



MAR/MedVerify User Guide

MAR/MedVerify User Guide

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TruBridge
54 St. Emanuel Street
Mobile, AL 36602
T(877) 424-1777
trubridge.com



Table of Contents

Chapter 1 Introduction

Attestation Disclaimer	1
Overview	1

Chapter 2 Medication Administration Record (MAR)

Accessing the MAR	2
Working with the MAR	3
Order Detail	10
Order Detail - IV Infusion	20
Order Detail - PCA Infusion	24
Order Detail - Diabetic Record	27
Super Amend Behavior Control	30

Chapter 3 Medication Administration Using MedVerify

Overview	31
Initiating Medication Verification	31
Medication Verification	31
Medication Verification Setup	34
Scanning the Patient's Wristband	39
Scanning the Medication Label - Alerts	42
Bad NDC	42
Invalid NDC	43
First Dose, Early Administration	43
Scanned Medication Item is Not Ordered for this Patient	43
Medications with the Same NDC Number	44
Omitted Last Dose	44
Omitted Last Dose - Linked Medications	45
Wrong Route	45
Prescribed Dosage Does Not Match Scanned Dosage	46
Scanned Med Does Not Match Selected Med	46
Start Date and Time Not Reached	46
Medication Discontinued	47
Unverified Medication	48
Cannot Do Right Dose Checking	49
Late/Early Administration Time	49
PRN Time Range Warning	50
Acetaminophen Warning	51
Duplicate Therapy Administrations	52
Auto-Display Instructions	52
Dose Scanned is Greater Than Ordered Dose	53
Dose Scanned is Less Than Ordered Dose	54
Maximum Number of Scans Has Been Reached	55
Documenting Medication Administration	56
Acetaminophen Administrations	63
Diabetic Record	65

IV - With Components	70
Linked Orders	70
Medication Waste	73
PCA Infusion	75
Vaccinations	80
Witness Required	84

Chapter 4 Charge Upon Administration (CUA)

Overview	86
Charge Upon Administration	86

Chapter 5 Reports

Overview	87
Infusion Turn Around Time Report	87
Medication Omissions Report	89
Medication Report	89
Patient Medication List	95
Medication Verification Compliance Report	95
Medication Verification Compliance Report by Patient	96
Medication Verification Compliance Report by Employee	98
Medication Warnings and Overrides Report	100

Chapter 1 Introduction

1.1 Attestation Disclaimer

Promoting Interoperability Program attestation confirms the use of a certified Electronic Health Record (EHR) to regulatory standards over a specified period of time. TruBridge Promoting Interoperability Program certified products, recommended processes, and supporting documentation are based on TruBridge's interpretation of the Promoting Interoperability Program regulations, technical specifications, and vendor specifications provided by CMS, ONC, and NIST. Each client is solely responsible for its attestation being a complete and accurate reflection of its EHR use during the attestation period and that any records needed to defend the attestation in an audit are maintained. With the exception of vendor documentation that may be required in support of a client's attestation, TruBridge bears no responsibility for attestation information submitted by the client.

1.2 Overview

This documentation provides instruction on the functionality and usage of the [Medication Administration Record \(MAR\)](#) and [Medication Verification](#).

- The MAR provides access to the patient's pharmacy profile including order detail and medication administration documentation.
- Although medications may be administered via the MAR electronically, Medication Verification takes patient safety a step further by providing a final check at administration through patient and medication barcode scanning.

Medication	05/22/2024 21:00	05/22/2024 20:00	05/22/2024 18:00	05/22/2024 16:00	05/22/2024 14:00	05/22/2024 12:00	05/22/2024 11:00	05/22/2024 09:00	05/22/2024 08:00	05/22/2024 06:00	05/21/2024 23:00	05/21/2024 22:00	05/21/2024 21:00	05/21/2024 20:00
AMBIEN (ZOLPIDEM) Dose: 10 MG EVENING PO											23:00			
WARFARIN (COUMADIN) 3 MG Dose: 3 MG DAILY PO									08:00					
HF Furosemide Oral Tablet 40MG Dose: 1 Tablet DAILY PO									08:00					
GLUCOPHAGE 500MG TABLET - METFORMIN Dose: 500 MG DAILY PO									08:00					
GABAPENTIN (NEURONTIN-GENERIC) Dose: 300 MG *TID PO	21:00				14:00				08:00				21:00	
INSULIN LISPRO (HUMALOG) 100U/ML Dose: 0.01 UNITS ACHS SUB Q		20:30		16:30		11:30				06:30				20:30
NF-12 Hour Decongestant Nasal Spray 0.05% Dose: 0.05 % BID SCOTT NASAL	21:00							09:00					21:00	
AMBIEN (ZOLPIDEM) Dose: 10 MG EVENING PO											23:00			
WARFARIN (COUMADIN) 3 MG Dose: 3 MG DAILY PO														

Medication Administration Record

NOTE: Facilities outside of the United States may choose a date format of MMDDYY, DDMMYY, or YYMMDD to be used on all date fields in the MAR / MedVerify application. A TruBridge Representative should be contacted in order for the date format to be changed.

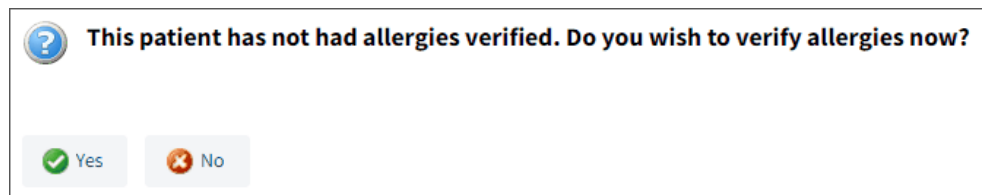
Chapter 2 Medication Administration Record (MAR)

2.1 Accessing the MAR

The **Medication Administration Record (MAR)** displays the patient's medication orders, schedules, details, and allows the user to document the administration of those medications. This section details how to access and work with the MAR.

To Access the MAR

The MAR is accessed from the Patient Chart list (left side of the screen) once you select a patient. Select a patient, then select **MAR** from the list on the left side of the screen. You may be prompted to verify the patient's allergies prior to the screen displaying. Selecting **Yes** launches the Allergies page to verify allergies. See the [Allergies User Guide](#) for additional information.



Once allergies have been verified (if required), the Medication Administration Record for the current date and time is displayed.

Medication	05/22/2024 21:00	05/22/2024 20:00	05/22/2024 18:00	05/22/2024 16:00	05/22/2024 14:00	05/22/2024 12:00	05/22/2024 11:00	05/22/2024 09:00	05/22/2024 08:00	05/22/2024 06:00	05/21/2024 23:00	05/21/2024 22:00	05/21/2024 21:00	05/21/2024 20:00
AMBIEN (ZOLPIDEM) Dose: 10 MG EVENING PO test											23:00			
WARFARIN (COUMADIN) 3 MG Dose: 5 MG DAILY PO									08:00					
NF Furosemide Oral Tablet 40MG Dose: 1 Tablet DAILY PO									08:00					
GLUCOPHAGE 500MG TABLET - METFORMIN Dose: 500 MG DAILY PO									08:00					
GABAPENTIN (NEURONTIN-GENERIC) Dose: 300 MG *TID PO	21:00				14:00				08:00				21:00	
INSULIN LISPRO (HUMALOG) 100U/ML Dose: 0-01 UNITS ACHS SUB Q		20:30		16:30			11:30			06:30				20:30
NF 12 Hour Decongestant Nasal Spray 0.05% Dose: 0.05 % BID SCOTT NASAL	21:00							09:00					21:00	
AMBIEN (ZOLPIDEM) Dose: 10 MG EVENING PO test											23:00			
WARFARIN (COUMADIN) 3 MG Dose: 10 MG DAILY PO														

Medication Administration Record

NOTE: Double-clicking the name of a patient on the Medication Verification screen also provides access to the MAR. See [Medication Verification](#) for additional information.

2.2 Working with the MAR

The MAR provides several options for changing the display and performing other available functions.

[To Change the MAR Display](#)

[- Detail View](#)

[- Date View](#)

[- MAR Display, Sort, and Date Range](#)

[- Change Date/Time](#)

[Pending Medications](#)

[Other MAR Functions](#)

[Working with Medication Time Slots](#)

To Change the MAR Display

The MAR defaults to display the patient's medications that are due for the current date and time. There are several options for modifying the display of medications. There are two View options--**Detail View** and **Date View**--as well as **MAR Display, Sort,** and **Date Range** filter options.

The columns may be set to display in chronological or reverse chronological order in the **Tables > Clinical > Nursing > EMAR Settings Table**. This setup option applies to the Detail and Date Views of the MAR.

Vertical and **horizontal scroll bars** are available to navigate both views of the grid if the information displayed by the selected parameters does not fit in the viewing area. Scroll bar placement of the grid is sticky, meaning if the user accesses another area of the patient's chart and returns to the MAR, the placement of the scroll bars remains the same.

Detail View

If the **Detail View** of the MAR has been selected for display, columns display in one-hour increments. The default for the MAR display is six columns before and after the current date/time column. The **Date Range** date and time fields automatically populate based on the columns that are generated on the MAR based on this setting. Use the Date Range fields to manually enter a start or end date prior to the current date. If you change the date range on the MAR screen, a **Reset Default Date Range** option is displayed in bold red text above the date range fields. The red text calls attention to the fact that the date range has been changed, and selecting this option provides a quick way to reset the fields back to the default range set in the EMAR Settings table.

The default for the **PRN MAR Display** is a 24-hour period that encompasses the current date and time. The date range fields automatically populate based on the columns that are generated on the MAR based on this setting. Columns are generated on the Detail View of the PRN MAR Display based on administration date and time for PRN medications. If no PRN medications have been administered based on the date range entered, no columns will display to the right of the medication list.

MULDER, FOX
 Admitted: 10/16/2023
 DOB: 11/30/1964 (59)
 Birth Sex: Female Myself
 Code Status: Assume Full Code
 Advanced Directive: No
 Visit #: 70000372
 Weight: 84.17 kg (185 lbs 9.0 oz)
 Height: 69.00 in.
 No Behavioral Alerts
 Phy Admit Reason: Moderate persistent ast...
 CrCl: 79.12 ml/min
 Attending Physician: DRASHLEY DEVERY PHYS QA

Update All Pending Remove All Pending Date View Change Date/Time Medication Report Color Legend Clinical Monitoring Refresh

Medication Administration Record Current Date and Time

MAR Display: All Include Discontinued Medications Sort: Category Date Range: 5/21/2024 12:00 - 5/22/2024 21:00

	05/22/2024 21:00	05/22/2024 20:00	05/22/2024 18:00	05/22/2024 16:00	05/22/2024 14:00	05/22/2024 12:00	05/22/2024 11:00	05/22/2024 09:00	05/22/2024 08:00	05/22/2024 06:00	05/21/2024 23:00	05/21/2024 22:00	05/21/2024 21:00	05/21/2024 20:00
AMBIEN (ZOLPIDEM) Dose: 10 MG EVENING PO test											23:00			
WARFARIN (COUMADIN) 3 MG Dose: 5 MG DAILY PO								08:00						
NF Furosemide Oral Tablet 40MG Dose: 1 Tablet DAILY PO								08:00						
GLUCOPHAGE 500MG TABLET - METFORMIN Dose: 500 MG DAILY PO								08:00						
GABAPENTIN (NEURONTIN- GENERIC) Dose: 300 MG TID PO	21:00				14:00			08:00					21:00	
INSULIN LISPRO (HUMALOG) 100UIN/ML Dose: 0.01 UNITS ACHS SUB Q		20:30		16:30		11:30			06:30					21:00
NF 12 Hour Decongestant Nasal Spray 0.05% Dose: 0.05 % BID SCOTT NASAL	21:00						09:00						21:00	
AMBIEN (ZOLPIDEM) Dose: 10 MG EVENING PO test											23:00			
WARFARIN (COUMADIN) 3 MG Dose: 10 MG DAILY PO														

Medication Administration Record

The column header for the current date and time is highlighted in dark gray. If the [Change Date/Time](#) button has been used, the system uses the entered date and time as the current date and time, and the date range displayed will be calculated based on that date and time. The number of columns set to pull before and after the current date and time column are facility-definable and may be changed from the default of six in the **EMAR Settings** table.

Date View

If the **Date View** of the MAR has been selected for display, columns displayed are per day. The default for the MAR display is one column before the column that encompasses the current date and one column after the column that encompasses the current date. The date range date fields automatically populate based on the columns that are generated on the MAR based on this setting. Use the Date Range fields to manually enter a start or end date prior to the current date. If you change the date range on the MAR screen, a **Reset Default Date Range** option is displayed in bold red text above the date range fields. The red text calls attention to the fact that the date range has been changed, and selecting this option provides a quick way to reset the fields back to the default range set in the EMAR Settings table.

The time fields are disabled for this view of the MAR. For the **PRN MAR Display**, columns are generated on the Date View based on administration date and time for PRN medications. If no PRN medications have been administered based on the date range entered, no columns will display to the right of the medication list.

[Update All Pending](#)
[Remove All Pending](#)
[Detail View](#)
[Change Date/Time](#)
[Medication Report](#)
[Color Legend](#)
[Clinical Monitoring](#)
[Refresh](#)

Medication Administration Record **Current Date and Time**

MAR Display: Include Discontinued Medications Sort: Date Range:

	05/22/2024	05/23/2024	05/24/2024
AMBIEN (ZOLPIDEM) Dose: 5 MG EVENING PO test	23:00	23:00	23:00
GABAPENTIN (NEURONTIN-GENERIC) Dose: 300 MG *QD PO	20:00	20:00	20:00
GLUCOPHAGE 500MG TABLET - METFORMIN Dose: 500 MG DAILY PO	08:00	08:00	08:00
OXYMETAZOLONE NASAL SPRAY(AFRIN) Dose: 1 MCG QAM NASAL-INH	08:00	08:00	08:00
BLOOD GLUCOSE X1 INSULIN HUMAN R 100 UNITS/ML 3ML VL JP** Dose: Per Protocol PRN IVP			
DOPAMINE PREMIX Flowrate: TITRATE CONT IV IVPB TITRATE PER PROTOCOL			

Medication Administration Record

The column header for the current date is highlighted in dark gray. If the [Change Date/Time](#) button has been used, the system uses the date entered as the 'current date', and the date range displayed will be calculated based on that date. The number of columns set to pull before and after the current date column are facility-defined and may be changed from the default settings (1) in **Tables > Clinical > Nursing > EMAR Settings Table**.

NOTE: MAR Views are "sticky" per user, but not per session.

MAR Display, Sort, and Date Range Fields

- Use the **MAR Display** field to select the type of medications to display: Due, Scheduled, PRN, IV, or Diabetic Record.
 - **All:** Select this option to display all active medications on the patient's pharmacy profile that fall within the date range selected.
 - **Due:** Select this option to display all medications that are due. The acceptable time before and after scheduled administration times to give medications is entered in the Point of Care Control Maintenance table. If the scheduled date/time of the medication falls within this time frame based on the current date/time, the medication is deemed due.
 - **Scheduled:** Select this option to display all scheduled medications on the patient's pharmacy profile that fall within the date range selected.
 - **PRN:** Select this option to display all active PRN medications on the patient's pharmacy profile that fall within the date range selected.
 - **IV:** Select this option to display all active IV medications on the patient's pharmacy profile that fall within the date range selected. The route is used to filter this option. Any IV components will display in the grid cell.

- **Diabetic Record:** Select this option to display all active Diabetic Record medications on the patient's pharmacy profile that fall within the date range selected. The medications must be designated for use with the Diabetic Record in Pharmacy Information.
- Select the **Include Discontinued Medications check box** to include medications that were discontinued during the date and time range selected. This option is disabled when the **Due** filter is selected. Discontinued scheduled medications will be included with discontinued medications even if no administrations are scheduled during or after the date and time range selected. Discontinued orders that have not been verified will continue to display with active orders until verified.
- In the **Sort** field, select the option to sort the list by: Category, Alphabetical, Chronological, or Reverse Chronological.
- The **Date Range** fields may be used to customize the time frame displayed on the grid. Enter the beginning and ending date and time in the fields or use the **Date/Time Pickers** to modify the fields. Date range is sticky per user and per session only. If a user changes the date range, a **Reset Default Date Range** option is displayed in bold red text above the date range fields. Select this red text to reset the date range to the default.

Change Date/Time

- **Change Date/Time:** Select this option to change the date and time stamp associated with medication documentation. This option is disabled while in Medication Verification mode or while using the "View Only" MAR. Back-timed medication administrations are documented via traditional Point of Care. See the [Pharmacy User Guide](#). The columns may be set to display in chronological or reverse chronological order in the EMAR Settings table. This setup option applies to the Detail and Date Views of the MAR.
- **Vertical and horizontal scroll bars** are available to navigate both views of the grid if the information displayed by the selected parameters does not fit in the viewing area. Scroll bar placement of the grid is sticky, meaning if the user accesses another area of the patient's chart and then returns to the MAR, the placement of the scroll bars remains the same.
- **Current Date/Time:** Select this option to return the documentation to the current date and time. This option is available only if **Change Date/Time** was initiated.

Pending Medications

- **Update All Pending:** Select this option to update pending medication administrations. This option is disabled if no administrations are pending. See [Medication Administration](#) for additional information.
- **Remove All Pending:** Select this option to remove pending medication administrations. This option is disabled if no administrations are pending. See [Medication Administration](#) for additional information.

Other MAR Functions

These additional functions provide helpful information from the MAR screen.

- **Medication Report:** Select this option to generate the Medication Record Report. See [Medication Report](#) for additional information.
- **Color Legend:** The medication administration record is color-coded to denote the status of each order, using hard-coded medication types. The color used to identify each type may be facility-defined unless the "View Only" EMAR is being used. The "View Only" color scheme is the default listed below. The color scheme is hierarchical, meaning that if a medication falls into more than one category, the color that displays is the color that falls highest on the list. Select **Color Legend** to display the legend currently in use. Select the **back arrow** to return to the MAR.

MAR Color Legend

	Color	Medication Type
	Grey	Unverified Medication
	Light Blue	Never Administered Verified Medication
	White	Verified Scheduled/IV/PRN Medication
	Dark Blue	One-time Medication
	Green	Overdue Medication Dose
	Orange	Overdue Medication Reassessment
	Black	Discontinued Medication
	Yellow	Renewal Medication
	Pink	IV Completion Due

MAR Color Legend

- **Grey - Unverified Medication:** Depending on setup, documentation of a medication administration may or may not be allowed.
- **Light Blue - Never Administered Verified Medication:** Indicates that an active medication has been verified but not administered or omitted.
- **White - Verified Scheduled/IV/PRN Medication:** Indicates that an active medication has been verified and administered or omitted at least once.
- **Dark Blue - One-time Medication:** Indicates that an active one-time medication has been verified but not administered.
- **Green - Overdue Medication Dose:** Indicates that a scheduled administration of a medication has not been administered or omitted. (Usage of this medication type is determined by setup.)
- **Orange - Overdue Medication Reassessment:** Indicates that a reassessment of the medication administration is required and has not been documented within the acceptable time frame. (Usage of this medication type is determined by setup and is item specific.)
- **Black - Discontinued Medication:** Indicates that a medication is no longer active on the patient's pharmacy profile.
- **Yellow - Renewal Medication.**
- **Pink - IV Completion Due:** Indicates that, based on the **Infusion Period**, the infusion should be finished, but a **Complete Infusion** action has not yet been performed. (The **IV Frequency** table includes a switch, which is checked by default, to control the IV Completion Due alert.

- **Clinical Monitoring:** Select this option to review any alerts generated during the order entry process.

The screenshot shows the 'Clinical Monitoring' interface. At the top, there are options for 'Select All' and 'Info'. Below that, the 'Display' section has radio buttons for 'All', 'Required' (which is selected), and 'Optional'. The 'Alert Type' section includes checkboxes for 'Allergies', 'Disease Interactions', 'Drug Interaction', 'Duplicate Therapy', 'Food Interaction', 'General Precaution', 'IV Compatibility', 'Miscellaneous', 'PSD Check', and 'Reference Range'. The main area is a table with columns: Medication, Alert Type, Alert Reason, and Override. The table contains five rows of duplicate therapy alerts for Tylenol, NF-12 Hour De, and Warfarin.

Medication	Alert Type	Alert Reason	Override
TYLENOL (APAP)	DUPLICATE THERAPY	TYLENOL (APAP) SUSP UD: 160 MG/5 ML; *ACETAMINOPHEN(TYLENOL)TAB:325MG	<Override Reason Required>
NF-12 Hour De	DUPLICATE THERAPY	NF-12 Hour Decongestant Nasal Spray; DOPAMINE PREMIX: 1.6MG/ML	<Override Reason Required>
WARFARIN (COU)	DUPLICATE THERAPY	WARFARIN (COUMADIN) 3 MG; *HEPARIN LOCK FLUSH BD 100 UNITS/ML	<Override Reason Required>
WARFARIN (COU)	DUPLICATE THERAPY	WARFARIN (COUMADIN) 3 MG; *HEPARIN LOCK FLUSH BD 100 UNITS/ML	<Override Reason Required>
WARFARIN (COU)	DUPLICATE THERAPY	WARFARIN (COUMADIN) 3 MG; *HEPARIN LOCK FLUSH BD 100 UNITS/ML	<Override Reason Required>

Clinical Monitoring

The Clinical Monitoring screen can be filtered by **All**, **Required**, or **Optional** alerts, as well as by alert type. Alert Types include Allergies, Disease Interactions, Drug Interaction, Duplicate Therapy, Food Interaction, General Precaution, IV Compatibility, Miscellaneous, PSD Check, and Reference Range. In addition, users can select a column header to sort by column: Medication, Alert Type, Alert Reason, and Override Reason, if documented.

Select/check an item in the list and then select **Info** to display additional information about the alert (see image below). Select **Export** to view the document as a PDF report. Select the **back arrow** to return to Clinical Monitoring.

The screenshot shows the 'Info' view for a specific alert. At the top, there is an 'Export' button. The main content area displays the following text:

```

DRUG...: FUROSEMIDE (LASIX) 40 MG TABL FOOD...: FOOD
                DRUG - FOOD MONOGRAPH: 02011414
WARNING:
Concurrent use of FUROSEMIDE and FOOD may result in decreased furosemide
exposure and efficacy.
CLINICAL MANAGEMENT:
Administer furosemide on an empty stomach to avoid a reduction in the oral
bioavailability of the drug and to maintain a more consistent diuretic effect.
ONSET:
Rapid
SEVERITY:
Moderate
DOCUMENTATION:
Excellent

```

At the bottom of the window, there is a status bar with 'Page: 1 / 1', 'Zoom: 181%', and 'PORTRAIT'.

Clinical Monitoring

- **Refresh:** Select this option to update the MAR grid based on the **MAR Display** filter and **Date Range** currently selected.
- **Current Date and Time Label:** The "Current Date and Time" label displays in bold below the action bar and denotes that data is being documented in real time. If the **Change Date/Time** option is used, the date/time selected will display in place of this label.

- **Patient Wristband Scanned Label:** This label displays to the right of the "Current Date and Time" label if the patient's wristband has been scanned for Medication Verification. See [Scanning the Patient's Wristband](#) for additional information.

Working with Medication Time Slots

The medication and scheduled times, as well as previous administrations (for the displayed time range) and completed infusions (with time and nurse initials) are displayed in the grid. From the grid, you can view order information and access the Order Detail and Medication Administration screens.

- **Medication Description:** The medication description, dose/flow rate, units, frequency, route, and instructions display in this cell. If the Patient's Own Med or Non-Formulary Medication (NF) options were used during order entry, these statuses will also be denoted. Select the **medication description** (single-click) to display the Medication Administration screen. See [Medication Administration](#) for additional information. If the "View Only" EMAR is being used, the medication description may not be used to access the Medication Administration screen.
- **Alternating IV Icon:** Displays in the cell for alternating IV orders.
- **Alternating Components Icon:** Displays in the cell for IV orders with multiple components.
- **Linked Orders Icon:** Displays in the cell for linked orders.
- **Information Icon:** This option provides access to the Order Detail screen. See [Order Detail](#) for additional information.
- **!Pending CPOE Order:** This option displays if a CPOE order is pending, i.e., unverified by either pharmacy or nursing. The orders will require verification before they can be administered.
- **!DC Pending CPOE Order:** This option displays if a discontinued CPOE order is pending (i.e., unverified by either pharmacy or nursing). These orders will require verification before they can be administered. If an attempt is made to document on an unverified pending discontinued CPOE order, the following alert will appear: ***This medication is inactive.***

NOTE: *If a CPOE order is removed before the initial verification, the medication is removed from the grid.*

Medications display on the MAR in the following order:

- STAT and X1
- Scheduled
- IV
- PRN
- Discontinued (if selected to display)

The medications are color coded according to the **Color Legend** discussed above.

The time blocks in the date/time columns display medication information based on status:

- **Unadministered Scheduled Medications:**
 - **Detail View:** The scheduled time in military format (HH:MM) displays in the corresponding hour cell.
 - **Date View:** The scheduled time in military format (HH:MM) displays in the corresponding date cell. Multiple scheduled times list chronologically.
 - Select the **scheduled time** in the cell to access the Medication Administration screen. See [Medication Administration](#) for additional information.
 - If the "View Only" EMAR is being used, the scheduled time may not be used to access the Medication Administration screen.

- **Administered Medications:**
 - **Detail View:** The administration status (Given/Started, Omitted, or Discontinued), the administration time in military format (HH:MM), and the initials of the user who administered the medication display in the administration date/time cell. The scheduled date/time associated will no longer display on the grid.
 - **Date View:** The administration status (Given/Started, Omitted, or Discontinued), the administration time in military format (HH:MM), and the initials of the user who administered the medication display in the corresponding date cell.
 - Select the **administration time** in a cell to display the Medication Administration screen in review mode for the selected administration. See [Medication Administration](#) for additional information. If the "View Only" EMAR is being used, the Reassessment, Amend, and Remove Entry options are disabled on the action bar.

- **Blood Glucose Level** (no insulin administered):
 - **Detail View:** The blood glucose level (BB=ZZZ), the documentation time in military format (HH:MM), and the initials of the user who documented the level display in the corresponding hour cell.
 - **Date View:** The blood glucose level (BB=ZZZ), the documentation time in military format (HH:MM), and the initials of the user who documented the level display in the corresponding date cell.
 - Select the **administration time** in a cell to display the Medication Administration screen in review mode for the selected documentation. See [Diabetic Record](#) for additional information.
 - If an administration is overdue or a reassessment is required for an administration, the cell containing those administration times will be color coded according to the Color Legend.

2.3 Order Detail

The focus of this section is accessing the Order Detail view from the MAR, but this option may also be accessed via Order Chronology, as noted in the [Order Chronology User Guide](#). This section contains the following topics:

[To Access Order Detail](#)

[To Access Medication Administration Details](#)

[Order Detail for Other Medication Types](#)

To access the Order Detail Screen

Go to **Patient Chart > MAR > Information Icon** (in the medication description box)

Medication Administration Record - Current Date and Time

MAR Display: Include Discontinued Medications Sort: Date Range: -

	07/06/2024 20:00	07/07/2024 08:00	07/07/2024 20:00	07/07/2024 23:00	07/08/2024 08:00	07/08/2024 20:00	07/08/2024 23:00	07/09/2024 08:00	07/09/2024 20:00	07/09/2024 23:00	07/10/2024 08:00
AMBIEN (ZOLPIDEM) Dose: 5 MG EVENING PO test				23:00			23:00			23:00	Given 08:08 TS
GABAPENTIN (NEURONTIN-GENERIC) Dose: 300 MG *QD PO	20:00		20:00			20:00			20:00		
COUMADIN 4MG TABLET MIMI Dose: 1 MG *QD PO	20:00		20:00			20:00			20:00		
GLUCOPHAGE 500MG TABLET - METFORMIN Dose: 500 MG DAILY PO		08:00			08:00			08:00			08:00
OXYMETAZOLONE NASAL SPRAY (AFRIN) Dose: 1 MCG QAM NASAL-INH		08:00			08:00			08:00			08:00

The Order Detail screen is displayed, as shown below.

Reassessment
 Amend
 Remove
 Print Label
 Drug Info
 Dose Info
 Results
 Review Hx
 Order Hx
 Redirect
 Dispense Notes

Order Detail

Order Information	Administrations
<p>AMBIEN (ZOLPIDEM) (Order # 1) Dose: 5 MG Administer Amount: 1.25 Tablet Route: ORAL Frequency: EVENING Times: <input type="text" value="2300"/> Duration: Priority: Routine First Dose Date/Time: Start Date/Time: 02/08/2024 10:59 Renew Date/Time: 02/13/2024 10:59 Indication: <input type="text"/> Instructions: <input type="text" value="test"/> Additional Information: <input type="text"/> Order Set/List/Protocol: Pending Verification: Ordered: 02/08/2024 10:59 DR ASHLEY DEVERY PHYS QA Entered: 02/08/2024 10:59 ALL Nursing Verified: 03/12/2024 10:46 ALL Pharmacy Verified:</p>	<p>07/10/2024 08:08 Given 5 MG ORAL (TSCHIRA) Med Verify=N</p>

Order Detail

The **Order Information** (left) side of the screen displays the following information, when available: medication name, dose (and units), administer amount (or "per dose"), route, frequency, times, duration (or max doses), priority, first dose date/time, start date/time, stop date/time, renew date/time, indication, instructions, additional information (patient's own meds, linked, alternating components, alternating IVs, etc.), order set/list/protocol info, pending information, ordered date and

time with provider name, entered date and time with user info, nursing verified date and time with user info, and pharmacy verified date and time with user info. A **Dispense Notes** button is available on the Order Detail screen. Select this button to view the dispense notes set up on the item.

For IV orders with 1 or 2 components, the **Dose** field populates with the dose ordered of the first component, and the value is not editable. The system checks the dose of the NDC scanned against the dose of the first component and displays a warning if the dose scanned does not match the ordered dose. NOTE: It is important to follow best practices and set up your facility's IVs with the dosing ingredient as the first component in order for this functionality to work.

For IV orders with 3 or more components, the **Dose/Unit** field is replaced with **Flowrate**, and the **Flowrate** auto-populates. A field displays below the **Flowrate**, labeled **Total Volume**. This field populates with the total volume calculated during order entry. Both of these fields are read-only (not editable). A dose check is not performed on orders with 3 or more components.

The **Administrations** (right) side of the screen displays the following information, when available: administration date/time, action (started, omitted, discontinued), dose/units, route, user initials/credentials, medication verification status (Y=armband and med barcode were scanned during administration, N=armband and/or med barcode were NOT scanned during administration), and reassessment icon (if performed). Amended or Removed administrations will display with a strike-through.

To access the Medication Administration Details Screen

Single-select the administration to enable options on the action bar (Reassessment, Amend, Remove, Drug Info, Dose Info, Results, Review Hx, Order Hx, or Redirect) or double-click the administration to display the Medication Administration Details screen in review mode. In review mode, the exact time a medication was amended may be viewed. This is for all order types including IV, Non-IV, Diabetic Record, and PCA.

←
🔄 Reassessment
📌 Detail
🔍 Results
✏️ Amend
🗑️ Remove Entry

Medication Administration

Given By: **TS** **04/24/2025 17:13** **Patient Armband Not Scanned** 🚫

Medication: **250 D5W-HOOD**

Action: Give Omit Discontinue

Administered Time: **04/24/2025 17:13**

Scheduled Time: ▾

Flow Rate: **50 ML/HR**

Total Volume: **250 ML**

Dose: ▾

Waste Amount: ▾ Verified:

Route: **IVPB**

Site: ▾

Instructions:

Comment:

Reason: ▾

Pain F/S:

Components:

Description	Dose
250 D5W-HOOD	250ML

Medication Administration in Review Mode

NOTE: When reviewing a stricken entry, the **Amend** and **Remove Entry** options will not display.

From the Medication Administration window, you can complete the following actions: Reassessment, View Details, Amend, Remove Entry, or View Results. **NOTE:** If the "View Only" EMAR is being utilized, the Reassessment, Amend, Remove Entry, and Print Label options are disabled on the action bar.

- **Reassessment:**

- Select **Reassessment**.
- Enter the **Date** and **Time** if different from the current date and time.
- In the **Reassessment** field, select an option from the drop-down box, or select **Other** to enter a free-text reassessment. (If **Other** is selected, enter the assessment. Select **OK** to save and exit or the **back arrow** to exit without saving.)
- Select **Update** to save and exit the Reassessment screen, or select the **back arrow** to exit without saving. The Medication Administration screen is displayed.

- Select the **back arrow** to return to the Order Detail screen. The Assessment Icon (📄) now displays on the administration line.
- To review, remove, or amend the assessment, select the **administration** from the Administrations, then **Reassessment**.
- Select **Remove Entry** to remove the entry, **Amend** followed by **Update** to modify the entry, or the **back arrow** to exit without saving.

Notifications can be set up to appear on the Tracking Board for Reassessment. Setup is required in **Tables > Control > Item Master > Item > Pharmacy Information > Use Medication Reassessment** and **Tables > Clinical > Route Table > Select Route > Edit > Timeframe for Medication Reassessment** ___minutes. See the [Table Maintenance Guide - Clinical](#) and [Table Maintenance Guide - Control](#) user guides for more details.

Reassessment

- **Amend:** Only the user who documented the administration may amend the administration.
 - Select **Amend**. The medication name and administration information display.
 - In the **Amend Reason** field, select an option from the drop-down box, or select **Other** to enter a free-text reason. (If **Other** is selected, enter the assessment. Select **OK** to save and exit or the **back arrow** to exit without saving.)
 - Select **Update** to access Medication Administration Maintenance where the administration may be modified, or select the **back arrow** to exit the Amend process.

Amend Medication Entry

- **Remove Entry:** Only the user who documented the administration may remove the administration.
 - Select **Remove** or **Remove Entry**. The medication name and administration information display.
 - In the **Amend Reason** field, select an option from the drop-down box, or select **Other** to enter a free-text reason. (If **Other** is selected, enter the assessment. Select **OK** to save and exit or the **back arrow** to exit without saving.)
 - Select **Update** to remove the entry or the **back arrow** to exit the Remove process.

NOTE: If Positive ID is being utilized, the user will be prompted with the Positive ID challenge questions when amending or removing entries.

NOTE: The grid will display an unaddressed scheduled date/time when newly created administration records are removed and not amended. Newly created administration records usually occur with an early first medication dose or an omitted last medication dose.

Amend Medication Entry

Medication Name: PHENERGAN 25MG ORAL TABLET

Administration Line: 02/27/2015 10:14 Given: (BENTLEY RN)

Amend Medication Reason: wrong patient

Remove Medication Entry

- **Print Label:** Select this option to print a pharmacy label.
- **Drug Info:** Select this option to view the Micromedex Drug Information.
 - **Drug Notes Radio Button:** Select this option to display the drug information sheet for the selected medication. **Print/Save** may be selected to print the Drug Information Sheet. If selected, the "Documents Given" section of Patient Educations Documents will be updated with this information.
 - **Package-Product Information Radio Button:** Select this option to view package-product information for the selected medication.
 - **UltiMedex/Company Information Radio Button:** Select this option to view UltiMedex/Company information for the selected medication.
 - **Ingredients Radio Button:** Select this option to view the ingredients of the selected medication.
 - **Class Information Radio Button:** Select this option to view class information for the selected medication.
 - **Patient Specific Dosing Radio Button:** Select this option to view patient specific dosing information for the selected medication.
 - **Back Arrow:** Select this option to exit Drug Information.

Medication: Lasix Tablet 20MG
NDC Number: 00039006710

● Drug Notes ● Package-Product Information ● UltiMedex/Company Information ● Ingredients ● Class Information ● Patient Specific Dosing

Drug Notes

Furosemide (By mouth)
Furosemide (fure-OH-se-mide)
Treats fluid retention and high blood pressure. This medicine is a diuretic (water pill).
Brand Name(s): Active-Medicated Specimen Collection Kit, Lasix
There may be other brand names for this medicine.
When This Medicine Should Not Be Used:
This medicine is not right for everyone. Do not use it if you had an allergic

Page: 1 / 2 Zoom: 156% PORTRAIT

Drug Information

- **Dose Info:** Select this option to view dosing information for the selected medication on the Micromedex website in a new browser tab. Close the tab to return to the MAR screen.

Micromedex® 2.0 MICROMEDEX GATEWAY

See entire document

Furosemide
DrugPoint® Summary
[View Detailed information in DRUGDEX ▶](#)

Dosing & Indications

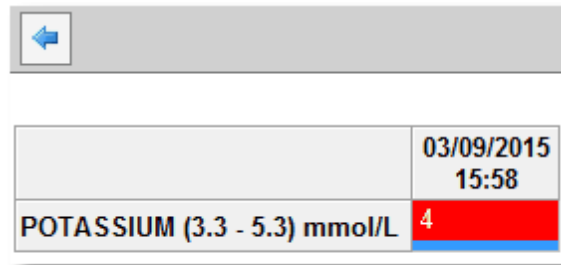
Adult Dosing
[View Detailed information in DRUGDEX ▶](#)

- Congestive heart failure - Edema: initial, 20 to 40 mg IV over 1 to 2 min; may repeat same dose 2 hours later or may be increased by 20 mg until desired response; this individually determined dose may be given once or twice daily ^[3]
- Congestive heart failure - Edema: initial, 20 to 40 mg IM; may repeat same dose 2 hours later or may be increased by 20 mg until desired response; this individually determined dose may be given once or twice daily ^[3]
- Congestive heart failure - Edema: initial, 20 to 80 mg ORALLY daily, may repeat in 6 to 8 hours; MAX 600 mg/day ORALLY ^[4]
- Congestive heart failure - Edema: titrate to maintenance, may increase by 20 to 40 mg ORALLY at 6 to 8 hours intervals after the previous dose; this individual dose may be given once or twice daily; MAX 600 mg/day ORALLY ^[4]
- Congestive heart failure - Edema: IV infusion, administer at a rate not greater than 4 mg/min ^[3]
- Edema: initial, 20 to 40 mg IV over 1 to 2 min; may repeat same dose 2 hours later or may be increased by 20 mg until desired response; this individually determined dose may be given once or twice daily ^[3]
- Edema: initial, 20 to 40 mg IM; may repeat same dose 2 hours later or may be increased by 20 mg until desired response; this individually determined dose may be given once or twice daily ^[3]
- Edema: initial, 20 to 80 mg ORALLY daily, may repeat in 6 to 8 hours; MAX 600 mg/day ORALLY ^[4]
- Edema: titrate to maintenance, may increase by 20 to 40 mg ORALLY at 6 to 8 hours intervals after the previous dose; this individual dose may be given once or twice daily; MAX 600 mg/day ORALLY ^[4]
- Edema: IV infusion, administer at a rate not greater than 4 mg/min ^[3]
- Edema - Renal failure: initial, 20 to 40 mg IV over 1 to 2 min; may repeat same dose 2 hours later or may be increased by 20 mg until desired response; this individually determined dose may be given once or twice daily ^[3]
- Edema - Renal failure: initial, 20 to 40 mg IM; may repeat same dose 2 hours later or may be increased by 20 mg until desired response; this individually determined dose may be given once or twice daily ^[3]

Dose Information

- **Results:** Up to two lab orders may be associated with a medication via **Item Master Pharmacy Information Page 2**. If the orders have been resulted on the patient, they may be viewed via this option. Select **Results** then the **back arrow** to return to Order Detail.

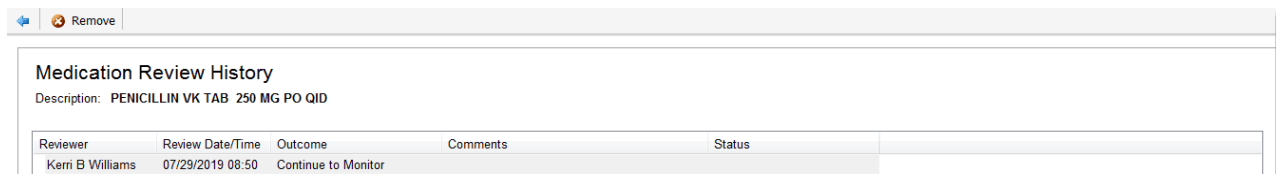
NOTE: Labs resulted in the clinic and labs ordered from Hospital Orders on the clinic visit may be available.



	03/09/2015 15:58
POTASSIUM (3.3 - 5.3) mmol/L	4

Results

- **Review Hx:** Displays the history of medication reviews. Medication review history includes Description, Reviewer, Review Date/Time, Outcome, Comments, and Status. This pulls from the Antimicrobial Review application. **Remove** allows for the **Outcome** to be removed.



Reviewer	Review Date/Time	Outcome	Comments	Status
Kerri B Williams	07/29/2019 08:50	Continue to Monitor		

Medication Review History

- **Acetaminophen Admins:** Select this option from the action bar to display the Acetaminophen Administrations screen. This option is only available for acetaminophen orders. The following information displays:
 - Each acetaminophen administration displays including the date and time of the administration, the initials of the user who documented the administration, the medication description for the administration, and the dose administered for the administration.
 - 24 hour maximum dose: This field displays the max dose allowed as determined by the Pharmacy Control Information table.
 - 24 hour total: This field displays the total dose of acetaminophen administered to the patient via all acetaminophen orders for the past 24 hours based on the Administered Time of the currently selected administration.
 - Select the **back arrow** to return to Order Detail.

Acetaminophen Administrations					
Date	Time	Initials	Medication Description	Acetaminophen Dose	
03/22/2015	23:50	SEB	ACETAMINOPHEN (TYLENOL) 325MG	325	
03/23/2015	04:00	SEB	ACETAMINOPHEN (TYLENOL) 325MG	325	
03/23/2015	08:17	SEB	ACETAMINOPHEN (TYLENOL) 325MG	325	
03/23/2015	08:45	SEB	ACETAMINOPHEN 500 MG TAB: after colon te	500	

24 hour maximum dose: 2000 24 hour total: 1475

Acetaminophen Administrations

- **Order Hx:** Displays a history of the order. This is to track/monitor any changes made to a medication order. In addition, the original order history can be tracked back to order origin.

Original Order					
Pharmacy Order History					
Medication: AMBIEN (ZOLPIDEM) (Order # 1)					
Date/Time	Description	Original Value	New Value	Employee	
02/08/2024 11:00:04	New Verbal Order			Ashley Devery QA	
03/12/2024 10:46:62	POC Verified Date/Time/Init		03/12/2024 10:46 ALL	Ashley Devery QA	

Order History

- **Original Order:** Select this button to display **Order Detail - Original Order** info via **Order Information**.

[Redirect](#)

Order Detail - Original Order

Order Information	Clinical Monitoring
AMBIEN (ZOLPIDEM) Dose/Units: 5 MG Administer Amount: 1.25 Tablet Route: PO Frequency: EVENING Times: <input type="text" value="2300"/> Duration: Priority: Routine First Dose Date/Time: Start Date/Time: 02/08/2024 10:59 Stop Date/Time: 02/13/2024 10:59 Indication: <input type="text"/> Instructions: <input type="text" value="test"/> Additional Information: <input type="text"/> Order Set/List/Protocol: Ordered: 02/08/2024 10:59 DR ASHLEY DEVERY PHYS QA Entered: 02/08/2024 10:59 ALL	ALLERGIES AMBIEN (ZOLPIDEM) : 5MG TAB UD: MILK MD Ordered PSD CHECK Error

Signed: Verbat: 003866 DR ASHLEY DEVERY PHYS QA Signature pending. Readback successfully.
Cosigned: Cosignature not required.

Original Order

- **Redirect:** Select this option to redirect a verbal, phone, or protocol order to a different provider's E-Sign queue.
- **Dose Calculator:** Select this option to review the Dose Calculator screen. This option is only available if the Dose Calculator was used when the order was entered and is view only.

The screenshot displays the 'Dose Calculator' interface. At the top, there are navigation buttons: a back arrow, 'Update', 'Clear', and 'Dose Information'. The main content area is titled 'Dose Calculator' and contains the following fields:

- Medication Name: **ACETAMINOPHEN ELIXIR (TYLENOL):160MG/5ML**
- Dose:
- Frequency:
- Concentration: **160MG/5ML**
- Rounding Option:

Below the input fields, there are two sections:

CALCULATION

- Administer Dose: **77 MG**
- Override Administer Dose:
- Administer Amount: **2 ML Elixir**

FORMULAS

$$\text{Administered Dose (MG)} = \text{Dose (mg/kg/DOSE)} \times \text{Weight (kg)}$$

$$\text{Administered Amount (ML)} = \frac{\text{Dose (mg/kg/DOSE)} \times \text{Weight (kg)}}{\text{Concentration (mg/ml)}}$$

Dose Calculator screen

Order Detail Screen for Other Medication Types

Some medications require additional fields. See these topics for those specific scenarios.

- [Order Detail - IV Infusion](#)
- [Order Detail - PCA Infusion](#)
- [Order Detail - Diabetic Record](#)

Order Detail - IV Infusion

This section will discuss the display options that may be selected and actions that may be performed for IV infusion orders in Order Detail.

[Reassessment](#)
[Amend](#)
[Remove](#)
[Pause Infusion](#)
[Complete Infusion](#)
[Titrate](#)
[Titrate Protocol](#)
[Print Label](#)
[Drug Info](#)
[Dose Info](#)
[Results](#)
[Review Hx](#)
[Order Hx](#)
[Redirect](#)
[Dispense Notes](#)

Order Detail

Order Information	Components																																
ROCEPHIN IV 2000MG/70ML NS (Order # 2) Flowrate: 140ML/HR Route: IV PIGGY Frequency: Q24H Times: Hours Between Doses: 24 Duration: Priority: Routine First Dose Date/Time: 05/30/2023 14:23 Start Date/Time: 05/30/2023 14:23 Renew Date/Time: 06/03/2023 14:23 Indication: Instructions: ROCEPHIN 2GM/70ML NSFLUSH PER PROTOCOL Additional Information: Order Set/List/Protocol: Pending Verification: Ordered: 05/30/2023 14:23 MALONE NICHOLAS R Entered: 05/30/2023 14:23 SHB Nursing Verified: 05/30/2023 14:24 MMM Pharmacy Verified:	<table border="1"> <thead> <tr> <th>Description</th> <th>Dose</th> </tr> </thead> <tbody> <tr> <td>ROCEPHIN (CEFTRIAXONE) IV : 1GM</td> <td>2 GM</td> </tr> <tr> <td>SODIUM CHLORIDE 0.9% 100ML VIAL</td> <td>20 ML</td> </tr> <tr> <td>SODIUM CHLORIDE 0.9% : 50ML</td> <td>50 ML</td> </tr> </tbody> </table> Total Volume: 80 ML <table border="1"> <thead> <tr> <th colspan="6">Administrations</th> </tr> </thead> <tbody> <tr> <td>10/16/2023</td> <td>15:49</td> <td>Started</td> <td>Left Hand (JLT, RN)</td> <td>Med Verify=N</td> <td></td> </tr> <tr> <td>05/30/2023</td> <td>14:24</td> <td>Started</td> <td>Connect exist. site (MLM RN)</td> <td>Med Verify=N</td> <td></td> </tr> <tr> <td>05/30/2023</td> <td>14:24</td> <td>INFUSION PAUSED</td> <td>(MLM RN)</td> <td></td> <td></td> </tr> </tbody> </table>	Description	Dose	ROCEPHIN (CEFTRIAXONE) IV : 1GM	2 GM	SODIUM CHLORIDE 0.9% 100ML VIAL	20 ML	SODIUM CHLORIDE 0.9% : 50ML	50 ML	Administrations						10/16/2023	15:49	Started	Left Hand (JLT, RN)	Med Verify=N		05/30/2023	14:24	Started	Connect exist. site (MLM RN)	Med Verify=N		05/30/2023	14:24	INFUSION PAUSED	(MLM RN)		
Description	Dose																																
ROCEPHIN (CEFTRIAXONE) IV : 1GM	2 GM																																
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05/30/2023	14:24	Started	Connect exist. site (MLM RN)	Med Verify=N																													
05/30/2023	14:24	INFUSION PAUSED	(MLM RN)																														

IV Order Detail

The **Order Information** (left) side of the screen displays the following information, when available: medication name, flowrate, route, frequency, times, duration (or max doses), priority, first dose date/time, start date/time, stop date/time, renew date/time, indication, instructions, additional information (patient's own meds, linked, alternating components, alternating IVs, etc.), order set/list/protocol info, pending information, ordered date, time, and provider name, entered date, time, and user info, nursing verified date, time, and user info, pharmacy verified date, time, and user info.

For IV orders with 1 or 2 components, the **Dose** field populates with the dose ordered of the first component, and the value is not editable. The system checks the dose of the NDC scanned against the dose of the first component and displays a warning if the dose scanned does not match the ordered dose. NOTE: It is important to follow best practices and set up your facility's IVs with the dosing ingredient as the first component in order for this functionality to work.

For IV orders with 3 or more components, the **Dose/Unit** field is replaced with **Flowrate**, and the **Flowrate** auto-populates. A field displays below the **Flowrate**, labeled **Total Volume**. This field populates with the total volume calculated during order entry. Both of these fields are read-only (not editable). A dose check is not performed on orders with 3 or more components.

The **Administrations** (right) side of the screen displays the following information, when available: Components, Total Volume, and Administrations, which include administration date/time, action (started, omitted, discontinued, infusion complete, infusion stopped, infusion started, infusion paused, and titration), dose/units, route, user initials/credentials, medication verification status (Y=armband and med barcode were scanned during administration, N=armband and/or med barcode were NOT scanned during administration), and assessment icon (if performed), as well as the items described below. Amended or Removed administrations will display with a strike-through.

- **Pause Infusion** or **Start Infusion**: Select **Pause Infusion** to document a stop time for an IV fluid. If a stop time is documented, the **Start Infusion** option is displayed. Select **Start Infusion** to document a start time for an IV fluid.

1. Select an item from Administrations, then select **Pause Infusion** or **Start Infusion**. The medication name is displayed. Select the appropriate item in the **Administration Line** field. If there is only one administration for the medication that does not already have a "Complete" associated, the field will populate automatically once the IV is completed in the MAR. If there is more than one administration without a "Complete" associated, the user will need to select an administration from the drop-down. Each administration of an IV can be completed only once.
2. Enter the **Date** and **Time** if different from the current date and time.
3. Enter a comment if applicable.
4. Select **Update** to save and exit the Pause/Start Infusion screen, or select the **back arrow** to exit without saving.
5. To remove or amend the Pause/Start time entry, select the appropriate entry from the Administrations list, then select **Remove Entry** to remove the entry, **Amend** followed by **Update** to modify the entry, or the **back arrow** to exit without saving.

Start Infusion

- **Complete Infusion:** Select this option to document that an IV infusion has been completed.
 - Select the appropriate entry from Administrations list, then select **Complete Infusion**. The medication name is displayed. Select the appropriate item in the **Administration Line** field. If there is only one administration for the medication that does not already have a "Complete" associated, the field will populate automatically once the IV is completed in the MAR. If there is more than one administration without a "Complete" associated, the user will need to select an administration from the drop-down. Each administration of an IV can be completed only once.
 - Enter the **Date** and **Time** if different from the current date and time.
 - Enter a comment if applicable.
 - The **Volume** automatically displays in the **Intake** section. Review and edit the **Volume**, **Left to Count**, and **Rate per Hour** values as needed. The value in the **Volume** field will update the patient's intake/output amounts.
 - Select **Update** to save and exit the Complete Infusion screen, or select the **back arrow** to exit without saving.
 - To remove or amend the complete time, select the appropriate entry from the Administrations list, then select **Remove Entry** to remove the entry, **Amend** followed by **Update** to modify the entry, or the **back arrow** to exit without saving.

←
📄 Update

Complete Infusion

Medication Name: **CeFAZolin(ANCEF)IVPB-1GM/D5W 50ML PREMIX**

Administration Line: 06/12/2024 15:34 Connect exist. site (MLM RN) ▼

Complete Infusion:

Comment:

Intake

Volume: ml None

Left to Count:

Rate Per Hour:

Complete Infusion

- **Titrate:**

- Select an entry from Administrations list, then select **Titrate**.
- Enter the flow rate value and units.
- Enter the **Date** and **Time** if different from the current date and time.
- Enter a comment if applicable.
- Select **Update** to save and exit the Titrate screen, or select the **back arrow** to exit without saving.
- To remove or amend the flow rate, select the administration from the Administrations; then select **Remove Entry** to remove the entry, **Amend** followed by **Update** to modify the entry, or the **back arrow** to exit without saving.

← Update

Titration

Titrate:

Date: × Time:

Comment:

Administrations					
07/31/2024	08:03	INFUSION PAUSED	(JLT, RN)	Med Verify=N	
07/31/2024	08:02	INFUSION PAUSED	(JLT, RN)	Med Verify=N	
07/31/2024	08:02	INFUSION START	(JLT, RN)	Med Verify=N	
07/31/2024	07:48	INFUSION START	(JLT, RN)	Med Verify=N	
07/31/2024	07:35	INFUSION PAUSED	(JLT, RN)	Med Verify=N	
10/16/2023	15:49	Started	Left Hand (JLT, RN)	Med Verify=N	
05/30/2023	14:24	Started	Connect exist. site (MLM RN)	Med Verify=N	
05/30/2023	14:24	INFUSION PAUSED	(MLM RN)	Med Verify=N	

Titration

The titration units selected will display in Order Detail and also on the Medication Report. Titration is an option for Diabetic Record items as well. Options for Diabetic Record include units/hr, units/min, unit/kg/min, and units/kg/hr.

- **Alternating IV:** Select this option to display the Alternating IV Medication List. Select the **back arrow** to return to Order Detail.
- **Alternating Components:** Select this option to display the Alternating Components List. Select the **back arrow** to return to Order Detail.

Order Detail - PCA Infusion

This section discusses the display options that may be selected and actions that may be performed for PCA Infusion orders in Order Detail.

Order Detail																						
<p>Order Information</p> <p>MORPHINE PCA (1MG/ML) 30ML (Order # 10)</p> <p>Route: PCA</p> <p>Units: Per Protocol</p> <p>Bolus/Loading Dose: 0 MG</p> <p>Patient Administered Dose: 2 MG</p> <p>Continuous Infusion Rate: 0 MG/HR</p> <p>Lockout Interval: 10 MINUTES</p> <p>4 Hour Limit: 20 MG</p> <p>Amount Purged In Tubing: 0 MG</p> <p>Initial Syringe Amount: 30 MG</p> <p>Instructions: <input type="text"/></p> <p>Additional Information: <input type="text"/></p> <p>Order Set/List/Protocol:</p> <p>Ordered: 06/26/2024 16:06 MAJURE MARGIE TEST</p> <p>Entered: 06/26/2024 16:06 MMM</p> <p>Nursing Verified: 06/26/2024 16:07 MMM</p> <p>Pharmacy Verified:</p>	<p>Administrations</p> <table border="1"> <tbody> <tr> <td>06/26/24</td> <td>16:09</td> <td>Effective</td> <td>Used: 1</td> <td>Left: 29</td> <td>Wasted: 0</td> <td>(MLM RN)</td> </tr> <tr> <td>06/26/24</td> <td>16:09</td> <td>Assessment</td> <td colspan="4">(MLM RN)</td> </tr> <tr> <td>06/26/24</td> <td>16:09</td> <td>Start PCA</td> <td>Bolus: 0</td> <td>Left: 30</td> <td>(MLM RN)</td> <td>Med Verify=N</td> </tr> </tbody> </table>	06/26/24	16:09	Effective	Used: 1	Left: 29	Wasted: 0	(MLM RN)	06/26/24	16:09	Assessment	(MLM RN)				06/26/24	16:09	Start PCA	Bolus: 0	Left: 30	(MLM RN)	Med Verify=N
06/26/24	16:09	Effective	Used: 1	Left: 29	Wasted: 0	(MLM RN)																
06/26/24	16:09	Assessment	(MLM RN)																			
06/26/24	16:09	Start PCA	Bolus: 0	Left: 30	(MLM RN)	Med Verify=N																

PCA Order Detail

The **Order Information** (left) side of the screen displays the following information, when available: medication name, route, units, bolus/loading dose, patient administered dose, continuous infusion rate, lockout interval, 4 hour limit, amount purged in tubing, initial syringe amount, instructions, additional information (patient's own meds, linked, alternating components, alternating IVs, etc.), order set/list/protocol info, ordered date, time, and provider name, entered date, time, and user info, nursing verified date, time, and user info, and pharmacy verified date, time, and user info. (The most recent protocol entered displays. Previous protocols associated with the order may be viewed by selecting an administration, then selecting **Protocol**.)

The **Administrations** (right) side of the screen displays the following information, when available: assessment, bolus, discontinue, effective, ineffective, new syringe, protocol change, start PCA, and administration date/time, action (start PCS, etc.), user initials/credentials, medication verification status (Y=armband and med barcode were scanned during administration, N=armband and/or med barcode were NOT scanned during administration), and assessment icon (if performed). Amended or Removed administrations will display with a strike-through.

Administrations:

- The data that displays for each entry in this section is determined by the action taken:
 - **Assessment:** Assessment entries display the date and time the data was documented, the action taken, and the initials of the documenting employee.
 - **Bolus:** Bolus entries display the date and time the data was documented, the action taken, the amount used, the amount left, the amount wasted, and the initials of the documenting employee.
 - **Discontinue:** Discontinue entries display the date and time the data was documented, the action taken, the amount used, the amount left, the amount wasted, and the initials of the documenting employee.

- **Effective:** Effective entries display the date and time the data was documented, the action taken, the amount used, the amount left, the amount wasted, and the initials of the documenting employee.
- **Ineffective:** Ineffective entries display the date and time the data was documented, the action taken, the amount used, the amount left, the amount wasted, and the initials of the documenting employee.
- **New Syringe:** New Syringe entries display the date and time the data was documented, the action taken, and the initials of the documenting employee.
- **Protocol Change:** Protocol Change entries display the date and time the data was documented, the action taken, and the initials of the documenting employee.
- **Start PCA:** Start PCA entries display the date and time the data was documented, the action taken, the bolus amount, the amount left, and the initials of the documenting employee.
- **Med Verify:** The Medication Verification Status. **Med Verify=Y** means the patient armband and the medication barcode were scanned. **Med Verify=N** means the patient armband and/or the medication barcode were not scanned. These will display for both **New Syringe** and **Start PCA**.

NOTE: Amended or Removed administrations will display with a strike-through.

- Double-click an entry to review the Medication Administration screen or the PCA Assessment screen.

Action Bar:

- **Protocol:** Select an administration from Administrations; then select **Protocol**. The protocol in use when the administration was documented will display. Select **Change** to modify or **Clear** to remove the protocol. Select **Save** to save and exit. Units, Patient Administered Dose, Lockout Interval, and Initial Syringe Amount must be documented to enable the **Save** option. Select the **back arrow** to exit without saving. Only the most recent protocol may be modified. The **Protocol** option is disabled if an assessment entry is selected from the Administrations section.

←
Save
Change
Clear

PCA Protocol

Medication Name: **MORPHINE PCA (1MG/ML) 30ML** ⓘ

Route:

Units:

Bolus(Loading Dose): **MG**

Patient Administered Dose: **MG**

Continuous Infusion Rate: **MG/HR**

Lockout Interval: **MINUTES**

4-Hour Limit: **MG**

Amount Purged in Tubing: **MG**

Initial Syringe Amount: **MG**

Instructions:

Second Witness: *

Password: ⓘ

PCA Protocol

- **Assessment:** See [PCA Infusion](#) for information on documenting a PCA assessment.
- **Amend:** Only the most recently documented administration may be amended.
- **Remove Entry:** Only the most recently documented administration may be removed.

See [Order Detail](#) for a full description of the remaining Action Bar options.

Order Detail - Diabetic Record

This section will discuss the display options that may be selected and actions that may be performed for Diabetic Record orders in Order Detail.

Order Detail

The **Order Information** (left) side of the screen displays the following information, when available: medication name, dose, administer amount, route, frequency, times, duration (or max doses), priority, first dose date/time, start date/time, stop date/time, indication, instructions, additional information (patient's own meds, linked, etc.), order set/list/protocol info, pending information, ordered date, time, and provider name, entered date, time, and user info, nursing verified date, time, and user info, pharmacy verified date, time, and user info.

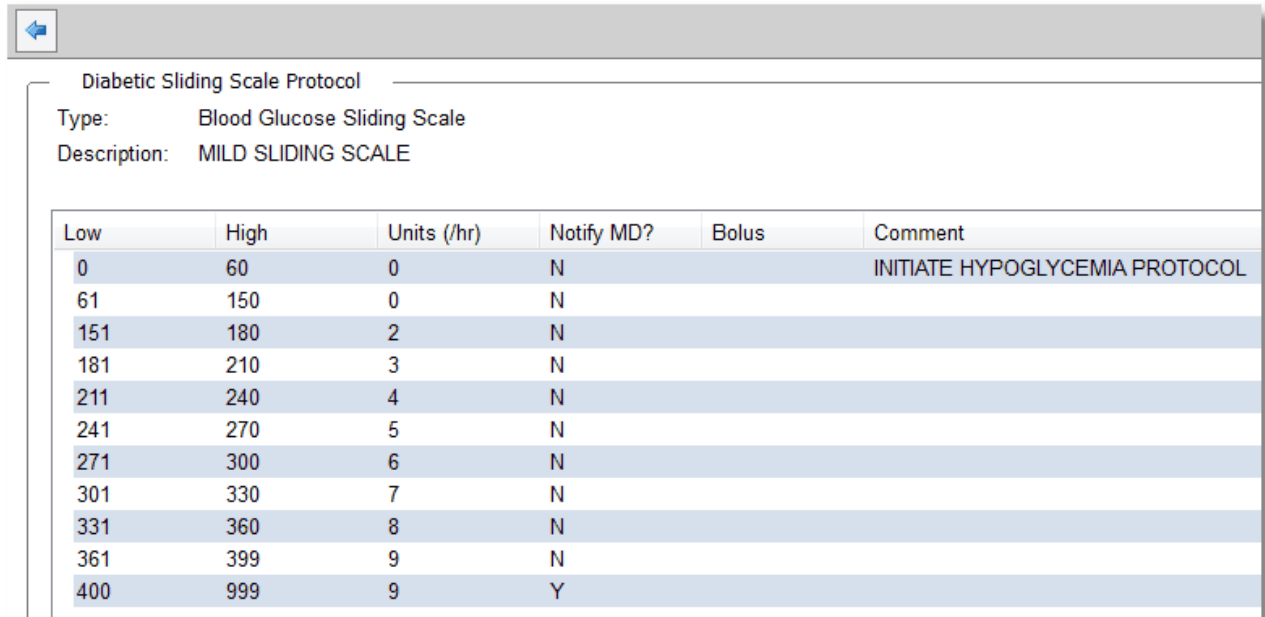
The **Administrations** (right) side of the screen displays the following information, when available: administration date/time, action taken (started, omitted, discontinued, infusion complete, infusion stopped, infusion started, infusion paused, and titration), level (blood glucose mg/dl), dose/units, bolus, route, user initials/credentials, medication verification status (Y=armband and med barcode were scanned during administration, N=armband and/or med barcode were NOT scanned during administration), and assessment icon (if performed), as well as the items described below. Amended or Removed administrations will display with a strike-through.

Administrations:

- The following information displays for Blood Glucose Level and Carbohydrate Count orders:
 - Date and Time
 - Item Description
 - Level
 - Intervention
 - Comment
 - Employee

Action Bar:

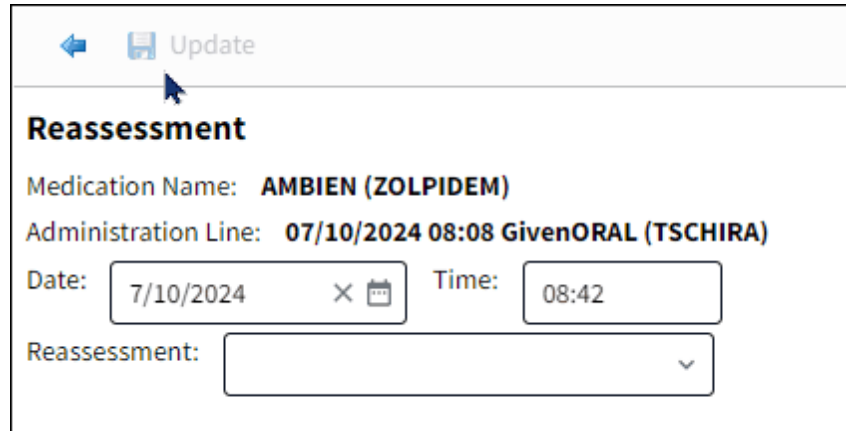
- **Back Arrow:** Select this option to exit Order Detail.
- **Protocol:** Select this option to display the Diabetic Sliding Scale List. Select the **sliding scale**; then select **Review**. Select the **back arrows** to return to Order Detail.



Low	High	Units (/hr)	Notify MD?	Bolus	Comment
0	60	0	N		INITIATE HYPOGLYCEMIA PROTOCOL
61	150	0	N		
151	180	2	N		
181	210	3	N		
211	240	4	N		
241	270	5	N		
271	300	6	N		
301	330	7	N		
331	360	8	N		
361	399	9	N		
400	999	9	Y		

Diabetic Sliding Scale Protocol

- **Reassessment:**
 - Select an administration from the Administrations; then select **Reassessment**. The medication name and administration information display.
 - Enter the **Date** and **Time** if different from the current date and time.
 - Select a **Reassessment** from the drop-down box, or select **Other** to key an assessment. If **Other** is selected, enter the assessment.
 - Select **OK** to save and exit or the **back arrow** to exit without saving.
 - Select **Update** to save and exit the Assessment screen, or select the **back arrow** to exit without saving. The Assessment icon now displays on the administration line.
 - To review, remove, or amend the assessment, select the **administration** from the Administrations; then select **Assessment**.
 - Select **Remove Entry** to remove the entry, **Amend** followed by **Update** to modify the entry, or the **back arrow** to exit without saving.



← Update

Reassessment

Medication Name: **AMBIEN (ZOLPIDEM)**

Administration Line: **07/10/2024 08:08 GivenORAL (TSCHIRA)**

Date: 7/10/2024 × Time: 08:42

Reassessment:

Assessment

For an IV, the **Start Infusion/Pause Infusion**, **Complete Infusion**, and **Titrate** options will display on the Action Bar. See [Order Detail - IV Infusion](#).

Super Amend Behavior Control

In Identity Management, there is a behavior control that allows EMAR documentation to be amended by another user (Super Amend). The behavior control is called **Amend MAR Documentation for Any Login**. This behavior control will not default to any role.

Setting the **Amend MAR Documentation for Any Login** behavior control to **Allow** provides users the following access:

- Allows users to remove or amend medication administration documentation for any login.
- Allows users to amend PCA administration documentation for any login.
- Allows users to remove or amend Blood Glucose/Carb Count/Intervention documentation for any login.
- Allows users to amend medication administration assessment documentation for any login.
- Allows users to amend PCA assessment documentation for any login.
- Allows users to amend titration documentation for any login.
- Allows users to amend IV infusion documentation for any login.

The super amending user will display on the **Medication Report** and on the **Patient Progress Notes** with the amended entry. In addition, the date/time and the amended reason will display.

Chapter 3 Medication Administration Using MedVerify

3.1 Overview

This section provides information on administering medications using the MAR and Medication Verification. The focus of this section will be administration via the MAR using Medication Verification. Medication Verification requires that the **patient's wristband barcode** and the **medication barcode** be scanned. When possible, Medication Verification should be used to give, omit, and discontinue medications. Differences in administration via the MAR versus Medication Verification will be noted when applicable.

3.2 Initiating Medication Verification

The medication verification administration process begins by accessing the Medication Verification screen and scanning the patient's wristband and medication label.

NOTE: *In the Point of Care Control Table on Page 6, there is an option for Pharmacy Timeout. If a number is added to this field, Medication Verification will timeout if left idle during the process. In other words, the green check will disappear from the EMAR related to the time frame that is added in this box. See the [Table Maintenance Clinical User Guide](#) for more information.*

Medication Verification

The Patient Medication List (Medication Verification) is specifically designed for medication administration. The Medication Verification screen defaults to the **My Patients** filter selected. However, there are many options to [filter](#) and customize the the list, and users are not required to access a specific patient's account to begin the process of administering medications.

Select **Charts (not patient-specific) > Medication Verification**.

Nurse Filters
 Department Filters
 Pharmacy Order Filters
 Frequency Filters
 Scheduled Filters
 PDF
 Single Patient Med List

Patient Medication List

My Patients
 Configure Department Filters

Non IV
 IV
 Controlled Substances
 Diabetic Record
 Treatment
 Linked

X1
 Stat

Due
 Scheduled
 PRN

Date Range: -

Due	Patient Name	Account Number	Room	Medication Name	Dose	Route
PRN	MULDER FOX	20001623		MORPHINE PCA 30MG/D5W 30ML	1 EA	INTRAVENOUS
07/31/2024 09:00	MULDER FOX	20001623		RYAN WASTE ABILIFY ORAL TABLET 10MG	10 MG = 1 Tablet	ORALLY
07/31/2024 21:00	MULDER FOX	20001623		RYAN WASTE ABILIFY ORAL TABLET 10MG	10 MG = 1 Tablet	ORALLY
07/31/2024 08:00	MULDER FOX	20001623		CALCIUM GLUCONATE 10% INJ 10ML	10 ML	IV
07/31/2024 14:00	MULDER FOX	20001623		CALCIUM GLUCONATE 10% INJ 10ML	10 ML	IV
07/31/2024 21:00	MULDER FOX	20001623		CALCIUM GLUCONATE 10% INJ 10ML	10 ML	IV
EVERY DAY	DOHICKEY DOUGLAS	EWSTST01		ENALAPRIL(VASOTEC)TAB: 5MG	5 MG = 1 Tablet	INHALED
EVERY DAY	DOHICKEY DOUGLAS	EWSTST01		SERTRALINE(ZOLOFT) TAB: 50 MG	50 MG = 1 Tablet	INHALED
07/31/2024 02:56	WILSON RITA	20001963		CeFAZolin(ANCEF)IVPB-1GM/D5W 50ML PREMIX		IVPB
07/31/2024 10:56	WILSON RITA	20001963		CeFAZolin(ANCEF)IVPB-1GM/D5W 50ML PREMIX		IVPB
07/31/2024 18:56	WILSON RITA	20001963		CeFAZolin(ANCEF)IVPB-1GM/D5W 50ML PREMIX		IVPB
PRN Q4H	CPSI CPSI	EXPECT		*ACETAMINOPHEN SUPP (TYLENOL) : 650 MG	650 MG = 130 Tabl...	CHEW
PRNQ5MIN FOR CP	CPSI CPSI	EXPECT		HYDROMORPHONE(DILAUDID)INJ: 1MG/ML	1 MG = 1 ML Solution	INTRAMUSCULAR
07/31/2024 06:00	LAWRENCE SHERRY	H01009		AMOXICILLIN CAP 500MG	500 MG = 1 Capsule	ORALLY
07/31/2024 14:00	LAWRENCE SHERRY	H01009		AMOXICILLIN CAP 500MG	500 MG = 1 Capsule	ORALLY

Patient Medication List

Use the check boxes to include/exclude certain parameters from the list (e.g., only Stat orders, only IV orders). The **Date Range** fields limit the list to medications that are due during your shift. Modify the date and time fields to create a custom time frame.

The default for the Patient Medication List display is scheduled medication administrations for the patients that have been added to the user's **My Patients** list via Point of Care. If an administration has been addressed (given/started, omitted, discontinued, and/or assessed if required), it will not display on this list.

The display list may be delimited by selecting/deselecting the applicable filter check boxes. Filter types are grouped together by row. The filter groups are hierarchical, meaning the data displayed by selecting a filter in one group will still be governed by the filters selected in a preceding group. Filters within a group are not hierarchical, meaning the data displayed by selecting a filter within a group does not govern what data is included/excluded for another filter selected within that same group.

The following filter groups and filters are available for selection:

- **Nurse Filters: My Patients** - When selected, this filter displays orders for patients that have been added to the user's **My Patient** list via Point of Care. If no patients have been added to the My Patient list and a department filter has not been selected, no orders will display. If this filter is deselected and no department filter is selected, orders for all patients will display. The default display for each patient is all unaddressed scheduled medication administrations, including medications that require an assessment that has not been addressed.

- **Department Filters: Department** - When selected, this filter displays orders for patients admitted to beds in the selected department(s). The facility nursing departments must be added for selection in this group. Setup is discussed below. If the My Patients filter has been selected (one level up in the hierarchy), it will only display the patients included in that filter that also meet the requirements of the department filters selected. To view all patient orders in a department(s), the **My Patient** filter will need to be deselected.

- **Pharmacy Order Filters:** The order types selected in this group will only display for the patients that meet the parameters set forth in the nurse filter and department filter groups and may be further delimited by filters selected in the frequency and scheduled filters groups. If no pharmacy order filters are selected, all pharmacy orders will display in accordance with the other group settings.
 - **Non-IV** - When selected, this filter displays non-IV medications.
 - **IV** - When selected, this filter displays IV medications including large volume IVs and IVPBs.
 - **Controlled Substances** - When selected, this filter displays medications flagged as controlled substances. (The DEA Class must be entered for the medication in Pharmacy Information.)
 - **Diabetic Record** - When selected, this filter displays medications flagged for use with Diabetic Record. (The medication must be designated for use with the Diabetic Record in Pharmacy Information.) For protocol orders, the item description displays as the medication name with a PRN frequency and "Evaluate Blood Glucose/Carb Count" displays separately as the medication name for the scheduled checks associated with the order.
 - **Treatments** - When selected, this filter displays medications flagged as treatments. (The medication must be designated as a "Service" in the Item Master or as a "Treatment" on the Pharmacy order.)
 - **Linked** - When selected, this filter displays linked medications.
 - **Antimicrobial** - Displays antimicrobial drugs.
 - **Stat** - Displays stat medications.
 - **X1** - Displays one-time medications.

- **Frequency Filters:** The order types selected in this group will only display for the patients that meet the parameters set forth in the nurse filter, department filter, and pharmacy order filter groups and may be further delimited by filters selected in the scheduled filters groups. If no frequency filters are selected, all frequency types will display in accordance with the other group settings.
 - **X1** - When selected, this filter displays medications with a X1 frequency.
 - **STAT** - When selected, this filter displays medications with a STAT frequency.
 - **Diabetic Record** - Displays diabetic record medications.

- **Scheduled Filters:** The order types selected in this group will only display for the patients that meet the parameters set forth in the nurse filter, department filter, pharmacy order filter, frequency filter, and scheduled filters groups. If no scheduled filters are selected, all scheduled types will display in accordance with the other group settings.
 - **Due** - When selected, this filter displays medications that are due or overdue or that require an assessment be documented. (The acceptable time before and after scheduled administration times to give medications is entered in the Point of Care Control Maintenance table. If the scheduled date/time of an unaddressed administration falls within this time-frame based on the current date/time, the administration is deemed due. If the scheduled date/time of an unaddressed administration falls before and outside this time-frame based on the current date/time, the administration is deemed overdue. The "Use Overdue Med Response" option

must be selected in Pharmacy Information for a medication administration to generate as requiring an assessment.)

- **Scheduled** - When selected, this filter displays all scheduled medications, overdue medications, and medications that require an assessment be documented. Future scheduled times will only appear on the My Patient Med List within 24 hours of the current time.
- **PRN** - When selected, this filter displays PRN medications that are active for the current day. PRN medications always display below medications that have a scheduled date/time.

- **PDF** will allow the Patient Medication List to be displayed and printed if desired.

Changes made to the filter check boxes only apply to the current session, but a facility default may be created to customize the filters that will be selected/deselected when the Patient Medication List is accessed. Modifying the display default will be discussed later in this section.

The following data displays in columns for each entry generated based on the filters selected, and the list may be sorted alphabetically by selecting a **column header**:

- **Due:** Displays the scheduled date and time or the PRN frequency.
- **Patient Name:** Displays the patient's name.
- **Account Number:** Displays the patient's account number for the current visit.
- **Room:** Displays the patient's room number.
- **Medication Name:** Displays the medication item description or "Evaluate Blood Glucose/Carb Count." (See the Diabetic Record Filter description above.)
- **Dose:** Displays the ordered dose/units and the calculated administer amount. If nothing can be calculated based on the dose, "Per Dose" will display. If multiple components are involved, the number of components will display. See the example below.

Due	Patient Name	Account Number	Room	Medication Name	Dose	Route
CONTINUOUS	WELSH ERIC	358517	014-2	MAGNESIUM SULFATE 50% IN 1000ML 0.9% NS	Multiple Components (2)	IVPB

Multiple Components

- **Route:** Displays the ordered route.

To access the patient's MAR without scanning, double-click an entry. To continue with initiating Medication Verification, see [Scanning the Patient's Wristband](#).

Medication Verification Setup

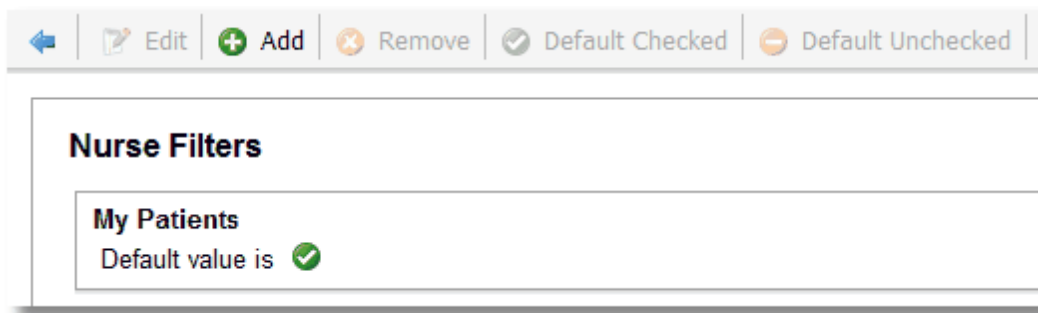
As noted in the previous section, the default for the Patient Medication List is scheduled medications for **My Patients**. To set up facility-defined defaults for each group of filters, access the Patient Medication List and select the filter group from the action bar.

Select **Charts > Medication Verification**.

Nurse Filters	Department Filters	Pharmacy Order Filters	Frequency Filters	Scheduled Filters
---------------	--------------------	------------------------	-------------------	-------------------

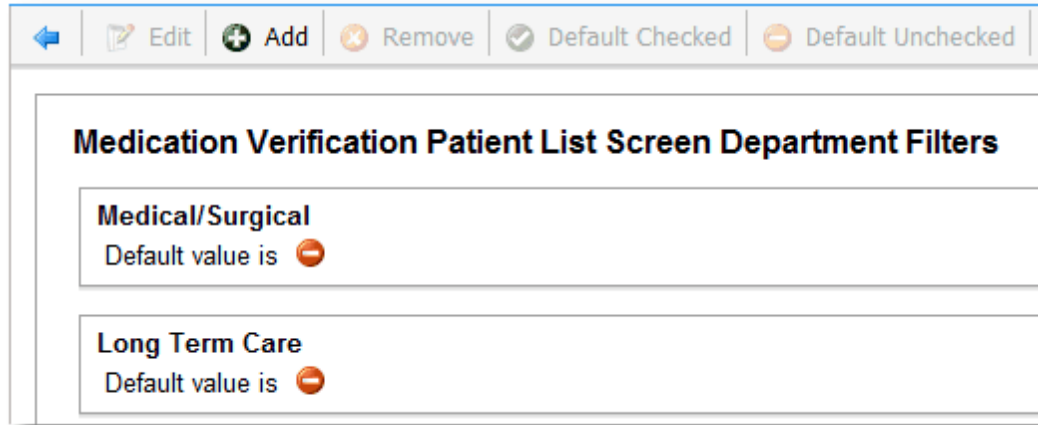
Patient Medication List

- **Nurse Filters:** The filter available for this group is hard-coded in the software and includes My Patients. The system default for the filter in this group is "Default Checked."
 - **Back Arrow:** Select this option to return to the Patient Medication List.
 - **Edit:** This option is not available for this group.
 - **Add:** If a hard-coded filter has been removed from this group, this option may be selected to add the filter back to the group. Select **Add**. Select the filter; then **Select**.
 - **Remove:** Select this option to remove a filter from this group. Select the filter; then select **Remove**. The filter check box will no longer display on the Patient Medication List.
 - **Default Checked:** Select the filter; then select **Default Checked**. The filter check box will be selected when the Patient Medication List is accessed.
 - **Default Unchecked:** Select the filter; then select **Default Unchecked**. The filter check box will be deselected when the Patient Medication List is accessed.



Nurse Filters

- **Department Filters:** There is no system default for this group.
 - **Back Arrow:** Select this option to return to the Patient Medication List.
 - **Edit:** This option is not available for this group.
 - **Add:** Select this option to add a filter to this group. Select **Add**. Select the department; then **Select**.
 - **Remove:** Select this option to remove a filter from this group. Select the filter; then select **Remove**. The filter check box will no longer display on the Patient Medication List.
 - **Default Checked:** Select the filter; then select **Default Checked**. The filter check box will be selected when the Patient Medication List is accessed.
 - **Default Unchecked:** Select the filter; then select **Default Unchecked**. The filter check box will be deselected when the Patient Medication List is accessed.



Medication Verification Patient List Screen Department Filters

- **Pharmacy Order Filters:** The filters available for this group are hard-coded in the software and include Non IV, IV, Controlled Substances, Diabetic Record, Treatment, and Linked. The system default for the filters in this group is "Default Unchecked."
 - **Back Arrow:** Select this option to return to the Patient Medication List.
 - **Edit:** This option is not available for this group.
 - **Add:** If a hard-coded filter has been removed from this group, this option may be selected to add the filter back to the group. Select **Add**. Select the filter; then **Select**.
 - **Remove:** Select this option to remove a filter from this group. Select the filter; then select **Remove**. The filter check box will no longer display on the Patient Medication List.
 - **Default Checked:** Select the filter; then select **Default Checked**. The filter check box will be selected when the Patient Medication List is accessed.
 - **Default Unchecked:** Select the filter; then select **Default Unchecked**. The filter check box will be deselected when the Patient Medication List is accessed.

Medication Verification Patient List Screen Pharmacy Order Filters

Non IV
Default value is

IV
Default value is

Controlled Substances
Default value is

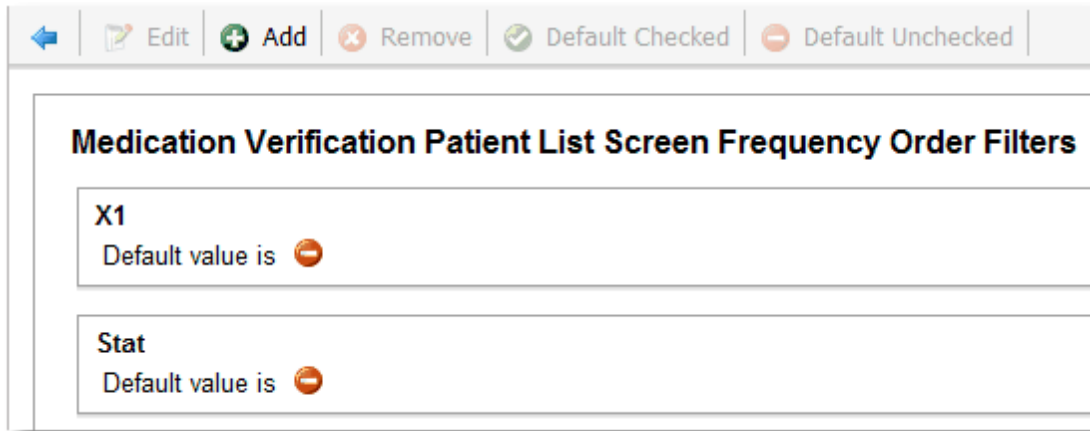
Diabetic Record
Default value is

Treatment
Default value is


Linked
Default value is


Medication Verification Patient List Screen Pharmacy Order Filters

- **Frequency Filters:** The filters available for this group are hard-coded in the software and include X1 and STAT. The system default for the filters in this group is "Default Unchecked."
 - **Back Arrow:** Select this option to return to the Patient Medication List.
 - **Edit:** This option is not available for this group.
 - **Add:** If a hard-coded filter has been removed from this group, this option may be selected to add the filter back to the group. Select **Add**. Select the filter; then **Select**.
 - **Remove:** Select this option to remove a filter from this group. Select the filter; then select **Remove**. The filter check box will no longer display on the Patient Medication List.
 - **Default Checked:** Select the filter; then select **Default Checked**. The filter check box will be selected when the Patient Medication List is accessed.
 - **Default Unchecked:** Select the filter; then select **Default Unchecked**. The filter check box will be deselected when the Patient Medication List is accessed.



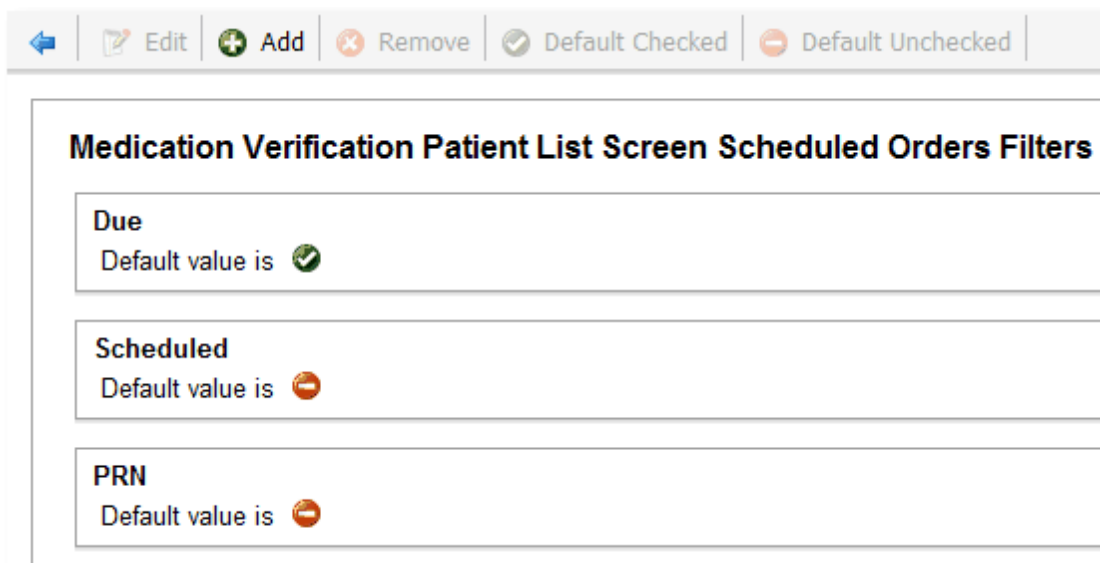
Medication Verification Patient List Screen Frequency Order Filters

X1
Default value is 


Stat
Default value is 


Medication Verification Patient List Screen Frequency Order Filters


- **Scheduled Filters:** The filters available for this group are hard-coded and include Due, Scheduled, and PRN. The system default for the filters in this group is "Default Unchecked."
 - **Back Arrow:** Select this option to return to the Patient Medication List.
 - **Edit:** This option is not available for this group.
 - **Add:** If a hard-coded filter has been removed from this group, this option may be selected to add the filter back to the group. Select **Add**. Select the filter; then **Select**.
 - **Remove:** Select this option to remove a filter from this group. Select the filter; then select **Remove**. The filter check box will no longer display on the Patient Medication List.
 - **Default Checked:** Select the filter; then select **Default Checked**. The filter check box will be selected when the Patient Medication List is accessed.
 - **Default Unchecked:** Select the filter; then select **Default Unchecked**. The filter check box will be deselected when the Patient Medication List is accessed.



Medication Verification Patient List Screen Scheduled Orders Filters

Due
Default value is 

Scheduled
Default value is 

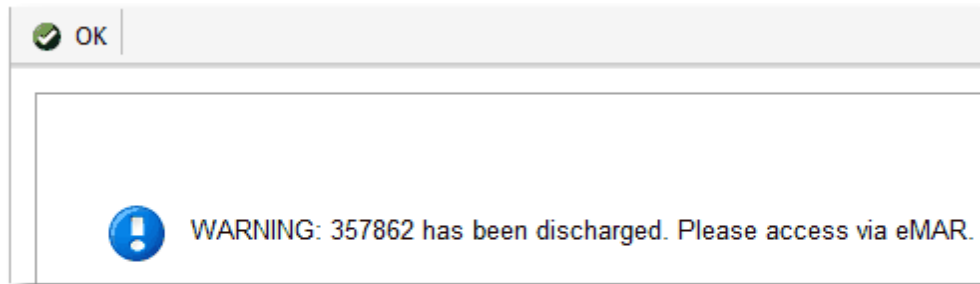
PRN
Default value is 

Medication Verification Patient List Screen Scheduled Orders Filters

Scanning the Patient's Wristband

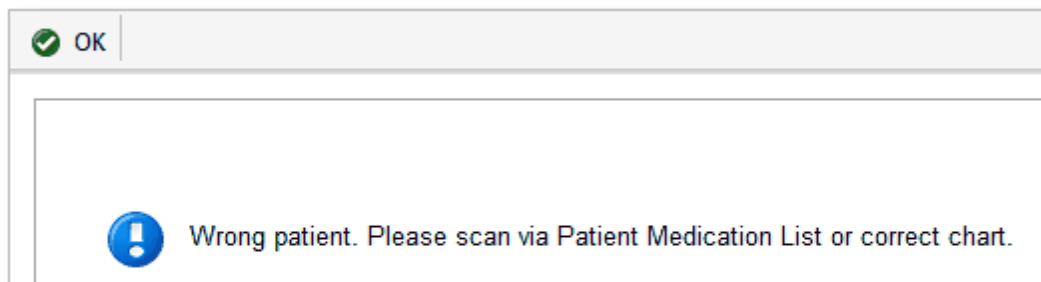
The patient's wristband may be scanned from the Patient Medication List, the MAR, or the Medication Administration screen.

- To initiate Medication Verification, scan the patient's wristband directly from the Patient Medication List (see [Patient Medication List](#)).
- To begin the Medication Verification process from the MAR, access MAR (see [MAR Access](#)), and scan the patient's wristband.
- To begin the Medication Verification process from the Medication Administration screen, access MAR (see [MAR Access](#)), select a medication or administration time, and scan the patient's wristband.
- If a patient who was scanned via the Patient Medication List has been discharged, the following alert is generated: "Warning: [Account Number] has been discharged. Please access via eMAR."



Alert

- Select **OK** to return to the previous screen. This patient must be scanned via the MAR or the Medication Administration screen. This alert is stay type-specific as defined in the EMAR Settings table.
- If accessing Medication Verification via the EMAR or Medication Administration screen, the selected patient must be scanned. If an attempt is made to scan a different patient, the following alert is generated: "Wrong patient. Please scan via Patient Medication List or correct chart."




Alert

- Select **OK** to return to the previous screen. Navigate to the correct patient's account or access the Patient Medication List. Scan the patient's wristband to continue with Medication Verification.
- If the patient's wristband is scanned without issue and the facility is utilizing Photo Verify, the patient's image will display for verification after the wristband is scanned, regardless of the access point.

BOWDEN CAUSEY ANNE	MR#: 000324	ACCOUNT#: 357861	DOB: 06/15/1973	Sex: F	Current Weight: 125 lbs 56.70 kg 56699.00 g
AGE: 42	CrCl: N/A	Height: 65.00 inches	BMI: 20.80 kg/m2	BSA: 1.61 m2	Admit Weight: 125 lbs 56.70 kg 56699.00 g
RM: 302-5	Diagnosis: Chronic congestive heart failure	Allergies: No Known Allergies			

← OK

Photo Verification



Verify patient or scan another patient ID.

Photo Verify

- The patient demographics panel pulls from the Registration and Clinical Information fields on the account and may include the following: **First Name, Last Name, Medical Record Number (MR#), Account Number, Date of Birth (DOB), Sex, Current Weight, Age, Creatinine Clearance (CrCL), Height, BMI, BSA, Admit Weight, Room (Rm), Diagnosis, and Allergies.**

NOTE: If demographic data includes a Diagnosis, it will display according to the following hierarchy:

- Principal (Grouped) diagnoses, if available
 - If no Principal Diagnoses, use the Chief Complaint
- If the patient's identity is verified via the photograph, select **OK** to continue with medication administration. If verification via the image is not possible, scan another patient ID or select the **back arrow** to return to the Patient Medication List/MAR/Medication Administration screen. If an image is not available for the patient, an option to override Photo Verify will display.

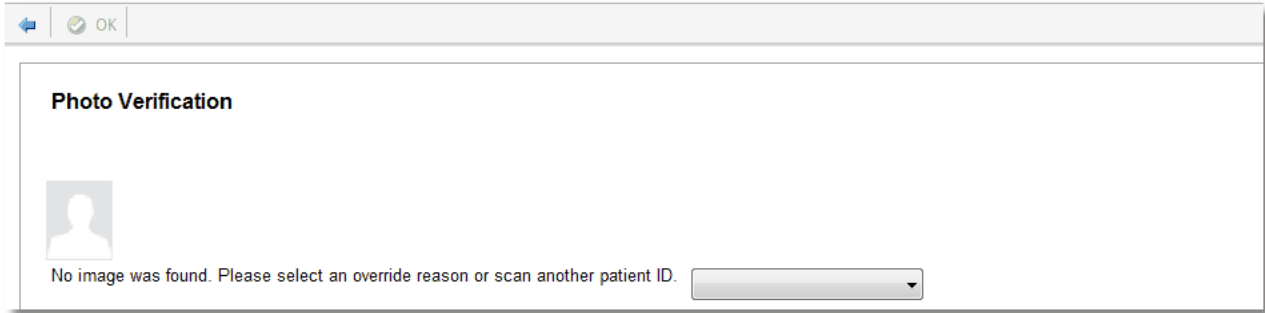


Photo Verify

- Another patient ID may be scanned or the **back arrow** may be selected to return to the Patient Medication List/MAR/Medication Administration screen. To continue with medication administration, select an **override reason** from the drop-down menu, then select **OK**.
- If Medication Verification was initiated via the Patient Medication List, the patient's MAR will display, defaulted to the "Due" filter, after Photo Verify is complete. If the wristband was scanned from the patient's account, the MAR or Medication Administration screen will display after Photo Verify is complete.
- If Photo Verify is not being utilized, the applicable screen will immediately display when the patient's wristband is scanned.

Select **Patient Chart > MAR** and scan the patient's armband.

Update All Pending Remove All Pending Date View Change Date/Time Medication Report Color Legend Clinical Monitoring Refresh

Medication Administration Record Current Date and Time Patient Wristband scanned ✓

MAR Display: All Include Discontinued Medications Date range: 08/31/2015 16:00 - 09/02/2015 11:00

	09/02/2015 11:00	09/02/2015 07:00	09/01/2015 21:00	09/01/2015 16:00	09/01/2015 11:00	09/01/2015 07:00	08/31/2015 21:00
NF-Fondaparinux Sodium Solution 2.5MG/0. Dose: 2.5 MG DAILY IVP Hold if CRCL is < 30ML/KG							
FUROSEMIDE (LASIX) INJ Dose: 20 MG Q12H IVP							
VALSARTAN(DIOVAN) TAB Dose: 80 MG DAILY ORALLY							
BLOOD GLUCOSE ACHS Insulin REG (Humulin R) 100U/ML Dose: Per Protocol PRN SUBCUTANEOUS	11:30	07:30	21:00	16:30	11:30	07:30	21:00
D5 1/2NS Flowrate: 100 ml/hr CONTINUOUS IV D5 1/2NS 1000 ML							
MORPHINE PCA(WATCH)INJ Dose: 1 EA PRN INTRAVENOUS							
MEPERIDINE PCA Dose: 1 EA IV							

MAR Patient Wristband Scanned

- "Patient Wristband scanned" displays at the top of the MAR and the Change Date/Time option is disabled denoting that the TruBridge EHR is in Medication Verification mode. If the user is on the Medication Administration screen, "Patient Wristband Not Scanned" will be replaced by "Medication Not Scanned" and the Change Date/Time option will be disabled denoting that the system is in Medication Verification mode.
- The screen will remain in Medication Verification Mode until the user exits the patient's account.

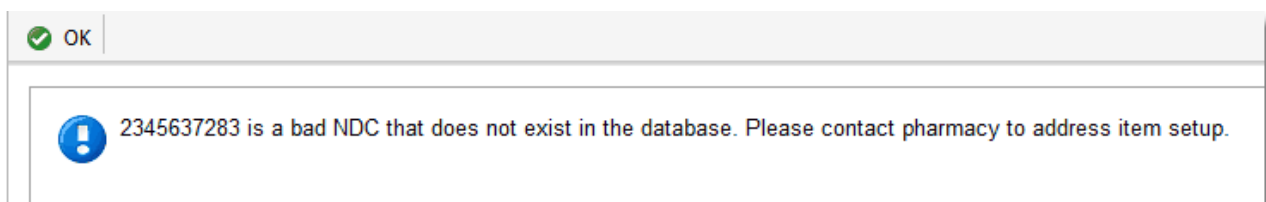
Scanning the Medication Label - Alerts

After a patient's wristband has been scanned, a medication label may be scanned from the MAR or the Medication Administration screen. Medication Verification will run a series of checks and alert the user to issues with the scanned medication. Some alerts may prohibit the user from administering the scanned medication and some may require that an override reason be documented before administration may proceed. If no alerts are generated or all alerts have been addressed, the Medication Administration screen will display. If the system prohibits the administration of a medication via Medication Verification and it is determined that the medication should indeed be administered, the medication may be administered via the MAR, where noted, until the issue is resolved.

Possible alerts and prompts are listed in the sections below.

Bad NDC

If the barcode on the scanned medication is not a valid National Drug Code (NDC) number, the following alert will be generated: "XXXXXXXXXX is a bad NDC that does not exist in the database. Please contact pharmacy to address item setup." Select **OK** to return to the previous screen. Medication Verification may not be used to administer this medication until the correct NDC/barcode is scanned. If the system prohibits the administration of a medication via Medication Verification and it is determined that the medication should indeed be administered, the medication may be administered via the MAR until the issue is resolved.

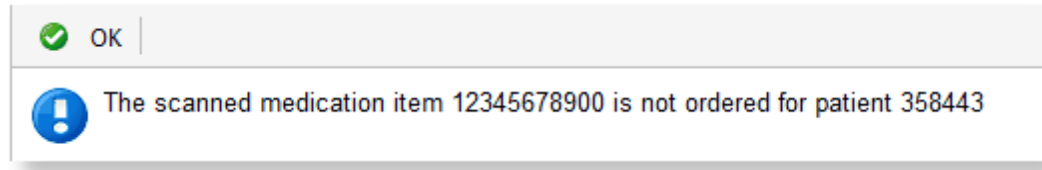


Alert

NOTE: This alert is only generated when utilizing Medication Verification. Selecting the Medication Description or the Scheduled Time via the MAR to access Medication Administration will not alert the user to a bad NDC number.

Invalid NDC

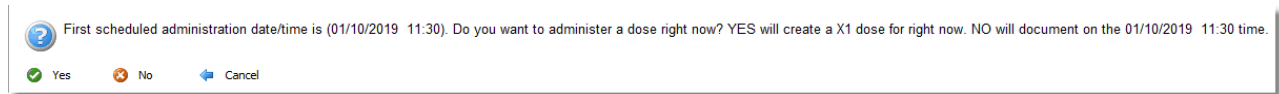
If a user scans an invalid NDC for a medication item that is not ordered on their patient, "The scanned medication item XXXXXXXXXXXX is not ordered for patient" message will display.



Not Ordered for Patient

First Dose, Early Administration

If an attempt is made to give a medication too early for the first time, and the next scheduled date/time is greater than the "Acceptable time before and after scheduled administration times to give medications" loaded in the POC Control Table, the following prompt will appear.

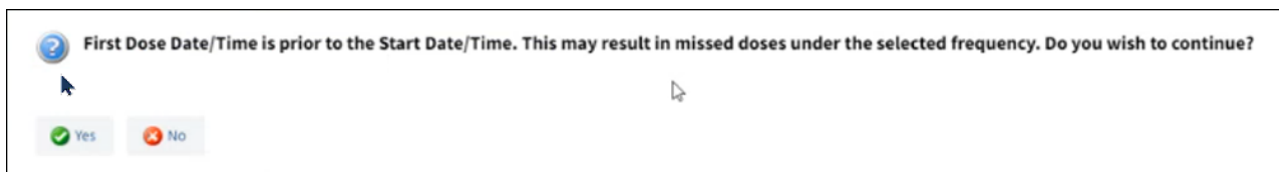


Early Administration of First Dose

If **Yes** is selected, a new scheduled date/time will be associated to the administration. If **No** is selected, the system will associate the administration to the next scheduled date/time that is closest to the current time.

NOTE: This prompt also applies to linked medications given too early on first administered dose.

Also, If an order is placed with a first dose date and time that is prior to the start date and time, and the frequency selected results in a dose that would be in between the first dose and start, the user may not be aware that there is the potential for a dose to be missed. To prevent this problem, if the first dose is prior to the order start date/time on the Pharmacy Order Entry screen, a warning message will now display.

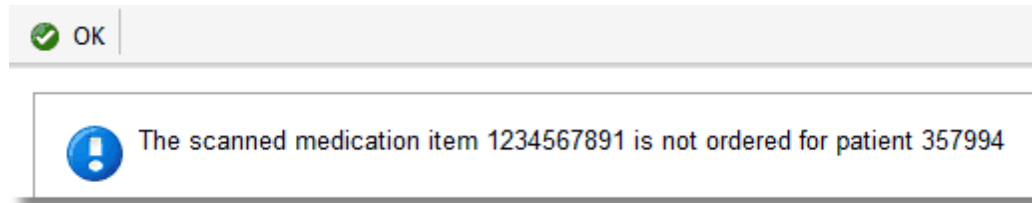


First Dose Date/Time Missed Doses

Scanned Medication Item is Not Ordered for this Patient

If the scanned medication does not match a medication on the patient's account, the following alert will be generated: "The scanned medication item XXXXXXXXXXXX is not ordered for this patient XXXXXX." Select **OK** to return to the previous screen. Medication Verification may not be used to administer this medication. Please review the patient's MAR before attempting to administer the medication. If the system prohibits the administration of a medication via Medication Verification and

it is determined that the medication should indeed be administered, the medication may be administered via the MAR until the issue is resolved.

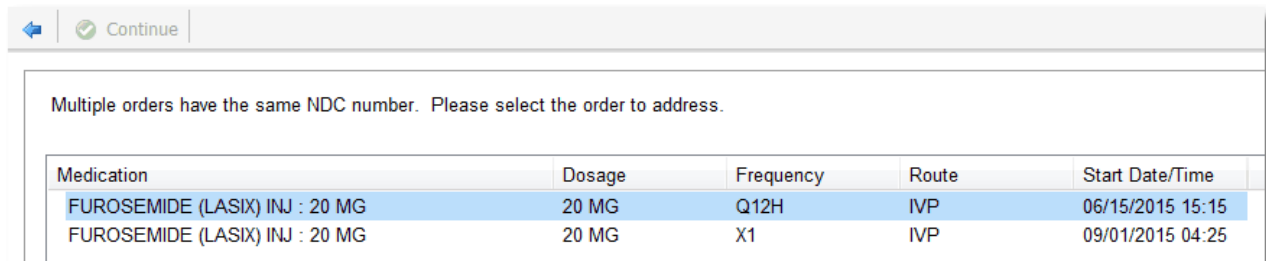


Alert

NOTE: This alert is only generated when utilizing Medication Verification. Selecting the Medication Description or the Scheduled Time via the MAR to access Medication Administration will not alert the user that a medication is not for the selected patient.

Medications with the Same NDC Number

If two or more medications on a patient's pharmacy profile have the same NDC Number, the medication order that is actually being administered must be manually chosen. After the medication is scanned, the orders with duplicate NDC numbers will display for selection.

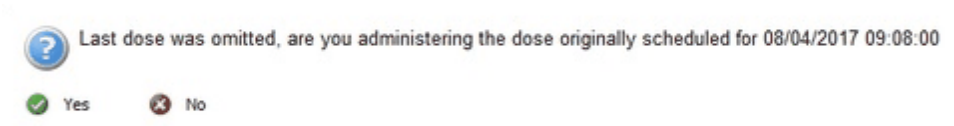


Alert

Select the **back arrow** to abort medication administration, or select a medication and then **Continue** to proceed.

Omitted Last Dose

When the last dose is omitted, and the next scheduled date/time is greater than the "Acceptable time before and after scheduled administration times to give medications" loaded in the POC Control Table, the following prompt will appear instead of the too early prompt.

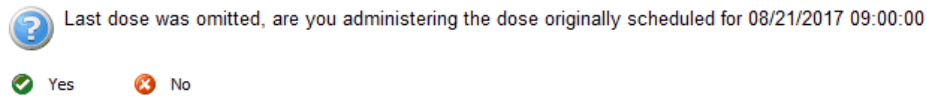


Omitted Last Dose

If **Yes** is selected, administration will be associated to the administration listed in the prompt. If **No** is selected, the system will associate the administration to the next scheduled date/time that is closest to the current time.

Omitted Last Dose - Linked Medications

When the last dose of linked medications is omitted, and the next scheduled date/time is greater than the "Acceptable time before and after scheduled administration times to give medications" loaded in the POC Control Table, the following prompt will appear instead of the too early prompt. This prompt will cover all the medications in the link.

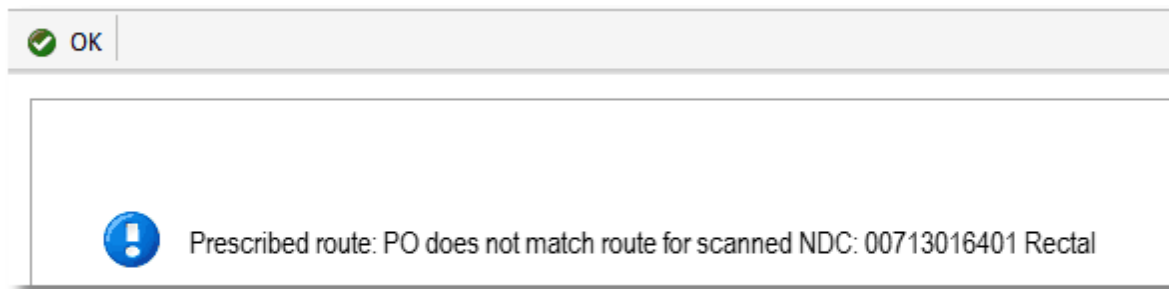


Omitted Dose with Linked Medications

If **Yes** is selected, the dose will be associated to the administration listed in the prompt. If **No** is selected, the system will associate the administration to the next scheduled date/time that is closest to the current time.

Wrong Route

If the route of the scanned medication does not match the route of the medication on a patient's account, the following alert is generated: "Prescribed route: XXXX does not match route for scanned NDC: XXXXXXXXXXXX XXXX." Select **OK** to return to the previous screen. Medication Verification may not be used to administer this medication. The user should review the patient's EMAR before attempting to administer this medication. If the system prohibits the administration of a medication via Medication Verification and it is determined that the medication should indeed be administered, the medication may be administered via the MAR until the issue is resolved.

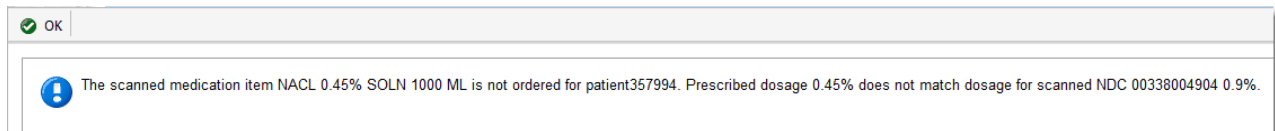


Alert

NOTE: This alert is only generated when utilizing Medication Verification. Selecting the Medication Description or the Scheduled Time via the MAR to access Medication Administration will not alert the user that the dose to be administered is the wrong route.

Prescribed Dosage Does Not Match Scanned Dosage

If a medication is scanned that is not on the patient's account but matches the ingredients of a medication on the patient's account, the following prompt is generated: "The scanned medication item XXXXXXXXXXXX is not ordered for patient XXXXXX. Prescribed dosage XXXX does not match dosage for scanned NDC XXXXXXXXXXXX XXXX." Select **OK** to return to the previous screen. This medication may not be administered via Medication Verification. Please review the patient's MAR before attempting to administer this medication. If the system prohibits the administration of a medication via Medication Verification and it is determined that the medication should indeed be administered, the medication may be administered via the MAR until the issue is resolved.

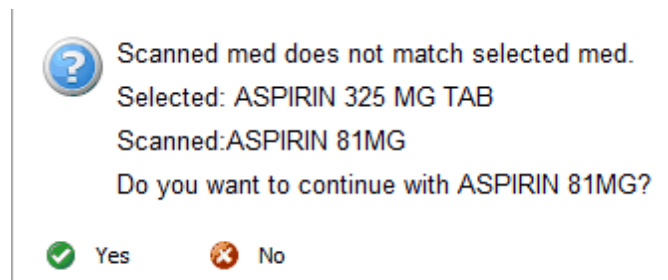


Alert

NOTE: This alert is only generated when utilizing Medication Verification. Selecting the Medication Description or the Scheduled Time via the MAR to access Medication Administration will not alert the user that the dose to be administered is the wrong dose.

Scanned Med Does Not Match Selected Med

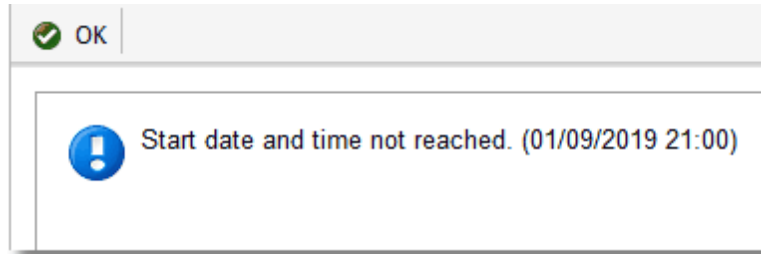
When a scanned medication does not match the selected medication, the following prompt will display. Selecting **Yes** allows you to continue to the Medication Administration screen. Selecting **No** cancels the administration.



Prompt

Start Date and Time Not Reached

If the scanned medication has a future start date/time, the following alert will be generated: "Start date and time not reached (MM/DD/YYYY HH:MM)." Selecting **OK** returns the user to the previous screen. Future-dated medications may not be administered via the system unless the future start date/time falls within the acceptable time frame before a scheduled administration as determined by the Med Verify Control Table.

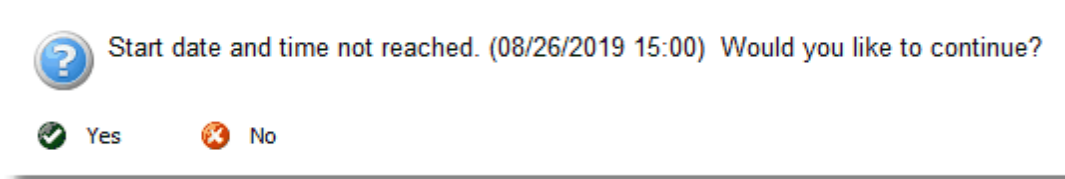


Alert

NOTE: This alert is generated when utilizing Medication Verification and when selecting the Medication Description or the Scheduled Time via the MAR to access Medication Administration.

One-Time Medications

There is an exception to the above. This option does not occur with all frequencies, just one-time medications. If the medication is a one-time medication, user will receive the following prompt if an attempt is made to administer the medication before the start date and time:



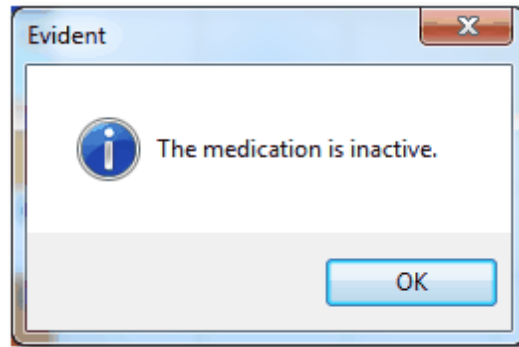
Alert

If **Yes** is selected, the user is taken to the administration screen to administer the medication. If **No** is selected, the user is returned to the EMAR grid without updating the administration.

Medication Discontinued

If the scanned medication has been discontinued within the current 24-hour period and there is not another active order for the medication, the following alert is generated: "This medication has been discontinued." The user must select **OK** to return to the previous screen. This medication may not be administered via Medication Verification. The user should review the patient's EMAR before attempting to administer this medication. Administrations may not be documented on discontinued medications.

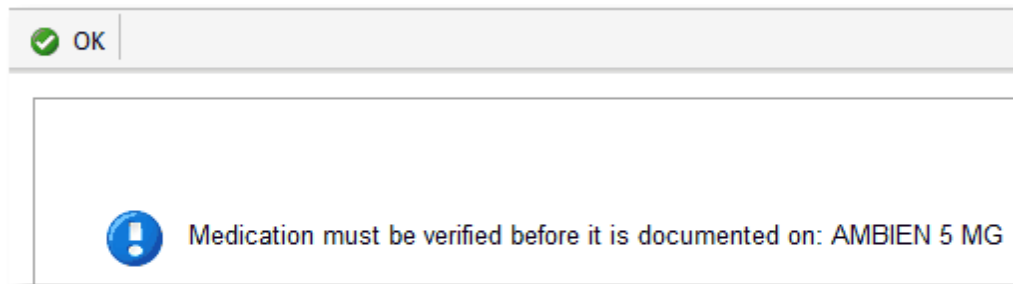
NOTE: If the Medication Description or Scheduled Time is selected on the MAR for a discontinued medication, the following alert is generated: "The medication is inactive." Select **OK** to return to the previous screen.



Alert

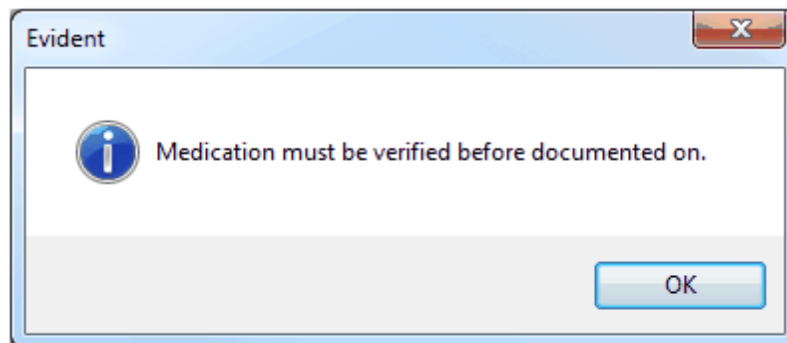
Unverified Medication

If a medication that has not been verified is scanned, the following alert is generated: "Medication must be verified before it is documented on: XXXXX." The user must select **OK** to return to the previous screen. This medication may not be administered in the TruBridge EHR until it is verified.



Alert

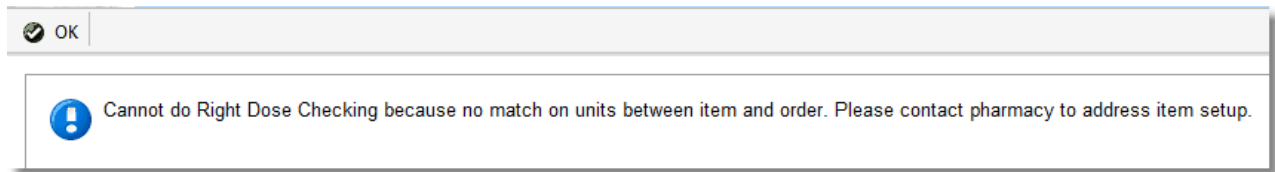
NOTE: If the Medication Description or Scheduled Time is selected on the MAR for an unverified medication, the following alert is generated: "Medication must be verified before it is documented on." The user must select **OK** to return to the previous screen.



Alert

Cannot Do Right Dose Checking

If the ordered units of a scanned medication do not match the units set up in the **Other Units** field in Pharmacy Information, the following alert will be generated: "Cannot do Right Dose Checking because no match on units between item and order. Please contact pharmacy to address item setup." The user must select **OK** to return to the previous screen. Medication Verification may not be used to administer this medication. The user should review the patient's MAR before attempting to administer the medication. If the system prohibits the administration of a medication via Medication Verification and it is determined that the medication should indeed be administered, the medication may be administered via the MAR until the issue is resolved.



Alert

NOTE: *This alert is only generated when utilizing Medication Verification. Selecting the Medication Description or the Scheduled Time via the MAR to access Medication Administration will not alert the user that the units ordered do not match the units set up in the Other Units field.*

Late/Early Administration Time

If a scheduled medication is scanned and the current date/time falls outside of the acceptable time frame to administer a medication, one of the following alerts is generated: "Late Administration Time: MM/DD/YYYY HH:MM" or "Early Administration Time: MM/DD/YYYY HH:MM."

← Continue

ORDER INFORMATION

ORDER INFORMATION

FUROSEMIDE (LASIX) 40 MG TABLET ⓘ

Dose: 40
 Units: MG
 Route: ORAL
 Frequency: DAILY
 Times: 900
 Duration:
 Priority: Routine
 First Dose Date/Time: 00:00
 Start Date/Time: 09/01/2015 02:30
 Stop Date/Time: 00:00
 Instructions:

Additional Information:

Ordered:	09/01/2015 02:30	CEK
Entered:	09/01/2015 02:30	CEK
Acknowledged:		
Verified:	09/01/2015 23:01	CEK

ALERTS

Early Administration Time: 2015-09-01 09:00
 Override:

Alert

Select the **back arrow** to return to the MAR or select an **override reason** from the drop-down menu and then **Continue** to proceed with medication administration. The override reasons pull from the Med Verify Control Table. **Other** may be selected from the drop-down menu so that the user may manually enter the appropriate reason.

If scanning a sequence of multiple medications, the override reason selected will default as the reason on the next Early/Late drug in the sequence.

NOTE: This alert is generated when utilizing Medication Verification and when selecting the Medication Description or the Scheduled Time via the MAR to access Medication Administration.

PRN Time Range Warning

If a PRN medication is scanned and sufficient time has not passed since the previous dose was administered, the following alert will generate: "PRN Time Range = X hours. Last given admin was at: MM-DD-YY HH:MM:SS." This prompt will appear with and without using Medication Verification if a sufficient time has not occurred since the last administration.

ORDER INFORMATION	ALERTS
<p>ACETAMINOPHEN (TYLENOL) 500MG TABLET ⓘ</p> <p>500 MG</p> <p>Administer Amount: 1 Tablet</p> <p>Route: ORAL</p> <p>Frequency: PRNQ4H</p> <p>Times:</p> <p>Duration:</p> <p>Priority: Routine</p> <p>First Dose Date/Time: 00:00</p> <p>Start Date/Time: 04/22/2019 13:44</p> <p>Stop Date/Time: 00:00</p> <p>Instructions:</p> <div style="border: 1px solid #ccc; height: 40px; width: 100%;"></div> <p>Additional Information:</p> <p>Ordered: 04/22/2019 13:44 KW</p> <p>Entered: 04/22/2019 13:44 KW</p> <p>Acknowledged: 04/22/2019 13:45 KW</p> <p>Verified: 04/22/2019 13:45 KW</p>	<p>PRN Time Range = 4 hours. Last given admin was at: 04/22/2019 13:45</p> <p>Override: <input type="text" value=""/></p> <div style="border: 1px solid #ccc; padding: 5px; width: fit-content;"> <ul style="list-style-type: none"> Pt off the unit Nausea Meds unavailable Pt in Rehab Going to Xray Going to Surgery <Other> </div>

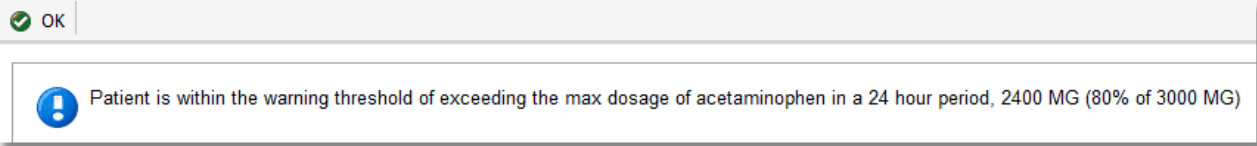
Alert

Select the **back arrow** to return to the MAR or select an **override reason** from the drop-down menu and then **Continue** to proceed with medication administration. The override reasons pull from the Med Verify Control Table. **Other** may be selected from the drop-down so that the user may manually enter the appropriate reason.

NOTE: This alert will now be automatic if the non-IV PRN "Frequency" has hours and minutes between doses set up on the item regardless of whether or not Medication Verification is being used. If the frequency is set up with a time between doses and the user attempts to administer a PRN non-IV medication too early, they will be alerted and must give an Override.

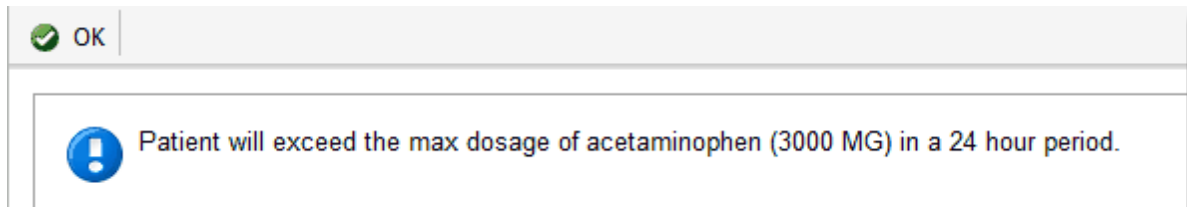
Acetaminophen Warning

The Pharmacy Control Information table gives the facility the option to use acetaminophen max dose warnings. The max dose allowed by the facility is entered into this table along with the percentage of the maximum dose allowed that must be reached before Nursing is alerted. If acetaminophen is scanned and the dose being scanned will place the acetaminophen total in the warning percentage range or over the max dose allowed, the following alerts will generate: "Patient is within the warning threshold of exceeding the max dosage of acetaminophen in a 24 hour period, XXXX MG (XX% of XXXX MG)." Select **OK** to proceed with medication administration.



Threshold Alert Warning

If the maximum acetaminophen dose is exceeded, the following alert will display.

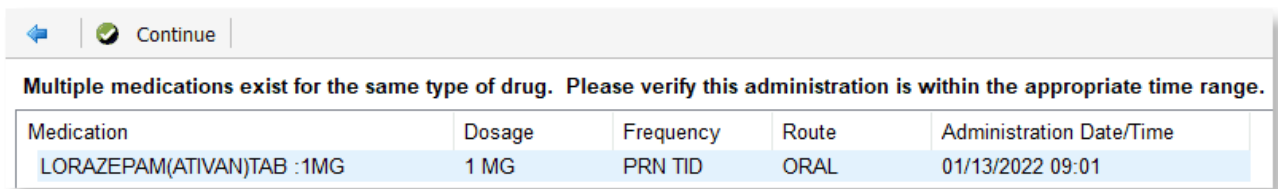


Exceeding Maximum Dosage Alert

NOTE: This alert is generated when utilizing Medication Verification and when selecting the Medication Description or the Scheduled Time via the MAR to access Medication Administration.

Duplicate Therapy Administrations

If multiple medications exist for the same type of drug, medication administration of one of those drugs will prompt the user to review the administration record of all duplicate therapies. The Duplicate Therapy Administration screen displays the medication, dose, frequency, route, date, and time of previous administrations of duplicate medications. Select the back arrow to abort medication administration or **Continue** to proceed to document that the medication has been given.



Duplicate Administration Prompt

Auto-Display Instructions

If the option to automatically display instructions is selected in the Med Verify Control Table and a medication is scanned that includes instructions added during the order entry process, the following alert will appear: "Instructions: Reviewed." The user must then review the Instructions field in the Order Information section.

←
Continue

ORDER INFORMATION

ORDER INFORMATION

ACETAMINOPHEN (TYLENOL) 500MG TABLET ⓘ

Dose: 500
Units: MG
Route: ORAL
Frequency: PRNQ4H (AS NEEDED)
Times:
Duration:
Priority: Routine
First Dose Date/Time: 00:00
Start Date/Time: 08/31/2015 23:18
Stop Date/Time: 00:00
Instructions:

Additional Information:

Ordered: 08/31/2015 23:18 CEK
Entered: 08/31/2015 23:18 CEK
Acknowledged:
Verified: 08/31/2015 23:19 CEK

ALERTS

Instructions: Reviewed

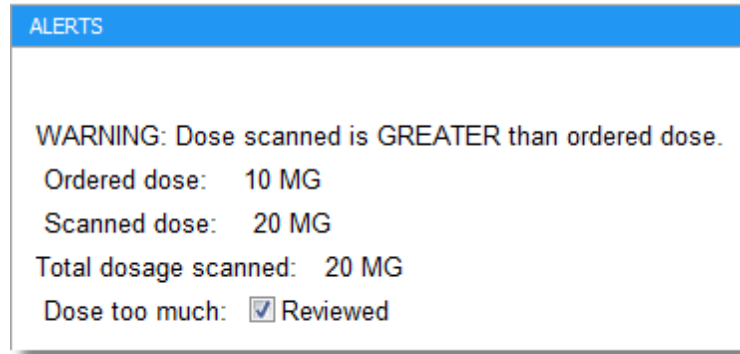
Alerts

To abort the administration and return to the previous screen, select the **back arrow**. To proceed, select the **Reviewed check box** followed by **Continue**. The Medication Administration screen will display.

NOTE: This alert is only generated when utilizing Medication Verification. Selecting the Medication Description or the Scheduled Time via the MAR to access Medication Administration will not alert the user that instructions were entered during the order entry process.

Dose Scanned is Greater Than Ordered Dose

If the dose of the scanned medication is greater than the ordered dose, the following alert will be generated: "WARNING: Dose scanned is GREATER than ordered dose. Ordered dose: XXXX Scanned dose: XXXX: Total Dosage Scanned: XXXX: Dose too much: Reviewed." The user must review the Order Information displayed on the left side of the screen.



Alerts

To abort the administration and return to the previous screen, the user may select the **back arrow**. To proceed, the user must select the **Reviewed** check box followed by **Continue**. The Medication Administration screen will display.

NOTE: A combination of the **Dose Scanned is Greater than Ordered Dose** and **Dose Scanned is Less than Ordered Dose** alerts may be received. For example, the pharmacy only carries a 500 mg dose of a particular medication. The order requires a 750 mg dose. When the 500 mg dose is scanned, the system will alert the user that the scanned dose is less than the ordered dose and the medication must be scanned again. At that point, the system detects that 1000 mg have been scanned and will alert the user that the scanned dose is greater than the ordered dose. The **Reviewed** check box should then be selected to proceed.

NOTE: This alert is only generated when utilizing Medication Verification. Selecting the Medication Description or the Scheduled Time via the MAR to access Medication Administration will not alert the user that the dose to be administered is greater than the dose ordered.

Dose Scanned is Less Than Ordered Dose

If the dose of the scanned medication is less than the ordered dose, the following alert will be generated: "WARNING: Dose scanned is LESS than ordered dose. Please scan again. Ordered dose: XXXX Scanned dose: XXXX." The user must review the Order Information that displays on the left side of the screen.

WARNING: Dose scanned is LESS than ordered dose. Please scan again.

Ordered dose: 650 MG

Scanned dose: 325 MG

Total dosage scanned: 325 MG

Alert

To abort the administration and return to the previous screen, the user may select the **back arrow**. To proceed, the user must scan the next **unit(s)** until the dose scanned matches the dose ordered. The Medication Administration screen will display when the dose ordered matches the dose scanned.

If the next unit(s) scanned is not the ordered medication, the following alert will be generated and display on the right side of the warning prompt: "Incorrect NDC scanned. Please scan again." The user must scan the correct medication to continue with medication administration.

WARNING: Dose scanned is LESS than ordered dose. Please scan again. **Incorrect NDC scanned. Please scan again.**
Ordered dose: 650 MG
Scanned dose: 325 MG
Total dosage scanned: 325 MG

Alerts

NOTE: A combination of the **Dose Scanned is Greater than Ordered Dose** and **Dose Scanned is Less than Ordered Dose** alerts may be received. For example, the pharmacy only carries a 500 mg dose of a particular medication. The order requires a 750 mg dose. When the 500 mg dose is scanned, the system will alert the user that the scanned dose is less than the ordered dose and the medication must be scanned again. At that point, the system will detect that 1000 mg have been scanned and alert the user that the scanned dose is greater than the ordered dose. The **Reviewed** checkbox must be selected to proceed.

NOTE: This alert is only generated when utilizing Medication Verification. Selecting the Medication Description or the Scheduled Time via the MAR to access Medication Administration will not alert the user that the dose to be administered is less than the dose ordered.

Maximum Number of Scans Has Been Reached

Medication items that have a high ordered dose, but a small unit defined in **Pharmacy Information, Other Units** require excessive scanning. For this reason, the **Maximum Number of Scans** field in Charge Tables/Inventory > Pharmacy Information > Page 3 allows facilities to set the **maximum number of times** a particular item must be scanned. Additional scans will not be required even if the dose has not been reached. Once this maximum has been reached, the user will be alerted with the following message, "Maximum number of scans has been reached." See the [Pharmacy Setup User Guide](#) for details.

← Update Pending Save/View Pending Change Date/Time Detail Results

Medication Administration

Medication Scanned. ✓ Maximum number of scans has been reached.

Medication: **MIACALCIN NASAL SPRAY 200IU/ACT**

Action: Give Omit Discontinue

Administered Time: **Current Date and Time**

Scheduled Time: 02/15/2016 16:00 ▼

Dose: 200 INTERNATIONAL UNITS ▼

Administer Amount: **Per Dose**

Route: **NAS**

Site: ▼

Instructions:

Comment:

Reason: ▼

Pain F/S:

Alert

3.3 Documenting Medication Administration

1. Select **Charts > Medication Verification > Scan Patient's Wristband > Scan Medication Label**. After the patient's wristband and medication label have been scanned and all [alerts](#) have been addressed, the Medication Administration screen is displayed.

← Update Pending Save/View Pending Change Date/Time Detail Results

Medication Administration

Patient Armband Not Scanned ❌

Medication: **MECLIZINE(ANTIVERT)TAB**

Action: Give Omit Discontinue

Administered Time: **Current Date and Time**

Scheduled Time: 07/31/2024 08:00

Dose: 12.5 MG

Administer Amount: **1 Tablet**

Route: **INHALED**

Site: INHALED

Instructions:

Comment:

Reason:

Pain F/S:

Medication Administration

- To view Order Detail for the medication, select **Detail** from the action bar. The Order Detail Screen is displayed. Select the back arrow to return to Medication Administration. See [Order Detail](#) for additional information on this option.
- Up to two lab orders may be associated with a medication. If the orders have been resulted on the patient, they may be viewed by selecting **Results** from the action bar. The user may select the **back arrow** to return to Medication Administration.

	09/01/2015 01:36
POTASSIUM (3.3 - 5.3) mmol/L	4

Results

- **Medication Scanned** displays at the top of the administration screen and the **Change Date/Time** option is disabled, denoting that the system is in Medication Verification mode. If the medication was selected directly from the MAR, **Medication not Scanned** will display. The medication must be scanned to administer the medication with Medication Verification.
- **Patient's Own Med** displays above the medication description if this option was selected via order entry.

- The **Medication** field displays the description for the scanned medication.
2. Select the appropriate **Action**. **Give** is the default action selected. If this administration will be given, this option does not need to be addressed. If the administration is not going to be given, the user must select the radio button for **Omit** or **Discontinue**. An omission reason must be documented when omitting an administration. See "Reason (Omit)" below for additional information.

If **Discontinue** is selected, the Discontinue Medication screen will display with the following fields:

- **Medication:** This field displays the medication name with strength of dose.
- **Discontinue Date/Time:** These fields automatically populate with the current date and time, but they may be modified to a past or future date and time.
- **Order Type:** This drop-down menu may be used to designate the order type as **Written**, **Verbal**, or **Telephone**. The default is Written.
- **Ordering Physician:** This field defaults to the ordering physician for selected order. The binocular icon may be selected to choose a different ordering physician. If a hospitalist is assigned to the patient, the system will default to the hospitalist. If an active hospitalist is not assigned, the default will be the Attending Physician.
- **Read Back:** If the Order Type is Verbal or Telephone, **Yes** or **No** must be selected before updating.
- **Comment:** Up to 20 characters of text may be entered in this field.
- **Back Arrow:** To exit the Discontinue Medication screen without saving, select the **back arrow** from the action bar. The following alert displays: "Exiting will remove changes to this medication. Would you like to proceed?" Select **Yes** to return to the Medication Administration screen without saving the documented data or select **No** to remain on the Discontinue Medication screen.
- **Update Pending:** To update the MAR with data documented on the current medication, select **Update Pending**.
- **Save/View Pending:** To save the current data entered for the administration without updating the administration to the MAR, select **Save/View Pending**.

← Update Pending Save/View Pending

Discontinue Medication

Medication: **MECLIZ12.5MG 12.5 MG**

Discontinue Date/Time: 7/31/2024 × 09:29

Order Type: Written ▾

Ordering Physician: 👁 Boulet Francis Diane ▾

Read Back: Yes No

Comment:

Discontinue Medication

3. Enter the appropriate date/time information.

- **Administered Time:** This field displays the date and time the action will be documented as being performed. Change Date/Time may not be utilized in conjunction with Medication Verification. This field will always display "Current Date and Time" when scanning.
- **Scheduled Time:** If the medication being administered is a scheduled medication, this drop-down menu will display the scheduled date/time closest to the date and time displayed in the **Administered Time** field. It will also display one overdue medication if applicable. If the scheduled date/time displayed is correct, no action needs to be taken. If the date/time is incorrect, the user must select the drop-down menu to display date/times available per the medication schedule. Select the correct **scheduled date/time**. If this field is not corrected, medication administrations may erroneously appear as overdue via the MAR and Patient Medication List. The "Late/Early Administration Time" alerts may also display in error for subsequent administrations.

The screenshot shows the 'Medication Administration' form. At the top, there are navigation buttons: 'Update Pending', 'Save/View Pending', 'Change Date/Time', 'Detail', and 'Results'. Below these is the title 'Medication Administration' and a warning 'Patient Armband Not Scanned'. The form fields are as follows:

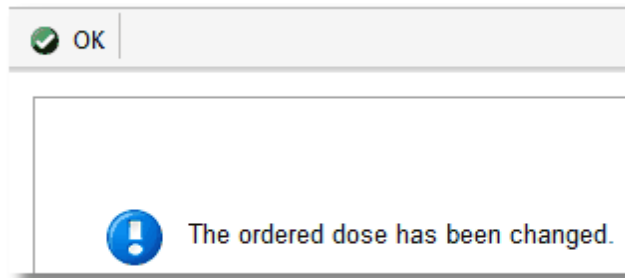
- Medication: **MECLIZINE(ANTIVERT)TAB**
- Action: Give Omit Discontinue
- Administered Time: **Current Date and Time**
- Scheduled Time: 07/31/2024 08:00 (dropdown menu open)
- Dose: 07/31/2024 08:00 (dropdown menu open, selected)
- Administer Amount: 08/01/2024 08:00
- Route: (empty)
- Site: INHALED (dropdown menu)
- Instructions: (empty)
- Comment: (empty text box)
- Reason: (dropdown menu)
- Pain F/S:

Scheduled Time Drop Down

4. Verify the **Dose**, **Units**, **Administer Amount**, **Route**, and **Site** information.

- **Dose:** This field displays the dose entered via order entry. (A leading zero will display for doses less than one. Trailing zeros will not display after a decimal point.) If the dose displayed is correct, no action needs to be taken. The Dose field may be modified using the keyboard. This field will not accept data entered via a scanner. If the dose is modified, an alert may be received based on your site's POC Control Maintenance setup. The alert will state "The ordered dose

has been changed." Select **OK** to return to the Medication Administration screen. The original dose will display in red to the right of the **Dose** field if the dose has been modified.



Dose Alert

- **Unit:** This field displays the unit entered via order entry. If the unit displayed is correct, no action needs to be taken. The unit field may be modified by selecting the drop-down menu to display a list of other units available for the item. Select the correct unit from the list if applicable. If the unit is modified, the alert noted above for dose changes will display.
- **Administer Amount:** The administer amount will display for non-IV medications and may not be modified. "Per Dose" will display if the amount cannot be calculated.
- **Route:** This field displays the route entered via order entry. This field may not be modified.
- **Site:** This option is only available for medications with the following routes: IV, Intramuscular, Subcutaneous, and Transdermal. Select the drop-down menu to display a list of the facility-defined sites in the Sites table. The sites that display for selection are route-specific based on table setup. Select the site. This field is required. If an attempt is made to update/save the administration without selecting a site, the following alert displays: "Required fields: Site." Select **OK** to return to Medication Administration screen. "Site" will display in red font and a red asterisk will display to the right of the drop-down menu. Select a site to continue.

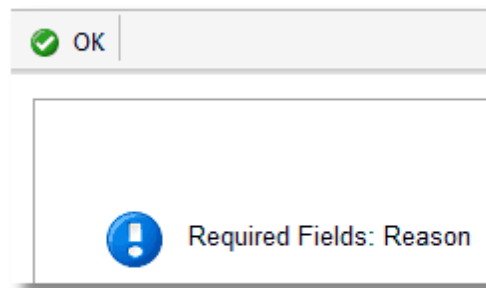


Site Alert

5. Review and/or add comments to the administration.

- **Instructions:** This field displays instructions entered during order entry. This field may not be modified.

- **Comment** or **PRN Comment**: Use this field to enter a comment (20-character maximum). This information will display on the Medication Report.
- **Reason (PRN)**: This option is available for medications with a PRN frequency. Select the drop-down menu to display a list of the facility-defined reasons in the Reason table. Select the reason or choose **Other** to key a reason. The Reason field is "sticky" (i.e. the selected reason will display for subsequent administrations) but the field may be modified as needed. This field is required for PRN medications. If the user attempts to update/save this administration without selecting a reason, the following alert displays: "Required fields: Reason." Select **OK** to return to Medication Administration screen. "Reason" will display in red font and a red asterisk will display to the right of the drop-down menu. Select a reason to continue. If a PRN Reason of "Other" is selected, the user may enter up to 50 characters in the "Other" field. The PRN reason selected in the order entry process will pull to the PRN reason field for use at administration.



Reason Alert

- **Reason (Omit)**: This option is available for medications when **Omit** is the selected action. Select the drop-down menu to display a list of the facility-defined omit reasons in the Omit Reason table. The user should select the reason or choose **Other** to key a reason. This field is required when omitting a medication administration. If an attempt is made to update/save the administration without selecting an omit reason, the following alert displays: "Required fields: Reason." (See figure above.) The user must select **OK** to return to Medication Administration screen. "Reason" will display in red font and a red asterisk will display to the right of the drop-down menu. Select an omit reason to continue.
 - **Pain F/S**: Select this option to display this administration documentation on the Pain Flow Sheet. Reasons in the facility-defined Reasons table may be flagged to auto-populate this check box.
- NOTE:** To exit the Medication Administration screen without saving the administration, select the **back arrow** from the action bar. The following alert will display: "Exiting will remove changes to this medication. Would you like to proceed?" Select **Yes** to return to the MAR without saving the documented data or **No** to remain on the Medication Administration screen.
6. Complete the administration. To update the MAR with data documented on the current medication, select **Update Pending**. The MAR will display with the same filter view that was selected when the medication was scanned. If the Due filter was selected and, after medication administration, no medications are currently due, the MAR display will be "All."

NOTE: To save the current data entered for the administration without updating the administration to the MAR, select **Save/View Pending**. The MAR will display with a column to view pending orders. The Pending column displays to the right of the medication list. Cells will display any actions documented for the administration (Given/Started, Omitted, or Discontinued) followed by the label "Pending" and the initials of the user who documented the data.

	Pending
FUROSEMIDE (LASIX) Dose: 20 MG BID ORALLY	Omitted Pending (CEK, RN)
MORPHINE PCA(WATCH)INJ Dose: 1 EA PRN INTRAVENOUS	
ACETAMINOPHEN SUPP (TYLENOL) Dose: 650 MG PRNQ4H (AS NEEDED) Rectal FOR TEMP > 101 OR PAIN	
MEPERIDINE INJ Dose: 50 MG PRNQ4H (AS NEEDED) IVP	Given Pending (CEK, RN)
PROMETHAZINE (PHENERGAN) INJ Dose: 25 MG PRNQ4H (AS NEEDED) IVP	Given Pending (CEK, RN)

Medication Administration Record

- If medications are set to Pending, complete all pending administrations. Select **Update All Pending** from the action bar to update the pending administrations to the MAR or **Remove All Pending** from the action bar to remove the pending administrations without updating the MAR. The Pending column will no longer display on the MAR. See [MAR Display](#) for the functionality of the remaining action bar options: Cumulative View, Graphical View, Intervention/BG/Carb, Date View, Detail View, Change Date/Time, Current Date/Time, Color Legend, and Clinical Monitoring.

Medications that require additional documentation for medication administration are discussed in the next sections.

NOTE: If Positive ID is being utilized, the user will be prompted with the Positive ID challenge questions when updating, amending, or removing entries.

NOTE: Fields used for documenting Lot Number and Lot Expiration Date display on the Medication Administration screen for all medications documented via the TruBridge Provider EHR application. See the TruBridge Provider EHR Medication Administration section in the Order Chronology User Guide.

Acetaminophen Administrations

The Pharmacy Control Information table gives the facility the option to use acetaminophen max dose warnings. The max dose allowed by the facility is entered in this table along with what percentage of the max dose allowed must be reached before nursing is alerted.

If max dose is being used and acetaminophen is scanned, additional fields/options will be available on the Medication Administration screen.

The screenshot shows the Medication Administration screen with the following fields and values:

- Medication:** ACETAMINOPHEN (TYLENOL) 325MG
- 24 Hour dose total:** 1475
- Action:** Give Omit Discontinue
- Administered Time:** Current Date and Time
- Scheduled Time:**
- Dose:** 325
- Unit:** MG
- Route:** PO
- Site:**
- Instructions:**
- Comment:**
- Reason:** Fever
- Pain F/S:**

Medication Administration

- **24 Hour dose total:** This field displays the total dose of acetaminophen administered via all acetaminophen orders for the past 24 hours based on the "Administered Time" of the currently selected administration. The Caution icon will display to the right of the total if this administration will place the acetaminophen total in the warning percentage range or over the max dose allowed.
- **Acetaminophen Admins:** Select this option from the action bar to display the Acetaminophen Administrations screen.

Acetaminophen Administrations					
Date	Time	Initials	Medication Description	Acetaminophen Dose	
03/22/2015	23:50	SEB	ACETAMINOPHEN (TYLENOL) 325MG	325	
03/23/2015	04:00	SEB	ACETAMINOPHEN (TYLENOL) 325MG	325	
03/23/2015	08:17	SEB	ACETAMINOPHEN (TYLENOL) 325MG	325	
03/23/2015	08:45	SEB	ACETAMINOPHEN 500 MG TAB: after colon te	500	

24 hour maximum dose: 2000 24 hour total: 1475

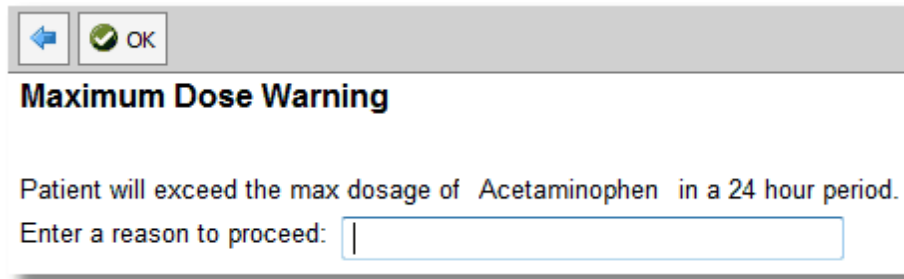
Acetaminophen Administrations

The following information displays:

- Each acetaminophen administration displays including the date and time of the administration, the initials of the user who documented the administration, the medication description for the administration, and the dose administered for the administration.
- **24 hour maximum dose:** This field displays the max dose allowed as determined by the Pharmacy Control Information table.
- **24 hour total:** This field displays the total dose of acetaminophen administered to the patient via all acetaminophen orders for the past 24 hours based on the "Administered Time" of the currently selected administration.

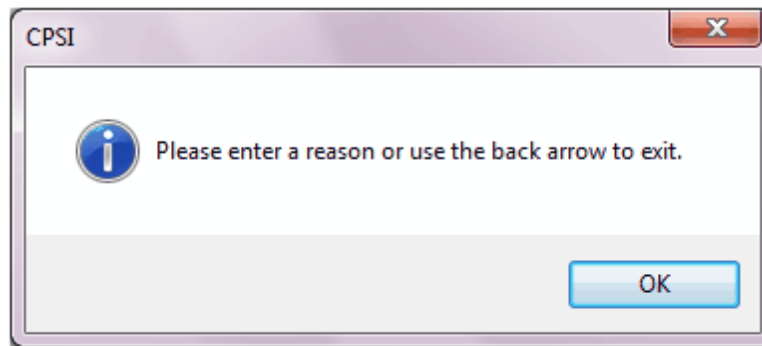
Select **OK** to return to medication administration.

Complete the medication administration options as outlined in [Medication Administration](#). If a warning was generated when this administration was scanned and **Update Pending** or **Save/View Pending** is selected, the following alert will appear: "Patient will exceed the max dosage of Acetaminophen in a 24 hour period. Enter a reason to proceed:"



Maximum Dose Warning

Enter an **override reason** and then select **OK** to proceed with the administration process. If **OK** is selected and an override reason is not entered, the following alert will appear: "Please enter a reason or use the back arrow to exit."



Warning Prompt

Select **OK** to return to the Maximum Dose Warning screen. Enter an override reason or select the **back arrow** to exit back to the Medication Administration screen.

NOTE: The process from the Medication Administration screen for acetaminophen administrations is the same with and without utilizing Medication Verification.

Diabetic Record

Specific items may be set up in Pharmacy Information as Diabetic Record medications. The following example shows an insulin order with a Blood Glucose Sliding Scale attached.

Select **MAR > Sliding Scale Insulin Medication Description**.

Update Pending Save/View Pending Change Date/Time Detail Results Protocol

Medication Administration

Patient Scanned. ✓

Medication: 54868361900 Insulin REG (Humulin R) 100U/ML
 Action: Give Omit Discontinued
 Administered Time: Current Date and Time
 Scheduled Time: PRN
 Dose: 4 Unit(s)
 Waste Amount:
 Route: SUBCUTANEOUS
 Site: Right Upper Arm
 Intervention:
 Instructions:

Glucose Reference range: 65 - 100 mg/dl
 Last 2 Administration Sites:
 Right Upper Arm
 Last Blood Glucose Value: 188 mg/dl 07/18/2019 06:38 (WILLIAMS RN)
 Accept Last Recorded Value:
 New Blood Glucose Value: 188 mg/dl
 REG Insulin Low Dose SS 0730, 1130, 1630, 2100

Comment:
 Reason:
 Second Witness: mro4941 (BARBRA SMIT)
 Password: *****

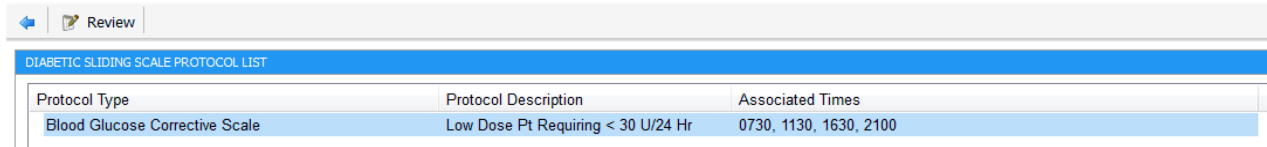
Medication Administration

- Maximum number of scans has been reached:** This alert will display if the Diabetic Record item has a quantity in the Maximum Number of Scans field (Item Master) and the medication has been scanned the required number of times.
- Medication:** This field displays the NDC number and medication description for the scanned medication.
- Action:** **Give** is the default action selected after a glucose level is documented. If this administration is going to be given, this option does not need to be addressed. If the administration is not going to be given, select the radio button for **Omit** or **Discontinue**. An omission reason must be documented when omitting an administration. See "Reason (Omit)" below for additional information.
- Administered Time:** This field displays the date and time the action will be documented as being performed. Change Date/Time may not be utilized in conjunction with Medication Verification. This field will always display "Current Time" when scanning.
- Scheduled Time:** This field will display "PRN" for sliding scale insulin orders and may not be modified.
- Dose:** This field will display the dose to be administered based on the glucose level documented and sliding scale being used. For non-protocol orders, users may document the dose without the field being grayed out. For a protocol order, this field may not be modified. The **Dose** field is disabled for Blood Glucose Level Orders and Carbohydrate Count Orders.
- Unit:** This field displays the unit entered via order entry and may not be modified. The **Unit** field is disabled for Blood Glucose Level Orders and Carbohydrate Count Orders.

- **Route:** This field displays the route entered via order entry. This field may not be modified. The **Route** field is blank for Blood Glucose Level Orders and Carbohydrate Count Orders.
- **Site:** This option is only available for medications with the following routes: IV, Intramuscular, Subcutaneous, and Transdermal. Select the drop-down menu to display a list of the facility-defined sites in the Sites table. The sites that display for selection should be route-specific based on table setup. Select the site. This field is required for IV/IM/SubQ/Transdermal medications. If the user attempts to update/save this administration without selecting a site, the following message will display: "Required fields: Site." Select **OK** to return to Medication Administration screen. "Site" will display in red font and a red asterisk will display to the right of the drop-down menu. Select a site to continue. The **Site** field is disabled for Blood Glucose Level Orders and Carbohydrate Count Orders.
- **Intervention:** If needed, select the applicable intervention from the drop-down. "Other" may be selected to type in an intervention.
- **Instructions:** This field displays instructions entered via order entry. This field may not be modified.
- **Reason (Omit):** This option is available for medications when **Omit** is the selected action. Select the drop-down menu to display a list of the facility-defined omit reasons in the Omit Reason table. Select the reason or choose **Other** to type a reason. This field is required when omitting a medication administration. If the user attempts to update/save this administration without selecting an omit reason, the following message will display: "Required fields: Reason." (See figure above.) Select **OK** to return to Medication Administration screen. "Reason" will display in red font and a red asterisk will display to the right of the drop-down box. Select an omit reason to continue.
- **Glucose Reference Range:** This field displays the reference range based on the reference range entered in the Diabetic Record Control Table.
- **Last 2 Administration Sites:** This field displays the last two administration sites documented via Diabetic Record.
- **Last Blood Glucose Value:** This field displays the last blood glucose value with units of measure (mg/dl) documented along with the date and time the entry was made and the initials of the employee who documented the value.
- **Accept Last Recorded Value:** Select this check box to use the last recorded glucose value for an administration with a protocol order. In addition, this may be used with non-protocol administrations with a route of subcutaneous, IV, or IV push.
- **New Blood Glucose Value:** If a protocol is attached, this is a required field. If the **Accept Last Recorded Value** check box was selected, that value will populate the box along with units of measure (mg/dl). A new value may be keyed in the box. If a dose of insulin should be administered based on the sliding scale, the dose to be given will populate the **Dose** field.
- **Sliding Scale Drop-Down:** The sliding scale drop-down will display the sliding scale currently in use based on the time of the administration. If multiple sliding scales are associated with the order and the TruBridge EHR is displaying the wrong sliding scale, select the correct sliding

scale from the drop-down. The blood glucose check times associated with the sliding scale display to the right of the drop-down. The drop-down menu is disabled for Blood Glucose Level, Carbohydrate Count, and Scheduled Insulin Orders.

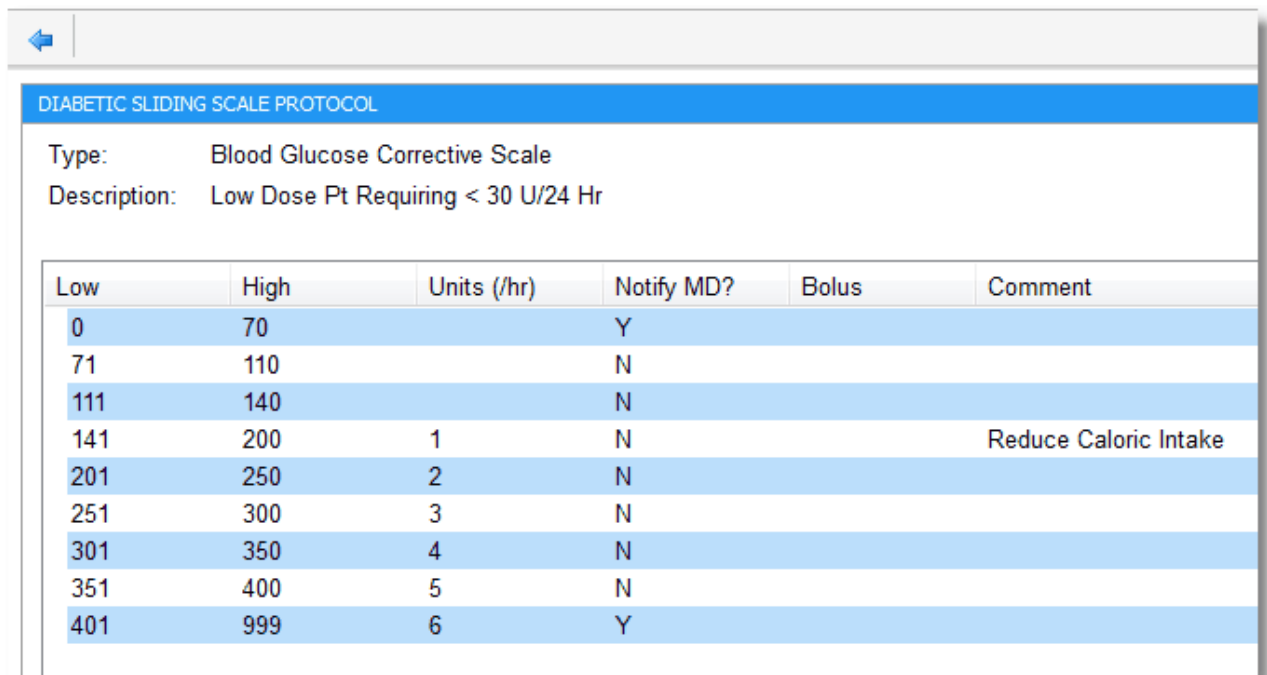
To view the details of a sliding scale, select **Protocol** from the action bar. The Diabetic Sliding Scale Protocol List will display.



Protocol Type	Protocol Description	Associated Times
Blood Glucose Corrective Scale	Low Dose Pt Requiring < 30 U/24 Hr	0730, 1130, 1630, 2100

Diabetic Sliding Scale Protocol List

The Protocol Type, Protocol Description, and Associated Times for blood glucose checks will display for each sliding scale associated with the order. Select the sliding scale. Then select **Review** to display the Diabetic Sliding Scale Protocol screen.



Low	High	Units (/hr)	Notify MD?	Bolus	Comment
0	70		Y		
71	110		N		
111	140		N		
141	200	1	N		Reduce Caloric Intake
201	250	2	N		
251	300	3	N		
301	350	4	N		
351	400	5	N		
401	999	6	Y		

Diabetic Sliding Scale Protocol

Select the **back arrow** to return to the Diabetic Sliding Scale Protocol List. Select another sliding scale to review or the **back arrow** to return to the Medication Administration screen. The **Protocol** option is disabled for Blood Glucose Level, Carbohydrate Count, and Scheduled Insulin Orders.

To exit the Medication Administration screen without saving the administration, select the **back arrow** from the action bar. The following prompt displays: "Exiting will remove changes to this medication. Would you like to proceed?" Select **Yes** to return to the MAR without saving the documented data. Select **No** to remain on the Medication Administration screen.

To view Order Detail, select **Detail**. See [Order Detail](#) for additional information on this option.

To update the MAR with data documented on the current medication, select **Update Pending**. The MAR will display with same filter view selected when the medication was scanned.

To save the current data entered for the administration without updating the administration to the MAR, select **Save/View Pending**. The MAR will display with a column to view pending orders.

Select **Update All Pending** from the action bar to update the pending administrations to the MAR or **Remove All Pending** from the action bar to remove the pending administrations without updating them to the MAR. The Pending column will no longer display on the MAR.

When the **Diabetic Record** is selected as the MAR Display filter, three additional options are available via the action bar:

- **Cumulative View:** This option displays a cumulative listing of Diabetic Record documentation. The following information, if documented, displays for each entry type:
 - **Diabetic Protocol Orders and Scheduled Orders:**
 - Line One: Date, Time, Medication Name, Type (Blood Glucose or Carbohydrate), Level, Dose (Omitted or Discontinued if none given), and Bolus
 - Line Two: Employee, Intervention or Reason, Medication Verification Status, and Assessment icon
 - **Blood Glucose Level Orders:**
 - Line One: Date, Time, Item Name, Type (Blood Glucose), Level, and Dose (Omitted, Discontinued, or blank)
 - Line Two: Employee, Intervention or Reason, Medication Verification Status and Assessment icon
 - **Carbohydrate Count Orders:**
 - Line One: Date, Time, Item Name, Type (Carb), Level, and Dose (Omitted, Discontinued, or blank)
 - Line Two: Employee, Intervention or Reason, Medication Verification Status, and Assessment icon
 - **Blood Glucose Level Only:**
 - Line One: Date, Time, Blood Glucose, and Level
 - Line Two: Employee and Intervention
 - **Carbohydrate Count Only:**
 - Line One: Date, Time, Carb Count, and Level
 - Line Two: Employee and Intervention
 - Select a **medication administration entry** to review the Medication Administration screen.
 - Select a **Blood Glucose level entry** or a **Carbohydrate Count entry** to review the BG/Carb/Intervention screen.
 - Amended entries will display with a strike-through.
 - If "Omitted" is the documented action, the reason for the omission will be included in the entry.
 - Select the **back arrow** to return to the MAR.

NOTE: Next to BG level, units from the reference range table will display for the above BG entries. An example of this is 299 mg/dl. These do not display for carbohydrate levels.

- **Graphical View:** Select this option to display the Diabetic Flow Sheet report. Select the **red X** to exit the PDF document. Select the **back arrow** to return to the MAR.
- **Intervention/BG/Carb:** Select this option to document a Blood Glucose Level, Carb Count Level, or Intervention for the Diabetic Record. If the "View Only" EMAR is being utilized, this option is disabled.
 - Blood Glucose Level: Key the level or select the radio button for **High, Low, No BG**, or **Not Addressed**. Select an **intervention** from the drop-down menu, if applicable. Select **Update** to save the entry or the **back arrow** to exit without saving.
 - Carb Count Level: Key the level, and select an **intervention** from the drop-down menu, if applicable. Select **Update** to save the entry or the **back arrow** to exit without saving.
 - Intervention: To document an intervention that is not related to a level, select the **No BG** radio button, then select the **intervention** from the drop-down menu. Select **Update** to save the entry or the **back arrow** to exit without saving.
 - Blood Glucose Level and Carb Count Level may not be documented on the same entry.
 - Select an entry from the MAR to review, amend, or remove documentation.

IV - With Components

An IV medication with components displays as follows in the Medication Administration screen:

The screenshot displays the Medication Administration interface. At the top, there are navigation buttons: Update Pending, Save/View Pending, Change Date/Time, Detail, and Results. The main heading is 'MEDICATION ADMINISTRATION' with a status indicator 'Medication Not Scanned.' Below this, the 'Alternating Components' section shows medication details: Medication (D5 1/2 NS W/KCL 20 MEQ MVI DAILY), Action (Give selected), Administered Time (Current Date and Time), Scheduled Time, Dose (1000 ML), Route (IV), Site (Left Arm), and Instructions (D5 1/2 NS W/KCL 20 MEQ MVI DAILY). A Comment, Reason, and Pain F/S field are also present. On the right, the 'Components' list is shown, containing three items: 'D5 1/2NS : 1000ML 1000ML', 'KCL IV : 20 MEQ/10 ML* 20MEQ', and 'MULTIVITAMINS INJ (MVI-12,MVI 9+3) 10ML'. A red box highlights the entire components list, and a red arrow points to the 'KCL IV' component.

IV with Components

Linked Orders

If a medication is scanned that is linked to three or more orders, the Medication Administration screen will display a "Multiple Medication" link above the medication description.

← Update Pending Save/View Pending Change Date/Time Detail Results

Medication Administration

Medication Scanned.

[Multiple Medication](#)

Medication: **MEPERIDINE INJ**

Action: Give Omit Discontinue

Administered Time: **Current Date and Time**

Scheduled Time:

Dose:

Unit:

Route: **IVP**

Site:

Instructions:

Comment:

Reason:

Pain F/S:

Second Witness:

Password:

Medication Administration

Select the **Multiple Medication** link to display the MAR. The MAR display will be filtered to linked orders for the selected medication. It appears in view-only mode.

Update All Pending Remove All Pending Date View Medication Report Color Legend Clinical Monitoring Refresh

Medication Administration Record Current Date and Time

MAR Display: Include Discontinued Medications

Date range: -

	09/02/2015 00:00	09/01/2015 20:00	09/01/2015 16:00	09/01/2015 12:00	09/01/2015 08:00	09/01/2015 04:00	09/01/2015 00:00
MEPERIDINE INJ Dose: 50 MG EVERY 4 HOURS (Q4H) IVP	00:36	20:36	16:36	12:36	08:36	04:36	00:36
PROMETHAZINE (PHENERGAN) INJ Dose: 25 MG EVERY 4 HOURS (Q4H) IVP	00:36	20:36	16:36	12:36	08:36	04:36	00:36
SODIUM CHLORIDE(BACTERIOSTATIC)FLUSH SYR Dose: 1 ML EVERY 4 HOURS (Q4H) IVP	00:36	20:36	16:36	12:36	08:36	04:36	00:36

Medication Administration

If a medication is scanned that is linked to one order, the Medication Administration screen will display the following text label above the medication description: "Linked to: XXXX."

Medication Administration
Medication Scanned.

Linked to: PROMETHAZINE (PHENERGAN) INJ

Medication: **MEPERIDINE INJ**

Action: Give Omit Discontinue

Administered Time: **Current Date and Time**

Scheduled Time:

Dose:

Unit:

Route: IVP

Site:

Instructions:

Comment:

Reason:

Pain F/S:

Second Witness: (BARBRA SMIT)

Password:

Medication Administration

Complete the medication administration options as outlined in [Medication Administration](#).

If **Update Pending** or **Save/View Pending** is selected, or a medication is scanned that is not contained in the link, the following alert will display: "Linked orders have not been completed, select Next Link." Select **OK** to return to the Medication Administration screen.

To exit the Medication Administration screen without saving the administration, select the **back arrow** from the action bar. The following alert will display: "Exiting will remove changes to this medication. Would you like to proceed?" Select **Yes** to return to the MAR without saving the documented data or **No** to remain on the Medication Administration screen.

To proceed with administration for the remaining medications in the link, you user must scan the next linked medication.

Once all medications in the link have been addressed, the **Update Pending** and **Save/View Pending** options will be enabled on the action bar. Medication administration may be completed as outlined in [Medication Administration](#).

If a linked medication is selected directly from the MAR and is to be given without using Medication Verification, "Next in Link" is added to the action bar. After all administration data is entered for the currently selected medication, select **Next in Link** to continue with administration for all linked medications.

The **Update Pending** and **Save/View Pending** options will be disabled until all medications in the link have been addressed.

Medication Waste

Specific items may be set up in *Pharmacy Information Page 1* to automatically capture the amount wasted or to prompt to capture the amount wasted. Please refer to the [Pharmacy Setup](#) User Guide for more information.

Waste Amount fields will display on the Medication Administration screen for non-IV medications. Waste will automatically calculate for IV medication orders and no waste amount fields will display.

NOTE: *Medication Waste will use the behavior controls for administering medications. If the user can administer medications, then they can update the waste log. If they do not have access to administer, then they cannot update the waste log via the EMAR.*

Select **Charts > MAR** and locate the appropriate medication order.

The following example shows a non-IV order that is set up to automatically capture waste.

← Update Pending Save/View Pending Change Date/Time Detail Results

Medication Administration

Medication: **MORPHINE INJ**
Action: Give Omit Discontinue
Administered Time: **Current Date and Time**
Scheduled Time:
Dose: Original Dose: 4 MG
Administer Amount: **0.75 ML Solution**
Waste Amount:
Route: **IM**
Site:
Instructions: MAY GIVE 2-4MG
FOR PAIN LEVELS 5-10
CALL IF PAIN >7/10
Comment:
Reason: *
Pain F/S:
Second Witness: *
Password: *

Medication Administration - Waste Amount (Automatically Captured)

The next example shows a non-IV order that is set up to prompt when capturing waste. Nursing will be required to select the **Verified** check box to the right of the **Waste Amount** fields to confirm that the amount is correct.

Medication Administration

Medication: **MORPHINE INJ**

Action: Give Omit Discontinue

Administered Time: **Current Date and Time**

Scheduled Time:

Dose: Original Dose: 4 MG

Administer Amount: **0.75 ML Solution**

Waste Amount: Verified:

Route: **IM**

Site: *

Instructions: MAY GIVE 2-4MG
FOR PAIN LEVELS 5-10
CALL IF PAIN >7/10

Comment:

Reason: *

Pain F/S:

Second Witness: *

Password: *

Medication Administration - Waste Amount (Prompt)

NOTE: If IV medications are set up for waste, the system will automatically calculate and capture the waste. No waste amount fields will display on the Medication Administration screen.

Nursing may review the wasted amounts in the administration details and via the **Report Dashboard > Medication Waste Report**.

If an administration that has waste is amended or removed, the waste log will also be updated. Nursing may only **Amend** or **Remove** information captured via medication administration through the MAR.

PCA Infusion

PCA medications may be administered via Medication Verification. After the patient's wristband and medication label have been scanned, the Medication Administration screen will display.

NOTE: If scanning will not be used, select the **medication description** from the MAR.

If the PCA order is placed via Updated CPOE or Updated Order Entry, the first action that must be taken is to start the PCA. If a bolus dose was entered as part of the protocol during order entry, that dose will pull for administration. If a witness is required, the **Second Witness login** and **Password**

must be entered in the fields before updating/saving this administration. See [Witness Required](#) for additional information on witness documentation.

Select **Patient Chart > MAR > select a PCA medication.**

← Update Pending Assessment Change Date/Time Detail Results Drug Information

Medication Administration

Medication: **MORPHINE PCA (1MG/ML) 30ML**
Action: Start PCA Bolus: **2 MG** ml/hr
Second Witness:
Password:

Medication Administration

To start the PCA, select **Update Pending**. To exit without saving, select the **back arrow**.

After the PCA has been started, the full Medication Administration screen will display for documentation when the medication description is selected from the MAR.

←
Update Pending
Assessment
Change Date/Time
Detail
Results
Protocol

Medication Administration

Entered By:

Medication: **MORPHINE PCA (1MG/1ML) INJ 30ML**

Action: Effective

Previous Amount: 25.5

Amount Used: MG

Left in Syringe: MG *

Amount Wasted: MG *

Total Administered Dose: 2 MG

Ineffective PCA Options: *

Instructions:

Second Witness: *

Password: *

Medication Administration

- **Medication:** This field displays the medication description for the scanned medication. The **Drug Information** icon to the right of the medication description may be selected to view additional information about the selected medication. See [Order Detail](#) for additional information on this option.
- **Action:** Select the action that is to be documented from the drop-down menu.
 - Effective
 - Ineffective
 - Bolus
 - Discontinued (Left in Syringe must equal zero.)
- **Previous Amount:** This field displays the amount left in the syringe after the last action was documented. The **Amount Purged from Tubing** and **Bolus Dose** (if entered as part of the protocol) are automatically deducted when the PCA is started. This field may not be modified.
- **Amount Used:** Key the amount of the medication used since the last action was documented in this field. Units are listed to the right of the field. The system may be set to default to "Left in Syringe." If so, this field would be disabled, and the value would automatically pull after the amount of medication left in the syringe was entered.

- **Left in Syringe:** Key the amount of the medication left in the syringe in this field. Units are listed to the right of the field. The system may be set to default to "Amount Used." If so, this field would be disabled, and the value would automatically pull after the amount of the medication used was entered.
- **Amount Wasted:** Key the amount of medication to be wasted if applicable. Units are listed to the right of the field.

NOTE: *If the item is set to capture waste and "Charge Upon Administration" is utilized, the **Amount Wasted** will be captured in the Medication Waste screen (waste log) when the amount left in syringe is zero.*

- **Total Administered Dose:** Displays the amount of this medication the patient has received, including previous syringes and previous orders. Units are listed to the right of the field.
- **Ineffective PCA Options:** This drop-down is disabled unless "Ineffective" is chosen as the action. If "Ineffective" is selected, a response must be selected from this drop-down before updating. This table is facility-defined.
- **Instructions:** This field displays instructions entered via order entry. This field may not be modified.
- If a witness is required, the **witness login** and **password** must be entered in the fields before updating/saving this administration. See [Witness Required](#) for additional information on witness documentation.

To exit the Medication Administration screen without saving the administration, select the **back arrow** from the action bar. The following prompt displays: "Exiting will remove changes to this medication. Would you like to proceed?" Select **Yes** to return to the MAR without saving the documented data. Select **No** to remain on the Medication Administration screen.

To update the MAR with data documented on the current medication, select **Update Pending**.

If the value calculated or entered for "Left in Syringe" equals zero, the following prompt is received when updating: "Discontinue order?" Select **Cancel** to return to the previous screen. Select **Yes** to discontinue the medication. Select **No** to load a new syringe.

PCA Protocol - Loading a New Syringe

Medication Name: MORPHINE PCA (1MG/ML) 30ML: PAIN MED SON ⓘ

Route: IV

Units: MG

Bolus(Loading Dose): 0 MG

Patient Administered Dose: 1 MG

Continuous Infusion Rate: 2 MG/HR

Lockout Interval: 10 MINUTES

4-Hour Limit: 40 MG

Amount Purged in Tubing: 0 MG

Initial Syringe Amount: 30 MG

Instructions:

PCA Protocol - Loading a New Syringe

When loading a new syringe, the protocol in use populates the fields, with the exception of the bolus dose and the amount purged from tubing. Select a field to modify it. **Clear** may be selected to remove all values from the protocol. Select **Save** to update the new protocol or the **back arrow** to exit.

Additional options available from the Medication Administration action bar include:

- **Assessment:** Select this option to document data gathered when performing PCA-related patient assessments. An assessment may be performed independently from an administration. Address the questions as needed. The questions in this section are hard-coded and may not be modified. Select **Clear** to remove all documentation. Select the **back arrow** to exit without saving the documentation, or select **Update** to save and exit. Vital signs documented via PCA Assessment are viewable via the Vitals application. The vital signs include:
 - Pulse and Site
 - Respiration
 - Blood Pressure (Systolic and Diastolic), Position, and Site
 - Pain Scale

- **Change Date/Time:** Select this option to back-time documentation.
- **Detail:** Select this option to display Drug Information. See [Order Detail](#) for additional information.
- **Results:** Select this option to view resulted labs associated with this medication.
- **Protocol:** Select this option to review or modify the current PCA Protocol. If required, the Second Witness fields must be addressed. See [Order Detail - PCA Infusion](#) for additional information.

The screenshot shows a web-based form titled "PCA Assessment". At the top, there are navigation buttons: a back arrow, "Update" with a refresh icon, and "Clear All" with an eraser icon. The form contains the following fields:

- Pulse:** Text input field with value "88".
- Respiration:** Text input field with value "16".
- Blood Pressure:**
 - Systolic:** Text input field with value "120".
 - Diastolic:** Text input field with value "75".
- Pain Scale:** Dropdown menu with "5 - Moderate Pain" selected.
- Adverse Reactions:**
 - None
 - Hives
 - Rash
 - Nausea
 - Vomiting
 - SOB
 - Other:
- Number of Demands:** Text input field with value "5".
- Number of Injections:** Text input field with value "3".
- Infusion pump cleared:**
- Tubing changed:**
- Site:** Dropdown menu with "Radial" selected.
- Position:** Dropdown menu with "Lying" selected.
- Site:** Dropdown menu with "Left Arm" selected.

PCA Assessment

NOTE: If a PCA order is discontinued by a provider, the order will display a status of "!DC Pending" via Order Chronology and remain active on the MAR so that final documentation against the order may be made. Once the medication is accessed and updated, the following message will display: "This was the final documentation after discontinue. This med is now inactive." If the final entry is amended or removed, the order will revert back to a status of Pending.

Vaccinations

Specific items may be designated as vaccinations in setup. When administering a vaccine, additional fields/options will be available on the Medication Administration screen to document vaccine information.

Select Patient Chart > MAR > select a vaccine medication.

MEDICATION ADMINISTRATION
Medication Not Scanned.

Medication: Pfizer-BioNTech COVID-19 Vaccine IM S
 Action: Give Omit Discontinue
 Administered Time: Current Date and Time
 Scheduled Time: 11/03/2021 07:54
 Dose: 30 MCG
 Administer Amount: Per Dose
 Route: IM
 Site: L. Gluteus Maximus
 Instructions:

CVX Codes: 208 COVID-19, mRNA, LNP-S, PF, 30 mcg/0.3 mL dose
 Lot Number: 123456
 Lot Expiration Date: 12/25/2021
 VFC Status:
 Vaccine Funding Source:
 Publicly Supplied:
 Vaccine Information Statement Reviewed:
 Vaccine Information Statement Version Date:
 Dose Number:
 Vaccine Series Complete:
 Subpotent:

Comment:
 Reason:
 Pain F/S:

Vaccine Medication Administration

- **CVX Code:** If multiple CVX codes are mapped to the CPT code associated with the vaccine being administered, the applicable CVX code may be selected from this drop-down. This field is not required.
- **Lot Number:** The Lot Number must be entered in order to complete medication administration. "Lot Number" will display in red font and a red asterisk will display to the right of the text box. Enter a Lot Number to continue. UNKNOWN may be entered in place of the Lot Number.
- **Lot Expiration Date:** The Lot Expiration Date (MMDDYYYY) must be entered in order to complete medication administration. The date may be keyed or the date picker may be used to select the date. If the user attempts to update/save this administration without completing this field, the "Lot Expiration Date" label will display in red font and a red asterisk will display to the right of the text box. Enter a Lot Expiration Date to continue.
- **VFC Status:** If applicable, select the patient's Vaccine for Children Eligibility Status from this drop-down.
- **Vaccine Funding Source:** If applicable, select the Vaccine Funding Source. Eight hard coded options display: Federal funds, Military funds, Other, Private funds, State Funds, Tribal Funds, Unknown, and Public.
- **Publicly Supplied?:** If applicable, select the check box to denote that the vaccine was publicly supplied.
- **Vaccine Information Statement Reviewed?:** If applicable, select the check box to document that the Vaccine Information Statement was reviewed with the patient and enter the review date in the text box provided. The date picker may be used to select the date.

- **Vaccine Information Statement Version Date:** If applicable, enter the version date (MMDDYYYY) of the Vaccine Information Statement used for review with the patient. The date picker may be used to select the date.
- **Dose Number:** If applicable, select Valid first dose, Valid second dose, Valid third dose, Valid fourth dose, Valid fifth dose, Valid sixth dose, Invalid dose, or Unknown validity.
- **Vaccine Series Complete:** If applicable, select Yes, No, or Unknown.
- **Subpotent:** Use the check box to indicate if the selected immunization was a subpotent immunization.

The following options are available from the action bar:

- **Back Arrow:** To exit the Medication Administration screen without saving, select the **back arrow** from the action bar. The following alert displays: "Exiting will remove changes to this medication. Would you like to proceed?" Select **Yes** to return to the Medication Administration screen without saving the documented data. Select **No** to remain on the screen.
- **Update Pending:** This option updates the MAR with data documented on the current medication.
- **Save/View Pending:** This option saves the current data entered for the administration without updating the administration to the MAR.
- **Change Date/Time:** Select this option to change the date and time stamp associated with documentation. This option is disabled while in Medication Verification mode.
- **Detail:** Select this option to view Order Detail for the medication. Select the **back arrow** to return to Medication Administration. See [Order Detail](#) for additional information on this option.
- **Results:** Up to two lab orders may be associated with a medication. If the orders have been resulted on the patient, they may be viewed by selecting **Results** from the action bar. Select the **back arrow** to return to Medication Administration.
- **Group/VIS Barcode:** If vaccine groups have been associated to the selected vaccine, the VIS information entered on the Medication Administration screen will be applied to each vaccine group. To address the vaccine groups individually, select **Group/VIS Barcode** from the action bar. Select the **Vaccine Group** from the drop-down and document the VIS information as noted above. If the user has a copy of the VIS, the barcode may be scanned into the **Barcode** field. After scanning the barcode, the description and **Vaccine Statement Version Date** will automatically populate. Select the **Cancel** to exit without saving. Select **OK** to save and exit. Repeat this process for each group.

Vaccine Group: 3 MMR
 Barcode: 21 VARICELLA
 Description: 3 MMR
 Vaccine Statement Reviewed: Date: 3/21/2017
 Vaccine Statement Version Date: 5/21/2010

Group/VIS Barcode - MMRV

NOTE: If multiple VIS dates exist when scanning a group vaccine, the message "See GROUP/VIS Barcode screen for all VIS dates" displays under the Vaccine Information Statement Version Date section.

Medication Administration
 Patient Armband Not Scanned

Medication: MMRV
 Action: Give Omit Discontinue
 Administered Time: Current Date and Time
 Scheduled Time: 03/22/2017 08:04
 Dose: 0.5 ML
 Administer Amount: Per Dose
 Route: IM
 Site:
 Instructions:
 Comment:
 Reason:
 Pain F/S:

CVX Codes: 94 MMRV
 Lot Number:
 Lot Expiration Date:
 VFC Status:
 Vaccine Funding Source:
 Publicly Supplied:
 Vaccine Information Statement Reviewed: 3/22/2017
 Vaccine Information Statement Version Date:
 - See GROUP/VIS Barcode screen for all VIS dates

Medication Administration = Multiple VIS Version Dates

NOTE: The **Group/VIS Barcode** option will remain available after an administration has been documented to allow for the information to be reviewed.

Witness Required

Specific items may be set up in Pharmacy Information to require a witness for medication administration. If a medication is scanned that requires a witness, two additional fields, **Second Witness** and **Password**, will display on the Medication Administration screen for the witness credentials to be entered.

The screenshot shows the Medication Administration interface with the following fields and values:

- Medication:** MORPHINE INJ
- Action:** Give (selected), Omit, Discontinue
- Administered Time:** Current Date and Time
- Scheduled Time:** [Dropdown menu]
- Dose:** 2 [Text input], MG [Dropdown menu]
- Administer Amount:** 0.5 ML Solution
- Route:** IVP
- Site:** [Dropdown menu] *
- Instructions:** MAY GIVE 2-4MG
FOR PAIN LEVELS 5-10
CALL IF PAIN >7/10
- Comment:** [Text input]
- Reason:** [Dropdown menu] *
- Pain F/S:**
- Second Witness:** [Text input] *
- Password:** [Text input] *

Medication Administration

The **Second Witness** and **Password** fields will be inaccessible until all required fields are addressed. Necessary fields display in red upon entry to alert the user that these are required. After all required administration fields have been addressed, the second witness fields become active. Once the **Second Witness** and **Password** information has been entered, the fields are disabled again. This applies to all types of orders, e.g., Non-IV, IV, Diabetic Record, and PCA.

- **Second Witness:** The witness user ID/login must be entered in this field before updating/saving this administration. The witness's name will display to the right of the field when the UBL is entered. If the user does not have security enabled to document as a witness, the following

prompt displays: "User is not allowed to be a witness." Select **OK** to return to the Medication Administration screen.

- **Password:** The password must be entered in this field before updating/saving this administration. If the password is entered incorrectly, the following prompt displays: "Invalid password." Select **OK** to return to the Medication Administration screen.

If the user attempts to update/save this administration without having a witness address these fields, the following prompt displays: "Required fields: Second Witness." Select **OK** to return to the Medication Administration screen. "Second Witness" and "Password" will display in red font and a red asterisk will display to the right of the text boxes. Have another user address the fields to continue.

NOTE: *If administration fields are changed prior to update/save, the second witness information will be removed and must be re-entered.*

Chapter 4 Charge Upon Administration (CUA)

4.1 Overview

In the traditional Point of Care Pharmacy application, charges generated from the administration of medications are not posted to a patient's account until the "End of Shift" process is performed for the patient. Charges generated when utilizing the MAR and Medication Verification post to the patient's account in real-time. This section discusses Charge Upon Administration (CUA) processes for the MAR and Medication Verification.

4.2 Charge Upon Administration

In order to utilize CUA, the following parameters must be met:

- **Charge Meds at Administration** must be selected in Pharmacy Information for the item being administered. See the *Pharmacy Information* section of the [Pharmacy Setup User Guide](#).
- **Charge Medications at Administration** must be selected in the Department Table for the department in which the patient is registered. See the *Department Table, Page 3* section of [Table Maintenance - Control User Guide](#).

If the parameters noted above are met, a charge will be posted to the patient's account when a medication administration is updated as **Given** via the MAR. Medication Verification may or may not be used. The service date for the charge will be the "administered" date for the medication administration. If **Change Date/Time** is utilized, the service date reflects the date selected via Change Date/Time.

If **Omit** or **Discontinue** is selected for an administration, a charge is not generated. If **Patient's Own** is selected for an item on the patient's pharmacy profile, no charges will generate regardless of the action selected when the medication is administered. CUA may not be utilized in conjunction with PCA Infusion.

If **Remove Entry** is used to strike an administration for which a charge has been posted via CUA, a credit will be posted to the patient's account for the administration that has been removed.

If **Amend** is used to modify an administration for which a charge has been posted via CUA, a credit will be posted to the patient's account for the original administration and then a new charge will be posted for the modified administration.

Select the **Charges** application and then **Review** to review the charges posted to the patient's account.

Chapter 5 Reports

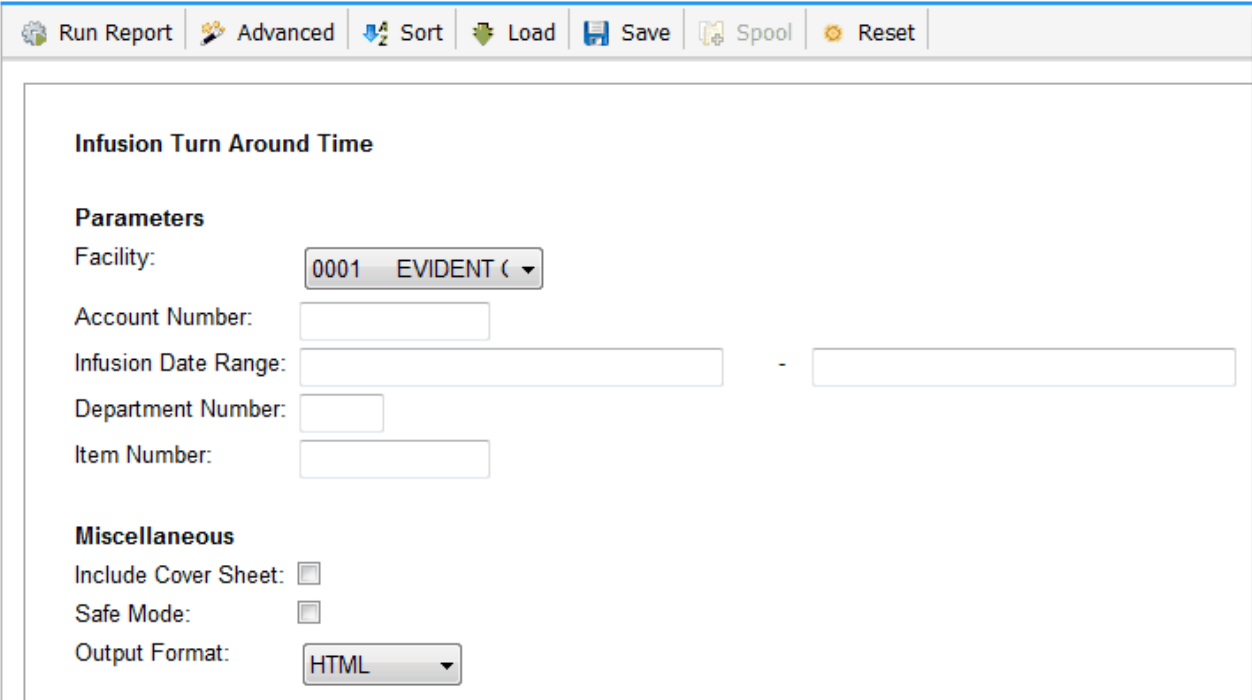
5.1 Overview

This section discusses reports that may be generated for the MAR and Medication Verification.

5.2 Infusion Turn Around Time Report

The *Infusion Turn Around Time Report* utilizes MAR and Order Detail documentation to automatically calculate the total infusion time. It may be used to streamline billing processes. The *Infusion Turn Around Time Report* is generated using the Report Writer application. See the [Report Writer](#) document for detailed instructions on using Report Writer.

To access the report, select **Report Dashboard > Infusion Turn Around Time**.



The screenshot shows a web-based configuration interface for the 'Infusion Turn Around Time' report. At the top, there is a toolbar with icons and labels for 'Run Report', 'Advanced', 'Sort', 'Load', 'Save', 'Spool', and 'Reset'. Below the toolbar, the main content area is titled 'Infusion Turn Around Time' and is divided into two sections: 'Parameters' and 'Miscellaneous'. The 'Parameters' section includes: 'Facility:' with a dropdown menu showing '0001 EVIDENT ()'; 'Account Number:' with an empty text input field; 'Infusion Date Range:' with two empty text input fields separated by a hyphen; 'Department Number:' with an empty text input field; and 'Item Number:' with an empty text input field. The 'Miscellaneous' section includes: 'Include Cover Sheet:' with an unchecked checkbox; 'Safe Mode:' with an unchecked checkbox; and 'Output Format:' with a dropdown menu showing 'HTML'.

Infusion Turn Around Time

The following parameters may be used to delimit the data that appears on the report.

- **Facility:** Select the facility for which the report should generate. All other facilities will be excluded.
- **Account Number:** Enter an account number to generate the report for a specific patient account. All other patient accounts will be excluded.

- **Infusion Date Range:** Enter a date range for which the report should generate. Infusion orders with one or more Complete Infusion entries documented within the date range will appear on the report. All other infusion orders will be excluded.
- **Department Number:** Enter a department number in order to generate the report for a specific department. All other departments will be excluded.
- **Item Number:** Enter a pharmacy item number in order to generate the report for a specific item. All other items will be excluded.

Once the desired parameters are set, select a document type from the **Output Format** drop-down and then select **Run Report**.

Infusion Turn Around Time Report

07/20/2015 15:43		EVIDENT COMMUNITY HOSPITAL				1
		Infusion Turn Around Time				emar_infusion_turn_around_time.template
		07/18/2015 00:00:00 - 07/20/2015 15:04:00				
Name	Account Number	DOB	Stay Type	Department		
BOWDEN CAUSEY ANNE	357861	06/15/1973	1	003 NS Medical-Surgical		
Item	CPT		Start Date/Time	Complete Date/Time	Total Time	
210153 D5 1/2NS : 1000ML			07/17/2015 15:00:00	07/18/2015 12:00:00 *	20:00:00	
Name	Account Number	DOB	Stay Type	Department		
SMITH ELLA KATHERINE	357388	02/09/1943	1	003 NS Medical-Surgical		
Item	CPT		Start Date/Time	Complete Date/Time	Total Time	
3814530 NAACL 0.45% SOLN 1000 ML	J7030		07/20/2015 04:00:00	07/20/2015 15:00:00	11:00:00	

The following information displays for each patient:

- **Name**
- **Account Number**
- **Date of Birth**
- **Stay Type**
- **Department**
- **Infusion Information:** Multiple items may display for each patient. The infusion information that displays includes the following:
 - **Item:** This area displays the item number and medication description.
 - **CPT:** This area displays the CPT code that was entered on page one of the Item Master.
 - **Start Date/Time:** This area displays the date and time that the item was first documented as Given/Started on the MAR.

- **Complete Date/Time:** This area displays the documentation date and time of the most recent Complete Infusion entry in Order Detail for the item. An asterisk denotes that an Pause Infusion has been documented between the Start Infusion and Complete Infusion.
- **Total Time:** This area displays the infusion turn around time. The system calculates the total time using the Start Date/Time and Complete Date/Time described above. If Pause Infusion and Start Infusion data is documented on the item, the amount of time that passes between the Pause Infusion date and time and Start Infusion date and time is deducted from the total time. Additionally, if multiple bags are administered, the system deducts the amount of time that passes between the Complete Infusion date and time and the next Given date and time.

5.3 Medication Omissions Report

The *Medication Omissions Report* displays excluded medications. The *Medication Omissions Report* may be accessed via the Report Dashboard. You have the ability to run the report by account number, date range, or department, and this report may be scheduled to run through Report Scheduler. In addition, accessing the report will show under the PHI option of the Security Audit Log.

To access the report, select **Report Dashboard > Medication Omissions Report**.

07/16/2019 06:51	EVIDENT COMMUNITY HOSPITAL Medication Omissions Report			0 medication_omissions.template	
Patient Name:	Visit Number:	Department:	Medication:	Omit Date/Time:	Schedule Date/Time:
Employee: (JSH, RN)	357167	Medical/Surgical Omit Reason: HOLD ORDER	NS D 45% 1000MLFS	07/16/2019 06:51 Comment:	

Medication Omissions Report

The following is included on the report:

- Patient Name
- Visit Number
- Department
- Medication
- Omit Date/Time
- Schedule Date/Time
- Employee Name/Credentials
- Omit Reason
- Comment

5.4 Medication Report

The *Medication Report* contains two types of medication orders: **Medication Administration** and **Undocumented Medication Orders**.

- The **Medication Administration** section lists medication administrations per medication.
- Medications that have not been addressed display in the **Undocumented Medication Orders** section.

To access the Medication Report, select **Medication Report** from the MAR action bar.

←
🔍 View PDF

Medication Report

Filter: Medication Administration Undocumented Medication Orders

Include stricken:

Medication Administration

TEST humuLIN R 100 UNITS/ML 1 UNIT(S) SUB Q ACHS
 Start: 10/27/2023 08:47 Stop: 10/30/2023 17:42
 - 10/30/2023 17:42 BG= Omitted: DISCONTINUED (Michelle Mason)

LISINAPRIL 20 MG TAB 5 MG PO DAILY
 Start: 10/27/2023 11:36 Stop: 11/01/2023 11:36
 - 04/25/2024 16:24 Given 5 MG ORAL DAILY (Michelle Mason)
 - 05/14/2024 15:53 Given 5 MG ORAL DAILY (Michelle Mason)

VITAMIN B-12 TABLET 1000 MCG PO DAILY
 Start: 10/27/2023 11:36
 - 05/14/2024 15:53 Given 1000 MCG ORAL DAILY (Michelle Mason)

CeFAZolin(ANCEF)IVPB-1GM/D5W 50ML PREMIX 100 ml/hr IVPB Q8H* 50 ML
 Start: 03/11/2024 10:32 Stop: 05/28/2024 14:32
 Indication: Chronic bronchitis
 - 05/28/2024 14:32 DISCONTINUED (Michelle Mason)

KLOR-CON 20MEQ TAB (POTASSIUM) 20 MEQ PO X1
 Start: 03/11/2024 11:03 Stop: 03/11/2024 11:03
 - 05/14/2024 15:53 Given 20 MEQ ORAL X1 (Michelle Mason)

CeFAZolin(ANCEF)IVPB-1GM/D5W 50ML PREMIX 100 ml/hr IVPB Q8H* 50 ML
 Start: 05/28/2024 14:32 Stop: 06/11/2024 14:32
 Indication: Urinary tract disorders
 Instruction: TEST TEST TEST TEST TEST TEST TEST TEST TEST TEST
 - 06/12/2024 15:34 Started 50 ML Connect exist. site Q8H* (Michelle Mason)
 Start: 06/26/2024 16:06
 - 06/26/2024 16:09 Assessment (MLM RN)
 Pulse: 99 Location: Pulse Ox
 Respirations: 16
 O2 Sat: 97
 Number of Demands: 2
 Number of Injections: 1
 Infusion Pump Cleared: No
 Tubing Changed: No

Medication Record

The default display for the Medication Report includes the **Medication Administration** section and the **Undocumented Medication Orders** section. Documentation from the entire stay displays for the current visit. The display may be filtered by section.

To filter the display, select the section to be viewed from the **Filter by Selected Sections** list. Then, select **Process**. To return to the default display, select **Clear Section Filter** and then **Process**.

Amended and removed administrations may be included in the Medication Administration section by selecting the **Include stricken** check box and then **Process**. These administrations will display with a strike-through.

Medication Administration Section

The Medication Administration section displays information for each medication based on the order type.

• **Non-IV Medications**

○ **Order Information Line**

- Medication Name
- Dose
- Units
- Frequency
- Route

○ **Start/Stop Line**

- **Indication Line (if required)** This will include the indication and, in addition, will also include PRN reason, if given during the order entry process.

○ **Instruction Line (if documented)**

○ **Administration/Action Line**

- Date and Time
- Action: Given/Started, Omitted, or Discontinued
 - If the administration is omitted, the omission reason will display after the action.
 - Dose, Units, and Site will not display for omitted or discontinued entries.
- Dose
- Units
- Site
- Reason
- Comment (also included for PRN medications)
- Employee Credentials - The system displays the user's name and credentials found in Payroll at the time an administration was carried out instead of the most recent Payroll information.
- Witness Credentials - The system displays the witness name and credentials listed in Payroll at the time of the administration including PCA medications.

○ **Information Line**

- Assessment: Date and Time
- Action: Assessment and Employee

• **IV Medications**

○ **Order Information Line**

- Medication Name

- Flowrate
- Frequency
- Route

- **Start/Stop Line**

- **Indication Line (if required)**

- **Instruction Line (if documented)**

- **Administration/Action Line**
 - Date and Time
 - Action: Given/Started, Omitted or Discontinued
 - If the administration is omitted, the omission reason will display after the action.
 - Dose, Units, and Site will not display for omitted or discontinued entries.
 - Dose
 - Units
 - Site
 - Reason
 - Comment
 - Employee Credentials
 - Witness Credentials

- **Additional Information Line:** Infusion options display chronologically in relation to the administration to which they are associated.
 - Complete Infusion: Date and Time; Action: Complete Infusion, Comment and Employee Credentials
 - Titrate: Date and Time; Action: Titrate, Comment and Employee Credentials
 - Pause Infusion: Date and Time; Action: Pause Infusion, Comment and Employee Credentials
 - Start Infusion: Date and Time; Action: Start Infusion, Comment and Employee Credentials
 - Assessment: Date and Time; Action: Assessment and Employee Credentials

- **Diabetic Record Medications**
 - **Order Information Line**
 - Medication Name
 - Frequency: Per Protocol
 - Protocol Frequency

 - **Protocol Line:** Protocol Title

 - **Start/Stop Line**

 - **Administration/Action Line**
 - Date and Time
 - Blood Glucose Level with units of measure mg/dl or Carbohydrate Count
 - Action: Given/Started, Omitted or Discontinued
 - If the administration is omitted, the omission reason will display after the action.
 - Dose, Units and Site will not display for omitted or discontinued entries.
 - Dose

- Units
- Site
- Protocol Name
- Reason
- Intervention
- Employee Credentials
- Witness Credentials
- **Additional Line Information**
 - Assessment: Date and Time
 - Action: Assessment and Employee Credentials
- **PCA Medications**
 - **Order Information Line**
 - Medication Name
 - Frequency: Per Protocol
 - **Start/Stop Line**
 - **Administration/Action Line**
 - Date and Time
 - Action: Start PCA, Effective, Ineffective, Bolus, New Syringe, New Protocol or Discontinued
 - Employee Credentials
 - Witness Credentials
 - **Information Line**
 - Assessment: Date and Time
 - Action: Assessment and Employee Credentials

Undocumented Medication Orders Section

The Undocumented Medication Orders section displays order information for each medication based on the order type.

- **Non-IV Medications**

- Medication Name
- Dose
- Units
- Frequency
- Route

- **IV Medications**

- Medication Name
- Flowrate
- Frequency
- Route

- **Diabetic Record Medications**

- Medication Name
- Frequency: Per Protocol
- Protocol Frequency

- **PCA Medications**

- Medication Name
- Frequency: Per Protocol

Select the **back arrow** from the action bar to return to the MAR or **View PDF** to generate a PDF document of the on-screen display.

Medication Record Report

<p>TRUBRIDGE HOSPITAL/Fac2 address 1 field/251-555-2288 JOE WHITE 971746/70001381/01/10/2001 09/14/2023 07:58/101-B</p> <hr/> <p>Medication Administration TEST humuLIN R 100 UNITS/ML 1 UNIT(S) SUB Q ACHS Start: 10/27/2023 08:47 Stop: 10/30/2023 17:42 - 10/30/2023 17:42 BG= Omitted: DISCONTINUED (Michelle Mason) LISINOPRIL 20 MG TAB 5 MG PO DAILY Start: 10/27/2023 11:36 Stop: 11/01/2023 11:36 - 04/25/2024 16:24 Given 5 MG ORAL DAILY (Michelle Mason) - 05/14/2024 15:53 Given 5 MG ORAL DAILY (Michelle Mason) VITAMIN B-12 TABLET 1000 MCG PO DAILY Start: 10/27/2023 11:36 - 05/14/2024 15:53 Given 1000 MCG ORAL DAILY (Michelle Mason) CeFAZolin(ANCEF)IVPB-1GM/D5W 50ML PREMIX 100 ml/hr IVPB Q8H* 50 ML Start: 03/11/2024 10:32 Stop: 05/28/2024 14:32 Indication: Chronic bronchitis - 05/28/2024 14:32 DISCONTINUED (Michelle Mason) KLOR-CON 20MEQ TAB (POTASSIUM) 20 MEQ PO X1 Start: 03/11/2024 11:03 Stop: 03/11/2024 11:03 - 05/14/2024 15:53 Given 20 MEQ ORAL X1 (Michelle Mason) CeFAZolin(ANCEF)IVPB-1GM/D5W 50ML PREMIX 100 ml/hr IVPB Q8H* 50 ML Start: 05/28/2024 14:32 Stop: 06/11/2024 14:32 Indication: Urinary tract disorders Instruction: TEST TEST TEST TEST TEST TEST TEST TEST TEST TEST - 06/12/2024 15:34 Started 50 ML Connect exist. site Q8H* (Michelle Mason) Start: 06/26/2024 16:06 - 06/26/2024 16:09 Assessment (MLM RN) Pulse: 99 Location: Pulse Ox Respirations: 16 O2 Sat: 97 Number of Demands: 2 Number of Injections: 1 Infusion Pump Cleared: No Tubing Changed: No MORPHINE PCA (1MG/ML) 30ML 1 EA PCA PRN : Per Protocol - 06/26/2024 16:09 Start PCA Bolus: 0 Purged: 0 MG Left: 30 (Michelle Mason) - 06/26/2024 16:09 Effective Used: 1 Left: 29 Wasted: 0 (Michelle Mason)</p> <p>Undocumented Medication Orders ALPRAZOLAM TABLET 0.25MG 0.25 MG IM PRN</p>

NOTE: The EMAR Medication Report will purge to Clinical History. If the account is NOT in Clinical History at the time the report is opened, it will show the most recently updated information. Once the account purges to Clinical History, the report will become static. The report will automatically display stricken data.

NOTE: If user has the Super Amend behavior control, their amended entries will appear on the Medication Report. See [Super Amend Behavior Control](#).

5.5 Patient Medication List

The *Patient Medication List Report* displays a list of medications, times due, patient name, dose and route that can be customized by type, patient, and other options.

To access the Patient Medication List Report, select **Charts > Medication Verification > PDF**.

The screenshot shows the 'PATIENT MEDICATION LIST' interface. At the top, there are filter tabs: Nurse Filters, Department Filters, Pharmacy Order Filters, Frequency Filters, Scheduled Filters, and a highlighted PDF icon. Below the filters, there are checkboxes for 'My Patients', 'Medical/Surgical', and various medication types like 'Non IV', 'Controlled Substances', etc. A table below lists medication entries with columns for Due, Patient Name, Account Number, Room, Medication Name, Dose, and Route.

Due	Patient Name	Account Number	Room	Medication Name	Dose	Route
PRN TID	HERMAN MATTHEW	358103	003-1	LORAZEPAM(ATIVAN)TAB :1MG	1 MG = 1 Tablet	PO
PRNQ6H	HERMAN MATTHEW	358103	003-1	ACETAMINOPHEN (TYLENOL) 500MG TABLET	500 MG = 1 Tablet	PO

PDF Option for Patient Medication List Report

The screenshot shows the 'Patient Medication List' report output. It includes the TruBridge Hospital logo, the report title 'Patient Medication List', and the user 'TRINA SCHIRA' with the date '07/31/2024' and time '10:39'. Below the header, there is a 'Report Selections:' section and a table with columns for Due, Patient name, Account Number, Room, Medication Name, Dose, and Route.

Due	Patient name	Account Number	Room	Medication Name	Dose	Route
PRN	MULDER FOX	20001623		MORPHINE PCA 30MG/D5W 30ML	1 EA	INTRAVENOUS
07/31/2024 09:00	MULDER FOX	20001623		RYAN WASTE ABILIFY ORAL TABLET 10MG	10 MG = 1 Tablet	ORALLY
07/31/2024 21:00	MULDER FOX	20001623		RYAN WASTE ABILIFY ORAL TABLET 10MG	10 MG = 1 Tablet	ORALLY
07/31/2024 08:00	MULDER FOX	20001623		CALCIUM GLUCONATE 10% INJ 10ML	10 ML	IV
07/31/2024 14:00	MULDER FOX	20001623		CALCIUM GLUCONATE 10% INJ 10ML	10 ML	IV
07/31/2024 21:00	MULDER FOX	20001623		CALCIUM GLUCONATE 10% INJ 10ML	10 ML	IV
EVERY DAY	DOHICKEY DOUGLAS	EWSTST01		ENALAPRIL(VASOTEC)TAB: 5MG	5 MG = 1 Tablet	INHALED
EVERY DAY	DOHICKEY DOUGLAS	EWSTST01		SERTRALINE(ZOLOFT) TAB: 50 MG	50 MG = 1 Tablet	INHALED
07/31/2024 02:56	WILSON RITA	20001963		CeFAZolin(ANCEF)IVPB-1GM/D5W 50ML PREMIX		IVPB
07/31/2024 10:56	WILSON RITA	20001963		CeFAZolin(ANCEF)IVPB-1GM/D5W 50ML PREMIX		IVPB
07/31/2024 18:56	WILSON RITA	20001963		CeFAZolin(ANCEF)IVPB-1GM/D5W 50ML PREMIX		IVPB

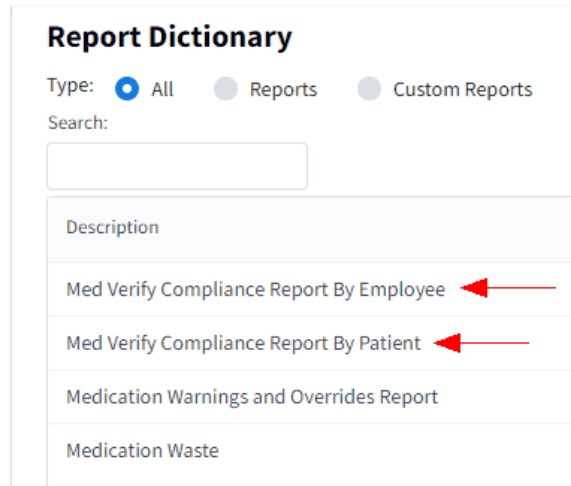
Patient Medication List

5.6 Medication Verification Compliance Report

The *Medication Verification Compliance Report* details the level of usage of Medication Verification for medication administration. This section discusses the revised version of the report. This report may be generated for medication administrations entered via the MAR and Medication Verification.

The revised version of the Medication Verification Compliance Report may be generated by patient or employee. The report may only be accessed via the Nursing Administration Department or Report Dashboard. Report Scheduler logic has been added to the report. In addition, accessing this report will show under the PHI option in the Security Audit Log.

Select **Report Dashboard > Med Verify Compliance Report By Patient** or **Med Verify Compliance Report By Employee**.



Med Verify Compliance Reports

Double-click **Med Verify Compliance Report By Patient** (see [Medication Verification Compliance Report by Patient](#)) or **Med Verify Compliance Report By Employee** (see [Medication Verification Compliance Report by Employee](#)) to generate the reports.

Medication Verification Compliance Report by Patient

This section addresses the filter options available for the *Med Verify Compliance Report by Patient* and the details that display when the report is generated.

Select **Report Dashboard > Med Verify Compliance Report By Patient**.

The following filter options are available:

- **Date/Time:** A date and time range must be entered in order to generate the report. The default for this filter option is the current 24-hour period (MM/DD/YYYY 00:00 - MM/DD/YYYY 23:59). The date picker may be used to select a new beginning and ending date, or the date fields may be highlighted and re-keyed. The time fields may also be highlighted and re-keyed. Only patients with medication administrations and/or omissions documented within the date and time frame selected will appear on the report.
- **Sort:** One of three sort options may be selected. They are listed below. (The display order default is **Ascending**. However, **Descending** may be selected to reverse the display list.)
 - **Department Name:** The default sort option is Department Name. Patient names that populate the display will be grouped together by department description. Departments are listed alphabetically.
 - **Visit Number:** When this option is selected, patient accounts populate the report numerically by visit number.

- **Patient Name:** When this option is selected, patients will appear alphabetically on the report.
- **Search:** This filter works in conjunction with the **Sort** option selected. A specific department name, visit number, or patient name may be entered respectively in this field to further delimit the display.

Run Report PDF CSV Schedule											
Date/Time:		3/1/2024 00:00:00		7/31/2024 23:59:00		Sort: Department Name		Ascending		Descending	Search:
Patient											
mohamed testdata											
Department:		Kyser Med Surg		Account#: 70001611		Date of Birth: 03/06/1996 (28)		Total Administrations: 10		Meds Omitted: 0	
Total Not Scanned:		10 100%		Total Armband Scanned Only: 0 0%		Total Med Verify: 0 0%					
MCC CCD A TEST											
Department:		Long Term Care		Account#: 70001791		Date of Birth: 06/10/1970 (54)		Total Administrations: 1		Meds Omitted: 0	
Total Not Scanned:		1 100%		Total Armband Scanned Only: 0 0%		Total Med Verify: 0 0%					
CHUCK SPIVA											
Department:		Medical/Surgical		Account#: 03130923		Date of Birth: 07/04/1976 (48)		Total Administrations: 2		Meds Omitted: 0	
Total Not Scanned:		2 100%		Total Armband Scanned Only: 0 0%		Total Med Verify: 0 0%					
MULDER FOX WILLIAM											
Department:		Medical/Surgical		Account#: 70000372		Date of Birth: 11/30/1964 (59)		Total Administrations: 5		Meds Omitted: 0	
Total Not Scanned:		5 100%		Total Armband Scanned Only: 0 0%		Total Med Verify: 0 0%					
FRIDAY FUN DAY											
Department:		Medical/Surgical		Account#: 70001118		Date of Birth: 05/25/1985 (39)		Total Administrations: 1		Meds Omitted: 0	
Total Not Scanned:		1 100%		Total Armband Scanned Only: 0 0%		Total Med Verify: 0 0%					
ADDIT BACK											
Department:		Medical/Surgical		Account#: 70001236		Date of Birth: 02/02/1996 (28)		Total Administrations: 1		Meds Omitted: 0	
Total Not Scanned:		1 100%		Total Armband Scanned Only: 0 0%		Total Med Verify: 0 0%					
WHITE JOE											
Department:		Medical/Surgical		Account#: 70001381		Date of Birth: 01/10/2001 (23)		Total Administrations: 5		Meds Omitted: 0	
Total Not Scanned:		5 100%		Total Armband Scanned Only: 0 0%		Total Med Verify: 0 0%					
VOLCANO ETNA											
Department:		Medical/Surgical		Account#: 70001553		Date of Birth: 01/30/1986 (38)		Total Administrations: 1		Meds Omitted: 0	
Total Not Scanned:		1 100%		Total Armband Scanned Only: 0 0%		Total Med Verify: 0 0%					
IV ADMINISTRATION PT											
Department:		Medical/Surgical		Account#: 70001619		Date of Birth: 02/02/2002 (22)		Total Administrations: 13		Meds Omitted: 0	
								Total Administrations: 196		Total Omitted: 2	
								Total Not Scanned: 182		92.86%	
								Total Armband Scanned: 2		1.02%	
								Total MedVerify: 12		6.12%	
										Total Patients: 34	

Med Verify Report by Patient

The following information displays for each patient entry based on the date and time range selected:

- **Patient:** Last name, first name, middle name format
- **Account Number:** Visit Number
- **Date of Birth:** MM/DD/YYYY format followed by the patient's age at the time of admission
- **Department:** If the patient was transferred to one or more departments and medication administrations and/or omissions were documented by each department, a separate entry will display for each documenting department.
- **Total Administrations:** This field displays the total number of medication administrations documented as "Given" or "Started." Medication administrations documented as "Omitted" or "Discontinued" and PCA infusion administrations, regardless of the action taken, are not counted in this total. The administration method utilized (i.e., Medication Verification versus MAR) is not a factor in this total.

- **Meds Omitted:** This field displays the total number of medication administrations documented as "Omitted." The administration method utilized (i.e., Medication Verification versus MAR) is not a factor in this total.
- **Total Not Scanned:** This field displays the total number and percentage of medication administrations documented as "Given" that were not administered using Medication Verification because neither the patient armband nor the medication label were scanned. "Total Not Scanned" divided by "Total Administrations" multiplied by 100 equals the percentage of "Given" medications for which neither the patient armband nor the medication label were scanned.
- **Total Armband Scanned Only:** This field displays the total number and percentage of medication administrations documented as "Given" that were not administered using Medication Verification because the patient armband was scanned but the medication label was not scanned. "Total Armband Scanned Only" divided by "Total Administrations" multiplied by 100 equals the percentage of "Given" medications for which the patient armband but not the medication label was scanned.
- **Total Med Verify:** This field displays the total number and percentage of medication administrations documented as "Given" that were administered using Medication Verification because both the patient armband and medication label were scanned. "Total MedVerify" divided by "Total Administrations" multiplied by 100 equals the percentage of "Given" medications for which the patient armband and medication label were scanned.

At the bottom of the MedVerify Compliance Report by Patient screen, the system automatically combines the totals for each patient entry to generate overall percentages for Total Not Scanned, Total Armband Scanned, and Total MedVerify. The **Total Patients** field displays the total number of patient accounts that meet the criteria and appear in the report. This value may or may not equal the number of entries that display due to department transfers.

NOTE: *If a medication administration is amended or removed, the report may be generated again to reflect the change.*

Select the **back arrow** from the action bar to return to the Reports screen, or select **PDF** to generate a PDF copy of the on-screen display.

Medication Verification Compliance Report by Employee

This section discusses the filter options available for the *Medication Verification Compliance Report by Employee* and the details that display when the report is generated.

Select **Report Dashboard > Med Verify Compliance Report By Employee**.

The following filter options are available:

- **Date/Time:** A date and time range must be entered to generate the report. The default for this filter option is the current 24 hour period (MM/DD/YYYY 00:00 - MM/DD/YYYY 23:59). The date picker may be used to select a new beginning and ending date, or the date fields may be highlighted and re-keyed. The time fields may also be highlighted and re-keyed. Only patients with

medication administrations and/or omissions documented within the date and time frame selected will generate on the report.

- **Sort:** The default sort option is all employees who have "Given" or "Omitted" a medication administration during the date and time range selected. The display order default is **Ascending** alphabetically by employee credentials. However, **Descending** may be selected to reverse the display list.
- **Employee Search:** This filter may be used to display information for one employee versus all employees. The employee credentials (as entered in the Payroll Employment Information Other Reports field) must be used. The field also requires parenthesis be placed around the credentials.

Run Report PDF CSV Schedule														
Date/Time:		5/1/2024		00:00:00		7/31/2024		23:59:00		Sort: <input checked="" type="radio"/> Ascending <input type="radio"/> Descending	Employee Search: <input type="text"/>			
Employee														
Employee:	CHASE C LINDAMOOD, RN			Total Administrations:	2		Meds Omitted:	0						
Total Not Scanned:	2		100%	Total Armband Scanned Only:	0		0%	Total Med Verify:	0		0%			
Employee:	CLAPPER SAM nurse			Total Administrations:	1		Meds Omitted:	0						
Total Not Scanned:	1		100%	Total Armband Scanned Only:	0		0%	Total Med Verify:	0		0%			
Employee:	CURRY L HILL			Total Administrations:	2		Meds Omitted:	0						
Total Not Scanned:	2		100%	Total Armband Scanned Only:	0		0%	Total Med Verify:	0		0%			
Employee:	DENISE WILSON CLERK			Total Administrations:	1		Meds Omitted:	0						
Total Not Scanned:	0		0%	Total Armband Scanned Only:	1		100%	Total Med Verify:	0		0%			
Employee:	Debbie Zetts			Total Administrations:	1		Meds Omitted:	0						
Total Not Scanned:	1		100%	Total Armband Scanned Only:	0		0%	Total Med Verify:	0		0%			
Employee:	EMPLOYEE DINSMORE			Total Administrations:	39		Meds Omitted:	0						
Total Not Scanned:	39		100%	Total Armband Scanned Only:	0		0%	Total Med Verify:	0		0%			
Employee:	JAMES PHYS DINSMORE			Total Administrations:	2		Meds Omitted:	0						
Total Not Scanned:	2		100%	Total Armband Scanned Only:	0		0%	Total Med Verify:	0		0%			
Employee:	JENNY RN CRUMPLER			Total Administrations:	6		Meds Omitted:	0						
Total Not Scanned:	6		100%	Total Armband Scanned Only:	0		0%	Total Med Verify:	0		0%			
Employee:	Joey Clarke			Total Administrations:	1		Meds Omitted:	0						
Total Not Scanned:	1		100%	Total Armband Scanned Only:	0		0%	Total Med Verify:	0		0%			
Employee:	KAYLA H GRANBERRY			Total Administrations:	3		Meds Omitted:	0						
Total Not Scanned:	3		100%	Total Armband Scanned Only:	0		0%	Total Med Verify:	0		0%			
Employee:	LaTanya R Clark			Total Administrations:	4		Meds Omitted:	0						
Total Not Scanned:	4		100%	Total Armband Scanned Only:	0		0%	Total Med Verify:	0		0%			
Employee:	Mason Michelle			Total Administrations:	8		Meds Omitted:	0						
Total Not Scanned:	8		100%	Total Armband Scanned Only:	0		0%	Total Med Verify:	0		0%			
				Total Administrations:	138		Total Omitted:	2		Total Not Scanned:	137 99.28%			
				Total Armband Scanned:	1		0.72%	Total Med Verify:	0		0%	Total Employees:	21	

Med Verification Report By Employee

The following information displays for each employee entry based on the date and time range selected:

- **Employee:** Employee credentials display as they were entered in the Payroll Employment Information Other Reports field. Parentheses are automatically added.
- **Total Administrations:** This field displays the total number of medication administrations documented as "Given." Medication administrations documented as "Omitted" or "Discontinued" and PCA infusion administrations, regardless of the action taken, are not counted in this total. The administration method utilized (i.e., Medication Administration versus MAR) is not a factor in this total.

- **Meds Omitted:** This field displays the total number of medication administrations documented as "Omitted." The administration method utilized (i.e., Medication Verification versus MAR) is not a factor in this total.
- **Total Not Scanned:** This field displays the total number and percentage of medication administrations documented as "Given" that were not administered using Medication Verification because neither the patient armband nor the medication label were scanned. "Total Not Scanned" divided by "Total Administrations" multiplied by 100 equals the percentage of "Given" medications for which neither the patient armband nor the medication label were scanned.
- **Total Armband Scanned Only:** This field displays the total number and percentage of medication administrations documented as "Given" that were not administered using Medication Verification because the patient armband was scanned but the medication label was not scanned. "Total Armband Scanned Only" divided by "Total Administrations" multiplied by 100 equals the percentage of "Given" medications for which the patient armband but not the medication label was scanned.
- **Total Med Verify:** This field displays the total number and percentage of medication administrations documented as "Given" that were administered using Medication Verification because both the patient armband and medication label were scanned. "Total Med Verify" divided by "Total Administrations" multiplied by 100 equals the percentage of "Given" medications for which the patient armband and medication label were scanned.

At the bottom of the Medication Verification Compliance Report by Employee screen, the system automatically combines the totals for each employee entry to generate overall percentages for Total Not Scanned, Total Armband Scanned, and Total MedVerify. The **Total Employees** field displays the total number of employees generated on the report.

NOTE: *If a medication administration is amended or removed, the report may be generated again to reflect the change.*

Select the **back arrow** from the action bar to return to the Reports screen or select **PDF** to generate a PDF document of the on-screen display.

5.7 Medication Warnings and Overrides Report

The *Medication Warnings and Overrides Report* details the warning prompts received and override reasons entered during Medication Verification. This section discusses the revised version of the report. The Medication Warnings and Overrides Report is generated using the Report Writer application. See the [Report Writer](#) document for detailed instructions on using Report Writer.

To access the report, select **Report Dashboard > Medication Warnings & Overrides Report**.

Medication Warnings and Overrides Report

The following parameters may be used to delimit the data that appears on the report.

- **Facility:** Select the facility for which the report should generate. All other facilities will be excluded.
- **Visit ID:** Enter an account number to generate the report for a specific patient account. All other patient accounts will be excluded.
- **Date Range:** Enter a date and time range for which the report should generate. The report will generate information if a warning occurred during the entered date/time range.
- **Department Number:** Enter a department number in order to generate the report for a specific department. All other departments will be excluded. The report will generate for warnings received for patients in a room in this department at the time the medication was scanned.

Once the desired parameters are set, select a document type from the **Output Format** drop-down menu and then select **Run Report**.

Medication Warnings and Overrides Report

02/08/2016 14:03		EVIDENT COMMUNITY HOSPITAL Medication Warnings and Overrides Report 02/01/2016 07:00:00 - 02/08/2016 14:00:00				2 medication_verification_warning.template	
Patient: BOWDEN CAUSEY ANNE		Acct#: 357881					
Date/Time	Department	Employee	Medication	NDC#	Warning	Override Reason	
02/08/2016 13:54:05	NS Medical-Surgical	(THOMAS F)	NORMAL SALINE 1000 ML		Ordered Dose Changed		
02/08/2016 13:58:31	NS Medical-Surgical	(THOMAS F)	ACETAMINOPHEN (TYLENOL) 500MG TABLET	5058044991	PRN Time Range	Meds unavailable	
02/08/2016 13:58:31	NS Medical-Surgical	(THOMAS F)	ACETAMINOPHEN (TYLENOL) 500MG TABLET	5058044991	Max Dose	limit is 4000	

The following warnings will be included:

- NDC Not for patient
- Ordered Dose Changed
- Cannot Perform Dose Checking
- PRN Time Range
- Max Dose (Acetaminophen)
- Not for This Patient
- Given Too Early
- Given Too Late
- Photo Verification

The following information displays for each patient entry based on the date and time range selected.

- **Patient:** Last name, first name, middle name format
- **Account Number:** This area displays the visit number.
- **Date/Time:** This area displays the date and time the warning was received.
- **Department:** This area displays the nursing department to which the patient was admitted at the time the medication was scanned.
- **Employee:** This area displays the name of the employee who scanned the medication.
- **Medication:** This area displays the medication description.
- **NDC#:** This area displays the NDC number that was scanned.
- **Warning:** This area displays the warning that was received. If medication was given before the start date and time, the report will display a warning "Given Before Start Date/Time."
- **Override Reason:** This area displays the Override Reason that was entered.