



# Provider Survival Guide

## Part 2

### Academic Detailing Clinician Guide (2024)

**VA**



**U.S. Department of Veterans Affairs**

Veterans Health Administration  
*PBM Academic Detailing Services*

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## VA Academic Detailing Service Mission:

Innovate strategies that promote evidence-based practices, build relationships with healthcare teams, and resolve barriers to improve Veteran's care through academic detailing.

**VA**



### U.S. Department of Veterans Affairs

Veterans Health Administration  
PBM Academic Detailing Services

*These materials were developed by:*

#### **VA PBM Academic Detailing Services**

Your Partner in Enhancing Veteran Health Outcomes

#### **VA PBM Academic Detailing Services Email Group:**

[PharmacyAcademicDetailingProgram@va.gov](mailto:PharmacyAcademicDetailingProgram@va.gov)

#### **VA PBM Academic Detailing Services SharePoint Site:**

<https://dvagov.sharepoint.com/sites/vhaacademicdetailing>

#### **VA PBM Academic Detailing Services Public Website:**

<http://www.pbm.va.gov/PBM/academicdetailingservicehome.asp>

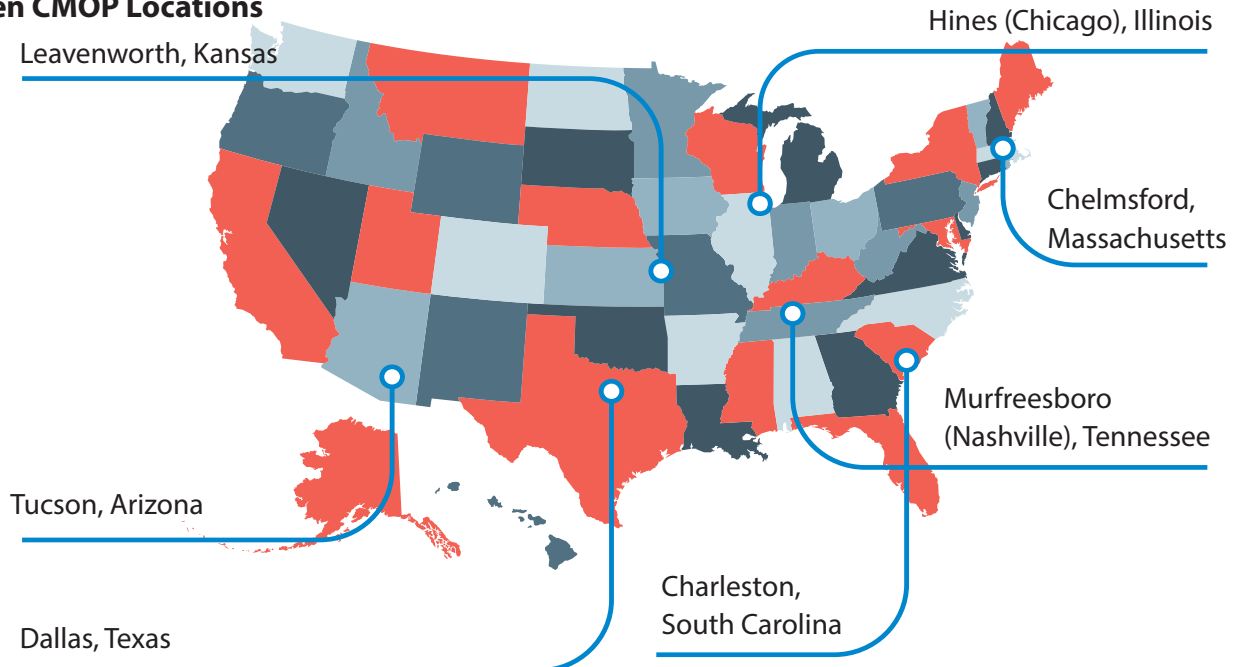
## Section 1: VA Pharmacy Workflow

### Consolidated Mail Outpatient Pharmacy (CMOP)

CMOP fills and mails approximately 80% of all outpatient prescriptions for the medical centers.

- Decreases wait times at the pharmacy
- Reduces Veteran visits to medical centers
- Provides cost savings
- Increases convenience
- Increases adherence

#### Seven CMOP Locations



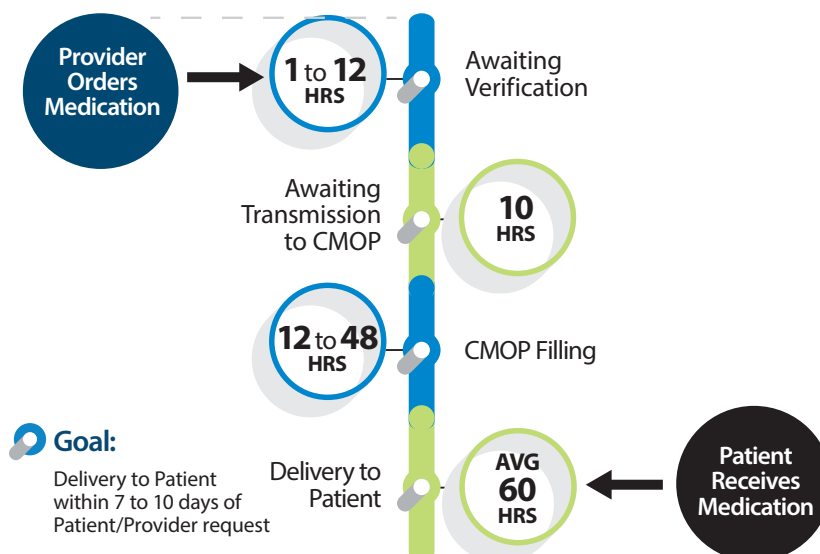
CII prescriptions are processed and mailed locally. Track recently filled medications from CMOP online at <https://vaww.cmop.med.va.gov/CMOPNationalWebApplication/>.



See Resource Section #1 (RS1), Reference (Ref) 1 in the back of this document.

See RS1

Figure 1. Mailed Medications from Provider to Patient








Maintenance medications should be routinely processed for mail.

To be good stewards of resources, VA prescriptions with refills are not automatically sent.



## Querying State Prescription Drug Monitoring Programs (PDMP)

Any provider who prescribes a Controlled Substance (CS) (not just opioids) must query the PDMP or have an authorized delegate query on behalf of the provider.

Questions You May Have	Actions to Take or Details
<b>WHY</b> query the PDMP? 	<ul style="list-style-type: none"> <li>• Supports the safe and effective prescribing of CS to patients</li> <li>• Required by state licensure boards and VHA policy</li> <li>• Aligns with national prescribing guidelines</li> </ul>
<b>WHO</b> can query the PDMP? 	<ul style="list-style-type: none"> <li>• Any provider who prescribes a CS (NOT just opioids) <b>MUST</b> query</li> <li>• An authorized delegate of a provider may query</li> <li>• Pharmacists may query</li> </ul>
<b>HOW</b> often should I query the PDMP? 	<ul style="list-style-type: none"> <li>• Every time a new CS is prescribed, a PDMP check is required for all schedules of CS</li> <li>• At least annually for patients with active CS prescriptions</li> <li>• Providers must follow VHA policy</li> </ul>
<b>WHAT</b> should I do if information about a patient in the PDMP concerns me? 	<ul style="list-style-type: none"> <li>• Do not dismiss patients from care <ul style="list-style-type: none"> <li>— Confirm patient is aware of all prescriptions on the PDMP report</li> <li>— Consider sharing and consulting with other providers</li> <li>— Discuss safety concerns with patient (increased risk for respiratory depression, drug interactions, and overdose)</li> </ul> </li> </ul>
<b>HOW</b> do I query PDMP? 	<ul style="list-style-type: none"> <li>• First, register with the state's PDMP associated with the facility that you log into. You can query PDMP by using one or all of the following methods: <ul style="list-style-type: none"> <li>— Select the PDMP Query button on the CPRS Ribbon if your state participates</li> <li>— Use a local note template that includes an embedded PDMP button (where applicable)</li> <li>— When you are unable to query in CPRS or if you have concerns about the results, you can query through the state PDMP website</li> </ul> </li> </ul>
<b>WHEN</b> should I check?	<b>Tip for Prescribers:</b> If your order needs a <b>PIV</b> , check the PDMP

**WHAT** are some examples of CS Schedules II-V requiring a PDMP check?

APAP/Codeine #3    pregabalin    seizure meds (e.g., lacosamide)  
Lomotil    modafinil    testosterone

All PDMP queries must be documented using the standard progress note titled “**State Prescription Drug Monitoring Program**” in CPRS especially when querying from the state PDMP website. Only include portions of the PDMP query results in the electronic medical record that are relevant to the patient’s VA treatment.

The PDMP button changes to “**PDMP Cancel**” and then changes to “**PDMP Results**”



See RS1

For more information about PDMP, see **Resource Section #1, (RS1)**, Ref 2 in the back of this document.

### Documentation Tips:

- A progress note is generated when using the PDMP Query button, and then selecting “Done and Create Note.”
- When a delegate completes the PDMP query, the note must be co-signed by the delegating provider
- If you have questions, contact your Pain Management, Opioid Safety, and PDMP (PMOP) Coordinator



My HealtheVet is VA's private and secure online patient portal for Veterans, active duty service members, and their dependents and caregivers. The available online resources and tools offer Veterans greater control over their health and wellness.

### What Can Veterans Do on My HealtheVet?



#### Pharmacy

Refill your VA prescriptions, track delivery, view a list of your VA medications and other details.



#### Appointments

Keep track of your upcoming VA medical appointments and get email reminders.



#### Messages

Communicate securely online with your VA healthcare team and other VA staff about non-emergency information or questions.



#### Health Records

View, print, or download a copy of your VA medical record information, or enter your own health information.



See RS1

For more information about My HealtheVet Product Site, promotional materials, sign-in options, and premium account, see **Resource Section #1, (RS1)**, Ref 3-8 for additional information about My HealtheVet.



### VA Mobile Apps

A variety of health-related mobile apps are available for the healthcare team and Veterans. Many VA apps access a Veteran's VA Electronic Health Record (EHR). To protect the information in the Veteran's EHR, these apps require the Veteran to access using a secure My HealtheVet Sign-In Partner.



See RS1

For more information about VA Mobile apps such as VA pharmacy related apps, see **Resource Section #1, (RS1)**, Ref 9-11 in the back of this document.



## VA Telehealth - VA Video Connect (VVC)

VA Video Connect enables you to meet with Veterans in a virtual medical room, using encrypted video to ensure the session is secure and private. It allows you and the healthcare team to see and talk to Veterans, and provides VA health care more conveniently for Veterans in rural areas with limited access to VA healthcare facilities.



Visit VVC or ask your Virtual Care Manager for the steps to get started. **See Resource Section #1, (RS1)**, Ref 12-17 for additional information about VA Telehealth Services.

**See RS1**

## VA Community Care Network (CCN)

Veterans have options when it comes to their care. They can receive care through a VA provider at a VA facility, or if eligible, through authorized community providers, including CCN In-Network retail pharmacies.

### CCN Regional Networks

CCN is comprised of 5 regional networks contracted with VA to purchase care for Veterans in their community.

### Immediate Need Rx Benefit Overview



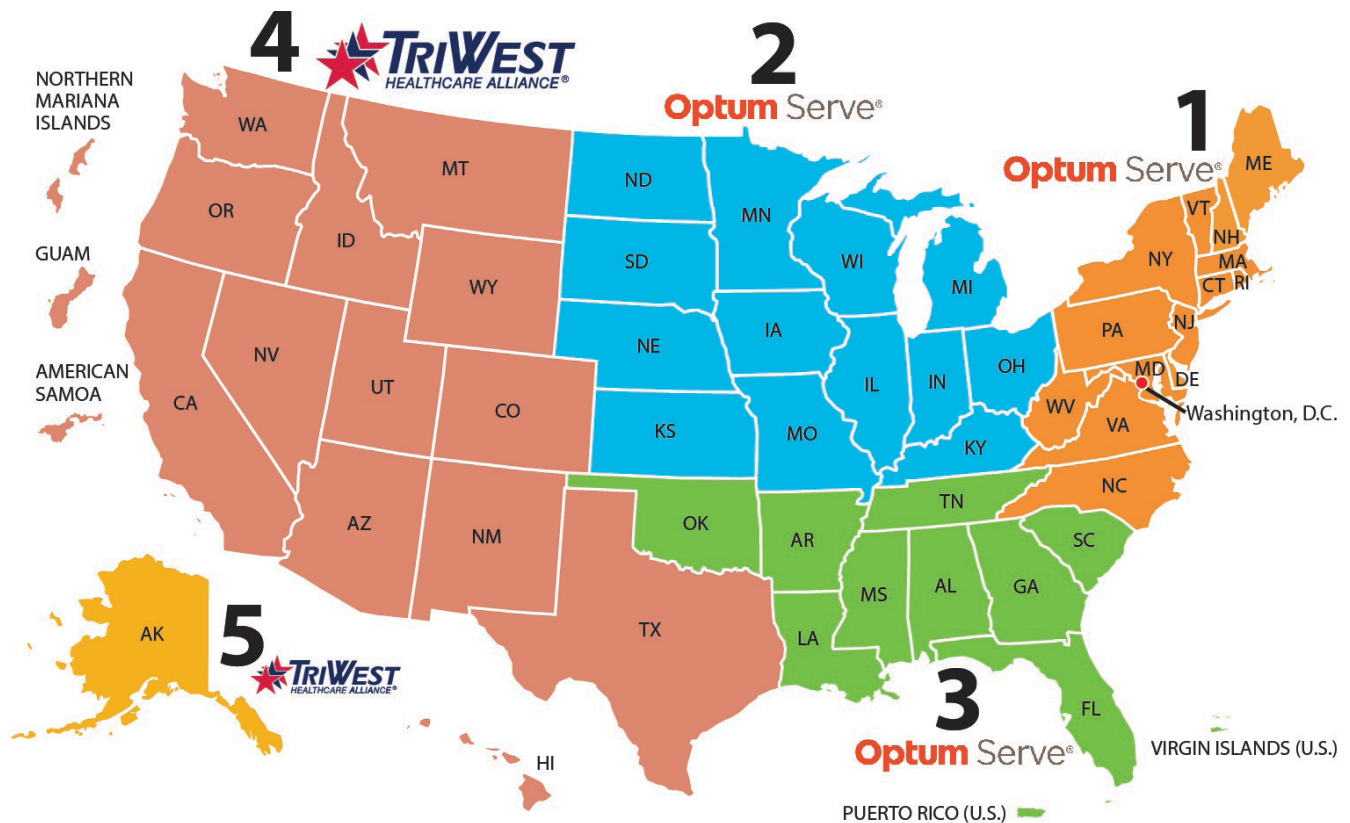
Expands access to timely, high-quality care



Includes immediately needed urgent/emergent medications



Provides open access



**Veterans can visit any pharmacy within VA's network.**



## Filling urgent/emergent prescriptions through a CCN In-Network pharmacy at VA expense

VA Providers can send a prescription to a CCN In-Network retail pharmacy ONLY when filling the prescription for the Veteran at a VA pharmacy is not an option. (e.g., VA CBOC or telehealth providers and VA pharmacy is closed or too far away). A few reminders when writing prescriptions utilizing this option:

- No refills
- Up to 7-day supply (or state limits) of opioids or other CS
- A maximum of 14-day supply for the initial fill with VA Urgent/Emergent Formulary (U/E) medications
- All routine/non-urgent medications should continue to go to a VA pharmacy for processing
- Use the VA Formulary Advisor to determine if the medication is on the U/E formulary. If the medication is not on the U/E Formulary, the VA provider may request the local VA pharmacy to expedite the prescription in the mail (locally determined) or the Veteran can pick it up at the VA pharmacy window.

**TIP:** Use the **VA Formulary Advisor** (<https://www.va.gov/formularyadvisor/>) to determine the medication formulary status and access **CFUs**!

Select **Glossary** to review Terms and Abbreviations

The screenshot shows the VA Formulary Advisor interface. At the top, there's a navigation bar with 'VA NF VA Formulary Advisor', a search bar, and links for 'New Search', 'Glossary', and 'App Feedback'. Below the navigation bar, a search bar contains the text 'prol'. To the left of the search results, there are tabs for 'Drug', 'Drug Class', and 'Therapeutic Category', and a search filter for 'prol'. Below the search bar, there are tabs for 'VA Formulary', 'Urgent/Emergent Formulary', and 'All'. The main content area displays '7 Results - Select an item for additional details'. The results list various medications and their formulary status. A red dashed box highlights the 'CFU' icon next to the 'DENOSUMAB INJ,SOLN' entry. A yellow callout box at the bottom right says 'Select the **CFU** icon to open the document'.

Search the VA National Formulary:

7 Results - Select an item for additional details

Drug	Drug Class	Therapeutic Category	Formulary Status
ACETAMINOPHEN/ OXYCODONE SOLN,ORAL			U/E NF
OXYCODONE-ACETAMINOPHEN, PROLATE			
ACETAMINOPHEN/ OXYCODONE TAB			U/E F
ENDOCET, NALOCET, OXYCODONE-ACETAMINOPHEN, PERCOCET, PRIMLEV, PROLATE			
ALDESLEUKIN INJ			PA-F
PROLEUKIN			
ALPHA-1-PROTEINASE INHIBITOR,HUMAN INJ,SOLN			NF
ARALAST NP, GLASSIA, PROLASTIN-C, ZEMAIRA			
BROMFENAC SOLN,OPH			NF
PROLENSA, XIBROM			
CALCIUM/ IODINE CAP/ TAB			NF
PROLAMINE IODINE			
DENOSUMAB INJ,SOLN			PA-F
PROLIA, XGEVA			CFU

Select the **CFU** icon to open the document

## VA Provider's Steps When Calling in a Prescription to a CCN In-Network Pharmacy

1

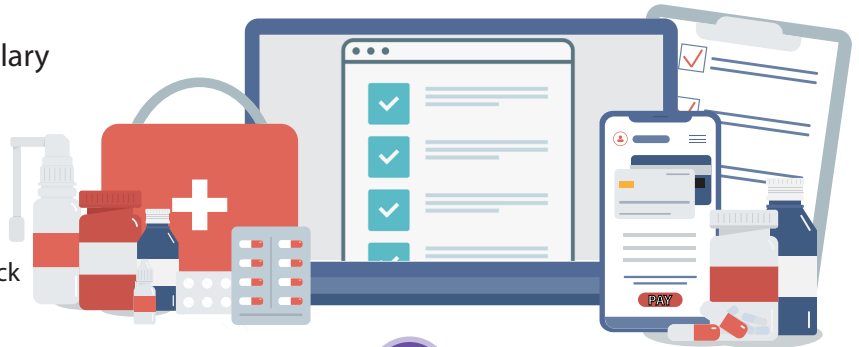
Ensure:

- Medication is on the U/E Formulary  
Use the VA Formulary Advisor
- Pharmacy is In-Network  
Use the VA Facilitator Locator



See RS1

For more information, see **Resource Section #1, (RS1)**, Ref 18-19 in the back of this document



2

Dispense the prescription:

- VA providers in Regions 4-5 can call or staff can fax the prescription to the pharmacy or provide the Veteran with a paper prescription
- VA providers in Regions 1-3 will need to call Interactive Voice Response first for verification: **1-844-839-6118**

3

Give billing information to the Veteran and pharmacy

### Responsibilities of In-Network CCN Providers:

- Must adhere to the VA Formulary and the process for authorized medical care, and provide necessary medical documentation as required by contract
- Must send all maintenance medications to VA pharmacy for dispensing
- CCN contracts prohibit providing samples to Veterans



### VA Provider's role when seeing Veterans who are also seen by In-Network CCN Providers:



- Not required to rewrite or refill medications prescribed by community network providers
- Prescriptions from CCN providers must be sent to VA pharmacy
- Ask the Veteran about the medications they take and update their non-VA medications in the EHR when seen

### CCN Pharmacy Prior Authorization Process for VA Providers:

Some VAMCs/VISNs use the CCN Pharmacy Prior Authorization (PA) process to allow VA providers to send prescriptions to CCN retail pharmacies for medications the Veteran is currently taking but not included on the VA U/E Formulary (non-formulary in retail) **IF** continuation of therapy is necessary and the VA pharmacy is unable to provide the medication prior to the Veteran running out.

The PA process is intended for therapy the Veteran has not been on before and medication initiation is needed urgently before the local VA pharmacy can provide the medication.



See RS1

For more information about CCN, contact the department in your VA medical facility responsible for purchased care or visit [www.va.gov/communitycare/index.asp](http://www.va.gov/communitycare/index.asp). For additional CCN information, see **Resource Section #1, (RS1)**, including billing information, Ref 20-26 in the back of this document.





## Self-Directed Care

Self-Directed Care (formerly referred to as “dual care”) is when Veterans choose to receive medical management from external healthcare providers, not paid for or consulted by the VA, in addition to receiving care from a VA provider.

Care coordination between VA and external healthcare providers is critical to prevent unfavorable health outcomes for Veterans. This care coordination can be more effectively managed when the VA healthcare team, and external healthcare providers work together with the Veteran to manage, coordinate, and document all aspects of the Veteran’s health care.

### VA Providers and Healthcare Teams’ Responsibilities for Veterans in Self-Directed Care Program

- Evaluate the medical appropriateness of the treatment plan including medications recommended by external health care providers
  - Medications must be consistent with the VA National Formulary (<https://www.va.gov/formularyadvisor/>)



**TAKE  
NOTE**

**VA Providers are NOT required to follow recommendations of external healthcare providers if their professional assessment determines the treatment or medication plan is medically inappropriate**

- Engage case managers of Veterans when specialty case management services are required (e.g., transplant, dialysis)
- Engage Veterans to partner in coordinating and managing their health care with external healthcare providers
  - **NOTE:** The U.S. Department of Veterans Affairs’ Blue Button feature on the My HealtheVet makes accessing VA medical records easy, (see Resource Section #1, (RS1), Ref 7). The VA Blue Button lets a Veteran view and download a copy of their personal health information as an electronic PDF or text file that can be saved, printed, and shared with caregivers and non-VA providers.

### Reminders for VA Providers

- ✓ Re-writing prescriptions from an external healthcare provider is NOT required
- ✓ Monitor and manage the care associated with any medications that YOU prescribe
- ✓ Document pertinent external healthcare provider information in the Veteran’s EHR
- ✓ Complete medication reconciliation including non-VA medications and allergies, and Adverse Drug Reactions (ADRs)



**See RS1**

For questions regarding the Veterans Health Information Exchange (VHIE), contact the VHE coordinator at your facility or VISN. For additional information about Self-Directed Care, **see Resource Section #1, (RS1), Ref 27-30.**

## Section 2: VA Medication Safety and Efficacy

### VA Adverse Drug Event Reporting System (VA ADERS)<sup>31</sup>

#### Key Definitions

- **Historical ADR:** A past event or an event that reportedly occurred in the past at another healthcare setting that no longer requires intervention.
- **Observed ADR:** A reaction that is directly observed or occurring while the patient was on the suspected causative agent.

**Note:** “Observed” refers to a newly noted adverse outcome. Although the term implies the healthcare provider of record made the diagnosis, the fact that a healthcare provider may not have visually “observed” an adverse drug reaction does not preclude reporting as “observed.”

#### Reporting

All ADEs are voluntarily reported through VHA’s intranet VA Web site called VA Adverse Drug Event Reporting System (VA ADERS).

- Any ADEs meeting the criteria of “serious” are forwarded to FDA MedWATCH
- Any ADEs related to vaccines are forwarded to CDC VAERS



It is every provider’s responsibility to record observed and historical reporting of ADRs in the Allergies/Adverse Reactions section of the electronic health record (EHR) to ensure the system performs order checks and other providers can readily access information about adverse drug events (ADEs).

#### ! TAKE NOTE

**Examples of serious ADEs include when a patient’s condition has one or more of the following outcomes or requires medical intervention to prevent one or more of these outcomes:**



- death,
- a life- or organ-threatening experience,
- inpatient hospitalization (or a prolonged hospitalization),
- a persistent or significant disability, or
- a congenital anomaly or birth defect.

**Severe conditions as described by the patient** (e.g., severe pain, severe headache) do not meet the criteria for serious ADEs.



**See RS2**

VHA Directive 1070 provides additional information. **See Resource Section #2, (RS2),** Ref 32.

## Documenting

Documenting an adverse reaction and/or allergy in CPRS is the best way to communicate to all clinicians in your facility and heighten the awareness about reactions that may impact clinical decisions.

### **For Federal Electronic Health Record (EHR), also known as Oracle Cerner:**

When selecting “Observed” and “Historical” when entering allergies or ADEs, follow your facility instructions for consistent reporting.



### **Patient Safety with High-Alert Medications**

High-alert medications are medications, medication classes, or medication categories associated with the highest risk of morbidity and mortality when inappropriately dosed, administered, or monitored. Although mistakes may or may not be more common with these medications, the consequences of an error are typically more devastating to patients.

Examples of high-alert medications associated with the most adverse events include:

- anticoagulants (warfarin, DOACs, heparin)
- antiarrhythmics
- opioids
- chemotherapy
- insulin
- selected immunosuppressive agents



**TAKE ACTION:** Know where to locate your facilities' high-alert medication list and be familiar with what your facilities' risk-mitigation strategies are to prevent harm when using these high-alert medications.

## Medication Information Management (MIM)

### Key Definitions by Policy

#### VA Medication Information Management (MIM)

Medication Information Management (MIM) — is all the information and the related processes that healthcare teams and patients/caregivers require for successful, safe, high quality and patient driven medication care.

- MIM information encompasses both VA internal and external data. MIM also includes allergies, ADRs, and supplies (non-pharmaceutical items obtained via prescription utilized in the provision of health care).
- MIM related processes include medication history, shared and clinical medication decision making, patient education, transitions in care, and medication reconciliation.

**VHA Directive 1164** outlines the essential medication information necessary for review, management, and communication of medication information with Veterans and their healthcare teams. **See Resource Section #2, (RS2), Ref 33.**

**Medication** — The term around “Medication” includes:

- Prescription medications from a VA or other healthcare provider
- Over-the counter-medications such as aspirin and acetaminophen topical ointments or creams
- Alternative medications and substances such as cannabidiol (CBD)
- Herbal medications such as ginkgo
- Nutraceuticals such as multivitamins
- Sample medications obtained from providers outside VA

**Medication History** — Medication History, a component of MIM, includes:

- The patient’s current and past medication use
- What medication the patient is taking and using
- The patient’s experience with the medication (efficacy, problems taking, allergies/ADRs or preferences)
- If the patient is having any trouble managing their medication at home

Medication history is obtained in discussion with the patient and caregiver and is recorded in the patient’s health record.



**A complete medication history is an integral part of provision of care and continuity of management** and includes patient generated data, self-management, transitions in care, and level of understanding obtained by reviewing with patients/caregivers. **Medication use is the only component of medication history required in medication reconciliation.**



## Medication Reconciliation (MedRecon)

Medication Reconciliation, a component of MIM, is a process of ensuring the maintenance of accurate, timely, and complete medication information by:

1. Obtaining medication use information from the patient, patient's caregiver(s) or patient's family member(s) for review.
2. Comparing the information obtained from the patient, patient's caregiver(s) or patient's family member(s) to the medication information available in the VA EHR to identify and address discrepancies.
3. Assembling and documenting the medication information in the VA EHR. Communicating with and providing education to the patient, patient's caregiver(s) or patient's family member(s) regarding updated medication information according to VHA Directive 1345.
4. Communicating relevant medication information to and between the appropriate members of a VA and non-VA healthcare team according to VHA Directive 1345, especially during transitions in care between healthcare settings. For clarification, this does not include levels of care within a healthcare episode, such as a hospital admission and is covered under transitions in care and hand-off standards of care.
5. Offering the patient, patient's caregiver, or family member written information on the medications the patient should be taking when discharged from the hospital or at the end of the outpatient encounter.



**See RS2**

For more information on VHA Medication Reconciliation, **see Resource Section #2, (RS2)**, Ref 34 - VHA Directive 1345.

VA is committed to providing excellent medical care that is safe, proactive, and personalized by ensuring medication information is accurate, timely, and complete.

Ask your facility or VISN Medication Reconciliation point of contact for more information about your local medication reconciliation policy and procedures.

## Take Action by Using the Following MIM Tools Created to Help You Help Your Patients

- 1. Medication Information Management (MIM) CPRS Template** - facilitates documentation of medication history, reconciliation, education, and self-management.
- 2. MIM Medication Education CPRS Template** - facilitates documentation of new medication education and patient understanding. This template is included in the MIM CPRS template and can be used separately.
- 3. CPRS Pre Visit Summary (PVS)** - obtains medication and allergy history prior to an appointment. PVS can be sent via mail, SM in MHV, or completed by Veteran/Caregiver in waiting room. PVS can be used by any healthcare team member to obtain medication history.
- 4. CPRS After Visit Summary (AVS)** - provides a record of care provided to patients at the end of the appointment. AVS includes the updated medication treatment plan, allergies/ADRs, patient education, and more.
- 5. My HealtheVet** - Encourage Veterans and/or caregivers to sign up for a free My HealtheVet premium account to help them manage their medications (e.g., request refills, view PVS and AVS documents, and message with their VA healthcare team).

See Resource Section #2, (RS2), Ref 35.

See Resource Section #2, (RS2), Ref 37.



See RS2

For more information about VA Medication Information Management and Medication Reconciliation Toolkit, see Resource Section #2, (RS2), Ref 38-41.



MIM  
Pharmacy  
Terms  
Glossary

## Expansion of Pharmacogenomics (PGx)

PGx testing is a proactive evidence-based, precision medicine approach to improve medication safety and efficacy. The VA currently offers PGx testing for drugs in several medication classes including antiplatelet therapy, statins, selective serotonin reuptake inhibitors (SSRIs), and chemotherapies.



### PGx is personalized healthcare

Any provider can order PGx testing to help identify the right medication and dose for their patient. Contact your PGx Clinical Pharmacist Practitioner, local PGx pharmacy champion, or Academic Detailer for additional information.







See RS2

For more information on PGx, see Resource Section #2, (RS2) Ref 42-43.



## Section 3: Resources and References

Resource Section	Reference
<b>Section 1: VA Pharmacy Workflow</b>	
 Consolidated Mail Outpatient Pharmacy (CMOP)	
<ul style="list-style-type: none"> <li>How to track recently filled medications from CMOP</li> </ul>	1. <a href="https://vaww.cmop.med.va.gov/CMOPNationalWebApplication/">https://vaww.cmop.med.va.gov/CMOPNationalWebApplication/</a>
 Prescription Drug Monitoring Programs (PDMP)	
<ul style="list-style-type: none"> <li>VHA Directive 1306(1): Querying State PDMP, 11SPEC-Specialty Care Services</li> </ul>	2. <a href="https://www.va.gov/vhapublications/ViewPublication.asp?pub_ID=3283">https://www.va.gov/vhapublications/ViewPublication.asp?pub_ID=3283</a>
Patient Care Services: VHA Office of Connected Care ( <a href="https://connectedcare.va.gov/">https://connectedcare.va.gov/</a> )	
 My HealtheVet	
<ul style="list-style-type: none"> <li>Internet Website</li> </ul>	3. <a href="https://www.myhealth.va.gov/mhv-portal-web/home">https://www.myhealth.va.gov/mhv-portal-web/home</a>
<ul style="list-style-type: none"> <li>Promotion and Communication</li> </ul>	4. <a href="https://vaww.va.gov/MYHEALTHEVET/promotion_communication.asp">https://vaww.va.gov/MYHEALTHEVET/promotion_communication.asp</a>
<ul style="list-style-type: none"> <li>Sign-In options to access My HealtheVet account</li> </ul>	5. <a href="https://vaww.va.gov/myhealthevet/MHV_Sign-In_Changes.asp">https://vaww.va.gov/myhealthevet/MHV_Sign-In_Changes.asp</a>
<ul style="list-style-type: none"> <li>Get A Premium My HealtheVet Account</li> </ul>	6. <a href="https://www.va.gov/resources/get-a-premium-my-healthevet-account/">https://www.va.gov/resources/get-a-premium-my-healthevet-account/</a>
<ul style="list-style-type: none"> <li>VA Blue Button</li> </ul>	7. <a href="https://vaww.va.gov/MYHEALTHEVET/blue_button.asp">https://vaww.va.gov/MYHEALTHEVET/blue_button.asp</a>
<ul style="list-style-type: none"> <li>VA Blue Button Fact Sheet</li> </ul>	8. <a href="https://tinyurl.com/3dse5svk">https://tinyurl.com/3dse5svk</a>
 VA Mobile Apps	
<ul style="list-style-type: none"> <li>Internet Website</li> </ul>	9. <a href="https://www.mobile.va.gov">https://www.mobile.va.gov</a>
<ul style="list-style-type: none"> <li>VA Pharmacy-related Apps</li> </ul>	10. <a href="https://mobile.va.gov/app/ask-a-pharmacist">https://mobile.va.gov/app/ask-a-pharmacist</a> 11. <a href="https://mobile.va.gov/app/va-health-and-benefits">https://mobile.va.gov/app/va-health-and-benefits</a>
<b>VA Telehealth</b>	
<ul style="list-style-type: none"> <li>VA Video Connect (VVC) Now App</li> </ul>	12. <a href="https://mobile.va.gov/app/vvc-now">https://mobile.va.gov/app/vvc-now</a>
<ul style="list-style-type: none"> <li>VA Virtual Care Managers</li> </ul>	13. <a href="https://vaww.telehealth.va.gov/pgm/vcm/index.asp">https://vaww.telehealth.va.gov/pgm/vcm/index.asp</a>
<ul style="list-style-type: none"> <li>VA Telehealth Services Intranet</li> </ul>	14. <a href="https://vaww.telehealth.va.gov/">https://vaww.telehealth.va.gov/</a>
<ul style="list-style-type: none"> <li>VA Telehealth Services Internet</li> </ul>	15. <a href="https://telehealth.va.gov/">https://telehealth.va.gov/</a>
<ul style="list-style-type: none"> <li>Telehealth VISN Contacts</li> </ul>	16. <a href="https://dvagov.sharepoint.com/sites/VHA-Telehealth/Lists/leads/default.aspx">https://dvagov.sharepoint.com/sites/VHA-Telehealth/Lists/leads/default.aspx</a>
<ul style="list-style-type: none"> <li>VA Video Connect Fundamentals</li> </ul>	17. <a href="https://vaww.telehealth.va.gov/pgm/vvc/index.asp">https://vaww.telehealth.va.gov/pgm/vvc/index.asp</a>

Resource Section	Reference
VHA Office of Integrated Veteran Care: VA Community Care Network (CCN) ( <a href="https://www.va.gov/COMMUNITYCARE/">https://www.va.gov/COMMUNITYCARE/</a> )	
• Internet Website (Overview)	18. <a href="https://www.va.gov/COMMUNITYCARE/">https://www.va.gov/COMMUNITYCARE/</a>
• VA Facility Locator (locate an In-Network Pharmacy)	19. <a href="https://www.va.gov/find-locations/">https://www.va.gov/find-locations/</a>
• Billing Information	20. <a href="https://tinyurl.com/ymz4576y">https://tinyurl.com/ymz4576y</a>
• Urgent Care Website	21. <a href="https://www.va.gov/COMMUNITYCARE/providers/info-Urgent-Care.asp">https://www.va.gov/COMMUNITYCARE/providers/info-Urgent-Care.asp</a>
• VA Pharmacy FAQ Quick Reference	22. <a href="https://tinyurl.com/2maen4m4">https://tinyurl.com/2maen4m4</a>
• VHA CCN Pharmacy Team email	23. <a href="mailto:VHACCNPharmacyTeam@va.gov">VHACCNPharmacyTeam@va.gov</a>
• Article: Details Veterans prescription benefit guidelines for emergent, urgent, and non-urgent prescriptions received from a community provider and filled through a VA Pharmacy or in the community.	24. <a href="https://tinyurl.com/5c9vc78b">https://tinyurl.com/5c9vc78b</a>
• Direct Registration Link TMS 4620499 Immediate Need Pharmacy Benefit: Improving the Veteran Experience One Prescription at a Time	25. <a href="https://tinyurl.com/yck46mxz">https://tinyurl.com/yck46mxz</a>
• VHA Directive 1108.08, 12PBM - Formulary Management Process	26. <a href="https://tinyurl.com/ssb6w49x">https://tinyurl.com/ssb6w49x</a>
Self-Directed Care	
• Self-Directed Care Team email	27. <a href="mailto:VHA11PCPrimaryCareAction@va.gov">VHA11PCPrimaryCareAction@va.gov</a>
• VHA Directive 1310(1): Medical Management of Enrolled Veterans Receiving Self-Directed Care from External Health Care Providers, 11OC-Primary Care	28. <a href="https://tinyurl.com/y66m9tjz">https://tinyurl.com/y66m9tjz</a>
• Veterans Health Information Exchange (VHIE) tools	29. <a href="https://www.va.gov/VHIE/Why_Partner_with_VHIE.asp">https://www.va.gov/VHIE/Why_Partner_with_VHIE.asp</a>
• VHIE FAQ	30. <a href="https://www.va.gov/VHIE/Frequently_Asked_Questions.asp">https://www.va.gov/VHIE/Frequently_Asked_Questions.asp</a>

Resource Section	Reference
<b>Section 2: VA Medication Safety and Efficacy</b>	
 <b>VA MedSafe: Adverse Drug Event Reporting</b>	
<ul style="list-style-type: none"> <li>VA Adverse Drug Event Reporting System (VA ADERS)</li> </ul>	31. <a href="https://vaww.cmop.med.va.gov/MedSafe_Portal/">https://vaww.cmop.med.va.gov/MedSafe_Portal/</a>
<ul style="list-style-type: none"> <li>VHA Directive 1070: Adverse Drug Event Reporting and Monitoring: 12PBM – Pharmacy Benefits Management</li> </ul>	32. <a href="https://tinyurl.com/y5ybexmy">https://tinyurl.com/y5ybexmy</a>
<b>Medication Information Management and Reconciliation</b>	
<ul style="list-style-type: none"> <li>VHA Directive 1164: Essential Medication Information, 12PBM - Pharmacy Benefits Management</li> </ul>	33. <a href="https://tinyurl.com/mr37nxxnm">https://tinyurl.com/mr37nxxnm</a>
<ul style="list-style-type: none"> <li>VHA Directive 1345: Medication Reconciliation, 12PBM - Pharmacy Benefits Management</li> </ul>	34. <a href="https://tinyurl.com/47kjdej">https://tinyurl.com/47kjdej</a>
<ul style="list-style-type: none"> <li>CPRS Pre Visit Summary (PVS) Example</li> </ul>	35. <a href="https://tinyurl.com/yvsxycz7">https://tinyurl.com/yvsxycz7</a>
<ul style="list-style-type: none"> <li>CPRS After Visit Summary (AVS) User Guide</li> </ul>	36. <a href="https://tinyurl.com/mskp2wj7">https://tinyurl.com/mskp2wj7</a>
<ul style="list-style-type: none"> <li>My HealtheVet Premium account</li> </ul>	37. <a href="https://www.va.gov/resources/get-a-premium-my-healthevet-account/">https://www.va.gov/resources/get-a-premium-my-healthevet-account/</a>
<ul style="list-style-type: none"> <li>VA Medication Information Management Toolkit</li> </ul>	38. <a href="https://dvagov.sharepoint.com/sites/VHAMedRecon/SitePages/MIM.aspx">https://dvagov.sharepoint.com/sites/VHAMedRecon/SitePages/MIM.aspx</a>
<ul style="list-style-type: none"> <li>Medication Information Management Pharmacy Terms Glossary</li> </ul>	39. <a href="https://dvagov.sharepoint.com/sites/VHAMedRecon/SitePages/Medical-Information-Management-Pharmacy-Term-Glossary.aspx">https://dvagov.sharepoint.com/sites/VHAMedRecon/SitePages/Medical-Information-Management-Pharmacy-Term-Glossary.aspx</a>
<ul style="list-style-type: none"> <li>TMS 45947: Interprofessional Medication Information Management Training- Pharmacy Technician (Direct Registration Link)</li> </ul> 	40. <a href="https://hcm03.ns2cloud.com/sf/learning?destUrl=https%3a%2f%2fva%2dhcm03%2ens2cloud%2ecom%-2flearning%2fuser%2fdeeplink%5fredirect%2ejsp%3flink-ld%3dITEM%5fDETAILS%26componentID%3d45947%26componentTypeID%3dVA%26revisionDate%3d1632516840000%-26fromSF%3dY&amp;company=VAHCM03">https://hcm03.ns2cloud.com/sf/learning?destUrl=https%3a%2f%2fva%2dhcm03%2ens2cloud%2ecom%-2flearning%2fuser%2fdeeplink%5fredirect%2ejsp%3flink-ld%3dITEM%5fDETAILS%26componentID%3d45947%26componentTypeID%3dVA%26revisionDate%3d1632516840000%-26fromSF%3dY&amp;company=VAHCM03</a>
<ul style="list-style-type: none"> <li>VA Medication Information Management in Action: Veteran Centered and Team Driven (Taped August 2023)</li> </ul>	41. <a href="https://va-eerc-ees.adobeconnect.com/pl7qsi4asa1/">https://va-eerc-ees.adobeconnect.com/pl7qsi4asa1/</a>
<b>VA Pharmacogenomics (PGx)</b>	
<ul style="list-style-type: none"> <li>PGx Power BI Implementation</li> </ul>	42. <a href="https://tinyurl.com/5ezc9dfy">https://tinyurl.com/5ezc9dfy</a>
<ul style="list-style-type: none"> <li>PGx SharePoint Site</li> </ul>	43. <a href="https://tinyurl.com/5e98z7mk">https://tinyurl.com/5e98z7mk</a>

# Computerized Patient Record System (CPRS) Quick Tips\*

## Top Ribbon/Banner

- Patient → SC / Address / Appts / Demographics
- JLV Access

## Coversheet tab

Active Problems; Allergies/ ADR's

## Meds tab

- Order info – double click to see refill history, inpatient administration
- Release dates
- Action – hold/release
- Copy to new order
- Park and unpark
- Inpatient (including clinic), outpatient, and non-VA meds

## Orders tab

- Entering an order
  - Indication
  - Comments — For patient or pharmacists (e.g., change dispense date, overnight requests, etc.)
  - Mail vs. window
  - Complex order option
- Self-alerts
- Creating quick order
- Flags
- Park/Unpark
- Document non-VA meds
  - Ensure start date of non-VA med is within the last year for eQM measures
- “Voucher” Formulary (CBOC prescribers only!)

## Notes tab

- Tools: \*Customizable and highly variable → Options
  - Notifications: View Alert Settings
  - Lists/Teams: Setting clinic default view
  - Notes
  - How to save/favorite note title
- Pre/After Visit Summaries (PVS/AVS)
- I-Med consent web (informed consent)
- Vista imaging
- How to create a note template (if permitted)
- In-search text feature
- Tickler notes or provider tracker notes

## Consults tab

- PADR
- PA Discontinue vs. cancel
- Pharmacy consult (site dependent)
  - Available clinical pharmacy services
- Clinical Service Consults

## Labs tab

- Trend from worksheet, adjust date range
- Creating test groups
- Medication adherence (select graph)
- Urine drug confirmation or other labs that have associated comments, microbiology

## Reports tab

- Health Summary → Immunizations
- Clinical Reports → Pharmacy → All medication → Remote Data → All Results, then alphabetize (See full history of meds, helpful for identification of past trials)
- Remote data availability outside of JLV



## Questions?

### Contact your Academic Detailer

For many time saving tools such as Secure Messaging, check out the [CPRS Booster](#) which is a software designed by clinicians to assist users in transforming multi-step actions in CPRS into single-step actions.

### Additional Resources:

- [Tab by Tab Training](#): TMS ID 131004586
- [CPRS User Guide](https://www.va.gov/vdl/documents/Clinical/Comp_Patient_Recrd_Sys_(CPRS)/cprsguim.pdf): [https://www.va.gov/vdl/documents/Clinical/Comp\\_Patient\\_Recrd\\_Sys\\_\(CPRS\)/cprsguim.pdf](https://www.va.gov/vdl/documents/Clinical/Comp_Patient_Recrd_Sys_(CPRS)/cprsguim.pdf)

\*The CPRS Quick Tips is not intended to be a comprehensive list of all features in CPRS, just the must know tips!

## New Order Check Dialog Explanations

This box may pop up when attempting to sign med orders, even if you already overrode order checks in a prior step. (It may pop up before **or** after the signature code dialog box.)

A green check mark means that the order check requirements have been met for that specific order.

The top right pane shows order checks for the med that is selected. (Click on the med name in the top left pane to select it.)

To cancel a med, click the box to the left of the med name. A red X appears and a black check mark shows in the box. Then click the "Cancel Checked Order(s)" button.

The yellow triangle means you must either click the med name to review the order check(s), or cancel the med. If you click a med that you don't want to cancel and a green check mark doesn't show next to it, you must enter an override reason.

Order Checks for: BENZOYL PEROXIDE 10% GEL TOP 10% - APPLY SMALL AMOUNT TOPICALLY ONCE DAILY TO AFFECTED AREA TO TREAT ACNE. THIS MEDICATION MAY BE IRRITATING DURING INITIAL USE. MILD REDNESS MAY OCCUR. - Quantity: 45 Refills: 11 - Indication: FOR ACNE \*UNSIGNED\*

Checks marked with \*\*\* require reason for override (1 of 1)  
(Check Level: High) \*\*\* Previous HISTORICAL allergy to BENZOYL PEROXIDE (based on DRUG INGREDIENT BENZOYL PEROXIDE and DRUG CLASS DE752 ANTIACNE AGENTS, TOPICAL) resulted in DIARRHEA (NORTHERN CALIFORNIA HCS entered on NOV 01, 2021@14:11).

NOTE: The override reason is for tracking purposes and does not change or place new order(s).

Reason for overriding order checks: Benefit of Therapy Outweighs Risk

Remote Allergy Comment (Optional):  
No Remote Comments found

1 Remaining Critical High Order Check Overrides

- Action is required
- All requirements have been met
- Order will be cancelled
- Information dialogue

Perform Allergy Assessment View Monograph Cancel Checked Order(s) Accept Return to Orders

The "Accept" button will become active once all meds have a green check.

# Acknowledgments

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VA



### U.S. Department of Veterans Affairs

Veterans Health Administration  
PBM Academic Detailing Services

**This reference guide was created to be used as a tool for VA providers and is available from the Academic Detailing SharePoint.**

**These are general recommendations only; specific clinical decisions should be made by the treating provider based on an individual patient's clinical condition.**

### VA PBM Academic Detailing Services Email Group:

PharmacyAcademicDetailingProgram@va.gov

### VA PBM Academic Detailing Services SharePoint Site:

<https://dvagov.sharepoint.com/sites/vhaacademicdetailing>

### VA PBM Academic Detailing Services Public Website:

<http://www.pbm.va.gov/PBM/academicdetailingservicehome.asp>