
Physician EPCS Workflow Guide

Physician Workflow

- Step 1: Confirm Patient's Preferred Pharmacy default selected

The screenshot displays a medical software interface for signing orders. At the top, a table lists order details: Order Name, Status, Start, and Details. Below this, a medication order is shown for 'oxyCODONE-acetaminophen (Percocet 10/325 oral tab)'. The order details include the dose (2 tab(s)), route (Oral), frequency (Every 6 hr), and duration. A dropdown menu is open, showing a list of pharmacies. The first option, 'Walgreens Drug Store 05073 (1551 Forestdale Blvd)', is selected and highlighted in red. Other options include 'AcarialHealth Pharmacy #17, Inc.', 'KIRKLIN CLINIC PHARMACY', and several other pharmacies. The interface also includes fields for 'Drug Form', 'Special Instructions', 'Type Of Therapy' (Acute or Maintenance), and 'Stop Date'. At the bottom, there are buttons for 'Missing Required Details', 'Dx Table', 'Orders For Cosignature', 'Orders For Nurse Review', and 'Sign'.

Physician Workflow

- Step 2: Checkmark controlled substance order, click “Sign”

Electronic Prescription Preview

Rx Plans (0): No Benefit Found

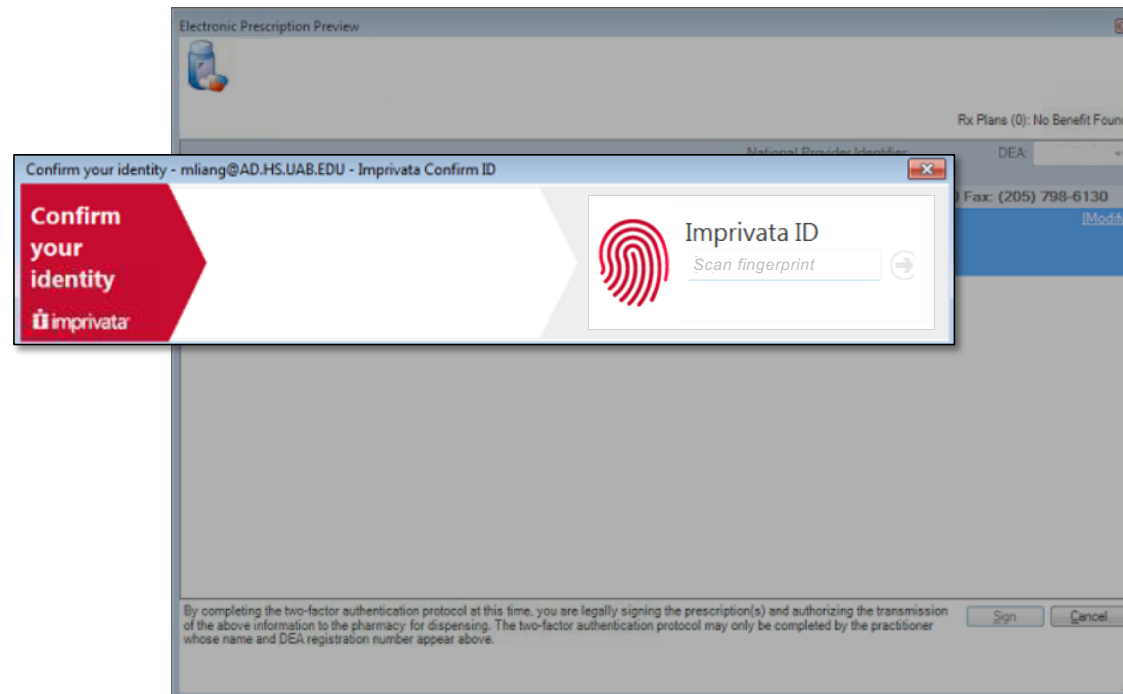
National Provider Identifier: DEA: [dropdown]

Walgreens Drug Store 05073 — 1551 Forestdale Blvd, Birmingham, AL 352143017 Phone: (205) 798-8360 Fax: (205) 798-6130

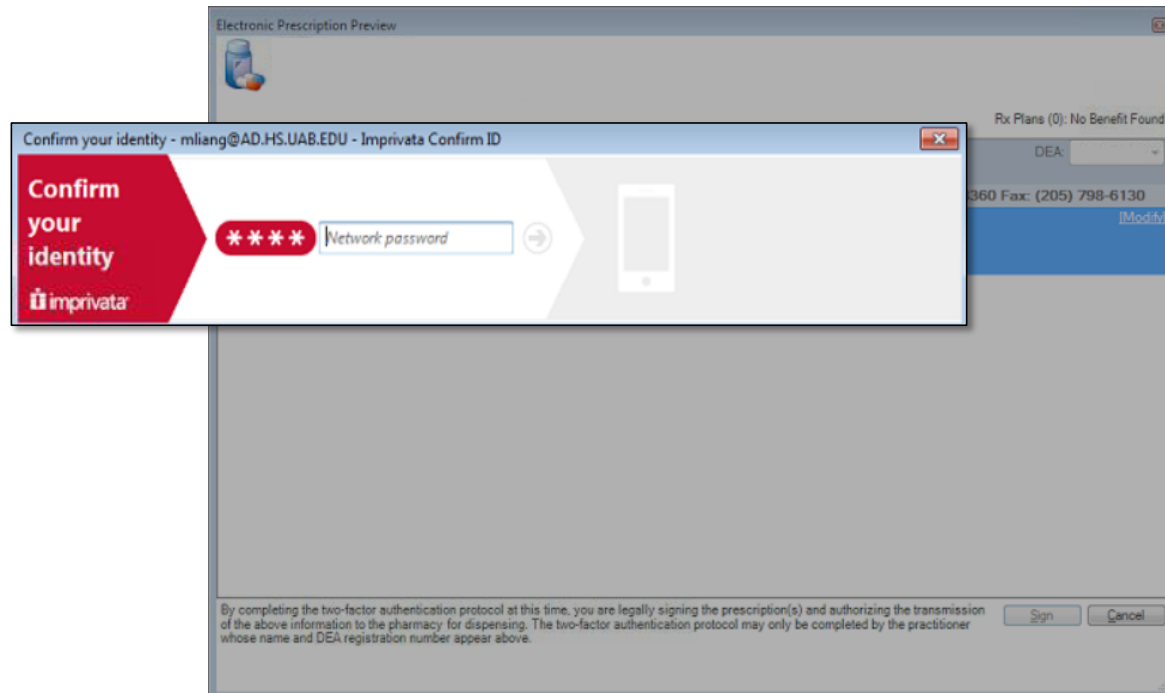
<input checked="" type="checkbox"/>	Percocet 10/325 oral tablet [Schedule 2]	[Modify]
	1 tab(s) Oral Every 6 hr, PRN for pain	
	#30 tab(s), Refills: 0, DAW No, Date Written: 07-15-2019	

By completing the two-factor authentication protocol at this time, you are legally signing the prescription(s) and authorizing the transmission of the above information to the pharmacy for dispensing. The two-factor authentication protocol may only be completed by the practitioner whose name and DEA registration number appear above.

- Step 3: Place finger on fingerprint scanner
 - ◆ If fingerprint scanner not available, proceed to Step 4

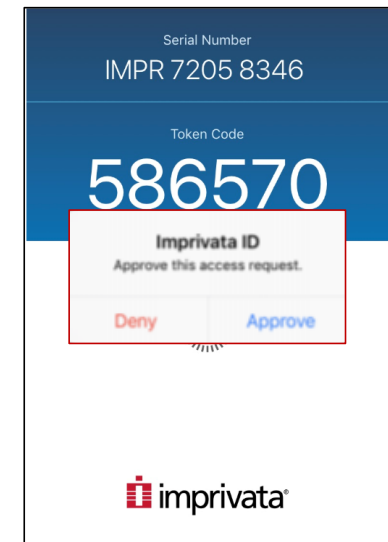


- Step 4: Enter IMPACT password



Physician Workflow

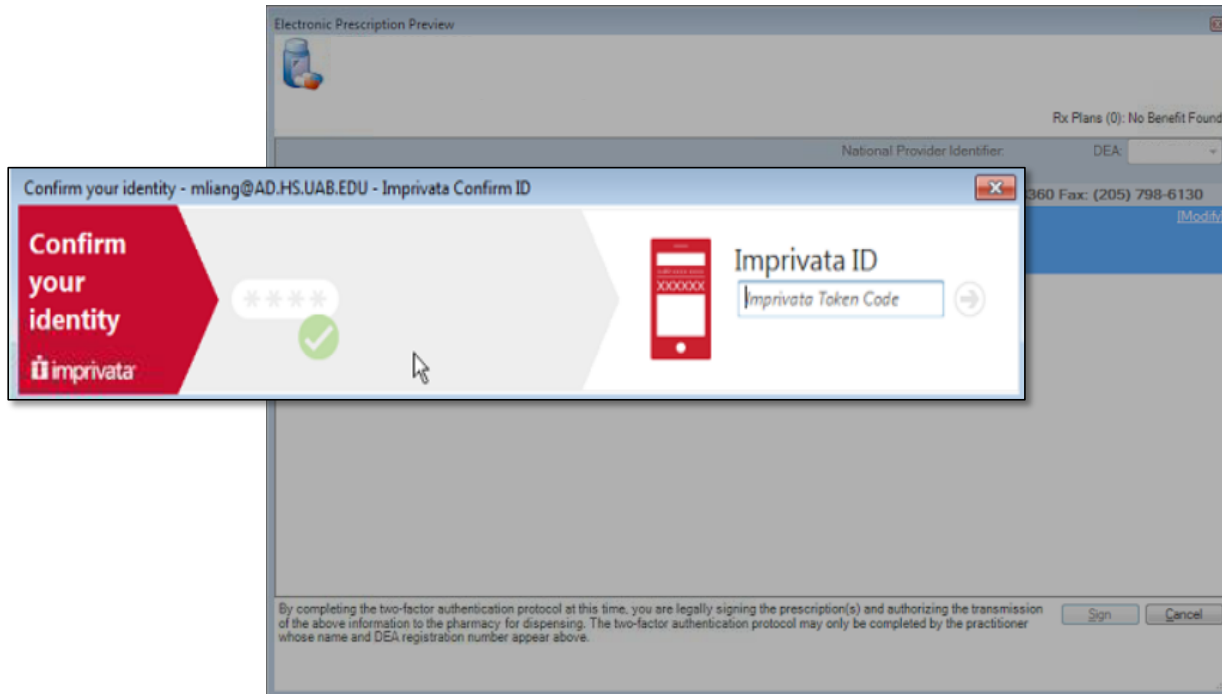
- Step 5: If prompted, click “Approve” on your mobile device



Mobile Device Screen

Physician Workflow

- Step 6: If prompted, open Imprivata ID app and enter 6 digit token code shown



Special Considerations

- *Earliest Fill Date* Field
 - ◆ Must be used to electronically prescribe up to a 90 day supply of a CII Rx
 - ◆ Each Rx must indicate earliest date that pharmacy can fill (DEA req)
 - ◆ *Requested Start Date and Time* field does not transmit to the pharmacy
- Partial Fills
 - ◆ Partial fill of controlled substance Rx voids the remainder of the Rx
 - ◆ Controlled Substance Rx cannot be transferred from one pharmacy to another

Special Considerations

■ Earliest Fill Date Workflow

- ◆ Enter new Rx or Right click to renew existing Rx- Sign Prescription
- ◆ Right click to copy Rx signed and change earliest fill dates for sequential months

Order Name	Status	Dose ...	Details
acetaminophen-HYDR Ocodone (Norco 7.5 ...	Prescribed	= 1 tab(s), Tab, Oral, Every 4 hr, PRN as needed for pain, # 180 tab(s), Refill(s) 0	
Al hydroxide/Mg hydroxide/simethicone	Ordered	30 mL, Oral Sus Mix with lidocal	Renew Modify without Resending 1/05/18 17:00:00
Al hydroxide/Mg hydroxide/simethicone	Ordered	30 mL, Oral Sus Mix with lidocal	Copy 1/02/18 12:00:00
albumin human	Ordered	25 gm, = 500 m	Cancel/Reorder Suspend 10/16/18 17:55:00

Details for **acetaminophen-HYDR Ocodone (Norco 7.5 mg-325 mg oral tablet)** Send To: Jefferson Hlth Sys Phcy#2 - Birming (1515 6th Avenue South)

Details | Order Comments | Diagnoses

*Dose: 1 tab(s) *Route of Administration: Oral *Frequency: Every 4 hr Duration: 30 90 *Dispense: 180 tab(s) Refill: 0

Drug Form: Tab PRN: as needed for pain Special Instructions:

*Requested Start Date/Time: 10/17/2018 1359 Type Of Therapy: Acute Maintenance

Note to Pharmacy:

efx Product Type:




DAW: Yes No

Earliest Fill Date: 11/01/2018

Stop Date: Print DEA Number: Yes No

Special Considerations

- Earliest Fill Date Workflow (cont.)
 - ◆ Creates three separate Rxs with sequential earliest fill dates for 30 day increments.
 - ◆ Pharmacy will not fill before the earliest fill date indicated on the Rx

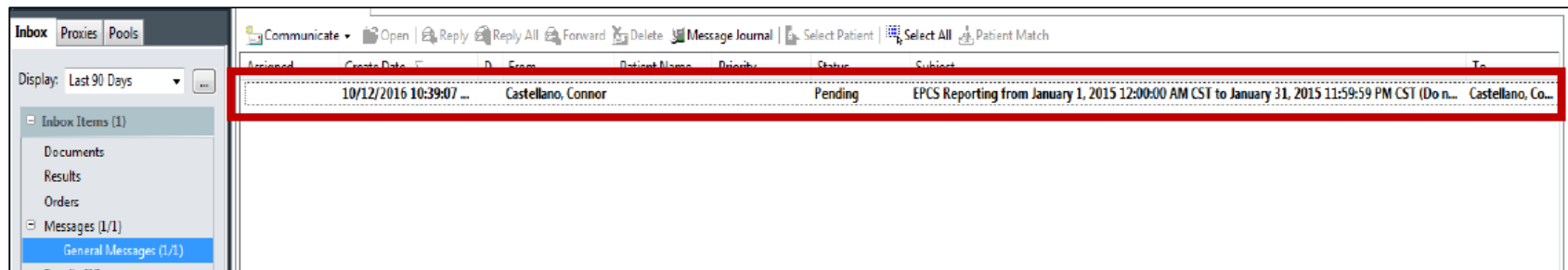
Medications	
 acetaminophen-HYDR Ocodone (Norco 7.5 ...	Prescribe 10/17/2018 13:59 = 1 tab(s), Tab, Oral, Every 4 hr, PRN as needed for pain, # 180 tab(s), Refill(s) 0, Pharmacy: Jefferson Hlth Sys Phcy#2 - Birming, Earliest Fill Date: 11/1/2018
 acetaminophen-HYDR Ocodone (Norco 7.5 ...	Prescribe 10/17/2018 14:01 = 1 tab(s), Tab, Oral, Every 4 hr, PRN as needed for pain, # 180 tab(s), Refill(s) 0, Pharmacy: Jefferson Hlth Sys Phcy#2 - Birming, Earliest Fill Date: 12/1/2018
 acetaminophen-HYDR Ocodone (Norco 7.5 ...	Prescribe 10/17/2018 14:01 = 1 tab(s), Tab, Oral, Every 4 hr, PRN as needed for pain, # 180 tab(s), Refill(s) 0, Pharmacy: Jefferson Hlth Sys Phcy#2 - Birming, Earliest Fill Date: 1/1/2019

Special Considerations

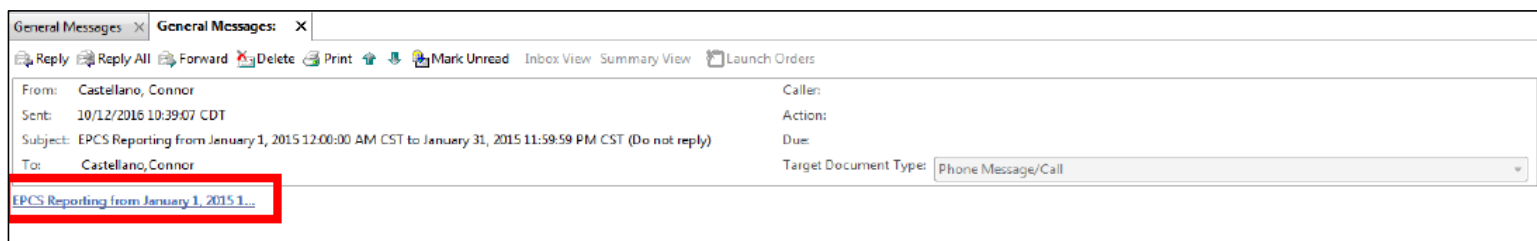
- Narcotics Addiction DEA Number (NADEAN)
 - ◆ Rx for detoxification treatment or maintenance treatment must include prescriber's NADEAN number
 - ◆ Example: Buprenorphine / Naloxone
 - ◆ NADEAN # begins with "X"
 - ◆ Should be entered in Notes to Pharmacy field on RX
 - ◆ Form - NADEAN: (insert #)
 - ◆ Standard DEA # is electronically transmitted in addition

Reports

- At the beginning of every month, providers using ePCS will receive a report in Message Center, showing the controlled substances that they prescribed for the previous month. Providers should review this report and notify compliance if there are any concerns about possible diversion.
- Click on **General Messages** in the Inbox. Locate message with the subject - **ePCS Reporting from X date to Y date (Do not reply)**.



- Click blue hyperlink to open attachment. Review for suspicious activity



- Sample: Prescriber ePCS Activity Report Data

EPCS Reporting from September 1, 2016 12:00:00 AM CDT to September 30, 2016 11:59:59 PM CDT (Do not reply)

Prescriber EPCS Activity Report

Prescriber Id	Prescriber Last Name	Prescriber First Name	Prescriber Address Line 1	Prescriber Address Line 2	Prescriber City	Prescriber State	Prescriber Zip Code	DEA Number	Patient Id	Patient Last Name
1020971	Test	Physician2	450 E 23rd St		Fremont	NE	68025	NE1234555	7273129	Swift
1020971	Test	Physician2	450 E 23rd St		Fremont	NE	68025	NE1234555	7273130	Kyle
1020971	Test	Physician2	450 E 23rd St		Fremont	NE	68025	NE1234555	7273129	Swift

Prescription Dispensed Quantity	Prescription Directions	Prescription Date Written	Prescription Earliest Fill Date	Prescription Type	Prescription Number Of Refills	Prescription Pharmacy Note	Prescription Status
60	1 tab(s) PO q12hR	2016-09-27		NEWRX	0		Delivered
60	1 tab(s) PO q12hR	2016-09-28		NEWRX	0		Delivered
120	2 tab(s) PO q12hR	2016-09-26		NEWRX	0		Delivered