

Troubleshooting Medication/Script Issues

Review scripts under **ePrescribing** in Document Queue.

Check if any scripts have Failed by changing status in drop down to **Failed**.

The screenshot shows the 'Document Queue' window with the 'ePrescribing' filter selected. A dropdown menu is open over the 'Status' column, showing options: Open, Ready, Pending, On Deck, Failed, Complete, After Hours, and Submitted. A red arrow points to the 'Failed' option. The table below shows various scripts with their respective statuses.

Patient	Provider	Date	Type	Description	Recipient	Via	Status
M	Unspecified	05/17/17	Open				
Y	Unspecified	02/27/14	Refill	LISINOPRIL 40 MG TABLET	CVS	eRx	Submitted
C	Unspecified	02/27/14	Refill	MELOXICAM 15 MG TABLET	CVS	eRx	Submitted
J	Unspecified	02/27/14	Refill	IBUPROFEN 800 MG TABLET	CVS	eRx	Submitted
Y	E	02/27/14	Refill	LABELALOL HCL 200 MG TABLET	Ecke	eRx	Submitted
S	Unspecified	02/27/14	Refill	FUROSEMIDE 20 MG TABLET	CVS	eRx	Submitted
W	Unspecified	02/27/14	Refill	VIT D2 1.25 MG (50,000 UNIT)	CVS	eRx	Submitted
W	Unspecified	02/27/14	Refill	DONEPEZIL HCL 5 MG TABLET	CVS	eRx	Submitted
W	Unspecified	02/27/14	Refill	DIAZEPAM 10 MG TABLET	Ecke	eRx	Submitted
W	Unspecified	02/27/14	Refill	RAMIPRIL 5 MG TABLET	CVS	eRx	Submitted
B	Unspecified	02/27/14	Refill	AMLODIPINE 5 MG TABLET	CVS	eRx	Submitted
H	Unspecified	02/27/14	Refill	IBUPROFEN 800 MG TABLET	CVS	eRx	Submitted
F	Unspecified	02/27/14	Refill	LABELALOL HCL 200 MG TABLET	Ecke	eRx	Submitted
W	Unspecified	02/27/14	Refill	FUROSEMIDE 20 MG TABLET	CVS	eRx	Submitted
Y	Unspecified	02/27/14	Refill	VIT D2 1.25 MG (50,000 UNIT)	CVS	eRx	Submitted
S	Unspecified	02/27/14	Refill	DONEPEZIL HCL 5 MG TABLET	CVS	eRx	Submitted
P	Unspecified	02/27/14	Refill	DIAZEPAM 10 MG TABLET	Ecke	eRx	Submitted
L	E	02/25/14	Script	Ramipril	CVS	eRx	Submitted
L	E	02/25/14	Script	Amlodipine	CVS	eRx	Submitted
L	E	02/25/14	Script	Doxycycline Hyclate	CVS	eRx	Submitted
L	E	02/25/14	Script	Singular	CVS	eRx	Submitted
L	E	02/25/14	Script	Azithromycin	CVS	eRx	Submitted
B	Unspecified	02/20/14	Refill	METOPROLOL TARTRATE 25 MG TAB	CVS	eRx	Submitted
L	Edwin Arbuzo MD	02/20/14	Script	Azithromycin	CVS	eRx	Submitted

Scripts that have failed need to be corrected and resent. **Right click** on the item in the queue.

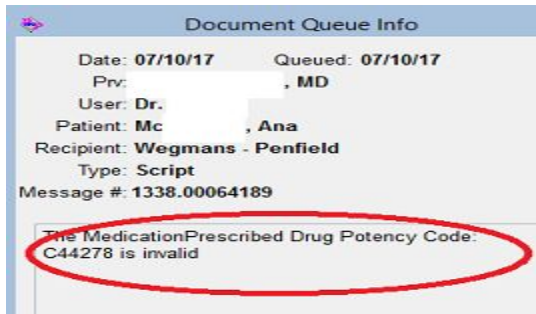
A menu will appear which will allow you to resend or check status.

* Note: Resending directly from this screen will send the script exactly as is. Script correction may be necessary. See following:

The screenshot shows the 'Document Queue' window with the 'Failed' status filter selected. A context menu is open over a failed script, showing 'Resend' and 'eRx Status' options. The table below shows a list of failed scripts.

Patient	Provider	Date	Type	Description	Recipient	Via	Status
V	P	01/20/17	Script	Depo-Provera	W		Failed
M	P	01/20/17	Script	Lisinopril	RI		Failed
N	P	01/20/17	Script	Tramadol	M		Failed
S	E	01/18/17	Refill	Diflucan	C		Failed
B	E	01/18/17	Refill	NOVOLOG FLEXPEN SYRINGE	C		Failed
P	E	01/18/17	Script	Glucophage	C		Failed
V	E	01/18/17	Script	Omeprazole	W		Failed
V	E	01/18/17	Script	Gabapentin	G		Failed
A	E	01/17/17	Script	Depo-Provera	W		Failed
M	E	01/17/17	Script	Toprol XL	W		Failed
S	E	01/17/17	Refill	RISPERIDONE 4 MG TABLET	G		Failed
S	E	01/17/17	Refill	TRAZODONE HCL 100 MG TABLET	G		Failed
V	E	01/17/17	Script	Zolpidem	C		Failed
S	E	01/17/17	Script	Tizanidine	W		Failed
H	E	01/17/17	Script	Nicotine	G		Failed
H	E	01/17/17	Script	Nicotine	G		Failed
P	E	01/17/17	Script	Victoza 2-Pak	W		Failed
S	E	01/16/17	Refill	NOVOLOG FLEXPEN SYRINGE	C		Failed
J	E	01/16/17	Refill	AMLODIPINE 10MG TAB	H		Failed
H	P	01/13/17	Script	Tramadol	RI		Failed
J	E	01/12/17	Refill	AMLODIPINE 10MG TAB	H		Failed
P	E	01/12/17	Refill	OMEPRAZOLE 20 MG CAPSULE DR	M		Failed

Choose eRX status, **Document Queue Info** window will show reason script failed.



Error Received: DEA Schedule does not match. **Update to Correct Schedule. See instructions below** (There are 2 methods listed. The first is updating from the Medication Table and the second is from the Eprescribing window).

Please note that the Master list matches the DEA Drug Schedule. Your state schedule may vary from this. For example, Testosterone is a Schedule 3 drug on the national DEA list but a Schedule 2 drug in N.Y.

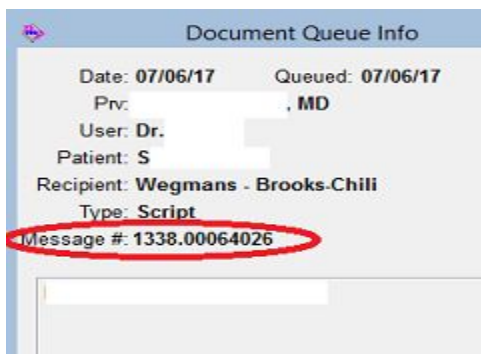
Error Received: The Medication Prescribed Drug Potency Code # _____ is invalid". This is an issue of **Units** related to the medication. **Relink Medication to Master List. See instructions below.**

*If Units of medication is **Transdermal Patch** change to **Patch**. Save and resend.

Error Received: NDC# missing or incorrect **Call HST Support**

Unable to refill previously prescribed medication/Script failing? Script may have slightly changed. **Relink Medication to Master List.** If prescription continues to fail, call HST.

Document Queue Info will reference a message number. Please have this number ready when calling HST for assistance. This will speed up further research of script issue



Updating Schedule of Medication


Click on correct medication in patient's medication list.

Overview | Problems | **Meds** | History | Flow Sheets | Notes | Letters | Documents

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B. J. H. Comp. Health

Medications

	Medication	Strength	MDD	Instructions	Start	End	
<input checked="" type="checkbox"/>	Diazepam	5mg	1.0	1 Tablet daily	07/11/17		
<input type="checkbox"/>	OxyContin	30mg	1.0	1 Tablet daily	06/12/17		
<input type="checkbox"/>	Valium	10mg	1.0	1 Tablet daily	06/07/17		
<input type="checkbox"/>	Z-Bum	22%	1.0	1 Gram daily	05/03/17		
<input type="checkbox"/>	Daily Fiber	0.52gram	1.0	1 Capsule da	05/03/17		
<input type="checkbox"/>	Coumadin	10mg	1.0	1 Tablet daily	05/03/17		
<input type="checkbox"/>	Prozac	40mg	1.0	1 Capsule da	05/03/17		

Add Med

Stop Med

Delete Med


Refill

Build List

No Meds

Click on **Edit Rx Table** icon.

Patient Medication

Medication: 295708  One Time Supplies

Description: Diazepam

Strength: 5mg **Tablet**

Diagnosis

Per Dose: 1.00 Units: Tablet Route: PO

Frequency: QD PRN MDD: 1.0

1 tablet orally QD

Days Covered: 30 1 Month 3 Month 10 Days Other

Dispense: 30 Units: Tablet Refills Allowed: 0

Dispense As Written Allow Substitution Of Form/Units

Provider: Howard Fenderson, MD

Started: 07/11/17 Stopped: / / Refilled: / /

Note: (for internal purposes only) Sample Given

Add To Favorites Change Strength Change Sig

Save Print One-Time Cancel

From **Medication Table** window, update **Schedule** drop down box to correct schedule. In this example, Diazepam is not a Schedule 2 but a Schedule 4.

The screenshot shows the 'Medication Table' window for NDC 00003023850. The medication is Diazepam, 5mg, Tablet. The 'Schedule' dropdown menu is currently set to '2' and is circled in red. Other fields include Description, Generic Name, Category, Ingredient, Pick List, Form, Strength, Common Uses, Add'l Instructions/Warnings, Dosage Instructions, Dispense, Regimen Set, Auto Instructions, Special Handling, and various checkboxes for dispensing options. Buttons for Save, Delete, and Cancel are at the bottom.

Update and click **Save**.

This screenshot is identical to the previous one, but the 'Schedule' dropdown menu is now set to '4' and is circled in red. Additionally, the 'Save' button at the bottom of the window is also circled in red.

Click **Save** again.

The screenshot shows a 'Patient Medication' form with the following fields and values:

- Medication: 295708
- Description: Diazepam
- Strength: 5mg, Tablet
- Diagnosis: (empty)
- Per Dose: 1.00, Units: Tablet, Route: PO
- Frequency: OD, PRN: (unchecked), MDO: 1.0
- Text area: 1 tablet orally QD
- Days Covered: 30, 1 Month: (unchecked), 3 Month: (unchecked), 10 Days: (unchecked), Other: (checked)
- Dispense: 30, Units: Tablet, Refills Allowed: 0
- Dispense As Written: (unchecked), Allow Substitution Of Form/Units: (checked)
- Provider: Howard Fenderson, MD
- Started: 07/11/17, Stopped: / /, Refilled: / /
- Note: (for internal purposes only), Sample Given: (unchecked)
- Buttons: Add To Favorites, Change Strength, Change Sig, **Save** (circled in red), Print, One-Time, Cancel

Schedule is now updated for this medication in patient's chart. DEA schedule error issue should be resolved.

Update Schedule of Medication from Doctor First

If you receive a DEA Schedule Error in Doctor First, complete the following steps to more quickly address the issue.

Close Doctor First window. From the **Electronic Prescribing** window, click on **Verify Schedule** button.

The screenshot shows the 'Electronic Prescribing' window. At the top, a patient box contains the name 'Cory Test' in purple, with 'DOB: 09/09/75', 'Sex: Male', 'Address: 345 Main Street, Fairport, NY', and 'Phone: 585-319-7571'. Below this, the prescriber is 'Charlene Vitale' and the date is '07/11/17' with DEA # 'BC3601336'. The medication section shows 'Oxycodone 10mg Tablet' with 'Dispense: #30 Tablet', 'Days: 30', and 'Refills: 0 (zero)'. The instruction is '1 tablet orally daily' and '(Substitutions Allowed)'. There is an 'Edit Rx' button. At the bottom, there is a section for sending the script electronically to 'CVS Pharmacy #10284' at '1304 Fairport Rd' with phone '585-377-8902'. There are buttons for 'Select Pharmacy', 'Verify Schedule' (highlighted with a red border), 'Yes', 'Fax', and 'No'.

Click OK.

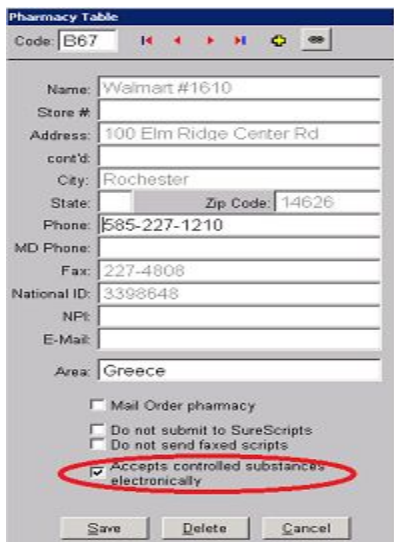
The screenshot shows a dialog box titled 'Verify Drug Schedule' with a close button (X). It contains a yellow warning triangle icon and the text 'Automatic Drug Verification failed.'. At the bottom, there is an 'OK' button.

From the **Set DEA Schedule** window, update schedule in drop-down box. **OK**. Resubmit script. DEA Schedule error should now be resolved.



The image shows a dialog box titled "Set DEA Schedule". It features a dropdown menu for "DEA Schedule" with the value "2" selected. Below the dropdown are two radio buttons: "Save to Medication Table" (selected) and "Applies only to this patient". At the bottom, there are three buttons: "Verify", "OK" (circled in red), and "Cancel".

***If a **controlled substance has failed** and the DEA schedule error did not come up, find the pharmacy in the Pharmacy Table (Tables, Other Tables, Pharmacy) and make sure the box at the bottom is checked. Save.



The image shows a "Pharmacy Table" dialog box. It contains a form with the following fields: Code (B67), Name (Walmart #1610), Store #, Address (100 Elm Ridge Center Rd), City (Rochester), State, Zip Code (14626), Phone (585-227-1210), MD Phone, Fax (227-4808), National ID (3398648), NPI, E-Mail, and Area (Greece). At the bottom, there are four checkboxes: "Mail Order pharmacy", "Do not submit to SureScripts", "Do not send faxed scripts", and "Accepts controlled substances electronically" (checked and circled in red). Below the checkboxes are "Save", "Delete", and "Cancel" buttons.

Relinking Medication to Master List Instructions

From the patient's Medication List, double click on medication that failed.

Account: 5337 585-461-4376
Patient Test
DOB: 11/01/73 Age: 43 Sex: M
Last Visit: 12/15/15 Next Visit:
Wegmans #12 (24 Hrs)


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Maintenance | One-Time | Supplies

Medications Wegmans #12 (24 Hrs)

Medication	Strength	MDD	Instructions	Start	End
Zithromax	500mg	1.0	1 daily	08/11/15	
Nifedipine	10mg	1.0	1 Capsule da	11/17/15	
Lisinopril	5mg	1.0	1 Tablet daily	11/17/15	
Zithromax	250mg	1.0	1 daily	03/23/10	08/10/15

Buttons: Add Med, Stop Med, Delete Med, Refill

From **Patient Medication** window, click on **Edit Rx Table** icon.

Medication: 288801  One Time Supplies
Description: Lisinopril NOS
Strength: 5mg Tablet
Diagnosis: _____
Per Dose: 1.00 Units: Tablet Route: PO
Frequency: QD PRN MDD: 1.0
1 tablet orally QD
Days Covered: 30 1 Month 3 Month 10 Days Other
Dispense: 30 Units: Tablet Refills Allowed: 0
 Dispense As Written Allow Substitution Of Form/Units
Provider: Other
Started: 11/17/15 Stopped: / / Refilled: / /
Note: (for internal purposes only) Sample Given
Buttons: Add To Favorites, Change Strength, Change Sig, Save, Print, One-Time, Cancel

From **Medication Table** window, click on **Link** icon.

The screenshot shows the 'Medication Table' window with the code '268801'. A red arrow points to the 'Link' icon (two overlapping circles) in the top navigation bar. The window contains various input fields for medication details, dosage instructions, and dispensing options.

Code: 268801

Description: Lisinopril

Generic Name: [Empty]

Category: Unspecified

Ingredient: [Empty]

Pick List: Unspecified

Form: Tablet

Strength: 5mg

Schedule: 0

Common Uses: [Empty]

Add Instructions/Warnings: [Empty]

Do Not Prompt To Link This Med To The Master List

Dosage Instructions:

Per Dose: [Empty] Units: Tablet Route: PO

Frequency: Uns Days: [Empty] MDD: [Empty]

Dispense: [Empty] Units: Tablet Refills: [Empty]

Regimen Set: Half Tablet

Auto Instructions: None

Special Handling: Regular

Update Key Fields

Save Delete Cancel

- Dispense As Written
- Edit From Encounter
- One-Time Medication
- Supplies / DME
- PRN
- Over the Counter - Do Not Print
- Controlled Substance
- Requires Preventive Care
- Requires Authorization
- Allow Substitution of Form/Units
- Do not report to the patient portal

Double click on correct medication from list.

The screenshot shows the 'Select Medication' window with the description 'LISINOPRIL'. It features search options and a list of medication items. A red arrow points to the 'Lisinopril - tablet 5mg' item in the list.

Description: LISINOPRIL

Alpha Search Full Text Search

Search from: Active Table Master List

(An item selected from the Master List will automatically be added to your Active Table for future use)

Lisinopril - solution	1mg/mL
Lisinopril - tablet	2.5mg
Lisinopril - tablet	5mg
Lisinopril - tablet	10mg
Lisinopril - tablet	20mg
Lisinopril - tablet	30mg
Lisinopril - tablet	40mg
Lisinopril (Bulk) - powder	100%
Lisinopril-Hydrochlorothiazide - tablet	10-12.5mg
Lisinopril-Hydrochlorothiazide - tablet	20-12.5mg
Lisinopril-Hydrochlorothiazide - tablet	20-25mg

Create Cancel

Be sure to click **Save** in both the Medication Table window and Patient Medication Table window on the way back to the patient's chart. This will complete the relinking process.

Medication Table

Code: 268801

Description: Lisinopril
Generic Name:
Category: Unspecified
Ingredient:
Pick List: Unspecified
Form: Tablet
Strength: 5mg

Schedule: 0

Common Uses:
Add'l Instructions/Warnings:
 Do Not Prompt To Link This Med To The Master List

Dosage Instructions:
Per Dose: Units: Tablet Route: PO
Frequency: Uns Days: MDD:
or

Dispense: Units: Tablet Refills:
Regimen Set: Half Tablet
Auto Instructions: None
Special Handling: Regular

Dispense As Written
 Edit From Encounter
 One-Time Medication
 Supplies / DME
 PRN

Over the Counter - Do Not Print
 Controlled Substance
 Requires Preventive Care
 Requires Authorization
 Allow Substitution of Form/Units
 Do not report to the patient portal

Update Key Fields

Save Delete Cancel

Patient Medication

Medication: 268801 One Time Supplies
Description: Lisinopril NOS
Strength: 5mg Tablet

Diagnosis

Per Dose: 1.00 Units: Tablet Route: PO
Frequency: QD PRN MDD: 1.0
1 tablet orally QD

Days Covered: 30 1 Month 3 Month 10 Days Other
Dispense: 30 Units: Tablet Refills Allowed: 0
 Dispense As Written Allow Substitution Of Form/Units
Provider: Other

Started: 11/17/15 Stopped: / / Refilled: / /

Note: (for internal purposes only) Sample Given

Add To Favorites Change Strength Change Sig

Save Print One Time Cancel

Selecting a Pharmacy in the Patient's Chart

From patient's Medication list, click on **Pharmacy**.

The screenshot shows a patient's medication list. The patient's name is "Patient Test", DOB is 11/01/73, Age is 43, and Sex is M. The medication list is titled "Medications" and is for "Wegmans #12 (24 Hrs)". The list includes the following medications:

Medication	Strength	MDD	Instructions	Start	End
Zithromax	500mg	1.0	1 daily	08/13/15	
Nifedipine	10mg	1.0	1 Capsule da	11/17/15	
Lisinopril	5mg	1.0	1 Tablet daily	11/17/15	
Zithromax	250mg	1.0	1 daily	03/23/10	08/10/15

On the right side of the medication list, there are several buttons: Add Med, Stop Med, Delete Med, Refill, Build List, No Meds, Refill Hx, Reaction, Drug Info Sheet, and Pharmacy. The "Pharmacy" button is highlighted with a red box.

From **Pharmacy Info** window, click **Select Pharmacy**.

You may select a Pharmacy as the patient's Primary, Secondary or Mail Order pharmacy depending on which tab you select.

The screenshot shows the "Pharmacy Info" window. It has three tabs: "Primary", "Secondary", and "Mail Order". The "Primary" tab is selected. The window displays the following information:

Select Pharmacy

Name: **Wegmans #12 (24 Hrs)**
Address: **2833 Ridge Rd. West**
Greece - Ridgemont Plaza
City: **Rochester**
State: **NY** Zip Code: **14626**
Phone: **585-723-6020**
MD Phone: **585-723-1760**
Fax: **723-3657**

Buttons: Delete, Exit

From **Select Pharmacy** window, search for correct pharmacy by name. You may narrow search by putting in street address # or zip code in the location field. **If pharmacy is not local**, uncheck “Limit search to region”. Make sure you are searching from the **Master List** and NOT the Active Table.

Select Pharmacy

Name: Limit search to region Full text search

Type: Search from: Active Table Master List

Location: *Master List will automatically be added to your Active Table for future use)*

Wal-Mart Neighborhood Market 5640	1120 S Anaheim Blvd	Anaheim, CA 92605	657-208-5384	Retail
Wal-Mart Neighborhood Market 4149	7421 E. Independence Blvd	Charlotte, NC 28227	704-595-4013	Retail
Wal-Mart Neighborhood Market 4426	1042 Manchester Expy	Columbus, GA 31904	706-330-5353	Retail
Wal-Mart Neighborhood 4491	541 Warrior Way	Grand Junction, CO 81504	970-208-0041	Retail
Wal-Mart Neighborhood 4626	1723 McFarland Rd	Junction City, KS 66441	785-492-6027	Retail
Wal-Mart Neighborhood Market 6398	1569 Saxon Blvd	Deltona, FL 32725	386-457-6190	Retail
Wal-Mart Neighborhood Market 2226	19340 Hawthorne Blvd	Torrance, CA 90503	310-750-2409	Retail
Wal-Mart Neighborhood Market 2305	325 Oakland St	Bristol, CT 06010	860-506-2266	Retail
Wal-Mart Neighborhood Market 2328	2014 Wade Hampton Blvd	Greenville, SC 29615	864-214-8703	Retail
Wal-Mart Neighborhood Market 2376	4651 Woodstock Rd NE Ste	Reswell, GA 30075	770-552-0660	Retail
Wal-Mart Neighborhood Market 2391	6745 Little Rd	New Port Richey, FL 34654	727-264-5224	Retail
Wal-Mart Neighborhood Market 2393	640 S.E. 4th Street	Moore, OK 73160	405-794-3581	Retail
Wal-Mart Neighborhood Market 2394	1500 S.W. 59th St.	Oklahoma City, OK 73119	405-684-9764	Retail
Wal-Mart Neighborhood Market 2395	9411 So Delaware Ave	Tulsa, OK 74137	918-299-5764	Retail
Wal-Mart Neighborhood Market 2396	12700 S Military Trail	Boynton Beach, FL 33436	561-808-1092	Retail
Wal-Mart Neighborhood Market 2397	2951 Matlock Rd	Mansfield, TX 76063	817-453-6635	Retail
Wal-Mart Neighborhood Market 2406	3001 S Federal Hwy	Delray Beach, FL 33483	561-450-3021	Retail
Wal-Mart Neighborhood Market 2414	973 N Harrison Ave	Cary, NC 27513	919-337-9784	Retail
Wal-Mart Neighborhood Market 2415	3429 State Street	Schenectady, NY 12304	518-387-3349	Retail

Cancel

Click on correct pharmacy.

Select Pharmacy

Name: Limit search to region Full text search

Type: Search from: Active Table Master List

Location: *Master List will automatically be added to your Active Table for future use)*

Wal-Mart Neighborhood Market 2406	3001 S Federal Hwy	Delray Beach, FL 33483	561-450-3021	Retail
Wal-Mart Pharmacy mail order 2625	1025 West Trinity Mills	Carrollton, TX 75006	800-273-3455	Mail Order
Walgreens Drug Store 02547	430 Ne 6th Ave	Delray Beach, FL 334836608	561-272-5523	Retail
Walgreens Drug Store 06014	1015 S Federal Hwy	Delray Beach, FL 334835131	561-278-4251	Retail
Walgreens Drug Store 06015	3200 S Federal Hwy	Delray Beach, FL 334833260	561-330-7271	Retail
Walgreens Mail Order	6337 S. Park Cir.	Orlando, FL 32819	800-345-1036	Mail Order
Walgreens Mail Service Inc	6350 S. River Pkwy	Tempe, AZ 852842615	800-345-1036	Mail Order

Cancel

Click **Exit**.

Pharmacy Info

Primary | Secondary | Mail Order

Select Pharmacy

Name: **Wal-Mart Neighborhood Mar**
Address: **3001 S Federal Hwy**

City: **Delray Beach**
State: **FL** Zip Code: **33483**
Phone: **561-450-3021**
MD Phone:
Fax: **561-450-3022**

Delete

Exit

Updated/New pharmacy will now be in in patient's chart.

Overview | Problems | **Meds** | History | Flow Sheets | Notes | Ob/Gyn | CPE | Documents |

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Medications **Wal-Mart Neighborhood Market 2406**

	Medication	Strength	MDD	Instructions	Start	End	
	Zithromax	500mg	1.0	1 daily	03/17/15		
	Nifedipine	10mg	1.0	1 Capsule da	11/17/15		
	Lisinopril	5mg	1.0	1 Tablet daily	11/17/15		
	Zithromax	250mg	1.0	1 daily	03/23/10	03/10/15	

Add Med
Stop Med
Delete Med
Refill