Edits without results (no-results message) for Aminoglycoside and Metformin

**Inpatient Order Entry** Nov 12, 2013@14:45:20 Page: 1 of 1

IPCPTESTPATF,NORESULTS Ward: C MEDIC

PID: 123-45-2299 Room-Bed: Ht(cm): 176.53 (05/08/13)

DOB: 05/05/53 (60) Wt(kg): 89.74 (05/08/13)

Sex: FEMALE Admitted: 03/13/13

Dx: SICK Last transferred: \*\*\*\*\*\*\*\*

CrCL: <Not Found> BSA (m2): 2.07

- - - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - -

1 AMIKACIN INJ,SOLN C 11/12 11/22 A

Give: 1000MG/4ML IVPB Q8H

2 METFORMIN HCL TAB,ORAL C 11/12 12/12 A

Give: 250MG PO BID-WITH FOOD

Enter ?? for more actions

PI Patient Information SO Select Order

PU Patient Record Update NO New Order Entry

Select Action: Quit// 1

**ACTIVE UNIT DOSE**  Nov 12, 2013@14:54:42 Page: 1 of 2

IPCPTESTPATF,NORESULTS Ward: C MEDIC

PID: 123-45-2299 Room-Bed: Ht(cm): 176.53 (05/08/13)

DOB: 05/05/53 (60) Wt(kg): 89.74 (05/08/13)

\*(2)Dosage Ordered: 1000MG/4ML

Duration: \*(3)Start: 11/12/13 14:42

\*(4) Med Route: IV PIGGYBACK

\*(5) Stop: 11/22/13 18:00

(6) Schedule Type: CONTINUOUS

\*(8) Schedule: Q8H

(9) Admin Times: 05-13-21

\*(10) Provider: MARTIG,TRACIE M [w]

(11) Special Instructions:

(12) Dispense Drug U/D Inactive Date

AMIKACIN SULFATE 1000MG/4ML INJ 4

+ Enter ?? for more actions

DC Discontinue ED Edit AL Activity Logs

HD Hold RN Nov 12, 2013@14:55:07

FL Flag VF (Verify)

Select Item(s): Next Screen// ED Edit

Select FIELDS TO EDIT: 2

Available Dosage(s)

1. 250MG/1ML

2. 500MG/2ML

3. 750MG/3ML

4. 1000MG/4ML

Select from list of Available Dosages or Enter Free Text Dose: 1000MG/4ML// 2 5

00MG/2ML

You entered 500MG/2ML is this correct? Yes// YES

WARNING: Dosage Ordered and Dispense Units do not match.

Please verify Dosage.

**NON-VERIFIED UNIT DOSE**  Nov 12, 2013@14:55:07 Page: 1 of 2

IPCPTESTPATF,NORESULTS Ward: C MEDIC

PID: 123-45-2299 Room-Bed: Ht(cm): 176.53 (05/08/13)

DOB: 05/05/53 (60) Wt(kg): 89.74 (05/08/13)

\*(1)Orderable Item: AMIKACIN INJ,SOLN

Instructions:

\*(2)Dosage Ordered: 500MG/2ML

Duration: \*(3)Start: 11/12/13 14:55

\*(4) Med Route: IV PIGGYBACK

\*(5) Stop: 11/22/13 18:00

(6) Schedule Type: CONTINUOUS

\*(8) Schedule: Q8H

(9) Admin Times: 05-13-21

\*(10) Provider: MARTIG,TRACIE M

(11) Special Instructions:

(12) Dispense Drug U/D Inactive Date

AMIKACIN SULFATE 1000MG/4ML INJ 4

+ This change will cause a new order to be created.

ED Edit AC ACCEPT

Select Item(s): Next Screen// AC ACCEPT

\*\*\*Aminoglycoside Ordered\*\*\*\*

Aminoglycoside - est. CrCl: <Unavailable> (<Results Not Found>) [Est.

CrCl based on modified Cockcroft-Gault equation using Adjusted Body Weight

(if ht > 60 in)]

Press Return to continue...

Now processing Clinical Reminder Order Checks. Please wait ...

============================================================================

Press Return to Continue...:

Now Processing Enhanced Order Checks! Please wait...

Press Return to continue...

NATURE OF ORDER: SERVICE CORRECTION// S

...discontinuing original order...

...creating new order...(you will now work on this new order).

**NON-VERIFIED UNIT DOSE**  Nov 12, 2013@14:55:33 Page: 1 of 2

IPCPTESTPATF,NORESULTS Ward: C MEDIC

PID: 123-45-2299 Room-Bed: Ht(cm): 176.53 (05/08/13)

DOB: 05/05/53 (60) Wt(kg): 89.74 (05/08/13)

\*(1)Orderable Item: AMIKACIN INJ,SOLN

Instructions:

\*(2)Dosage Ordered: 500MG/2ML

Duration: \*(3)Start: 11/12/13 14:55

\*(4) Med Route: IV PIGGYBACK

\*(5) Stop: 11/22/13 18:00

(6) Schedule Type: CONTINUOUS

\*(8) Schedule: Q8H

(9) Admin Times: 05-13-21

\*(10) Provider: MARTIG,TRACIE M

(11) Special Instructions:

(12) Dispense Drug U/D Inactive Date

AMIKACIN SULFATE 1000MG/4ML INJ 4

+ Enter ?? for more actions

DC Discontinue ED Edit AL Activity Logs

HD (Hold) RN (Renew)

FL Flag VF Verify

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

WARNING: Dosage Ordered and Dispense Units do not match.

Please verify Dosage.

Would you like to continue verifying the order? No// YES

...a few moments, please.....

Pre-Exchange DOSES:

ORDER VERIFIED.

Enter RETURN to continue or '^' to exit:

**Inpatient Order Entry** Nov 12, 2013@14:55:43 Page: 1 of 1

IPCPTESTPATF,NORESULTS Ward: C MEDIC

PID: 123-45-2299 Room-Bed: Ht(cm): 176.53 (05/08/13)

DOB: 05/05/53 (60) Wt(kg): 89.74 (05/08/13)

Sex: FEMALE Admitted: 03/13/13

Dx: SICK Last transferred: \*\*\*\*\*\*\*\*

CrCL: <Not Found> BSA (m2): 2.07

- - - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - -

1 AMIKACIN INJ,SOLN C 11/12 11/22 A

Give: 500MG/2ML IVPB Q8H

2 METFORMIN HCL TAB,ORAL C 11/12 12/12 A

Give: 250MG PO BID-WITH FOOD

- - - - - - - - RECENTLY DISCONTINUED/EXPIRED (LAST 24 HOURS) - - - - - - - -

3 AMIKACIN INJ,SOLN C 11/12 11/12 DE

Give: 1000MG/4ML IVPB Q8H

Enter ?? for more actions

PI Patient Information SO Select Order

PU Patient Record Update NO New Order Entry

Select Action: Quit// 2

**ACTIVE UNIT DOSE**  Nov 12, 2013@14:56:08 Page: 1 of 2

IPCPTESTPATF,NORESULTS Ward: C MEDIC

PID: 123-45-2299 Room-Bed: Ht(cm): 176.53 (05/08/13)

DOB: 05/05/53 (60) Wt(kg): 89.74 (05/08/13)

\*(2)Dosage Ordered: 250MG

Duration: \*(3)Start: 11/12/13 14:43

\*(4) Med Route: ORAL (BY MOUTH)

\*(5) Stop: 12/12/13 18:00

(6) Schedule Type: CONTINUOUS

\*(8) Schedule: BID-WITH FOOD

(9) Admin Times: 0730-1730

\*(10) Provider: MARTIG,TRACIE M [w]

(11) Special Instructions:

(12) Dispense Drug U/D Inactive Date

METFORMIN HCL 250MG (1/2Nov 12, 2013@14:56:25 1

+ Enter ?? for more actions

DC Discontinue ED Edit AL Activity Logs

HD Hold RN Renew

FL Flag VF (Verify)

Select Item(s): Next Screen// ED Edit

Select FIELDS TO EDIT: 2

Available Dosage(s)

1. 250MG

2. 500MG

Select from list of Available Dosages or Enter Free Text Dose: 250MG// 2 500MG

You entered 500MG is this correct? Yes// YES

WARNING: Dosage Ordered and Dispense Units do not match.

Please verify Dosage.

**NON-VERIFIED UNIT DOSE**  Nov 12, 2013@14:56:25 Page: 1 of 2

IPCPTESTPATF,NORESULTS Ward: C MEDIC

PID: 123-45-2299 Room-Bed: Ht(cm): 176.53 (05/08/13)

DOB: 05/05/53 (60) Wt(kg): 89.74 (05/08/13)

\*(1)Orderable Item: METFORMIN HCL TAB,ORAL <DIN>

Instructions:

\*(2)Dosage Ordered: 500MG

Duration: \*(3)Start: 11/12/13 14:56

\*(4) Med Route: ORAL (BY MOUTH)

\*(5) Stop: 12/12/13 18:00

(6) Schedule Type: CONTINUOUS

\*(8) Schedule: BID-WITH FOOD

(9) Admin Times: 0730-1730

\*(10) Provider: MARTIG,TRACIE M

(11) Special Instructions:

(12) Dispense Drug U/D Inactive Date

METFORMIN HCL 250MG (1/2 X 500MG) TAB 1

+ This change will cause a new order to be created.

ED Edit AC ACCEPT

Select Item(s): Next Screen// AC ACCEPT

\*\*\*Metformin Lab Results\*\*\*

Metformin - no serum creatinine within past 180 days.

Press Return to continue...

Now processing Clinical Reminder Order Checks. Please wait ...

============================================================================

\*\*\* Clinical Reminder Order Check | Severity: MEDIUM \*\*\*

CR3286 CROC - METFORMIN DRUG SEVERITY MEDIUM (RULE DISP NAME)

THIS IS A SAMPLE ORDER CHECK MESSAGE FOR METFORMIN SEVERITY MEDIUM CLINICAL

REMINDER ORDER CHECK.

----------------------------------------------------------------------------

Press Return to Continue...:

\*\*\* Clinical Reminder Order Check | Severity: LOW \*\*\*

CR3286 CROC - METFORMIN DRUG SEVERITY LOW (RULE DISP NAME)

THIS IS A SAMPLE ORDER CHECK MESSAGE FOR METFORMIN SEVERITY LOW CLINICAL

REMINDER ORDER CHECK.

----------------------------------------------------------------------------

Press Return to Continue...:

Do you want to Intervene? N// NO

Now Processing Enhanced Order Checks! Please wait...

Press Return to continue...

NATURE OF ORDER: SERVICE CORRECTION// S

...discontinuing original order...

...creating new order...(you will now work on this new order).

**NON-VERIFIED UNIT DOSE**  Nov 12, 2013@14:57:09 Page: 1 of 2

IPCPTESTPATF,NORESULTS Ward: C MEDIC

PID: 123-45-2299 Room-Bed: Ht(cm): 176.53 (05/08/13)

DOB: 05/05/53 (60) Wt(kg): 89.74 (05/08/13)

\*(1)Orderable Item: METFORMIN HCL TAB,ORAL <DIN>

Instructions:

\*(2)Dosage Ordered: 500MG

Duration: \*(3)Start: 11/12/13 14:56

\*(4) Med Route: ORAL (BY MOUTH)

\*(5) Stop: 12/12/13 18:00

(6) Schedule Type: CONTINUOUS

\*(8) Schedule: BID-WITH FOOD

(9) Admin Times: 0730-1730

\*(10) Provider: MARTIG,TRACIE M

(11) Special Instructions:

(12) Dispense Drug U/D Inactive Date

METFORMIN HCL 250MG (1/2 X 500MG) TAB 1

+ Enter ?? for more actions

DC Discontinue ED Edit AL Activity Logs

HD (Hold) RN (Renew)

FL Flag VF Verify

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

WARNING: Dosage Ordered and Dispense Units do not match.

Please verify Dosage.

Would you like to continue verifying the order? No// YES

...a few moments, please.....

Pre-Exchange DOSES:

ORDER VERIFIED.

Enter RETURN to continue or '^' to exit:

**Inpatient Order Entry** Nov 12, 2013@14:57:24 Page: 1 of 1

IPCPTESTPATF,NORESULTS Ward: C MEDIC

PID: 123-45-2299 Room-Bed: Ht(cm): 176.53 (05/08/13)

DOB: 05/05/53 (60) Wt(kg): 89.74 (05/08/13)

Sex: FEMALE Admitted: 03/13/13

Dx: SICK Last transferred: \*\*\*\*\*\*\*\*

CrCL: <Not Found> BSA (m2): 2.07

- - - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - -

1 AMIKACIN INJ,SOLN C 11/12 11/22 A

Give: 500MG/2ML IVPB Q8H

2 METFORMIN HCL TAB,ORAL C 11/12 12/12 A

Give: 500MG PO BID-WITH FOOD

- - - - - - - - RECENTLY DISCONTINUED/EXPIRED (LAST 24 HOURS) - - - - - - - -

3 AMIKACIN INJ,SOLN C 11/12 11/12 DE

Give: 1000MG/4ML IVPB Q8H

4 METFORMIN HCL TAB,ORAL C 11/12 11/12 DE

Give: 250MG PO BID-WITH FOOD

Enter ?? for more actions

PI Patient Information SO Select Order

PU Patient Record Update NO New Order Entry

Select Action: Quit//