



For British Columbia's PharmaNet Users

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**Potential Misinterpretations of Patient Profile Information**



Physicians and other health care providers who refer to a patient's PharmaNet patient profile for their medication information may assume the profile always provides a complete, accurate, and up-to-date picture of the patient's medication use. This is not always the case.

The Ministry is reviewing possible solutions to the issues with the order in which PharmaNet profile entries are sorted and with the summary profile. In the meantime, pharmacies and other health care professionals should be aware of the following information.

The PharmaNet patient profile does not capture information about:

- drugs dispensed outside community pharmacies, or purchased outside BC or over the Internet
- over-the-counter medications
- discontinuations (unless the prescriber or patient has advised the pharmacist)
- drugs entered under the wrong Personal Health Number

It is also possible for clinicians to misinterpret a patient's profile information because:

- dispenses of the same drug on the same day for a patient are not always displayed in the correct sequence
- summary views do not always display enough information
- they misinterpret prescription status codes (*see page 3 for details about these codes*)

**Issue 1: Dispenses of the Same Drug on the Same Day Not Always Displayed in Correct Sequence**

Most of the time, a patient's prescription history is displayed in reverse chronological order, with the most recent prescription at the top.

The use of PharmaNet is not intended as a substitute for professional judgment. Information on PharmaNet is not exhaustive and cannot be relied upon as complete. The absence of a warning about a drug or drug combination is not an indication that the drug or drug combination is safe, appropriate or effective in any given patient. Health care professionals should confirm information obtained from PharmaNet, and ensure no additional relevant information exists, before making patient care decisions.

However, if two or more claims are submitted on the same day, for the same patient and the same DIN, they may not display in reverse chronological order. If one of the transactions is a reversal, the profile might display the reversal, rather than the subsequent fill, as the most recent transaction. A clinician may therefore assume the drug was not dispensed to the patient.



Example: A patient brings in a prescription for capsules to be taken twice per day. After reviewing the patient's medication history, the pharmacist consults the prescribing physician about the dosage; together they determine that the dose should be decreased to one capsule per day.

The pharmacist submits the following three claims:

- 1 for the initial fill, which is then reversed (rx\_stat = R-reversed)
- 1 for the Special Services Fee: consulted prescriber - changed dose (rx\_stat = N – Not Filled)
- 1 for the subsequent fill (rx\_stat = F – Filled)

To accurately reflect the final outcome, the reverse chronological order for the transactions should read F-Filled, N-Not Filled, and R – Reversed. This sequence would clearly indicate that the prescription was filled and the patient was taking the drug. In some cases, however, the records may not display in that order.

**Recommended Action — When reading a medication profile, check the dates for each transaction.** If there are multiple entries on the same day for the same DIN, do not assume that the topmost entry is the most recent. Instead, check with the patient and/or the prescriber to find out the status of that drug.

## Issue 2: Summary Views Do Not Always Display Enough Information

Clinicians can choose to view a summary of a patient's medications in which only one transaction for each DIN on a given day is displayed. Two problems may arise with this particular summary view:

- The entry displayed may not be the most recent one: Because of the way in which PharmaNet sorts multiple dispenses of the same DIN on the same day, the summary may not display the most recent entry (*see Issue 1 for details*).
- The summary display may omit clinically important information: There are times when a patient fills two prescriptions for the same DIN on the same day: the first for one indication, and the second for a different indication. For example, one prescription for an anti-anxiety medication might be for anxiety; a second prescription might be for insomnia.

**Recommended Action — Always use the complete, rather than the summary, view when reviewing a medication profile.** If multiple entries for the same DIN occur on the same day, check with the patient and/or the prescriber to find out if they are actually taking the drug and what amounts they are taking.

## Issue 3: Misinterpretation of Prescription Status Codes

It is crucial that clinicians reading PharmaNet medication profiles understand and pay attention to the prescription status code (*see page 3 for the status codes*).

Recently, incidents have been reported in which clinicians misinterpreted the prescription status (rx\_stat) code, particularly the R-Reversed status code. **'Reversed' means the medication was not dispensed.** These entries are retained in the profile for accountability purposes.

In one instance, a prescription had been reversed because it was intended for another patient with a similar name. In another instance, a prescription was reversed because the wrong drug had been

prescribed. In both cases, the patient's profile contained identified 'Reversed' entries for medications that were not dispensed.

**A 'Reversed' status code does not necessarily mean the drug was ever prescribed for, or taken by, the patient.**

### ***How reversals work and what they mean***

Prescription transactions may be reversed for a variety of reasons, including:

- data entry errors (e.g., incorrect DIN, strength, quantity, practitioner ID or instructions for use)
- prescription not picked up by the patient within 30 days of dispensing or refused by the patient
- prescription cancelled by the physician
- prescription that a pharmacist refused to fill (these reversals are accompanied by a second transaction with the status code of N-No fill)
- prescription changed in consultation with the prescribing physician
- prescription dispensed under the wrong PHN (and so, attached to the wrong patient profile)
- network problems when sending the transaction to PharmaNet

Whenever a change or correction is needed, the pharmacist must reverse the prescription claim on PharmaNet, make the necessary changes, and submit a corrected prescription claim. Prescription reversals and subsequent corrections must bear the same date as the original prescription.

All reversals, except simple data entry errors, are included in a patient's medication profile.

***Recommended Action — When reviewing a patient's medication profile, always refer to the full profile rather than a summary. Pay attention to the prescription code for each entry.***

## **PharmaNet Prescription Status Codes**

PharmaNet Medication Profiles and Medication Reconciliation Reports use the following prescription status codes:

<b>F – Filled</b>	Prescription was filled
<b>D – Discontinued</b>	Prescription was filled, but is no longer being taken
<b>R – Reversed</b>	Prescription was filled but then reversed by the pharmacist and not dispensed to the patient. Prescriptions can be reversed for any number of reasons, including that the drug was never intended for the patient
<b>N – Not Filled</b>	Prescription was not filled, indicating the pharmacist's refusal to fill the prescription as written. There may be a subsequent fill for the medication depending on whether the prescription was changed and reprocessed or cancelled altogether.

## Claims for the Same Drug on the Same Day for a Patient and Their Pet

Occasionally, your pharmacy may need to fill a prescription for the same drug on the same day for both a patient and their pet. If the pet's prescription claim is processed first, this can create a problem in the patient's PharmaNet medication history. Inaccurate medication histories can compromise patient care.



### The problem

Pet prescriptions are recorded with the patient's PHN. When both the patient and their pet need the same drug on the same day and the pet's prescription is filled first, PharmaNet interprets the subsequent patient prescription as a duplicate and rejects it. However, **although the claim record is removed from PharmaNet, the medication history record for the drug is not.** So, if the claim is then re-entered with an intervention code, two fills of the medication will show on the patient's medication history.

### The solution

**Whenever possible, fill the patient's prescription first.** Doing so prevents duplicate fill errors in the patient's medication history.

<b>If no prescription for that PHN and drug has been filled earlier in the day</b>	<ol style="list-style-type: none"><li>1. Submit the patient's prescription first.</li><li>2. Submit the pet's prescription second. <b>Include the veterinarian's Practitioner ID, the Reference Code V9 and the intervention code "UF-patient gave adequate explanation."</b></li></ol>
<b>If the patient's prescription was filled earlier in the day</b>	Submit the claim for the pet's prescription. Include the <b>veterinarian's Practitioner ID, the Reference Code V9 and the intervention code "UF-patient gave adequate explanation."</b>
<b>If the pet's prescription was filled earlier in the day</b>	Submit the claim for the patient's prescription. Include the <b>intervention code "UF-patient gave adequate explanation."</b>

If you forget to enter the UF intervention code and the claim is rejected, contact the College to correct the problem **before** you re-submit the prescription claim with the UF code.



### Not sure how to carry out a task with your software?

If you require more information on specific procedures for your software, please contact your software vendor.

## Opening a new pharmacy or moving to new premises?

Be sure to notify the College of Pharmacists **at least 50 business days** before your opening date.

This lead time is needed for the College to approve the necessary documentation and advise PharmaCare of your opening date (for new pharmacies) and for PharmaCare to arrange for your connection to PharmaNet.

For more information, see our information sheet on the PharmaCare website at [www.health.gov.bc.ca/pharmacare/pharmanet/PNetConnectionInfo.pdf](http://www.health.gov.bc.ca/pharmacare/pharmanet/PNetConnectionInfo.pdf)