Clinical Advisory Committee: Medication Functionality Working Group Standardized NL Med Access Med Functionality Using Current State (Updated March 2, 2021)

Purpose: to produce a standardized workflow for the prescribing functionality in Med Access that can be endorsed by the EMR governance and promoted as a Provincial standard. This may involve change requests for the Med Access product.

Background: the prescribing and medication history feature in Med Access is robust but is fraught with possibilities for non-standardized workflow due to the customizable and flexible nature of use of the Med Access product, which leads to a disorganized medication list.

The CAC has recognized the importance of solving this problem, particularly with integration with the provincial DIS on the horizon and all that implies for the accuracy and reliability of the information in the EMR. In addition, there is an element of patient safety risk that is a natural consequence of having a disorganized medication list in the EMR when more than one provider is involved in the care of a given patient.

What follows is the Medication Functionality working group recommended workflow for writing prescriptions using the Med Access product that takes into account the various ways providers have been taught the software functionality and the various levels of comfort and familiarity with the software functionality that exist in the Provider population provincially. It also incorporates workflows leading to a prescription being signed using the provider's Dynamic Digital Signature and being sent by eFax directly to a pharmacy.

This recommended workflow has also been reviewed and endorsed by the Clinical Advisory Committee, the eDOCSNL team, including the Program Director and Manager, Technical Team Lead, Practice Advisors, Clinical Information Specialists, Business Analyst and Clinical Pharmacists employed by NLCHI and also working in community pharmacy settings.

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Appendix A: EMR Settings Related to Med Functionality, including activating dynamic digital signature for prescription writing

Appendix B: Selecting a receiving pharmacy for a patient

MEDICATION FUNCTIONALITY -WORKFLOW

For prescription writing in the Med Access EMR - including Dynamic Digital Signature and eFax

NOTES:

- (i) The below is based on current functionality in Med Access at time of writing, EMR version 5.10.4 (June 8, 2020).
- (ii) eFax functionality has to be contracted with and enabled for each group within an EMR by Telus prior to use.
- (iii) As with any use of facsimile or e-communications technology, EMR users are responsible for ensuring that they are sending items containing personal health or business information to a receiving Provider or Facility's (including Pharmacies) accurate receiving number. The Newfoundland and Labrador Pharmacy Board (NLPB) maintains an internal reporting system for phone/fax numbers and extrapolates this information to their website at: <u>https://nlpb.in1touch.org/company/roster/companyRosterView.html?company RosterId=12</u>. Pharmacies themselves are responsible for reporting any changes to the NLPB.
- (iv) There are a number of Site and User's Profile settings related to Medication Functionality and Dynamic Digital Signature that should be reviewed and set up front. Refer to Appendix A for further details.
- (v) This document does not include any specific functionality unique to sites using PrescribeIT.

WORKING WITH YOUR MEDS LIST:

Medication Reconciliation – use Filters to display most appropriate view of the Meds List:

While within the Meds List and prior to prescribing new meds, review the current meds list and delete (if within 24hrs of the original Rx) and discontinue individual meds, if and as applicable.

If there are no Filter choices (2.) at the top of the Meds List, click on the Filter icon (1.):

	Demog		Visits	Tasks Bills	Allg Meds	Profile	Labs		Invest	Consults		Goals			Appt
ni	ical										1. The Renew	Approve Disco	3	nt Graph	Print New
rug	g Allergies an	nd Into	olerance	5	Options						_				
0 D	Drug Allergies Kno Drug Intolerances	wn Known			Paper Chart Su Suppress Warn Compliance Pa	ing Printing	1	Refuse Preferred P	PrescribelT Deferr harmacy	red Rx					
te:	Active and Recen	ntly A	• v	2.											
ctr			_												
-	Use Type			Name	Dosage Info 1 Capsule(s).	QD. 2	lty	Refills	Route	Start-End Date	Status				
	Continuous		D	ACT SERTRALINE 50 MG CAPSULE	then 2 Capsu then 3 Capsu	e(s), Q 1 e(s), Q	26	0	Oral	29May20-24Jul20	Approved		69		
	Continuous				1 Capsule(s), then 2 Capsul then 3 Capsul	e(s), Q 1	26	0	Oral	20Apr20-15Jun20			6	×	
144	Continuous			IRBESARTAN 300 mg TABLET	1 Tablet(s), Q	D 9	ю	0	Oral	20Apr20-19Jul20	Pending			×	
1	Continuous			IRBESARTAN 300 mg TABLET	1 Tablet(s), Q	D 3	10	3	Oral	03Apr20-01Aug20	Approved		3		1
	Short-Term			hydrocortisone acetate 1 % CREAM (GRAM)	1 Application(s), QD 7		0	Topical	20Apr20-27Apr20	Pending		12	P	1.11
	Continuous			metformin HCI 500 mg TABLET	1 Tablet(s), Q	D 9	0	0	Oral	20Apr20-19Jul20	Pending		Ca		
	Continuous			metformin HCI 500 mg TABLET	1 Tablet(s), Q	D 9	10	0	Oral	03Apr20-02Jul20	Approved		5		1
eci	ently Active								1529402						
	Use Type			Name	Dosage Info	Qty	Re	fills	Route	Start-End Date	Status		10		-
1	Continuous			ACCEL-ALENDRONATE 70 MG TABLET	1 Tablet(s), 1x/w	eek 13	0		Oral	03Apr20-15Apr20	Discontinued	100	69		[ulli]
6	Continuous			ACCEL-ALENDRONATE 70 MG TABLET	1 Tablet(s), 1x/w	eek 53	0		Oral	02Apr20-03Apr20	Discontinued		5		w lld
*	Continuous	*	D	ACT SERTRALINE 50 MG CAPSULE	1 Capsule(s), QI then 2 Capsule(then 3 Capsule(i) Q 126	0 (ND)	Oral	03Apr20-29May20	Renewed	1	8		La lla
2	Short-Term			hydrocortisone acetate 1 % CREAM (GRAM)	1 Application(s).	QD 7	0		Topical	03Apr20-10Apr20	Approved		19		1
on	I-Drugs				Description		Re		Route	Start-End Date	factor and				
	Use Type		Com	me pression Stockings	Dosage Info Compression Stock	Qty 1	0	THIS	Koute	20Apr20-	Status Pending		G		Ð
	Non-drug			pression Stockings	Compression Stock		0			03Apr20-	Approved		10	×	Đ
新	Non-drug		Com	pression Stockings	Compression Stock	in i	0			U3Apr20-	Approved	11	Dy.	_	

This toggles a Filter pull-down menu (2.) to select:

State:	Type something to search	0
Activ	Active Only	
Aut	Active and Recently Active	
	Recently Active Only	
	Inactive	:
	All	

And additional filter search options can be accessed by clicking on the blue chevron:

State:	Active and Recently A 🔻	v
Acti	ve	Search for criteria
	≑Use Type	ATC Class
		End Date From
ö	Continuous 🔼	End Date to
		Indication
:Ö:	Continuous	Image: State of the state o
101		 PrescribeIT Status
:Ö:	Continuous	Provider
265		 Signing Status
іў:	Continuous	 Start Date From
	Short-Term	 Start Date To
i);;	Shore renn	G⊃ Use

Additional tips for using the Meds List Filter:

- (i) Set filter option to "All" prescribed meds for full reconciliation.
- (ii) Use the ATC class to get listing of all drugs for a specific application.
- (iii) Use the binoculars icon to search for a class.
- (iv) "Indication" could be used to search as well but is only valuable when prescriber has entered into prescriptions consistently.
- (v) Create a custom filter to find a meds of a specific type:
 - a. Select ALL under filter options
 - b. Enter drug name in search field
 - c. Next to the field where the drug name was entered you will see SW (this stands for "Starts With"). Select "Contains" this will give you all prescriptions that contain that name. You can enter more than one drug name in this section. Make sure when you add more drug names that you change the SW to "Contains".

Completing Medication Reconciliation Effectively and Efficiently

- 1. Perform "clean-up" activity with individual or bulk discontinue functions:
 - a. Redundant copies are discontinued.
 - b. Short term meds accidentally prescribed as continuous are discontinued.
- 2. Manage any remaining Warnings. Best practice is to address them when originally entering the med.
- 3. Pending meds are dealt with no meds should be left in pending status after the appropriate Rxs have been written. Either:
 - a. Delete (if still available as an option).
 - b. Discontinue, if appropriate.
 - c. Approve* (Once all other Rxs for that day for that patient have been written).

Note: Approving a med does not necessarily mean that a new Rx is being issued. It is validating that the meds in the patient's profile (list) are appropriate, active and approved for that patient so that they can be renewed or reprinted, if and when required.

Editing / Discontinuing / Deleting Medications

Best practice would suggest two scenarios where a med should be edited:

- a. If an error is made correct, discontinue or delete.
- b. If the pharmacy calls and indicates they have had to make a change. Edit the med and document the reason.

However, if the provider needs to make a change in dose, discontinue the old Rx and write a new one; this aligns with how a pharmacy would treat this change.

Communicating Discontinued Meds to a Pharmacy

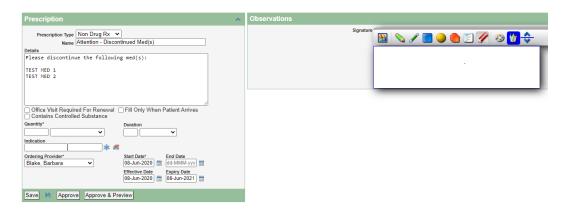
As there are often multiple methods to accomplish the same task in Med Access, the below examples are suggestions for providers to consider and should not be interpreted as all-inclusive list of options:

a. If the med has just been discontinued within a patient's Visit, use the Print icon within the Plan section to immediately print a copy of the Rx, which will include the discontinued med:

Assessment	B	ill Profile Allergy	Wintertown,NL A0A 2R4		DOB: 13-May-199 Age: 25 years (F)		
Meds METFORMIN HCL 500 mg TABLET 1 Tablet(state in the second sec	Renewal Discontinue	Refills: Start Date: Indication: Compliance Pkg Req: Effective Date: Office Visit Required For Additional Pharmacist Instr	Imes daily X 3 Mth28 168 (One hundred sixty-eight) Tablet(s) 0 28-Apr-2020 diabetes mellitus* No 28-Apr-2020 Reneval: No uctions: -AMETHOXAZOLE/TRIMETHOPR	Drug Use: Route: End Date: Substitutions: Expiry Date: Trial Dispenses: Fill Only When P MM Action: Viewed Br	Allowed 28-Apr-2021 Not Authorized No	
Workflow Actions					ULE		_

- b. If multiple meds, print the meds list from HEALTHe NL, indicate the discontinued meds and fax to the pharmacy.
- c. Or, filter the Meds List so that the applicable discontinued med(s) is visible and use the Print icon to get a Medication List, print and highlight which meds are discontinued.

d. If using eFax, create a Non-Drug Rx and indicate which med(s) have been discontinued. Macros can be developed to invoke standard test and/or if the Provider has Template Permissions, the Non-Drug Rx can be saved as a "Discontinued Medication Template" (or other appropriate name):



"Save" and leave in Pending until ready to Approve and use the Bulk Approve icon to select the Discontinued Medication Non-Drug Rx, select the receiving Pharmacy, sign using Dynamic Digital Signature and **"Approve & Fax"**:

Pres	cription App	rovals									
Select	Pending	Name		Dosage Info	Qty Route	Refills S	Start-End Date	Authority	Status	Update	
<	Non-drug	Attention - Discor	ntinued Med(s)	Please discontinue t	0	0 08	8Jun20-	paper	Pending		Ð
	Ordering P	rovider* Blake, Barbara 🗸	Compliance Package	~							
Pharma	cy 💢										
Lawto	ns TEST, Phon	e: 709-555-7777, Fax: 709-00	0-0000, 123 somewhere, CBS								
		Signature *	📓 💊 🖌 🗖 🥥 🦉	🥖 🐵 谢 🔶							
			Tertw	Ŋ							
Appro	ve Approve &	Preview Preview Appr	ove & Fax								

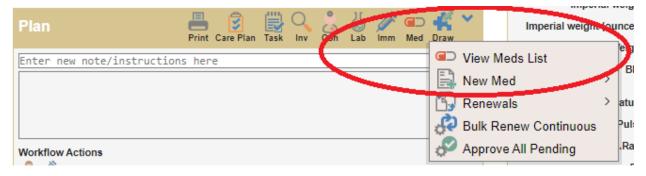
e. If not using eFax and if one med only discontinued, open (edit icon) that line from the Meds List and use the Print icon to print:

Jeff Test 43 years (709) 782-1234	G 📇 🔜 🖓 🗒
Prescription Id: 52157 DIN: 2401134 Status: Discontinued 🔺	Drug Allergies and Intolerances
Prescription Type Simple - Continuous Drug Name* ACCEL-ALENDRONATE 70 MG TABLET	No Drug Allorgiss Known No Drug Intolerances Known
Generic Drug Name alendronate sodium	Original Ordering Provider
Dose Frequency PRN Duration Start Date Site 1 Tablet(s) Tx/veek No 3 Mth30 03-Apr-2020 Desamerul temperature Do Not Allow Substitutione	Doctor Test

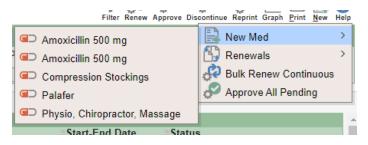
WRITING PRESCRIPTIONS:

Initiating a Prescription (RX) – start from the Patient's Med List:

Regardless of if the Rx is being written from within a Visit or from the Meds Tab within a patient's chart, hover over the "pill" icon and select "View Meds List":



Click on "New Med". Hovering over it will also display a list of templated meds:



Prescription Type Simple Rx Drug Name* Simple Rx Non Drug Rx External Rx Parmacy Instructions Do Not Adapt Do Not Adapt Do Not Allow Substitutions Pharmacy Instructions Do Not Adapt Do Not Adapt Do Not Allow Substitutions Office Visit Required For Renewal Fill Only When Patient Arrives Contains Controlled Substance Contains Controlled Substance Note specific Instructions to pharmacy here. Itemative Quantity* Refills Refills Route* Cordering Provider* Start Date* Effective Date Expiry Date 23-Apr-2020 23-Apr-2021 Barbara Effective Date Expiry Date 23-Apr-2021 Barbara Effective Date Save Approve Approve & Preview	(- 1 Continuous O Short Torm 2.	
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Specific items (and recommended workflow) once inside the Medication:

- g multiple tion Types on start with the and/or Nond leave the ous (new or s) for last. Ill meds in a NG STATUS dy to print t)/eFax the Rx. cists indicate specific ons to them be written out Pharmacy Instructions" box.
- 1. The default **Prescription Type** is Simple Rx. Pull down to select others.
- 2. Select **Short-Term** or **Continuous**. Refer to Appendix A to change default settings.
- **3.** The **blue chevron** hides the filtering options when searching for a medication. If not already open, click on it to see more options.
- <u>After clicking in the Dose field first</u>, hovering just over the Dose line reveals a **Pill** icon for "Variable Dose Range". Click on this icon to be able to enter options such as "take between 1 and 3 tablets...".
- 5. Click on the **Plus icon** to be able to enter "**Then**" and "**And**" options, such as tapers or different instructions for the same medication but within the same day.

Example of a "Then" – a taper for prednisone:

ption									^
iption Type	Simple R	x	T	\bigcirc	Conti	nuous	rt Term		
Drug Name*	prednison	e 5(0 mg TABLE	Г			6		
Drug Name	prednison	е]		
Dose			Frequency	PR	Durat	ion	Site		
3	Tablet(s)	۲	QD - Onc 🔻		2	Week(s) •		6	×
2	Tablet(s)	۲	QD - Onc 🔻		2	Week(s) •		6	×
1	Tablet(s)	•	QD - Onc 🔻		2	Week(s) •		6	×
	Drug Name* Drug Name Dose	iption Type Simple R: Drug Name* prednison Drug Name prednison Dose 3 Tablet(s) 2 Tablet(s)	iption Type Simple Rx Drug Name* prednisone 50 Drug Name prednisone Dose 3 Tablet(s) ▼ 2 Tablet(s) ▼	iption Type Simple Rx Drug Name* prednisone 50 mg TABLE Drug Name prednisone Dose Frequency 3 Tablet(s) V QD - Onc V 2 Tablet(s) V QD - Onc V	iption Type Simple Rx Drug Name* prednisone 50 mg TABLET Drug Name prednisone Dose Frequency PRN 3 Tablet(s) QD - Onc 2 Tablet(s) QD - Onc	iption Type Simple Rx Continuation Control Co	iption Type Simple Rx Continuous Shore Drug Name* prednisone 50 mg TABLET Drug Name prednisone Dose Frequency PRNDuration 3 Tablet(s) QD - Onc 2 Week(s) 2 Tablet(s) QD - Onc 2 Week(s)	iption Type Simple Rx Continuous Short Term Drug Name* prednisone 50 mg TABLET prednisone Dose Frequency PRNDuration Site Tablet(s) QD - Onc QD - Onc QC Week(s)	iption Type Simple Rx ▼ Continuous Short Term Drug Name* prednisone 50 mg TABLET Drug Name prednisone Dose Frequency PRNDuration Site 3 Tablet(s) ▼ QD - Onc ▼ 2 Week(s) ▼ 2 Tablet(s) ▼ QD - Onc ▼ 2 Week(s) ▼

Example of an "And" – Lasix (furosemide), same strength but taken in two different quantities at different times during the day:

Prescription			1	~
Prescription Type	Simple Rx	ort Term		
Drug Name*	furosemide 40 mg TABLET	5		
Generic Drug Name	furosemide			
Dose	Frequency PRNDuration	Site	•	
2	Tablet(s) ▼ QAM - Ev ▼ 3 Mth30 ▼		6	×
And v 0.5	Tablet(s) ▼ QPM - Ev ▼ 3 Mth30 ▼		6	×

Example of a common regular Rx for an inhaler with an "AND" additional dose "as needed" (PRN):

Child F Test T1001 6 years 🔳

Рге	scription Type	s Simple Rx	•	Continu	ous	OSh	ort Term		
	Drug Name	* SYMBICORT 20	IO TUR	BUHALER (200)-6 N	ACG)	65		
Gene	ric Drug Name	e badesonide/forn	noterol	fumarate					
	Dose			Frequency	PR	Durat	ion		
	1	Inhalation(s)	T	BID - Two 🔻		1	Mth30	Ŧ	3
And	• 1	Inhalation(s)	•	QID - Fou 🔻		1	Mth30	•	3
Patient	Instructions					-	02	6	

Example of the same Rx with tapering "THEN" and an "AND" additional dose "as needed" (PRN):

Presc	ription Type	Simple Rx 🔹	Continu	JOUS	⊖Sh	ort Term		
	Drug Name*	SYMBICORT 200 TU	RBUHALER (201	D-6 M	ICG)	65		
Generio	: Drug Name	budesonide/formoter	ol fumarate					
	Dose	دي	Frequency	PRN	Durat	ion 🕒		
	2	Inhalation(s)	BID - Two 🔻		2	Week(s)	•	2
Then 🔻	1	Inhalation(s)	BID - Two 🔻		1	Mth30	•	X
And 🔻	1	Inhalation(s)	QID - Fou 🔻		1	Mth30	•	2

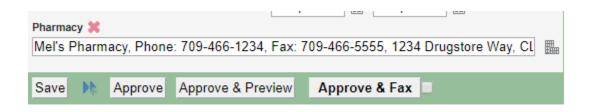
- 6. Including an Indication is optional and pulls from the Diagnosis Codes entry or database. Pharmacists indicate that they have an obligation under their professional practice standards to know the clinical reason why they are dispensing a medication for that patient. If they are unsure, they will ask the patient. Therefore, any additional information provided by the provider is an asset. Refer to Appendix A to change the default setting to always include the Indication.
- The use of both the "Start Date" and the "Effective Date" is currently being reviewed by eDOCSNL for recommendations to Telus for potential changes to decrease misunderstanding and misuse of these fields.

The Effective Date is the length of time (one year) that an Rx can remain legally active and defaults to today's date in Med Access. This equates to the date that would have been formerly written on an Rx on a prescription pad.

The Start Date is currently a mandatory field in Med Access and therefore, wherever possible, should be set to today's date. Any specific instructions to the Pharmacy regarding dates (i.e. when a patient should start taking the medication or the status of an earlier Rx active) should be clearly communicated in the Pharmacy Instructions.

8. If appropriate, enter the Pharmacy to which you want the Rx to go, by clicking on the **Facilities** icon. More detailed instructions on selecting a Pharmacy are included in Appendix B.

NOTE: Even if the EMR has eFax enabled, the "**Approve & Fax**" button does not appear until a Pharmacy is selected:



There are a number of items related Dynamic Digital Signature/eFax which are incorporated throughout this document.

When Searching for the Medication:

Type the med to be prescribed, in either generic or trade form in the "**Drug Name**" box and press Enter. This opens the Medication search function in the drug formulary within the EMR:

Drug	g Search									
4.	Search T Stren Cli		Form Varie Search	 Name Contains Display Only Generic Formulation 	□ Name So s 3, □ Include R		🗌 Exact Nar	ne Match	es	
Fav	ld 2477718 8995	Code Sys DIN GF	Name AG-AMOXICILLIN 250 MG CAPSULE (ANGITA PHARMA I) amoxiciliin 250 mg CAPSULE	Route Oral	Form CAPSULE (HARD, SOFT, ETC.)	Strength 250 MG	Benefit Status	Q	<u>d</u> (% %
٥	2477726 8996	DIN GF III 5.	AG-AMOXICILLIN 500 MG CAPSULE (ANGITA PHARMA I) amoxicillin 500 mg CAPSULE Amoxicillin 500 mg: AMOXICILLIN 500 mg CAPSULE; 1 Capsule(s), TID, 3 Day(s) Amoxicillin 500 mg: AMOXICILLIN 500 mg CAPSULE; 1 Capsule(s), TID Brad Amoxil Template; amoxicillin 500 mg CAPSULE; 1 Capsule(s), TID, 10 Day(s)	Oral	CAPSULE (HARD, SOFT, ETC.)	500 MG				M 6 8

- **1.** Typing a portion of the name is acceptable.
- 2. The blue chevron hides/opens the filtering options when searching for a medication:
 - (i) "Select only generic formulations" can be useful when trade name search is not limiting or broadening the search enough, as the case may be
 - (ii) Filtering by "Form" e.g. creams, tablets, etc., or by "Route" e.g. oral, injection, etc.
- **3.** Select "Include Retired Drugs" if having difficulties finding a common med. Pharmacists will communicate directly with the prescribing provider if a drug is truly now retired and shouldn't be used or if they can't make an appropriate substitution:

Drug Search								E.
Search Tex Strength Class		Form CREAM V Rode V Search	Name Contains Display Only Generic Formulations	_	ne Sounds Like ude Retired Drugs	📄 Exact Name Ma	itches	
1716		nyurocorcisone acetatelprantokine troi r /// / // citc.wiii (otkini)						-
539538 7524	DIN GF	RETIRED: HYDERM 0.5% CREAM (K LINE PHARMS) hydrocortisone acetate 0.5 % CREAM (GRAM)	Topical	CREAM (GRAMS)	0.5 %	Q	4	 <i>8</i>
458155 15189	DIN GF III	RETIRED: HYDERM 1% CREAM (KLINE PHAMAS) hydrocortisone acetate 1% CREAM (GRAM) hydrocortisone acetate 1% CREAM (GRAM): 1 Application(s), BID PRN Hydrocortisone 1% qid PRN 50 g; hydrocortisone acetate 1% CREAM (GRAM); 1 Application(s), QID PRN	Topical	CREAM (GRAMS)	1%	Q	Q (#
303895 7544	DIN GF	RETIRED: UNICORT 1% CREAM (GLAXO CANADA) hydrocortisone 1% CREAM (GRAM)	Topical	CREAM (GRAMS)	1%	Q	٩ (8
CCC 107	DIN	DETIDED, CODTACET & DE ODEAN (AVEDET LADO)	T	000111 (001110)	6 F W	_	~	*

Once a med is selected it will bring users back to the prescription writer:

1. Indicate the dose, route, frequency and duration and the total number will automatically calculate, unless it is a PRN medication.

NOTE: If the med comes in tablets, pharmacists advise that you can write an RX for $\frac{1}{2}$ a tablet, which should be entered as a 0.5 tablet, but this is not true for capsules.

- 2. When finished writing the Prescription hit "Save" unless you have only one medication to prescribe.
- 3. Select "Approve and Preview" only when you wish to prescribe a single Medication, otherwise select "Save" and bulk approve and print from the meds list.
- 4. If the user has Template Admin Permissions set to "Allow", medications can be saved as templates by right clicking on the green "Prescription" bar and selecting "Save as Template". The "Template Name" field will then appear and when the medication is saved or approved it will be saved as a template.
- 5. Templates can be accessed by right clicking on the "New" prescription icon in the meds list and hovering over "New Med", simply by typing the name in the "Drug Name" field or by right clicking on the green "Prescription" bar and hovering over "Find Med Template".

Meds with Unusual or Changing Doses (e.g. Effexor 187.5 mg)

Meds like Effexor, that don't have a simple line item for the dosage you are trying to prescribe, should be prescribed using two different Rxs. Pharmacists indicate that this is how the Rx is treated, regardless of how it is written.

Also, if changing dosages (e.g. originally 150 mg, increasing to 187.5 mg of Effexor), pharmacists recommend to discontinue the old Rx and create the new one with two separate Rxs (e.g. a 150 mg and a 37.5 mg of Effexor).

Prescribing Compounds

Compounds are written as simple prescriptions with the following exceptions:

- The compound label must be specified use a name that specifies exactly what is in the compound for easy recall.
- Ingredients are added one at a time by using the "Compound Ingredient" field and the medication search functionality.
- When an ingredient is selected it will appear underneath the field and the amount and units will have to be selected
- The "Compound Ingredient" field can then be used to add another ingredient
- The site is optional but the "Dosage Form" must be specified.

*Please contact eDOCSNL at <u>info@edocsnl.ca</u> if you are interested in having additional common compound medication templates added to your EMR.

Non-Drug Prescriptions

It is recommended that anything that is an "order" should be written on an Rx. However, anything that requires feedback or is open until a response is received should be a "consult".

- Services like Physiotherapy, Massage, Chiropractor, Podiatry, Dietician, Audiology, Acupuncture, Psychology should all be on Non-Dug Rxs unless a response is expected
- "Care items" that are not medications should also be on non-drug Rxs, e.g. CPAP, orthotics, braces, compression stockings, etc.
- There are often insurance issues associated with getting coverage for some services/items when they are written on anything other than an Rx, as the insurance companies want to see that the service or item was "ordered".

Documenting External Meds

- External medications are written the same way as simple prescriptions
- If the provider having prescribed the medication is known and it is desired to be documented it can be written in the observation template or in the notes section, which can be accessed by clicking the "Notes" indicated below
- External medications must be approved when documenting, as the patient is taking the medications in question.
- Important to include External Meds for the purpose of drug interaction checking.
- If the date the medication was prescribed or filled is known, it should be specified in the start date this can be obtained from the patient's HEALTHe NL record.

• Once entered, they must be renewed separately for the first time but can then be set as Simple Rx on a go forwards, if applicable.

RENEWALS

Renewals of multiple meds should be done using the bulk renew function as this will provide the opportunity to "resynch" any misaligned start dates of the individual meds. (If renewing just one med, this can also be done by using the renewal icon on the meds list).



1. Select the meds that are to be renewed. Deselect the "All" tick box if applicable and select individual meds:

	Name	Dosage Info	Duration	Qty	Route	🗘 Ret	fills 🗘 Days Rem	nainin
)	ACT SERTRALINE 50 MG CAPSULE sertraline HCI	1 Capsule(s), QD, 2 then 2 Capsule(s), Q then 3 Capsule(s), Q	2 Week(s) 2 Week(s) 4 Week(s)	126	Oral	0	56	
]	AMOXICILLIN 500 mg CAPSULE amoxicillin	1 Capsule(s), TID	3 Day(s)	9	Oral	0	3	
•	IRBESARTAN 300 mg TABLET irbesartan	1 Tablet(s), QD	1 Mth30	30	Oral	3	100	
	metformin HCI 500 mg TABLET metformin HCI	1 Tablet(s), QD	3 Mth30	90	Oral	0	70	
ar	macy 💥							
lar	Pineter (1 📄 🥚 🌰 🖹 🖉 🥸 👹 💠						1
ar	Pineter (° 🔲 🥥 🍋 🖹 🖋 🍪 👹 💠		_	_	_	_)
ar	Pineter (° 🔲 🧼 🕒 🖻 🖋 🕹 💓 💠		-	_	_	_)

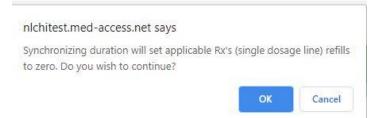
2. Use the <u>Refills Days Remaining</u> blue "refresh" icons next to "Refills" and "Days Remaining" to change both columns to "0".

NOTES:

- (i) Pharmacists indicate that this is an acceptable practice and does not usually impact any insurance issues for the patient as long as the original Rx is at least half-way through the previous 3-month Rx period.
- (ii) Use caution with using "Refills" to set a new Refill amount as part of the "synching" as they do not appear to save when renewed. Review and edit the applicable med prior to Approval to ensure correct Refills are set.

Pre	escription Renewals					2.
7 F	All					4.
	Name	Dosage Info	Duration	Qty	Route	🗘 Refills 🗘 Days Remaining
	ACT SERTRALINE 50 MG CAPSULE sertraline HCI	1 Capsule(s), QD, 2 then 2 Capsule(s), Q then 3 Capsule(s), Q	2 Week(s) 2 Week(s) 4 Week(s)	126	Oral	0 0
	AMOXICILLIN 500 mg CAPSULE amoxicillin	1 Capsule(s), TID	3 Day(s)	9	Oral	0 0
	IRBESARTAN 300 mg TABLET irbesartan	1 Tablet(s), QD	1 Mth30	30	Oral	3 0
	metformin HCI 500 mg TABLET metformin HCI	1 Tablet(s), QD	3 Mth30	90	Oral	3 0 3.
						Sync Duration of Therapy 3 Mth30 🔻
	rmacy 💥	4				
Me	l's Pharmacy, Phone: 709-466-1234, Fax: 709-466-5555, 1	234 Drugstore Way, CLARENVILLE 4.				
	Signature	2 🗖 🥥 🌰 🖻 🖉 🤣 👹 💠				
	5.					
Rer	new Renew & Approve Renew, Approve & Preview	Renew, Approve & Fax 6.				

- **3.** Click on the "**Sync Duration of Therapy**" box to open up additional fields to indicate the length of the renewal:
- 4. Add/Change a Pharmacy (if not already set as the patient's Preferred Pharmacy) if sending by eFax. The "Remove, Approve & Fax" option will not appear until a Pharmacy is listed.
- 5. If using eFax, sign with your Dynamic Digital Signature if the renewed meds are the only meds to be included on the eFax Rx.
- 6. Select the appropriate option:
- (i) **"Renew**" (only) if additional short-term, non-drug or compounds are to be added to the Rx. Proceed to Step 7 below.
- (ii) **"Renew, Approve and Preview**" if these are the only meds on the Rx and it is being printed to be "wet-signed" by the provider on the printed paper and given directly to the patient or faxed on a standalone fax machine.
- (iii) **"Renew, Approve & Fax**" if the renewed meds are the only meds to be included on the eFax Rx. If you **do not** want to include the system-generated cover sheet, tick in the check box.
- **7.** A confirmation box appears. The synchronizing will only apply to the meds you have selected.



8. If sending by eFax, an additional confirmation box appears:



Note: there does not appear to be the ability to edit the Cover Letter Notes, even though this option can be accessed in the individual med Prescription Writer screen.

- New and/or additional short-term/non-drug/compound/external meds are prescribed (entered and/or renewed) separately, but <u>do not</u> Approve them until ready to complete the Rx.
- **10.** Once all meds have been entered in a Pending status, use the **Bulk Approve** icon to do a final review:

Y C	Ø	.0	-	122		P	0
Filter Renew	Approve	Discontinue	Reprint	Graph	Print	New	Help

Sele	ct Pending		Name	Dosage Info	Qty	Route	Refills	Start-End Date	Authority	Status	Update 2
•	Continuous	D	ACT SERTRALINE 50 MG CAPSULE	1 Capsule(s), QD, 2 then 2 Capsule(s), Q then 3 Capsule(s), Q	126	Oral	0	23Apr20-18Jun20	paper	Pending	
•	Continuous		AMOXICILLIN 500 mg CAPSULE	1 Capsule(s), TID	270	Oral	0	23Apr20-22Jul20	paper	Pending	
•	Non-drug		Compression Stockings	Compression Stockin	1		0	20Apr20-	paper	Pending	
	Continuous		IRBESARTAN 300 mg TABLET	1 Tablet(s), QD	90	Oral	0	23Apr20-22Jul20	paper	Pending	
•	Short-Term		hydrocortisone acetate 1 % CREAM (GRAM)	1 Application(s), QD	7	Topical	0	23Apr20-30Apr20	paper	Pending	
	Continuous		metformin HCI 500 mg TABLET	1 Tablet(s), QD	90	Oral	0	23Apr20-22Jul20	paper	Pending	
	nacy 💥 s Pharmacy, Phone:	: 709-466-	-1234, Fax: 709-466-5555, 1234 Drugstore Way, CLA	RENVILLE 3.							
			Signature 🔛 🚫 P 🔲 🥥 🙆	2 🖉 🗞 💓 🗘		-	-	_	-	-	

- (i) De-select any meds that have been included in error.
- (ii) Edit any individual meds, i.e. refills.
- (iii) If using eFax, select the Pharmacy, if not already entered and add
- (iv) Dynamic Digital Signature.
- (v) **"Approve and Preview**" if printing on paper to wet-sign and give to patient/stand-alone faxing to Pharmacy.

"**Approve & Fax**" if using eFax. Tick checkbox if you do not want the system-generated cover sheet to go with the Rx.

11. If applicable, use the **Reprint** icon to print a hardcopy of the Rx and select all of the meds to print on the one prescription.

NOTE: if using this option with eFax, a previous Dynamically Digital Signature will show up in the Preview, but the Rx can no longer be sent by eFax directly to a pharmacy. It has to be printed in hardcopy and re-signed with a "wet" signature by the provider.

Filter Renew Approve Discont	e Reprint Griph Print New Help
------------------------------	--------------------------------

	iption Repri	nts									
	7 Active										
Select	Usage		Name	Dosage Info	Qty	Route	Refills	Start-End Date	Authority	Status	Update
•	Continuous	D	ACT SERTRALINE 50 MG CAPSULE	1 Capsule(s), QD, 2 then 2 Capsule(s), Q then 3 Capsule(s), Q	126	Oral	0	23Apr20-18Jun20	paper	Approved	23Apr20
	Continuous		AMOXICILLIN 500 mg CAPSULE	1 Capsule(s), TID	270	Oral	0	23Apr20-22Jul20	paper	Approved	23Apr20
	Continuous		IRBESARTAN 300 mg TABLET	1 Tablet(s), QD	90	Oral	0	23Apr20-22Jul20	paper	Approved	23Apr20
	Short-Term		hydrocortisone acetate 1 % CREAM (GRAM)	1 Application(s), QD	7	Topical	0	23Apr20-30Apr20	paper	Approved	23Apr20
	Continuous		metformin HCI 500 mg TABLET	1 Tablet(s), QD	90	Oral	0	23Apr20-22Jul20	paper	Approved	23Apr20
V Non-	Drug										
Select	Usage		Name	Dosage Info	Qty	Route	Refills	Start-End Date	Authority	Status	Update
\$	Non-drug		Compression Stockings	Compression Stockin	1		0	20Apr20-	paper	Approved	20Apr20
				Ordering Provider* Blake, Barbara 🔻							
Preview											

APPENDIX A: EMR SETTINGS RELATED TO MEDICATION FUNCTIONALITY

USER PROFILE PRESCRIPTION PREFERENCES SETTINGS:

med access	
Administration	General Groups Passwords Macros Signing Options Preferences Preferred Mgmt History -
My Profile	
USER ADMINISTRATION	Prescription Preferences
User List	Include Pharmacy on Rx: 3.
User Groups	
Resources	Include Indication on Rx: 2.
Roles	Default Search Only Generic Drugs:
SITE ADMINISTRATION	Paper Type: 8.5x11
Site Settings	Default Drug Use Type: 1.
Mobile Settings	
Audit Log	Default Drug Monograph: Clinical Monograph

Within the User's Profile, **Preferences Tab**:

- To set the default Drug Type when opening an Rx. Currently defaults to "Continuous" but eDOCSNL Program recommends setting this to BLANK so that the Provider <u>has</u> to choose a type prior to saving the Rx.
- 2. Select to always include the **Indication** from the patient's chart on the Rx. The Indication is primary **Diagnosis Code** as entered on the patient's Visit note.
- **3.** Select to always include the selected **Pharmacy** information on the printed or eFax copy of the Rx. This will appear under the Provider's signature line:

Signature:
Barbara Molgaard Blake (BLN#12345, CPS#22222)
** Pharmacy: Mel's Pharmacy, ph:709-466-1234 fax:709-466-5555

Page 1 of 1

TO ENABLE DYNAMIC DIGITAL SIGNATURE IN THE EMR:

Involves two steps:

- (i) Enable Dynamic Digital Signature for the EMR instance in the **Site Settings**.
- (i) Enable Dynamic Digital Signature for the applicable user(s) in their **Profile Settings**.

Site Settings – pull down the Features tab – Optional Features:

med access	Site Settings		
Administration	General ▼ Privacy/Security ▼ Templates ▼ Site Macros Scheduler ▼ BCC Profiles Billing	Electronic Lab/DI 🔻	Features 🔻
My Profile	Automatic Demographic Referring Provider Update	¢ •	
USER ADMINISTRATION			٦ ٦
User Groups	CIHI data extraction	ф Э	
Resources			Ĩ
	Dynamic Digital Signature	ф э	
SITE ADMINISTRATION Site Settings			-']

Slide the Dynamic Digital Signature radio button over to the right to enable Dynamic Digital Signature for the instance.

My Profile – User Settings – click on Features tab – Dynamic Digital Signature: slide the radio button over to the right:

med access		
User Settings	General Groups Passwords Macros Signing Options Preferences Filters Templates N	Workflows Features C
	Preferred Mgmt Mobile	
	User Group Context: All	
	Dynamic Digital Signature	
	These attributes override Site-level attributes.	

It is also required that the user has the Signature Text field filled in their User Settings under the Signing Options tab:



APPENDIX B: TO SELECT A RECEIVING PHARMACY FOR A PATIENT:

When in the patient's med list, the receiving Pharmacy information can be set as:

- (i) a default "**Preferred Pharmacy**" for the patient, and/or
- (ii) as a "one-time" Pharmacy for an specific Rx.
- 1. To select a **Preferred Pharmacy** for the patient:

Clinical (BARB TEST)	Titer Renew Approve Discontinue Reprint Graph Print New Help				
Drug Allergies and Intolerances			Options		
Opiolds - Morphine Analogues:MORPHINE SULFATE Penicillins:PENICILLIN Opiolds-Meperidine and Related:MEPERIDINE HCL	Mild Moderate Severe	Rash - hives, Rash Fever, Respiratory Distress Rash - maculopapular, Respiratory Distress	 Paper Chart Superseded Suppress Warning Printing Compliance Packag 	Refuse PrescribelT Deferred Rx Pretered Pharmacy Shoppers Drug Mart, Phone: 709-739-1300, Fax: 709-] ≣	

If not already filled in or if the patient wants to select a different pharmacy:

- Click on the Facility icon to the far right. (Hovering over the icon gives you information for that Pharmacy).
 - This opens the current Preferred Pharmacy information for that specific patient:

BARB TEST 25 years							n Add Pharmacy			
Preferred Pharmacies										
Name	Address	City	Province	Phone	Fax	Sort	Remove			
Shoppers Drug Mart	🔒 250 Lemarchant Road	STJOHNS	NL	<u>709-739-1300</u>	709-739-1631	_ ↑ ↓	×			

- A. To add a Preferred Pharmacy to the patient's chart, click on the **Add Pharmacy** icon, which will take you to the Pharmacies in the <u>Facilities Provider Registry</u>.
- B. If you don't see the patient's preferred pharmacy in the list:
 - Search for it using a number of methods, such as adding at least the first 3 letters of the pharmacy name, a City, or changing the Province (note that selecting "All" for the Province will not return any results!).
 - Pharmacies can be removed from a Patient's list of Preferred Pharmacies or the sort order can be changed so that the most frequently used pharmacy is at the top of the list and defaults into the Preferred Pharmacy on the patient's Rx.
 - **"One-time**" Pharmacy information can be entered from within the Rx by clicking on the **Facilities icon** and selecting the destination Pharmacy.