

# ENTERING PRESCRIPTIONS/ALLERGIES INTO CARECAST

- Before entering/printing prescriptions in Carecast, first review meds to be prescribed with the faculty provider and pharmacy.
- In Carecast, select patient by entering patient's MRN.
- Under "Meds" menu (second item from top right), select "Write Outpatient Prescriptions" in the drop down menu list.
- If you entered Carecast using your user number, a pop up box will appear, asking you for the user number of the clinician under whose name the prescription will be written and signed. You may also enter the signing provider by name if you do not know the provider's Carecast number. Also, on the screen where you enter the prescription, you will need to enter the physician's number in the box labeled "Ordered by", which is between the "Authorizing MD" and "Logged on user" areas near the middle of the screen (you will only have to do this on the first prescription).

## ALLERGIES

- To enter/update allergies, click "Access Allergies" at upper right corner.
- First, enter Latex allergies. If yes, enter as "Latex Allergy" below.
- Click drop down list for "Generic Medication Name". You can type in name and/or scroll down until you find the drug and select it.
- Next complete the "Allergic Reaction" section that corresponds to the drug.
- If patient has "no known medication allergies", select the first item in the drop down box.
- "Food/Other Intolerances" and "Contrast Media Intolerances" are entered in similar manner.
- After entering the nature of the allergic reaction, you need to choose a reason from the drop down menu under "Reason", mark "C" for change, and then click on "Save Data". You will get a pop-up that says "Label Sent", which means that everything was saved.

## NEW PRESCRIPTION

- To prescribe a new medication, enter name of medication on the "Enter Search Text" at upper left corner of screen and click enter/return key or "Search" button, and a list of items is displayed.
- Select (double click) the drug and its strength that you want or click "Prescribe"; if this is a drug from another physician outside the system or OTC drug, click "Historical" (you will be asked for the source of information). All the meds that a patient is taking should be listed for the drug interaction program to be useful.
- If there is a drug conflict or allergic reaction, a special screen will appear, and you will have to address the issue. If there is a drug interaction, you can "Review - Drug Interactions Only". You can either "Acknowledge and Continue" (with reason) or "Cancel Order Processing".
- Otherwise, you will go to a new page to complete/print the prescription. For many drugs the prescribing information is filled in by default; some are not. Use the drop down lists to change route or frequency; make other changes as needed. All items must be complete or Rx will not print
- Be sure to enter number of refills. If you leave it blank, the default is zero refills.
- Enter special details or instructions under "Add Instructions". Click on F12 (File/Save) to get out of the additional instructions box
- When done, select "Print Now", have the physician review and sign the prescriptions, and take them to pharmacy to be stamped or dispensed.
- If you make an error or want to delete a prescription, select the Rx and click "Discontinue" and select reason in drop down box.

## REFILL PRESCRIPTION

- To refill an existing prescription, select it from the "Active Medication List" at the bottom of the medication screen and click "Refill Rx". You cannot change the strength of the Rx; to do that you will have to enter a new Rx and delete the old Rx.
- Double clicking a prescription takes you to a screen that you usually don't want (reprint old prescription).

## PRINT ACTIVE MED SUMMARY

- To print a copy of active meds for the patient in words that the patient can easily understand, select "Print Active Med Summary", double click "1-Active Outpatient Medication List", "Print Report", and "Back Out".
- Give list to the patient. This should be done every time, especially if changes are made.

**See other side...**

# OVERVIEW OF SHARING CLINIC PROCESS

- Review the patient's recent notes/test results in Carecast.
- Call patient back, weight patient as enter hallway (can measure height, also)
- Take patient to exam room and take remaining vitals (temp, pulse, respiration, and blood pressure); record on Vital Signs form.
- All items on the Vital Signs form should be completed and given to administrator at end of night.
- Review latex/med allergy and reconcile all meds with patient (see Print Active Med Summary).
- Perform appropriate history & exam (breast/genital/rectal exams are done with faculty present).
- You may use the "Progress Note" form to take your own notes.
- Present patient to faculty and together develop assessment and management plan.
- Order tests as indicated (see below); take patient to lab with lab order forms and patient labels.
- Prior to filling prescriptions, determine when patient should return (in weeks, not months) and make sure enough meds are prescribed to get the patient to the next visit.
- Consult with pharmacy and faculty first for all medication refills; enter/print Rx's in Carecast (see other side) and have Rx's signed by faculty and take to pharmacy for Rx to be stamped and filled at Hope Pharmacy or dispensed in clinic; update allergies in Carecast, also.
- Print out a copy of the updated Active Med Summary and give to patient.
- Schedule follow-up appointment for patient using "Schedule Follow-up, Tests, & Referrals" form (faculty should sign form); stable patients are usually seen back in 8-12 weeks. NOTE: tests to be done before next visit should be entered on this form.
- Complete Billing/Encounter Form:
  - Circle level of care for visit: most visits are level 3 (low) or 4 (moderate) established care; for HCM, circle age and appropriate V code.
  - Circle top 3 diagnoses or problems that were addressed or write-in new diagnosis(es).
  - Update problems by drawing lines through outdated or duplicate problems.
  - Have faculty sign billing form.
- Billing/Encounter form and "Schedule Follow-Up, Tests, & Referrals" forms should be given to patient before leaving with instructions to give these forms to the receptionist and to make an appointment before leaving the clinic.
- At end of night after all patients have been seen, type your SOAP note in WordPad or NotePad (see instructions for format), and after faculty approval, have the student administrator put your note into Carecast.
- Give the following items to administrator when done:** Vital Signs, diabetes forms, patient labels, and any lab forms.

## MISCELLANEOUS

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### Lab tests:

- Some lab can be done stat in the office, e.g. dipstick urinalysis, glucose, rapid strep, & urine pregnancy.
- For fasting lab, have patient return to clinic during weekdays after 8:30 AM—indicate on the "Schedule Follow-up, Tests, and Referrals" form and in your SOAP note the test(s) to be done.

### Radiology:

- For plain x-rays (e.g., bone x-rays, CXR) that do not have to be scheduled, indicate x-ray(s) to be done on the "Schedule Follow-up, Tests, & Referrals" form and in your SOAP note.
- For other radiology tests that need to be scheduled (CT, MRI, sonogram, etc.), complete the "Schedule Follow-up, Tests, & Referrals" form including diagnosis/indication for the test; also put this information in your SOAP note; staff will call the following day and confirm the appointment with the patient.

### Consultations, surgeries, etc.:

- Ask the student administrator for Financial Assistance forms/cards. See instructions on the "Schedule Follow-up, Tests, & Referrals" form.
- NOTE: Pain Clinic consultations and Sleep Apnea studies are NOT available through Financial Assistance.

### Every Woman Matters (EWM)

- EWM packets and instructions to complete should be given to female patients who will be scheduled in the SHARING clinic for Pap/pelvic and breast exam/mammogram screening.
- EWM does not covered undocumented immigrants; they must have a social security number.

**See other side...**

1/3/2011