



RESOURCE AND PATIENT MANAGEMENT SYSTEM

Inpatient Medications (PSJ)

Pharmacist's User Manual

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TABLE OF CONTENTS

1.0	INTRODUCTION	1
2.0	ORIENTATION	2
	2.1 Menu Options	2
	2.2 Conventions.....	3
3.0	LIST MANAGER	5
	3.1 Inpatient List Manager	5
	3.2 Using List Manager	6
	3.3 Hidden Actions.....	6
4.0	ORDER OPTIONS	10
	4.1 Unit Dose Medications Option	10
	4.1.1 Order Entry	11
	4.1.2 Non-Verified/Pending Orders	12
	4.1.3 Inpatient Order Entry.....	15
	4.1.4 Patient Actions	16
	4.1.5 Order Actions	38
	4.1.6 Discontinue All of a Patient's Orders.....	53
	4.1.7 Hold All of a Patient's Orders	54
	4.1.8 Inpatient Profile	55
	4.2 IV Menu Option.....	58
	4.2.1 Order Entry (IV).....	59
	4.2.2 Inpatient Order Entry.....	59
	4.2.3 Patient Actions	61
	4.2.4 Order Actions	79
	4.2.5 IV Types.....	106
	4.2.6 Profile (IV)	110
	4.2.7 Inpatient Profile	113
	4.3 Order Check	115
5.0	MAINTENANCE OPTIONS	118
	5.1 Unit Dose	118
	5.1.1 Edit Inpatient User Parameters	118
	5.1.2 Edit Patient's Default Stop Date	119
	5.2 IV Maintenance Options.....	119
	5.2.1 Change Report/Label Devices (IV).....	119
	5.2.2 Change to Another IV Room (IV)	120
	5.2.3 Non-Standard Schedules	120
6.0	PICK LIST MENU	121
	6.1 Pick List	121
	6.2 Enter Units Dispensed	126
	6.3 Extra Units Dispensed	129
	6.4 Report Returns	130

6.5	Reprint Pick List.....	131
6.6	Send Pick List To ATC.....	133
6.7	Update Pick List.....	133
7.0	PRODUCTION OPTIONS	134
7.1	Ward List (IV).....	134
7.2	Update Daily Ward List (IV)	135
7.3	Manufacturing List (IV).....	137
7.4	Returns and Destroyed Entry (IV).....	139
7.5	Barcode ID – Return and Destroy (IV)	143
8.0	OUTPUT OPTIONS	145
8.1	Unit Dose	145
8.1.1	PAient Profile (Unit Dose)	145
8.1.2	Reports Menu.....	146
8.1.3	Align Labels (Unit Dose)	185
8.1.4	Label Print/Reprint	186
8.2	IV Output Options	186
8.2.1	Label Menu (IV).....	186
8.2.2	Reports (IV).....	195
8.2.3	Suspense Functions (IV).....	204
9.0	INQUIRIES OPTION	212
9.1	Unit Dose	212
9.1.1	Inquiries Menu.....	212
9.2	Drug Inquiry (IV)	214
9.2.1	Drug Inquiry (IV).....	214
10.0	GLOSSARY	216
11.0	INDEX	227
12.0	CONTACT INFORMATION.....	231

1.0 Introduction

The Inpatient Medications package provides a method of management, dispensing, and administration of inpatient drugs within the hospital. Inpatient Medications combines clinical and patient information that allows each inpatient facility to enter orders for patients, dispense medications by means of Pick Lists, print labels, create Medication Administration Records (MARs), and create Management Reports. Inpatient Medications also interacts with the Computerized Patient Record System (CPRS) and the Bar Code Medication Administration (BCMA) packages to provide more comprehensive patient care.

This user manual is written for the Pharmacy Staff and other healthcare staff for managing, dispensing, and administering medications to the patients within the hospital. The main text of the manual outlines patients' ordering options for new and existing orders, editing options, output options, and inquiry options. It also outlines options available under the Pick List actions.

2.0 Orientation

2.1 Menu Options

Since the documentation is topic oriented and the screen options are not, a Menu Tree is provided below for the newer users who may need help finding the explanations to the options.

Unit Dose Menu Tree	Topic Oriented Section
	Output Options
	Order Options
EUP Edit Inpatient User Parameters	Maintenance Options
ESD Edit Patient's Default Stop Date	Maintenance Options
Hold All of a Patient's Orders	Order Options
IOE Inpatient Order Entry	Order Options
IPF Inpatient Profile	Order Options
INquiries Menu ...	
Dispense Drug Look-Up	Inquiries Options
Standard Schedules	Inquiries Options
Label Print/Reprint	Output Options
Non-Verified/Pending Orders	Order Options
Order Entry	Order Options
PAtient Profile (Unit Dose)	Output Options
Pick List Menu ...	Pick List Menu
ENter Units Dispensed	Pick List Menu
EXtra Units Dispensed	Pick List Menu
Pick List	Pick List Menu
Report Returns	Pick List Menu
Reprint Pick List	Pick List Menu
Send Pick List to ATC	Pick List Menu
Update Pick List	Pick List Menu
Reports Menu ...	Output Options
7 Day MAR	Output Options
14 Day MAR	Output Options
24 Hour MAR	Output Options
Action Profile #1	Output Options
Action Profile #2	Output Options
AAuthorized Absence/Discharge Summary	Output Options
Extra Units Dispensed Report	Output Options
Free Text Dosage Report	Output Options
INpatient Stop Order Notices	Output Options
Medications Due Worksheet	Output Options
Patient Profile (Extended)	Output Options

IV Menu Tree	Topic Oriented Section
CRL Change Report/Label Devices (IV)	Maintenance Options
CIR Change to Another IV Room (IV)	Maintenance Options
Drug Inquiry (IV)	Inquiries Options
IOE Inpatient Order Entry	Order Options
IPF Inpatient Profile	Order Options
Barcode ID – Return and Destroy (IV)	Production Options
Label Menu (IV) ...	Output Options
Align Labels (IV)	Output Options
Individual Labels (IV)	Output Options
Scheduled Labels (IV)	Output Options
Reprint Scheduled Labels (IV)	Output Options
Test Control Codes (IV)	Output Options
Manufacturing List (IV)	Production Options
Order Entry (IV)	Order Options
Profile (IV)	Order Options
REPorts (IV) ...	Output Options
Active Order List (IV)	Output Options
Inpatient Stop Order Notices	Output Options
IV Drug Formulary Report (IV)	Output Options
Patient Profile Report (IV)	Output Options
Renewal List (IV)	Output Options
RETurns and Destroyed Entry (IV)	Production Options
SUSpense Functions (IV)...	Output Options
Delete Labels From Suspense (IV)	Output Options
Individual Order Suspension (IV)	Output Options
Labels from Suspense (IV)	Output Options
Manufacturing Record for Suspense (IV)	Output Options
Reprint Labels from Suspense (IV)	Output Options
Suspense List (IV)	Output Options
Update Daily Ward List (IV)	Production Options
Ward List (IV)	
Production Options	

2.2 Conventions

Within this documentation, several notations need to be outlined.

- Menu options will be italicized.

Example: *Inpatient Order Entry* indicates a menu option.

- Screen prompts will be denoted with quotation marks around them.

Example: “Select DRUG:” indicates a screen prompt.

- Responses in bold face indicate what the user is to type in.

Example: Printing a MAR report by ward group **G**, by ward **W**, or by patient **P**.

- Text centered between arrows represents a keyboard key that needs to be pressed in order for the system to capture a user response or move the cursor to another field. **<Enter>** indicates that the Enter key (or Return key on some keyboards) must be pressed. **<Tab>** indicates that the Tab key must be pressed.

Example: Press **<Tab>** to move the cursor to the next field.

Press **<Enter>** to select the default.

- Text depicted with a black background, displayed in a screen capture, designates reverse video or blinking text on the screen.

```
Example:
(9) Admin Times: 01-09-15-20
*(10) Provider: INPATIENT-MEDS, PHARMACIST
```

Note: Indicates especially important or helpful information.

- Some of the menu options have several letters that are capitalized. By entering in the letters and pressing **<Enter>**, the user can go directly to that menu option (the letters do not have to be entered as capital letters).

Example: From the *Unit Dose Medications* Option: the user can enter **INQ** and proceed directly into the *INquiries Menu* option.

- **?, ??, ???** One, two, or three question marks can be entered at any of the prompts for on-line help. One question mark elicits a brief statement of what information is appropriate for the prompt. Two question marks provide more help, plus the hidden actions and three question marks will provide more detailed help, including a list of possible answers, if appropriate.
- **^** (caret or a circumflex) and pressing **<Enter>** can be used to exit the current option.

3.0 List Manager

3.1 Inpatient List Manager

The screenshot shows a window titled "Patient Information" with a timestamp of "Feb 09, 2001 16:31:03" and "Page: 2 of 2". The header area contains patient details for KENTUCKY, KENNETH, including PID, DOB, SEX, height, and weight. The list area shows a plus sign and a list of verified allergies. The message window displays "Enter ?? for more actions". The action area lists options: EA (Enter/Edit Allergy/ADR Data), DD (Detailed Allergy/ADR List), Select Action: Quit// <Enter>, PU (Patient Record Update), and EX (Exit Patient List). A "CWAD Indicator" label points to the "<A>" symbol in the top right corner.

* Crises, Warnings, Allergies, and Directives (CWAD)

Screen Title : The screen title changes according to what type of information List Manager is displaying (e.g., Patient Information, Non-Verified Order, Inpatient Order Entry, etc).

CWAD Indicator: This indicator will display when the crises, warnings, allergies, and directives information has been entered for the patient. (This information is entered via the Text Integration Utilities (TIU) package.) When the patient has Allergy/ADR data defined, an "<A>" is displayed to the right of the ward location to alert the user of the existence of this information (**Note:** This data may be displayed using the Detailed Allergy/ADR List action). Crises, warnings, and directives are displayed respectively, "<C>","<W>","<D>"(**Note:** This data may be displayed using the CWAD hidden action). Any combination of the four indicators can display.

Header Area: The header area is a "fixed" (non-scrollable) area that displays the patient's demographic information. This also includes information about the patient's current admission. The status and type of order are displayed in the top left corner of the heading, and will include the priority (if defined) for pending orders.

List Area: (scrolling region): This is the section that will scroll (like the previous version) and display the information that an action can be taken on. The Allergies/Reactions line includes non-verified and verified Allergy/ADR information as defined in the Allergy 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. The Inpatient and Outpatient Narrative lines may be used by the inpatient pharmacy staff to display information specific to the current admission for the patient.

Message Window: This section displays a plus sign (+), if the list is longer than one screen, and informational text (i.e., Enter ?? for more actions). If the plus sign is entered at the action prompt, List Manager will “jump” forward to the next screen. The plus sign is only a valid action if it is displayed in the message window.

Action Area: The list of valid actions available to the user display in this area of the screen. If a double question mark (??) is entered at the “Select Action:” prompt, a “hidden” list of additional actions that are available will be displayed.

3.2 Using List Manager

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

For Inpatient Pharmacy, the List Manager gives the user the following:

- Capability to browse through a list of orders
- Capability to take action(s) against those items
- Capability to print MARs, labels, and profiles from within the *Inpatient Order Entry* option.
- Capability to select a different option than the one being displayed.

3.3 Hidden Actions

Two question marks (??) can be entered at the “Select Action:” prompt for a list of all actions available. Typing the name(s) or synonym(s) at the “Select Action:” prompt enters the actions.

The following is a list of generic List Manager actions with a brief description. The synonym for each action is shown, followed by the action name and description.

<u>Synonym</u>	<u>Action</u>	<u>Description</u>
----------------	---------------	--------------------

+	Next Screen	Move to the next screen
-	Previous Screen	Move to the previous screen
UP	Up a Line	Move up one line
DN	Down a line	Move down one line
FS	First Screen	Move to the first screen
LS	Last Screen	Move to the last screen
GO	Go to Page	Move to any selected page in the list
RD	Re Display Screen	Redisplay the current screen
PS	Print Screen	Prints the header and the portion of the list currently displayed

<u>Synonym</u>	<u>Action</u>	<u>Description</u>
PT	Print List	Prints the list of entries currently displayed
SL	Search List	Finds selected text in list of entries
Q	Quit	Exits the screen
ADPL	Auto Display (On/Off)	Toggles the menu of actions to be displayed/not displayed automatically
>	Shift View to Right	Shifts the view on the screen to the right
<	Shift View to Left	Shifts the view on the screen to the left

The following is a list of Inpatient Medications specific hidden actions with a brief description. The synonym for each action is shown followed by the action name and description.

<u>Synonym</u>	<u>Action</u>	<u>Description</u>
MAR	MAR Menu	Displays the MAR Menu
24	24 Hour MAR	Shows the 24 Hour MAR
7	7 Day MAR	Shows the 7 Day MAR
14	14 Day MAR	Shows the 14 Day MAR
MD	Medications Due Worksheet	Shows the Worksheet

LBL	Label Print/Reprint	Displays the Label Print/Reprint Menu
ALUD	Align Labels (Unit Dose)	Aligns the MAR label stock on a printer
LPUD	Label Print/Reprint	Allows print or reprint of a MAR label
ALIV	Align Labels (IV)	Aligns the IV bag label stock on a printer
ILIV	Individual Labels (IV)	Allows print or reprint of an IV bag label
SLIV	Scheduled Labels (IV)	Allows print of the scheduled IV bag label
RSIV	Reprint Scheduled Labels (IV)	Allows reprint of scheduled IV bag labels
OTH	Other Pharmacy Options	Displays more pharmacy options
PIC	Pick List Menu	Displays the Pick List Menu
EN	Enter Units Dispensed	Allows entry of the units actually dispensed for a Unit Dose order
EX	Extra Units Dispensed	Allows entry of extra units dispensed for a Unit Dose order
PL	Pick List	Creates the Pick List report
RRS	Report Returns	Allows the entry of units returned for a Unit Dose order
<u>Synonym</u>	<u>Action</u>	<u>Description</u>
RPL	Reprint Pick List	Allows reprint of a pick list
SND	Send Pick list to ATC	Allows a pick list to be sent to the ATC
UP	Update Pick List	Allows an update to a pick list
RET	Returns/Destroyed Menu	Displays the Returns/Destroyed options
RR	Report Returns (UD)	Allows entry of units returned for a Unit Dose order
RD	Returns/Destroyed Entry (IV)	Allows entry of units returned or destroyed for an order
PRO	Patient Profiles	Displays the Patient Profile menu
IP	Inpatient Medications Profile	Generates an Inpatient Profile for a patient
IV	IV Medications Profile	Generates an IV Profile for a patient
UD	Unit Dose Medications Profile	Generates a Unit Dose Profile for a patient
OP	Outpatient Prescriptions	Generates an Outpatient Profile for a patient
AP1	Action Profile #1	Generates an Action Profile #1
AP2	Action Profile #2	Generates an Action Profile #2
EX	Patient Profile (Extended)	Generates an Extended Patient Profile
CWAD	CWAD Information	Displays the crises, warnings, allergies, and directives information on a patient

The following actions are available while in the Unit Dose Order Entry Profile.

<u>Synonym</u>	<u>Action</u>	<u>Description</u>
DC	Speed Discontinue	Speed discontinue one or more orders (This is also available in <i>Inpatient Order Entry</i> and <i>Order Entry (IV)</i>)
RN	Speed Renew	Speed renewal of one or more orders
SF	Speed Finish	Speed finish one or more orders
SV	Speed Verify	Speed verify one or more orders

The following actions are available while viewing an order.

<u>Synonym</u>	<u>Action</u>	<u>Description</u>
CO	Copy an order	Allows the user to copy an active, discontinued, or expired Unit Dose order
DIN	Drug Restriction/Guideline Information	Displays the Drug Restriction/Guideline Information for both the Orderable Item and Dispense Drug
I	Mark Incomplete	Allows the user to mark a Non-Verified Pending order incomplete
JP	Jump to a Patient	Allows the user to begin processing another patient
N	Mark Not to be Given	Allows the user to mark a discontinued or expired order as not to be given

4.0 Order Options

4.1 Unit Dose Medications Option

The *Unit Dose Medications* option is used to access the order entry, patient profiles, and various reports and is the main starting point for the Unit Dose system.

```
Select Unit Dose Medications Option: ?
```

```
Align Labels (Unit Dose)
Discontinue All of a Patient's Orders
EUP Edit Inpatient User Parameters
ESD Edit Patient's Default Stop Date
Hold All of a Patient's Orders
IOE Inpatient Order Entry
IPF Inpatient Profile
INquiries Menu ...
Label Print/Reprint
Non-Verified/Pending Orders
Order Entry
PATient Profile (Unit Dose)
PICK List Menu ...
Reports Menu ...
Supervisor's Menu ...
```

Figure 4-1: Example: Unit Dose Menu

Within the Inpatient Medications package there are three different paths the pharmacist can take to enter a new Unit Dose order or take action on an existing order. They are (1) *Order Entry*, (2) *Non-Verified/Pending Orders*, and (3) *Inpatient Order Entry*. Each of these paths differs by the prompts that are presented. Once the pharmacist has reached the point of entering a new order or selecting an existing order, the process becomes the same for each path.

Note: When the selected order type (non-verified or pending) does not exist (for that patient) while the user is in the *Non-Verified/Pending Orders* option, the user can not enter a new order or take action on an existing order for that patient.

Patient locks and order locks are incorporated within the Inpatient Medications package. When a user (User 1) selects a patient through any of the three paths, *Order Entry*, *Non-Verified/Pending Orders*, or *Inpatient Order Entry*, and this patient has already been selected by another user (User 2), the user (User 1) will see a message that another user (User 2) is processing orders for this patient. This will be a lock at the patient level within the Pharmacy packages. When the other user (User 2) is entering a new order for the patient, the user (User 1) will not be able to access the patient due to a patient lock within the **RPMS** packages. A lock at the order level is issued when an order is selected through Inpatient Medications for any action other

than new order entry. Any users attempting to access this patient's order will receive a message that another user is working on this order. This order level lock is within the **RPMS** packages.

The three different paths for entering a new order or taking an action on an existing order are summarized below.

4.1.1 Order Entry

[PSJU NE]

The *Order Entry* option allows the pharmacist to create, edit, renew, hold, and discontinue Unit Dose orders while remaining in the Unit Dose module.

This option functions almost identically to the *Inpatient Order Entry* option, but does not include IV orders on the profile and only Unit Dose orders may be entered or processed.

After selecting the *Order Entry* option from the *Unit Dose Medications* option, the pharmacist will be prompted to select the patient. At the "Select PATIENT:" prompt, the user can enter the patient's name or enter the first letter of the patient's last name and the last four digits of the patient's social security number (e.g. A9111). The Patient Information Screen is displayed:

Patient Information	Sep 11, 2000 16:09:05	Page: 1 of 1
ABC, PATIENT	Ward: 1 EAST	
HRN: 9111	Room-Bed: B-12	Ht (cm): _____ (_____)
DOB: 08/18/20 (80)		Wt (kg): _____ (_____)
Sex: MALE		Admitted: 05/03/00
Dx: TESTING	Last transferred: *****	
Allergies/Reactions: No Allergy Assessment		
Inpatient Narrative: INP NARR...		
Outpatient Narrative:		
Enter ?? for more actions		
PU Patient Record Update		NO New Order Entry
DA Detailed Allergy/ADR List		IN Intervention Menu
VP View Profile		
Select Action: View Profile//		

Figure 4-2: Example: Patient Information Screen

The pharmacist can now enter a Patient Action at the "Select Action: View Profile//" prompt in the Action Area of the screen.

4.1.2 Non-Verified/Pending Orders

[PSJU VBW]

The *Non-Verified/Pending Orders* option allows easy identification and processing of non-verified and/or pending orders. This option will also show pending and pending renewal orders, which are orders from CPRS that have not been finished by Pharmacy Service. Unit Dose and IV orders are displayed using this option.

The first prompt is “Display an Order Summary? NO// ”. A **YES** answer will allow the pharmacist to view an Order Summary of Pending/Non-Verified Order Totals by Ward Group. The Pending IV, Pending Unit Dose, Non-Verified IV and Non-Verified Unit Dose totals are then listed by ward group. The user can then specify whether to display Non-Verified Orders, Pending Orders or both.

```
Select Unit Dose Medications Option: NON-Verified/Pending Orders
Display an Order Summary? NO// YES

Searching for Pending and Non-Verified
orders.....

                Pending/Non-Verified Order Totals by Ward Group

Ward Group                Pending                Non-Verified
                           IV                 UD                IV                 UD
SOUTH WING                0                 25                6                 25
^OTHER                    0                 1                 0                 0

1) Non-Verified Orders
2) Pending Orders

Select Order Type(s) (1-2): 1
```

Figure 4-3: Example: Non-Verified/Pending Orders

The user can select which packages to display; Unit Dose Orders, IV Orders, or both. The next prompt allows the user to select non-verified and/or pending orders for a ward group (**G**), ward (**W**), or single patient (**P**). If ward or ward groups is selected, patients will be listed by wards and then by teams. The user will then select the patient from the list.

```
1) Unit Dose Orders
2) IV Orders

Select Package(s) (1-2): 1-2

Select by WARD GROUP (G), WARD (W), or PATIENT (P): GROUP

Select WARD GROUP: SOUTH WING
PHARMACY          HOME
...a few moments, please.....
```

Figure 4-4: Example: Non-Verified/Pending Orders, continued

```

ORDERS NOT VERIFIED BY A PHARMACIST - 1 EAST

```

No.	TEAM	PATIENT
1	TEAM A	BUTTONS,RED (0001)
2	Not Found	ABC,PATIENT (9111)
3	Not Found	BYROM,BUZZY (1111)
4	Not Found	CHUNDLER,BILLY (2333)
5	Not Found	COLNER,ANTHONY (7782)

```

Select 1 - 5: 2

```

```

ORDERS NOT VERIFIED BY A PHARMACIST - 2 EAST

```

No.	TEAM	PATIENT
1	Not Found	ANGEL,JOHNNY (5066)
2	Not Found	BING,CHANDLER (3378)
3	Not Found	CARR,DAVE (7289)
4	Not Found	GUMP,BUBBA (2321)

```

Select 1 - 4: <Enter>

```

```

SHORT, LONG, or NO Profile?  SHORT// <Enter>  SHORT

```

Figure 4-5: Example: Non-Verified/Pending Orders (continued)

A profile prompt is displayed asking the pharmacist to choose a profile for the patient. The user can choose a short, long, or no profile. If **NO** profile is chosen, the orders for the patient selected will be displayed, for finishing or verification, by login date with the earliest date showing first. When a Unit Dose order has a STAT priority, this order will always be displayed first in the order view and will be displayed in blinking reverse video. If a profile is chosen, the orders will be selected from this list for processing (any order may be selected). The following example displays a short profile.


```

Non-Verified/Pending Orders   Feb 28, 2002@13:41:21           Page:    1 of    3
ABC,PATIENT                   Ward: 1 EAST
HRN: 9111                     Room-Bed: B-12           Ht(cm): _____ (_____)
DOB: 08/18/20 (81)           Wt(kg): _____ (_____)
Sex: MALE                     Admitted: 05/03/00
Dx: TESTING                   Last transferred: *****

- - - - - A C T I V E - - - - -
1 d->HEPARIN 2 UNITS          C 02/27 02/27 E
   in 5% DEXTROSE 50 ML 125 ml/hr
2 d->MULTIVITAMIN INJ 1000 ML C 02/27 02/27 E
   DOXORUBICIN 1000 MG
   in D5 1/4NS KCL 30 MEQ 3 ML 45 ml/hr
3 d->HEPARIN INJ,SOLN        O 02/27 02/27 E
   Give: 1000UNT/1ML IM NOW
4 d->MORPHINE SULFATE 2 MG    O 02/27 02/27 E
   in SODIUM CHLORIDE 0.9% 50 ML STAT
5 d->MULTIVITAMIN INJ 2 ML    O 02/27 02/27 E
   MORPHINE SULFATE 2 MG

- - - - - P E N D I N G - - - - -
+      Enter ?? for more actions
PI Patient Information         SO Select Order
PU Patient Record Update      NO New Order Entry
Select Action: Next Screen//  <Enter>  NEXT SCREEN
    
```

Figure 4-6: Example: Short Profile

```

Non-Verified/Pending Orders   Feb 28, 2002@13:42:56           Page:    2 of    3
ABC,PATIENT                   Ward: 1 EAST
HRN: 9111                     Room-Bed: B-12           Ht(cm): _____ (_____)
DOB: 08/18/20 (81)           Wt(kg): _____ (_____)
Sex: MALE                     Admitted: 05/03/00
Dx: TESTING                   Last transferred: *****

+
   in D5 1/4NS KCL 30 MEQ 1000 ML NOW
   DEXTROSE 5% / NAACL 0.33% 1000 ML NOW
6 d->THEOPHYLLINE TAB,SA     O 02/27 02/27 E
   Give: 500MG PO STAT
7 d->WARFARIN TAB            O 02/27 02/27 E
   Give: 2 MG PO NOW
8 d->WARFARIN TAB            O 02/27 02/27 E
   Give: 2 MG PO NOW
9 d->WARFARIN TAB            O 02/28 02/28 E
   Give: 4 MG PO NOW

- - - - - N O N - V E R I F I E D - - - - -
-
10  CEFAMANDOLE 3 GM         ? ***** ***** N
   Enter ?? for more actions
PI Patient Information         SO Select Order
PU Patient Record Update      NO New Order Entry
Select Action: Next Screen//  <Enter>  NEXT SCREEN
    
```

Figure 4-7: Example: Short Profile (continued)

```

Non-Verified/Pending Orders   Feb 28, 2002@13:43:11           Page:    3 of    3
ABC,PATIENT                   Ward: 1 EAST
  HRN: 9111                    Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)          Wt(kg): _____ (_____)
  Sex: MALE                    Admitted: 05/03/00
  Dx: TESTING                  Last transferred: *****
+
  in 5% DEXTROSE 1000 ML 45 ml/hr
11  HALOPERIDOL TAB           C 10/31 01/29 N
    Give: 10MG PO QID
12  WARFARIN TAB             C 11/01 01/29 N
    Give: 5MG PO QD-WARF
- - - - - P E N D I N G - - - - -
13  POTASSIUM CHLORIDE 3 MEQ  ? ***** ***** P
    in DEXTROSE 5% IN N. SALINE 1000 ML 125
      ml/hr

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

Figure 4-8: Example: Short Profile (continued)

The pharmacist can enter a Patient Action at the “Select Action: Quit//” prompt in the Action Area of the screen or choose a specific order or orders.

Note: When the user holds the PSJ RPHARM key, it will be possible to take any available actions on selected Unit Dose or IV orders.

4.1.3 Inpatient Order Entry

[PSJ OE]

The *Inpatient Order Entry* option allows the pharmacist to create, edit, renew, hold, and discontinue Unit Dose and IV orders, as well as put existing IV orders on call for any patient, while remaining in the Unit Dose module.

When the user accesses the *Inpatient Order Entry* option from the Unit Dose module for the first time within a session, a prompt is displayed to select the IV room in which to enter orders. When only one active IV room exists, the system will automatically select that IV room. The user is then given the label and report devices defined for the IV room chosen. If no devices have been defined, the user will be given the opportunity to choose them. If this option is exited and then re-entered within the same session, the current label and report devices are shown. The following example shows the option re-entered during the same session.

```
Select Unit Dose Medications Option: IOE Inpatient Order Entry

You are signed on under the BIRMINGHAM ISC IV ROOM

Current IV LABEL device is: NT TELNET TERMINAL

Current IV REPORT device is: NT TELNET TERMINAL

Select PATIENT: ABC or A9111
```

Figure 4-9: Example: Inpatient Order Entry

At the “Select PATIENT:” prompt, the user can enter the patient’s name or Health Record Number (HRN). The Patient Information Screen is displayed:

```
Patient Information          Sep 12, 2000 10:36:38          Page:    1 of    1
ABC,PATIENT                Ward: 1 EAST
  HRN: 9111                 Room-Bed: B-12             Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)       Wt(kg): _____ (_____)
  Sex: MALE                 Admitted: 05/03/00
  Dx: TESTING               Last transferred: *****

Allergies/Reactions: No Allergy Assessment
Inpatient Narrative: INP NARR...
Outpatient Narrative:

Enter ?? for more actions
PU Patient Record Update          NO New Order Entry
DA Detailed Allergy/ADR List      IN Intervention Menu
VP View Profile
Select Action: View Profile//
```

Figure 4-10: Example: Patient Information Screen

The pharmacist can now enter a Patient Action at the “Select Action: View Profile//” prompt in the Action Area of the screen.

4.1.4 Patient Actions

The Patient Actions are the actions available in the Action Area of the List Manager Screen. These actions pertain to the patient information and include editing, viewing, and new order entry.

4.1.4.1 Patient Record Update

The Patient Record Update action allows editing of the Inpatient Narrative and the Patient’s Default Stop Date and Time for Unit Dose Order entry.

Patient Information	Sep 12, 2000 14:39:07	Page: 1 of 1
ABC,PATIENT	Ward: 1 EAST	
HRN: 9111	Room-Bed: B-12	Ht(cm): _____ (_____)
DOB: 08/18/20 (80)		Wt(kg): _____ (_____)
Sex: MALE		Admitted: 05/03/00
Dx: TESTING		Last transferred: *****
Allergies/Reactions: No Allergy Assessment		
Inpatient Narrative: INP NARR ...		
Outpatient Narrative:		
Enter ?? for more actions		
PU Patient Record Update		NO New Order Entry
DA Detailed Allergy/ADR List		IN Intervention Menu
VP View Profile		
Select Action: View Profile// PU		
INPATIENT NARRATIVE: INP NARR...// Narrative for Patient ABC		
UD DEFAULT STOP DATE/TIME: SEP 21,2000@24:00//		

Figure 4-11: Example: Patient Record Update

The “INPATIENT NARRATIVE: INP NARR...//” prompt allows the pharmacist to enter information in a free text format, up to 250 characters.

The “UD DEFAULT STOP DATE/TIME:” prompt is the date and time entry to be used as the default value for the STOP DATE/TIME of the Unit Dose orders during order entry and renewal processes. This value is used only if the corresponding ward parameter is enabled. The order entry and renewal processes will sometimes change this date and time.

Note: If the Unit Dose order, being finished by the pharmacist, is received from CPRS and has a duration assigned, the UD DEFAULT STOP DATE/TIME is displayed as the Calc Stop Date/Time.

When the SAME STOP DATE ON ALL ORDERS parameter is set to yes, the module will assign the same default stop date for each patient. This date is initially set when the first order is entered for the patient, and can change when an order for the patient is renewed. This date is shown as the default value for the stop date of each of the orders entered for the patient.

Note: If this parameter is not enabled, the user can still edit a patient’s default stop date. Unless the parameter is enabled, the default stop date will not be seen or used by the module.

Examples of Valid Dates and Times:

- JAN 20 1957 or 20 JAN 57 or 1/20/57 or 012057
- T (for TODAY), T+1 (for TOMORROW), T+2, T+7, etc.
- T-1 (for YESTERDAY), T-3W (for 3 WEEKS AGO), etc.
- If the year is omitted, the computer uses CURRENT YEAR. Two-digit year assumes no more than 20 years in the future, or 80 years in the past.
- If only the time is entered, the current date is assumed.
- Follow the date with a time, such as JAN 20@10, T@10AM, 10:30, etc.
- The pharmacist may enter a time, such as NOON, MIDNIGHT, or NOW.
- The pharmacist may enter NOW+3' (for current date and time Plus 3 minutes *Note--the Apostrophe following the number of minutes)
- Time is REQUIRED in this response.

4.1.4.2 New Order Entry

The New Order Entry action allows the pharmacist to enter new Unit Dose or IV orders for the patient, depending upon the order option selected (*Order Entry*, *Non-Verified/Pending Orders*, or *Inpatient Order Entry*). Only one user is able to enter new orders on a selected patient due to the patient lock within the **RPMS** applications. This minimizes the chance of duplicate orders.

For Unit Dose order entry, a response must be entered at the “Select DRUG:” prompt. The pharmacist can select a particular drug or enter a pre-defined order set.

Depending on the entry in the “Order Entry Process:” prompt in the *Inpatient User Parameters Edit* option, the pharmacist will enter a regular or abbreviated order entry process. The abbreviated order entry process requires entry into fewer fields than regular order entry. Beside each of the prompts listed below, in parentheses, will be the word regular, for regular order entry and/or abbreviated, for abbreviated order entry.

- “Select DRUG:” (Regular and Abbreviated)

Pharmacists select Unit Dose medications directly from the DRUG file. The Orderable Item for the selected drug will automatically be added to the order, and all Dispense Drugs entered for the order must be linked to that Orderable Item. If the Orderable Item is edited, data in the DOSAGE ORDERED field and the DISPENSE DRUG field will be deleted. If multiple Dispense Drugs are needed in an order, they may be entered by selecting the DISPENSE DRUG field from the edit list before accepting the new order. After each Dispense Drug is selected, it will be checked against the patient’s current medications for duplicate drug or class, and drug-drug/drug-allergy interactions. (See Section 4.3 Order Check for more information.)

The pharmacist can enter an order set at this prompt. An order set is a group of pre-written orders. The maximum number of orders is unlimited. Order sets are created and edited using the *Order Set Enter/Edit* option found under the *Supervisor’s Menu*.

Order sets are used to expedite order entry for drugs that are dispensed to all patients in certain medical practices or for certain procedures. Order sets are designed to be used when a recognized pattern for the administration of drugs can be identified. For example:

- A pre-operative series of drugs administered to all patients undergoing a certain surgical procedure.
- A certain series of drugs to be dispensed to all patients prior to undergoing a particular radiographic procedure.
- A certain group of drugs, prescribed by a physician for all patients, that is used for treatment on a certain medical ailment or emergency.

Order sets allow rapid entering of this repetitive information, expediting the whole order entry process. Experienced users might want to set up most of their common orders as order sets.

Order set entry begins like other types of order entry. At the “Select DRUG:” prompt, **S.NAME** should be entered. The **NAME** represents the name of a predefined order set. The characters **S.** tell the software that this will not be a single new order entry for a single drug but a set of orders for multiple drugs. The **S.** is a required prefix to the name of the order set. When the user types the characters **S.?**, a list of the names of the order sets that are currently available will be displayed. If **S.** (<Spacebar> and <Enter>) is typed, the previous order set is entered.

After the entry of the order set, the software will prompt for the Provider’s name and Nature of Order. After entry of this information, the first order of the set will be entered automatically. The options available are different depending on the type of order entry process that is enabled—regular, abbreviated, or ward. If regular or abbreviated order entry is enabled, the user will be shown one order at a time, all fields for each order of the order set and then the “Select Item(s): Next Screen//” prompt. The user can then choose to take an action on the order. Once an action is taken or bypassed, the next order of the order set will automatically be entered. After entry of all the orders in the order set, the software will prompt for more orders for the patient. At this point, the user can proceed exactly as in new order entry, and respond accordingly.

When a drug is chosen, if an active drug text entry for the Dispense Drug and/or Orderable Item linked to this drug exists, then the prompt, “Restriction/Guideline(s) exist. Display?:” will be displayed along with the corresponding defaults. The drug text indicator will be <DIN> and will be displayed on the right hand corner on the same line as the Orderable Item. This indicator will be highlighted.

If the Dispense Drug or Orderable Item has a non-formulary status, this status will be displayed on the screen as “*N/F*” beside the Dispense Drug or Orderable Item.

- **“DOSAGE ORDERED:”** (Regular and Abbreviated)

To allow pharmacy greater control over the order display shown for Unit Dose orders on profiles, labels, MARs, etc., the DOSAGE ORDERED field is not required if only one Dispense Drug exists in the order. If more than one Dispense Drug exists for the order, then this field is required.

When a Dispense Drug is selected, the selection list/default will be displayed based on the Possible Dosages and Local Possible Dosages.

```

Select DRUG:      BACLOFEN 10MG TABS          MS200
                  ...OK? Yes// <Enter> (Yes)

Available Dosage(s)
1.      10MG
2.      20MG

Select from list of Available Dosages or Enter Free Text Dose: 1 10MG

You entered 10MG is this correct? Yes// <Enter>
    
```

Figure 4-12: Example: Dispense Drug with Possible Dosages

All Local Possible Dosages will be displayed within the selection list/default.

```

Select DRUG:      GENTAMICIN CREAM 15GM      DE101      DERM CLINIC ONLY
                  ...OK? Yes// <Enter> (Yes)

Available Dosage(s)
1.      SMALL AMOUNT
2.      THIN FILM

Select from list of Available Dosages or Enter Free Text Dose: 2 THIN FILM

You entered THIN FILM is this correct? Yes// <Enter>
    
```

Figure 4-13: Example: Dispense Drug with Local Possible Dosages

Note: If an order contains multiple Dispense Drugs, Dosage Ordered should contain the total dosage of the medication to be administered.

The user has the flexibility of how to display the order view on the screen. When the user has chosen the drug and when no Dosage Ordered is defined for an order, the order will be displayed as:

```

DISPENSE DRUG NAME
Give: UNITS PER DOSE  MEDICATION ROUTE  SCHEDULE
    
```

Figure 4-14: Example: Order View Information when Dosage Ordered is not Defined

When the user has chosen the drug and Dosage Ordered is defined for the order, it will be displayed as:

ORDERABLE ITEM NAME	DOSE FORM		
Give:	DOSAGE ORDERED	MEDICATION ROUTE	SCHEDULE

Figure 4-15: Example: Order View Information when Dosage Ordered is Defined

The DOSAGE ORDERED and the UNITS PER DOSE fields are modified to perform the following functionality:

- Entering a new backdoor order:
 1. If the Dosage Ordered entered is selected from the Possible Dosages or the Local Possible Dosages, the user will not be prompted for the Units Per Dose. Either the BCMA Units Per Dose or the Dispense Units Per Dose, defined under the Dispense Drug, will be used as the default for the Units Per Dose.
 2. If a free text dose is entered for the Dosage Order, the user will be prompted for the Units Per Dose. A warning message will display when the entered Units Per Dose does not seem to be compatible with the Dosage Ordered. The user will continue with the next prompt.
- Finishing pending orders:
 1. If the Dosage Ordered was selected from the Possible Dosages or the Local Possible Dosages, either the BCMA Units Per Dose or the Dispense Units Per Dose, defined under the Dispense Drug, will be used as the default for the Units Per Dose.
 2. If a free text dose was entered for the pending order, the UNITS PER DOSE field will default to 1. A warning message will display when the Units Per Dose does not seem to be compatible with the Dosage Ordered when the user is finishing/verifying the order.
- Editing order:
 1. Any time the DOSAGE ORDERED or the UNITS PER DOSE field is edited, a check will be performed and a warning message will display when the Units Per Dose does not seem to be compatible with the Dosage Ordered. Neither field will be automatically updated.

<p>Note: There will be no Dosage Ordered check against the Units Per Dose if a Local Possible Dosage is selected.</p>
--

- **“UNITS PER DOSE:”** (Regular)

This is the number of units (tablets, capsules, etc.) of the Dispense Drug selected to be given when the order is administered.

When a selection is made from the dosage list provided at the “DOSAGE ORDERED:” prompt, then this “UNITS PER DOSE:” prompt will not be displayed unless the selection list/default contains Local Possible Dosages. If a numeric dosage is entered at the “DOSAGE ORDERED:” prompt, but not from the selection list, then the default for “UNITS PER DOSE:” will be calculated as follows: $\text{DOSAGE ORDERED} / \text{STRENGTH} = \text{UNITS PER DOSE}$ and will not be displayed.

If free text or no value is entered at the “DOSAGE ORDERED:” prompt, the “UNITS PER DOSE:” prompt will be displayed. When the user presses <Enter> past the “UNITS PER DOSE:” prompt, without entering a value, a “1” will be stored. A warning message will be generated when free text is entered at the “DOSAGE ORDERED:” prompt and no value or an incorrect value is entered at the “UNITS PER DOSE:” prompt.

- **“MED ROUTE:”** (Regular and Abbreviated)

This is the route of administration to be used for the order. If a Medication Route is identified for the selected Orderable Item, it will be used as the default for the order.

- **“SCHEDULE TYPE:”** (Regular)

This defines the type of schedule to be used when administering the order. If the Schedule Type entered is one-time, the ward parameter, DAYS UNTIL STOP FOR ONE-TIME, is accessed to determine the stop date. When the ward parameter is not available, the system parameter, DAYS UNTIL STOP FOR ONE-TIME, will be used to determine the stop date. When neither parameter has been set, one-time orders will use the ward parameter, DAYS UNTIL STOP DATE/TIME, to determine the stop date instead of the start and stop date being equal. When a new order is entered or an order entered through CPRS is finished by pharmacy, the default Schedule Type is determined as described below:

- If the schedule is found in the ADMINISTRATION SCHEDULE file and the Schedule Type for that schedule is defined as ONE TIME, the Schedule Type is ONE TIME.
- If no Schedule Type has been found and the schedule is “TODAY”, “NOW”, “STAT”, “ONCE”, “ONE TIME”, “ONE-TIME”, “ONETIME”, “1TIME”, “1 TIME”, or “1-TIME”, the Schedule Type is ONE TIME.
- If no Schedule Type has been found and a Schedule Type is defined for the selected Orderable Item, that Schedule Type is used for the order.

- If no Schedule Type has been found and the schedule contains PRN, the Schedule Type is PRN.
- If no Schedule Type has been found and the schedule is “ON CALL”, “ON-CALL” or “ONCALL”, the Schedule Type is ON CALL.
- For all others, the Schedule Type is CONTINUOUS.

Note: During backdoor order entry, the Schedule Type entered is used unless the schedule is considered a ONE-TIME schedule. In that case, the Schedule Type is changed to ONE TIME.

- **“SCHEDULE:”** (Regular and Abbreviated)

This defines the frequency the order is to be administered. Schedules may be selected from the ADMINISTRATION SCHEDULE file or Non-Standard Schedules may be used. A Non-Standard Schedule is one that does not have a consistent interval between administrations. This field allows up to two spaces to be entered, (Ex. TID PC PRN). Unit Dose and IV recognizes Schedules in the following formats:

- QxH - Hourly Schedules where x is the number of hours between administrations
- QxD - Daily Schedules where x is the number of days between administrations
- QxM - Monthly Schedules where x is the number of months between administrations

While entering a new order, if a Schedule is defined for the selected Orderable Item, that Schedule is displayed as the default for the order.

- **“ADMINISTRATION TIMES:”** (Regular)

This defines the time(s) of day the order is to be given. If the schedule for the order contains “PRN”, all Administration Times for the order will be ignored. In new order entry, the default Administration Times are determined as described below:

- If Administration Times are defined for the selected Orderable Item, they will be shown as the default for the order.
- If Administration Times are defined in the INPATIENT WARD PARAMETERS file for the patient’s ward and the order’s schedule, they will be shown as the default for the order.

- If Administration Times are defined for the Schedule, they will be shown as the default for the order.

- **“SPECIAL INSTRUCTIONS:”** (Regular and Abbreviated)

These are the Special Instructions (using abbreviations whenever possible) needed for the administration of this order. This field allows up to 180 characters and utilizes the abbreviations and expansions from the MEDICATION INSTRUCTION file. For new order entry, when Special Instructions are added, the user is prompted whether to flag this field for display in a BCMA message box. When finishing orders placed through CPRS, where the Provider Comments are not too long to be placed in this field, the pharmacist is given the option to copy the comments into this field. Should the pharmacist choose to copy and flag these comments for display in a BCMA message box on the Virtual Due List (VDL), an exclamation mark “!” will appear in the order next to this field.

Note: For “DONE” Orders (CPRS Med Order) only, the Provider Comments are automatically placed in the Special Instructions. If the Provider Comments are greater than 180 characters, Special Instructions will display “REFERENCE PROVIDER COMMENTS IN CPRS FOR INSTRUCTIONS.”

- **“START DATE/TIME:”** (Regular and Abbreviated)

This is the date and time the order is to begin. This package initially assigns the Start Date/Time to the CLOSEST ADMINISTRATION TIME, NEXT ADMINISTRATION TIME or NOW (which is the login date/time of the order), depending on the value of the DEFAULT START DATE CALCULATION field in the INPATIENT WARD PARAMETERS file. Start Date/Time may not be entered prior to 7 days from the order’s login date.

- **“STOP DATE/TIME:”** (Regular)

This is the date and time the order will automatically expire. This package initially calculates a default Stop Date/Time, depending on the INPATIENT WARD PARAMETERS file except for one-time orders. For a one-time order, the ward parameter, DAYS UNTIL STOP FOR ONE-TIME, is accessed. When this parameter is not available, the system parameter, DAYS UNTIL STOP FOR ONE-TIME, will be used to determine the stop date. When neither parameter has been set, the ward parameter, DAYS UNTIL STOP DATE/TIME, will be used instead of the start and stop date being equal.

- **“PROVIDER:”** (Regular and Abbreviated)

This identifies the provider who authorized the order. Only users identified as active Providers, who are authorized to write medication orders, may be selected.

- **“SELF MED:”** (Regular and Abbreviated)

Identifies the order as one whose medication is to be given for administration by the patient. This prompt is only shown if the ‘SELF MED’ IN ORDER ENTRY field of the INPATIENT WARD PARAMETERS file is set to on.

- **“NATURE OF ORDER:”**

This is the method the provider used to communicate the order to the user who entered or took action on the order. Nature of Orders is defined in EHR. Written will be the default for new orders entered. When a new order is created due to an edit, the default will be Service Correction. The following table shows some Nature of Order examples.

Nature of Order	Description	Prompted for Signature in EHR?	Chart Copy Printed?
Written	The source of the order is a written doctor’s order	No	No
Verbal	A doctor verbally requested the order	Yes	Yes
Telephoned	A doctor telephoned the service to request the order	Yes	Yes
Service Correction	The service is discontinuing or adding new orders to carry out the intent of an order already received	No	No
Duplicate	This applies to orders that are discontinued because they are a duplicate of another order	No	Yes
Policy	These are orders that are created as a matter of hospital policy	No	Yes

The Nature of Order abbreviation will display on the order next to the Provider’s Name. The abbreviations will be in lowercase and enclosed in brackets. Written will display as [w], telephoned as [p], verbal as [v], policy as [i], electronically entered as [e], and service correction as [s]. If the order is electronically signed through the EHR package AND the EHR patch OR*3*141 is installed on the user’s system, then [es] will appear next to the Provider’s Name instead of the Nature of Order abbreviation.

```

Patient Information          Feb 14, 2001 10:21:33          Page:    1 of    1
ABC,PATIENT                Ward: 1 EAST
  HRN: 9111                 Room-Bed:                Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)        Wt(kg): _____ (_____)
  Sex: MALE                 Admitted: 11/07/00
  Dx: TEST                  Last transferred: *****

Allergies/Reactions: No Allergy Assessment
Inpatient Narrative: Narrative for Patient ABC
Outpatient Narrative:

Enter ?? for more actions
PU Patient Record Update          NO New Order Entry
DA Detailed Allergy/ADR List      IN Intervention Menu
VP View Profile
Select Action: View Profile// NO  New Order Entry

Select DRUG: POT
  1  POTASSIUM CHLORIDE 10 mEq U/D TABLET          TN403
  2  POTASSIUM CHLORIDE 10% 16 OZ                  TN403      N/F      BT
  3  POTASSIUM CHLORIDE 20% 16 OZ                  TN403      N/F
  4  POTASSIUM CHLORIDE 20MEQ PKT                   TN403          UNIT DOSE
INPAT
  5  POTASSIUM CHLORIDE 2MEQ/ML INJ 20ML VIAL      TN403      N/F
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1  POTASSIUM CHLORIDE 10 mEq U/D TABLET          TN403
  1.    10
  2.    20
DOSAGE ORDERED (IN MEQ): 1

You entered 10MEQ is this correct? Yes// <Enter> YES
MED ROUTE: ORAL// <Enter> PO
SCHEDULE TYPE: CONTINUOUS// <Enter> CONTINUOUS
SCHEDULE: BID      08-16
ADMIN TIMES: 08-16// <Enter>
SPECIAL INSTRUCTIONS: <Enter>
START DATE/TIME: FEB 14,2001@16:00// <Enter> FEB 14,2001@16:00
STOP DATE/TIME: FEB 23,2001@24:00// <Enter> FEB 23,2001@24:00
PROVIDER: INPATIENT-MEDS,PROVIDER// <Enter>
    
```

Figure 4-16: Example: New Order Entry

```

NON-VERIFIED UNIT DOSE      Feb 14, 2001 10:23:37      Page:    1 of    2
ABC,PATIENT                Ward: 1 EAST
  HRN: 9111                 Room-Bed:                Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)       Wt(kg): _____ (_____)

(1)Orderable Item: POTASSIUM CHLORIDE TAB,SA
  Instructions:
(2)Dosage Ordered: 10MEQ
(3)Start: 02/14/01
16:00
(4)    Med Route: ORAL
(5) Stop: 02/23/01
24:00
(6) Schedule Type: CONTINUOUS
(8)    Schedule: BID
(9)    Admin Times: 08-16
(10)   Provider: INPATIENT-MEDS,PROVIDER [w]    DURATION:
(11) Special Instructions:

(12) Dispense Drug                U/D      Inactive Date
    POTASSIUM CHLORIDE 10 mEq U/D TABLET      1

+      Enter ?? for more actions
ED Edit                AC ACCEPT
Select Item(s): Next Screen// AC ACCEPT
NATURE OF ORDER: WRITTEN// <Enter>

...transcribing this non-verified order....
    
```

Figure 4-17: Example: New Order Entry (continued)

```

NON-VERIFIED UNIT DOSE      Feb 14, 2001 10:24:52      Page:    1 of    2
ABC,PATIENT                Ward: 1 EAST
  HRN: 9111                 Room-Bed:                Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)       Wt(kg): _____ (_____)

*(1)Orderable Item: POTASSIUM CHLORIDE TAB,SA
  Instructions:
*(2)Dosage Ordered: 10MEQ                                     (3)Start: 02/14/01
16:00
*(4)    Med Route: ORAL                                       (5) Stop: 02/23/01
24:00
  (6) Schedule Type: CONTINUOUS
*(8)    Schedule: BID
  (9) Admin Times: 08-16
*(10)   Provider: INPATIENT-MEDS,PROVIDER [w]      DURATION:
(11) Special Instructions:

(12) Dispense Drug                U/D      Inactive Date
POTASSIUM CHLORIDE 10 mEq U/D TABLET      1
+      Enter ?? for more actions
DC Discontinue          ED Edit          AL Activity Logs
HD (Hold)              RN (Renew)
FL Flag                VF Verify
Select Item(s): Next Screen// VF Verify
...a few moments, please.....

Pre-Exchange DOSES: <Enter>

ORDER VERIFIED.

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

Figure 4-18: Example: New Order Entry (continued)

4.1.4.3 Detailed Allergy/ADR List

The Detailed Allergy/ADR List action displays a detailed listing of the selected item from the patient’s Allergy/ADR List. Entry to the *Edit Allergy/ADR Data* option is provided with this list also.

Enter/Edit Allergy/ADR Data

Provides access to the Adverse Reaction Tracking (ART) package to allow entry and/or edit of allergy adverse reaction data for the patient. See the Allergy package documentation for more information on Allergy/ADR processing.

Select Allergy

Allows the user to view a specific allergy.

4.1.4.4 Intervention Menu

Note: This option is only available to those users who hold the PSJ RPHARM key.

The Intervention Menu action allows entry of new interventions and existing interventions to be edited, deleted, viewed, or printed. Each kind of intervention will be discussed and an example will follow.

New: This option is used to add an entry into the APSP INTERVENTION file.


```

Patient Information          Sep 22, 2000 08:03:07          Page: 1 of 1
XYZ,PATIENT                Ward: 1 West          <A>
  HRN: 4321                 Room-Bed: A-6          Ht(cm): 167.64 (04/21/99)
  DOB: 02/22/42 (58)       Wt(kg): 85.00 (04/21/99)
  Sex: MALE                 Admitted: 09/16/99
  Dx: TEST PATIENT         Last transferred: *****
Allergies - Verified: CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE,
                      CHOCOLATE, NUTS, STRAWBERRIES, DUST
Non-Verified: AMOXICILLIN, AMPICILLIN, TAPE, FISH,
              FLUPHENAZINE DECANOATE

Adverse Reactions:
Inpatient Narrative: Inpatient narrative
Outpatient Narrative: This is the Outpatient Narrative. This patient doesn't
like waiting at the pickup window. He gets very angry.

Enter ?? for more actions
PU Patient Record Update          NO New Order Entry
DA Detailed Allergy/ADR List      IN Intervention Menu
VP View Profile
Select Action: View Profile// IN Intervention Menu

                      --- Pharmacy Intervention Menu ---
NE Enter Pharmacy Intervention     DEL Delete Pharmacy Intervention
ED Edit Pharmacy Intervention      VW View Pharmacy Intervention
PRT Print Pharmacy Intervention

Select Item(s): NE Enter Pharmacy Intervention
Select APSP INTERVENTION INTERVENTION DATE: T SEP 22, 2000
Are you adding 'SEP 22, 2000' as a new APSP INTERVENTION (the 155TH)? No// Y
(Yes)
APSP INTERVENTION PATIENT: XYZ,PATIENT          08-18-20          123459111          N
SC VETERAN
APSP INTERVENTION DRUG: WAR
  1  WARFARIN 10MG          BL100          TAB
  2  WARFARIN 10MG U/D     BL100          TAB **AUTO STOP 2D**
  3  WARFARIN 2.5MG       BL100          TAB
  4  WARFARIN 2.5MG U/D   BL100          TAB **AUTO STOP 2D**
  5  WARFARIN 2MG         BL100          TAB
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1 WARFARIN 10MG          BL100          TAB
PROVIDER: INPATIENT-MEDS,PROVIDER          PROV
INSTITUTED BY: PHARMACY// <Enter> PHARMACY
INTERVENTION: ALLERGY
RECOMMENDATION: NO CHANGE
WAS PROVIDER CONTACTED: N NO
RECOMMENDATION ACCEPTED: Y YES
REASON FOR INTERVENTION:
  1>
ACTION TAKEN:
  1>
CLINICAL IMPACT:
  1>
FINANCIAL IMPACT:
  1>
Select Item(s):

```

Figure 4-19: Example: New Intervention

Edit: This option is used to edit an existing entry in the APSP INTERVENTION file.

```

Patient Information          Sep 22, 2000 08:03:07          Page:    1 of    1
XYZ,PATIENT                Ward: 1 West                      <A>
  HRN: 4321                 Room-Bed: A-6                    Ht(cm): 167.64 (04/21/99)
  DOB: 02/22/42 (58)       Wt(kg): 85.00 (04/21/99)
  Sex: MALE                 Admitted: 09/16/99
  Dx: TEST PATIENT         Last transferred: *****

Allergies - Verified: CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE,
                   CHOCOLATE, NUTS, STRAWBERRIES, DUST
  Non-Verified: AMOXICILLIN, AMPICILLIN, TAPE, FISH,
                   FLUPHENAZINE DECANOATE

  Adverse Reactions:
  Inpatient Narrative: Inpatient narrative
  Outpatient Narrative: This is the Outpatient Narrative. This patient doesn't
  like waiting at the pickup window. He gets very angry.

  Enter ?? for more actions
  PU Patient Record Update          NO New Order Entry
  DA Detailed Allergy/ADR List      IN Intervention Menu
  VP View Profile
  Select Action: View Profile// IN  Intervention Menu

  --- Pharmacy Intervention Menu ---

  NE  Enter Pharmacy Intervention    DEL  Delete Pharmacy Intervention
  ED  Edit Pharmacy Intervention     VW  View Pharmacy Intervention
  PRT Print Pharmacy Intervention
  Select Item(s): ED Edit Pharmacy Intervention
  Select INTERVENTION:T  SEP 22, 2000          XYZ,PATIENT          WARFARIN 10MG
  INTERVENTION DATE: SEP 22,2000// <Enter>
  PATIENT: XYZ,PATIENT// <Enter>
  PROVIDER: INPATIENT-MEDS,PROVIDER// <Enter>
  PHARMACIST: INPATIENT-MEDS,PHARMACIST// <Enter>
  DRUG: WARFARIN 10MG// <Enter>
  INSTITUTED BY: PHARMACY// <Enter>
  INTERVENTION: ALLERGY// <Enter>
  OTHER FOR INTERVENTION:
    1>
  RECOMMENDATION: NO CHANGE// <Enter>
  OTHER FOR RECOMMENDATION:
    1>
  WAS PROVIDER CONTACTED: NO// <Enter>
  PROVIDER CONTACTED:
  RECOMMENDATION ACCEPTED: YES// <Enter>
  AGREE WITH PROVIDER:
  REASON FOR INTERVENTION:
    1>
  ACTION TAKEN:
    1>
  CLINICAL IMPACT:
    1>
  FINANCIAL IMPACT:
    1>

```

Figure 4-20: Example: Edit an Intervention

Delete: This option is used to delete an entry from the APSP INTERVENTION file. The pharmacist may only delete an entry that was entered on the same day.

```

Patient Information      Sep 22, 2000 08:03:07      Page:      1 of      1
XYZ,PATIENT            Ward: 1 West
HRN: 4321              Room-Bed: A-6            Ht(cm): 167.64 (04/21/99)
DOB: 02/22/42 (58)    Wt(kg): 85.00 (04/21/99)
Sex: MALE              Admitted: 09/16/99
Dx: TEST PATIENT      Last transferred: *****

Allergies - Verified:  CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE,
                      CHOCOLATE, NUTS, STRAWBERRIES, DUST
Non-Verified:  AMOXICILLIN, AMPICILLIN, TAPE, FISH,
                FLUPHENAZINE DECANOATE

Adverse Reactions:
Inpatient Narrative:  Inpatient narrative
Outpatient Narrative: This is the Outpatient Narrative. This patient doesn't
like waiting at the pickup window. He gets very angry.

Enter ?? for more actions
PU Patient Record Update      NO New Order Entry
DA Detailed Allergy/ADR List  IN Intervention Menu
VP View Profile
Select Action: View Profile// IN Intervention Menu

--- Pharmacy Intervention Menu ---

NE Enter Pharmacy Intervention      DEL Delete Pharmacy Intervention
ED Edit Pharmacy Intervention      VW View Pharmacy Intervention
PRT Print Pharmacy Intervention
Select Item(s): DEL Delete Pharmacy Intervention
You may only delete entries entered on the current day.

Select APSP INTERVENTION INTERVENTION DATE: T SEP 22, 2000      XYZ,PATIENT
WARFARIN 10MG
SURE YOU WANT TO DELETE THE ENTIRE ENTRY? YES
    
```

Figure 4-21: Example: Delete an Intervention

View: This option is used to display Pharmacy Interventions in a captioned format.

```

Patient Information          Sep 22, 2000 08:03:07          Page:    1 of    1
XYZ,PATIENT                Ward: 1 West                <A>
  HRN: 4321                 Room-Bed: A-6              Ht(cm): 167.64 (04/21/99)
  DOB: 02/22/42 (58)       Wt(kg): 85.00 (04/21/99)
  Sex: MALE                 Admitted: 09/16/99
  Dx: TEST PATIENT         Last transferred: *****

Allergies - Verified: CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE,
                    CHOCOLATE, NUTS, STRAWBERRIES, DUST
Non-Verified: AMOXICILLIN, AMPICILLIN, TAPE, FISH,
                    FLUPHENAZINE DECANOATE

Adverse Reactions:
Inpatient Narrative: Inpatient narrative
Outpatient Narrative: This is the Outpatient Narrative. This patient doesn't
like waiting at the pickup window. He gets very angry.

Enter ?? for more actions
PU Patient Record Update          NO New Order Entry
DA Detailed Allergy/ADR List      IN Intervention Menu
VP View Profile
Select Action: View Profile// IN Intervention Menu

--- Pharmacy Intervention Menu ---

NE Enter Pharmacy Intervention      DEL Delete Pharmacy Intervention
ED Edit Pharmacy Intervention       VW View Pharmacy Intervention
PRT Print Pharmacy Intervention
Select Item(s): VW View Pharmacy Intervention
Select APSP INTERVENTION INTERVENTION DATE: T SEP 22, 2000          XYZ,PATIENT
WARFARIN 10MG
ANOTHER ONE: <Enter>
INTERVENTION DATE: SEP 22, 2000    PATIENT: XYZ,PATIENT
PROVIDER: INPATIENT-MEDS,PROVIDER  PHARMACIST: INPATIENT-MEDS,PHARMACIST
DRUG: WARFARIN 10MG                INSTITUTED BY: PHARMACY
INTERVENTION: ALLERGY              RECOMMENDATION: NO CHANGE
WAS PROVIDER CONTACTED: NO        RECOMMENDATION ACCEPTED: YES
    
```

Figure 4-22: Example: View an Intervention

Print: This option is used to obtain a captioned printout of Pharmacy Interventions for a certain date range. It will print out on normal width paper and can be queued to print at a later time.

```

Patient Information          Sep 22, 2000 08:03:07          Page: 1 of 1
XYZ,PATIENT                Ward: 1 West          <A>
  HRN: 4321                 Room-Bed: A-6        Ht(cm): 167.64 (04/21/99)
  DOB: 02/22/42 (58)       Wt(kg): 85.00 (04/21/99)
  Sex: MALE                 Admitted: 09/16/99
  Dx: TEST PATIENT         Last transferred: *****

Allergies - Verified: CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE,
                   CHOCOLATE, NUTS, STRAWBERRIES, DUST
Non-Verified: AMOXICILLIN, AMPICILLIN, TAPE, FISH,
                   FLUPHENAZINE DECANOATE

Adverse Reactions:
Inpatient Narrative: Inpatient narrative
Outpatient Narrative: This is the Outpatient Narrative. This patient doesn't
like waiting at the pickup window. He gets very angry.

Enter ?? for more actions
PU Patient Record Update          NO New Order Entry
DA Detailed Allergy/ADR List      IN Intervention Menu
VP View Profile
Select Action: View Profile// IN Intervention Menu

--- Pharmacy Intervention Menu ---

NE Enter Pharmacy Intervention      DEL Delete Pharmacy Intervention
ED Edit Pharmacy Intervention       VW View Pharmacy Intervention
PRT Print Pharmacy Intervention
Select Item(s): PRT Print Pharmacy Intervention
* Previous selection: INTERVENTION DATE equals 7/2/96
START WITH INTERVENTION DATE: FIRST// T (SEP 22, 2000)
GO TO INTERVENTION DATE: LAST// T (SEP 22, 2000)
DEVICE: <Enter> NT/Cache virtual TELNET terminal      Right Margin: 80//
PHARMACY INTERVENTION LISTING          SEP 22,2000 09:20 PAGE 1
-----
INTERVENTION: ALLERGY

INTERVENTION DATE: SEP 22,2000          PATIENT: XYZ,PATIENT
PROVIDER: INPATIENT-MEDS,PROVIDER      PHARMACIST: INPATIENT-MEDS,PHARM
DRUG: WARFARIN 10MG                    INSTITUTED BY: PHARMACY
RECOMMENDATION: NO CHANGE
WAS PROVIDER CONTACTED: NO             RECOMMENDATION ACCEPTED: YES
PROVIDER CONTACTED:

SUBTOTAL                                ----- 1
SUBCOUNT                               1 -----
TOTAL                                    ----- 1
COUNT                                  1
    
```

Figure 4-23: Example: Print an Intervention

4.1.4.5 View Profile

The View Profile action allows selection of a Long, Short, or NO profile for the patient. The profile displayed in the *Inpatient Order Entry* and *Non-Verified/Pending*

Orders options will include IV and Unit Dose orders. The long profile shows all orders, including discontinued and expired orders. The short profile does not show the discontinued or expired orders.

```

Inpatient Order Entry      Mar 07, 2002@13:03:55      Page: 1 of 1
ABC,PATIENT              Ward: ONE EAST
HRN: 9111                 Room-Bed: B-12      Ht(cm): _____ (_____)
DOB: 08/18/20 (81)       Wt(kg): _____ (_____)
Sex: MALE                 Admitted: 05/03/00
Dx: TESTING               Last transferred: *****

- - - - - A C T I V E - - - - -
1 d->in 5% DEXTROSE 50 ML 125 ml/hr      C 03/06 03/06 E
2 CEPHAPIRIN 1 GM                        C 03/04 03/09 A
  in DEXTROSE 5% IN N. SALINE 1000 ML QID
3 d->ASPIRIN CAP,ORAL                    O 03/07 03/07 E
  Give: 650MG PO NOW
- - - - - P E N D I N G - - - - -
4 in DEXTROSE 10% 1000 ML 125 ml/hr      ? ***** ***** P

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

Figure 4-24: Example: Profile View

The orders on the profile are sorted first by status (ACTIVE, NON-VERIFIED, PENDING, PENDING RENEWALS) then alphabetically by SCHEDULE TYPE. Pending orders with a priority of STAT are listed first and are displayed in a bold and blinking text for easy identification. After SCHEDULE TYPE, orders are sorted alphabetically by DRUG (the drug name listed on the profile) then in descending order by START DATE.

If a Unit Dose order has been verified by nursing but has not been verified by pharmacy, it will be listed under the ACTIVE heading with an arrow (->) to the right of it's number. A CPRS Med Order will have a "DONE" priority and will display a "d" to the right of the number on all profiles. These orders will display with active orders under the Active header until the pharmacist verifies them.

Orders may be selected by choosing the Select Order action, or directly from the profile using the number displayed to the left of the order. Multiple orders may be chosen by entering the numbers for each order to be included, separated by commas (e.g., 1,2,3), or a range of numbers using the dash (e.g., 1-3).

Note: The START DATE and DRUG sort may be reversed using the INPATIENT PROFILE ORDER SORT field in the INPATIENT USER PARAMETERS file.

4.1.4.6 Patient Information

The Patient Information action is displayed for the selected patient. This list contains the patient's demographic data, Allergy/Adverse Reaction data, and Pharmacy Narratives.

Patient Information	Sep 13, 2000 15:04:31	Page: 1 of 1
ABC,PATIENT	Ward: 1 EAST	
HRN: 9111	Room-Bed: B-12	Ht(cm): _____ (_____)
DOB: 08/18/20 (80)		Wt(kg): _____ (_____)
Sex: MALE		Admitted: 05/03/00
Dx: TESTING		Last transferred: *****
Allergies/Reactions: No Allergy Assessment		
Inpatient Narrative: Narrative for Patient ABC		
Outpatient Narrative:		
Enter ?? for more actions		
PU Patient Record Update		NO New Order Entry
DA Detailed Allergy/ADR List		IN Intervention Menu
VP View Profile		
Select Action: View Profile//		

Figure 4-25: Example: Patient Information

4.1.4.7 Select Order

The Select Order action is used to take action on a previously entered order by selecting it from the profile, after the patient is selected and length of profile is chosen.

```

Inpatient Order Entry      Mar 07, 2002@13:10:28      Page: 1 of 1
ABC,PATIENT              Ward: ONE EAST
  HRN: 9111                Room-Bed: B-12      Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)      Wt(kg): _____ (_____)
  Sex: MALE                Admitted: 05/03/00
  Dx: TESTING              Last transferred: *****

- - - - - A C T I V E - - - - -
  1 d->in 5% DEXTROSE 50 ML 125 ml/hr      C 03/06 03/06 E
  2   ASPIRIN CAP,ORAL                      C 03/07 03/08 A
    Give: 325MG PO QID
  3   CEPHAPIRIN 1 GM                        C 03/04 03/09 A
    in DEXTROSE 5% IN N. SALINE 1000 ML QID
- - - - - P E N D I N G - - - - -
  4   in DEXTROSE 10% 1000 ML 125 ml/hr     ? ***** ***** P

Enter ?? for more actions
PI Patient Information      SO Select Order
PU Patient Record Update   NO New Order Entry
Select Action: Quit// 2
    
```

Figure 4-26: Example: Selecting and Displaying an Order

```

ACTIVE UNIT DOSE      Mar 07, 2002@13:10:46      Page: 1 of 2
ABC,PATIENT          Ward: ONE EAST
  HRN: 9111            Room-Bed: B-12      Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)  Wt(kg): _____ (_____)

*(1)Orderable Item: ASPIRIN CAP,ORAL
<DIN>
  Instructions:
*(2)Dosage Ordered: 325MG
*(3)Start: 03/07/02 13:10
*(4) Med Route: ORAL
BCMA ORDER LAST ACTION: 03/07/02 13:09 Given*
*(5) Stop: 03/08/02 24:00
(6) Schedule Type: CONTINUOUS
*(8) Schedule: QID
(9) Admin Times: 09-13-17-21
*(10) Provider: INPATIENT-MEDS,PROVIDER [es] DURATION:
(11) Special Instructions:

(12) Dispense Drug      U/D      Inactive Date
    ASPIRIN BUFFERED 325MG TAB      1

+ Enter ?? for more actions
DC Discontinue          ED Edit          AL Activity Logs
HD Hold                 RN Renew
FL Flag                 VF (Verify)
Select Item(s): Next Screen//
    
```

Figure 4-27: Example: Selecting and Displaying an Order (continued)

The list area displays detailed order information and allows actions to be taken on the selected Unit Dose order. A number displayed to the left of the field name identifies fields that may be edited. If a field, marked with an asterisk (*) next to its number, is edited, it will cause this order to be discontinued and a new one created. If a pending

order is selected, the system will determine any default values for fields not entered through CPRS and display them along with the data entered by the provider.

The BCMA ORDER LAST ACTION field will only display when an action has been performed through BCMA on this order. This information includes the date and time of the action and the BCMA action status. If an asterisk (*) appears after the BCMA status, this indicates an action was taken on the prior order that is linked to this order.

Actions, displayed in the Action Area, enclosed in parenthesis are not available to the user. In the example above, the action Verify is not available to the user since it was previously verified.

Note: Only users with the appropriate keys will be allowed to take any available actions on the Unit Dose or IV order. (See p. 69 under IV.)

4.1.5 Order Actions

The Order Actions are the actions available in the Action Area of the List Manager Screen. These actions pertain to the patient's orders and include editing, discontinuing, verifying, etc.

4.1.5.1 Discontinue

When an order is discontinued, the order's Stop Date/Time is changed to the date/time the action is taken. An entry is placed in the order's Activity Log recording who discontinued the order and when the action was taken. Pending and Non-verified orders are deleted when discontinued and will no longer appear on the patient's profile.

Note: Any orders placed through the Med Order Button cannot be discontinued.

```

Inpatient Order Entry      Sep 28, 2000 13:32:18      Page:    1 of    1
ABC,PATIENT              Ward: 1 EAST
  HRN: 9111                Room-Bed: B-12      Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)      Wt(kg): _____ (_____)
  Sex: MALE                Admitted: 05/03/00
  Dx: TESTING              Last transferred: *****

- - - - - A C T I V E - - - - -
  1  MULTIVITAMINS 1 ML      C  09/27  10/02  A
     in 0.9% NACL 500 ML QID PRN
- - - - - P E N D I N G - - - - -
  2  AMPICILLIN CAP INJ      ?  *****  *****  P
     Give: 250MG PO QID
  3  AMPICILLIN INJ         ?  *****  *****  P
     Give: 1MG IVPB QID
  4  PROPRANOLOL TAB        ?  *****  *****  P
     Give: 10MG PO TID

      Enter ?? for more actions
PU  Patient Record Update      NO  New Order Entry
Select Action: Quit// 2
    
```

Figure 4-28: Example: Discontinue an Order

```

PENDING UNIT DOSE (ROUTINE) Sep 28, 2000 13:33:17      Page:    1 of    2
ABC,PATIENT              Ward: 1 EAST
  HRN: 9111                Room-Bed: B-12      Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)      Wt(kg): _____ (_____)
  Sex: MALE                Admitted: 05/03/00
  Dx: TESTING              Last transferred: *****

*(1)Orderable Item: AMPICILLIN CAP INJ
  Instructions:
*(2)Dosage Ordered: 250MG
                                     (3)Start: 09/27/00  15:00
*(4)  Med Route: ORAL                Req. Start: 09/27/00  09:00
                                     (5) Stop: 10/11/00  24:00
(6) Schedule Type: CONTINUOUS
*(8)  Schedule: QID
(9)  Admin Times: 01-09-15-20
*(10) Provider: INPATIENT-MEDS,PROVIDER [w]  DURATION:
(11) Special Instructions:
(12) Dispense Drug                U/D      Inactive Date
     AMPICILLIN 500MG CAP          1
+      Enter ?? for more actions
BY Bypass                FL Flag
DC Discontinue            FN Finish
Select Item(s): Next Screen// DC Discontinue
Do you want to discontinue this order? Yes// <Enter> (Yes)
NATURE OF ORDER: WRITTEN// <Enter>
Requesting PROVIDER: INPATIENT-MEDS,PROVIDER// <Enter> PROV ...ORDER
DISCONTINUED!
Select DRUG:
    
```

Figure 4-29: Example: Discontinue an Order

4.1.5.2 Edit

This action allows modification of any field shown on the order view that is preceded by a number in parenthesis (#).

ACTIVE UNIT DOSE	Sep 13, 2000 15:20:42	Page:	1 of	2
ABC,PATIENT	Ward: 1 EAST			
HRN: 9111	Room-Bed: B-12	Ht(cm):	_____	(_____)
DOB: 08/18/20 (80)		Wt(kg):	_____	(_____)
*(1)Orderable Item: AMPICILLIN CAP INJ				
Instructions:				
*(2)Dosage Ordered: 250MG				
*(3)Start: 09/07/00				
15:00				
*(4) Med Route: ORAL				
*(5) Stop: 09/21/00				
24:00				
(6) Schedule Type: CONTINUOUS				
*(8) Schedule: QID				
(9) Admin Times: 01-09-15-20				
*(10) Provider: INPATIENT-MEDS,PROVIDER [es] DURATION:				
(11) Special Instructions:				
(12) Dispense Drug				
		U/D	Inactive Date	
	AMPICILLIN 500MG CAP	1		
+ Enter ?? for more actions				
DC	Discontinue	ED	Edit	AL Activity Logs
HD	Hold	RN	Renew	
FL	Flag	VF	Verify	
Select Item(s): Next Screen//				

Figure 4-30: Example: Edit an Order

If a field marked with an asterisk (*) to the left of the number is changed, the original order will be discontinued, and a new order containing the edited data will be created. The Stop Date/Time of the original order will be changed to the date/time the new edit order is accepted. The old and new orders are linked and may be viewed using the History Log function. When the screen is refreshed, the field(s) that was changed will now be shown in **blinking reverse video** and “This change will cause a new order to be created” will be displayed in the message window.

NON-VERIFIED UNIT DOSE ABC, PATIENT HRN: 9111 DOB: 08/18/20 (80)	Sep 13, 2000 15:26:46 Ward: 1 EAST Room-Bed: B-12	Page: 1 of 2 Ht (cm): _____ (_____) Wt (kg): _____ (_____)
---	---	--

```

-
*(1)Orderable Item: AMPICILLIN CAP INJ
    Instructions:
*(2)Dosage Ordered: 250MG
*(3)Start: 09/13/00
20:00
*(4)    Med Route: ORAL
*(5)    Stop: 09/27/00
24:00
(6) Schedule Type: CONTINUOUS
*(8)    Schedule: QID
(9)    Admin Times: 01-09-15-20
*(10)   Provider: INPATIENT-MEDS, PHARMACIST
(11) Special Instructions:
(12) Dispense Drug          U/D      Inactive Date
    AMPICILLIN 500MG CAP    1
+
    This change will cause a new order to be created.
ED  Edit          AC  ACCEPT
Select Item(s): Next Screen//
    
```

Figure 4-31: Example: Edit an Order, continued

If the ORDERABLE ITEM or DOSAGE ORDERED fields are edited, the Dispense Drug data will not be transferred to the new order. If the Orderable Item is changed, data in the DOSAGE ORDERED field will not be transferred. New Start Date/Time, Stop Date/Time, Login Date/Time, and Entry Code will be determined for the new order. Changes to other fields (those without the asterisk) will be recorded in the order's activity log.

If the Dispense Drug or Orderable Item has a non-formulary status, this status will be displayed on the screen as “*N/F*” beside the Dispense Drug or Orderable Item.

4.1.5.3 Verify

Orders must be accepted and verified before they can become active and are included on the pick list, BCMA Virtual Due List (VDL), etc. If AUTO-VERIFY is enabled for the pharmacist, new orders immediately become active after entry or finish (pending orders entered through CPRS). Orders verified by nursing prior to pharmacy verification are displayed on the profile under the active header marked with an arrow (->) to the right of the order number.

Note: AUTO-VERIFY is controlled by the ALLOW AUTO-VERIFY FOR USER field in the INPATIENT USER PARAMETERS file. For more information on the Auto-Verify function, see the Edit User Parameters section of the Pharmacy Supervisor Manual.

```

Inpatient Order Entry      Mar 07, 2002@13:03:55      Page:    1 of    1
ABC,PATIENT              Ward: ONE EAST
  HRN: 9111                Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)      Wt(kg): _____ (_____)
  Sex: MALE                Admitted: 05/03/00
  Dx: TESTING              Last transferred: *****

- - - - - A C T I V E - - - - -
1 d->in 5% DEXTROSE 50 ML 125 ml/hr      C 03/06 03/06 E
2   CEPHAPIRIN 1 GM                      C 03/04 03/09 A
   in DEXTROSE 5% IN N. SALINE 1000 ML QID
3 d->ASPIRIN CAP,ORAL                    O 03/07 03/07 E
   Give: 650MG PO NOW

- - - - - P E N D I N G - - - - -
4   in DEXTROSE 10% 1000 ML 125 ml/hr     ? ***** ***** P

Enter ?? for more actions
PI Patient Information          SO Select Order
PU Patient Record Update      NO New Order Entry
Select Action: Quit// 3
    
```

Figure 4-32: Example: Verify an Order

```

EXPIRED UNIT DOSE (DONE)   Mar 07, 2002@13:05:07   Page:   1 of   2
ABC,PATIENT                Ward: ONE EAST
  HRN: 9111                 Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)       Wt(kg): _____ (_____)

*(1)Orderable Item: ASPIRIN CAP,ORAL
<DIN>
  Instructions: 650MG
*(2)Dosage Ordered: 650MG
*(3)Start: 03/07/02
12:57
*(4)   Med Route: ORAL (BY MOUTH)
BCMA ORDER LAST ACTION: 03/07/02 12:59 Given   *(5) Stop: 03/07/02 12:57
(6) Schedule Type: ONE TIME
*(8)   Schedule: NOW
(9)   Admin Times:
*(10)  Provider: INPATIENT-MEDS,PROVIDER [es]   DURATION:
(11) Special Instructions:
(12) Dispense Drug           U/D           Inactive Date
    ASPIRIN BUFFERED 325MG TAB                1
+   Enter ?? for more actions
DC (Discontinue)           ED (Edit)           AL Activity Logs
HD (Hold)                  RN (Renew)
FL Flag                     VF Verify
Select Item(s): Next Screen// VF Verify

WARNING: Dosage Ordered and Dispense Units do not match.
        Please verify Dosage.

Would you like to continue verifying the order? Yes// <Enter> YES
...a few moments, please....

Pre-Exchange DOSES: 0// <Enter>

ORDER VERIFIED.

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

        Select one of the following:

                Y           Yes
                N           No

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

Figure 4-33: Example: Verify an Order (continued)

If the Dispense Drug or Orderable Item has a non-formulary status, this status will be displayed on the screen as “*N/F*” beside the Dispense Drug or Orderable Item.

When orders have been verified, the pharmacist must provide information for the *Pre-Exchange Units Report*. After verifying an order, the user is prompted to identify the number of units required before the next cart exchange (pre-exchange units). Information will be requested for each order that has been verified. When the user finishes entering new orders, a *Pre-Exchange Report* will be printed. The report lists the patients’ name, ward location, room and bed, Orderable Item, Dispense Drug, and

pre-exchange needs for each order. This report can be printed to the screen or queued to print on a printer. It is advisable that the user prints a copy on the printer. The default device for the *Pre-Exchange Units Report* is the PRE-EXCHANGE REPORT DEVICE field in the INPATIENT WARD PARAMETER file. If the pharmacist enters an output device that is different from the device in this file, an option to override the field and define a temporary device for the remainder of this session is displayed. Once the user exits this option, the report cannot be reprinted.

Note: The user will have the ability to enter a Progress Note for a “DONE” priority order.

4.1.5.4 Hold

Only active orders may be placed on hold. Orders placed on hold will continue to show under the ACTIVE heading on the profiles until removed from hold. Any orders placed on hold through the pharmacy options cannot be released from hold using any of the CPRS options. An entry is placed in the order’s Activity Log recording the user who placed/removed the order from hold and when the action was taken.

```

ACTIVE UNIT DOSE          Feb 25, 2001@21:25:50          Page:    1 of    2
ABC,PATIENT              Ward: 1 EAST
  HRN: 9111              Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)    Wt(kg): _____ (_____)

*(1)Orderable Item: ASPIRIN TAB
<DIN>
  Instructions:
*(2)Dosage Ordered: 650MG
*(3)Start: 02/26/01  14:40
*(4)  Med Route: ORAL
*(5) Stop: 02/28/01  24:00
  (6) Schedule Type: CONTINUOUS
*(8)  Schedule: QD
  (9) Admin Times: 1440
*(10) Provider: INPATIENT-MEDS,PROVIDER [es]  DURATION:
*(11) Special Instructions:

(12) Dispense Drug          U/D          Inactive Date
      ASPIRIN BUFFERED 325MG TAB          2
+      Enter ?? for more actions
DC Discontinue          ED Edit          AL Activity Logs
HD Hold                RN Renew
FL Flag                VF (Verify)
Select Item(s): Next Screen// HD Hold

Do you wish to place this order 'ON HOLD'? Yes// <Enter> (Yes)
NATURE OF ORDER: WRITTEN// <Enter> W...
COMMENTS:
  1>TESTING
  2>
EDIT Option: . <Enter>
Enter RETURN to continue or '^' to exit: <Enter>
    
```

Figure 4-34: Example: Place an Order on Hold

HOLD UNIT DOSE	Feb 25, 2001@21:27:57	Page: 1 of 2
ABC,PATIENT	Ward: 1 EAST	
HRN: 9111	Room-Bed: B-12	Ht(cm): _____ (_____)
DOB: 08/18/20 (80)		Wt(kg): _____ (_____)
* (1) Orderable Item: ASPIRIN TAB <DIN>		
Instructions:		
* (2) Dosage Ordered: 650MG		* (3) Start: 02/26/01 14:40
* (4) Med Route: ORAL		* (5) Stop: 02/28/01 24:00
(6) Schedule Type: CONTINUOUS		
* (8) Schedule: QD		
(9) Admin Times: 1440		
* (10) Provider: INPATIENT-MEDS, PROVIDER [es]	DURATION:	
(11) Special Instructions:		
(12) Dispense Drug	U/D	Inactive Date
ASPIRIN BUFFERED 325MG TAB	2	
+ Enter ?? for more actions		
DC Discontinue	ED (Edit)	AL Activity Logs
HD Hold	RN (Renew)	
FL Flag	VF (Verify)	
Select Item(s): Next Screen// <Enter>		
HOLD UNIT DOSE	Feb 25, 2001@21:28:20	Page: 2 of 2
ABC,PATIENT	Ward: 1 EAST	
HRN: 9111	Room-Bed: B-12	Ht(cm): _____ (_____)
DOB: 08/18/20 (80)		Wt(kg): _____ (_____)
+ Enter ?? for more actions		
(7) Self Med: NO		
Entry By: INPATIENT-MEDS, PHARMACIST	Entry Date: 02/25/01 21:25	
(13) Comments:		
TESTING		
+ Enter ?? for more actions		
DC Discontinue	ED (Edit)	AL Activity Logs
HD Hold	RN (Renew)	
FL Flag	VF (Verify)	
Select Item(s): Quit// <Enter>		

Figure 4-35: Example: Place an Order on Hold (continued)

```

Unit Dose Order Entry      Feb 25, 2001@21:30:15      Page: 1 of 1
ABC,PATIENT                Ward: 1 EAST
  HRN: 9111                 Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)       Wt(kg): _____ (_____)
  Sex: MALE                 Admitted: 05/03/00
  Dx: TESTING               Last transferred: *****
----- A C T I V E -----
-
1   ASPIRIN TAB              C 02/26 02/28 H
   Give: 650MG ORAL QD

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

Figure 4-36: Example: Place an Order on Hold (continued 2)

Notice that the order shows a status of “H” for hold in the right hand side of the Aspirin Tablet order.

If the Dispense Drug or Orderable Item has a non-formulary status, this status will be displayed on the screen as “*N/F*” beside the Dispense Drug or Orderable Item.

4.1.5.5 Renew

Only active orders or those that have been expired no more than four days may be renewed. The default Start Date/Time for a renewal order will be determined by one of the following methods:

1. If a BCMA action is recorded as Given or Refused on the renewed order and the order contains administration times, the new start date will be calculated by adding the frequency of the order to the scheduled administration time against which the last action was recorded. The new start date will be used if it is in the future and it is less than the original stop date.
2. If a BCMA action is recorded as Given or Refused on the renewed order and the order does not have administration times, the new start date will be calculated by adding the frequency of the order to the BCMA administered time and rounding up to the next hour. The new start date will be used if it is in the future and it is less than the original stop date.
3. If no BCMA action has been recorded on the renewed order or an action other than Given or Refused has been recorded, the start date for the renewed order will be calculated using the Default Start Date Calculation ward parameter. These parameters are as follows:

- **Default Start Date Calculation = NOW** The default Start Date/Time for the renewal order will be the order's Login Date/Time.
- **Default Start Date Calculation = USE NEXT ADMIN TIME** The original order's Start Date/Time, the new order's Login Date/Time, Schedule, and Administration Times are used to find the next date/time the order is to be administered after the new order's Login Date/Time. If the schedule contains "PRN", any administration times for the order are ignored.
- **Default Start Date Calculation = USE CLOSEST ADMIN TIME** The original order's Start Date/Time, the new order's Login Date/Time, Schedule, and Administration Times are used to find the closest date/time the order is to be administered after the new order's Login Date/Time. If the schedule contains "PRN", any administration times for the order are ignored.

Note: Only the regular finish and regular renew orders will calculate the start date using BCMA administered time. Speed finish and speed renew will not be affected.

After the new (renewal) order is accepted, the Start Date/Time for the new order becomes the Stop Date/Time for the original (renewed) order. The original order's status is changed to RENEWED. The renewal and renewed orders are linked and may be viewed using the History Log function. Once an order has been renewed, the original order may not be renewed or edited.

Examples:

- 1a. Standard schedule of Q12H. Administration times of 09 – 21. The 09:00 dose was administered at 08:45. The frequency in the order is 720. The order is renewed at 09:45. The start time of the new order is 21:00.
- 1b. Standard schedule of Q12H. Administration times of 10 – 19. The 10:00 dose was administered at 10:15. The frequency is 720. The order is renewed at 10:30. The start time of the new order is 22:00. The frequency for the schedule is 12 hours, but the administration times are only 9 hours apart. The system uses the frequency, not the textual information in the ADMINISTRATION TIME field.
2. Non-standard schedule of Q7H. The last dose was administered at 11:35. The frequency is 420. The order is renewed at 13:00. The last dose (11:35) plus the seven hours would be 18:35. Then, it's rounded up to the next hour. The start time of the new order is 19:00.
- 3a. (NOW) Order renewed at 13:52. The start time of the new order is 13:52.

- 3b. (NEXT) Scheduled administration times are 10 – 14 – 18 – 22. Order renewed at 14:35. The start time of the new order is 18:00.
- 3c. (CLOSEST) Scheduled administration times are 09 – 13 – 17 – 21. Order renewed at 13:20. The start time of the new order is 13:00.

4.1.5.6 Activity Log

This action allows viewing of a long or short activity log, dispense log, or a history log of the order. A short activity log only shows actions taken on orders and does not include field changes. The long activity log shows actions taken on orders and does include the requested start and stop date/time values. If a history log is selected, it will find the first order, linked to the order where the history log was invoked from, then show an order view of each order associated with it, in the order that they were created. When a dispense log is selected, it shows the dispensing information for the order.

```

ACTIVE UNIT DOSE          Sep 21, 2000 12:44:25          Page:    1 of    2
ABC,PATIENT              Ward: 1 EAST
  HRN: 9111              Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)    Wt(kg): _____ (_____)

*(1)Orderable Item: AMPICILLIN CAP INJ
  Instructions:
*(2)Dosage Ordered: 250MG
*(3)Start: 09/07/00  15:00
*(4)  Med Route: ORAL
*(5) Stop: 09/21/00  24:00
  (6) Schedule Type: CONTINUOUS
*(8)  Schedule: QID
  (9) Admin Times: 01-09-15-20
*(10) Provider: INPATIENT-MEDS,PROVIDER [es]  DURATION:
(11) Special Instructions:

(12) Dispense Drug          U/D          Inactive Date
      AMPICILLIN 500MG CAP      1
+      Enter ?? for more actions
DC Discontinue          ED Edit          AL Activity Logs
HD Hold                RN Renew
FL Flag                VF Verify
Select Item(s): Next Screen// AL Activity Logs

  1 - Short Activity Log
  2 - Long Activity Log
  3 - Dispense Log
  4 - History Log

Select LOG to display: 2 Long Activity Log
  Date: 09/07/00  14:07      User: INPATIENT-MEDS,PHARMACIST
Activity: ORDER VERIFIED BY PHARMACIST

  Date: 09/07/00  14:07      User: INPATIENT-MEDS,PHARMACIST
Activity: ORDER VERIFIED
  Field: Requested Start Date
Old Data: 09/07/00  09:00

  Date: 09/07/00  14:07      User: INPATIENT-MEDS,PHARMACIST
Activity: ORDER VERIFIED
  Field: Requested Stop Date
Old Data: 09/07/00  24:00

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

Figure 4-37: Example: Activity Log

4.1.5.7 Finish

When an order is placed or renewed by a provider through EHR, the nurse or pharmacist needs to accept, finish, and/or verify this order. The same procedures are followed to finish the renewed order as to finish a new order with the following exceptions:

The PENDING RENEWAL orders may be speed finished. The user may enter an **F**, for finish, at the “Select ACTION or ORDERS:” prompt and then select the pending

renewals to be finished. At this time, prompts are issued for the start date/time and stop date/time. These values are used as the start and stop dates and times for the pending renewals selected. All other fields will retain the values from the renewed order.

```

PENDING UNIT DOSE (ROUTINE)   Feb 25, 2001@21:37:08           Page:    1 of    2
ABC,PATIENT                   Ward: 1 EAST
  HRN: 9111                    Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)           Wt(kg): _____ (_____)

*(1)Orderable Item: MULTIVITAMINS TAB
      Instructions: 1 TABLET
*(2)Dosage Ordered: 1 TABLET
                                     (3)Start: 02/26/01  14:40
*(4)      Med Route: INTRAVENOUS      Req. Start: 02/26/01  14:40
                                     (5) Stop: 02/28/01  24:00
(6) Schedule Type: FILL on REQUEST
*(8)      Schedule: QD
(9)      Admin Times: 1440
*(10)     Provider: INPATIENT-MEDS,PROVIDER [es]      DURATION:
(11) Special Instructions:

(12) Dispense Drug                U/D      Inactive Date
      MULTIVITAMIN TABLETS        1

+      Enter ?? for more actions
BY Bypass                          FL Flag
DC Discontinue                       FN Finish
Select Item(s): Next Screen// FN Finish
COMPLETE THIS ORDER AS IV OR UNIT DOSE? UNIT DOSE// <Enter>
    
```

Figure 4-38: Example: Finish an Order

```

NON-VERIFIED UNIT DOSE      Feb 25, 2001@21:38:29      Page: 1 of 2
ABC,PATIENT                 Ward: 1 EAST
  HRN: 9111                  Room-Bed: B-12      Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)        Wt(kg): _____ (_____)

*(1)Orderable Item: MULTIVITAMINS TAB
      Instructions: 1 TABLET
*(2)Dosage Ordered: 1 TABLET
                                     (3)Start: 02/26/01 14:40
*(4)      Med Route: INTRAVENOUS      Req. Start: 02/26/01 14:40
                                     (5) Stop: 02/28/01 24:00
      (6) Schedule Type: FILL on REQUEST
*(8)      Schedule: QD
      (9) Admin Times: 1440
*(10)     Provider: INPATIENT-MEDS,PROVIDER [es]      DURATION:
*(11) Special Instructions:

(12) Dispense Drug              U/D      Inactive Date
      MULTIVITAMIN TABLETS      1

+      Enter ?? for more actions
ED Edit                          AC ACCEPT
Select Item(s): Next Screen// AC ACCEPT

...accepting order.....
    
```

Figure 4-39: Example: Finish an Order, screen 2

```

NON-VERIFIED UNIT DOSE      Feb 25, 2001@21:38:45      Page:    1 of    2
ABC,PATIENT                Ward: 1 EAST
  HRN: 9111                 Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)       Wt(kg): _____ (_____)

*(1)Orderable Item: MULTIVITAMINS TAB
    Instructions: 1 TABLET
*(2)Dosage Ordered: 1 TABLET
                                     (3)Start: 02/26/01  14:40
*(4)    Med Route: INTRAVENOUS      Req. Start: 02/26/01  14:40
                                     (5) Stop: 02/28/01  24:00
    (6) Schedule Type: FILL on REQUEST
*(8)    Schedule: QD
    (9) Admin Times: 1440
*(10)   Provider: INPATIENT-MEDS,PROVIDER [es]    DURATION:
*(11) Special Instructions:

(12) Dispense Drug                U/D          Inactive Date
    MULTIVITAMIN TABLETS        1
+      Enter ?? for more actions
DC Discontinue                    ED Edit      AL Activity Logs
HD (Hold)                          RN (Renew)
FL Flag                            VF Verify
Select Item(s): Next Screen// VF Verify
...a few moments, please.....

Pre-Exchange DOSES: <Enter>

ORDER VERIFIED.

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

Figure 4-40: Example: Finish an Order (continued)

The requested Start date/time is added to the order view to indicate the date/time requested by the provider to start the order. This date/time is the CPRS Expected First Dose when no duration is received from CPRS.

Note: When an order is placed through EHR prior to the next administration time of the schedule for the order, the Expected First Dose will be today at the next administration time. However, if the order is placed after the last administration time of the schedule for the order, the Expected First Dose will be the next administration time. This Expected First Dose date/time is seen through EHR and is always based on the logic of using "next administration time", regardless of what the site has set for the ward parameter. The Expected First Dose displayed in CPRS displays as Requested Start Date/Time on the order view if no duration is received from EHR. The Expected First Dose displays as the default Start Date/Time on the order view when a duration is received.

If the Dispense Drug or Orderable Item has a non-formulary status, this status will be displayed on the screen as “*N/F*” beside the Dispense Drug or Orderable Item.

Note: When the EHR patch, OR*3*141, is installed on the user’s system AND the order is electronically signed through the EHR package, the electronically signed abbreviation, [es] in brackets, will appear next to the Provider’s Name on the order.

A prompt has been added to the finishing process, “COMPLETE THIS ORDER AS IV OR UNIT DOSE?” to determine if the user should complete the order as either an IV or Unit Dose order. The prompt will be displayed only if the user selected the *Inpatient Order Entry* option to finish the order. Also, the prompt will appear only if the correct combination of the entry in the IV FLAG in the MEDICATION ROUTES file and the entry in the APPLICATION PACKAGES’ USE field in the DRUG file for the order’s Dispense Drug are found. The following table will help explain the different scenarios:

IV FLAG in the MEDICATION ROUTES file	Dispense Drug’s Application Use	Which Order View screen will be displayed to the user	Special Processing
IV	IV	IV	None
IV	Unit Dose	Unit Dose	Prompt user to finish order as IV or Unit Dose
IV	IV and Unit Dose	IV	Prompt user to finish order as IV or Unit Dose
Non-IV	IV	IV	Prompt user to finish order as IV or Unit Dose
Non-IV	Unit Dose	Unit Dose	None
Non-IV	IV and Unit Dose	Unit Dose	Prompt user to finish order as IV or Unit Dose

4.1.5.8 Flag

Note: This option is only available to those users who hold the PSJ RPHARM key.

The flag action is available to alert the users that the order is incomplete or needs clarification. Flagging is applied to any orders that need more information or corrections from the clinician. When the user flags the order, an alert is sent to the specified user defining the information that is needed to process the medication order. The specified user can send a return alert with the needed information. The Activity Log will record the flagging activities including acknowledgement that the alert was viewed. The flag action can be performed in either CPRS or in Inpatient Medications.

When a flagged order appears on the order view, the order number on the right hand side will be highlighted using reverse video. The nurse, or any user without the PSJ RPHARM key, does not have the ability to flag or un-flag orders; however, they can view the flagged or un-flagged comments via the Activity Log.

```

Unit Dose Order Entry      Aug 22, 2002@07:44:06      Page: 1 of 1
GEORGIA, PAUL              Ward: 1 EAST
  HRN: 2214                 Room-Bed: B-5             Ht(cm): _____ (_____)
  DOB: 02/14/54 (48)       Wt(kg): _____ (_____)
  Sex: MALE                 Admitted: 03/26/99
  Dx: Sick                  Last transferred: *****

- - - - - A C T I V E - - - - -
-
1  DOXEPIN CAP, ORAL       C 08/09 11/05 A
   Give: 200MG PO Q8H
2  WARFARIN TAB           C 08/07 11/05 A
   Give: 4MG PO TU-TH@2000
3  WARFARIN TAB           C 08/14 11/05 A
   Give: 7MG PO QPM

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

Figure 4-41: Example: Flagged Order

4.1.5.9 Speed Actions

From the list of orders in the patient’s profile, the pharmacist can select one or more of the orders on which to take action. The pharmacist can quickly discontinue this patient’s orders by selecting Speed Discontinue, or quickly renewing an order by selecting Speed Renew. Other “quick” selections include Speed Finish and Speed Verify.

Note: Any orders placed through the Med Order Button cannot be Speed Discontinued.

4.1.6 Discontinue All of a Patient’s Orders

[PSJU CA]

The *Discontinue All of a Patient’s Orders* option allows a pharmacist or nurse to discontinue all of a patient’s orders. Also, it allows a ward clerk to mark all of a patient’s orders for discontinuation. If the ALLOW USER TO D/C ORDERS parameter is turned on to take action on active orders, then the ward clerk will also be able to discontinue orders. This ALLOW USER TO D/C ORDERS parameter is set using the *Inpatient User Parameter’s Edit* option under the *PARAMeter’s Edit Menu* option, which is under the *Supervisor’s Menu*.

This option is then used to discontinue the selected orders. If a non-verified or pending order is discontinued, it is deleted completely from the system.

4.1.7 Hold All of a Patient's Orders

[PSJU HOLD ALL]

The *Hold All of a Patient's Orders* option allows a pharmacist to place all of a patient's active orders on hold in order to temporarily stop the medication from being dispensed, or take all of the patient's orders off of hold to restart the dispensing of the medication.

The option will not take action on individual orders that it finds already on hold. When this option is used to put all orders on hold, the system will print labels, for each medication order newly put on hold, indicating on the label that the medication is on hold. Also, the profile will notify the user that the patient's orders have been placed on hold; the letter **H** will be placed in the Status/Info column on the profile for each formerly active order.

When the option is used to take all orders off of hold, the system will reprint labels for the medication orders that were taken off hold and indicate on the label that the medication is off hold. Again, this option will take no action on individual orders that it finds were not on hold. The profile will display to the user that the patient's orders have been taken off hold.

```
Select Unit Dose Medications Option: Hold All of a Patient's Orders
Select PATIENT: XYZ,PATIENT           222-32-4321   02/22/42   A-6
DO YOU WANT TO PLACE THIS PATIENT'S ORDERS ON HOLD? Yes//  <Enter> (Yes)
HOLD REASON: SURGERY SCHEDULED FOR 9:00AM
...a few moments, please.....DONE!
```

Figure 4-42: Example 1: Hold All of a Patient's Orders

To take the orders off of hold, choose this same option and the following will be displayed:

```
Select Unit Dose Medications Option: Hold All of a Patient's Orders
Select PATIENT: XYZ,PATIENT           222-32-4321   02/22/42   A-6
THIS PATIENT'S ORDERS ARE ON HOLD.
DO YOU WANT TO TAKE THIS PATIENT'S ORDERS OFF OF HOLD? Yes// <Enter>
(Yes).....
.....DONE!
```

Figure 4-43: Example 2: Take All of a Patient's Orders Off of Hold

Note: Individual orders can be placed on hold or taken off of hold through the *Order Entry* and *Non-Verified/Pending Orders* options.

4.1.8 Inpatient Profile

[PSJ PR]

The *Inpatient Profile* option allows the user to view the Unit Dose and IV orders of a patient simultaneously. The user can conduct the Inpatient Profile search by patient, ward, or ward group. If the selection to sort is by ward, the administration teams may be specified. The default for the administration team is ALL and multiple teams may be entered. If selecting by ward or ward group, the profile may be sorted by patient name or room-bed.

When the user accesses this option from the Unit Dose module for the first time within a session, a prompt is displayed to select the IV room. When only one active IV room exists, it will be selected automatically. The user is then given the label and report devices defined for the IV room chosen. If no devices have been defined, the user will be given the opportunity to choose them. If this option is exited and then re-entered within the same session, the current label and report devices are shown.

In the following description, viewing a profile by patient is discussed, however, ward and ward group are handled similarly.

After the user selects the patient for whom a profile view is needed, the length of profile is chosen. The user can choose to view a long or short profile or, if the user decides not to view a profile for the chosen patient, "NO Profile" can be selected. When **NO Profile** is chosen, the system will return to the "Select PATIENT:" prompt and the user may choose a new patient.

Once the length of profile is chosen, the user can print the patient profile (by accepting the default or typing **P** at the "SHOW PROFILE only, EXPANDED VIEWS only, or BOTH: Profile/" prompt), an expanded view of the patient profile (by typing **E**), or both (by typing **B**). The expanded view lists the details of each order for the patient. The activity logs of the orders can also be printed when the expanded view or both, the expanded view and profile, are chosen.

The advantage of this option is that by viewing the combined Unit Dose/IV profile of a patient, the user can quickly determine if any corrections or modifications need to be made for existing or future orders based on Unit Dose or IV medications already being received by the patient. Sometimes the pharmacist must revise a prospective order for a patient based on the Unit Dose or IV medications already prescribed for the patient.

Note: For Unit Dose orders, the long activity log shows all activities of an order, while the short activity log excludes the field changes, and shows only the major activities.

```
Select Unit Dose Medications Option: IPF Inpatient Profile
You are signed on under the BIRMINGHAM ISC IV ROOM
Current IV LABEL device is: NT TELNET TERMINAL
Current IV REPORT device is: NT TELNET TERMINAL
Select by WARD GROUP (G), WARD (W), or PATIENT (P): Patient
```

Figure 4-44: Example: Inpatient Profile

```
Select PATIENT: ABC,PATIENT          123-45-9111   08/18/20   1 EAST
Select another PATIENT: <Enter>
SHORT, LONG, or NO Profile? SHORT// <Enter> SHORT
Show PROFILE only, EXPANDED VIEWS only, or BOTH: PROFILE// BOTH
Show SHORT, LONG, or NO activity log? NO// SHORT
Select PRINT DEVICE: 0;80 NT/Cache virtual TELNET terminal
```

Figure 4-45: Example: Inpatient Profile (continued)

```

      I N P A T I E N T   M E D I C A T I O N S      09/21/00  12:33
WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEM
-----
ABC,PATIENT                      Ward: 1 EAST
  HRN: 9111                      Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)             Wt(kg): _____ (_____)
  Sex: MALE                      Admitted: 05/03/00
  Dx: TESTING
Allergies:
  ADR:
-----
              A C T I V E
1  -> AMPICILLIN CAP INJ          C  09/07  09/21  A
    Give: 250MG PO QID
-----
              N O N - V E R I F I E D
2  DOXEPIN CAP,ORAL              ?  *****  *****  N
    Give: 11CC PO Q24H
-----
Patient: ABC,PATIENT                      Status: ACTIVE
Orderable Item: AMPICILLIN CAP INJ
Instructions:
Dosage Ordered: 250MG
                                Start: 09/07/00  15:00
  Med Route: ORAL (PO)                Stop: 09/21/00  24:00
Schedule Type: CONTINUOUS              DURATION:
  Schedule: QID
  Admin Times: 01-09-15-20
  Provider: INPATIENT-MEDS,PROVIDER [es]
Dispense Drugs                    U/D  Units  Units  Inactive
                                Disp'd  Ret'd  Date
AMPICILLIN 500MG CAP              1    0      0
ORDER NOT VERIFIED
Entry By: INPATIENT-MEDS,PROVIDER      Entry Date: 09/07/00
13:37
Enter RETURN to continue or '^' to exit:
  Date: 09/07/00  14:07  User: INPATIENT-MEDS,PHARMACIST
Activity: ORDER VERIFIED BY PHARMACIST
-----
Patient: ABC,PATIENT                      Status: NON-VERIFIED
Orderable Item: DOXEPIN CAP,ORAL
Instructions:
Dosage Ordered: 11CC
                                Start: 09/20/00  09:00
  Med Route: ORAL (PO)                Stop: 10/04/00  24:00
Schedule Type: NOT FOUND              DURATION:
  Schedule: Q24H
  (No Admin Times)
  Provider: INPATIENT-MEDS,PROVIDER [es]
Special Instructions: special for DOXEPIN
Dispense Drugs                    U/D  Units  Units  Inactive
                                Disp'd  Ret'd  Date
DOXEPIN 100MG U/D                 1    0      0
DOXEPIN 25MG U/D                  1    0      0
ORDER NOT VERIFIED
Self Med: NO
Entry By: INPATIENT-MEDS,PROVIDER      Entry Date: 09/19/00  09:55

```

Figure 4-46: Example: Inpatient Profile (continued, screen 2)

4.2 IV Menu Option

[PSJI MGR]

The *IV Menu* option is used to access the order entry, patient profiles, and various reports and is the main starting point for the IV system.

```
Select IV Menu Option: ?

CRL   Change Report/Label Devices (IV)
CIR   Change to Another IV Room (IV)
      Drug Inquiry (IV)
IOE   Inpatient Order Entry
IPF   Inpatient Profile
      Barcode ID - Return and Destroy (IV)
      Label Menu (IV) ...
      Manufacturing List (IV)
      Order Entry (IV)
      Profile (IV)
      REports (IV) ...
      RETurns and Destroyed Entry (IV)
      SUPervisor's Menu (IV) ...
      SUSpense Functions (IV) ...
      Update Daily Ward List (IV)
      Ward List (IV)
```

Figure 4-47: Example: IV Menu

Within the Inpatient Medications package, there are two different paths that the pharmacist can take to enter a new IV order or take action on an existing order. They are (1) *Order Entry (IV)* and (2) *Inpatient Order Entry*. Each of these paths differs by the prompts that are presented. Once the pharmacist has reached the point of entering a new order or selecting an existing order, the process becomes the same for each path.

Patient locks and order locks are incorporated within the Inpatient Medications package. When a user (User 1) selects a patient through either of the two paths, *Order Entry (IV)* or *Inpatient Order Entry*, and this patient has already been selected by another user (User 2), the user (User 1) will see a message that another user (User 2) is processing orders for this patient. This will be a lock at the patient level within the Pharmacy packages. When the other user (User 2) is entering a new order for the patient, the user (User 1) will not be able to access the patient due to a patient lock within the **VISTA** packages. A lock at the order level is issued when an order is selected through Inpatient Medications for any action other than new order entry. Any users attempting to access this patient's order will receive a message that another user is working on this order. This order level lock is within the **VISTA** packages.

The two different paths for entering a new order or taking an action on an existing order are summarized below.

4.2.1 Order Entry (IV)

[PSJI ORDER]

The *Order Entry (IV)* option allows the pharmacist to complete, edit, renew, and discontinue orders and to place existing orders on hold or on call. This option also allows the user to create new orders and new labels. A long profile can be chosen to review all of the patient's IV orders, or the user can bypass the profile by selecting NO Profile, and proceed directly to order entry. The profile is essentially the same as that generated by the *Profile (IV)* option. The long profile shows all orders, including discontinued and expired orders. The short profile omits the discontinued and expired orders.

After selecting the *Order Entry (IV)* option from the *IV Menu* option, the pharmacist will be prompted to select the patient. At the "Select PATIENT:" prompt, the user can enter the patient's name or enter the first letter of the patient's last name and the last four digits of the patient's social security number (e.g. A9111). The Patient Information Screen is displayed:

Patient Information	Sep 11, 2000 16:09:05	Page: 1 of 1
ABC, PATIENT	Ward: 1 EAST	
HRN: 9111	Room-Bed: B-12	Ht (cm): _____ (_____)
DOB: 08/18/20 (80)		Wt (kg): _____ (_____)
Sex: MALE		Admitted: 05/03/00
Dx: TESTING	Last transferred: *****	
Allergies/Reactions: No Allergy Assessment		
Inpatient Narrative: INP NARR...		
Outpatient Narrative:		
Enter ?? for more actions		
PU Patient Record Update	NO New Order Entry	
DA Detailed Allergy/ADR List	IN Intervention Menu	
VP View Profile		
Select Action: View Profile//		

Figure 4-48: Example: Patient Information

The pharmacist can now enter a Patient Action at the "Select Action: View Profile//" prompt in the Action Area of the screen.

4.2.2 Inpatient Order Entry

[PSJ OE]

The *Inpatient Order Entry* option allows the pharmacist to complete, create, edit, renew, and discontinue IV and Unit Dose orders, as well as put existing IV and Unit Dose orders on hold for any patient, while remaining in the IV module. The IV orders can also be put on call. This option expedites order entry since the pharmacist is not required to change modules to enter IV and Unit Dose orders.

When the user accesses the *Inpatient Order Entry* option for the first time within a session, a prompt is displayed to select the IV room in which to enter orders. When only one active IV room exists, the system will automatically select that IV room. The user is then given the label and report devices defined for the IV room chosen. If no devices have been defined, the user will be given the opportunity to choose them. If this option is exited and then re-entered within the same session, the current label and report devices are shown. The following example shows the option re-entered during the same session.

```
Select IV MENU Option: IOE Inpatient Order Entry

You are signed on under the BIRMINGHAM ISC IV ROOM

Current IV LABEL device is: NT TELNET TERMINAL

Current IV REPORT device is: NT TELNET TERMINAL

Select PATIENT: ABC or A9111
```

Figure 4-49: Example: Inpatient Order Entry

At the “Select PATIENT:” prompt, the user can enter the patient’s name or Health Record Number. The Patient Information Screen is displayed:

```
Patient Information          Sep 12, 2000 10:36:38          Page:    1 of    1
ABC, PATIENT                Ward: 1 EAST
  HRN: 9111                  Room-Bed: B-12              Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)        Wt(kg): _____ (_____)
  Sex: MALE                  Admitted: 05/03/00
  Dx: TESTING                Last transferred: *****

Allergies/Reactions: No Allergy Assessment
Inpatient Narrative: INP NARR...
Outpatient Narrative:

Enter ?? for more actions
PU Patient Record Update    NO New Order Entry
DA Detailed Allergy/ADR List  IN Intervention Menu
VP View Profile
Select Action: View Profile//
```

Figure 4-50: Example: Patient Information

The pharmacist can now enter a Patient Action at the “Select Action: View Profile//” prompt in the Action Area of the screen.

4.2.3 Patient Actions

The Patient Actions are the actions available in the Action Area of the List Manager Screen. These actions pertain to the patient information and include editing, viewing, and new order entry.

4.2.3.1 Patient Record Update

The Patient Record Update action allows editing of the Inpatient Narrative and the Patient’s Default Stop Date and Time for Unit Dose Order entry.

Patient Information	Sep 12, 2000 14:39:07	Page:	1 of	1
ABC,PATIENT	Ward: 1 EAST			
HRN: 9111	Room-Bed: B-12	Ht(cm):	_____ (_____)	
DOB: 08/18/20 (80)		Wt(kg):	_____ (_____)	
Sex: MALE		Admitted:	05/03/00	
Dx: TESTING		Last transferred:	*****	
Allergies/Reactions: No Allergy Assessment				
Inpatient Narrative: INP NARR ...				
Outpatient Narrative:				
Enter ?? for more actions				
PU Patient Record Update		NO New Order Entry		
DA Detailed Allergy/ADR List		IN Intervention Menu		
VP View Profile				
Select Action: View Profile//	PU			
INPATIENT NARRATIVE: INP NARR...// Narrative for Patient ABC				
UD DEFAULT STOP DATE/TIME: SEP 21,2000@24:00//				

Figure 4-51: Example: Patient Record Update

The “INPATIENT NARRATIVE: INP NARR...//” prompt allows the pharmacist to enter information in a free text format, up to 250 characters.

The “UD DEFAULT STOP DATE/TIME:” prompt accepts the date and time entry to be used as the default value for the STOP DATE/TIME of the Unit Dose orders during order entry and renewal processes. This value is used only if the corresponding ward parameter is enabled. The order entry and renewal processes will sometimes change this date and time.

Note: If the Unit Dose order, being finished by the pharmacist, is received from EHR and has a duration assigned, the UD DEFAULT STOP DATE/TIME is displayed as the Calc Stop Date/Time.

When the SAME STOP DATE ON ALL ORDERS parameter is set to yes, the module will assign the same default stop date for each patient. This date is initially set when the first order is entered for the patient, and can change when an order for the patient is renewed. This date is shown as the default value for the stop date of each of the orders entered for the patient.

Note: If this parameter is not enabled, the user can still edit a patient's default stop date. Unless the parameter is enabled, the default stop date will not be seen or used by the module.

Examples of Valid Dates and Times:

- JAN 20 1957 or 20 JAN 57 or 1/20/57 or 012057
- T (for TODAY), T+1 (for TOMORROW), T+2, T+7, etc.
- T-1 (for YESTERDAY), T-3W (for 3 WEEKS AGO), etc.
- If the year is omitted, the computer uses CURRENT YEAR. Two-digit year assumes no more than 20 years in the future, or 80 years in the past.
- If only the time is entered, the current date is assumed.
- Follow the date with a time, such as JAN 20@10, T@10AM, 10:30, etc.
- The pharmacist may enter a time, such as NOON, MIDNIGHT, or NOW.
- The pharmacist may enter NOW+3' (for current date and time Plus 3 minutes *Note--the Apostrophe following the number of minutes)
- Time is REQUIRED in this response.

4.2.3.2 New Order Entry

The New Order Entry action, from the *Inpatient Order Entry* option, allows the pharmacist to enter new Unit Dose and IV orders for the patient. Only one user is able to enter new orders on a selected patient due to the patient lock within the **VISTA** applications. This minimizes the chance of duplicate orders.

For IV order entry, the pharmacist must bypass the "Select DRUG:" prompt (by pressing <Enter>) and then choosing the IV Type at the "Select IV TYPE:" prompt. The following are the prompts that the pharmacist can expect to encounter while entering a new IV order for the patient.

"Select IV TYPE:"

These types include admixture, piggyback, hyperal, syringe, or chemotherapy. An admixture is a Large Volume Parenteral (LVP) solution intended for continuous

parenteral infusion. A piggyback is a small volume parenteral solution used for intermittent infusion. Hyperalimentation (hyperal) is long-term feeding of a protein-carbohydrate solution. A syringe type order is a type of IV that uses a syringe rather than a bottle or a bag. Chemotherapy is the treatment and prevention of cancer with chemical agents.

“Select ADDITIVE:”

There can be any number of additives for an order, including zero. An additive or additive synonym can be entered. If a quick code has been defined in the IV ADDITIVES file, the pharmacist may enter the quick code for an additive. The quick code allows the user to pre-define certain fields, thus speeding up the order entry process. The **entire** quick code name must be entered to receive all pre-defined fields in the order.

Note: Drug inquiry is allowed during order entry by entering two question marks (??) at the STRENGTH prompt for information on an additive or solution.

When an additive is chosen, if an active drug text entry for the Dispense Drug and/or Orderable Item linked to this additive exists, then the prompt, “Restriction/Guideline(s) exist. Display?:” will be displayed along with the corresponding defaults. The drug text indicator will be <DIN> and will be displayed on the right side of the IV Type on the same line. This indicator will be highlighted.

If the Dispense Drug tied to the Additive or the Orderable Item has a non-formulary status, this status will be displayed on the screen as “*N/F*” beside the Additive or Orderable Item.

“ Select SOLUTION:”

There can be any number of solutions in any order, depending on the type. It is even possible to require zero solutions when an additive is pre-mixed with a solution. If no solutions are chosen, the system will display a warning message, in case it is an oversight, and gives an opportunity to add one. The pharmacist may enter an IV solution or IV solution synonym.

When a solution is chosen, if an active drug text entry for the Dispense Drug and/or Orderable Item linked to this solution exists, then the prompt, “Restriction/Guideline(s) exist. Display?:” will be displayed along with the corresponding defaults. The drug text indicator will be <DIN> and will be displayed on the right side of the IV Type on the same line. This indicator will be highlighted.

If the Dispense Drug tied to the Solution or the Orderable Item has a non-formulary status, this status will be displayed on the screen as “*N/F*” beside the Solution or Orderable Item.

“INFUSION RATE:”

The infusion rate is the rate at which the IV is to be administered. This value, in conjunction with the total volume of the hyperal or the admixture type, is used to determine the time covered by one bag; hence, the system can predict the bags needed during a specified time of coverage. This field is free text for piggybacks. For admixtures, a number that will represent the infusion rate must be entered. The pharmacist can also specify the # of bags per day that will be needed. Example: 125 = 125 ml/hr (IV system will calculate bags needed per day), 125@2 = 125 ml/hr with 2 labels per day, Titrate@1 = Titrate with 1 label per day. The format of this field is either a number only or <FREE TEXT > @ <NUMBER OF LABELS PER DAY > (e.g., Titrate @ 1).

Note: If an administration time(s) is defined, the number of labels will reflect the administration time(s) for the IVPB type orders. Example: one administration time of 12:00 is specified. The infusion rate is entered as 125@3. Only 1 label will print.

“MED ROUTE:”

This is the route of administration for this medication (e.g., IV, SQ). If a corresponding abbreviation is found for this route in the MEDICATION ROUTES file, this module will print that abbreviation on its reports.

“SCHEDULE:”

This prompt occurs on piggyback and intermittent syringe orders. A schedule prompt is a request to queue doses on a recurring basis. For instance, a response to the schedule prompt may be **Q5H**, which would be a request to give doses every five hours. If a non-standard schedule and non-standard administration times are entered, the IV integrity checker will flag this field with a warning and give the pharmacist an opportunity to re-edit. This field allows up to two spaces to be entered (Ex. TID PC PRN).

Note: It might be inappropriate for some orders with non-standard schedules to be given administration times. For example, the administration times for Q18H (every 18 hours) will vary.

“ADMINISTRATION TIME:”

This is free text. The pharmacist might want to enter the times of dose administration using military time such as 03-09-15-21.

“OTHER PRINT INFO:”

Free text is entered and can be up to 60 characters. For new order entry, when Other Print Info is added, the pharmacist is prompted whether to flag this field for display in a BCMA message box. When finishing orders placed through CPRS, where the

Provider Comments are not too long to be placed in this field, the pharmacist is given the option to copy the comments into this field. Should the pharmacist choose to copy and flag these comments for display in a BCMA message box on the VDL, an exclamation mark “!” will appear in the order next to this field.

Note: For “DONE” Orders (CPRS Med Order) only, the Provider Comments are automatically placed in the Other Print Info. If the Provider Comments are greater than 60 characters, Other Print Info will display “REFERENCE PROVIDER COMMENTS IN CPRS FOR INSTRUCTIONS.”

“START DATE / TIME:”

The system calculates the default start date/time for order administration based on the DEFAULT START DATE CALCULATION field in the INPATIENT WARD PARAMETERS file. This field allows the site to use the NEXT or CLOSEST administration or delivery time, or NOW, which is the order’s login date/time as the default start date. When NOW is selected for this parameter, it will always be the default start date/time for IVs. This may be overridden by entering the desired date/time at the prompt.

When NEXT or CLOSEST is used in this parameter and the IV is a continuous-type IV order, the default answer for this prompt is based on the delivery times for the IV room specified for that order entry session. For intermittent type IV orders, if the order has administration times, the start date/time will be the NEXT or CLOSEST administration time depending on the parameter. If the intermittent type IV order does not have administration times, the start date/time will round up or down to the closest hour. The Site Manager or Application Coordinator can change this field.

“STOP DATE / TIME:”

The system calculates the default Stop Date/Time for order administration based on the STOP TIME FOR ORDER site parameter. The default date shown is the least of (1) the <IV TYPE> GOOD FOR HOW MANY DAYS site parameter (where <IV TYPE> is LVPs, PBs, etc.), (2) the NUMBER OF DAYS FOR IV ORDER field (found in the IV ADDITIVES file) for all additives in this order, or (3) the DAY (nD) or DOSE (nL) LIMIT field (found in the PHARMACY ORDERABLE ITEM file) for the orderable item associated with this order. The Site Manager or Application Coordinator can change these fields.

“NATURE OF ORDER:”

This is the method the provider used to communicate the order to the user who entered or took action on the order. Nature of Order is defined in CPRS. Written will be the default for new orders entered. When a new order is created due to an edit, the default will be Service Correction. The following table shows some Nature of Order examples.

Nature of Order	Description	Prompted for Signature in EHR?	Chart Copy Printed?
1. <u>Written</u>	The source of the order is a written doctor's order	No	No
Verbal	A doctor verbally requested the order	Yes	Yes
Telephoned	A doctor telephoned the service to request the order	Yes	Yes
Service Correction	The service is discontinuing or adding new orders to carry out the intent of an order already received	No	No
Duplicate	This applies to orders that are discontinued because they are a duplicate of another order	No	Yes
Policy	These are orders that are created as a matter of hospital policy	No	Yes

The Nature of Order abbreviation will display on the order next to the Provider's Name. The abbreviations will be in lowercase and enclosed in brackets. Written will display as [w], telephoned as [p], verbal as [v], policy as [i], electronically entered as [e], and service correction as [s]. If the order is electronically signed through the EHR package AND the EHR patch OR*3*141 is installed on the user's system, then [es] will appear next to the Provider's Name instead of the Nature of Order abbreviation.

“Select CLINIC LOCATION:”

This prompt is only displayed for Outpatient IV orders entered through the Inpatient Medications package. The user will enter the hospital location name when prompted.

Note: While entering an order, the pharmacist can quickly delete the order by typing an up caret (^) at any one of the prompts listed above except at the “STOP DATE/TIME:” prompt. Once the user has passed this prompt, if the order still needs to be deleted, an up caret (^) can be entered at the “Is this O.K.?” prompt.

```

Inpatient Order Entry      Feb 28, 2002@13:48:47      Page: 1 of 3
ABC,PATIENT              Ward: ONE EAST
  HRN: 9111                Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)      Wt(kg): _____ (_____)
  Sex: MALE                Admitted: 05/03/00
  Dx: TESTING              Last transferred: *****

- - - - - A C T I V E - - - - -
  1  BACLOFEN TAB          C 02/20 03/06  A
      Give: 10MG PO QD
      PATIENT SPITS OUT MEDICINE
  2  PREDNISONE TAB       C 02/25 03/11  A
      Give: 5MG PO TU-TH-SA@09
  3  RESERPINE TAB        C 02/20 03/06  A
      Give: 1MG PO QD
  4  d->FUROSEMIDE 1 MG   O 02/11 02/11  E
      in 5% DEXTROSE 50 ML NOW
  5  d->FUROSEMIDE 10 MG  O 02/11 02/11  E
      in 5% DEXTROSE 50 ML STAT
+      Enter ?? for more actions
PI Patient Information      SO Select Order
PU Patient Record Update   NO New Order Entry
Select Action: Next Screen// NO New Order Entry
    
```

Figure 4-52: Example: New Order Entry

```

Select IV TYPE: P PIGGYBACK.
Select ADDITIVE: MULTI
  1  MULTIVITAMIN INJ
  2  MULTIVITAMINS
CHOOSE 1-2: 2 MULTIVITAMINS

(The units of strength for this additive are in ML)
Strength: 2 ML
Select ADDITIVE: <Enter>
Select SOLUTION: 0.9
  1  0.9% SODIUM CHLORIDE      100 ML
  2  0.9% SODIUM CHLORIDE      50 ML
CHOOSE 1-2: 1 0.9% SODIUM CHLORIDE      100 ML
INFUSION RATE: 125 INFUSE OVER 125 MIN.
MED ROUTE: IV// <Enter>
SCHEDULE: QID
  1  QID      09-13-17-21
  2  QID AC   0600-1100-1630-2000
CHOOSE 1-2: 1      09-13-17-21
ADMINISTRATION TIMES: 09-13-17-21// <Enter>
REMARKS: <Enter>
OTHER PRINT INFO: <Enter>
START DATE/TIME: FEB 28,2002@13:56// <Enter> (FEB 28, 2002@13:56)
STOP DATE/TIME: MAR 30,2002@24:00// <Enter>
PROVIDER: PROVIDER,PAULA// <Enter>
    
```

Figure 4-53: Example: New Order Entry (continued)

After entering the data for the order, the system will prompt the pharmacist to confirm that the order is correct. The IV module contains an integrity checker to ensure the necessary fields are answered for each type of order. The pharmacist must

edit the order to make corrections if all of these fields are not answered correctly. If the order contains no errors, but has a warning, the user will be allowed to proceed.

```
Orderable Item: MULTIVITAMINS INJ
Give: IV QID

754
[29]5432 ONE EAST 02/28/02
ABC,PATIENT B-12

MULTIVITAMINS 2 ML
0.9% SODIUM CHLORIDE 100 ML

INFUSE OVER 125 MIN.
QID
09-13-17-21
Fld by:_____ Chkd by:_____
1[1]

Start date: FEB 28,2002 13:56 Stop date: MAR 30,2002 24:00

Is this O.K.: YES//<Enter> YES
NATURE OF ORDER: WRITTEN// <Enter> W
...transcribing this non-verified order....
```

Figure 4-54: Example: New Order Entry (continued)

```

NON-VERIFIED IV          Feb 28, 2002@13:56:44          Page: 1 of 2
ABC,PATIENT              Ward: ONE EAST
  HRN: 9111              Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)    Wt(kg): _____ (_____)
  Sex: MALE              Admitted: 05/03/00
  Dx: TESTING            Last transferred: *****

*(1) Additives:                      Type: PIGGYBACK
    MULTIVITAMINS 2 ML
(2) Solutions:
    0.9% SODIUM CHLORIDE 100 ML

                                DURATION:
(3) Infusion Rate: INFUSE OVER 125 MIN.    (4) Start: 02/28/02 13:56
*(5) Med Route: IV                          (6) Stop: 03/30/02 24:00
*(7) Schedule: QID                          Last Fill: *****
(8) Admin Times: 09-13-17-21                Quantity: 0
*(9) Provider: PROVIDER,PAULA [w]           Cum. Doses:
*(10)Orderable Item: MULTIVITAMINS INJ
      Instructions:
(11) Other Print:
+      Enter ?? for more actions
DC Discontinue      RN (Renew)          VF Verify
HD (Hold)           OC (On Call)
ED Edit             AL Activity Logs

Select Item(s): Next Screen// VF Verify

      3      6      9      12      15      18      21      24
.....
                                P
                                N

Next delivery time is 1330 ***

Action (PB) B// <Enter>  BYPASS
    
```

Figure 4-55: Example: New Order Entry, sample report

When the order is correct and verified, and the Activity Ruler site parameter is turned on, the system will display a time line. The time line is a visual representation of the relationship between start of coverage times, doses due, and order start times. The letters **P**, **A**, **H**, **S**, or **C** show the start of coverage times for each IV type. If there is an asterisk (*) after the letter, this means that the Ward List has been run for this start of coverage type. The up caret (^) shows when the doses are due, the **N** indicates current time in relation to the order. The next delivery time will also be listed.

The “Action (PBS)” prompt will appear next, with all of the valid actions listed in parentheses. The following are the codes for the possible actions:

- **P** - Print specified number of labels now.
- **B** - Bypass any more action (entering an up caret (^) will also do this).
- **S** - Suspend a specified number of labels for the IV room to print on demand.

The **S** will only appear as a valid action if the USE SUSPENSE FUNCTIONS site parameter is answered with **1** or **YES**. The user can perform more than one action, but each action must be done one at a time. As each action is taken, those that operate on labels will reduce the total labels by that amount (e.g., eight labels are needed, three are suspended, then five are available to print).

4.2.3.3 Detailed Allergy/ADR List

The Detailed Allergy/ADR List action displays a detailed listing of the selected item from the patient's Allergy/ADR List. Entry to the *Edit Allergy/ADR Data* option is provided with this list also.

Enter/Edit Allergy/ADR Data

Provides access to the Adverse Reaction Tracking (ART) package to allow entry and/or edit of allergy adverse reaction data for the patient. See the Allergy package documentation for more information on Allergy/ADR processing.

Select Allergy

Allows the user to view a specific allergy.

4.2.3.4 Intervention Menu

Note: This option is only available to those users who hold the PSJ RPHARM key.

The Intervention Menu action allows entry of new interventions and edit, delete, view, or printing of an existing intervention. Each kind of intervention will be discussed and an example will follow.

- **New:** This option is used to add an entry into the APSP INTERVENTION file.

```

Patient Information      Sep 22, 2000 08:03:07      Page: 1 of 1
XYZ,PATIENT            Ward: 1 West
HRN: 4321              Room-Bed: A-6           Ht(cm): 167.64 (04/21/99)
DOB: 02/22/42 (58)    Admitted: 09/16/99     Wt(kg): 85.00 (04/21/99)
Sex: MALE              Last transferred: *****
Dx: TEST PATIENT
Allergies - Verified:  CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE,
                       CHOCOLATE, NUTS, STRAWBERRIES, DUST
Non-Verified:          AMOXICILLIN, AMPICILLIN, TAPE, FISH,
                       FLUPHENAZINE DECANOATE

Adverse Reactions:
Inpatient Narrative:   Inpatient narrative
Outpatient Narrative:  This is the Outpatient Narrative. This patient doesn't
like waiting at the pickup window. He gets very angry.

Enter ?? for more actions
PU Patient Record Update      NO New Order Entry
DA Detailed Allergy/ADR List  IN Intervention Menu
VP View Profile
Select Action: View Profile// IN Intervention Menu

--- Pharmacy Intervention Menu ---

NE Enter Pharmacy Intervention      DEL Delete Pharmacy Intervention
ED Edit Pharmacy Intervention       VW View Pharmacy Intervention
PRT Print Pharmacy Intervention

Select Item(s): NE Enter Pharmacy Intervention
Select APSP INTERVENTION INTERVENTION DATE: T SEP 22, 2000
Are you adding 'SEP 22, 2000' as a new APSP INTERVENTION (the 155TH)? No// Y
(Yes)
APSP INTERVENTION PATIENT: XYZ,PATIENT           08-18-20      123459111
N
SC VETERAN
APSP INTERVENTION DRUG: WAR
1  WARFARIN 10MG           BL100           TAB
2  WARFARIN 10MG U/D      BL100           TAB **AUTO STOP 2D**
3  WARFARIN 2.5MG        BL100           TAB
4  WARFARIN 2.5MG U/D    BL100           TAB **AUTO STOP 2D**
5  WARFARIN 2MG          BL100           TAB
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1 WARFARIN 10MG           BL100           TAB
PROVIDER: INPATIENT-MEDS,PROVIDER      PROV
INSTITUTED BY: PHARMACY// <Enter> PHARMACY
INTERVENTION: ALLERGY
RECOMMENDATION: NO CHANGE
WAS PROVIDER CONTACTED: N NO
RECOMMENDATION ACCEPTED: Y YES
REASON FOR INTERVENTION:
1>
ACTION TAKEN:
1>
CLINICAL IMPACT:
1>
FINANCIAL IMPACT:
1>

```

Figure 4-56: Example: New Intervention

- **Edit:** This option is used to edit an existing entry in the APSP INTERVENTION file.

```

Patient Information      Sep 22, 2000 08:03:07      Page: 1 of 1
XYZ,PATIENT            Ward: 1 West                <A>
  HRN: 4321             Room-Bed: A-6             Ht(cm): 167.64 (04/21/99)
  DOB: 02/22/42 (58)   Wt(kg): 85.00 (04/21/99)
  Sex: MALE            Admitted: 09/16/99
  Dx: TEST PATIENT     Last transferred: *****

Allergies - Verified:  CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE,
                      CHOCOLATE, NUTS, STRAWBERRIES, DUST
Non-Verified:  AMOXICILLIN, AMPICILLIN, TAPE, FISH,
                FLUPHENAZINE DECANOATE

Adverse Reactions:
Inpatient Narrative:  Inpatient narrative
Outpatient Narrative: This is the Outpatient Narrative. This patient doesn't
like waiting at the pickup window. He gets very angry.

Enter ?? for more actions
PU Patient Record Update      NO New Order Entry
DA Detailed Allergy/ADR List  IN Intervention Menu
VP View Profile
Select Action: View Profile// IN Intervention Menu

--- Pharmacy Intervention Menu ---

NE Enter Pharmacy Intervention      DEL Delete Pharmacy Intervention
ED Edit Pharmacy Intervention       VW View Pharmacy Intervention
PRT Print Pharmacy Intervention
Select Item(s): ED Edit Pharmacy Intervention
Select INTERVENTION:T SEP 22, 2000 XYZ,PATIENT WARFARIN 10MG
INTERVENTION DATE: SEP 22,2000// <Enter>
PATIENT: XYZ,PATIENT// <Enter>
PROVIDER: INPATIENT-MEDS,PROVIDER// <Enter>
PHARMACIST: INPATIENT-MEDS,PHARMACIST// <Enter>
DRUG: WARFARIN 10MG// <Enter>
INSTITUTED BY: PHARMACY// <Enter>
INTERVENTION: ALLERGY// <Enter>
OTHER FOR INTERVENTION:
  1>
RECOMMENDATION: NO CHANGE// <Enter>
OTHER FOR RECOMMENDATION:
  1>
WAS PROVIDER CONTACTED: NO// <Enter>
PROVIDER CONTACTED:
RECOMMENDATION ACCEPTED: YES// <Enter>
AGREE WITH PROVIDER:
REASON FOR INTERVENTION:
  1>
ACTION TAKEN:
  1>
CLINICAL IMPACT:
  1>
FINANCIAL IMPACT:
  1>
    
```

Figure 4-57: Example: Edit an Intervention

- Delete:** This option is used to delete an entry from the APSP INTERVENTION file. The pharmacist may only delete an entry that was entered on the same day.

```

Patient Information          Sep 22, 2000 08:03:07          Page:      1 of      1
XYZ,PATIENT                Ward: 1 West                    <A>
  HRN: 4321                 Room-Bed: A-6                   Ht(cm): 167.64 (04/21/99)
  DOB: 02/22/42 (58)       Wt(kg): 85.00 (04/21/99)
  Sex: MALE                 Admitted: 09/16/99
  Dx: TEST PATIENT         Last transferred: *****

Allergies - Verified: CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE,
                    CHOCOLATE, NUTS, STRAWBERRIES, DUST
  Non-Verified: AMOXICILLIN, AMPICILLIN, TAPE, FISH,
                    FLUPHENAZINE DECANOATE

  Adverse Reactions:
  Inpatient Narrative: Inpatient narrative
  Outpatient Narrative: This is the Outpatient Narrative. This patient doesn't
  like waiting at the pickup window. He gets very angry.

  Enter ?? for more actions
  PU Patient Record Update          NO New Order Entry
  DA Detailed Allergy/ADR List      IN Intervention Menu
  VP View Profile
  Select Action: View Profile// IN  Intervention Menu

  --- Pharmacy Intervention Menu ---

  NE  Enter Pharmacy Intervention    DEL  Delete Pharmacy Intervention
  ED  Edit Pharmacy Intervention     VW  View Pharmacy Intervention
  PRT Print Pharmacy Intervention
  Select Item(s): DEL  Delete Pharmacy Intervention
  You may only delete entries entered on the current day.

  Select APSP INTERVENTION INTERVENTION DATE: T  SEP 22, 2000          XYZ,PATIENT
  WARFARIN 10MG
  SURE YOU WANT TO DELETE THE ENTIRE ENTRY? YES
    
```

Figure 4-58: *Example: Delete an Intervention*

- View:** This option is used to display Pharmacy Interventions in a captioned format.

```

Patient Information          Sep 22, 2000 08:03:07          Page: 1 of 1
XYZ,PATIENT                Ward: 1 West                <A>
  HRN: 4321                 Room-Bed: A-6              Ht(cm): 167.64 (04/21/99)
  DOB: 02/22/42 (58)       Wt(kg): 85.00 (04/21/99)
  Sex: MALE                 Admitted: 09/16/99
  Dx: TEST PATIENT         Last transferred: *****

Allergies - Verified: CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE,
                   CHOCOLATE, NUTS, STRAWBERRIES, DUST
Non-Verified: AMOXICILLIN, AMPICILLIN, TAPE, FISH,
                   FLUPHENAZINE DECANOATE

Adverse Reactions:
Inpatient Narrative: Inpatient narrative
Outpatient Narrative: This is the Outpatient Narrative. This patient doesn't
like waiting at the pickup window. He gets very angry.

Enter ?? for more actions
PU Patient Record Update          NO New Order Entry
DA Detailed Allergy/ADR List      IN Intervention Menu
VP View Profile
Select Action: View Profile// IN Intervention Menu

--- Pharmacy Intervention Menu ---

NE Enter Pharmacy Intervention    DEL Delete Pharmacy Intervention
ED Edit Pharmacy Intervention     VW View Pharmacy Intervention
PRT Print Pharmacy Intervention
Select Item(s): VW View Pharmacy Intervention
Select APSP INTERVENTION INTERVENTION DATE: T SEP 22, 2000          XYZ,PATIENT
WARFARIN 10MG
ANOTHER ONE: <Enter>
INTERVENTION DATE: SEP 22, 2000          PATIENT: XYZ,PATIENT
PROVIDER: INPATIENT-MEDS,PROVIDER        PHARMACIST: INPATIENT-MEDS,PHARMACIST
DRUG: WARFARIN 10MG                     INSTITUTED BY: PHARMACY
INTERVENTION: ALLERGY                   RECOMMENDATION: NO CHANGE
WAS PROVIDER CONTACTED: NO              RECOMMENDATION ACCEPTED: YES
    
```

Figure 4-59: Example: View an Intervention

- Print:** This option is used to obtain a captioned printout of Pharmacy Interventions for a certain date range. It will print out on normal width paper and can be queued to print at a later time.


```

Patient Information      Sep 22, 2000 08:03:07      Page: 1 of 1
XYZ,PATIENT            Ward: 1 West      <A>
  HRN: 4321             Room-Bed: A-6      Ht(cm): 167.64 (04/21/99)
  DOB: 02/22/42 (58)   Wt(kg): 85.00 (04/21/99)
  Sex: MALE            Admitted: 09/16/99
  Dx: TEST PATIENT     Last transferred: *****

Allergies - Verified:  CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE,
                      CHOCOLATE, NUTS, STRAWBERRIES, DUST
Non-Verified:  AMOXICILLIN, AMPICILLIN, TAPE, FISH,
                FLUPHENAZINE DECANOATE

Adverse Reactions:
Inpatient Narrative:  Inpatient narrative
Outpatient Narrative: This is the Outpatient Narrative. This patient doesn't
like waiting at the pickup window. He gets very angry.

Enter ?? for more actions
PU Patient Record Update      NO New Order Entry
DA Detailed Allergy/ADR List  IN Intervention Menu
VP View Profile
Select Action: View Profile// IN Intervention Menu

--- Pharmacy Intervention Menu ---

NE Enter Pharmacy Intervention      DEL Delete Pharmacy Intervention
ED Edit Pharmacy Intervention       VW View Pharmacy Intervention
PRT Print Pharmacy Intervention

Select Item(s): PRT Print Pharmacy Intervention
* Previous selection: INTERVENTION DATE equals 7/2/96
START WITH INTERVENTION DATE: FIRST// T (SEP 22, 2000)
GO TO INTERVENTION DATE: LAST// T (SEP 22, 2000)
DEVICE: <Enter> NT/Cache virtual TELNET terminal      Right Margin: 80//
PHARMACY INTERVENTION LISTING      SEP 22,2000 09:20      PAGE 1
-----

INTERVENTION: ALLERGY

INTERVENTION DATE: SEP 22,2000      PATIENT: XYZ,PATIENT
PROVIDER: INPATIENT-MEDS,PROVIDER   PHARMACIST: INPATIENT-MEDS,PHARM
DRUG: WARFARIN 10MG                 INSTITUTED BY: PHARMACY
RECOMMENDATION: NO CHANGE
WAS PROVIDER CONTACTED: NO          RECOMMENDATION ACCEPTED: YES
PROVIDER CONTACTED:

SUBTOTAL                             -----
SUBCOUNT                            1
TOTAL                                 -----
COUNT                               1
    
```

Figure 4-60: Example: Print an Intervention

4.2.3.5 View Profile

The View Profile action allows selection of a Long, Short, or NO profile for the patient. The profile displayed in the *Inpatient Order Entry* and *Non-Verified/Pending Orders* options will include IV and Unit Dose orders. The long profile shows all orders, including discontinued and expired orders. The short profile does not show the discontinued or expired orders.

Inpatient Order Entry		Feb 28, 2002@14:06:01		Page: 1 of 3	
ABC,PATIENT		Ward: ONE EAST			
HRN: 9111	Room-Bed: B-12	Ht(cm): _____	(_____)		
DOB: 08/18/20 (81)		Wt(kg): _____	(_____)		
Sex: MALE		Admitted: 05/03/00			
Dx: TESTING		Last transferred: *****			
- - - - - A C T I V E - - - - -					
1	BACLOFEN TAB	C	02/20	03/06	A
	Give: 10MG PO QD				
	PATIENT SPITS OUT MEDICINE				
2	MULTIVITAMINS 2 ML	C	02/28	03/30	A
	in 0.9% SODIUM CHLORIDE 100 ML QID				
3	PREDNISONE TAB	C	02/25	03/11	A
	Give: 5MG PO TU-TH-SA@09				
4	RESERPINE TAB	C	02/20	03/06	A
	Give: 1MG PO QD				
5 d->	FUROSEMIDE 1 MG	O	02/11	02/11	E
	in 5% DEXTROSE 50 ML NOW				
+ Enter ?? for more actions					
PI	Patient Information	SO	Select Order		
PU	Patient Record Update	NO	New Order Entry		
Select Action: Next Screen//					

Figure 4-61: Example: Profile View

The orders on the profile are sorted first by the status (ACTIVE, NON-VERIFIED, PENDING, PENDING RENEWALS) then alphabetically by SCHEDULE TYPE. Pending orders with a priority of STAT are listed first and are displayed in a bold and blinking text for easy identification. After SCHEDULE TYPE, orders are sorted alphabetically by DRUG (the drug name listed on the profile), and then in descending order by START DATE.

If an IV order has been verified by nursing but has not been verified by pharmacy, it will be listed under the ACTIVE heading with an arrow (->) to the right of it's number. A CPRS Med Order will have a "DONE" priority and will display a "d" to the right of the number on all profiles. These orders will display with active orders under the Active header until the pharmacist verifies them.

Orders may be selected by choosing the Select Order action, or directly from the profile using the number displayed to the left of the order. Multiple orders may be chosen by entering the numbers for each order to be included, separated by commas (e.g., 1,2,3), or a range of numbers using the dash (e.g., 1-3).

Note: The START DATE and DRUG sort may be reversed using the INPATIENT PROFILE ORDER SORT field in the INPATIENT USER PARAMETERS file.

4.2.3.6 Patient Information

The Patient Information action is displayed for the selected patient. This list contains the patient's demographic data, Allergy/Adverse Reaction data, and Pharmacy Narratives.

Patient Information	Sep 13, 2000 15:04:31	Page: 1 of 1
ABC,PATIENT	Ward: 1 EAST	
HRN: 9111	Room-Bed: B-12	Ht(cm): _____ (_____)
DOB: 08/18/20 (80)		Wt(kg): _____ (_____)
Sex: MALE		Admitted: 05/03/00
Dx: TESTING		Last transferred: *****
Allergies/Reactions: No Allergy Assessment		
Inpatient Narrative: Narrative for Patient ABC		
Outpatient Narrative:		
Enter ?? for more actions		
PU Patient Record Update		NO New Order Entry
DA Detailed Allergy/ADR List		IN Intervention Menu
VP View Profile		
Select Action: View Profile//		

Figure 4-62: Example: Patient Information

4.2.3.7 Select Order

The Select Order action is used to take action on a previously entered order by selecting it from the profile, after the patient is selected and length of profile is chosen.

```

Inpatient Order Entry      Mar 07, 2002@13:01:56      Page: 1 of 1
ABC,PATIENT              Ward: ONE EAST
  HRN: 9111              Room-Bed: B-12      Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)    Wt(kg): _____ (_____)
  Sex: MALE              Admitted: 05/03/00
  Dx: TESTING            Last transferred: *****

- - - - - A C T I V E - - - - -
  1 d->in 0.9% SODIUM CHLORIDE 1000 ML 125 ml/hrC 03/07 03/07 E
  2 d->in 5% DEXTROSE 50 ML 125 ml/hr C 03/06 03/06 E
  3 CEPHAPIRIN 1 GM C 03/04 03/09 A
    in DEXTROSE 5% IN N. SALINE 1000 ML QID
  4 d->ASPIRIN CAP,ORAL O 03/07 03/07 E
    Give: 650MG PO NOW

- - - - - P E N D I N G - - - - -
  5 in DEXTROSE 10% 1000 ML 125 ml/hr ? ***** ***** P

Enter ?? for more actions
PI Patient Information      SO Select Order
PU Patient Record Update   NO New Order Entry
Select Action: Quit// 1
    
```

Figure 4-63: Example: Select an Order

```

EXPIRED IV (DONE)      Mar 07, 2002@13:02:26      Page: 1 of 2
ABC,PATIENT              Ward: ONE EAST
  HRN: 9111              Room-Bed: B-12      Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)    Wt(kg): _____ (_____)

*(1) Additives:          Order number: 483      Type: ADMIXTURE
*(2) Solutions:
    0.9% SODIUM CHLORIDE 1000 ML *N/F*
                                DURATION:
*(3) Infusion Rate: 125 ml/hr      *(4) Start: 03/07/02 12:59
*(5) Med Route: IV                *(6) Stop: 03/07/02 12:59
BCMA ORDER LAST ACTION: 03/07/02 12:59 Infusing
*(7) Schedule:                  Last Fill: *****
(8) Admin Times:                Quantity: 0
*(9) Provider: INPATIENT-MEDS,PROVIDER Cum. Doses:
(10) Other Print:
    Provider Comments: TESTING

(11) Remarks :
+ Enter ?? for more actions
DC (Discontinue)      RN (Renew)      VF (Verify)
HD (Hold)              OC (On Call)    FL Flag
ED (Edit)              AL Activity Logs
Select Item(s): Quit// <Enter> QUIT
    
```

Figure 4-64: Example: Select an Order, sample report

The list area displays detailed order information and allow actions to be taken on the selected IV order. A number displayed to the left of the field name identifies fields that may be edited. If a field, marked with an asterisk (*) next to its number, is edited, it will cause this order to be discontinued and a new one created. If a pending

order is selected, the system will determine any default values for fields not entered through EHR and display them along with the data entered by the provider.

The BCMA ORDER LAST ACTION field will only display when an action has been performed through BCMA on this order. This information includes the date and time of the action and the BCMA action status. If an asterisk (*) appears after the BCMA status, this indicates an action was taken on the prior order that is linked to this order.

Actions, displayed in the Action Area, enclosed in parenthesis are not available to the user.

Note: Only users with the appropriate keys will be allowed to take any available actions on the Unit Dose or IV order.

4.2.4 Order Actions

The Order Actions are the actions available in the Action Area of the List Manager Screen. These actions pertain to the patient's orders and include editing, discontinuing, verifying, etc.

4.2.4.1 Discontinue

When an order is discontinued, the order's Stop Date/Time is changed to the date/time the action is taken. An entry is placed in the order's Activity Log recording who discontinued the order and when the action was taken. Pending and Non-verified orders are deleted when discontinued and will no longer appear on the patient's profile.

Note: Any orders placed through the Med Order Button cannot be discontinued.

```

ACTIVE IV                               Mar 20, 2001@16:37:49           Page: 1 of 1
ABC,PATIENT                             Ward: ONE EAST
  HRN: 9111                               Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)                     Wt(kg): _____ (_____)

*(1) Additives:                          Order number: 65         Type: ADMIXTURE
<DIN>
  ACETAMINOPHEN 100 MEQ

*(2) Solutions:
  0.9% SODIUM CHLORIDE 100 ML

*(3) Infusion Rate: 100 ml/hr             *(4) Start: 03/19/01 11:30
*(5) Med Route: IV                        *(6) Stop: 03/26/01 24:00
*(7) Schedule:                            Last Fill: 03/19/01 14:57
(8) Admin Times:                          Quantity: 2
*(9) Provider: INPATIENT-MEDS,PROVIDER [w] Cum. Doses: 43
(10) Other Print:

(11) Remarks :
  Entry By: INPATIENT-MEDS,PHARMACIST     Entry Date: 03/19/01 11:30
  Enter ?? for more actions

DC Discontinue      RN Renew          FL Flag
ED Edit             OC On Call
HD Hold             AL Activity Logs

Select Item(s): Quit// DC Discontinue
NATURE OF ORDER: WRITTEN// <Enter> W
Requesting PROVIDER: INPATIENT-MEDS,PROVIDER// <Enter> PROV
REASON FOR ACTIVITY: TESTING
    
```

Figure 4-65: Example: Discontinue an Order

```

DISCONTINUED IV                         Mar 20, 2001@16:38:28           Page: 1 of 1
ABC,PATIENT                             Ward: ONE EAST
  HRN: 9111                               Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)                     Wt(kg): _____ (_____)

*(1) Additives:                          Order number: 65         Type: ADMIXTURE
<DIN>
  ACETAMINOPHEN 100 MEQ

*(2) Solutions:
  0.9% SODIUM CHLORIDE 100 ML

*(3) Infusion Rate: 100 ml/hr             *(4) Start: 03/19/01 11:30
*(5) Med Route: IV                        *(6) Stop: 03/20/01 16:38
*(7) Schedule:                            Last Fill: 03/19/01 14:57
(8) Admin Times:                          Quantity: 2
*(9) Provider: INPATIENT-MEDS,PROVIDER [w] Cum. Doses: 43
(10) Other Print:

(11) Remarks :
  Entry By: INPATIENT-MEDS,PHARMACIST     Entry Date: 03/19/01 11:30
  Enter ?? for more actions

DC (Discontinue)   RN (Renew)          FL Flag
ED (Edit)          OC (On Call)
HD (Hold)          AL Activity Logs

Select Item(s): Quit// <Enter> QUIT
    
```

Figure 4-66: Example: Discontinue an Order, continued

4.2.4.2 Edit

This action allows modification of any field shown on the order view that is preceded by a number in parenthesis (#).

```

ACTIVE IV                               Mar 20, 2001@16:41:14           Page: 1 of 2
ABC,PATIENT                             Ward: ONE EAST
  HRN: 9111                               Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)                     Wt(kg): _____ (_____)

*(1) Additives:                          Order number: 64         Type: PIGGYBACK
    MVI 100 ML
(2) Solutions:
    0.9% SODIUM CHLORIDE 100 ML

                                     DURATION:
(3) Infusion Rate: INFUSE OVER 10 MIN.   *(4) Start: 03/19/01 11:30
*(5) Med Route: IVPB                       *(6) Stop: 03/20/01 24:00
*(7) Schedule: QID                          Last Fill: 03/19/01 14:57
(8) Admin Times: 09-13-17-21               Quantity: 2
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses: 9
*(10)Orderable Item: MULTIVITAMINS INJ
    Instructions:
(11) Other Print:

+      Enter ?? for more actions
DC Discontinue      ED Edit      AL Activity Logs
HD Hold             RN Renew
FL Flag             OC On Call
Select Item(s): Next Screen// ED Edit

Select FIELDS TO EDIT: 11
OTHER PRINT INFO: TESTING
    
```

Figure 4-67: Example: Edit an Order

```

ACTIVE IV                               Mar 20, 2001@16:42:02           Page: 1 of 2
ABC,PATIENT                             Ward: ONE EAST
  HRN: 9111                               Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)                     Wt(kg): _____ (_____)

*(1) Additives:                          Order number: 64         Type: PIGGYBACK
    MVI 100 ML
(2) Solutions:
    0.9% SODIUM CHLORIDE 100 ML

                                     DURATION:
(3) Infusion Rate: INFUSE OVER 10 MIN.   *(4) Start: 03/19/01 11:30
*(5) Med Route: IVPB                       *(6) Stop: 03/20/01 24:00
*(7) Schedule: QID                          Last Fill: 03/19/01 14:57
(8) Admin Times: 09-13-17-21               Quantity: 2
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses: 9
*(10)Orderable Item: MULTIVITAMINS INJ
    Instructions:
(11) Other Print: TESTING

(12) Remarks :

+      Enter ?? for more actions
AC Accept          ED Edit
Select Item(s): Next Screen// AC Accept
    
```

Figure 4-68: Example: Edit an Order, continued

```

Orderable Item: MULTIVITAMINS INJ
Give: IVPB QID

[64]9111 ONE EAST 03/20/01
ABC,PATIENT B-12

MVI 100 ML
0.9% SODIUM CHLORIDE 100 ML

INFUSE OVER 10 MIN.
TESTING
QID
09-13-17-21
1[1]

Start date: MAR 19,2001 11:30 Stop date: MAR 20,2001 24:00

Is this O.K.: Y// <Enter> YES
REASON FOR ACTIVITY: <Enter>

7 Labels needed for doses due at ...

03/19/01 1300 : 03/19/01 1700 : 03/19/01 2100 : 03/20/01 0900 : 03/20/01 1300
:
03/20/01 1700 : 03/20/01 2100 :

.....3.....6.....9.....12.....15.....18.....21.....24
.....P.....^.....^.....N.....^.....
.....

Next delivery time is 1500 ***

Action (PB) P// BYPASS
    
```

Figure 4-69: Example: Edit an Order (continued)

If a field marked with an asterisk (*) to the left of the number is changed, the original order will be discontinued, and a new order containing the edited data will be created. The Stop Date/Time of the original order will be changed to the date/time the new edit order is accepted. The old and new orders are linked and may be viewed using the History Log function. When the screen is refreshed, the message, "This change will cause a new order to be created", will be displayed.


```

ACTIVE IV                               Apr 02, 2001 20:55:35           Page: 1 of 2
ABC,PATIENT                             Ward: ONE EAST
  HRN: 9111                               Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)                     Wt(kg): _____ (_____)

*(1) Additives:                          Order number: 41         Type: PIGGYBACK
    MVI 1 ML
(2) Solutions:
    DEXTROSE 10% 1000 ML

(3) Infusion Rate: INFUSE OVER 10 MIN.    * (4) DURATION:
                                         Start: 04/02/01 20:55
*(5) Med Route: IV                       * (6) Stop: 04/03/01 24:00
*(7) Schedule: QD                         Last Fill: *****
(8) Admin Times: 1440                     Quantity: 0
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses:
*(10) Orderable Item: MVI INJ
    Instructions:
(11) Other Print:

+      Enter ?? for more actions
DC Discontinue      ED Edit      AL Activity Logs
HD Hold            RN Renew
FL Flag           OC On Call
Select Item(s): Next Screen// 5
MED ROUTE: IV// IVPB  IV PIGGYBACK      IVPB
    
```

Figure 4-70: Example: Edit an Order and Create a New Order

```

ACTIVE IV                               Apr 02, 2001 20:56:21           Page:    1 of    2
ABC,PATIENT                             Ward: ONE EAST
  HRN: 9111                               Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)                     Wt(kg): _____ (_____)

*(1) Additives:                          Order number: 41         Type: PIGGYBACK
     MVI 1 ML
(2) Solutions:
     DEXTROSE 10% 1000 ML

(3) Infusion Rate: INFUSE OVER 10 MIN.    *(4) DURATION:
*(5) Med Route: IVPB                       *(6) Start: 04/02/01 20:55
*(7) Schedule: QD                           Stop: 04/03/01 24:00
(8) Admin Times: 1440                       Last Fill: *****
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses:
*(10) Orderable Item: MVI INJ               Quantity: 0
     Instructions:
(11) Other Print:

(12) Remarks :
+ Enter ?? for more actions
AC Accept      ED Edit
Select Item(s): Next Screen// AC Accept

Orderable Item: MVI INJ
Give: IVPB QD

[41]1112 OBSERVATION 04/02/01
ABC,PATIENT NF

MVI 1 ML
DEXTROSE 10% 1000 ML

Dose due at: _____
INFUSE OVER 10 MIN.
QD
1440
Fld by: _____ Chkd by: _____
1[1]

Start date: APR 2,2001 20:56 Stop date: APR 3,2001 24:00
*** This change will cause a new order to be created. ***
    
```

Figure 4-71: Example: Edit an Order and Create a New Order

```

Is this O.K.: Y// <Enter>    YES
NATURE OF ORDER: SERVICE CORRECTION// <Enter>    S.

Original order discontinued...

      3         6         9         12        15        18        21        24
.....:.....:.....:.....:.....:.....:.....:.....:.....:
                                  P
                                          N

Next delivery time is 1100 ***

Action (PBS) B// <Enter>    BYPASS

ACTIVE IV                    Apr 02, 2001 20:58:37        Page:    1 of    2
ABC,PATIENT                  Ward: ONE EAST
  HRN: 9111                   Room-Bed: B-12        Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)         Wt(kg): _____ (_____)

*(1) Additives:                Order number: 42        Type: PIGGYBACK
    MVI 1 ML
(2) Solutions:
    DEXTROSE 10% 1000 ML

                                DURATION:
(3) Infusion Rate: INFUSE OVER 10 MIN.    *(4) Start: 04/02/01 20:56
*(5) Med Route: IVPB                    *(6) Stop: 04/03/01 24:00
*(7) Schedule: QD                        Last Fill: *****
(8) Admin Times: 1440                    Quantity: 0
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses:
*(10)Orderable Item: MVI INJ
    Instructions:
(11) Other Print:

+      Enter ?? for more actions
DC Discontinue          ED Edit          AL Activity Logs
HD Hold                RN Renew
FL Flag                OC On Call
Select Item(s): Next Screen//Select Item(s): Next Screen// AL Activity Logs
(A)ctivity (L)abel (H)istory: H History Log

DEVICE: HOME// <Enter>    NT/Cache virtual TELNET terminal    Right Margin: 80//
<Enter>

-----
Patient: ABC,PATIENT                Status: DISCONTINUED

*(1) Additives:                Order number: 41        Type: PIGGYBACK
    MVI 1 ML
(2) Solutions:
    DEXTROSE 10% 1000 ML

                                DURATION:
(3) Infusion Rate: INFUSE OVER 10 MIN.    *(4) Start: 04/02/01 20:55
*(5) Med Route: IV                    *(6) Stop: 04/02/01 20:57
*(7) Schedule: QD                        Last Fill: *****
(8) Admin Times: 1440                    Quantity: 0
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses:
*(10)Orderable Item: MVI INJ
    
```

```

Instructions:
(11) Other Print:

(12) Remarks :
      Entry By: INPATIENT-MEDS,PHARMACIS      Entry Date: 04/02/01  20:55
Enter RETURN to continue or '^' to exit: <Enter>

```

Figure 4-72: Example: Edit an Order and Create a New Order (continued)

```

-----
Patient: ABC,PATIENT                      Status: ACTIVE
* (1) Additives:                          Order number: 42          Type: PIGGYBACK
      MVI 1 ML
(2) Solutions:
      DEXTROSE 10% 1000 ML
(3) Infusion Rate: INFUSE OVER 10 MIN.    * (4) DURATION: TST ISC ROOM
      Start: 04/02/01  20:56
* (5) Med Route: IVPB                    * (6) Stop: 04/03/01  24:00
* (7) Schedule: QD                       Last Fill: *****
(8) Admin Times: 1440                    Quantity: 0
* (9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses:
* (10) Orderable Item: MVI INJ
      Instructions:
(11) Other Print:

(12) Remarks :
      Entry By: INPATIENT-MEDS,PHARMACIS      Entry Date: 04/02/01  20:56
Enter RETURN to continue or '^' to exit: <Enter>
(A)ctivity (L)abel (H)istory: ^

```

Figure 4-73: Example: Edit an Order and Create a New Order (continued)

If the Dispense Drug tied to the Additive, Solution, and/or Orderable Item has a non-formulary status, this status will be displayed on the screen as “*N/F*” beside the Additive, Solution, and/or Orderable Item.

Change the Volume of a Solution

There are times when the pharmacist will need to change the volume of the solution for one specific order. The syringe type of order does have a separate volume prompt so the user will not have to add any steps. For other types, the user can simply enter an order and then edit it to change the volume, or use the following method:

An order calls for 25 ML of D5W, but when D5W is selected, there is no solution in the file with that volume.

- Choose the solution that is most like the one needed (e.g., D5W 50 ML). In this example, D5W 50 ML is now the selected solution.
- At the next prompt, enter the characters <^SOL> and choose the solution just entered.
- The next prompt is “SOLUTION: (DEFAULT) //”. Enter the characters <^VOL>.

- The prompt “VOLUME: (DEFAULT) //” will be displayed.
- Change the volume for this specific order to the desired volume (the example below shows 25). The terminal dialog follows:

```
Select SOLUTION:  D5W      50ML
INFUSION RATE:   ^SOL
Select SOLUTION: D5W//    <Enter>
SOLUTION:  D5W //    <Enter>
VOLUME:   50 ML //    25      ML
```

Figure 4-74: Example: Change the Volume of a Solution

4.2.4.3 Verify

Orders must be accepted and verified before they can become active and are included on the BCMA Virtual Due List (VDL). If AUTO-VERIFY is enabled for the pharmacist, new orders immediately become active after entry or finish (pending orders entered through CPRS). Orders verified by nursing prior to pharmacy verification are displayed on the profile under the active header marked with an arrow (->) to the right of the order number.

Note: AUTO-VERIFY is controlled by the ALLOW AUTO-VERIFY FOR USER field in the INPATIENT USER PARAMETERS file. For more information on the Auto-Verify function, see the Edit User Parameters section of the Pharmacy Supervisor Manual.

If the Dispense Drug or Orderable Item has a non-formulary status, this status will be displayed on the screen as “*N/F*” beside the Dispense Drug or Orderable Item.

```

NON-VERIFIED IV          Feb 28, 2002@13:56:44          Page: 1 of 2
ABC,PATIENT              Ward: ONE EAST
  HRN: 9111              Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)    Wt(kg): _____ (_____)
  Sex: MALE              Admitted: 05/03/00
  Dx: TESTING            Last transferred: *****

*(1) Additives:                      Type: PIGGYBACK
    MULTIVITAMINS 2 ML
(2) Solutions:
    0.9% SODIUM CHLORIDE 100 ML

(3) Infusion Rate: INFUSE OVER 125 MIN.    (4) DURATION:
    Med Route: IV                            (4) Start: 02/28/02 13:56
*(5) Schedule: QID                          (6) Stop: 03/30/02 24:00
*(7) Admin Times: 09-13-17-21              Last Fill: *****
*(8) Provider: PROVIDER,PAULA [es]         Quantity: 0
*(9) Orderable Item: MULTIVITAMINS INJ     Cum. Doses:
Instructions:
(11) Other Print:

+      Enter ?? for more actions
DC Discontinue      RN (Renew)          VF Verify
HD (Hold)           OC (On Call)        FL Flag
ED Edit            AL Activity Logs

Select Item(s): Next Screen// VF

      3      6      9      12      15      18      21      24
.....:.....:.....:.....:.....:.....:.....:.....:.....:
                          P
                          N

Next delivery time is 1330 ***

Action (PB) B// <Enter>      BYPASS
    
```

Figure 4-75: Example: Verify an Order

```

Inpatient Order Entry      Mar 07, 2002@13:01:56      Page:    1 of    1
ABC,PATIENT              Ward: ONE EAST
  HRN: 9111                Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)      Wt(kg): _____ (_____)
  Sex: MALE                Admitted: 05/03/00
  Dx: TESTING              Last transferred: *****

- - - - - A C T I V E - - - - -
1 d->in 0.9% SODIUM CHLORIDE 1000 ML 125 ml/hrC 03/07 03/07 E
2 d->in 5% DEXTROSE 50 ML 125 ml/hr          C 03/06 03/06 E
3   CEPHAPIRIN 1 GM                          C 03/04 03/09 A
   in DEXTROSE 5% IN N. SALINE 1000 ML QID
4 d->ASPIRIN CAP,ORAL                          O 03/07 03/07 E
   Give: 650MG PO NOW

- - - - - P E N D I N G - - - - -
5   in DEXTROSE 10% 1000 ML 125 ml/hr        ? ***** ***** P

Enter ?? for more actions
PI Patient Information          SO Select Order
PU Patient Record Update      NO New Order Entry
Select Action: Quit// 1
    
```

Figure 4-76: Example: Verify a "DONE" Order (CPRS Med Order)

```

EXPIRED IV (DONE)           Mar 07, 2002@13:02:26           Page:    1 of    2
ABC,PATIENT                 Ward: ONE EAST
  HRN: 9111                  Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)        Wt(kg): _____ (_____)

*(1) Additives:              Order number: 483           Type: ADMIXTURE
*(2) Solutions:
    0.9% SODIUM CHLORIDE 1000 ML *N/F*
                                DURATION:
*(3) Infusion Rate: 125 ml/hr      *(4) Start: 03/07/02 12:59
*(5) Med Route: IV                *(6) Stop: 03/07/02 12:59
BCMA ORDER LAST ACTION: 03/07/02 12:59 Infusing
*(7) Schedule:                  Last Fill: *****
(8) Admin Times:                Quantity: 0
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses:
(10) Other Print:
    Provider Comments: TESTING

(11) Remarks :
+      Enter ?? for more actions
DC (Discontinue)      RN (Renew)           VF (Verify)
HD (Hold)             OC (On Call)        FL Flag
ED (Edit)             AL Activity Logs
Select Item(s): Next Screen// VF Verify

          3          6          9          12          15          18          21          24
.....:.....:.....:.....:.....:.....:.....:.....:.....:
                A                                N

Next delivery time is 1500 ***

Action (PB) B// <Enter>    BYPASS

    Select one of the following:

        Y          Yes
        N          No

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

Figure 4-77: Example: Verify a "DONE" Order (CPRS Med Order), continued

Note: The user will have the ability to enter a Progress Note for a "DONE" priority order.

4.2.4.4 Hold

Only active orders may be placed on hold. Orders placed on hold will continue to show under the ACTIVE heading on the profiles until removed from hold. Any orders placed on hold through the pharmacy options cannot be released from hold using any of the CPRS options. An entry is placed in the order's Activity Log recording the user who placed/removed the order from hold and when the action was taken.


```

ACTIVE IV                               Sep 28, 2000 13:36:31           Page: 1 of 2
ABC,PATIENT                             Ward: 1 EAST
  HRN: 9111                               Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)                     Wt(kg): _____ (_____)

*(1) Additives:                          Order number: 333        Type: PIGGYBACK
<DIN>
  MULTIVITAMINS 1 ML
(2) Solutions:
  0.9% NACL 500 ML

                                     DURATION:
(3) Infusion Rate:                      *(4) Start: 09/27/00 13:00
*(5) Med Route: IVPB                    *(6) Stop: 10/02/00 16:54
*(7) Schedule: QID PRN                  Last Fill: *****
(8) Admin Times: 09-13-17-21           Quantity: 0
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses:
*(10)Orderable Item: MULTIVITAMINS INJ *N/F*
      Instructions: Doctor's order.

(11) Other Print: THIS IS AN INPATIENT IV EXAMPLE.
+ Enter ?? for more actions
DC Discontinue      ED Edit      AL Activity Logs
HD Hold            RN Renew
FL Flag            OC On Call
Select Item(s): Next Screen// HD Hold

NATURE OF ORDER: WRITTEN// <Enter>
REASON FOR ACTIVITY: <Enter>
    
```

Figure 4-78: Example: Place an Order on Hold

```

Inpatient Order Entry                 Sep 28, 2000 13:37:57           Page: 1 of 1
ABC,PATIENT                             Ward: 1 EAST
  HRN: 9111                               Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)                     Wt(kg): _____ (_____)
  Sex: MALE                               Admitted: 05/03/00
  Dx: TESTING                             Last transferred: *****

- - - - - A C T I V E - - - - -
1  MULTIVITAMINS 1 ML                   C 09/27 10/02 H
   in 0.9% NACL 500 ML QID PRN
- - - - - P E N D I N G - - - - -
2  AMPICILLIN INJ                       ? ***** ***** P
   Give: 1MG IVPB QID
3  PROPRANOLOL TAB                       ? ***** ***** P
   Give: 10MG PO TID

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

Figure 4-79: Example: Place an Order on Hold, continued

Notice that the order shows a status of “H” for hold in the right side of the Multivitamins order.

If the Dispense Drug tied to the Additive, Solution, and/or Orderable Item has a non-formulary status, this status will be displayed on the screen as “*N/F*” beside the Additive, Solution, and/or Orderable Item.

4.2.4.5 Renew

Only active orders or those that have been expired no more than four days may be renewed. The default Start Date/Time for a renewal order will be determined by one of the following methods:

1. If a BCMA action is recorded as Given or Refused on the renewed order and the order contains administration times, the new start date will be calculated by adding the frequency of the order to the scheduled administration time against which the last action was recorded. The new start date will be used if it is in the future and it is less than the original stop date.
2. If a BCMA action is recorded as Given or Refused on the renewed order and the order does not have administration times, the new start date will be calculated by adding the frequency of the order to the BCMA administered time and rounding up to the next hour. The new start date will be used if it is in the future and it is less than the original stop date.
3. If no BCMA action has been recorded on the renewed order or an action other than Given or Refused has been recorded, the start date for the renewed order will be calculated using the Default Start Date Calculation ward parameter. These parameters are as follows:
 - a. **Default Start Date Calculation = NOW**
 - b. The default Start Date/Time for the renewal order will be the order’s Login Date/Time.
 - c. **Default Start Date Calculation = USE NEXT ADMIN TIME**
 - d. The original order’s Start Date/Time, the new order’s Login Date/Time, Schedule, and Administration Times are used to find the next date/time the order is to be administered after the new order’s Login Date/Time. If the schedule contains “PRN”, any administration times for the order are ignored.
 - e. **Default Start Date Calculation = USE CLOSEST ADMIN TIME**
 - f. The original order’s Start Date/Time, the new order’s Login Date/Time, Schedule, and Administration Times are used to find the closest date/time the order is to be administered after the new order’s Login Date/Time. If

the schedule contains “PRN”, any administration times for the order are ignored.

Note: Only the regular finish and regular renew orders will calculate the start date using BCMA administered time. Speed finish and speed renew will not be affected.

After the new (renewal) order is accepted, the Start Date/Time for the new order becomes the Stop Date/Time for the original (renewed) order. The original order’s status is changed to RENEWED. The renewal and renewed orders are linked and may be viewed using the History Log function. Once an order has been renewed, the original order may not be renewed or edited.

Examples:

- 1a. Standard schedule of Q12H. Administration times of 09 – 21. The 09:00 dose was administered at 08:45. The frequency in the order is 720. The order is renewed at 09:45. The start time of the new order is 21:00.
- 1b. Standard schedule of Q12H. Administration times of 10 – 19. The 10:00 dose was administered at 10:15. The frequency is 720. The order is renewed at 10:30. The start time of the new order is 22:00. The frequency for the schedule is 12 hours, but the administration times are only 9 hours apart. The system uses the frequency, not the textual information in the ADMINISTRATION TIME field.
2. Non-standard schedule of Q7H. The last dose was administered at 11:35. The frequency is 420. The order is renewed at 13:00. The last dose (11:35) plus the seven hours would be 18:35. Then, it’s rounded up to the next hour. The start time of the new order is 19:00.
- 3a. (NOW) Order renewed at 13:52. The start time of the new order is 13:52.
- 3b. (NEXT) Scheduled administration times are 10 – 14 – 18 – 22. Order renewed at 14:35. The start time of the new order is 18:00.
- 3c. (CLOSEST) Scheduled administration times are 09 – 13 – 17 – 21. Order renewed at 13:20. The start time of the new order is 13:00.

4.2.4.6 Activity Log

This action allows the viewing of an activity log, label log, or a history log of the order. An activity log provides a trace of every action taken on an order since the original entry. If a history log is selected, it will find the first order, linked to the order where the history log was invoked from, then show an order view of each order

associated with it, in the order that they were created. When a label log is selected, it shows the print, tracking, and counting information on the labels for the order.

```

ACTIVE IV                               Feb 20, 2002@15:55:14           Page:    1 of    2
ABC,PATIENT                             Ward: 7A GEN
  PID: 101-10-2342                       Room-Bed: 726-B           Ht(cm): _____ (_____)
  DOB: 10/10/49 (52)                    Wt(kg): _____ (_____)

*(1) Additives:                          Order number: 445         Type: ADMIXTURE
      POTASSIUM CHLORIDE XXXXXXXXXXXX 35 MEQ
*(2) Solutions:
      DEXTROSE 5% 1/2 NS 1000 ML

*(3) Infusion Rate: 80 ml/hr              *(4) DURATION:
*(5) Med Route: IV                        *(6) Start: 02/20/02 15:46
BCMA ORDER LAST ACTION: 02/20/02 15:50 Infusing*
*(7) Schedule:                            Last Fill: 02/20/02 15:55
  (8) Admin Times:                          Quantity: 1
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses: 1
  (10) Other Print:

  (11) Remarks :
+      Enter ?? for more actions
DC Discontinue          RN Renew          VF (Verify)
HD Hold                 OC On Call          FL Flag
ED Edit                 AL Activity Logs
Select Item(s): Next Screen// AL Activity Logs
(A)ctivity (L)abel (H)istory: Activity Log

ACTIVITY LOG:
#  DATE          TIME          REASON          USER
=====
=
1  FEB 20,2002  15:55:09  COMPLETE          INPATIENT-MEDS,PHARMACIST
  Comment: DISCONTINUED (EDIT)

2  FEB 20,2002  15:55:12  VERIFY           INPATIENT-MEDS,PHARMACIST
  Comment: ORDER VERIFIED BY PHARMACIST
    
```

Figure 4-80: Example: Activity Log

```

(A)ctivity (L)abel (H)istory: Label Log
LABEL LOG:
#  DATE/TIME      ACTION          USER           #LABELS      TRACK
COUNT
=====
1  FEB 20,2002@15:55:12
    DISPENSED    TULSA,LARRY    1             ORDER ACTION
YES
Enter RETURN to continue or '^' to exit: <Enter>
Unique IDs for this order:
Label Date/Time  Unique ID      Status  Count BCMA Action -
Date/Time
02/20/02 15:55    739V443                YES
    
```

Figure 4-81: Example: Activity Log, continued

```

(A)ctivity (L)abel (H)istory: History Log
DEVICE: HOME// <Enter> NT/Cache virtual TELNET terminal   Right Margin: 80//
<Enter>

-----
Patient: ABC,PATIENT                               Status: DISCONTINUED
* (1) Additives:                Order number: 444                Type: ADMIXTURE
      POTASSIUM CHLORIDE XXXXXXXXXXXXX 35 MEQ
* (2) Solutions:
      DEXTROSE 5% 1/2 NS 1000 ML
                                           DURATION:
* (3) Infusion Rate: 80 ml/hr                * (4) Start: 02/20/02 15:46
* (5) Med Route: IV                          * (6) Stop: 02/20/02 15:55
BCMA ORDER LAST ACTION: 02/20/02 15:50 Infusing
* (7) Schedule:                               Last Fill: 02/20/02 15:46
      Admin Times:                             Quantity: 2
* (9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses: 2
      (10) Other Print:
(11) Remarks :
      Entry By: TULSA,LARRY                    Entry Date: 02/20/02 15:46
Enter RETURN to continue or '^' to exit: <Enter>

-----
Patient: ABC,PATIENT                               Status: ACTIVE
* (1) Additives:                Order number: 445                Type: ADMIXTURE
      POTASSIUM CHLORIDE XXXXXXXXXXXXX 35 MEQ
* (2) Solutions:
      DEXTROSE 5% 1/2 NS 1000 ML
                                           DURATION:
* (3) Infusion Rate: 80 ml/hr                * (4) Start: 02/20/02 15:46
* (5) Med Route: IV                          * (6) Stop: 02/20/02 24:00
BCMA ORDER LAST ACTION: 02/20/02 15:50 Infusing*
* (7) Schedule:                               Last Fill: 02/20/02 15:55
      Admin Times:                             Quantity: 1
* (9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses: 1
      (10) Other Print:
(11) Remarks :
      Entry By: INPATIENT-MEDS,PHA            Entry Date: 02/20/02 15:55
Enter RETURN to continue or '^' to exit: <Enter>
(A)ctivity (L)abel (H)istory:
    
```

Figure 4-82: Example: Activity Log (continued)

4.2.4.7 Finish

Note: Users must hold the PSJ RPHARM key for the ability to finish orders placed through EHR.

Note: Pharmacy Technicians must hold the PSJI PHARM TECH key for the ability to finish orders placed through EHR. These users are not allowed to verify orders, only finish orders.

When an order is placed or renewed by a provider through CPRS, the pharmacist needs to finish this order. The same procedures are followed to finish the renewed order as to finish a new order.

```

PENDING IV (ROUTINE)          Sep 07, 2000 16:11:42          Page:    1 of    2
ABC,PATIENT                  Ward: 1 EAST
  HRN: 9111                   Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)         Wt(kg): _____ (_____)

(1) Additives:                Type:
(2) Solutions:

(3) Infusion Rate:           (4) DURATION:
                                (4) Start: *****
                                REQUESTED START: 09/07/00 09:00
                                (6) Stop: *****
* (5) Med Route: IVPB         Last Fill: *****
* (7) Schedule: QID           Quantity: 0
(8) Admin Times: 01-09-15-20
* (9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses:
* (10) Orderable Item: AMPICILLIN INJ
      Instructions:
(11) Other Print:
      Provider Comments: THIS IS AN INPATIENT IV EXAMPLE.
+      Enter ?? for more actions
DC Discontinue                FL (Flag)
ED Edit                        FN Finish
Select Item(s): Next Screen// FN Finish
COMPLETE THIS ORDER AS IV OR UNIT DOSE? IV// IV
Copy the Provider Comments into Other Print Info? Yes// YES
IV TYPE: PB
CHOOSE FROM:
      A ADMIXTURE
      C CHEMOTHERAPY
      H HYPERAL
      P PIGGYBACK
      S SYRINGE
Enter a code from the list above.
  Select one of the following:
      A ADMIXTURE
      C CHEMOTHERAPY
      H HYPERAL
      P PIGGYBACK
      S SYRINGE
IV TYPE: PIGGYBACK
      **AUTO STOP 7D**
This patient is already receiving an order for the following drug in the same
class as AMPICILLIN INJ 2GM:

      AMPICILLIN CAP INJ          C 09/07 09/21 A
      Give: 250MG PO QID

Do you wish to continue entering this order? NO// Y
Select ADDITIVE: AMPICILLIN// <Enter>
ADDITIVE: AMPICILLIN// <Enter>
Restriction/Guideline(s) exist. Display? : (N/D): No// D
Dispense Drug Text:
  Refer to PBM/MAP PUD treatment guidelines
  RESTRICTED TO NEUROLOGY
(The units of strength for this additive are in GM)
Strength: 1 GM
Select ADDITIVE: <Enter>
Select SOLUTION: 0.9
      1 0.9% NACL          500 ML
    
```


2	0.9% NACL	100 ML
3	0.9% NACL	50 ML
4	0.9% NaCl	250 ML
	BT	
CHOOSE 1-4: 2	0.9% NACL	100 ML
INFUSION RATE:	<Enter>	

Figure 4-83: Example: Finish an Order Without a Duration

Note: When the EHR patch, OR*3*141, is installed on the user's system AND the order is electronically signed through the EHR package, the electronically signed abbreviation, [es] in brackets, will appear next to the Provider's Name on the order.

```

PENDING IV (ROUTINE)          Sep 07, 2000 16:23:46          Page: 1 of 2
ABC,PATIENT                  Ward: 1 EAST
  HRN: 9111                   Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)          Wt(kg): _____ (_____)

(1) Additives:                Type: PIGGYBACK
<DIN>
  AMPICILLIN 1 GM
(2) Solutions:
  0.9% NACL 100 ML

(3) Infusion Rate:           (4) DURATION:
                                (4) Start: 09/07/00 15:00
                                REQUESTED START: 09/07/00 09:00
                                (6) Stop: 09/14/00 16:54
*(5) Med Route: IVPB
*(7) Schedule: QID           Last Fill: *****
(8) Admin Times: 01-09-15-20 Quantity: 0
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses:
*(10)Orderable Item: AMPICILLIN INJ
      Instructions:
(11) Other Print: THIS IS AN INPATIENT IV EXAMPLE.
+      Enter ?? for more actions
AC Accept                    ED Edit
Select Item(s): Next Screen// AC

Orderable Item: AMPICILLIN INJ
Give: IVPB QID

9111 1 EAST 09/07/00
ABC,PATIENT B-12

AMPICILLIN 1 GM
0.9% NACL 100 ML

Dose due at: _____

THIS IS AN INPATIENT IV EXAMPLE
QID
01-09-15-20
M2***
Fld by: _____ Chkd by: _____
1[1]

Start date: SEP 7,2000 15:00 Stop date: SEP 14,2000 16:54

Is this O.K.? YES// <Enter>
    
```

Figure 4-84: Example: Finish an Order Without a Duration (continued)

The Requested Start date/time value is added to the order view to indicate the date/time requested by the provider to start the order. This date/time is the CPRS Expected First Dose when no duration is received from CPRS.

```

PENDING IV (ROUTINE)          Sep 07, 2000 16:11:42          Page:    1 of    2
ABC,PATIENT                   Ward: 1 EAST
  HRN: 9111                   Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)         Wt(kg): _____ (_____)

(1) Additives:                Type:
(2) Solutions:

                                DURATION: 10 DAYS
(3) Infusion Rate:           (4) Start: *****
*(5) Med Route: IVPB         (6) Stop: *****
*(7) Schedule: QID           Last Fill: *****
(8) Admin Times: 01-09-15-20  Quantity: 0
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses:
*(10)Orderable Item: AMPICILLIN INJ
    Instructions:
(11) Other Print:
    Provider Comments: THIS IS AN INPATIENT IV EXAMPLE.
+      Enter ?? for more actions
DC  Discontinue              FL  (Flag)
ED  Edit                     FN  Finish
Select Item(s): Next Screen// FN Finish
COMPLETE THIS ORDER AS IV OR UNIT DOSE? IV// IV
Copy the Provider Comments into Other Print Info? Yes// YES
IV TYPE: PB
CHOOSE FROM:
      A  ADMIXTURE
      C  CHEMOTHERAPY
      H  HYPERAL
      P  PIGGYBACK
      S  SYRINGE
Enter a code from the list above.

      Select one of the following:
      A  ADMIXTURE
      C  CHEMOTHERAPY
      H  HYPERAL
      P  PIGGYBACK
      S  SYRINGE

IV TYPE: PIGGYBACK
          **AUTO STOP 7D**

This patient is already receiving an order for the following drug in the same
class as AMPICILLIN INJ 2GM:

      AMPICILLIN CAP INJ          C  09/07  09/21  A
      Give: 250MG PO QID

Do you wish to continue entering this order? NO// Y
Select ADDITIVE: AMPICILLIN// <Enter>
ADDITIVE: AMPICILLIN// <Enter>
Restriction/Guideline(s) exist. Display? : (N/D): No// D

Dispense Drug Text:

      Refer to PBM/MAP PUD treatment guidelines
      RESTRICTED TO NEUROLOGY
      (The units of strength for this additive are in GM)
      Strength: 1 GM
    
```

Select ADDITIVE: <Enter>

Figure 4-85: Example: Finish an Order With a Duration

```

Select SOLUTION: 0.9
  1  0.9% NACL          500 ML
  2  0.9% NACL          100 ML
  3  0.9% NACL          50 ML
  4  0.9% NaCl         250 ML
      BT
CHOOSE 1-4: 2  0.9% NACL          100 ML
INFUSION RATE: <Enter>

PENDING IV (ROUTINE)      Sep 07, 2000 16:23:46      Page: 1 of 2
ABC, PATIENT              Ward: 1 EAST
  HRN: 9111                Room-Bed: B-12      Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)      Wt(kg): _____ (_____)

(1) Additives:                                Type: PIGGYBACK
<DIN>
  AMPICILLIN 1 GM
(2) Solutions:
  0.9% NACL 100 ML
(3) Infusion Rate:
(4) DURATION: 10 DAYS
      Start: 09/07/00 09:00
      Calc Start: 09/07/00 08:13
(5) Med Route: IVPB
(6) Stop: 09/17/00 09:00
      Calc Stop: 09/22/00 24:00
      Last Fill: *****
(7) Schedule: QID
(8) Admin Times: 01-09-15-20
      Quantity: 0
(9) Provider: INPATIENT-MEDS, PROVIDER [es] Cum. Doses:
(10) Orderable Item: AMPICILLIN INJ
      Instructions:
(11) Other Print: THIS IS AN INPATIENT IV EXAMPLE.
+ Enter ?? for more actions
AC Accept          ED Edit
Select Item(s): Next Screen// AC
    
```

Figure 4-86: Example: Finish an Order With a Duration (continued)

Note: When the EHR patch, OR*3*141, is installed on the user's system AND the order is electronically signed through the EHR package, the electronically signed abbreviation, [es] in brackets, will appear next to the Provider's Name on the order.

```
Orderable Item: AMPICILLIN INJ
Give: IVPB QID

9111 1 EAST 09/07/00
ABC,PATIENT B-12

AMPICILLIN 1 GM
0.9% NAACL 100 ML

Dose due at: _____

THIS IS AN INPATIENT IV EXAMPLE
QID
01-09-15-20
M2***
Fld by: _____ Chkd by: _____
1[[1]]

Start date: SEP 7,2000 09:00 Stop date: SEP 17,2000 09:00

Is this O.K.? YES// <Enter>
```

Figure 4-87: Example: Finish an Order With a Duration (continued)

The calculated Start Date/Time (Calc Start) and the Stop Date/Time (Calc Stop) will display according to how the following Inpatient Ward Parameters settings are configured:

- DAYS UNTIL STOP DATE/TIME:
- DAYS UNTIL STOP FOR ONE-TIME:
- SAME STOP DATE ON ALL ORDERS:
- TIME OF DAY THAT ORDERS STOP:
- DEFAULT START DATE CALCULATION:

The CPRS Expected First Dose will display as the default Start Date/Time when a duration is received from CPRS.

The default Stop Date/Time is derived from the CPRS Expected First Dose and the duration, when the duration is available from CPRS.

Note: When an order is placed through EHR prior to the next administration time of the schedule for the order, the Expected First Dose will be today at the next administration time. However, if the order is placed after the last administration time of the schedule for the order, the Expected First Dose will be the next administration time. This Expected First Dose date/time is seen through EHR and is always based on the logic of using "next administration time", regardless of what the site has set for the ward parameter. The Expected First Dose displayed in EHR displays as Requested Start Date/Time on the order view if no duration is received from EHR. The Expected First Dose displays as the default Start Date/Time on the order view when a duration is received.

When more than one IV Additive/Solution is tied to the same Orderable Item, the user shall be presented with a list of selectable Additives and Solutions to choose from for that order.

A prompt is added to the finishing process, "COMPLETE THIS ORDER AS IV OR UNIT DOSE?" to determine if the user should complete the order as either an IV or Unit Dose order. The prompt will be displayed only if the user selected the *Inpatient Order Entry* option to finish the order. Also, the prompt will appear only if the correct combination of the entry in the IV FLAG in the MEDICATION ROUTES file and the entry in the APPLICATION PACKAGES' USE field in the DRUG file for the order's Dispense Drug are found. The following table will help explain the different scenarios:

IV FLAG in the MEDICATION ROUTES file	Dispense Drug's Application Use	Which Order View screen will be displayed to the user	Special Processing
IV	IV	IV	None
IV	Unit Dose	Unit Dose	Prompt user to finish order as IV or Unit Dose
IV	IV and Unit Dose	IV	Prompt user to finish order as IV or Unit Dose
Non-IV	IV	IV	Prompt user to finish order as IV or Unit Dose
Non-IV	Unit Dose	Unit Dose	None
Non-IV	IV and Unit Dose	Unit Dose	Prompt user to finish order as IV or Unit Dose

If the Dispense Drug tied to the Additive, Solution, or Orderable Item has a non-formulary status, this status will be displayed on the screen as "*N/F*" beside the Additive, Solution, or Orderable Item.

IV Fluid Orders

IV Fluid orders will default to IV Admixture when finished by pharmacy. These orders are passed to pharmacy with data in the following fields:

- Additive with Strength (optional; multiple additives allowed)
- Solution with volume (required; multiple solutions allowed)
- Infusion Rate
- Priority
- Provider Comments (optional)

After the order is selected, default values for the remaining fields will be determined as is done for admixture orders entered through pharmacy, and an order view will then be displayed. The pharmacist may Edit, Discontinue, or Finish the order. If Finish is chosen, the order is checked to be sure the information is correct and complete, and the order is redisplayed with actions of Accept or Edit. If problems are found (provider or drugs inactive, start or stop dates invalid, etc.), the order cannot be accepted and finished until the problem is corrected. If a situation is encountered where more information is needed before the order can be processed, the user can enter an ^ and no changes will be saved for the order. If the order is correct, it may be accepted and the order will become active.

4.2.4.8 On Call

The pharmacist can place the order On Call or remove the order from an On Call status. The order placed On Call will not generate any labels. Providers cannot take any actions, except to discontinue the order, through ERH if the order is placed On Call by the pharmacist.

4.2.4.9 Flag

Note: This option is only available to those users who hold the PSJ RPHARM key.

The flag action is available to alert the users that the order is incomplete or needs clarification. Flagging is applied to any orders that need more information or corrections from the clinician. When the user flags the order, an alert is sent to the specified user defining the information that is needed to process the medication order. The specified user can send a return alert with the needed information. The Activity Log will record the flagging activities including acknowledgement that the alert was viewed. The flag action can be performed in either EHR or in Inpatient Medications.

When a flagged order appears on the order view, the order number on the right hand side will be highlighted using reverse video. The nurse, or any user without the PSJ RPHARM key, does not have the ability to flag or un-flag orders; however, they can view the flagged or un-flagged comments via the Activity Log.

```

Unit Dose Order Entry      Aug 22, 2002@07:44:06      Page: 1 of 1
GEORGIA, PAUL              Ward: 1 EAST
HRN: 2214                  Room-Bed: B-5             Ht(cm): _____ (_____)
DOB: 02/14/54 (48)        Wt(kg): _____ (_____)
Sex: MALE                  Admitted: 03/26/99
Dx: Sick                   Last transferred: *****
----- A C T I V E -----
1  DOXEPIIN CAP, ORAL      C 08/09 11/05 A
   Give: 200MG PO Q8H
2  WARFARIN TAB           C 08/07 11/05 A
   Give: 4MG PO TU-TH@2000
3  WARFARIN TAB           C 08/14 11/05 A
   Give: 7MG PO QPM

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

Figure 4-88: Example: Flagged Order

4.2.4.10 Speed Actions

From the list of orders in the patient’s profile, the pharmacist can select one or more of the orders on which to take action. The pharmacist can quickly discontinue this patient’s orders by selecting Speed Discontinue.

Note: Any orders placed through the Med Order Button cannot be Speed Discontinued.

4.2.5 IV Types

The following are the different types of IVs available in the Inpatient Medications package.

4.2.5.1 Admixture Type Order Entry An admixture is a Large Volume Parenteral (LVP) solution intended for continuous parenteral infusion. It is composed of any number of additives (including zero) in one solution. An admixture runs continuously at a specified flow rate. When one bottle or bag is empty, another is hung.

The default answer for the “START DATE/TIME:” prompt is the Expected First Dose from EHR when a duration is received. If no duration is received, the default answer is the NEXT or CLOSEST delivery time, or the order’s login date/time, depending on the DEFAULT START DATE CALCULATION field in the INPATIENT WARD PARAMETERS file.

For the “STOP DATE/TIME:” prompt, the default answer is derived from the EHR Expected First Dose plus the duration, if the duration is available.

When the duration is not received from EHR, the default Stop Date shown is the least of the LVP’S GOOD FOR HOW MANY DAYS site parameter or the NUMBER OF DAYS FOR IV ORDER field (found in the IV ADDITIVES file) for all additives in this order. The Stop Time is determined by the STOP TIME FOR ORDER site parameter. The pharmacist can choose to take the default answer for the Start and Stop Date/Times, or change it.

Note: At the “START DATE/TIME:” prompt, a future date/time can be entered. The user will not be prompted for label actions at the end of order entry until that START DATE/TIME has been reached. The order will appear, however, on all reports.

At the “STOP DATE/TIME:” prompt, a DOSE limit can be entered (e.g., if the user only wants one bottle on the admixture order being entered, enter a **1** at the stop time and the program calculates the stop time). For example:

STOP DATE/TIME: FEB 27,2000@2200 // **1** Dose limit FEB 26,2000 10:00

4.2.5.2 Piggyback-Type Order Entry

A piggyback is a small volume parenteral solution used for intermittent infusion. It is usually composed of any number of additives, including zero, and one solution. The piggyback is given on a schedule (e.g., Q6H). Once the medication flows in, the piggyback is removed, and another is not hung until the administration schedule calls for it.

The default answer for the “START DATE/TIME:” prompt is the Expected First Dose from EHR when a duration is received. If no duration is received, the default answer is the NEXT or CLOSEST delivery time, or the order’s login date/time, depending on the DEFAULT START DATE CALCULATION field in the INPATIENT WARD PARAMETERS file.

For the “STOP DATE/TIME:” prompt, the default answer is derived from the EHR Expected First Dose plus the duration, if the duration is available.

When the duration is not received from CPRS, the default Stop Date shown is the least of the PB’S GOOD FOR HOW MANY DAYS site parameter or the NUMBER OF DAYS FOR IV ORDER field (found in the IV ADDITIVES file) for all additives in this order. The Stop Time is determined by the STOP TIME FOR ORDER site parameter. The pharmacist can choose to take the default answer for the Start and Stop Date/Times, or change it.

Note: At the “START DATE/TIME:” prompt, a future date/time can be entered. The user will not be prompted for label actions at the end of order entry until that START DATE/TIME has been reached. The order will appear, however, on all reports.

At the “STOP DATE/TIME:” prompt, a dose limit can be entered (i.e., if the user only wants four bags on the piggyback order being entered, enter a **4** at the stop time) and the program calculates the stop date/time. For example:

STOP DATE/TIME: MARCH 12,2000@2200 // **4** Dose limit MAR 6,2000 03:00

4.2.5.3 Hyperal-Type Order Entry

Hyperalimentation (hyperal) is long-term feeding of a protein-carbohydrate solution. Electrolytes, fats, trace elements, and vitamins may be added. Since this solution generally provides all necessary nutrients, it is commonly referred to as Total Parenteral Nutrition (TPN). A hyperal is usually composed of many additives in two or more solutions (the hyperal must contain at least 1 solution). When the label prints, it shows the individual electrolytes that are contained in the additives that make up the hyperal order.

The default answer for the “START DATE/TIME:” prompt is the Expected First Dose from EHR when a duration is received. If no duration is received, the default answer is the NEXT or CLOSEST delivery time, or the order’s login date/time, depending on the DEFAULT START DATE CALCULATION field in the INPATIENT WARD PARAMETERS file.

For the “STOP DATE/TIME:” prompt, the default answer is derived from the EHR Expected First Dose plus the duration, if the duration is available.

When the duration is not received from CPRS, the default Stop Date shown is the least of the HYPERAL’S GOOD FOR HOW MANY DAYS site parameter or the NUMBER OF DAYS FOR IV ORDER field (found in the IV ADDITIVES file) for all additives in this order. The Stop Time is determined by the STOP TIME FOR ORDER site parameter. The pharmacist can choose to take the default answer for the Start and Stop Date/Times, or change it.

Note: At the “START DATE/TIME:” prompt, a future date/time can be entered. The user will not be prompted for label actions at the end of order entry until that Start Date/Time has been reached. The order will appear, however, on all reports.

At the “STOP DATE/TIME:” prompt, a dose limit can be entered (i.e., if the user only wants one bottle on the hyperal order being entered, enter a **1** at the stop time) and the program will calculate the stop time. For example:

STOP DATE/TIME: FEB 27,1992@2200 // 1 Dose limit FEB 26,1992 10:00

If the pharmacist enters additive quick codes, they will be handled like they are for an Admixture order.

4.2.5.4 Syringe-Type Order Entry

Once the pharmacist selects the syringe-type order, the system will prompt if the syringe is intermittent. If a syringe is continuous (not intermittent, the user will follow the same order entry procedure as in entering a hyperal or admixture order. If the syringe is intermittent, the user will follow the same order entry procedure as a piggyback order.

On all syringe orders, a separate volume prompt appears during order entry to allow any necessary volume changes to the solution (if any) for the order. The pharmacist should use caution during order entry of syringe types to ensure that the total volume for the syringe additive and solution is not greater than the total syringe volume. There is no “BOTTLE” prompt as in other order entry types, and a separate “SYRINGE SIZE” prompt appears during order entry to allow the user to enter the syringe size for the order. All syringe sizes are printed on the labels.

If the pharmacist uses additive quick codes for an intermittent syringe order, they will be handled like they are for piggyback orders. If quick codes are used for a continuous syringe order, they will be handled like they are for admixture orders.

4.2.5.5 Chemotherapy-Type Order Entry

Chemotherapy is the treatment and prevention of cancer with chemical agents. A chemotherapy IV order can be one of three types: admixture, piggyback, or syringe. Once the pharmacist selects chemotherapy as the type of order, the system will prompt the user to further identify the order as admixture, piggyback, or syringe. Once the type is established, the prompts are the same as the examples for regular admixture, piggyback, and syringe. All chemotherapy orders have warnings on the labels.

4.2.6 Profile (IV)

[PSJI PROFILE]

The *Profile (IV)* option shows all IV medications a patient has received during his most recent episode of care. The pharmacist is allowed to view all information on file for any or all orders in the profile. Unlike the *Patient Profile (Unit Dose)* option, this option does not allow the user to print a report. To print a report, the *Patient Profile Report (IV)* option under the *Reports (IV)* option must be used.

After selecting the patient for whom a profile view is needed, the length of the profile is chosen. The user may choose to view a long or short profile or, if the user decides not to view a profile for the chosen patient, NO Profile can be selected. When NO Profile is chosen, the system will return to the “Select PATIENT:” prompt and the user may choose a new patient.

Each profile includes:

- Patient Name
- Ward Location
- Patient Health Record Number (HRN)
- Room-Bed Location
- Height & date/time of measurement
- Weight & date/time of measurement
- Date of Birth
- Sex of Patient
- Admission Date
- Admitting Diagnosis
- Verified Drug Allergies and Adverse Reactions

The patient’s orders are displayed depending on the type of profile chosen. The long profile shows all orders, including discontinued and expired orders, while the short profile omits discontinued and expired orders. Orders are sorted first by status, with active orders listed first, followed by pending and non-active orders. Within each status, orders are displayed in order of entry, with the most recent order first.

The information is displayed for each order under the following column headings:

- **Number** - The user can choose a number at the left of the screen to view detailed information about the orders, or to look at the activity log.
- **Additive** - The data listed under Additive includes strength of additive, type and volume of solution, and infusion rate or schedule.
- **Last fill** - The number of labels printed and the date and time of the last one printed.
- **Type of order** - Type will be **A** for admixture, **P** for piggyback, **H** for hyperal, **C** for chemotherapy, or **S** for syringe.
- **Start and stop dates**—The start and stop dates for this specific order
- **Status of the order**—(Column marked Stat) **A** for active, **P** for pending, **E** for expired, **D** for order discontinued, **O** for on call, and **H** for hold.

After the patient profile is displayed, the user can choose one or more order numbers (e.g., 1, 3, 5) for a detailed view of the order(s) or, <Enter> can be pressed when a order view is not needed.

The detailed view of the order presents all available data pertaining to the order. This includes patient identification and location, status of the order, additive(s) with strength, solution(s), infusion rate, medication route, the schedule, administration times, remarks, and other print information. Other information includes type of order, IV room, start and stop date and time, entry date and time (when order was entered into the system), last fill (date and time when last label was printed), and quantity (the number of labels printed). The entry by field of the user placing the order, provider, provider comments, and the number of cumulative doses is also included.

After the detailed view is displayed, the user may select the activity log, label log, or both for the order. The activity log provides a trace of every action taken on an order since the original entry. The activity log contains a log number, the date and time of the activity, the reason of activity (i.e., edit, renew, place on call, or discontinue an order), and the user entering the activity. The reason for activity comment allows the user to explain why the activity was necessary. Also, the system will display the field(s) that was affected, the original data contained in that field, and what it was changed to as a result of the activity.

The label log contains a log number, date/time the label is printed, action on the order, user, number of labels printed, track (possible entries are individual, scheduled, suspended, order action labels, or other), and count (which indicates whether the label was counted for that particular day).

```
Select IV Menu Option:  Profile (IV
Select PATIENT:        ABC,PATIENT          9111  08/18/20   ONE EAST
```

Figure 4-89: Example: Profile Report

```

Patient Information      Mar 20, 2001@16:50:50      Page: 1 of 1
ABC,PATIENT            Ward: ONE EAST
  HRN: 9111             Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)   Wt(kg): _____ (_____)
  Sex: MALE             Admitted: 05/03/00
  Dx: TESTING           Last transferred: *****

Allergies/Reactions: No Allergy Assessment
Inpatient Narrative:
Outpatient Narrative:

Enter ?? for more actions
PU Patient Record Update      NO New Order Entry
DA Detailed Allergy/ADR List  IN Intervention Menu
Select Action: View Profile//  <Enter> View Profile

SHORT, LONG, or NO Profile?  SHORT//  <Enter> SHORT
    
```

Figure 4-90: Example: Profile Report (continued)

```

IV Profile              Mar 20, 2001@16:51:28      Page: 1 of 1
ABC,PATIENT            Ward: ONE EAST
  HRN: 9111             Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)   Wt(kg): _____ (_____)
  Sex: MALE             Admitted: 05/03/00
  Dx: TESTING           Last transferred: *****

#  Additive                Last fill          Type  Start  Stop  Stat
----- Active -----
1  MVI 100 ML               MAR 19 14:57      #2   P     03/19  03/20  A
   in 0.9% SODIUM CHLORIDE 100 ML QID
----- Pending -----
2  FLUOROURACIL INJ,SOLN    **  N/P  **   #0     *****  *****  P
   Give: 100MG/2ML PO QD
3  TIMOLOL SOLN,OPH        **  N/P  **   #0   P     *****  *****  P
   Give: IV Q12H

Enter ?? for more actions
PI Patient Information        SO Select Order
PU Patient Record Update     NO (New Order Entry)
Select Action: Quit// 1
    
```

Figure 4-91: Example: Profile Report (continued)

```

ACTIVE IV                               Mar 20, 2001@16:51:56           Page:    1 of    2
ABC,PATIENT                             Ward: ONE EAST
  HRN: 9111                               Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)                     Wt(kg): _____ (_____)

*(1) Additives:                          Order number: 64         Type: PIGGYBACK
     MVI 100 ML
(2) Solutions:
     0.9% SODIUM CHLORIDE 100 ML
                                     DURATION:
(3) Infusion Rate: INFUSE OVER 10 MIN.   *(4) Start: 03/19/01 11:30
*(5) Med Route: IVPB                       *(6) Stop: 03/20/01 24:00
*(7) Schedule: QID                          Last Fill: 03/19/01 14:57
(8) Admin Times: 09-13-17-21               Quantity: 2
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses: 9
*(10)Orderable Item: MULTIVITAMINS INJ
     Instructions:
(11) Other Print: TESTING

+      Select either "AL" , "LL" or "AL,LL" for both
AL View Activity Log  LL View Label Log
Select Item(s): Next Screen// AL View Activity Log

ACTIVITY LOG:
# DATE      TIME      REASON      USER
=====
=
1 MAR 20,2001 16:42:56 EDIT      INPATIENT-MEDS,PHARMACIST
  Comment:

      Field: 'OTHER PRINT INFO'
  Changed from: ''
      To: 'TESTING'

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

Figure 4-92: Example: Profile Report, sample report

4.2.7 Inpatient Profile

[PSJ PR]

The *Inpatient Profile* option allows the user to view the Unit Dose and IV orders of a patient simultaneously. The user can conduct the Inpatient Profile search by patient, ward or ward group. If the selection to sort is by ward, the administration teams may be specified. The default for the administration team is ALL and multiple teams may be entered. If selecting by ward or ward group, the profile may be sorted by patient name or room-bed.

When the user accesses this option from the Unit Dose module for the first time within a session, a prompt is displayed to select the IV room. When only one active IV room exists, it will be selected automatically. The user is then given the label and report devices defined for the IV room chosen. If no devices have been defined, the

user will be given the opportunity to choose them. If this option is exited and then re-entered within the same session, the current label and report devices are shown.

In the following description, viewing a profile by patient is discussed, however, ward and ward group are handled similarly.

After the user selects the patient for whom a profile view is needed, the length of profile is chosen. The user can choose to view a long or short profile or, if the user decides not to view a profile for the chosen patient, "NO Profile" can be selected. When "NO Profile" is chosen, the system will return to the "Select PATIENT:" prompt and the user may choose a new patient.

Once the length of profile is chosen, the user can print the patient profile (by accepting the default or typing **P** at the "SHOW PROFILE only, EXPANDED VIEWS only, or BOTH: Profile/" prompt), an expanded view of the patient profile (by typing **E**), or both (by typing **B**). The expanded view lists the details of each order for the patient. The activity logs of the orders can also be printed when the expanded view or both, the expanded view and profile, are chosen.

The advantage of this option is that by viewing the combined Unit Dose/IV profile of a patient, the user can quickly determine if any corrections or modifications need to be made for existing or future orders based on Unit Dose or IV medications already being received by the patient. Sometimes the pharmacist must revise a prospective order for a patient based on the Unit Dose or IV medications already prescribed for the patient.

Note: For Unit Dose orders, the long activity log shows all activities of an order, while the short activity log excludes the field changes, and shows only the major activities. For IV orders, the short and long activity logs give the user the same results.

```
Select IV Menu Option:  IPF  Inpatient Profile

Select by WARD GROUP (G), WARD (W), or PATIENT (P):  Patient

Select PATIENT:      ABC,PATIENT           123-45-9111   08/18/20   ONE EAST

Select another PATIENT:  <Enter>

SHORT, LONG, or NO Profile?  SHORT//  <Enter>   SHORT

Show PROFILE only, EXPANDED VIEWS only, or BOTH: PROFILE//  EXPANDED VIEWS

Show SHORT, LONG, or NO activity log?  NO//  LONG

Select PRINT DEVICE:  <Enter>  NT/Cache virtual TELNET terminal
```

Figure 4-93: Example: Inpatient Profile


```

                I N P A T I E N T   M E D I C A T I O N S           04/02/01  21:19
                SITE:  ALBANY (500)
-----
ABC,PATIENT                Ward: ONE EAST
HRN: 9111                  Room-Bed: B-12                Ht(cm): _____ (_____)
DOB: 08/18/20 (80)        Wt(kg): _____ (_____)
Sex: MALE                  Admitted: 05/03/00
Dx: BREATHING DIFFICULTY
Allergies: No Allergy Assessment
ADR:
-----
Patient: ABC,PATIENT                Status: ACTIVE

*(1) Additives:                Order number: 43                Type: PIGGYBACK
    MVI 1 ML
(2) Solutions:
    DEXTROSE 10% 1000 ML
(3) Infusion Rate: INFUSE OVER 10 MIN.
*(4) DURATION:
    Start: 04/03/01 12:00
*(5) Med Route: IVPB          *(6) Stop: 04/03/01 24:00
*(7) Schedule: QID            Last Fill: *****
(8) Admin Times: 09-13-17-21  Quantity: 0
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses:
*(10)Orderable Item: MVI INJ
    Instructions:
(11) Other Print:

(12) Remarks :
    Entry By: INPATIENT-MEDS,PHARMACIS      Entry Date: 04/02/01 21:04
Enter RETURN to continue or '^' to exit: <Enter>

ACTIVITY LOG:
#  DATE        TIME        REASON        USER
=====
1  APR 2,2001  21:01:31  EDIT          INPATIENT-MEDS,PHARMACIST
    Comment: Order created due to edit
2  APR 2,2001  21:05:15  EDIT          INPATIENT-MEDS,PHARMACIST
    Comment:
Enter RETURN to continue or '^' to exit: <Enter>
    
```

Figure 4-94: Example: Inpatient Profile (continued)

4.3 Order Check

Order checks (allergy/adverse drug reactions, drug-drug interactions, duplicate drug, and duplicate class) are performed when a new medication order is placed through either the Inpatient Medications or CPRS applications. They are also performed when medication orders are renewed or during the finishing processes. This functionality will ensure the user is alerted to possible adverse drug reactions and will reduce the possibility of a medication error due to the omission of an order check when a non-active medication order is renewed.

The following actions will initiate an order check:

- Action taken through Inpatient Medications to enter a medication order will initiate order checks (allergy, drug-drug interaction, duplicate drug, and duplicate class) against existing medication orders.
- Action taken through Inpatient Medications to finish a medication order placed through EHR will initiate order checks (allergy, drug-drug interaction, duplicate drug, and duplicate class) against existing medication orders.
- Action taken through IV Menu to finish a medication order placed through EHR will initiate order checks (allergy, drug-drug interaction, duplicate drug, and duplicate class) against existing medication orders.
- Action taken through Inpatient Medications to renew a medication order will initiate order checks (allergy, drug-drug interaction, duplicate drug, and duplicate class) against existing medication orders.
- Action taken through IV Menu to renew a medication order will initiate order checks (allergy, drug-drug interaction, duplicate drug, and duplicate class) against existing medication orders.

The following are the different items used for the order checks:

- Checks each Dispense Drug within the Unit Dose order for allergy/adverse drug reactions.
- Checks each Dispense Drug within the Unit Dose order against existing orders for drug-drug interaction, duplicate drug, and duplicate class.
- Checks each additive within an IV order for drug-drug interaction, duplicate drug, and duplicate class against solutions or other additives within the order.
- Checks each IV order solution for allergy/adverse reactions.
- Checks each IV order solution for drug-drug interaction against other solutions or additives within the order.
- Checks each IV order additive for allergy/adverse reaction.
- Checks each IV order additive for drug-drug interaction, duplicate drug, and duplicate class against existing orders for the patient.
- Checks each IV order solution for drug-drug interaction against existing orders for the patient.

Override capabilities are provided based on the severity of the order check, if appropriate.

Order Checks warnings will be displayed/processed in the following order:

- Duplicate drug or class
- Critical or significant drug-drug interactions
- Critical or significant drug-allergy interactions

These checks will be performed at the Dispense Drug level. All pending, non-verified, active, renewed, and active Outpatient orders will be included in the check. Order checks for IV orders will use the Dispense Drugs linked to each additive/solution in the order. If the order is entered by Orderable Item only, these checks will be performed at the time the Dispense Drug(s) are specified. The checks performed include:

- Duplicate Drug - If the patient is already receiving an order containing the Dispense Drug selected for the new order, the duplicate order will be displayed and the user will be asked whether or not to continue. Entry of duplicate drugs will be allowed. Only Additives will be included in the duplicate drug check for IV orders. The solutions are excluded from this check.
- Duplicate Class - If the patient is already receiving an order containing a Dispense Drug in the same class as one of the Dispense Drugs in the new order, the order containing the drug in that class will be displayed and the user will be asked whether or not to continue. Entry of drugs in the same class will be allowed.
- Drug-Drug Interactions - Drug-drug interactions will be either critical or significant. If the Dispense Drug selected is identified as having an interaction with one of the drugs the patient is already receiving, the order the new drug interacts with will be displayed.
- Drug-Allergy Interactions - Drug-allergy interactions will be either critical or significant. If the Dispense Drug selected is identified as having an interaction with one of the patient's allergies, the allergy the drug interacts with will be displayed.

Note: For a Significant Interaction, the pharmacist is allowed to enter an intervention, but one is not required. For a Critical Interaction, the pharmacist must enter an intervention before continuing.

5.0 Maintenance Options

5.1 Unit Dose

All of the Unit Dose Maintenance Options are located on the *Unit Dose Medications* menu.

5.1.1 Edit Inpatient User Parameters

[PSJ UEUP]

The *Edit Inpatient User Parameters* option allows users to edit various Inpatient User parameters. The prompts that will be encountered are as follows:

“PRINT PROFILE IN ORDER ENTRY:”

Enter **YES** for the opportunity to print a profile after entering Unit Dose orders for a patient.

“INPATIENT PROFILE ORDER SORT:”

This is the sort order in which the Inpatient Profile will show inpatient orders. The options will be sorted either by medication or by start date of order. Entering the words “**Medication Name**” (or the number **0**) will show the orders within schedule type (continuous, one-time, and then PRN) and then alphabetically by drug name. Entering the words “**Start Date of Order**” (or the number **1**) will show the order chronologically by start date, with the most recent dates showing first and then by schedule type (continuous, one-time, and then PRN).

<p>Note: The Profile first shows orders by status (active, non-verified, and then non-active).</p>

“LABEL PRINTER:”

Enter the device on which Medication Administration Record (MAR) labels are to be printed.

“USE WARD LABEL SETTINGS:”

Enter **YES** to have the labels print on the printer designated for the ward instead of the printer designated for the pharmacy.

5.1.2 Edit Patient's Default Stop Date

[PSJU CPDD]

Note: Locked with the PSJU PL key.

The “UD DEFAULT STOP DATE/TIME:” prompt accepts the date and time entry to be used as the default value for the STOP DATE/TIME of the Unit Dose orders during order entry and renewal processes. This value is used only if the corresponding ward parameter is enabled. The order entry and renewal processes will sometimes change this date and time.

Note: If the Unit Dose order, being finished by the user, is received from CPRS and has a duration assigned, the UD DEFAULT STOP DATE/TIME is displayed as the Calc Stop date/time.

When the SAME STOP DATE ON ALL ORDERS parameter is set to yes, the module will assign a default stop date for each patient. This date is initially set when the first order is entered for the patient. A new default stop date is assigned for the patient when an order is renewed and the order's stop date plus three days is greater than the current default stop date. This date is shown as the default value for the stop date of each order entered for the patient. However, if a day or dose limit exists for the selected Orderable Item, and the limit is less than the default stop date, the earlier stop date and time will be displayed.

5.2 IV Maintenance Options

All of the IV Maintenance Options are located on the *IV Menu* option. Non-Standard Schedules is not an option on a menu, but is listed here for informational purposes.

5.2.1 Change Report/Label Devices (IV)

[PSJI DEVICE]

The *Change Report/Label Devices (IV)* option allows the user to change the print output devices. When the user first signs into the IV module, the current default devices will be shown. This option does not change the default devices that are defined in the LABEL device or REPORT device site parameters, but will queue the report to the selected device.

This would be useful if the user wishes to print a short report to the screen. The new settings will remain unless the user changes them again or exits the system, at which time the settings will revert to the output devices defined in the site parameters.

5.2.2 Change to Another IV Room (IV)

[PSJI CHANGE]

The *Change to Another IV Room (IV)* option allows the user to change from one IV room to another. This option can be selected from the main IV Medications menu, which allows the user to change IV rooms, without having to leave and re-enter the IV module, while entering orders in different IV rooms. Once the new IV room has been selected, the current IV label and report devices, as defined in the site parameters, are displayed. However, if the IV label and/or report device has not been defined in the site parameters, the user must select the IV label and/or report device for the output.

5.2.3 Non-Standard Schedules

When the user uses non-standard schedules (those not included in the ADMINISTRATION SCHEDULE file) during order entry and does not specify administration times, the IV module will not compute the administration times. For example, for Q5H (every 5 hours), the dose will be given every 300 minutes beginning at the start time of the IV order.

6.0 Pick List Menu

[PSJU PLMGR]

Note: All options under the *Pick List Menu* are locked with the PSJU PL key.

```
Select Unit Dose Medications Option: Pick List Menu
```

```
Select PIck List Menu Option: ?
```

```

      ENter Units Dispensed
      EXtra Units Dispensed
      Pick List
RRS   Report Returns
RPL   Reprint Pick List
      Send Pick List to ATC
      Update Pick List

```

Figure 6-1: Example: Pick List Menu

6.1 Pick List

[PSJU PL]

The *Pick List Menu* option is used to create the *Pick List* report. When selecting this option, the user will encounter several prompts.

- “WARD GROUP:” - the ward group for which the pick list is to be run. Only pharmacy-type ward groups are selectable.
- “START DATE/TIME:” - the start date and time of the pick list. This is the date and time the nurses will start administering the drugs from this pick list. The user is only prompted for the start date/time on the first pick list run for each ward group. For each pick list run afterwards, the *Pick List* option automatically sets the start date/time as one minute past the stop date/time of the previous pick list.
- “STOP DATE/TIME:” - the stop date and time of the pick list. This is the date and time the nurses will stop administering the drugs from this pick list (and start using the next one). The stop date is automatically calculated by the “LENGTH OF PICK LIST (in hours):” parameter located in the *Ward Groups* option under the *SUPERVISOR’S MENU* option.

Each pick list is normally sorted by the following patient information:

- TEAM - The administering team (cart).
- WARD - The wards found under the selected ward group.

- ROOM-BED - The room and bed the patient is currently occupying.
- PATIENT NAME - Patients on the wards in the selected ward group.

And for each patient, the orders are sorted by:

- SCHEDULE TYPE - The schedule type of the patient's orders.
- DRUG NAME - The names of each drug in the patient's orders. If a nurse has verified an order, but it has not been verified by a pharmacist, and no Dispense Drugs have been chosen, the Orderable Item will print. Otherwise, the pick list will print the Dispense Drug.

Note: The way the pick list sorts the patient information can be manipulated for each ward. If no data is entered into the INPATIENT WARD PARAMETERS file, the pick list will not sort by TEAM. By editing the corresponding ward parameters, the supervisor can choose not to sort by WARD, to sort by BED-ROOM instead of ROOM-BED, or not to sort by either ROOM or BED.

In addition to the previous sort information, the pick list will show (for each order):

- DOSAGE ORDERED
- MED ROUTE
- SCHEDULE
- ADMIN TIMES (if entered)
- SPECIAL INSTRUCTIONS (if entered)
- START and STOP DATE/TIMES
- UNITS PER DOSE
- UNITS NEEDED
- UNITS DISPENSED

The UNITS NEEDED are calculated by the pick list. Under the "Units Needed" column for an order, the pharmacist will see a number or one of the following codes:

- HD - the order has been placed on hold.
- NV - the order has been verified by a nurse, but not by a pharmacist.

- OE - the order was being edited at the time the pick list was run.
- OI - the order is invalid because of missing or invalid data.
- SM - the order is a SELF MED.
- WS - the drug is a Ward Stock item or a Controlled Substance.

When a patient has orders that have expired or have been discontinued within 24-hours prior to the start date/time, those orders will show either before or after the active orders. This will depend on how the “PRINT NON-ACTIVE ORDERS FIRST” option is set-up in the *Ward Groups* option under the *SUPERVISOR'S MENU*.

The pick list will start a new page for each team, and if sent to a printer, will print “Filled by:” and “Checked by:” lines for signatures after each team.

As with most other Unit Dose reports, the pick list can be queued, but it has an added feature unique to the *Pick List* option. After the pick list has been queued, the “DEVICE:” prompt will be displayed; if an up caret (^) or period (.) is entered instead of a device, the pick list will still run and compile its data but will not be printed. This is most useful if the user does not need a printout until after an update has been run. The *RPL Reprint Pick List* option may also be used to print the compiled pick list.

If the start date of the last pick list run for a ward group has not passed, the user can re-run the pick list. After selecting the ward group, the *Pick List* option will automatically ask if the pick list is to be re-run. The user will then be able to enter a new stop date. Re-running a pick list deletes all of the old data and recalculates all of the orders. The user can also update the pick list as long as the start date has not passed.

```
Select PICK List Menu Option:  Pick List

Select WARD GROUP NAME:      TEAM 2 GROUP PHARMACY

The PICK LIST for this WARD GROUP was last run on 02/25/01  21:55
  for 04/16/99  15:01 through 02/21/01  21:55

Start date/time for this pick list: 02/21/01  21:56
Enter STOP date/time for this pick list: FEB 23,2001@21:55// <Enter> FEB 23,
2001@21:55)

Print on DEVICE: 0;80;999999  VIRTUAL

...this may take a while...(you really should QUEUE the pick list)...
```

Figure 6-2: Example: Pick List Report

(101)	PICK LIST REPORT	02/25/01	21:56
Ward group: TEAM 2 GROUP			Page: 1
	For 02/21/01 21:56 through 02/23/01 21:55		
Team: GENERAL MED ONE			
Room-Bed	Patient	Units	Units
	Medication	U/D Needed	Disp'd
	ST		
===== WARD: GEN MED =====			
A-1	ALASKA, FRED (8888):		
	LORAZEPAM 1MG TAB	C	2 6
	Give: 2MG ORAL TID		
			09-13-17
	Start: 02/20/01 17:00	Stop: 02/22/01 24:00	
	METHYLDOPA 500MG TAB	C	2 4
	Give: 1000MG ORAL BID		
			09-17
	Start: 02/20/01 17:00	Stop: 02/22/01 24:00	
	WARFARIN 2MG TABS	C	1 1
	Give: 2MG ORAL QPM		
			21
	Start: 02/20/01 21:00	Stop: 02/22/01 24:00	
===== WARD: GEN MED =====			
A-2	CALIFORNIA, JAMES (1111):		
	No orders found for this patient.		

Figure 6-3: Example: Pick List, sample report 1

Room-Bed	Patient Medication	ST	Units U/D Needed	Units Disp'd
===== WARD: ONE EAST =====				
B-12	ABC,PATIENT (9111):			
	ALLOPURINOL 100MG S.T. Give: 100MG ORAL Q6H	C	1	6
	Start: 02/22/01 14:00	Stop: 02/24/01 24:00	02-08-14-20	
	ASPIRIN BUFFERED 325MG TAB Give: 325MG ORAL QD	C	1	1
	Start: 02/20/01 14:40	Stop: 02/22/01 24:00	1440	
	ASPIRIN BUFFERED 325MG TAB Give: 650MG PO QD	C	2	0
	Start: 02/26/01 14:40	Stop: 02/25/01 21:24	1440	
	TESTING			
	ASPIRIN BUFFERED 325MG TAB Give: 650MG ORAL QD	C	2	HD
	Start: 02/26/01 14:40	Stop: 02/28/01 24:00	1440	
	ATROPINE 0.4MG H.T. Give: 0.8MG ORAL QD	C	1	0
	Start: 02/24/01 14:40	Stop: 02/25/01 21:23	1440	
	BACLOFEN 10MG TABS Give: 10MG ORAL Q12H	C	1	3
	Start: 02/22/01 21:00	Stop: 02/24/01 24:00	0900-2100	
	FLUPHENAZINE 0.5MG/ML ELIXIR (OZ) Give: 1MG/2ML ORAL QD	C	1	1
	Start: 02/23/01 14:40	Stop: 02/25/01 21:23	1440	
	MULTIVITAMIN TABLETS Give: 1 TABLET IV QD	R	1	0
	Start: 02/26/01 14:40	Stop: 02/28/01 24:00	1440	
===== WARD: ONE EAST =====				

B-1	GEORGIA, PAUL (9555):
	No orders found for this patient.

	FILLED BY: _____
	CHECKED BY: _____

Figure 6-4: Example: Pick List, sample report 2

6.2 Enter Units Dispensed

[PSJU PLDP]

The *ENter Units Dispensed* option allows the pharmacist to enter units actually dispensed to the cart for each selected pick list. The pharmacist can even enter the units dispensed for a pick list that has been run, but for which the start time has not yet come.

The user can choose the length of patient profile needed to view. The long profile lists all orders, while the short profile lists only active orders. The user will be asked to select the order on which an action is to be taken.

Note: If an update is run after units dispensed are entered, the units dispensed are lost for those orders actually updated.

The user will be prompted, “DO YOU WANT TO SEE PRN MEDS ONLY?”. If the user answers **YES**, only those orders that have PRN as a SCHEDULE TYPE or PRN as part of the schedule will be shown.

This report will print the orders in the sequence that they are printed in the pick list. When using this option, the pharmacist or technician should have a printed copy of the selected pick list, marked with the units dispensed. For each order, the drug name and the number of units needed will be shown. If the units needed show as a code on the printed copy (e.g., **HD** for order placed on hold), they will show as 0 (zero) in this option.

For each order that does not have a WS or OI code, the pharmacist will be prompted to enter the actual number of units dispensed. There are a variety of ways to facilitate this process, especially if the units dispensed is the same as the units needed:

- If the units dispensed is the same as the units needed, simply press **<Enter>**. The units needed will be accepted as the units dispensed.
- If the pharmacist wants to skip over to the next patient, enter an up caret **<^>**. If the user wants to skip to a specific patient enter an up caret and the first few letters of the patient’s last name **<^XXXX>**. Enter two up carets **<^^>** to jump to

the next team. Enter three up carets <^^^> to jump to the end of the pick list. Any orders skipped over will use the units needed as the units dispensed when the pick list is filed away.

Once the pharmacist has reached the end of the pick list, the prompt, “ARE YOU FINISHED WITH THIS PICK LIST? YES//” will be displayed. By entering **N** here, the same pick list is displayed again, giving the pharmacist the chance to edit the data just entered. Simply press <**Enter**> at this prompt when finished with the pick list.

Once the pharmacist has finished with a pick list, the prompt, “MAY I FILE THE DATA IN THIS PICK LIST AWAY? NO//” is displayed. Enter **N** (or press <**Enter**>) if the need to enter or edit the data at a later date is desired. Enter **Y** if no more data is to be entered or edited. When a pick list is filed away, the data is placed in the respective patients’ orders and in a file used for printing cost reports. If an order does not have the units dispensed entered, the units needed value is used.

```

Select PICK List Menu Option: ENTER Units Dispensed

Select WARD GROUP or PICK LIST: <Enter> TEAM 2 GROUP PHARMACY

 1 From: 05/12/96 09:01 Through: 05/14/96 09:00
 2 From: 05/14/96 09:01 Through: 05/16/96 09:00
 3 From: 05/16/96 09:01 Through: 05/18/96 09:00
 4 From: 05/18/96 09:01 Through: 05/20/96 09:00
 5 From: 05/20/96 09:01 Through: 08/27/98 06:00
 6 From: 08/27/98 06:01 Through: 08/29/98 06:00
 7 From: 08/29/98 06:01 Through: 08/31/98 06:00
 8 From: 08/31/98 06:01 Through: 04/06/99 11:17
 9 From: 04/06/99 11:18 Through: 04/08/99 11:17
10 From: 04/08/99 11:18 Through: 04/10/99 11:17
11 From: 04/10/99 11:18 Through: 04/12/99 11:17
12 From: 04/12/99 11:18 Through: 04/14/99 11:17
13 From: 04/14/99 11:18 Through: 04/14/99 15:00
14 From: 04/14/99 15:01 Through: 04/16/99 15:00
15 From: 04/16/99 15:01 Through: 02/21/01 21:55
16 From: 02/21/01 21:56 Through: 02/23/01 21:55

Select 1 - 16: 16

Do you want to see PRN meds only? No// <Enter> (No)

TEAM: GENERAL MED ONE WARD: GEN MED

    ROOM-BED: A-1 ALASKA, FRED (8888)

LORAZEPAM 1MG TAB NEEDED: 6 DISPENSED: 2
METHYLDOPA 500MG TAB NEEDED: 4 DISPENSED: 4
WARFARIN 2MG TABS NEEDED: 1 DISPENSED: 1

    ROOM-BED: A-2 CALIFORNIA, JAMES (1111)

                (NO ORDERS)

TEAM: GENERAL MED TWO WARD: ONE EAST

    ROOM-BED: B-4 ABC, PATIENT (5432)

ALLOPURINOL 100MG S.T. NEEDED: 6 DISPENSED: 6
ASPIRIN BUFFERED 325MG TAB NEEDED: 1 DISPENSED: 1
ASPIRIN BUFFERED 325MG TAB NEEDED: 0 DISPENSED: 0
ASPIRIN BUFFERED 325MG TAB NEEDED: HD DISPENSED: HD
ATROPINE 0.4MG H.T. NEEDED: 0 DISPENSED: 0
BACLOFEN 10MG TABS NEEDED: 3 DISPENSED: 3
FLUPHENAZINE 0.5MG/ML ELIXIR (OZ) NEEDED: 1 DISPENSED: 1
MULTIVITAMIN TABLETS NEEDED: 0 DISPENSED: 0

    ROOM-BED: B-1 GEORGIA, PAUL (9555)

                (NO ORDERS)

ARE YOU FINISHED WITH THIS PICK LIST? Yes// <Enter> (Yes)

MAY I FILE THE DATA IN THIS PICK LIST AWAY? No// <Enter> (No)

Select WARD GROUP or PICK LIST:
    
```

Figure 6-5: Example: Enter Units Dispensed Report

6.3 Extra Units Dispensed

[PSJU EUD]

The *EXtra Units Dispensed* option allows the pharmacist to enter the number of extra units dispensed for an order, and is used when the nurse on the ward has medications that have been destroyed, lost, etc. and replacements are dispensed. Any data entered here is included in the various cost reports.

The user can choose the length of patient profile needed to view. The long profile lists all orders, but the short profile lists only active orders. The user will be asked to select the order on which an action is to be taken.

Note: Pick lists are filed away when the user exits this option. Please allow approximately two hours for data to be entered before running any cost reports.

```

Select Pick List Menu Option: EXtra Units Dispensed
Select PATIENT:      ABC,PATIENT          123-45-9111  08/18/20  ONE EAST
SHORT, LONG, or NO Profile?  SHORT//  <Enter>  SHORT
02/25/01  22:00
                                SITE:  ALBANY (500)
-----
-
ABC,PATIENT                      Ward: ONE EAST
  HRN: 9111                      Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20  (80)            Wt(kg): _____ (_____)
  Sex: MALE                      Admitted: 05/03/00
  Dx: TESTING
Allergies: No Allergy Assessment
  ADR:
-----
- - - - - A C T I V E - - - - -
  1    ASPIRIN TAB                C  02/26  02/28  A
      Give: 650MG ORAL QD
  2    MULTIVITAMINS TAB         R  02/26  02/28  A
      Give: 1 TABLET IV QD

Select ORDERS 1-2: 1
-----
ASPIRIN
Give: 650MG ORAL QD

Dispense drug: ASPIRIN BUFFERED 325MG TAB  (U/D: 2)
EXTRA UNITS DISPENSED: 3

Select PATIENT: <Enter>
Select Pick List Menu Option:
    
```

Figure 6-6: Example: Extra Units Dispensed Report

6.4 Report Returns

[PSJU RET]

The *Report Returns* option allows the pharmacist to enter the number of returned units into the medication order record. Units can be returned when a patient is discharged or when the medication is discontinued, for example. Usually positive numbers are entered, however the system will allow negative numbers to be entered to allow for corrections. Any data entered here is reflected in the various cost reports.

Only active, discontinued, or expired orders are selectable. Once the user selects the patient, the system prompts to choose the length of patient profile needed to view. The profile will list the orders for that patient. The user can then select the order(s) needed to enter returns.

```

Select Pkck List Menu Option: RRS Report Returns

Select PATIENT:      ABC,PATIENT                9111  08/18/20    ONE EAST
SHORT, LONG, or NO Profile?  SHORT// <Enter>    SHORT

                                                    02/25/01  22:02
                        SITE:  CROW HO (100)
-----
ABC,PATIENT                Ward: ONE EAST
  HRN: 9111                Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)      Wt(kg): _____ (_____)
  Sex: MALE                Admitted: 05/03/00
  Dx: TESTING
Allergies: No Allergy Assessment
  ADR:
-----
- - - - - A C T I V E - - - - -
  1    ASPIRIN TAB                C  02/26  02/28  A
      Give: 650MG ORAL QD
  2    MULTIVITAMINS TAB          R  02/26  02/28  A
      Give: 1 TABLET IV QD

Select ORDERS 1-2: 1

-----
ASPIRIN
Give: 650MG ORAL QD

Dispense drug: ASPIRIN BUFFERED 325MG TAB (U/D: 2)

RETURNS: 1

Select PATIENT: <Enter>

Select Pkck List Menu Option:
    
```

Figure 6-7: Example: Reporting Medication Returns

6.5 Reprint Pick List

[PSJU PLRP]

The *Reprint Pick List* option allows the pharmacist to print or reprint any pick list or pick list update previously run. This option does not recalculate any data; it simply reprints the pick list. If the pick list selected has had an update run for it, the choice of printing the entire pick list or only the last update run will be given. The entire pick list will include any data generated from an update. Any dispensed units that have been entered will also print.

```

Select Pick List Menu Option: RPL Reprint Pick List

Select WARD GROUP or PICK LIST: <Enter> TEAM 2 GROUP PHARMACY

 1 From: 05/12/96 09:01 Through: 05/14/96 09:00
 2 From: 05/14/96 09:01 Through: 05/16/96 09:00
 3 From: 05/16/96 09:01 Through: 05/18/96 09:00
 4 From: 05/18/96 09:01 Through: 05/20/96 09:00
 5 From: 05/20/96 09:01 Through: 08/27/98 06:00
 6 From: 08/27/98 06:01 Through: 08/29/98 06:00
 7 From: 08/29/98 06:01 Through: 08/31/98 06:00
 8 From: 08/31/98 06:01 Through: 04/06/99 11:17
 9 From: 04/06/99 11:18 Through: 04/08/99 11:17
10 From: 04/08/99 11:18 Through: 04/10/99 11:17
11 From: 04/10/99 11:18 Through: 04/12/99 11:17
12 From: 04/12/99 11:18 Through: 04/14/99 11:17
13 From: 04/14/99 11:18 Through: 04/14/99 15:00
14 From: 04/14/99 15:01 Through: 04/16/99 15:00
15 From: 04/16/99 15:01 Through: 02/21/01 21:55
16 From: 02/21/01 21:56 Through: 02/23/01 21:55

Select 1 - 16: 16
Select PATIENT to start from (optional): ABC,PATIENT ABC,PATIENT
                                           F 123459111 CR 9111

Select PRINT DEVICE: 0;80;999999

...one moment, please...

```

Figure 6-8: Example: Reprint Pick List

Room-Bed	Patient	Medication	ST	Units U/D Needed	Units Disp'd
(101) PICK LIST REPORT 02/25/01 22:04 Ward group: TEAM 2 GROUP Page: 1 For 02/21/01 21:56 through 02/23/01 21:55 Team: GENERAL MED TWO					
===== WARD: ONE EAST =====					
B-12	ABC,PATIENT (9111):				
	ALLOPURINOL 100MG S.T.		C	1	6
	Give: 100MG ORAL Q6H				6
	Start: 02/22/01 14:00		Stop: 02/24/01 24:00	02-08-14-20	

	ASPIRIN BUFFERED 325MG TAB		C	1	1
	Give: 325MG ORAL QD				1
	Start: 02/20/01 14:40		Stop: 02/22/01 24:00	1440	

	ATROPINE 0.4MG H.T.		C	1	0
	Give: 0.8MG ORAL QD				0
	Start: 02/24/01 14:40		Stop: 02/25/01 21:23	1440	

	BACLOFEN 10MG TABS		C	1	3
	Give: 10MG ORAL Q12H				3
	Start: 02/22/01 21:00		Stop: 02/24/01 24:00	0900-2100	

	FLUPHENAZINE 0.5MG/ML ELIXIR (OZ)		C	1	1
	Give: 1MG/2ML ORAL QD				1
	Start: 02/23/01 14:40		Stop: 02/25/01 21:23	1440	

	MULTIVITAMIN TABLETS		R	1	0
	Give: 1 TABLET IV QD				0
	Start: 02/26/01 14:40		Stop: 02/28/01 24:00	1440	
===== WARD: GEN MED =====					
B-1	GEORGIA,PAUL (9555):				
	No orders found for this patient.				

	FILLED BY: _____				
	CHECKED BY: _____				

Figure 6-9: Example: Reprint Pick List (continued)

6.6 Send Pick List To ATC

[PSJU PLATCS]

The *Send Pick List To ATC* option allows the pharmacist to send pick lists to the ATC, a dispensing machine for Unit Dose medications. This option is used by VA Pharmacies only.

6.7 Update Pick List

[PSJU PLUP]

The *Update Pick List* option allows the pharmacist to update a pick list that has previously been run, but has not yet become active. Updating a pick list adds any new orders and any orders that have been edited since the pick list was first run.

The pharmacist will only be able to select ward groups that have a pick list for which the start date has not passed. The pharmacist can also select the pick list directly, by its number, which prints in the upper left corner of every page of the pick list.

The user will enter **P** to have the entire pick list, including the updated orders, print. Enter **U** to have only the updated orders print. After the updated orders have printed, they are added to the original pick list.

If the pharmacist prints an update only, and has not queued the report, the prompt: "DO YOU NEED A REPRINT OF THIS UPDATE?" will appear. If the answer is **YES**, the report will prompt for a new device.

Ward List shown above has been run, the labels for doses due at 1300, 1900, and 0100 are needed.

The program will check to see if the Ward List has been run and prompt the user to print or suspend three labels for those three doses.

The Ward List prints by ward and IV room, and within ward by type. It includes the patient name, room-bed, order information, stop date and time of the order, quantity needed, and the provider name.

```
Select IV Menu Option: Ward List (IV)

Run ward list for DATE: TODAY// (MAR 19, 2001)

    The manufacturing times on file are:
    1 14:00 PIGGYBACKS covering 1600 to 1559.
    2 11:00 ADMIXTURES AND PRIMARIES covering 0700 to 0659.
    3 12:00 HYPERALS covering 1400 to 1359.
    4 14:00 SYRINGE covering 1400 to 1359.
    5 14:00 CHEMOTHERAPY covering 1400 to 1359.

Enter manufacturing time(s): 1,2

WARD LIST FOR IV ROOM: TST ISC ROOM AT MAR 19,2001      Printed on   : MAR
19,2001 11:32

ADMIXTURES covering from MAR 19,2001 07:00 MAR 20,2001 06:59 Manufacturing
time:MAR 19,2001 11:00
PIGGYBACKS covering from MAR 19,2001 12:00 MAR 20,2001 11:59 Manufacturing
time:MAR 19,2001 14:00

Patient name          Order                Stop date          Qty
Provider/Initial                                     needed
-----
----- Ward: GEN MED -----
B-12          ACETAMINOPHEN 100 MEQ          MAR 26,2001 24:00          20
INPATIENT-MEDS, PROVIDER
ABC,PATIENT  0.9% SODIUM CHLORIDE 100 ML
9111 [65]    100 ml/hr

B-12          MVI 100 ML          MAR 20,2001 24:00          4
INPATIENT-MEDS, PROVIDER
ABC,PATIENT  0.9% SODIUM CHLORIDE 100 ML
9111 [64]    INFUSE OVER 10 MIN.
QID (09-13-17-21)
```

Figure 7-1: Example: Ward List Report

7.2 Update Daily Ward List (IV)

[PSJI UP]

The *Update Daily Ward List (IV)* option allows the pharmacist to edit the doses to be manufactured for a specific patient and order number. It is not necessary to update the

Ward List if the number of labels needed does not need to be modified. Using this option, the user can change the number of labels needed, discontinue an order, renew it, or put it on hold. (Of course, any action on the order will be reflected in the Activity Log.) The user can jump to any patient within a ward by using **^[PATIENT NAME]** (^ alone means end this update).

Note: An asterisk (*) will appear after the number of labels if the original default value has been edited/changed. The user must enter the appropriate number of labels to let the system know that the user has acknowledged the change in the original default value.

```

Select IV Menu Option: UUpdate Daily Ward List (IV)

Edit list for: TODAY// <Enter> (MAR 19, 2001)

    The manufacturing times on file are:
    1 14:00 PIGGYBACKS covering 1600 to 1559.
    2 11:00 ADMIXTURES AND PRIMARIES covering 0700 to 0659.
    3 12:00 HYPERALS covering 1400 to 1359.
    4 14:00 SYRINGE covering 1400 to 1359.
    5 14:00 CHEMOTHERAPY covering 1400 to 1359.

Enter manufacturing time(s): 1,2

Enter a WARD, '^OUTPATIENT' or '^ALL': ^ALL

Patient: ABC,PATIENT (123-45-9111)           Wt (kg): _____ (_____)
Ward: ONE EAST                             Ht (cm): _____ (_____)
Status: ACTIVE
=====
*(1) Additives:                               Type: ADMIXTURE
<DIN>
    POTASSIUM CHLORIDE 1 MEQ
*(2) Solutions:
    0.9% SODIUM CHLORIDE 100 ML
                                     DURATION:
*(3) Infusion Rate: 100 ml/hr                *(4) Start: 03/19/01 11:30
*(5) Med Route: IV                           *(6) Stop: 03/26/01 24:00
*(7) Schedule:                               Last Fill: 03/19/01 12:06
(8) Admin Times:                             Quantity: 20
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses: 21
(10) Other Print:

(11) Remarks :
    Entry By: INPATIENT-MEDS,PHARMACIST      Entry Date: 03/19/01 11:30

# of labels 20// <Enter>
    
```

Figure 7-2: Example: Update Daily Ward List

```

Patient: ABC,PATIENT (123-45-9111)          Wt (kg): _____ (_____)
Ward: ONE EAST                               Ht (cm): _____ (_____)
Status: ACTIVE
=====
*(1) Additives:                               Type: PIGGYBACK
    MVI 1 ML
(2) Solutions:
    0.9% SODIUM CHLORIDE 100 ML
                                     DURATION:
(3) Infusion Rate: INFUSE OVER 10 MIN.      *(4) Start: 03/19/01 11:30
*(5) Med Route: IVPB                        *(6) Stop: 03/20/01 24:00
*(7) Schedule: QD                           Last Fill: 03/19/01 12:06
(8) Admin Times: 09                         Quantity: 4
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses: 7
*(10) Orderable Item: MULTIVITAMINS INJ
    Instructions:
(11) Other Print:

(12) Remarks :
    Entry By: INPATIENT-MEDS,PHARMACIST      Entry Date: 03/19/01 11:30

# of labels  4// 2

Select IV Menu Option:

```

Figure 7-3: Example: Update Daily Ward List (continued)

7.3 Manufacturing List (IV)

[PSJI MAN]

The *Manufacturing List (IV)* option produces a listing by additive and strength or solution, of all orders due to be mixed at a scheduled manufacturing time. The option compiles the updated Ward List into a Manufacturing List to organize the IV room workload more efficiently. IVs are separated by additive (for intermittent orders) or solution (for continuous orders) to help increase pharmacist productivity. The total number of admixtures, piggybacks, hyperals, chemotherapy, and syringes for each additive is shown, as well as how many belong to each patient.

The Ward List must be run before the Manufacturing List, because the Manufacturing List is compiled from the Ward List or the updated Ward List (if updating is necessary). The logical sequence is to run a Ward List, send or take the list to the wards to compare against drugs on hand, update the Ward List from information gained on the ward, and then run the Manufacturing List. If a site chooses not to update the Ward List, the Ward List must still be run.

Note: If the Manufacturing List is run, the scheduled labels will be printed in the order of the Manufacturing List (grouped by drug). If it is not run, the scheduled labels will be printed in the order of the Ward List.


```

Select IV Menu Option: MANufacturing List (IV)

Run manufacturing list for DATE: TODAY//  <Enter>  (MAR 19, 2001)

    The manufacturing times on file are:
    1  14:00  PIGGYBACKS covering 1600 to 1559.
    2  11:00  ADMIXTURES AND PRIMARIES covering 0700 to 0659.
    3  12:00  HYPERALS covering 1400 to 1359.
    4  14:00  SYRINGE covering 1400 to 1359.
    5  14:00  CHEMOTHERAPY covering 1400 to 1359.

Enter manufacturing time(s): 1,2

MANUFACTURING LIST FOR IV ROOM: TST ISC ROOM AT MAR 19,2001
Printed on                : MAR 19,2001 11:45
ADMIXTURE manufacturing time: MAR 19,2001 11:00

ADMIXTURES covering from MAR 19,2001 07:00 to MAR 20,2001 06:59

      Order                      Totals          Lot #'s
-----
*** ADMIXTURES ***

0.9% SODIUM CHLORIDE 100 ML          Total: 20
      ACETAMINOPHEN 100 MEQ          Lot#: _____
      in
      0.9% SODIUM CHLORIDE 100 ML    Lot#: _____
[65] ABC,PATIENT (9111) (ONE EAST)          20

      Overall Total: 20

MANUFACTURING LIST FOR IV ROOM: TST ISC ROOM AT MAR 19,2001
Printed on                : MAR 19,2001 11:45
PIGGYBACK manufacturing time: MAR 19,2001 14:00

PIGGYBACKS covering from MAR 19,2001 12:00 to MAR 20,2001 11:59

      Order                      Totals          Lot #'s
-----
*** PIGGYBACKS ***

MVI 100 ML                          Total: 4
      MVI 100 ML                    Lot#: _____
      in
      0.9% SODIUM CHLORIDE 100 ML    Lot#: _____
[64] ABC,PATIENT (9111) (ONE EAST)          4

      Overall Total: 4
    
```

Figure 7-4: Example: Manufacturing List

7.4 Returns and Destroyed Entry (IV)

[PSJI RETURNS]

The *RETurns and Destroyed Entry (IV)* option will allow the pharmacist to enter the number of Recycled, Destroyed, and Cancelled IV bags per day in the IV room or satellite.

If a returned IV bag is no longer usable for any reason, it should be recorded as a Destroyed IV bag. If a returned IV bag is reusable, it should be recorded as a Recycled IV bag. If a label for an IV bag is printed but the IV bag is not made, then the IV bag should be recorded as a Cancelled IV bag.

All of the information needed to enter a Recycled, Destroyed, or Cancelled IV into the system is on the label of the IV bag. This information consists of a Bar Code ID, patient name, ward location, and order number. It should be noted that the internal order number of the order is printed on the top left corner of the label in brackets ([]) below the unique Bar Code ID. This number can be used to speed up the entry of returned and destroyed bags by skipping the patient profile and proceeding directly to the order view for that order number. If the IV label printer is not capable of printing bar codes, the barcode will not print but the number seen directly below the barcode will print.



585V742
[459] 8983 ONE NORTH 08/25/00 MISSISSIPPI,RANDALL 160-4
Total Volume: 1044
=====
AMINOSYN 8.5% 500 ML
D 50 W 500 ML
SODIUM 40 MEQ
CHLORIDE 70 MEQ
POTASSIUM 43.33 MEQ
CALCIUM 4.6 MEQ
MAGNESIUM 4 MEQ
SULFATE 4 MEQ
ACETATE 2000 MG
PHOSPHATE 10 MM
MVI CONC 5 ML
=====
Dose due at: _____
125 ml/hr
2[3]

Figure 7-5: Example: IV Label

In the example above, the internal number is four hundred fifty-nine (459).

```

Select IV Menu Option:  RETURNS and Destroyed Entry (IV)

Select PATIENT:      ABC,PATIENT          123-45-9111  08/18/20    ONE EAST

Patient Information      Feb 20, 2002@15:58:02      Page:    1 of    1
ABC,PATIENT            Ward: ONE EAST
  HRN: 9111             Room-Bed: B-12           Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)   Wt(kg): _____ (_____)
  Sex: MALE             Admitted: 05/03/00
  Dx: TESTING           Last transferred: *****

Allergies/Reactions: No Allergy Assessment
Inpatient Narrative:
Outpatient Narrative:

Enter ?? for more actions
PU Patient Record Update      NO New Order Entry
DA Detailed Allergy/ADR List  IN Intervention Menu
VP View Profile
Select Action: View Profile//  <Enter>  View Profile

SHORT, LONG, or NO Profile?  SHORT//  <Enter>  SHORT
    
```

Figure 7-6: Example: Entering Returns and Destroyed Medications

```

IV Profile                               Feb 20, 2002@15:58:50           Page:    1 of    1
ABC,PATIENT                             Ward: ONE EAST
HRN: 9111                               Room-Bed: B-12           Ht(cm): _____ (_____)
DOB: 08/18/20 (81)                     Wt(kg): _____ (_____)
Sex: MALE                               Admitted: 09/10/01
Dx: TESTING                             Last transferred: *****

#      Additive                          Last fill          Type  Start   Stop    Stat
----- A c t i v e -----
1      POTASSIUM CHLORIDE                 FEB 20 15:55     #1   A      02/20   02/20   A
      XXXXXXXXXXXXX 35 MEQ
      in DEXTROSE 5% 1/2 NS 1000 ML 80 ml/
      hr

      Enter ?? for more actions
PI Patient Information                   SO Select Order
PU Patient Record Update                 NO (New Order Entry)
Select Action: Quit// 1

-----
Patient: ABC,PATIENT                     Status: ACTIVE

*(1) Additives:                          Order number: 445           Type: ADMIXTURE
      POTASSIUM CHLORIDE XXXXXXXXXXXXX 35 MEQ
*(2) Solutions:
      DEXTROSE 5% 1/2 NS 1000 ML
                                     DURATION:
*(3) Infusion Rate: 80 ml/hr              *(4) Start: 02/20/02 15:46
*(5) Med Route: IV                        *(6) Stop: 02/20/02 24:00
BCMA ORDER LAST ACTION: 02/20/02 15:50 Infusing*
*(7) Schedule:                            Last Fill: 02/20/02 15:55
*(8) Admin Times:                          Quantity: 1
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses: 1
*(10) Other Print:
*(11) Remarks :
      Entry By: INPATIENT-MEDS,PHA         Entry Date: 02/20/02 15:55

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

Figure 7-7: Example: Entering Returns and Destroyed Medications (continued)

```

Return IV Labels          Feb 20, 2002@16:06:39          Page: 1 of 0
ABC,PATIENT              Ward: ONE EAST
  PID: 213-45-9111        Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)     Wt(kg): _____ (_____)

      POTASSIUM CHLORIDE XXXXXXXXXXXXX 35 MEQ   C  02/20  02/20  A
      in DEXTROSE 5% 1/2 NS 1000 ML 80 ml/hr

----- Labels available for reprint -----
1. 739V445  POTASSIUM CHLORIDE XXXXXXXXXXXXX 35 MEQ
            DEXTROSE 5% 1/2 NS 1000 ML
            80 ml/hr
            2[3]
2. 739V446  POTASSIUM CHLORIDE XXXXXXXXXXXXX 35 MEQ
            DEXTROSE 5% 1/2 NS 1000 ML
            80 ml/hr
            3[3]
3. 739V447  POTASSIUM CHLORIDE XXXXXXXXXXXXX 35 MEQ
            DEXTROSE 5% 1/2 NS 1000 ML
            80 ml/hr
+          Enter ?? for more actions
RC  Recycled          DT  Destroyed          CA  Cancelled
Select Item(s): Next Screen// RC  Recycled

Select from 1 - 3 or <RETURN> to select by BCMA ID: 1
    
```

Figure 7-8: Example: Entering Returns and Destroyed Medications (continued)

```

Return IV Labels          Feb 20, 2002@16:07:46          Page: 1 of 0
ABC,PATIENT              Ward: ONE EAST
  HRN: 9111              Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)     Wt(kg): _____ (_____)

      POTASSIUM CHLORIDE XXXXXXXXXXXXX 35 MEQ   C  02/20  02/20  A
      in DEXTROSE 5% 1/2 NS 1000 ML 80 ml/hr

----- Labels available for reprint -----
1. 739V446  POTASSIUM CHLORIDE XXXXXXXXXXXXX 35 MEQ
            DEXTROSE 5% 1/2 NS 1000 ML
            80 ml/hr
            3[3]
2. 739V447  POTASSIUM CHLORIDE XXXXXXXXXXXXX 35 MEQ
            DEXTROSE 5% 1/2 NS 1000 ML
            80 ml/hr
            1[3]

          Enter ?? for more actions
RC  Recycled          DT  Destroyed          CA  Cancelled
Select Item(s): Quit// DT  Destroyed

Select from 1 - 2 or <RETURN> to select by BCMA ID: <Enter>
Enter a BCMA ID: 739V446
    
```

Figure 7-9: Example: Entering Returns and Destroyed Medications (continued, screen 2)

```

Return IV Labels          Feb 20, 2002@16:09:41          Page: 1 of 0
ABC, PATIENT            Ward: ONE EAST
  HRN: 9111              Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)    Wt(kg): _____ (_____)

      POTASSIUM CHLORIDE XXXXXXXXXXXX 35 MEQ   C  02/20  02/20  A
      in DEXTROSE 5% 1/2 NS 1000 ML 80 ml/hr

----- Labels available for reprint -----
1. 739V447  POTASSIUM CHLORIDE XXXXXXXXXXXX 35 MEQ
           DEXTROSE 5% 1/2 NS 1000 ML
           80 ml/hr
           1[3]

      Enter ?? for more actions
RC  Recycled          DT  Destroyed          CA  Cancelled
Select Item(s): Quit// CA  Cancelled

Enter ward or ^OUTPATIENT: ONE EAST // <Enter>

Select from 1 - 1 or <RETURN> to select by BCMA ID: <Enter>
Enter a BCMA ID: 739V447
    
```

Figure 7-10: Example: Entering Returns and Destroyed Medications (continued)

Note: Only labels that have not been marked as Infusing, Given, Stopped, or Completed in BCMA may be Recycled, Cancelled, or Destroyed. Reprinted labels may be Recycled, Cancelled, or Destroyed.

7.5 Barcode ID – Return and Destroy (IV)

[PSJI RETURN BY BARCODE ID]

The *Barcode ID – Return and Destroy (IV)* option allows the pharmacist to scan or enter the Bar Code ID from the specific IV label to recycle, cancel, or destroy those IV medications. This option will save the pharmacist time and assure that the correct labels are returned or destroyed.

```
Select IV Menu Option: Barcode ID - Return and Destroy (IV)
Enter action to take (Recycle/Cancel/Destroy): ?
Enter a code from the list.

    Select one of the following:

        R          RECYCLE
        C          CANCEL
        D          DESTROY

Enter action to take (Recycle/Cancel/Destroy): <Enter> RECYCLE
Scan Barcode to Recycle: 730V79
...Invalid ID number. Please try again.

Scan Barcode to Recycle: 739V81

ABC,PATIENT

POTASSIUM CHLORIDE XXXXXXXXXXXX 1 MEQ
CEFAMANDOLE 2 GM
DEXTROSE 10% 1000 ML

Recycle: 739V81// <Enter>
...Done!

Scan Barcode to Recycle:
```

Figure 7-11: Example: Entering Barcode ID for Returns and Destroyed Medications

8.0 Output Options

8.1 Unit Dose

Most of the Output Options are located under the *Reports Menu* option on the *Unit Dose Medications* menu. The other reports are located directly on the *Unit Dose Medications* menu.

8.1.1 Patient Profile (Unit Dose)

[PSJU PR]

The *Patient Profile (Unit Dose)* option allows a user to print a profile (list) of a patient's orders for the patient's current or last (if patient has been discharged) admission, to any device. If the user's terminal is selected as the printing device, this option will allow the user to select any of the printed orders to be shown in complete detail, including the activity logs, if any. The user may print patient profiles for a ward group, ward, or by patient.

```
Select Unit Dose Medications Option: Patient Profile (Unit Dose)
Select by WARD GROUP (G), WARD (W), or PATIENT (P): P Patient
Select PATIENT: ABC,PATIENT          123-45-9111    08/18/20    1 EAST
Select another PATIENT: <Enter>
SHORT, LONG, or NO Profile?  SHORT// <Enter>  SHORT
Show PROFILE only, EXPANDED VIEWS only, or BOTH: PROFILE// <Enter>
Select PRINT DEVICE: <Enter>  NT/Cache virtual TELNET terminal
```

Figure 8-1: Example: Patient Profile


```

UNIT DOSE PROFILE                                09/13/00 16:20
WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEM
-----
-
ABC,PATIENT                                     Ward: 1 EAST
HRN: 9111                                     Room-Bed: B-12          Ht(cm): _____ (_____)
DOB: 08/18/20 (80)                            Wt(kg): _____ (_____)
Sex: MALE                                       Admitted: 05/03/00
Dx: TESTING
Allergies: No Allergy Assessment
ADR:
----- A C T I V E -----
-
1  -> AMPICILLIN CAP INJ                       C 09/07 09/21 A NF
      Give: 250MG PO QID
2  -> HYDROCORTISONE CREAM, TOP                 C 09/07 09/21 A NF
      Give: 1% TOP QD
3  -> PROPRANOLOL 10MG U/D                     C 09/07 09/21 A NF
      Give: PO QD

View ORDERS (1-3): 1
    
```

Figure 8-2: Example: Patient Profile, sample report

```

-----
Patient: ABC,PATIENT                               Status: ACTIVE
Orderable Item: AMPICILLIN CAP INJ
Instructions:
Dosage Ordered: 250MG

Med Route: ORAL (PO)                               Start: 09/07/00 15:00
Schedule Type: CONTINUOUS                          Stop: 09/21/00 24:00
Schedule: QID                                       DURATION:
Admin Times: 01-09-15-20
Provider: INPATIENT-MEDS,PROVIDER [w]

Dispense Drugs                                     Units  Units  Inactive
                                                U/D  Disp'd  Ret'd  Date
-----
AMPICILLIN 500MG CAP                             1    0      0
ORDER NOT VERIFIED
Self Med: NO
Entry By: INPATIENT-MEDS,PROVIDER                Entry Date: 09/07/00
13:37
    
```

Figure 8-3: Example: Patient Profile (continued)

8.1.2 Reports Menu

[PSJU REPORTS]

The *Reports Menu* option contains various reports generated by the Unit Dose package. All of these reports are QUEUABLE, and it is strongly suggested that these reports be queued when run.

```
Select Unit Dose Medications Option: REports Menu
```

```
Select Reports Menu Option: ?
```

```

7      7 Day MAR
14     14 Day MAR
24     24 Hour MAR
AP1    Action Profile #1
AP2    Action Profile #2
       AUTHorized Absence/Discharge Summary
       Extra Units Dispensed Report
       Free Text Dosage Report
       INpatient Stop Order Notices
       Medications Due Worksheet
       Patient Profile (Extended)
```

Figure 8-4: Example: Reports Menu

8.1.2.1 24 Hour MAR

[PSJU 24H MAR]

The *24 Hour MAR* option creates a report that can be used to track the administration of a patient's medications over a 24-hour period. The 24 Hour MAR report includes:

- Date/time range covered by the MAR using a four-digit year format
- Institution Name
- Patient demographic data
- Time line
- Information about each order

The order information consists of:

- Order date
- Start date
- Stop date
- Schedule type (a letter code next to the administration times)
- Administration times (will be blank if an IV order does not have a schedule)
- Drug name
- Strength (if different from that indicated in drug name)
- Medication route abbreviation
- Schedule
- Verifying pharmacist's and nurse's initials

The MAR is printed by ward group (**G**), by ward (**W**), or by patient (**P**). If the user chooses to print by patient, the opportunity to select more than one patient will be given. The system will keep prompting, "Select another PATIENT:". If an up caret (^) is entered, the user will return to the report menu. When all patients are entered, press **<Enter>** at this prompt to continue.

Note: If the user chooses to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the MAR may be sorted by administration time, patient name, or room-bed.

There are six medication choices. The user may select multiple choices of medications to be printed on the 24 Hour MAR. Since the first choice is ALL Medications, the user will not be allowed to combine this with any other choices. The default choice is “Non-IV Medications only” if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. Selection by Ward group.
3. Selected by patients and patients are from different wards.

The MAR is separated into two sheets. The first sheet is for continuous medications and the second sheet is for one-time and PRN medications. When the 24 Hour MAR with orders is run, both sheets will print for each patient, even though the patient might only have one type of order. The user can also print blank MARs and designate which sheets to print. The user can print continuous medication sheets only, PRN sheets only, or both. The blank MARs contain patient demographics, but no order data. Order information can be added manually or with labels.

Each sheet of the 24 Hour MAR consists of three parts:

1. The top part of each sheet contains the patient demographics.
2. The main body of the MAR contains the order information and an area to record the medication administration.
 - a. The order information prints on the left side of the main body, and is printed in the same format as on labels. Labels can be used to add new orders to this area of the MAR (Labels should never be placed over order information already on the MAR). Renewal dates can be recorded on the top line of each order.
 - b. The right side of the main body is where the actual administration is to be recorded. It is marked in one-hour increments for simplicity.
3. The bottom of the form allows space for signatures/titles, initials for injections, allergies, injection sites, omitted doses, reason for omitted doses, and initials for omitted doses.

At the “Enter START DATE/TIME for 24 Hour MAR:” prompt, indicate the date and the time of day, in military time, the 24 Hour MAR is to start, including leading and trailing zeros. The time that is entered into this field will print on the 24 Hour MAR as the earliest time on the time line. If the time is not entered at this prompt, the time will default to the time specified in the ward parameter, “START TIME OF

DAY FOR 24 HOUR MAR:”. If the ward parameter is blank, then the time will default to 0:01 a.m. system time.

Please keep in mind that the MAR is designed to print on stock 8 ½” by 11” paper at 16 pitch (6 lines per inch).

Note: It is strongly recommended that this report be queued to print at a later time.

```
Select Reports Menu Option: 24 24 Hour MAR
Select the MAR forms: 3// ?

    Select one of the following:
    1      Print Blank MARs only
    2      Print Non-Blank MARs only
    3      Print both Blank and Non-Blank MARs

Select the MAR forms: 3// <Enter> Print both Blank and Non-Blank MARs

Enter START DATE/TIME for 24 hour MAR: 090700@1200 (SEP 07, 2000@12:00)

Select by WARD GROUP (G), WARD (W), or PATIENT (P): PATIENT

Select PATIENT:      ABC,PATIENT      123-45-9111      08/18/20      1 EAST

Select another PATIENT: <Enter>
Enter medication type(s): 2,3,6// ?

1. All medications
2. Non-IV medications only
3. IVPB (Includes IV syringe orders with a med route of IV or IVPB.
   All other IV syringe orders are included with non-IV medications).
4. LVPs
5. TPNs
6. Chemotherapy medications (IV)

A combination of choices can be entered here except for option 1.
e.g. Enter 1 or 2-4,5 or 2.

Enter medication type(s): 2,3,6// 1
Select PRINT DEVICE: 0;132 NT/Cache virtual TELNET terminal
```

Figure 8-5: Example: 24 Hour MAR Report

CONTINUOUS SHEET	24 HOUR MAR	09/07/2000 12:00 through 09/08/2000 11:59		
WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEM			Printed on 09/20/2000 16:15	
Name: ABC,PATIENT		Weight (kg): _____ (_____)	Ward: 1 EAST	
HRN: 9111 DOB: 08/18/1920 (80)		Height (cm): _____ (_____)	Room-Bed: B-12	
Sex: MALE Dx: TESTING		Admitted: 05/03/2000 13:29		
Allergies: No Allergy Assessment	ADR:			

	Order	Start	Stop	Admin Times	12	13	14	15	16	17	18	19	20	21	22	23	24	01	02	03	04	05	06	07	08	09	10	11

SIGNATURE/TITLE	INIT	ALLERGIES	INJECTION SITES	MED/DOSE OMITTED	REASON	INIT

Indicate RIGHT (R)						
or LEFT (L)						
1. DELTOID						
2. ABDOMEN						
3. ILIAC CREST						
4. GLUTEAL						
5. THIGH						
PRN:E=Effective						
N=Not Effective						

ABC,PATIENT	9111 Room-Bed: B-12		
-------------	---------------------	--	--

ONE-TIME/PRN SHEET	24 HOUR MAR	09/07/2000 12:00 through 09/08/2000 11:59		
WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEM			Printed on 09/20/2000 16:15	
Name: ABC,PATIENT		Weight (kg): _____ (_____)	Ward: 1 EAST	
HRN: 9111 DOB: 08/18/1920 (80)		Height (cm): _____ (_____)	Room-Bed: B-12	
Sex: MALE Dx: TESTING		Admitted: 05/03/2000 13:29		
Allergies: No Allergy Assessment	ADR:			

	Order	Start	Stop	Admin Times	12	13	14	15	16	17	18	19	20	21	22	23	24	01	02	03	04	05	06	07	08	09	10	11

RPH: PI RN: _____																											

09/07	09/07 17:00	09/07/00 12:00(A9111)	C 17																								
HYDROCORTISONE CREAM, TOP																											
Give: 1% TOP QD																											
RPH: PI RN: _____																											

09/07	09/07 17:00	09/07/00 12:34(A9111)	C 17																								
HYDROCORTISONE CREAM, TOP																											
Give: 1% 0 QD																											
RPH: MLV RN: _____																											

09/07	09/07 17:00	09/07/00 12:50(A9111)	C 17																								
HYDROCORTISONE CREAM, TOP																											
Give: 1% TOP QD																											
THIS IS AN INPATIENT IV EXAMPLE																											
RPH: MLV RN: _____																											

SIGNATURE/TITLE	INIT	ALLERGIES	INJECTION SITES	MED/DOSE OMITTED	REASON																						
INIT																											
			Indicate RIGHT (R)																								
			or LEFT (L)																								
			1. DELTOID																								
			2. ABDOMEN																								
			3. ILIAC CREST																								
			4. GLUTEAL																								
			5. THIGH																								
			PRN: E=Effective																								
			N=Not Effective																								

ABC, PATIENT		123-45-9111 Room-Bed: B-12		PAGE: 1																							
ONE-TIME/PRN SHEET 24 HOUR MAR 09/07/2000 12:00 through 09/08/2000 11:59																											
WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEM				Printed on 09/20/2000 16:15																							
Name: ABC, PATIENT		Weight (kg): _____ (_____)		Ward: 1 EAST																							
HRN: 9111		DOB: 08/18/1920 (80)		Room-Bed: B-12																							
Sex: MALE		Dx: TESTING		Admitted: 05/03/2000 13:29																							
Allergies: No Allergy Assessment ADR:																											
Admin																											
Order	Start	Stop	Times	12	13	14	15	16	17	18	19	20	21	22	23	24	01	02	03	04	05	06	07	08	09	10	11

SIGNATURE/TITLE	INIT	ALLERGIES	INJECTION SITES	MED/DOSE OMITTED	REASON	INIT
			Indicate RIGHT (R) or LEFT (L)			
			1. DELTOID			
			2. ABDOMEN			
			3. ILLIAC CREST			
			4. GLUTEAL			
			5. THIGH			
			PRN: E=Effective N=Not Effective			
ABC, PATIENT		123-45-9111	Room-Bed: B-12			LAST PAGE: 2

Figure 8-6: Figure 8-7: Example: 24 Hour MAR Report (continued), sample report

8.1.2.2 7 Day MAR

[PSJU 7D MAR]

The 7 Day MAR option creates a report form that can be used to track the administration of patients' medications.

The 7 Day MAR report includes:

- Date/time range covered by the MAR using a four-digit year format
- Institution Name
- Patient demographic data
- Time line
- Information about each order

The order information consists of:

- Order date
- Start date
- Stop date
- Schedule type (a letter code next to the administration times)
- Administration times (will be blank if an IV order does not have a schedule)
- Drug name
- Strength (if different from that indicated in drug name)
- Medication route abbreviation
- Schedule
- Verifying pharmacist's and nurse's initials

The MAR is printed by ward group (**G**), by ward (**W**), or by patient (**P**). If the user chooses to print by patient, the opportunity to select more than one patient will be given. The system will keep prompting, "Select another PATIENT:". If an up caret (^) is entered, the user will return to the report menu. When all patients are entered, press <**Enter**> at this prompt to continue.

Note: If the user chooses to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the MAR may be sorted by administration time, patient name, or room-bed.

There are six medication choices. The user may select multiple choices of medications to be printed on the 7 Day MAR. Since the first choice is ALL Medications, the user will not be allowed to combine this with any other choices. The default choice is "Non-IV Medications only" if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. Selection by Ward group.
3. Selected by patients and patients are from different wards.

The *7 Day MAR* option also allows the user to choose whether to print one of the two sheets, continuous, PRN, or both. The MAR is separated into two sheets. The first sheet is for continuous medications and the second sheet is for one-time and PRN medications. When the 7 Day MAR with orders is run, both sheets will print for each patient, even though the patient might only have one type of order. The user can also print blank MARs and designate which sheets to print. The user can print continuous medication sheets only, PRN sheets only, or both. The blank MARs contain patient demographics, but no order data. Order information can be added manually or with labels.

Each sheet of the 7 Day MAR consists of three parts:

1. The top part of each sheet contains the patient demographics.
2. The main body of the MAR contains the order information and an area to record the medication administration.
 - a. The order information prints on the left side of the main body, printed in the same format as on labels. Labels can be used to add new orders to this area of the MAR (Labels should never be placed over order information already on the MAR). Renewal dates can be recorded on the top line of each order.

- b. The right side of the main body is where the actual administration is to be recorded. On the continuous medication sheet, the right side will be divided into seven columns, one for each day of the range of the MAR. Asterisks will print at the bottom of the columns corresponding to the days on which the medication is not to be given (e.g., Orders with a schedule of Q3D would only be given every three days, so asterisks would appear on days the medication should not be given).
3. The bottom of the form is designed to duplicate the bottom of the current CMR (), the back of the current PRN and ONE TIME MED RECORD CMR (). The MAR is provided to record other information about the patient and his or her medication(s). It is similar to the bottom of the 24 Hour MAR, but lists more injection sites and does not allow space to list allergies.

For IV orders that have no schedule, ***** will print on the bottom of the column corresponding to the day the order is to expire. On the continuous medication sheet only, there might be additional information about each order under the column marked notes. On the first line, SM will print if the order has been marked as a self-med order. The letters HSM will print if the order is marked as a hospital supplied self-med. On the second line, WS will print if the order is found to be a ward stock item, CS will print if the item is a Controlled Substance and/or NF will print if the order is a non-formulary. If the order is printed in more than one block, the RPH and RN initial line will print on the last block.

The answer to the prompt, “Enter START DATE/TIME for 7 Day MAR:” determines the date range covered by the 7 Day MAR. The stop date is automatically calculated. Entry of time is not required, but if a time is entered with the date, only those orders that expire after the date and time selected will print. If no time is entered, all orders that expire on or after the date selected will print.

Please keep in mind that the MAR is designed to print on stock 8 ½” by 11” paper at 16 pitch (6 lines per inch).

<p>Note: It is strongly recommended that this report be queued to print at a later time.</p>

```
Select Reports Menu Option: 7 7 Day MAR
Select the MAR forms: 3// <Enter> Print both Blank and Non-Blank MARs

Select TYPE OF SHEETS TO PRINT: BOTH// <Enter>

Enter START DATE/TIME for 7 day MAR: 090700@1200 (SEP 07, 2000@12:00:00)

Select by WARD GROUP (G), WARD (W), or PATIENT (P): PATIENT

Select PATIENT: ABC,PATIENT F 123-45-9111 CR 9111 1 EAST
Select another PATIENT: <Enter>
Enter medication type(s): 2,3,6// 1

Select PRINT DEVICE: 0;132 NT/Cache virtual TELNET terminal
```

Figure 8-8: Example: 7 Day MAR Report

CONTINUOUS SHEET		7 DAY MAR		09/07/2000 through 09/13/2000	
WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEMS				Printed on 09/20/2000 16:14	
Name: ABC,PATIENT		Weight (kg): _____ (_____)		Ward: 1 EAST	
HRN: 9111		DOB: 08/18/1920 (80)		Room-Bed: B-12	
Sex: MALE		Dx: TESTING		Admitted: 05/03/2000 13:29	
Allergies: No Allergy Assessment		ADR:			

Order	Start	Stop	Admin Times	09/07	09/08	09/09	09/10	09/11	09/12	09/13	notes

SIGNATURE/TITLE	INIT	INJECTION SITES	MED/DOSE OMITTED	REASON	INIT
		Indicate RIGHT (R) or LEFT (L)			
		(IM) (SUB Q)			
		1. DELTOID 6. UPPER ARM			
		2. VENTRAL GLUTEAL 7. ABDOMEN			
		3. GLUTEUS MEDIUS 8. THIGH			
		4. MID(ANTERIOR) THIGH 9. BUTTOCK			
		5. VASTUS LATERALIS 10. UPPER BACK			
		PRN: E=Effective N=Not Effective			

ABC,PATIENT		123-45-9111		Room-Bed: B-12	
ONE-TIME/PRN SHEET				7 DAY MAR	
WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEMS				09/07/2000 through 09/13/2000	
Name: ABC,PATIENT		Weight (kg): _____ (_____)		Ward: 1 EAST	
HRN: 9111		DOB: 08/18/1920 (80)		Room-Bed: B-12	
Sex: MALE		Dx: TESTING		Admitted: 05/03/2000 13:29	
Allergies: No Allergy Assessment		ADR:			

Order	Start	Stop	Order	Start	Stop

DATE	TIME	MEDICATION/DOSE/ROUTE	INIT	REASON	RESULTS	TIME	INIT

SIGNATURE/TITLE	INIT	INJECTION SITES	SIGNATURE/TITLE	INIT							
		Indicate RIGHT (R) or LEFT (L)									
		(IM) (SUB Q)									
		1. DELTOID 6. UPPER ARM									
		2. VENTRAL GLUTEAL 7. ABDOMEN									
		3. GLUTEUS MEDIUS 8. THIGH									
		4. MID(ANTERIOR) THIGH 9. BUTTOCK									
		5. VASTUS LATERALIS 10. UPPER BACK									
		PRN: E=Effective N=Not Effective									

ABC,PATIENT		123-45-9111 Room-Bed: B-12									
CONTINUOUS SHEET 7 DAY MAR 09/07/2000 through 09/13/2000											
WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEMS Printed on 09/20/2000 16:14											
Name: ABC,PATIENT		Weight (kg): _____ (_____)		Ward: 1 EAST							
HRN: 9111 DOB: 08/18/1920 (80)		Height (cm): _____ (_____)		Room-Bed: B-12							
Sex: MALE Dx: TESTING		Admitted: 05/03/2000 13:29									
Allergies: No Allergy Assessment ADR:											
Order	Start	Stop	Admin Times	09/07	09/08	09/09	09/10	09/11	09/12	09/13	notes
09/07	09/07 15:00	09/21/00 24:00(A9111)	01 09 C 15 20	*****							
AMPICILLIN CAP INJ											
Give: 250MG PO QID											
RPH: PI RN: _____											
09/07	09/07 15:00	09/14/00 16:54(A9111)	01 09 C 15 20	*****							
AMPICILLIN 1 GM											
in 0.9% NAACL 100 ML											
IVPB QID											
See next label for continuation											
THIS IS AN INPATIENT IV EXAMPLE											
RPH: PI RN: _____											
09/07	09/07 17:00	09/07/00 12:34(A9111)	C 17	*****	*****	*****	*****	*****	*****	*****	
HYDROCORTISONE CREAM, TOP											
Give: 1% 0 QD											
RPH: MLV RN: _____											
09/07	09/07 17:00	09/07/00 12:50(A9111)	C 17	*****	*****	*****	*****	*****	*****	*****	
HYDROCORTISONE CREAM, TOP											
Give: 1% TOP QD											
THIS IS AN INPATIENT IV EXAMPLE											
RPH: MLV RN: _____											
09/07	09/07 17:00	09/07/00 12:50(A9111)	C 17	*****	*****	*****	*****	*****	*****	*****	
HYDROCORTISONE CREAM, TOP											
Give: 1% TOP QD											
THIS IS AN INPATIENT IV EXAMPLE											
RPH: MLV RN: _____											
SIGNATURE/TITLE	INIT	INJECTION SITES	MED/DOSE OMITTED	REASON	INIT						
		Indicate RIGHT (R) or LEFT (L)									
		(IM) (SUB Q)									
		1. DELTOID 6. UPPER ARM									
		2. VENTRAL GLUTEAL 7. ABDOMEN									
		3. GLUTEUS MEDIUS 8. THIGH									
		4. MID(ANTERIOR) THIGH 9. BUTTOCK									
		5. VASTUS LATERALIS 10. UPPER BACK									
		PRN: E=Effective N=Not Effective									

ABC,PATIENT		123-45-9111 Room-Bed: B-12		LAST PAGE: 1							

Figure 8-9: Example: 7 Day MAR Report (continued)

8.1.2.3 14 Day MAR

[PSJU 14D MAR]

The 14 Day MAR option is a report form that can be used to track the administration of patients' medications.

The 14 Day MAR includes:

- Date/time range covered by the MAR using a four-digit year format
- Institution Name
- Patient demographic data
- Time line
- Information about each order

The order information consists of:

- Order date
- Start date
- Stop date
- Schedule type (a letter code next to the administration times)
- Administration times (will be blank if an IV order does not have a schedule)
- Drug name
- Strength (if different from that indicated in drug name)
- Medication route abbreviation
- Schedule
- Verifying pharmacist's and nurse's initials

The MAR is printed by ward group (**G**), by ward (**W**), or by patient (**P**). If the user chooses to print by patient, the opportunity to select more than one patient will be given. The system will keep prompting, "Select another PATIENT:". If an up caret (^) is entered, the user will return to the report menu. When all patients are entered, press <Enter> at this prompt to continue.

Note: If the user chooses to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the MAR may be sorted by administration time, patient name or room-bed.

There are six medication choices. The user may select multiple choices of medications to be printed on the 14 Day MAR. Since the first choice is ALL Medications, the user will not be allowed to combine this with any other choices. The default choice is "Non-IV Medications only" if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. Selection by Ward group.
3. Selected by patients and patients are from different wards.

The *14 Day MAR* option allows the user to choose whether to print continuous, PRN, or both. The MAR is separated into two sheets. The first sheet is for continuous medications and the second sheet is for one-time and PRN medications. When the 14 Day MAR with orders is run, both sheets will print for each patient, even though the

patient might only have one type of order. The user can also print blank MARs and designate which sheets to print. The user can print continuous medication sheets only, PRN sheets only, or both. The blank MARs contain patient demographics, but no order data. Order information can be added manually or with labels.

Each sheet of the MAR consists of three parts:

1. The top part of each sheet contains the patient demographics.
2. The main body of the MAR contains the order information and an area to record the medication administration.
 - a. The order information prints on the left side of the main body, printed in the same format as on labels. Labels can be used to add new orders to this area of the MAR (Labels should never be placed over order information already on the MAR). Renewal dates can be recorded on the top line of each order.
 - b. The right side of the main body is where the actual administration is to be recorded. On the continuous medication sheet, the right side will be divided into 14 columns, one for each day of the range of the MAR. Asterisks will print at the bottom of the columns corresponding to the days on which the medication is not to be given (e.g., Orders with a schedule of Q3D would only be given every three days, so asterisks would appear on two days out of three).
3. The bottom of the MAR is provided to record other information about the patient and his or her medication(s). It is similar to the bottom of the 24-hour MAR, but lists more injection sites.

For IV orders that have no schedule, **** will print on the bottom of the column corresponding to the day the order is to expire. On the continuous medication sheet only, there might be additional information about each order under the column marked notes. On the first line, SM will print if the order has been marked as a self-med order. The letters HSM will print if the order is marked as a hospital supplied self-med. On the second line, WS will print if the order is found to be a ward stock item, CS will print if the item is a Controlled Substance and/or NF will print if the order is a non-formulary. If the order is printed in more than one block, the RPH and RN initial line will print on the last block.

The answer to the prompt, “Enter START DATE/TIME for 14 Day MAR:” determines the date range covered by the 14 Day MAR. The stop date is automatically calculated. Entry of time is not required, but if a time is entered with the date, only those orders that expire after the date and time selected will print. If no time is entered, all orders that expire on or after the date selected will print.

Please keep in mind that the MAR is designed to print on stock 8 ½” by 11” paper at 16 pitch (6 lines per inch).

CONTINUOUS SHEET			14 DAY MAR			09/07/2000 through 09/20/2000													
WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEMS						Printed on 09/20/2000 16:11													
Name: ABC,PATIENT			Weight (kg): _____ (_____)			Ward: 1 EAST													
HRN: 9111 DOB: 08/18/1920 (80)			Height (cm): _____ (_____)			Room-Bed: B-12													
Sex: MALE Dx: TESTING						Admitted: 05/03/2000 13:29													
Allergies: No Allergy Assessment ADR:																			
Order	Start	Stop	Admin Times	SEP	07	08	09	10	11	12	13	14	15	16	17	18	19	20	notes
09/07	09/07 15:00	09/21/00 24:00 (A9111)	01 09 C 15 20	****															
AMPICILLIN CAP INJ																			
Give: 250MG PO QID																			
RPH: PI RN: _____																			
09/07	09/07 15:00	09/14/00 16:54 (A9111)	01 09 C 15 20	****									****	****	****	****	****	****	****
AMPICILLIN 1 GM													****	****	****	****	****	****	****
in 0.9% NAACL 100 ML													****	****	****	****	****	****	****
IVPB QID													****	****	****	****	****	****	****
See next label for continuation													****	****	****	****	****	****	****
THIS IS AN INPATIENT IV EXAMPLE																			
RPH: PI RN: _____																			
09/07	09/07 17:00	09/07/00 12:34 (A9111)	C 17	****	****	****	****	****	****	****	****	****	****	****	****	****	****	****	****
HYDROCORTISONE CREAM, TOP																			
Give: 1% 0 QD																			
RPH: MLV RN: _____																			
09/07	09/07 17:00	09/07/00 12:50 (A9111)	C 17	****	****	****	****	****	****	****	****	****	****	****	****	****	****	****	****
HYDROCORTISONE CREAM, TOP																			
Give: 1% TOP QD																			
THIS IS AN INPATIENT IV EXAMPLE																			
RPH: MLV RN: _____																			
09/07	09/07 17:00	09/07/00 12:50 (A9111)	C 17	****	****	****	****	****	****	****	****	****	****	****	****	****	****	****	****
HYDROCORTISONE CREAM, TOP																			
Give: 1% TOP QD																			
THIS IS AN INPATIENT IV EXAMPLE																			
RPH: MLV RN: _____																			
SIGNATURE/TITLE	INIT	INJECTION SITES		MED/DOSE OMITTED		REASON		INIT											
		Indicate RIGHT (R) or LEFT (L)																	
		(IM) (SUB Q)																	
		1. DELTOID	6. UPPER ARM																
		2. VENTRAL GLUTEAL	7. ABDOMEN																
		3. GLUTEUS MEDIUS	8. THIGH																
		4. MID(ANTERIOR) THIGH	9. BUTTOCK																
		5. VASTUS LATERALIS	10. UPPER BACK																
		PRN: E=Effective N=Not Effective																	
ABC,PATIENT			123-45-9111 Room-Bed: B-12			LAST PAGE: 1													

Figure 8-13: Example: 14 Day MAR Report (continued)

8.1.2.4 Action Profile #1

[PSJU AP-1]

The *Action Profile #1* option creates a report form that contains all of the active inpatient medication orders for one or more patients. These patients may be selected by ward group, ward or by patient. If selection by ward is chosen, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the profile may be sorted by patient name or room-bed.

There are six medication choices. The user may select multiple choices of medications to be printed on the Action Profile #1 report. Since the first choice is ALL Medications, the user will not be allowed to combine this with any other choices. The default choice is “Non-IV Medications only” if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. Selection by Ward group.
3. Selected by patients and patients are from different wards.

The form is printed so the attending provider will have a method of periodically reviewing these active medication orders. If the user chooses to run this option by patient, the opportunity is given to select as many patients as needed, but only those that have active orders will print.

Also on this profile, the provider can renew, discontinue, or not take any action regarding the active orders for each patient. A new order will be required for any new medication prescribed or for any changes in the dosage or directions of an existing order. If no action is taken, a new order is not required.

If the user chooses to enter a start and stop date, only patients with active orders occurring between those dates will print (for the ward or wards chosen). The start and stop dates must be in the future (**NOW** is acceptable). Time is required only if the current date of **TODAY** or **T** is entered.

It is recommended that the action profiles be printed on two-part paper, if possible. Using two-part paper allows a copy to stay on the ward and the other copy to be sent to the pharmacy.

Note: This report uses a four-digit year format.

```
Select Reports Menu Option: AP1 Action Profile #1
Select by WARD GROUP (G), WARD (W), or PATIENT (P): Patient
Select PATIENT: ABC,PATIENT          123-45-9111    08/18/20    1 EAST
Select another PATIENT: <Enter>
Enter medication type(s): 2,3,6// 1
...this may take a few minutes...(you should QUEUE this report)...
Select PRINT DEVICE: <Enter> NT/Cache virtual TELNET terminal
Enter RETURN to continue or '^' to exit: <Enter>
```

Figure 8-14: Example: Action Profile #1 Report

UNIT DOSE ACTION PROFILE #1 09/11/2000 11:01
 WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEMS Page: 1

This form is to be used to REVIEW/RENEW/CANCEL existing active medication orders for inpatients. Review the active orders listed and beside each order circle one of the following:

R - to RENEW the order
 D - to DISCONTINUE the order
 N - to take NO ACTION (the order will remain active until the stop date indicated)

A new order must be written for any new medication or to make any changes in dosage or directions on an existing order.

ABC,PATIENT		Ward: 1 EAST
PID: 9111	Room-Bed: B-12	Ht(cm): _____ (_____)
DOB: 08/18/1920 (80)		Wt(kg): _____ (_____)
Sex: MALE		Admitted: 05/03/2000
Dx: TESTING		
Allergies: No Allergy Assessment		
ADR:		

No.	Action	Drug	ST	Start	Stop	Status/Info
- - - - -	- - - - -	- - - - -	- - - - -	- - - - -	- - - - -	- - - - -
----- A C T I V E -----						
1	R D N	AMPICILLIN 1 GM in 0.9% NACL 100 ML QID Special Instructions: THIS IS AN INPATIENT IV EXAMPLE	C	09/07	09/14	A
2	R D N	AMPICILLIN CAP INJ Give: 250MG PO QID	C	09/07	09/21	A
3	R D N	HYDROCORTISONE CREAM, TOP Give: 1% TOP QD	C	09/07	09/21	A
4	R D N	MULTIVITAMINS 5 ML in 0.9% NACL 1000 ML 20 ml/hr	C	09/07	09/12	A
5	R D N	PROPRANOLOL 10MG U/D Give: PO QD	C	09/07	09/21	A

Date AND Time

PHYSICIAN'S SIGNATURE

MULTIDISCIPLINARY REVIEW
(WHEN APPROPRIATE)

PHARMACIST'S SIGNATURE

NURSE'S SIGNATURE

ADDITIONAL MEDICATION ORDERS:

Date AND Time

PHYSICIAN'S SIGNATURE

ABC, PATIENT	9111	08/18/1920
--------------	------	------------

Figure 8-15: Example: Action Profile #1 Report (continued)

8.1.2.5 Action Profile #2

[PSJU AP-2]

The *Action Profile #2* option is similar to the *Action Profile #1* option (see previous report) with the added feature that the pharmacist can show only expiring orders, giving in effect, stop order notices (see *INpatient Stop Order Notices*).

The user can run the *Action Profile #2* option by ward group, ward or by patient. If this option is run by patient, the opportunity to select as many patients as desired is given, but the user will not get a report if the patient has no active orders.

If the option for a ward or a ward group is chosen, a prompt to choose the ward or ward group for which the user wants to run the option is displayed. The user will be asked to sort (print) Action Profiles by team or treating provider. Start and stop dates will be prompted next. Only those patients with at least one active order that has a stop date between the dates chosen will print. If entered, the start and stop dates must be in the future (**NOW** is acceptable). Time is required only if the current date of **TODAY** or **T** is entered. A future date does not require time to be entered.

At the “Print (A)ll active orders, or (E)xpiring orders only? A//” prompt, the user can choose to print all active orders for the patient(s) selected, or print only orders that will expire within the date range selected for the patient(s) selected.

It is recommended that the action profiles be printed on two-part paper, if possible. Using two-part paper allows a copy to stay on the ward and the other copy to be sent to the pharmacy.

Note: This report uses a four-digit year format.

```
Select Reports Menu Option: AP2 Action Profile #2
Select by WARD GROUP (G), WARD (W), or PATIENT (P): PATIENT
Select PATIENT: ABC,PATIENT          M 123-45-9111   CR 9111
Select another PATIENT: <Enter>
Enter START date/time: NOW// <Enter> (SEP 11, 2000@11:02)
Enter STOP date/time: SEP 11,2000@11:02// T+7 (SEP 18, 2000)
Print (A)ll active orders, or (E)xpiring orders only? A// <Enter> (ALL)
Enter medication type(s): 2,3,6// 1
Select PRINT DEVICE: <Enter> NT/Cache virtual TELNET terminal
...this may take a few minutes...(you really should QUEUE this report)...
Enter RETURN to continue or '^' to exit: <Enter>
```

Figure 8-16: Example: Action Profile #2 Report

UNIT DOSE ACTION PROFILE #2	09/11/2000	11:03
WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEMS		
		Page: 1

A new order must be written for any new medication or to make any changes in dosage or directions on an existing order.		

Team: NOT FOUND		
Ward: 1 EAST		
ABC,PATIENT	Room-Bed: B-12	Ht(cm): _____ (_____)
PID: 9111		Wt(kg): _____ (_____)
DOB: 08/18/1920 (80)		Admitted: 05/03/2000
Sex: MALE		
Dx: TESTING		
Allergies: No Allergy Assessment		
ADR:		

No. Action	Drug	ST Start Stop Status/Info

A C T I V E		

1	AMPICILLIN 1 GM in 0.9% NAACL 100 ML QID Special Instructions: THIS IS AN INPATIENT IV EXAMPLE	C 09/07 09/14 A
<input type="checkbox"/> TAKE NO ACTION <input type="checkbox"/> DISCONTINUE <input type="checkbox"/> RENEW COST/DOSE: 1.32		

2	AMPICILLIN CAP INJ Give: 250MG PO QID	C 09/07 09/21 A
<input type="checkbox"/> TAKE NO ACTION <input type="checkbox"/> DISCONTINUE <input type="checkbox"/> RENEW COST/DOSE: 0.731		

3	HYDROCORTISONE CREAM, TOP Give: 1% TOP QD	C 09/07 09/21 A
<input type="checkbox"/> TAKE NO ACTION <input type="checkbox"/> DISCONTINUE <input type="checkbox"/> RENEW COST/DOSE: 0.86		

4	MULTIVITAMINS 5 ML in 0.9% NAACL 1000 ML 20 ml/hr	C 09/07 09/12 A
<input type="checkbox"/> TAKE NO ACTION <input type="checkbox"/> DISCONTINUE <input type="checkbox"/> RENEW COST/DOSE: 468.795		

_____ Date AND Time		_____ PHYSICIAN'S SIGNATURE
MULTIDISCIPLINARY REVIEW (WHEN APPROPRIATE)		_____ PHARMACIST'S SIGNATURE
		_____ NURSE'S SIGNATURE
ADDITIONAL MEDICATION ORDERS:		

Date AND Time	PHYSICIAN'S SIGNATURE	
ABC ,PATIENT	9111	08/18/1920

Figure 8-17: Example: Action Profile #2 Report (continued)

8.1.2.6 Authorized Absence/Discharge Summary

[PSJU DS]

The *AUthorized Absence/Discharge Summary* option creates a report to allow the user to determine what action to take on a patient's Unit Dose orders if the patient is discharged from the hospital or will leave the hospital for a designated period of time (authorized absence). The form is printed so that the provider can place the active orders of a patient on hold, not take any action on the order or continue the order upon discharge or absence. If the provider wishes to continue the order upon discharge, then he or she can identify the number of refills, the quantity and the number of days for the order to remain active. If no action is taken on the order, it will expire or be discontinued.

The user can run the Authorized Absence Discharge Summary by ward group, ward, or by patient. If the user chooses to run this report by patient, the opportunity is given to select as many patients as desired, but only patients with active orders will print.

If the option by ward or ward groups is chosen, the user will be prompted for start and stop date. Entry of these dates is not required, but if a start and stop date is entered, a discharge summary will print only for those patients that have at least one order that will be active between those dates. If the user does not enter a start date, all patients with active orders will print (for the ward or ward group chosen). If a clinic visit has been scheduled, the date will print. If more than one has been scheduled, only the first one will print. It is recommended that this report be queued to print when user demand for the system is low.

Note: This report uses a four-digit year format.

```
Select Reports Menu Option: AUthorized Absence/Discharge Summary
Print BLANK Authorized Absence/Discharge Summary forms? NO// <Enter>
Select by WARD GROUP (G), WARD (W), or PATIENT (P): Patient
Select PATIENT: XYZ,PATIENT          222-32-4321    02/22/42    1 West
Select another PATIENT: <Enter>
...this may take a few minutes...(you should QUEUE this report)...
Select PRINT DEVICE: <Enter> TELNET
```

Figure 8-18: Example: Authorized Absence/Discharge Summary Report


```

                AUTHORIZED ABSENCE/DISCHARGE ORDERS      09/19/2000  12:43
                SITE:  TEST HO (660)

Effective Date:                                     Page:  1
=====
Instructions to the physician:
  A. A prescription blank must be used for:
      1. all class II narcotics
      2. any medications marked as 'nonrenewable'
      3. any new medications in addition to those entered on this form.
  B. If a medication is not to be continued, mark "TAKE NO ACTION".
  C. To continue a medication, you MUST:
      1. enter directions, quantity, and refills
      2. sign the order, enter your DEA number, and enter the date AND time.
=====
XYZ,PATIENT                      Ward: 1 West
PID: 4321                        Room-Bed: A-6                Ht(cm): 167.64 (04/21/1999)
DOB: 02/22/1942 (58)            Team: * NF *                Wt(kg):  85.00 (04/21/1999)
Sex: MALE                        Admitted: 09/16/1999
Dx: TEST PATIENT
Allergies: CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE, CHOCOLATE,
           NUTS, STRAWBERRIES, DUST
NV Aller.: AMOXICILLIN, AMPICILLIN, TAPE, FISH, FLUPHENAZINE DECANOATE
ADR:
=====

                *** THIS PATIENT HAS NON-VERIFIED ORDERS. ***

___ AUTHORIZED ABSENCE <96 HOURS    ___ AUTHORIZED ABSENCE >96 HOURS
NUMBER OF DAYS:  _____ (NO REFILLS allowed on AA/PASS meds)

___ REGULAR DISCHARGE    ___ OPT NSC    ___ SC

SC Percent: %
Disabilities: NONE STATED

Next scheduled clinic visit:
=====
No.      Medication                                     Schedule      Cost per
          Type                                           Type           Dose
-----
  1 ACETAMINOPHEN 650 MG SUPP                          CONTINUOUS    0.088
    Inpt Dose: 650MG PO QD

___ TAKE NO ACTION (PATIENT WILL NOT RECEIVE MEDICATION)

Outpatient Directions: _____

___SC ___NSC Qty: _____ Refills:  0  1  2  3  4  5  6  7  8  9  10  11

_____  

Physician's Signature      DEA #      Date AND Time

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

Figure 8-19: Example: Authorized Absence/Discharge Summary Report (continued)

AUTHORIZED ABSENCE/DISCHARGE ORDERS		Page: 2
SITE: REGION 5 (660)		
XYZ, PATIENT	222-32-4321	02/22/1942

No.	Medication	Schedule Type	Cost per Dose
2	BENZOYL PEROXIDE 10% GEL (2OZ) Inpt Dose: APPLY SMALL ABOUT TOP QD Special Instructions: TEST	CONTINUOUS	3.78
<input type="checkbox"/> TAKE NO ACTION (PATIENT WILL NOT RECEIVE MEDICATION)			
Outpatient Directions: _____			
<input type="checkbox"/> SC <input type="checkbox"/> NSC Qty: _____ Refills: 0 1 2 3 4 5 6 7 8 9 10 11			
_____ Physician's Signature		_____ DEA #	_____ Date AND Time
3	RANITIDINE 150MG Inpt Dose: 150MG PO QID	CONTINUOUS	0.5
<input type="checkbox"/> TAKE NO ACTION (PATIENT WILL NOT RECEIVE MEDICATION)			
Outpatient Directions: _____			
<input type="checkbox"/> SC <input type="checkbox"/> NSC Qty: _____ Refills: 0 1 2 3 4 5 6 7 8 9 10 11			
_____ Physician's Signature		_____ DEA #	_____ Date AND Time
4	THEO-24 200MG Inpt Dose: 400MG PO QID Special Instructions: TESTING DO	CONTINUOUS	0.086
<input type="checkbox"/> TAKE NO ACTION (PATIENT WILL NOT RECEIVE MEDICATION)			
Outpatient Directions: _____			
<input type="checkbox"/> SC <input type="checkbox"/> NSC Qty: _____ Refills: 0 1 2 3 4 5 6 7 8 9 10 11			
_____ Physician's Signature		_____ DEA #	_____ Date AND Time

OTHER MEDICATIONS:

5 Medication: _____

Outpatient Directions: _____

SC NSC Qty: _____ Refills: 0 1 2 3 4 5 6 7 8 9 10 11

Physician's Signature DEA # Date AND Time

6 Medication: _____

Outpatient Directions: _____

SC NSC Qty: _____ Refills: 0 1 2 3 4 5 6 7 8 9 10 11

Physician's Signature DEA # Date AND Time

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

Figure 8-20: Example: Authorized Absence/Discharge Summary Report (continued)

```

                AUTHORIZED ABSENCE/DISCHARGE INSTRUCTIONS 09/19/2000 12:43
                SITE: REGION 5 (660)

Effective Date:
=====
XYZ,PATIENT                      Ward: 1 West
  HRN: 4321                      Room-Bed: A-6           Ht(cm): 167.64 (04/21/1999)
  DOB: 02/22/1942 (58)          Team: * NF *           Wt(kg): 85.00 (04/21/1999)
  Sex: MALE                      Admitted: 09/16/1999
  Dx: TEST PATIENT
Allergies: CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE, CHOCOLATE,
           NUTS, STRAWBERRIES, DUST
NV Aller.: AMOXICILLIN, AMPICILLIN, TAPE, FISH, FLUPHENAZINE DECANOATE
  ADR:

=====

                Next scheduled clinic visit:
=====
DIETARY INSTRUCTIONS: (Check One)
  ___ NO RESTRICTIONS ___ RESTRICTIONS (Specify) _____
  _____
  _____

=====
PHYSICAL ACTIVITY LIMITATIONS: (Check One)
  ___ NO RESTRICTIONS ___ RESTRICTIONS (Specify) _____
  _____
  _____

=====
SPECIAL INSTRUCTIONS: (list print information, handouts, or other
instructions pertinent to patient's condition)_____
  _____
  _____

=====
DIAGNOSES: _____
  _____
  _____

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

Figure 8-21: Example: Authorized Absence/Discharge Summary Report (continued)

```

                                AUTHORIZED ABSENCE/DISCHARGE INSTRUCTIONS  09/19/2000
12:43
                                SITE:  REGION 5 (660)

Effective Date:
=====
XYZ,PATIENT                      Ward: 1 West
  HRN: 4321                      Room-Bed: A-6                Ht(cm): 167.64
(04/21/1999)
  DOB: 02/22/1942 (58)          Team: * NF *                Wt(kg):  85.00
(04/21/1999)
  Sex: MALE                      Admitted: 09/16/1999
  Dx: TEST PATIENT
Allergies: CARAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE, CHOCOLATE,
           NUTS, STRAWBERRIES, DUST
NV Aller.: AMOXICILLIN, AMPICILLIN, TAPE, FISH, FLUPHENAZINE DECANOATE
  ADR:
=====

Next scheduled clinic visit:

_____
Nurse's Signature                      Date AND Time

_____
Physician's Signature                  Date AND Time

=====
>>>>> I HAVE RECEIVED AND UNDERSTAND <<<<<
>>>>> MY DISCHARGE INSTRUCTIONS      <<<<<
=====

_____
Patient's Signature                    Date And Time

XYZ,PATIENT                          4321                                02/22/1942
    
```

Figure 8-22: Example: Authorized Absence/Discharge Summary Report (continued)

8.1.2.7 Extra Units Dispensed Report

[PSJU EUDD]

The *Extra Units Dispensed Report* option allows the user to print a report showing the amounts, date dispensed, and the initials of the person who entered the dispensed drug. This can be printed by ward group, ward, or patient. If the user chooses to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the profile may be sorted by patient name or roombed.

```

Select Reports Menu Option: EXtra Units Dispensed Report

Enter Start Date and Time: T@1000 (SEP 19, 2000@10:00)
Enter Ending Date and Time: T@2400 (SEP 19, 2000@24:00)

Select by WARD GROUP (G), WARD (W), or PATIENT (P): Patient

Select PATIENT: XYZ,PATIENT 2-22-42 222324321 YES ACTIVE
DUTY

Select another PATIENT: <Enter>
Select output device: 0;80 TELNET

this may take a while...(you should QUEUE the Extra Units Dispensed report)

                                EXTRA UNITS DISPENSED REPORT                                PAGE: 1
                                REPORT FROM: 09/19/00 10:00 TO: 09/19/00 24:00

XYZ,PATIENT                                Room_Bed: A-6
4321                                        Ward: 1 West

DRUG NAME                                UNIT  DATE          DISP.
                                DISPENSED          BY
ACETAMINOPHEN 650 MG SUPP                3  09/19/00  12:54 MV
                                5  09/19/00  12:54 MV
                                ..... 8
BENZOYL PEROXIDE 10% GEL (2OZ)           2  09/19/00  12:58 PM
                                ..... 2
RANITIDINE 150MG                          3  09/19/00  12:54 MV
                                3  09/19/00  12:58 PM
                                ..... 6
TOTAL FOR XYZ,PATIENT..... 16

Press Return to continue...
    
```

Figure 8-23: Example: Extra Units Dispensed Report

8.1.2.8 Free Text Dosage Report
 [PSJU DOSAGE REPORT]

The *Free Text Dosage Report* option creates a report to track commonly ordered free text dosages over a date range. This report evaluates Unit Dose orders that were active during the specified dates against the DISPENSE DRUG file. If the applicable

Possible Dosages or Local Possible Dosages do not match the Dosage Ordered, then this is considered a Free Text Dosage Entry and is contained in this report. This report includes the:

- Dispense Drug
- Free Text Dosage Entry
- Total number of occurrences of each Free Text Dosage Entry
- Number of occurrences by the Provider Name

Each entry in the Free Text Dosage Report consists of at least two lines of display. The first line shows the Dispense Drug name, followed by the drug internal entry number in parentheses. The first line continues with the Free Text Dosage Entry and the total number of occurrences of this entry. The second line shows the name of the Providers that used this Free Text Dosage Entry during the requested date range, and the number of times Providers used this free text dosage. Since all Providers are listed, multiple lines will be displayed.

Unit Dose orders that were active during the specified date range and have free text dosages are included in this report. The user is prompted to enter the “Beginning Date:” and an “Ending Date:” for the report to print. If no value is entered in either of the two prompts, the report will not print. The date range will be listed in the “Period:” section of the report header with the beginning date appearing as the first date and the ending date appearing as the second date.

It is strongly recommended that this report be queued to print at a later time.

```
Select Reports Menu Option: FREE Text Dosage Report
Beginning Date: T-100 (SEP 29, 2001)
Ending Date: T (JAN 07, 2002)
DEVICE: HOME// 0;80 NT/Cache virtual TELNET terminal

Working - please wait.....
```

Figure 8-24: Example: Free Text Dosage Report

Inpatient Free Text Dosage Entry Report			Page 1
Period: Sep 29, 2001 to Jan 07, 2002			
Drug	Free Text Entry	Count	
Provider:Count			

A-METHYL-PARA-TYROSINE CAPS, 25 (5098)	100MG		1
INPATIENT-MEDS, PROVIDER:1			
ACETAMINOPHEN 325MG C.T. (263)	1000MG		1
BOISE, WILLIAM:1			
	100MG		2
JACKSON, ROBERT:1	MONTPELIER, MELINDA A.:1		
	100mg		1
MONTPELIER, MELINDA A.:1			
	300MG		1
BOISE, WILLIAM:1			
	325MG		7
MONTPELIER, MELINDA A.:1 INPATIENT-MEDS, PROVIDER:4			
INPATIENT-MEDS, PHARMACIST:2			
Press Return to Continue or ^ to Exit:			

Figure 8-25: Example: Free Text Dosage Report (continued)

8.1.2.9 INpatient Stop Order Notices

[PSJ EXP]

The *INpatient Stop Order Notices* option produces a list of patients' medication orders that are about to expire. Action must be taken if these medications are to be re-ordered. This option will list both Unit Dose orders and IV orders. The user may choose to print All, which is the default, or either the Unit Dose or IV orders.

Special Instructions for Unit Dose orders and Other Print Information for IV orders are listed on the report. IV orders are sorted by the Orderable Item of the first additive or solution in the order. The Orderable Item with each additive and solution is displayed along with the strength/volume specified. The schedule type for all IV orders is assumed to be continuous.

If the user chooses to print by ward, the selection to sort by administration teams is displayed. ALL teams, which is the default, multiple teams, or one administration team may be chosen.


```
Select Reports Menu Option: INpatient Stop Order Notices
Select by WARD GROUP (G), WARD (W), or PATIENT (P): PATIENT
Select PATIENT:      XYZ,PATIENT      M 222-32-4321  CR 4321
Enter start date: T (SEP 19, 2000)
Enter stop date: T+7 (SEP 26, 2000)
List IV orders, Unit Dose orders, or All orders: ALL// <Enter>
Select PRINT DEVICE: 0;80 TELNET
...this may take a few minutes...
                        ...you really should QUEUE this report, if
possible...
Enter RETURN to continue or '^' to exit: <Enter>
```

Figure 8-26: Example: Inpatient Stop Order Notices

AS OF: 09/19/00 13:14

Page: 1

THE FOLLOWING MEDICATIONS WILL EXPIRE
 FROM 09/19/00 00:01 THROUGH 09/26/00 24:00
 TO CONTINUE MEDICATIONS, PLEASE REORDER

XYZ, PATIENT Ward: 1 West
 PID: 4321 Room-Bed: A-6 Ht(cm): 167.64 (04/21/99)
 DOB: 02/22/42 (58) Wt(kg): 85.00 (04/21/99)
 Sex: MALE Admitted: 09/16/99
 Dx: TEST PATIENT
 Allergies: CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE, CHOCOLATE,
 NUTS, STRAWBERRIES, DUST
 NV Aller.: AMOXICILLIN, AMPICILLIN, TAPE, FISH, FLUPHENAZINE DECANOATE
 ADR:

Medication Dosage	ST	Start	Stop	Status/Info	Provider
AMPICILLIN 100 GM in 0.45% NAACL 1000 ML 8MG/HR	C	09/19	09/22/00 18:00	A INPATIENT-	
MEDS, PROVIDER IV 8MG/HR@1					
PENTAMIDINE ISETHIONATE 1 MG in 0.45% NAACL 1000 ML 8 MG/HR	C	09/19	09/22/00 18:00	A INPATIENT-	
MEDS, PROVIDER IV 8 MG/HR@1					
ACETAMINOPHEN 300/CODEINE 30 TAB Give: 650MG PO QD	C	09/16	09/22/00 22:00	A INPATIENT-	
MEDS, PROVIDER					
BENZOYL PEROXIDE GEL, TOP Give: APPLY SMALL ABOUT TOP QD	C	09/19	09/22/00 22:00	A INPATIENT-	
MEDS, PROVIDER Special Instructions: TEST					
RANITIDINE TAB Give: 150MG PO QID	C	09/18	09/22/00 22:00	A INPATIENT-	
MEDS, PROVIDER					
THEOPHYLLINE CAP, SA Give: 400MG PO QID	C	09/18	09/22/00 22:00	A INPATIENT-	
MEDS, PROVIDER Special Instructions: TESTING					

XYZ, PATIENT 4321 1 West A-6

Figure 8-27: Example: Inpatient Stop Order Notices (continued)

8.1.2.10 Medications Due Worksheet

[PSJ MDWS]

The *Medications Due Worksheet* option creates a report that lists active medications (Unit Dose and IV) that are due within a selected 24-hour period. The user will be able to select by ward group, ward, or individual patients. If the user chooses to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the Medications Due Worksheet may be sorted by administration time, patient name, or room-bed. However, if the user chooses to select by patient, multiple patients can be entered.

For IV orders that have no schedule, the projected administration times will be calculated based on the order's volume, flow rate, and start time. An asterisk (*) will be printed for the administration times instead of the projected administration times.

If the MAR ORDER SELECTION DEFAULT prompt for the ward parameter is defined, the default will be displayed at the "Enter medication type(s):" prompt.

The default choice is 2 or Non-IV Medications only if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. Selection by Ward group.
3. Selected by patients and patients are from different wards.

The PRN medication orders will be printed if the user enters **YES** at the "Would you like to include PRN Medications (Y/N)? NO//" prompt. PRN orders will be listed after all continuous and one-time orders are printed.

```
Select Reports Menu Option: MEDications Due Worksheet
Would you like to include PRN Medications (Y/N)? NO// YES
Enter Start Date and Time: T@1000 (SEP 19, 2000@10:00)
Enter Ending Date and Time: T@2400 (SEP 19, 2000@24:00)
Select by WARD GROUP (G), WARD (W), or PATIENT (P): Patient
Select PATIENT: XYZ,PATIENT M 222324321 CR 4321
Select another PATIENT: <Enter>
Enter medication type(s): 2// 1
Select output device: 0;80 TELNET
```

Figure 8-28: Example: Medications Due Worksheet

```

MEDICATIONS DUE WORKSHEET For: XYZ,PATIENT
Report from: 09/19/00 10:00 to: 09/19/00 24:00
09/19/00
Continuous/One time Orders for: ALL MEDS

Page: 1
Report Date:

For date: 09/19/00

XYZ,PATIENT      A-6      12:00 09/18 | 09/18 12:00 | 09/22/00 22:00
4321
1 West          RANITIDINE TAB
                Give: 150MG PO QID
                RN/LPN Init: _____

                09/18 | 09/18 12:00 | 09/22/00 22:00
                THEOPHYLLINE CAP,SA
                Give: 400MG PO QID
                TESTING
                RN/LPN Init: _____

                * 09/19 | 09/19 12:00 | 09/22/00 18:00
                AMPICILLIN 100 GM
                in
                0.45% NACL 1000 ML 8MG/HR
                IV 8MG/HR@1
                RN/LPN Init: _____

                15:00 09/18 | 09/18 12:00 | 09/22/00 22:00
                RANITIDINE TAB
                Give: 150MG PO QID
                RN/LPN Init: _____

                09/18 | 09/18 12:00 | 09/22/00 22:00
                THEOPHYLLINE CAP,SA
                Give: 400MG PO QID
                TESTING
                RN/LPN Init: _____

                20:00 09/18 | 09/18 12:00 | 09/22/00 22:00
                RANITIDINE TAB
                Give: 150MG PO QID
                RN/LPN Init: _____

                09/18 | 09/18 12:00 | 09/22/00 22:00
                THEOPHYLLINE CAP,SA
                Give: 400MG PO QID
                TESTING
                RN/LPN Init: _____

* Projected admin. times based on order's volume, flow rate, and start time.

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

Figure 8-29: Example: Medications Due Worksheet (continued)

8.1.2.11 Patient Profile (Extended)

[PSJ EXTP]

The *Patient Profile (Extended)* option creates a report to allow the viewing of all the orders on file for a patient. The user can view all of the orders that have not been purged or enter a date to start searching from.

```
Select Reports Menu Option: PATient Profile (Extended)
Select PATIENT:      ABC,PATIENT           M 123-45-9111   CR 9111
Date to start searching from (optional):  083101
Select another PATIENT: <Enter>
Show PROFILE only, EXPANDED VIEWS only, or BOTH: PROFILE// BOTH
Show SHORT, LONG, or NO activity log? NO// SHORT
Select PRINT DEVICE: <Enter>  DECSERVER
```

Figure 8-30: Example: Extended Patient Profile Report

```

      I N P A T I E N T   M E D I C A T I O N S           02/28/02  14:12
              SITE:  ALBANY, NY (500)
-----
ABC,PATIENT                      Ward: ONE EAST
  PID: 9111                      Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)             Wt(kg): _____ (_____)
  Sex: MALE                      Admitted: 05/03/00
  Dx: TESTING                    Last transferred: *****
Allergies: No Allergy Assessment
  ADR:
-----
      A C T I V E -----
1    MULTIVITAMINS 2 ML          C 02/28/02  03/30/02  A
    in 0.9% SODIUM CHLORIDE 100 ML QID
2    BACLOFEN TAB                C 02/20/02  03/06/02  A
    Give: 10MG PO QD
    PATIENT SPITS OUT MEDICINE
3    PREDNISONE TAB             C 02/25/02  03/11/02  A
    Give: 5MG PO TU-TH-SA@09
4    RESERPINE TAB              C 02/20/02  03/06/02  A
    Give: 1MG PO QD
5    PANCREATIN CAP,ORAL        O 02/21/02  03/23/02  A
    Give: 1 CAPSULE PO ONCE
-----
      N O N - A C T I V E -----
6    CEFTAZIDIME INJ           ? ***** *****  N
    Give: 1 GM IV QD
7    TRACE ELEMENTS INJ        ? ***** *****  N
    Give: 1 ML IV QID
-----
      N O N - A C T I V E -----
8    in DEXTROSE 5% 1000 ML 1 ml/hr ? ***** *****  P
9    CEFAZOLIN INJ             ? ***** *****  P
    Give: 1GM/1VIAL IVPB ONE TIME
10   PENICILLIN INJ,SUSP       ? ***** *****  P
    Give: 600000UNT/1ML IM BID
11   PENICILLIN INJ,SUSP       ? ***** *****  P
    Give: 600000UNT/1ML IM QD
-----
      N O N - A C T I V E -----
12   CEFAZOLIN 1 GM            C 11/02/01  12/07/01  E
    in 5% DEXTROSE 1000 ML QID
13   zC2TESTDRUG 1 LITER       C 12/14/01  12/21/01  E
    in 5% DEXTROSE 1000 ML QD
Enter RETURN to continue or '^' to exit:

```

Figure 8-31: Example: Extended Patient Profile Report, report example

```

Patient: ABC,PATIENT                               Status: ACTIVE
*(1) Additives:                                Order number: 29                Type: PIGGYBACK
      MULTIVITAMINS 2 ML
(2) Solutions:
      0.9% SODIUM CHLORIDE 100 ML
                                           DURATION:
(3) Infusion Rate: INFUSE OVER 125 MIN.          *(4) Start: 02/28/02 13:56
*(5) Med Route: IV                               *(6) Stop: 03/30/02 24:00
*(7) Schedule: QID                               Last Fill: *****
(8) Admin Times: 09-13-17-21                    Quantity: 0
*(9) Provider: PROVIDER,PAULA [w]               Cum. Doses:
*(10)Orderable Item: MULTIVITAMINS INJ
      Instructions:
(11) Other Print:
(12) Remarks :
      Entry By: ALBANY,ALBERT                    Entry Date: 02/28/02 13:56

ACTIVITY LOG:
# DATE          TIME          REASON          USER
=====
1 FEB 28,2002 13:58:30 VERIFY          ALBANY,ALBERT
  Comment: ORDER VERIFIED BY PHARMACIST
-----

Patient: ABC,PATIENT                               Status: ACTIVE
Orderable Item: BACLOFEN TAB
  Instructions:
Dosage Ordered: 10MG
                                           Start: 02/20/02 15:20
      Med Route: ORAL (PO)                       Stop: 03/06/02 24:00
Schedule Type: CONTINUOUS                       DURATION:
      Schedule: QD
      Admin Times: 1440
      Provider: PROVIDER,PAULA [w]
Special Instructions: PATIENT SPITS OUT MEDICINE

Dispense Drugs          U/D  Units  Units  Inactive
-----
BACLOFEN 10MG TABS     1    0      0      Date

Entry By: TULSA,LARRY                    Entry Date: 02/20/02
15:20

ACTIVITY LOG:
# DATE          TIME          REASON          USER
=====
( THE ORDERABLE ITEM IS CURRENTLY LISTED AS INACTIVE. )
  Date: 02/20/02 15:20      User: TULSA,LARRY
Activity: ORDER ENTERED AS ACTIVE BY PHARMACIST
-----

Patient: ABC,PATIENT                               Status: ACTIVE
Orderable Item: PREDNISONE TAB
  Instructions:
Dosage Ordered: 5MG
                                           Start: 02/25/02 10:58
      Med Route: ORAL (PO)                       Stop: 03/11/02 24:00
Schedule Type: CONTINUOUS                       DURATION:
      Schedule: TU-TH-SA@09
      Admin Times: 09
    
```

Provider: PROVIDER, PAULA [w]				
Dispense Drugs	U/D	Units Disp'd	Units Ret'd	Inactive Date

PREDNISON 5MG TAB	1	0	0	
Self Med: NO				
Entry By: PHOENIX, SALLY			Entry Date: 02/25/02	
10:58				
ACTIVITY LOG:				
#	DATE	TIME	REASON	USER

Date: 02/25/02		10:58	User: PHOENIX, SALLY	
Activity: ORDER VERIFIED BY PHARMACIST				

Figure 8-32: Example: Extended Patient Profile Report (continued), report example 2

8.1.3 Align Labels (Unit Dose)

[PSJU AL]

Align Labels (Unit Dose) option allows the user to align the label stock on a printer so that Unit Dose order information will print within the physical boundaries of the label.

```

Select Unit Dose Medications Option: ALIGn Labels (Unit Dose)

Select LABEL PRINTER: <Enter> TELNET
\----- FIRST LINE OF LABEL -----/
<                                     >
<----- LABEL BOUNDARIES ----->
<                                     >
/-----LAST LINE OF LABEL-----\

XX/XX | XX/XX | XX/XX/XX  XX:XX  (PXXXX) | A T  PATIENT NAME
      ROOM-BED

DRUG NAME          SCHEDULE TYPE | D I  XXX-XX-XXXX  DOB
(AGE)

      TEAM

DOSAGE ORDERED  MED ROUTE  SCHEDULE  | M M  SEX          DIAGNOSIS
SPECIAL INSTRUCTIONS | I E  ACTIVITY DATE/TIME
ACTIVITY

WS HSM NF          RPH:_____ RN:_____ | N S  WARD GROUP
      WARD

Are the labels aligned correctly? Yes// Y (Yes)
    
```

Figure 8-33: Example: Align Labels (Unit Dose)

8.1.4 Label Print/Reprint

[PSJU LABEL]

Label Print/Reprint option allows the user to print new unprinted labels and/or reprint the latest label for any order containing a label record. When entering this option, the pharmacist will be informed if there are any unprinted new labels from auto-cancelled orders (i.e., due to ward or service transfers). The pharmacist will be shown a list of wards to choose from if these labels are to be printed at this time. The pharmacist can delete these auto-cancel labels; however, deletion will be for all of the labels.

Next, the pharmacist will be instructed if there are any unprinted new labels. The pharmacist can then decide whether to print them now or later.

The pharmacist can choose to print the labels for a ward group, ward, or for an individual patient. If ward group or ward is chosen, the label start date will be entered and the labels will print on the specified printer device. When the option to print by individual patient is chosen, an Inpatient Profile will be displayed and the pharmacist can then choose the labels from the displayed Unit Dose and IV orders to be printed on a specified printer.

8.2 IV Output Options

All of the IV Output Options are located under the specified menus on the *IV Menu* option.

8.2.1 Label Menu (IV)

[PSJI LBLMENU]

The *Label Menu (IV)* option allows the printing or reprinting of labels for all IV orders. All labels will have a unique Bar Code ID. This ID number is comprised for the patient internal entry number (IEN), a “V” as a delimiter, and the label sequential number for the patient (not the order). Orders suspended for a particular delivery time, however, cannot be printed from here, but must be printed from the suspense functions. This option contains five sub-options.

```
Select IV Menu Option: Label Menu (IV)
```

```
Select Label Menu (IV) Option: ?
```

```
    Align Labels (IV)
    Individual Labels (IV)
    Scheduled Labels (IV)
    Reprint Scheduled Labels (IV)
    Test Control Codes (IV)
```

Figure 8-34: Example: IV Label Menu

8.2.1.1 Align Labels (IV)
 [PSJI ALIGNMENT]

The *Align Labels (IV)* option allows the user to align the labels on the Label printer. It will always print three test labels which display a generic Bar Code ID.

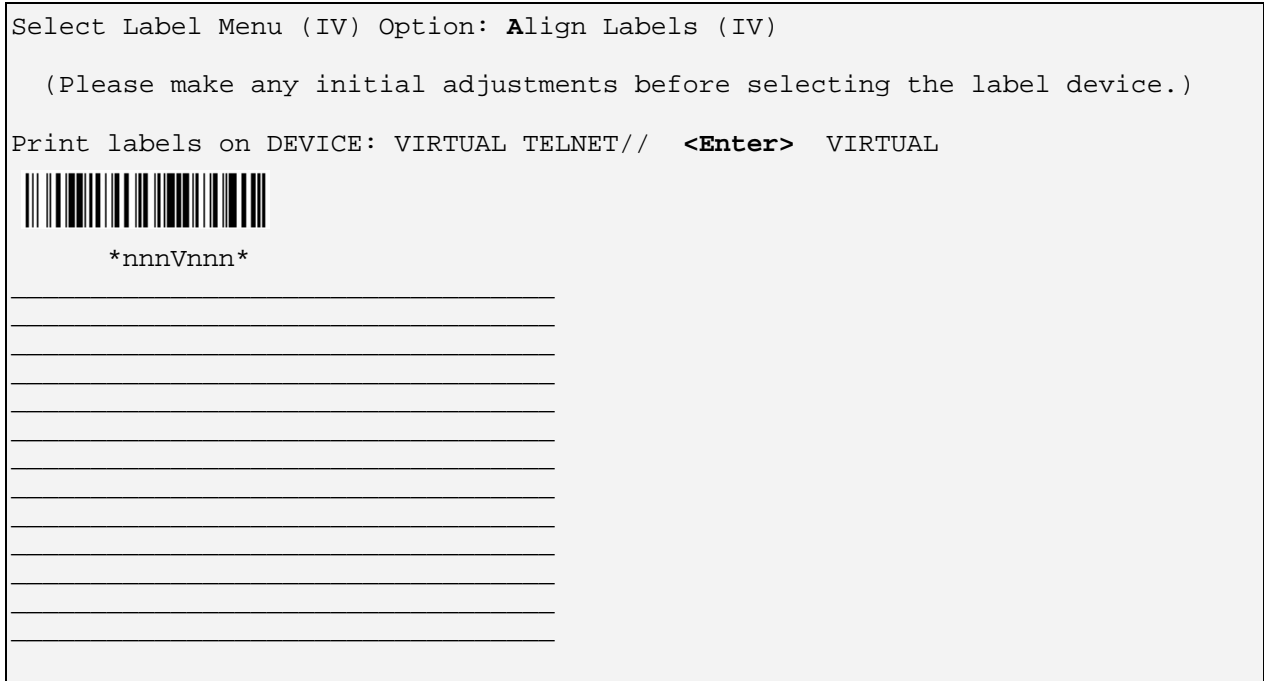


Figure 8-35: Example: IV Align Labels

nnnVnnn

nnnVnnn

Is the label alignment correct? Yes// **<Enter>** (Yes)

Figure 8-36: Example: IV Align Labels (continued)

8.2.1.2 Individual Labels (IV)

[PSJI LBLI]

The *Individual Labels (IV)* option allows the printing of labels for a patient’s order. The pharmacist can choose whether or not the labels are to be counted as daily usage. This is often used for on-call orders or those not automatically delivered.

Once an order is selected from the patient profile, all of the printed labels that have not been marked as Completed or Given by BCMA, or have not been Reprinted, Recycled, Cancelled, or Destroyed, display on the order view. The pharmacist can select to print new labels or reprint IV labels.

Select Label Menu (IV) Option: Individual Labels (IV)

Select PATIENT: **ABC**, PATIENT M 123-45-9111 CR 9111

Figure 8-37: Example: IV Individual Labels

Patient Information Feb 20, 2002@16:02:15 Page: 1 of 1
 ABC,PATIENT Ward: ONE EAST
 HRN: 9111 Room-Bed: B-12 Ht(cm): _____ (_____)
 DOB: 08/18/20 (80) Wt(kg): _____ (_____)
 Sex: MALE Admitted: 09/10/01
 Dx: TESTING Last transferred: *****

Allergies/Reactions: No Allergy Assessment
 Inpatient Narrative:
 Outpatient Narrative:

Enter ?? for more actions
 PU Patient Record Update NO New Order Entry
 DA Detailed Allergy/ADR List IN Intervention Menu
 VP View Profile
 Select Action: View Profile// <Enter> View Profile

SHORT, LONG, or NO Profile? SHORT// <Enter> SHORT

IV Profile Feb 20, 2002@16:02:45 Page: 1 of 1
 ABC,PATIENT Ward: ONE EAST
 HRN: 9111 Room-Bed: B-12 Ht(cm): _____ (_____)
 DOB: 08/18/20 (81) Wt(kg): _____ (_____)
 Sex: MALE Admitted: 09/10/01
 Dx: TESTING Last transferred: *****

#	Additive	Last fill	Type	Start	Stop	Stat
----- A c t i v e -----						
1	POTASSIUM CHLORIDE XXXXXXXXXXXXX 35 MEQ in DEXTROSE 5% 1/2 NS 1000 ML 80 ml/ hr	FEB 20 15:55	#1 A	02/20	02/20	A

Enter ?? for more actions
 PI Patient Information SO Select Order
 PU Patient Record Update NO (New Order Entry)
 Select Action: Quit// 1

 Patient: ABC,PATIENT Status: ACTIVE
 * (1) Additives: Order number: 445 Type: ADMIXTURE
 POTASSIUM CHLORIDE XXXXXXXXXXXXX 35 MEQ
 * (2) Solutions:
 DEXTROSE 5% 1/2 NS 1000 ML
 DURATION:
 * (3) Infusion Rate: 80 ml/hr * (4) Start: 02/20/02 15:46
 * (5) Med Route: IV * (6) Stop: 02/20/02 24:00

```

BCMA ORDER LAST ACTION: 02/20/02 15:50 Infusing*
*(7)      Schedule:                               Last Fill: 02/20/02 15:55
(8)      Admin Times:                             Quantity: 1
*(9)      Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses: 1
(10)     Other Print:

(11)     Remarks :
        Entry By: INPATIENT-MEDS,PHA              Entry Date: 02/20/02 15:55

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

Figure 8-38: Example: IV Individual Labels (continued)

```

Individual IV Labels      Feb 20, 2002@16:03:54      Page: 1 of 0
ABC,PATIENT              Ward: ONE EAST
PID: 213-45-9111         Room-Bed: B-12           Ht(cm): _____ (_____)
DOB: 08/18/20 (81)      Wt(kg): _____ (_____)

        POTASSIUM CHLORIDE XXXXXXXXXXXX 35 MEQ      C 02/20 02/20 A
        in DEXTROSE 5% 1/2 NS 1000 ML 80 ml/hr

----- Labels available for reprint -----

        Enter ?? for more actions
NL  Print New Labels              RL  Reprint IV Labels
Select Item(s): Quit// NL  Print New Labels

Number of labels to print: 3
Count as daily usage? Yes//  <Enter>
    
```

Figure 8-39: Example: IV Individual Labels (continued)

```

Individual IV Labels          Feb 20, 2002@16:05:01          Page: 1 of 0
ABC,PATIENT                  Ward: ONE EAST
  HRN: 9111                   Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (81)         Wt(kg): _____ (_____)

      POTASSIUM CHLORIDE XXXXXXXXXXXX 35 MEQ   C 02/20 02/20 A
      in DEXTROSE 5% 1/2 NS 1000 ML 80 ml/hr

----- Labels available for reprint -----
1. 739V444  POTASSIUM CHLORIDE XXXXXXXXXXXX 35 MEQ
            DEXTROSE 5% 1/2 NS 1000 ML
            80 ml/hr
            1[3]
2. 739V445  POTASSIUM CHLORIDE XXXXXXXXXXXX 35 MEQ
            DEXTROSE 5% 1/2 NS 1000 ML
            80 ml/hr
            2[3]
3. 739V446  POTASSIUM CHLORIDE XXXXXXXXXXXX 35 MEQ
            DEXTROSE 5% 1/2 NS 1000 ML
            80 ml/hr
+          Enter ?? for more actions
NL  Print New Labels          RL  Reprint IV Labels
Select Item(s): Next Screen// RL  Reprint IV Labels

Count as daily usage? Yes// <Enter> (Yes)

Select from 1 - 3 or <RETURN> to select by BCMA ID: 1
    
```

8.2.1.3 Scheduled Labels (IV)

[PSJI LBL5]

The *Scheduled Labels (IV)* option prints labels for a particular scheduled manufacturing time. Usually a Manufacturing List has been run prior to the printing of the labels. If this has been done, the labels will print immediately and in the same order as on the Manufacturing List. The use of this option also causes workload counts in the IV STATS file the first time they are printed. If they are printed a second time (e.g., due to a paper jam), the system knows they have been previously counted and will not count them in workload counts again. However, if the Ward List is re-run, and scheduled labels are printed again, the labels will be counted again in the workload.

This option displays the unique Bar Code ID for each label printed. If the printer is not capable of printing bar codes, only the text displayed below the bar code will print.

```
Select Label Menu (IV) Option:  Scheduled Labels (IV)

Schedule labels for DATE: TODAY// <Enter> (MAR 19, 2002)

  The manufacturing times on file are:
  1  14:00  PIGGYBACKS covering 1600 to 1559.
  2  11:00  ADMIXTURES AND PRIMARIES covering 0700 to 0659.
  3  12:00  HYPERALS covering 1400 to 1359.
  4  14:00  SYRINGE covering 1400 to 1359.
  5  14:00  CHEMOTHERAPY covering 1400 to 1359.

Enter manufacturing time(s): 1
```

Figure 8-40: Example: IV Scheduled Labels



739V744

[64] 9111 ONE EAST 03/19/02
ABC,PATIENT B-12

MVI 100 ML
0.9% SODIUM CHLORIDE 100 ML

Dose due at: 03/19/02 1300
INFUSE OVER 10 MIN.

QID

09-13-17-21

Fld by: _____ Chkd by: _____

1[4]



739V745

[64] 9111 ONE EAST 03/19/02
ABC,PATIENT B-12

MVI 100 ML
0.9% SODIUM CHLORIDE 100 ML

Dose due at: 03/19/02 1700
INFUSE OVER 10 MIN.

QID

09-13-17-21

Fld by: _____ Chkd by: _____

2[4]



739V746

[64] 9111 ONE EAST 03/19/02
ABC,PATIENT B-12

MVI 100 ML
0.9% SODIUM CHLORIDE 100 ML

Dose due at: 03/19/02 2100
INFUSE OVER 10 MIN.

QID

09-13-17-21

Fld by: _____ Chkd by: _____

3[4]



739V747

[64] 9111 ONE EAST 03/19/02


```
ABC,PATIENT  B-12

MVI 100 ML
0.9% SODIUM CHLORIDE 100 ML

Dose due at: 03/20/02 0900
INFUSE OVER 10 MIN.
QID
09-13-17-21
Fld by: _____ Chkd by: _____
4[4]
```

Figure 8-41: Example: IV Scheduled Labels (continued)

8.2.1.4 Reprint Scheduled Labels (IV)

[PSJI LBLR]

The *Reprint Scheduled Labels (IV)* option allows scheduled labels to be reprinted in case of printer problems, or other occurrences, in which a portion of the scheduled labels failed to print. Labels printed with the reprint option will only be counted as usage if they were not counted during the original printing of scheduled labels. Each IV label will contain a unique Bar Code ID printed as the first line of the label or the unique Bar Code ID text if the label printer is not capable of printing bar codes.

Once a date has been selected, only manufacturing times for which scheduled labels have been attempted will be displayed for reprinting. The pharmacist is prompted for the patient's name(s) and the order number of the last and next usable labels. If ?? is entered at a prompt for order number, a profile will be displayed showing only orders for that patient which are on the current ward list. If no entry is made for the patient's name and order number on the "NEXT usable label:" prompt, labels will be printed from the "LAST usable label" selected, to the end.

Note: The *Ward List (IV)* and *Scheduled Labels (IV)* options MUST be run for the chosen date before the user can use this option.

This option also checks the status of the order. If the order has been documented as Completed or Given by BCMA, the label will not be re-printed.

8.2.1.5 Test Control Codes (IV)

[PSJI CONTROL CODES]

The *Test Control Codes (IV)* option allows the user to print an IV label for the purpose of verifying the control code definitions. These control code definitions are needed for the Zebra printers and are input by the site manager into the TERMINAL TYPE file. An entire label is not printed, just a Bar Code ID and one line of underscores.

```

Select Label Menu (IV) Option:  TESt Control Codes (IV)
Select IV ROOM NAME:  <Enter>   TST ISC ROOM

You are signed on under the TST ISC ROOM IV ROOM

Current IV LABEL device is:  <Enter>   ZEBRA 1

Current IV REPORT device is:  <Enter>   NT TELNET TERMINAL


(Please make any initial adjustments before selecting the label device.)

Print labels on DEVICE:  ZEBRA 1//  <Enter>   Zebra Barcode Printer

```

Figure 8-42: Example: Testing Control Codes

```


*nnnVnnn*
_____

Is the label alignment correct? Yes//

```

Figure 8-43: Example: Testing Control Codes (continued)

8.2.2 Reports (IV)

[PSJI REPORTS]

The *REPorts (IV)* option leads to the selection of one of the pre-set reports of the IV module. This option contains five sub-options.

```

Select IV Menu Option:  REPorts (IV)

Select REPorts (IV) Option:  ?

    Active Order List (IV)
    INpatient Stop Order Notices
    IV Drug Formulary Report (IV)
    Patient Profile Report (IV)
    Renewal List (IV)

```

Figure 8-44: Example: IV Reports

8.2.2.1 Active Order List (IV)

[PSJI ACTIVE]

The *Active Order List (IV)* creates a report to show all orders that are active at the time that this report is run. This report is similar to the *Ward List (IV)* option, since the *Ward List* report also contains all active orders when it is run; however, this report maintains the following attributes:

- Can be run at any time rather than only at a start of coverage time
- Will not affect the calculation of number of labels needed after order entry (Running the *Ward List (IV)* affects the count of labels needed in label prompt, Action (PBS))
- Will contain all types of IV orders (hyperals, admixtures, piggybacks, chemos, and syringes)
- Can be run for specific ward(s)

Note: At the “Start at WARD:” or “Stop at WARD:” prompts, the user can enter **^OUTPATIENT** to get reports for Outpatient IVs. The user can enter ward location, synonym, or name of service.

The IV module prints this report in alphabetical order. Therefore, the user should carefully select the beginning and ending wards to make sure the beginning ward is alphabetically before the ending ward.

```
Select REPorts (IV) Option:  Active Order List (IV)
Start at WARD:  BEG//  ?

Press <RETURN> to start from the first ward
or enter "^Outpatient" for Outpatient IV
or enter any ward.

Start at WARD:  BEG//      ONE EAST
Stop at WARD:  END//  ?

Press <RETURN> to stop at the last ward
or enter "^Outpatient" for Outpatient IV
or enter any ward.

Stop at WARD:  END//      ONE EAST
```

Figure 8-45: Example: IV Active Order List

```

Active order list
Printed on: MAR 19,2001 13:51

Patient name                Order                Stop date                Provider
-----
                                **** Ward: ONE EAST ****

B-12                MVI 100 ML                MAR 20,2001 24:00
INPATIENT-MEDS,PROVIDER
ABC,PATIENT        0.9% SODIUM CHLORIDE 100 ML
9111 [64]          INFUSE OVER 10 MIN.
                   QID (09-13-17-21)

B-12                ACETAMINOPHEN 100 MEQ                MAR 26,2001 24:00
INPATIENT-MEDS,PROVIDER
ABC,PATIENT        0.9% SODIUM CHLORIDE 100 ML
9111 [65]          100 ml/hr

Select REPorts (IV) Option:
    
```

Figure 8-46: Example: IV Active Order List (continued)

8.2.2.2 INpatient Stop Order Notices

[PSJ EXP]

The *INpatient Stop Order Notices* option produces a list of patients' medication orders that are about to expire. Action must be taken if these medications are to be re-ordered. This option will list both Unit Dose orders and IV orders. The user may choose to print All, which is the default, or either the Unit Dose or IV orders.

Special Instructions for Unit Dose orders and Other Print Information for IV orders are listed on the report. IV orders are sorted by the Orderable Item of the first additive or solution in the order. The Orderable Item with each additive and solution is displayed along with the strength/volume specified. The schedule type for all IV orders is assumed to be continuous.

If the user chooses to print by ward, the selection to sort by administration teams is displayed. ALL teams (default selection), multiple teams, or one administration team may be chosen.

```
Select Reports Menu Option: INpatient Stop Order Notices
Select by WARD GROUP (G), WARD (W), or PATIENT (P): PATIENT
Select PATIENT:      XYZ,PATIENT      222-32-4321   02/22/42   1 West
Enter start date: T (SEP 19, 2000)
Enter stop date: T+7 (SEP 26, 2000)
List IV orders, Unit Dose orders, or All orders: ALL// <Enter>
Select PRINT DEVICE: 0;80 TELNET
...this may take a few minutes...
                        ...you really should QUEUE this report, if
possible...
Enter RETURN to continue or '^' to exit: <Enter>
```

Figure 8-47: Example: Inpatient Stop Order Notices

AS OF: 09/19/00 13:14

Page: 1

THE FOLLOWING MEDICATIONS WILL EXPIRE
 FROM 09/19/00 00:01 THROUGH 09/26/00 24:00
 TO CONTINUE MEDICATIONS, PLEASE REORDER ON VA FORM 10-1158.

XYZ,PATIENT Ward: 1 West
 HRN: 4321 Room-Bed: A-6 Ht(cm): 167.64 (04/21/99)
 DOB: 02/22/42 (58) Wt(kg): 85.00 (04/21/99)
 Sex: MALE Admitted: 09/16/99
 Dx: TEST PATIENT
 Allergies: CARAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE, CHOCOLATE,
 NUTS, STRAWBERRIES, DUST
 NV Aller.: AMOXICILLIN, AMPICILLIN, TAPE, FISH, FLUPHENAZINE DECANOATE
 ADR:

Medication Dosage	ST	Start	Stop	Status/Info Provider
AMPICILLIN 100 GM in 0.45% NAACL 1000 ML 8MG/HR MEDS,PROVIDER IV 8MG/HR@1	C	09/19	09/22/00 18:00 A	INPATIENT-
PENTAMIDINE ISETHIONATE 1 MG in 0.45% NAACL 1000 ML 8 MG/HR MEDS,PROVIDER IV 8 MG/HR@1	C	09/19	09/22/00 18:00 A	INPATIENT-
ACETAMINOPHEN 300/CODEINE 30 TAB Give: 650MG PO QD MEDS,PROVIDER	C	09/16	09/22/00 22:00 A	INPATIENT-
BENZOYL PEROXIDE GEL, TOP Give: APPLY SMALL ABOUT TOP QD MEDS,PROVIDER Special Instructions: TEST	C	09/19	09/22/00 22:00 A	INPATIENT-
RANITIDINE TAB Give: 150MG PO QID MEDS,PROVIDER	C	09/18	09/22/00 22:00 A	INPATIENT-
THEOPHYLLINE CAP, SA Give: 400MG PO QID MEDS,PROVIDER Special Instructions: TESTING	C	09/18	09/22/00 22:00 A	INPATIENT-
XYZ, PATIENT		222-32-4321	1 West	A-6

Figure 8-48: Example: Inpatient Stop Order Notices (continued)

8.2.2.3 IV Drug Formulary Report (IV)

[PSJI DRUG FORM]

The *IV Drug Formulary Report (IV)* option creates a report to allow the user to print out all information on any of the defined IV drugs. It is a VA FileMan report; therefore the user can choose which fields to print.

```
Select REPorts (IV) Option:  IV Drug Formulary Report (IV)

Are you printing drug information from ...
the IV ADDITIVE file or IV SOLUTION file ?  ADDITIVE//  <Enter>  ADDITIVE
SORT BY: PRINT NAME//  <Enter>
START WITH PRINT NAME: FIRST// <Enter>
FIRST PRINT FIELD: ??

  Choose from:
    .01      PRINT NAME
     1       GENERIC DRUG
     2       DRUG UNIT
     3       NUMBER OF DAYS FOR IV ORDER
     4       USUAL IV SCHEDULE
     5       ADMINISTRATION TIMES
     6       QUICK CODE  (multiple)
     7       AVERAGE DRUG COST PER UNIT
     8       ELECTROLYTES (multiple)
     9       SYNONYM    (multiple)
    10      DRUG INFORMATION (word-processing)
    11      *STATUS
    12      INACTIVATION DATE
    13      CONCENTRATION
    14      MESSAGE
    15      PHARMACY ORDERABLE ITEM
    16      *PRIMARY DRUG
    17      USED IN IV FLUID ORDER ENTRY

      TYPE '&' IN FRONT OF FIELD NAME TO GET TOTAL FOR THAT FIELD,
        '!' TO GET COUNT, '+' TO GET TOTAL & COUNT, '#' TO GET MAX & MIN,
        ']' TO FORCE SAVING PRINT TEMPLATE
      TYPE '[TEMPLATE NAME]' IN BRACKETS TO USE AN EXISTING PRINT TEMPLATE
      YOU CAN FOLLOW FIELD NAME WITH ';' AND FORMAT SPECIFICATION(S)
FIRST PRINT FIELD: .01  PRINT NAME
THEN PRINT FIELD: DRUG INFORMATION (word-processing)
THEN PRINT FIELD: <Enter>
DEVICE:  VIRTUAL      Right Margin: 80// <Enter>
```

Figure 8-49: Example: IV Drug Formulary Report

IV ADDITIVES LIST PRINT NAME	MAR 19,2001 13:54 PAGE 1 DRUG INFORMATION

10% DEXTROSE	
10% DEXTROSE	
5% DEXTROSE	
5-FLUOURACIL	
50% DEXTROSE	
ACETAMINOPHEN	

Figure 8-50: Example: IV Drug Formulary Report

AMPICILLIN	Trade Name: Polycillin-N Omnipen-N Fluid Compatibility: D5W, NS Stability: In NS 8 hrs. at room temp., 72 hrs. refrigerated In D5W 2 hrs. at room temp., 4 hrs. refrigerated Administration: iGM or less in 50ML over 30 minutes Over iGM in 100ML over 60 minutes
AMPICILLIN	
C2TESTDRUG	
CEFAMANDOLE	
CEFAZOLIN	

IV ADDITIVES LIST	MAR 19,2001 13:54 PAGE 2
PRINT NAME	DRUG INFORMATION

CEFOXITIN	
CEFTRIAZONE	
CEPHAPIRIN	
CIMETIDINE	
FUROSEMIDE	
FUROSEMIDE	
GENTAMICIN	
GENTAMYCIN	
HEPARIN	
KCL	
MVI	
OXACILLIN	
PENICILLIN G	
POTASSIUM CHLORIDE	XXXXXXXXXXXX
PROLEUKIN	

Figure 8-51: Example: IV Drug Formulary Report (continued)

8.2.2.4 Patient Profile Report (IV)

[PSJI PROFILE REPORT]

The *Patient Profile Report (IV)* option will allow a patient profile to be printed. With each profile printed, a view of each order within the profile can also be printed. Additionally, with each view the user can choose to have the activity log and the label log printed.


```
Select REports (IV) Option: Patient Profile Report (IV)
View each order in the profile? Yes// <Enter> (Yes)
View each activity log in the profile? Yes// <Enter> (Yes)
View the label log in the profile? Yes// <Enter> (Yes)

Select PATIENT:      ABC,PATIENT          123-45-9111  08/18/20    ONE EAST
```

Figure 8-52: Example: IV Patient Profile Report

```

I V P A T I E N T   P R O F I L E                03/19/01  14:35
                SITE:  ALBANY (500)
-----
ABC,PATIENT                Ward: ONE EAST
  HRN: 9111                Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)      Wt(kg): _____ (_____)
  Sex: MALE                Admitted: 05/03/00
  Dx: TESTING
Pharmacy Narrative:
Allergies: No Allergy Assessment
  ADR:
#  Additive                Last fill                Type  Start  Stop  Stat
----- A c t i v e -----
1  ACETAMINOPHEN 100 MEQ    MAR 19 12:06 #2    A    03/19  03/26  A
   in 0.9% SODIUM CHLORIDE 100 ML 100
   ml/hr
2  MVI 100 ML              MAR 19 12:06 #4    P    03/19  03/20  A
   in 0.9% SODIUM CHLORIDE 100 ML QID
3  CEFAMANDOLE 1 GM        **  N/P  ** #0    A    02/15  02/22  H
   in 0.9% SODIUM CHLORIDE 100 ML 125
   ml/hr ON CALL
----- P e n d i n g -----
4  FLUOROURACIL INJ,SOLN   **  N/P  ** #0    *****  *****  P R
   Give: 100MG/2ML PO QD
5  TIMOLOL SOLN,OPH        **  N/P  ** #0    P    *****  *****  P
   Give: IV Q12H
----- N o t   A c t i v e -----
6  MVI 1 ML                MAR 15 12:47 #3    P    03/15  03/16  E
   in 0.9% SODIUM CHLORIDE 50 ML QID
7  MVI 1 ML                MAR 15 12:40 #1    P    03/15  03/15  D
   in NORMAL SALINE 1000 ML QD
8  C2TESTDRUG 1 LITER      **  N/P  ** #0    C    03/02  03/03  E
   in 0.9% SODIUM CHLORIDE 100 ML QD
-----
Patient: ABC,PATIENT                Status: ACTIVE
* (1) Additives:                Order number: 65                Type: ADMIXTURE
<DIN>
  ACETAMINOPHEN 100 MEQ
* (2) Solutions:
  0.9% SODIUM CHLORIDE 100 ML
                                     DURATION:
* (3) Infusion Rate: 100 ml/hr      * (4) Start: 03/19/01  11:30
* (5) Med Route: IV                 * (6) Stop: 03/26/01  24:00
* (7) Schedule:                      Last Fill: 03/19/01  12:06
(8) Admin Times:                      Quantity: 20
* (9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses: 21
(10) Other Print:
(11) Remarks :
      Entry By: INPATIENT-MEDS,PHARMACIST      Entry Date: 03/19/01  11:30

ACTIVITY LOG:
#  DATE        TIME        REASON        USER
=====
No activity LOG to report.
    
```

Figure 8-53: Example: IV Patient Profile Report (continued)

LABEL LOG:						
#	DATE/TIME	ACTION	USER	#LABELS	TRACK	COUNT
1	MAR 19,2001@11:31:23	SUSPENDED	INPATIENT-MEDS, PHARMACIST	20	ORDER ACTION	
2	MAR 19,2001@11:47:58	DISPENSED	INPATIENT-MEDS, PHARMACIST	2	INDIVIDUAL	YES
3	MAR 19,2001@11:50:12	RECYCLED	INPATIENT-MEDS, PHARMACIST	2		
4	MAR 19,2001@12:05:35	DISPENSED	INPATIENT-MEDS, PHARMACIST	1	INDIVIDUAL	YES
5	MAR 19,2001@12:06:28	DISPENSED	INPATIENT-MEDS, PHARMACIST	20	SCHEDULED	YES
6	MAR 19,2001@13:45:31	DISPENSED	INPATIENT-MEDS, PHARMACIST	20	SCHEDULED	NO

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

Select REPOrts (IV) Option:

Figure 8-54: Example: IV Patient Profile Report (continued)

8.2.2.5 Renewal List (IV)

[PSJI RNL]

The *Renewal List (IV)* option prints a list of all orders that need to be renewed on the date the user has specified. These orders will expire on the given date if they are not renewed.

The user will enter the beginning date and ending date of the renewal list. For example, if the user wants to know what orders will expire from noon today to noon tomorrow, **T@1200** can be entered as the beginning date and **T+1@1200** can be entered as the ending date.

Note: At the “Start at WARD:” or “Stop at WARD:” prompts, the user can enter **^OUTPATIENT** to get reports for Outpatient IVs.

```
Select REPorts (IV) Option:  Renewal List (IV)
Enter beginning date:  T@0001// <Enter>  3/20@0001  (MAR 20, 2001@00:01)
Enter ending date:  T@2400// <Enter>  3/20@2400  (MAR 20, 2001@24:00)
Start at WARD:  BEG//      ONE EAST
Stop at WARD:  END//      ONE EAST
```

Figure 8-55: Example: IV Renewal List

```
Renewal list from MAR 20,2001 00:01 to MAR 20,2001 24:00
Printed on: MAR 19,2001 14:44

Patient name          Order                      Stop date             Provider
-----
                                **** Ward: ONE EAST ****
B-12                  MVI 100 ML                MAR 20,2001 24:00
INPATIENT-MEDS,PROVIDER
ABC,PATIENT          0.9% SODIUM CHLORIDE 100 ML
9111 [64]            INFUSE OVER 10 MIN.
                      QID (09-13-17-21)

Select REPorts (IV) Option:
```

Figure 8-56: Example: IV Renewal List (continued)

8.2.3 Suspend Functions (IV)

[PSJI SUSMENU]

The *SUSpend Functions (IV)* menu option will allow the user to choose from the available suspend options within the IV module. This option contains six sub-options.

```
Select IV Menu Option:  SUSpend Functions (IV)
Select SUSpend Functions (IV) Option:  ?

Delete Labels from Suspend (IV)
Individual Order Suspension (IV)
Labels from Suspend (IV)
Manufacturing Record for Suspend (IV)
Reprint Labels from Suspend (IV)
Suspend List (IV)
```

Figure 8-57: Example: IV Suspend Functions Menu

8.2.3.1 Delete Labels from Suspense (IV)

[PSJI SUSLBDEL]

The *Delete Labels from Suspense (IV)* option allows the user to delete labels for orders that have been placed on suspense. The order is not affected by this option, only the labels are deleted.

```
Select SUSPense Functions (IV) Option: DELete Labels from Suspense (IV)
Select PATIENT:      ABC,PATIENT           M 123-45-9111  CR 9111
...one moment, please...
```

Figure 8-58: Example: Delete IV Labels from Suspense

```
Patient Name ABC,PATIENT (GEN MED)
Order Number          Order                               Suspended
-----
-
64                    4 labels          MAR 19,2001
11:30:49
                    MVI 100 ML
                    0.9% SODIUM CHLORIDE 100 ML
                    INFUSE OVER 10 MIN.
                    QID (09-13-17-21)
65                    20 labels          MAR 19,2001
11:31:21
                    ACETAMINOPHEN 100 MEQ
                    0.9% SODIUM CHLORIDE 100 ML
                    100 ml/hr

Select Order Number: 64
Deleted.

Select SUSPense Functions (IV) Option:
```

Figure 8-59: Example: Delete IV Labels from Suspense (continued)

8.2.3.2 Individual Order Suspension (IV)

[PSJI INDIVIDUAL SUSPENSE]

The *Individual Order Suspension (IV)* option allows the user to suspend labels for a specific active order. The user can only suspend ten labels at a time.

These labels will then be available for the IV room to release for doses due within the present coverage interval or for the next coverage interval if the Ward List for that batch has already been run.

```

Select SUSPense Functions (IV) Option:  Individual Order Suspension (IV)
Select PATIENT:      ABC,PATIENT          123-45-9111  08/18/20    ONE EAST
Patient Information   Mar 19, 2001@14:55:29          Page:    1 of    1
ABC,PATIENT          Ward: GEN MED
  PID: 123-45-5432    Room-Bed: B-4          Ht(cm): _____ (_____)
  DOB: 02/22/60 (41) Wt(kg): _____ (_____)
  Sex: MALE          Admitted: 08/22/00
  Dx: TEST          Last transferred: *****

Allergies/Reactions: No Allergy Assessment
Inpatient Narrative:
Outpatient Narrative:

Enter ?? for more actions
PU Patient Record Update          NO New Order Entry
DA Detailed Allergy/ADR List      IN Intervention Menu
VP View Profile
Select Action: View Profile//  <Enter>  View Profile

SHORT, LONG, or NO Profile?  SHORT//  <Enter>  SHORT
    
```

Figure 8-60: Example: IV Individual Order Suspension

```

IV Profile           Mar 19, 2001@14:55:57          Page:    1 of    1
ABC,PATIENT          Ward: ONE EAST
  HRN: 9111          Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (80) Wt(kg): _____ (_____)
  Sex: MALE          Admitted: 05/03/00
  Dx: TESTING        Last transferred: *****

#  Additive                Last fill          Type  Start  Stop  Stat
----- A c t i v e -----
1  ACETAMINOPHEN 100 MEQ    MAR 19 12:06  #2   A    03/19  03/26  A
   in 0.9% SODIUM CHLORIDE 100 ML 100
   ml/hr
2  MVI 100 ML          MAR 19 12:06  #4   P    03/19  03/20  A
   in 0.9% SODIUM CHLORIDE 100 ML QID
----- P e n d i n g -----
3  FLUOROURACIL INJ,SOLN    **  N/P  **  #0    *****  *****  P R
   Give: 100MG/2ML PO QD
4  TIMOLOL SOLN,OPH        **  N/P  **  #0    P    *****  *****  P
   Give: IV Q12H
Enter ?? for more actions
PI Patient Information          SO  Select Order
PU Patient Record Update      NO  (New Order Entry)
Select Action: Quit//  2

Number of labels to suspend:  2  .....  2 Labels suspended !
    
```

Figure 8-61: Example: IV Individual Order Suspension (continued)

8.2.3.3 Labels from Suspense (IV)

[PSJI SUSLBLE]

The *Labels from Suspense (IV)* option prints all labels that have been suspended since the last print of labels from suspense. Once labels have been printed, they are erased from this file and may not be printed again using this option. The user can, however, use the *Reprint Labels from Suspense (IV)* option if the labels need to be reprinted.

```
Select SUSPense Functions (IV) Option: LLabels from Suspense (IV)
```



```
[3] 9300 7A SURG 03/19/02  
IOWA,LUKE 724-A  
  
CEFTRIAXONE 10 GM  
KCL 20MEQ/D5/NACL 0.9% 1000 ML  
KCL 20MEQ/D5/NACL {2}  
In Syringe: 10  
  
Dose due at: 01/12/02 0924  
FOR I.M. IJECTION  
START NOW  
ONCE  
Fld by: _____ Chkd by: _____  
1[1]
```

Figure 8-62: Example: Printing IV Labels from Suspense



 *739V141* [64] 9111 ONE EAST 03/19/02 ABC,PATIENT B-12 MVI 100 ML 0.9% SODIUM CHLORIDE 100 ML Dose due at: _____ INFUSE OVER 10 MIN. QID 09-13-17-21 Fld by: _____ Chkd by: _____ 1[2]  *739V142* [64] 9111 ONE EAST 03/19/02 ABC,PATIENT B-12 MVI 100 ML 0.9% SODIUM CHLORIDE 100 ML Dose due at: _____ INFUSE OVER 10 MIN. QID 09-13-17-21 Fld by: _____ Chkd by: _____ 2[2]
--

Figure 8-63: Example: Printing IV Labels from Suspense (continued)

8.2.3.4 Manufacturing Record for Suspense (IV)

[PSJI SUSMAN]

The *Manufacturing Record for Suspense (IV)* option will compile all orders that are on suspense and print a Manufacturing List similar to the list produced by the *Manufacturing List (IV)* option. If the IV room fills a large number of IV orders from suspense, the user might want to use this Manufacturing Record to help organize this workload.


```

Select SUSpense Functions (IV) Option: MANufacturing Record for Suspense (IV)

MANUFACTURING LIST FROM SUSPENSE
Printed on           : MAR 19,2001 15:01
-----
-
*** PIGGYBACKS ***
MVI 100 ML                               Total: 4
      MVI 100 ML                               Lot#:
-----
      in
      0.9% SODIUM CHLORIDE 100 ML             Lot#:
-----
[64] ABC,PATIENT (9111) (ONE EAST)         1
-----
Overall Total: 1
    
```

Figure 8-64: Example: Manufacturing Record for Suspense

8.2.3.5 Reprint Labels from Suspense (IV)

[PSJI SUSREP]

The *Reprint Labels from Suspense (IV)* option will allow suspended labels that have been printed to be reprinted (e.g., if IV label printer was off line during initial printing). Each time labels are printed from suspense, they are assigned a batch number. When a batch of labels has to be reprinted, that batch number is entered and the labels reprinted. The default will always be the most recent batch number.

Select SUSPense Functions (IV) Option: REprint Labels from Suspense (IV)
 1) Labels printed on: MAR 19,2002 14:57:26

Reprint batch # 1// Labels printed on MAR 19,2002 14:57:26



389V128

[3] 9300 7A SURG 03/19/02
 IOWA,LUKE 724-A

CEFTRIAZONE 10 GM
 KCL 20MEQ/D5/NACL 0.9% 1000 ML
 KCL 20MEQ/D5/NACL {2}
 In Syringe: 10

Dose due at: 01/12/02 0924
 FOR I.M. IJECTION
 START NOW
 ONCE
 Fld by: _____ Chkd by: _____
 1[1]



739V141

[64] 9111 ONE EAST 03/19/02
 ABC,PATIENT B-12

MVI 100 ML
 0.9% SODIUM CHLORIDE 100 ML

Dose due at: _____
 INFUSE OVER 10 MIN.
 QID
 09-13-17-21
 Fld by: _____ Chkd by: _____
 1[2]

Figure 8-65: Example: Reprint IV Labels from Suspense

8.2.3.6 Suspense List (IV)

[PSJI SUSLIST]

The *Suspense List (IV)* option allows the user to view the future workload of orders that have been placed on suspense (to help plan and organize the IV workload). This list can be viewed on the computer screen, or printed on the report printer device. Multiple printings of this list do not affect the suspense Manufacturing Record or suspense labels.

```

Select SUSpense Functions (IV) Option: SUSpense List (IV)

Suspense list for: MAR 19,2002 15:04
Patient name                Order                                Suspended
-----
ABC,PATIENT (ONE EAST)          3 labels    MAR 19,2002 15:00:35
9111 [64]
MVI 100 ML
0.9% SODIUM CHLORIDE 100 ML
INFUSE OVER 10 MIN.
QID (09-13-17-21)

ABC,PATIENT (ONE EAST)          1 label    MAR 19,2002 15:01:37
9111 [64]
MVI 100 ML
0.9% SODIUM CHLORIDE 100 ML
INFUSE OVER 10 MIN.
QID (09-13-17-21)


*739V142*

[64] 9111 ONE EAST 03/19/02
ABC,PATIENT B-12

MVI 100 ML
0.9% SODIUM CHLORIDE 100 ML

Dose due at: _____
INFUSE OVER 10 MIN.
QID
09-13-17-21
Fld by: _____ Chkd by: _____
2[2]
    
```

Figure 8-66: Example: IV Suspense List

9.0 Inquiries Option

9.1 Unit Dose

All of the Inquiries Options are located under the *INquiries Menu* option on the *Unit Dose Medications* menu.

9.1.1 Inquiries Menu

[PSJU INQMGR]

The *INquiries Menu* option allows the user to view information concerning standard schedules and drugs. No information in this option can be edited, so there is no danger of disrupting the Unit Dose module's operation. The *INquiries Menu* contains the following sub-options:

```
Select Unit Dose Medications Option: INquiries Menu
```

```
Select INquiries Menu Option: ?
```

```
    Dispense Drug Look-Up  
    Standard Schedules
```

Figure 9-1: Example: Inquiries Menu

9.1.1.1 Dispense Drug Look-Up

[PSJU INQ DRUG]

The *Dispense Drug Look-Up* option allows the pharmacist to see what drugs are in the DRUG file, and any Unit Dose information pertaining to them.

At the "Select DRUG:" prompt, the pharmacist can answer with drug number, quick code, or VA drug class code (for IV, solution print name, or additive print name). Information about the selected drug will be displayed.

```

Select Unit Dose Medications Option: INquiries Menu
Select INquiries Menu Option: DIspense Drug Look-Up

Select DRUG: ASP
  1  ASPIRIN 10 GRAIN SUPPOSITORIES          CN103          02-18-98
INPATIENT
  2  ASPIRIN 325MG                          CN103          N/F            *90-DAY FILL*
  3  ASPIRIN 325MG E.C.                     CN103          *90-DAY FILL*
  4  ASPIRIN 325MG E.C. U/D                 CN103          N/F            TAB
  5  ASPIRIN 325MG U/D                      CN103
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 5  ASPIRIN 325MG U/D           CN103
FORMULARY ITEM
A UNIT DOSE DRUG

  DAY (nD) or DOSE (nL) LIMIT:
    UNIT DOSE MED ROUTE:
    UNIT DOSE SCHEDULE TYPE:
    UNIT DOSE SCHEDULE:
CORRESPONDING OUTPATIENT DRUG:
  ATC MNEMONIC:
  ATC CANISTER: WEST WING                12
                  SOUTH WING             12
                  JUNK ONE                12
                  TESSS                   12
                  11;PS(57.5,            12
                  13;PS(57.5,            12
                  14;PS(57.5,            12
                  15;PS(57.5,            12
                  16;PS(57.5,            12
                  17;PS(57.5,            12
                  18;PS(57.5,            12
                  21;PS(57.5,            12
                  22;PS(57.5,            12

Select DRUG:

```

Figure 9-2: Example: Dispense Drug Look-Up

9.1.1.2 Standard Schedules

[PSJU INQ STD SCHD]

It is extremely important for all users to know the method of schedule input. When the user enters a standard schedule, the system will echo back the corresponding Administration times.

At the “Select STANDARD SCHEDULE:” prompt, enter an administration schedule abbreviation to view information pertaining to that schedule. An explanation of the selected schedule will be displayed. To view a list of the available administration schedule abbreviations, enter a question mark (?) at the prompt “Select STANDARD SCHEDULE:”.

```
Select INquiries Menu Option: SStandard Schedules
Select STANDARD SCHEDULE: q4H      01-05-09-13-17-21

  Schedule: Q4H                                Type: CONTINUOUS
  Standard Admin Times: 01-05-09-13-17-21

Select STANDARD SCHEDULE:
```

Figure 9-3: Example: Standard Schedules

9.2 Drug Inquiry (IV)

The *Drug Inquiry (IV)* option is located under the *IV Menu* option.

9.2.1 Drug Inquiry (IV)

[PSJI DRUG INQUIRY]

By means of the *Drug Inquiry (IV)* option, pharmacists and nurses on the wards will have pertinent information concerning IV additives and solutions at their fingertips. At the “Select PRINT NAME:” prompt, the user can enter the print name, synonym, or quick code. If there is no information in the DRUG INFORMATION field of these files, the following message will be displayed:

```
-----
Drug information on: 5-FLUOURACIL
  Last updated: N/A

*** No information on file. ***
-----
```

Figure 9-4: Example 1: IV Drug Inquiry with No Information

If there is information, the system displays the date when the drug information was last updated and the drug information on file for the additive or solution chosen. This information originates from a field called DRUG INFORMATION in both the IV ADDITIVES file and the IV SOLUTIONS file. Data entered may include recommended diluent, concentration, rate of administration, stability, compatibility, precautions, cost, or other current drug information.

```
Select IV Menu Option:  Drug Inquiry (IV)

Are you inquiring on

... an IV ADDITIVE or IV SOLUTION (A/S):  ADDITIVE//  <Enter>  ADDITIVE

Select IV ADDITIVES PRINT NAME:  AMPICILLIN
```

Figure 9-5: Example 2: IV Drug Inquiry with Information

Drug information on: AMPICILLIN
Last updated: APR 13,1998

Trade Name: Polycillin-N Omnipen-N
Fluid Compatibility: D5W, NS
Stability: In NS 8 hrs. at room temp., 72 hrs. refrigerated
In D5W 2 hrs. at room temp., 4 hrs. refrigerated
Administration: iGM or less in 50ML over 30 minutes
Over iGM in 100ML over 60 minutes

Select IV ADDITIVES PRINT NAME:

Figure 9-6: Example 2: IV Drug Inquiry with Information

Note: Drug Inquiry is allowed during order entry by entering two question marks (??) at the STRENGTH field of the "Select ADDITIVE:" prompt.

10.0 Glossary

Term	Definition
Action Prompt	<p>There are three types of “Action” prompts that occur during order entry. One type of requesting action on the order is the standard ListMan action prompt. The following actions are valid:</p> <ul style="list-style-type: none"> + Next Screen - Previous Screen UP Up a Line DN Down a Line > Shift View to Right < Shift View to Left FS First screen LS Last Screen GO Go to Page RD Re Display Screen PS Print Screen PT Print List SL Search List Q Quit ADPL Auto Display (on/off) <p>The second type of “Action” prompts is the Inpatient Medications Patient/Order actions. These actions are:</p> <ul style="list-style-type: none"> PU Patient Record Updates DA Detailed Allergy/ADR List VP View Profile NO New Orders Entry IN Intervention Menu PI Patient Information SO Select Order DC Discontinue ED Edit <ul style="list-style-type: none"> FL Flag VF Verify HD Hold RN Renew AL Activity Logs OC On Call NL Print New IV Labels

Term	Definition
	RL Reprint IV Labels RC Recycled IV DT Destroyed IV CA Cancelled IV
	The third type of “Action” prompts is the Hidden actions. These actions are:
	LBL Label Patient/Report JP Jump to a Patient OTH Other Pharmacy Options MAR MAR Menu DC Speed Discontinue RN Speed Renew SF Speed Finish SV Speed Verify CO Copy N Mark Not to be Given I Mark Incomplete DIN Drug Restr/Guide
Active Order	Any order which has not expired or been discontinued. Active orders also include any orders that are on hold or on call.
Activity Reason Log	The complete list of all activity related to a patient order. The log contains the action taken, the date of the action, and the user who took the action.
Activity Ruler	The activity ruler provides a visual representation of the relationship between manufacturing times, doses due, and order start times. The intent is to provide the on-the-floor user with a means of tracking activity in the IV room and determining when to call for doses before the normal delivery. The activity ruler can be enabled or disabled under the <i>Site Parameters (IV)</i> option.
Additive	A drug that is added to an IV solution for the purpose of parenteral administration. An additive can be an electrolyte, a vitamin or other nutrient, or an antibiotic. Only electrolyte or multivitamin type additives can be entered as IV fluid additives in CPRS.
ADMINISTRATION SCHEDULE file	File #51.1. This file contains administration schedule names and standard dosage administration times. The name is a common abbreviation for an administration schedule type

Term	Definition
	(e.g., QID, Q4H, PRN). The administration time entered is in military time, with each time separated from the next by a dash, and times listed in ascending order.
Administering Teams	Nursing teams used in the administration of medication to the patients. There can be a number of teams assigned to take care of one ward, with specific rooms and beds assigned to each team.
Admixture	An admixture is a type of intravenously administered medication comprised of any number of additives (including zero) in one solution. It is given at a specified flow rate; when one bottle or bag is empty, another is hung.
APSP INTERVENTION file	File #9009032.4. This file is used to enter pharmacy interventions. Interventions in this file are records of occurrences where the pharmacist had to take some sort of action involving a particular prescription or order. A record would record the provider involved, why an intervention was necessary, what action was taken by the pharmacists, etc.
Average Unit Drug Cost	The total drug cost divided by the total number of units of measurement.
BCMA	A computer software package named Bar Code Medication Administration. This package validates medications against active orders prior to being administered to the patient. This package is not yet available from IHS. The anticipated release will be in calendar year 2005.
Calc Start Date	Calculated Start Date. This is the date that would have been the default Start Date/Time for an order if no duration was received from CPRS. Due to the existence of a duration, the default Start Date/Time of the order becomes the <u>expected first dose</u> .
Calc Stop Date	Calculated Stop Date. This is the date that would have been the default Stop Date/Time for an order if no duration was received from CPRS. Due to the existence of a duration, the default Stop Date/Time of the order becomes the <u>expected first dose plus the duration</u> .
Chemotherapy	Chemotherapy is the treatment or prevention of cancer with chemical agents. The chemotherapy IV type administration can be a syringe, admixture, or a piggyback. Once the subtype (syringe, piggyback, etc.) is selected, the order entry follows the same procedure as the type that corresponds to the selected subtype (e.g., piggyback type of chemotherapy follows the same entry procedure as regular piggyback IV).

Term	Definition
Chemotherapy “Admixture”	The Chemotherapy “Admixture” IV type follows the same order entry procedure as the regular admixture IV type. This type is in use when the level of toxicity of the chemotherapy drug is high and is to be administered continuously over an extended period of time (e.g., seven days).
Chemotherapy “Piggyback”	The Chemotherapy “Piggyback” IV type follows the same order entry procedure as the regular piggyback IV type. This type of chemotherapy is in use when the chemotherapy drug does not have time constraints on how fast it must be infused into the patient. These types are normally administered over a 30 - 60 minute interval.
Chemotherapy “Syringe”	The Chemotherapy “Syringe” IV type follows the same order entry procedure as the regular syringe IV type. Its administration may be continuous or intermittent. The pharmacist selects this type when the level of toxicity of the chemotherapy drug is low and needs to be infused directly into the patient within a short time interval (usually 1-2 minutes).
Continuous Syringe	A syringe type of IV that is administered continuously to the patient, similar to a hyperal IV type. This type of syringe is commonly used on outpatients and administered automatically by an infusion pump.
Coverage Times	The start and end of coverage period designates administration times covered by a manufacturing run. There must be a coverage period for all IV types: admixtures and primaries, piggybacks, hyperals, syringes, and chemotherapy. For one type, admixtures for example, the user might define two coverage periods; one from 1200 to 0259 and another from 0300 to 1159 (this would mean that the user has two manufacturing times for admixtures).
CPRS	A VA computer software package called Computerized Patient Record Systems. The IHS equivalent software is the IHS Electronic Health Record (EHR). EHR is an application that allows the user to enter all necessary orders for a patient in different packages from a single application. All pending orders that appear in the Unit Dose and IV modules are initially entered through the EHR package.
Cumulative Doses	The number of IV doses actually administered, which equals the total number of bags dispensed less any Recycled, Destroyed, or Cancelled bags.
Default Answer	The most common answer, predefined by the system to save time and keystrokes for the user. The default answer appears

Term	Definition
	before the two slash marks (//) and can be selected by the user by pressing <Enter>.
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.
Delivery Times	The time(s) when IV orders are delivered to the wards.
Dosage Ordered	After the user has selected the drug during order entry, the dosage ordered prompt is displayed.
DRUG ELECTROLYTES file	File #50.4. This file contains the names of anions/cations, and their concentration units.
DRUG file	File #50. This file holds the information related to each drug that can be used to fill a prescription.
EHR	EHR is the Indian Health Service Electronic Health Record software application. EHR is an application that allows the user to enter all necessary orders for a patient in different packages from a single application. All pending orders that appear in the Unit Dose and IV modules are initially entered through the EHR package.
Electrolyte	An additive that disassociates into ions (charged particles) when placed in solution.
Entry By	The name of the user who entered the Unit Dose or IV order into the computer.
Hospital Supplied Self Med	Self med which is to be supplied by the Medical Center's pharmacy. Hospital supplied self med is only prompted for if the user answers Yes to the SELF MED prompt during order entry.
HRN	Health Record Number. This is a number assigned to each patient registered at a facility and is used to identify the patient. It may also be referred to as the patient chart number.
Hyperalimentation (Hyperal)	Long term feeding of a protein-carbohydrate solution. Electrolytes, fats, trace elements, and vitamins can be added. Since this solution generally provides all necessary nutrients, it is commonly referred to as Total Parenteral Nutrition (TPN). A hyperal is composed of many additives in two or more solutions. When the labels print, they show the individual electrolytes in the hyperal order.
Infusion Rate	The designated rate of flow of IV fluids into the patient.

Term	Definition
INPATIENT USER PARAMETERS file	File #53.45. This file is used to tailor various aspects of the Inpatient Medications package with regards to specific users. This file also contains fields that are used as temporary storage of data during order entry/edit.
INPATIENT WARD PARAMETERS file	File #59.6. This file is used to tailor various aspects of the Inpatient Medications package with regards to specific wards.
Intermittent Syringe	A syringe type of IV that is administered periodically to the patient according to an administration schedule.
Internal Order Number	The number on the top left corner of the label of an IV bag in brackets ([]). This number can be used to speed up the entry of returns and destroyed IV bags.
V ADDITIVES file	File #52.6. This file contains drugs that are used as additives in the IV room. Data entered includes drug generic name, print name, drug information, synonym(s), dispensing units, cost per unit, days for IV order, usual IV schedule, administration times, electrolytes, and quick code information.
IV CATEGORY file	File #50.2. This file allows the user to create categories of drugs in order to run “tailor-made” IV cost reports for specific user-defined categories of drugs. The user can group drugs into categories.
IV Label Action	A prompt, requesting action on an IV label, in the form of “Action ()”, where the valid codes are shown in the parentheses. The following codes are valid: <ul style="list-style-type: none"> P – Print a specified number of labels now. B – Bypass any more actions. S – Suspend a specified number of labels for the IV room to print on demand.
IV Room Name	The name identifying an IV distribution area.
IV SOLUTIONS file	File #52.7. This file contains drugs that are used as primary solutions in the IV room. The solution must already exist in the DRUG file (#50) to be selected. Data in this file includes: drug generic name, print name, status, drug information, synonym(s), volume, and electrolytes.
IV STATS file	File #50.8. This file contains information concerning the IV workload of the pharmacy. This file is updated each time the <i>COmpile IV Statistics</i> option is run and the data stored is used as the basis for the AMIS (IV) report.
Label Device	The device, identified by the user, on which computer-generated labels will be printed.

Term	Definition
Local Possible Dosages	Free text dosages that are associated with drugs that do not meet all of the criteria for Possible Dosages.
LVP	Large Volume Parenteral — Admixture. A solution intended for continuous parenteral infusion, administered as a vehicle for additive(s) or for the pharmacological effect of the solution itself. It is comprised of any number of additives, including zero, in one solution. An LVP runs continuously, with another bag hung when one bottle or bag is empty.
Manufacturing Times	The time(s) that designate(s) the general time when the manufacturing list will be run and IV orders prepared. This field in the <i>Site Parameters (IV)</i> option (IV ROOM file, (#59.5)) is for documentation only and does not affect IV processing.
MEDICATION ADMINISTERING TEAM file	File #57.7. This file contains wards, the teams used in the administration of medication to that ward, and the rooms/beds assigned to that team.
MEDICATION INSTRUCTION file	File #51. This file is used by Unit Dose and Outpatient Pharmacy. It contains the medication instruction name, expansion, and intended use
MEDICATION ROUTES file	File #51.2. This file contains medication route names. The user can enter an abbreviation for each route to be used at their site. The abbreviation will most likely be the Latin abbreviation for the term.
Medication Routes/ Abbreviations	Route by which medication is administered (e.g., oral). The MEDICATION ROUTES file (#51.2) contains the routes and abbreviations, which are selected by each SITE. The abbreviation cannot be longer than five characters to fit on labels and the MAR. The user can add new routes and abbreviations as appropriate.
Non-Formulary Drugs	The medications that are defined as commercially available drug products not included in the VA National Formulary.
Non-Verified Orders	Any order that has been entered in the Unit Dose or IV module that has not been verified (made active) by a nurse and/or pharmacist. Ward staff may not verify a non-verified order.
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).
Order Sets	An Order Set is a set of N pre-written orders. (N indicates the number of orders in an Order Set is variable.) Order Sets are

Term	Definition
	used to expedite order entry for drugs that are dispensed to all patients in certain medical practices and procedures.
Order View	Computer option that allows the user to view detailed information related to one specific order of a patient. The order view provides basic patient information and identification of the order variables.
Parenteral	Introduced by means other than by way of the digestive track.
Patient Profile	A listing of a patient's active and non-active Unit Dose and IV orders. The patient profile also includes basic patient information, including the patient's name, social security number, date of birth, diagnosis, ward location, date of admission, reactions, and any pertinent remarks.
Pending Order	A pending order is one that has been entered by a provider through CPRS without Pharmacy or Nursing finishing the order. Once Pharmacy or Nursing has finished and verified the order, it will become active.
PHARMACY SYSTEM file	File # 59.7. This file contains data that pertains to the entire Pharmacy system of a medical center, and not to any one site or division.
Piggyback	Small volume parenteral solution for intermittent infusion. A piggyback is comprised of any number of additives, including zero, and one solution; the mixture is made in a small bag. The piggyback is given on a schedule (e.g., Q6H). Once the medication flows in, the piggyback is removed; another is not hung until the administration schedule calls for it.
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 VA PRODUCT file (#50.68). The VA PRODUCT file (#50.68) 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.
Pre-Exchange Units	The number of actual units required for this order until the next cart exchange.
Primary Solution	A solution, usually an LVP, administered as a vehicle for additive(s) or for the pharmacological effect of the solution itself. Infusion is generally continuous. An LVP or piggyback has only one solution (primary solution). A hyperal can have one or more solutions.

Term	Definition
Print Name	Drug generic name as it is to appear on pertinent IV output, such as labels and reports. Volume or Strength is not part of the print name.
Print Name{2}	Field used to record the additives contained in a commercially purchased premixed solution.
Profile	The patient profile shows a patient's orders. The Long profile includes all the patient's orders, sorted by status: active, non-verified, pending, and non-active. The Short profile will exclude the patient's discontinued and expired orders.
Prompt	A point at which the system questions the user and waits for a response.
Provider	Another term for the physician involved in the prescription of an IV or Unit Dose order for a patient.
PSJI MGR	The name of the <i>key</i> that allows access to the supervisor functions necessary to run the IV medications software. Usually given to the Inpatient package coordinator.
PSJI PHARM TECH	The name of the <i>key</i> that must be assigned to pharmacy technicians using the IV module. This key allows the technician to finish IV orders, but not verify them.
PSJI PURGE	The key that must be assigned to individuals allowed to purge expired IV orders. This person will most likely be the IV application coordinator.
PSJI RNFINISH	The name of the <i>key</i> that is given to a user to allow the finishing of IV orders. This user must also be a holder of the PSJ RNURSE key.
PSJI USR1	The primary menu option that may be assigned to nurses.
PSJI USR2	The primary menu option that may be assigned to technicians.
PSJU MGR	The name of the <i>primary menu option</i> and of the <i>key</i> that must be assigned to the pharmacy package coordinators and supervisors using the Unit Dose module.
PSJU PL	The name of the <i>key</i> that must be assigned to anyone using the <i>Pick List Menu</i> options.
PSJ PHARM TECH	The name of the <i>key</i> that must be assigned to pharmacy technicians using the Unit Dose module.
PSJ RNFINISH	The name of the <i>key</i> that is given to a user to allow the finishing of a Unit Dose order. This user must also be a holder of the PSJ RNURSE key.
PSJ RNURSE	The name of the <i>key</i> that must be assigned to nurses using the

Term	Definition
	Unit Dose module.
PSJ RPHARM	The name of the <i>key</i> that must be assigned to a pharmacist to use the Unit Dose module. If the package coordinator is also a pharmacist he/she must also be given this key.
Quick Code	An abbreviated form of the drug generic name (from one to ten characters) for IV orders. One of the three drug fields on which lookup is done to locate a drug. Print name and synonym are the other two. Use of quick codes will speed up order entry, etc.
Report Device	The device, identified by the user, on which computer-generated reports selected by the user will be printed.
Schedule	The frequency of administration of a medication (e.g., QID, QD, QAM, STAT, Q4H).
Schedule Type	Codes include: O - one time (i.e., STAT - only once), P - PRN (as needed; no set administration times). C - continuous (given continuously for the life of the order; usually with set administration times). R - fill on request (used for items that are not automatically put in the cart - but are filled on the nurse's request. These can be multidose items (e.g., eye wash, kept for use by one patient and is filled on request when the supply is exhausted). And OC - on call (one time with no specific time to be given, i.e., 1/2 hour before surgery).
Self Med	Medication that is to be administered by the patient to himself.
Standard Schedule	Standard medication administration schedules stored in the ADMINISTRATION SCHEDULE file (#51.1).
Start Date/Time	The date and time an order is to begin.
Status	A - active, E - expired, R - renewed (or reinstated), D - discontinued, H - on hold, I - incomplete, or N - non-verified, U - unreleased, P - pending, O - on call, DE - discontinued edit, RE - reinstated, DR - discontinued renewal.
Stop Date/Time Stop Order Notices	The date and time an order is to expire. A list of patient medications that are about to expire and may require action.
Syringe	Type of IV that uses a syringe rather than a bottle or bag. The method of infusion for a syringe-type IV may be continuous or intermittent.
Syringe Size	The syringe size is the capacity or volume of a particular syringe. The size of a syringe is usually measured in number of cubic centimeters (ccs).

Term	Definition
TPN	Total Parenteral Nutrition. The intravenous administration of the total nutrient requirements of the patient. The term TPN is also used to mean the solution compounded to provide those requirements.
Units per Dose	The number of Units (tablets, capsules, etc.) to be dispensed as a Dose for an order. Fractional numbers will be accepted.
VA Drug Class Code	A drug classification system used by VA and IHS that separates drugs into different categories based upon their characteristics. IV cost reports can be run for VA Drug Class Codes.
VDL	Virtual Due List. This is a Graphical User Interface (GUI) application used by the nurses when administering medications. It is part of the BCMA software package.
WARD GROUP file	File #57.5. This file contains the name of the ward group, and the wards included in that group. The grouping is necessary for the pick list to be run for specific carts and ward groups.
Ward Group Name	An arbitrarily chosen name used to group wards for the pick list and medication cart.
WARD LOCATION file	File #42. This file contains all of the facility ward locations and their related data, i.e., Operating beds, Bedsection, etc. The wards are created/edited using the <i>Ward Definition</i> option of the ADT module

11.0 Index

I

14 Day MAR · 158, 159, 160
14 Day MAR Report Example · 161

2

24 Hour MAR · 147, 148, 155
24 Hour MAR Report Example · 149

7

7 Day MAR · 153, 154, 155
7 Day MAR Report Example · 156

A

Abbreviated Order Entry · 18, 19
Action Area · 6, 11, 15, 16, 38, 59, 61, 79
Action Profile #1 · 163, 166
Action Profile #1 Report Example · 164
Action Profile #2 · 166
Action Profile #2 Report Example · 167
Active Order List (IV) · 197
Active Order List (IV) Example · 198
Activity Log · 38, 41, 44, 48, 52, 55, 79, 90, 93, 106, 110, 111, 114, 136, 145, 202
Activity Log Example · 49, 94, 95, 96, 142, 143
Activity Ruler · 69, 218
Additive · 63, 86, 92, 104, 105, 107, 108, 109, 110, 111, 116, 117, 137, 178, 198, 213, 215, 218, 221, 223, 225
Administration Schedule · 23, 120
Administration Time · 51, 104
Administration Times · 23, 24, 46, 47, 48, 64, 65, 92, 93, 111, 120, 122, 134, 147, 148, 153, 154, 159, 181, 218, 220, 222, 226
Admixture · 62, 64, 105, 107, 109, 111, 134, 137, 197, 219, 220, 223
Adverse Reaction Tracking (ART) Package · 28, 70
Align Labels (IV) · 188
Align Labels (IV) Example · 188
Align Labels (Unit Dose) · 186
Align Labels (Unit Dose) Example · 186
Asterisk · 37, 40, 41, 69, 78, 82, 136, 181
Authorized Absence · 169
Authorized Absence/Discharge Summary · 169
Authorized Absence/Discharge Summary Report Example · 170
Auto-Verify · 41, 42, 44, 87, 90

B

Bar Code ID · 139, 143, 187, 188, 193, 195, 196
Barcode ID – Return and Destroy (IV) · 143
Barcode ID – Return and Destroy (IV) Example · 144
BCMA · 1, 21, 24, 38, 41, 46, 47, 65, 79, 87, 92, 93, 143, 189, 195
BCMA Units Per Dose · 21
BCMA Virtual Due List (VDL) · 41, 87

C

Change Report/Label Devices (IV) · 119
Change to Another IV Room (IV) · 120
Chemotherapy · 62, 109, 111, 134, 137, 197, 219, 220
Clinic Location · 66
Controlled Substance · 123, 155, 160
Coverage Times · 69
CPRS · 1, 12, 22, 23, 24, 25, 38, 41, 44, 49, 51, 52, 65, 78, 87, 90, 96, 97, 104, 105, 115, 116, 218, 220, 224
CPRS Med Order · 24, 65
CWAD Indicator · 5

D

Default Start Date Calculation · 24, 46, 65, 92, 107, 108
Default Start Date Calculation = CLOSEST · 24, 47, 65, 92, 107, 108
Default Start Date Calculation = NEXT · 24, 47, 65, 92, 107, 108
Default Start Date Calculation = NOW · 18, 24, 47, 62, 65, 92, 107, 108, 164, 166
Default Start Date/Time · 65
Default Stop Date · 17, 62, 65, 119
Default Stop Date/Time · 65
Delete Labels from Suspense (IV) · 206
Delete Labels from Suspense (IV) Example · 206
Detailed Allergy/ADR List · 28, 70, 217
Discharge · 169
Discontinue All of a Patient's Orders · 53
Discontinue an Order · 11, 15, 35, 37, 38, 40, 53, 59, 60, 76, 78, 79, 82, 105, 106, 110, 111, 123, 130, 136, 164, 169, 218, 225, 226
Discontinue an Order Example · 39, 80
Dispense Drug · 18, 19, 20, 21, 22, 41, 43, 46, 51, 52, 63, 86, 87, 92, 104, 105, 116, 117, 122, 221, 224
Dispense Drug Look-Up · 213
Dispense Drug Look-Up Example · 214
Dispense Log · 48
Dispense Units Per Dose · 21
DONE Order · 24, 65, 89, 90
Dosage Ordered · 18, 20, 21, 22, 23, 41, 122, 221

Drug File · 18, 52, 104, 213
 Drug Inquiry (IV) · 215
 Drug Inquiry (IV) With Information Example · 215, 216
 Drug Inquiry (IV) With No Information Example · 215
 Drug Name · 122
 Drug Prompt · 4, 18, 19, 62, 213
 Drug Text Indicator · 20, 63

E

Edit an Order · 40, 81
 Edit an Order and Create a New Order Example · 83, 84
 Edit an Order Example · 40, 41, 81
 Edit Inpatient User Parameters · 118
 Edit Patient's Default Stop Date · 119
 Enter Units Dispensed · 126
 Enter Units Dispensed Report Example · 128
 Enter/Edit Allergy/ADR Data · 28, 70
 Entering Barcode ID for Returns and Destroyed Medications Example · 144
 Entering Returns and Destroyed Medications Example · 140
 Expected First Dose · 51, 104
 Extra Units Dispensed · 129
 Extra Units Dispensed Report · 175
 Extra Units Dispensed Report Example · 129, 176

F

Finish an Order · 41, 49, 52, 87, 96, 97, 104, 116
 Finish an Order Example · 50, 51
 Finish an Order With a Duration Example · 102
 Finish an Order Without a Duration Example · 99
 Flag an Order Example · 53, 106
 Free Text Dosage · 177
 Free Text Dosage Report · 176
 Free Text Dosage Report Example · 177, 178
 Frequency · 46, 47, 92, 93

G

Glossary · 217

H

Header Area · 5
 Hidden Actions · 4, 6, 7
 History Log · 40, 47, 48, 82, 93
 Hold · 11, 15, 29, 44, 46, 54, 59, 60, 90, 91, 96, 97, 111, 122, 126, 136, 169, 218, 226
 Hold All of a Patient's Orders · 54
 Hold All of a Patient's Orders Example · 54
 Hold an Order · 44
 Hold an Order Example · 44, 91
 Take All of a Patient's Orders Off of Hold Example · 54

Hyperal · 62, 63, 64, 108, 109, 111, 134, 137, 197, 220, 221, 225

I

Individual Labels (IV) · 189
 Individual Labels (IV) Example · 189
 Individual Order Suspension (IV) · 206
 Individual Order Suspension (IV) Example · 207
 Infusion Rate · 64, 105, 110, 111, 222
 Inpatient Order Entry · 10, 11, 15, 18, 34, 52, 58, 59, 60, 62, 76, 104
 Inpatient Order Entry Example · 16, 60
 Inpatient Profile · 55, 113, 187
 Inpatient Profile Example · 56, 114
 Inpatient Stop Order Notices · 166, 178, 198
 Inpatient Stop Order Notices Example · 179, 199
 Inpatient User Parameters · 18, 35, 42, 53, 77, 87
 Inpatient Ward Parameters · 24, 25, 65, 107, 108, 122
 Inquiries Menu · 213
 Inquiries Menu Example · 213
 Inquiries Option · 213
 Intermittent Syringe · 64, 109
 Internal Order Number · 139
 Intervention · 29, 70, 117, 219
 Intervention Menu · 29, 70, 217
 Delete an Intervention Example · 32, 73
 Edit an Intervention Example · 31, 72
 New Intervention Example · 30, 71
 Print an Intervention Example · 34, 75
 View an Intervention Example · 33, 74
 Introduction · 1
 IV Additives · 63, 65, 107, 108, 215, 222
 IV Bag · 8, 139, 222
 IV Drug Formulary Report (IV) · 201
 IV Drug Formulary Report (IV) Example · 201
 IV Flag · 52, 104
 IV Fluid Orders · 105
 IV Label Example · 139
 IV Label Menu Example · 187
 IV Menu · 58, 59, 116, 119, 134, 187, 215
 IV Menu Example · 58
 IV Order
 Continuous Type · 65
 Intermittent Type · 65
 IV Room · 15, 55, 60, 65, 69, 111, 113, 120, 135, 137, 139, 206, 209, 218, 222
 IV Solution · 63, 215, 218
 IV Stats File · 193
 IV Type · 62, 63, 65, 106

L

Label Log · 93, 94, 111, 202
 Label Menu (IV) · 187
 Label Print/Reprint · 187
 Labels from Suspense (IV) · 208
 Labels from Suspense (IV) Example · 208

Large Volume Parenteral (LVP) · 62, 107, 223
 List Area · 6
 List Manager · 5, 6, 16, 38, 61, 79
 Local Possible Dosages · 20, 21, 22, 23, 223
 Local Possible Dosages Example · 20

M

Maintenance Options · 118
 Maintenance Options - IV · 119
 Maintenance Options – Unit Dose · 118
 Manufacturing List · 134, 137, 138, 193, 209
 Manufacturing List (IV) · 137
 Manufacturing List Example · 138
 Manufacturing Record for Suspense (IV) · 209
 Manufacturing Record for Suspense (IV) Example · 210
 Medication Administration Records (MARs) · 1
 Medication Routes · 22, 52, 64, 104, 111, 122, 223
 Medications Due Worksheet · 181
 Medications Due Worksheet Example · 181
 Menu Tree
 IV Menu Tree · 3
 Unit Dose Menu Tree · 2
 Message Window · 6

N

Nature of Order · 19, 25, 65
 New Order Entry · 18, 62
 New IV Order Entry Example · 67
 New Unit Dose Order Entry Example · 26
 Non-Formulary Status · 20, 41, 43, 46, 51, 63, 86, 87, 92, 105
 Non-Standard Administration Times · 64
 Non-Standard Schedules · 23, 47, 64, 93, 119, 120
 Non-Verified/Pending Orders · 10, 12, 17, 18, 35, 54, 62, 76
 Non-Verified/Pending Orders Example · 12

O

On Call · 105
 Order Actions · 38, 79
 Order Check · 18, 115, 116
 Drug-Allergy Interactions · 18, 115, 116, 117
 Drug-Drug Interactions · 18, 115, 116, 117
 Duplicate Class · 18, 115, 116, 117
 Duplicate Drug · 18, 115, 116, 117
 Order Entry · 3, 5, 6, 10, 11, 18, 54, 58, 59
 Order Lock · 10, 58
 Order Options · 10
 Order Set · 18, 19, 224
 Orderable Item · 18, 19, 20, 22, 23, 24, 41, 43, 46, 51, 63, 86, 87, 92, 104, 105, 117, 119, 122, 178, 198, 221, 224
 Orientation · 2
 Other Print Info · 64, 65

P

Parenteral · 63, 107, 218, 223, 224
 Patient Action · 11, 15, 16, 59, 61
 Patient Information · 5, 11, 16, 36, 59, 60, 77, 217
 Patient Information Example · 11, 36, 59, 60, 77
 Patient Lock · 10, 18, 58, 62
 Patient Profile (Extended) · 183
 Patient Profile (Extended) Report Example · 183, 184
 Patient Profile (Unit Dose) · 110, 145
 Patient Profile (Unit Dose) Example · 145, 146
 Patient Profile Report (IV) · 110, 202
 Patient Profile Report (IV) Example · 202
 Patient Profiles · 10, 58, 145
 Patient Record Update · 16, 61
 Patient Record Update Example · 17, 61
 Pick List · 1, 41, 87, 121, 122, 123, 126, 127, 129, 131, 133, 227
 Pick List Menu · 121
 Pick List Menu Example · 121
 Pick List Report · 121
 Pick List Report Example · 123
 Piggyback · 62, 63, 64, 107, 108, 109, 111, 134, 137, 197, 219, 220, 224, 225
 Possible Dosages · 20, 21, 223, 224
 Possible Dosages Example · 20
 Pre-Exchange Units Report · 43
 Production Options · 134
 Profile (IV) · 59, 110
 Profile Report Example · 111, 204
 Provider · 19, 25, 105, 225
 Provider Comments · 24, 65
 PSJ RNFINISH Key · 52, 105
 PSJ RPHARM Key · 15, 29, 70, 96, 97
 PSJI PHARM TECH Key · 97
 PSJU PL Key · 119, 121

Q

Quick Code · 63, 109, 213, 215, 222, 226

R

Regular Order Entry · 18, 19
 Renew an Order · 46, 92
 Renewal List (IV) · 204
 Renewal List (IV) Example · 205
 Report Returns · 130
 Reporting Medication Returns Example · 130
 Reports (IV) · 196
 Reports (IV) Example · 197
 Reports Menu · 145, 146
 Reports Menu Example · 147
 Reprint Labels from Suspense (IV) · 208, 210
 Reprint Labels from Suspense (IV) Example · 211
 Reprint Pick List · 131
 Reprint Pick List Example · 131

Reprint Scheduled Labels (IV) · 195
 Requested Start Date/Time · 51, 100, 104
 Returns and Destroyed Entry (IV) · 139

S

Schedule · 23, 24, 35, 47, 51, 64, 92, 93, 104, 110, 111, 122, 147, 153, 159, 226
 Schedule Type · 22, 35, 76, 122, 126, 178, 199, 218, 226
 Scheduled Labels (IV) · 193, 195
 Scheduled Labels (IV) Example · 193
 Screen Title · 5
 Select Action · 6, 11, 15, 16, 49, 59, 61
 Select Allergy · 28, 70
 Select Order · 35, 36, 76, 77, 217
 Select Order Example · 37, 78
 Self Med · 25
 Send Pick List To ATC · 133
 Short Profile Example · 14
 Solution · 62, 63, 86, 92, 104, 105, 107, 108, 109, 111, 116, 117, 137, 178, 198, 213, 215, 219, 221, 222, 223, 224, 225, 227
 Special Instructions · 24, 178, 198
 Speed Actions · 52, 53, 106
 Speed Discontinue · 53, 106, 217
 Speed Finish · 49, 53, 217
 Speed Renew · 53, 217
 Speed Verify · 53, 217
 Speed Finish · 47, 93
 Speed Renew · 47, 93
 Standard Schedule · 47, 93, 214, 226
 Standard Schedule Example · 215
 Start Date/Time · 24, 38, 41, 46, 47, 50, 65, 79, 92, 93, 106, 107, 108, 109, 121, 122, 123, 187, 226
 Stop Date/Time · 17, 24, 25, 38, 40, 41, 47, 48, 50, 61, 65, 66, 79, 82, 93, 107, 108, 109, 119, 121, 122, 226
 Strength · 22, 63, 110, 111, 137, 178, 199, 216, 221, 224
 Suspense Functions (IV) · 205
 Suspense Functions (IV) Menu Example · 205
 Suspense List (IV) · 211
 Suspense List (IV) Example · 212
 Syringe · 62, 63, 86, 109, 111, 134, 137, 197, 219, 220, 222, 226, 227
 Syringe Size · 109

T

Team · 121

Test Control Codes (IV) · 195
 Test Control Codes (IV) Example · 196
 Topic Oriented Section · 2, 3
 Total Parenteral Nutrition (TPN) · 108, 221

U

Unit Dose Medications · 4, 10, 11, 118, 145, 213
 Unit Dose Menu Example · 10
 Units Dispensed · 122, 126, 127
 Units Needed · 122
 Units Per Dose · 21, 22, 23, 122, 224
 Update Daily Ward List (IV) · 135
 Update Daily Ward List Example · 136
 Update Pick List · 133

V

VA Drug Class Code · 213
 VA FORM 10-2970 · 155
 VA FORM 10-5568d · 155
 VDL · 24, 41, 65, 87
 Verify a DONE Order (CPRS Med Order) Example · 89, 90
 Verify an Order · 41, 87
 Verify an Order Example · 42, 43, 88
 View Profile · 11, 16, 34, 59, 61, 76, 217
 View Profile Example · 35, 76
 VISTA · 10, 11, 18, 58, 62, 220
 Volume · 63, 64, 86, 87, 105, 107, 109, 110, 178, 181, 199, 222, 224, 227
 Change the Volume of a Solution Example · 87

W

Ward · 121
 Ward Group · 4, 12, 55, 113, 114, 121, 122, 123, 145, 147, 148, 154, 159, 163, 166, 169, 175, 181, 187, 227
 Ward List · 58, 69, 134, 135, 137, 138, 193, 206
 Ward List (IV) · 134, 195, 197
 Ward List Report Example · 135
 Ward Stock · 123, 155, 160

12.0 Contact Information

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