

**REINVENTING THE PEDIATRIC MEDICATION  
PREFERENCE LIST**

By

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CERTIFICATE OF APPROVAL

This is to certify that the Master's Capstone Project of

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*“Reinventing the Pediatric Medication Preference List”*

Has been approved

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## ABSTRACT

**Introduction:** Medical informatics transforms medicine through the use of electronic health records (EHRs) and computerized physician order entry. Prescriptions created by computerized physician order entry have been shown to reduce medical errors compared to handwritten prescriptions. However, 10 percent of computer-generated prescriptions still contain errors. This project was to develop rules for improving the computer interface for a commercial EHR.

**Methods:** 536 medications were reviewed from the pediatric formulary of HealthPartners clinics. Potential errors in the medication lists were documented, and a set of rules was established to revise the medication preference list for the EHR. A new pediatric preference list was created in the proof of concept environment of the EHR. The new preference list was developed to be cleaner, easier to use, and intuitive. Test cases were also created to evaluate the new preference list.

**Results:** The new preference list was evaluated by physician test subjects. Three out of seven subjects noted a discernible difference in the new preference list compared to the old (current) preference list. There was overwhelming agreement that the new preference list was intuitive, preferable to the old preference list, and should be integrated into the EHR.

**Discussion:** Many difficulties in the ordering of medications were improved using empiric rules developed for a prescription preference list. Changes to the preference list included modifications of the display name template, revising dose, frequency and route defaults and cataloguing changes needed to be made by the organization.

**Conclusion:** Computerized physician order entry has been shown to reduce prescription errors. This project developed rules to improve the medication preference lists used to create prescriptions in pediatrics. Findings should be generalizable to other disciplines and possibly to other EHRs.

## INTRODUCTION

In his introduction to *Connections*, the companion book to his eponymous television series, science historian James Burke commented on how scientific change influences society. He wrote about “the radical changes that lay ahead, caused by communications and information technology, and of the urgent need to understand the process of scientific and technological change, the better to manage its increasingly ripple effect.”<sup>1</sup> Burke continued by quoting American mathematician Norbert Wiener: “Change comes most of all from the unvisited no-man’s-land between the disciplines.” This statement is equally true of medical informatics since it is an amalgamation of computer science, information technology and medical science. While medicine has embraced a wealth of new technology for scanning, diagnosing, and treating patients, healthcare has been slow to employ medical informatics systems. Prompted by mandates and incentives from the U.S. government, American healthcare organizations are only now purchasing and implementing electronic health records (EHRs) to a large degree. Despite the slow rollout, informatics’ influence is evident: it is transforming medicine and influencing how clinicians interact with patients.

Prescriptions are an example of this transformation. Prescription writing is a time-honored skill taught to medical students early in their education. Prescriptions convey information to a pharmacist through a standardized format. Each prescription contains pertinent information such as the patient’s name, date of birth, the name of the medication, strength, dose form, administration instructions (known as the Sig), the dispense amount, and the number of refills (Figure 1). While the majority of hospitals and clinicians continue to write prescriptions by hand, there has been a rapid increase in



the number of prescriptions generated by computerized physician order entry (CPOE),<sup>2</sup> a common component of an EHR.

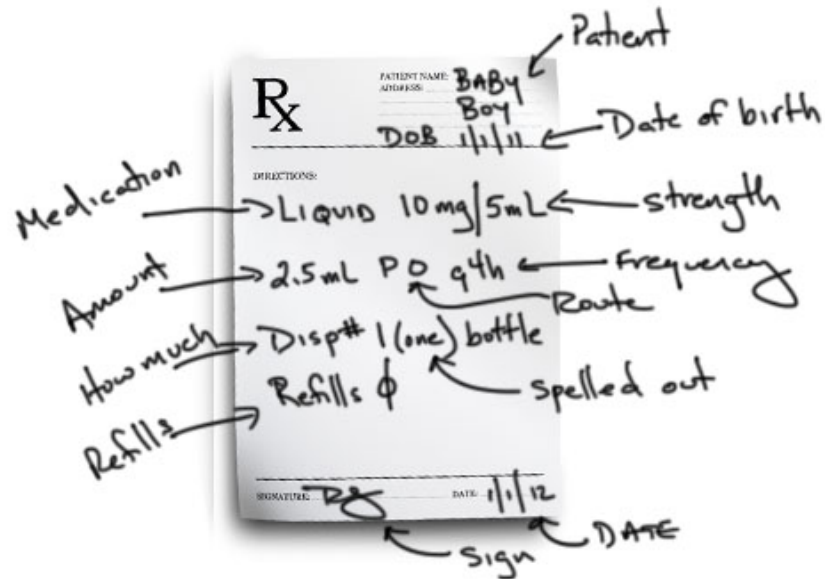


Figure 1. Components of a prescription. c2012 MedschoolHQ.net.<sup>3</sup> Used with permission.

## **BACKGROUND**

### **The Origins of CPOE and EHRs**

EHRs originated in the 1960's with the development of the Computer Stored Ambulatory Record (COSTAR) by the Laboratory of Computer Science at Boston's Massachusetts General Hospital.<sup>4</sup> The HealthIT.gov (US) website defines EHRs as "real time patient centered records" that can:

- contain information about a patient's medical history, diagnoses, medications, immunization dates, allergies, radiology images, and lab and test results;
- offer access to evidence-based tools that providers can use in making decisions about a patient's care;
- automate and streamline providers' workflow;
- increase organization and accuracy of patient information; and
- support key market changes in payer requirements and consumer expectations.<sup>5</sup>

The COSTAR EHR was surprisingly sophisticated given its 1960's origin, and the program has evolved over the last 50 years. Some modern EHR systems, Epic Systems for example, continue to code with COSTAR's MUMPS programming language and engine for their systems.<sup>6</sup> While the functionality of EHRs has expanded and improved, the question remains whether or not these improvements have positively affected the practice of healthcare.

In 1995, William Hersh wrote of the promises and problems relevant to EHR systems.<sup>7</sup> He concluded that EHRs would provide benefits to patient care through "access to more medical data, monetary savings through elimination of repeated lab testing, [and] utilizing computerized decision support (CDS) to decrease the amount of

medical errors.” Some promises have come true, such as reduced medical errors<sup>8</sup>, but other benefits have not. For instance, the high cost of EHR implementation offsets any improvement in the cost of care.<sup>8</sup>

Hersh also discussed the problems inherent to EHR systems, many of which are relevant today.<sup>7</sup> Physicians continue to struggle with the increase in time these systems have added to their workday. Offline systems can cripple organizations that provide patient care. EHRs still lack interoperability and uniform standards to transfer data. Finally, security and privacy breaches of patient records increased by 137 percent in 2012-2013.<sup>9</sup>

Although Hersh did not discuss prescriptions, they too have benefits and challenges. In 1980, Preece *et al.* proposed computer-generated prescribing.<sup>10</sup> These authors theorized that computers could develop comprehensive lists of medications, catalogue patient responses to medications, and eliminate errors inherent in handwritten prescriptions. Indeed, many of today’s EHRs have the CPOE capability to create, save, and print prescriptions for both in-patient and ambulatory patients.

### **Electronic (CPOE) Prescribing and E-prescribing**

Over the past decade, interest in transmitting prescriptions electronically has escalated. The process, called electronic prescribing (e-prescribing or eRX), is defined as “a prescriber’s ability to electronically send an accurate, error-free, and understandable prescription directly to a pharmacy from the point-of-care.”<sup>11</sup> For this paper, e-prescribing refers to electronically transmitted prescriptions, while CPOE refers to creating prescriptions in an EHR system. Interest in e-prescribing has been influenced by state and federal requirements. The Medicare Modernization Act of 2003 codified e-

prescribing as a requirement for Medicare Part D as well as a Meaningful Use requirement.<sup>12</sup> In 2008, Minnesota became the first state in the U.S. to mandate that all prescriptions must be e-prescribed; other states, such as New York, have since followed suit.<sup>13,14</sup> These state requirements to e-prescribe drive the increasing number of computer-generated prescriptions. SureScripts estimates 788 million prescriptions were transmitted electronically in 2012, an increase of 44 percent of all prescriptions written in the USA.<sup>11</sup>

Although incentivized to use these systems, some clinicians may wonder if these CPOE-generated prescriptions are more accurate, error-free, and understandable than those that are handwritten. A number of studies have attempted to answer these questions. Bates *et al.* evaluated the effectiveness of their CPOE system to reduce errors in three hospital units. They defined medication errors as “errors in the process of ordering, dispensing, or administering a medication, regardless of whether an injury occurred or whether the potential for injury was present.”<sup>15</sup> Their study focused primarily on “non-missed-dose medication errors” which excluded errors due to medications not being available to dispense. After the EHR system was implemented, the hospital reduced its non-missed-dose medication errors by 80 percent compared to the pre-implementation study period. In that same timeframe, they reduced serious medication errors by 55 percent.<sup>15</sup> A similar study by Van Doormaal and colleagues looked at the influence of CPOE and clinical decision support (CDS) on preventing medication errors by comparing error rates pre- and post-implementation at four medicine wards in the Netherlands. They also demonstrated that CPOE implementation reduced the total percentage of medication orders containing at least one error.<sup>16</sup>

Two other papers attempted to classify the types of medications errors. Bates *et al.* classified errors into type such as **dose errors** (e.g. overdose, underdose, missed dose, wrong dose form, dose omitted), **route errors** (e.g. incorrect route, wrong route, route omitted), and **frequency errors** (e.g. incorrect frequency, frequency omitted), among others.<sup>15</sup>

The Van Doormaal paper, on the other hand, classified medication errors into two distinct groups:

- **prescribing errors**, defined as errors “made in the process of prescribing medications” and consisting of administrative and procedural errors (e.g. errors in readability, patient data, drug name, dosage form and route), dosing errors (e.g. errors in strength, frequency, dosage), and therapeutic errors; and
- **transcribing errors**, defined as “errors that occur in the process of the interpreting, verifying, and transcribing of medication orders.”<sup>16</sup>

Van Doormaal *et al.* also defined the severity of an error using criteria from the National Coordination Council for Medication Error Reporting and Prevention (NCC MERP).<sup>16</sup> The NCC MERP Medication Error Index attempts to categorize medication errors by their severity of outcome (e.g. no error, error but no harm, error and harm, and error resulting in death.)<sup>17</sup>

Whereas the previously mentioned studies focused on inpatient order entry and medication errors, other studies have evaluated the effectiveness of ambulatory CPOE systems in preventing medication errors. Kaushal *et al.* compared medication error rates before and after adoption of an ambulatory CPOE system and found that their outpatient practice reduced the error rate from 42.5 errors per 100 paper-based prescriptions to 6.6

errors per 100 computer-aided prescriptions.<sup>18</sup> Not surprisingly, illegibility errors were essentially eliminated with CPOE prescriptions. Devine *et al.* showed similar results.<sup>19</sup>

These papers concluded that CPOE in both the hospital and ambulatory setting reduces medical errors; a few studies, however, have argued the opposite viewpoint: that CPOE may increase medical errors. Han *et al.* looked at the effect of a commercial CPOE system on their pediatric intensive care unit (PICU). They found that the mortality rate in the PICU was higher post-implementation than pre-implementation. Moreover, they contended that the increased mortality rate was caused by medical errors directly related to the CPOE system.<sup>20</sup> The Han study generated controversy when published since many hospitals that were contemplating buying an EHR system at that time. Critics of the study felt that the conclusions were flawed and that the mortality rate increased from a faulty implementation rather than the actual CPOE system.<sup>21,22</sup> Another study evaluated the impact of a CPOE implementation in the hospital setting. Longhurst *et al.* reported a statistically significant reduction in the mortality rate after implementing a CPOE system.<sup>22</sup> In a retrospective study, van Rosse and colleagues evaluated medication errors in pediatric inpatient, pediatric intensive care, and adult intensive care units. Their analysis of the literature concluded that CPOE reduced medication errors but did not significantly improve adverse drug reactions or morbidity.<sup>23</sup> Van Rosse *et al.* also confirmed that the implementation of a CPOE system had more influence on reducing medication errors than the actual system did.

A number of studies have also looked at the prevalence and types of computer-generated prescription errors in the outpatient setting. Results from these studies are generally similar to the results from the inpatient world. Medications errors decreased,

but potentially adverse events were not reduced. One study by Nanji and associates concluded that 1 out of 10 outpatient computer-generated prescriptions contain errors, and one third of those errors are potentially harmful.<sup>24</sup> The retrospective study also found that CPOE systems with advanced computerized clinical decision support (CCDS) could prevent medication errors. The authors suggested strategies to prevent errors including “forcing functions” (i.e. stops in the process that require the user to consider the information before making a decision) that prevent omitting information, specific drug decision support such as maximum dose checking algorithms, and calculators to “resolve inconsistent quantity errors by eliminating redundant data entry.”<sup>24</sup>

Prescriptions written for adults tend to be more straightforward than pediatrics prescriptions are. In the adult population, most medication dosing instructions are standardized. Pediatric medication dosing, on the other hand, can vary with the patient's age, weight, and dose form preference (e.g. some children may not be able or willing to swallow tablets.)<sup>25</sup> One study quantified the types of pediatric medication errors finding that the most common errors were incomplete prescribing information and dosing errors.<sup>26</sup> Another study by McPhillips *et al.* found that clinicians calculated pediatric doses incorrectly 15 percent of the time.<sup>27</sup> Similar to the Nanji paper, Stultz and Nahata's review of the literature found that CCDS improved the accuracy of prescribing medication for pediatric patients.<sup>25</sup> Furthermore, Hou *et al.* evaluated the effect of CCDS on preventing pediatric medication errors at their facility. They showed that a significant number of medication errors that were not caught by a pharmacist review would have been identified with CCDS.<sup>28</sup> Clinical decision support prevents medication errors as long as the decision support rules are accurate. Interestingly, Kirkendall *et al.* evaluated

the accuracy of commercial vendor-supplied set of dosing rules at a pediatric hospital. They found that vendor-supplied dosing rules were accurate 56 percent of the time compared to standard prescribing references.<sup>29</sup>

The computer interface of the EHR can affect the accuracy of pediatric medication orders and prescriptions. At this date there appears to be no study specifically looking at the graphical user interface (GUI) and its effect on medication errors. This capstone does not evaluate the rate of errors, but instead proposes ways to reduce medication errors in a commercial CPOE system as modified by a large healthcare organization.

### **Background on the problem**

HealthPartners is a large consumer-governed non-profit healthcare organization in the Minneapolis/St. Paul metropolitan area.<sup>30</sup> Founded in 1957 as a healthcare cooperative, the organization now serves over a million patients each year.

HealthPartners employs 1700 physicians at 50 primary care clinics, 22 urgent care facilities, and 7 different hospitals throughout Minnesota and western Wisconsin. In 2013, HealthPartners recently merged with another large health organization, Park Nicollet, to become the second-largest hospital system in Minnesota.<sup>31</sup>

HealthPartners purchased EpicCare (Epic Systems Corporation, Verona, WI) as its EHR system and has had fully integrated CPOE in both ambulatory and hospital settings since 2004. In 2008, HealthPartners implemented a new Epic pharmacy system functionality called “Discrete Sigs.” Discrete Sigs is an application that allows the user to type in data or use GUI buttons ("quick buttons") to pick preselected choices for each component of the medication they are ordering. After a user has clicked on the buttons



for dose form, dose, frequency, and route, the Discrete Sigs function translates those choices into a patient-friendly prescription that can be printed or sent electronically to a pharmacy.<sup>32,33</sup>

Preference lists, a standard feature of EpicCare, are datasets specific to a particular department. Examples of preference lists include radiology orders, laboratory orders, and medication (prescription) orders. For medications, HealthPartners imports a database from a third-party provider (Medi-Span). The third-party database integrates into the EHR and contains all possible configurations of a medication.

Once the healthcare organization imports the medication database, it can then develop a facility list. The facility list contains all the medications the organization uses in its formulary in the ambulatory and hospital settings. The facility list further differentiates into department-based lists known as “Preference Lists”. Clinicians can create their own personal preference lists by editing an individual medication’s display name and default values (dose, route, etc.) from their department lists. Creating personal and department preference list expedites ordering medications because those medications have modified Sig defaults. For example, a medication that a clinician has named “amox 400mg- 22kg” will pull up that medication with the clinician-chosen defaults. The clinician saves time and effort because this modified medication does not have to be reviewed; the clinician will know how this prescription will look once ordered.

When logging into EpicCare, the clinician specifies the department configuration they want to use. At HealthPartners, each department’s EpicCare configuration is unique with individualized Preference Lists for that department. The clinician’s personal Preference List entries intermingle with their department list, but are hidden to other

department members unless the clinician chooses to share the entries with other department members.

HealthPartners allows each department to determine the defaults for their Preference List dataset. If the pediatrics department decides on a medication's maximum dose based on a patient's age or weight, this default will not transfer to the other departments' preference lists. Granting the department permission to edit their preference list is beneficial, but can have unintended consequences. For example, the family practice department may have different dosing defaults for pediatric patients than the pediatric department.

EpicCare provides standard nomenclature for their preference list entries.<sup>33</sup> The medication preference list for the HealthPartners's pediatric department was revised most recently in 2008 after implementing Discrete Sig functionality. This project is the first full revision of the medication preference list since implementation.

## METHODS

### Pre-assessment

HealthPartners Medical Group is a not-for-profit healthcare organization and insurance provider based in Minnesota. All facilities in this organization use EpicCare Version 2012.

A review of the HealthPartners Pediatric Preference List consisted of examining the outpatient "Peds Medication 2014" dataset found in the Epic Preference List Composer and in the original spreadsheet files created in 2008. The spreadsheet contains 536 entries of orderable medications that are listed by the display name, which can be either generic or brand name, and components: Sig method – either "Specify dose, route, and frequency" or "Free Text" -- dose, maximum dose, route, frequency, duration, starting date, ending dates, amount to dispense, and number of refills. Table 1 lists the individual components of the spreadsheet with examples.

The spreadsheet columns correspond to specific fields in the Preference List Composer. The Preference List Composer is a module in the Epic system that allows a user to modify the display name and Sig field defaults for a specific drug. For example, the Preference List Composer screen for fluconazole 10 mg/ml suspension has twelve different default fields that can be modified. Users can change the display name as well as add a default dose, route, frequency, duration, and amount to be dispensed. Default quick buttons for dose, route, and frequency are present both in the Preference List Composer and in the Discrete Sig application, but their input cannot be edited. Medications that can be ordered as either a brand or generic drug will have separate entries for both choices.

Component	Examples	
Display Name	CLINDAMYCIN PHOSPHATE 1% EX GEL (CLEOCIN T)	amoxicillin- clavulanate (AKA AUGMENTIN) 600-42.9MG/5ML suspension
Generic Name		amoxicillin/clavulanate 600mg amox/5ml
Brand Name	Cleocin-T 1%	
Sig field	Specify	Specify
Dose	1 application	45 mg/kg/dose amoxicillin
Max Dose	N/A	90 mg/kg/day amoxicillin
Dose form	Gel	Suspension
Route	Topical	Oral
Frequency	Daily	BID
Duration	365 days	10 days
Starting date	S*	S
Ending date	S+365	S+10
Dispense	30 g	Calculate Normal
Refill	6	0

Table 1. Example of Individual Spreadsheet Components.

\*S = current date, i.e. the date the prescription is signed

During the pre-assessment period, potential issues with the Pediatric Preference List and the Discrete Sig application were noted. The problems were divided in three broad categories: graphical user interface (GUI) issues, content issues, and prescribing issues.

### Graphical User Interface Issues

The GUI, i.e. the computer screen and components, allows the user to locate and pick the appropriate medication and prescription formulation. The GUI for ordering medications in the Discrete Sig application consists of a list box with columns that vary depending on the data set that is being accessed. Problems found with this interface include the following:

**1. The preference list may not display all options for a selected medication.**

Figure 2 is a screenshot of the GUI for ordering medications when the requested medication is Adderall. There are seven prescription formulations. However, if the list box screen is "split" as described below and the screen size is not appropriate, then some choices may be hidden, requiring the clinician to scroll down to find the correct choice or causing the clinician to miss the appropriate formulation altogether.

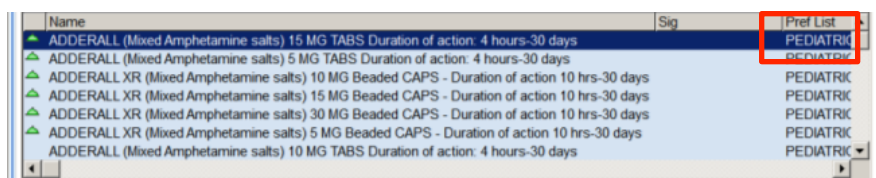


Figure 2. Adderall order short list. © 2014 Epic Systems Corporation. Used with permission

**2. The name column width is limited and may truncate display names.**

The column width and column headings vary depending on the view and screen size used. Figure 3 shows the GUI for amphetamine-dextroamphetamine.

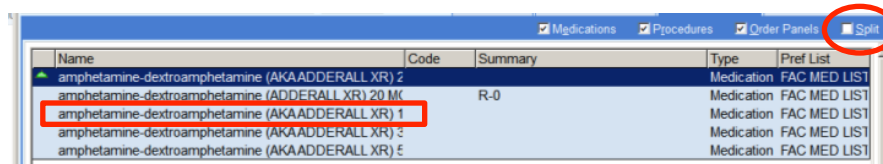


Figure 3 Adderall truncated display name© 2014 Epic Systems Corporation. Used with permission

Entries in the “Name” (i.e. the display name) column obscure the dose of the medication. The user would need to adjust the column width or make assumptions about which medication they were choosing. In this example, the third entry, “amphetamine-dextroamphetamine (aka ADDERALL XR) 1” (outlined in red in Figure 3) could be either the 10 mg or the 15 mg dose. In addition, much of the GUI

screen space is set aside for columns that are sparsely populated, such as the “Code” and “Summary” columns.

The “Name” column width varies based on whether or not the screen is "split." Clicking on the "Split" checkbox (red circle, Figure 3), changes the preference list columns choices. The Split checkbox’s job is to divide the interface area into any combination of preference list panels. When the GUI is not "split", the Preference Lists columns include “Name”, “Code”, “Summary”, “Type”, and “Pref List” (Figure 4). The preference list columns that are displayed when the GUI is "split" are “Name”, “Sig”, “Pref List”, “Copay”, “Coverage”, “Formulary”, and “Type” (Figure 5). The order and choices for these two examples of the Preference Lists columns are inconsistent and confusing. There should a standard column fields no matter which interface (“split” or not “split”) is used.

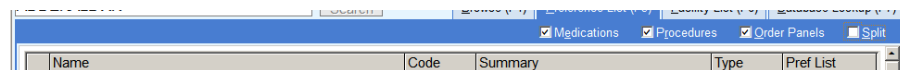


Figure 4. Screen shot Preference List columns, not split.  
© 2014 Epic Systems Corporation. Used with permission

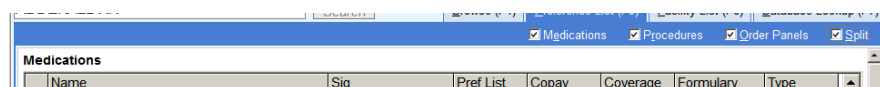


Figure 5. Screen shot Preference List columns. split.  
© 2014 Epic Systems Corporation. Used with permission

## Content Issues

Content issues refer to the Preference List display name content and its usability for the prescriber as well as the inclusion of appropriate medication formulations. Some of the Content problems were a result of attempts to make prescribing easier. An edited display name should signify a medication with defaults set to the clinician’s liking. For

example, to speed up prescribing oral penicillin tablets for strep throat, the clinician could create a personal Preference List entry, which would have that clinician's last name in the "pref list" column (outlined in red in Figure 2). The clinician could choose the orderable medication "penicillin VK (Penicillin V potassium) 500 mg tablets in the formulary and name it "PENVStrep". Using the Preference List Composer, the clinician may edit all the defaulted Sig choices: Dose = 500 mg, Frequency = BID, Duration = 10 days, Starting date = S (i.e. the date the prescription is signed), End date = S + 10 (i.e. 10 days from the date the prescription is signed), Dispense = 20 tabs, and Refills = 0. Once the changes are accepted, the clinician then can type "penicillin" in the Preference List query box, choose "PENVStrep" from the Preference List list box, and sign the order without having to spend time clicking on the Sig buttons.

Problems noted with the display names include the following:

1. **Preference List display names may contain too much extraneous information.**

Edited display names in the Pediatric Preference List often contain dosing and indication information. For example, the display name for amoxicillin suspensions will appear as "AMOXICILLIN 125MG/5ML -75mg/kg/day-severe infections" (Figure 6.). Display names for acyclovir, on the other hand, include indications (e.g. initial infection vs. recurrent infection.) While this is an interesting idea, the practicality of having this extraneous information is not established. Providers may disagree with the dosing recommendations, or the display information may differ from recommendations in drug references. In addition, drugs such as acyclovir may have up to twenty different dosing recommendations based on the age of the patient,

the immunocompetence of the patient, the virus being treated, and the occurrence of the illness.

## **2. Medication formulations may be duplicated in the entries.**

Following from the first problem, having dosing recommendations in the display names may lead to duplications of the medication formulations. For example, in an attempt to display all dosing recommendations for amoxicillin suspension, the Pediatric Preference List has four listings of the same suspension (Figure 6).

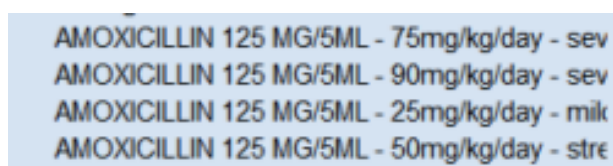


Figure 6. Screen shot from pediatric Preference List, amoxicillin 125mg/5ml  
© 2014 Epic Systems Corporation. Used with permission.

Amoxicillin suspension may be dosed at 25-50 mg/kg/day for mild to moderate infection, and at 80-90 mg/kg/day with more severe infections; this results in four choices of amoxicillin 125 mg/5 ml on the Preference List. If the GUI is “split”, other amoxicillin choices are not visible unless you scroll down the list.

A second example of duplication is with Adderall XR medications (Figure 7). There are two choices for Adderall XR 15 mg capsules (a 30 day supply and a 90 day supply, as highlighted in the red box), making it easy to order the wrong amount of medicine. Additionally, the 30-day and 90-day Adderall XR 10 mg choices are separated (as highlighted in the blue boxes in Figure 7), so once again, the wrong number of pills may easily be chosen.



Name
▲ ADDERALL XR (Mixed Amphetamine salts) 10 MG Beaded CAPS - Duration of action 10 hrs-30 days
▲ ADDERALL XR (Mixed Amphetamine salts) 15 MG Beaded CAPS - Duration of action 10 hrs-30 days
▲ ADDERALL XR (Mixed Amphetamine salts) 30 MG Beaded CAPS - Duration of action 10 hrs-30 days
▲ ADDERALL XR (Mixed Amphetamine salts) 5 MG Beaded CAPS - Duration of action 10 hrs-30 days
▲ ADDERALL XR (Mixed Amphetamine salts) 10 MG Beaded CAPS - Duration of action 10 hrs-90 days
▲ ADDERALL XR (Mixed Amphetamine salts) 15 MG Beaded CAPS - Duration of action 10 hrs-90 days
▲ ADDERALL XR (Mixed Amphetamine salts) 15 MG Beaded CAPS - Duration of action 10 hrs-30 days

Figure 7. Duplicate Adderall XR 15 mg entries  
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### 3. Some display names contain incorrect information.

An example of incorrect information can be found in the display names for Ventolin (Figure 8), which is a brand name for albuterol inhalers. The preference list has ten entries to choose from.

Name	Sig
VENTOLIN HFA 108 (90 BASE) MCG/ACT	Inhale 2-4 puffs by mouth e
VENTOLIN (aka ACCUNEB 0.63 MG/3ML	
VENTOLIN (aka ALBUTEROL SULFATE (	Inhale one vial via nebulizati
VENTOLIN (aka ALBUTEROL SULFATE (	Inhale 0.5ml diluted in 2 mill
VENTOLIN (aka ALBUTEROL SULFATE (	
VENTOLIN (aka ALBUTEROL SULFATE 1	
VENTOLIN (aka ALBUTEROL SULFATE 2	
VENTOLIN (aka ALBUTEROL SULFATE 2	
VENTOLIN (aka ALBUTEROL SULFATE 1	Inhale 2-4 puffs by mouth e
VENTOLIN (aka TIOTROPIUM (SPIRIVA)	

Figure 8. Ventolin. © 2013 Epic Systems Corporation. Used with permission.

The second and last entries list Accuneb and Spiriva as pseudonyms for Ventolin. While Accuneb and Ventolin are both albuterol, they are administered in different ways. Spiriva is not a brand name for albuterol but for tiotropium, so Spiriva and Ventolin are two different medications. In either case, a prescriber could easily choose the wrong medication or medication formulation.

**4. Brand and generic names are hard to distinguish.**

The Type field in the medication preference list tells a user if a medication is brand or generic. Frequently, this field is incorrect or not accurate. There needs to be an easier way to distinguish generic and brand medications in the formulary.

**5. Some medication formulations are missing.**

Some medication formulations that are actively used are missing. For example, adapalene, a topical acne medication, can be dispensed as a 0.1% lotion, as a 0.1% cream, or as 0.1% or 0.3% gels. Only the 0.1% lotion and 0.1% gel are found on the Pediatric Preference List.

**6. Some display names contain confusing abbreviations.**

Some examples of display names with confusing abbreviations include for albuterol and Bactroban. inhalers. HFA (for hydrofluoroalkane) and MCG/ACT (for micrograms per actuation) are part of the albuterol display name but not intuitive.

The display name for Bactroban (mupiricin) includes "PEG oint" which refers to the polyethylene glycol base, but this is not a commonly used abbreviation.

**Prescribing Issues**

Prescribing issues are different from GUI and Content issues because they focus on the "Discrete Sig" module choices. In addition to personal list entries, the Discrete Sig module includes some departmental defaults and "quick button" choices. Some of these have discrepancies that should be addressed with a revision of the Preference List data. Some examples are as follows:

**1. Some dose defaults are incorrect.**

The pediatric preference list has dosing recommendations that are incorrect. For example, Augmentin is a combination antibiotic consisting of amoxicillin and clavulanate and available in varying ratios of these two ingredients (4:1, 7:1 or 14:1 amoxicillin to clavulanate). While some situations require higher doses of amoxicillin, the corresponding higher dose of clavulanate may cause significant side effects. On the pediatric preference list, three most common Augmentin suspensions have the same dosing guidelines despite different drug proportions. The dosing recommendations for Augmentin should reflect the dosing guidelines in the literature.

2. **Some duration defaults are incorrect.**

Cefdinir is an antibiotic which can be prescribed for five or ten days at a time depending on the underlying ailment. The default duration in the pediatric preference list was neither five nor ten days, but seven. This required the prescriber to change the duration length every time it was ordered.

3. **Quick button options may be incorrect.**

The Discrete Sig system uses "quick buttons" (i.e. a limited set of predetermined choices) to select prescribing choices. Some of the button choices are incorrect. For example, dexamethasone, a steroid, is available in 1 mg, 2 mg, 4 mg, and 6 mg doses. However, one dose quick button that is standard for all dexamethasone formulations is 1.5 mg. While this might be appropriate for the 1 mg formulation, the 2 mg and 4 mg tablets cannot be split into 1.5 mg doses. The same issue is also found with capsule dose forms. Capsules cannot be split, and yet some quick button choices would require this.

**4. No standardization of dosing unit recommendations.**

The Discrete Sig module can accept daily doses and then split that to the per dose requirements. For example, suspension doses of amoxicillin can be ordered as mg/kg/day and the program will divide the dose into appropriate amounts for bid, tid or qid dosing as prescribed. Augmentin (amoxicillin-clavulanate) suspension, however, is dosed as mg/kg/dose based on the amoxicillin dose. This variation in dosing units, from mg/kg/day to mg/kg/dose, can lead to incorrect dosing. In addition, a dosing choice for a capsule or a tablet may also be in mg/kg/dose which may lead to doses incompatible with available formulations or higher doses than are acceptable.

**Rules for Preference Lists**

Once issues were identified, general rules were developed to guide revisions to the Pediatric Preference List. The following eight rules guided the rest of this project (Table 2).

1. HealthPartners advocates the triple aim of healthcare<sup>34</sup> so creating a better visual clue to distinguish generics from brand name medications is beneficial. Since the general rule in prescription writing is to capitalize brand names and use lowercase for generic medications, the new list was designed to display generics in lowercase letters and use uppercase for brand names. While the Federal Drug Administration recommends “tall man” letters to differentiate similar looking medications (e.g. predniSONE),<sup>35</sup> most pediatric medications would not be affected by applying this rule.

### Rules for preference lists

1. Generic medications should be displayed in lowercase, brand names in UPPERCASE.
2. Oral medications have an implied route which is not restated in the display name.
3. The display names will have one of the following two formats:
  - a. <Route (may be blank)><dose\_form><dose><generic\_name>
  - b. <Route (may be blank)><dose\_form> <dose><BRAND\_NAME><generic\_name>
4. Dosing units will be standardized with the following rules:
  - a. All suspensions should be measured in mg/kg/day.
  - b. Combination suspensions should be measured based on the main medication component.
  - c. Tablets and capsules should be measured in mg per dose.
5. Tablets can be broken, capsules cannot.
6. Abbreviations should be safe and intuitive.

Table 2. Proposed Preference List Rules

2. The route of a medication can vary for different formulations so some manner of making that information prominent in the display name is necessary. Routes include oral, topical, intranasal, otic, ophthalmic, rectal or vaginal. The default route would be oral, so for prescription formulations using oral routes, no route information needs to be included in the display name. Otherwise, the display name requires a route.
3. Because of the limited space in the display name column, the dose, dose form and route will be emphasized in display names in the new Preference List. Since a medication name is entered first by the user, the displayed list has already been filtered and the user already knows which medications are being displayed.

- Therefore, a logical new order becomes the route followed by the dose form, dose and then the name with brand name preceding generic name when appropriate.
4. Standardization of the dosing units is important for pediatric medications.  
  
Suspension medications are usually measured in mg/kg/day and then divided equally into a set frequency (e.g. daily, BID, TID, etc.). While some medications have a default in Discrete Sig of mg/kg/dose, the revised list recommends all suspensions to be ordered as mg/kg/day. In the case of a combination medication, such as amoxicillin/clavulanate or trimethoprim/sulfamethoxazole, the listing should follow the standard dosing guidelines. Other dose forms (e.g. capsules, tablets) should not be ordered as mg/kg/day in order to prevent unworkable divisions.
  5. Capsules are dose forms in which a medication is encompassed in a shell or container. They cannot be split so default dosing choices should not be less than the formulation's dose. Tablets are compressed dose forms of medications that can be swallowed, dissolved or chewed. Some tablets, but not all, can be split and dosing choices may allow for split tablets.
  6. Abbreviations for route and dose form will be revised or created. While the Institute for Safe Medication Practices <sup>36</sup> has created a list of error-prone abbreviations that should not be used, there are no industry standards for acceptable abbreviations. Abbreviations will be created to be both safe and intuitive.

### **Revision of the Pediatric Preference List**

After the rules were developed, the original spreadsheet from the Pediatric Preference List was reviewed and modified. New columns were added for an internal identifier, the new proposed display name, and the RxNorm code (see Appendix A for an

example of the updated spreadsheet). RxNorm is a naming standard for clinical drugs and can be linked to other pharmacology vocabularies.<sup>37</sup> It is part of the Unified Medical Language System (UMLS), which is maintained by the U.S. National Library of Medicine. Epic recommends identifying medications by the National Drug Code (NDC), which is maintained by the U.S. Federal Drug Administration.<sup>32,38</sup> However, the NDC identifies a specific manufactured drug product, whereas the RxNorm identifier codes to a specific drug class, and is used to prevent misidentification of medications.

Each individual entry in the list was evaluated. Entries were removed from the list if the medications were not commonly used in pediatrics, if they were non-prescription medications (with some notable exceptions such as acetaminophen, ibuprofen, and loratadine), if they were brand name drugs not commonly used, or if they were no longer manufactured. In addition, some entries were added for medications and medication formulations that were not initially present. In total, 584 entries were revised, deleted, or added to the spreadsheet. Three drug resources, Lexicomp's Pediatric & Neonatal Dosage Handbook, the Harriet Lane Handbook, and Epocrates, were used to review the individual medications and prescription formulations.<sup>39,40,41</sup> Specific dosing regimens were noted and attempts were made to have all reasonable choices available as quick buttons in the Discrete Sig interface. The revised spreadsheet of 504 entries is found in Appendix A.

Other Discrete Sig fields were evaluated in the spreadsheet including frequency, duration, amount dispensed, and number of refills. These fields were evaluated based on the drug references. Some of the amounts dispensed are calculated by the CPOE system, so in these cases the default choice was "calculate normal". For topical medications and

medicines with a standard dispense amount, these standard amounts were made the default. The list was also closely compared to recommendations in order to tag any discrepancies (e.g. a tablet medication whose dispense amount was in ml instead of tablets.) The duration and number of refills was empirically determined by clinical experience. Some drugs have a usual number of days of treatment such as azithromycin.

New medication display names were created based on the rules for preference list criteria (Table 2). Extraneous information was removed and no duplicate drugs were added to the list. One exception to the display name rules was made with topical steroids: the standard steroid potency classification (1 through 7) was included in the display name.

Once the spreadsheet was corrected, the new preference list was loaded into an Epic proof of concept (POC) training environment. Any proposed changes to the defaults such as different quick button recommendations were recorded.

## **Evaluation**

In order to test usability of the revised Pediatric Preference List, five test patients were created in the POC environment. Testing situations were devised using these patients (Table 3).

A convenience sample of eight physicians (7 pediatricians and 1 family practice physician) from HealthPartners were asked to participate in the evaluation, and all agreed. Testing was performed over a period of 1 week in April 2014 at the HealthPartners Clinic - Coon Rapids and at three RiverWay Clinics (Andover, Anoka and Elk River, all part of the HealthPartners medical group). Each physician was asked how many years they had been using Epic and what was their self-perceived skill level with



EpicCare. The physicians were then logged into the POC testing environment, which was already populated with the test subjects. They were asked to perform the same five tasks (Table 3) and their work was observed.

Prescribing Tasks
1. Kenneth is a 14-yr-old male (weight 70 kg). Please order him: <b>Adderall XR 20mg QD for 30 days.</b>
2. Annie is a 4-yr-old female (weight 20 kg). Please order her: <b>generic Bactrim (sulfamethoxazole-trimethoprim) twice daily for 10d</b>
3. Margaret is a 17-yr-old female (weight 50 kg). Please order her: <b>topical Bactroban ointment twice daily for 7 days</b>
4. Bif is a 10-yr-old male (weight 40 kg). Please order him: <b>albuterol inhaler, 2 puffs q4 hours</b>
5. Claire is a 2-yr-old female (weight 10 kg). Please order her: <b>generic Augmentin suspension for 10 days.</b>

Table 3 Prescribing Tasks

Once finished with these tasks, the participants were asked to complete a questionnaire about their experience (Figure 9). A follow up discussion was held 2 weeks later with some of the participants and their responses were recorded.

Question 1 asked each subject to what extent they agreed that the new preference list was noticeably different from the old preference list. The value of subsequent questions depended on a positive response (agree or strongly agree) to this Likert scale question. Questions 2 through 5 used the same Likert scale to rate the important basic features of the new preference list. The next two questions (Question 6 and 7) should correlate well with the prior four questions: if the new list considered improved based on the new basic features, then the subjects should see it as intuitive and preferable. Finally, the last question, Question 8, tested whether the subjects felt the new preference list should be used in production. Even if it is seen to be preferable, making a change to the new preference list may not be desirable to users.

Capstone: New Pediatric Preference Survey

**\* 1. The new pediatric medication preference list is noticeably different from the old preference list**

Strongly Disagree
Disagree
neither agree nor disagree
Agree
Strongly Agree

**\* 2. With the new preference list, finding the correct dose form (eg. Cap, Tab, Susp, etc.) is straightforward.**

Strongly disagree
Disagree
neither
Agree
Strongly agree

**\* 3. With the new preference list, choosing the correct medication dose (250mg, 250mg/5ml) is straightforward.**

Strongly disagree
Disagree
Neither agree nor disagree
Agree
Strongly agree

**\* 4. With the new preference list, the abbreviations are clear and intuitive (eg. Cap for Capsule, Susp for Suspension)**

Strongly disagree
Disagree
Neither
Agree
Strongly agree

**\* 5. With regard to the new preference list, it was easy to distinguish generic and brand medications**

Strongly disagree
Disagree
Neither agree nor disagree
Agree
Strongly agree

**\* 6. Overall, the new preference list is intuitive.**

☐ Yes
☐ No

**\* 7. The new preference list is preferable to the old preference list**

☐ Yes
☐ No

**\* 8. The new preference list should be integrated into the Epic.**

☐ Yes
☐ No

**9. What did you like the most with the new preference list?**

**10. What did you like least about the new preference list?**

Done

Figure 9. Screen shot of the online New Pediatric Preference Survey

## RESULTS

Four sessions of evaluation were conducted in April 2014 at three RiverWay clinic sites and one HealthPartners clinic. Eight physicians (seven pediatricians and one family practice physician) were asked to participate and all agreed.

Descriptive Statistics of Study Subjects	
Total no of subjects	8
Pediatricians (%)	7 (87%)
Female (%)	2 (25%)
Mean Years in Practice	22 yrs.
Mean Years Using Epic EHR	9.5 yrs.
Self-perceived skill level with EpicCare	
Beginner	0 (0%)
Intermediate	7 (87%)
Expert	1 (13%)

Table 4 Descriptive Statistics of Study Subjects

Table 4 shows the demographics of the subjects. The years in practice ranged from 4 to 33 years (mean 22 years), whereas the number of years using EpicCare ranged from 8 to 10 years (mean 9.5 years). Seven subjects rated themselves as intermediate in skill level with EpicCare and one rated himself as an expert.

Completion of the test cases was observed with each subject. All subjects ordered the medications correctly with the exception of two subjects whom ordered brand rather than generic Augmentin for test case #5.

After the test cases, each subjects was asked to complete the online survey. Seven subjects (88%) responded.

Question 1 asked the subjects to rate how much of a difference they noted with the new preference list compared to the old preference list. Three subjects agreed or strongly agreed that there was a noticeable difference, two were uncertain, and two disagreed or strongly disagreed that there was a noticeable difference. These results are difficult to interpret given responses to questions asked later in the survey. The one subject who disagreed that there was a difference showed consistency by not agreeing that that the new preference list was preferable to the old preference list or that it should be incorporated into Epic at this time. Three of the subjects (two who were uncertain, one who strongly disagreed) did agree that the new preference list was preferable and that it should be incorporated. If these three subjects were equivocal or in strong disagreement of any perceptible change in the preference lists, then they logically should not have preferred the new preference list to the old.

Questions 2 through 5 examined specific enhancements made to the new preference list. Two subjects disagreed or strongly disagreed that the enhancements were helpful (i.e. that finding the dose form or correct medication dose is straightforward, that the abbreviations are clear and intuitive, and that it is easy to distinguish generic and brand names). These two subjects also disagreed or strongly disagreed that there was a noticeable difference between new and old preference lists in Question 1. One subject who was uncertain about the noticeable difference also was uncertain about each of these enhancements. The other four subjects rated the enhancements positively except for one subject who was equivocal regarding the ease of identifying generic versus brand names.

Overall, all but one subject felt that the new preference list were intuitive, that the new list was preferable to the old list, and that the new preference list should be

integrated into the working EHR. The one subject who disagreed with these statements also had disagreed that there were noticeable differences from the old preference list. The internal consistency of the survey questions was measured by Cronbach's alpha. Cronbach's alpha is a measure of reliability "used to determine how much the items on a scale are measuring the same underlying dimension."<sup>42</sup> Questions 2-6 (which dealt with specific enhancements and the straightforwardness of the new preference list) showed a strong internal consistency with a Cronbach's alpha of 0.821. Another test of consistency used was Fleiss' Kappa, which measures the reliability of agreement between raters<sup>43</sup>. The Kappa for the seven subjects was 0.1947, (95% CI 0.1255-0.2638). Kappa less than 0.2 suggest a poor agreement amongst the raters.

Subjects were also asked to comment on what they liked most and least about the new preference list. The features they liked most included "dosing forms at beginning," "easy to find desired medications," "brand name vs. generic clearly identified", and the comment, "I do not see a whole lot of improvement. I do like the warnings if the medication dosing is not standard, so that I can choose another dosing if desired." Comments regarding what they liked least about the new preference list were: "different than what I'm used to," and [with]"a lot of the medications, I have to change them to get what I want for the patient."

A follow up interview with five of the subjects provided more insight. In their opinion, the new preference list was preferable because the new list allows you to "get to the medications faster." Efficiency was a common theme: the new list "was faster and there [were] fewer choices with a lot of the extraneous meds weeded out." They also felt that the new display names made it easier to find the right dose and dose form.

Some, however, thought the limited scope of the test cases made it difficult to assess: "I didn't notice many changes but I think [the new list] is more efficient, but would need to use it more than the three minutes during the trial... You get used to doing it one way, and [the medications] look similar but you know that they are different but there is not a lot of time to wrap your mind around the real differences but there were clear differences. If you install this, this would be more faster [because] it's just too unwieldy [with the list now]."

The subjects also discussed other aggravations with the current list. "The Sigs drive me crazy. The Sigs are the issue." One subject pointed out that the insurance information is incorrect with many medications on the formulary, which makes it difficult to determine if it should be prescribed. Another issue was the lack of precision with the preference list. "If you type Adderall XR 10 [mg], it will pull up 20 mg [tabs]" and "Methylphenidate ER will only pull up a 20 mg [tabs]. You have to search for the 10 mg."

## DISCUSSION

Computerized physician order entry has been shown to reduce medication errors and adverse drug events. Implemented properly, it should improve the clinician experience while reducing potential errors. The rules for naming and validating orderable medications in preference lists for EpicCare have been developed in an attempt to accomplish that goal. The brief evaluation and survey of end users in the pediatric and family practice departments suggest that the revised preference list is preferable to the current list.

The survey yielded some interesting results. While 42 percent of the respondents perceived a notable difference in the preference lists, a majority did not think there was much difference. Despite this outcome, however, there was still overwhelming support for the new preference list. This result is counterintuitive. We know that changes in user interfaces are often not accepted regardless of their inherent worthiness. Certainly, there have been instances when consumers have been dissuaded by a dramatic revision in an operating system's functioning and interface. Microsoft's Windows 8 operating system was released a few years ago amid a radical reimagining, which has turned the public off from upgrading their operating systems.<sup>44</sup> At HealthPartners, one common complaint is that the EHR workflow changes too often, making it difficult for clinicians to be efficient. It is possible that the proposed changes were accepted because they are not a radical departure from what clinicians are used to seeing and because of the improved value of those changes. As some participants stated in the interviews, "[T]here were clear differences. If you install this, this would be more faster [because] it's just too unwieldy" with the current list.

There were some unintended consequences with the new preference list. The proposed display name placed the dose form first before the dose and medication name. In theory, the preference list order for a sample of prescription formulations should appear as shown in Figure 10, alphabetically.

Cap 250mg amoxicillin
Cap 500mg amoxicillin
Chew 125mg amoxicillin
Chew 250 mg amoxicillin
Susp 125mg/5ml amoxicillin
Susp 200mg/5ml amoxicillin
Susp 250mg/5ml amoxicillin
Susp 500mg/5ml amoxicillin

Figure 10. Theoretical preference list order.

Instead, the Preference list order is based on the dose regardless of where it is in the display name. This order results in a more disjointed preference list (Figure 11).

Chew 125mg amoxicillin
Susp 125mg/5ml amoxicillin
Susp 200mg/5ml amoxicillin
Cap 250mg amoxicillin
Chew 250mg amoxicillin
Susp 250mg/5ml amoxicillin
Susp 400mg/5ml amoxicillin
Cap 500mg amoxicillin

Figure 11. The new preference list order in production. © 2014 Epic Systems Corporation. Used with permission

The seeming randomness of the medication order makes it more difficult to locate the correct medication formulation. One solution to the list order problem would be to reorder the display names as: <dose><Route (optional)> <dose\_form><Brand\_Name (optional)><generic\_name>. Amoxicillin 250 mg capsules would then be displayed as “250mg Cap amoxicillin”.



The visual cues in the display name for choosing between generic and brand name medications were not as obvious as intended. While one physician expressed appreciation with the name configuration (i.e. <BRAND NAME> <generic name>), a few participants were noted to choose a generic medication based on the information in the Type column (which lists generic or brand), on which they have relied in the past. Clinician's reliance on the Type column to determine generic status may result in prescribing more expensive medications, since the Type data is frequently incorrect. It is also possible that need to use this field was caused by problems with the test cases.

Several problems were noted during this project that cannot be solved simply by modification of the preference lists. Instead they will require changes made either by the vendor or by the organization as a whole. The first of these is the width of the display name column. The shortened and simplified display names should allow the Name column width on any screen to be adequate. However, this is not guaranteed. Standardization of the field widths in any view would be necessary to assure that the entire display name is viewable.

The second problem to be discussed with the organization is the ordering of lists alphabetically and not by dose. If possible, this is preferable to changing the order of display name components. The third problem is the "quick button" values, which are set by the system and not configurable. Many of these were found to be in error for a variety of reasons based on the rules developed.

The Preference List Composer defaults were edited in the POC environment. The project did not specifically test the validity of these edits. Sig defaults for medications were based on the pediatric literature and on the editor's clinical experience but may not

reflect all formulations used. For example, oral medications most always are taken orally so the route default seems reasonable. Other routes may not be as unique, however, such as ophthalmic solutions that can also be used in the ear. Extended release stimulant medications used for attention deficit disorder are dispensed usually for a month supply, so defaulting a dispense amount of thirty tablets or capsules and setting the frequency to daily makes sense. However, medications that patients use intermittently over the course of six months or a year could have a duration of 365 days so that the prescription would not state a set duration. Evaluation of completeness of the preference list would be advised. The system must either be complete or allow for easy modification of prescription formulations.

## **Limitations**

A majority of subjects approved the new preference list and display name configuration, but this response may not reflect the whole HealthPartners pediatric department. Participant bias also may have influenced the results since some participants knew more about the project than others. Moreover, the evaluation process was limited to only five different medications and prescribing situations. Repeated use of the new preference list may yield more insight and recommendations for improving the functionality.

## **CONCLUSION**

Computerized physician order entry (CPOE) of medication orders has been shown to decrease medication errors. Medication errors can occur because of confusing or incorrect display names or prescription formulations in the CPOE system. This project evaluated an Epic Systems pediatric medication preference list for a large healthcare organization. A review of the current composition of the list was performed and some basic guidelines and principles were developed to revise the list. The hallmark of the revised list is a new schema for the display name that emphasizes the dose form and dose of the orderable drug. The new preference list was evaluated and generally approved of by a small group of experienced subjects.

The recommendations developed for modifying medication preference lists can be used as guidelines for standardizing preference lists throughout the organization. They can be adapted for different department's needs. Further refinement of the recommendations is suggested to improve the preferences lists and thus come closer to the goal of reducing prescribing errors.

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## Appendix A

Revised Preference List Spreadsheet			
ID	RXNORM	ID No	CURRENT MEDICATION DISPLAY NAME
1	198439	200132	acetaminophen 500mg Caplet
2	307696	200133	acetaminophen 80mg Chew
3	313820	211141	acetaminophen 160mg Chew
4	307675	221017	acetaminophen 160mg/5ml elixir
5	198439	200192	acetaminophen 500mg Gelcap
6	198445	211146	acetaminophen 80mg Suppository
7	198434	200139	acetaminophen 120mg Suppository
8	198437	200140	acetaminophen 325mg Suppository
9	198443	200141	acetaminophen 650mg Suppository
10	307668	211143	acetaminophen 160mg/5ml Suspension
11	313782	200136	acetaminophen 325mg Tabs
12	198440	200132	acetaminophen 500mg Tab
13	198444	236323	acetaminophen 650mg Tab
14	352051	237661	ACCUNEB neb soln 1.25 mg/ 3 ml (0.042%)
15	197310	211181	acyclovir 200mg Cap
16	141859	240166	acyclovir 5% Cream
17	197392	211180	acyclovir 5% Ointment
18	307730	211182	acyclovir 200mg/5ml Susp
19	197311	211183	acyclovir 400mg Tab
20	197313	211184	acyclovir 800mg Tab
21	541879	226017	ADDERALL 5mg Tab
22	1009147	234949	ADDERALL 7.5mg Tab
23	541894	227911	ADDERALL 10mg Tab
25	577960	234968	ADDERALL 15mg Tab
26	577962	227912	ADDERALL 20mg Tab
27	541365	227913	ADDERALL 30mg Tab
28	861238	239162	ADDERALL XR 5mg Cap
29	861222	237665	ADDERALL XR 10mg Cap
30	861224	239163	ADDERALL XR 15mg Cap
31	861226	23766	ADDERALL XR 20mg Cap
32	861228	239164	ADDERALL XR 25mg Cap
33	861233	237667	ADDERALL XR 30mg Cap
34	313852	234173	adapalene 0.1% Cream
35	307731	221041	adapalene 0.1% Gel
36	722111	287003	adapalene 0.3% Gel
37	905385	308675	adapalene 0.1% Lotion
38	896185	235615	ADVAIR (fluticasone/salmeterol) 100mcg/50mcg Diskus
39	896212	235619	ADVAIR (fluticasone/salmeterol) 250mcg/50mcg Diskus
40	896229	235620	ADVAIR (fluticasone/salmeterol) 500mcg/50mcg Diskus



## Appendix A

Revised Preference List Spreadsheet	
ID	NEW MEDICATION DISPLAY NAME
1	Caplet 500mg acetaminophen
2	Chew 80mg acetaminophen
3	Chew 160mg acetaminophen
4	Elix 160mg/5ml acetaminophen
5	Gelcap 500mg acetaminophen
6	Supp 80mg acetaminophen
7	Supp 120mg acetaminophen
8	Supp 325mg acetaminophen
9	Supp 650mg acetaminophen
10	Susp 160mg/5ml acetaminophen
11	Tab 325mg acetaminophen
12	Tab 500mg acetaminophen
13	Tab 650mg acetaminophen
14	Neb 1.25mg/ 3ml ALBUTEROL (albuterol) (0.042%)
15	Cap 200mg acyclovir
16	Cream 5% acyclovir
17	Oint 5% acyclovir
18	Susp 200mg/5ml acyclovir
19	Tab 400mg acyclovir
20	Tab 800mg acyclovir
21	Tab 5mg ADDERALL (amphetamine/dextroamphetamine)
22	Tab 7.5mg ADDERALL (amphetamine/dextroamphetamine)
23	Tab 10mg ADDERALL (amphetamine/dextroamphetamine)
25	Tab 15mg ADDERALL (amphetamine/dextroamphetamine)
26	Tab 20mg ADDERALL (amphetamine/dextroamphetamine)
27	Tab 30mg ADDERALL (amphetamine/dextroamphetamine)
28	Ext Rel Cap 5mg ADDERALL XR (amphetamine/dextroamphetamine)
29	Ext Rel Cap 10mg ADDERALL XR (amphetamine/dextroamphetamine)
30	Ext Rel Cap 15mg ADDERALL XR (amphetamine/dextroamphetamine)
31	Ext Rel Cap 20mg ADDERALL XR (amphetamine/dextroamphetamine)
32	Ext Rel Cap 25mg ADDERALL XR (amphetamine/dextroamphetamine)
33	Ext Rel Cap 30mg ADDERALL XR (amphetamine/dextroamphetamine)
34	Ext Cream 0.1% adapalene
35	Ext Gel 0.1% adapalene
36	Ext Gel 0.3% adapalene
37	Ext Lot 0.1% adapalene
38	Dry Powd Inh 100mcg/50mcg ADVAIR (fluticasone/salmeterol) DISKUS
39	Dry Powd Inh 250mcg/50mcg ADVAIR (fluticasone/salmeterol) DISKUS
40	Dry Powd Inh 500mcg/50mcg ADVAIR (fluticasone/salmeterol) DISKUS

## Appendix A

Revised Preference List Spreadsheet									
ID	Sig	Dose		Route	Frequency	For	Dispense		Refill
1	Specify	500	mg	Oral	Q4H PRN	365 Days	50	Each	0
2	Specify	80	mg	Oral	Q4H PRN	365 Days	50	Each	0
3	Specify	160	mg	Oral	Q4H PRN	365 Days	50	Each	0
4	Specify	15	mg/kg/do	Oral	Q4H PRN	365 Days	60	ml	0
5	Specify	500	mg	Oral	Q4H PRN	365 Days	50	Each	0
6	Specify	80	mg	Rectal	Q4H PRN	365 Days	6	Each	0
7	Specify	120	mg	Rectal	Q4H PRN	365 Days	6	Each	0
8	Specify	325	mg	Rectal	Q4H PRN	365 Days	6	Each	0
9	Specify	650	mg	Rectal	Q4H PRN	365 Days	6	Each	0
10	Specify	15	mg/kg/do	Oral	Q4H PRN	365 Days	60	ml	0
11	Specify	325	mg	Oral	Q4H PRN	365 Days	50	Each	0
12	Specify	500	mg	Oral	Q4H PRN	365 Days	50	Each	0
13	Specify	650	mg	Oral	Q4H PRN	365 Days	50	Each	0
14	Specify	1.25	mg	Inhalation	Q4H PRN	365 Days	30	Each	0
15	Free Text			Oral		10 Days	50	Tab	0
16	Free Text			Topical		7 Days	Calculate		0
17	Free Text			Topical		7 Days	2	g	0
18	Free Text			Oral		7 Days	15	g	0
19	Free Text			Oral		7 Days	Calculate		0
20	Free Text			Oral		7 Days	Calculate		0
21	Specify	5	mg	Oral	BID	30 Days	Calculate		0
22	Specify	7.5	mg	Oral	BID	30 Days	Calculate		0
23	Specify	10	mg	Oral	BID	30 Days	Calculate		0
25	Specify	15	mg	Oral	BID	30 Days	Calculate		0
26	Specify	20	mg	Oral	BID	30 Days	Calculate		0
27	Specify	30	mg	Oral	BID	30 Days	Calculate		0
28	Specify	5	mg	Oral	Morning	30 Days	Calculate		0
29	Specify	10	mg	Oral	Morning	30 Days	Calculate		0
30	Specify	15	mg	Oral	Morning	30 Days	Calculate		0
31	Specify	20	mg	Oral	Morning	30 Days	Calculate		0
32	Specify	25	mg	Oral	Morning	30 Days	Calculate		0
33	Specify	30	mg	Oral	Morning	30 Days	Calculate		0
34	Specify	0.25	Inch	Topical	QHS	365 Days	45	gm	0
35	Specify	0.25	Inch	Topical	QHS	365 Days	45	gm	0
36	Specify	0.25	Inch	Topical	QHS	365 Days	45	gm	0
37	Specify	0.25	Inch	Topical	QHS	365 Days	15	gm	0
38	Specify	1	Puff	Inhalation	BID	365 Days	60	Blisters	0
39	Specify	1	Puff	Inhalation	BID	365 Days	60	Blisters	0
40	Specify	1	Puff	Inhalation	BID	365 Days	60	Blisters	0

## Appendix A

ID	RXNORM	ID No	CURRENT MEDICATION DISPLAY NAME
41	896235	276591	ADVAIR (fluticasone/salmeterol) 45mcg/21mcg HFA Inhaler
42	896245	276592	ADVAIR (fluticasone/salmeterol) 115mcg/21mcg Inhaler
43	896271	276593	ADVAIR (fluticasone/salmeterol) 230mcg/21mcg Inhaler
45	351137	237652	albuterol nebulizer soln 0.63 mg/3 ml (0.0042%)
46	351136	237653	albuterol nebulizer soln 1.25 mg/3 ml (0.0042%)
47	346188	200319	albuterol nebulizer soln 2.5 mg/3 ml (0.0083%)
48	755497	200322	albuterol 2mg/ 5ml syrup
49	308182	200550	amoxicillin 250mg Caps
50	308191	200551	amoxicillin 500mg Caps
51	308177	211308	amoxicillin 125mg Chewable Tab
52	598025	200552	amoxicillin 250mg Chewable Tab
53	802550	296292	amoxicillin 775mg Extended Release Tab
54	313797	200553	amoxicillin 125mg/5ml Susp
55	313850	230538	amoxicillin 200mg/5ml Susp
56	239191	200554	amoxicillin 250mg/5ml Susp
57	308189	230539	amoxicillin 400mg/5ml Susp
58	308192	221567	amoxicillin 500mg Tab
59	308194	228566	amoxicillin 875MG Tab
60	617302	211311	amox/clavulanate 125mg:31.25mg/5ml Susp
61	617423	239411	amox/clavulanate 200mg:28.5mg/5ml Susp
62	617322	211312	amox/clavulanate 250mg:62.5mg/5ml Susp
63	617430	239412	amox/clavulanate 400mg:57mg/5ml Susp
64	617993	237207	amoxi/clavulanate 600mg:42.9mg/5ml Susp
65	562251	239307	amoxicillin/clavulanate 250mg:125mg Tab
66	617296	239409	amoxicillin/clavulanate 500mg:125mg Tab
67	562508	239410	amoxicillin/clavulanate 875mg:125mg Tab
68	617995	240235	amoxicillin/clavulanate1000mg/62.5mg Tab
69	861221	225957	amphetamine salts + dextroamphetamine 5mg Tab
70	1009145	234945	amphetamine salts + dextroamphetamine 7.5mg Tab
71	541892	211315	amphetamine salts + dextroamphetamine 10mg Tab
72	687043	234946	amphetamine salts + dextroamphetamine 12.5mg Tab
73	577957	234947	amphetamine salts + dextroamphetamine 15mg Tab
74	577961	211316	amphetamine salts + dextroamphetamine 20mg Tab
75	541363	226662	amphetamine salts + dextroamphetamine 30mg Tab
76	861237	239152	Release Capsules
77	861221	237662	Release Capsules
78	861223	239153	Release Capsules
79	861225	237663	Release Capsules
80	861227	239154	Release Capsules
81	861323	237664	Release Capsules
82	244309	200701	antipyrine-benzocaine 5.4-1.4% Otic Soln
83	995243	204771	ATARAX (hydroxyzine) HCL 10 MG/5ML OR SYRP
84	995220	204772	ATARAX (hydroxyzine) HCL 10 MG OR Tab

## Appendix A

ID	NEW MEDICATION DISPLAY NAME
41	Inh 45mcg/21mcg ADVAIR (fluticasone/salmeterol) HFA
42	Inh 115mcg/21mcg ADVAIR (fluticasone/salmeterol) HFA
43	Inh 230mcg/21mcg ADVAIR (fluticasone/salmeterol) HFA
45	Neb 0.63mg/ 3ml albuterol (0.0083%)
46	Neb 1.25mg/ 3ml albuterol (0.0042%)
47	Neb 2.5mg/ 3ml albuterol (0.0083%)
48	Oral Syr 2mg/ 5ml albuterol
49	Cap 250mg amoxicillin
50	Cap 500mg amoxicillin
51	Chew 125mg amoxicillin
52	Chew 250mg amoxicillin
53	Ext Rel Tab 775mg amoxicillin
54	Susp 125mg/5ml amoxicillin
55	Susp 200mg/5ml amoxicillin
56	Susp 250mg/5ml amoxicillin
57	Susp 400mg/5ml amoxicillin
58	Tab 500mg amoxicillin
59	Tab 875mg amoxicillin
60	Susp 125mg:31.25mg/5ml amoxicillin/clavulanate
61	Susp 200mg:28.5mg/5ml amox/clavulanate
62	Susp 250mg:62.5mg/5ml amox/clavulanate
63	Susp 400mg:57mg/ 5ml amoxicillin/clavulanate
64	Susp 600mg:42.9mg/5ml amoxicillin/clavulanate
65	Tab 250mg:125mg amoxicillin/clavulanate
66	Tab 500mg:125mg amoxicillin/clavulanate
67	Tab 875mg:125mg amoxicillin/clavulanate
68	Tab 1000mg:62.5mg amoxicillin/clavulanate
69	Tab 5mg amphetamine salts + dextroamphetamine
70	Tab 7.5mg amphetamine salts + dextroamphetamine
71	Tab 10mg amphetamine salts + dextroamphetamine
72	Tab 12.5mg amphetamine salts + dextroamphetamine
73	Tab 15mg amphetamine salts + dextroamphetamine
74	Tab 20mg amphetamine+dextroamphetamine
75	Tab 30mg amphetamine salts + dextroamphetamine
76	Ext Rel Cap 5mg amphetamine salts + dextroamphetamine
77	Ext Rel Cap 10mg amphetamine salts + dextroamphetamine
78	Ext Rel Cap 15mg amphetamine salts + dextroamphetamine
79	Ext Rel Cap 20mg amphetamine salts + dextroamphetamine
80	Ext Rel Cap 25mg amphetamine salts + dextroamphetamine
81	Ext Rel Cap 30mg amphetamine salts + dextroamphetamine
82	Otic Soln 5.4%-1.4% antipyrine-benzocaine
83	Syrp 10mg/5ml ATARAX (hydroxyzine)
84	Tab 10mg ATARAX (hydroxyzine)

## Appendix A

ID	Sig	Dose	Route	Frequency	For	Dispense	Refill
41	Specify	2 Puff	Inhalation	BID	365 Days	12 gm (12	0
42	Specify	2 Puff	Inhalation	BID	365 Days	12 gm (12	0
43	Specify	2 Puff	Inhalation	BID	365 Days	12 gm (12	0
45	Specify	0.63 mg	Inhalation	Q4H	365 Days	60 ml	0
46	Specify	1.25 mg	Inhalation	Q4H	365 Days	60 ml	0
47	Specify	2.5 mg	Inhalation	Q4H	365 Days	60 ml	0
48	Specify	0.3 mg/kg/d	Oral	TID	10 Days	Calculate	0
49	Specify	250 mg	Oral	BID	10 Days	Calculate	0
50	Specify	500 mg	Oral	BID	10 Days	Calculate	0
51	Specify	125 mg	Oral	BID	10 Days	Calculate	0
52	Specify	250 mg	Oral	BID	10 Days	Calculate	0
53	Specify	775 mg	Oral	Daily	10 Days	10 Tab	0
54	Specify	90 mg/kg/d	Oral	BID	10 Days	Calculate	0
55	Specify	90 mg/kg/d	Oral	BID	10 Days	Calculate	0
56	Specify	90 mg/kg/d	Oral	BID	10 Days	Calculate	0
57	Specify	90 mg/kg/d	Oral	BID	10 Days	Calculate	0
58	Specify	500 mg	Oral	BID	10 Days	Calculate	0
59	Specify	875 mg	Oral	BID	10 Days	Calculate	0
60	Specify	20 mg/kg/d (a)	Oral	Q8H	10 Days	Calculate	0
61	Specify	25 mg/kg/d (a)	Oral	Q12H	10 Days	Calculate	0
62	Specify	20 mg/kg/d (a)	Oral	Q8H	10 Days	Calculate	0
63	Specify	25 mg/kg/d (a)	Oral	Q12H	10 Days	Calculate	0
64	Specify	90 mg/kg/d (a)	Oral	Q12H	10 Days	Calculate	0
65	Specify	750 mg/kg/d (a)	Oral	Q8H	10 Days	Calculate	0
66	Specify	1500 mg/d (a)	Oral	Q8H	10 Days	Calculate	0
67	Specify	1750 mg/d (a)	Oral	Q12H	10 Days	Calculate	0
68	Specify	2000 mg/d (a)	Oral	Q12H	10 Days	Calculate	0
69	Specify	5 mg	Oral	BID	30 Days	Calculate	0
70	Specify	7.5 mg	Oral	BID	30 Days	Calculate	0
71	Specify	10 mg	Oral	BID	30 Days	Calculate	0
72	Specify	12.5 mg	Oral	BID	30 Days	Calculate	0
73	Specify	15 mg	Oral	BID	30 Days	Calculate	0
74	Specify	20 mg	Oral	BID	30 Days	Calculate	0
75	Specify	30 mg	Oral	BID	30 Days	Calculate	0
76	Specify	5 mg	Oral	Morning	30 Days	Calculate	0
77	Specify	10 mg	Oral	Morning	30 Days	Calculate	0
78	Specify	15 mg	Oral	Morning	30 Days	Calculate	0
79	Specify	20 mg	Oral	Morning	30 Days	Calculate	0
80	Specify	25 mg	Oral	Morning	30 Days	Calculate	0
81	Specify	30 mg	Oral	Morning	30 Days	Calculate	0
82	Specify	3 Drop	Otic	Q2H PRN	3 Days	10 ml	0
83	Specify	2 mg/kg/d	Oral	TID	10 Days	Calculate	0
84	Specify	10 mg	Oral	TID	10 Days	Calculate	0

## Appendix A

ID	RXNORM	ID No	CURRENT MEDICATION DISPLAY NAME
85	995264	204774	ATARAX (hydroxyzine) HCL 25 MG OR Tab
86	995283	204775	ATARAX (hydroxyzine) HCL 50 MG OR Tab
87	824178	221369	Chewable Tab
88	617333	217890	Susp
89	617425	239411	Susp
90	617229	217891	Susp
91	617432	239412	Susp
92	618028	237350	600mg:42.9mg/5ml Susp
93	824186	217892	AUGMENTIN (amoxicillin/clavulanic acid) 250mg:125mg Tab
94	824190	217893	AUGMENTIN (amoxicillin/clavulanic acid) 500mg:125mg Tab
95	824194	220355	AUGMENTIN (amoxicillin/clavulanic acid) 875mg:125mg Tab
96	861689	240069	Tab
97	241040	316325	Auralgan (ANTIPYRINE-BENZOCAINE 5.4-1.4 %) OTIC SOLN
98	308459	219647	azithromycin 100mg/5ml Susp
99	141963	219648	azithromycin 200mg/5ml Susp
100	308460	225559	azithromycin 250 mg Tab
101	248656	239304	azithromycin 500mg Tab
102	204844	221493	azithromycin 600mg Tab
103	749783	236720	azithromycin 250mg Tab (Z-PAK)
104	749780	240348	azithromycin 500mg Tab (TRI-PAK)
105	577378	269910	azithromycin 2g Ext Release Supsension (ZMAX)
106	208416	201102	BACTRIM (sulfamethoxazole-trimethoprin) 400mg:80mg Tab
107	849580	201103	BACTRIM DS 800mg:160mg Tab
108	213182	227155	BACTROBAN (mupirocin) 2% Cream
109	108758	221006	BACTROBAN NASAL (mupirocin) 2% Intranasal Ointment
110	103570	201104	BACTROBAN (mupirocin) 2% Ointment
111	966536	234707	beclomethasone 40mcg Inhaler
112	966540	234708	beclomethasone 80mcg Inhaler
113	1049910	306360	BENADRYL (diphenhydramine) 25mg Capsules
114	1049725	227378	BENADRYL (diphenhydramine) 1% Topical Gel
115	1049882	255384	BENADRYL (diphenhydramine) 2% Topical Gel
116	1049908	276249	BENADRYL (diphenhydramine) 12.5mg/5ml Syrup
117	1049632	201205	BENADRYL (diphenhydramine) 25mg Tab
118	284544	235373	BENZACLIN (clindamycin/benzoyl peroxide) 1%/5% Top Gel
119	351109	234460	budesonide 0.25mg/2ml Neb Susp
120	252559	234461	budesonide 0.5mg Neb Susp
121	692477	284266	budesonide 90mcg Inhaler
122	692474	284265	budesonide 180mcg Inhaler
123	1246288	286117	budesonide/formoterol 80mcg/4.5mcg Inhaler
124	1246304	286118	budesonide/formoterol 160mcg/4.5mcg Inhaler
125	315498	232443	budesonide 32mcg Nasal Spay
126	702050	201715	carbamide peroxide 6.5% Otic Soln
127	884175	201788	CATAPRESS (clonidine) 0.1mg Tab



## Appendix A

ID	NEW MEDICATION DISPLAY NAME
85	Tab 25mg ATARAX (hydroxyzine)
86	Tab 50mg ATARAX (hydroxyzine)
87	Chew 400mg:57mg AUGMENTIN (amoxicillin/clavulanic acid)
88	Susp 125mg:31.25mg/5ml AUGMENTIN (amoxicillin/clavulanic acid)
89	Susp 200mg:28.5mg/5ml AUGMENTIN (amoxicillin/clavulanic acid)
90	Susp 250mg:62.5mg/5ml AUGMENTIN (amoxicillin/clavulanic acid)
91	Susp 400mg:57mg/ 5ml AUGMENTIN (amoxicillin/clavulanic acid)
92	Susp 600mg:42.9mg/5ml AUGMENTIN (amoxicillin/clavulanic acid)
93	Tab 250mg:125mg AUGMENTIN (amoxicillin/clavulanic acid)
94	Tab 500mg:125mg AUGMENTIN (amoxicillin/clavulanic acid)
95	Tab 875mg:125mg AUGMENTIN (amoxicillin/clavulanic acid)
96	Tab 1000mg:62.5mg AUGMENTIN (amoxicillin/clavulanic acid)
97	Otic Soln 5.4%-1.4% AURALGAN (antipyrine-benzocaine)
98	Susp 100mg/5ml azithromycin
99	Susp 200mg/5ml azithromycin
100	Tab 250mg azithromycin
101	Tab 500mg azithromycin
102	Tab 600mg azithromycin
103	Tab 250mg azithromycin (Z-PAK)
104	Tab 500mg azithromycin (TRI-PAK)
105	Ext Rel Susp 2g azithromycin (ZMAX)
106	Tab 400mg:80mg BACTRIM (sulfamethoxazole/trimethoprim)
107	Tab 800mg:160mg BACTRIM (sulfamethoxazole/trimethoprim)
108	Top Crm 2% BACTROBAN (mupirocin)
109	IntrNas Oint 2% BACTOBAN (mupirocin)
110	Top Oint 2% BACTROBAN (mupirocin)
111	Inh 40mcg beclomethasone
112	Inh 80mcg beclomethasone
113	Caps 25mg BENADRYL (diphenhydramine)
114	Top Gel 1% BENADRYL (diphenhydramine)
115	Top Gel 2% BENADRYL (diphenhydramine)
116	Syr 12.5mg BENADRYL (diphenhydramine)
117	Tab 25mg BENADRYL (diphenhydramine)
118	Top Gel 1%/5% BENZACLIN (clindamycin/benzoyl peroxide)
119	Neb 0.25mg/2ml budesonide
120	Neb 0.5mg/2ml budesonide
121	Inh 90mcg budesonide
122	Inh 180mcg budesonide
123	Inh 80 mcg/6mcg budesonide/formoterol
124	Inh 160 mcg/4.5mcg budesonide/formoterol
125	Nas Spray 32mcg budesonide
126	Otic Soln 6.5% carbamide peroxide
127	Tab 0.1mg CATAPRESS (clonidine)

## Appendix A

ID	Sig	Dose	Route	Frequency	For	Dispense	Refill
85	Specify	25 mg	Oral	TID	10 Days	Calculate	0
86	Specify	50 mg	Oral	TID	10 Days	Calculate	0
87	Specify	25 mg/kg/d (a)	Oral	Q12H	10 Days	Calculate	0
88	Specify	20 mg/kg/d (a)	Oral	Q8H	10 Days	Calculate	0
89	Specify	25 mg/kg/d (a)	Oral	Q12H	10 Days	Calculate	0
90	Specify	20 mg/kg/d (a)	Oral	Q8H	10 Days	Calculate	0
91	Specify	25 mg/kg/d (a)	Oral	Q12H	10 Days	Calculate	0
92	Specify	90 mg/kg/d (a)	Oral	Q12H	10 Days	Calculate	0
93	Specify	750 mg/d (a)	Oral	Q8H	10 Days	Calculate	0
94	Specify	1500 mg/d (a)	Oral	Q8H	10 Days	Calculate	0
95	Specify	1750 mg/d (a)	Oral	Q12H	10 Days	Calculate	0
96	Specify	2000 mg/d (a)	Oral	Q12H	10 Days	Calculate	0
97	Specify	3 Drop	Otic	Q2H PRN	3 Days	10 ml	0
98	Specify	10 mg/kg/d	Oral	Daily	5 Days	Calculate	0
99	Specify	10 mg/kg/d	Oral	Daily	5 Days	Calculate	0
100	Specify	500 mg	Oral	Daily	5 Days	Calculate	0
101	Specify	500 mg	Oral	Daily	5 Days	Calculate	0
102	Specify	600 mg	Oral	Daily	5 Days	Calculate	0
103	Specify	dose 500mg day1	Oral	Daily	5 Days	5 Tab	0
104	Specify	500 mg	Oral	Daily	3 Days	3 Tab	0
105	Specify	60 mg/kg	Oral	Daily	1 Day	60 ml	0
106	Specify	2 Tab	Oral	Q12H	10 Days	40 Tab	0
107	Specify	1 Tab	Oral	Q12H	10 Days	20 Tab	0
108	Free Text		Topical	TID	10 Days	15 gm	0
109	Free Text		Intranasal	TID	10 Days	1 gm	0
110	Free Text		Topical	TID	10 Days	22 gm	0
111	Specify	1 Puff	Inhalation	BID	365 Days	7.3 gm	6
112	Specify	1 Puff	Inhalation	BID	365 Days	7.3 gm	6
113	Specify	25 mg	Oral	Q6H PRN	365 Days	30 Cap	0
114	Free Text		Topical	TID PRN	365 Days	14.2 gm	0
115	Free Text		Topical	TID PRN	365 Days	120 ml	0
116	Specify	12.5 mg	Oral	Q6H PRN	365 Days	30 Tab	0
117	Specify	25 mg	Oral	Q6H PRN	365 Days	30 Tab	0
118	Free Text		Topical	BID	365 Days	25 gm	6
119	Specify	2 ml	Inhalation	BID	365 Days	60 ml	6
120	Specify	2 ml	Inhalation	BID	365 Days	60 ml	6
121	Specify	1 Puff	Inhalation	BID	365 Days	165 gm	6
122	Specify	1 Puff	Inhalation	BID	365 Days	225 gm	6
123	Specify	2 Inhalations	Inhalation	BID	365 Days	60 doses	6
124	Specify	2 Inhalations	Inhalation	BID	365 Days	60 doses	6
125	Specify	1 Spray	Both nostril	Daily	365 Days	8.3 gm	6
126	Specify	3 Drops	Both ears	BID	4 Days	15 ml	0
127	Specify	0.05 mg	Oral	TID	30 Days	Calculate	0



## Appendix A

ID	RXNORM	ID No	CURRENT MEDICATION DISPLAY NAME
128	884187	201789	CATAPRESS (clonidine) 0.2mg Tab
129	884191	201790	CATAPRESS (clonidine) 0.3mg Tab
130	309080	211760	cefprozil 125mg/5ml Susp
131	309081	211761	cefprozil 250mg/5ml Susp
132	197452	211762	cefprozil 250mg Tab
133	197453	211794	cefprozil 500mg Tab
134	581577	211760	CEFZIL (cefprozil) 125mg/5ml Susp
135	581578	211761	CEFZIL (cefprozil) 250mg/5ml Susp
136	206288	211762	CEFZIL (cefprozil) 250mg Tab
137	206298	211763	CEFZIL (cefprozil) 500mg Tab
138	309112	211789	cephalexin 250mg Cap
139	309114	211790	cephalexin 500mg Cap
140	637173	275635	cephalexin 750mg Cap
141	309110	211791	cephalexin 125mg/5ml Susp
142	309113	211792	cephalexin 250mg/5ml Susp
143	309115	211793	cephalexin 250mg Tab
144	197454	211763	cephalexin 500mg Tab
145	1014675	308433	cetirizine 10mg Cap
146	1014643	252575	cetirizine 5mg Chew
147	1014674	252576	cetirizine 10mg Chew
148	1014673	222357	cetirizine 5mg/5ml Syr
149	1014676	219125	cetirizine 5mg Tab
150	1014678	211798	cetirizine 10mg Tab
151	309308	227978	CIPRO (ciprofloxacin) 250mg/5ml susp
152	213226	227979	CIPRO (ciprofloxacin) 500mg/5ml susp
153	899122	273686	CIPRO (ciprofloxacin) 500mg Ext Rel Tab
154	847488	250986	CIPRO (ciprofloxacin) 1000mg Ext Rel Tab
155	205769	202115	CIPRO (ciprofloxacin) 250mg Tab
156	205770	202116	CIPRO (ciprofloxacin) 500mg Tab
157	213320	227955	CIPRO HC (ciprofloxacin/hydrocortisone) 0.2%/0.1% Otic Drops
158	404630	250789	CIPRODEX (ciprofloxacin/dexamethasone) 0.3%/0.1% Otic Drops
159	309308	227956	ciprofloxacin 250mg/5ml susp
160	309310	227967	ciprofloxacin 500mg/5ml susp
161	359383	240880	ciprofloxacin 500mg Ext Rel Tab
162	403921	250993	ciprofloxacin 1000mg Ext Rel Tab
163	199370	230392	ciprofloxacin 100mg Tab
164	197511	230393	ciprofloxacin 250mg Tab
165	309309	23094	ciprofloxacin 500mg Tab
166	197512	230395	ciprofloxacin 750mg Tab
167	309306	250789	ciprofloxacin/dexamethasone 0.3%/0.1% Otic Drops
168	309305	227955	ciprofloxacin/hydrocortisone 0.2%/1% Otic Drops
169	836338	297039	CLARITIN (loratadine) 10mg Capsule
170	668469	277291	CLARITIN (loratadine) 5mg Chew

## Appendix A

ID	NEW MEDICATION DISPLAY NAME
128	Tab 0.2mg CATAPRESS (clonidine)
129	Tab 0.3mg CATAPRESS (clonidine)
130	Susp 125mg/5ml cefprozil
131	Susp 250mg/5ml cefprozil
132	Tab 250mg cefprozil
133	Tab 500mg cefprozil
134	Susp 125mg/5ml CEFZIL (cefprozil)
135	Susp 250mg/5ml CEFZIL (cefprozil)
136	Tab 250mg CEFZIL (cefprozil)
137	Tab 500mg CEFZIL (cefprozil)
138	Cap 250mg cephalixin
139	Cap 500mg cephalixin
140	Cap 750mg cephalixin
141	Susp 125mg/5ml cephalixin
142	Susp 250mg/5ml cephalixin
143	Tab 250mg cephalixin
144	Tab 500mg cephalixin
145	Cap 10mg Ceterizine
146	Chew 5mg cetirizine
147	Chew 10 mg cetirizine
148	Syr 5mg/5ml cetirizine
149	Tab 5mg cetirizine
150	Tab 10mg cetirizine
151	Susp 250mg/5ml CIPRO (ciprofloxacin)
152	Susp 250mg/5ml CIPRO (ciprofloxacin)
153	Ext Rel Tab 500mg CIPRO (ciprofloxacin)
154	Ext Rel Tab 500mg CIPRO (ciprofloxacin)
155	Tab 250mg CIPRO (ciprofloxacin)
156	Tab 500mg CIPRO (ciprofloxacin)
157	Ot Susp 0.2%/1% CIPRO HC (ciprofloxacin/hydrocortisone)
158	Ot Susp 0.3%/0.1% CIPRODEX (ciprofloxacin/dexamethasone)
159	Susp 250mg/5ml ciprofloxacin
160	Susp 250mg/5ml ciprofloxacin
161	Ext Rel Tab 500mg ciprofloxacin
162	Ext Rel Tab 500mg ciprofloxacin
163	Tab 100mg ciprofloxacin
164	Tab 250mg ciprofloxacin
165	Tab 500mg ciprofloxacin
166	Tab 750mg ciprofloxacin
167	Ot Susp 0.3%/0.1% ciprofloxacin/dexamethasone
168	Ot Susp 0.2%/1% ciprofloxacin/hydrocortisone
169	Cap 10mg CLARITIN (loratadine)
170	Chew 5mg CLARITIN (loratadine)

## Appendix A

ID	Sig	Dose		Route	Frequency	For	Dispense	Refill
128	Specify	0.1	mg	Oral	TID	30 Days	Calculate	0
129	Specify	0.15	mg	Oral	TID	30 Days	Calculate	0
130	Specify	30	mg/kg/day	Oral	Q12H	10 Days	Calculate	0
131	Specify	30	mg/kg/day	Oral	Q12H	10 Days	Calculate	0
132	Specify	250	mg	Oral	Q12H	10 Days	Calculate	0
133	Specify	250	mg	Oral	Q12H	10 Days	Calculate	0
134	Specify	30	mg/kg/day	Oral	Q12H	10 Days	Calculate	0
135	Specify	30	mg/kg/day	Oral	Q12H	10 Days	Calculate	0
136	Specify	250	mg	Oral	Q12H	10 Days	Calculate	0
137	Specify	250	mg	Oral	Q12H	10 Days	Calculate	0
138	Specify	250	mg	Oral	Q6H	10 Days	Calculate	0
139	Specify	500	mg	Oral	Q6H	10 Days	Calculate	0
140	Specify	750	mg	Oral	Q6H	10 Days	Calculate	0
141	Specify	25	mg/kg/day	Oral	Q6H	10 Days	Calculate	0
142	Specify	25	mg/kg/day	Oral	Q6H	10 Days	Calculate	0
143	Specify	250	mg	Oral	Q6H	10 Days	Calculate	0
144	Specify	500	mg	Oral	Q6H	10 Days	Calculate	0
145	Specify	10	mg	Oral	Daily	365 Days	Calculate	6
146	Specify	5	mg	Oral	Daily	365 Days	Calculate	6
147	Specify	5	mg	Oral	Daily	365 Days	Calculate	6
148	Specify	2.5	mg	Oral	Daily	365 Days	118 ml	6
149	Specify	5	mg	Oral	Daily	365 Days	Calculate	6
150	Specify	10	mg	Oral	Daily	365 Days	Calculate	6
151	Specify	20	mg/kg/day	Oral	Q12H	10 Days	Calculate	0
152	Specify	20	mg/kg/day	Oral	Q12H	10 Days	Calculate	0
153	Specify	500	mg	Oral	Q12H	10 Days	Calculate	0
154	Specify	1000	mg	Oral	Q12H	10 Days	Calculate	0
155	Specify	250	mg	Oral	Q12H	10 Days	Calculate	0
156	Specify	500	mg	Oral	Q12H	10 Days	Calculate	0
157	Specify	3	Drops	Both Ears	BID	7 Days	10 ml	0
158	Specify	4	Drops	Both Ears	BID	7 Days	7.5 ml	0
159	Specify	20	mg/kg/day	Oral	Q12H	10 Days	Calculate	0
160	Specify	20	mg/kg/day	Oral	Q12H	10 Days	Calculate	0
161	Specify	500	mg	Oral	Q12H	10 Days	Calculate	0
162	Specify	1000	mg	Oral	Q12H	10 Days	Calculate	0
163	Specify	100	mg	Oral	Q12H	10 Days	Calculate	0
164	Specify	250	mg	Oral	Q12H	10 Days	Calculate	0
165	Specify	500	mg	Oral	Q12H	10 Days	Calculate	0
166	Specify	750	mg	Oral	Q12H	10 Days	Calculate	0
167	Specify	4	Drops	Both Ears	BID	7 Days	7.5 ml	0
168	Specify	3	Drops	Both Ears	BID	7 Days	10 ml	0
169	Specify	10	mg	Oral	Daily	365 Days	Calculate	11
170	Specify	5	mg	Oral	Daily	365 Days	Calculate	11

## Appendix A

ID	RXNORM	ID No	CURRENT MEDICATION DISPLAY NAME
171	755476	240199	CLARITIN (loratadine) 5mg/5ml Syr
172	744830	224413	CLARITIN (loratadine) 10mg Oral Disint Tab
173	206805	202140	CLARITIN (loratadine) 10mg Tab
174	748750	202154	CLEOCIN (clindamycin) 75mg Capsule
175	748746	202152	CLEOCIN (clindamycin) 150mg Capsule
176	748748	202153	CLEOCIN (clindamycin) 300mg Capsule
177	882536	202156	CLEOCIN (clindamycin) 2% Vaginal Cream
178	804978	202157	CLEOCIN T (clindamycin) 1% Topical Gel
179	804973	202158	CLEOCIN T (clindamycin) 1% Topical Lotion
180	748743	202155	CLEOCIN (clindamycin) 75mg/5ml Solution
181	804975	202159	CLEOCIN (clindamycin) 1% Solution
182	309329	202164	clindamycin 75mg Capsule
183	197518	202163	clindamycin 150mg Capsule
184	284215	211934	clindamycin 300mg Capsule
185	309337	211937	clindamycin 2% Topical Cream
186	309332	211936	clindamycin 1% Topical Gel
187	197519	224162	clindamycin 1% Topical Lotion
188	562266	251836	clindamycin 75mg/5ml Solution
189	309333	202165	clindamycin 1% Solution
190	885131	265366	clindamycin/benzoyl peroxide 1%/5% Top Gel
191	884173	202180	clonidine 0.1mg Tab
192	884785	202181	clonidine 0.2mg Tab
193	884189	202182	clonidine 0.3mg Tab
194	1091157	234441	CONCERTA (methylphenidate) 18mg Ext Rel Tab
195	1091172	238808	CONCERTA (methylphenidate) 27mg Ext Rel Tab
196	1091187	232442	CONCERTA (methylphenidate) 36mg Ext Rel Tab
197	1091212	235223	CONCERTA (methylphenidate) 54mg Ext Rel Tab
198	895989	202490	CUTIVATE (fluticasone) 0.05% Topical Cream
199	895991	271798	CUTIVATE (fluticasone) 0.05% Topical Lotion
200	895697	202491	CUTIVATE (fluticasone) 0.005% Topical Ointment
201	753437	275606	DAYTRANA (methylphenidate) 10mg/9Hr Transderm Patch
202	753442	275607	DAYTRANA (methylphenidate) 20mg/9Hr Transderm Patch
203	753443	275609	DAYTRANA (methylphenidate) 30mg/9Hr Transderm Patch
204	849508	229481	DDAVP (desmopressin) 0.01% (10mcg/spray) Nasal Spray
205	849517	220100	DDAVP (desmopressin) 0.1mg Tab
206	849524	220101	DDAVP (desmopressin) 0.2mg Tab
207	827654	202659	DEBROX (carbamide peroxide) 6.5% Otic Soln
208	197577	202874	DECADRON (dexamethasone) 0.5mg Tab
209	343040	202875	DECADRON (dexamethasone) 0.75mg Tab
210	899511	237932	dexmethylphenidate 5mg Ext Rel Cap
211	899439	269826	dexmethylphenidate 10mg Ext Rel Cap
212	899485	296827	dexmethylphenidate 20mg Ext Rel Cap
213	899495	307550	dexmethylphenidate 30mg Ext Rel Cap

## Appendix A

ID	NEW MEDICATION DISPLAY NAME
171	Syr 5mg/5ml CLARITIN (loratadine)
172	Oral Disint Tab 10mg CLARITIN (loratadine)
173	Tab 10mg loratadine CLARITIN (loratadine)
174	Cap 75mg CLEOCIN (clindamycin)
175	Cap 150mg CLEOCIN (clindamycin)
176	Cap 300mg CLEOCIN (clindamycin)
177	Vag Crm 2% CLEOCIN (clindamycin)
178	Top Gel 1% CLEOCIN (clindamycin)
179	Top Lot 1% CLEOCIN (clindamycin)
180	Soln 75mg/5ml CLEOCIN (clindamycin)
181	Top Soln 1% CLEOCIN (clindamycin)
182	Cap 75mg clindamycin
183	Cap 150mg clindamycin
184	Cap 300mg clindamycin
185	Vag Crm 2% clindamycin
186	Top Gel 1% clindamycin
187	Top Lot 1% clindamycin
188	Soln 75mg/5ml clindamycin
189	Top Soln 1% clindamycin
190	Top Gel 1%/5% clindamycin/benzoyl peroxide
191	Tab 0.1mg clonidine
192	Tab 0.2mg clonidine
193	Tab 0.3mg clonidine
194	Ext Rel Tab 18mg CONCERTA (methylphenidate)
195	Ext Rel Tab 27mg CONCERTA (methylphenidate)
196	Ext Rel Tab 36mg CONCERTA (methylphenidate)
197	Ext Rel Tab 54mg CONCERTA (methylphenidate)
198	Top Crm 0.05% CUTIVATE (fluticasone)
199	Top Lot 0.05% CUTIVATE (fluticasone)
200	Top Oint 0.005% CUTIVATE (fluticasone)
201	Transderm Pat 10mg/9Hr DAYTRANA (methylphenidate)
202	Transderm Pat 20mg/9Hr DAYTRANA (methylphenidate)
203	Transderm Pat 30mg/9Hr DAYTRANA (methylphenidate)
204	Nas Soln 0.01% (10mcg/spray) DDAVP (desmopressin)
205	Tab 0.1mg DDAVP (desmopressin)
206	Tab 0.2mg DDAVP (desmopressin)
207	Otic Soln 6.5% DEBROX (carbamide peroxide)
208	Tab 0.5mg DECADRON (dexamethasone)
209	Tab 0.75mg DECADRON (dexamethasone)
210	Cap Ext Rel 5mg dexmethylphenidate
211	Cap Ext Rel 10mg dexmethylphenidate
212	Cap Ext Rel 20mg dexmethylphenidate
213	Cap Ext Rel 30mg dexmethylphenidate



## Appendix A

ID	Sig	Dose		Route	Frequency	For	Dispense		Refill
171	Specify	5	mg	Oral	Daily	365 Days	120	ml	11
172	Specify	10	mg	Oral	Daily	365 Days	Calculate		11
173	Specify	10	mg	Oral	Daily	365 Days	Calculate		11
174	Specify	75	mg	Oral	Q6H	10 Days	Calculate		0
175	Specify	150	mg	Oral	Q6H	10 Days	Calculate		0
176	Specify	300	mg	Oral	Q6H	10 Days	Calculate		0
177	Free Text			Topical	BID	365 Days	40	gm	6
178	Free Text			Topical	BID	365 Days	30	gm	6
179	Free Text			Topical	BID	365 Days	60	ml	6
180	Specify	10	mg/kg/day	Oral	Q6H	10 Days	Calculate		0
181	Free Text			Topical	BID	365 Days	30	ml	6
182	Specify	75	mg	Oral	Q6H	10 Days	Calculate		0
183	Specify	150	mg	Oral	Q6H	10 Days	Calculate		0
184	Specify	300	mg	Oral	Q6H	10 Days	Calculate		0
185	Free Text			Topical	BID	365 Days	40	gm	6
186	Free Text			Topical	BID	365 Days	30	gm	6
187	Free Text			Topical	BID	365 Days	60	ml	6
188	Specify	10	mg/kg/day	Oral	Q6H	10 Days	Calculate		0
189	Free Text			Topical	BID	365 Days	30	ml	6
190	Free Text			Topical	BID	365 Days	25	gm	6
191	Specify	0.05	mg	Oral	TID	30 Days	Calculate		0
192	Specify	0.1	mg	Oral	TID	30 Days	Calculate		0
193	Specify	0.15	mg	Oral	TID	30 Days	Calculate		0
194	Specify	18	mg	Oral	QAM	30 Days	30	Each	0
195	Specify	27	mg	Oral	QAM	30 Days	30	Each	0
196	Specify	36	mg	Oral	QAM	30 Days	30	Each	0
197	Specify	54	mg	Oral	QAM	30 Days	30	Each	0
198	Free Text			Topical	BID	14 Days	15	gm	0
199	Free Text			Topical	BID	14 Days	120	ml	0
200	Free Text			Topical	BID	14 Days	15	gm	0
201	Specify	1	Patch	Transdermal	QAM	30 Days	30	Each	0
202	Specify	1	Patch	Transdermal	QAM	30 Days	30	Each	0
203	Specify	1	Patch	Transdermal	QAM	30 Days	30	Each	0
204	Specify	1	Spray	Intranasal	QHS	30 Days	5	ml	0
205	Specify	0.1	mg	Intranasal	QHS	30 Days	Calculate		
206	Specify	0.2	mg	Intranasal	QHS	30 Days	Calculate		
207	Specify	3	Drops	Both ears	BID	4 Days	15	ml	0
208	Specify	0.5	mg	Oral	Daily	1 Dose	Calculate		0
209	Specify	0.75	mg	Oral	Daily	1 Dose	Calculate		0
210	Specify	5	mg	Oral	Daily	30 Days	30	Cap	0
211	Specify	10	mg	Oral	Daily	30 Days	30	Cap	0
212	Specify	20	mg	Oral	Daily	30 Days	30	Cap	0
213	Specify	30	mg	Oral	Daily	30 Days	30	Cap	0

## Appendix A

ID	RXNORM	ID No	CURRENT MEDICATION DISPLAY NAME
214	106608	311025	dexmethylphenidate 40mg Ext Rel Cap
215	899557	237930	dexmethylphenidate 2.5mg Tab
216	899518	237931	dexmethylphenidate 5mg Tab
217	899548	237932	dexmethylphenidate 10mg Tab
218	849520	212076	desmopressin 0.01% (10mcg/spray) Nasal Spray
219	849515	219975	desmopressin 0.1mg Tab
220	833008	219976	desmopressin 0.2mg Tab
221	309686	202872	dexamethasone 0.5mg/5ml Solution
222	197577	202874	dexamethasone 0.5mg Tab
223	343033	202875	dexamethasone 0.75mg Tab
224	197579	202876	dexamethasone 1mg Tab
225	197581	202876	dexamethasone 2mg Tab
226	197582	202879	dexamethasone 4mg Tab
227	197583	202880	dexamethasone 6mg Tab
228	884537	202898	DEXEDRINE (dextroamphetamine) 5mg Ext Rel Cap
229	884528	202901	DEXEDRINE (dextroamphetamine) 10mg Ext Rel Cap
230	884534	202900	DEXEDRINE (dextroamphetamine) 15mg Ext Rel Cap
231	884535	238532	dextroamphetamine 5mg Ext Rel Cap
232	884520	238533	dextroamphetamine 10mg Ext Rel Cap
233	884532	238544	dextroamphetamine 15mg Ext Rel Cap
234	884386	202914	dextroamphetamine 5mg Tab
235	884385	202913	dextroamphetamine 10mg Tab
236	201900	217462	DIFLUCAN (fluconazole) 10 mg/1ml Susp
237	201901	217463	DIFLUCAN (fluconazole) 40mg/1ml Susp
238	207106	203023	DIFLUCAN (fluconazole) 50mg Tab
239	207107	203021	DIFLUCAN (fluconazole) 100mg Tab
240	207108	216658	DIFLUCAN (fluconazole) 150mg Tab
241	207112	203022	DIFLUCAN (fluconazole) 200mg Tab
242	199027	203245	doxycycline 50mg Cap
243	199026	203244	doxycycline 100mg Cap
244	199027	212246	doxycycline monohydrate 50mg Cap
245	199026	212245	doxycycline monohydrate 100mg Cap
246	283535	236812	doxycycline 20mg Tab
247	197633	203246	doxycycline 100mg Tab
248	310029	212246	doxycycline monohydrate 50mg Tab
249	406524	241102	doxycycline monohydrate 75mg Tab
250	434018	236785	doxycycline monohydrate 100mg Tab
251	799048	273193	doxycycline monohydrate 150mg Tab
252	206208	203286	DRYSOL (Aluminum Chloride) 20% Solution
253	284420	234561	DIFFERIN (adapalene) 0.1% Cream
254	153183	222001	DIFFERIN (adapalene) 0.1% Gel
255	722113	287004	DIFFERIN (adapalene) 0.3% Gel
256	905387	308678	DIFFERIN (adapalene) 0.1% Lotion

## Appendix A

ID	NEW MEDICATION DISPLAY NAME
214	Cap Ext Rel 40mg dexamethylphenidate
215	Tab 2.5mg dexamethylphenidate
216	Tab 5mg dexamethylphenidate
217	Tab 10mg dexamethylphenidate
218	Nas Soln 0.01% (10mcg/spray) desmopressin
219	Tab 0.1mg desmopressin
220	Tab 0.2mg desmopressin
221	Soln 0.5mg/5ml dexamethasone
222	Tab 0.5mg dexamethasone
223	Tab 0.75mg dexamethasone
224	Tab 1mg dexamethasone
225	Tab 2mg dexamethasone
226	Tab 4mg dexamethasone
227	Tab 6mg dexamethasone
228	Ext Rel Cap 5mg DEXEDRINE (dextroamphetamine)
229	Ext Rel Cap 10mg DEXEDRINE (dextroamphetamine)
230	Ext Rel Cap 15mg DEXEDRINE (dextroamphetamine)
231	Ext Rel Cap 5mg dextroamphetamine
232	Ext Rel Cap 10mg dextroamphetamine
233	Ext Rel Cap 15mg dextroamphetamine
234	Tab 5mg dextroamphetamine
235	Tab 10mg dextroamphetamine
236	Susp 10mg/1ml DIFLUCAN (fluconazole)
237	Susp 40mg/1ml DIFLUCAN (fluconazole)
238	Tab 50mg DIFLUCAN (fluconazole)
239	Tab 100mg DIFLUCAN (fluconazole)
240	Tab 150mg DIFLUCAN (fluconazole)
241	Tab 200mg DIFLUCAN (fluconazole)
242	Cap 50mg doxycycline hyclate
243	Cap 100mg doxycycline hyclate
244	Cap 50mg doxycycline monohydrate
245	Cap 100mg doxycycline monohydrate
246	Tab 20mg doxycycline hyclate
247	Tab 100mg doxycycline hyclate
248	Tab 50mg doxycycline monohydrate
249	Tab 75mg doxycycline monohydrate
250	Tab 100mg doxycycline monohydrate
251	Tab 150mg doxycycline monohydrate
252	Soln Top 20% DRY SOL (aluminum chloride)
253	Ext Cream 0.1% DIFFERIN (adapalene)
254	Ext Gel 0.1% DIFFERIN (adapalene)
255	Ext Gel 0.3% DIFFERIN (adapalene)
256	Ext Lot 0.1% DIFFERIN (adapalene)



## Appendix A

ID	Sig	Dose	Route	Frequency	For	Dispense	Refill
214	Specify	40 mg	Oral	Daily	30 Days	60 Tab	0
215	Specify	2.5 mg	Oral	BID	30 Days	60 Tab	0
216	Specify	5 mg	Oral	BID	30 Days	60 Tab	0
217	Specify	10 mg	Oral	BID	30 Days	60 Tab	0
218	Specify	1 Spray	Intranasal	QHS	30 Days	5 ml	0
219	Specify	0.1 mg	Intranasal	QHS	30 Days	Calculate	0
220	Specify	0.2 mg	Intranasal	QHS	30 Days	Calculate	
221	Specify	0.6 mg/kg/d	Oral	Daily	1 Dose	Calculate	0
222	Specify	0.5 mg	Oral	Daily	1 Dose	Calculate	0
223	Specify	0.75 mg	Oral	Daily	1 Dose	Calculate	0
224	Specify	1 mg	Oral	Daily	1 Dose	Calculate	0
225	Specify	2 mg	Oral	Daily	1 Dose	Calculate	0
226	Specify	4 mg	Oral	Daily	1 Dose	Calculate	0
227	Specify	6 mg	Oral	Daily	1 Dose	Calculate	0
228	Specify	5 mg	Oral	Daily	30 Days	30 Cap	0
229	Specify	10 mg	Oral	Daily	30 Days	30 Cap	0
230	Specify	15 mg	Oral	Daily	30 Days	30 Cap	0
231	Specify	5 mg	Oral	Daily	30 Days	30 Cap	0
232	Specify	10 mg	Oral	Daily	30 Days	30 Cap	0
233	Specify	15 mg	Oral	Daily	30 Days	30 Cap	0
234	Specify	5 mg	Oral	BID	30 Days	30 Tab	0
235	Specify	10 mg	Oral	BID	30 Days	30 Tab	0
236	Free Text		Oral	BID	10 Days	Calculate	0
237	Free Text		Oral	BID	10 Days	Calculate	0
238	Free Text	50 mg	Oral	BID	10 Days	20 Tab	0
239	Free Text	100 mg	Oral	BID	10 Days	20 Tab	0
240	Free Text	150 mg	Oral	BID	10 Days	20 Tab	0
241	Specify	200 mg	Oral	BID	10 Days	20 Tab	0
242	Specify	50 mg	Oral	BID	10 Days	Calculate	0
243	Specify	100 mg	Oral	BID	10 Days	Calculate	0
244	Specify	50 mg	Oral	BID	10 Days	Calculate	0
245	Specify	100 mg	Oral	BID	10 Days	Calculate	0
246	Specify	20 mg	Oral	BID	10 Days	Calculate	0
247	Specify	100 mg	Oral	BID	10 Days	Calculate	0
248	Specify	50 mg	Oral	BID	10 Days	Calculate	0
249	Specify	75 mg	Oral	BID	10 Days	Calculate	0
250	Specify	100 mg	Oral	BID	10 Days	Calculate	0
251	Specify	150 mg	Oral	BID	10 Days	Calculate	0
252	Free Text		Topical	HS	365 Days	37.5 ml	0
253	Free Text		Topical	qhs	365 Days	45 gm	0
254	Free Text		Topical	qhs	365 Days	45 gm	0
255	Free Text		Topical	qhs	365 Days	45 gm	0
256	Free Text		Topical	qhs	365 Days	15 gm	0

## Appendix A

ID	RXNORM	ID No	CURRENT MEDICATION DISPLAY NAME
257	1049909	203108	diphenhydramine 25mg Capsules
258	1020477	203109	diphenhydramine 50 mg Capsules
259	1050077	203104	diphenhydramine 2% Topical Cream
260	1251770	295926	diphenhydramine 12.5mg/5ml Elixir
261	1251770	215324	diphenhydramine 12.5mg/5ml Liquid
262	1049880	224170	diphenhydramine 2% Topical Gel
263	1050080	203104	diphenhydramine 2% Topical Spray
264	1049904	253674	diphenhydramine 12.5mg Oral Disintegrating Strip
265	1049900	213797	diphenhydramine 12.5mg Oral Disintegrating Tab
266	1049906	203112	diphenhydramine 25mg Tab
267	1085945	203113	diphenhydramine 50mg Tab
268	207485	203437	ELIMITE (permethrin) 5% Cream
269	727316	330475	epinephrine 0.15mg/0.3ml 2 Pen Pack
270	727345	330476	epinephrine 0.3mg/0.3ml 2-Pen Pack
271	727386	277362	EPIPEN JR 2-PAK (epinephrine) 0.15mg/0.3ml 2 Pen Pack
272	727347	234783	EPIPEN 2-PAK (epinephrine) 0.3mg/0.3ml 2-Pen Pack
273	727386	234782	EPIPEN JR (epinephrine) 0.15mg/0.3ml Pen (1 Pen)
274	727347	277361	EPIPEN (epinephrine) 0.3mg/0.3ml (1 Pen)
275	686402	203573	ERYPED (erythromycin) 200mg/5ml Susp
276	686420	203574	ERYPED (erythromycin) 400mg/5ml Susp
277	206075	203568	ERY-TAB (erythromycin) 250mg Del Rel Tab
278	206078	203569	ERY-TAB (erythromycin 333mg Del Rel Tab
279	206080	203570	ERY-TAB (erythromycin 500mg Del Rel Tab
280	310149	203589	erythromycin 0.5% Opht Oint
281	686400	203601	erythromycin ethylsuccinate 200mg/5ml Susp
282	686418	203602	erythromycin ethylsuccinate 400mg/5ml Susp
283	686405	203603	erythromycin ethylsuccinate 400mg Tab
284	750839	203607	erythromycin sterate 250mg Tab
285	750841	203606	erythromycin sterate 500mg Tab
286	310155	203592	erythromycin 250mg Del Rel Tab
287	315090	203593	erythromycin 333mg Del Rel Tab
288	310157	203594	erythromycin 500mg Del Rel Tab
289	863603	217464	E.E.S. (erythromycin) 200mg/5ml Susp
290	863306	203376	E.E.S. (erythromycin) 400mg Tab
291	686383	203608	erythromycin/sulfisoxazole 200mg:600mg/5ml Susp
292	1367410	203562	ergocalciferol (Vitamin D) 50,000 IU Caps
293	199832	314652	ergocalciferol (Vitamin D) 400 IU Tab
294	702249	203848	ferrous sulfate 220mg/5ml elixir [44mg/5ml Fe]
295	310323	203851	ferrous sulfate 300mg/5ml liquid [~60mg/5ml Fe]
296	251156	296307	ferrous sulfate 75mg/1ml liquid drops [15mg/ml Fe]
297	310325	203855	ferrous sulfate 325mg Tab [65mg Fe]
298	204632	203811	FEOSOL (ferrous sulfate) 200mg Tab [65mg Fe]
299	210095	305496	SLOW FE (ferrous sulfate) 142mg Slow Rel Tab [45mg Fe]

## Appendix A

ID	NEW MEDICATION DISPLAY NAME
257	Caps 25mg diphenhydramine
258	Caps 50mg diphenhydramine
259	Top Crm 2% diphenhydramine
260	Elix 12.5mg/5ml diphenhydramine
261	Liq 12.5mg/5ml diphenhydramine
262	Top Gel 2% diphenhydramine
263	Top Spray 2% diphenhydramine
264	Or Disint Strip 12.5mg diphenhydramine
265	Or Disint Tab 12.5mg diphenhydramine
266	Tab 25mg diphenhydramine
267	Tab 50mg diphenhydramine.
268	Crm Top 5% ELIMITE (permethrin)
269	IM Pen 0.15mg/0.3ml epinephrine (2 Pens)
270	IM Pen 0.3mg/0.3ml epinephrine (2 Pens)
271	IM Pen 0.15mg/0.3ml EPIPEN JR 2-PAK (epinephrine)
272	IM Pen 0.3mg/0.3ml EPIPEN 2-PAK (epinephrine)
273	IM Pen 0.15mg/0.3ml EPIPEN JR (epinephrine) (1 Pen)
274	IM Pen 0.3mg/0.3ml EPIPEN (epinephrine) (1 Pen)
275	Susp 200mg/5ml ERYPED (erythromycin ethylsuccinate)
276	Susp 400mg/5ml ERYPED (erythromycin ethylsuccinate)
277	Del Rel Tab 250mg ERY-TAB (erythromycin
278	Del Rel Tab 250mg ERY-TAB (erythromycin
279	Del Rel Tab 500mg ERY-TAB (erythromycin
280	Opht Oint 0.5% erythromycin
281	Susp 200mg/5ml erythromycin ethylsuccinate
282	Susp 400mg/5ml ertythromycin ethylsuccinate
283	Tab 400mg erythromycin ethylsuccinate
284	Tab 250mg erythromycin sterate
285	Tab 250mg erythromycin sterate
286	Del Rel Tab 250mg erythromycin
287	Del Rel Tab 250mg erythromycin
288	Del Rel Tab 500mg erythromycin
289	Susp 200mg/5ml E.E.S. (erythromycin ethylsuccinate)
290	Tab 400mg E.E.S. (erythromycin ethylsuccinate)
291	Susp 200mg:600mg/5ml erythromycin/sulfisoxazole
292	Cap 50,000 IU ergocalciferol (Vitamin D)
293	Tab 400 IU ergocalciferol (Vitamin D)
294	Elix 220mg/5ml ferous sulfate [44mg/5ml Fe]
295	Liq 300mg/5ml ferrous sulfate [~60mg/5ml Fe]
296	Drop 75mg/1ml ferrous sulfate [15mg/ml Fe]
297	Tab 325mg ferrous sulfate [65mg Fe]
298	Tab 200mg FEOSOL (ferrous sulfate) [65mg Fe]
299	Slow Rel Tab 160mg SLOW FE (ferrous sulfate) [50mg Fe]

## Appendix A

ID	Sig	Dose		Route	Frequency	For	Dispense		Refill
257	Specify	25	mg	Oral	Q6H PRN	365 Days	30	Cap	0
258	Specify	50	mg	Oral	Q6H PRN	365 Days	30	Cap	0
259	Free Text			Topical	TID PRN	365 Days	14.2	gm	0
260	Specify	12.5	mg	Oral	Q6H PRN	365 Days	120	ml	0
261	Specify	12.5	mg	Oral	Q6H PRN	365 Days	118	ml	0
262	Free Text			Topical	TID PRN	365 Days	120	ml	0
263	Specify	1	Spray	Topical	TID PRN	365 Days	59	ml	0
264	Specify	1	Strip	Oral	Q6H PRN	365 Days	30	Strip	0
265	Specify	12.5	mg	Oral	Q6H PRN	365 Days	30	Tab	0
266	Specify	25	mg	Oral	Q6H PRN	365 Days	30	Tab	0
267	Specify	50	mg	Oral	Q6H PRN	365 Days	30	Tab	0
268	Free Text			Topical	Once	365 Days	60	ml	0
269	Specify	0.15	mg	Intramuscular	Once PRN	365 Days	2	Pens	11
270	Specify	0.3	mg	Intramuscular	Once PRN	365 Days	2	Pens	11
271	Specify	0.15	mg	Intramuscular	Once PRN	365 Days	2	Pens	11
272	Specify	0.3	mg	Intramuscular	Once PRN	365 Days	2	Pens	11
273	Specify	0.15	mg	Intramuscular	Once PRN	365 Days	1	Pen	11
274	Specify	0.3	mg	Intramuscular	Once PRN	365 Days	1	Pen	11
275	Specify	30	mg/kg/d	Oral	Q6H	10 Days	Calculate		0
276	Specify	30	mg/kg/d	Oral	Q6H	10 Days	Calculate		0
277	Specify	250	mg	Oral	Q6H	10 Days	Calculate		0
278	Specify	333	mg	Oral	Q6H	10 Days	Calculate		0
279	Specify	500	mg	Oral	Q6H	10 Days	Calculate		0
280	Specify	1	cm	Both eyes	BID	5 Days	1	gm	0
281	Specify	30	mg/kg/d	Oral	Q6H	10 Days	Calculate		0
282	Specify	30	mg/kg/d	Oral	Q6H	10 Days	Calculate		0
283	Specify	400	mg	Oral	Q6H	10 Days	Calculate		0
284	Specify	250	mg	Oral	Q6H	10 Days	Calculate		0
285	Specify	500	mg	Oral	Q6H	10 Days	Calculate		0
286	Specify	250	mg	Oral	Q6H	10 Days	Calculate		0
287	Specify	333	mg	Oral	Q6H	10 Days	Calculate		0
288	Specify	500	mg	Oral	Q6H	10 Days	Calculate		0
289	Specify	30	mg/kg/d	Oral	Q6H	10 Days	Calculate		0
290	Specify	400	mg Tab	Oral	Q6H	10 Days	Calculate		0
291	Specify	40	mg er/kg/d	Oral	Q6H	10 Days	Calculate		0
292	Specify	1	Cap	Oral	Every wk	90 Days	7	Cap	0
293	Specify	1	Tab	Oral	Daily	30 Days	30	Cap	11
294	Specify	3	mg[Fe]/kg/d	Oral	TID	30 Days	50	ml	0
295	Specify	3	mg[Fe]/kg/d	Oral	TID	30 Days	50	ml	0
296	Specify	3	mg[Fe]/kg/d	Oral	TID	30 Days	50	ml	0
297	Specify	65	mg[Fe]	Oral	TID	30 Days	30	tab	0
298	Specify	65	mg[Fe]	Oral	TID	30 Days	30	tab	0
299	Specify	50	mg[Fe]	Oral	TID	30 Days	30	tab	0

## Appendix A

ID	RXNORM	ID No	CURRENT MEDICATION DISPLAY NAME
300	687211	203900	FLAGYL (metronidazole) 375mg Cap
301	207287	218991	FLAGYL (metronidazole) 250mg Tab
302	207290	203901	FLAGYL (metronidazole) 500mg Tab
303	687204	227396	FLAGYL ER(metronidazole) 750mg Ext Rel Tab
304	896323	237450	FLONASE (fluticasone) 50mcg Nasal Spray
305	895996	255542	FLOVENT (fluticasone) 44 mcg inhaler
306	896001	255543	FLOVENT (fluticasone) 110 mcg inhaler
307	896006	255544	FLOVENT (fluticasone) 220 mcg inhaler
308	876425	227159	FLOXIN (ofloxacin) OTIC 0.3 % SOLN
309	310352	217468	fluconazole 10 mg/1ml Susp
310	310353	217469	fluconazole 40mg/1ml Susp
311	197701	212412	fluconazole 50mg Tab
312	197698	212410	fluconazole 100mg Tab
313	197699	216660	fluconazole 150mg Tab
314	197700	212411	fluconazole 200mg Tab
315	310384	212435	fluoxetine HCl 10mg Cap
316	310385	212436	fluoxetine HCl 20mg Cap
317	313989	225714	fluoxetine HCl 40mg Cap
318	313995	235673	floxetine HCL 90mg Delayed Released Cap
319	310386	252668	fluoxetine 20mg/5ml Soln
320	313990	230360	fluoxetine 10mg Tab
321	248642	236782	fluoxetine 20mg Tab
322	895987	212449	fluticasone 0.05% Topical Cream
323	895994	255450	fluticasone 44 mcg inhaler
324	895999	255451	fluticasone 110 mcg inhaler
325	896004	255452	fluticasone 220 mcg inhaler
326	895990	271812	fluticasone 0.05% Topical Lotion
327	895487	212450	fluticasone 0.005% Topical Ointment
328	896968	286167	fluticasone 27.5 mcg Nasal Spray
330	896184	235186	fluticasone/salmeterol 100mcg:50mcg/dose Diskus
331	896209	235187	fluticasone/salmeterol 250mcg:50mcg/dose Diskus
332	896228	235188	fluticasone/salmeterol 500mcg:50mcg/dose Diskus
333	896236	276587	fluticasone/salmeterol 45mcg:21mcg HFA Inhaler
334	896244	276588	fluticasone/salmeterol 115mcg:21mcg Inhaler
335	896267	276589	fluticasone/salmeterol 230mcg:21mcg Inhaler
336	899513	269855	FOCALIN (dexmethylphenidate) 5mg Ext Rel Cap
337	899441	269856	FOCALIN (dexmethylphenidate) 10mg Ext Rel Cap
338	899487	269857	FOCALIN (dexmethylphenidate) 20mg Ext Rel Cap
339	899497	307551	FOCALIN (dexmethylphenidate) 30mg Ext Rel Cap
340	1006610	311026	FOCALIN (dexmethylphenidate) 40mg Ext Rel Cap
341	899559	237979	FOCALIN (dexmethylphenidate) 2.5mg Tab
342	899519	237980	FOCALIN (dexmethylphenidate) 5mg Tab
343	899549	237981	FOCALIN (dexmethylphenidate) 10mg Tab



## Appendix A

ID	NEW MEDICATION DISPLAY NAME
300	Cap 375mg FLAGYL (metronidazole)
301	Tab 250mg FLAGYL (metronidazole)
302	Tab 500mg FLAGYL (metronidazole)
303	Ext Rel Tab 750mg FLAGYL (metronidazole)
304	Nas Spray 50 mcg FLONASE (fluticasone)
305	Inh 44 mcg FLOVENT (fluticasone)
306	Inh 110 mcg FLOVENT (fluticasone)
307	Inh 220 mcg FLOVENT (fluticasone)
308	Otic Soln 0.3% FLOXIN (oxofloxacin)
309	Susp 10mg/1ml fluconazole
310	Susp 40mg/1ml fluconazole
311	Tab 50mg fluconazole
312	Tab 100mg fluconazole
313	Tab 150mg fluconazole
314	Tab 200mg fluconazole
315	Cap 10mg fluoxetine
316	Cap 20mg fluoxetine
317	Cap 40mg fluoxetine
318	Cap Del Rel 90mg fluoxetine
319	Soln 20mg/5ml fluoxetine
320	Tab 10mg fluoxetine
321	Tab 20mg fluoxetine
322	Top Crm 0.05% fluticasone
323	Inh 44 mcg fluticasone
324	Inh 110 mcg fluticasone
325	Inh 220 mcg fluticasone
326	Top Lot 0.05% fluticasone
327	Top Oint 0.005% fluticasone
328	Nas Spray 27.5 mcg fluticasone
330	Dry Powd Inh 100mcg/50mcg fluticasone/salmeterol DISKUS
331	Dry Powd Inh 250mcg/50mcg fluticasone/salmeterol DISKUS
332	Dry Powd Inh 500mcg/50mcg fluticasone/salmeterol DISKUS
333	Inh 45mcg/21mcg fluticasone/salmeterol HFA
334	Inh 130mcg/21mcg fluticasone/salmeterol HFA
335	Inh 230mcg/21mcg fluticasone/salmeterol HFA
336	Cap Ext Rel 5mg FOCALIN XR (dexamethylphenidate)
337	Cap Ext Rel 10mg FOCALIN XR (dexamethylphenidate)
338	Cap Ext Rel 20mg FOCALIN XR (dexamethylphenidate)
339	Cap Ext Rel 30mg FOCALIN XR (dexamethylphenidate)
340	Cap Ext Rel 40mg FOCALIN XR (dexamethylphenidate)
341	Tab 2.5mg FOCALIN (dexamethylphenidate)
342	Tab 5mg FOCALIN (dexamethylphenidate)
343	Tab 10mg FOCALIN (dexamethylphenidate)

## Appendix A

ID	Sig	Dose		Route	Frequency	For	Dispense		Refill
300	Specify	375	mg	Oral	Q8H	10 Days	30	tab	0
301	Specify	250	mg	Oral	Q8H	10 Days	30	tab	0
302	Specify	500	mg	Oral	Q8H	10 Days	30	tab	0
303	Specify	750	mg	Oral	Q8H	10 Days	30	tab	0
304	Specify	1	Spray	Intranasal	Daily	365 Days	15	gm	0
305	Specify	1	Puff	Inhalation	BID	365 Days	15	gm	0
306	Specify	1	Puff	Inhalation	BID	365 Days	15	gm	0
307	Specify	1	Puff	Inhalation	BID	365 Days	15	gm	0
308	Specify	5	Drop	Otic	BID	10 Days	10	ml	0
309	Free Text			Oral	BID	10 Days	Calculate		0
310	Free Text			Oral	BID	10 Days	Calculate		0
311	Specify	50	mg	Oral	BID	10 Days	20	Tab	0
312	Specify	100	mg	Oral	BID	10 Days	20	Tab	0
313	Specify	150	mg	Oral	BID	10 Days	20	Tab	0
314	Specify	200	mg	Oral	BID	10 Days	20	Tab	0
315	Specify	10	mg	Oral	Daily	30 Days	30	Cap	0
316	Specify	20	mg	Oral	Daily	30 Days	30	Cap	0
317	Specify	40	mg	Oral	Daily	30 Days	30	Cap	0
318	Specify	90	mg	Oral	Weekly	30 Days	4	Cap	0
319	Specify	10	mg	Oral	Daily	30 Days	Calculate		0
320	Specify	10	mg	Oral	Daily	30 Days	30	Tab	0
321	Specify	20	mg	Oral	Daily	30 Days	30	Tab	0
322	Free Text			Topical	BID	14 Days	15	gm	0
323	Specify	1	Puff	Inhalation	BID	365 Days	7.9	gm	0
324	Specify	1	Puff	Inhalation	BID	365 Days	7.9	gm	0
325	Specify	1	Puff	Inhalation	BID	365 Days	7.9	gm	0
326	Free Text			Topical	BID	14 Days	120	ml	0
327	Free Text			Topical	BID	14 Days	15	gm	0
328	Specify	1	Spray	Intranasal	Daily	365 Days	10	gm	0
330	Specify	1	Puff	Inhalation	BID	365 Days	60	Blister	0
331	Specify	1	Puff	Inhalation	BID	365 Days	60	Blister	0
332	Specify	1	Puff	Inhalation	BID	365 Days	60	Blister	0
333	Specify	2	Puff	Inhalation	BID	365 Days	12	gm	0
334	Specify	2	Puff	Inhalation	BID	365 Days	12	gm	0
335	Specify	2	Puff	Inhalation	BID	365 Days	12	gm	0
336	Specify	5	mg	Oral	Daily	30 Days	30	Cap	0
337	Specify	10	mg	Oral	Daily	30 Days	30	Cap	0
338	Specify	20	mg	Oral	Daily	30 Days	30	Cap	0
339	Specify	30	mg	Oral	Daily	30 Days	30	Cap	0
340	Specify	40	mg	Oral	Daily	30 Days	60	Tab	0
341	Specify	2.5	mg	Oral	BID	30 Days	60	Tab	0
342	Specify	5	mg	Oral	BID	30 Days	60	Tab	0
343	Specify	10	mg	Oral	BID	30 Days	60	Tab	0

## Appendix A

ID	RXNORM	ID No	CURRENT MEDICATION DISPLAY NAME
344	205935	212510	griseofulvin (microsize) 125mg/5ml soln
345	310600	212512	griseofulvin (microsize) 500mg Tab
346	242831	204430	griseofulvin (ultramicrosize) 125mg Tab
347	239237	204432	griseofulvin (ultramicrosize) 250mg Tab
348	106258	204712	hydrocortisone 1 % EX CREAM Potency class 7/7
349	310891	204713	hydrocortisone 2.5 % EX CREAM Potency class 7/7
350	1370754	212594	hydrocortisone VALERATE 0.2 % EX CREAM Potency class 5/7
351	103403	204715	hydrocortisone 1 % EX LOTION Potency class 7/7
352	197785	204716	hydrocortisone 2.5 % EX LOTION Potency class 7/7
353	203105	204718	hydrocortisone 1 % EX OINT Potency class 7/7
354	103401	204719	hydrocortisone 2.5 % EX OINT Potency class 7/7
355	1370750	212595	hydrocortisone VAL 0.2 % EX Ointment Potency class 5/7
356	995253	204777	hydroxyzine HCL 25 MG OR Cap
357	995278	204778	hydroxyzine HCL 50 MG OR Cap
358	995241	312476	hydroxyzine HCL 10 MG/5ML OR Soln
359	995218	204772	hydroxyzine HCL 10 MG OR Tab
360	995258	204774	hydroxyzine HCL 25 MG OR Tab
361	995281	204775	hydroxyzine HCL 50 MG OR Tab
362	310964	212622	ibuprofen 200mg Cap
363	310963	217345	ibuprofen 100mg Chew
364	197803	212623	ibuprofen 100mg/5ml Susp
365	310965	204856	ibuprofen 200mg Tab
366	197805	204857	ibuprofen 400mg Tab
367	197806	204858	ibuprofen 600mg Tab
368	19787	204859	ibuprofen 800mg Tab
369	212306	205290	KEFLEX (cephalexin) 250mg Cap
370	212339	205291	KEFLEX (cephalexin) 500mg Cap
371	637175	275636	KEFLEX (cephalexin) 750mg Cap
372	596843	233199	lansoprazole 15mg Del Rel Cap
373	311277	233200	lansoprazole 30mg Del Rel Cap
374	351261	240940	lansoprazole 15mg Del Rel Or Disint Tab
375	351260	240941	lansoprazole 30mg Del Rel Or Disint Tab
376	828269	297037	loratadine 10mg Capsule
377	665078	277290	loratadine 5mg Chew
378	692783	323341	loratadine 5mg/5ml Soln
379	311373	308190	loratadine 10mg Oral Disint Tab
380	311372	212865	loratadine 10mg Tab
381	1091139	242733	METADATE CD (methylphenidate) 10mg [Imm Rel 3mg/ Ext Rel 7
382	1091163	236039	METADATE CD (methylphenidate) 20mg [Imm Rel 6mg/ Ext Rel 1
383	1091178	242628	METADATE CD (methylphenidate) 30mg [Imm Rel 9mg/ Ext Rel 2
384	1091193	274893	METADATE CD (methylphenidate) 40mg [Imm Rel 12mg/ Ext Rel
385	1091204	274893	METADATE CD (methylphenidate) 50mg [Imm Rel 15mg/ Ext Rel
386	1031120	274894	METADATE CD (methylphenidate) 60mg [Imm Rel 18mg/ Ext Rel



## Appendix A

ID	NEW MEDICATION DISPLAY NAME
344	Soln 125mg/5ml griseofulvin (microsize)
345	Tab 500mg griseofulvin (microsize)
346	Tab 125mg griseofulvin (ultramicrosize)
347	Tab 250mg griseofulvin (ultramicrosize)
348	Crm Top 1% hydrocortisone Potency class 7/7
349	Crm Top 2.5% hydrocortisone Potency class 7/7
350	Crm Top 0.2% hydrocortisone valerate Potency class 5/7
351	Lot Top 1% hydrocortisone Potency class 7/7
352	Lot Top 2.5% hydrocortisone valerate Potency class 7/7
353	Oint Top 1% hydrocortisone valerate Potency class 7/7
354	Oint Top 2.5% hydrocortisone Potency class 7/7
355	Oint Top 0.2% hydrocortisone valerate Potency class 5/7
356	Cap 25mg hydroxyzine
357	Cap 50mg hydroxyzine
358	Soln 10mg/5ml hydroxyzine
359	Tab 10mg hydroxyzine
360	Tab 25mg hydroxyzine
361	Tab 50mg hydroxyzine
362	Cap 200mg ibuprofen
363	Chew 100mg ibuprofen
364	Susp 100mg/5ml ibuprofen
365	Tab 200mg ibuprofen
366	Tab 400mg ibuprofen
367	Tab 600mg ibuprofen
368	Tab 800mg ibuprofen
369	Cap 250mg KEFLEX (cephalexin)
370	Cap 500mg KEFLEX (cephalexin)
371	Cap 750mg KEFLEX (cephalexin)
372	Cap Del Rel 15mg lansoprazole
373	Cap Del Rel 30mg lansoprazole
374	Tab Or Disint 15mg lansoprazole
375	Tab Or Disint 30mg lansoprazole
376	Cap 10mg loratadine
377	Chew 5mg loratadine
378	Soln 5mg/5ml loratadine
379	Tab Or Disint 10mg loratadine
380	Tab 10mg loratadine
381	Ext Rel Cap 10mg [Imm Rel 3mg/Ext Rel 7mg] METADATE CD (methylphenidate)
382	Ext Rel Cap 20mg [Imm Rel 6mg/Ext Rel 14mg] METADATE CD (methylphenidate)
383	Ext Rel Cap 30mg [Imm Rel 3mg/Ext Rel 21mg] METADATE CD (methylphenidate)
384	Ext Rel Cap 40mg [Imm Rel 12mg/Ext Rel 28mg] METADATE CD
385	Ext Rel Cap 50mg [Imm Rel 15mg/Ext Rel 35mg] METADATE CD
386	Ext Rel Cap 60mg [Imm Rel 18mg/Ext Rel 42mg] METADATE CD

## Appendix A

ID	Sig	Dose		Route	Frequency	For	Dispense	Refill
344	Specify	10	mg/kg/d	Oral	Daily	45 Days	Calculate	0
345	Specify	10	mg/kg/d	Oral	Daily	45 Days	Calculate	0
346	Specify	10	mg/kg/d	Oral	Daily	45 Days	Calculate	0
347	Specify	10	mg/kg/d	Oral	Daily	45 Days	Calculate	0
348	Free Text			Topical	Daily	14 Days	15 gm	0
349	Free Text			Topical	Daily	14 Days	15 gm	0
350	Free Text			Topical	Daily	14 Days	15 gm	0
351	Free Text			Topical	Daily	14 Days	15 gm	0
352	Free Text			Topical	Daily	14 Days	15 gm	0
353	Free Text			Topical	Daily	14 Days	15 gm	0
354	Free Text			Topical	Daily	14 Days	15 gm	0
355	Free Text			Topical	Daily	14 Days	15 gm	0
356	Specify	25	mg	Oral	TID	10 Days	Calculate	0
357	Specify	50	mg	Oral	TID	10 Days	Calculate	0
358	Specify	2	mg/kg/d	Oral	TID	10 Days	Calculate	0
359	Specify	10	mg	Oral	TID	10 Days	Calculate	0
360	Specify	25	mg	Oral	TID	10 Days	Calculate	0
361	Specify	50	mg	Oral	TID	10 Days	Calculate	0
362	Specify	200	mg	Oral	Q6H PRN	365 Days	50 Cap	0
363	Specify	100	mg	Oral	Q6H PRN	365 Days	50 Chew	0
364	Specify	5	mg/kg/dose	Oral	Q6H PRN	365 Days	60 ml	0
365	Specify	200	mg	Oral	Q6H PRN	365 Days	50 Tab	0
366	Specify	400	mg	Oral	Q6H PRN	365 Days	50 Tab	0
367	Specify	600	mg	Oral	Q6H PRN	365 Days	50 Tab	0
368	Specify	800	mg	Oral	Q6H PRN	365 Days	50 Tab	0
369	Specify	250	mg	Oral	Q6H	10 Days	Calculate	0
370	Specify	500	mg	Oral	Q6H	10 Days	Calculate	0
371	Specify	750	mg	Oral	Q6H	10 Days	Calculate	0
372	Specify	15	mg	Oral	Daily	30 Days	30 Cap	0
373	Specify	30	mg	Oral	Daily	30 Days	30 Cap	0
374	Specify	15	mg	Oral	Daily	30 Days	30 Tab	0
375	Specify	30	mg	Oral	Daily	30 Days	30 Tab	0
376	Specify	10	mg	Oral	Daily	365 Days	Calculate	11
377	Specify	5	mg	Oral	Daily	365 Days	Calculate	11
378	Specify	5	mg	Oral	Daily	365 Days	120 ml	11
379	Specify	10	mg	Oral	Daily	365 Days	Calculate	11
380	Specify	10	mg	Oral	Daily	365 Days	Calculate	11
381	Specify	10	mg	Oral	QAM	30 Days	30 Each	0
382	Specify	20	mg	Oral	QAM	30 Days	30 Each	0
383	Specify	30	mg	Oral	QAM	30 Days	30 Each	0
384	Specify	40	mg	Oral	QAM	30 Days	30 Each	0
385	Specify	50	mg	Oral	QAM	30 Days	30 Each	0
386	Specify	60	mg	Oral	QAM	30 Days	30 Each	0

## Appendix A

ID	RXNORM	ID No	CURRENT MEDICATION DISPLAY NAME
387	1091147	233915	METHYLIN ER (methylphenidate) 10mg Ext Rel Tab
388	1091488	232254	METADATE ER (methylphenidate) 20mg Ext Rel Tab
389	1091498	229748	METHYLIN (methylphenidate) 5mg Tab
390	1091151	229746	METHYLIN (methylphenidate) 10mg Tab
391	1091394	229747	METHYLIN (methylphenidate) 20mg Tab
392	1091143	250711	methylphenidate 10mg [ImmRel 3mg/ Ext Rel 7mg] Cap
393	1091143	252560	methylphenidate 10mg [Imm Rel 5mg/ Ext Rel 5mg] Cap
394	1091161	236009	methylphenidate 20mg [ImmRel 6mg/ Ext Rel 14mg] Cap
395	1091161	239380	methylphenidate 20mg [ImmRel 10mg/ Ext Rel 10mg] Cap
396	1091176	242626	methylphenidate 30mg [ImmRel 9mg/ Ext Rel 21mg] Cap
397	1091176	239381	methylphenidate 30mg [Imm Rel 15mg/ Ext Rel 15mg] Cap
398	1091191	274898	methylphenidate 40mg [ImmRel 12mg/ Ext Rel 28mg] Cap
399	1091191	239382	methylphenidate 40mg [ImmRel 20mg/ Ext Rel 20mg] Cap
400	1091202	247899	methylphenidate 50mg [ImmRel 15mg/ Ext Rel 35mg] Cap
401	1091218	274900	methylphenidate 60mg [ImmRel 18mg/ Ext Rel 42mg] Cap
402	1091155	234435	methylphenidate 18mg OROS Ext Rel Tablet
403	1091170	238806	methylphenidate 27mg OROS Ext Rel Tablet
404	1091185	234436	methylphenidate 36mg OROS Ext Rel Tablet
405	1091210	235224	methylphenidate 54mg OROS Ext Rel Tablet
406	1091226	219294	methylphenidate 20mg Sustained Release Tab
407	1091497	206232	methylphenidate 5mg Tab
408	1091150	206230	methylphenidate 10mg Tab
409	1091392	206231	methylphenidate 20mg Tab
410	753436	275502	methylphenidate 10mg/9Hr Transderm Patch
411	753440	275504	methylphenidate 20mg/9Hr Transderm Patch
412	753441	275505	methylphenidate 30mg/9Hr Transderm Patch
413	199055	218788	metronidazole 375mg Cap
414	314106	206262	metronidazole 250mg Tab
415	311681	206263	metronidazole 500mg Tab
416	636559	252201	metronidazole 750mg Ext Rel Tab
417	746199	226696	mometasone 50mcg Nas Spray
418	311877	227153	mupirocin 2% Cream
419	311878	221012	mupirocin 2% Intranasal Ointment
420	106346	213100	mupirocin 2% Ointment
421	746201	226701	NASONEX (mometasone) 50mcg Nasal Spray
422	543546	207150	nystatin 100,000 Units/gm Top Crm
423	884308	207151	nystatin 100,000 Units/gm Top Oint
424	312055	207152	nystatin 100,000 Units/1ml Susp
425	213199	228553	OMNICEF (cefdinir) 300mg Cap
426	261091	227194	OMNICEF (cefdinir) 125mg/5ml Susp
427	544198	253664	OMNICEF (cefdinir) 250mg/5ml Susp
428	312085	223214	ondansetron 4mg/5ml Susp
429	198052	213216	ondansetron 4mg Tab

## Appendix A

ID	NEW MEDICATION DISPLAY NAME
387	Ext Rel Tab 10mg METHYLIN (methylphenidate)
388	Ext Rel Tab 20mg METADATE ER (methylphenidate)
389	Tab 5mg METHYLIN (methylphenidate)
390	Tab 10mg METHYLIN (methylphenidate)
391	Tab 20mg METHYLIN (methylphenidate)
392	Ext Rel Cap 10mg [Imm Rel 3mg/Ext Rel 7mg] methylphenidate
393	Ext Rel Cap 10mg [Imm Rel 3mg/Ext Rel 7mg] methylphenidate
394	Ext Rel Cap 20mg [Imm Rel 6mg/Ext Rel 14mg] methylphenidate
395	Ext Rel Cap 20mg [Imm Rel 10mg/Ext Rel 10mg] methylphenidate
396	Ext Rel Cap 30mg [Imm Rel 9mg/Ext Rel 21mg] methylphenidate
397	Ext Rel Cap 30mg [Imm Rel 15mg/Ext Rel 15mg] methylphenidate
398	Ext Rel Cap 40mg [Imm Rel 12mg/Ext Rel 28mg] methylphenidate
399	Ext Rel Cap 40mg [Imm Rel 20mg/Ext Rel 20mg] methylphenidate
400	Ext Rel Cap 50mg [Imm Rel 15mg/Ext Rel 35mg] methylphenidate
401	Ext Rel Cap 60mg [Imm Rel 18mg/Ext Rel 42mg] methylphenidate
402	Ext Rel Tab 18mg methylphenidate OROS
403	Ext Rel Tab 27mg methylphenidate OROS
404	Ext Rel Tab 36mg methylphenidate OROS
405	Ext Rel Tab 54mg methylphenidate OROS
406	Sust Rel Tab 5mg methylphenidate
407	Tab 5mg methylphenidate
408	Tab 10mg methylphenidate
409	Tab 20mg methylphenidate
410	Transderm Pat 10mg/9Hr methylphenidate
411	Transderm Pat 20mg/9Hr methylphenidate
412	Transderm Pat 30mg/9Hr methylphenidate
413	Cap 375mg metronidazole
414	Tab 250mg metronidazole
415	Tab 500mg metronidazole
416	Ext Rel Tab 750mg metronidazole
417	Nas Spray 50mcg mometasone
418	Top Crm 2% mupirocin
419	IntrNas Oint 2% mupirocin
420	Top Oint 2% mupirocin
421	Nas Spray 50mcg NASONEX (mometasone)
422	Crm Top 100,000 Units/gm nystatin
423	Oint Top 100,000 Units/gm nystatin
424	Susp 100,000 Units/1ml nystatin
425	Cap 300mg OMNICEF (cefdinir)
426	Susp 125mg/5ml OMNICEF (cefdinir)
427	Susp 250mg/5ml OMNICEF (cefdinir)
428	Susp 4mg/5ml ondansetron
429	Tab 4mg ondansetron

## Appendix A

ID	Sig	Dose		Route	Frequency	For	Dispense		Refill
387	Specify	10	mg	Oral	QAM	30 Days	30	Each	0
388	Specify	20	mg	Oral	QAM	30 Days	30	Each	0
389	Specify	5	mg	Oral	BID	30 Days	30	Each	0
390	Specify	10	mg	Oral	BID	30 Days	30	Each	0
391	Specify	20	mg	Oral	BID	30 Days	30	Each	0
392	Specify	10	mg	Oral	QAM	30 Days	30	Each	0
393	Specify	10	mg	Oral	QAM	30 Days	30	Each	0
394	Specify	20	mg	Oral	QAM	30 Days	30	Each	0
395	Specify	20	mg	Oral	QAM	30 Days	30	Each	0
396	Specify	30	mg	Oral	QAM	30 Days	30	Each	0
397	Specify	30	mg	Oral	QAM	30 Days	30	Each	0
398	Specify	40	mg	Oral	QAM	30 Days	30	Each	0
399	Specify	40	mg	Oral	QAM	30 Days	30	Each	0
400	Specify	50	mg	Oral	QAM	30 Days	30	Each	0
401	Specify	60	mg	Oral	QAM	30 Days	30	Each	0
402	Specify	18	mg	Oral	QAM	30 Days	30	Each	0
403	Specify	27	mg	Oral	QAM	30 Days	30	Each	0
404	Specify	36	mg	Oral	QAM	30 Days	30	Each	0
405	Specify	54	mg	Oral	QAM	30 Days	30	Each	0
406	Specify	20	mg	Oral	QAM	30 Days	30	Each	0
407	Specify	5	mg	Oral	BID	30 Days	30	Each	0
408	Specify	10	mg	Oral	BID	30 Days	30	Each	0
409	Specify	20	mg	Oral	BID	30 Days	30	Each	0
410	Specify	1	Patch	Transdermal	QAM	30 Days	30	Each	0
411	Specify	1	Patch	Transdermal	QAM	30 Days	30	Each	0
412	Specify	1	Patch	Transdermal	QAM	30 Days	30	Each	0
413	Specify	375	mg	Oral	Q8H	10 Days	30	tab	0
414	Specify	250	mg	Oral	Q8H	10 Days	30	tab	0
415	Specify	500	mg	Oral	Q8H	10 Days	30	tab	0
416	Specify	750	mg	Oral	Q8H	10 Days	30	tab	0
417	Specify	1	Spray	Both Nares	Daily	30 Days	17	gm	0
418	Free Text			Topical	TID	10 Days	15	gm	0
419	Free Text			Intranasal	TID	10 Days	1	gm	0
420	Free Text			Topical	TID	10 Days	22	gm	0
421	Specify	1	Spray	Both Nares	Daily	30 Days	17	gm	0
422	Free Text			Topical	BID	14 Days	15	gm	0
423	Free Text			Topical	BID	14 Days	15	gm	0
424	Specify	200K	Units	Oral and Swallow	QID	14 Days	60	ml	0
425	Specify	300	mg	Oral	Daily	10 Days	Calculate		0
426	Specify	14	mg/kg/d	Oral	Daily	10 Days	Calculate		0
427	Specify	14	mg/kg/d	Oral	Daily	10 Days	Calculate		0
428	Specify	1	mg	Oral	TID	7 Days	Calculate		0
429	Specify	2	mg	Oral	TID	7 Days	Calculate		0



## Appendix A

ID	RXNORM	ID No	CURRENT MEDICATION DISPLAY NAME
430	312086	232206	ondansetron 8mg Tab
431	104894	233205	ondansetron 4mg Oral dissolving tablet
432	312087	213217	ondansetron 8mg Oral dissolving tablet
433	242446	227159	ofloxacin Otic 0.3 % Soln
434	848114	212308	PCE (erythromycin) 333mg Polym Coated Tab
435	848119	212309	PCE (erythromycin) 500mg polymer coated Tab
436	686385	203608	PEDIAZOLE (erythromycin/sulfisox) 200mg:600mg/5ml Susp
437	106387	213375	permethrin 5% Cream
438	596918	218795	PREVACID (lansoprazole) 15mg Del Rel Cap
439	206206	218796	PREVACID (lansoprazole)30mg Del Rel Cap
440	206205	242506	PREVACID SOLUTAB 15mg Del Rel Or Disint Tab
441	866152	242507	PREVACID SOLUTAB ) 30mg Del Rel Or Disint Tab
442	745752	276262	PROAIR (alburol) Inhaler
443	205535	208361	PROZAC (fluoxetine) HCl 10mg Cap
444	104849	208362	PROZAC (fluoxetine)20mg Cap
445	261287	231231	PROZAC (fluoxetine)l 40mg Cap
446	598032	235672	PROZAC (fluoxetine) 90mg Delayed Released Cap
447	104850	252668	PROZAC (fluoxetine)20mg/5ml Soln
448	746763	222133	PROVENTIL (albuterol) Inhaler
449	616830	234654	PULMICORT (budesonide) 0.25mg/2ml Neb Susp
450	616817	234655	PULMICORT (budesonide 0.5mg Neb Susp
451	616819	288112	PULMICORT (budesonide) 1mg/5ml Neb Susp
452	966529	284272	PULMICORT TURBOHALER (budesonide) 90mcg Inhaler
453	966538	234704	QVAR (beclomethasone) 40mcg Inhaler
454	966542	234705	QVAR (beclomethasone) 80mcg Inhaler
455	859352	232451	RHINOCORT AQ (budesonide) 32mcg Nasal Spay
456	1091500	208642	RITALIN (methylphenidate) 5mg Tab
457	1091379	208640	RITALIN (methylphenidate) 10mg Tab
458	1091395	208641	RITALIN (methylphenidate) 20mg Tab
459	1091143	252562	RITALIN LA 10mg [Imm Rel 5mg/ Ext Rel 5mg] Cap
460	1091167	239403	RITALIN LA (methylphenidate) 20mg Cap
461	1091176	239404	RITALIN LA (methylphenidate) 30mg Cap
462	1031197	239405	RITALIN LA (methylphenidate) 40mg Cap
463	1091226	208643	RITALIN-SR 20mg Sustained Rel Tab
464	NA	208937	SEPTRA (sulfamethoxazole-trimethropin) 400mg:80mg Tab
465	NA	208938	SEPTRA DS (sulfamethoxazole-trimethropin) 800mg:160mg Tab
466	313134	227479	sulfamethoxazole/trimethropin 200mg:40mg/5ml Susp
467	198334	209435	sulfamethoxazole-trimethropin 400mg:80mg Tab
468	313137	209433i	sulfamethoxazole-trimethropin 800mg:160mg Tab
469	1246490	286332	SYMBICORT (budesonide/formoterol) 80mcg/4.5mcg Inhaler
470	1246306	286333	SYMBICORT (budesonide/formoterol) 160mcg/4.5mcg Inhaler
471	727412	271504	TWINJECT (epinephrine) 0.15mg/0.15ml Pen
472	727413	271503	TWINJECT (epinephrine) 0.3mg/0.3ml Pen (Twinject)

## Appendix A

ID	NEW MEDICATION DISPLAY NAME
430	Tab 8mg ondansetron
431	Tab Or Dissolv 4mg ondansetron
432	Tab Or Dissolv 8mg ondansetron
433	Otic Soln 0.3% oxofloxacin
434	Poly Coat Tab 333mg PCE (erythromycin)
435	Poly Coat Tab 500mg PCE (erythromycin)
436	Susp 200mg:600mg/5ml PEDIAZOLE (erythromycin/sulfisoxazole)
437	Crm Top 5% permethrin
438	Cap Del Rel 15mg PREVACID (lansoprazole)
439	Cap Del Rel 30mg PREVACID (lansoprazole)
440	Tab Or Disint 15mg PREVACID SOLUTAB (lansoprazole)
441	Tab Or Disint 30mg PREVACID SOLUTAB (lansoprazole)
442	Inh PROAIR (albuterol) HFA
443	Cap 10mg PROZAC (fluoxetine)
444	Cap 20mg PROZAC (fluoxetine)
445	Cap 40mg PROZAC (fluoxetine)
446	Cap Del Rel 90mg PROZAC (fluoxetine)
447	Soln 20mg/5ml PROZAC (fluoxetine)
448	Inh PROVENTIL HFA (albuterol) HFA
449	Neb 0.25mg/2ml PULMICORT (budesonide)
450	Neb 0.5mg/2ml PULMICORT (budesonide)
451	Neb 1mg PULMICORT (budesonide)
452	Inh 90mcg PULMICORT TURBOHALER (budesonide)
453	Inh 40mcg QVAR (beclomethasone)
454	Inh 80mcg QVAR (beclomethasone)
455	Nas Spray 32mcg RHINOCORT AQ (budesonide)
456	Tab 5mg RITALIN (methylphenidate)
457	Tab 10mg RITALIN (methylphenidate)
458	Tab 20mg RITALIN (methylphenidate)
459	Ext Rel Cap 10mg [Imm Rel 5mg/Ext Rel 5mg] RITALIN LA (methylphenidate)
460	Ext Rel Cap 20mg [Imm Rel 10mg/Ext Rel 10mg] RITALIN LA (methylphenidate)
461	Ext Rel Cap 30mg [Imm Rel 3mg/Ext Rel 21mg] RITALIN LA (methylphenidate)
462	Ext Rel Cap 40mg [Imm Rel 20mg/Ext Rel 20mg] RITALIN LA (methylphenidate)
463	Sust Rel Tab 5mg RITALIN-SR (methylphenidate)
464	Tab 400mg:80mg SEPTRA (sulfamethoxazole/trimethoprim)
465	Tab 800mg:160mg SEPTRA DS (sulfamethoxazole/trimethoprim)
466	Susp 200mg:40mg/5ml sulfamethoxazole/trimethoprim
467	Tab 400mg:80mg sulfamethoxazole/trimethoprim
468	Tab 800mg:160mg sulfamethoxazole/trimethoprim
469	Inh 100 mcg/6mcg SYMBICORT (budesonide/formoterol)
470	Inh 80mcg/4.5mcg SYMBICORT (budesonide/formoterol)
471	IM Pen 0.15mg/0.15ml epinephrine (Twinject)
472	IM Pen 0.3mg/0.3ml epinephrine (Twinject)

## Appendix A

ID	Sig	Dose	Route	Frequency	For	Dispense	Refill
430	Specify	4 mg	Oral	TID	7 Days	Calculate	0
431	Specify	4 mg	Oral	TID	7 Days	Calculate	0
432	Specify	8 mg	Oral	TID	7 Days	Calculate	0
433	Specify	5 Drops	Both Eyes	BID	10 Days	10 ml	
434	Specify	333 mg	Oral	Q6H	10 Days	Calculate	0
435	Specify	500 mg	Oral	Q6H	10 Days	Calculate	0
436	Specify	40 mg er/kg/d	Oral	Q6H	10 Days	Calculate	0
437	Free Text		Topical	Once PRN	1 Day	60 ml	0
438	Specify	15 mg	Oral	Daily	30 Days	30 Cap	0
439	Specify	30 mg	Oral	Daily	30 Days	30 Cap	0
440	Specify	15 mg	Oral	Daily	30 Days	30 Tab	0
441	Specify	30 mg	Oral	Daily	30 Days	30 Tab	0
442	Specify	2 Puffs	Inhalation	Q4H	365 Days	8 gm	
443	Specify	10 10	Oral	Daily	30 Days	30 Cap	0
444	Specify	20 20	Oral	Daily	30 Days	30 Cap	0
445	Specify	40 40	Oral	Daily	30 Days	30 Cap	0
446	Specify	90 90	Oral	Weekly	30 Days	4 Cap	0
447	Free Text		Oral	Daily	30 Days	Calculate	0
448	Specify	2 Puffs	Inhalation	Q4H	365 Days	17 gm	0
449	Specify	2 ml	Inhalation	BID	365 Days	60 ml	6
450	Specify	2 ml	Inhalation	BID	365 Days	60 ml	6
451	Specify	2 ml	Inhalation	BID	365 Days	60 ml	6
452	Specify	1 Puff	Inhalation	BID	365 Days	165 gm	6
453	Specify	1 Puff	Inhalation	BID	365 Days	7.3 gm	6
454	Specify	1 Puff	Inhalation	BID	365 Days	7.3 gm	6
455	Specify	1 Spray	Both nostril	Daily	365 Days	8.3 gm	6
456	Specify	5 mg	Oral	BID	30 Days	30 Each	0
457	Specify	10 mg	Oral	BID	30 Days	30 Each	0
458	Specify	20 mg	Oral	BID	30 Days	30 Each	0
459	Specify	10 mg	Oral	QAM	30 Days	30 Each	0
460	Specify	20 mg	Oral	QAM	30 Days	30 Each	0
461	Specify	30 mg	Oral	QAM	30 Days	30 Each	0
462	Specify	40 mg	Oral	QAM	30 Days	30 Each	0
463	Specify	20 mg	Oral	QAM	30 Days	30 Each	0
464	Specify	2 Tab	Oral	Q12H	10 Days	40 Tab	0
465	Specify	1 Tab	Oral	Q12H	10 Days	20 Tab	0
466	Specify	10 mg/kg/d T	Oral	Q12H	10 Days	Calculate	0
467	Specify	2 Tab	Oral	Q12H	10 Days	40 Tab	0
468	Specify	1 Tab	Oral	Q12H	10 Days	20 Tab	0
469	Specify	2 Inhalations	Inhalation	BID	365 Days	60 doses	6
470	Specify	2 Inhalations	Inhalation	BID	365 Days	60 doses	6
471	Specify	0.15 mg	Intramuscular	Once PRN	365 Days	1 Pen	11
472	Specify	0.3 mg	Intramuscular	Once PRN	365 Days	1 Pen	11



## Appendix A

ID	RXNORM	ID No	CURRENT MEDICATION DISPLAY NAME
473	731370	200133	TYLENOL (acetaminophen) 80mg Chew
474	707327	210333	TYLENOL (acetaminophen) 160mg/5ml elixir
475	1243440	242646	TYLENOL (acetaminophen) 650 Ext Release Caplet
476	929555	210333	TYLENOL (acetaminophen) 160mg/5ml Suspension
477	209384	210328	TYLENOL (acetaminophen) 325mg Tabs
478	209459	210329	TYLENOL (acetaminophen) 500mg Tab
479	859088	238427	VENTOLIN (albuterol) Inhaler
480	895970	286173	VERAMYST (fluticasone) 27.5 mcg Nasal Spray
482	105260	219643	ZITHROMAX (azithromycin) 200mg/5ml Susp
483	212446	225558	ZITHROMAX (azithromycin) 250 mg Tab
484	226827	239558	ZITHROMAX (azithromycin) 500 mg Tab
485	211511	221492	ZITHROMAX (azithromycin) 600 mg Tab
486	750149	235720	ZITHROMAX Z-PAK (azithromycin) 250 mg Tab
487	750157	240348	ZITHROMAX TRI-PAK (azithromycin) 500 mg Tab
488	583482	270027	ZITHROMAX ZMAX 2 gm Ext Release Suspension
489	212447	224368	ZOFRAN (ondansetron) 4mg/5ml Susp
490	104895	211093	ZOFRAN (ondansetron) 4mg Tab
491	104896	211094	ZOFRAN (ondansetron) 8mg Tab
492	876690	229875	ZOFRAN (ondansetron) 4mg Oral dissolving tablet
493	876693	229876	ZOFRAN (ondansetron) 8mg Oral dissolving tablet
494	21364	21108	ZOVIRAX (acyclovir) 200mg Capsules
495	825321	240166	ZOVIRAX (acyclovir) 5% Cream
496	209977	211105	ZOVIRAX (acyclovir) 5% Ointment
497	201903	21109	ZOVIRAX (acyclovir) 200mg/5ml Susp
498	201905	21110	ZOVIRAX (acyclovir) 400mg Tab
499	813706	21111	ZOVIRAX (acyclovir) 800mg Tab
500	1020023	308432	ZYRTEC (cetirizine) 10mg Cap
501	1014645	290685	ZYRTEC (cetirizine) 5mg Chew
502	1020022	290686	ZYRTEC (cetirizine) 10mg Chew
503	1014677	314043	ZYRTEC (cetirizine) 5mg/5ml Syr
504	1020021	219125	ZYRTEC (cetirizine) 5mg Tab
505	1020026	211798	ZYRTEC (cetirizine) 10mg Tab

## Appendix A

ID	NEW MEDICATION DISPLAY NAME
473	Chew 80mg TYLENOL (acetaminophen)
474	Elix 160mg/5ml TYLENOL (acetaminophen)
475	Ex Rel Caplet 650mg TYLENOL (acetaminophen)
476	Susp 160mg/5ml TYLENOL (acetaminophen)
477	Tab 325mg TYLENOL (acetaminophen)
478	Tab 500mg TYLENOL (acetaminophen)
479	Inh VENTOLIN (albuterol) HFA
480	Nas Spray 27.5 mcg VERAMYST (fluticasone)
482	Susp 200mg/5ml ZITHROMAX (azithromycin)
483	Tab 250mg ZITHROMAX (azithromycin)
484	Tab 500mg ZITHROMAX (azithromycin)
485	Tab 600mg ZITHROMAX (azithromycin)
486	Tab 250mg ZITHROMAX Z-PAK (azithromycin)
487	Tab 500mg ZITHROMAX TRI-PAK (azithromycin)
488	Ext Rel Susp 2g ZITHROMAX ZMAX (azithromycin)
489	Susp 4mg/5ml ZOFRAN (ondansetron)
490	Tab 4mg ZOFRAN (ondansetron)
491	Tab 8mg ZOFRAN (ondansetron)
492	Tab Or Dissolv 4mg ZOFRAN (ondansetron)
493	Tab Or Dissolv 8mg ZOFRAN (ondansetron)
494	Cap 200mg ZOVIRAX (acyclovir)
495	Cream 5% ZOVIRAX (acyclovir)
496	Oint 5% ZOVIRAX (acyclovir)
497	Susp 200mg/5ml ZOVIRAX (acyclovir)
498	Tab 400mg ZOVIRAX (acyclovir)
499	Tab 800mg ZOVIRAX (acyclovir)
500	Cap 10mg ZYRTEC (cetirizine)
501	Chew 5mg ZYRTEC (cetirizine)
502	Chew 10 mg ZYRTEC (cetirizine)
503	Syr 5mg/5ml ZYRTEC (cetirizine)
504	Tab 5mg ZYRTEC (cetirizine)
505	Tab 10mg ZYRTEC (cetirizine)

## Appendix A

ID	Sig	Dose		Route	Frequency	For	Dispense		Refill
473	Specify	80	mg	Oral	Q4H PRN	365 Days	50	Each	0
474	Specify	15	mg/kg/do	Oral	Q4H PRN	365 Days	60	ml	0
475	Specify	650	mg	Oral	Q4H PRN	365 Days	50	Each	0
476	Specify	15	mg/kg/do	Oral	Q4H PRN	365 Days	60	ml	0
477	Specify	325	mg	Oral	Q4H PRN	365 Days	50	Each	0
478	Specify	500	mg	Oral	Q4H PRN	365 Days	50	Each	0
479	Specify	2	Puffs	Inhalation	Q4H PRN	365 Days	18	gm	0
480	Specify	1	Spray	Intranasal	Daily	365 Days	10	gm	0
482	Free Text			Oral	Daily	5 Days	Calculate		0
483	Free Text			Oral	Daily	5 Days	Calculate		0
484	Free Text			Oral	Daily	5 Days	Calculate		0
485	Free Text			Oral	Daily	5 Days	Calculate		0
486	Free Text			Oral	Daily	5 Days	5	Tab	0
487	Free Text			Oral	Daily	3 Days	3	Tab	0
488	Free Text			Oral	Daily	1 Day	60	ml	0
489	Specify	1	mg	Oral	TID	7 Days	Calculate		0
490	Specify	2	mg	Oral	TID	7 Days	Calculate		0
491	Specify	4	mg	Oral	TID	7 Days	Calculate		0
492	Specify	4	mg	Oral	TID	7 Days	Calculate		0
493	Specify	8	mg	Oral	TID	7 Days	Calculate		0
494	Free Text			Oral		7 Days	Calculate		0
495	Free Text			Topical		7 Days	2	g	0
496	Free Text			Topical		7 Days	2	g	0
497	Free Text			Oral		7 Days	Calculate		0
498	Free Text			Oral		7 Days	Calculate		0
499	Free Text			Oral		7 Days	Calculate		0
500	Specify	10	mg	Oral	Daily	365 Days	Calculate		6
501	Specify	5	mg	Oral	Daily	365 Days	Calculate		6
502	Specify	5	mg	Oral	Daily	365 Days	Calculate		6
503	Specify	2.5	mg	Oral	Daily	365 Days	118	ml	6
504	Specify	5	mg	Oral	Daily	365 Days	Calculate		6
505	Specify	10	mg	Oral	Daily	365 Days	Calculate		6