

Documenting Patient Non- Influenza Immunization

Alberta



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Documenting Patient Non-Influenza Immunization

Immunization is one of the most important and cost-effective public health innovations. In Canada, immunization has saved more lives than any other health intervention, and has contributed to the reduction in morbidity and mortality from a broad range of vaccine-preventable diseases in adults, children and other vulnerable populations.

Immunization providers are responsible and accountable to ensure that the information entered is accurate, timely, and in accordance with their particular professional practice standard. The pharmacist/health care provider must keep a permanent record of immunization history by ensuring the documentation includes the following required information:

- Client's name
- Health Card Number (HCN)
- Vaccine Name
- Lot number
- Dose number in series
- Route administered
- Immunization site
- Dose
- Signature of immunizer
- Date of immunization
- Adverse events following immunization

Note: Your pharmacy must have Kroll V10 SP11 or higher in order to use this functionality.

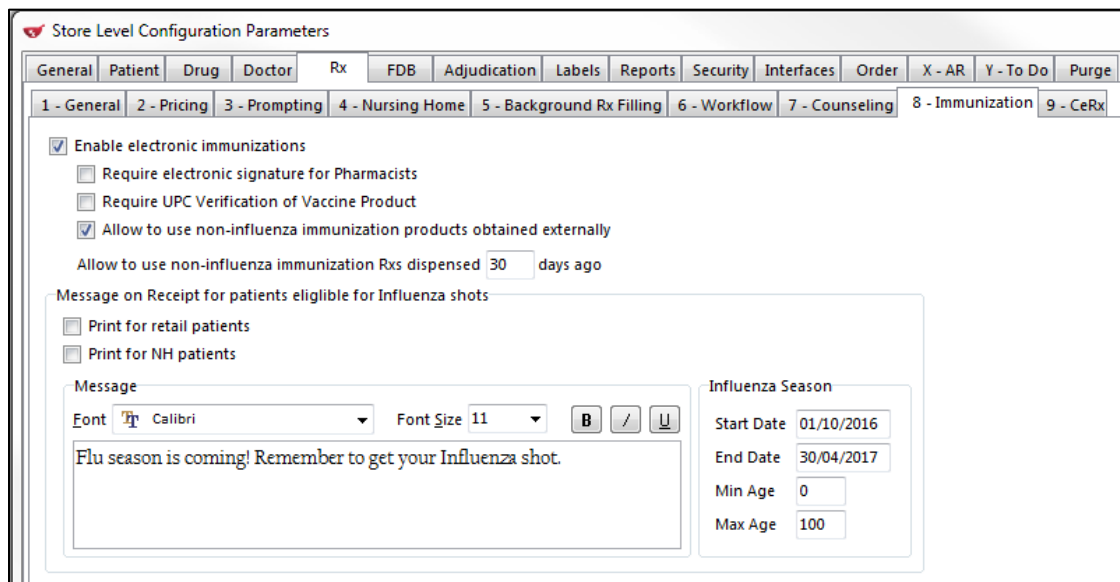
Non-Influenza Immunization Module Features

The Immunization module introduces a simple and streamlined approach to managing and documenting administered non-influenza immunizations in Kroll that will improve the way your pharmacy manages non-influenza immunizations. The features that this functionality will provide are:

- All immunization records are saved to the Immunization section of the patient card, separate from all other patient records.
- Screening questions are used to determine if the patient is eligible for immunization; answers to these questions are stored in the database and are viewable from the patient card.
- Vaccine administered, lot number, expiry date, time and date of immunization, route and site of administration, dose, and pharmacist information is recorded.
- Signatures can be captured on-screen or on paper, giving your pharmacy flexibility in how immunizations are handled.
- In Electronic Mode, the billing process has been streamlined to facilitate faster and more accurate billing.
- Emergency contact information is recorded.

Store Level Configuration

Configuration settings for the Immunization module are located in the **Store Level Configuration Parameters** screen (**File > Configuration > Store > Rx > 8 - Immunization**). Each of the settings on this screen is explained below.



The screenshot shows the 'Store Level Configuration Parameters' window with the 'Immunization' tab selected. Key settings include:

- Enable electronic immunizations
 - Require electronic signature for Pharmacists
 - Require UPC Verification of Vaccine Product
 - Allow to use non-influenza immunization products obtained externally
- Allow to use non-influenza immunization Rxs dispensed days ago
- Message on Receipt for patients eligible for Influenza shots:
 - Print for retail patients
 - Print for NH patients
- Message:
 - Font: Calibri, Font Size: 11
- Influenza Season:
 - Start Date: 01/10/2016
 - End Date: 30/04/2017
 - Min Age:
 - Max Age:

- **Enable electronic immunization:** Turns on electronic immunization functionality. When this setting is enabled, all immunization documentation takes place on-screen; when it is disabled, immunization documentation is recorded in paper mode.
- **Require electronic signature for Pharmacists:** Requires the pharmacist to record an electronic signature using a digital signature tablet. Note that electronic signature functionality must be setup in order to use this feature.
- **Require UPC Verification of Vaccine Product:** Requires the user to scan or enter the UPC number associated with the administered vaccine.
- **Allow to use non-influenza immunization products obtained externally:** Allows pharmacist to accept non-influenza immunization products for injection in the following two scenarios:
 - Patient brings in product that was dispensed from another pharmacy
 - When patient is required to take more than one injection of a product on separate days, and is coming in to the same pharmacy the product was dispensed to them with the second or third vaccine of the same product.
- **Allow to use non-influenza immunization Rx dispensed __ days ago:** Allows pharmacist to put an expiry date for number of days from when an Rx is dispensed to be treated as a recently dispensed Rx.

Drug card Configuration

Creating Non-Influenza Immunization Drug card

To change the Drug card type to Non-influenza Immunization:

- On the **Drug Card Type** drop down textbox, select **Non-Influenza Immunization**.

The following table is a list of immunizations that require the Drug card Type to be set to **Non-Influenza Immunization**:

Name	Brands	DIN
Hepatitis A (Havrix/Avaxim/Vaqta)	Avaxim	02237792
	Avaxim Pediatric	02243741
	Vaqta	02229702
	Havrix	02187078
	Havrix Pediatric	02231056
Hepatitis B (Engerix B/Recombivax HB)	Engerix B	01919431
	Engerix B Pediatric	02296454
	Recombivax HB(5mcg/0.5ml,10mcg/ml)	02243676
	Recombinax HB 40mcg/ml	02245977
Hepatitis A & Typhoid (Vivaxim)	Vivaxim	02248361
Herpes Zoster (Zostavax II)	Zostavax	02375516
Japanese Encephalitis (Ixiaro)	Ixiaro	02333279
Pneumococcal – polysaccharide	Pneumovax	00431648
Hepatitis A & B (Twinrix)	Twinrix Adult	02230578
	Twinrix Pediatric	02237548
Pneumococcal - conjugate (Pevnar 13)	Pevnar 13	02335204
Meningococcal - Group C (Menjugate)	Menjugate	02243820
Typhoid (Typhim Vi/Typherix)	Typhim Vi	02130955
	Typherix	02242727
HPV (Gardasil 9/Cervarix)	Gardasil 9	02437058
	Cervarix	02342227
Rabies (Imovax Rabies/Rabavert)	Imovax	01908286
	Rabavert	02267667
BCG (Immucyst) Tuberculosis	Immucyst	02194376
Varicella (Varivax/Varilrix)	Varivax 111	02246081
	Varilrix	02241047
Meningococcal - Group B (Bexsero)	Bexsero	02417030
Meningococcal - Group ACYW-135 (Menactra/Menveo)	Menactra	02279924
	Menomune	00588490
	Menomune	01959018
Haemophilus Influenzae Type B (Act-HIB)	Act-HIB	01959034
Yellow Fever - Designated Sites Only (YF-Vax)	YF-VAX	00428833

Note: The list of Non-Influenza Immunizations is neither an extensive list nor a list in which all that are listed are distributed or used in all provinces.

Creating Administration Fee on Drug card

After creating a Drug Card, to bill the cost of administering a Non-influenza Immunization, ensure the following changes are made:

1. On the **Fee for Service** dropdown textbox, select **Non-influenza Immunization**. This ensures that the drug card is recognized as a Non–influenza fee for service.
2. On the **Price group** dropdown textbox, select **Non-influenza fee for service**.
3. On the bottom half of the drug card, click the **General** tab, and input service fee charge in the selling field. This is the service that is charged to the patient for injecting the Non-influenza Immunization.

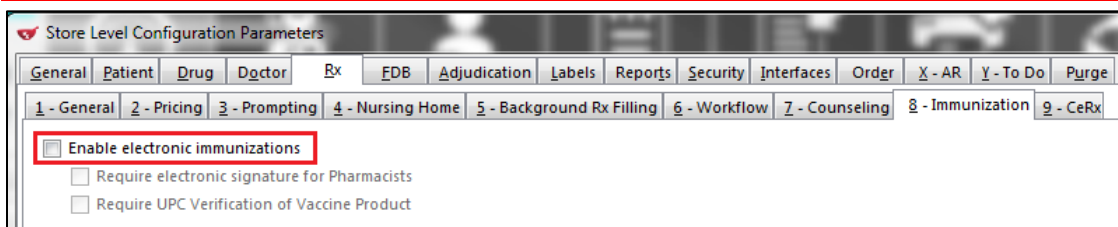
Note: This option is provided to pharmacies that are in provinces in which they are not paid by the government for fee for service for administering a Non-influenza Immunization.

Paper Mode

Immunizations documented in Paper Mode are printed from the patient card, completed on paper, and scanned back into Kroll using the Document Scan Utility.

Enabling Paper Mode

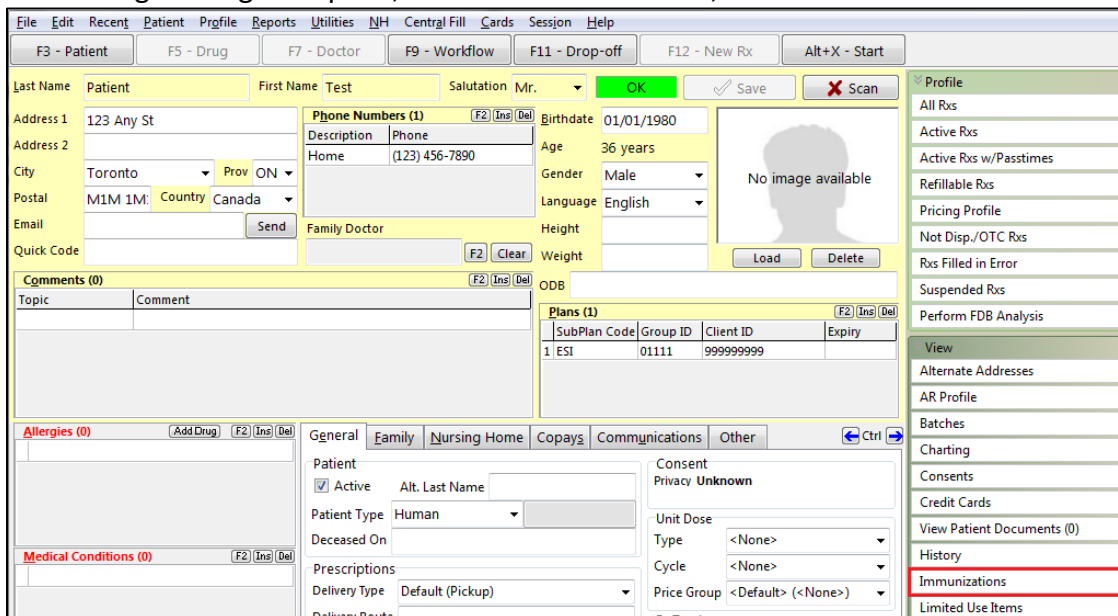
Note: The ‘Enable electronic immunizations’ configuration setting (**File > Configuration > Store > Rx > 8 - Immunization**) must be disabled in order to record immunizations in Paper Mode.



Note: Ensure that the Drug card is configured appropriately. Please refer to [Drug card Configuration](#).

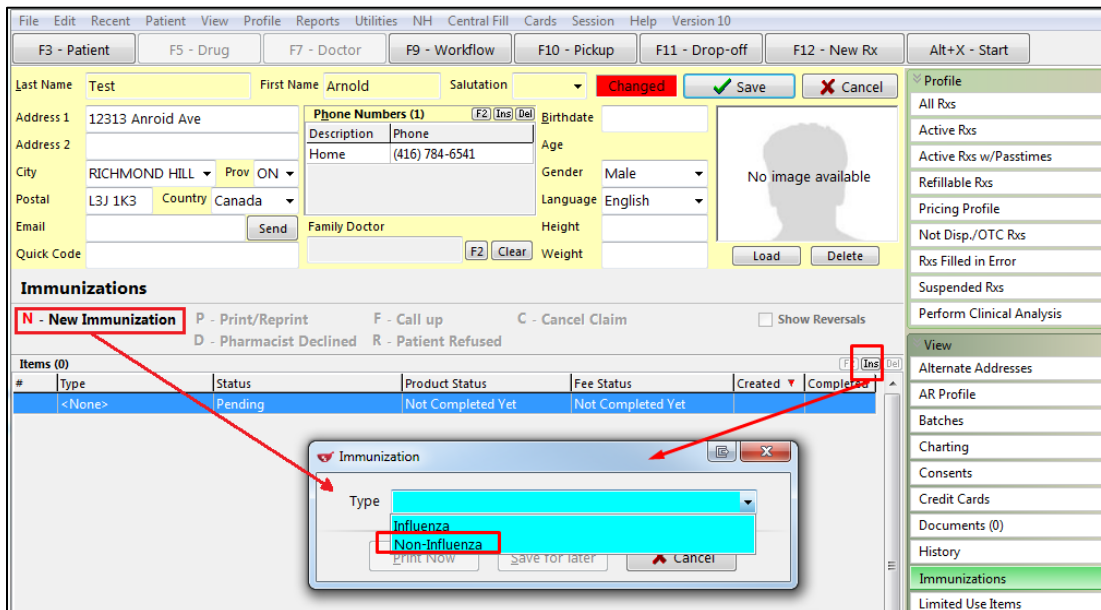
Creating a Paper Immunization Record

1. Call up a patient card using the **F3 - Patient** search.
2. On right navigation pane, under the **View** section, click **Immunizations**.

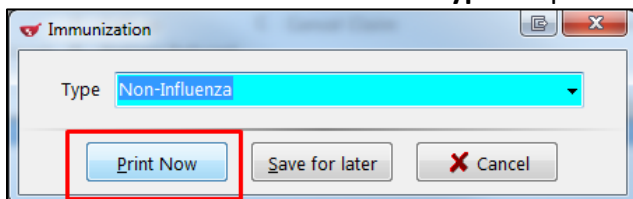


‘Immunizations’ window appears.

3. Click **N - New Immunization** or click **Ins**.

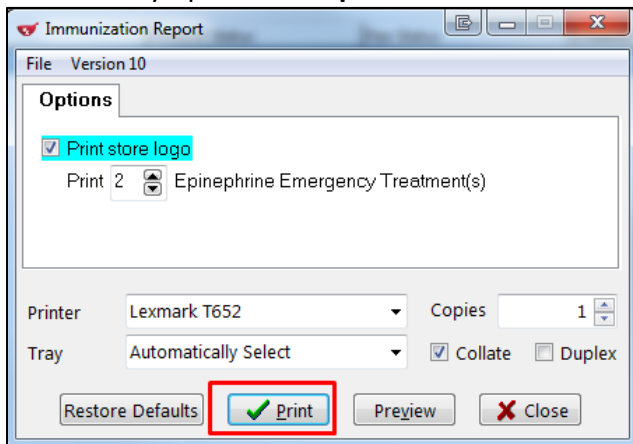


4. Select **Non-Influenza** in the **Type** drop down list, and click **Print Now**.




The 'Immunization Report' window appears.

5. Modify options on **Options** tab if needed.



- Click **Print**. The ‘Immunization Record’ prints. Provide this printout to the patient for him or her to fill out. Have the pharmacist complete the **PHARMACY USE ONLY** portion.


Immunization Record (patient portion):

Immunization Record			
Wendell's Pharmacy, 220 Duncan Mill Road, ddf33 AB 33333333			
PATIENT INFORMATION			TRACKING #: 646
First Name Patient	Last Name Test	Gender M	DOB 02-Feb-1999
Address 220 Finch Ave. East, Toronto ON M2J 2T9		Health Card #	Phone Number (416) 555-5555
Emergency Contact	Relationship to Patient	Contact's Phone Number	Contact's Other Phone Number
SCREENING QUESTIONNAIRE			
<p>The following questions will help us determine if there is any reason you or your child should not get the vaccine today. If you answer "yes" to any question, it does not necessarily mean the shot cannot be given. It simply means additional questions must be asked.</p> <p>If a question is not clear, please ask your pharmacist to explain it.</p>			
Are you sick today? (i.e. fever greater than 39.5°C, breathing problems, or active infection)	Yes	No	Unsure
Are you allergic to any medications including vaccines?	Yes	No	Unsure
Do you have an allergy to kanamycin, neomycin, gentamicin, thimerosal, chicken protein, polymixin or gelatin?	Yes	No	Unsure
Have you ever had a severe, life threatening reaction to a past vaccination?	Yes	No	Unsure
Have you had wheezing, chest tightness or difficulty breathing within 24 hours of getting a vaccine?	Yes	No	Unsure
Are you allergic to latex gloves?	Yes	No	Unsure
Have you had Guillain-Barre Syndrome within 6 weeks of getting a vaccine?	Yes	No	Unsure
Do you have a new or changing neurological disorder?	Yes	No	Unsure
Do you take a blood thinner or have a bleeding disorder?	Yes	No	Unsure
Pharmacist-Will you be administering a Live Vaccine? (If No, skip the following questions)	Yes	No	
Do you have a medical condition that can weaken your immune system? (eg. Leukemia, Lymphoma, HIV/AIDs)	Yes	No	Unsure
Are you taking any medications that can weaken your immune system within the past 3 months? (eg Prednisone etc)	Yes	No	Unsure
Have you received any other vaccines in the last 4 weeks?	Yes	No	Unsure
Are you or do you think you might be pregnant?	N/A	Yes	No
CONSENT GIVEN BY PATIENT/AGENT			
<p>I, the undersigned client, parent or guardian, have read or had explained to me, information about the vaccine as outlined in the vaccine information sheets provided to me. I have had the chance to ask questions, and answers were given to my satisfaction. I understand the risks and benefits of receiving the vaccine. I agree to wait in the pharmacy for 15 minutes (or time recommended by the pharmacist) after getting the vaccine.</p> <p>I am aware that it is possible (yet rare) to have an extreme allergic reaction to any component of the vaccine. Some serious reactions called "anaphylaxis" can be life-threatening and is a medical emergency. If I experience such a reaction following vaccination, I am aware that it may require the administration of epinephrine, diphenhydramine, beta-agonists, and/or antihistamines to try to treat this reaction and that 9-1-1 will be called to provide additional assistance to the immunizer. The symptoms of an anaphylactic reaction may include hives, difficulty breathing, swelling of the tongue, throat, and/or lips.</p> <p>In the event of anaphylaxis, I will receive a copy of this form containing information on emergency treatments that I had received, or a copy will be provided to my agent or EMS paramedics.</p> <p><input type="checkbox"/> I confirm that I want to receive OR <input type="checkbox"/> I confirm that I want my child to receive</p> <p style="text-align: center;">Product</p>			
Patient/Agent & Relationship	Patient/Agent Signature	Date Signed 28-Aug-2017	
PHARMACIST DECLARATION I confirm the above named patient is capable of providing consent for _____ Product _____ and that the _____ Product _____ should be given to patient.			
Pharmacist Pharmacist name (I.D. #)	Pharmacist Signature	Date Signed 28-Aug-2017	
Page 1 of 3			

Immunization Record (pharmacy portion):

Immunization Record				
PHARMACY USE ONLY				
First Name Patient	Last Name Test	Gender M	DOB 02-Feb-1999	Weight
Address 220 Finch Ave. East, Toronto ON M2J 2T9		Health Card #		Phone Number (416) 555-5555
NON-INFLUENZA VACCINE			TRACKING #: 646	
Product			DIN	Dose
Route of Administration			Site of Administration	Lot Number
Administered by Name and #			Administered by Pharmacist Signature	
Date/Time of Immunization				
EPINEPHRINE EMERGENCY TREATMENT			TRACKING #: 646-1	
Product			DIN	PIN
<input type="checkbox"/> Allerject 0.15mg/0.15ml (Pack Size 1 PEN)			02382059	
<input type="checkbox"/> Allerject 0.3mg/0.3ml (Pack Size 1 PEN)			02382067	
<input type="checkbox"/> Epinephrine Injection 1mg/mL (Pack Size 1 SOLUTION)			02325225	
<input type="checkbox"/> Epipen 1mg/ml (Pack Size 1 PEN)			00509558	
<input type="checkbox"/> Epipen Jr 0.5mg/ml (Pack Size 1 PEN)			00578657	
Route of Administration			Site of Administration	Lot Number
Administered by Name and #			Administered by Pharmacist Signature	
Date/Time of Injection				
EPINEPHRINE EMERGENCY TREATMENT			TRACKING #: 646-2	
Product			DIN	PIN
<input type="checkbox"/> Allerject 0.15mg/0.15ml (Pack Size 1 PEN)			02382059	
<input type="checkbox"/> Allerject 0.3mg/0.3ml (Pack Size 1 PEN)			02382067	
<input type="checkbox"/> Epinephrine Injection 1mg/mL (Pack Size 1 SOLUTION)			02325225	
<input type="checkbox"/> Epipen 1mg/ml (Pack Size 1 PEN)			00509558	
<input type="checkbox"/> Epipen Jr 0.5mg/ml (Pack Size 1 PEN)			00578657	
Route of Administration			Site of Administration	Lot Number
Administered by Name and #			Administered by Pharmacist Signature	
Date/Time of Injection				
EPINEPHRINE EMERGENCY TREATMENT			TRACKING #: 646-3	
Product			DIN	PIN
<input type="checkbox"/> Allerject 0.15mg/0.15ml (Pack Size 1 PEN)			02382059	
<input type="checkbox"/> Allerject 0.3mg/0.3ml (Pack Size 1 PEN)			02382067	
<input type="checkbox"/> Epinephrine Injection 1mg/mL (Pack Size 1 SOLUTION)			02325225	
<input type="checkbox"/> Epipen 1mg/ml (Pack Size 1 PEN)			00509558	

Page 2 of 3



Immunization Record (pharmacy portion continued):


Immunization Record

PHARMACY USE ONLY

First Name Patient	Last Name Test	Gender M	DOB 02-Feb-1999	Weight
Address 220 Finch Ave. East, Toronto ON M2J 2T9		Health Card #		Phone Number (416) 555-5555

EPINEPHRINE EMERGENCY TREATMENT TRACKING #: 646-3 (continued)

Product <input type="checkbox"/> Epipen Jr 0.5mg/ml (Pack Size 1 PEN)		DIN 00578657	FIN	Dose
Route of Administration	Site of Administration	Lot Number	Expiry Date	
Administered by Name and #	Administered by Pharmacist Signature			
Date/Time of Injection				
Comments				



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On the 'Immunizations' screen the status of the Non-influenza is as follows.

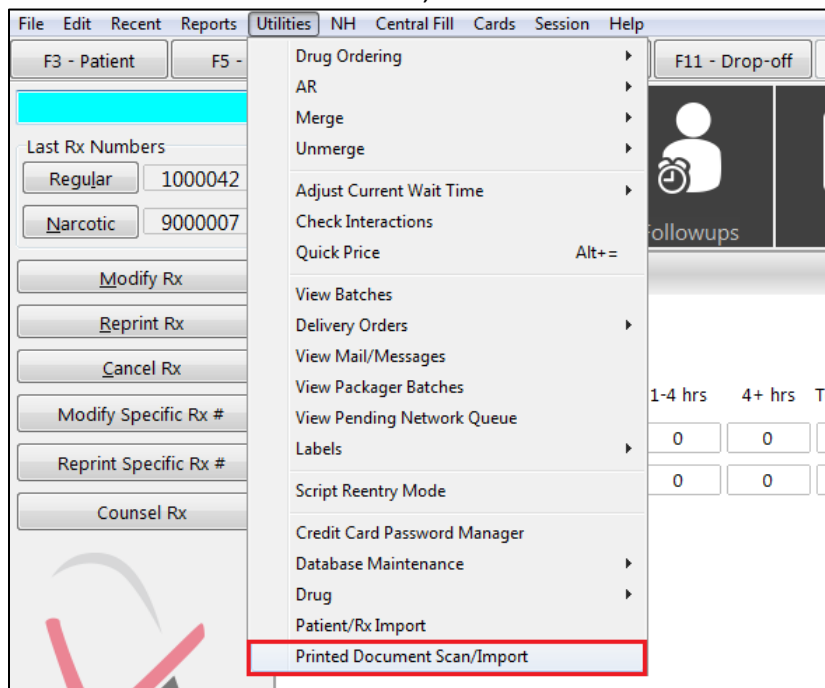
Immunizations						
N - New Immunization P - Print/Reprint F - Claim Fee C - Cancel Claim <input type="checkbox"/> Show Reversals						
D - Pharmacist Declined R - Patient Refused						
Items (1) (F2) (Ins) (Del)						
#	Type	Status	Product Status	Fee Status	Created	Completed
146	Non-Influenza	Printed Consent	Pending Claim	Pending Claim	24/07/2017	

Scanning a Paper Immunization Record

Once the Immunization Record is printed, the Immunization Record needs to be scanned.

Note: If you will be scanning all immunization records in a single batch at the end of the day, skip these steps and continue to the [Billing an Immunization](#) section.

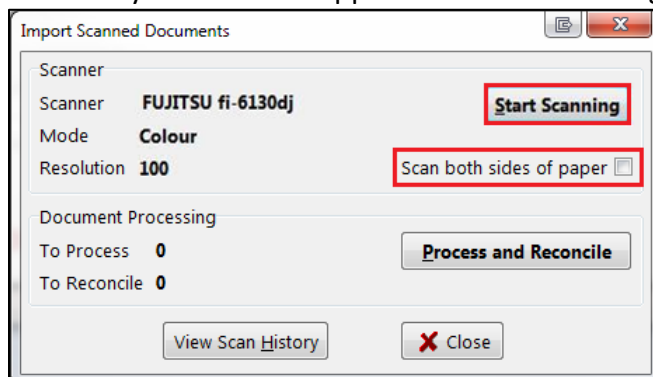
7. On the **Alt+X - Start** screen, click **Utilities > Printed Document Scan/Import**.



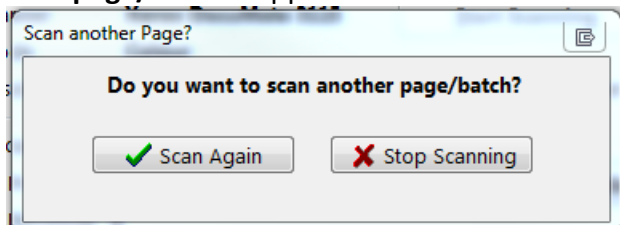
The 'Import Scanned Documents' window appears.

8. Place the report pages in the scanner hopper.

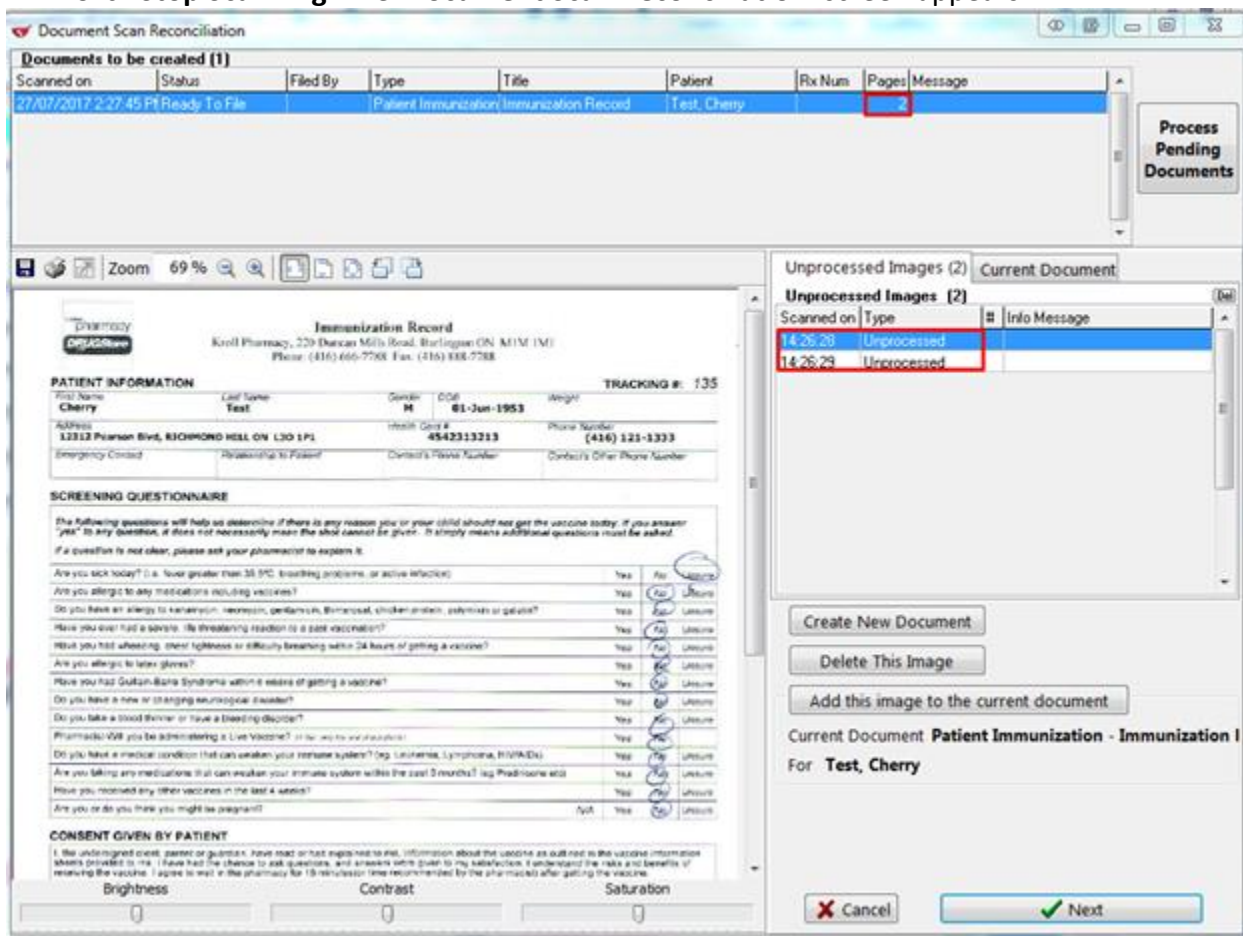
9. Check **Scan both sides of paper** if you are scanning pages with information on both sides and your scanner supports dual side scanning.



10. Click **Start Scanning**. When scanning is complete, Prompt ‘Do you want to scan another page/batch?’ appears.



11. Click **Stop Scanning**. The ‘Document Scan Reconciliation’ screen appears.



Note: Items ready to be processed displays in the **Documents to be created** section. Items that need to be reconciled are displayed in the **Unprocessed Images** section.

12. Click Process pending Documents.

The screenshot shows the 'Document Scan Reconciliation' window. At the top, a table lists documents to be created:

Scanned on	Status	Filed By	Type	Title	Patient	Rx Num	Pages	Message
27/07/2017 2:27:45 PM	Ready To File		Patient Immunization	Immunization Record	Test, Cherry		2	

A red box on the right side of the window is labeled 'Process Pending Documents'. Below the table, the 'Current Document' is displayed, showing an 'Immunization Record' form for 'Cherry Test'. The form includes patient information, a screening questionnaire, and a consent section. On the right side of the window, there is a section for 'Unprocessed Images (2)' with a table:

Scanned on	Type	#	Info Message
14:26:28	Unprocessed		
14:26:29	Unprocessed		

Buttons at the bottom right include 'Create New Document', 'Delete This Image', 'Add this image to the current document', 'Cancel', and 'Next'.

Document is reconciled successfully.

13. On Document Scan Reconciliation window, click Cancel. 'Import Scanned Document' window reappears.

The screenshot shows the 'Import Scanned Documents' window. It contains the following fields and buttons:

- Scanner: FUJITSU fi-6130Zdj #2
- Mode: Colour
- Resolution: 100
- Scan both sides of paper:
- Document Processing:
 - To Process: 0
 - To Reconcile: 0
- Buttons: Start Scanning, Process and Reconcile, View Scan History, Close

14. On **Import Scanned Documents** window, click **Cancel** to close the screen. Once scanning is complete, the **Status** of the immunization record will change from **Printed Consent** to **Signed Consent**.

Immunizations						
N - New Immunization		P - Print/Reprint	F - Claim Fee	C - Cancel Claim	<input type="checkbox"/> Show Reversals	
D - Pharmacist Declined R - Patient Refused						
Items (1)						
#	Type	Status	Product Status	Fee Status	Created	Completed
146	Non-Influenza	Signed Consent	Pending Claim	Pending Claim	24/07/2017	

Note: The report will be saved to the Immunization record and to the **Documents** section of the **F3 - Patient** card.

File Edit Recent Patient View Profile Reports Utilities NH Central Fill Cards Session Help Version 10

F3 - Patient F5 - Drug F7 - Doctor F9 - Workflow F10 - Pickup F11 - Drop-off F12 - New Rx Alt+X - Start

Last Name Patient First Name A Salutation OK Save Scan

Address 1 12313 Banff Ave Phone Numbers (1) Birthdate 12/02/1976
 Address 2 Description Phone Age 41 years
 City RICHMOND HILL Home (416) 754-1331 Gender Female
 Postal K3O 2P4 Country Canada Language English
 Email Send Family Doctor Height
 Quick Code F2 Clear Weight Load Delete

Documents

Filter documents here Filter

Items (1)			
Title	By	Document Type	Created
Immunization Record	CC	Immunization	24/07/2017

Profile
 All Rxs
 Active Rxs
 Active Rxs w/Passtimes
 Refillable Rxs
 Pricing Profile
 Not Disp./OTC Rxs
 Rxs Filled in Error
 Suspended Rxs
 Perform Clinical Analysis

View
 Alternate Addresses
 AR Profile
 Batches
 Charting
 Consents
 Credit Cards
 Documents (1)

Billing Product

To Bill a Product:

15. Click **F- Claim fee** or press **F** on the keyboard. 'F-5 Drug search' screen appears.

16. Search and select a Non-Influenza Immunization. Drug card appears.

17. Click **F12 – Return Rx**. 'F12' screen appears.

Disp Qty	Refills(+)	Rem Qty	G.P. %	Acq Cost	Cost	Markup	Fee	Total
1		1		\$49.89	\$0.00	\$0.00	\$10.49	\$65.37

18. Fill in all mandatory fields.

Note: Regardless of whether the vaccine Rx is in schedule 1 or schedule 2, the doctor field will be blank.

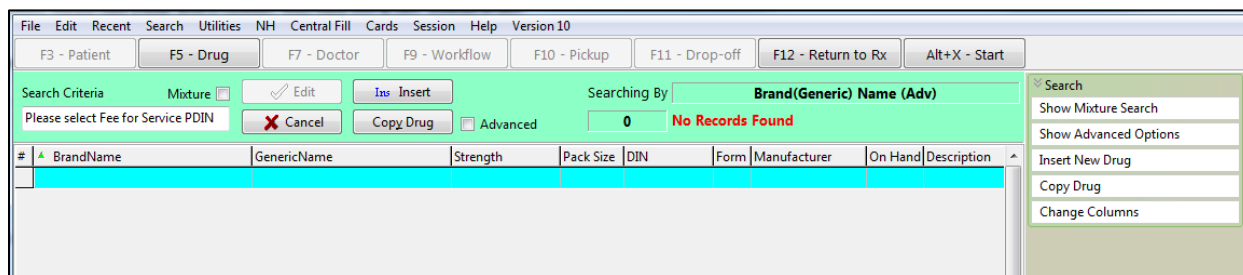
‘Vaccine Rx in Schedule 1’ needs to be prescribed in order for the Rx to be dispensed to the patient. Currently those who can prescribe Rxs are doctors, and Pharmacists with Additional Prescribing Authorization (APA).

‘Vaccine Rx in Schedule 2’ can be obtained through prescription or over the counter.

If a patient wants to get a ‘Vaccine Rx in schedule 2’ through prescription, then the Rx can be filled out normally.

If a patient wants to get a ‘Vaccine Rx in schedule 2’ over the counter, then click **Make Rx Not Dispensed** before filling the Rx.

19. Click **F12- Fill Rx**. ‘F-5 Drug search’ screen reappears.



Note: On the **Immunizations** screen the **Product Status** of the Non-Influenza changes from **Pending Claim**, to **Claimed**.

Immunizations						
N - New Immunization		P - Print/Reprint		F - Claim Fee		C - Cancel Claim
		D - Pharmacist Declined		R - Patient Refused		<input type="checkbox"/> Show Reversals
Items (1)						
#	Type	Status	Product Status	Fee Status	Created	Completed
146	Non-Influenza	Signed Consent	Claimed	Pending Claim	24/07/2017	24/07/2017

Billing Service Fee

20. On the 'F-5 Drug search' screen, search and select the **Non-Influenza Immunization fee for service**.

The screenshot shows the 'F-5 Drug' search interface. The search criteria are set to 'non'. The search results table is as follows:

#	BrandName	GenericName	Strength	Pack Size	DIN	Form	Manufacturer	On Hand	Description
1	Non-influenza Immunization Fee			1	00998877	ML (Inj		0	Fee For Non-i

Drug card appears.

The screenshot shows the drug card for 'Non-influenza Immunization Fee'. Key fields include:

- Name:** Non-influenza Immunization Fee
- DIN:** 00998877
- Description:** Fee For Non-influenza Vaccination
- Form:** ML (Injection Solution)
- Route:** Intramuscular
- Price Group:** Non-Influenza Fee For Service
- Fee for Svc.:** Non-Influenza Immunization Fee
- Drug Card Type:** Fee for Service
- Eligible for coupon:**
- Class:** Solution For Injection
- Packs (1):** Pack Size 1, Selling \$15.00

21. Click **F12** – Return Rx. ‘F12’ screen appears.

22. Input mandatory fields.

23. Click **F12** – Fill Rx or press **F12** on your keyboard. Fee is billed successfully and label is printed.

24. If structured workflow is activated the Rx will follow the workflow configuration that is dictated.

Note: if structured workflow is not activated, Immunizations screen displays with Immunization Rx status.

25. Complete all remaining workflow steps as required.

26. Click **Approve**. ‘Workflow’ screen closes and Patient card’s ‘Immunizations’ screen appears. The Non-influenza has the following status: **Status = Signed Consent, Product Status = Claimed and Fee Status = Claimed.**

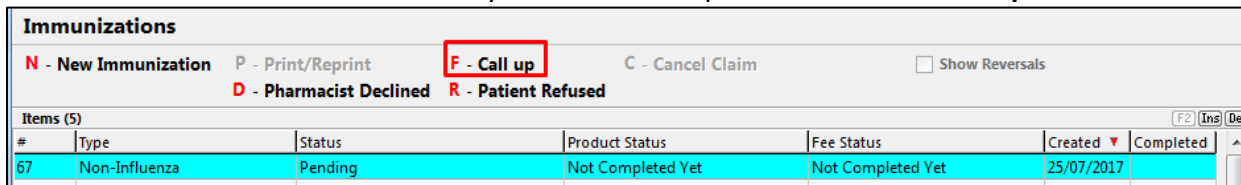
Immunizations						
N - New Immunization		P - Print/Reprint		F - Claim Fee		C - Cancel Claim
				<input type="checkbox"/> Show Reversals		
		D - Pharmacist Declined		R - Patient Refused		
Items (1)						
#	Type	Status	Product Status	Fee Status	Created	Completed
117	Non-influenza	Signed Consent	Claimed	Claimed	26/07/2017	26/07/2017

Note: If Free for service was selected in the Fee field on the Administration tab. The ‘Immunizations’ screen displays the same as above, except Fee status = No Fee Applicable.

Completing Immunizations ‘Saved for Later’

Immunization records that have been ‘saved for later’ can be accessed either via the **F3 - Patient** card or the **F9 - Workflow** card.

1. Call up the patient using the **F3 - Patient** search or select **F9 - Workflow**.
2. On right navigation pane, under the **View** section, click **Immunizations**.
3. Select the immunization record you want to complete and click **F - Call up**.



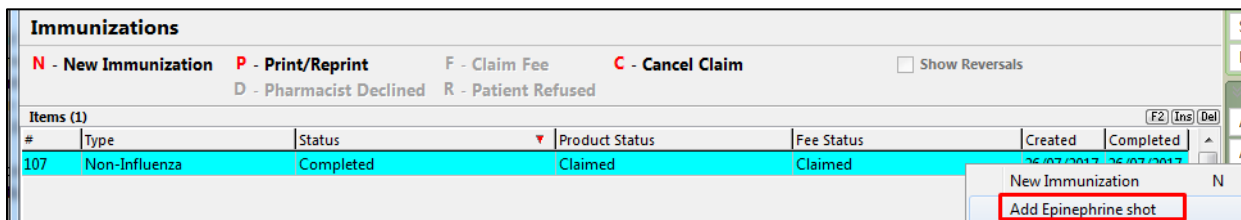
Immunizations						
N - New Immunization		P - Print/Reprint		F - Call up		C - Cancel Claim
		D - Pharmacist Declined		R - Patient Refused		<input type="checkbox"/> Show Reversals
Items (5)						
#	Type	Status	Product Status	Fee Status	Created	Completed
67	Non-Influenza	Pending	Not Completed Yet	Not Completed Yet	25/07/2017	

Recording Emergency Epinephrine Shots

An emergency Epinephrine shot may need to be administered if the patient has a reaction to the immunization. This section explains how to add Emergency Epinephrine shot records to an immunization record.

Note: Emergency Epinephrine shots can only be added to immunization records that have a status of **Completed**.

1. Call up a patient using the **F3 - Patient** search.
2. On right navigation pane, under the **View** section, click **Immunizations**.
3. Right-click a completed immunization record and select **Add Epinephrine shot**.



Immunizations						
N - New Immunization		P - Print/Reprint		F - Claim Fee		C - Cancel Claim
		D - Pharmacist Declined		R - Patient Refused		<input type="checkbox"/> Show Reversals
Items (1)						
#	Type	Status	Product Status	Fee Status	Created	Completed
107	Non-Influenza	Completed	Claimed	Claimed	26/07/2017	26/07/2017

'Emergency Epinephrine' screen displays on the 'Product' tab.

File Edit Utilities NH Cards Session Help Version 10 View Profile															
F3 - Patient		F5 - Drug		F7 - Doctor		F9 - Workflow		F10 - Pickup		F11 - Drop-off		F12 - New Rx		Alt+X - Start	
Emergency Epinephrine															
Patient Patient, C				Address 123 Testing Ave											
Birth 02/02/1999		18 years		Female		Plan AHE		Client ID 123123133		Phone Home		(905) 475-1231			
Allergies								Conditions							
Product															
Product <input type="text"/>															
Disp Qty <input type="text"/>		<input type="text"/>		DIN <input type="text"/>		<input type="text"/>		UPC <input type="text"/>		<input type="text"/>		<input type="text"/>		<input type="text"/>	
Route <input type="text"/>															
Pseudo DIN <input type="text"/>															
Lot Number <input type="text"/>															
Expiry Date <input type="text"/>															
<input type="button" value="Save for Later"/>				<input type="button" value="Refuse Immunization"/>				<input type="button" value="Next"/>							

Product

- If the **'Require UPC verification'** configuration setting is enabled, scan or enter the UPC from the drug pack. If a UPC match is found, product information will populate.

You may need to manually enter the lot number and expiry date if this information is not stored in the product barcode.

File Edit Utilities NH Central Fill Cards Session Help View Profile

F3 - Patient F5 - Drug F7 - Doctor F9 - Workflow F11 - Drop-off F12 - New Rx Alt+X - Start

Emergency Epinephrine

Patient **Patient, Test** Address **100 Any St**

Birth Male Plan Client ID Phone Home (123) 456-7890

Allergies Conditions

Product Administration

Please scan or enter the UPC from the drug pack

UPC Lookup **UPC match found for 625813001213**

Product **Epipen 1mg/ml (Pack Size 1 PEN)**

Disp Qty 1.00 PEN DIN 00509558 UPC 625813001213

Route Injection

Lot Number 333

Expiry Date 01/01/2020

Save for Later Refuse Immunization Next

If the 'Require UPC verification' configuration setting is disabled, select a product from the list. Enter the **Lot Number** and **Expiry Date** associated with the drug.

The screenshot shows a software interface for documenting an immunization. At the top, there is a menu bar with options like 'File', 'Edit', 'Utilities', 'NH', 'Central Fill', 'Cards', 'Session', 'Help', 'View', and 'Profile'. Below the menu is a navigation bar with buttons for 'F3 - Patient', 'F5 - Drug', 'F7 - Doctor', 'F9 - Workflow', 'F11 - Drop-off', 'F12 - New Rx', and 'Alt+X - Start'. The main title of the form is 'Emergency Epinephrine'. The form is divided into several sections: 'Patient' (Name: Patient, Test; Address: 100 Any St), 'Birth' (Gender: Male; Plan:), 'Client ID', and 'Phone Home (123) 456-7890'. There are also sections for 'Allergies' and 'Conditions'. The 'Product' section is highlighted with a red box and contains the following information: Product: Epipen 1mg/ml (Pack Size 1 PEN), Disp Qty: 1.00, PEN, DIN: 00509558, UPC: 625813001213, Route: Injection, Lot Number: 333, and Expiry Date: 01/01/2020. At the bottom of the form, there are three buttons: 'Save for Later' (with a red X), 'Refuse Immunization', and 'Next' (with a green arrow and highlighted with a red box).

5. Click **Next**. The 'Administration' tab appears.

Administration

6. Enter the site of administration in the **Site of Admin** field (e.g., left arm, right thigh).
7. Select the pharmacist who administered the shot from the **Administered by** list.
8. Enter any comments in the space provided (optional).

Emergency Epinephrine

Patient: Patient, Test Address: 123 Any St

Birth: 01/01/1980 36 years Male Plan: Client ID: Phone: Home (123) 456-7890

Allergies: Conditions:

Product: Administration

Product: EpiPen 1mg/mL (Pack Size 1 PEN)

Disp Qty: 1.00 PEN DIN: 00509558 UPC: 625813001213

Route: Injection

Date of Admin: 18/10/2016 13:29 Site of Admin: Left Leg

Administered by: Kroll Pharmacy (KRL)

Comments: N/A

Buttons: Save for Later, Refuse Immunization, Finalize Immunization

9. Click **Finalize Immunization**. 'F12' screen appears.

File Edit Recent Rx View Labels Profile Reports Utilities NH Cards Session Help Version 10

F3 - Patient F5 - Drug F7 - Doctor F9 - Workflow F10 - Pickup F11 - Drop-off F12 - Fill Rx Alt+X - Start

New Rx Pending Adj Rx Start Date: 26/07/2017 0 Latest Fill: Qty: Init: Lookup Cancel

Priority: Default Wait Time F2 Due: in 19 mins Forward Rx: F2 Work Order: 1551 F2 Delivery: Pickup

Patient Search: Name: Patient, C Age: 18 Female Address: 123 Testing Ave City: RICHMOND HILL Phone: Home (905) 475-1231 Plan: AHE Client ID: 123123133

Drug Search: 1 Pack: Brand: EpiPen 1mg/ml Generic: Epinephrine ALX (Alle) Pack: 1 Form PEN Sched 2 Purch: \$92.07 On-Hand: -2 DIN: 00509558 Min Qty: 0

Drg Search: Loc: Office Name: Dr. Kroll, Avery Address: Testing City: TORONTO Phone: (416) 784-6546 Lic#: 201703 Alt. Lic#: Prov: ON

Allergies (0) Conditions (0)

Sig: Emergency Epinephrine EMERGENCY EPINEPHRINE

Route of Admin: Intramuscular Dosage Form: Auto-Injector (each)

Init: CC Auth Qty: 1 1 Disp Qty: 1 Refills(+): Rem Qty: 1 1 Days: 1 G.P. %: 17.63 Prod Sel: 3 - Pharmacist Acq Cost: \$92.07 O/W: Written Cost: \$92.07 Labels: 1 F2 Markup: \$9.21 Fee: \$10.49 Total: \$111.77

Unit Dose (Ctrl-U): Disabled

Warnings:

- ⚠ Not enough inventory for Rx
- ⚠ Drug Cost (Purchase) hasn't been updated in 498 days
- 📌 To Do: Emergency Epinephrine
- 📌 Drug will be Ordered
- 📌 Delivery Label will be printed

Plans: Pricing Dates Comments Indications Images Other

Rx Plans: Plan Pays Extra Info (F2 Edits)

AHE Not Adjud. Cash Not Adjud. | Deduct: \$0.00

Next Disp Qty: Min Interval: Enable Auto-Refill

Billing Product

10. Input mandatory fields.

Note: If the user who performed the immunization has an **F7 - Doctor** record with a 'Pharmacist' designation, that user's information will populate in the doctor section of the **F12** screen.

If the user does not have an **F7 - Doctor** record or if the immunization was performed by a different user, the **F7 - Doctor** search form will appear. Perform a doctor search to locate the pharmacist to use as the prescriber.

11. A claim for the treatment will populate in the **F12** screen. Enter a **Disp Qty** of '1' to represent the number of administered treatments.

12. Click **F12 - Fill Rx** or press **F12** on your keyboard. The claim will be transmitted to the appropriate party for payment and label is printed.

13. Complete all remaining workflow steps as required.

14. A record of the emergency Epinephrine show will be added to the **Immunizations** list with a **Status** of 'Completed' and a **Product Status** of 'Claimed'.

Immunizations						
N - New Immunization		P - Print/Reprint		F - Claim Fee		C - Cancel Claim
		D - Pharmacist Declined		R - Patient Refused		<input type="checkbox"/> Show Reversals
Items (6)						
#	Type	Status	Product Status	Fee Status	Created	Completed
6-1	Emergency Epinephrine	Completed	Claimed	No Fee Applicable	29/08/2016	29/08/2016

Note: Repeat these steps for each Emergency Epinephrine shot that is administered to the patient.

Reprinting an Immunization Record

This section explains the process for reprinting immunization records. Immunizations can be reprinted either via the **F3 - Patient** card or the **F9 - Workflow** card.

On the **F3-Patient** card and **F9 – Workflow** card, the immunization record can be reprinted:

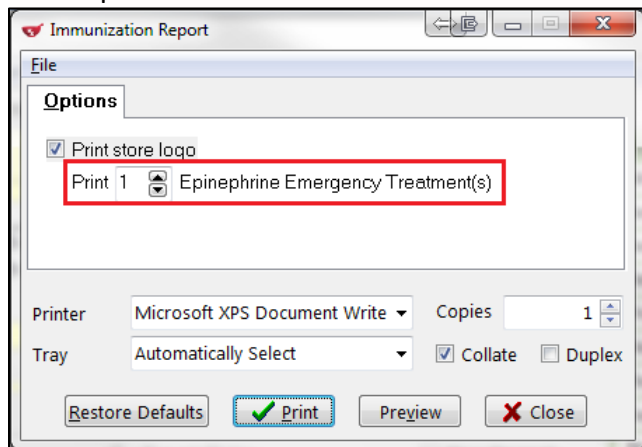
- If the **Status** is either **Printed Consent** or **Signed Consent**, the Product status and Fee status does not affect being able to reprint the immunization record.

Note: for **F9 – Workflow** card if both **Product status** and **Fee status** are both ‘**Complete**’, the immunization record does not appear.

1. Call up the patient using the **F3 Patient** search, or select **F9 - Workflow**.
2. On right navigation pane, under the **View** section, click **Immunizations**.
3. Select the appropriate immunization record and click **P - Print/Reprint**. The ‘**Immunization Report**’ window appears.

Immunizations						
N - New Immunization		P - Print/Reprint		F - Claim Fee	C - Cancel Claim	
				<input type="checkbox"/> Show Reversals		
D - Pharmacist Declined				R - Patient Refused		
Items (7)						
#	Type	Status	Product Status	Fee Status	Created	Completed
148	Non-Influenza	Completed	Claimed	Claimed	24/07/2017	26/07/2017

4. Select the number of Epinephrine Emergency Treatments that need to be printed in the report.



Immunization Report

File

Options

Print store logo

Print 1 Epinephrine Emergency Treatment(s)

Printer: Microsoft XPS Document Write Copies: 1

Tray: Automatically Select Collate Duplex

Restore Defaults **Print** Preview Close

5. Click **Print**. The selected record generates.

Viewing Immunization Record Details

This section explains the process for viewing immunization records. Immunizations can be viewed via the **F3 - Patient** card.

On the **F3-Patient card**, the immunization record can be reprinted:

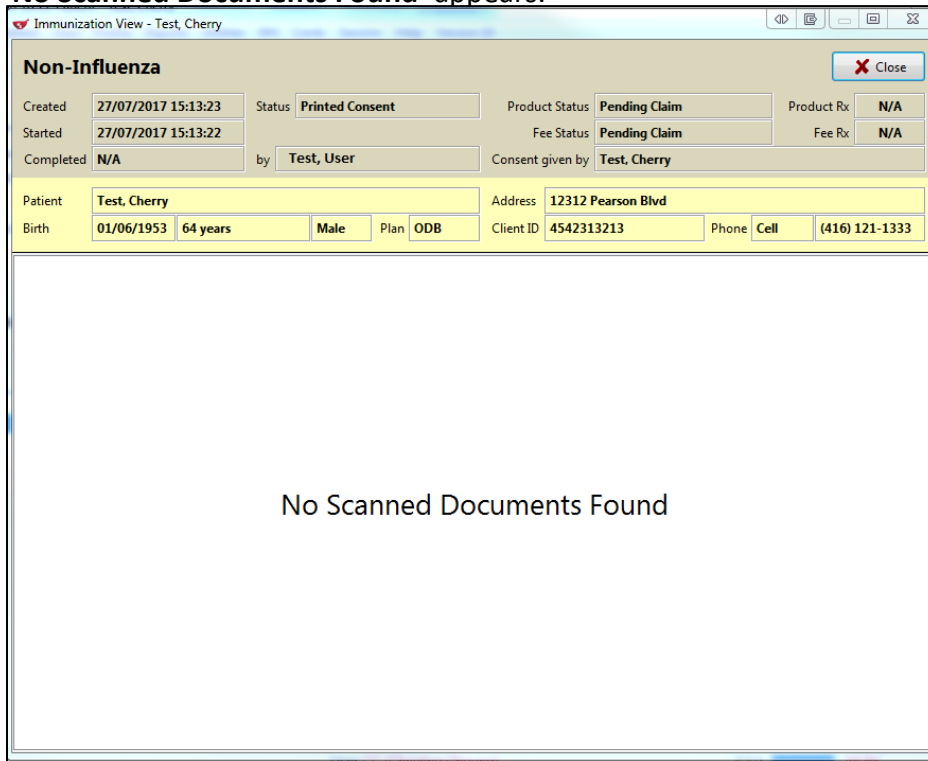
- If the **Status** is either **Printed Consent** or **Signed Consent**, the Product status and Fee status does not affect being able to view the immunization record.
1. Call up the patient using the **F3 Patient** search.
 2. On right navigation pane, under the **View** section, click **Immunizations**.
 3. Call up the record by doing one of the following:
 - Right-click the record you want to view and select **View Details**;
 - Select the record and press **F2**;
 - Double-click the record.

Immunizations							
N - New Immunization		P - Print/Reprint		F - Call up		C - Cancel Claim	
		D - Pharmacist Declined		R - Patient Refused		<input type="checkbox"/> Show Reversals	
Items (3)							
#	Type	Status	Product Status	Fee Status	Created	Completed	(F2) Ins (Del)
135	Non-Influenza	Signed Consent	Claimed	Claimed	31/07/2017	31/07/2017	

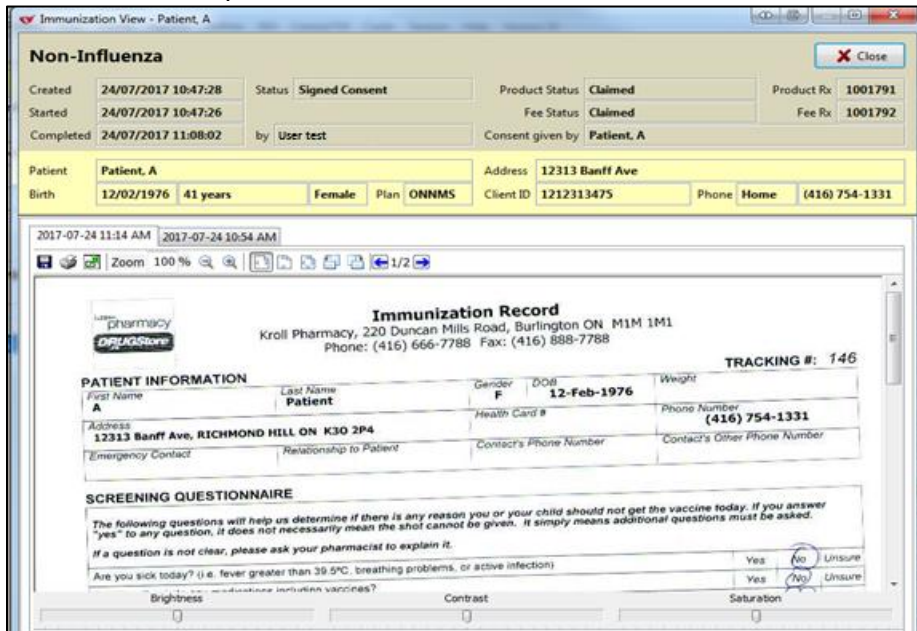
- New Immunization N
- Print/Reprint P
- Call up F
- Cancel Claim C
- Pharmacist Declined D
- Patient Refused R
- View Details F2
- Delete
- Change Columns
- Make Default Columns

The **'Immunization View'** screen appears.

If the immunization record has not yet been scanned into the system, a blank screen showing **'No Scanned Documents Found'** appears.



If the immunization record has been scanned into the system the scanned record displays in the **'Immunization View'** screen. From here you can adjust the brightness, contrast, and saturation of the record, or print the record.



4. Click **Close**. The **'Immunization View'** screen closes.

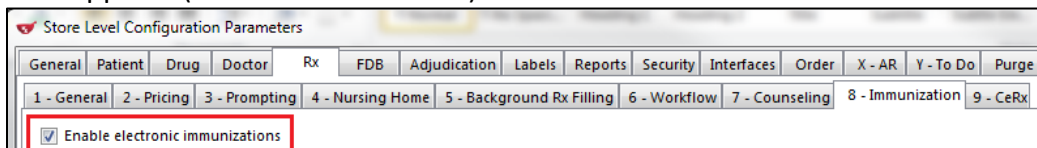
Electronic Mode

Immunizations documented in Electronic Mode are completed on-screen in the **Immunizations** section of the patient card. A digital signature pad can be used to capture pharmacist signatures electronically, or the completed record can be printed, signed, and scanned into Kroll using the Document Scan Utility.

Enabling Electronic Mode

To conduct immunizations in Electronic Mode:

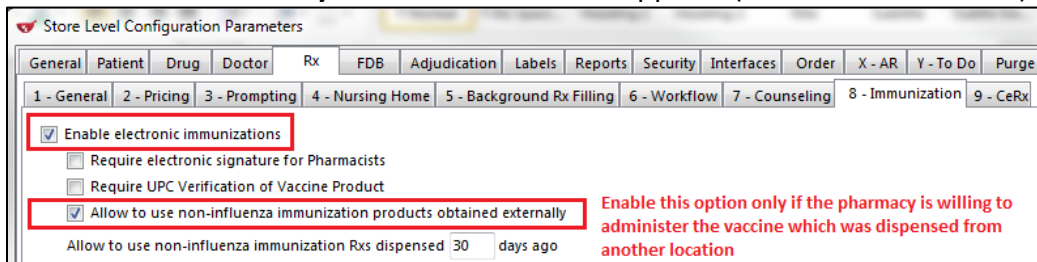
1. Click **File > Configuration > Store > Rx > 8 – Immunization**.
2. Click the checkbox in front of **Enable electronic immunizations** so that a checkmark appears (checkmark = enabled)



Allowing use of Non-Influenza Immunization Products Obtained Externally

To allow using non-influenza immunization products obtained externally by patients:

3. Click the checkbox in front of **Allow to use non-influenza immunization products obtained externally** so that a check mark appears (checkmark = enabled).



Note: Enable this option only if you are willing to administer a vaccine that was dispensed externally.

The following two scenarios are when a vaccine is considered to be external:

- When patient brings in immunization product that was dispensed from another pharmacy
- When patient is required to take more than one injection of an immunization product on separate days, and is coming in to the same pharmacy with the immunization that was dispensed to them with the second or third vaccine of the same product

Allowing to use Non-Influenza Immunization Rxs Dispensed within __ Days

To set number of days a non-influenza immunization Rx can be used after it has been dispensed:

4. Input number of days in 'Allow to use non-influenza immunization Rxs dispensed __ days ago,' and then click **OK**.

Store Level Configuration Parameters

General Patient Drug Doctor Rx FDB Adjudication Labels Reports Security Interfaces Order X - AR Y - To Do Purge

1 - General 2 - Pricing 3 - Prompting 4 - Nursing Home 5 - Background Rx Filling 6 - Workflow 7 - Counseling 8 - Immunization 9 - CeRx

Enable electronic immunizations

Require electronic signature for Pharmacists

Require UPC Verification of Vaccine Product

Allow to use non-influenza immunization products obtained externally

Allow to use non-influenza immunization Rxs dispensed 30 days ago

Prior to Filling Out an Immunization

Please ask patients whether they are planning on getting the injection done with the pharmacy or with a doctor.

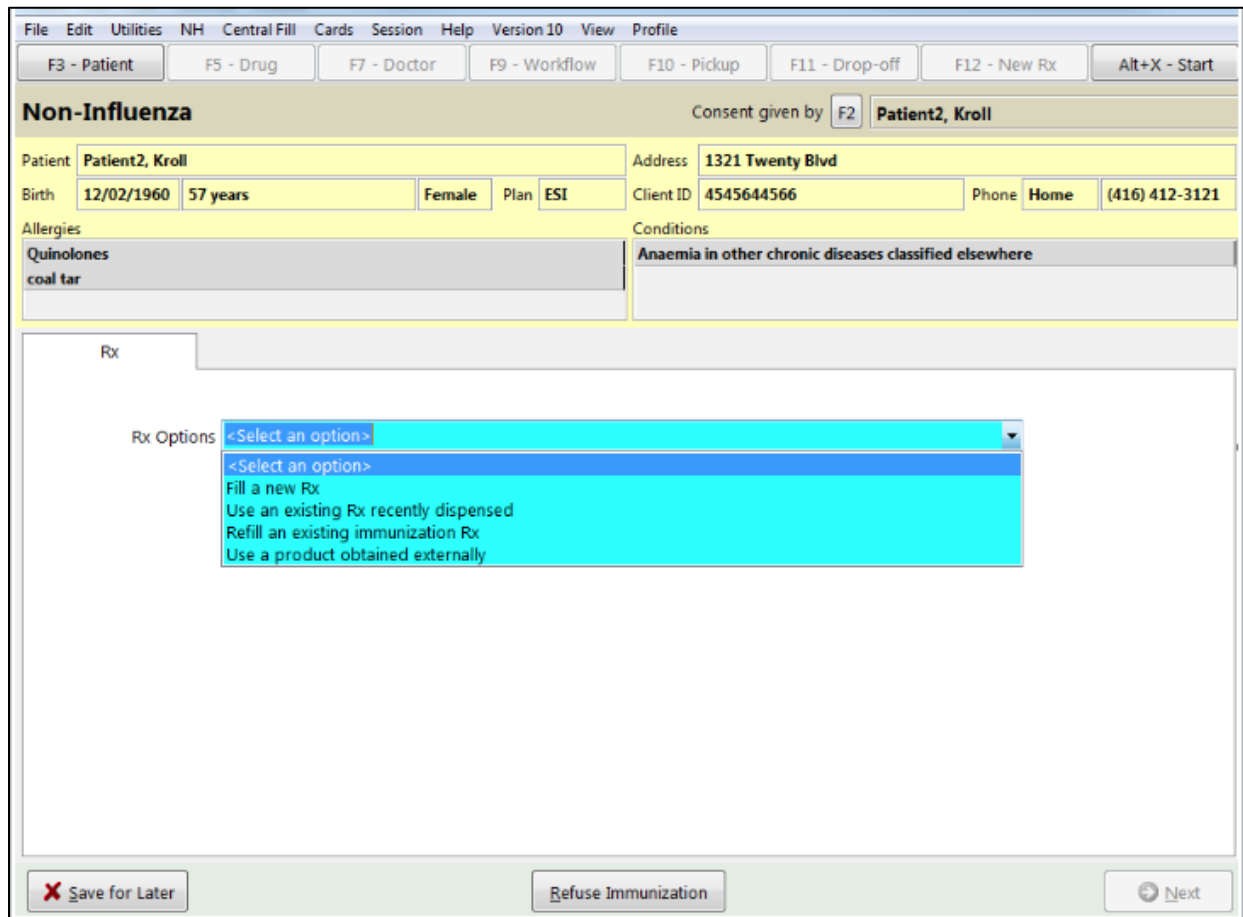
If the patient is planning on getting the injection done by a doctor:

1. Fill the Non-influenza Immunization Rx like any other Rx using the **F12 – new Rx** screen.
2. After dispensing the product to the patient, if the patient changes their mind and wants the pharmacist to inject the product follow one of the following scenarios depending on how long ago the product was dispensed:
 - Scenario 2 - if the patient brings in a recently dispensed product that is within the number of days set by the pharmacy of allowing using the Non-Influenza immunization Rx.
 - Scenario 4: - if the patient brings in a product that was dispensed at a different location or if a patient brings in product that was dispensed more than the days set out by the pharmacy in accepting the Rx.

If the patient is planning on getting the injection done by a pharmacist:

- Follow the procedure outlined in one of the following 4 scenarios explained below that applies.

Introduction of the 4 scenarios in the Electronic Mode



The screenshot shows the TELUS HEALTH software interface for documenting a Non-Influenza immunization. The window title is "Non-Influenza" and the patient is "Patient2, Kroll". The interface includes a menu bar (File, Edit, Utilities, NH, Central Fill, Cards, Session, Help, Version 10, View, Profile) and a toolbar with buttons for F3 - Patient, F5 - Drug, F7 - Doctor, F9 - Workflow, F10 - Pickup, F11 - Drop-off, F12 - New Rx, and Alt+X - Start. The patient information section includes fields for Patient (Patient2, Kroll), Address (1321 Twenty Blvd), Birth (12/02/1960), Age (57 years), Gender (Female), Plan (ESI), Client ID (4545644566), and Phone (Home, (416) 412-3121). The Allergies section lists "Quinolones" and "coal tar". The Conditions section lists "Anaemia in other chronic diseases classified elsewhere". The Rx Options dropdown menu is open, showing the following options: "<Select an option>", "Fill a new Rx", "Use an existing Rx recently dispensed", "Refill an existing immunization Rx", and "Use a product obtained externally". At the bottom of the window, there are buttons for "Save for Later", "Refuse Immunization", and "Next".

Scenario 1: Fill a new Rx – This option is always available in **Rx Options**.

This option is used when you want to fill and dispense a new Rx for the patient.

Scenario 2: Use an existing Rx recently dispensed – This option is ONLY available in **Rx Options** when the Rx was submitted, completed, and dispensed recently. An Rx that is defined as dispensed recently falls within the number of days set by the pharmacy in **Allow to use non-influenza immunization Rx dispensed __ days ago** option, in **File > Configuration > Store > Rx > 8 – Immunization**.

This option is used when the patient comes with the Non-influenza Immunization product into the same pharmacy that recently submitted, completed, and dispensed the Rx within the days set by the pharmacy.

Scenario 3: Refill an existing immunization Rx – This option is ONLY available in Rx options when there is a Vaccine Rx in Patient profile with a refill(s) remaining.

This option is used when a non-influenza immunization has more than one injection that needs to be taken by the patient. For example first injection on day 0, second injection on day 30, and third injection on day 60. The second and third injection will fall under **Refill an existing immunization Rx** if the patient decides to purchase the immunizations when they come in for the injection.

Scenario 4: Use a product obtained externally – this option is ONLY available when user enables **Allow to use non-influenza immunization products obtained externally** option, in **File > Configuration > Store > Rx > 8 – Immunization**.

This option is used in two situations:

- When patient brings in immunization Rx that was dispensed from another pharmacy
- When a non-influenza immunization has more than one injection that needs to be taken by the patient. For example first injection on day 0, second injection on day 30, and third injection on day 60. If the second and third Immunization Rx were purchased and dispensed to the patient along with the first immunization. Then when the patient comes in with the second or third immunization they are treated as products obtained externally.

Scenario 1: Filling a New Rx for a Patient

Fill a new Rx for a patient appears in the **Rx Options** Drop down menu as an option in all scenarios. This option is used when you want to fill and dispense a new Rx for the patient.

1. Call up a patient card using the **F3 - Patient** search.
2. On right navigation pane, under the **View** section, click **Immunizations**.

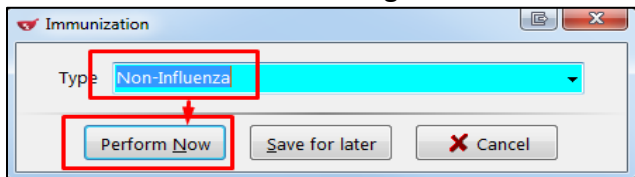
The screenshot shows the patient profile window for a patient named Test. The right-hand navigation pane is visible, and the 'Immunizations' option is highlighted with a red box. Other options in the pane include All Rxs, Active Rxs, Refillable Rxs, Pricing Profile, Not Disp./OTC Rxs, Rxs Filled in Error, Suspended Rxs, Perform FDB Analysis, Alternate Addresses, AR Profile, Batches, Charting, Consents, Credit Cards, View Patient Documents (0), History, and Limited Use Items.

'Immunizations' window appears.

3. Click **N - New Immunization** or click **Ins**.

The screenshot shows the 'Immunizations' window. The 'N - New Immunization' button is highlighted with a red box. Below the button, there are options for 'P - Print/Reprint', 'F - Call up', 'C - Cancel Claim', 'D - Pharmacist Declined', and 'R - Patient Refused'. The 'Items (0)' table is empty. A dropdown menu for 'Type' is open, showing 'Influenza' and 'Non-Influenza' options, with 'Non-Influenza' highlighted by a red box. The 'Print Now' and 'Save for later' buttons are also visible.

- On the **Type** drop down list, select **Non-Influenza** and then click **Perform Now**. Immunization wizard begins.



Note: If you want to add the immunization record to the Immunizations queue in order to complete the immunization form later, click **Save for Later**. ‘Immunization’ screen appears.

The status of the Non-influenza immunization is as follows.

User is brought back to ‘Immunization’ screen; The Non-influenza Immunization has the following status.

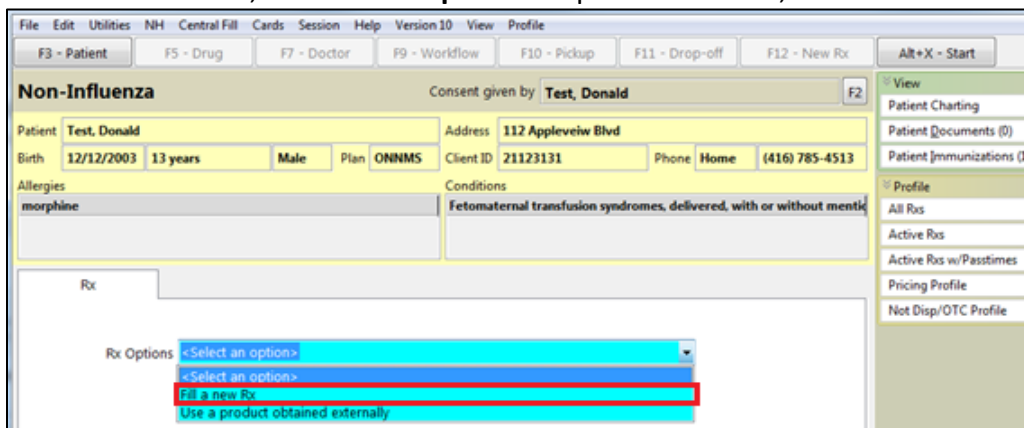
Immunizations						
N - New Immunization		P - Print/Reprint	F - Call up	C - Cancel Claim		<input type="checkbox"/> Show Reversals
D - Pharmacist Declined		R - Patient Refused				
#	Type	Status	Product Status	Fee Status	Created	Completed
65	Non-Influenza	Pending	Not Completed Yet	Not Completed Yet	25/07/2017	

See the [Completing Immunizations ‘Saved for Later’](#) section for more information.

Rx

The Rx section consists of whether the product was dispensed now or earlier, and whether it was dispense from the current pharmacy or externally, the name of the product, the pack size and UPC of the product. To fill in the Rx information:

- On the **Rx** tab, click the **Rx Options** drop down textbox, and select **Fill a new Rx**.



Product, Packsize, and UPC fields display with blank fields.

The screenshot shows the 'Non-Influenza' form for patient 'Test, Donald'. The 'Rx' section has a dropdown menu set to 'Fill a new Rx'. Below it, the 'Product' field is a dropdown menu currently showing '< None >', and the 'PackSize' and 'UPC' fields are empty text boxes. A red box highlights these three fields. A red text annotation to the right says: 'These fields display once an Rx option is selected. The fields display blank.'

6. On the **Product** drop down textbox select a product. The PackSize and UPC fields are automatically populated. The **'Next'** button is enabled

The screenshot shows the same 'Non-Influenza' form. The 'Rx Options' dropdown is still 'Fill a new Rx', but the 'Product' dropdown now shows 'Havrix 720 Junior 720U/0.5mL (Pack Size 0.5 ML)'. The 'PackSize' field is now populated with '0.5 ML' and the 'UPC' field is populated with '770933000018'. A red box highlights these three fields. A red text annotation to the right says: 'Once a product is selected, PackSize, and UPC fields are automatically populated'. At the bottom right, the 'Next' button is now enabled and highlighted with a red box. A red arrow points to it with the text: 'Next button is enabled'.

Note: Optional - You can press **F5** on the keyboard to view the Drug card and the details of the product, and then click **Close**.

7. Click **Next**. **'Emergency contact'** tab appears.

Emergency Contact

The emergency contact will be contacted in the event of an emergency.

8. Search for and select an emergency contact.
9. Specify the contact's **Relationship** to the patient and enter their phone number(s).

Note: If the patient has an emergency contact saved to the F3 - Patient card (**Other** tab), the contact's information prepopulates in the Emergency Contact fields and the '**Patient Consent**' tab appears.

If the patient has more than one emergency contact saved to the F3 - Patient card, select the desired contact from the list.

10. Click **Save to Patient**, to save the emergency contact to the **F3 - Patient** card. The emergency contact is inserted in the **Other** tab in the **F3 - Patient** card.

General	Family	Nursing Home	Copays	Communications	Other	Ctrl
Emergency Contacts (1)						F2) Ins) Del)
Name	Relationship	Daytime Phone	Other Phone			
Doe, Jane	Friend	(555) 555-5555 ext 1234	(777) 777-7777			

11. Click **Next**.

Note: A daytime phone number for the emergency contact is required to proceed.

12. Click **Next**. '**Patient Consent**' tab appears.

Patient Consent

The Patient Consent consists of questions that will determine whether the patient is eligible to get the injection. To fill in the Patient consent section:

13. Select the appropriate answer for each of the Patient Consent questions.

- Some answers will not allow the patient to receive the immunization.

For example, if the patient answers **Yes** to '**Are you sick today?**', he or she will be ineligible for immunization.

- Some answers may present a note to the pharmacist.

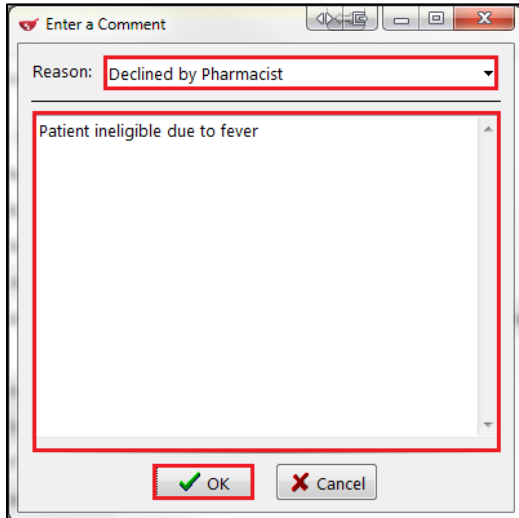
For example if the patient answers **Yes** to '**Are you allergic to latex gloves?**', a note displays instructing the pharmacist to not use latex products.

Note: For question Pharmacist - Will you be administering a Live Vaccine?

- a. If user clicks **Yes**, 4 additional questions display below for the patient to answer.
- b. If user clicks **No**, no additional questions display below.

The image displays two screenshots of a medical software interface for documenting a non-influenza immunization. Both screenshots show a patient profile for 'Patient, Green' with birth date 01/02/1958, age 59, and address 1231 Mitel Blvd. The consent form includes a 'Patient Consent' section with several questions. In the top screenshot, the question 'Pharmacist-Will you be administering a Live Vaccine?' is answered 'Yes', and four additional questions are displayed: 'Do you have a medical condition that can weaken your immune system?', 'Are you taking any medications that can weaken your immune system within the past 3 months?', 'Have you received any other vaccines in the last 4 weeks?', and 'Are you or do you think you might be pregnant?'. In the bottom screenshot, the same question is answered 'No', and no additional questions are displayed. Both screenshots have a 'Print Consent' button highlighted with a red box.

If the system determines the patient is ineligible for immunization, all consent questions will become read-only. Click **Refuse Immunization** and complete the **Enter a Comment** form. See the [Declined or Refused Immunizations](#) section for more information.



Enter a Comment

Reason: Declined by Pharmacist

Patient ineligible due to fever


OK Cancel

14. Once the patient has answered each of the Patient Consent questions and the pharmacist has determined the patient is eligible for immunization, click **Print Consent**. The **'Immunization Report'** window appears.


Note: All questions must be answered in order to proceed.

15. Click **Print Consent**. The ‘**Immunization Report**’ window appears. The **Non-Influenza Consent Form** prints. This form shows each of the Patient Consent questions and their answers for the patient to review.

If **No** is answered to the question **Pharmacist-Will you be administering a Live Vaccine?**, then the following Consent form is printed.

Non-Influenza Vaccine Consent Form			
Wendell's Pharmacy, 220 Duncan Mill Road, ddf33 AB 33333333			
PATIENT INFORMATION			TRACKING #: 647
First Name Patient	Last Name Test	Gender M	DOB 02-Feb-1999
Address 220 Finch Ave. East, Toronto ON M2J 2T9		Health Card #	Phone Number (416) 555-5555
Emergency Contact De Gary	Relationship to Patient Spouse	Contact's Phone Number (222) 222-2222	Contact's Other Phone Number
SCREENING QUESTIONNAIRE			
<p>The following questions will help us determine if there is any reason you or your child should not get the vaccine today. If you answer "yes" to any question, it does not necessarily mean the shot cannot be given. It simply means additional questions must be asked. If a question is not clear, please ask your pharmacist to explain it.</p>			
Are you sick today? (i.e. fever greater than 39.5°C, breathing problems, or active infection)			No
Are you allergic to any medications including vaccines?			No
Do you have an allergy to kanamycin, neomycin, gentamicin, thimerosal, chicken protein, polymixin or gelatin?			No
Have you ever had a severe, life threatening reaction to a past vaccination?			No
Have you had wheezing, chest tightness or difficulty breathing within 24 hours of getting a vaccine?			No
Are you allergic to latex gloves?			No
Have you had Guillain-Barre Syndrome within 6 weeks of getting a vaccine?			No
Do you have a new or changing neurological disorder?			No
Do you take a blood thinner or have a bleeding disorder?			No
Pharmacist-Will you be administering a Live Vaccine?			No
CONSENT GIVEN BY PATIENT			
<p>I, the undersigned client, parent or guardian, have read or had explained to me, information about the vaccine as outlined in the vaccine information sheets provided to me. I have had the chance to ask questions, and answers were given to my satisfaction. I understand the risks and benefits of receiving the vaccine. I agree to wait in the pharmacy for 15 minutes (or time recommended by the pharmacist) after getting the vaccine.</p> <p>I am aware that it is possible (yet rare) to have an extreme allergic reaction to any component of the vaccine. Some serious reactions called "anaphylaxis" can be life-threatening and is a medical emergency. If I experience such a reaction following vaccination, I am aware that it may require the administration of epinephrine, diphenhydramine, beta-agonists, and/or antihistamines to try to treat this reaction and that 9-1-1 will be called to provide additional assistance to the immunizer. The symptoms of an anaphylactic reaction may include hives, difficulty breathing, swelling of the tongue, throat, and/or lips.</p> <p>In the event of anaphylaxis, I will receive a copy of this form containing information on emergency treatments that I had received, or a copy will be provided to my agent or EMS paramedics.</p> <p><input type="checkbox"/> I confirm that I want to receive Avaxim 160/0.5ml.</p>			
Patient Test, Patient	Patient Signature	Date Signed 28-Aug-2017	
PHARMACIST DECLARATION I confirm the above named patient is capable of providing consent for Avaxim 160/0.5ml and that the Avaxim 160/0.5ml should be given to patient.			
Pharmacist Gary Deng (3687455)	Pharmacist Signature	Date Signed 28-Aug-2017	
Page 1 of 1			

If **Yes** is answered to the question **Pharmacist-Will you be administering a Live Vaccine?**, then the following Consent form is printed.

Non-Influenza Vaccine Consent Form			
Wendell's Pharmacy, 220 Duncan Mill Road, dfdf33 AB 33333333			
PATIENT INFORMATION			TRACKING #: 647
First Name Patient	Last Name Test	Gender M	DOB 02-Feb-1999
Address 220 Finch Ave. East, Toronto ON M2J 2T9		Health Card #	Phone Number (416) 555-5555
Emergency Contact De Gary	Relationship to Patient Spouse	Contact's Phone Number (222) 222-2222	Contact's Other Phone Number
SCREENING QUESTIONNAIRE			
<p><i>The following questions will help us determine if there is any reason you or your child should not get the vaccine today. If you answer "yes" to any question, it does not necessarily mean the shot cannot be given. It simply means additional questions must be asked.</i></p> <p><i>If a question is not clear, please ask your pharmacist to explain it.</i></p>			
Are you sick today? (i.e. fever greater than 38.5°C, breathing problems, or active infection)			No
Are you allergic to any medications including vaccines?			No
Do you have an allergy to kanamycin, neomycin, gentamicin, thimerosal, chicken protein, polymixin or gelatin?			No
Have you ever had a severe, life threatening reaction to a past vaccination?			No
Have you had wheezing, chest tightness or difficulty breathing within 24 hours of getting a vaccine?			No
Are you allergic to latex gloves?			No
Have you had Guillain-Barre Syndrome within 6 weeks of getting a vaccine?			No
Do you have a new or changing neurological disorder?			No
Do you take a blood thinner or have a bleeding disorder?			No
Pharmacist-Will you be administering a Live Vaccine?			Yes
Do you have a medical condition that can weaken your immune system? (eg. Leukemia, Lymphoma, HIV/AIDs)			No
Are you taking any medications that can weaken your immune system within the past 3 months? (eg Prednisone etc)			No
Have you received any other vaccines in the last 4 weeks?			No
Are you or do you think you might be pregnant?			N/A
CONSENT GIVEN BY PATIENT			
<p>I, the undersigned client, parent or guardian, have read or had explained to me, information about the vaccine as outlined in the vaccine information sheets provided to me. I have had the chance to ask questions, and answers were given to my satisfaction. I understand the risks and benefits of receiving the vaccine. I agree to wait in the pharmacy for 15 minutes(or time recommended by the pharmacist) after getting the vaccine.</p> <p>I am aware that it is possible (yet rare) to have an extreme allergic reaction to any component of the vaccine. Some serious reactions called "anaphylaxis" can be life-threatening and is a medical emergency. If I experience such a reaction following vaccination, I am aware that it may require the administration of epinephrine, diphenhydramine, beta-agonists, and/or antihistamines to try to treat this reaction and that 9-1-1 will be called to provide additional assistance to the immunizer. The symptoms of an anaphylactic reaction may include hives, difficulty breathing, swelling of the tongue, throat, and/or lips.</p> <p>In the event of anaphylaxis, I will receive a copy of this form containing information on emergency treatments that I had received, or a copy will be provided to my agent or EMS paramedics.</p> <p><input type="checkbox"/> I confirm that I want to receive <u>Avaxim 160/0.5ml</u>.</p>			
Patient Test, Patient	Patient Signature	Date Signed 28-Aug-2017	
PHARMACIST DECLARATION I confirm the above named patient is capable of providing consent for <u>Avaxim 160/0.5ml</u> and that the <u>Avaxim 160/0.5ml</u> should be given to patient.			
Pharmacist Gary Deng (3687455)	Pharmacist Signature	Date Signed 28-Aug-2017	
Page 1 of 1			
			

16. After printing the report, the **'Scan Consent'** tab appears.

The following 3 options become available if you have a document scanner:

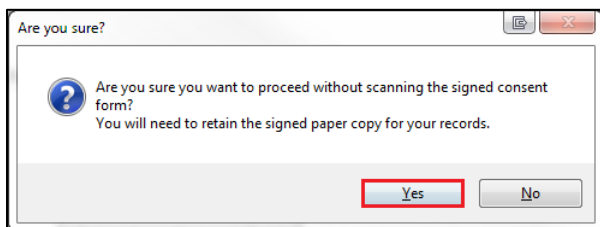
- **Scan Patient Consent Form:** Allows you to scan the patient consent form into the system.
- **Select from Network Scan:** If you have already scanned the signed consent form and the file is saved to the network, select this option to import the form.
- **Proceed without Scan:** Allows you to continue processing the immunization without importing the signed consent form. All consent forms can then be scanned at the end of the day using the [Document Scan Utility](#).



The following 3 options become available if you do not have a document scanner:

- **Select from File:** If you have already scanned the signed consent form and the file is saved to a local directory, select this option to import the form.
- **Select from Network Scan:** If you have already scanned the signed consent form and the file is saved to the network, select this option to import the form.
- **Proceed without Scan:** Allows you to continue processing the immunization without importing the signed consent form. All consent forms can then be scanned at the end of the day using the [Document Scan Utility](#).

17. Click **Proceed without Scan**. Prompt **'Are you sure you want to proceed without scanning the signed consent form? You will need to retain the signed paper copy for your records.'** with options **Yes** and **No**.

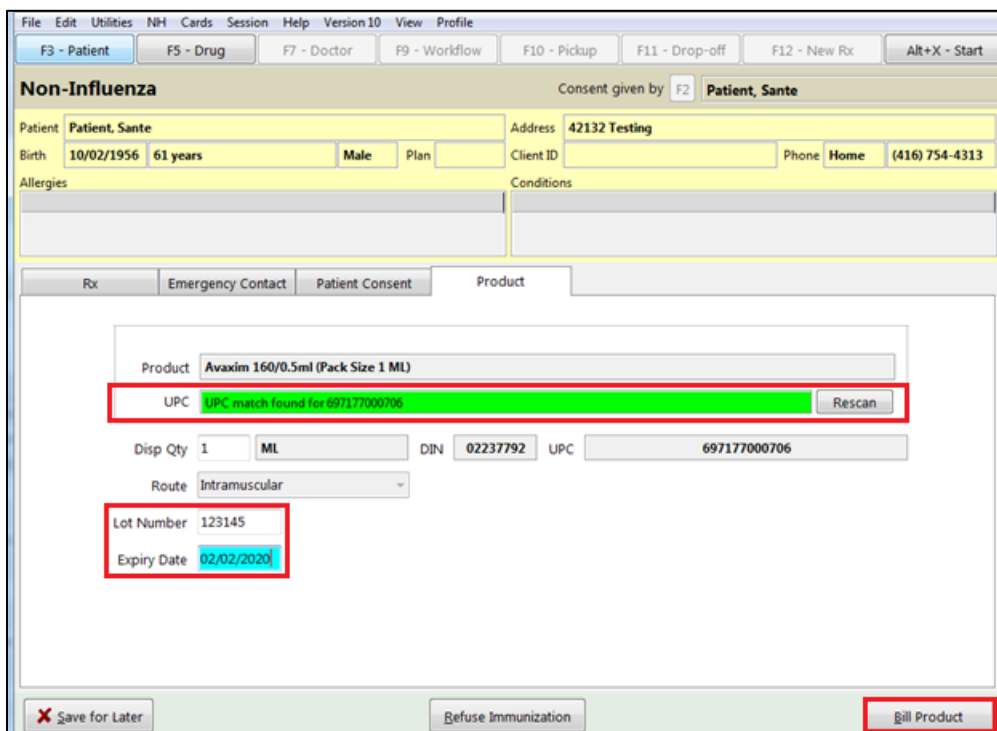


18. Click **Yes**. The **'Product'** tab appears.

Product

The product tab requires details of the product that will be administered, such as dispense quantity, Lot Number, and Expiry date, this section is used to submit and claim the Rx. To Fill in the product section:

19. If the **'Require UPC verification'** configuration setting is enabled, scan or enter the UPC from the drug pack. If a UPC match is found, product information will populate. The **'Bill Product'** button is enabled.



Note: You may need to manually enter the lot number and expiry date if this information is not stored in the product barcode.

If the **'Require UPC verification'** configuration setting is disabled, select a product from the list. Enter the 'Disp Qty', 'Lot Number', and 'Expiry Date' fields associated with the drug. The **'Bill Product'** button is enabled.

Billing product

To Bill a product:

20. Click **Bill Product**. 'F12 – Fill Rx' screen appears. Except initial field, all other fields are prepopulated with a value.

Exception: The Doctor Field can either be blank or be auto populated with the pharmacist's information.

In most provinces 'vaccine Rxs in schedule 1' can only be prescribed by a doctor, and not by a pharmacist. In these scenarios the Doctor Field is not auto populated with the pharmacist's names but rather left blank so that the doctor's information can be inputted.

In Alberta however, there are pharmacist with Additional Prescribing Authorization (APA). These pharmacists can prescribe 'vaccine Rxs in schedule 1'. Pharmacists with APA will have their name automatically populate in the doctor field regardless of whether the vaccine Rx is in schedule 1 or 2.

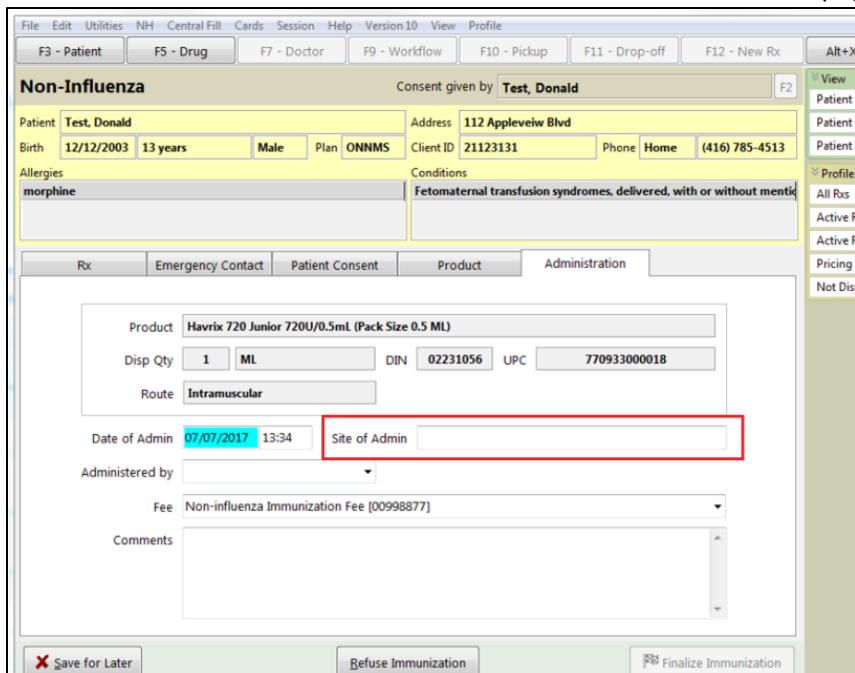
'Vaccine Rxs in schedule 2' does not require a prescription, thus the pharmacists name is auto populated in the doctor field.

21. Input your initials, and if needed doctors' information in the appropriate fields.
22. Click **F12 – Fill Rx** or press **F12** on your keyboard. Rx submitted and claimed. Non-influenza wizard redisplay at the Administration tab.

Administration

The administration section will consist of information in regards to date of administration, site of administration on the body, and whether a service fee is charged. To fill in the Administration section:

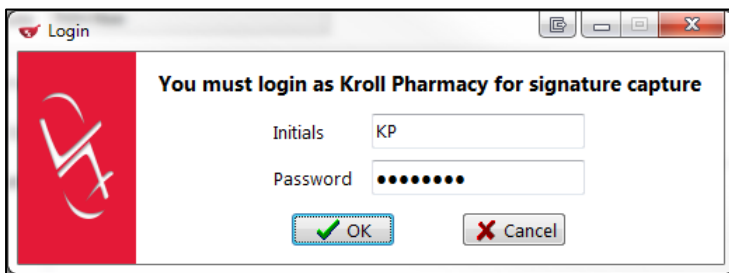
23. Enter the site of administration in the **Site of Admin** field (e.g., left arm, right thigh)



The screenshot shows a software interface for documenting a non-influenza immunization. The 'Administration' tab is active. The 'Site of Admin' field is highlighted with a red box, indicating where the user should enter the site of administration. Other fields include Product (Havrix 720 Junior 720U/0.5mL), Date of Admin (07/07/2017), and Administered by (a dropdown menu).

24. Select the pharmacist who administered the shot from the **Administered by** list.

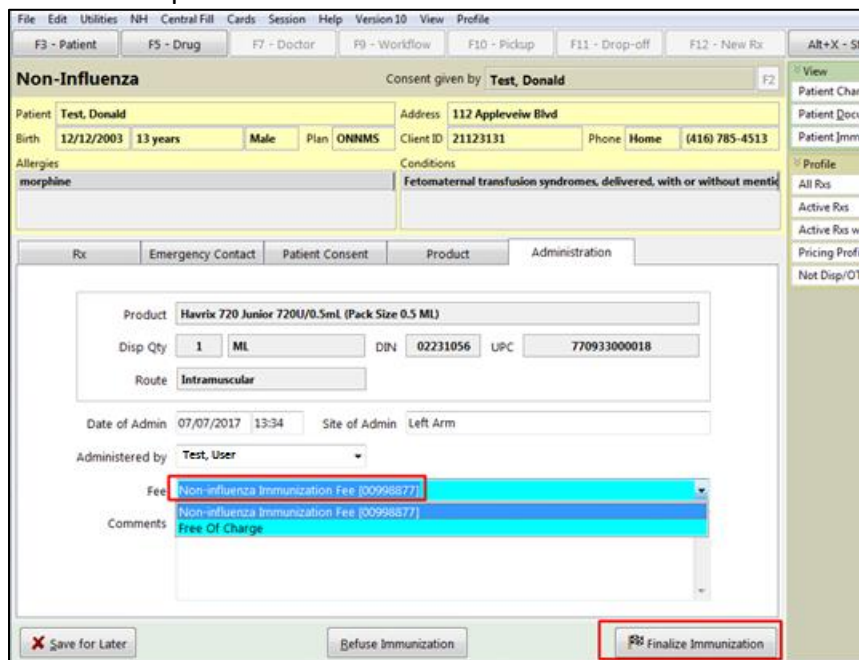
Note: If the **Administered by** user is not the currently logged in user, the **Administered by** user will be required to enter their login credentials in order to proceed.



The screenshot shows a login dialog box with the following content:

- Title: Login
- Message: You must login as Kroll Pharmacy for signature capture
- Initials: KP
- Password: [Masked]
- Buttons: OK, Cancel

25. On the **Administration Fee** drop down textbox, select whether or not to charge for the service provided. The **'Finalize Immunization'** button is enabled.



The screenshot shows the 'Non-Influenza' administration form. The patient information is Test, Donald, born 12/12/2003, 13 years old, male, with ONNMS plan. The immunization is for Havrix 720 Junior 720U/0.5ml (Pack Size 0.5 ML), administered intramuscularly on 07/07/2017 at 13:34 on the left arm by Test, User. The 'Administration' tab is selected, and the 'Fee' dropdown menu is open, showing 'Non-influenza Immunization Fee (00998877)' selected. The 'Finalize Immunization' button is highlighted with a red box.

26. Enter any comments in the space provided (optional).

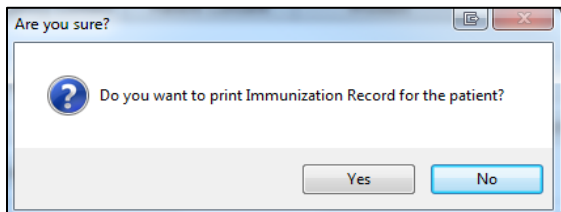
27. Click **Finalize Immunization**.

28. If you have electronic signatures enabled, the pharmacist will be prompted to sign the signature pad in order to proceed. Sign the signature pad and click **OK**.



The screenshot shows the 'Electronic Signature' window. The window title is 'Electronic Signature'. The main text says 'Please sign on the signature tablet'. A signature is visible on the tablet. The 'OK' button is highlighted with a red box.

29. Prompt ‘Do you want to print Immunization Record for the patient?’ with options **Yes** and **No**.



30. Click **Yes**. Record is printed. ‘**F12**’ screen displays to bill the fee for service for non-influenza immunization.

Note: If **No** is clicked instead, record is not printed.

Billing Service Fee

Once Immunization is finalized and an Immunization record is printed, and Non-influenza Immunization service fee was selected in the Fee field on the Administration tab, the Immunization can be billed. To bill an Immunization:

31. Input mandatory fields.

32. Click **F12 – Fill Rx** or press **F12** on your keyboard. Fee is billed successfully and label is printed.

33. If structured workflow is activated the Rx will follow the workflow configuration that is dictated.

Note: if structured workflow is not activated, ‘**Immunization**’ screen displays with Immunization Rx status.

34. Complete all remaining workflow steps as required.

35. Click **Approve**. ‘**Workflow**’ screen closes and Patient card’s ‘**Immunization**’ screen appears. The Non-influenza has the following status: **Status = Signed Consent, Product Status = Claimed** and **Fee Status = Claimed**.

Immunizations						
N - New Immunization		P - Print/Reprint	F - Claim Fee	C - Cancel Claim	<input type="checkbox"/> Show Reversals	
		D - Pharmacist Declined	R - Patient Refused			
Items (1)						
#	Type	Status	Product Status	Fee Status	Created	Completed
117	Non-Influenza	Signed Consent	Claimed	Claimed	26/07/2017	26/07/2017

Note: If **Free for service** was selected in the **Fee** field on the **Administration** tab. The ‘**Immunizations**’ screen displays the same as above, except **Fee status = No Fee Applicable**.

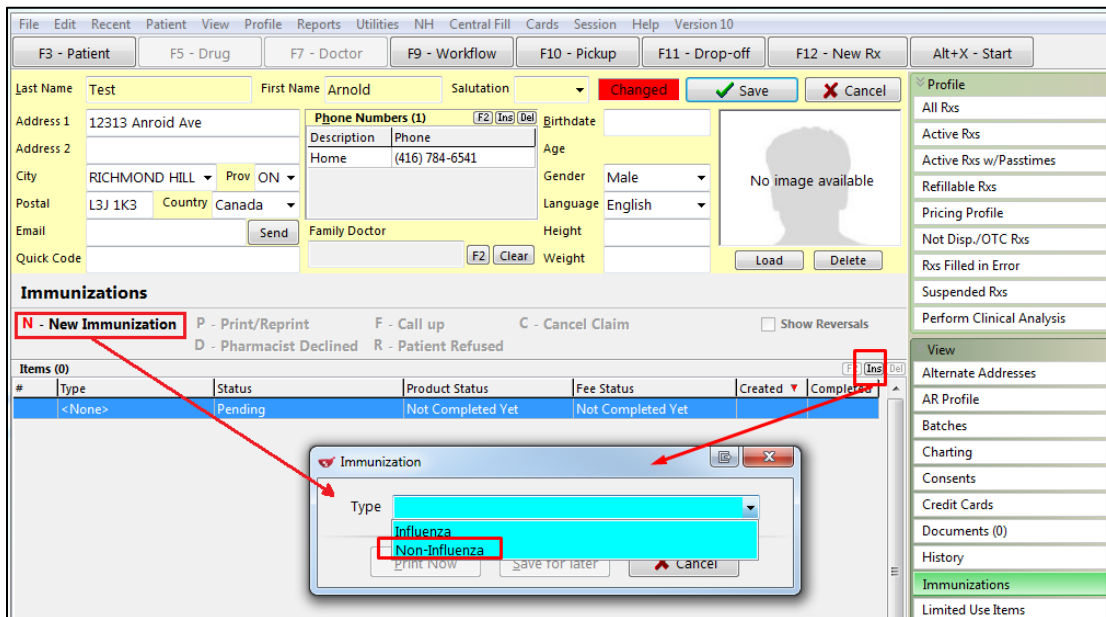
Scenario 2: Using a Recently Dispensed Non-influenza Rx for the Patient

‘Use an existing Rx recently dispensed’ option displays in the **Rx Options** drop down menu if a vaccine Rx was dispensed within the number of days set by the pharmacy.

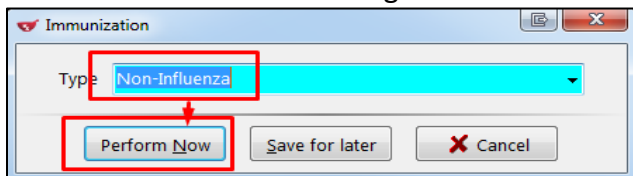
1. Call up a patient card using the **F3 - Patient** search.
2. On right navigation pane, under the **View** section, click **Immunizations**.

‘Immunizations’ window appears.

3. Click **N - New Immunization** or click **Ins**.



4. On the **Type** drop down list, select **Non-Influenza** and then click **Perform Now**. Immunization wizard begins.



Note: If you want to add the immunization record to the Immunizations queue in order to complete the immunization form later, click **Save for Later**. 'Immunization' screen appears. The status of the Non-influenza immunization is as follows. User is brought back to 'Immunization' screen; The Non-influenza Immunization has the following status.

Immunizations							
N - New Immunization		P - Print/Reprint		F - Call up		C - Cancel Claim	
		D - Pharmacist Declined		R - Patient Refused		Show Reversals	
#	Type	Status	Product Status	Fee Status	Created	Completed	
65	Non-Influenza	Pending	Not Completed Yet	Not Completed Yet	25/07/2017		

See the [Completing Immunizations 'Saved for Later'](#) section for more information.

Rx

The Rx section consists of whether the product was dispensed now or earlier, and whether it was dispense from the current pharmacy or externally, the name of the product, the pack size and UPC of the product. To fill in the Rx information:

- On the **Rx** tab, click the **Rx Options** drop down textbox, and select **Use an existing Rx recently dispensed**.

The screenshot shows the 'Non-Influenza' patient profile window. The 'Rx Options' dropdown menu is open, displaying the following options: '<Select an option>', '<Select an option>', 'Fill a new Rx', 'Use an existing Rx recently dispensed' (highlighted with a red box), and 'Use a product obtained externally'. The patient information includes Patient: Patient, Green; Birth: 01/02/1958 (59 years); Female; Address: 1231 Mitel Blvd; Client ID: (416) 756-4653.

The 'Please select an Rx from the profile' field and the 'View Profile' button displays below.

The screenshot shows the 'Non-Influenza' patient profile window with the 'Rx Options' dropdown set to 'Use an existing Rx recently dispensed'. Below the dropdown, a text field contains the prompt 'Please select an Rx from the profile' and a 'View Profile' button is visible. The patient information remains the same as in the previous screenshot.

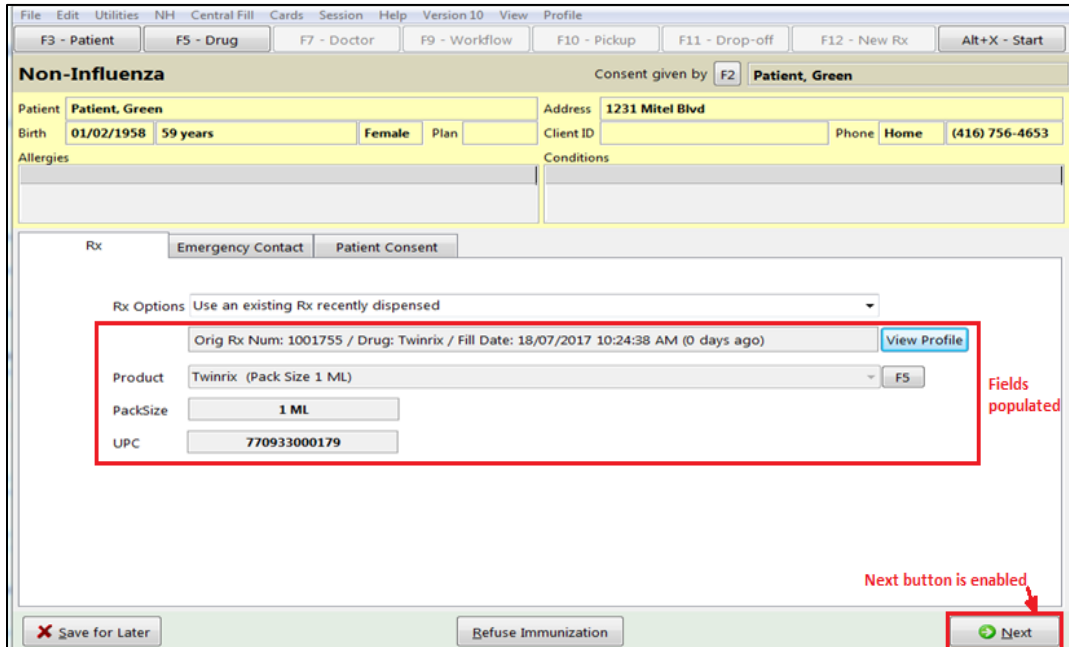
- Click **View Profile**. 'Profile - Recently Dispensed' window displays with a list of Vaccine Rx.

The screenshot shows the 'Profile - Recently Dispensed' window. It contains a table with the following data:

#	Status	Orig Rx	RxNum	Date	Ago	Qty	Auth	Rem	BrandName	Doctor	Sig
1		1001796	1001796	24/07/2017	0	1	1	0	Bexsero Vaccine	Test,docdoc	MD

Additional window details: ESC - Back to Patient, D - Detail, OK button.

7. Select an Rx, and click **OK**. The Field box next to the **‘View Profile’** button is populated with the Original Rx Number, Drug name, Fill Date with Time and # of days ago the Rx was filled. Product field, PackSize field and UPC field are all automatically populated. The **‘Next’** button is enabled.



Note: Optional - You can press **F5** on the keyboard to view the Drug card and the details of the product, and then click **Close**.

8. Click **Next**. **‘Emergency contact’** tab appears.

Emergency Contact

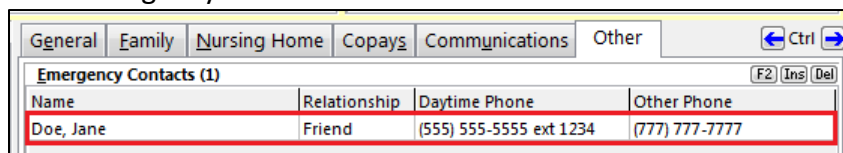
The emergency contact will be contacted in the event of an emergency.

9. Search for and select an emergency contact.
10. Specify the contact's **Relationship** to the patient and enter their phone number(s).

Note: If the patient has an emergency contact saved to the F3 - Patient card (**Other** tab), the contact's information prepopulates in the Emergency Contact fields and the '**Patient Consent**' tab appears.

If the patient has more than one emergency contact saved to the F3 - Patient card, select the desired contact from the list.

11. Click **Save to Patient**, to save the emergency contact to the **F3 - Patient** card. The emergency contact is inserted in the **Other** tab in the **F3 - Patient** card.



Emergency Contacts (1)			
Name	Relationship	Daytime Phone	Other Phone
Doe, Jane	Friend	(555) 555-5555 ext 1234	(777) 777-7777

12. Click **Next**.

Note: A daytime phone number for the emergency contact is required to proceed.

13. Click **Next**. '**Patient Consent**' tab appears.

Patient Consent

The Patient Consent consists of questions that will determine whether the patient is eligible to get the injection. To fill in the Patient consent section:

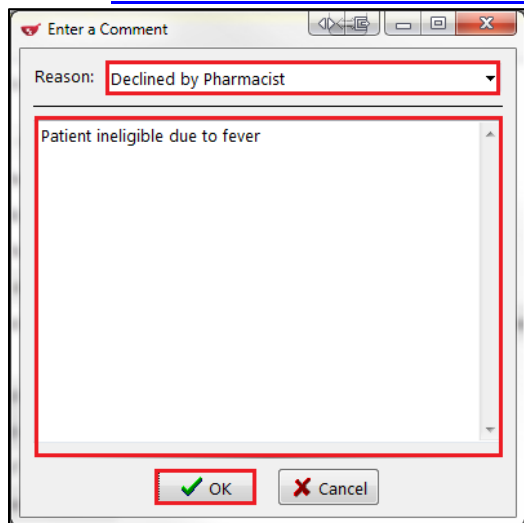
14. Select the appropriate answer for each of the Patient Consent questions.
 - Some answers will not allow the patient to receive the immunization.
 For example, if the patient answers **Yes** to '**Are you sick today?**', he or she will be ineligible for immunization.
 - Some answers may present a note to the pharmacist.
 For example if the patient answers **Yes** to '**Are you allergic to latex gloves?**', a note displays instructing the pharmacist to not use latex products.

Note: For question Pharmacist - Will you be administering a Live Vaccine?

- a. If user clicks **Yes**, 4 additional questions display below for the patient to answer.
- b. If user clicks **No**, no additional questions display below.

The image displays two screenshots of a medical software interface for documenting a patient's consent for a non-influenza immunization. Both screenshots show the patient's information: Patient: Patient, Green; Address: 1231 Mitel Blvd; Birth: 01/02/1958, 59 years, Female; Client ID: (416) 756-4653. The consent form is titled 'Non-Influenza' and 'Consent given by F2 Patient, Green'. The top screenshot shows the question 'Pharmacist-Will you be administering a Live Vaccine?' with 'Yes' selected. Below this question, four additional questions are displayed: 'Do you have a medical condition that can weaken your immune system?', 'Are you taking any medications that can weaken your immune system within the past 3 months?', 'Have you received any other vaccines in the last 4 weeks?', and 'Are you or do you think you might be pregnant?'. The bottom screenshot shows the same question with 'No' selected, and no additional questions are displayed. Both screenshots have a 'Print Consent' button highlighted with a red box.

If the system determines the patient is ineligible for immunization, all consent questions will become read-only. Click **Refuse Immunization** and complete the **Enter a Comment** window. See the [Declined or Refused Immunizations](#) section for more information.




- Once the patient has answered each of the Patient Consent questions and the pharmacist has determined the patient is eligible for immunization, click **Print Consent**. The **'Immunization Report'** window appears.


Note: All questions must be answered in order to proceed.

16. Click **Print Consent**. The ‘**Immunization Report**’ window appears. The **Non-Influenza Consent Form** prints. This form shows each of the Patient Consent questions and their answers for the patient to review.

If **No** is answered to the question **Pharmacist-Will you be administering a Live Vaccine?**, then the following Consent form is printed.

Non-Influenza Vaccine Consent Form			
Wendell's Pharmacy, 220 Duncan Mill Road, ddf33 AB 33333333			
PATIENT INFORMATION			TRACKING #: 647
First Name Patient	Last Name Test	Gender M	DOB 02-Feb-1999
Address 220 Finch Ave. East, Toronto ON M2J 2T9		Health Card #	Phone Number (416) 555-5555
Emergency Contact De Gary	Relationship to Patient Spouse	Contact's Phone Number (222) 222-2222	Contact's Other Phone Number
SCREENING QUESTIONNAIRE			
<p>The following questions will help us determine if there is any reason you or your child should not get the vaccine today. If you answer "yes" to any question, it does not necessarily mean the shot cannot be given. It simply means additional questions must be asked. If a question is not clear, please ask your pharmacist to explain it.</p>			
Are you sick today? (i.e. fever greater than 39.5°C, breathing problems, or active infection)			No
Are you allergic to any medications including vaccines?			No
Do you have an allergy to kanamycin, neomycin, gentamicin, thimerosal, chicken protein, polymixin or gelatin?			No
Have you ever had a severe, life threatening reaction to a past vaccination?			No
Have you had wheezing, chest tightness or difficulty breathing within 24 hours of getting a vaccine?			No
Are you allergic to latex gloves?			No
Have you had Guillain-Barre Syndrome within 6 weeks of getting a vaccine?			No
Do you have a new or changing neurological disorder?			No
Do you take a blood thinner or have a bleeding disorder?			No
Pharmacist-Will you be administering a Live Vaccine?			No
CONSENT GIVEN BY PATIENT			
<p>I, the undersigned client, parent or guardian, have read or had explained to me, information about the vaccine as outlined in the vaccine information sheets provided to me. I have had the chance to ask questions, and answers were given to my satisfaction. I understand the risks and benefits of receiving the vaccine. I agree to wait in the pharmacy for 15 minutes (or time recommended by the pharmacist) after getting the vaccine.</p> <p>I am aware that it is possible (yet rare) to have an extreme allergic reaction to any component of the vaccine. Some serious reactions called "anaphylaxis" can be life-threatening and is a medical emergency. If I experience such a reaction following vaccination, I am aware that it may require the administration of epinephrine, diphenhydramine, beta-agonists, and/or antihistamines to try to treat this reaction and that 9-1-1 will be called to provide additional assistance to the immunizer. The symptoms of an anaphylactic reaction may include hives, difficulty breathing, swelling of the tongue, throat, and/or lips.</p> <p>In the event of anaphylaxis, I will receive a copy of this form containing information on emergency treatments that I had received, or a copy will be provided to my agent or EMS paramedics.</p> <p><input type="checkbox"/> I confirm that I want to receive Avaxim 160/0.5ml.</p>			
Patient Test, Patient	Patient Signature	Date Signed 28-Aug-2017	
PHARMACIST DECLARATION I confirm the above named patient is capable of providing consent for Avaxim 160/0.5ml and that the Avaxim 160/0.5ml should be given to patient.			
Pharmacist Gary Deng (3687455)	Pharmacist Signature	Date Signed 28-Aug-2017	
Page 1 of 1			

If **Yes** is answered to the question **Pharmacist-Will you be administering a Live Vaccine?**, then the following Consent form is printed.

Non-Influenza Vaccine Consent Form			
Wendell's Pharmacy, 220 Duncan Mill Road, dfdf33 AB 33333333			
PATIENT INFORMATION			TRACKING #: 647
First Name Patient	Last Name Test	Gender M	DOB 02-Feb-1999
Address 220 Finch Ave. East, Toronto ON M2J 2T9		Health Card #	Phone Number (416) 555-5555
Emergency Contact De Gary	Relationship to Patient Spouse	Contact's Phone Number (222) 222-2222	Contact's Other Phone Number
SCREENING QUESTIONNAIRE			
<p><i>The following questions will help us determine if there is any reason you or your child should not get the vaccine today. If you answer "yes" to any question, it does not necessarily mean the shot cannot be given. It simply means additional questions must be asked.</i></p> <p><i>If a question is not clear, please ask your pharmacist to explain it.</i></p>			
Are you sick today? (i.e. fever greater than 38.5°C, breathing problems, or active infection)			No
Are you allergic to any medications including vaccines?			No
Do you have an allergy to kanamycin, neomycin, gentamicin, thimerosal, chicken protein, polymixin or gelatin?			No
Have you ever had a severe, life threatening reaction to a past vaccination?			No
Have you had wheezing, chest tightness or difficulty breathing within 24 hours of getting a vaccine?			No
Are you allergic to latex gloves?			No
Have you had Guillain-Barre Syndrome within 6 weeks of getting a vaccine?			No
Do you have a new or changing neurological disorder?			No
Do you take a blood thinner or have a bleeding disorder?			No
Pharmacist-Will you be administering a Live Vaccine?			Yes
Do you have a medical condition that can weaken your immune system? (eg. Leukemia, Lymphoma, HIV/AIDs)			No
Are you taking any medications that can weaken your immune system within the past 3 months? (eg Prednisone etc)			No
Have you received any other vaccines in the last 4 weeks?			No
Are you or do you think you might be pregnant?			N/A
CONSENT GIVEN BY PATIENT			
<p>I, the undersigned client, parent or guardian, have read or had explained to me, information about the vaccine as outlined in the vaccine information sheets provided to me. I have had the chance to ask questions, and answers were given to my satisfaction. I understand the risks and benefits of receiving the vaccine. I agree to wait in the pharmacy for 15 minutes(or time recommended by the pharmacist) after getting the vaccine.</p> <p>I am aware that it is possible (yet rare) to have an extreme allergic reaction to any component of the vaccine. Some serious reactions called "anaphylaxis" can be life-threatening and is a medical emergency. If I experience such a reaction following vaccination, I am aware that it may require the administration of epinephrine, diphenhydramine, beta-agonists, and/or antihistamines to try to treat this reaction and that 9-1-1 will be called to provide additional assistance to the immunizer. The symptoms of an anaphylactic reaction may include hives, difficulty breathing, swelling of the tongue, throat, and/or lips.</p> <p>In the event of anaphylaxis, I will receive a copy of this form containing information on emergency treatments that I had received, or a copy will be provided to my agent or EMS paramedics.</p> <p><input type="checkbox"/> I confirm that I want to receive <u>Avaxim 160/0.5ml</u>.</p>			
Patient Test, Patient	Patient Signature	Date Signed 28-Aug-2017	
PHARMACIST DECLARATION I confirm the above named patient is capable of providing consent for <u>Avaxim 160/0.5ml</u> and that the <u>Avaxim 160/0.5ml</u> should be given to patient.			
Pharmacist Gary Deng (3687455)	Pharmacist Signature	Date Signed 28-Aug-2017	
Page 1 of 1			
			

17. After printing the report, the **'Scan Consent'** tab appears. The following 3 options become available if you have a document scanner:

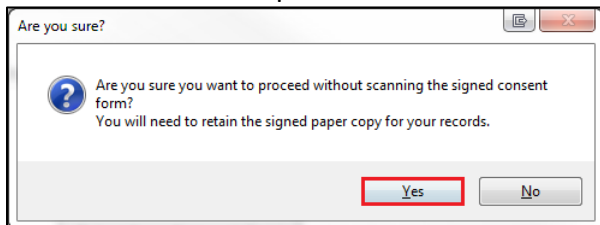
- **Scan Patient Consent Form:** Allows you to scan the patient consent form into the system.
- **Select from Network Scan:** If you have already scanned the signed consent form and the file is saved to the network, select this option to import the form.
- **Proceed without Scan:** Allows you to continue processing the immunization without importing the signed consent form. All consent forms can then be scanned at the end of the day using the [Document Scan Utility](#).



The following 3 options become available if do not have a document scanner:

- **Select from File:** If you have already scanned the signed consent form and the file is saved to a local directory, select this option to import the form.
- **Select from Network Scan:** If you have already scanned the signed consent form and the file is saved to the network, select this option to import the form.
- **Proceed without Scan:** Allows you to continue processing the immunization without importing the signed consent form. All consent forms can then be scanned at the end of the day using the [Document Scan Utility](#).

18. Click **Proceed without Scan**. Prompt **'Are you sure you want to proceed without scanning the signed consent form? You will need to retain the signed paper copy for your records.'** with options **Yes** and **No**.

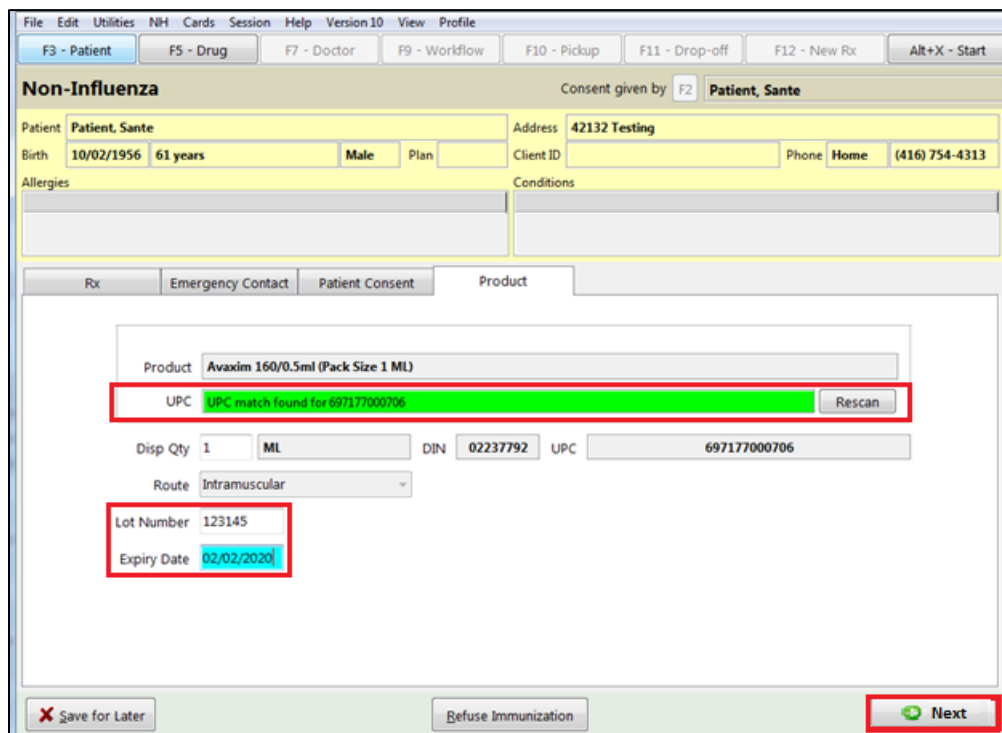


19. Click **Yes**. The **'Product'** tab appears.

Product

The product tab requires details of the product that will be administered, such as dispense quantity, Lot Number, and Expiry date, this section is used to submit and claim the Rx. To Fill in the product section:

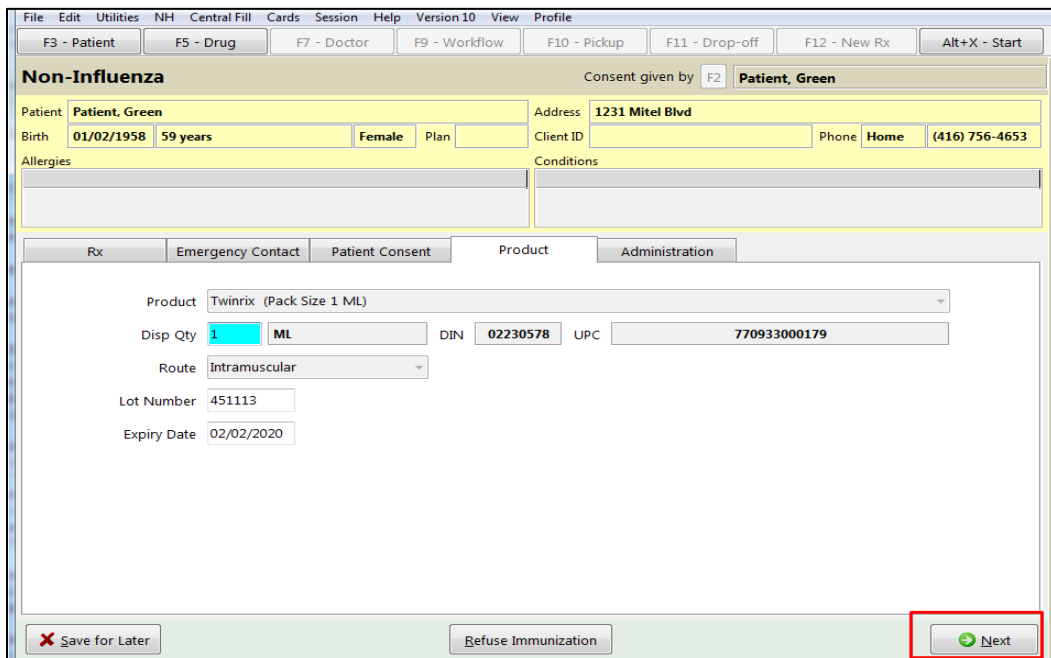
- If the **'Require UPC verification'** configuration setting is enabled, scan or enter the UPC from the drug pack. If a UPC match is found, product information will populate. The **'Next'** button is enabled.



The screenshot shows the 'Non-Influenza' software interface. At the top, there are navigation tabs: F3 - Patient, F5 - Drug, F7 - Doctor, F9 - Workflow, F10 - Pickup, F11 - Drop-off, F12 - New Rx, and Alt+X - Start. Below these is a 'Consent given by' field with 'Patient, Sante' selected. The patient information section includes fields for Patient Name (Patient, Sante), Birth (10/02/1956, 61 years, Male), Address (42132 Testing), and Phone Home ((416) 754-4313). There are also fields for Allergies and Conditions. The 'Product' tab is active, showing a product selection dropdown with 'Avaxim 160/0.5ml (Pack Size 1 ML)'. Below this is a UPC field with a green highlight and the text 'UPC match found for 697177000706', and a 'Rescan' button. Further down are fields for Disp Qty (1), ML, DIN (02237792), and UPC (697177000706). A 'Route' dropdown is set to 'Intramuscular'. At the bottom of the product section, 'Lot Number' is 123145 and 'Expiry Date' is 02/02/2020. At the very bottom of the window, there are three buttons: 'Save for Later' (with a red X), 'Refuse Immunization', and 'Next' (with a green arrow).

Note: You may need to manually enter the lot number and expiry date if this information is not stored in the product barcode.

If the 'Require UPC verification' configuration setting is disabled, select a product from the list. Enter the 'Disp Qty', 'Lot Number', and 'Expiry Date' fields associated with the drug. The 'Next' button is enabled.



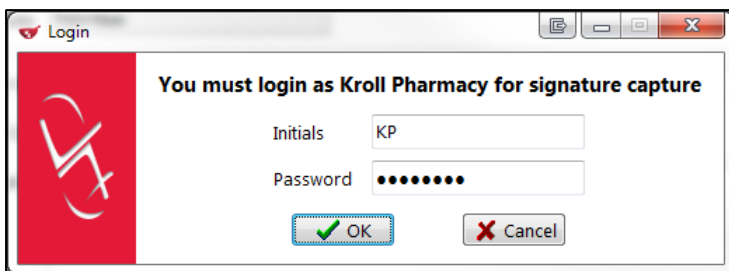
21. Click **Next**. The 'Administration' tab appears.

Administration

The administration section will consist of information in regards to date of administration, site of administration on the body, and whether a service fee is charged. To fill in the Administration section:

22. Enter the site of administration in the **Site of Admin** field (e.g., left arm, right thigh)
23. Select the pharmacist who administered the shot from the **Administered by** list.

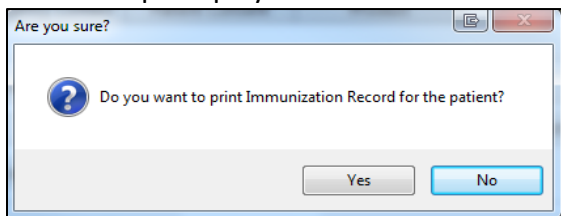
Note: If the **Administered by** user is not the currently logged in user, the **Administered by** user will be required to enter their login credentials in order to proceed.



24. On the **Administration Fee** drop down textbox, select whether or not to charge for the service provided. The **'Finalize Immunization'** button is enabled.

25. Enter any comments in the space provided (optional).
26. Click **Finalize Immunization**.
27. If you have electronic signatures enabled, the pharmacist will be prompted to sign the signature pad in order to proceed. Sign the signature pad and click **OK**.

28. Prompt displays ‘Print Immunization Record’ with options **Yes** and **No**.



29. Click **Yes**. Record is printed. User is brought to ‘F12’ screen to bill the fee for service for non-influenza immunization.

Note: If **No** is clicked instead, record is not printed.

Billing Service Fee

Once Immunization is finalized and an Immunization record is printed, and Non-influenza Immunization service fee was selected in the Fee field on the Administration tab, the Immunization can be billed. To bill an Immunization:

30. Input mandatory fields.

31. Click **F12 – Fill Rx** or press **F12** on your keyboard. Fee is billed successfully and label is printed.

32. If structured workflow is activated the Rx will follow the workflow configuration that is dictated.

Note: if structured workflow is not activated, ‘Immunization’ screen displays with Immunization Rx status.

33. Complete all remaining workflow steps as required.

34. Click **Approve**. ‘Workflow’ screen closes and the Patient card’s ‘Immunization’ screen appears. The Non-influenza has the following status: **Status = Completed, Product Status = Claimed** and **Fee Status = Claimed**.

Immunizations						
N - New Immunization		P - Print/Reprint		F - Claim Fee		C - Cancel Claim
				<input type="checkbox"/> Show Reversals		
		D - Pharmacist Declined		R - Patient Refused		
Items (1)						
#	Type	Status	Product Status	Fee Status	Created	Completed
05	Non-Influenza	Completed	Claimed	Claimed	18/07/2017	18/07/2017

Note: If **Free for service** was selected in the **Fee** field on the **Administration** tab. The ‘Immunizations’ screen displays the same as above, except **Fee status = No Fee Applicable**.

Scenario 3: Refilling an Existing Immunization Rx

'Refill an existing immunization Rx' displays in the Rx Options drop down menu if there is a refillable vaccine Rx.

1. Call up a patient card using the **F3 - Patient** search.
2. On right navigation pane, under the **View** section, click **Immunizations**.

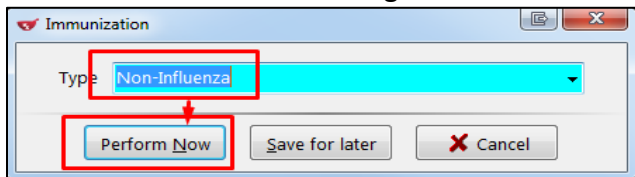
The screenshot shows a patient profile window for 'Patient Test'. The right-hand navigation pane is open to the 'View' section, where 'Immunizations' is highlighted with a red box. Other options in the 'View' section include Alternate Addresses, AR Profile, Batches, Charting, Consents, Credit Cards, View Patient Documents (0), History, and Limited Use Items.

'Immunizations' window appears.

3. Click **N - New Immunization** or click **Ins**.

The screenshot shows the 'Immunizations' window for patient 'Arnold Test'. The 'N - New Immunization' button is highlighted with a red box. Below the button is a table with columns: #, Type, Status, Product Status, Fee Status, Created, and Completed. The first row shows '<None>', 'Pending', 'Not Completed Yet', and 'Not Completed Yet'. A red arrow points from the 'N - New Immunization' button to a modal dialog box titled 'Immunization'. In this dialog, the 'Type' dropdown is open, showing 'Influenza' and 'Non-Influenza' options, with 'Influenza' highlighted by a red box. Another red arrow points from the 'Ins' button in the top right of the window to the 'Immunization' dialog box.

- On the **Type** drop down list, select **Non-Influenza** and then click **Perform Now**. Immunization wizard begins.



Note: If you want to add the immunization record to the Immunizations queue in order to complete the immunization form later, click **Save for Later**. ‘Immunization’ screen appears.

The status of the Non-influenza immunization is as follows.

User is brought back to ‘Immunization’ screen; The Non-influenza Immunization has the following status.

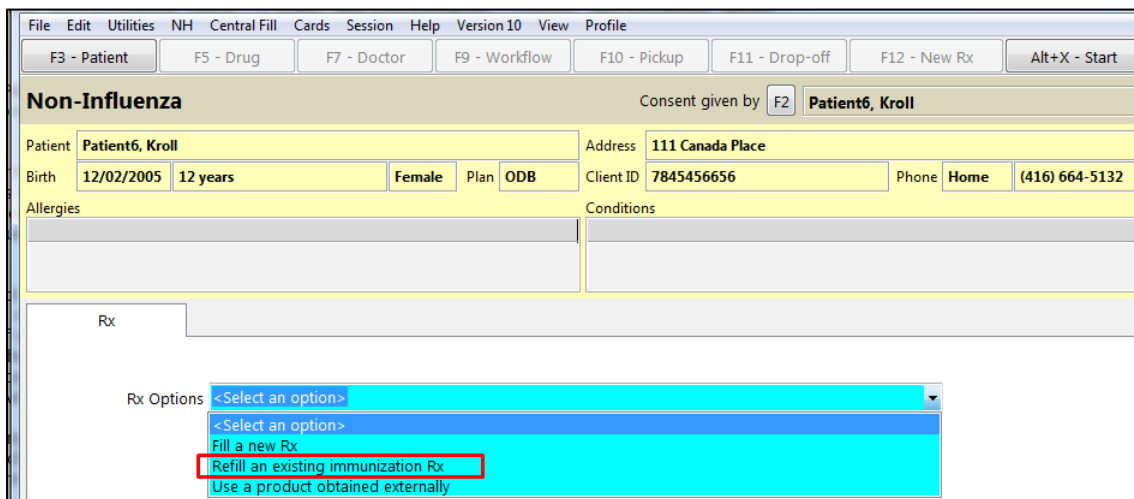
Immunizations							
N - New Immunization		P - Print/Reprint		F - Call up		C - Cancel Claim	
				D - Pharmacist Declined			
				R - Patient Refused			
Show Reversals <input type="checkbox"/>							
Items (2)							
#	Type	Status	Product Status	Fee Status	Created	Completed	
65	Non-Influenza	Pending	Not Completed Yet	Not Completed Yet	25/07/2017		

See the [Completing Immunizations ‘Saved for Later’](#) section for more information.

Rx

The Rx section consists of whether the product was dispensed now or earlier, and whether it was dispense from the current pharmacy or externally, the name of the product, the pack size and UPC of the product. To fill in the Rx information:

- On the **Rx** tab, click the **Rx Options** drop down textbox, and select **Refilling an existing immunization Rx**.



The 'Please select an Rx from the profile' field and the 'View Profile' button displays below.

6. Click **View Profile**. 'Profile – Refillable' window displays with a list of Vaccine Rx.

#	Status	Orig Rx	RxNum	Date	Ago	Qty	Auth	Rem	BrandName	Doctor	Sig
1		1001797	1001797	27/06/2017	0	1	2	1	Havrix 720 Junior 720U/0.5mL	Kroll, Testdoc	MD

7. Select an Rx, and click **OK**. The Field box next to the 'View Profile' button is populated with the Original Rx Number, Drug name, Fill Date with Time and how many days ago the Rx was filled. Product field, PackSize field and UPC field are all automatically populated. The 'Next' button is enabled.

Note: Optional - You can press **F5** on the keyboard to view the Drug card and the details of the product, and then click **Close**.

8. Click **Next**. 'Emergency contact' tab appears.

Emergency Contact

The emergency contact will be contacted in the event of an emergency.

9. Search for and select an emergency contact.
10. Specify the contact's **Relationship** to the patient and enter their phone number(s).

Note: If the patient has an emergency contact saved to the F3 - Patient card (**Other** tab), the contact's information prepopulates in the Emergency Contact fields and the '**Patient Consent**' tab appears.

If the patient has more than one emergency contact saved to the F3 - Patient card, select the desired contact from the list.

11. Click **Save to Patient**, to save the emergency contact to the **F3 - Patient** card. The emergency contact is inserted in the **Other** tab in the **F3 - Patient** card.

General	Family	Nursing Home	Copays	Communications	Other	Ctrl
Emergency Contacts (1)						F2 Ins Del
Name	Relationship	Daytime Phone	Other Phone			
Doe, Jane	Friend	(555) 555-5555 ext 1234	(777) 777-7777			

12. Click **Next**.

Note: A daytime phone number for the emergency contact is required to proceed.

13. Click **Next**. '**Patient Consent**' tab appears.

Patient Consent

The Patient Consent consists of questions that will determine whether the patient is eligible to get the injection. To fill in the Patient consent section:

14. Select the appropriate answer for each of the Patient Consent questions.
 - Some answers will not allow the patient to receive the immunization.
 For example, if the patient answers **Yes** to '**Are you sick today?**', he or she will be ineligible for immunization.
 - Some answers may present a note to the pharmacist.
 For example if the patient answers **Yes** to '**Are you allergic to latex gloves?**', a note displays instructing the pharmacist to not use latex products.

Note: For question Pharmacist - Will you be administering a Live Vaccine?

- a. If user clicks **Yes**, 4 additional questions display below for the patient to answer.
- b. If user clicks **No**, no additional questions display below.

The image displays two screenshots of a medical software interface for documenting patient consent for non-influenza immunization. Both screenshots show the same patient information: Patient: Patient, Green; Address: 1231 Mitel Blvd; Birth: 01/02/1958, 59 years, Female; Client ID: (416) 756-4653. The top screenshot shows the 'Pharmacist-Will you be administering a Live Vaccine?' question with 'Yes' selected, and the bottom screenshot shows the same question with 'No' selected. Both screenshots show a 'Print Consent' button highlighted with a red box.

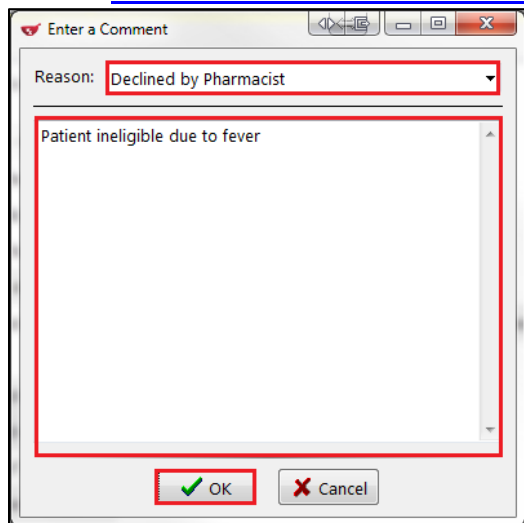
Top Screenshot (Yes selected):

- Consent given by: F2 Patient, Green
- Do you have an allergy to kanamycin, neomycin, gentamicin, thimerosal, chicken protein, polymixin or gelatin? No
- Have you ever had a severe, life threatening reaction to a past vaccination? No
- Have you had wheezing, chest tightness or difficulty breathing within 24 hours of getting a vaccine? No
- Are you allergic to latex gloves? No
- Have you had Guillain-Barre Syndrome within 6 weeks of getting a vaccine? No
- Do you have a new or changing neurological disorder? No
- Do you take a blood thinner or have a bleeding disorder? No
- Pharmacist-Will you be administering a Live Vaccine? **Yes**
- Do you have a medical condition that can weaken your immune system? (eg. Leukemia, Lymphoma, HIV/AIDS) <Not Answered>
- Are you taking any medications that can weaken your immune system within the past 3 months? (eg Prednisone) <Not Answered>
- Have you received any other vaccines in the last 4 weeks? <Not Answered>
- Are you or do you think you might be pregnant? <Not Answered>
- Buttons: Save for Later, Refuse Immunization, **Print Consent**

Bottom Screenshot (No selected):

- Consent given by: F2 Patient, Green
- Are you sick today? (i.e. fever greater than 39.5°C, breathing problems, or active infection) No
- Are you allergic to any medications including vaccines? No
- Do you have an allergy to kanamycin, neomycin, gentamicin, thimerosal, chicken protein, polymixin or gelatin? No
- Have you ever had a severe, life threatening reaction to a past vaccination? No
- Have you had wheezing, chest tightness or difficulty breathing within 24 hours of getting a vaccine? No
- Are you allergic to latex gloves? No
- Have you had Guillain-Barre Syndrome within 6 weeks of getting a vaccine? No
- Do you have a new or changing neurological disorder? No
- Do you take a blood thinner or have a bleeding disorder? No
- Pharmacist-Will you be administering a Live Vaccine? **No**
- Buttons: Save for Later, Refuse Immunization, **Print Consent**

If the system determines the patient is ineligible for immunization, all consent questions will become read-only. Click **Refuse Immunization** and complete the **Enter a Comment** window. See the [Declined or Refused Immunizations](#) section for more information.




- Once the patient has answered each of the Patient Consent questions and the pharmacist has determined the patient is eligible for immunization, click **Print Consent**. The **'Immunization Report'** window appears.


Note: All questions must be answered in order to proceed.

16. Click **Print Consent**. The ‘**Immunization Report**’ form appears. The **Non-Influenza Consent Form** prints. This form shows each of the Patient Consent questions and their answers for the patient to review.

If **No** is answered to the question **Pharmacist-Will you be administering a Live Vaccine?**, then the following Consent form is printed.

Non-Influenza Vaccine Consent Form			
Wendell's Pharmacy, 220 Duncan Mill Road, ddf33 AB 33333333			
PATIENT INFORMATION			TRACKING #: 647
First Name Patient	Last Name Test	Gender M	DOB 02-Feb-1999
Address 220 Finch Ave. East, Toronto ON M2J 2T9		Health Card #	Phone Number (416) 555-5555
Emergency Contact De Gary	Relationship to Patient Spouse	Contact's Phone Number (222) 222-2222	Contact's Other Phone Number
SCREENING QUESTIONNAIRE			
<p>The following questions will help us determine if there is any reason you or your child should not get the vaccine today. If you answer "yes" to any question, it does not necessarily mean the shot cannot be given. It simply means additional questions must be asked. If a question is not clear, please ask your pharmacist to explain it.</p>			
Are you sick today? (i.e. fever greater than 39.5°C, breathing problems, or active infection)			No
Are you allergic to any medications including vaccines?			No
Do you have an allergy to kanamycin, neomycin, gentamicin, thimerosal, chicken protein, polymixin or gelatin?			No
Have you ever had a severe, life threatening reaction to a past vaccination?			No
Have you had wheezing, chest tightness or difficulty breathing within 24 hours of getting a vaccine?			No
Are you allergic to latex gloves?			No
Have you had Guillain-Barre Syndrome within 6 weeks of getting a vaccine?			No
Do you have a new or changing neurological disorder?			No
Do you take a blood thinner or have a bleeding disorder?			No
Pharmacist-Will you be administering a Live Vaccine?			No
CONSENT GIVEN BY PATIENT			
<p>I, the undersigned client, parent or guardian, have read or had explained to me, information about the vaccine as outlined in the vaccine information sheets provided to me. I have had the chance to ask questions, and answers were given to my satisfaction. I understand the risks and benefits of receiving the vaccine. I agree to wait in the pharmacy for 15 minutes (or time recommended by the pharmacist) after getting the vaccine.</p> <p>I am aware that it is possible (yet rare) to have an extreme allergic reaction to any component of the vaccine. Some serious reactions called "anaphylaxis" can be life-threatening and is a medical emergency. If I experience such a reaction following vaccination, I am aware that it may require the administration of epinephrine, diphenhydramine, beta-agonists, and/or antihistamines to try to treat this reaction and that 9-1-1 will be called to provide additional assistance to the immunizer. The symptoms of an anaphylactic reaction may include hives, difficulty breathing, swelling of the tongue, throat, and/or lips.</p> <p>In the event of anaphylaxis, I will receive a copy of this form containing information on emergency treatments that I had received, or a copy will be provided to my agent or EMS paramedics.</p> <p><input type="checkbox"/> I confirm that I want to receive Avaxim 160/0.5ml.</p>			
Patient Test, Patient	Patient Signature	Date Signed 28-Aug-2017	
<p>PHARMACIST DECLARATION I confirm the above named patient is capable of providing consent for Avaxim 160/0.5ml and that the Avaxim 160/0.5ml should be given to patient.</p>			
Pharmacist Gary Deng (3687455)	Pharmacist Signature	Date Signed 28-Aug-2017	
Page 1 of 1			

If **Yes** is answered to the question **Pharmacist-Will you be administering a Live Vaccine?**, then the following Consent form is printed.

Non-Influenza Vaccine Consent Form			
Wendell's Pharmacy, 220 Duncan Mill Road, dfdf33 AB 33333333			
PATIENT INFORMATION			TRACKING #: 647
First Name Patient	Last Name Test	Gender M	DOB 02-Feb-1999
Address 220 Finch Ave. East, Toronto ON M2J 2T9		Health Card #	Phone Number (416) 555-5555
Emergency Contact De Gary	Relationship to Patient Spouse	Contact's Phone Number (222) 222-2222	Contact's Other Phone Number
SCREENING QUESTIONNAIRE			
<p><i>The following questions will help us determine if there is any reason you or your child should not get the vaccine today. If you answer "yes" to any question, it does not necessarily mean the shot cannot be given. It simply means additional questions must be asked.</i></p> <p><i>If a question is not clear, please ask your pharmacist to explain it.</i></p>			
Are you sick today? (i.e. fever greater than 38.5°C, breathing problems, or active infection)			No
Are you allergic to any medications including vaccines?			No
Do you have an allergy to kanamycin, neomycin, gentamicin, thimerosal, chicken protein, polymixin or gelatin?			No
Have you ever had a severe, life threatening reaction to a past vaccination?			No
Have you had wheezing, chest tightness or difficulty breathing within 24 hours of getting a vaccine?			No
Are you allergic to latex gloves?			No
Have you had Guillain-Barre Syndrome within 6 weeks of getting a vaccine?			No
Do you have a new or changing neurological disorder?			No
Do you take a blood thinner or have a bleeding disorder?			No
Pharmacist-Will you be administering a Live Vaccine?			Yes
Do you have a medical condition that can weaken your immune system? (eg. Leukemia, Lymphoma, HIV/AIDs)			No
Are you taking any medications that can weaken your immune system within the past 3 months? (eg Prednisone etc)			No
Have you received any other vaccines in the last 4 weeks?			No
Are you or do you think you might be pregnant?			N/A
CONSENT GIVEN BY PATIENT			
<p>I, the undersigned client, parent or guardian, have read or had explained to me, information about the vaccine as outlined in the vaccine information sheets provided to me. I have had the chance to ask questions, and answers were given to my satisfaction. I understand the risks and benefits of receiving the vaccine. I agree to wait in the pharmacy for 15 minutes(or time recommended by the pharmacist) after getting the vaccine.</p> <p>I am aware that it is possible (yet rare) to have an extreme allergic reaction to any component of the vaccine. Some serious reactions called "anaphylaxis" can be life-threatening and is a medical emergency. If I experience such a reaction following vaccination, I am aware that it may require the administration of epinephrine, diphenhydramine, beta-agonists, and/or antihistamines to try to treat this reaction and that 9-1-1 will be called to provide additional assistance to the immunizer. The symptoms of an anaphylactic reaction may include hives, difficulty breathing, swelling of the tongue, throat, and/or lips.</p> <p>In the event of anaphylaxis, I will receive a copy of this form containing information on emergency treatments that I had received, or a copy will be provided to my agent or EMS paramedics.</p> <p><input type="checkbox"/> I confirm that I want to receive <u>Avaxim 160/0.5ml</u>.</p>			
Patient Test, Patient	Patient Signature	Date Signed 28-Aug-2017	
PHARMACIST DECLARATION I confirm the above named patient is capable of providing consent for <u>Avaxim 160/0.5ml</u> and that the <u>Avaxim 160/0.5ml</u> should be given to patient.			
Pharmacist Gary Deng (3687455)	Pharmacist Signature	Date Signed 28-Aug-2017	
Page 1 of 1			
			

17. After printing the report, the **'Scan Consent'** tab appears. The following 3 options become available if you have a document scanner:

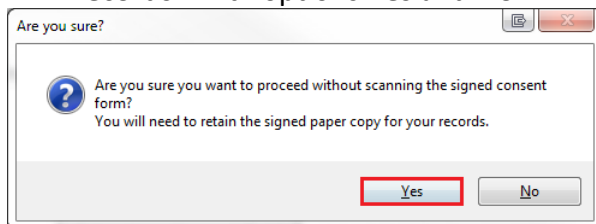
- **Scan Patient Consent Form:** Allows you to scan the patient consent form into the system.
- **Select from Network Scan:** If you have already scanned the signed consent form and the file is saved to the network, select this option to import the form.
- **Proceed without Scan:** Allows you to continue processing the immunization without importing the signed consent form. All consent forms can then be scanned at the end of the day using the [Document Scan Utility](#).



The following 3 options become available if do not have a document scanner:

- **Select from File:** If you have already scanned the signed consent form and the file is saved to a local directory, select this option to import the form.
- **Select from Network Scan:** If you have already scanned the signed consent form and the file is saved to the network, select this option to import the form.
- **Proceed without Scan:** Allows you to continue processing the immunization without importing the signed consent form. All consent forms can then be scanned at the end of the day using the [Document Scan Utility](#).

18. Click **Proceed without Scan**. Prompt **'Are you sure you want to proceed without scanning the signed consent form? You will need to retain the signed paper copy for your records.'** with options **Yes** and **No**.

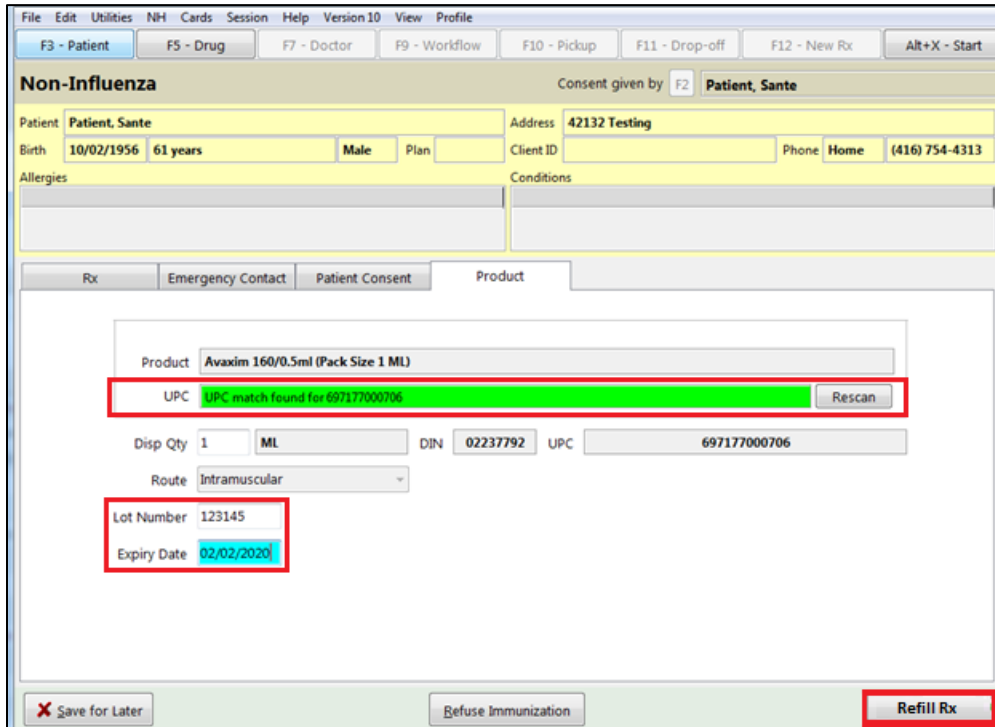


19. Click **Yes**. The **'Product'** tab appears.

Product

The product tab requires details of the product that will be administered, such as dispense quantity, Lot Number, and Expiry date, this section is used to submit and claim the Rx. To Fill in the product section:

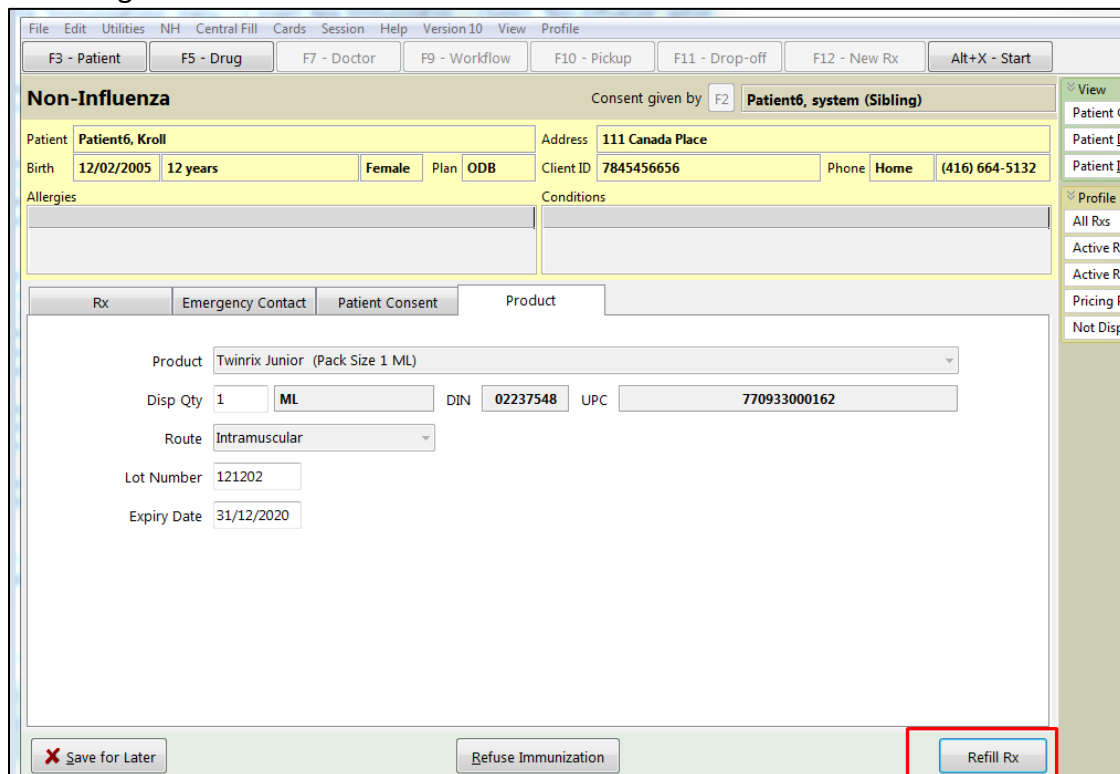
- If the **'Require UPC verification'** configuration setting is enabled, scan or enter the UPC from the drug pack. If a UPC match is found, product information will populate. The **'Refill Rx'** button is enabled.



The screenshot shows a software window titled 'Non-Influenza' with a menu bar (File, Edit, Utilities, NH, Cards, Session, Help, Version 10, View, Profile) and a toolbar with buttons for F3-Patient, F5-Drug, F7-Doctor, F9-Workflow, F10-Pickup, F11-Drop-off, F12-New Rx, and Alt+X-Start. The patient information section includes Patient Name (Patient, Sante), Address (42132 Testing), Birth (10/02/1956), Age (61 years), Sex (Male), and Phone (416) 754-4313. The 'Product' tab is active, showing the product name 'Avaxim 160/0.5ml (Pack Size 1 ML)', a highlighted UPC field with the text 'UPC match found for 697177000706', a 'Rescan' button, Disp Qty (1), ML, DIN (02237792), and Route (Intramuscular). The Lot Number (123145) and Expiry Date (02/02/2020) are also highlighted. At the bottom, there are buttons for 'Save for Later', 'Refuse Immunization', and 'Refill Rx'.

Note: You may need to manually enter the lot number and expiry date if this information is not stored in the product barcode.

- If the 'Require UPC verification' configuration setting is disabled, select a product from the list. Enter the 'Disp Qty', 'Lot Number', and 'Expiry Date' fields associated with the drug. The 'Refill Rx' button is enabled.



The screenshot shows a software interface for documenting immunizations. The main window is titled 'Non-Influenza' and contains the following information:

- Consent given by:** F2 Patient6, system (Sibling)
- Patient:** Patient6, Kroll
- Address:** 111 Canada Place
- Birth:** 12/02/2005, 12 years, Female, Plan ODB
- Client ID:** 7845456656
- Phone Home:** (416) 664-5132
- Allergies:** (Empty field)
- Conditions:** (Empty field)
- Rx Tab:** Selected
- Product:** Twinrix Junior (Pack Size 1 ML)
- Disp Qty:** 1 ML, DIN: 02237548, UPC: 770933000162
- Route:** Intramuscular
- Lot Number:** 121202
- Expiry Date:** 31/12/2020
- Buttons:** Save for Later, Refuse Immunization, and Refill Rx (highlighted with a red box).

Refill Rx

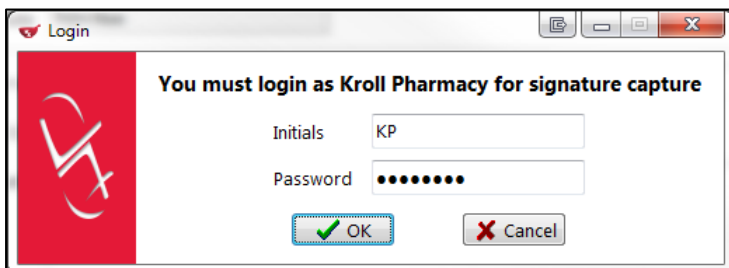
- Click **Refill Rx**. 'F12 –Fill Rx' screen appears. All fields are prepopulated with a value except the 'Initials' field.
- Input initials, and then click **F12**. 'Non-Influenza wizard' window displays with the 'Administration' tab opened.

Administration

The administration section will consist of information in regards to date of administration, site of administration on the body, and whether a service fee is charged. To fill in the Administration section:

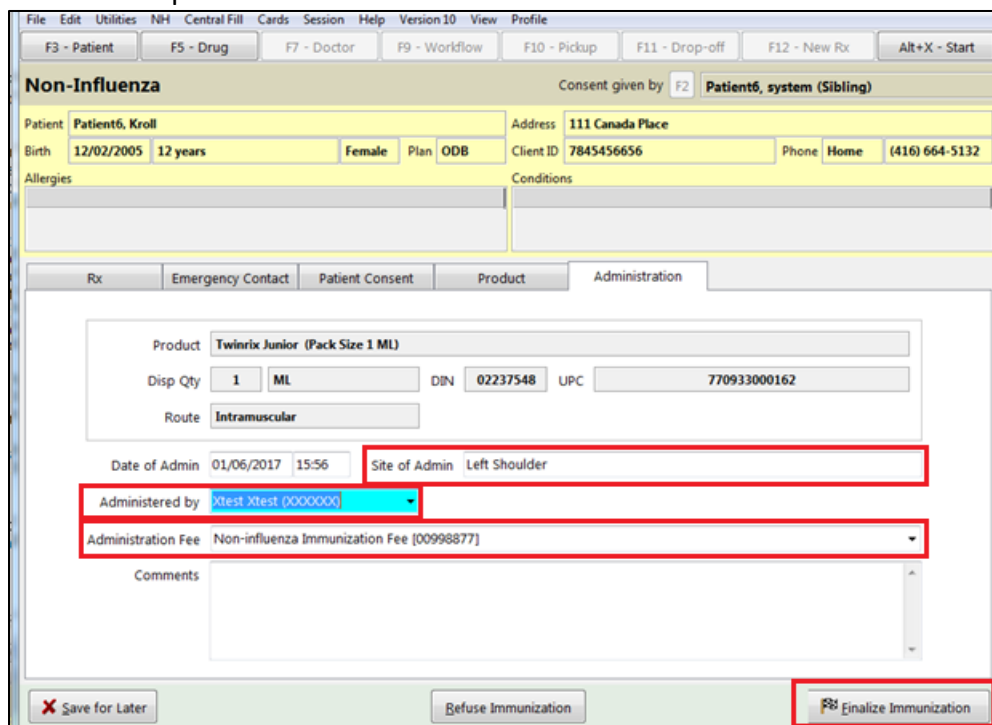
24. Enter the site of administration in the **Site of Admin** field (e.g., left arm, right thigh)
25. Select the pharmacist who administered the shot from the **Administered by** list.

Note: If the **Administered by** user is not the currently logged in user, the **Administered by** user will be required to enter their login credentials in order to proceed.



A login dialog box titled "Login" with a red Kroll logo on the left. The main text reads "You must login as Kroll Pharmacy for signature capture". There are two input fields: "Initials" with the value "KP" and "Password" with masked characters. At the bottom are "OK" and "Cancel" buttons.

26. On the **Administration Fee** drop down textbox, select whether or not to charge for the service provided. The '**Finalize Immunization**' button is enabled.



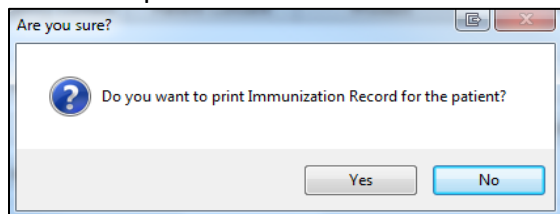
The screenshot shows the "Administration" tab of a software interface. The patient information is "Patient6, Kroll" with birth date "12/02/2005" and address "111 Canada Place". The product is "Twinrix Junior (Pack Size 1 ML)" with a quantity of "1 ML" and route of "Intramuscular". The date of administration is "01/06/2017 15:56" and the site is "Left Shoulder". The "Administered by" field is highlighted in red and shows a dropdown menu with "Xtest Xtest (000000)". The "Administration Fee" dropdown is also highlighted in red and shows "Non-influenza Immunization Fee [00998877]". At the bottom, the "Finalize Immunization" button is highlighted in red.

27. Enter any comments in the space provided (optional).
28. Click **Finalize Immunization**.

29. If you have electronic signatures enabled, the pharmacist will be prompted to sign the signature pad in order to proceed. Sign the signature pad and click **OK**.



30. Prompt '**Print Immunization Record**' with options **Yes** and **No**.



31. Click **Yes**. Record is printed. '**F12**' screen displays to bill the fee for service for non-influenza immunization.

Note: If **No** is clicked instead, record is not printed.

Billing Service Fee

Once Immunization is finalized and an Immunization record is printed, and Non-influenza Immunization service fee was selected in the Fee field on the Administration tab, the Immunization can be billed. To bill an Immunization:

32. Input mandatory fields.
33. Click **F12 – Fill Rx** or press **F12** on your keyboard. Fee is billed successfully and label is printed.
34. If structured workflow is activated the Rx will follow the workflow configuration that is dictated.

Note: if structured workflow is not activated, ‘**Immunization**’ screen displays with Immunization Rx status.

35. Complete all remaining workflow steps as required.
36. Click **Approve**. ‘**Workflow**’ screen closes and Patient card’s ‘**Immunization**’ screen appears. The Non-influenza has the following status: **Status = Completed, Product Status = Claimed** and **Fee Status = Claimed**.

Immunizations							
N - New Immunization		P - Print/Reprint		F - Claim Fee		C - Cancel Claim	
				<input type="checkbox"/> Show Reversals			
D - Pharmacist Declined				R - Patient Refused			
Items (1)							
#	Type	Status	Product Status	Fee Status	Created	Completed	
137	Non-Influenza	Completed	Claimed	Claimed	01/06/2017	20/07/2017	

Note: If **Free for service** was selected in the **Fee** field on the **Administration** tab. The ‘**Immunizations**’ screen displays the same as above, except **Fee status = No Fee Applicable**.

Scenario 4: Using a Product Obtained Externally

‘Use a product obtained externally’ displays in the Rx Options drop down menu if the vaccine Rx is obtained externally.

Store Level Configuration Parameters

General Patient Drug Doctor Rx FDB Adjudication Labels Reports Security Interfaces Order X - AR Y - To Do Purge

1 - General 2 - Pricing 3 - Prompting 4 - Nursing Home 5 - Background Rx Filling 6 - Workflow 7 - Counseling 8 - Immunization 9 - CeRx

Enable electronic immunizations

Require electronic signature for Pharmacists

Require UPC Verification of Vaccine Product

Allow to use non-influenza immunization products obtained externally

Allow to use non-influenza immunization Rx's dispensed 30 days ago

Enable this option only if the pharmacy is willing to administer the vaccine which was dispensed from another location

Rx obtained externally is defined in the following two situations:

- When a patient brings in an immunization Rx that was dispensed from another pharmacy.
- When a non-influenza immunization has more than one injection that needs to be taken by the patient. For example first injection on day 0, second injection on day 30, and third injection on day 60. If the second and third Immunization Rx were purchased and dispensed to the patient along with the first immunization. Then when the patient comes in with the second or third immunization they are treated as products obtained externally.

1. Call up a patient card using the **F3 - Patient** search.
2. On right navigation pane, under the **View** section, click **Immunizations**.

File Edit Recent Patient Profile Reports Utilities NH Central Fill Cards Session Help

F3 - Patient F5 - Drug F7 - Doctor F9 - Workflow F11 - Drop-off F12 - New Rx Alt+X - Start

Last Name Patient First Name Test Salutation Mr. OK Save Scan

Address 1 123 Any St Phone Numbers (1) Birthdate 01/01/1980

Address 2 Phone Description Phone Age 36 years

City Toronto Prov ON Home (123) 456-7890 Gender Male

Postal M1M 1M1 Country Canada Language English

Email Send Family Doctor Height Weight Load Delete

Quick Code Comments (0) ODB

Topic Comment Plans (1)

SubPlan Code	Group ID	Client ID	Expiry
1 ESI	01111	999999999	

Allergies (0) Add Drug F2 Ins Del

Medical Conditions (0) F2 Ins Del

General Family Nursing Home Copays Communications Other

Patient Active Alt. Last Name Consent Privacy Unknown

Patient Type Human Unit Dose Type <None>

Deceased On Cycle <None>

Prescriptions Delivery Type Default (Pickup) Price Group <Default> (<None>)

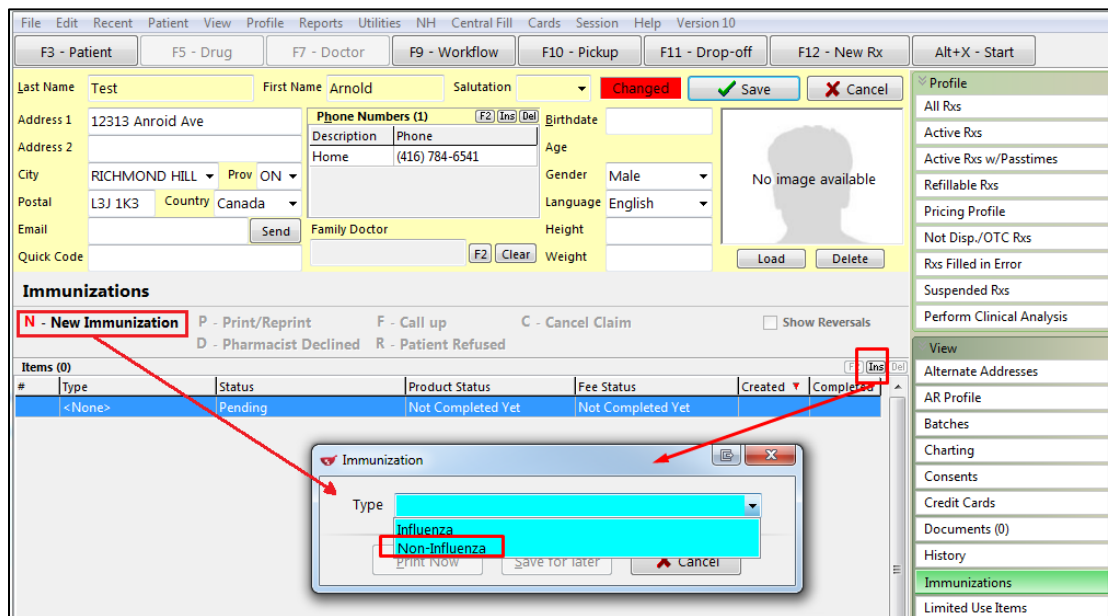
Delivery Route

Profile

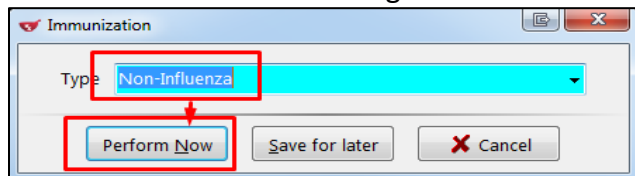
- All Rxs
- Active Rxs
- Active Rxs w/Passtimes
- Refillable Rxs
- Pricing Profile
- Not Disp./OTC Rxs
- Rxs Filled in Error
- Suspended Rxs
- Perform FDB Analysis
- View
- Alternate Addresses
- AR Profile
- Batches
- Charting
- Consents
- Credit Cards
- View Patient Documents (0)
- History
- Immunizations**
- Limited Use Items

‘Immunizations’ window appears.

3. Click **N - New Immunization** or click **Ins**.



4. On the **Type** drop down list, select **Non-Influenza** and then click **Perform Now**. Immunization wizard begins.



Note: If you want to add the immunization record to the Immunizations queue in order to complete the immunization form later, click **Save for Later**. ‘Immunization’ screen appears. The status of the Non-influenza immunization is as follows. You are brought back to ‘Immunization’ screen; The Non-influenza Immunization has the following status.

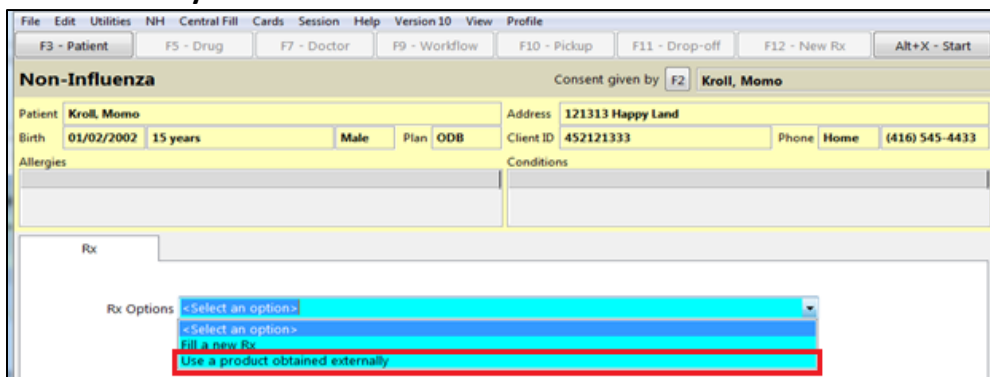
Immunizations							
N - New Immunization		P - Print/Reprint	F - Call up	C - Cancel Claim	<input type="checkbox"/> Show Reversals		
		D - Pharmacist Declined	R - Patient Refused				
Items (3)							
#	Type	Status	Product Status	Fee Status	Created	Completed	
65	Non-Influenza	Pending	Not Completed Yet	Not Completed Yet	25/07/2017		

See the [Completing Immunizations ‘Saved for Later’](#) section for more information.

Rx

The Rx section consists of whether the product was dispensed now or earlier, and whether it was dispense from the current pharmacy or externally, the name of the product, the pack size and UPC of the product. To fill in the Rx information:

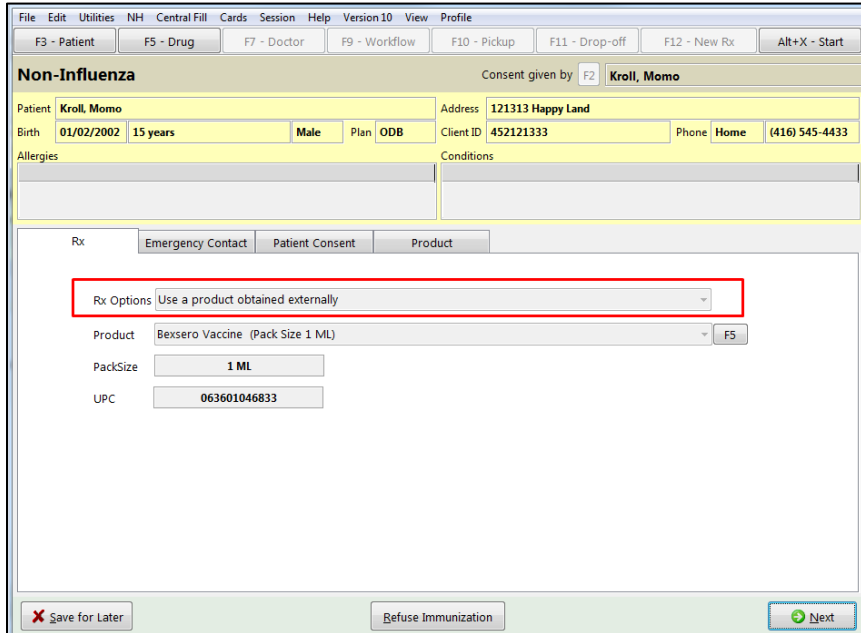
- On the **Rx** tab, click the **Rx Options** drop down textbox, and select **Use a product obtained externally**.



The screenshot shows the 'Non-Influenza' Rx tab. The 'Rx Options' dropdown menu is open, displaying three options: '<Select an option>', '<Select an option>', and 'Fill a new Rx'. The option 'Use a product obtained externally' is highlighted with a red box.

Product, Packsize, and UPC fields displays with blank fields.

- Select a product in the '**Product**' drop down textbox. The PackSize and UPC fields are automatically populated. The '**Next**' button is enabled.



The screenshot shows the 'Non-Influenza' Rx tab. The 'Rx Options' dropdown menu is now closed and displays 'Use a product obtained externally'. The 'Product' dropdown menu is populated with 'Bexsero Vaccine (Pack Size 1 ML)'. The 'PackSize' field is populated with '1 ML' and the 'UPC' field is populated with '063601046833'. The 'Next' button is enabled.

Note: The Option to press **F5** on the keyboard to view the Drug card and the details of the product, is also available, once viewed click **Close**, to return to the **Rx** tab.

- Click **Next**. '**Emergency contact**' tab appears.

Emergency Contact

The emergency contact is the person who will be contacted in the event of an emergency.

8. Search and select the emergency contact.
9. Specify the contact's **Relationship** to the patient and enter their phone number(s).

Note: If the patient has an emergency contact saved to the F3 - Patient card (**Other** tab), the contact's information prepopulates in the Emergency Contact fields and the '**Patient Consent**' tab appears.

If the patient has more than one emergency contact saved to the F3 - Patient card, select the desired contact from the list.

10. Click **Save to Patient**, to save the emergency contact to the **F3 - Patient** card. The emergency contact is inserted in the '**Other**' tab in the **F3 - Patient** card.

General	Family	Nursing Home	Copays	Communications	Other	Ctrl
Emergency Contacts (1)						F2 Ins Del
Name	Relationship	Daytime Phone	Other Phone			
Doe, Jane	Friend	(555) 555-5555 ext 1234	(777) 777-7777			

11. Click **Next**.

Note: A daytime phone number for the emergency contact is required to proceed.

12. Click **Next**. '**Patient Consent**' tab appears.

Patient Consent

The Patient Consent consists of questions that will determine whether the patient is eligible to get the injection. To fill in the Patient consent section:

13. Select the appropriate answer for each of the Patient Consent questions.
 - Some answers will not allow the patient to receive the immunization.
 For example, if the patient answers **Yes** to '**Are you sick today?**', he or she will be ineligible for immunization.
 - Some answers may present a note to the pharmacist.
 For example if the patient answers **Yes** to '**Are you allergic to latex gloves?**', a note displays instructing the pharmacist to not use latex products.

Note: For question Pharmacist - Will you be administering a Live Vaccine?

- a. If user clicks **Yes**, 4 additional questions display below for the patient to answer.
- b. If user clicks **No**, no additional questions display below.

2-(local):Pharmacy10-11-Patient - Patient, Green

File Edit Utilities NH Central Fill Cards Session Help Version 10 View Profile

F3 - Patient F5 - Drug F7 - Doctor F9 - Workflow F10 - Pickup F11 - Drop-off F12 - New Rx Alt+X - Start

Non-Influenza Consent given by F2 Patient, Green

Patient Patient, Green Address 1231 Mitel Blvd

Birth 01/02/1958 59 years Female Plan Client ID Phone Home (416) 756-4653

Allergies Conditions

Rx Emergency Contact Patient Consent

Do you have an allergy to kanamycin, neomycin, gentamicin, thimerosal, chicken protein, polymixin or gelatin? No

Have you ever had a severe, life threatening reaction to a past vaccination? No

Have you had wheezing, chest tightness or difficulty breathing within 24 hours of getting a vaccine? No

Are you allergic to latex gloves? No

Have you had Guillain-Barre Syndrome within 6 weeks of getting a vaccine? No

Do you have a new or changing neurological disorder? No

Do you take a blood thinner or have a bleeding disorder? No

Pharmacist-Will you be administering a Live Vaccine? **Yes**

Do you have a medical condition that can weaken your immune system? (eg. Leukemia, Lymphoma, HIV/AIDS) <Not Answered>

Are you taking any medications that can weaken your immune system within the past 3 months? (eg Prednisone) <Not Answered>

Have you received any other vaccines in the last 4 weeks? <Not Answered>

Are you or do you think you might be pregnant? <Not Answered>

Save for Later Refuse Immunization Print Consent

2-(local):Pharmacy10-11-Patient - Patient, Green

File Edit Utilities NH Central Fill Cards Session Help Version 10 View Profile

F3 - Patient F5 - Drug F7 - Doctor F9 - Workflow F10 - Pickup F11 - Drop-off F12 - New Rx Alt+X - Start

Non-Influenza Consent given by F2 Patient, Green

Patient Patient, Green Address 1231 Mitel Blvd

Birth 01/02/1958 59 years Female Plan Client ID Phone Home (416) 756-4653

Allergies Conditions

Rx Emergency Contact Patient Consent

Are you sick today? (i.e. fever greater than 39.5°C, breathing problems, or active infection) No

Are you allergic to any medications including vaccines? No

Do you have an allergy to kanamycin, neomycin, gentamicin, thimerosal, chicken protein, polymixin or gelatin? No

Have you ever had a severe, life threatening reaction to a past vaccination? No

Have you had wheezing, chest tightness or difficulty breathing within 24 hours of getting a vaccine? No

Are you allergic to latex gloves? No

Have you had Guillain-Barre Syndrome within 6 weeks of getting a vaccine? No

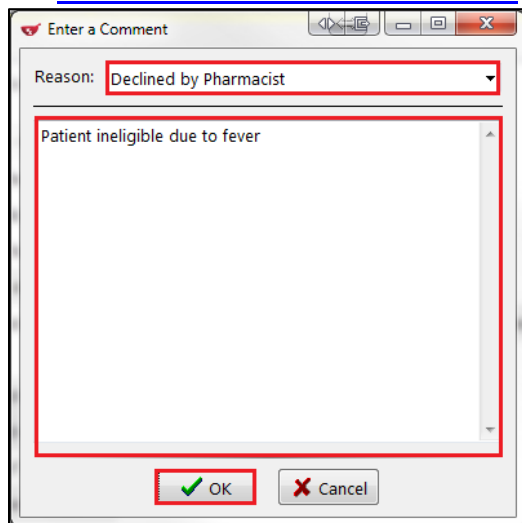
Do you have a new or changing neurological disorder? No

Do you take a blood thinner or have a bleeding disorder? No

Pharmacist-Will you be administering a Live Vaccine? **No**

Save for Later Refuse Immunization Print Consent

If the system determines the patient is ineligible for immunization, all consent questions will become read-only. Click **Refuse Immunization** and complete the **Enter a Comment** form. See the [Declined or Refused Immunizations](#) section for more information.



Enter a Comment

Reason: Declined by Pharmacist

Patient ineligible due to fever

OK Cancel

14. Once the patient has answered each of the Patient Consent questions and the pharmacist has determined the patient is eligible for immunization, click **Print Consent**. The **'Immunization Report'** window appears.

Note: All questions must be answered in order to proceed.

15. Click **Print Consent**. The ‘**Immunization Report**’ window appears. The **Non-Influenza Consent Form** prints. This form shows each of the Patient Consent questions and their answers for the patient to review.

If **No** is answered to the question **Pharmacist-Will you be administering a Live Vaccine?**, then the following Consent form is printed.

Non-Influenza Vaccine Consent Form
 Wendell's Pharmacy, 220 Duncan Mill Road, ddf33 AB 33333333

PATIENT INFORMATION TRACKING #: 647

First Name Patient	Last Name Test	Gender M	DOB 02-Feb-1999	Weight
Address 220 Finch Ave. East, Toronto ON M2J 2T9		Health Card #		Phone Number (416) 555-5555
Emergency Contact De Gary	Relationship to Patient Spouse	Contact's Phone Number (222) 222-2222		Contact's Other Phone Number

SCREENING QUESTIONNAIRE

The following questions will help us determine if there is any reason you or your child should not get the vaccine today. If you answer "yes" to any question, it does not necessarily mean the shot cannot be given. It simply means additional questions must be asked. If a question is not clear, please ask your pharmacist to explain it.

Are you sick today? (i.e. fever greater than 38.5°C, breathing problems, or active infection)	No
Are you allergic to any medications including vaccines?	No
Do you have an allergy to kanamycin, neomycin, gentamicin, thimerosal, chicken protein, polymixin or gelatin?	No
Have you ever had a severe, life threatening reaction to a past vaccination?	No
Have you had wheezing, chest tightness or difficulty breathing within 24 hours of getting a vaccine?	No
Are you allergic to latex gloves?	No
Have you had Guillain-Barre Syndrome within 6 weeks of getting a vaccine?	No
Do you have a new or changing neurological disorder?	No
Do you take a blood thinner or have a bleeding disorder?	No
Pharmacist-Will you be administering a Live Vaccine?	No

CONSENT GIVEN BY PATIENT

I, the undersigned client, parent or guardian, have read or had explained to me, information about the vaccine as outlined in the vaccine information sheets provided to me. I have had the chance to ask questions, and answers were given to my satisfaction. I understand the risks and benefits of receiving the vaccine. I agree to wait in the pharmacy for 15 minutes(or time recommended by the pharmacist) after getting the vaccine.

I am aware that it is possible (yet rare) to have an extreme allergic reaction to any component of the vaccine. Some serious reactions called "anaphylaxis" can be life-threatening and is a medical emergency. If I experience such a reaction following vaccination, I am aware that it may require the administration of epinephrine, diphenhydramine, beta-agonists, and/or antihistamines to try to treat this reaction and that 9-1-1 will be called to provide additional assistance to the immunizer. The symptoms of an anaphylactic reaction may include hives, difficulty breathing, swelling of the tongue, throat, and/or lips.


In the event of anaphylaxis, I will receive a copy of this form containing information on emergency treatments that I had received, or a copy will be provided to my agent or EMS paramedics.

I confirm that I want to receive Avaxim 160/0.5ml.

Patient Test, Patient	Patient Signature	Date Signed 28-Aug-2017
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PHARMACIST DECLARATION I confirm the above named patient is capable of providing consent for Avaxim 160/0.5ml and that the Avaxim 160/0.5ml should be given to patient.

Pharmacist Gary Deng (3687455)	Pharmacist Signature	Date Signed 28-Aug-2017
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Page 1 of 1

If **Yes** is answered to the question **Pharmacist-Will you be administering a Live Vaccine?**, then the following Consent form is printed.

Non-Influenza Vaccine Consent Form
 Wendell's Pharmacy, 220 Duncan Mill Road, ddf33 AB 33333333

TRACKING #: 647

First Name Patient	Last Name Test	Gender M	DOB 02-Feb-1999	Weight
Address 220 Finch Ave. East, Toronto ON M2J 2T9		Health Card #		Phone Number (416) 555-5555
Emergency Contact De Gary	Relationship to Patient Spouse	Contact's Phone Number (222) 222-2222		Contact's Other Phone Number

SCREENING QUESTIONNAIRE

The following questions will help us determine if there is any reason you or your child should not get the vaccine today. If you answer "yes" to any question, it does not necessarily mean the shot cannot be given. It simply means additional questions must be asked. If a question is not clear, please ask your pharmacist to explain it.

Are you sick today? (i.e. fever greater than 39.5°C, breathing problems, or active infection)	No
Are you allergic to any medications including vaccines?	No
Do you have an allergy to kanamycin, neomycin, gentamicin, thimerosal, chicken protein, polymixin or gelatin?	No
Have you ever had a severe, life threatening reaction to a past vaccination?	No
Have you had wheezing, chest tightness or difficulty breathing within 24 hours of getting a vaccine?	No
Are you allergic to latex gloves?	No
Have you had Guillain-Barre Syndrome within 6 weeks of getting a vaccine?	No
Do you have a new or changing neurological disorder?	No
Do you take a blood thinner or have a bleeding disorder?	No
Pharmacist-Will you be administering a Live Vaccine?	Yes
Do you have a medical condition that can weaken your immune system? (eg. Leukemia, Lymphoma, HIV/AIDS)	No
Are you taking any medications that can weaken your immune system within the past 3 months? (eg Prednisone etc)	No
Have you received any other vaccines in the last 4 weeks?	No
Are you or do you think you might be pregnant?	N/A

CONSENT GIVEN BY PATIENT

I, the undersigned client, parent or guardian, have read or had explained to me, information about the vaccine as outlined in the vaccine information sheets provided to me. I have had the chance to ask questions, and answers were given to my satisfaction. I understand the risks and benefits of receiving the vaccine. I agree to wait in the pharmacy for 15 minutes(or time recommended by the pharmacist) after getting the vaccine.

I am aware that it is possible (yet rare) to have an extreme allergic reaction to any component of the vaccine. Some serious reactions called "anaphylaxis" can be life-threatening and is a medical emergency. If I experience such a reaction following vaccination, I am aware that it may require the administration of epinephrine, diphenhydramine, beta-agonists, and/or antihistamines to try to treat this reaction and that 9-1-1 will be called to provide additional assistance to the immunizer. The symptoms of an anaphylactic reaction may include hives, difficulty breathing, swelling of the tongue, throat, and/or lips.


In the event of anaphylaxis, I will receive a copy of this form containing information on emergency treatments that I had received, or a copy will be provided to my agent or EMS paramedics.

I confirm that I want to receive Avaxim 160/0.5ml.

Patient Test, Patient	Patient Signature	Date Signed 28-Aug-2017
---------------------------------	--------------------------	-----------------------------------

PHARMACIST DECLARATION I confirm the above named patient is capable of providing consent for Avaxim 160/0.5ml and that the Avaxim 160/0.5ml should be given to patient.

Pharmacist Gary Deng (3687455)	Pharmacist Signature	Date Signed 28-Aug-2017
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Page 1 of 1

16. After printing the report, the **'Scan Consent'** tab appears. The following 3 options become available if you have a document scanner:

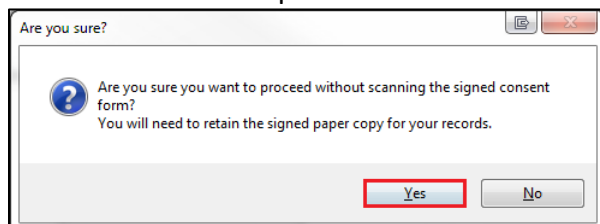
- **Scan Patient Consent Form:** Allows you to scan the patient consent form into the system.
- **Select from Network Scan:** If you have already scanned the signed consent form and the file is saved to the network, select this option to import the form.
- **Proceed without Scan:** Allows you to continue processing the immunization without importing the signed consent form. All consent forms can then be scanned at the end of the day using the [Document Scan Utility](#).



The following 3 options become available if do not have a document scanner:

- **Select from File:** If you have already scanned the signed consent form and the file is saved to a local directory, select this option to import the form.
- **Select from Network Scan:** If you have already scanned the signed consent form and the file is saved to the network, select this option to import the form.
- **Proceed without Scan:** Allows you to continue processing the immunization without importing the signed consent form. All consent forms can then be scanned at the end of the day using the [Document Scan Utility](#).

17. Click **Proceed without Scan**. Prompt **'Are you sure you want to proceed without scanning the signed consent form? You will need to retain the signed paper copy for your records.'** with options **Yes** and **No**.

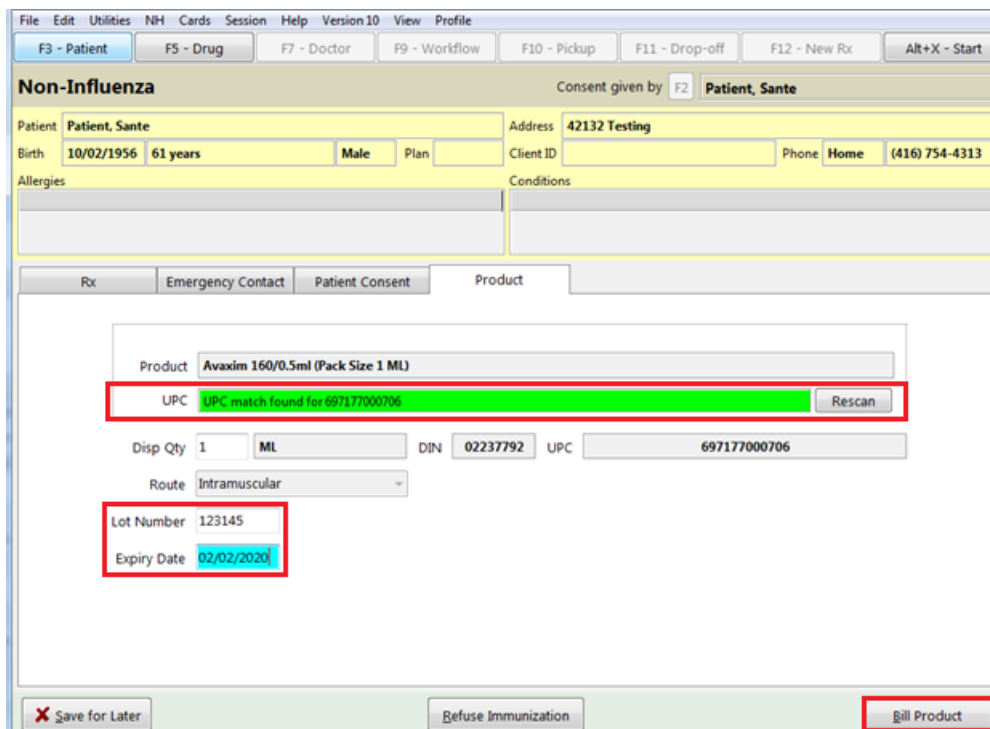


18. Click **Yes**. The **'Product'** tab appears.

Product

The product tab requires details of the product that will be administered, such as dispense quantity, Lot Number, and Expiry date, this section is used to submit and claim the Rx. To Fill in the product section:

19. If the **'Require UPC verification'** configuration setting is enabled, scan or enter the UPC from the drug pack. If a UPC match is found, product information will populate. The **'Bill Product'** button is enabled.



The screenshot shows the 'Non-Influenza' software interface. At the top, there are menu options like 'File', 'Edit', 'Utilities', etc. Below that, there are tabs for 'F3 - Patient', 'F5 - Drug', 'F7 - Doctor', etc. The main area is titled 'Non-Influenza' and shows patient information for 'Patient, Sante'. The 'Product' tab is selected, showing a dropdown for 'Avaxim 160/0.5ml (Pack Size 1 ML)'. Below this, the 'UPC' field is highlighted with a red box and contains the text 'UPC match found for 697177000706'. Other fields include 'Disp Qty' (1), 'ML', 'DIN' (02237792), 'Route' (Intramuscular), 'Lot Number' (123145), and 'Expiry Date' (02/02/2020). At the bottom, there are buttons for 'Save for Later', 'Refuse Immunization', and 'Bill Product'.

Note: You may need to manually enter the lot number and expiry date if this information is not stored in the product barcode.

20. If the 'Require UPC verification' configuration setting is disabled, select a product from the list. Enter the 'Disp Qty', 'Lot Number', and 'Expiry Date' fields associated with the drug. The 'Bill Product' button is enabled.

The screenshot displays a medical software interface for documenting a non-influenza immunization. The interface includes a menu bar at the top with options like 'File', 'Edit', 'Utilities', 'NH', 'Central Fill', 'Cards', 'Session', 'Help', 'Version 10', 'View', and 'Profile'. Below the menu bar, there are several tabs: 'F3 - Patient', 'F5 - Drug', 'F7 - Doctor', 'F9 - Workflow', 'F10 - Pickup', 'F11 - Drop-off', 'F12 - New Rx', and 'Alt+X - Start'. The main area is titled 'Non-Influenza' and shows patient information for 'Kroll, Momo' with a consent form. The patient's address is '121313 Happy Land'. The birth date is '01/02/2002', age is '15 years', gender is 'Male', and plan is 'ODB'. The client ID is '452121333' and the phone number is '(416) 545-4433'. The interface also shows a 'Product' tab with a dropdown menu for 'Bexsero Vaccine (Pack Size 1 ML)'. The 'Disp Qty' is '1 ML', 'DIN' is '02417030', and 'UPC' is '063601046833'. The 'Route' is 'Intramuscular'. The 'Lot Number' is '121312' and the 'Expiry Date' is '20/02/2018'. At the bottom, there are three buttons: 'Save for Later', 'Refuse Immunization', and 'Bill Product', with the 'Bill Product' button highlighted by a red box.

Not billing product

The product is not billed since the patient is bringing in the product.

21. Click **Bill Product**. 'F12 – Fill Rx' screen appears.

22. Fill in all mandatory fields.

23. On the right navigation pane, in the 'Rx' section, click **Make Rx Not Dispensed**.

The screenshot displays the 'F12 - Fill Rx' window. At the top, there are navigation buttons: F3 - Patient, F5 - Drug, F7 - Doctor, F9 - Workflow, F10 - Pickup, F11 - Drop-off, F12 - Fill Rx, and Alt+X - Start. Below these are buttons for 'New Rx' and 'Not Disp.' (highlighted in red). The main interface is divided into several sections: Patient Search (Name: Kroll, Momo, Age: 15, Male), Drug Search (Brand: Bexsero Vaccine, Pack: 1 Form ML, Sched 2), and Doctor Search (Name: Dr. Cheung, Christina, Address: 200 Duncan Mills, City: TORONTO, Prov: ON). A right-hand navigation pane contains various options, with 'Make Rx Not Dispensed' highlighted in red. The bottom section shows 'Unit Dose (Ctrl-U): Disabled' and a 'Warnings' area with three items: 'No Initials', 'Rx is Not Dispensed', and 'To Do: Non-Influenza'.

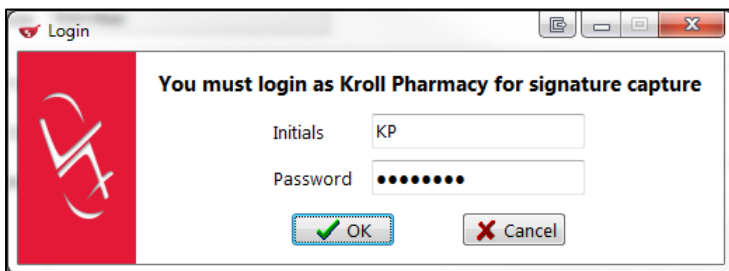
24. Click **F12 – Fill Rx** or press **F12** on your keyboard. The Rx is submitted successfully. You are brought back to the Non-influenza wizard, and the '**Administration**' tab appears.

Administration

The administration section will consist of information in regards to date of administration, site of administration on the body, and whether a service fee is charged. To fill in the Administration section:

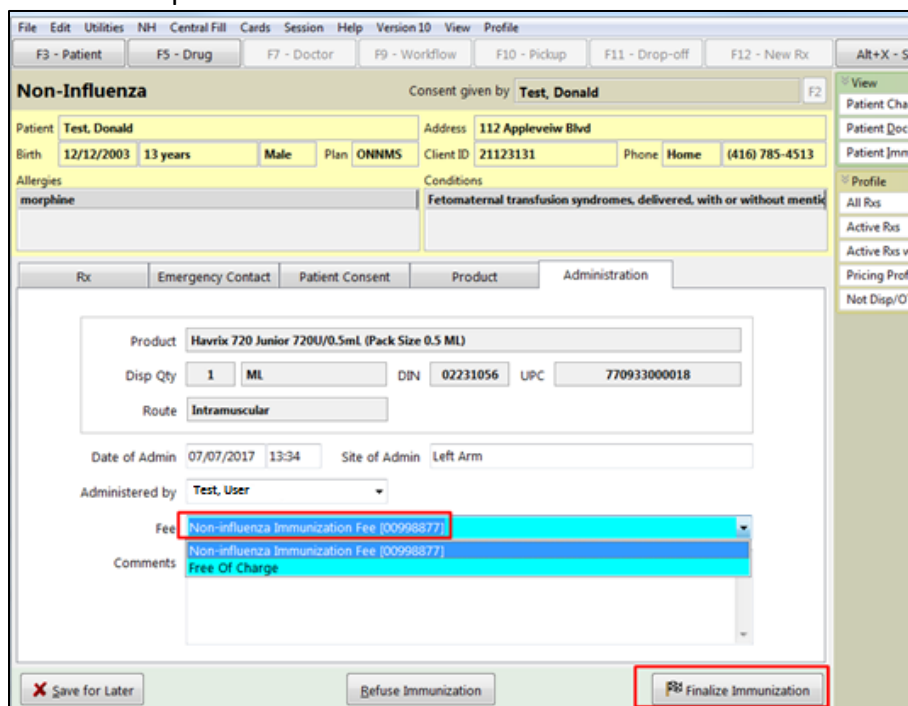
25. Enter the site of administration in the **Site of Admin** field (e.g., left arm, right thigh)
26. Select the pharmacist who administered the shot from the **Administered by** list.

Note: If the **Administered by** user is not the currently logged in user, the **Administered by** user will be required to enter their login credentials in order to proceed.



A login dialog box titled "Login" with a red header and the Kroll logo. The main text reads "You must login as Kroll Pharmacy for signature capture". There are two input fields: "Initials" with the value "KP" and "Password" with masked characters. Below the fields are "OK" and "Cancel" buttons.

27. On the **Administration Fee** drop down textbox, select whether or not to charge for the service provided. The **'Finalize Immunization'** button is enabled.



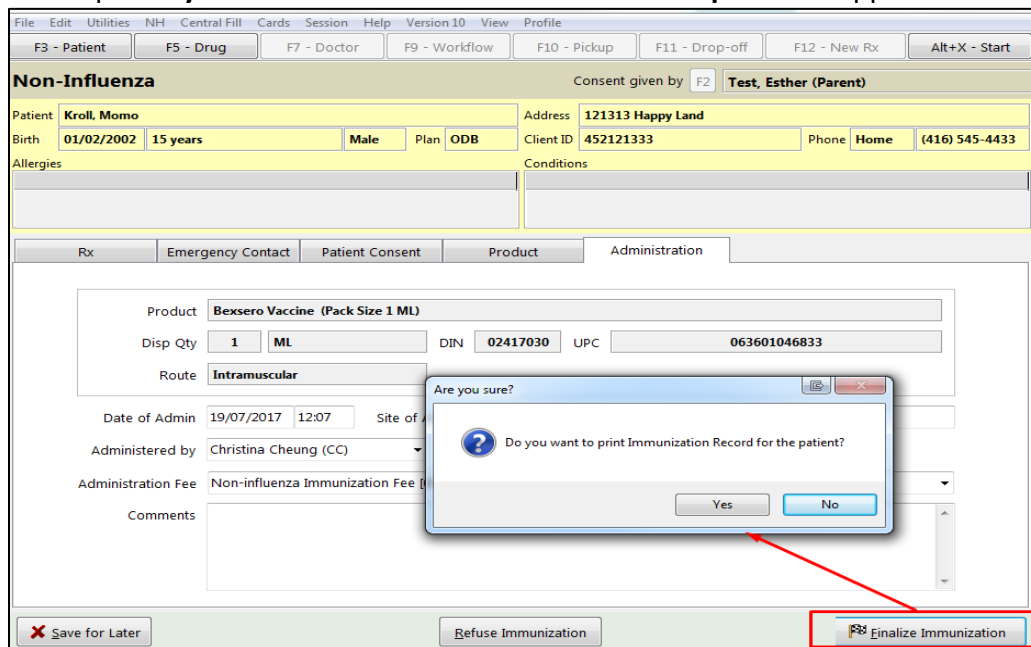
A screenshot of a software interface for documenting immunization. The "Administration" tab is active. It shows product details for "Havrix 720 Junior 720U/0.5mL (Pack Size 0.5 ML)", route "Intramuscular", and date "07/07/2017 13:34". The "Administered by" field is set to "Test, User". The "Fee" dropdown menu is open, showing "Non-influenza Immunization Fee [00998877]" selected. The "Comments" field contains "Free Of Charge". At the bottom, the "Finalize Immunization" button is highlighted with a red box.

28. Enter any comments in the space provided (optional).
29. Click **Finalize Immunization**.

30. If you have electronic signatures enabled, the pharmacist will be prompted to sign the signature pad in order to proceed. Sign the signature pad and click **OK**.



Prompt 'Do you want to Print Immunization for the patient?' appears.



31. Click **Yes**. Record is printed. 'F12' screen appears.

Note: If **No** is clicked instead, record is not printed.

Billing Service Fee

Once Immunization is finalized and an Immunization record is printed, and Non-influenza Immunization service fee was selected in the Fee field on the Administration tab, the Immunization can be billed. To bill an Immunization:

32. Input mandatory fields.
33. Click **F12 – Fill Rx** or press **F12** on your keyboard. Fee is billed successfully and label is printed.
34. If structured workflow is activated the Rx will follow the workflow configuration that is dictated.

Note: if structured workflow is not activated, ‘**Immunization**’ screen displays with Immunization Rx status.

35. Complete all remaining workflow steps as required.
36. Click **Approve**. ‘**Workflow**’ screen closes and Patient card’s ‘**Immunization**’ screen appears. The Non-influenza has the following status: **Status = Completed, Product Status = External and Fee Status = Claimed**.

Immunizations							
N - New Immunization		P - Print/Reprint		F - Claim Fee		C - Cancel Claim	
				<input type="checkbox"/> Show Reversals			
D - Pharmacist Declined				R - Patient Refused			
Items (2)							
#	Type	Status	Product Status	Fee Status	Created	Completed	
131	Non-Influenza	Completed	External	Claimed	19/07/2017	19/07/2017	
78	Non-Influenza	Completed	External	No Fee Applicable	12/07/2017	12/07/2017	

Note: If **Free for service** was selected in the **Fee** field on the **Administration** tab. The ‘**Immunizations**’ screen displays the same as above, except **Fee status = No Fee Applicable**.

Immunizations							
N - New Immunization		P - Print/Reprint		F - Claim Fee		C - Cancel Claim	
				<input type="checkbox"/> Show Reversals			
D - Pharmacist Declined				R - Patient Refused			
Items (2)							
#	Type	Status	Product Status	Fee Status	Created	Completed	
131	Non-Influenza	Completed	External	Claimed	19/07/2017	19/07/2017	
78	Non-Influenza	Completed	External	No Fee Applicable	12/07/2017	12/07/2017	

Completing Immunizations ‘Saved for Later’

Immunization records that have been ‘saved for later’ can be accessed either via the **F3 - Patient** card or the **F9 - Workflow** card.

1. Call up the patient using the **F3 - Patient** search or select **F9 - Workflow**.
2. On right navigation pane, under the **View** section, click **Immunizations**.
3. Select the immunization record you want to complete and click **F - Call up**.

Immunizations						
N - New Immunization		P - Print/Reprint		F - Call up	C - Cancel Claim	
		D - Pharmacist Declined		R - Patient Refused		<input type="checkbox"/> Show Reversals
Items (5)						
#	Type	Status	Product Status	Fee Status	Created	Completed
67	Non-Influenza	Pending	Not Completed Yet	Not Completed Yet	25/07/2017	

Note: For Scenario 1, 2, and 3 complete steps starting from ‘Rx’ to the end of ‘Billing an Immunization’ of the Electronic Mode section.

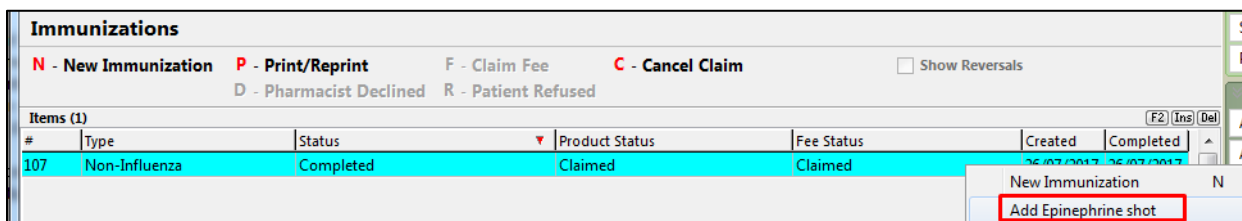
For Scenario 4 complete steps starting from ‘Rx’ to the end of ‘Administration’ of the Electronic Mode section.

Recording Emergency Epinephrine Shots

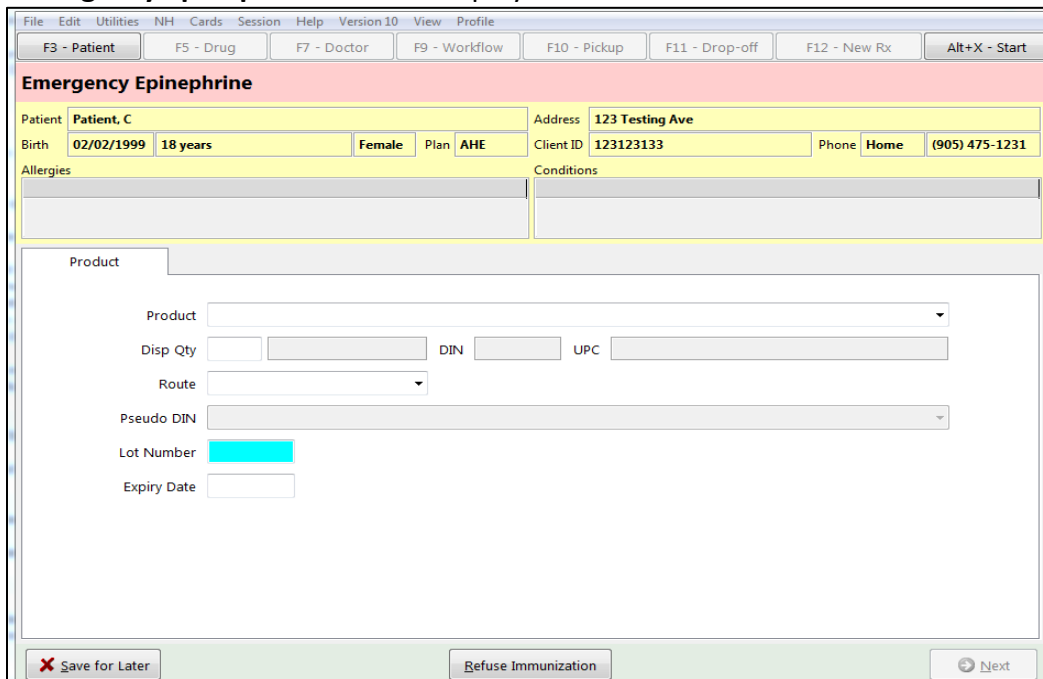
An emergency Epinephrine shot may need to be administered if the patient has a reaction to the immunization. This section explains how to add Emergency Epinephrine shot records to an immunization record.

Note: Emergency Epinephrine shots can only be added to immunization records that have a status of **Completed**.

1. Call up a patient using the **F3 - Patient** search.
2. On right navigation pane, under the **View** section, click **Immunizations**.
3. Right-click a completed immunization record and select **Add Epinephrine shot**.



'Emergency Epinephrine' screen displays on the 'Product' tab.



Product

- If the **'Require UPC verification'** configuration setting is enabled, scan or enter the UPC from the drug pack. If a UPC match is found, product information will populate.

You may need to manually enter the lot number and expiry date if this information is not stored in the product barcode.

File Edit Utilities NH Central Fill Cards Session Help View Profile

F3 - Patient F5 - Drug F7 - Doctor F9 - Workflow F11 - Drop-off F12 - New Rx Alt+X - Start

Emergency Epinephrine

Patient **Patient, Test** Address **100 Any St**

Birth Male Plan Client ID Phone Home (123) 456-7890

Allergies Conditions

Product Administration

Please scan or enter the UPC from the drug pack

UPC Lookup **UPC match found for 625813001213**

Product **EpiPen 1mg/ml (Pack Size 1 PEN)**

Disp Qty 1.00 PEN DIN 00509558 UPC 625813001213

Route Injection

Lot Number 333

Expiry Date 01/01/2020

Save for Later Refuse Immunization Next

If the 'Require UPC verification' configuration setting is disabled, select a product from the list. Enter the **Lot Number** and **Expiry Date** associated with the drug.

The screenshot shows a software interface for documenting an immunization. At the top, there is a menu bar with options like 'File', 'Edit', 'Utilities', 'NH', 'Central Fill', 'Cards', 'Session', 'Help', 'View', and 'Profile'. Below the menu is a navigation bar with buttons for 'F3 - Patient', 'F5 - Drug', 'F7 - Doctor', 'F9 - Workflow', 'F11 - Drop-off', 'F12 - New Rx', and 'Alt+X - Start'. The main title of the form is 'Emergency Epinephrine'. The form is divided into several sections: 'Patient' (Name: Patient, Test; Address: 100 Any St), 'Birth' (Gender: Male; Plan:), 'Client ID', and 'Phone Home' ((123) 456-7890). There are also sections for 'Allergies' and 'Conditions'. The 'Product' section is highlighted with a red box and contains the following information: Product: Epipen 1mg/ml (Pack Size 1 PEN), Disp Qty: 1.00, Disp Type: PEN, DIN: 00509558, UPC: 625813001213, Route: Injection, Lot Number: 333, and Expiry Date: 01/01/2020. At the bottom of the form, there are three buttons: 'Save for Later' (with a red X), 'Refuse Immunization', and 'Next' (with a green arrow and highlighted with a red box).

5. Click **Next**. The 'Administration' tab appears.

Administration

6. Enter the site of administration in the **Site of Admin** field (e.g., left arm, right thigh).
7. Select the pharmacist who administered the shot from the **Administered by** list.
8. Enter any comments in the space provided (optional).

Emergency Epinephrine

Patient: Patient, Test Address: 123 Any St

Birth: 01/01/1980 36 years Male Plan: Client ID: Phone: Home (123) 456-7890

Allergies: Conditions:

Product: Administration

Product: Epipen 1mg/mL (Pack Size 1 PEN)

Disp Qty: 1.00 PEN DIN: 00509558 UPC: 625813001213

Route: Injection

Date of Admin: 18/10/2016 13:29 Site of Admin: Left Leg

Administered by: Kroll Pharmacy (KRL)

Comments: N/A

Buttons: Save for Later, Refuse Immunization, Finalize Immunization

9. Click **Finalize Immunization**. 'F12' screen appears.

File Edit Recent Rx View Labels Profile Reports Utilities NH Cards Session Help Version 10

F3 - Patient F5 - Drug F7 - Doctor F9 - Workflow F10 - Pickup F11 - Drop-off F12 - Fill Rx Alt+X - Start

New Rx Pending Adj Rx Start Date: 26/07/2017 0 Latest Fill: Qty: Init: Lookup Cancel

Priority: Default Wait Time F2 Due: in 19 mins Forward Rx: F2 Work Order: 1551 F2 Delivery: Pickup

Patient Search: Name: Patient, C Age: 18 Female Address: 123 Testing Ave City: RICHMOND HILL Phone: Home (905) 475-1231 Plan: AHE Client ID: 123123133

Drug Search: 1 Pack: Brand: Epipen 1mg/ml Generic: Epinephrine ALX (Alle) Pack: 1 Form PEN Sched 2 Purch: \$92.07 On-Hand: -2 DIN: 00509558 Min Qty: 0

Dgc Search: Loc: Office Name: Dr. Kroll, Avery Address: Testing City: TORONTO Phone: (416) 784-6546 Lic#: 201703

Allergies (0) Conditions (0)

Sig: Emergency Epinephrine EMERGENCY EPINEPHRINE

Route of Admin: Intramuscular Dosage Form: Auto-Injector (each)

Init: CC Auth Qty: 1 1 Disp Qty: 1 Refills(+): Rem Qty: 1 1 Days: 1 G.P. %: 17.63 Prod Sel: 3 - Pharmacist Acq Cost: \$92.07 O/W: Written Cost: \$92.07 Labels: 1 F2 Markup: \$9.21 Fee: \$10.49 Total: \$111.77

Unit Dose (Ctrl-U): Disabled

Warnings:

- ⚠ Not enough inventory for Rx
- ⚠ Drug Cost (Purchase) hasn't been updated in 498 days
- 📌 To Do: Emergency Epinephrine
- 📌 Drug will be Ordered
- 📌 Delivery Label will be printed

Billing Product

10. Input mandatory fields.

Note: If the user who performed the immunization has an **F7 - Doctor** record with a 'Pharmacist' designation, that user's information will populate in the doctor section of the **F12** screen.

If the user does not have an **F7 - Doctor** record or if the immunization was performed by a different user, the **F7 - Doctor** search form will appear. Perform a doctor search to locate the pharmacist to use as the prescriber.

11. A claim for the treatment will populate in the **F12** screen. Enter a **Disp Qty** of '1' to represent the number of administered treatments.

12. Click **F12 - Fill Rx** or press **F12** on your keyboard. The claim will be transmitted to the appropriate party for payment and label is printed.

#	Type	Status	Product Status	Fee Status	Created	Completed
6-1	Emergency Epinephrine	Completed	Claimed	No Fee Applicable	29/08/2016	29/08/2016

13. Complete all remaining workflow steps as required.

14. A record of the emergency Epinephrine show will be added to the **Immunizations** list with a **Status** of 'Completed' and a **Product Status** of 'Claimed'.

Immunizations						
N - New Immunization		P - Print/Reprint		F - Claim Fee		C - Cancel Claim
		D - Pharmacist Declined		R - Patient Refused		<input type="checkbox"/> Show Reversals
Items (6)						
#	Type	Status	Product Status	Fee Status	Created	Completed
6-1	Emergency Epinephrine	Completed	Claimed	No Fee Applicable	29/08/2016	29/08/2016

Note: Repeat these steps for each Emergency Epinephrine shot that is administered to the patient.

Reprinting an Immunization Record

This section explains the process for reprinting immunization records. Immunizations can be reprinted either via the **F3 - Patient** card or the **F9 - Workflow** card.

On the **F3-Patient** card and **F9 – Workflow** card, the immunization record can be reprinted:

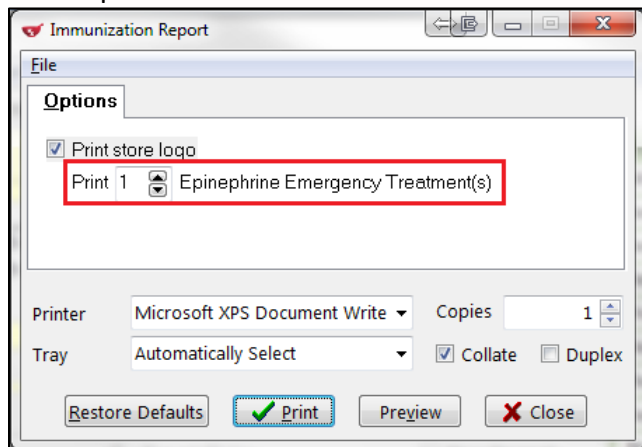
- If the **Status** is either **Printed Consent** or **Signed Consent**, the Product status and Fee status does not affect being able to reprint the immunization record.

Note: for **F9 – Workflow** card if both **Product status** and **Fee status** are both ‘**Complete**’, the immunization record does not appear.

1. Call up the patient using the **F3 Patient** search, or select **F9 - Workflow**.
2. On right navigation pane, under the **View** section, click **Immunizations**.
3. Select the appropriate immunization record and click **P - Print/Reprint**. The ‘**Immunization Report**’ window appears.

Immunizations							
N - New Immunization		P - Print/Reprint		F - Claim Fee		C - Cancel Claim	
						<input type="checkbox"/> Show Reversals	
D - Pharmacist Declined				R - Patient Refused			
Items (7)							
#	Type	Status	Product Status	Fee Status	Created	Completed	
148	Non-Influenza	Completed	Claimed	Claimed	24/07/2017	26/07/2017	

4. Select the number of Epinephrine Emergency Treatments that need to be printed in the report.



5. Click **Print**. The selected record generates.

Viewing Immunization Record Details

This section explains the process for viewing immunization records. Immunizations can be viewed via the **F3 - Patient** card.

On the **F3-Patient card**, the immunization record can be reprinted:

- If the **Status** is either **Printed Consent** or **Signed Consent**, the Product status and Fee status does not affect being able to view the immunization record.
1. Call up the patient using the **F3 Patient** search.
 2. On right navigation pane, under the **View** section, click **Immunizations**.
 3. Call up the record by doing one of the following:
 - Right-click the record you want to view and select **View Details**;
 - Select the record and press **F2**;
 - Double-click the record.

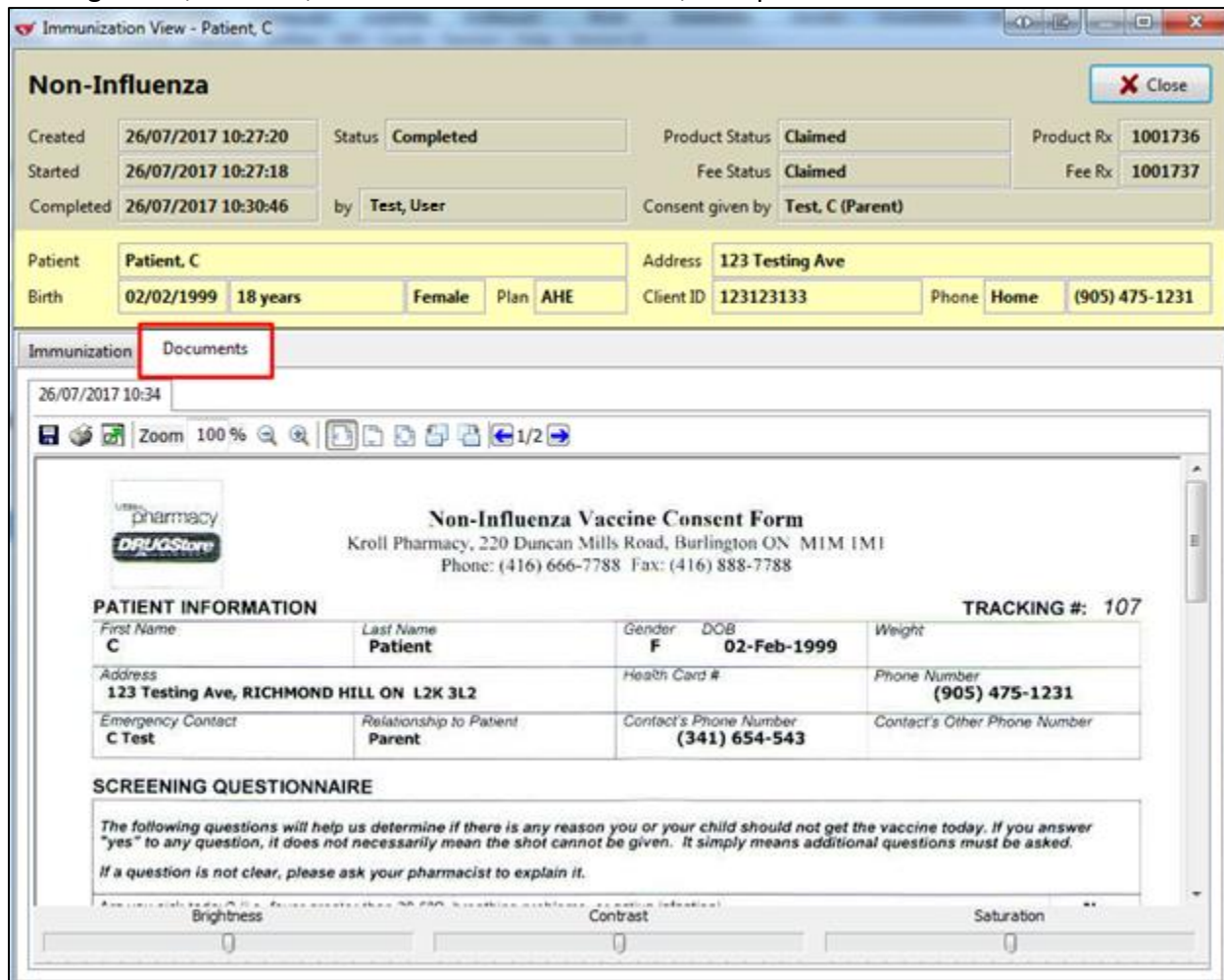
Immunizations									
N - New Immunization		P - Print/Reprint		F - Claim Fee		C - Cancel Claim			
D - Pharmacist Declined		R - Patient Refused					<input type="checkbox"/> Show Reversals		
Items (9)							F2	Ins	Del
#	Type	Status	Product Status	Fee Status	Created	Completed			
143	Non-Influenza	Completed		No Fee Applicable	21/07/2017	21/07/2017			
142	Non-Influenza	Pending	New Immunization	Not Completed Yet	21/07/2017				
135	Non-Influenza	Pending	Add Epinephrine shot	Not Completed Yet	20/07/2017				
85	Non-Influenza	Pending	Print/Reprint	Not Completed Yet	14/07/2017				
84	Non-Influenza	Pending	Call up	Not Completed Yet	14/07/2017				
83	Non-Influenza	Pending	Cancel Claim	Not Completed Yet	14/07/2017				
61	Non-Influenza	Patient Consent Scan Skipped	Pharmacist Declined	No Fee Applicable	05/07/2017				
60	Non-Influenza	Patient Consent Scan Skipped	Patient Refused	No Fee Applicable	05/07/2017				
59	Non-Influenza	Pending		Not Completed Yet	05/07/2017				

The 'Immunization View' screen appears

- If the immunization record has not yet been scanned into the system, only the immunization details that were recorded on-screen will be visible. Click **Print** to reprint the immunization record or full report, or **View Signature** to view the digital signature, if one was captured.

- If the immunization record has been scanned into the system, the immunization details displays in the **Immunization** tab. Click **Print** to reprint the immunization record or full report, or **View Signature** to view the digital signature, if one was captured.

In the **Documents** tab, the scanned record appears. From here you can adjust the brightness, contrast, and saturation of the record, or reprint the consent record.



Non-Influenza

Created: 26/07/2017 10:27:20 | Status: Completed | Product Status: Claimed | Product Rx: 1001736
 Started: 26/07/2017 10:27:18 | Fee Status: Claimed | Fee Rx: 1001737
 Completed: 26/07/2017 10:30:46 | by: Test, User | Consent given by: Test, C (Parent)

Patient: Patient, C | Address: 123 Testing Ave
 Birth: 02/02/1999 | 18 years | Female | Plan: AHE | Client ID: 123123133 | Phone Home: (905) 475-1231

Immunization: **Documents**

26/07/2017 10:34

Non-Influenza Vaccine Consent Form
 Kroll Pharmacy, 220 Duncan Mills Road, Burlington ON M1M 1M1
 Phone: (416) 666-7788 Fax: (416) 888-7788

PATIENT INFORMATION TRACKING #: 107

First Name C	Last Name Patient	Gender F	DOB 02-Feb-1999	Weight
Address 123 Testing Ave, RICHMOND HILL ON L2K 3L2		Health Card #	Phone Number (905) 475-1231	
Emergency Contact C Test	Relationship to Patient Parent	Contact's Phone Number (341) 654-543	Contact's Other Phone Number	

SCREENING QUESTIONNAIRE

The following questions will help us determine if there is any reason you or your child should not get the vaccine today. If you answer "yes" to any question, it does not necessarily mean the shot cannot be given. It simply means additional questions must be asked. If a question is not clear, please ask your pharmacist to explain it.

Brightness: [] Contrast: [] Saturation: []

Note: If you reprint the immunization document(s) from the **Documents** tab in the **Immunization View** screen, the scanned image of the original document(s) (not the original documents themselves) will print. As such, the resolution may not be optimal. See the [Reprinting an Immunization Record](#) section for instructions on how to reprint the original document(s).

6. Click **Close**. 'Immunization View' screen closes.

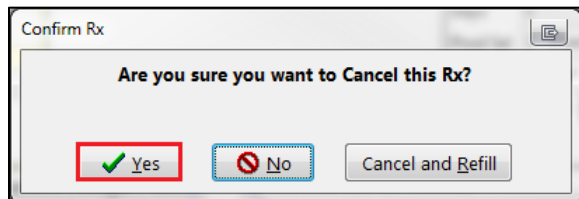
Cancelling a Claim

This section explains how to cancel an Immunization claim. Immunization claims can be cancelled either via the **F3 - Patient** card or the **F9 - Workflow** card.

1. Call up the patient using the **F3 Patient** search, or select **F9 - Workflow**.
2. On right navigation pane, click **Immunizations**.
3. Select the appropriate immunization record and click **C - Cancel Claim**.

Immunizations						
N - New Immunization		P - Print/Reprint		F - Claim Fee		C - Cancel Claim
		D - Pharmacist Declined		R - Patient Refused		<input type="checkbox"/> Show Reversals
Items (1)						
#	Type	Status	Product Status	Fee Status	Created	Completed
137	Non-Influenza	Completed	Claimed	Claimed	01/06/2017	20/07/2017

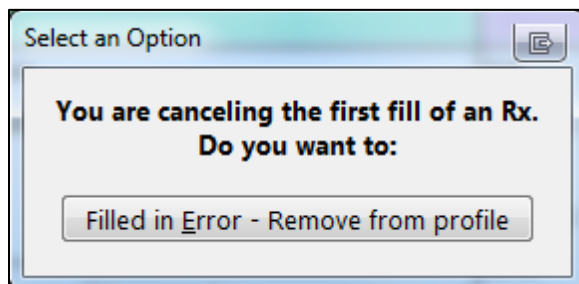
A prompt displays 'Are you are sure you want to cancel the Rx?'. (For fee)



Confirm Rx

Are you sure you want to Cancel this Rx?

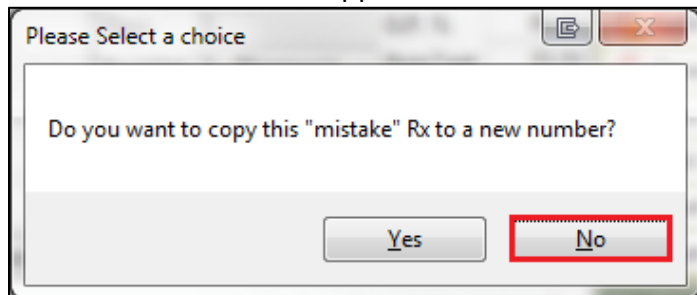
4. Click **Yes**.
5. Enter initials and click **OK**. A prompt displays 'You are cancelling the first fill of an Rx. Do you want to:'.



Select an Option

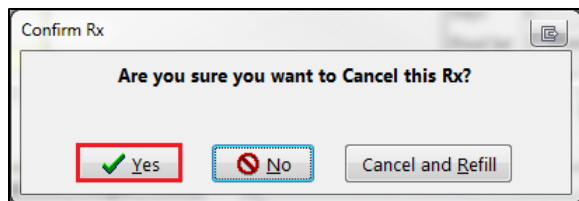
You are cancelling the first fill of an Rx.
Do you want to:

- Click **Filled in Error – Remove from profile**. Prompt ‘Do you want to copy this “mistake” Rx to a new number?’ appears.



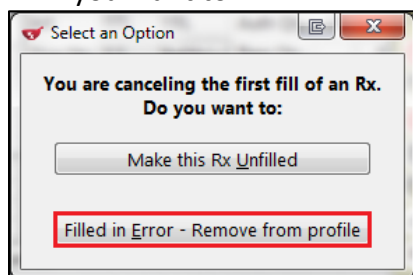
- Click **No**.
- Close report.

Prompt displays ‘Are you are sure you want to cancel the Rx?’ (For product)

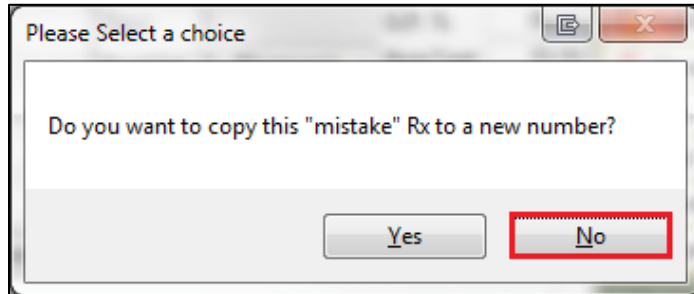


- Click **Yes**. Are you sure? Prompt appears with message ‘Is this Rx being cancelled because this patient didn’t pick it up / it couldn’t be delivered?’
- Click **No**.

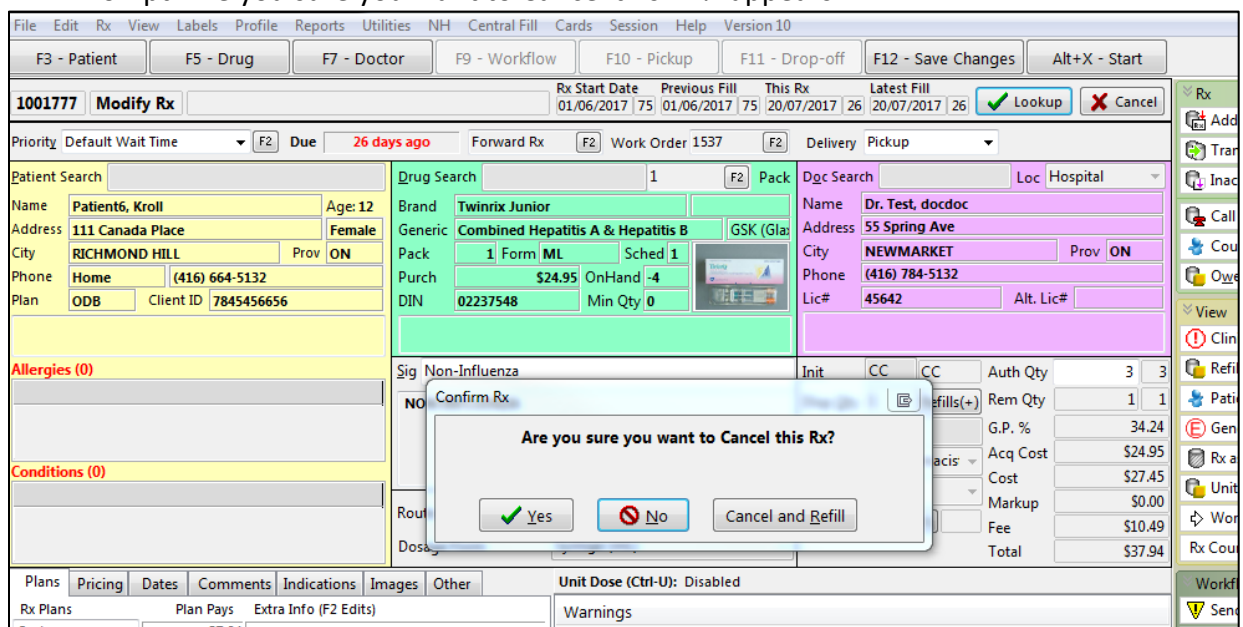
- Put in initials, and click **OK**. A prompt displays ‘You are cancelling the first fill of an Rx. Do you want to:’.



12. Click **Filled in Error - Remove from profile**. Prompt 'Do you want to copy this "mistake" Rx to a new number?' appears.



13. Click **No**. The record is removed from the Immunizations section of the patient card. Prompt 'Are you sure you want to Cancel this Rx?' appears.



The screenshot shows a medical software interface with a patient record for 'Patient6, Kroll'. The record includes details such as name, address, phone, and insurance. A dialog box is overlaid on the screen, asking 'Are you sure you want to Cancel this Rx?'. The dialog has three buttons: 'Yes', 'No', and 'Cancel and Refill'. The 'No' button is highlighted with a red border.

14. Click **Yes**. Rx is cancelled.

Note: If **No** is clicked, there are no changes.

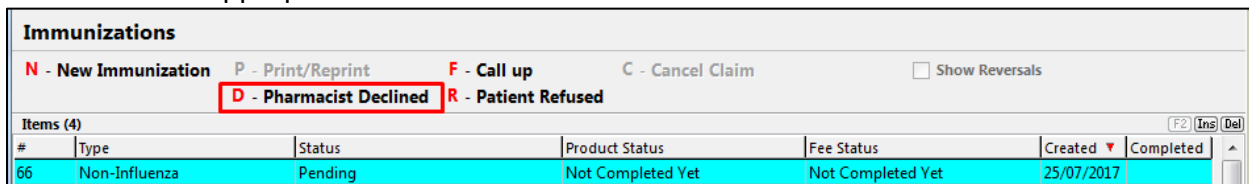
Declined or Refused Immunizations

This section explains the process for recording immunizations that have been declined by the pharmacist or refused by the patient.

Note: Immunizations that have been declined by the pharmacist or refused by the patient can be noted from the **F3 - Patient** card or the **F9 - Workflow** card.

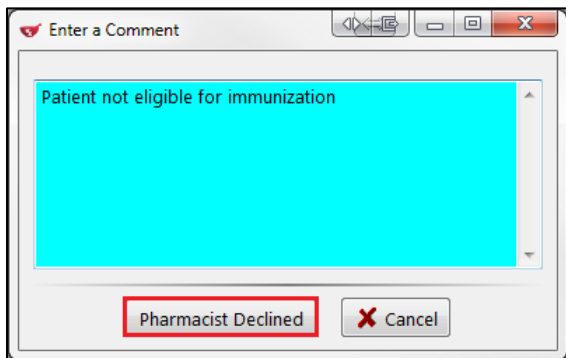
Pharmacist Declined

1. Call up the patient using the **F3 Patient** search, or select **F9 - Workflow**.
2. On right navigation pane, click **Immunizations**.
3. Select the appropriate immunization record and click **D - Pharmacist Declined**.



Immunizations						
N - New Immunization		P - Print/Reprint		F - Call up		C - Cancel Claim
		D - Pharmacist Declined		R - Patient Refused		<input type="checkbox"/> Show Reversals
Items (4)						
#	Type	Status	Product Status	Fee Status	Created	Completed
66	Non-Influenza	Pending	Not Completed Yet	Not Completed Yet	25/07/2017	

4. Enter the reason for the decline in the space provided and click **Pharmacist Declined**.

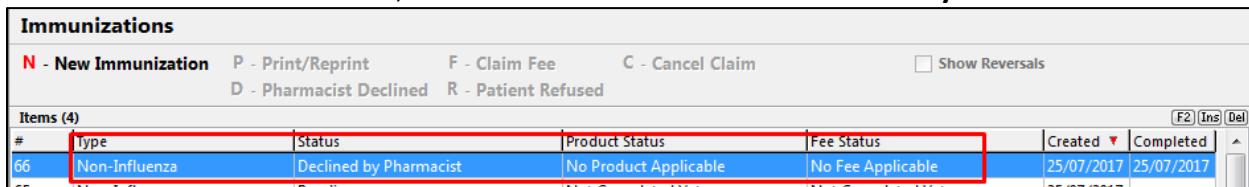


Enter a Comment

Patient not eligible for immunization

Pharmacist Declined

5. In the **Immunizations** list, the record shows a **Status** of 'Declined by Pharmacist'.



Immunizations						
N - New Immunization		P - Print/Reprint		F - Claim Fee		C - Cancel Claim
		D - Pharmacist Declined		R - Patient Refused		<input type="checkbox"/> Show Reversals
Items (4)						
#	Type	Status	Product Status	Fee Status	Created	Completed
66	Non-Influenza	Declined by Pharmacist	No Product Applicable	No Fee Applicable	25/07/2017	25/07/2017

Note: In electronic mode, the immunization can also be declined by selecting **Refuse Immunization** from the **Immunization** screen.

File Edit Utilities NH Cards Session Help Version 10 View Profile

F3 - Patient F5 - Drug F7 - Doctor F9 - Workflow F10 - Pickup F11 - Drop-off F12 - New Rx Alt+X - Start

Non-Influenza Consent given by F2 Patient, Sante

Patient Patient, Sante Address 42132 Testing

Birth 10/02/1956 61 years Male Plan Client ID Phone Home (416) 754-4313

Allergies Conditions

Rx

Rx Options Fill a new Rx

Product < None > F5

PackSize

UPC

Save for Later Refuse Immunization Next

Select a refusal reason and enter any comments in the space provided. Click **OK**.

Enter a Comment

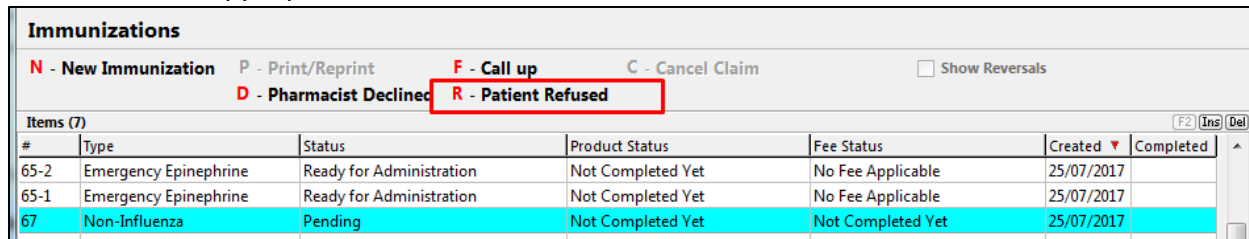
Reason: Declined by Pharmacist
Refused by Patient
Patient Ineligible

OK Cancel

Patient Refused

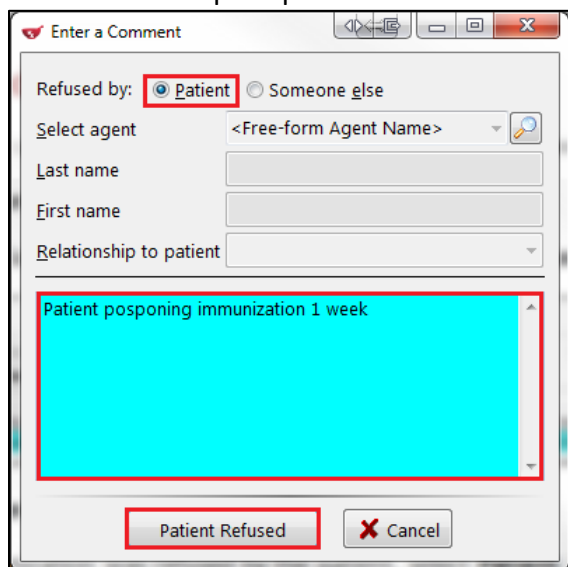
The ‘**Patient Refused**’ option can only be used before the patient has been charged for the immunization has been claimed. Once the Immunization has been charged for, the option to use is ‘**Cancel Claim**’.

1. Call up the patient using the **F3 Patient** search, or select **F9 - Workflow**.
2. From the right navigation pane, select **Immunizations**.
3. Select the appropriate immunization record and click **R - Patient Refused**.



Immunizations							
N - New Immunization P - Print/Reprint F - Call up C - Cancel Claim Show Reversals							
D - Pharmacist Declined R - Patient Refused							
Items (7)							
#	Type	Status	Product Status	Fee Status	Created	Completed	
65-2	Emergency Epinephrine	Ready for Administration	Not Completed Yet	No Fee Applicable	25/07/2017		
65-1	Emergency Epinephrine	Ready for Administration	Not Completed Yet	No Fee Applicable	25/07/2017		
67	Non-Influenza	Pending	Not Completed Yet	Not Completed Yet	25/07/2017		

4. The **Enter a Comment** window appears.
 - a) If the immunization was refused by the patient, select **Patient**. Enter a comment in the space provided and click **Patient Refused**.



Enter a Comment

Refused by: Patient Someone else

Select agent: <Free-form Agent Name>

Last name: _____

First name: _____

Relationship to patient: _____

Patient posponing immunization 1 week

- b) If the immunization was refused by someone other than the patient, select **Someone else**. The **Select agent**, **Last name**, **First name**, and **Relationship to patient** fields open.

5. Click the **Select agent** list. The patient's linked family members display in the list.
6. Select a patient or click the magnifying glass icon to search for and select a patient.
7. If the person does not have a patient card, manually enter their name in the **Last Name** and **First Name** fields.

The selected patient's name populates in the **Last name** and **First name** fields.

8. Select a **Relationship to patient**. Enter any comments in the space provided and click **Patient Refused**.

Enter a Comment

Refused by: Patient Someone else

Select agent: Géroux, Amélie

Last name: Géroux

First name: Amélie

Relationship to patient: Wife

Patient postponing immunization 1 week

Patient Refused Cancel

9. In the **Immunizations** list, the record displays with a **Status** of 'Refused by Patient'

Immunizations						
N - New Immunization P - Print/Reprint F - Claim Fee C - Cancel Claim <input type="checkbox"/> Show Reversals D - Pharmacist Declined R - Patient Refused						
Items (7) (F2) (Ins) (Del)						
#	Type	Status	Product Status	Fee Status	Created	Completed
65-2	Emergency Epinephrine	Ready for Administration	Not Completed Yet	No Fee Applicable	25/07/2017	
65-1	Emergency Epinephrine	Ready for Administration	Not Completed Yet	No Fee Applicable	25/07/2017	
67	Non-Influenza	Refused by Patient	No Product Applicable	No Fee Applicable	25/07/2017	25/07/2017

Status Types

This section explains each possible status that may be attributed to an immunization record.

Status

Patient Consent Scan Skipped - The patient consent has not yet been scanned; no claim has been submitted.

Pending - The immunization is partially complete, or has been saved for later; no claim has been submitted.

Refused by Patient - The immunization has been refused by the patient; no claim has been submitted.

Signed Consent - A signed consent form has been obtained and scanned back into the system.

Completed - The immunization is complete and the claim has been submitted.

Completed Paper - The immunization or Emergency Epinephrine shot has been completed in Paper Mode.

Declined by Pharmacist - The immunization has been declined by the pharmacist; no claim has been submitted.

Printed Consent - The consent form has been printed but has not been scanned into the system; no claim has been submitted (Paper Mode only).

Ready for Administration - A record of the Emergency Epinephrine shot has been created, but is not yet complete, or has been saved for later; no claim has been submitted.

Product Status

Pending Claim - The immunization or Emergency Epinephrine shot is complete but the claim has not yet been submitted.

Claimed - The immunization or Emergency Epinephrine shot is complete and the claim has been submitted.

Not Completed Yet - The immunization or Emergency Epinephrine shot is partially complete, or has been saved for later.

No Product Applicable - The immunization or Emergency Epinephrine shot has been declined by the pharmacist or refused by the patient. No product has been administered and no claim has been submitted.

Fee Status

No Fee Applicable - Indicates there is no charge to the patient for the immunization.

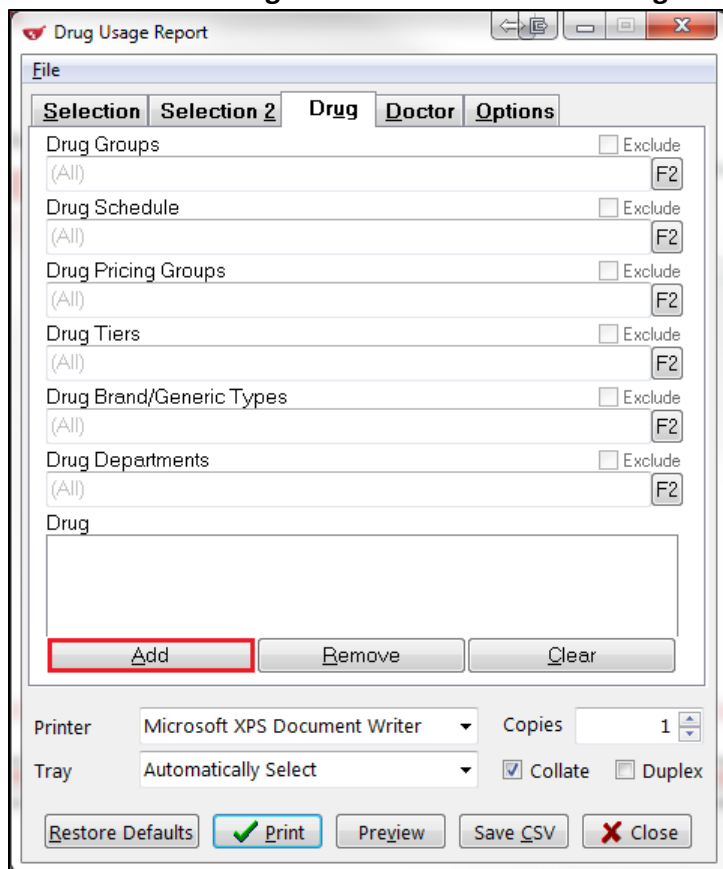
Reporting

Reporting Immunizations Products

Running reports for immunization products can be done by selecting the product(s) you want included in the report via the report form. This section instructs on how to run a report for immunization products.

Selecting Drugs in the Report Form

1. Select the report you want to run from the **Reports** menu. The **'Drug Usage Report'** window appears.
2. Locate the **Drug** field and click **Add**. The **'Drug Search'** screen appears.



3. Search for and select a drug.

- The drug is added to the **Drug** list in the report form. Repeat steps 2-3 for each product you want included in the report.

The screenshot shows the 'Drug Usage Report' application window. The 'Drug' tab is active, and the 'Avaxim 160/0.5ml' entry is highlighted in the drug list. The 'Print' button is highlighted with a green checkmark.

- Click **Print**. The report generates for the selected drug products only.

Drug Usage Report
Kroll Pharmacy, 220 Duncan Mills Road, Burlington ON M1M 1M1
Phone: (416) 666-7788 Fax: (416) 888-7788

ReportParameters
 FillDate-22/07/2017to25/07/2017
 Drugs-Avaxim 160/0.5ml
 Select 1 of 10 Drugs by Number of Rx
 Printing Infills
 Print not dispensed Rx
 Show UPC, # Packs and Acquisition Cost
 Include Fee For Service Rx

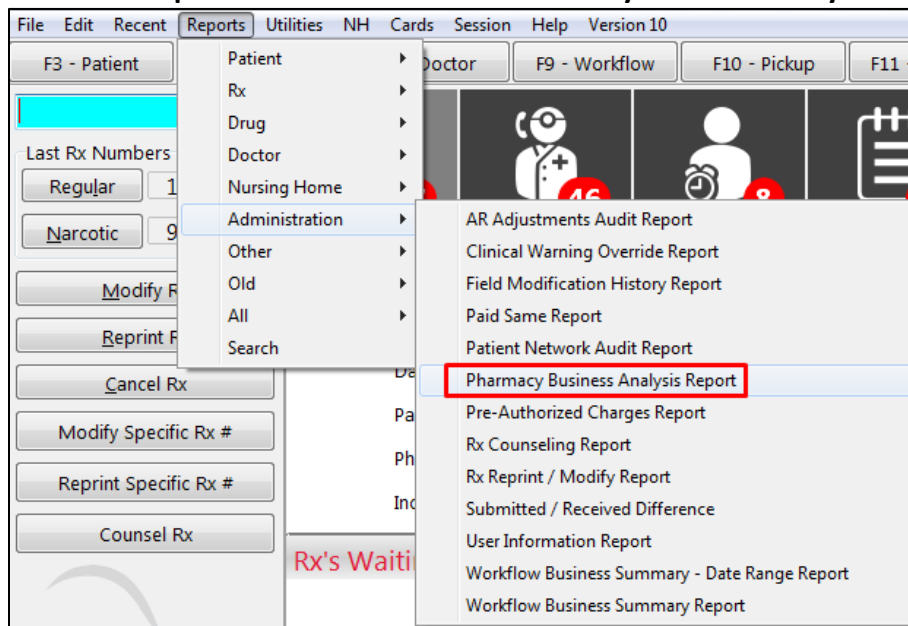
Printed on 25/07/2017 3:19:42PM

Drug	Mfr	User	DIN	Pack	Size	default	Vendor	Item#	On	Hand	Qty	#Packs	UPC	TotAAC
Avaxim160/0.5mML	APS		02237792	1			McKesson	439851	-1		1	1	697177000706	44.58

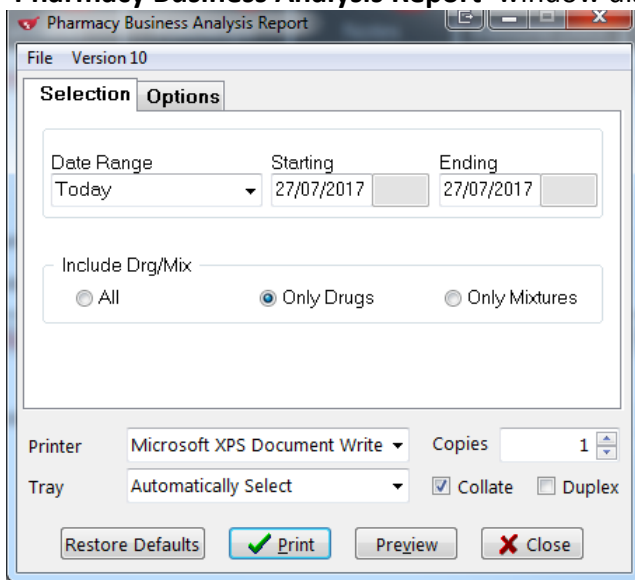
Reporting Non-Influenza Service Fee

This section explains how to report number of fee for Service for Non-Influenza Immunization that are either filled or cancelled.

1. Click **Reports > Administration > Pharmacy Business Analysis Report**.



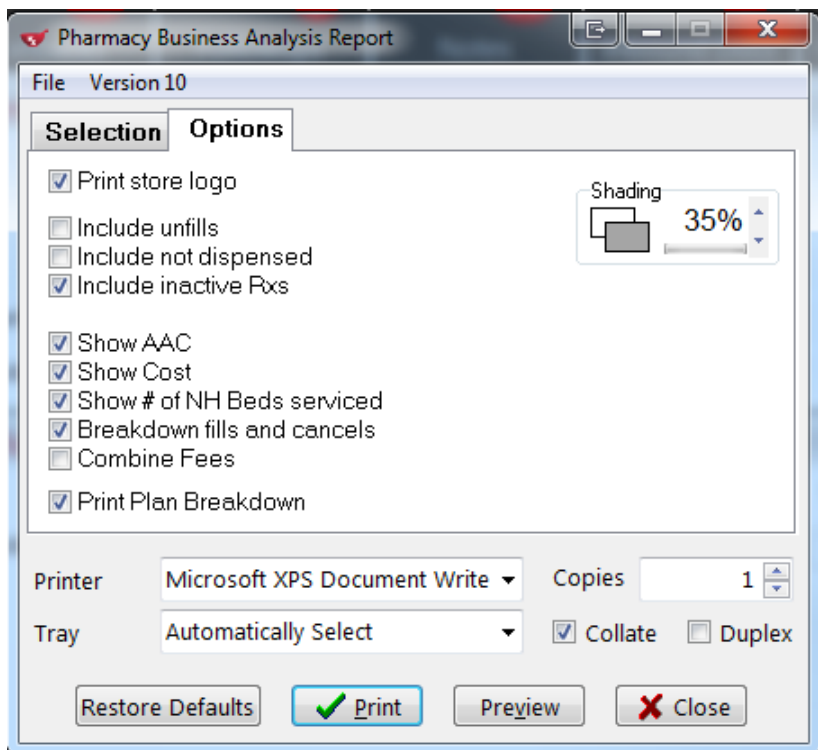
'Pharmacy Business Analysis Report' window displays on the **Selection** tab.



2. On the **Date Range** drop down textbox, select Date Range.

Note: if you want to customize your date range you can input a **Starting** and **Ending** date.


3. Click **Options** tab.



4. Ensure **Include inactive Rx's**, and **Breakdown fills and cancels** are both enabled.

5. Click **Preview**.

The 'Pharmacy Business Analysis Report' appears.



Pharmacy Business Analysis Report
 Kroll Pharmacy, 220 Duncan Mills Road, Burlington ON M1M 1M1
 Phone: (416) 666-7788 Fax: (416) 888-7788

ReportParameters
 DateRange - 27/07/2017 to 27/07/2017
 Printing Only Drugs and Inactive Rxs

		Fill	Cancel
Prescription Cost Breakdown	AAC	\$482.69	\$199.67
	Cost	\$546.91	\$241.60
	Markup	\$17.69	\$0.00
	Dispensing Fee	\$59.95	\$20.98
	Fee For Service Fee	\$45.00	\$15.00
		\$669.55	\$277.58
	Total	\$391.97	
Drug Sales Breakdown	Brand	\$613.93	\$262.58
	Generic	\$10.62	\$0.00
	Not Specified	\$45.00	\$15.00
	Total	\$669.55	
Prescription Count Breakdown	New	9	3
	Repeat	0	0
	Total	6	
Rx Adaptations		0	0
Total	0		
Rx Fee For Service	Non-Influenza Immunization Fee	3	1
Total	2		
Rx With No Fees		0	0
Total	0		
Rxs Transferred	In	0	0
	Out	0	0
Current Inventory	Brand	-\$58,221.92	
	Generic	-\$7,430.97	
	Not Specified	-\$719.09	
	Total	-\$66,371.98	

*Inventory On: 27/07/2017 04:10:16 pm