONE TABLET BY MOUTH TWICE A DAY PROVCOMMENTS

ACETAMINOPHEN 500MG TAB
BISMARK,ANDREW           BISMARK,ANDREW
# 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
Is this Rx for a SERVICE CONNECTED condition: YES// <Enter>
Press Return to Continue:
```

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.

NOTE: 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 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.

Example 2: 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.

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)

          Orders to be completed for all divisions: 21

Do you want an Order Summary:? No// <Enter>  NO

Select Rx (Prescriptions) Option: COmplete Orders from OERR

There are multiple Institutions associated with this Outpatient Site for
finishing orders entered through CPRS. Select the Institution from which to
finish orders. Enter '?' to see all choices.
```

```
Select CPRS ORDERING INSTITUTION: BIRMINGHAM, AL.// <Enter> BIRMINGHAM, AL.521

You have selected BIRMINGHAM, AL..
After completing these orders, you may re-enter this option and select again.

Select By:  (PA/RT/PR/CL/E): PATIENT// PA
```

[See the previous example for completion of this option.]

Example 3: Activity Log

Multiple Activity Logs exist for a completed or finished order. Any single activity log or all activity logs can be viewed.

```
OP Medications (ACTIVE)       Jun 08, 2001 11:01:29          Page:    1 of    3
NEBRASKA,NICK                                                          <A>
  PID: 505-09-3368                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)

                 Rx #: 503915
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
 (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.  All Logs:  (1-6): 6// <Enter>
```

```
Rx Activity Log          Jun 08, 2001 11:02:51       Page:    1 of    2
KANSAS,THOMAS T
  PID: 521-33-9521                          Ht(cm): 177.80 (02/08/1999)
  DOB: OCT 30,1970 (30)                     Wt(kg): 90.45 (02/08/1999)

Rx #: 503904   Original Fill Released: 5/25/01
Routing: Window      Finished by: BISMARK,ANDREW

Refill Log:
#  Log Date   Refill Date  Qty          Routing  Lot #       Pharmacist
==========================================================================
There are NO Refills For this  Prescription

Partial Fills:
#   Log Date   Date     Qty         Routing    Lot #        Pharmacist
==========================================================================
There are NO Partials for this Prescription

Activity Log:
#   Date        Reason         Rx Ref         Initiator Of Activity
==========================================================================
1   05/25/01                   ORIGINAL
Comments: Patient Instructions Not Sent By Provider.
2   05/25/01    PROCESSED      ORIGINAL       BISMARK,ANDREW
Comments: Label never queued to print by User

Label Log:
#   Date        Rx Ref                     Printed By
==========================================================================
There are NO Labels printed.

Copay Activity Log:
#   Date        Reason         Rx Ref         Initiator Of Activity
==========================================================================
There's NO Copay activity to report
```

[This shows an extended view of what displays on the screen.]

```
         Enter ?? for more actions

Select Action:Quit// <Enter>
```

If this were a CMOP prescription the prompt will display as follows:

```
Select Activity Log by number
1.  Refill     2.  Partial    3.  Activity
4.  Label      5.  Copay      6.  CMOP Events  7.  All Logs:  (1-7): 7// 6
```

The Activity Logs will appear the same as the OP logs with the exception of the addition of a CMOP Event Log. An example of what the CMOP Event Log will look like follows.

```
Rx Activity Log            Jul 06, 1996 09:54:24          Page:    2 of    2
ILLINOIS,ANNE
  PID: 123-14-1960                                Ht(cm):  188.40  (12/02/00)
  DOB: DEC 14,1960 (34)                           Wt(kg):  109.10  (12/02/00)

CMOP Event Log:
Date/Time             Rx Ref    TRN-Order      Stat             Comments
==============================================================================
09/17/00@1526         Ref 1     267-4            DISP    NDC: 1234TEST5678

CMOP Lot#/Expiration Date Log:
Rx Ref                Lot #               Expiration Date
==============================================================================
Ref 1                 1234TST              07/07/00

          Enter ?? for more actions

Select Action:Quit// <Enter>
```

36.1.4. Discontinue Prescription(s) [PSO C]

The discontinue function is used either to discontinue a prescription without deleting its record from the files, or reinstate a prescription discontinued by pharmacy.

36.1.5. 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 ”Patient Prescription Processing-Editing an Order” for an example.)

36.1.6. 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.

36.1.7. 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.

36.1.8. View Prescriptions [PSO VIEW]

View the most complete information available for a specific prescription. The activity log lists the date, reason, prescription reference (Rx Ref), the initiator of the activity, and comments. The label log lists the date, prescription (Rx Ref), the person who printed it, and comments. Prescriptions with a deleted status cannot be viewed.

37. 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* [PU] screen action. If implementing Other Language Modifications, use either to set a patient's other language preference.

38. Verifying Prescriptions

38.1. 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.

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.

Note: Prescriptions in a non-verified status cannot be canceled, edited, or deleted through the usual options. If a non-verified prescription is autocanceled on admission, it can be reinstated, but it returns to the non-verified status.

38.1.1. List Non-Verified Scripts [PSO VRPT]

By using this option the user can obtain a list by patient or entering clerk of all prescriptions remaining in a status of non-verified.

38.1.2. 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.

38.1.3. Rx Verification by Clerk [PSO VR]

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

SECTION THREE: Pharmacy Technician's Menu

(Page intentionally added for two-sided copying.)

Pharmacy Technician's Menu

The options shown in this chapter have already been presented in Chapter Two: “Outpatient Pharmacy Manager,” but are being repeated here so that this section can be removed for the pharmacy technician and other pharmacy personnel assigned the *PSO USER2* menu.

The *PSO USER2* menu should be assigned to all pharmacy technicians and other pharmacy personnel who will view prescriptions and/or inquire into other Outpatient Pharmacy files.

Bingo Board User ...
Change Label Printer
DUE User ...
Medication Profile
Patient Prescription Processing
Pull Early from Suspense
Release Medication
Update Patient Record

39. Using the Bingo Board

39.1. Bingo Board User
[PSO BINGO USER]

This menu enables use of the bingo board display. The options on this menu allow the user to display, enter, or remove a patient's name or a number 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.

39.1.1. Enter New Patient
[PSO BINGO 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 be entered.

A "Ticket #" prompt appears 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.

39.1.2. Display Patient's Name on Monitor
[PSO BINGO DISPLAY PATIENT]

Use this option to begin displaying the name or number of a patient whose prescription is ready. The message, "PRESCRIPTIONS ARE READY FOR:" has been added as fixed text to the display screen.

39.1.3. 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.

39.1.4. Status of Patient's Order [PSO BINGO STATUS]

This option enables a check 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:

1) Pending - Active order input via CPRS that is in the PENDING OUTPATIENT ORDERS file.

2) Being Processed - Order that is in the PATIENT NOTIFICATION (Rx READY) file, but not displayed.

3) Ready For Pickup - Order that is in the PATIENT NOTIFICATION (Rx READY) file and is being displayed.

4) 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: IOWA,LUKE       02-23-53    231447629    NO   NSC VETERAN


        IOWA,LUKE has the following orders for 10/31/96


Being Processed: ***Entered on OCT 31, 1996***
     Division: GENERAL HOSPITAL            Time In: 10:27    Time Out:
     Rx #: 500416,

Pending:
     Orderable Item: ACETAMINOPHEN              Provider: AUGUSTA,DON
     Entered By: ATHENS,DEBBIE                    Time In: 10/31/96@06:46
     Drug: ACETAMINOPHEN 325MG TAB UD           Routing: MAIL

Ready For Pickup:
     Division: GENERAL HOSPITAL   Time In: 10:36    Time Out: 10:46
     Rx #: 1022731,


Enter Patient Name: <Enter>
```

40. Changing the Label Printer

Change Label Printer
[PSO CHANGE PRINTER]

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

41. Creating, Editing, and Printing a DUE Answer Sheet

41.1. DUE User
[PSOD DUE USER]

This menu provides the means to create an answer sheet entry in the DUE ANSWER SHEET file and edit an existing Answer Sheet. A blank form of a selected DUE questionnaire can also be printed in multiple copies to be distributed to providers to complete when ordering medications being evaluated.

1 Enter a New Answer Sheet
2 Edit an Existing Answer Sheet
3 Batch Print Questionnaires

41.1.1. Enter a New Answer Sheet
[PSOD CREATE ANSWER SHEET]

In this option, answers to a DUE Questionnaire can be entered. 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.

41.1.2. Edit an Existing Answer Sheet
[PSOD EDIT ANSWER SHEET]

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

41.1.3. Batch Print Questionnaires [PSOD BATCH PRINT QUESTIONNAIRE]

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

42. Medication Profile [PSO P]

The report displays a profile of all prescriptions on file for a particular patient. This information may be viewed directly on the screen or the user can request it to be printed.

The medication profile is available in two formats. The short format contains the following fields: patient name, address, SSN, DOB, eligibility, narrative, reactions, prescriptions, prescription number, drug name, Sig, status, quantity, issue date, last fill date, and refills remaining. The long format contains all information contained on the short format and the following additional fields: physician's name, clerk code, fill date, total allowable refills, dates of refills, and partial fills, whether the prescription was filled at the pharmacy window or by mail, and which division filled it.

The short format displays the status in an abbreviated form. The following is an explanation of the codes: A (Active), DC (Discontinued), E (Expired), H (Hold), N (Non Verified), P (Pending due to drug interactions), and S (Suspended). A "$" next to the prescription number indicates that the prescription is copay eligible.

If the prescription has been returned to stock, the letter (R) will appear next to the last fill date.

43. Processing a Prescription

Patient Prescription Processing
[PSO LM BACKDOOR ORDERS]

This option is used to process outpatient medication orders entered through OERR V. 3.0.

This option is used to process outpatient medication orders from OERR V. 3.0. The *Patient Prescription Processing* option is also found on the Outpatient Pharmacy Manager's menu and the Pharmacist's menu under the *Rx (Prescriptions)* option. This option uses List Manager features that allow the pharmacy technician to perform the following actions on a prescription without leaving this option.

• Enter a new Rx	• Release
• Refill	• Order a partial
• Copy (new)	• Pull early from suspense
• Renew	• Show a profile
• Reprint	• View activity log (new)

If the verification site parameter is turned on, prescriptions entered by the technician will be non-verified and must be verified by the pharmacist. If the verification site parameter is turned off the label is queued to print as though the pharmacist has entered it unless the prescription causes a critical drug interaction. In which case, the prescription will be non-verified and must be verified by the pharmacist.

Actions are displayed in the action area of the screen. Actions with a parenthesis ( ) around them are invalid actions for that order. A double question mark (??) displays all the actions available, including the Outpatient Pharmacy hidden 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. Outpatient Pharmacy hidden actions are displayed with the letters OP next to the action.

Example 1: Entering a New Order

If a double question mark (??) is entered at the "Select Action" prompt, the following hidden actions will display in the action area. Actions that apply only to outpatient orders are followed by (OP).

```
The following actions are also available:
RP   Reprint (OP)          OTH  Other OP Actions     LS   Last Screen
RN   Renew (OP)            RD   Re Display Screen    FS   First Screen
DC   Discontinue (OP)      PL   Print List           GO   Go to Page
RL   Release (OP)          PS   Print Screen         +    Next Screen
RF   Refill (OP)           >    Shift View to Right  -    Previous Screen
PP   Pull Rx (OP)          <    Shift View to Left   ADPL Auto Display (On/Off)
IP   Inpat. Profile (OP)   SL   Search List          UP   Up a Line
DN   Down a Line           QU   Quit
```

First, a patient is selected.

```
Select Pharmacy Technician's Menu Option: PATient Prescription Processing
Select PATIENT NAME: KANSAS,THOMAS T        10-30-70    521339521     YES     SC
VETERAN
```

[Patient Information Screen skipped]

Although "Quit" is the default at the "Select Action" prompt shown on the Patient Information screen, <**Enter**> at this prompt quits the screen and displays the Medication Profile.

```
Medication Profile            Jun 12, 2001 14:12:21          Page:    1 of    1
KANSAS,THOMAS T
  PID: 521-33-9521                                  Ht(cm): 177.80 (02/08/1999)
  DOB: OCT 30,1970 (30)                             Wt(kg): 90.45 (02/08/1999)

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

-------------------------------------ACTIVE-------------------------------------
 1 503904$       AMPICILLIN 250MG CAP                   80 E  05-25 05-25   0  10
 2 503886$       DIGOXIN (LANOXIN) 0.2MG CAP            60 A> 05-07 05-07   5  30
----------------------------------DISCONTINUED----------------------------------
 3 503902        ACETAMINOPHEN 500MG TAB                60 DC>05-22 05-22   3  30




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

Typing in the letters "NO" at the "Select Action" prompt creates a new order.

(The screen display has been shortened to fit on the page.)

```
Select Action: Quit// NO   New Order
```

```
Medication Profile            May 22, 2001 10:44:56          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
PATIENT STATUS: SERVICE CONNECTED//  <Enter>
DRUG: ampicillin
     1   AMPICILLIN  500MG INJ           AM052     N/F       NATL FORM (IEN)
     2   AMPICILLIN 250MG CAP           AM052     N/F       NATL N/F  (IEN)
     3   AMPICILLIN 250MG/5ML SUSPENSION 100ML  AM052     N/F    NATL N/F (IEN)
     4   AMPICILLIN SOD. 1GM INJ           AM052         NATL FORM (IEN)
CHOOSE 1-4:  AMPICILLIN 250MG CAP         AM052     N/F       NATL N/F  (IEN)

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

The software checks the medication selected for any interactions or allergies noted in the patient's record. Prior to the POE project, the next prompt was a free text Sig field. After POE is installed, the next prompts shown will be the new fields used to build a Sig.

The list of available possible dosages shown after order checks is linked to the drug ordered. One of the dosages listed may be chosen or a different, free text dosage may be entered. Confirmation of the dosage is required and the value entered is displayed again to allow the user to confirm that it is correct.

```
Available Dosage(s)
       1. 250MG
       2. 500MG
       3. 1000MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 3 500MG

You entered 500MG is this correct? Yes// <Enter> YES
```

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
```

If a Route has not been associated with the Dispense Drug, the default Route of PO or Oral will be displayed. A different Route can be entered or it can be deleted at this point if needed. The Route is not required to complete a prescription. If the abbreviation entered is in the stored list of possible routes, the entry will be expanded in the Sig.

```
ROUTE: PO// <Enter>   ORAL      PO  MOUTH
```

or

```
ROUTE: PO// @ <Enter to delete>
```

A default schedule associated with the drug ordered is displayed. The default can be accepted or a different free text schedule can be entered. Free text entries cannot contain more than two spaces or be more than twenty characters long. Entries will be compared against a list of common abbreviations and expanded if the entry matches. Any entry not found in the list of common abbreviations will be displayed in the Sig as entered.

```
Schedule: QID//  (FOUR TIMES A DAY)
```

The LIMITED DURATION field is used only when a medication should be taken for a limited period of time. Days are assumed for numeric entries. Follow the number with an "H" to specify hours or an "M" to specify minutes.

NOTE: Do not use this field for Days Supply.

```
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10 (DAYS)
```

The CONJUCTION field is used to join dosing sequences in complex orders. Entries are limited to AND, THEN, or EXCEPT. 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." EXCEPT is used to describe any dosing sequence that is not routine, such as "Take 1 tablet every day EXCEPT take no tablets Wednesday." See Appendix B 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
```

Patch PSS*1*47 adds two new optional fields, OTHER LANGUAGE PREFERENCE and PMI LANGUAGE PREFERENCE in the PHARMACY PATIENT file (#55) that stores 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 option Update Patient Record [PSO PAT] and the protocol Patient Record Update [PSO PATIENT RECORD UPDATE]. If the other language preference is indicated for a patient, the user will be prompted to enter OTHER PATIENT INSTRUCTIONS after selecting the PATIENT INSTRUCTIONS field to enter/edit. If a quick code is entered at the OTHER PATIENT INSTRUCTIONS prompt, the expansion entered at the OTHER PATIENT INSTRUCTIONS EXPANSIONS will print on the prescription label.

A default value for Days Supply based on patient status is displayed. A default quantity is calculated when possible. See Appendix B for more information on this calculation.

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

The remaining prompts have not changed.

```
COPIES: 1// <Enter> 1
# OF REFILLS:  (0-11): 11// 0
PROVIDER:    BISMARK,ANDREW
CLINIC:    OUTPT NURSE GREEN 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// ??

                              Require        Print     Print on
  Nature of Order Activity   E.Signature   Chart Copy   Summary
  ------------------------   -----------   ----------   --------
  WRITTEN                                                   x
  VERBAL                          x            x           x
  TELEPHONED                      x            x           x
  SERVICE CORRECTION
  POLICY                                       x           x
  DUPLICATE

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 # 503906            05/30/01
NEBRASKA,NICK                 #80
TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS WITH FOOD

AMPICILLIN 250MG CAP
BISMARK,ANDREW           BISMARK,ANDREW
# of Refills: 11

         SC Percent: 40%
       Disabilities: NONE STATED

Is this Rx for a SERVICE CONNECTED condition? No
```

To determine if the order should be charged copay, eligible copay exemptions for the order are displayed one at a time. The user is asked if 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.

```
Is this Rx for treatment of Vietnam-Era Herbicide (Agent Orange) Exposure? No

Is this correct? YES//  <Enter>

Another New Order for NEBRASKA,NICK? YES//
```

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

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

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

Select from list of Available Dosages, 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// TOPICAL
```

A default quantity cannot be calculated for complex orders containing the conjunction "Except."

Example 2: Using the Copy Action

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     GO   Go to Page
VF   Verify (OP)          DIN  Drug Restr/Guide (OP)LS   Last Screen
CO   Copy (OP)            +    Next Screen          PS   Print Screen
RP   Reprint (OP)         -    Previous Screen      PT   Print List
HD   Hold (OP)            <    Shift View to Left   QU   Quit
UH   Unhold (OP)          >    Shift View to Right  RD   Re Display Screen
PI   Patient Information  ADPL Auto Display(On/Off) SL   Search List
PP   Pull Rx (OP)         DN   Down a Line          UP   Up a Line
IP   Inpat. Profile (OP)  FS   First Screen
```

Copy is a hidden action that is new to Outpatient Pharmacy. Use this action to make a duplicate order. Any field of the newly created order can be edited. The original order will remain active, but the duplicate order check will be processed before the new order can be accepted.

```
Medication Profile            Jun 12, 2001 14:39:11          Page:    1 of    1
KANSAS,THOMAS T
  PID: 521-33-9521                                Ht(cm): 177.80 (02/08/1999)
  DOB: OCT 30,1970 (30)                           Wt(kg): 90.45 (02/08/1999)

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

-------------------------------------ACTIVE-------------------------------------
 1 503904$       AMPICILLIN 250MG CAP                   80 E  05-25 05-25   0  10
 2 503886$       DIGOXIN (LANOXIN) 0.2MG CAP            60 A> 05-07 05-07   5  30
 3 503916        NADOLOL 40MG TAB                       60 A> 06-12 06-12  11  30
----------------------------------DISCONTINUED----------------------------------
 4 503902        ACETAMINOPHEN 500MG TAB                60 DC>05-22 05-22   3  30

          Enter ?? for more actions
PU  Patient Record Update               NO  New Order
PI  Patient Information                 SO  Select Order
Select Action: Quit// __    Select Order
Select Orders by number:  (1-4):3
```

The Order Number can be entered at the "Select Action" prompt instead of "SO".

Once an order is selected, the Copy action can be used.

```
OP Medications (ACTIVE)        Jun 12, 2001 14:42:17          Page:    1 of    2
KANSAS,THOMAS T
  PID: 521-33-9521                                  Ht(cm): 177.80 (02/08/1999)
  DOB: OCT 30,1970 (30)                             Wt(kg): 90.45 (02/08/1999)

                 Rx #: 503916
 (1) *Orderable Item: NADOLOL TAB ***(N/F)***
 (2)       CMOP Drug: NADOLOL 40MG TAB ***(N/F)***
 (3)         *Dosage: 40 (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: SERVICE CONNECTED
 (6)      Issue Date: 06/12/01               (7)  Fill Date: 06/12/01
      Last Fill Date: 06/12/01 (Window)
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// CO   COPY
```

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".

(New Order (Copy)screen displays merged to save space)

```
New OP Order (COPY)            Jun 12, 2001 14:47:53        Page:    1 of    2
KANSAS,THOMAS T
  PID: 521-33-9521                                  Ht(cm): 177.80 (02/08/1999)
  DOB: OCT 30,1970 (30)                             Wt(kg): 90.45 (02/08/1999)

      Orderable Item: NADOLOL TAB ***(N/F)***
  (1)       CMOP Drug: NADOLOL 40MG TAB ***(N/F)***
  (2) Patient Status: SERVICE CONNECTED
  (3)      Issue Date: JUN 12,2001             (4) Fill Date: JUN 12,2001
  (5) Dosage Ordered: 40 (MG)
                 Verb: TAKE
      Dispense Units: 1
                 Noun: TABLET
                Route: ORAL
            Schedule: BID
  (6)Pat Instruction:
                  SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
  (7)    Days Supply: 30                     (8)   QTY (TAB): 60
  (9)   # of Refills: 11                     (10)  Routing: WINDOW
 (11)         Clinic: OUTPT NURSE BLUE TEAM
 (12)       Provider: BISMARK,ANDREW                 (13)   Copies: 1
 (14)        Remarks: New Order Created by copying Rx # 503916.
   Entry By: BISMARK,ANDREW                    Entry Date: JUN 12,2001 14:47:53

+         Enter ?? for more actions
AC   Accept                              ED   Edit
Select Action: Next Screen// AC   Accept
```

(Continued)

```
-------------------------------------------------------------------------------
DUPLICATE DRUG NADOLOL 40MG TAB in Prescription: 503916

                Status: Active                          Issued: 06/12/01
                   SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
                   QTY: 60                        # of refills: 11
              Provider: BISMARK,ANDREW       Refills remaining: 11
                                                Last filled on: 06/12/01
                                                   Days Supply: 30
-------------------------------------------------------------------------------

Discontinue Rx # 503916? YES

Duplicate Drug will be discontinued after the acceptance of the new order.

Now doing order checks.  Please wait...

Nature of Order: WRITTEN// ??

                              Require        Print     Print on
  Nature of Order Activity   E.Signature   Chart Copy   Summary
  ------------------------   -----------   ----------   --------
  WRITTEN                                                   x
  VERBAL                          x            x           x
  TELEPHONED                      x            x           x
  SERVICE CORRECTION
  POLICY                                       x           x
  DUPLICATE

Nature of Order: WRITTEN//  <Enter>    W
WAS THE PATIENT COUNSELED: NO// <Enter>NO

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

Rx # 503919            06/12/01
KANSAS,THOMAS T               #60
TAKE ONE TABLET BY MOUTH TWICE A DAY

NADOLOL 40MG TAB
BISMARK,ANDREW           BISMARK,ANDREW
# of Refills: 11

Is this correct? YES// <Enter>...
 -Rx 503916 has been discontinued...


       SC Percent: 20%
     Disabilities:
KNEE CONDITION                                  10% - SERVICE CONNECTED
TRAUMATIC ARTHRITIS                             10% - SERVICE CONNECTED
TRAUMATIC ARTHRITIS                              0% - SERVICE CONNECTED
SEPTUM, NASAL, DEVIATION OF                      0% - SERVICE CONNECTED
RESIDUALS OF FOOT INJURY                         0% - SERVICE CONNECTED

Is this Rx for a SERVICE CONNECTED condition: NO
```

The Medication Profile screen is redisplayed at this point. Note that the orders tagged for patient copay charges have a dollar sign ($) after the RX #.

```
Medication Profile            Jun 12, 2001 15:03:10          Page:    1 of    1
KANSAS,THOMAS T
  PID: 521-33-9521                                  Ht(cm): 177.80 (02/08/1999)
  DOB: OCT 30,1970 (30)                             Wt(kg): 90.45 (02/08/1999)

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

-------------------------------------ACTIVE-------------------------------------
 1 503904$       AMPICILLIN 250MG CAP                  80 E  05-25 05-25   0  10
 2 503886$       DIGOXIN (LANOXIN) 0.2MG CAP           60 A> 05-07 05-07   5  30
 3 503919$       NADOLOL 40MG TAB                      60 A> 06-12 06-12  11  30
----------------------------------DISCONTINUED----------------------------------
 4 503902        ACETAMINOPHEN 500MG TAB               60 DC>05-22 05-22   3  30


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

Example 3: Renewing a Prescription

This action allows the pharmacy manager, pharmacist, or pharmacy technician to process renewals for existing orders.

[This example begins after an order has been selected from the Medication Profile screen.]

```
OP Medications (ACTIVE)       Jun 12, 2001 15:08:43          Page:    1 of    3
KANSAS,THOMAS T
  PID: 521-33-9521                                  Ht(cm): 177.80 (02/08/1999)
  DOB: OCT 30,1970 (30)                             Wt(kg): 90.45 (02/08/1999)

                 Rx #: 503886$
 (1) *Orderable Item: DIGOXIN CAP,ORAL
 (2)       CMOP Drug: DIGOXIN (LANOXIN) 0.2MG CAP
 (3)         *Dosage: .2 (MG)
                 Verb: TAKE
     Dispense Units: 1
                 Noun: CAPSULE
               *Route: ORAL (BY MOUTH)
           *Schedule: Q12H
 (4)Pat Instructions: TAKE AFTER MEALS
   Provider Comments: TAKE AFTER MEALS
                  SIG: TAKE ONE CAPSULE BY MOUTH EVERY 12 HOURS TAKE AFTER MEALS
 (5)  Patient Status: SERVICE CONNECTED
 (6)      Issue Date: 05/07/01               (7)  Fill Date: 05/07/01
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// RN   Renew
FILL DATE:  (6/12/2001 - 6/13/2002): TODAY// <Enter>
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
Nature of Order: WRITTEN//  <Enter> W
WAS THE PATIENT COUNSELED: NO// Y  ES
WAS COUNSELING UNDERSTOOD: NO// Y  ES

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

Now Renewing Rx # 503886   Drug: DIGOXIN (LANOXIN) 0.2MG CAP

Now doing order checks.  Please wait...


503886A      DIGOXIN (LANOXIN) 0.2MG CAP       QTY: 60
# OF REFILLS: 5  ISSUED: 06-12-01
SIG: TAKE ONE CAPSULE BY MOUTH EVERY 12 HOURS TAKE AFTER MEALS
FILLED: 06-12-01
ROUTING: WINDOW     PHYS: BISMARK,ANDREW

Edit renewed Rx ? Y// <Enter>  ES
```

At this point, the order can be edited as discussed in Example 2. If the order is not edited, the order is renewed and the display returns to the Medication Profile screen. NOTE: It is possible to renew more than one order on the same patient by typing the desired order numbers separated by a comma (ex. 1,3,5).

After the edits are made, the Order is redisplayed and it can be re-edited or accepted.

If an order was entered before patch PSO*7*46 update, the user will be prompted to fill in any missing dosing information needed as illustrated. In this example

```
Edit renewed Rx ? Y// NO

Dosing Instruction Missing!!

Drug: CALCIUM CARBONATE 650MG TAB
TAKE 1 TABLET(S) BY MOUTH THREE TIMES A DAY

FILLED: 04-02-01
ROUTING: WINDOW     PHYS: TRENTON,PATRICIA

Edit renewed Rx ? Y// <Enter> ES
Available Dosage(s)           Apr 02, 2001@10:49:06
       1. 650MG
       2. 1300MG
Select from list of Available Dosages or Enter Free Text Dose: 1 650MG

You entered 650MG is this correct? Yes// <Enter>  YES
DISPENSE UNITS PER DOSE(TAB): 1// <Enter> 1
Dosage Ordered: 650MG
ROUTE: PO// <Enter>  ORAL      PO  MOUTH
Schedule: TID (THREE TIMES A DAY)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): <Enter>
CONJUNCTION: <Enter>
PATIENT INSTRUCTIONS: <Enter>

(TAKE ONE TAB BY MOUTH THREE TIMES A DAY)


1460971A     CALCIUM CARBONATE 650MG TAB       QTY: 100
# OF REFILLS: 10  ISSUED: 04-02-01
SIG: TAKE ONE TAB BY MOUTH THREE TIMES A DAY
```

44. Pull Early from Suspense

[PSO PNDRX]

This option is used to pull from the suspense file 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. Method of Pickup can be edited. The "DELETE FROM SUSPENSE" prompt has been changed to "Pull Rx(s) and Delete from Suspense". This prompt requires a Yes answer 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.

45. Releasing Medication

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 environmental contaminants 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 of environmental contaminant exposure during the Persian Gulf War?' 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 of MailMan Message

```
Subj: RX COPAY STATUS REVIEW NEEDED  [#4271073] 28 Sep 01 08:37  17 lines
From: OUTPATIENT PHARMACY PACKAGE  In 'IN' basket.   Page 1  *New*
-------------------------------------------------------------------------------
 LRJLT,IHKUL BLN  (1963P)    CHEYENNE VAM&ROC
537455 (3)    COPAY
ABSORBASE TOP OINT

Due to a change in copay criteria, additional information listed below is
needed to determine the final copay status for this Rx so that appropriate
action can be taken by pharmacy personnel.

Is this Rx for a Service Connected Condition?

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.

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 copay charges.

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 of 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       HARRISBURG,HENRY
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 of 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       HARRISBURG,HENRY
Comment:  NO BILLING FOR THIS FILL
2   10/23/01    IB-INITIATED COPAY    ORIGINAL       HARRISBURG,HENRY
Comment: PARTIAL CHARGE
```

If a prescription is in a releasable status, the user will be given an error message, such as:
* Prescription has a status of (status) and is not eligible for release.
* Prescription was deleted.
* Improper barcode format.
* Non-existent prescription.

Copay is not charged for a partial fill.

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

Changes to Releasing Orders function - Digitally Signed Orders Only

The release function in the *Patient Prescription Processing* option has been modified with patch PSO*7*131 to require that all digitally signed orders for Schedule II controlled substances (CSII orders) be released through the *Outpatient Rx* option in the *Controlled Substances* (CS) menu. If DEA/PKI is activated and an order is digitally signed, the user will be advised that the order must be released through the *Outpatient Rx* 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.

46. 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* [PU] screen action. If implementing Other Language Modifications, use either to set a patient's other language preference.

Glossary

Action Profile — A list of all active and recently canceled or expired prescriptions for a patient sorted by classification. This profile also includes a signature line for each prescription to allow the physician to cancel or renew it.

Activity Log — A log, by date, of changes made to or actions taken on a prescription. An entry is made in this log each time the prescription is edited, canceled, reinstated after being canceled, or renewed. An entry will be made into this log each time a label is reprinted. A CMOP activity log will contain information related to CMOP dispensing activities.

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.

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.

APSP — Originally Indian Health Service Pharmacy's name space now owned by the Outpatient Pharmacy software.

Bypass — Take no action on a medication order.

CMOP — Consolidated Mail Outpatient Pharmacy.

CPRS — Computerized Patient Record System. CPRS is an entry point in **V*IST*A** 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.

Critical — Interactions with severe consequences that require some type of action (finding facts, contacting prescribers) to prevent potential serious harm.

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 **V*IST*A**.

Dispense Drug — The Dispense Drug name has the strength attached to it (e.g., Acetaminophen 325 mg). The name alone without a strength attached is the Orderable Item name.

Dosage Ordered — After the user has selected the drug during order entry, the dosage ordered prompt is displayed.

Drug/Drug Interaction — The pharmacological or clinical response to the administration of a drug combination different from that anticipated from the known effects of the two agents when given alone.

DUE — Acronym for Drug Usage Evaluation

Expiration/Stop — The date on which a prescription is no longer active. Typically, this date is 30 days after the issue date for narcotics, 365 days after the issue date for other medications and 365 days after the issue date for supplies.

Finish — Term used for completing orders from Order Entry/Results Reporting V. 3.0.

GUI — Acronym for Graphical User Interface.

Issue Date — The date on which the prescription was written. This date is usually, but not always, the same as the first fill date. This date cannot be later than the first fill date.

HFS — Host File Server.

JCAHO — Acronym for Joint Commission on Accreditation of Healthcare Organizations

Label/Profile Monitor — A file for each printer which records, in the order in which they were printed, the last 1000 labels or profiles printed on that printer. This allows a rapid reprint of a series of labels or profiles that were damaged by a printer malfunction or other event.

Local Possible Dosages Free text dosages that are associated with drugs that do not meet all of the criteria for Possible Dosages.

Medication Instruction File The MEDICATION INSTRUCTION file is used by Unit Dose and Outpatient Pharmacy. It contains the medication instruction name, expansion and intended use.

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).

Non-Formulary Drugs The medications, which are defined as commercially available drug products not included in the VA National Formulary.

Order Request for medication.

Orderable Item An Orderable Item name has no strength attached to it (e.g., Acetaminophen). The name with a strength attached to it is the Dispense drug name (e.g., Acetaminophen 325mg).

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.

Pending Order A pending order is one that has been entered by a provider through CPRS without Pharmacy finishing the order. Once Pharmacy has finished the order, it will become active.

Pharmacy Narrative OUTPATIENT NARRATIVE field that may be used by pharmacy staff to display information specific to the patient.

Polypharmacy The administration of many drugs together.

POE

Acronym for Pharmacy Ordering Enhancements (POE) project. Patch PSO*7*46 contains all the related changes for Outpatient Pharmacy.

Possible Dosages

Dosages that have a numeric dosage and numeric dispense units per dose appropriate for administration. For a drug to have possible dosages, it must be a single ingredient product that is matched to the DRUG file. The DRUG file entry must have a numeric strength and the dosage form/unit combination must be such that a numeric strength combined with the unit can be an appropriate dosage selection.

Prescription

This term is now referred to throughout the software as medication orders.

Prescription Status

A prescription can have one of the following status.

Active

A prescription with this status can be filled or refilled.

Canceled

This term is now referred to throughout the software as Discontinued. (See Discontinued.)

Discontinued

This status is used when a prescription was made inactive either by a new prescription or by the request of a physician.

Discontinued (Edit)

Discontinued (Edit) is the status used when a medication order has been edited and causes a new order to be created due to the editing of certain data elements.

Deleted

This status is used when a prescription is deleted. Prescriptions are no longer physically deleted from the system, but marked as deleted. Once a prescription is marked deleted no access is allowed other than view.

Expired

This status indicates the expiration date has passed.

*Note: A prescription that was canceled or has expired more recently than the date specified by the cutoff date, typically 120 days in the past, can still be acted upon.

Hold

A prescription that was placed on hold due to reasons determined by the pharmacist.

Non-verified There are two types of non-verified statuses. Depending on a site parameter, prescriptions entered by a technician do not become active until they are reviewed by a pharmacist. Until such review, they remain non-verified and cannot be printed, canceled or edited except through the *Verification* menu.

The second non-verified status is given to prescriptions when a drug/drug interaction is encountered during the new order entry or editing of a prescription.

Pending A prescription that has been entered through OERR.

Refill A second or subsequent filling authorized by the provider.

Suspended A prescription that will be filled at some future date.

Progress Notes A component of Text Integration Utilities (TIU) that can function as part of CPRS.

Provider The person who authorized an order. Only users identified as providers who are authorized to write medication orders may be selected.

Reprinted Label Unlike a partial prescription, a reprint does not count as workload.

Questionnaire An entry in the DUE QUESTIONNAIRE file. This file entry contains the set of questions related to a DUE as well as the drugs being evaluated.

Schedule The frequency by which the doses are to be administered, such as Q8H, BID, NOW, etc.

Sig The instructions printed on the label.

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.

Time In This is the time that the patient's name was entered in the computer.

Time Out This is the time that the patient's name was entered on the bingo board monitor.

TIU Text Integration Utilities; a package for document handling, that includes Consults, Discharge summary, and Progress Notes, and will later add other document types such as surgical pathology reports. TIU components can be accessed for individual patients through the CPRS, or for multiple patients through the TIU interface.

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.

V*IST*A 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.

Appendix A

Creating A Sig Using Information From CPRS Order Entry

When a user enters an Outpatient order through CPRS, the information is sent to the Outpatient Pharmacy package, and this information is displayed to the user who finishes this order in the Outpatient Pharmacy package. Previously, the Sig was entered as a single free text field that could be edited. Now the user is prompted for the different fields that make up a possible Sig. The Pharmacy package builds a possible Sig based on the information entered in these fields, and this possible Sig is displayed on the Pharmacy Finish screen. Whoever finishes the order can either accept the Sig or edit the fields used to build the Sig. If the possible Sig is accepted, that will become the Sig for the prescription and will print on the labels, profiles, etc. Entries in the SCHEDULE field will be checked against the MEDICATION INSTRUCTION file for possible expansion. A new order will be created if values are changed in some of the fields. This process will be explained after we describe how the possible Sig is created by using the information entered through CPRS.

Example 1: The first part of this example shows the prompts and what is entered through CPRS for a DIGOXIN 0.25MG TAB ORDER. The actual CPRS screen looks different, but the prompts are the same.

```
     Orderable Item: DIGOXIN TAB
     Dispense Drug: DIGOXIN 0.25 MG TAB
     Complex dose? NO//<Enter>
     Take (in TABLET(S)): 2
     Route: ORAL
     Schedule: Q12H
     Limit duration to (in DAYS): 30
     Quantity: 60
     Refills (0-11):://5
     Pick up: WINDOW//<Enter>
     Provider Instructions:
1>
```

The Take prompt in the above example will vary, depending on the Dose Form associated with the selected medication. For example:

DOSAGE FORM	PROMPT
TAB	Take
CREAM,TOP	Apply
INJ	Inject
SOLN,OPH	Instill

From this information entered through CPRS, the possible Sig that Outpatient Pharmacy would display when this order is finished in pharmacy is

```
TAKE 2 TABLET(S) BY MOUTH EVERY 12 HOURS FOR 30 DAY(S)
```

This possible Sig is created using this method:

* The word TAKE is derived from the VERB entry in the DOSAGE FORM file that is associated with the Dosage Form TAB, which is derived from the Dose Form associated with the Orderable Item DIGOXIN TAB.

* The number 2 is taken from what was entered at the "Take" prompt.

* The word TABLET(S) is derived from the NOUN entry in the DOSAGE FORM file, which is associated with the Dosage Form TAB, which is derived from the Dose Form associated with the Orderable Item DIGOXIN TAB.

* The word BY is derived from the PREPOSITION entry in the DOSAGE FORM file that is associated with the Dosage Form TAB, which is derived from the Dose Form associated with the Orderable Item DIGOXIN TAB. The PREPOSITION will only be printed if there is an Outpatient expansion associated with the Med Route.

* The word MOUTH is derived from the OUTPATIENT EXPANSION in the MEDICATION ROUTES file, that is associated with the Med Route ORAL. If there is no outpatient expansion, the abbreviation will be used. If there is no abbreviation the name will be used.

* The words EVERY 12 HOURS are derived from the OUTPATIENT EXPANSION in the ADMINISTRATION SCHEDULE file, that is associated with the Schedule Q12H. If no Outpatient expansion is found in the ADMINISTRATION SCHEDULE file, the software will then derive an expansion from the MEDICATION INSTRUCTION file.

* The words FOR 30 DAY(S) are derived from the 30 entered for Duration. The word FOR is always used when there is a Duration. The number 30 is used because that is what was entered. DAYS is used as a default time period. If 30D was entered for Duration, (D for days), the possible Sig would still be the same. The CPRS user could have changed the time period by preceding the number 30 with these letters:

USER ENTERS	EXPANSION
30D	FOR 30 DAYS
30H	FOR 30 HOURS
30M	FOR 30 MINUTES
30	FOR 30 DAYS (Default to DAYS)

Example 2: This example is similar to Example 1, only a second set of Instructions is entered for this order.

```
    Medication: DIGOXIN TAB
    Dispense Drug: DIGOXIN 0.25 MG TAB
    Complex dose? NO://YES
    Take (in TABLET(S)): 2
    Route: ORAL
    Schedule: Q12H
    Limit duration to (in DAYS): 30
    Then Take (in TABLET(S)): 1
    Route: ORAL
    Schedule: Q8H
    Limit duration to (in DAYS): 10
    Then Take (in TABLET(S)): <Enter>
    Quantity: 90
    Refills (0-11):://5
    Pick up: WINDOW//<Enter>
    Provider Instructions:
1>
```

Since there is a second set of Instructions entered for this order, the word "THEN" is used to put together these Instructions, so the possible Sig would be as follows:

```
TAKE 2 TABLET(S) BY MOUTH EVERY 12 HOURS FOR 30 DAY(S) THEN
TAKE 1 TABLET(S) BY MOUTH EVERY 8 HOURS FOR 10 DAY(S)
```

Creating A New Order When Finishing A CPRS Order In Outpatient Pharmacy

When a CPRS order is finished in the Outpatient Pharmacy package, it is possible that the order can be edited in such a way that the original order is discontinued, and a new order is created. This will only happen if any of these three items change: Orderable Item, Med Route, or Schedule.

The Orderable Item can be edited directly when finishing an order. If a new Orderable Item is selected, a new Dispense Drug would also then have to be selected, causing a new order to be created.

Checking for a new Med Route and a new Schedule is a little different. These fields are not edited directly when an order is Finished, rather new Med Routes and Schedules are only derived if the possible Sig that has been made by the CPRS entries is not accepted, and a new Sig has to be entered when an order is finished. Using example 2 from the possible Sig examples, we have the following Order Entry dialogue:

```
Medication: DIGOXIN TAB
Dispense Drug: DIGOXIN 0.25 MG TAB
Instructions:
 1. Take: 2
    Route: ORAL
    Schedule: Q12H
    Duration: 30
 2. Take: 1
    Route: ORAL
    Schedule: Q8H
    Duration: 10
 Quantity: 90
 Refills: 5
 Pick up: Window
```

From this dialogue, our possible Sig is

```
TAKE 2 TABLET(S) BY MOUTH EVERY 12 HOURS FOR 30 DAY(S) THEN
TAKE 1 TABLET(S) BY MOUTH EVERY 8 HOURS FOR 10 DAY(S)
```

And our Med Route and Schedules are

```
Med Route: ORAL
Schedule: Q12H
Schedule:  Q8H
```

If the possible Sig is not accepted, a new Sig must be entered. When this new Sig is entered, we will expand the Sig as has always been done by running each word entered through the MEDICATION INSTRUCTION file, looking for anything that needs expanded. But now a Med Route and Schedule can be associated with each entry in this file. So when we check for any expansions on the new Sig being entered, we also gather the Med Routes and Schedules associated with the new Sig. We check those new Med Route(s) and new Schedule(s) against the original Med route(s) and Schedule(s), and if there are any discrepancies, a new order will be created.

For example, our Med Route from CPRS is ORAL. When we get all the Med Routes from the new Sig, the only way a new order would not be created is if the only Med Route we find is Oral. If we find any other Med Route, or if we don't find any Med Route at all, a new Order will be created.

We received two Schedules from CPRS, Q12H and Q8H. When we gather all the Schedules from the new Sig, if we find any other Schedules besides Q12H and Q8H, a new order will be created. If we don't find Q12H or don't find Q8H at least once, a new order will be created. The order of the Schedules does not matter, it only matters that the same schedules are found.

These same checks are done anytime a Sig is edited. For example, if a CPRS order is finished in Outpatient Pharmacy, and the possible Sig is accepted from CPRS, the Med Route and Schedule(s) are kept with the prescription. If at some later time that Sig is changed, the same new order checks will be done at that point. The same med route and schedule checks are done on orders entered through the Outpatient Pharmacy package.

The Med Routes and Schedules can be added to the MEDICATION INSTRUCTION file by using the *Medication Instruction File Add/Edit* option in the Pharmacy Data Management package. Some examples for associating Med Routes and Schedules with entries in the MEDICATION INSTRUCTION file are as follows:

```
ENTRY IN FILE         MED ROUTE           SCHEDULE
-----------------------------------------------------------------
               SLC                  SUBLINGUAL  (no schedule)
               BID                  (no med route)    BID
               PO BID               ORAL BID
```

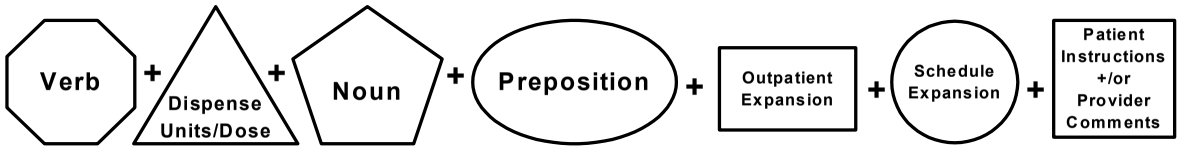
Creating the Sig Formula

Earlier versions of the Pharmacy Data Management software allowed the Sig to be directly edited from within the Outpatient Pharmacy package. Following the release of the Pharmacy Ordering Enhancements patch, however, the Sig will no longer be edited as a unit. Instead, individual fields are populated and then concatenated to create the Sig. Although the Sig, as a unit, cannot be edited, each individual field that creates the Sig can be edited until the Sig displays as desired.

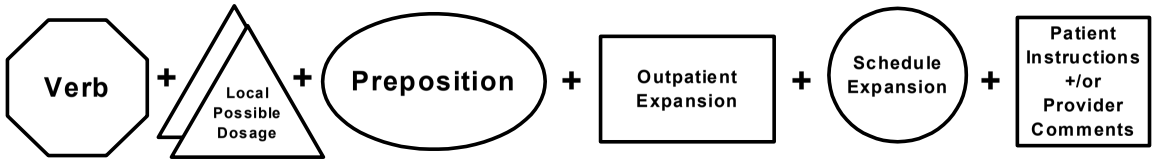
Four basic types of Sigs exist: Simple Possible Dosages, Simple Local Possible Dosages, Complex Possible Dosages and Complex Local Possible Dosages. The Sig for each of these dosages is created by combining fields from various Pharmacy files. To simplify the process, each dosage can be thought of as having its own Sig “formula”. These formulas are displayed below, followed by the relevant field and file information displayed in the chart following the formulas.

(Page intentionally added for two-sided copying)

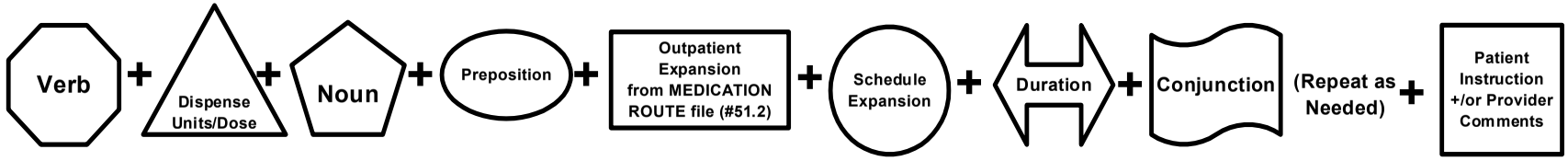
Simple Possible Dosages



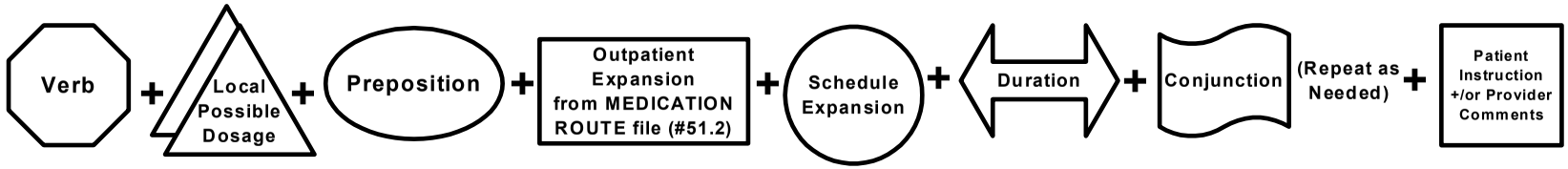
Simple Local Possible Dosages



Complex Possible Dosages



Complex Local Possible Dosages



(Page intentionally added for two-sided copying)

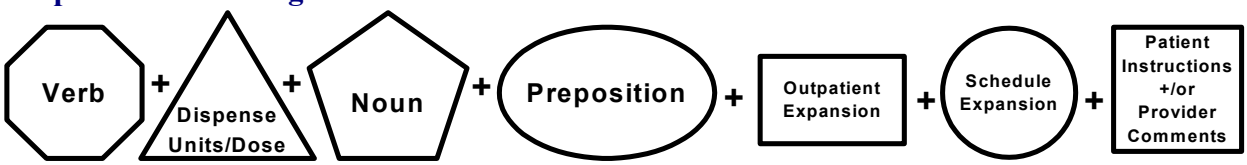
Table A: Formula Symbols

Symbol	File		Symbol	File
Verb	DOSAGE FORM file #50.606		Schedule Expansion	ADMINISTRATION SCHEDULE file #51.1
Dispense Units/Dose	DRUG file #50		Patient Instructions +/or Provider Comments	ORDERABLE ITEM file #50.7 or Provider Comments stored within CPRS orders
Noun	DOSAGE FORM file #50.606		Conjunction	
Preposition	DOSAGE FORM file #50.606		Duration	
Outpatient Expansion	MEDICATION ROUTES file #51.2			

Simple Possible Dosages

The formula for creating a Sig for a simple possible dosage is displayed below. The charts following the formula define how various sample Sigs were created using this formula.

Simple Possible Dosage Formula



Utilizing the formula above creates a Sig for a simple possible dosage. For example, to create the Sig, "TAKE 2 TABLETS BY MOUTH EVERY 12 HOURS AFTER MEALS", the Sig must be broken down into each of the elements in the simple possible dosage formula. The table below outlines each element of the desired Sig. By identifying the symbol to the right of the element, it is easy to identify which file provided that element's information. For example, to the right of the word "TAKE" in the table, the Verb symbol is displayed. By referencing "Table A: Formula Symbols", it is apparent that Verb entries are taken from the DOSAGE FORM file.

The table below defines each element of the Sig and identifies which files provided that element's information. The complete Sig is displayed at the top of the table.

TAKE 2 TABLETS BY MOUTH EVERY 12 HOURS AFTER MEALS	
TAKE	Verb
2	Dispense Units/Dose
TABLETS	Noun
BY	Preposition
MOUTH	Outpatient Expansion
EVERY 12 HOURS	Schedule Expansion
AFTER MEALS	Patient Instructions +/or Provider Comments

Appendix B

Calculating Default Quantity (QTY) values

To calculate a default Quantity value for a prescription, the prescription must have certain attributes:

1. Every dosage of the order must be a Possible Dosage with a valid (numeric) Dispense Units Per Dose.
2. Every dosing sequence of the order must have a Schedule from which to derive a frequency. A frequency can be associated with the Schedule from either the ADMINISTRATION SCHEDULE file or the MEDICATION INSTRUCTION file.
3. A Days Supply value must exist for the order.

If any of the above attributes is missing, a default Quantity cannot be calculated and a value will have to be entered.

To derive a frequency, the software looks first at the Schedule as a whole, including any spaces entered. If the Schedule entry is found in the ADMINISTRATION SCHEDULE file, then the associated frequency, if found, is the frequency used. If this does not happen, then the software searches for a match to the entry in the MEDICATION INSTRUCTION file with an associated frequency. If the Schedule entry does not match as a whole in either file, then the software breaks the Schedule entry into individual words. Each word found in the Schedule goes through the same process just described to determine a frequency. If at the end of this process, only one frequency is found, it is used for the order. If more than one frequency is found, even if they are all the same, then no frequency is applied and a default Quantity cannot be calculated. For example, Schedules of QAM AND NOON and QAM OR NOON could have frequencies of 1440 for QAM and 1440 for NOON. But because of the AND/OR differences in the Schedule the frequency should be different. Since the Schedule is a text entry, the software cannot determine with complete accuracy the intent when multiple frequencies are found.

Orders are classified into four different types when calculating default Quantity values.

1. Simple Dosage Order
2. Complex Dosage Order with all Conjunctions of “AND”
3. Complex Dosage Order with all Conjunctions of “THEN”
4. Complex Dosage Order with Conjunctions of “AND” and “THEN”

A default Quantity will not be calculated for complex orders containing the conjunction EXCEPT. Users must calculate and enter a Quantity for these orders. Users must also review the default value of 30 that is displayed for Days Supply and edit if needed.

The software converts all time values (Days Supply, Frequency, Duration) into minutes and divides the Days Supply or Duration by the Frequency. This value is multiplied by the Dispense Units Per Dose to get the default Quantity value.

NOTE: Some of the Sigs used in the following examples do not make sense for a prescription but are used to illustrate how QTY defaults are calculated. All examples are in days or hours, but the calculations will also work for minutes. When a default QTY ends in a decimal, it is rounded up to the next whole number.

1. Examples of Default Quantity Calculation, Simple Dosage Order

If there is a Duration entered and it is not equal to the Days Supply, then the software will use whichever value is lower in calculating the default Quantity.

a. Simple Order, no Duration given

In this example, the Dispense Units Per Dose is 2 and the Schedule of Q12H (Every 12 hours) has an associated frequency of 720 minutes (12 hours x 60 minutes/hour). Because there is no Duration given, the Days Supply of 30 will be used in the calculation. The software converts the Days Supply into minutes (by multiplying 30 x 1440, the number of minutes in a day) and then divides the Days Supply minutes by the minutes of frequency (43,200/720) to arrive at 60. The software then multiplies that result by the Dispense Units Per Dose (60 x 2) to get a default Quantity value of 120.

```
(TAKE TWO TABLETS BY MOUTH EVERY 12 HOURS)
DAYS SUPPLY: (1-90): 30// <Enter>
QTY (TAB): 120//
```

b. Simple Order, Duration less than Days Supply

In this example, the Duration of 36 hours is used to calculate the QTY of 9 since it is less than the 2 Days Supply (48 hours).

```
(TAKE ONE TABLET BY MOUTH EVERY 4 HOURS FOR 36 HOURS)
DAYS SUPPLY: (1-90): 30// 2
QTY (TAB): 9//
```

c. Simple Order, Days Supply less than Duration

In this example, the QTY of 40 is calculated using the 10 Days Supply because it is less than the
20 days Duration.

```
(TAKE TWO TABLETS BY MOUTH EVERY 12 HOURS FOR 20 DAYS)
DAYS SUPPLY: (1-90): 30// 10
QTY (TAB): 40//
```

d. Simple Order, Days Supply equals Duration

In this example, the Duration is the same as the Days Supply, so the QTY of 40 is calculated based on 20 days.

```
(TAKE TWO TABLETS BY MOUTH EVERY NIGHT FOR 20 DAYS)
DAYS SUPPLY: (1-90): 30// 20
QTY (TAB): 40//
```

2. Examples of Default Quantity Calculation – Complex Order, all Conjunctions "AND"

All of the following examples have dosing sequences with Possible Dosages having a numeric Dispense Units Per Dose and a Schedule with a frequency. If any dosing sequence lacks either of these, then a default QTY cannot be calculated. All examples are in days, but the calculations will also work for hours or minutes. When a default QTY ends in a decimal, the value is rounded up to the next whole number.

a. Complex Order, no Duration for any dosing sequence

In this example, the 31 Days Supply is applied to all dosing sequences to come up with a default QTY of 124 (31+62+31).

```
(TAKE ONE TABLET BY MOUTH EVERY MORNING AND TAKE TWO TABLETS AT NOON AND
TAKE ONE TABLET AT BEDTIME)
DAYS SUPPLY: (1-90): 31// <Enter>
QTY ( ): 124://
```

b. Complex Order, Durations for some but not all dosing sequences

If the dosing sequences that have durations all have the same Duration, and that Duration is less than the value of Days Supply, then QTY is calculated by applying the value of that Duration to all dosing sequences. In this example, we have "like" Durations of 10 days, which is less than the 20 Days Supply. By applying the 10 day Duration to the last two dosing sequences, a QTY of 110 is calculated ((3*10)+(2*10)+(2*10)+(4*10)). If the Duration had been greater than Days Supply or if not all Durations had been the same, then QTY would not have been calculated.

```
(TAKE THREE TABLETS BY MOUTH EVERY MORNING FOR 10 DAYS, AND TAKE TWO
TABLETS EVERY NIGHT FOR 10 DAYS, AND TAKE ONE TABLET EVERY 12 HOURS AND
TAKE ONE TABLET EVERY SIX HOURS)
DAYS SUPPLY: (1-90): 30// 20
QTY (TAB): 110//
```

c. Complex Order, different Durations for all dosing sequences

If all dosing sequences in an order have a Duration but they are not all the same, then the values of all the Durations are totaled. If the total of all the Durations is less than or equal to the Days Supply value, then a QTY is calculated. The total of all the Durations in this example adds up to 18 days (10+5+3), and since that is less than the 30 Days Supply, the QTY of 46 is calculated based on each Duration (30+10+6).

```
(TAKE THREE TABLETS BY MOUTH EVERY MORNING FOR 10 DAYS, AND TAKE TWO
TABLETS EVERY NIGHT FOR 5 DAYS, AND TAKE ONE TABLET EVERY 12 HOURS
FOR 3 DAYS)
DAYS SUPPLY: (1-90): 30// <Enter>
QTY (TAB): 46//
```

3. Examples of Default Quantity Calculation – Complex Order, all Conjunctions "THEN"

When all conjunctions in a complex order are THEN, a QTY can be calculated only if:

- every dosing sequence has a Duration, and the total of all the Durations is less than or equal to the Days Supply, or
- no more than one Duration is missing in the dosing sequence and the total of all the other Durations is less than the Days Supply.

All examples are in days, but the calculations will also work for hours or minutes. When a default QTY ends in a decimal, the value is rounded up to the next whole number.

a. Complex Order, Durations for all dosing sequences

In this example, every dosing sequence has a Duration, and the total of those values (5+4+3=12) is less than the 20 Days Supply. A default QTY of 21 is calculated based on the sum of each dosing sequence (10+8+3).

```
(TAKE ONE TABLET BY MOUTH EVERY 12 HOURS FOR 5 DAYS, THEN TAKE TWO
TABLETS EVERY MORNING FOR 4 DAYS, THEN TAKE ONE TABLET EVERY NIGHT FOR 3
DAYS.)
DAYS SUPPLY: (1-90): 30//20
QTY (TAB): 21//
```

b. Complex Order, one Duration missing

In the following example, there are two Durations (6 days and 8 days) and one missing Duration. Since the sum of the Durations (6+8=14) is less than the 30 Days Supply, the difference between that sum and the Days Supply (30-14=16) is applied to the dosing sequence missing a Duration, leading to a default QTY of 76 (12+16+48).

```
(TAKE ONE TABLET BY MOUTH EVERY 12 HOURS FOR 6 DAYS, THEN TAKE TWO
TABLETS EVERY MORNING FOR 8 DAYS, THEN TAKE THREE TABLETS EVERY NIGHT)
DAYS SUPPLY: (1-90): 30// <Enter>
QTY (TAB): 76//
```

4. Examples of Default Quantity Calculation – Complex Order, both "AND" and "THEN"
When there is a mix of the Conjunctions AND and THEN, the dosing sequences are broken down into "sub-sequences" with each THEN as the separator. In the following examples, every other sub-sequence has been bolded. Both a QTY subtotal for the sub-sequences and a decrementing Days Supply are kept. Each sub-sequence gets a final Days Supply total, which is then decremented through the sequences. QTY cannot be calculated if more than one dosing sequence is missing a Duration or if the total Duration is greater than the total Days Supply entered.

a. Complex Order, one missing Duration
After the first sub-sequence below, the QTY is 18 (2+4+12) and, because the Duration values are not all the same, the sum of the Durations (2+2+3=7) is used for Days Supply. The second sub-sequence yields a QTY of 24 (16+8) and a Days Supply of 4 (because both Durations are the same, they are not added together.)
The last sub-sequence has no Duration. The sum of the Days Supply from the first two sub-sequences (7+4=11) is subtracted from the 90 entered for Days Supply and that difference (79) is applied to the QTY for the last sub-sequence. Adding up the QTYs from all three sub-sequences (18+24+79) gives a default QTY of 121.

```
(TAKE ONE TABLET BY MOUTH EVERY MORNING FOR TWO DAYS, AND TAKE TWO
TABLETS EVERY MORNING FOR 2 DAYS, AND TAKE TWO TABLETS EVERY 12 HOURS
FOR 3 DAYS, THEN TAKE TWO TABLETS EVERY 12 HOURS FOR 4 DAYS, AND TAKE
ONE TABLET EVERY 12 HOURS FOR 4 DAYS, THEN TAKE ONE TABLET EVERY
MORNING)
DAYS SUPPLY: (1-90): 30// 90
QTY (TAB): 121//
```

b. Complex Order, missing Durations in more than one sub-sequence

```
(TAKE THREE TABLETS BY MOUTH EVERY 12 HOURS FOR 8 DAYS, THEN TAKE TWO
TABLETS EVERY 12 HOURS FOR 3 DAYS, AND TAKE TWO TABLETS EVERY NIGHT,
THEN TAKE THREE TABLETS EVERY NIGHT FOR TWO DAYS, THEN TAKE TWO TABLETS
EVERY MORNING FOR 2 DAYS, AND TAKE THREE TABLETS EVERY MORNING FOR 2
DAYS, THEN TAKE ONE TABLET EVERY 12 HOURS)
DAYS SUPPLY: (1-90): 30// 50
QTY (TAB): 146//
```

In this example, there are five sub-sequences:

Sub-sequence	Sub-sequence text	QTY	QTY calc.	Days Supply	Comments
#1	TAKE THREE TABLETS BY MOUTH EVERY 12 HOURS FOR 8 DAYS	48	(3*2)*8	8	The Duration and Days Supply are the same.
#2	THEN TAKE TWO TABLETS EVERY 12 HOURS FOR 3 DAYS, AND TAKE TWO TABLETS EVERY NIGHT	18	((2+2)*3)+ (2*3)	3	Value for first sequence applied to missing Duration within the sub-sequence
#3	THEN TAKE THREE TABLETS EVERY NIGHT FOR TWO DAYS	6	(3*2)	2	Only one value given.
#4	THEN TAKE TWO TABLETS EVERY MORNING FOR 2 DAYS, AND TAKE THREE TABLETS EVERY MORNING FOR 2 DAYS	10	(2+3)*2	2	Same Duration given for both sequences within the sub-sequence; do not add together
SUBTOT		*82*		*15*	

At this point, the QTY subtotal is 82 and Days Supply is 15. The current Days Supply subtotal (15) is subtracted from the 50 entered in the order for Days Supply. Applying that difference (35) to the last sub-sequence results in a default QTY of 70. Adding the QTYs for all five sub-sequences yields a total QTY of 152.

Sub-sequence	Sub-sequence text	QTY	QTY calc.	Days Supply	Comments
SUBTOT		*82*		*15*	
#5	THEN TAKE ONE TABLET EVERY 12 HOURS	70	(2*35)	35	Difference between Days Supply Entered (50) and subtotal Days Supply (15) = Days Supply for last sub-sequence (35).
TOTALS		**152**		50	

5. Example of No Default Quantity Calculation – Complex Order including "EXCEPT"
A default Quantity cannot be calculated for any complex order that includes a dosing sequence using "Except." The user must calculate and enter the Qty. In this first example, a complex order is entered for 5mg warfarin every day for 14 days followed by 7 days of taking 2.5 mg each day. Days Supply has to be adjusted since the order is for only 21 days.

```
 (TAKE TWO TABLETS BY MOUTH EVERY DAY FOR 14 DAYS, THEN TAKE ONE TABLET
EVERY DAY FOR 7 DAYS)

DAYS SUPPLY:  (1-90): 30// 21
QTY ( TAB ) TAB (GREEN): 35//  << Auto Calculation: 2 Tabs * 14 Days + 1 Tab *7 days = 35
```

Starting with the same order, an exception to the second round of dosing is added that does not change the number of days but does change the total number of tablets needed.

```
CONJUNCTION: e  EXCEPT   << Will also accept "X" or "EX"
VERB: TAKE
Available Dosage(s)
       1. 2.5MG
       2. 5MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 5 5MG

VERB: TAKE
DISPENSE UNITS PER DOSE(TABLETS): 2//<Enter> 2
Dosage Ordered: 5MG
NOUN: TABLETS
Schedule: 1300// q su (EVERY SU)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): <Enter>
CONJUNCTION: <Enter>
PATIENT INSTRUCTIONS: <Enter>

(TAKE TWO TABLETS BY MOUTH EVERY DAY FOR 14 DAYS, THEN TAKE ONE TABLET
EVERY DAY FOR 7 DAYS, EXCEPT TAKE TWO TABLETS EVERY SU)

DAYS SUPPLY:  (1-90): 30// 21
QTY ( TAB ) TAB (GREEN):
QTY ( TAB ) TAB (GREEN): 36    <<  Manual calculation by user:  2*14 days +1*6 days +2 for Sun
```

(Page intentionally added for two-sided copying.)

Appendix C

Tips for Working with Laser Printed Prescription Labels

Outpatient Pharmacy patch PSO*7*120 introduced the ability to print laser printed prescription labels. There are some differences in function when you print these new labels. These differences are detailed below. For more information about laser printed labels, refer to the Release Notes for patch PSO*7*120, *Laser Printed Prescription Labels with PMI Sheets Phase I Release Notes.*

Outpatient Pharmacy patch PSO*7*117 introduced the support of non-English languages for the SIG. For laser labels, PSO*7*138 will allow the bottle label SIG to be in a non-English language while still printing the SIG in English on the Pharmacy Fill Document. It is important to note that the Patient Medication Information (PMI) sheet will not use the patient's language specification. The PMI will print in either Spanish or English, based on the PMIS LANGUAGE (#14) field of the PHARMACY SYSTEM (#59.7) file.

Narrative Text

The laser form has a limited amount of space allocated to print the following fields from the OUTPATIENT SITE file (#59): NARRATIVE FOR COPAY DOCUMENT (#1004), NARRATIVE REFILLABLE RX (#1005) and NARRATIVE NON-REFILLABLE RX (#1006). You may need to adjust or modify the text to print correctly. Once you have installed PSO*7*120 and set up the printer, examine the printout of this text on the labels and make necessary adjustments. Any text that doesn't fit in the space allocated will be truncated.

When editing text for these fields, there are two things to keep in mind. First, if the line of text is too long at print time, the program will wrap to the next line. Second, each 'new' line (as it is viewed on the screen) when editing will also cause the print to wrap to the next line.

Accessing the Laser Label Format

To access the new laser label format, the user must make the appropriate entries in the CONTROL CODES multiple (#55) of the TERMINAL TYPE file (#3.2).

Note: Installation of PSO*7*120 has no major effect on the existing label functionality, and will not change the printed format of the label until you perform further steps, as described in the Outpatient Pharmacy V. 7.0 Technical Manual. An example of a CONTROL CODE follows:

```
NUMBER: 11                          CTRL CODE ABBREVIATION: MLI
  FULL NAME: MAILING LABEL INITIALIZATION
  CONTROL CODE: S PSOFONT="F10",PSOX=1700,PSOY=175,PSOYI=50
```

In this control code, the setup is done that defines the font, starting page position, and line size for the Mailing Label Section of the label.

Note: The detailed description of these control codes is found in the *Outpatient Pharmacy V. 7.0 Technical Manual.*

Modifications to Existing Features
Phase I affects some OUTPATIENT SITE file (#59) fields and other OP prescription label print features.

When a user selects a device defined for Laser Label output, the "OK to assume label alignment is correct? YES//" prompt is not asked.

Affected Options
The following options are affected by the "OK to assume label alignment is correct" YES//" prompt:

- *Rx (Prescriptions)* [PSO RX] option
- *Outpatient Pharmacy Manager* [PSO MANAGER] option
- *Patient Prescription Processing* [PSO LM BACKDOOR ORDERS] option
- *Complete Orders from OERR* [PSO LMOE FINISH] option
- *Pharmacist Menu* [PSO USER1] option
- *Pharmacy Technician's Menu* [PSO USER2] option
- *Suspense Functions* [PSO PND] option
- *Print from Suspense File* [PSO PNDLBL] option
- *Reprint Batches from Suspense* [PSO PNDRPT] option
- *Pull Early from Suspense* [PSO PNDRX] option
- *Reprint an Outpatient Rx Label* [PSO RXRPT] option
- *Label/Profile Monitor Reprint* [PSO B] option
- *Barcode Batch Prescription Entry* [PSO BATCH BARCODE] option
- *Change Label Printer* [PSO CHANGE PRINTER] option

The system reference to the PRESCRIPTION file (#52) COPIES field (#10.6) is changed. For a new prescription, when COPIES is set to 1, the full prescription content prints. If COPIES is greater than 1, the full prescription content prints one time. On the additional copies, only the adhesive prescription label portion prints. The adhesive portion includes the bottle label, warning label, and patient address label.

The prompt "Print 'LEFT' side of label only? N//" is changed to "Print adhesive portion of label only? N//."

When "Print adhesive portion of label only? N//" prompt is answered NO, the full prescription content prints. When answered YES, only the adhesive portion of the label prints.

The BARCODES ON REQUEST FORMS field (#.119) of the OUTPATIENT SITE file (#59) is not used in this enhancement. Regardless of the value of this field, barcodes will print on the request form.

The NEW LABEL STOCK field (#4) of the OUTPATIENT SITE file (#59) is not used in this enhancement. The device setup controls the branch to the new functionality.

Appendix D

Transitional Pharmacy Benefit (TPB) Phase I (PSO*7*145 and SD*5.3*300)

This Appendix describes the functionality specific to the Transitional Pharmacy Benefit (TPB) Phase I project.

TPB Phase I Functionality

Phase I includes the TPB functionality for patches PSO*7*145 and SD*5.3*300, which consist of the following:

- Identifies veterans at each facility who are eligible for the benefit
- Customizes letters to veterans with site-specific information
- Prints letters for the TPB eligible veterans
- Prints a report of the identified veterans
- Adds options to enter or inactivate veterans in the eligible file
- Generates a message to the patch installer and to designated Office of Information staff members for reporting purposes, listing the following:
  - Total number of eligible patients
  - Total number of ineligible patients excluded for the program due to specific criteria
  - Time required to complete the job

TPB Outpatient Pharmacy File Modifications

This section details the following new and modified files:

- TPB ELIGIBILITY file (#52.91)
- TPB INSTITUTION LETTERS (#52.92)

TPB ELIGIBILITY File (#52.91)

The TPB ELIGIBILITY file stores data of patients who are eligible for TPB. Three algorithms — Electronic Wait List (EWL), Scheduling (both executed by patch SD*5.3*300) and Pharmacy (executed by patch PSO*7*145) — are run at each site to determine TPB patient eligibility and placement.

This file is populated as part of the installation of PSO*7*145. This file stores information related specifically to veterans who are eligible for the TPB program or who met some eligibility requirements, but who were excluded from the initial list of eligible veterans. Those veterans excluded had a primary care appointment date less than 30 days from the date the appointment was made or at least one active prescription on file in the past year plus 120 days.

The TPB ELIGIBILITY file contains the following 12 fields:

PATIENT

DATE PHARMACY BENEFIT BEGAN

INACTIVATION OF BENEFIT DATE

INACTIVATION REASON CODE

DESIRED APPOINTMENT DATE

WAIT TYPE

STATION NUMBER

INSTITUTION

EXCLUSION REASON

PRIMARY CARE SCHEDULE APT DATE

RX #

DATE LETTER PRINTED

TPB INSTITUTION LETTERS File (#52.92)

Each eligible veteran receives a letter stating he or she is eligible for the TPB program. Each letter contains information specific to the institution from which the letter is generated and from which the veteran receives TPB program services.

The TPB INSTITUTION LETTERS file stores the letter data that is specific to each institution. The INSTITUTION field in this file is initially populated based on the INSTITUTION field entries from the TPB ELIGIBILITY file.

The user may manually add or edit all fields, except INSTITUTION, in the TPB INSTITUTION LETTERS file through the new *TPB Institution Letter Enter/Edit* option.

The TPB INSTITUTION LETTERS file (#52.92) fields are as follows:

INSTITUTION
PARENT INSTITUTION
CONTACT PHONE #1
CONTACT PHONE #2
ADDRESS LINE 1
ADDRESS LINE 2
CITY
STATE
ZIP CODE
ADDRESS LINE 1 (MAILING)
ADDRESS LINE 2 (MAILING)
CITY (MAILING)
STATE (MAILING)
ZIP CODE (MAILING)
DIRECTORS SIG LINE 1
DIRECTORS SIG LINE 2
DIRECTORS SIG LINE 3

Electronic Wait List (EWL)/Scheduling Extract (SD*5.3*300)

The EWL/Scheduling logic contained in SD*5.3*300 identify veterans who meet specific criteria which define him or her as eligible to receive prescriptions through this benefit.

Logic performed in PSO*7*145 completes the evaluation of the EWL/Scheduling logic and populates the TPB ELIGIBILITY file (#52.91) with information related to the evaluated veterans. EWL, Scheduling, and Pharmacy algorithms are described as follows. This information helps the user evaluate a veteran who appeals his or her exclusion from the program.

EWL Algorithm

SD*5.3*300 evaluates each EWL entry to determine the TPB patient eligibility and populates a list with entries that meet the eligibility criteria. The EWL algorithm is as follows:

1. Each patient listed on the EWL is evaluated for the criteria listed below. If any of the criteria are found to be true, the patient is not defined as eligible for the TPB program and will not be included in the TPB ELIGIBILITY file based on the EWL entry..
   - Patient is deceased
   - Patient is not a veteran
   - Patient is ineligible
   - Invalid name value
   - Merged patient record
   - Merging patient record
   - Test patient
   - Not enrolled by date required (on or before 7/24/03) and enrollment status is not equal to "Not Enrolled"
   - EWL record is missing Originating Date
   - EWL entry Wait List Type is not 1, 2, 3, or 4
   - Patient not on EWL on or before 7/24/03 (Originating Date > 7/24/03)

2. Patient must be on waiting list (EWL) 30 days or longer,
   - Valid Wait List Types:
   - 1 = PCMM Team Assignment
   - 2 = PCMM Position Assignment
   - 3 = Service/Specialty
   - 4 = Specific Clinic

   Include patient for Wait List Types 1 and 2 if today - Originating Date > 29 days
   Include patient for types 3 and 4 if either one of the following is true: today - Originating Date > 29 days or today - Desired Date > 29 days

3. The patient must be waiting for a clinic appointment that is equal to one of the 12 DSS 6-digit credit pairs listed below and defined as Primary Care for this program.

MD	NP	PA	CNS
322 000	322185	322186	322187
323 000	323185	323186	323187
350 000	350185	350186	350187

The patient will be added to the list of eligible patients if the evaluation passes all above criteria in items #2 and #3.

Scheduling Algorithm

In addition to the EWL algorithm, SD*5.3*300 runs a Scheduling algorithm to determine TPB patient eligibility and placement into the TPB ELIGIBILITY file (#52.91). The Scheduling algorithm is as follows:

1. Each patient listed in PATIENT file (#2) is evaluated for the criteria listed below. If any of the criteria are found to be true, the patient is not defined as eligible for theTPB program and will not be included in the TPB ELIGIBILITY file based on the search for scheduled appointments.
   - Patient is deceased
   - Patient is not a veteran
   - Patient is ineligible
   - Invalid name value
   - Merged patient record
   - Merging patient record
   - Test patient
   - Not enrolled by date required (on or before 7/24/03) and enrollment status is not equal to "Not Enrolled"
   - Future scheduled appointment with Date Appt. Made after 7/24/03
   - Future scheduled appointment is missing value for Date Appt. Made

2. The patient must have a scheduled appointment on 10/22/03 or later.
   - The appointment cannot be a cancelled appointment.
   - The veteran must have been waiting > 30 days from the time the appointment was entered in the computer to the time the appointment is to occur.
   - If above criteria fails, the patient is added to the list with an EXCLUSION REASON of "Actual Appt. < 30 days" from the date the appointment was made.

3. The patient must be waiting for a clinic appointment that is equal to one of the 12 DSS 6-digit credit pairs listed below and defined as Primary Care for this program.

MD	NP	PA	CNS
322 000	322185	322186	322187
323 000	323185	323186	323187
350 000	350185	350186	350187

4. Examine past encounters – the veteran cannot have had a Primary Care encounter within the past 2 years from 10/22/03. If such an encounter is found, the veteran is not eligible for the TPB program. If no encounter is found, the veteran is added to the list for further evaluation by the Pharmacy algorithm.

Pharmacy Algorithm

For each entry in the list created by SD*5.3*300, patch PSO*7*145 will run a Pharmacy algorithm to determine TPB patient eligibility based on active prescriptions and populate the TPB ELIGIBILITY file (#52.91). The following describes the Pharmacy logic performed.

1. Build TPB ELIGIBILITY file (#52.91).

2. Populate TPB ELIGIBILITY file with entries in list created by SD*5.3*300.

3. Evaluate entry in the list for "Active" Prescriptions.

4. Using the entries in the list, the issue date field in the PRESCRIPTION file (#52) is checked for each prescription. If the issue date is within the past 485 days from October 22, 2003, and the dispense drug is not marked as "S" or "I" in the DRUG file (#50) DEA, SPECIAL HANDLING field (#3), the veteran will be added to the TPB ELIGIBILITY file (#52.91) with an exclusion of "Active Rx."

   If no "Active Rx" is found, create entry for patient in TPB ELIGIBILITY file.

Mail Message

The system generates a mail message upon execution of the postinit routine. This message contains the following:

- Start and stop times of the job that creates the TPB ELIGIBILITY file and populates the TPB INSTITUTION LETTERS file.
- Number of patients included in the TPB ELIGIBILITY file who are eligible for the benefit upon installation of the patch and creation of the file.
- Number of patients in the TPB ELIGIBILITY file who are excluded from eligibility due to an exclusion (has an appointment less than 30 days from date appointment is made or has active prescriptions).
- Patients identified as potentially eligible who could not be entered into the TPB ELIGIBILITY file because an institution was found for the patient, but a station number could not be identified for that institution.

  Note: The message notifies the site of the need to review the listed exceptions for possible manual entry.

This mail message is delivered to the patch installer and to specific Office of Information staff members who report the information to a nationally designated representative.

TPB Outpatient Pharmacy Options

Due to the controlled menu assignment of TPB, new stand-alone options provide the functions for implementing the TPB program for veterans. Individual sites can determine who at their locations can access these options.

Transitional Pharmacy Benefit Patient Enter/Edit Option [PSO TPB PATIENT ENTER/EDIT]

A new stand-alone option, *Transitional Pharmacy Benefit Patient Enter/Edit*, lets the user enter patients manually and/or inquire about patients who the user has created manually, or who the EWL/Scheduling extract has created automatically.

When the user manually enters the patient's name, the system prompts him or her to enter/edit the following information. Addition of a name to the TPB ELIGIBILITY file through this option automatically sets a WAIT TYPE of "M" (Manual).

PATIENT
INSTITUTION
STATION NUMBER
INACTIVATION OF BENEFIT DATE
INACTIVATION REASON CODE
*DATE PHARMACY BENEFIT BEGAN
*PRIMARY CARE SCHEDULE APT DATE
*DESIRED APPOINTMENT DATE
*WAIT TYPE
*EXCLUSION REASON
*RX #
*DATE LETTER PRINTED

* The fields marked with an asterisk (*) *cannot* be edited.

Field Requirements

The following functionality defines each field of the *Transitional Pharmacy Benefit Patient Enter/Edit* option:

Patient — The user enters patient name in this field. To determine if the patient name is valid, the user validates patient name against the TPB ELIGIBILITY file, then the PATIENT file. The patient must be in the PATIENT file before entry into the TPB ELIGIBILITY file is permitted.

Institution — Populated automatically by the EWL/Scheduling extract or entered manually by the user. This entry is required.

Station Number — Populated automatically by the EWL/Scheduling extract or can be entered manually. If the user enters the patient's name manually, then an attempt to obtain the clinic from the PATIENT file (#2) is performed to auto-populate the STATION NUMBER field. This field is required for a new entry.

Inactivation of Benefit Date — Identifies when the TPB benefit ends. The user may enter the date manually. The software automatically populates this field upon auto-creation and population of the TPB ELIGIBILITY file, if the active Rx check identifies prescriptions and/or patients who have a scheduled primary care appointment that meets the < 30 day criteria. The INACTIVATION REASON CODE and EXCLUSION REASON fields are also appropriately populated.

The user can delete this date to make a patient eligible for the benefit in case of an appeal or an entry made in error. The date entered in this field cannot be prior to the date the benefit began.

Inactivation Reason Code — Indicates why the benefit has stopped.

Note: This field is required when an INACTIVATION OF BENEFIT DATE is entered.

The user chooses one of the following reason codes:

1. Seen by VA Provider
2. No/Show/Cancellation
3. Patient Ended
4. Non-Formulary Rx not accepted
5. Patient Expired
6. All Rx's inactive
7. Exclusion (The user cannot select this entry. The EWL/Scheduling/Pharmacy extract sets this data.)
8. Patient refused appt

Deletion of INACTIVATION OF BENEFIT DATE deletes the INACTIVATION REASON CODE.

The following fields display on the screen, but *cannot* be populated or changed by the user:

Date Pharmacy Benefit Began — Date patient becomes eligible for the benefit. This field is automatically populated with the EWL/Scheduling/Pharmacy extract file creation date at the time the file is initially populated. If the user manually enters the patient's name into the file, this field contains the current date. This field is not editable.

Primary Care Schedule Apt Date — Set by EWL/Scheduling extract, obtained from the PATIENT file (#2), and used for statistical purposes only. This field is not editable.

Desired Appointment Date — Populated automatically by EWL/Scheduling extract and used for statistical purposes only. This field is not editable.

Wait Type — Populated automatically by the EWL/Scheduling extract or entered manually. When the user manually enters the patient's name, a WAIT TYPE of "M" (Manual) is automatically set. This field is used for statistical purposes only and is not editable.

The WAIT TYPES codes are as follows:

E = EWL

S = Schedule Appointment

X = S&E (Scheduling and the EWL)

M = Manual

EXCLUSION REASON — Populated automatically upon auto-create of the TPB ELIGIBILITY file if any of the following conditions are found:

- Patient has an Active Rx
- Actual Appt. < 30 days from Date Appt. Made
- Active Rx and Actual Appt. < 30 days from Date Appt. Made

Note: This field is not editable. If a veteran questions the reason he or she was determined ineligible for the TPB program, this field informs the user of the reason the software determined the ineligible status.

The EXCLUSION REASON displays on the TPB PATIENT report when the patient is flagged with an EXCLUSION REASON.

Rx # — Set in the TPB ELIGIBILITY file if the patient has EXCLUSION REASON "Patient has an Active Rx" or "Active Rx and Actual Appt. < 30 days from Date Appt. Made" obtained from the pharmacy logic as part of the auto-create. This field is not editable and can be referenced when addressing questions regarding veteran eligibility for the TPB program.

The Rx # displays on the *Transitional Pharmacy Benefit Patient Enter/Edit option* when the patient is flagged for the following EXCLUSION REASON:

- "Patient has an Active Rx" or
- "Active Rx and Actual Appt. < 30 days from Date Appt. Made"

The first Active Rx number the system finds for the veteran displays on the TPB Patient Report when the patient is flagged for EXCLUSION REASON:

- "Patient has an Active Rx" or
- "Active Rx and Actual Appt. < 30 days from Date Appt. Made"

Date Letter Printed — Most recent date that a letter was printed for the veteran who was deemed eligible for this benefit. This field is not editable and is set at the time the letter is printed.

TPB Patient Report
[PSO TPB PATIENT REPORT]

A new stand-alone option, *TPB Patient Report*, prints a list of patients who are eligible and ineligible for the TPB program. The contents of this report come from the TPB ELIGIBILITY file.

The report contains the following data elements:

- Institution
- Patient Name (last 4 numbers of the SSN)
- Start Date (date patient became eligible for the TPB program)
- Stop Date ("inactivation of benefit date" for the patient)
- Letter Date (last date the patient letter was printed)
- Inactivation Reason (reason patient is no longer active for the TPB program)
- Exclusion Reason (if appropriate)
- Rx# (if appropriate)
- State

Note: Active state for this patient prints. The hierarchy of the print is 1) Confidential, 2) Temporary, and 3) Permanent. If either the Confidential or the Temporary address is active, then one of these states prints. If the Permanent address is active, then this state prints. The system makes a comparison, and if the states are different, then both state entries print, alerting the user of veterans with dual state residencies.

The report prints by institution and then patient name. The user can print one, all, or many institutions. When an institution is *not* associated with a patient, the patient's name prints at the end of the report and the institution is indicated as (NONE). If there is no data to print for an institution, the institution does not display on the report.

When sorting by patient name, the software provides the user several options:

- All patients, alphabetically
- Eligible patients, alphabetically

  Note: For a patient to be eligible he or she must have a DATE PHARMACY BENEFIT BEGAN and *no* INACTIVATION OF BENEFIT DATE or future INACTIVATION OF BENEFIT DATE.

- Patients who are ineligible for benefit, alphabetically

  Note: Ineligible patients have a past or current INACTIVATION OF BENEFIT DATE set.

TPB Institution Letter Enter/Edit Option [PSO TPB INSTITUTION LETTERS]

A new stand-alone option, TPB Institution Letter Enter/Edit, is assigned to users whom the local site has designated to set up the Dear Veteran letter for the TPB program.

Note: If the physical address, phone numbers, and/or VAMC director information is incomplete, the user receives a warning. The user must complete this data before printing the Dear Veteran letters.

This option customizes sections of the Dear Veteran letter as described below.

- **Physical Address** — Address that appears at the top of the letter. The user may accept or change defaults that may be populated for the address fields from file #4 from Address Line 1, Address Line 2, City, State and Zip code.

- **Parent** — Field used to re-map institutions, such as Community Based Outpatient Clinic (CBOCs) to a parent institution for the purpose of providing proper letter heading, local contact phone number(s), and director's signature block.

  Once the post-install has completed, file #52.92, TPB INSTITUTION LETTERS, is auto-created based on the institutions associated with the patients in file #52.91, TPB ELIGIBILITY. This auto-create populates the address fields, city, state, and zip code fields. Entries manually added in file #52.92 do not update this data from the Institution file #4.

  If a parent institution is entered for a TPB Institution, the site-specific letter information is pulled from the parent TPB Institution entry. If a site has entered a parent for any TPB Institution, the user must select that TPB Institution when printing letters by institution.

Selecting the parent TPB Institution does not automatically generate TPB Dear Veteran letters for its children.

- **Mailing Address** — TPB Forms Return Address for the VA facility (address where patient mails back forms and prescriptions). This address may be the same as or different from the physical address. If the mailing address is complete, that address is the address printed in the body of the letter. If the mailing address is missing, the physical address prints in the body of the letter.
- **Contact Phone 1** and **Contact Phone 2** — Phone numbers the patient can call to ask questions related to the TPB program. One number is needed; however, the user may enter two numbers.
- **Directors Signature Block** — Director's name and title prints at the bottom of the letter.

Note: The user can enter/edit data displayed except for the Institution.

Print TPB Patient Letter(s) Option [PSO TPB PRINT LETTERS]

A new stand-alone option, *TPB Patient Letter(s) Print*, is assigned to users whom the local site designates to print the Dear Veteran letter specific for the TPB program. This option prints the letter by patient, institution(s), or letters that have not previously printed. Letters will not print for patients who have a present or past date in the INACTIVATION OF BENEFIT DATE field in the TPB ELIGIBILITY file.

The print options are as follows:

- Print all letters that have not printed
- Print letter by a patient or multiple patients
- Print by institution (all, one, or a selection)

The Print all letters that have not printed by patient alphabetically print letters, sorted by institution, for those patients who do *not* have an INACTIVATION OF BENEFIT DATE or DATE LETTER PRINTED in TPB ELIGIBILITY file.

The Print letter by a patient or multiple patients alphabetically prints letters sorted by institution if multiple patients are selected. Letters print for those patients who do *not* have an INACTIVATION OF BENEFIT DATE in TPB ELIGIBILITY file.

If the user selects Print by institution (all, one, or a selection), he or she can choose (P) Printed, (N) Non-printed, or (B) Both. Letters print for those patients who do *not* have an INACTIVATION OF BENEFIT DATE in the TPB ELIGIBILITY file.

A summary report prints with a count of the letters printed using the DATE LETTER PRINTED field in the TPB ELIGIBILITY file, including a count by INSTITUTION.

Report TPB Patients Letters Printed/NOT Printed
[PSO TPB LETTERS PRINTED REPORT]

With the stand-alone option, *Report TPB Patients Letters Printed/NOT Printed*, users can print a report that lists patients for whom letters printed, sorted by INSTITUTION. In addition, users can print a report that lists patients for whom letters were not printed.

The user selects one of the following:

- Patients/Letters Printed
- Patients/Letters NOT Printed

When the user chooses the "Patients/Letters Printed (P)" selection, the report lists veterans' names from the TPB ELIGIBILITY file for whom a date is entered into the DATE LETTER PRINTED field. The report, sorted by institution, lists the veteran's name alphabetically and the date the last letter was printed for the patient.

When the user selects the "Patients/Letters NOT Printed (N)" selection, the report lists the veterans' names from the TPB ELIGIBILITY file for whom the DATE LETTER PRINTED field is null.

This report contains the following data elements:

- Institution
- Patient Name
- Inactivation Date ("inactivation of benefit date" for the patient)
- Reason (Inactivation Reason; reason patient is no longer active for the TPB program)
- Exclusion Reason (if appropriate)

At the end of each report is a summary of the number of names on the list by institution.

(Page intentionally added for two-sided copying.)

Index

A

About the Output Reports Menu · 57
Action Profile · 57
Add New Providers · 46, 95
All Reports · 64, 65
Alpha Drug List and Synonyms · 58
AMIS Report · 58
Archive to File · 21
Archiving menu · 20
Autocancel Rx's on Admission · 25, 47
Auto-delete from Suspense · 54, 100
Auto-Start Enter/Edit · 28, 49

B

Barcode Batch Prescription Entry · 86, 141
Barcode Rx Menu · 86, 141
Batch Print Questionnaires · 40, 116, 157
Bingo Board Manager · 26
Bingo Board Manager (BM) · 47
Bingo Board User · 154
Bingo Board User (BU) · 32

C

Calculating Default Quantity (QTY) values · 185
CHAMPUS Billing Exemption · 39
Change Suspense Date · 101, 114
Check Quality of Barcode · 86, 141
Clinic Costs · 60
Clozapine Pharmacy Manager · 34
Commonly Dispensed Drugs · 60
Complete Orders from OERR · 86, 142
Controlling the Dispensing of Clozapine · 34
Copay Menu · 39
Cost Analysis Reports · 60
Cost of Prescriptions · 64, 65
Count of Prescriptions · 64, 65
Count of Suspended Rx's by Day · 101
Create/Edit a Questionnaire · 40, 115
Creating A New Order · 177

Creating A Sig · 175
Creating the Sig Formula · 179
Creating, Editing, and Printing a DUE Answer Sheet · 156

D

Daily AMIS Report · 62
Daily Management Report Menu · 64
Daily Rx Cost · 95
Date Range Recompile Data · 64
Delete a Prescription · 54, 96
Delete Intervention · 54, 68, 123
Delete Printed Rx's from Suspense · 102
Discontinue Prescription(s) · 93, 148
Display Lab Tests and Results · 35
Display Patient's Name on Monitor · 32, 113, 154
Division Costs by Drug · 60
Drug Costs · 60
Drug Costs by Division · 61
Drug Costs by Division by Provider · 61
Drug Costs by Provider · 61
Drug List By Synonym · 62
DUE Report · 40
DUE Supervisor · 39, 115
DUE User · 156

E

Edit an Existing Answer Sheet · 39, 115, 156
Edit Data for a Patient in the Clozapine Program · 35, 52
Edit Pharmacy Intervention · 54, 68
Edit Provider · 46, 96
Electronic Wait List (EWL)/Scheduling Extract (SD*5.3*300) · 193
Enter a New Answer Sheet · 39, 115, 156
Enter New Patient · 32, 112, 154
Enter Pharmacy Intervention · 68, 122
Enter/Edit Clinic Sort Groups · 53, 117
Enter/Edit Display · 48
Entering Actions · 13
Evaluating Drug Usage · 39, 115
Exempt Rx Patient Status from Copayment · 39
Expire Prescriptions · 54
External Interface Menu · 118

F

File Retrieval · 22
Find · 20
Free Text Dosage Report · 62

H

Handling Copay Charges · 37
High Cost Rx Report · 61

I

Icons · *See* Special Notations and Conventions
Implementing and Maintaining Outpatient Pharmacy · 44
Inactive Drug List · 63
Initialize Daily Compile · 65
Initialize Rx Cost Statistics · 53, 96
Inter-Divisional Processing · 96
Intravenous Admixture · 64, 66
Introduction · 1
Inventory · 97

L

Label/Profile Monitor Reprint · 44
Laser Printed Prescription Labels · 190c
List Manager · 11
List Non-Verified Scripts · 106
List of Override Prescriptions · 35
List One Patient's Archived Rx's · 24, 93, 148
Log of Suspended Rx's by Day (this Division) · 102
Look-up Clerk by Code · 97

M

Maintenance (Outpatient Pharmacy) · 44
Management Reports Menu · 63
Medication Profile · 56, 66, 121, 157
Menus · 3
Monthly Drug Cost · 67
Monthly Management Report Menu · 65
Monthly Rx Cost Compilation · 97

N

Narcotic Prescription List · 67
Non-Formulary List · 67
Non-Verified Counts · 106, 150

O

One Day Recompile Data · 66
Ordering/Processing a Prescription · 125
Other Outpatient Pharmacy ListMan Actions · 15
Other Screen Actions · 16
Outpatient Pharmacy Hidden Actions · 14

P

Patient Address Changes Report · 97
Patient Prescription Processing · 71, 126, 158
Patient Status Costs · 61
Pharmacist Enter/Edit · 98
Pharmacist Menu · 110
Pharmacy Cost Statistics Menu · 61
Pharmacy Intervention · 122
Pharmacy Intervention Menu · 68
Pharmacy Statistics · 61
Pharmacy Technician's Menu · 151
Poly Pharmacy Report · 67
Print Archived Prescriptions · 24
Print Bingo Board Statistics · 28, 49
Print Bingo Board Wait Time · 29, 50
Print from Suspense File · 102, 123
Print Pharmacy Intervention · 68, 122
Print TPB Patient Letter(s) Option · 202
Process Drug/Drug Interactions · 124
Processing a Prescription · 71, 158
Processing Drug/Drug Interactions · 69
Provider by Drug Costs · 62
Provider Costs · 62
Pull Early from Suspense · 103, 124, 167
Purge · 23
Purge Bingo Board Data · 30, 51
Purge Data · 66
Purge Drug Cost Data · 55, 98
Purge External Batches · 41, 56, 118

Q

Queue Background Jobs · 46

R

Recompile AMIS Data · 56, 99
Register Clozapine Patient · 36
Release Medication · 69, 125, 168
Released and Unreleased Prescription Report · 67
Releasing Medication · 69
Remove Patient's Name from Monitor · 32, 113, 155
Report TPB Patients Letters Printed/NOT Printed · 203
Reprint an Outpatient Rx Label · 94, 148
Reprint Batches from Suspense · 104
Reprint External Batches · 42, 118
Request Statistics · 62
Return Medication to Stock · 125
Returning Medication to Stock · 70
Rx (Prescriptions) · 71, 125
Rx Verification by Clerk · 106, 150

S

Save to Tape · 20
Site Parameter Enter/Edit · 45, 99
Sort Statistics By Division · 62
Special Notations and Conventions: Icons · 1
Speed Actions · 15
Start Bingo Board Display · 31, 52
Status of Patient's Order · 33, 113, 155
Stop Bingo Board Display · 31, 52
Supervisor Functions · 95
Suspense Functions · 100

T

Tape Retrieval · 21
TPB Institution Letter Enter/Edit Option · 201
TPB Outpatient Pharmacy File Modifications · 191
TPB Outpatient Pharmacy Options · 197
TPB Patient Report · 200
Transitional Pharmacy Benefit (TPB) Phase I (PSO*7*145 and SD*5.3*300) · 191
Transitional Pharmacy Benefit Patient Enter/Edit Option · 197
Type of Prescriptions Filled · 64, 66

U

Update Patient Record · 104, 149, 170
Using List Manager with Outpatient Pharmacy · 12
Using the Archive Menu Option · 20
Using the Bingo Board · 112, 154
Using the Bingo Board Menu · 25
Using the Interface Menu · 118
Using the Supervisor Menu · 95
Using the Suspense Functions · 100

V

Verification · 104, 149
Verifying Prescriptions · 104, 149
View External Batches · 43, 119
View Intervention · 69
View Prescription · 149
View Provider · 99