Kroll

Windows 10

User Manual

Kroll Computer Systems Inc.

Contents

Kroll Windows 10 User Manual

Kroll Windows 10 is an advanced prescription management solution that gives pharmacies the tools to handle the complexities of modern prescription dispensing. Version 10 offers a powerful, visually appealing approach to prescription dispensing that improves the productivity, efficiency, and security of your pharmacy's operations.

This user guide is intended for new Kroll users and explains how to navigate the software, how to create and manage patient, drug, and prescriber records, and how to fill and manage patient prescriptions. Visit http://www.kroll.ca/user-guides.html for detailed information about specific modules within the software.

Logging in and out of Kroll

This section explains how to log in and out of the Kroll Windows application. You must have user credentials assigned to you before proceeding.

Logging in

1. Double-click the Kroll icon located on your desktop.
2. The Kroll start screen will appear. Enter your login credentials in the **Initials** and **Password** fields and click **OK**.

NOTE: The Kroll Session Manager will be added to your Windows taskbar.

Logging out

1. Select **File** > **Exit**, or click the **X** in the top right corner of your screen.

2. A prompt will appear asking if you are sure you want to exit. Select **Yes**.
3. Another prompt will appear asking if you want to print the Dayend Label. Select **Yes** to print the label.

<u>Sample Dayend Label</u>:

a) If you answer **Yes** to the Dayend Label prompt, another prompt will appear asking if you want to get the Network Totals. Select **Yes** to generate the **Adjudication Totals From Network** report.

<u>Sample Adjudication Totals From Network report:</u>


Adjudication Totals Report

NOTE: It is not necessary to print the Dayend Label or Network Total for each session; one printout of each report will include all Rxs filled that day.

Users and Groups

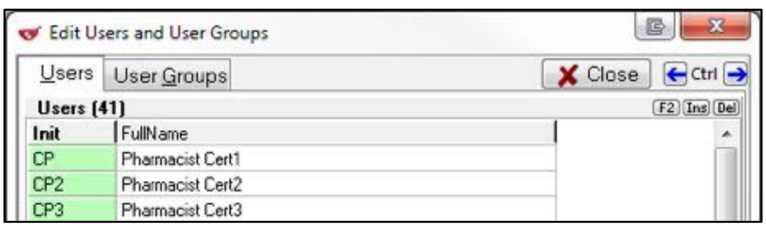
In order for pharmacy users to login and use the Kroll software, they must have a user account with assigned permissions. This section explains how to add and manage user accounts.

Adding a New User

1. From the **Alt-X Start** screen, go to **Edit** > **Users and Groups**.

2. Enter your login credentials and click **OK**.

3. The **Edit Users and Groups** screen will appear. Click **Ins** from **Users** tab.



4. Complete the **User Information** form and click **Save**.

You will be added to the **Users** list on the **Edit Users and Groups** screen.

Editing a User Profile

1. Call up the **Edit Users and Groups** screen. Select the user you want to edit and click **F2**.
2. Make the necessary changes to the **User Information** screen and click **Save**.

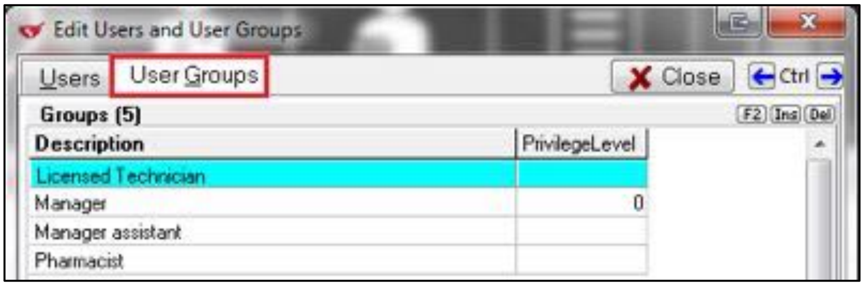
Deleting a User Profile

1. Call up the **Edit Users and Groups** screen. Select the user you want to edit and click **Del**.
2. A prompt will appear asking if you are sure you want to delete this user. Select **Yes**.

Adding a New User Group

1. From the **Alt-X Start** screen, go to **Edit** > **Users and Groups**.
2. Enter your login credentials and click **OK**.

3. The **Edit Users and Groups** screen will appear. Select the **User Groups** tab and click **Ins**.



4. The **User Group Edit Form** will appear. Enter a **Group Name** and a **Privilege Level**.

5. To add users to the group, click **Ins**. Select the user(s) you want to add to the group. To add multiple users, click each user name and press the space bar. The selected users' names will appear in bold text. Click **OK**.

6. The selected users will be added to the **User Group Edit Form**. Click **Save**.

Editing a User Group

1. Call up the **Edit Users and Groups** screen and click the **User Groups** tab.

2. Select the **User Group** you want to edit and click **F2**.

3. Make the necessary changes to the **User Group Edit Form** and click **Save**.

Deleting a User Group

1. Call up the **Edit Users and Groups** screen and click the **User Groups** tab.
2. Select the user group you want to delete and click **Del**.
3. A prompt will appear asking if you are sure you want to delete the user group. Select **Yes**.

NOTE: You must remove all users from a user group before deleting it.

Changing User Passwords

1. From the **Alt-X Start** screen, go to **File** > **Users** > **Change Password**.

2. Enter your login credentials and click **OK**.
3. The **Change Password** form will appear. Enter your new password in the **New Password** and **Verify New Password** fields and click **OK**.

Pharmacist and Assistant Association

Assistants working within the dispensary must be associated with a pharmacist in order to process prescriptions. Third Party Payer claim and Drug Information System (DIS) information submission requires assistants to be associated with the acting pharmacist in order for the pharmacist license number to be submitted as a part of the transmission.

Associating Assistants with Pharmacists

1. From the **Alt-X Start** screen, go to **File** > **Users** > **Associate Pharmacist**.

2. The **Pharmacist Association Form** will appear. Place a checkmark next to the assistant(s) you want to associate and have the pharmacist enter his or her credentials in the **Pharmacist Initials** and **Password** fields. Click **Associate**.

Disassociating Assistants from Pharmacists

1. From the **Alt-X Start** screen, go to **File** > **Users** > **Disassociate Pharmacist**.
2. Have the pharmacist enter his or her login credentials and click **OK**.

All assistants will be disassociated from the specified pharmacist.

Start Screen

The **Start Screen** is displayed when a user successfully logs into a Kroll session. Note that multiple sessions can be opened on one terminal, but it is **not** recommended to have more than 3 sessions per terminal as this may slow down computer processing times.

Function Keys

The Function Keys (i.e. F3, F5, F7, F9, F11, and F12) are located directly below the menu options. These keys are explained in detail in later sections of this user manual.

Universal Search Field

The **Universal Search Field** is used to search for patients, drugs, prescribers, and prescriptions. It is located right below the F3 - Patient button in the upper left corner of the **ALT+X** Start screen.

Enter search criteria for a patient, drug, prescriber or Rx, and press the corresponding function key to obtain search results that match the criteria entered. For example, you can enter a patient's phone number and press **F3 - Patient** to search for patient records with that phone number, or enter a **DIN** and press **F5 - Drug** to search for the associated drug record.

You can also enter a prescription number (Rx) or transaction number (Tx) into the **Universal Search Field** and choose one of the options from the left navigation pane:

Modify Rx
Modify the most recent Tx in the Prescription Chain without generating a new transaction number when possible (e.g. Add missing repeats to a prescription).

Reprint Rx
Displays options for you to reprint vial labels, hardcopies, Kroll Care, privacy labels, and receipts for the most recent Tx in the Prescription Chain.

Cancel Rx
Allows users to reverse a prescription.

Modify Specific Rx #
Modify a Tx that is NOT the most recent Tx in the Prescription Chain.

Reprint Specific Rx #
Displays options for you to reprint vial labels, hardcopies, Kroll Care, privacy labels, and receipts for an Rx that is NOT the most recent Tx in the Prescription chain.

Counsel Rx
Displays the **Counseling** screen for the Rx number entered in the search field.

Menu Options

The menus located across the top of the window (File, Edit, Reports, Cards, etc.) can be accessed by clicking on the word with the mouse, or by pressing **ALT** and the **underlined letter** (e.g., **ALT+F** to access the **File** dropdown menu).

File/Edit
The **File** and **Edit** menus contain commands used for configuring and managing the Kroll Pharmacy Software. Since a large majority of system configurations will be centrally maintained, users will rarely have to access these two menus unless otherwise specified.

Reports
The **Reports** menu contains a comprehensive list of Kroll reports. This menu is organized into categories for quick access to desired reports. Reports will be discussed in more detail in later sections of the User Guide.

Utilities
The **Utilities** menu contains supplementary features of the system including Drug Ordering, Interactions Checking, Patient Merge, Drug Merge, Quick Price, Print Free Form Labels, etc.

NH
The **NH** menu contains commands to create new nursing home forms, edit the existing nursing home forms, print MAR/TMR reports, manual batch filling, packaging, viewing cycles and adding Rxs to manual batch.

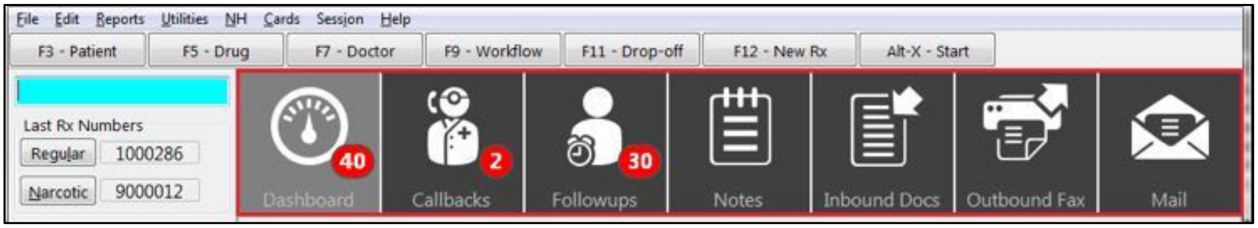
Cards
The **Cards** menu is a reiteration of the function keys (i.e. F3, F5, F7, F9, F11, and F12). Clicking on one of the commands in this menu is equivalent to pressing the associated function key on the keyboard.

Session
The **Sessions** menu allows users to open and manage multiple Kroll sessions from one terminal. See section on “Getting Started – Managing Multiple Sessions”.

Help
The **Help** menu provides access to on-screen help and diagnostic tools.

Dashboard Icons

There are seven dashboard icons located on the **Alt-X Start** screen. Each icon provides access to tools that support pharmacy operations; when used properly, these tools help improve patient care. Note the numbers in the red circles indicate the number of entries listed under the specific dashboard icon).



Dashboard

The **Dashboard** icon is the default view for the **Alt-X Start** screen. It displays prescriptions that are overdue, approaching due time, or in the Trouble queue. The Workflow window allows users to quickly determine the number of Rxs approaching due time at each prescription processing stage.

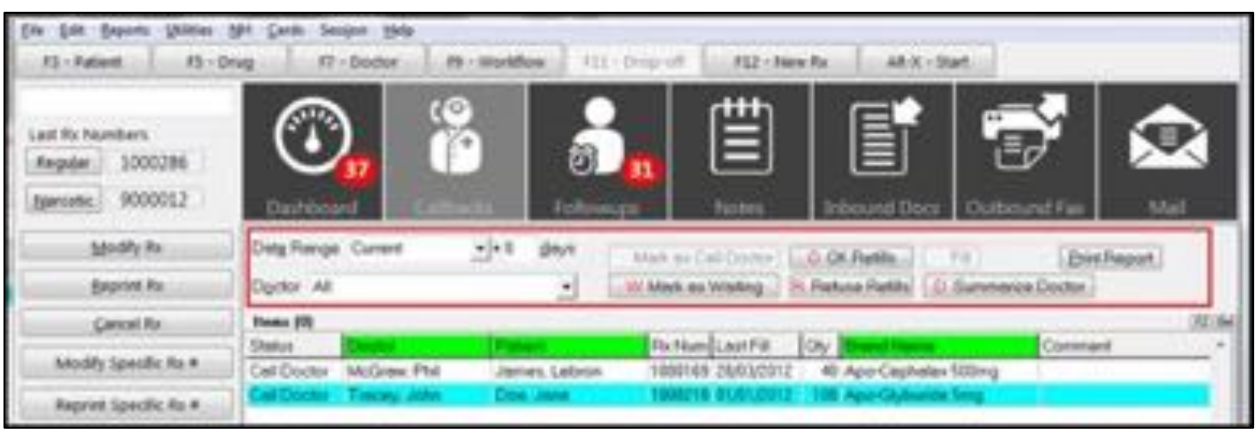
Click the **Details** button located directly below Rx Counts to view the current Rx counts. The **Rx Totals Form** will display.

Users can enter a previous date in the **Totals for Date** field and click **Recalculate** or press **Enter** on the keyboard to view totals for the inputted date.

Callbacks

The **Callback Icon** displays communications initiated from the system to prescribers. An entry is automatically created in the **Callback** list whenever one of the following actions is initiated from the system:

- The **Add to Doctor Callbacks** command is selected from the **Extra Functions** menu in the patient profile.
- The **Doctor Authorization Report** (a.k.a. Fax Doctor Report) is printed or previewed from the system.



Date Range

- **Current + [x] days:** Displays entries that are currently active as well as those that are scheduled to become active "x" number of days.
- **Current Or Resolved Today + [x] days**: Displays entries that are either currently active or that have been resolved today.
- **All + [x] days:** Displays all entries, historical and current.
- **History + [x] days**: Displays entries that have been resolved for "x" number of days.

Filter results further by accessing the **Doctor** dropdown menu (**CTRL+O**) to view callback entries generated for a specific prescriber.

The status of a callback entry can be managed by highlighting an entry and selecting one of the following options:

C (Mark as Call Doctor)
Select this option to indicate that a phone call needs to be made to the doctor for the highlighted entry. When this option is selected, you will be presented with a comment box that allows them to "Specify a comment for the doctor callback".

O (OK Refills)
Users can select this option to add prescription repeats to an entry. Once repeats have been added, the status of the entry will change to "Doc Okayed".

F (Fill)
The **F (Fill)** option is only available for callback entries with a status of "Doc Okayed". When this option is selected, users will be presented with the following choices:

- Copying the entry to a new Rx number will create a new Rx Work Order
- Apply repeats to the existing entry
- Ignore changes = do nothing

W (Mark as Waiting)
This option changes the status of a callback entry to "Wait for Doc".

R (Refuse Refills)
Select this option if the prescriber has declined the pharmacy's request for repeats on behalf of the patient. Selecting this option will change the status of the callback entry to "Doc Refused" and add an entry under the **Follow-ups Icon** to remind you to contact the patient and let them know their request for repeats was refused.

D (Summarize Doctor)

Selecting this option will display the address, phone number and fax number of the prescriber listed in the callback entry. This option makes it easy to access contact information for the prescriber.

Print Report

Selecting this option will allow users to print the "To Do Report". This report can be used to identify outstanding/resolved notes, refills, follow-ups, and doctor callbacks.

NOTE: Callback entries generated from printing/previewing the "Doctor Authorization Report" will automatically be removed from the list when the Rx(s) are refilled using the "Copy Rx" function. The system recognizes that the authorization request has been resolved through the act of copying the old Rx to a new Rx number.

Regular maintenance of the Callback screen is essential for ensuring that entries in the list are relevant to pharmacy operations for that day. For example, entries that have been resolved or have become irrelevant need to be deleted so that only current and active entries are displayed.

Followups

The **Followups** icon displays entries that serve as reminders to follow up with patients regarding a specific matter; the actual follow up can be performed via phone call or face-to-face interaction.

You can manually add a follow up entry by clicking **Ins** or pressing **Insert** on the keyboard from the **Follow Ups** window and completing the **Patient Note** form.

The **Patient Note** screen has a number of options which are explained below:

Due Date/Time
Select when the follow-up is due to occur.

Reoccurring Follow-up
Patient follow-ups can be configured to re-occur every "x" number of days.

Patient
Depending on how the follow-up entry was added, the patient field may or may not be populated. If the patient field is empty, click **F2** or press **F2** on the keyboard to search and insert a patient record into the follow-up entry.

Entered by
Users can enter their initials to identify the author of the follow-up entry. The initials are defaulted to you who opened the session but can be overwritten.

Resolved by
Users can enter their initials to confirm a follow-up has been completed. Once a follow-up has been "resolved" it can only be accessed by setting the date range to "History + ___days".

Comment
Details of the patient follow-up can be recorded in the Comment field.

Mark a Callback entry as "Doc Refused". When a prescriber refuses to authorize repeats for a patient, the pharmacy needs to follow-up with the patient so they can make other arrangements to obtain their medication.

From the **Follow Ups** window users can choose to view entries generated for a specific **Date Range:**

Current + [x] days
Displays follow-up entries that are currently active as well as those that are scheduled to become active in "x" number of days. <Blank> will display follow-up entries due today.

All
Displays all follow-up entries; historical and current.

History + [x]days
Displays follow-up entries that have been resolved "x" number of days ago.

Notes

The **Notes** icon is a communication tool used by pharmacy users to communicate with each other. The intention is to reduce paper clutter within the dispensary by using a system supported function that facilitates user-to-user communication. Click **Ins** to insert a new note.

For example, the pharmacist may wish to leave a message for the afternoon assistant indicating that drug expiry checking should be continued to the second to the third bay; the pharmacist can relay this message to the assistant by inserting an entry into the notes section.

From the **Notes** window, users can choose to view note entries generated for a specific date range:

Current+___ days
Displays notes entries that are currently active as well as those that are scheduled to become active in "x" number of days. <Blank> will display note entries due today.

All
Displays all note entries; historical and current.

History+___ days
Displays note entries that have been resolved "x" number of days ago.

The **To Do Note** screen has a number of options which are explained below:

Due Date/Time
Users can select when the note entry will become "active". Active notes contribute to the running count on the **Notes Icon**.

Reoccurring Notes
Notes can be configured to re-occur every "x" number of days.

Entered by
Users can enter their initials to identify who created the note; the initials are defaulted to you who opened the session but this can be overwritten.

Resolved by
Users can enter their initials to confirm that a note has been read or acknowledged. Once a note has been "resolved" it can only be accessed by setting the date range to "History + ___days".

Comment
Responses or general comments regarding the note can be entered in the comments field.

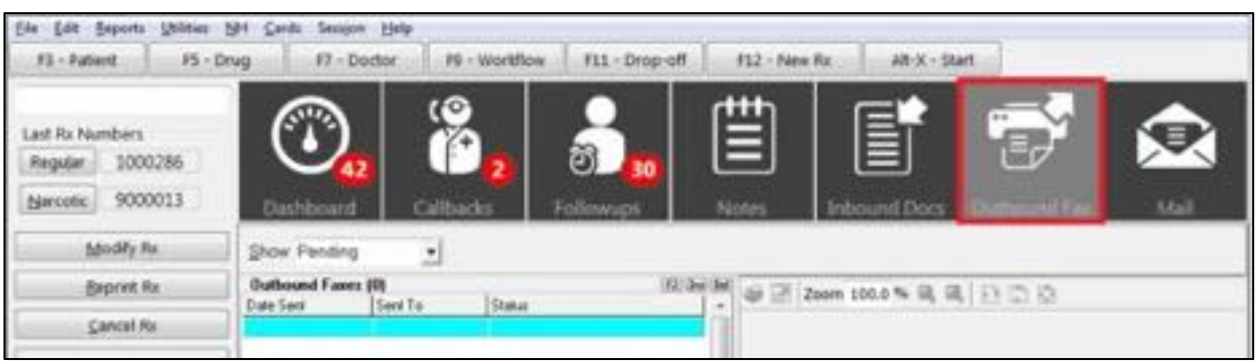
Inbound Docs

The **Inbound Docs** icon displays images that have been scanned into the system via the document scanner or received via the fax or email. From the scan window, users can filter the **Inbound Documents** list by selecting **Pending**, **Completed**, or **Deleted** and **Network Scan**, **Inbound Fax**, or **All** from the **Show** menus. Use the **From the last [x] days** field to specify a date range.

See the **Sending and Receiving Faxes** user guide for more information on this functionality.

Outbound Fax

Outbound Fax is used for sending fax messages such as Prescription Authorization Requests and Rx Transfer Requests. See the [Faxes - Sending and Receiving]() user guide on our website for more information about the fax functionality.



Mail

The **Mail Icon** is an internal email system built within the Kroll Pharmacy Software. The Mail Module is the tool Head Office will use to send "fan out" messages to pharmacy users for various communications including, but not limited to, provincial network broadcasts. As long as a user is set up in the Kroll Pharmacy Software, they will have the ability to send a message to another local system user.

The red number beside the mail icon indicates the number of unread messages available for you that are currently logged into the system.

Click the **Mail** icon or the envelope at the bottom of the screen to access your inbox.

To compose a new message:

1. Click **New Message**, located in the top left corner of the Mail screen.
2. The **New Mail Message** window will open. Complete the following:

   - Enter the recipient’s name in the **To:** field.
   - Enter a subject in the **Subject** field.
   - Click **Add Attachment** to attach an image or document to the mail message.

3. Click **Send** to send the mail message.

Patient Records

Patient records contain comprehensive information about patients' contact details, drug plans, allergies and conditions, and Rx history. This section explains how to perform patient searches and how to create and manage patient records.

Searching for a Patient

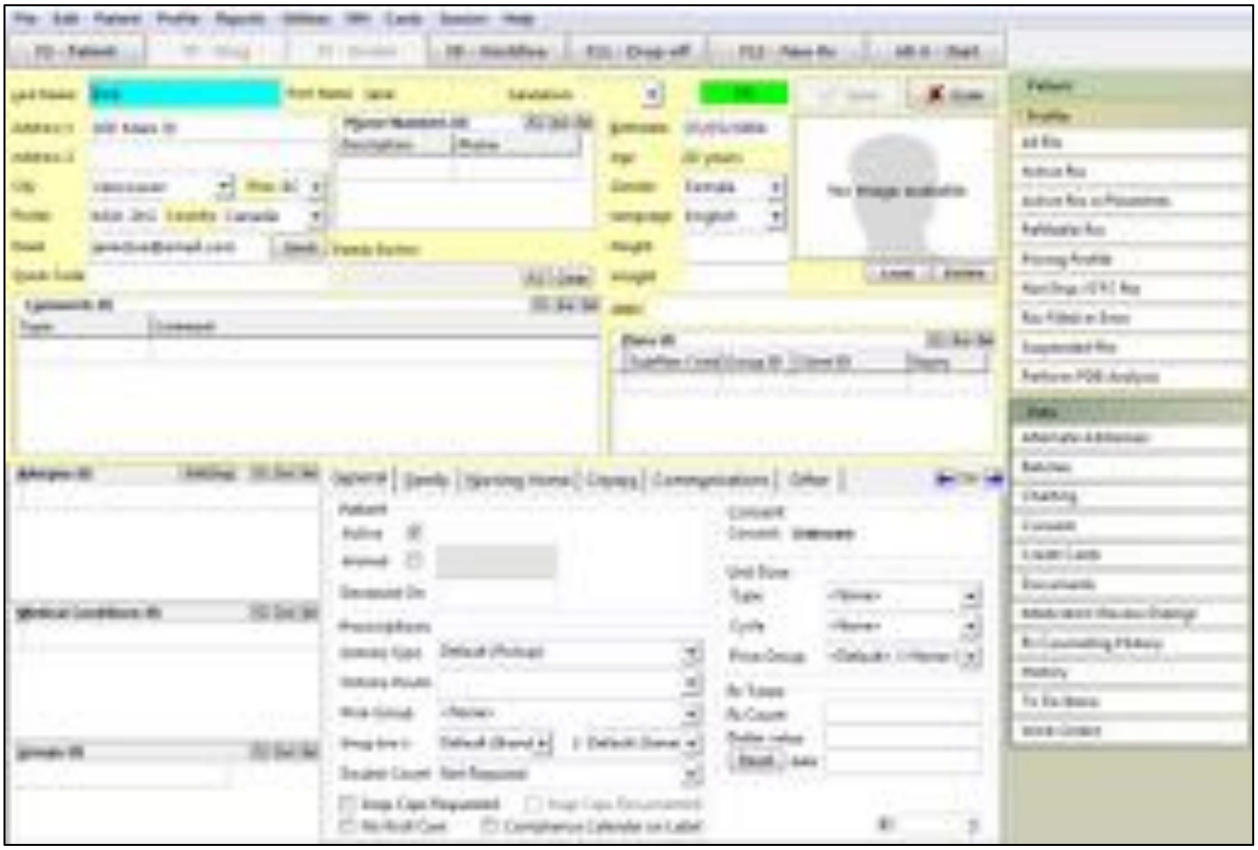
Method 1: From the F3 - Patient Search Screen

1. Select **F3 - Patient** from the **Alt-X Start** screen.

2. Enter one of the following patient search criteria and click **Search**:

    a) Last Name, First Name (e.g. "Doe, Jane" **OR** "doe,j" **OR** "Doe" **OR** ",Jane")
    b) A period (.) and the Patient Quick Code (e.g. ".DoeJ")
    c) 7 or 10 digit phone number (e.g. 800-263-5876 or 263-5876)
    d) A number sign (#) and the +Third Party Billing number (e.g. #123456789)
    e) An asterisk (*) to search ALL patients in the database

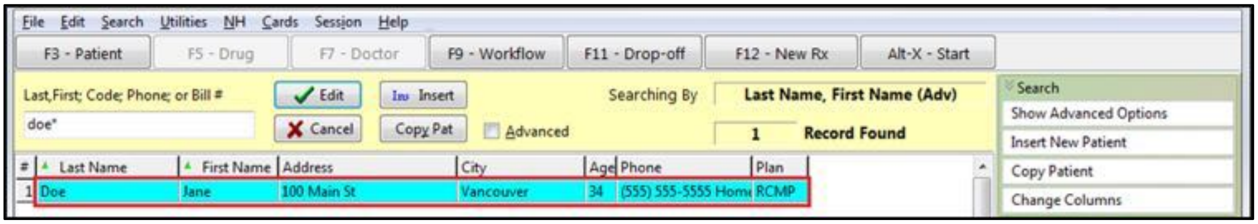
3. Double-click the patient record. The **F3 - Patient** screen will appear.



Method 2: From the Alt - X Start Screen

1. Enter any of the search criteria described above in the **Universal Search Field** and click **F3 - Patient**.

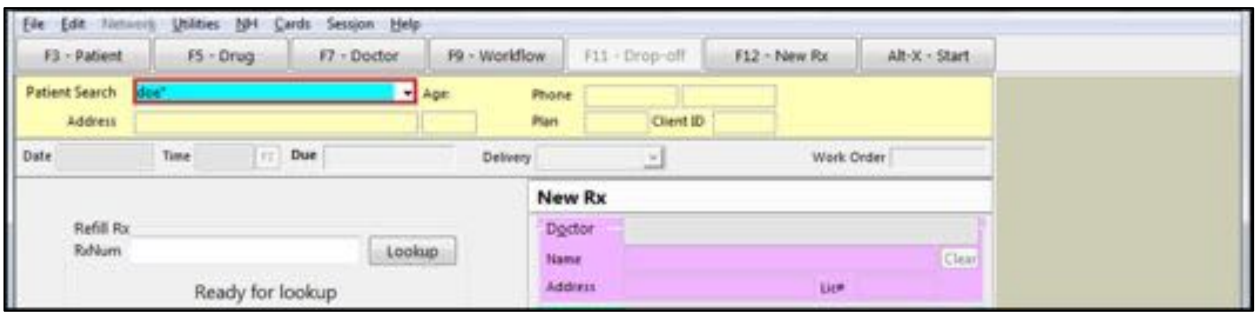
2. A list of patients matching the search criteria will be displayed. Double-click the patient record.



The **F3 - Patient** screen will display.

Method 3: From the F11 - Drop-Off Screen

1. Call up the **F11 - Drop-Off** screen and enter any of the search criteria described above in the **Patient Search** field and press the **Enter** key on your keyboard.

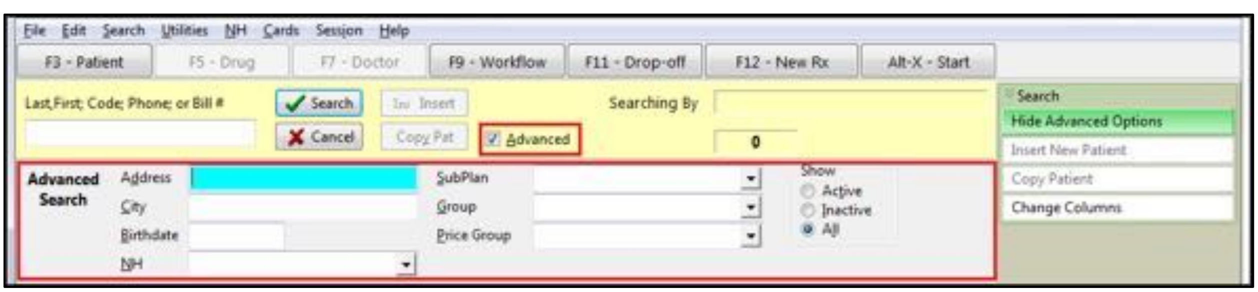


2. A list of patients matching the search criteria will be displayed. Double-click the applicable patient record. The **F3 - Patient** screen will display.

Performing an Advanced Patient Search

If a patient is not found through a regular patient search as described in the previous section, an **Advanced Patient Search** can be performed.

1. Call up the **F3 - Patient** search screen and place a checkmark next to **Advanced**. The **Advanced Search** pane will appear.



2. Enter any available advanced patient search criteria and click **Search**.

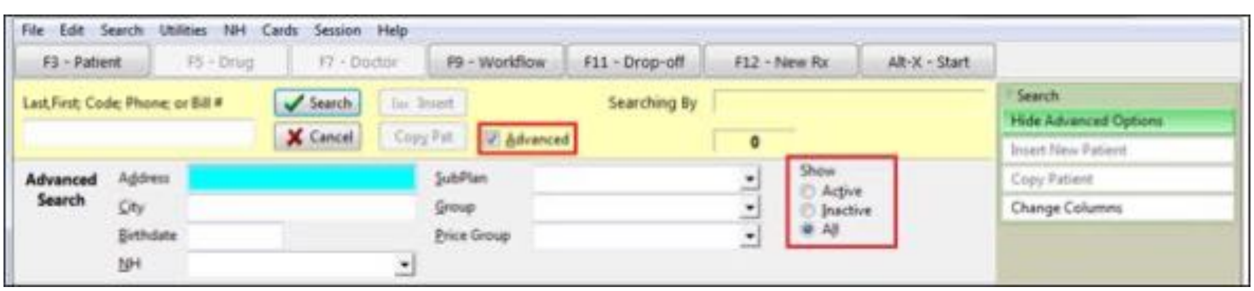
Inactive Patient Records

You have the ability to inactivate patient records in the system by un-checking the **Active** flag located on the patient record. Inactivating a patient record means that the patient will not show up in the regular patient search; an **Advanced** search for inactive patients will have to be initiated in order to access the record.

NOTE: Inactive patient records cannot be used in prescriptions. The **Active** flag must be turned on in order to fill prescriptions for that patient.

There are various reasons why a user may choose to inactivate a patient record. For example, the patient may be deceased, or may have moved to another country. Inactivating these records allows the regular search to provide more succinct results; this reduces the chances of selecting the wrong patient record into a prescription.

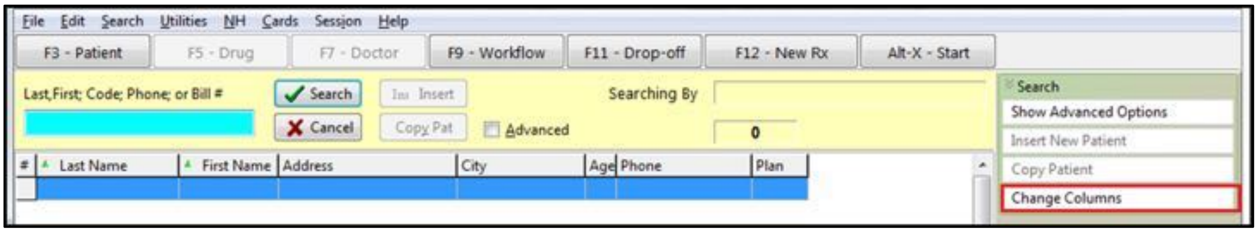
To locate inactivated patient records in the system, perform an **Advanced** search and make sure the **Inactive** or **All** flag is marked on the far right. Search for the patient as usual to find the applicable record.



NOTE: Inactive patient records will appear in red text in the patient search screen.

Configuring Columns in the Patient Search Screen

You can configure the columns that are displayed on the **Patient Search** screen by clicking **Change Columns** from the right navigation pane.



The **Edit Scan Columns** window will appear. Place a checkmark next to the columns you want displayed and click **OK**.

Use the **Use Default Columns** button to revert the column view back to its default settings.

Creating a New Patient Record

1. Perform a thorough search to ensure the patient does not already exist in the database. It is advisable to perform an **Advanced** search for inactive patients as well.

2. Once you have determined that the patient does not exist in the system, click **Insert** or press the **Insert** key on the keyboard.

3. A blank **F3 - Patient** screen will appear. Complete the patient fields and click **Save**.

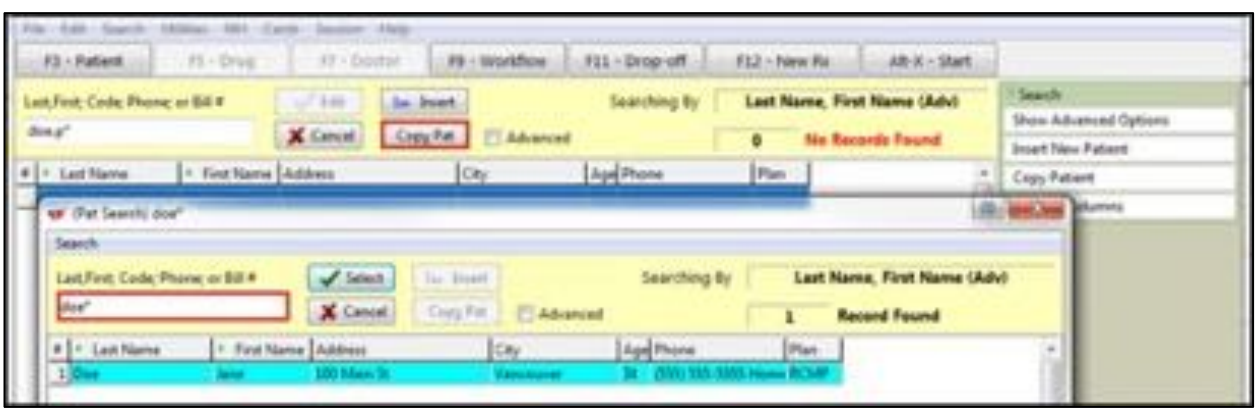
Copying an Existing Patient Record

If a new patient has a family member who already exists in the system, you can copy information from the family member to a new patient record by using the **Copy Pat** function from the **Patient Search Screen**.

1. Perform a thorough search to ensure the patient does not already exist in the database. It is advisable to perform an **Advanced** search for inactive patients as well.

2. Once you have determined that the patient does not exist in the system, click **Copy Pat** or press **CTRL+Y** on your keyboard.

3. A second patient search window will appear. *Search for the family member who should already be in the system*.



4. Highlight the family member of the new patient and click **Select**. The family member's patient record will appear. Review the information and confirm that it is the patient you want to copy information from. Click **Select**.

5. A prompt will appear asking if you want to copy the patient's plans. Answer **Yes** or **No** accordingly.

    a. If you answered **Yes**, a window will appear prompting you to select a relationship to the cardholder. Select a relationship and click **OK**.

NOTE: Third party plans will be linked to the patient that the information was copied from. If any changes to the plan numbers need to be made, it must be done from the originating patient record.

6. Enter missing information for the new patient record such as birthdate, gender, snap cap preference, phone numbers, etc.

7. Click **Save** to save the patient record.

Patient Record Fields

Last Name
Type the Last Name of the patient (do not add any symbols to this field).

First Name
Type the First Name of the patient (do not add any symbols to this field).

Salutation
Type the salutation (e.g. Mr, Mrs, Miss, Dr, etc) or click on the down arrow to select the appropriate salutation from the options.

Address 1 & 2
Type the patient's street address in one or both lines.

City, Province, Postal Code Country
Type in the rest of the address information.

Email
Enter the email address of the patient.

Phone
Phone numbers can be entered in this area. The phone number will auto-format so simply type in the numbers without using hyphens or brackets.

To add a phone number click **Ins**, press **Insert** on the keyboard, or simply begin typing the number in the field.

To delete a phone number, highlight the entry you want removed and click **Del** or press **Delete** on the keyboard. A window will appear asking you to confirm the deletion.

To edit a phone number, highlight the entry and either:

a) Click **F2** with the mouse.
b) Press **F2** on the keyboard.
c) Double click the entry.

Family Doctor (Optional)
Click **F2** with the mouse or press **F2** on the keyboard to search and select the patient's family doctor. When a prescriber is populated into this field, all prescriptions processed for the patient will default the prescriber to the one indicated here; **be careful of prescriber errors when using this function**.

Birthdate
Enter the patient birthdate as DDMMYYYY. The year can be entered as a 2 or 4 digit number (e.g. 1950 or 50). Once the birthdate is entered, the system will automatically calculate the patient's age in years.

Gender
Type the letter M or F to indicate Male or Female, or click on the down arrow to select the gender.

Language
The patient language will default to English. Click on the down arrow to select a different language for the patient. Be careful when changing the language setting as this will cause the SIG on the vial label to print in the language selected if the language is configured into the system. (Note: English translations will appear on hardcopy for pharmacist checking).

Height
Enter the patient's height. Pharmacy users should use the same measurements to record height to maintain database consistency (i.e. make a decision to use Feet or Centimeters, but not both).

Weight
Enter the patient's weight. Pharmacy users should use the same measurements to record weight to maintain database consistency (i.e. make a decision to use Kg or lbs, but not both).

Provincial Plan
Enter the patient's provincial health number (i.e. ODB, HSN, PHN, ULI) in this field.

Load Patient Image
Users can load a patient photo into the patient record by using the document scanner. Simply feed the photo into the scanner and click **Load** to initiate scanning.

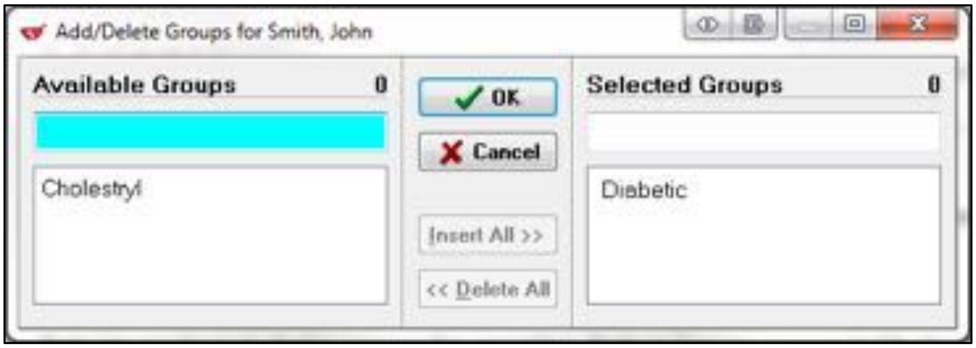
Groups
Patients can be included in a group for reporting. Patient Groups are created by head office and can be applied by pharmacy users to any number of patients. For example, a group called "Diabetic" can be attached to all patients that are Diabetic. Also note that patients can belong to more than one Patient Group.

To add a Patient Group, click **Ins** with the mouse or press Insert on the keyboard to call up a selection window displaying the available groups to insert.

To delete a Patient Group, highlight the entry you want to remove and click **Del** or press **Delete** on the keyboard. A window will appear asking you to confirm the deletion.

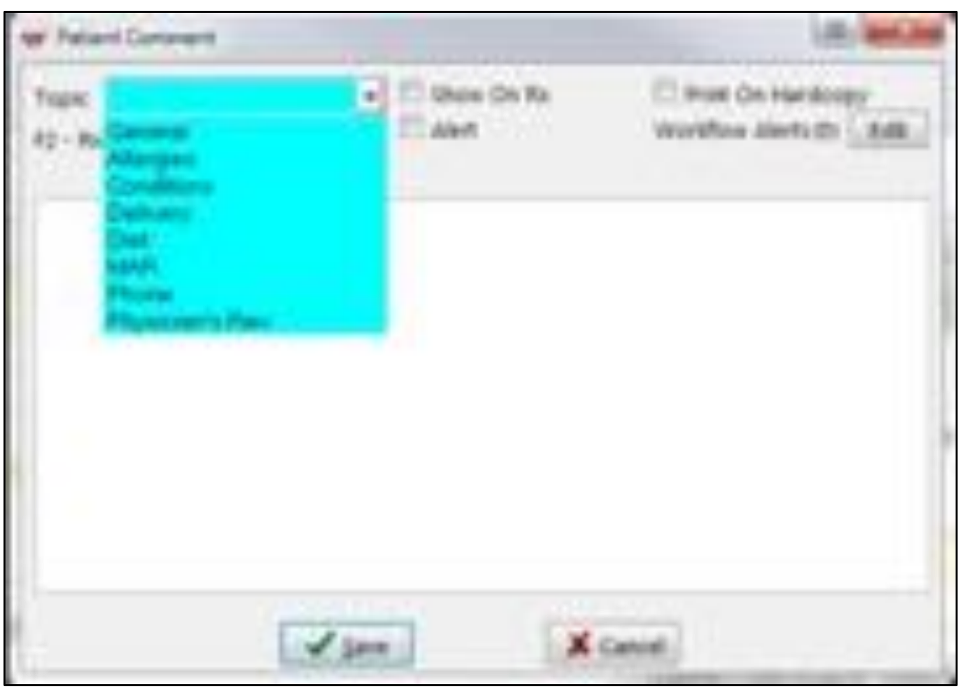
To edit a Patient Group, highlight the appropriate entry and either:

a) Click **F2** with the mouse.
b) Press **F2** on the keyboard.
c) Double click on the entry.



Comments
Patient records can contain any number of comment entries, and each entry can contain a large amount of data.

To add a comment, click **Ins** with the mouse, press **Insert** on the keyboard, or simply begin typing in the comment field. The following window will appear:



Select a **Topic** for the comment by accessing the dropdown menu. A topic must be selected in order to save the comment.

Each comment has three options. To enable an option, use the mouse to click on the checkbox, or TAB to the desired option and use the spacebar on the keyboard.

- **Show on Rx**: Enabling this option will display the comment at the F12-Filling Screen.
- **Print on Hardcopy**: Enabling this option will print the patient comment on the hardcopy. Note that only one patient comment can be flagged for this option as there is limited space on the hardcopy.
- **Alert**: Enabling this flag will cause the comment to pop up every time the patient record is accessed, and every time an Rx is filled for the patient.

To delete a comment, highlight the appropriate comment entry and click **Del**, or press **Delete** on the keyboard. A window will appear to confirm the deletion.

To edit a comment, highlight the appropriate comment entry and either:

a) Click **F2**
b) Press **F2** on the keyboard
c) **Double click** on the comment.

Make any necessary changes and click **Save** with the mouse or press **Enter** on the keyboard.

Plans
Third party plan information is stored in the "Plans" section of the patient record. A patient can have unlimited number of third party plans, and the system will support billing to all plans listed in the patient's record.

To add a plan, click **Ins** with the mouse, press **Insert** on the keyboard, or simply begin typing the name of the plan. The following **Patient Plan Information** screen will appear. Users can fill out third party details from this window.

Order

If there is only one plan for the patient, it will automatically be set as the Primary plan. If there is more than one plan, you must specify the sequence of billing for coordination of benefits (i.e. primary, secondary, tertiary, etc.)

Carrier ID, Group ID, Client ID

Obtain these numbers from the patient's plan card. Note that some plans do not require all of these fields to be filled out.

CPHA Pat Code

This field is only used by certain plans (e.g. Green Shield).

Birthday

Enter the date of birth of the cardholder.

Always Use in Rx

This flag is ON by default and applies the plan to all Rxs filled for the patient. This flag may be turned OFF for plans that only cover certain medications/products (e.g. STI Plans, Workman Compensation Plan, etc.)

Inactive

Place a checkmark next to this flag if the plan no longer accepts claims for the patient. An alternative to inactivating a plan is to delete it.

Link To…

This field is used to link an existing patient to the current plan.

Relationship

Select the relationship of beneficiary to the cardholder of the plan. Type the number corresponding to the correct relationship, or click on the down arrow to view all options.

Deduct Type

This field is only used for manually billed plans and refers to how the patient deductible is calculated (e.g. select whether the deductible amount is calculated based on percentage or dollar amount).

Deduct Value

This field is only used for manually billed plans and must be left blank for real-time plans. If the plan is a manual plan, enter the value of the deductible in this field (works in conjunction with "Deduct Type").

Expiry Date
If applicable, enter the date the plan expires; the date should be entered as DDMMYYYY.

Last Name
Enter the patient's last name as it appears on the plan card if it is different than what is entered on the patient record. The last name entered here will be sent to the plan.

First Name
Enter the patient's first name as it appears on the plan card if it is different than what is entered on the patient record. The first name entered here will be sent to the plan. For example, if the patient's name on the plan card is "Robert", but on the patient record it is recorded as "Bob", type Robert into the First Name field.

Comment
Enter any comments related to the patient record.

To delete a plan, highlight the appropriate plan entry and click **Del** with the mouse or press **Delete** on the keyboard. A window will appear to confirm the deletion.

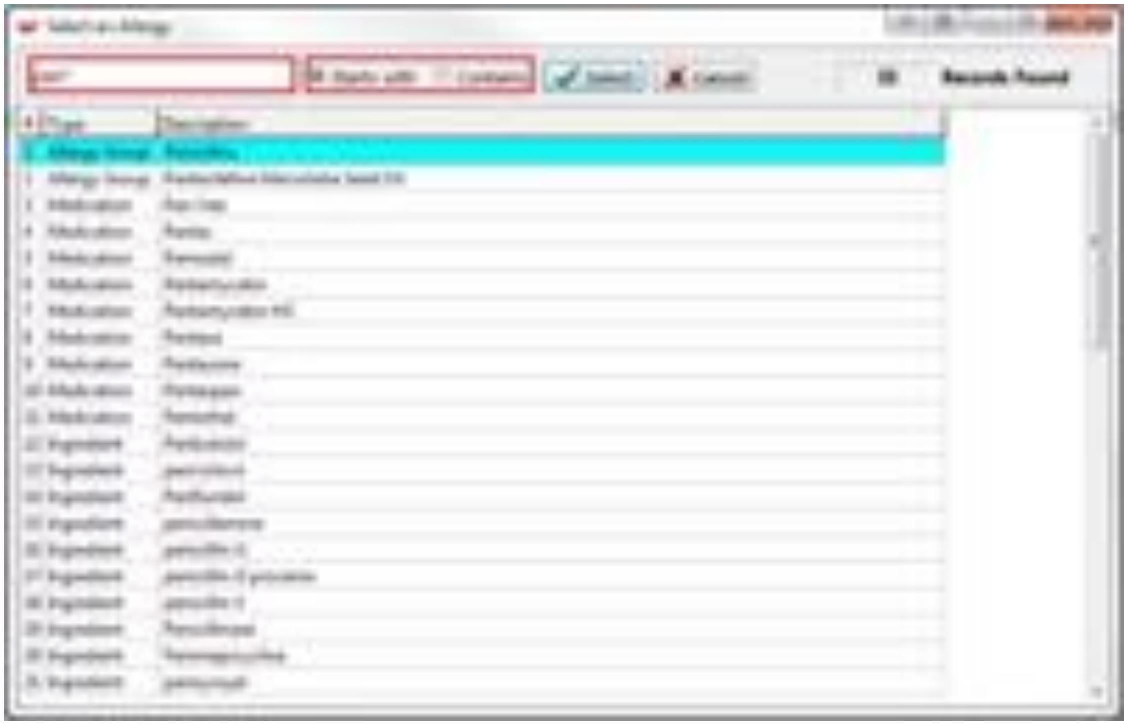
To edit any plan information, highlight the appropriate plan entry and either:

a) Click **F2**.
b) Press **F2** on the keyboard.
c) Double click the plan entry.

Make any necessary changes and click **Save** with the mouse or press **Enter** on the keyboard.

Allergies
Any number of allergies can be added to a patient record. Note that allergies entered into the patient record will be cross-checked against prescriptions filled for the patient using the **First Data Bank (FDB)** clinical module.

To add an allergy, click **Ins** with the mouse or press **Insert** on the keyboard. Options to search the allergy can be done by selecting the **Starts with** or **Contains** option beside the search field. Click **Search** or press **Enter** on the keyboard to begin the search.



Use the **Arrow Keys** to highlight the desired allergy entry and click **Select** with the mouse or press **Enter** on the keyboard to continue. Once the allergy is selected, the **Patient Allergy Information** window will appear with fields to indicate the **Source** of the allergy, the **Date** the allergy was reported, and **Comments** regarding the allergy.

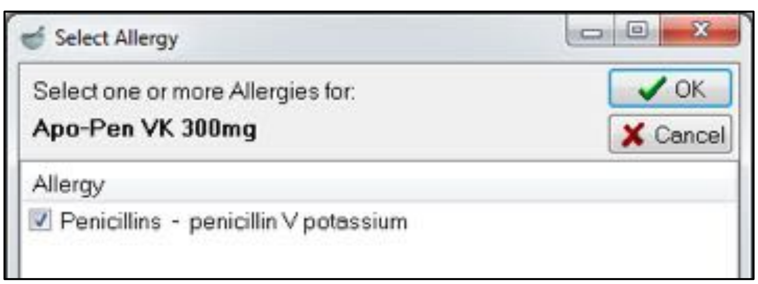
NOTE: Allergy entries with comments will have an asterisk next to them.

Once all necessary information has been entered into the **Patient Allergy Information** form, click **OK** with the mouse, or press **Enter** on the keyboard to save changes.

Allergies can also be added by searching and selecting specific drugs (as opposed to using therapeutic classifications). To add an allergy by searching for a specific drug, click on the **Add Drug** button from the allergies section of the patient record.

A **Drug Search Screen** will appear. Search for the drug the patient is allergic to. Once a drug is selected, a screen will display all components of the drug; all components will be selected by default. If the patient is only allergic to a fraction of the components, uncheck the rest of the components.

Once the components of the drug have been selected, click **OK** or press **Enter** on the keyboard to call up the **Patient Allergy Information** window where comments and other supplementary information can be entered.



To delete an allergy record, highlight the appropriate entry and click **Del** or press **Delete** on the keyboard. The system will prompt you to confirm the deletion.

To edit an existing allergy record, highlight the appropriate entry and either:

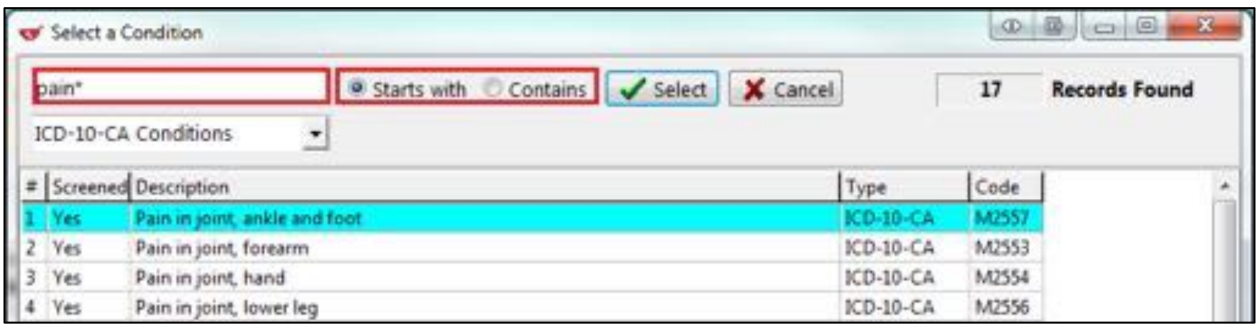
a) Click **F2**.
b) Press **F2** on the keyboard.
c) Double click on the desired allergy entry.

Make any necessary changes and click **OK** or press **Enter** to save changes.

Medical Conditions

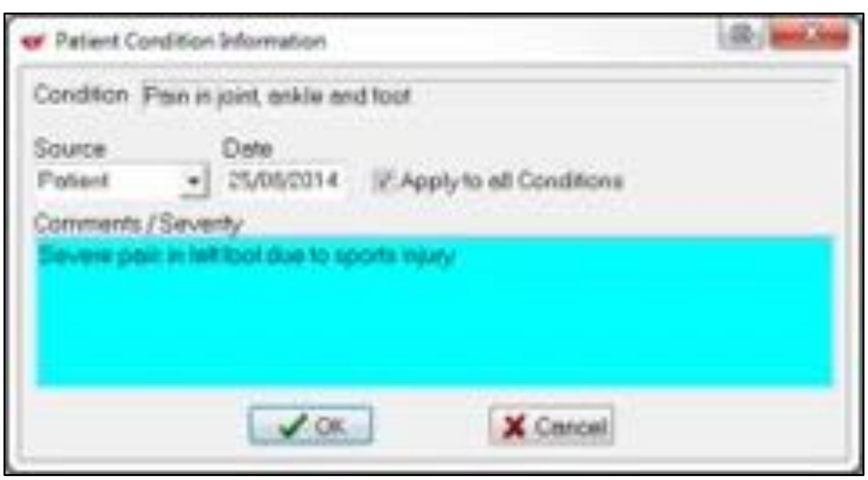
Any number of medical conditions can be added to a patient record. Note that medical conditions entered for a patient will be cross-checked against prescriptions in the patient profile using the **First Data Bank (FDB)** clinical module. Users should only add physician-diagnosed medical conditions to the patient record; this prevents inaccurate clinical warnings from showing up during the prescription filling process.

To add a medical condition, click **Ins**, press **Insert** on the keyboard or simply begin typing the medical condition in the field. The **Select a Condition** window will appear with the option to search by **Starts with** or **Contains**. Users can search by **ICD-10-CA** conditions, **FDBDX** conditions or both. Click **Search** with the mouse or press **Enter** on the keyboard to begin the search.



Use the arrow keys to highlight the desired condition and click **Select** or press **Enter** to continue. Once the condition is selected, the **Patient Condition Information** form will appear allowing you to add supplementary information such as **Source** of the medical condition, the **Date** the condition was reported, and **Comments** regarding the medical condition

NOTE: Medical condition entries that have a comment will have an asterisk next to it.



Once all necessary information has been entered into the **Patient Condition Information** form, click **OK** with the mouse, or press **Enter** on the keyboard to save changes.

To delete a condition, highlight the appropriate condition entry and click **Del** or press **Delete** on the keyboard. A window will appear to confirm the deletion.

To edit a condition, highlight the appropriate condition entry and either:

a) Click **F2**.
b) Press **F2** on the keyboard.
c) Double click on the entry to call up medical condition details.

Make any necessary changes and click **OK** or press **Enter** on the keyboard to save changes.

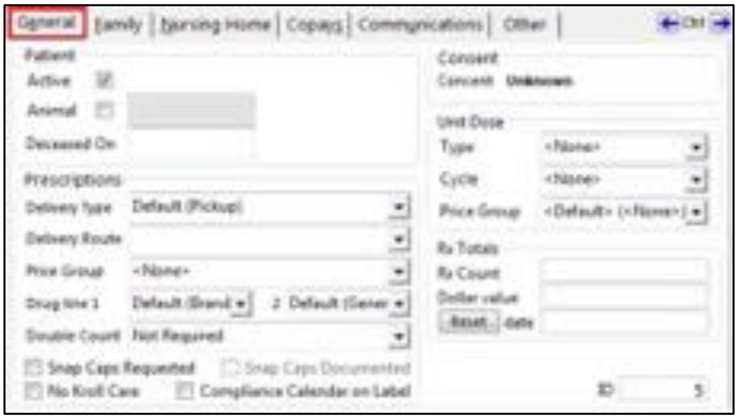
Groups
Use the **Groups** section to add the patient to a patient group.

Patient Information Tabs

The patient record contains tabs of information located at the bottom right of the screen. Move from one tab to another by pressing **Ctrl** in conjunction with the underlined letter on the tab (e.g,. press **Ctrl** + **F** to access the **Family** tab). You can also flip from tab to tab by pressing **Ctrl** + **→** to move right or **Ctrl** + **←** to move left.

General

The **General** tab displays general information and preferences of the patient.



Active
Patient records are “active” by default. Uncheck the Active flag if the patient has not filled prescriptions with the pharmacy for an extended period of time and you do not want them appearing in the “regular” patient search. Inactive patients are excluded from reports unless otherwise specified in the Options tab of the report.

Animal
If the patient is an animal, place a checkmark next to this flag; the corresponding text field will open up so users can enter a descriptor such as “dog” or “cat”. In certain provinces, activation of this flag triggers taxes to be applied to the patient’s prescriptions (i.e. Veterinarian Rxs are taxable). In certain DIS provinces, activation of this flag will prevent the patient’s prescriptions from being sent to the pharmacy network.

Deceased On
If the patient has passed, enter their deceased date in this field. If a deceased date is entered, the **Active** fag will become automatically unchecked.

Delivery Type
Select the delivery type from the dropdown menu.

Delivery Route
Select a delivery route from the dropdown menu. Delivery routes can be defined in Edit > Lists > Master Lists.

Price Group
Patients can be placed into a Price Group to activate patient specific pricing. Click on the down arrow to select from the available Patient Price Groups which are set up by head office.

Drug Line 1
Drug Line 1 refers to first piece of drug information printed on the vial label; users can choose from: None, Brand, Generic, Description, Equivalent To, or Description 2. The drug information is pulled directly from the Drug record.

Drug Line 2
Drug Line 2 refers to the second piece of drug information printed on the vial label; users can choose from: None, Brand, Generic, Description, Equivalent To, or Description 2. The drug information is pulled directly from the Drug record.

Double Count
This field allows users to indicate if double counting is necessary for the patient. The options are: “Not Required”, “Always” or “Narcotics Only”. If an option to double count is selected, a message will display on the packaging screen at the filling stage to prompt you to double count medications for the patient.

Snap Caps Requested
Place a checkmark next to this flag if the patient has requested snap cap vials. If snap caps are requested for the patient, a message will display on the packaging screen during the filling stage to prompt you to package medications in snap cap vials. ‘Snap Caps Requested’ will print on the hardcopy when this is enabled.

Snap Caps Documented
This flag is only available when the “Snap Caps Requested” flag is ON. Place a checkmark next to this option if the patient has provided written documentation/consent for packaging their medications in snap cap vials.

No Kroll Care
Place a checkmark next to this flag if the patient has requested not to receive Kroll Care Monographs. Activation of this flag will prevent the Kroll Care from printing for any prescriptions filled for the patient.

Compliance Calendar on Label
A calendar will print according to the day supply on the Rx. The calendar is intended for the patient to record when a dose has been taken.

Unit Dose
Enter unit does packaging details in this section. Note that whenever a **Unit Dose Type** or **Unit Dose Cycle** is selected, you will be prompted to activate and configure unit dose packaging for each prescription that is processed for the patient.

Type
Enter the type of unit dose packaging used for the patient. Select from “Dosett”, “Pilpak”, “Pilpak 28 Day”.

Cycle
Enter the number of weeks of medication packaged for the patient for one cycle.

Price Group
Enter a pricing strategy that adds a supplementary charge to unit dose Rxs.

NOTE: Unit Dose Price Groups are configured and set up by head office.

Rx Total
This is a read-only section that keeps a running total of the number of Rxs filled for the patient and the cumulative dollar value of those Rxs. Click **Reset** to reset the counters to zero.

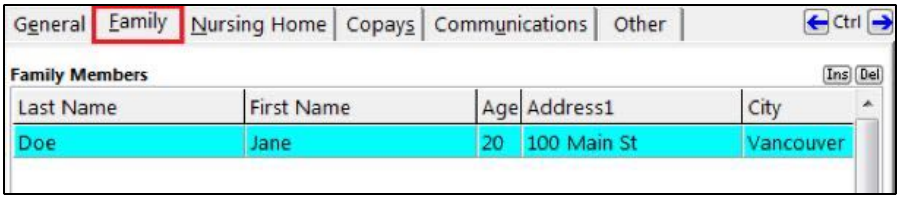
ID
Whenever a patient record is created, it is assigned an ID. This read-only ID is used to track the patient within the system tables.

Family

Family members can be grouped together in the system for managing records more efficiently. Once members of a family are grouped together, changing the information of one member (i.e. address, telephone number, and/or third party plan information) will allow you to extend the change to other family members. Once the updated information is entered, press enter on the keyboard and a window with the existing family members will show up. If the changes apply, click the checkbox.

In addition, linking family members together in the system will link their work orders together at point of sale. For example, if John and Jane are linked as family members and both have prescriptions ready for pick-up, when the pharmacy user accesses John’s prescriptions at pickup, Jane’s prescriptions will be displayed as well. You will have the choice of asking the patient if he wants to pick up prescriptions for his family members. **This functionality ensures that patients do not have to make multiple trips to pharmacy as well as helping users manage the Pickup Bins more effectively.**

To add a family member, click **Ins** with the mouse or press **Insert** on the keyboard. This will call up a **Patient Search Screen**. Search and select the applicable patient as you would regularly; if the family member you are linking has a different address than the original patient, you will be prompted to optionally update the addresses so they match.

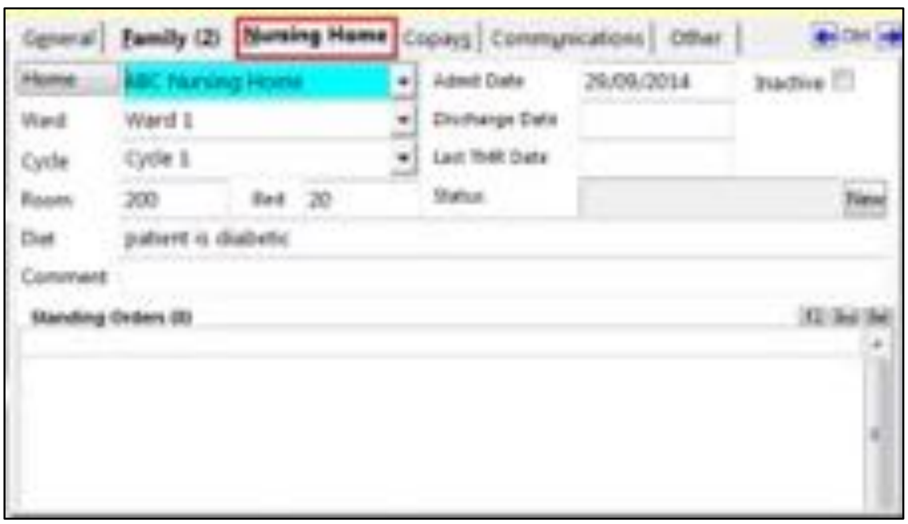


NOTE: If a patient is added into the database by copying an existing patient, the Family link will automatically be created.

To remove a family member, highlight the member you want to remove and click **Del** or press **Delete** on the keyboard. You will be asked to confirm the deletion.

Nursing Home

The **Nursing Home** tab displays information that pertains to nursing home patients only.



Home
All of the nursing homes configured in your system are available from this dropdown menu. Selecting a nursing home and saving the patient profile will enrol that patient in the selected nursing home.

Ward
The configured wards for the selected nursing home will appear in this menu. Select a ward for the patient, if applicable.

Cycle
The configured cycles for the selected nursing home will appear in this menu. Select a cycle for the patient, if applicable.

Room/Bed
Enter the patient's room number and bed number in the nursing home, if applicable.

Diet
Enter any dietary restrictions the patient may have in this field.

Comment
Enter any patient comments in this field.

Admit Date
Enter the date the patient was admitted to the selected nursing home.

Discharge Date
Enter the date the patient was discharged from the selected nursing home, if applicable.

Last TMR Date
Enter the date the patient received his or her last Three Month Review, if applicable.

Status
This field is used to indicate if the patient is on LOA (leave of absence). To set an LOA status, click the **New** button next to the **Status** field and complete the **Start Patient Leave of Absence** form. When you are finished, click **Save**.

Standing Orders
This section is used to record any medications that the registered nurse or registered psychiatric nurse may administer based on his or her assessment of the resident's needs. These orders are not to exceed **three** doses per 24-hour period without notifying the physician. Any rapid deterioration in the resident's condition must be reported to the physician immediately.

To add a standing order, click **Ins** with the mouse or press **Insert** on the keyboard. This will call up the **NH Standing Orders** screen. Complete the necessary fields and click **OK**.

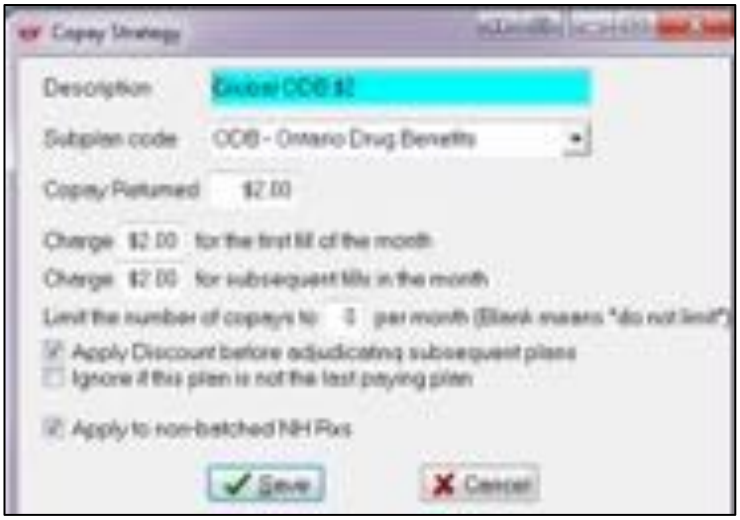
Copays

When the third party had already paid part of the deductible, the system discounts just the remaining cash portion of the Rx.

This is a read-only section that displays the **Copay Strategies** associated with the patient record.

Creating a new Copay Strategy

To create a new Copay Strategy, click **Ins** from the Copays section of the patient record.



When you done filling the Copay Strategy fields, click **Save**.

Communications

This section is used to record the patient's communication preferences and prescription refill preferences. Use the **Refill Type** and **Pickup** menus to record the patient's auto-refill preferences, and the **Language** menu to select the patient's language.

The **Communication Methods** pane allows you to record how the patient wants to be contacted for refill reminders and when Rxs are ready for pickup. Click **Ins** or press the **Insert** key on your keyboard to add a new communication method. Select from the **Message** and **Type** menus; **Notification Type** and **Phone#** fields will appear. Select the appropriate **Notification** type; the patient's phone number/fax number/email addresses will auto populate. Click **Save**.

Other

This section shows when the patient record was created, when it was last changed, and when a prescription was last filled for the patient.

Patient profile

The patient profile contains a list of medications the patient has filled at the pharmacy. Each line within the profile represents a written prescription with details including, but not limited to: Unit Dose, Rx Status, Rx Number, Dispensed Quantity, Drug Brand Name, SIG, Authorized Quantity, Remaining Quantity, Prescriber, Dispensed Date, etc. Users can perform actions against the Rx entries in the profile such as Refill, Modify, Cancel, Inactivate, Detail and more.

In addition, the medication profile gives pharmacy users the opportunity to actively participate in monitoring patient care by comparing new medication orders to all of the medications that the patient has been taking. This reconciliation is done to avoid medication errors such as omissions, duplications, dosing errors or drug interactions. This verification should be performed at every transition of care in which new medications are ordered or existing orders are rewritten.

Patient Profile Views

There are seven (7) patient profile views available in the Kroll Pharmacy Software. Different views allow you to filter and display prescription information that is relevant to the user's needs at that time. The patient profile views will be explained below:

All Rxs

The All Rxs profile displays all prescriptions filled for the patient regardless of when the Rx was filled, or the Rx status. This view is useful for viewing prescriptions that have been inactivated or transferred out.

Do one of the following to access All Rxs:

a) From the patient profile or **F11 - Drop-off** screen, press **Shift + F3** on the keyboard.

b) From the patient profile or **F11 - Drop-off** screen, press **Shift + F4** on the keyboard.

c) From the patient profile or **F11 - Drop-off** screen, click on **All Rxs** from the right navigation pane.

d) From the patient profile, select **Profile** > **All Rxs**.

Active Rxs

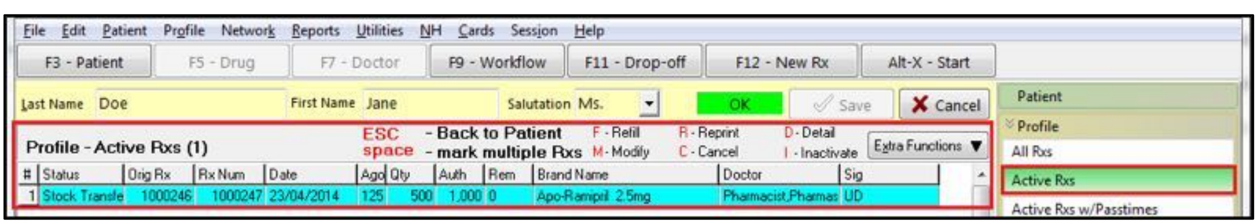
The **Active Rxs** medication profile displays prescriptions that have an **Active** prescription status. Prescriptions that are Unfilled, Not dispensed, Transferred-In or have a <blank> status is considered “active” and will be displayed. This view is useful for filtering out prescriptions that have been inactivated or transferred-out.

Do one of the following to access Active Rxs:

a) From the patient profile or **F11 - Drop-off** screen, press **Shift + F5** on the keyboard.

b) From the patient profile or **F11 - Drop-off** screen, select **Active Rxs** from the right navigation pane.

c) From the patient profile, select **Profile** > **Active Rxs**.



Active Rxs with Passtimes

The Active Rxs w/ Passtimes profile displays active prescriptions with columns that show unit dose information for prescriptions that are configured for unit dosing. The additional columns include Passtime, Unit Dose Quantity, and Passtime Note.

Do one of the following to access Active Rxs:

a) From the patient profile or **F11 - Drop-off** screen, press **Shift + F10** on the keyboard.

b) From the patient profile or **F11 - Drop-off** screen, select **Active Rxs w/ Passtimes** from the right navigation pane.

c) From the patient profile, select **Profile** > **Active Rxs w/ Passtimes**.

Refillable

The **Refillable Rxs** medication profile only displays prescriptions that have a **Remaining Quantity** left on the prescription. In other words, this view filters out prescriptions that cannot be refilled, while only displaying those prescriptions that can be refilled.

Do one of the following to access Refillable Rxs:

a) From the patient profile or **F11 - Drop-off** screen, press **Shift + F6** on the keyboard.

b) From the patient profile or **F11 - Drop-off** screen, select **Refillable Rxs** from the right navigation pane.

c) From the patient profile, select **Profile** > **Refillable Rxs**.

Pricing Profile

The **Pricing Profile** displays ALL the prescriptions filled for the patient with columns displaying cost, markup, fee and Rx Total. The values represent amounts pulled from the last filled Rx in the Prescription Chain. This view is useful for determining prescription pricing and resolving pricing discrepancies.

Do one of the following to access the Pricing Profile:

a) From the patient profile or **F11 - Drop-off** screen, press **Shift + F7** on the keyboard.

b) From the patient profile or **F11 - Drop-off** screen, select **Pricing Profile** from the right navigation pane.

c) From the patient profile, select **Profile** > **Pricing Profile**.

Not Dispensed/OTC Rxs

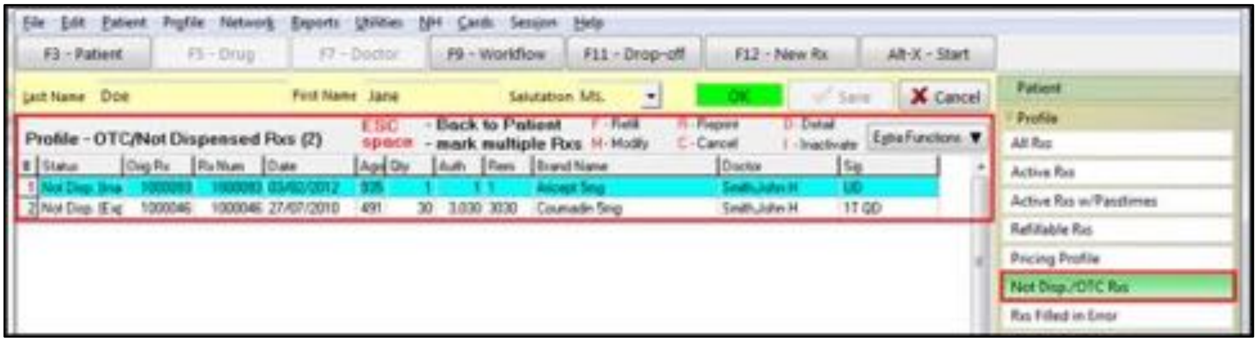
The **Not Dispensed/OTC Rxs** medication profile displays prescriptions that have been marked with a status of "Not Dispensed". Over-The-Counter (OTC) products are added to the patient profile by marking them as "Not Dispensed" to allow drug interaction checking to occur without generating official prescription receipts.

Do one of the following to access Not Dispensed/OTC Rxs:

a) From the patient profile or **F11 - Drop-off** screen, press **Shift + F8** on the keyboard.

b) From the patient profile or **F11 - Drop-off** screen, select **Not Disp/OTC Rx** from the right navigation pane.

c) From the patient profile, select **Profile** > **Not Disp/OTC Profile**.



Rx Filled in Error

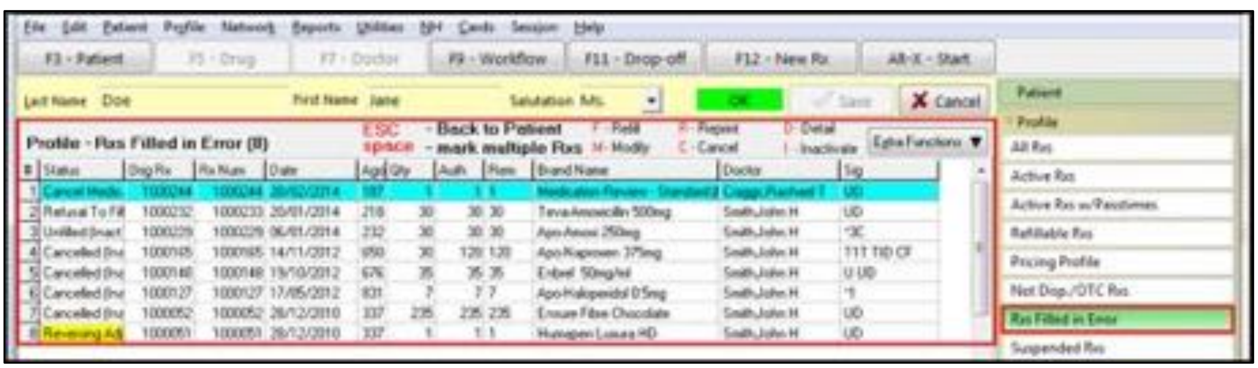
The **Rx Filled in Error** profile displays prescriptions filled in error for the patient. This profile is commonly known as the "Garbage Profile" because it houses prescriptions for the patient that should not have been filled and contain "wrong" information. Entries in this profile are excluded from drug interactions checking and should not influence dispensing decisions.

Do one of the following to access Rxs Filled in Error:

a) From the patient profile, press **Shift + F9** on the keyboard.

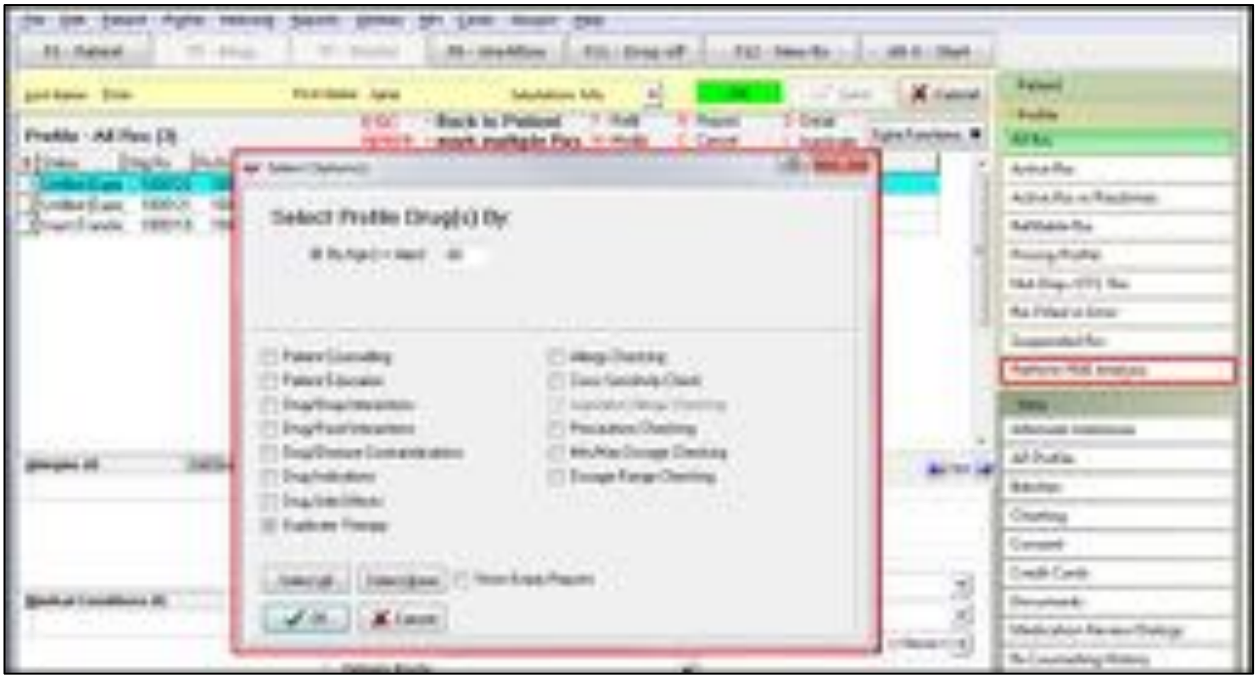
b) From the patient profile, select **Rxs Filled in Error** from the right navigation pane.

c) From the patient profile, select **Profile** > **Rxs Filled in Error**.



Perform FDB Analysis

Users can easily initiate a First Data Bank (FDB) clinical interactions analysis for a patient's medication profile by selecting the option to Perform FDB Analysis from the patient sidebar.



From the selection screen, place a checkmark next to the clinical information you want to retrieve from FDB; the **Select All** and **Select None** buttons allow users to quickly check or uncheck all the options. Once selections have been made, click **OK** or press **Enter** on the keyboard to execute the FDB analysis; the analysis will be based on information contained in the patient profile.

Results of the analysis will be displayed in the **Clinical Reports** window under separate tabs across the top of the screen; click **Back** to move left a tab, click **Next** to move right a tab. There is also an option to print the clinical report by accessing the **File** dropdown menu and selecting the command to **Print**.

Configuring the Columns in the Patient Profile

You can customize the information columns displayed on the patient profile by accessing the **Edit Scan Columns** window in one of three ways:

a) Right-click anywhere on the patient profile columns to display a list of menu options.
b) Select the command to **Change Columns**.
c) Click on the **Extra Functions** button located on the upper right of the patient profile.
d) From the **Extra Functions** menu, select the command to **Change Columns**.

e) Ensure your cursor is somewhere on the patient profile and press "**x**" on the keyboard to access the **Extra Functions** menu; from the menu, select the command to **Change Columns**.

The Edit Scan Columns window gives users the ability to customize the Rx columns displayed on the patient profile; simply place a checkmark next to the information you want displayed. Users can also highlight a selected option and click Move Up or Move Down to determine where the information is displayed relative to the other information columns. At any time, you can select the option to **Use Default Columns** which will cause the column view to revert back to the default.

Once the user has selected the columns they want displayed on the patient profile, they can click OK or press Enter on the keyboard to save changes until the session is closed. If the user wants the changes to become permanent, they must right click on the columns and select the option to make these the default columns.

Below are all the column options available for selection and provides a description of the information contained within the column:

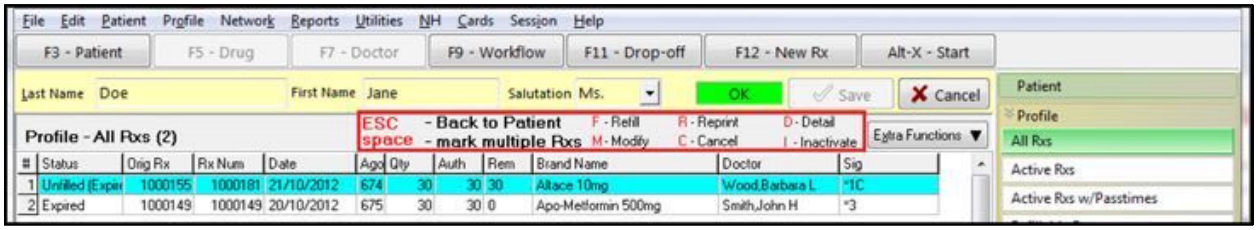
Column Name	Column Description
U	Unit Dose Indicator. "Y" means "yes", the prescription is configured for unit dosing. "N" means "no", the prescription is not configured for unit dosing.
Status	Prescription Status (e.g. <BLANK> = Active, Inactive, Unfilled, Not Dispensed, Transferred In, Transferred Out, etc.)

Rx Num	Prescription Number of the last filled Rx in the prescriber chain.
Qty	Dispensed quantity.
Brand Name	Brand name of the drug.
Sig	SIG code for the prescription (not expanded).
Auth	Authorized prescription quantity in units (e.g. the number of tablets/caplets).
Rem	Remaining prescription quantity in units (e.g. the number of tablets/caplets).
Doctor	Name of the prescriber of the prescription.
Date	Date of the last filled Rx in the prescriber chain.
Ago	Number of days ago the prescription was filled.
Orig Rx	Original prescription number for the prescriber chain.
Generic Name	Generic name of the drug.
Equivalent To	Brand name equivalent of drug product being dispensed. This column is not always populated because the associated field may not be populated on the drug record.
Sig Expansion	The expanded SIG code for the prescription. For example, “Take one tablet once daily until finished”.
Cost	The calculated cost of the last filled Rx in the prescriber chain.
Markup	The calculated markup of the last filled Rx in the prescriber chain.
Fee	The calculated fee of the last filled Rx in the prescriber chain.
MixFee	The calculated mixture fee for the last filled Rx in the prescriber chain.
SSCFee	Special Service Code Fee; the dollar value of the fee will be displayed in this column.
Total	Total dollar value of the last filled Rx in the prescriber chain. (Cost + Markup +

	Fee + MixFee + SSCFee = Total).
Total Fee	Total fees of the last filled Rx in the prescriber chain. (Fee + MixFee + SSCFee = Total Fee).
Days	Days' supply of the last filled Rx in the prescriber chain.
Inact	Indicates whether the prescription is inactive.
DIN	Drug Identification Number of the drug product.
Initial	User initials of the pharmacist who worked on the prescription.
Tech	User initials of the assistant who worked on the prescription.
Rem #	Remaining number of refills (e.g. 1 refill, 2 refills, etc.)
Auth #	Authorized number of refills (e.g. 1 refill, 2 refills, etc.)
Due	Number of days before the prescription is “due” to be refilled (e.g. 10 days until due).
OrigDate	Date when the first Rx of the prescriber chain was filled.
ExpDate	Expiry Date of the written prescription (Note: expiry dates for written prescriptions vary from province to province and drug schedule to drug schedule).
B	Batched prescription: Y = Yes; N = No
NH	Nursing Home prescription: Y = Yes; N = No
CF	Central Fill prescription: Y = Yes; N = No
Card #	Indicates the blister card number the prescription is assigned to.
Tracking	Indicates the current workflow state the prescription is at.
Methadone Ingest Date	Displays the Methadone Ingest Date for methadone prescriptions.
MI	Indicates if a prescription has been billed to a third party with an “MI” intervention. “Y” = yes; “N” = no.

Patient Profile Commands From the Patient Record

There are eight (8) key commands that can be executed when you call up the patient profile from the patient record. These commands are outlined below in RED and will act on the highlighted or tagged prescription(s) in the patient profile.



ESC –Back to Patient
Space – Mark Multiple Rxs
F - Refill prescription(s)
M-Modify prescription(s)
R-Reprint prescription(s)
C-Cancel prescription(s)
D-Detail prescription(s)
I-Inactivate prescription(s)

ESC – Back to Patient

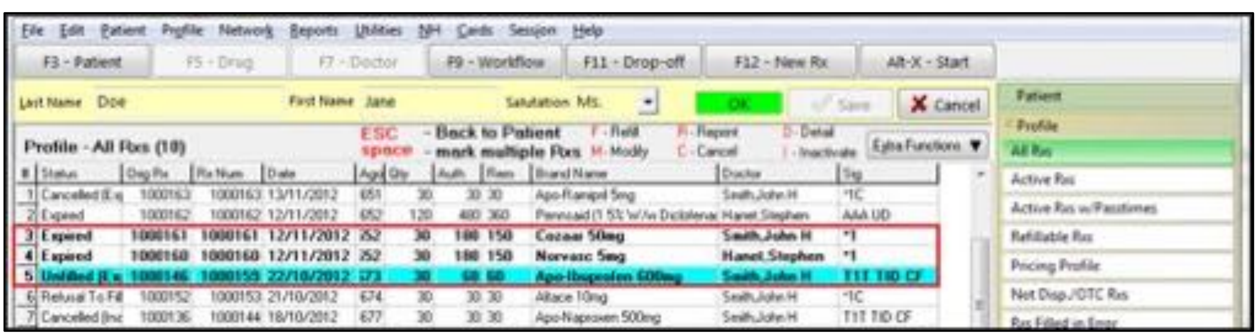
Press **Esc** on the keyboard or click on the word **Esc** to return to the Patient Record from the patient profile.

Space – Mark Multiple Rxs

Users can execute a command (e.g. Refill, Reprint, Cancel, Modify, etc.) on multiple prescriptions at once. For example, users can tag multiple prescriptions on the profile and select the command to "Cancel" which will bring up one prescription after another to be cancelled until all Rxs are reversed.

To tag prescriptions on the patient profile:

1. Highlight an Rx entry and press the spacebar on the keyboard. Once a prescription is tagged it will appear in bold. Repeat this step to tag additional Rxs.



F-Refill

To tag prescriptions for refill:

1. Highlight or tag prescription(s) to be refilled by pressing **F** on the keyboard or click **F-Refill** with the mouse.
2. Once the Refill command has been executed, the **F12** screen will appear.

NOTE: Notice that the status of the prescription on the upper left hand corner of the window will read "Refill". A work order due time must be selected from this screen in order to continue processing the prescription.

M-Modify

To tag prescriptions to modify:

1. Highlight or tag prescription(s) to be modified by pressing **M** on the keyboard or clicking **M-Modify** with the mouse.

NOTE: Once a prescription has been adjudicated to a plan, only certain fields will be open for modification; any field that impacts price will not be editable.

R-Reprint

To tag prescriptions to reprint:

1. Highlight or tag prescription(s) from the patient profile.
2. Select to reprint various labels such as vial labels, hardcopies, drug information monographs, privacy labels, and receipts.

C-Cancel

Cancelling a prescription means you would like to reverse a prescription. If an Rx is being cancelled after adjudication to a third party, a reversal will also be made for financials. Users can highlight or tag prescription(s) from the patient profile and press **C** on the keyboard or click **C-Cancel** with the mouse. Once the **Cancel** command has been executed, the prescription will be brought up in "cancel" mode; you will be asked to confirm whether or not they would like to cancel the prescription.

When cancelling any prescription, you will be presented with a message box asking "**Is this the Rx that you want to cancel?**"

Yes – Proceed with reversing the prescription

No – Do nothing, return to the previous screen

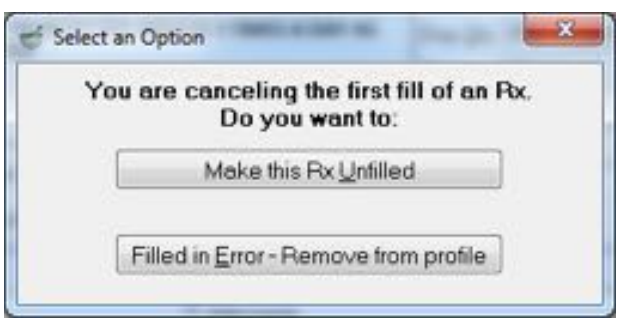
Cancel and Refill – Used in scenarios where the user has made an input error and needs to reverse the Rx, make a correction, and refill the Rx to the third party plan.

When cancelling an Unfill (i.e. On hold Rx), you will be presented with a message asking "**Do you want to Cancel this Unfilled Rx and mark it as a mistake?**" If you answer **Yes** the prescription will be removed from the patient profile.

When cancelling the first fill of a prescription, you will be presented with a message box with two options:

Make this Rx Unfilled (i.e. put the prescription on hold)

Filled in Error – Remove from profile



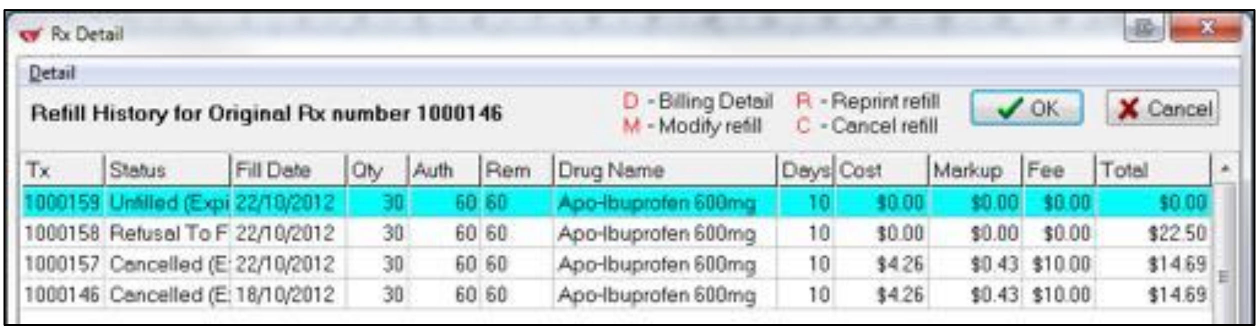
When cancelling the first fill of a “Not Dispensed” Rx (i.e. OTC to profile prescription), you will be prompted to mark the prescription as **Filled in Error – Remove from profile**.

D-Detail

The Detail command allows users to view adjudication details for a prescription. This command is useful for identifying and resolving pricing issues. Obtain adjudication details from the patient profile as follows:

Highlight the prescription of interest and press **D** on the keyboard or click **D- Details** to view the **Rx Detail** form.

This screen will bring up all the transaction numbers (Tx Number) used with the original Rx.



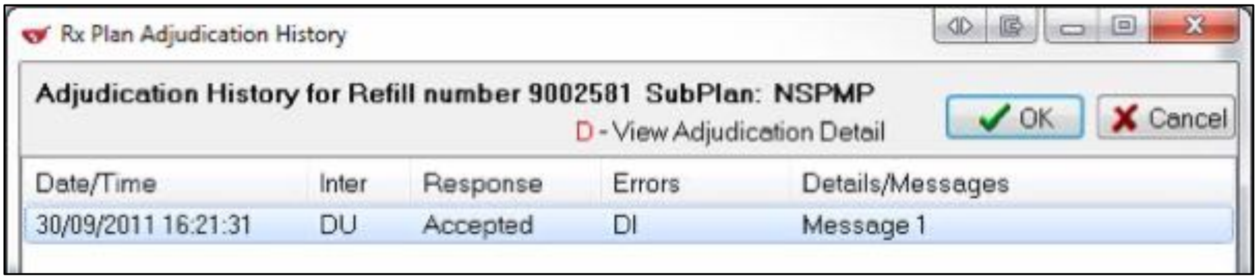
Tx	Status	Fill Date	Qty	Auth	Rem	Drug Name	Days	Cost	Markup	Fee	Total
1000159	Unfilled (Expi	22/10/2012	30	60	60	Apo-Ibuprofen 600mg	10	$0.00	$0.00	$0.00	$0.00
1000158	Refusal To F	22/10/2012	30	60	60	Apo-Ibuprofen 600mg	10	$0.00	$0.00	$0.00	$22.50
1000157	Cancelled (E	22/10/2012	30	60	60	Apo-Ibuprofen 600mg	10	$4.26	$0.43	$10.00	$14.69
1000146	Cancelled (E	18/10/2012	30	60	60	Apo-Ibuprofen 600mg	10	$4.26	$0.43	$10.00	$14.69

Highlight the Tx Number of interest and press **D** on the keyboard or click **D-Billing Detail** to view the **Rx Plan Detail Form**. This screen breaks down the amounts paid by each third party payer for the Rx selected.

Type	Sub Plan Code	Seq	Adj Date	Pays	Adj State
Fill	PI	1	22/10/2012	$22.50	Done

NOTE: Any value for Cash is indicative of the patient pays amount.

Highlight the third party plan entry, in this case the AHE, and press **D** on the keyboard or click **D-Adjudication History** to view the **Rx Plan Adjudication History** form which shows the details and messages sent back from the third party plan.



At this point, pressing **D** or clicking **D-View Adjudication Detail** will bring up the **Adjudication Claim and Response Form**. The left side of the screen, **Claim Values**, shows all the values being sent to the third party payer. The right side of the screen, **Response Values**, shows all the values and messages sent back from the third party payer.

I-Inactivate

User can highlight or tag prescription(s) from the patient profile to be inactivated by pressing **I** on the keyboard or clicking **I-Inactivate** with the mouse. Once the **Inactivate** command has been chosen, you will receive a screen showing the eligible and ineligible prescriptions.

Once a prescription is inactivated, it can be reactivated by accessing the **Extra Functions** menu and selecting the command to **Reactivate**.

Patient Profile Commands from the F11 - Drop-Off Screen

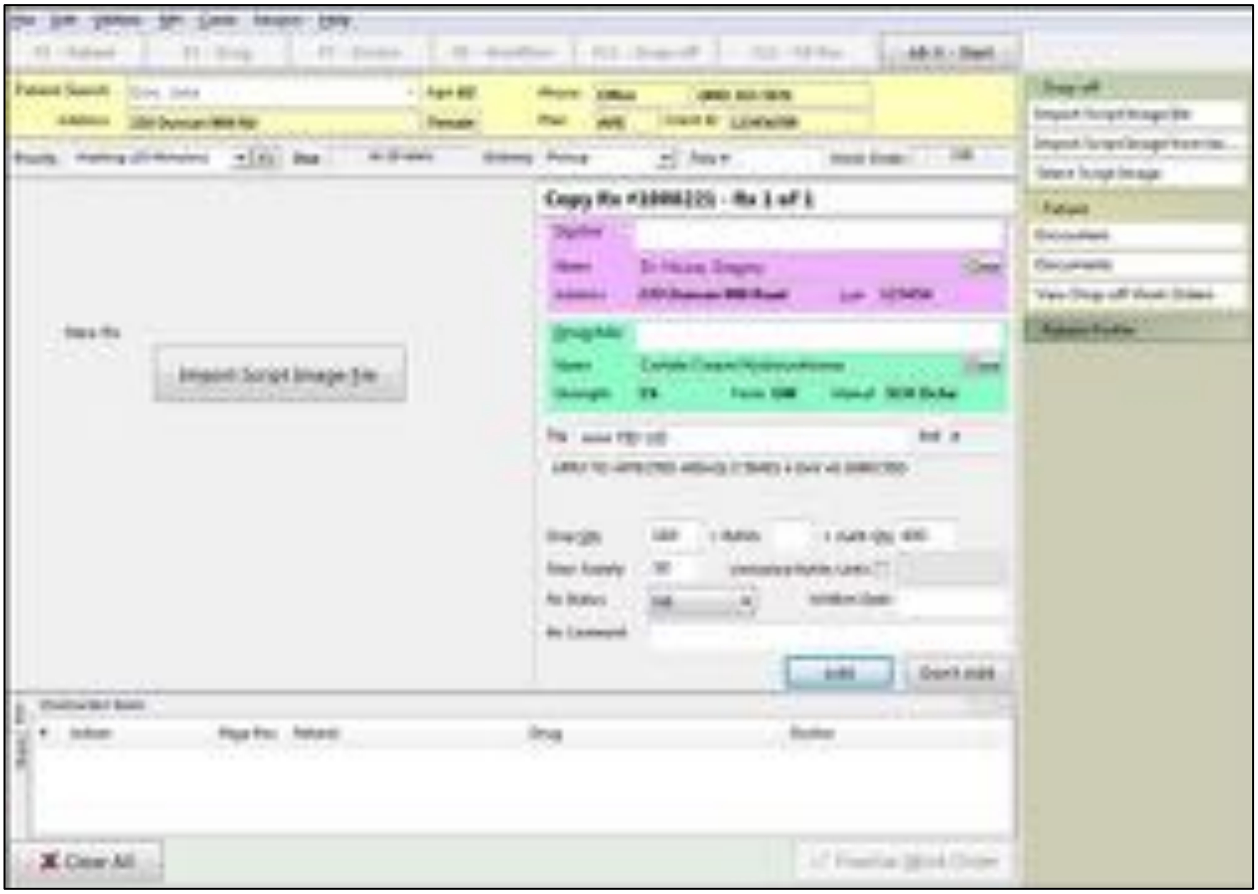
There are five key commands that can be executed when you call up the patient profile from the **F11 - Drop-Off** screen. These commands are listed in **RED** and act on the highlighted or tagged prescription(s) in the patient profile.

ESC –Back to F11 screen	**D**-Detail prescription(s)	**F** - Refill prescription(s)
Space – Mark Multiple Rxs	**Y**-Copy to new	**I**-Inactivate prescription(s)

The **ESC**, **Space**, **F-Refill**, and **D-Detail**, and **I-Inactivate** commands available from the F11-Drop-off patient profile are the same as the commands from the patient profile; however, there is a new command on the F11-Drop-off which is **Y-Copy to New**. This command allows you to highlight or tag prescription(s) from the patient profile and copy to a new prescription number (or work order).

1. Using the spacebar highlight or tag the prescriptions that you want to copy to a new prescription number.

2. Press **Y** on the keyboard or click **Y-Copy To New** with the mouse; the F11-Drop-off window will be populated with prescription information from the copied Rx.



Once all prescriptions have been copied, click on **Finalize Work Order** or press **Enter** on the keyboard to move the work order to the Input stage.

Extra Functions from the Patient Profile

Tag prescriptions on the patient profile using the spacebar, and proceed to execute actions on the selected prescription(s) by accessing the **Extra Functions** menu. The following subsections will explain how to use the applicable functions listed under the **Extra Functions** menu.

Suspend

The **Rx Suspend** feature allows prescriptions to be suspended from filling and appearing on reports (including all blister packaging reports) for a specific amount of time or indefinitely. Suspended prescriptions can be filled interactively if needed. During an interactive fill, you will receive a warning that the Rx is suspended. However, the dispensed quantity cannot be adjusted since the day the patient started taking the medication for this fill is unknown.

An active prescription can be suspended for a number of reasons (e.g. Drug-to-drug interactions, hospital admission, etc.). The pharmacist can "suspend" selected prescription(s) on the profile as follows:

Tag prescription(s) on the patient profiole you want to suspend. Use the **Spacebar** on the keyboard to tag prescriptions.

Access the **Extra Functions** menu by clicking **Extra Functions** with the mouse, or by pressing "**x**" on the keyboard. Select the command to **View/ Edit Suspends/Resumes,** and then choose the options to **Suspend**.

The **Suspend Rx(s)** window will be displayed:

Under the **Suspend** section, enter the **Date**, **Time**, and **Reason** for suspending the Rx(s). Users can select a reason for suspending the Rx(s) from options available in the dropdown menu, or they can type in a free-form reason. There is also an optional **Comment** field for entry of supplementary information regarding the suspend action.

Resume

When users suspend an Rx, they can also choose to set a **Date**, **Time** and **Reason** for resuming the Rx if this is known; if this information is unknown, leave it blank to suspend the Rx indefinitely. Users can select a reason for resuming Rx(s) from one of the options available in the dropdown menu, or they can type in a free-form reason. There is an optional **Comment** field for entry of supplementary information regarding the resume action.

Towards the bottom of the **Suspend Rx(s)** window, details for the selected prescriptions are displayed. If more than one Rx is being suspended, the first tab will show an **Rx Summary** listing all prescriptions selected for the suspend action. Subsequent tabs will contain information specific to the Rx number listed on the tab.

Once the suspend information has been inputted, click **Suspend Eligible Rxs** or press **Enter** on the keyboard; prescriptions with a status of **OK to suspend** will become suspended.

NOTE: Rxs with the following statuses cannot be suspended - **Inactive**, **Inactive** (**Copied**), **Inactive Transferred Out**, **Fee for Service**, **Stock Transfer**, or **Unfill**).

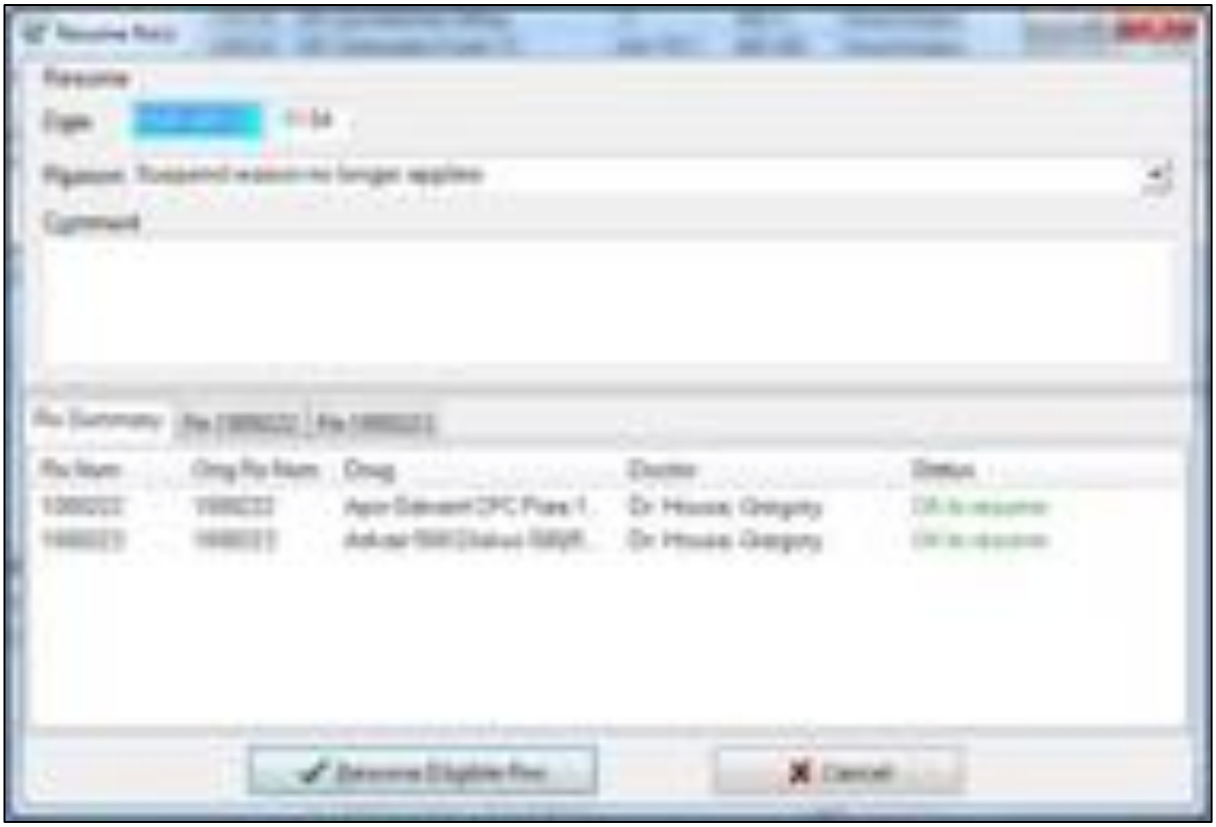
A suspended prescription will appear on the patient profile with a status of **Suspended**.

Only prescriptions with a status of **Suspended** can be resumed. Resume a suspended prescription as follows:

1. Tag prescription(s) on the patient profile you want to resume. Use the Spacebar on the keyboard to tag prescriptions.

2. Access the **Extra Functions** menu by clicking **Extra Functions** with the mouse, or by pressing **X** on the keyboard. Select **Suspend**/**Resume**, and then choose the option to **Resume**.

3. The **Resume Rx(s)** window will be displayed:

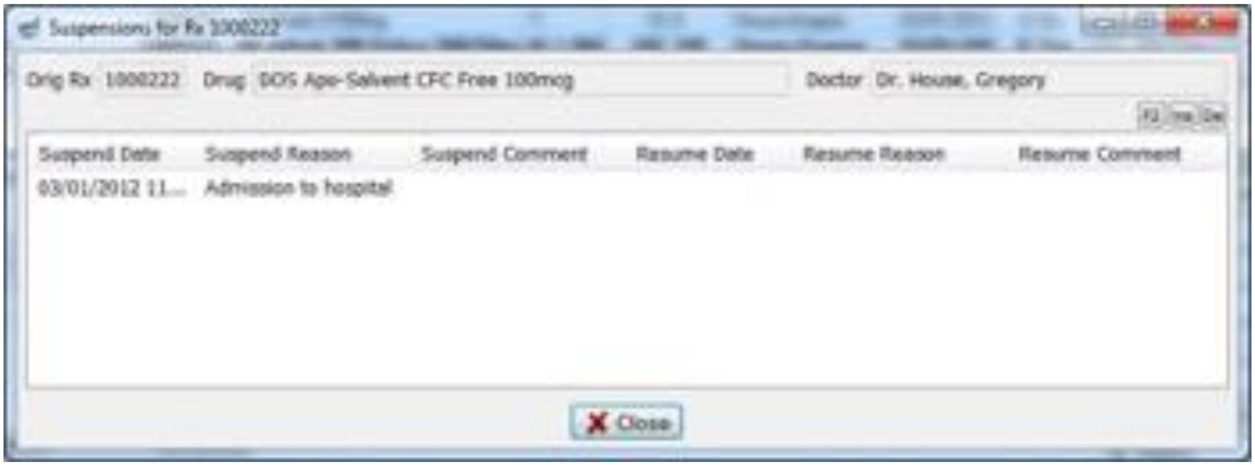


Select the **Date**, **Time** and **Reason** for resuming the Suspended Rx. Users can select a reason for resuming Rx(s) from one of the options available in the dropdown menu, or they can type in a free-form reason. There is an optional **Comment** field for entry of supplementary information regarding the resume action.

Once the resume information has been inputted, click **Resume Eligible Rxs** or press **Enter** on the keyboard, prescriptions with a status if **OK to Resume** will become active again.

View/Edit Suspend/Resume

Users can access the suspend/resume history for a specific prescription by highlighting the prescription from the patient profile and accessing **Extra Functions** > **Suspend/Resume** > **View/Edit Suspend/Resume**.



To edit an existing suspend/resume entry, highlight the entry and press **F2** on the keyboard, or double click on the entry to bring up the **Edit Rx Suspension** window. You can add or change data in any of the fields and click **OK** to save.

Once a suspension has been set for a prescription, users are prevented from deleting the suspension when the suspend date is set to a previous date. Prescriptions that have a suspend date set to the future can be deleted.

Add to Doctor Callbacks

The **Add to Doctor Callbacks** function serves to add entries to the **Callback** icon on the **System Start Screen** to remind users to call the doctor regarding a specific prescription. The callback reminder may serve to clarify prescription dosage, SIG instructions, refills, etc.

Users can tag prescription(s) on the patient profile that require a call-back to the prescriber. Subsequent to tagging applicable prescription(s), access the **Extra Functions** menu and select the command to **Add to Doctor Callbacks**.

Once prescription(s) have been flagged for doctor callback, access the **System Start Screen** by pressing **ALT+X** on the keyboard and clicking on the **Callback** icon. The prescriptions that were selected for **Add to Doctor Callbacks** will appear as callback entries with a status of **Call Doctor**. Users can double click on a specific entry to add a comment regarding the callback, or to resolve the callback.

Add to Rx To Do List

The **Add to Rx To Do List** function allows users to quickly create a work order for refill prescriptions. Users can tag prescriptions that need to be refilled from the patient profile and assign a due time for the work order. For example, if “Ms. Jane Doe” arrives at the pharmacy to refill her “Cortate” and “Clotrimaderm” creams, you can create a work order from the patient profile as follows:

1. Access the patient profile for the patient requesting the repeat(s).
2. Access the patient profile.
3. Using the spacebar on the keyboard, tag all prescriptions that need to be refilled

4. Click on **Extra Functions** with the mouse or press "**x**" on the keyboard.

5. Select **Add to Rx To Do List**.

The **Create Refill Reminder(s)** window will appear prompting you to enter a due date for the refill prescription(s). Users can click on the **Down Arrow** to select one of the pre-configured due times. Or you can click **F2** to enter a specific **Due Date** and **Time**. Once the due time has been selected for the refill work order, click **OK** with the mouse or press **Enter** on the keyboard.

The refill(s) will be prioritized against all other exiting work orders in the system and presented to you for processing at each applicable Rx stage.

Display Therapeutic Equivalents

The **Display Therapeutic Equivalents** function allows you to highlight a prescription from the patient profile and display any therapeutic equivalents the patient may have had in the past.

Display therapeutic equivalents for a prescription as follows:

1. Highlight the prescription you want to view therapeutic equivalents for.

2. Click on **Extra Functions** or press **X** on the keyboard.

3. Select **Display Therapeutic Equivalents**.

Once the command is selected, the patient profile will only display therapeutic equivalents for the prescription that was initially selected.

Fax Doctor

The **Fax Doctor** command generates a refill request for prescriptions tagged from the patient profile. Multiple prescriptions can be tagged to appear on the Fax Doctor Report.

Generate a **Fax Doctor Report** for one or more prescriptions from the patient profile as follows:

1. Search and access the record for the patient who requires a **Fax Doctor Report**.
2. Select **All Rxs** from the right navigation pane.
3. Using the **Spacebar** on the keyboard, tag all prescriptions that need to be included in the Fax Doctor Report.
4. Click on **Extra Functions** with the mouse or press **X** on the keyboard.
5. Select **Fax Doctor(s)**. The **Doctor Authorization Report** window to appear.

Comments tab

Use this space to enter comments specific to the tagged prescriptions. The comment will be deleted from the report parameters once the report is printed.

Customized Text tab

Use this space to enter a generic comment for the report. For example, store hours can be entered here, or an ending salutation, etc. The content entered under the “Customized Text Tab” will be saved and printed on all Fax Doctor Reports until the content is manually deleted from the field.

Options tab
Use this space to check or uncheck any of the options listed in this area. The **Preview** option located at the bottom of the reports window allows users to view the report before actually printing.

Cover Page Comments tab
Use this space to enter any comments you want printed on the cover page.

Click **Print** to print the Fax Doctor Report (a.k.a. Doctor Authorization Request).

<u>Sample Prescription Authorization Request:</u>

NOTE: If prescriptions tagged from the patient profile are from different prescribers, the report will print separate pages for each prescriber so that refill request are grouped and faxed to the doctor that initially prescribed the Rx.

Whenever a **Fax Doctor Report** is generated for a prescription, the system will automatically add an entry for the prescription into the **Callback** window. The entry serves as a reminder to follow up with the prescriber regarding the refill request. The **Callback** window can be accessed from the **ALT+X Start Screen** by clicking on the **Callback** icon.

NOTE: When the Rx Number (i.e. Rx Num) is copied to a new prescription number, the system will automatically remove the callback entry from the callback window.

Limited Use Request (Ontario Only)

For certain medications, ODB will only reimburse prescriptions for a medication if it complies with a medical reason for use as defined by ODB. The **Limited Use Request** form generates a request to the prescriber for a limited use code.

Generate the **Limited Use Request** Form as follows:

1. Search and access the record of a patient who requires a Limited Use Request form.
2. Access the patient profile.
3. Use the **Spacebar** on the keyboard to tag the prescription eligible for a Limited Use Code.
4. Click on **Extra Functions** with the mouse or press **X** on the keyboard.
5. Select **Limited Use Request**.
6. The **Limited Use Request** form will appear. Ensure **Rx Info** is checked.


Selection
Options
Customized Text
Doctor
Drug
Printer
Copies
Tray
Collate
Duplex
Restore Defaults
Print
Preview
Close

4. Select the **Options** tab and place a checkmark next to the applicable option(s).

From the **Customized Text Tab**, users will see pre-populated information under the **First Section** and **Second Section**; however, the information can be overridden for customized wording.

Click **Print** to print the **Limited Use Request** form for the selected prescription. Note the Limited Use Code and associated medical reason will be printed at the bottom of the report.

Sample Limited Use Request Form:

Kroll Pharmacy

Section 8 Request (Ontario Only)

A **Section 8 Request** is a request sent to a prescriber for special coverage of a product that is not normally covered under the ODB formulary. The prescriber, on behalf of the patient, can request coverage for a particular drug product not normally covered under ODB for a specific period of time.

Generate the Section 8 Request form as follows:

1. Search and access the record of a patient who requires a Section 8 Request.
2. Access the patient profile.
3. Use the **Spacebar** on the keyboard to tag the prescription requiring a Section 8 Request.
4. Click on **Extra Functions** with the mouse or press **X** on the keyboard.

5. Select the **Section 8 Request** command and wait for report window to appear.

6. Select the **Options** tab and place a checkmark next to the option(s) you want printed on the report.

7. Select the **Customized Text** tab. The information on this tab is pre-populated but can be overridden for customized wording.

8. Click **Print** to print the **Section 8 Report**.

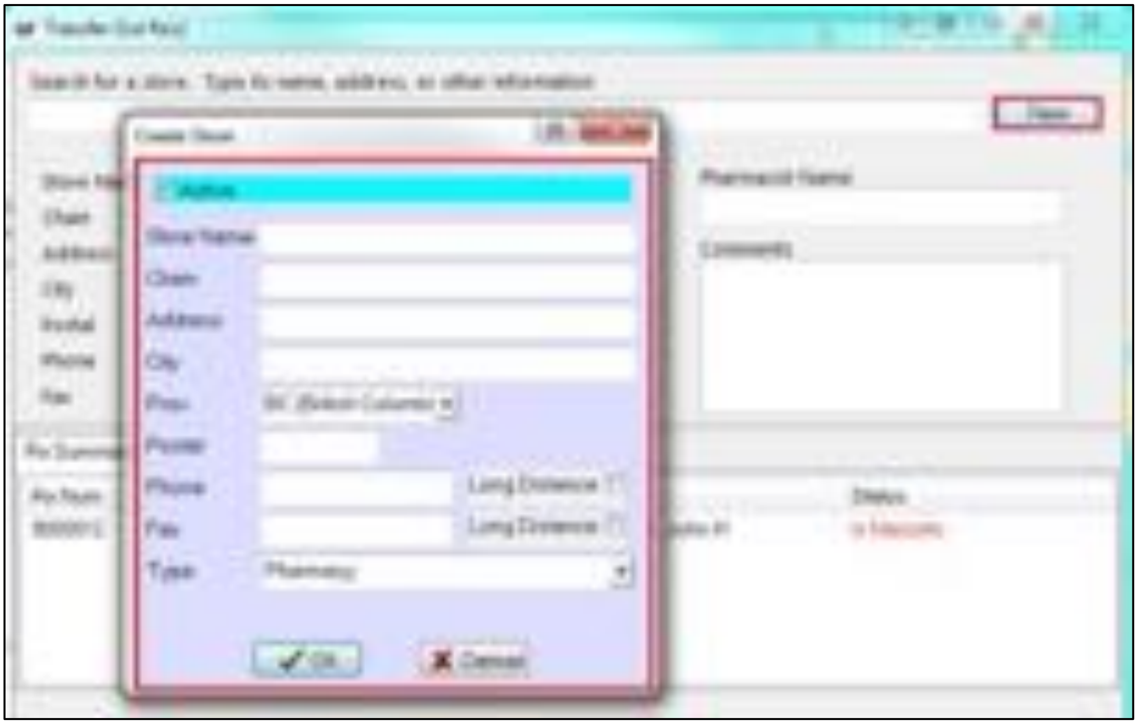
Transfer Rx to Another Store

Generate the **Transfer Report** as follows:

1. Call up the patient profile for the patient who requires a prescription transfer.
2. Use the **Spacebar** on the keyboard to select the prescription that needs to be transferred to another pharmacy.
3. Click on **Extra Functions** with the mouse or press **X** on the keyboard.
4. Select **Transfer Rx to Another Store** and wait for **Transfer Out Rx(s)** window to appear.

9. Perform a search for the pharmacy you want to transfer the Rx to. The pharmacy's address and contact information will auto-populate.

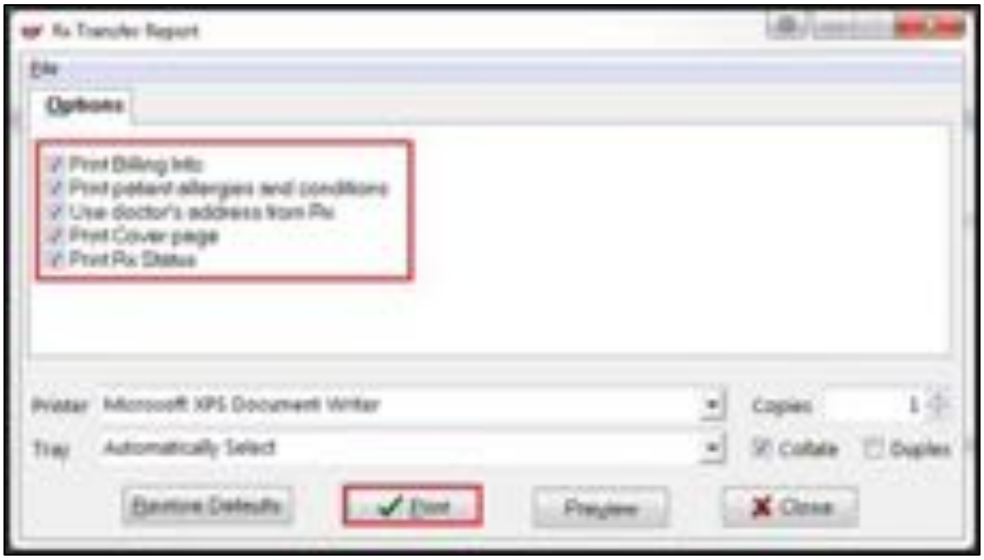
a) To insert a new pharmacy record, click **New** and complete the **Create Store** form. When you are finished, click **OK**.



10. Enter the **Pharmacist Name** and **Comments** as required and click **Transfer Out Eligible Rxs**.

11. A prompt will appear asking if you want to print the Transfer Report. Answer **Yes** or **No** accordingly.

a. If you answer **Yes**, the **Rx Transfer Report** form will appear. Select what information you want included in the report and click **Print**.



Sample Rx Transfer Report:


Test Pharmacy

FACSIMILE TRANSMITTAL SHEET

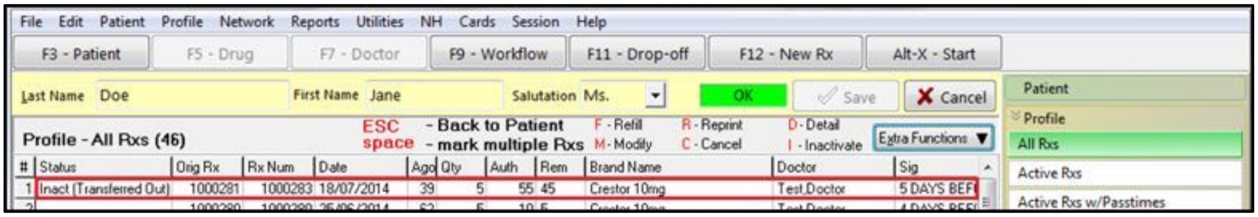
To: Kroll Pharmacy
Company: Kroll
Fax Number: (666) 666-6666
Phone Number: (555) 555-5555
RE: Rx Transfer
Patient ID: 11

From: Test Pharmacy
Date: 28-Aug-2014
Total No. of pages including cover: 2
Phone Number: (111) 111-1111
Fax Number: (222) 222-2222

✓ Urgent ✓ For Review ✓ Please Comment ✓ Please Reply ✓ Please Recycle

Notes/Comments:

Once an Rx has been transferred to another pharmacy it will have a status of **Intact(Transferred Out)**.

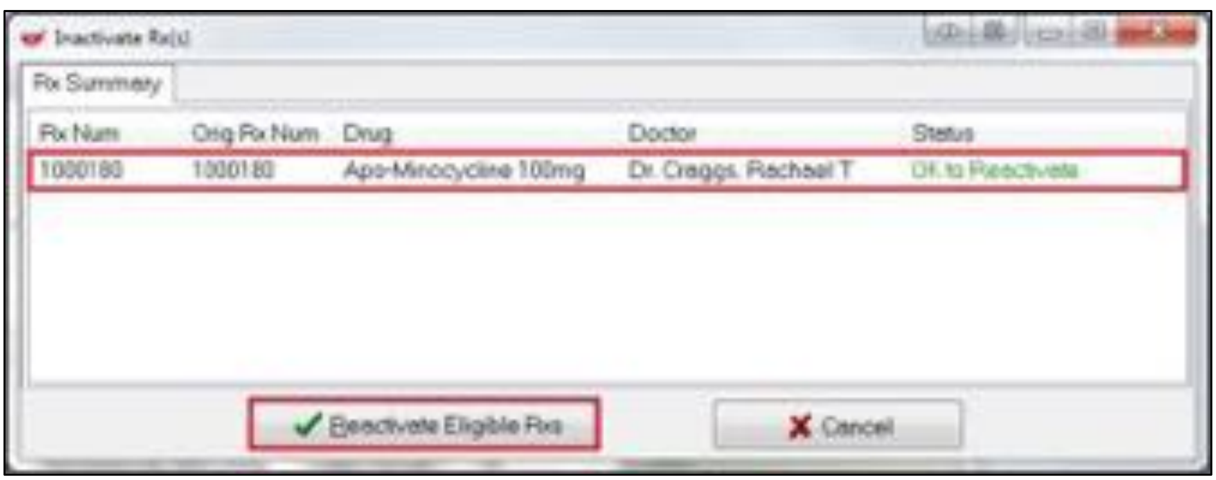


Reactivate Rx

The **Reactivate** function allows users reactivate prescription(s) with an **Inactive** status. Be careful when reactivating a prescription; be sure you know why the Rx was inactivated in the first place to avoid dispensing errors.

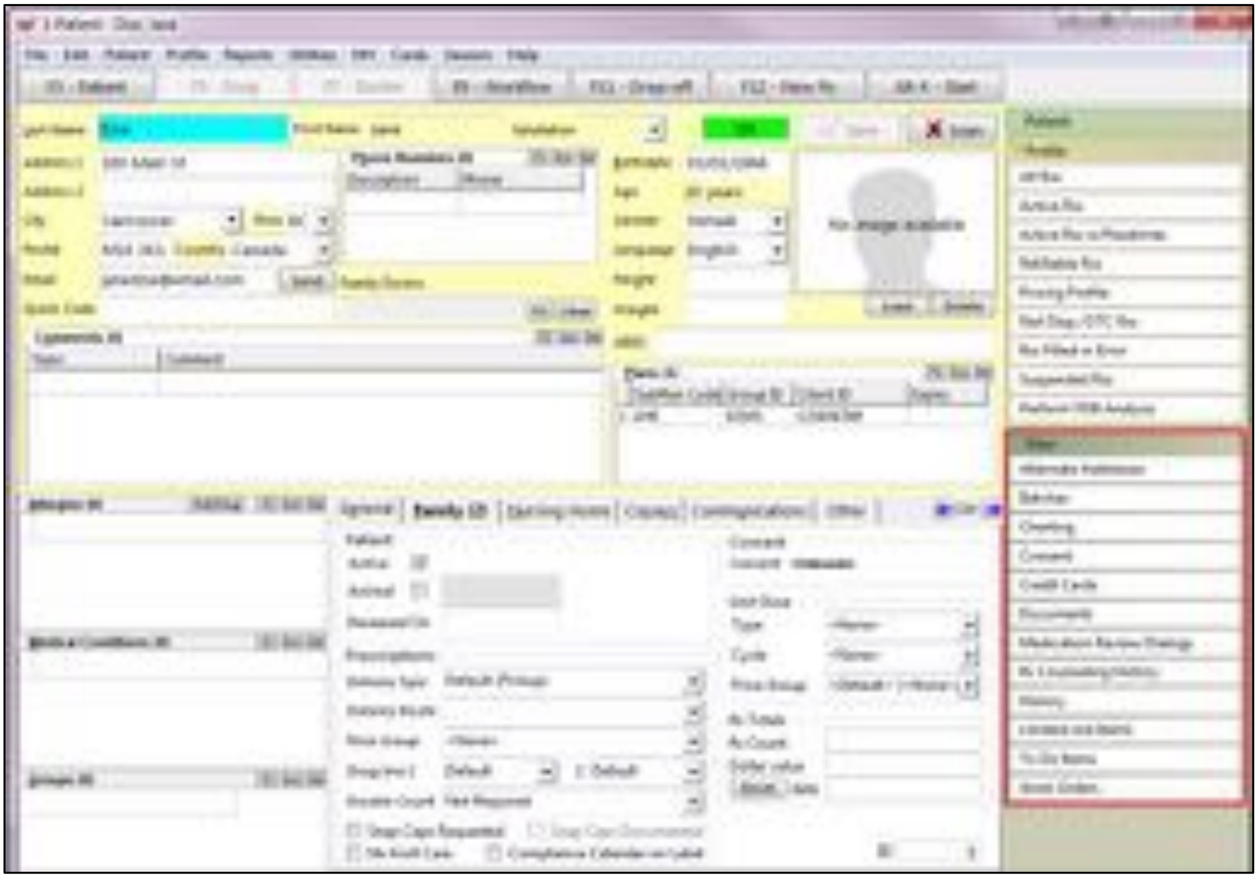
Reactivate an inactive prescription as follows:

1. Access the patient profile.
2. Use the spacebar to highlight the inactive prescription you would like to reactivate.
3. Click **Extra Function** with the mouse or press **X** on the keyboard.
4. Select **Reactivate Rx**.
5. The **Reactivate Rx** window will appear. Click **Reactivate Eligible Rxs** with the mouse or press **Enter** on the keyboard to reactive prescriptions with a status **OK to Reactivate**.



Patient Sidebar Functions

Once a patient record is called up from the system, users can access/view a number of sidebar functions to the right of the screen. The following sub-section will explain sidebar functions applicable to pharmacies.



Alternate Address

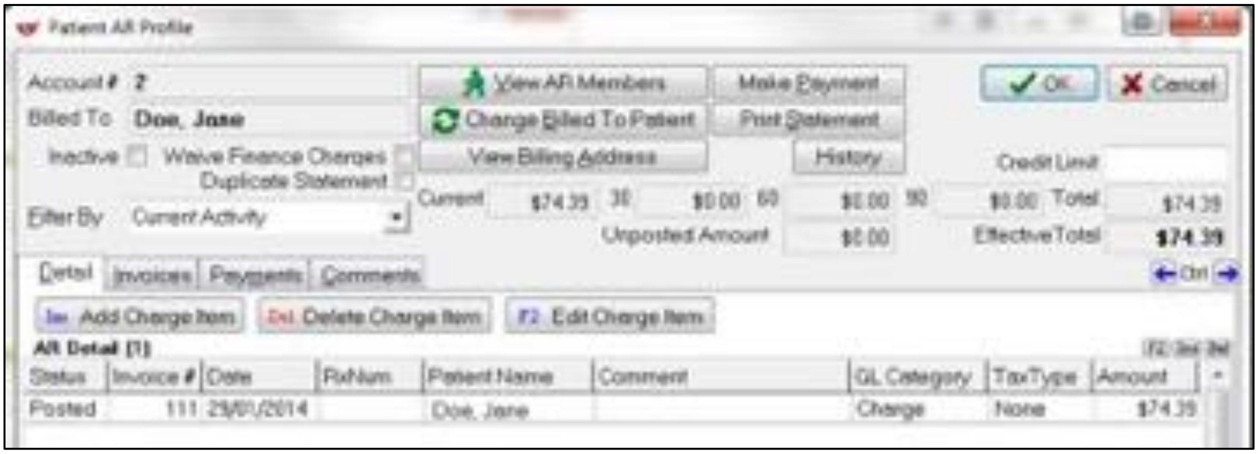
You have the option to add a secondary address for a patient using the **Alternate Addresses** option.

Click **Alternate Addresses** from the **Patient Sidebar** to access the **Alternate Patient Addresses** window. From the **Location** field click **Ins** or **Add** to add a description for the new address (e.g. Summer Home, Parent's Home, Child's Home, etc.). Fill in the fields as required and click **Save** or press **Enter** on the keyboard when complete.

You can access **Alternate Addresses** from the sidebar at any time to add additional addresses, edit existing information, or delete an address.

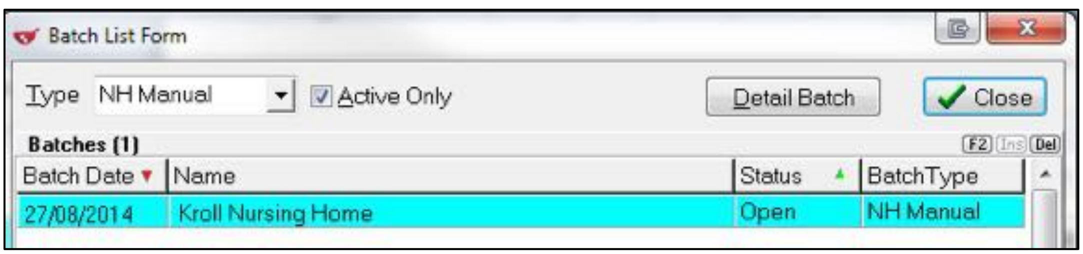
AR Profile

AR Profile allows you to view the patient's Accounts Receivable information. Accounts Receivable is a program that maintains the charges and payments made by customers within the store, allowing information about charges to be viewed, statements to be printed, and reports to be run to analyze the impact of the AR program within the store.

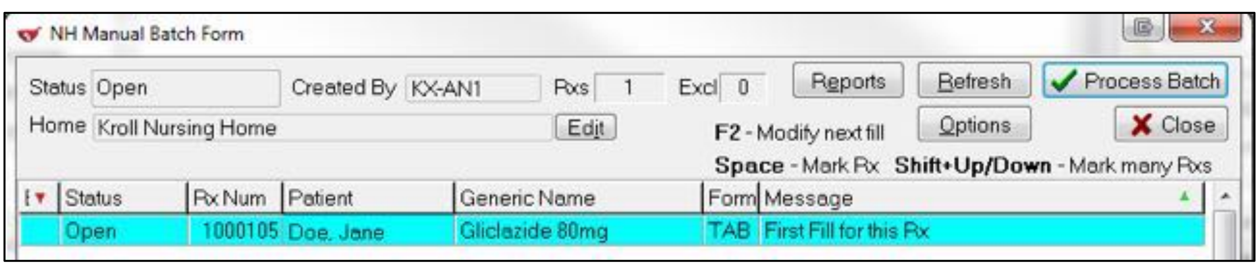


Batches

Batch filling is a feature available to nursing home customers that allows you to fill Rxs belonging to a particular cycle in a single batch.



Select a batch and click **Detail Batch** to view additional details that pertain to the batch.



Charting

Patient Charting allows you to monitor and record patient health metrics directly within the pharmacy management system. Benefits include the ability to print charts, as well as having the ability to electronically store patient health information in one area for ease of access. **Values** can be added to any chart by clicking the **Ins** key located to the right of the charting window. Users can edit or delete an entry by clicking **F2** or **Del** respectively.

NOTE: Any chart value that has a comment attached to it will have an asterisk to the left of the entry. Hovering the mouse over the entry will expand the comment in a yellow box.

Weight

Weight charting allows users to record values in kilograms (kg) or pounds (lbs). Only one form of weight measurement needs to be entered; the system will automatically convert the entered measurement into the form that is missing (e.g. if you enters 115lbs, the system will calculate the kg field to 52.27kg).

Click **Ins** to add a new weight reading, **F2** to modify an existing weight reading, and **Del** to delete a weight reading.

Height

Height charting allows users to record values in centimeters (cm) or inches (in). Only one form of height measurement needs to be entered; the system will automatically convert the entered measurement into the form that is missing (e.g. if you enters 170cm, the system will calculate the inches field to 66.93in).

Click **Ins** to add a new height reading, **F2** to modify an existing height reading, and **Del** to delete a height reading.

Blood Pressure

Blood pressure charting allows entry of a Systolic, Diastolic, and Pulse Rate value. The pulse rate is measured in beats per minute (bpm).

Click **Ins** to add a new blood pressure reading, **F2** to modify an existing blood pressure reading, and **Del** to delete a blood pressure reading.

Blood Sugar

The blood sugar concentration is the amount of glucose (sugar) present in the blood. If blood sugar levels drop too low, hypoglycemia can develop if untreated. If levels remain too high, hyperglycemia can develop and cause many of the long term health problems associated with diabetes. Blood sugar values are measured in millimoles per litre (mmol/L) within the system.

Click **Ins** to add a new blood sugar reading, **F2** to modify an existing blood sugar reading, and **Del** to delete a blood sugar reading.

Cholesterol

Total cholesterol levels are recorded in millimoles per litre (mmol/L).

Click **Ins** to add a new cholesterol reading, **F2** to modify an existing cholesterol reading, and **Del** to delete a cholesterol reading.

Creatinine CL

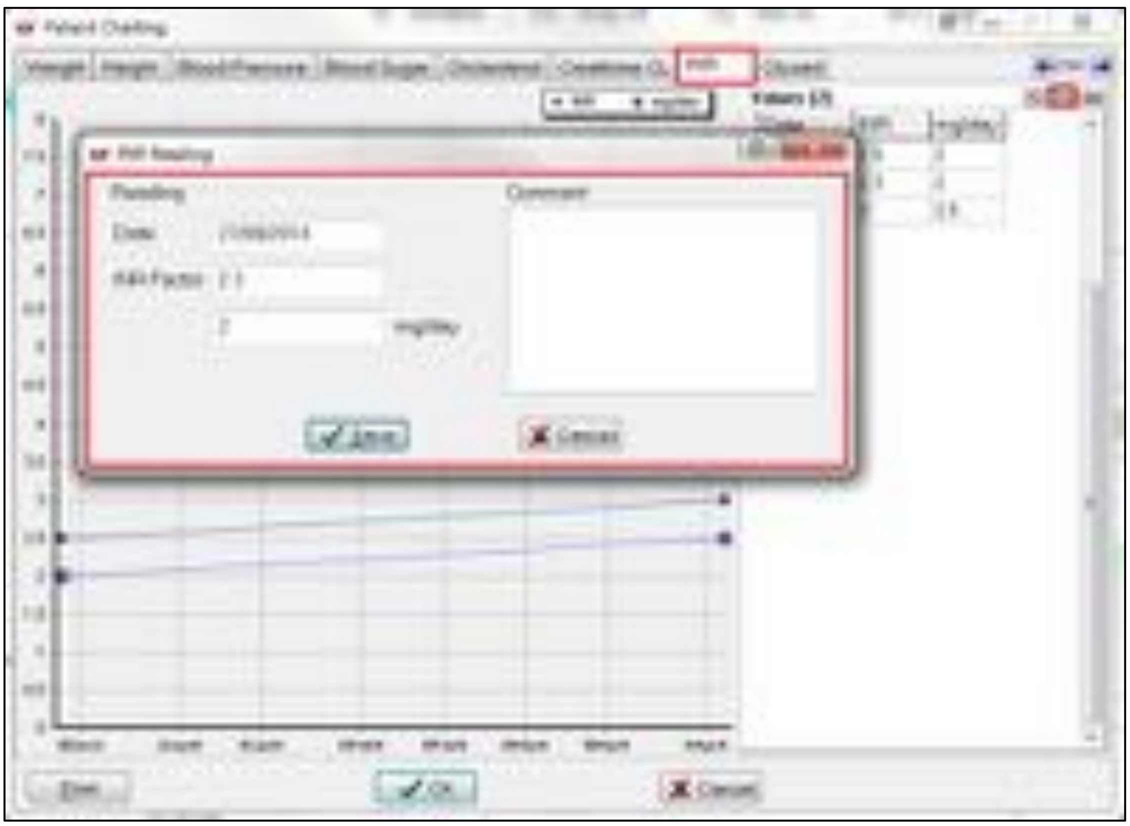
Creatinine clearance values are used to evaluate the rate and efficiency of kidney filtration. It is used to help detect and diagnose kidney dysfunction and/or the presence of decreased blood flow to the kidneys. Creatinine clearance charting allows users to enter values for Weight, Height and Serum Creatinine level (SCr) which is measured in millimoles per liter (mmol/L).

Click **Ins** to add a new creatinine CL reading, **F2** to modify an existing creatinine CL reading, and **Del** to delete a creatinine CL reading.

INR – International Normalized Ratio

An INR is useful in monitoring the impact of anticoagulant medicines, such as Warfarin. An INR can be too high; a number greater than 4 may indicate that blood is clotting too slowly, creating a risk of uncontrolled bleeding. An INR less than 2 may not provide adequate protection from clotting. INR charting allows the INR Factor to be entered as well as the anticoagulant daily dose.

Click **Ins** to add a new INR reading, **F2** to modify an existing INR reading, and **Del** to delete an INR reading.



Clozaril

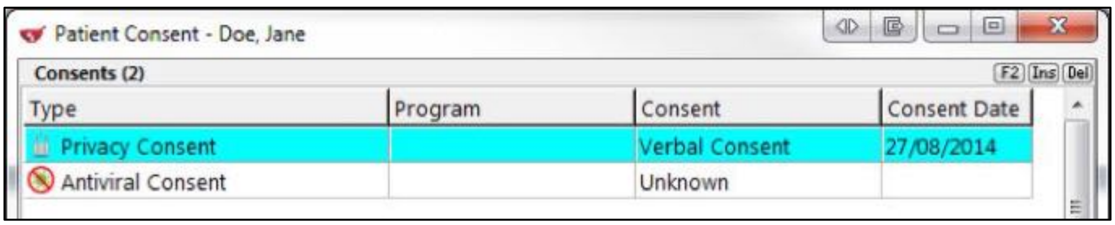
Patients taking Clozaril are required to have white blood cells (WBCs) and Absolute Neturophil Count (ANC) levels monitored on a regular basis by physicians and dispensing pharmacists. These values can be recorded in the patient record of the Kroll Pharmacy Software for instant lookup and retrieval.

Click **Ins** to add a new Clozaril reading, **F2** to modify an existing Clozaril reading, and **Del** to delete a Clozaril reading.

Consent

The **Consent** window allows you to record whether or not the patient has given the pharmacy consent for the following:

- Privacy Consent
- PASI Enrolment
- MediResource Patient Consent Enrolment
- Pharmaspace Enrolment
- Antiviral Consent
- Central Fill Consent

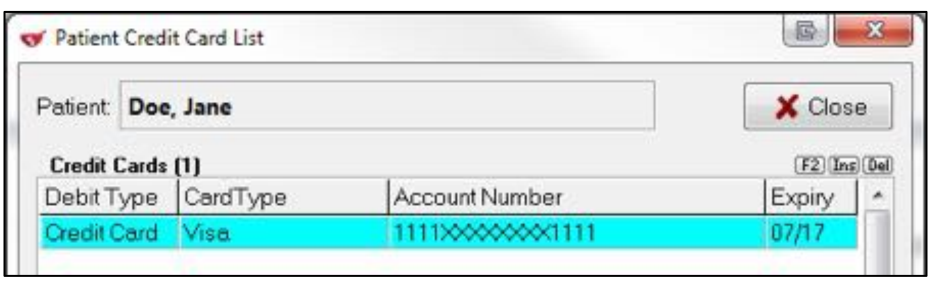


Click **Ins** to add a new consent, **F2** to modify an existing consent, and **Del** to delete a consent.

Credit Cards

The **Credit Cards** section is used to store patient credit card information. In order for credit card information to be entered, you must:

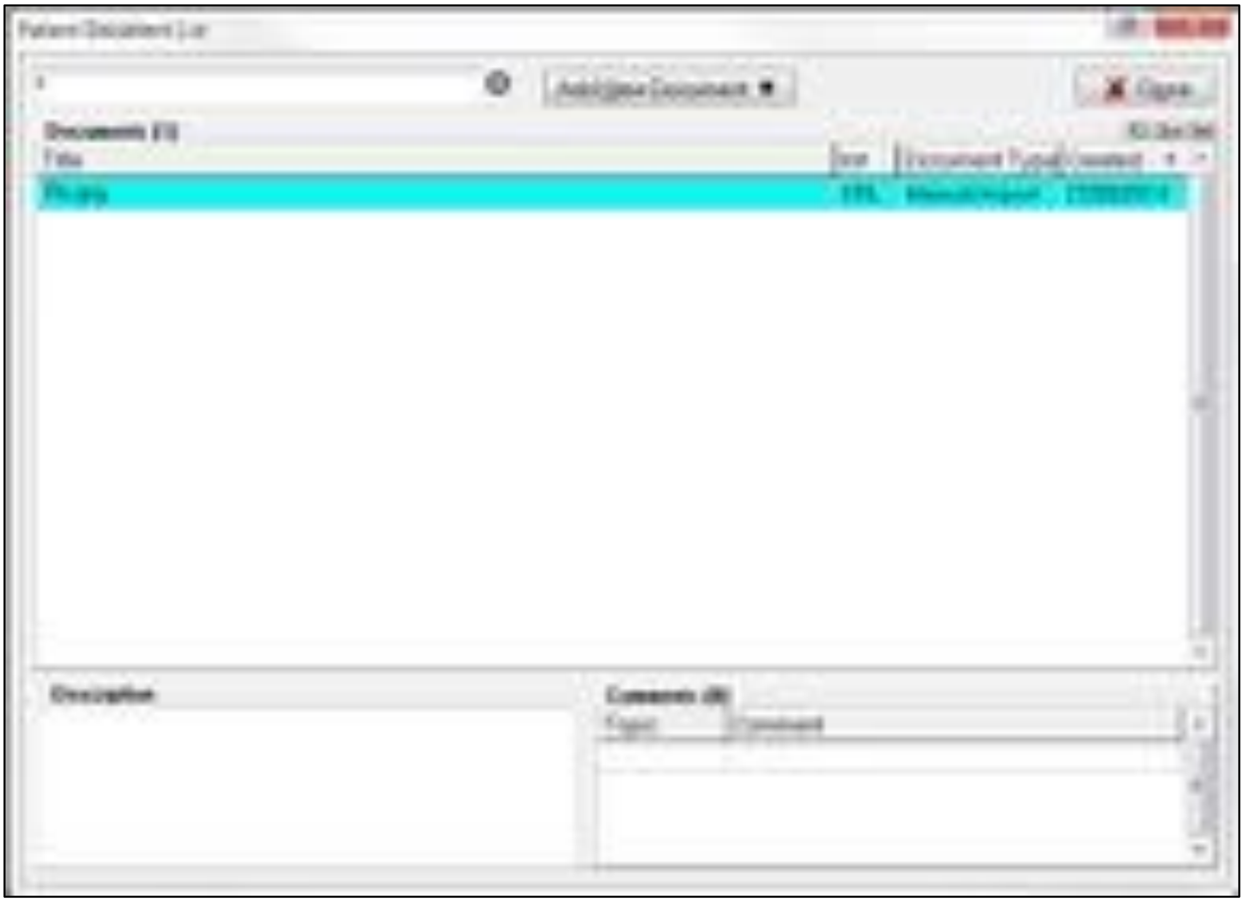
a) Be assigned to a use group that has permission to view credit card information.
b) Have the credit card access password.



Click **Ins** to add a new credit card, **F2** to modify an existing credit card, and **Del** to delete a credit card.

Documents

Kroll has built-in functionality to import and attach external files (e.g. docx, pdf, xslx, jpeg, etc.) to specific patient records through the **Document** function listed on the patient sidebar. With this function, you can import medical forms, medication charts, lab results, etc. into the system for electronic storage. Electronic files facilitate a paperless pharmacy as well as providing ease of access.

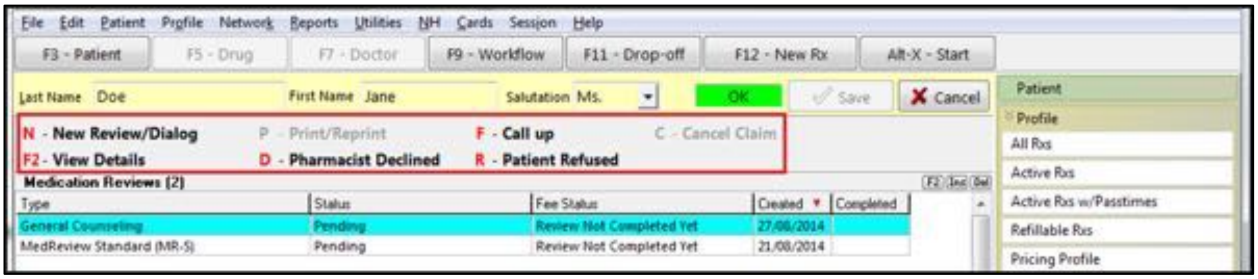


Click **Ins** or **Add New Document** to add a new patient document, **F2** to modify an existing patient document, and **Del** to delete a patient document.

Medication Review/Dialogues

Medication Review/Dialogues is used to record patient review sessions, such as Medication Reviews, General Counseling, or Pharmacist Consultations. Clicking **Medication Review/Dialogues** from the navigation pane will open the patient's **Medication Reviews** profile.

Select **N - New Review/Dialog** to insert a new review/dialogue record, **F2 - View Details** to view details of an existing review/dialog, **P - Print/Reprint** to print an existing review/dialog, **F - Call up** to continue working on an existing review/dialog, and **C - Cancel Claim** to cancel an existing review/dialog. The **D - Pharmacist Declined** and **R - Patient Refused** buttons are used to record reviews/dialogs that have been declined by the pharmacist or refused by the patient.

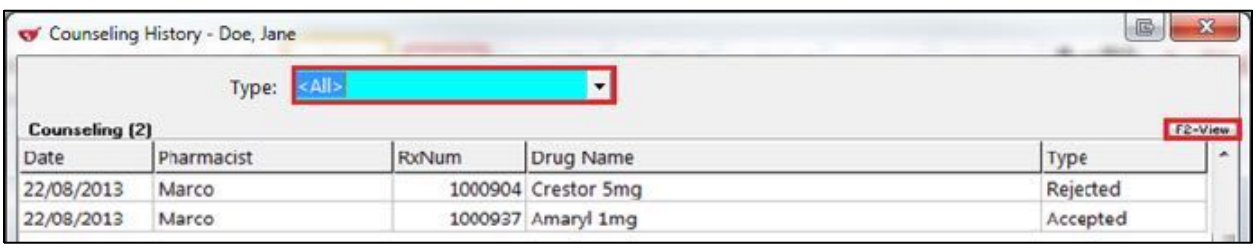


See the Medication Review user guide for your province for more information about Medication Reviews: https://www.kroll.ca/user-guides.html.

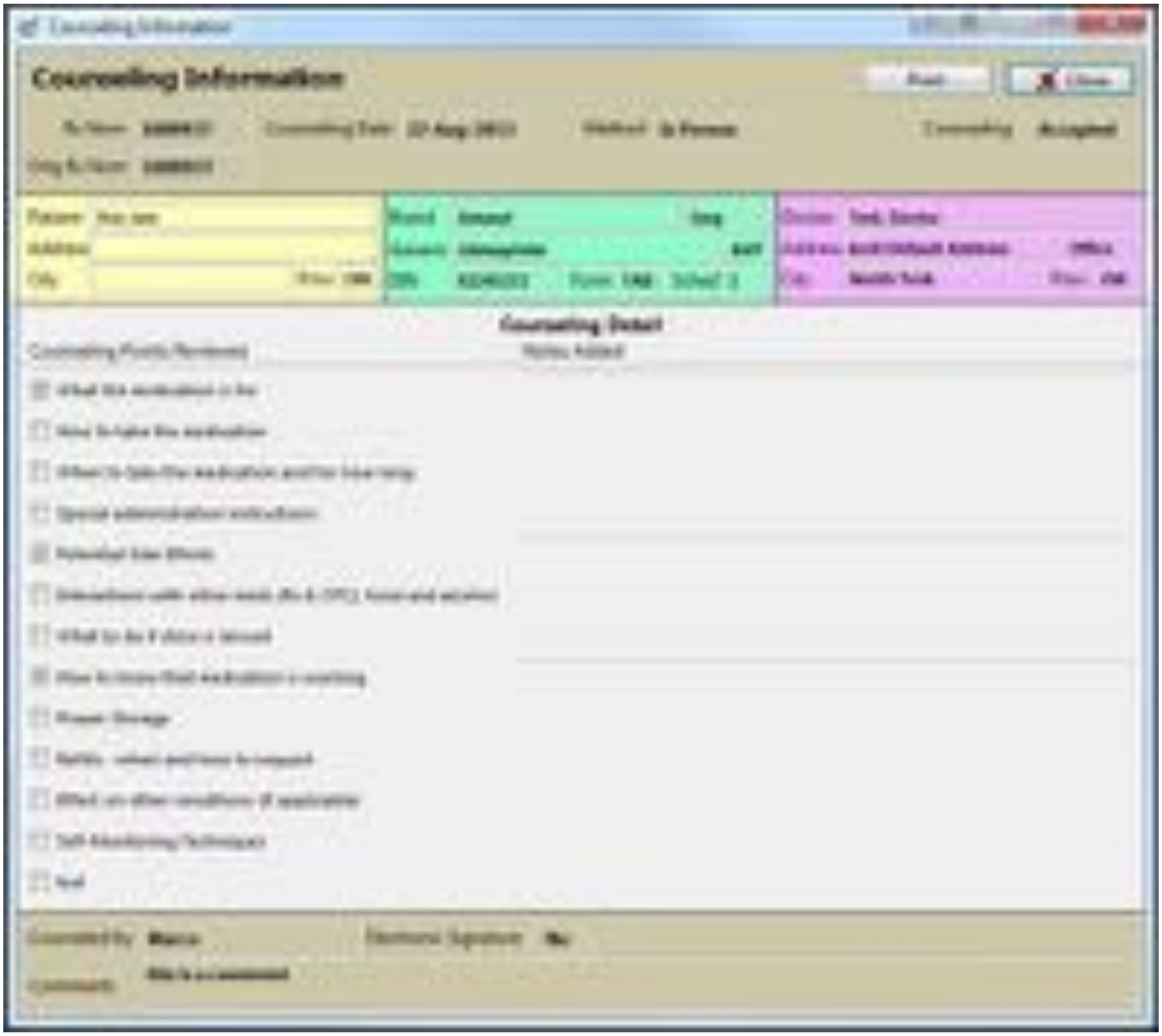
Rx Counseling History

Rx Counseling History is used to record the patient's Rx counseling sessions. Recording Rx counseling sessions in patient profile helps pharmacies meet the legal requirement for counseling documentation.

Use the **Type** menu to specify if you want to view Rx counseling sessions that have been **Accepted**, **Rejected**, performed on **Paper**, or **<All>**.



Click **F2-View** to view the counseling information for a selected counseling record.



History

Patient History allows users to track changes made to the Patient Record including changes to third party plans, phone numbers, addresses, etc. The Patient History window is read-only and displays entries sorted by date and you who executed the change. To view details of a patient record change, simply click on the plus sign (+)to expand the details or hide details by clicking on the minus sign (-).

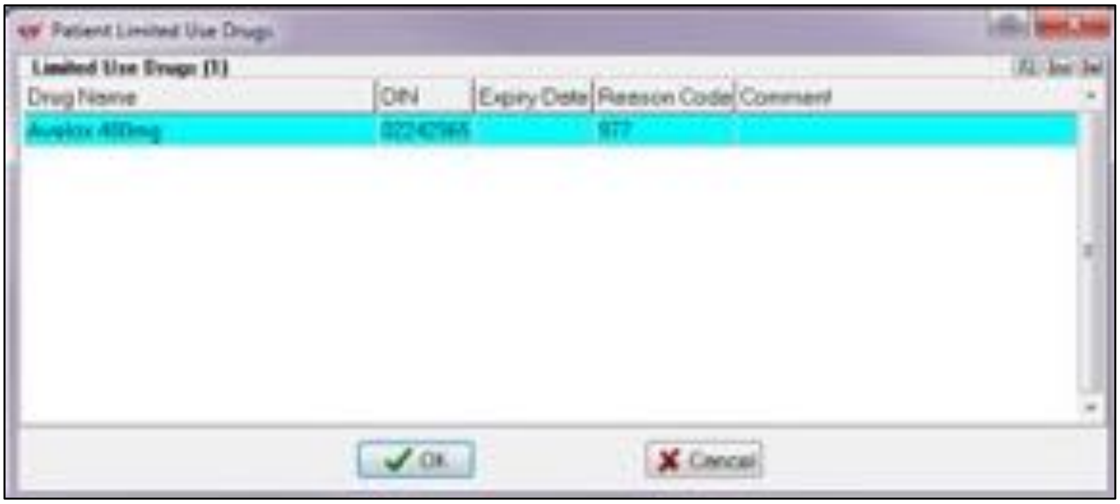
Select a change record and click **Display Record After Changes** to view what the patient profile looked like after that particular change was made.

Select a change record and click **Display Record Before Changes** to view what the patient profile looked like before that particular change was made.

Limited Use Items

Limited Use numbers are stored at the patient level and they can be attached to a patient without filling a prescription when presented with a LUP form from the patient.

The **Patient Limited Use Drugs** screen displays all the **Limited Use Drugs** that is available in the patient record. You can manually insert a **Patient Limited Use Drugs** record by clicking **Ins** or pressing **Insert** on the keyboard.

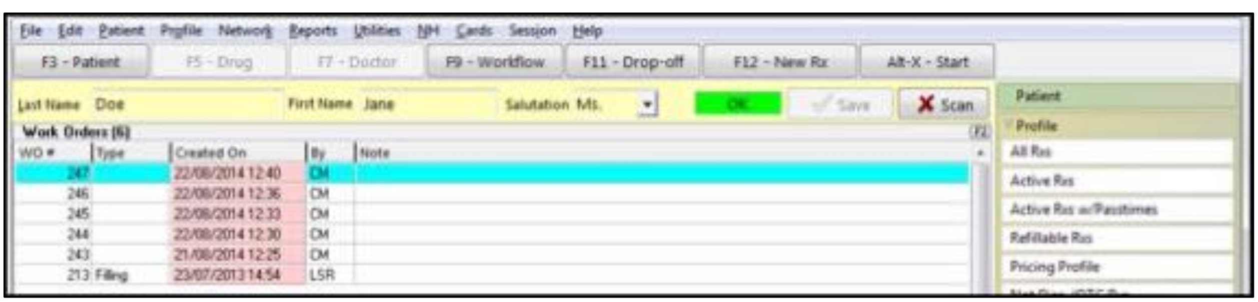


To Do Items

The **To Do** screen displays all outstanding callbacks and followups for the patient. You can manually insert a to do item for the patient by clicking **Ins** or pressing **Insert** on the keyboard.

Work Orders

The **Work Orders** screen displays all outstanding work orders for the patient.



Drug Records

Drug records contain comprehensive information about how drugs should be stored, administered, handled, and priced. This section explains how to perform drug searches and how to create and manage drug records.

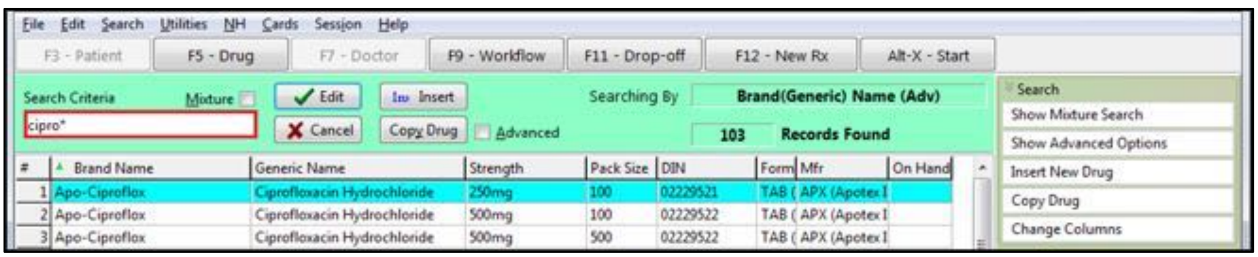
Searching for a Drug

Method 1: From the F5 - Drug Screen

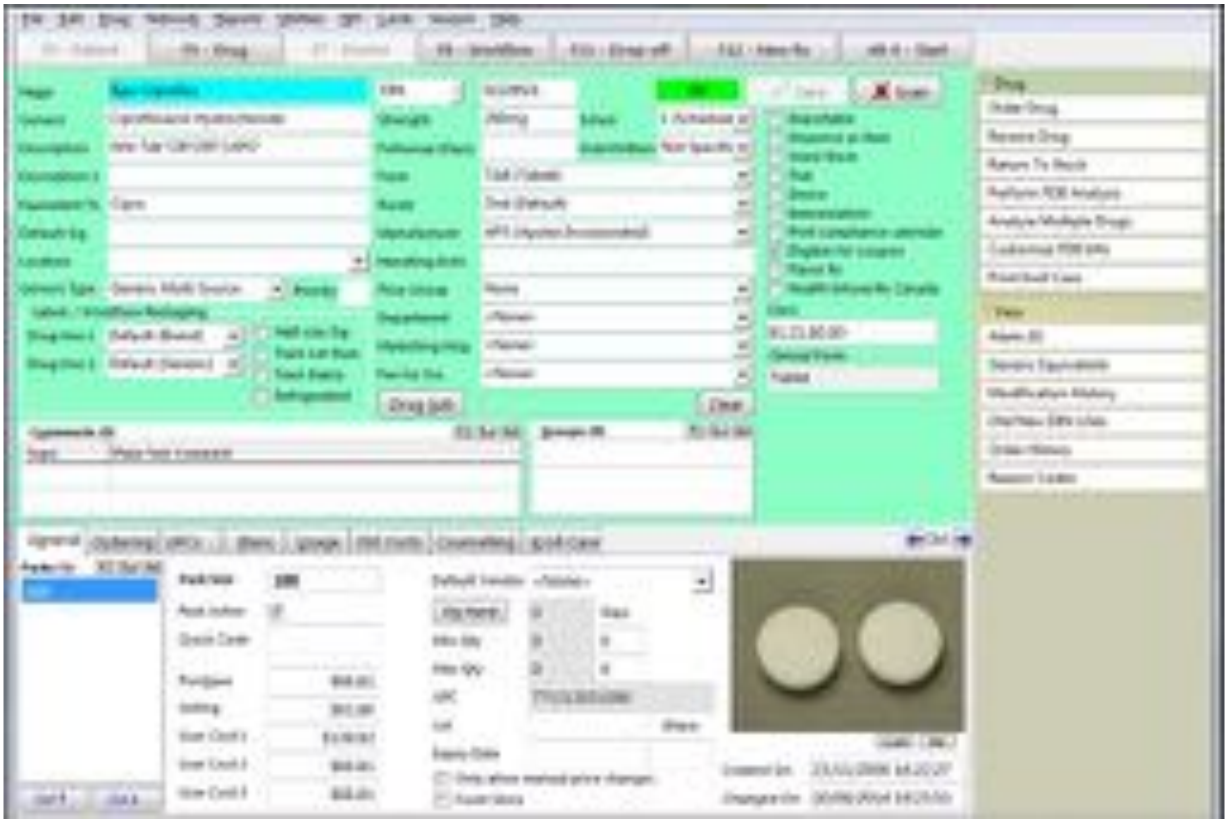
1. Select **F5 - Drug** from the **Alt-X Start** screen.

2. Enter one of the following patient search criteria and click **Search**:

    a) Brand/Generic Name, Strength/Pack Size (e.g. Apo-Metformin, 500/360)
    b) DIN (5-8 digits)
    c) UPC (11-12 digits)
    d) A period (.) and the Drug Quick Code (e.g. TYLE3)
    e) # symbol and the Catalog Item Number (e.g. #78945)

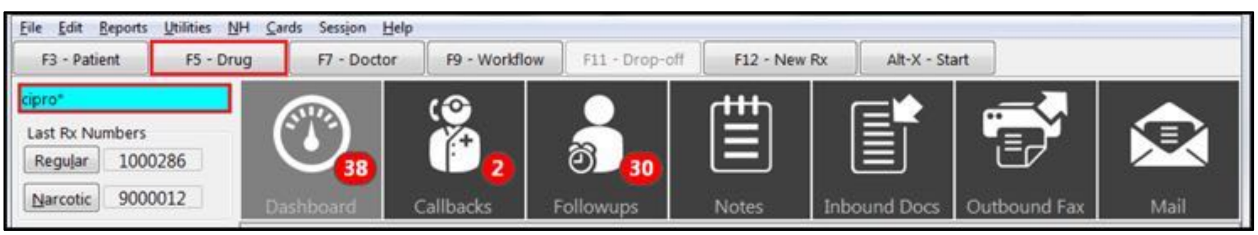


3. Double-click the drug record. The **F5 - Drug** screen will display.



Method 2: From the Alt - X Start Screen

1. Enter any of the search criteria described above in the **Universal Search Field**, located on the **Alt - X Start** screen, and click **F5 - Drug**.



2. A list of drugs matching the search criteria will be displayed. Double-click the applicable drug record.

The **F5 - Drug** screen will display.

Method 3: From the F11 - Drop-Off Screen

1. Call up the **F11 - Drop-Off** screen and perform a patient search. Once you have selected a patient, the **Drug/Mix** field will become available.

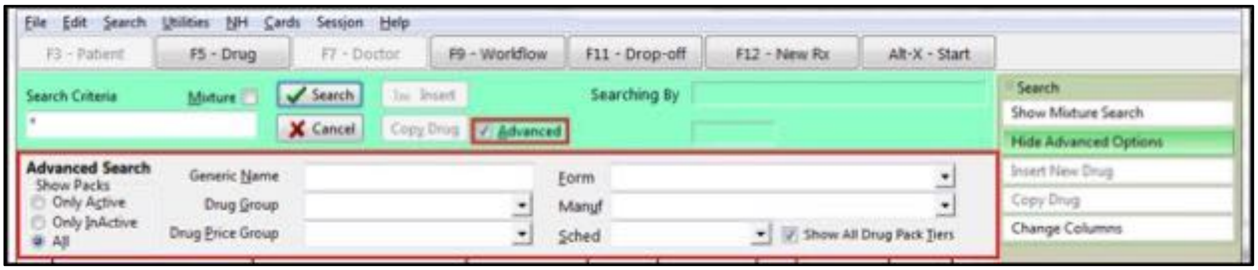
2. Enter any of the search criteria described above in the **Drug Search** field and press the **Enter** key on your keyboard.

3. A list of drugs matching the search criteria will be displayed. Double-click the applicable drug record. The **F5 - Drug** screen will display.

Performing an Advanced Drug Search

If a drug is not found through a regular drug search as described in the previous section, an **Advanced Drug Search** can be performed.

1. Call up the **F5 - Drug** search screen and place a checkmark next to **Advanced**. The **Advanced Search** pane will appear.



2. Enter any available advanced drug search criteria and click **Search**.

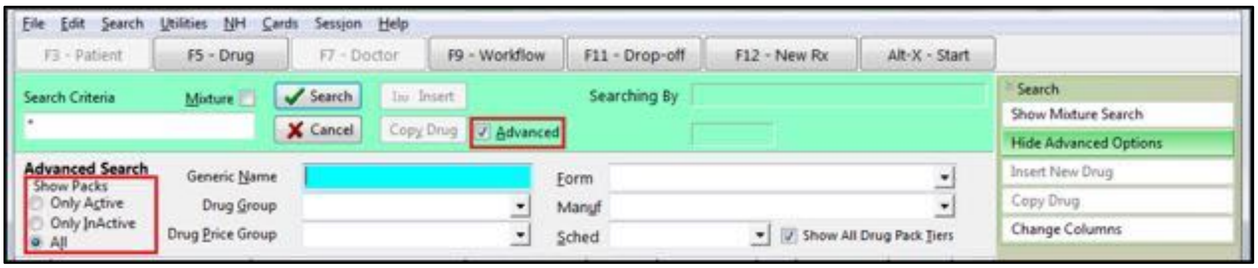
Inactive Drug Records

You have the ability to inactivate drug records in the system by un-checking the **Pack Active** flag located on the drug record. Inactivating a drug record means that the drug record will not show up in the regular drug search; an **Advanced** search for inactive drugs will have to be initiated in order to access the record.

NOTE: Inactive drug records cannot be used in prescriptions. The **Pack Active** flag must be turned on in order to fill prescriptions for that drug.

There are various reasons why you may choose to inactivate drug records. For example, a drug may be inactivated because the manufacturer no longer produces the particular pack size, or the drug may be discontinued. Inactivating these records allows the regular search to provide more succinct results; this reduces the possibility of selecting the wrong drug pack into a prescription.

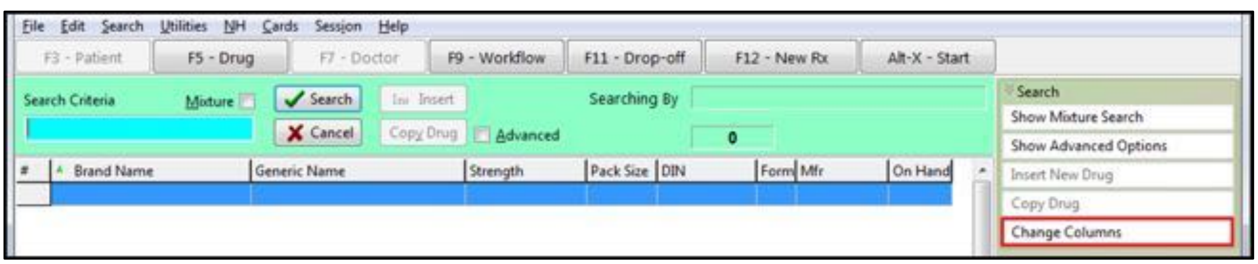
To locate inactivated drug packs in the system, perform an **Advanced** search and make sure the **Only Inactive** or **All** flag is marked on the far left. Search as usual to find the applicable record.



NOTE: Inactive drug records will appear in red text in the drug search screen.

Configuring the Columns in the Drug Search Screen

You can configure the columns that are displayed on the **Drug Search** screen by clicking **Change Columns** from the right navigation pane.



The **Edit Scan Columns** window will appear. Place a checkmark next to the columns you want displayed and click **OK**.

Creating a New Drug Record

1. Perform a thorough search to ensure the drug does not already exist in the database. You will be prompted to perform an **Advanced** search for inactive drugs as well.

2. Once you have determined that the drug does not exist in the system, click **Insert** or press the **Insert** key on the keyboard.

3. Enter a pack size for the new drug and click **OK**.

4. A blank **F5 - Drug** screen will appear. Complete the drug fields and click **Save**.

Copying an Existing Drug Record

If a drug manufacturer releases a new strength for an existing drug product, users can utilize the copy function to prevent having to re-enter duplicate drug information. Copy an existing drug to a new drug record as follows:

1. Perform a thorough drug search to ensure that the new drug does not already exist in the database. You will be prompted to perform an **Advanced Search** to make sure the drug record they are adding is not simply inactivated.
2. Once you have determined that the drug does not exist in the system, click **Copy Drug** or press **CTRL+Y** on your keyboard.
3. A second drug search window will appear. Search for the drug that should already be in the system.

4. Highlight the drug you want to copy and click **Select**. The selected drug record will appear. Review the information and confirm that it is the drug you want to copy information from. Click **Select**.
5. Enter a pack size for the new drug and click **OK**.
6. A prompt will appear asking if you want to copy the price information to the new drug. Answer **Yes** or **No** accordingly.
7. Enter any missing information for the new drug record. Note that the DIN will not be copied over.
8. Click **Save** to save the drug record.

Drug Record Fields

Equivalent To
If the drug record is a generic product, this field displays the brand name equivalent.

Default SIG
Used to quickly populate the Rx with a repeatedly used sig code.

Location
Store level users can enter information about the physical location of a drug product in this field to facilitate retrieval (e.g. Refrigerator, Safe, etc.)

Generic Type
Displays one of the following options:

- Brand Multi Source Brand
- Brand Multi Source Generic
- Brand Single Source
- Generic Multi Source
- Generic Single Source

DIN
Displays the Drug Identification Number for the drug product. This field can also house “PDIN – Pseudo DIN”, “ NPN – Natural Product Number”, “HDIN – Homeopathic DIN”, or “OPIN – OPINION”.

Strength
Displays the strength of the drug product.

Followup (Days): Users can enter the number of days that elapse before a follow-up reminder is created in the system to remind the pharmacist to follow up with the patient regarding their drug treatment.

Form
Displays the form of the drug product (e.g. capsule, tablet, injection, etc.)

Route
Displays the route of administration for the drug product (e.g. oral, topical, intravenous, etc.)

Manufacturer
Displays the manufacturer of the drug product (e.g. Astra, Pfizer, Apotex, etc.)

Handling Instr.
Users can enter handling instructions for a drug product (e.g. for example, sublingual tablets should be handled with clean dry hands).

Price Group
A price group can be assigned to a drug record for activation of specific pricing requirements. Drug Price Groups are configured and assigned by head office.

Department
Drug Departments are used to narrow report output to certain clusters of drugs, similar to the function of **Drug Groups**. The main difference between **Drug Groups** and **Drug Departments** is that a drug record can only belong to one department which maintains mutual exclusivity between departments, whereas a drug record can have multiple Drug Groups.

Marketing Message
Marketing messages are configured by head office. These messages promote and support awareness for certain products as well as facilitate branding of the business. When a Marketing Message is entered into a drug record, the message will be printed on the patient receipt whenever a prescription is filled for the drug. For example, if a pharmacy is holding a diabetes clinic, a marketing message can be attached to diabetic drugs and supplies to promote and provide information regarding the clinic.

Fee For Service
Fee For Service entries are configured and maintained by head office. When this field is populated, it means that the drug record is being used to bill a professional service. Some types of professional service billings require specific indicators to be sent to the third party in order for the claim to go through; by selecting the appropriate Fee for Service option in the drug record, billing indicators are automatically sent with the prescription during adjudication.

Reportable
A checkmark in this field indicates that the system will track prescriptions filled for the drug product and display results in the **Narcotic Report**.

Dispense as Pack
A checkmark in this field indicates that the drug product will be billed to third parties as multiples of one pack rather than billed as dosages. This flag is used for billing of birth control, inhalers, and nasal sprays in some provinces.

Ward Stock
This option is used for pharmacy's that dispense ward stock to patients.

Trial: When this flag is checked, a prompt will appear during the first fill of a prescription asking you if they would like to fill a trial supply rather than filling the total dispense quantity of the prescription.

Device
This flag indicates that the drug record is for a medical device, not a drug product. This flag is also used in the transmission of DIS device transactions in Atlantic Provinces.

Immunization
This flag indicates that the drug record is for an immunization.

Print Compliance Calendar
When this flag is on, a calendar containing empty boxes will appear for the guest to document once a dose has been taken.

Eligible for Coupon
Coupons are configured and set up by home office. When this flag is on, the configured coupon will be printed when the drug product is filled in a prescription.

Flavor Rx
This flag indicates that flavoring should be used to augment the taste of the medication. A note will be printed on the hardcopy to remind users to use flavoring during preparation of the drug.

Health Inform/Rx Canada
Maintained by head office, this flag will be checked for drugs qualifying for programs used to distribute patient education leaflets complementing Kroll Care.

Class
Displays the therapeutic class code as obtained from First Data Bank.

Clinical Form
Displays the clinical form of the drug product as obtained from First Data Bank.

Narcotic Monitoring*: This flag will be checked for drug products that are a part of the provincial Narcotic Monitoring Program (not applicable in all provinces).

View Reason Codes
This button is only applicable to Ontario pharmacies. Access of this option will display Reason Codes and Reason Code descriptions for Limited Use products. There is also an option to print Reason Code information from the window.

Drug Line 1
Displays the type of drug information (i.e. Brand, Generic, Description, Description 2, Equivalent To) that is printed on the vial label.

Drug Line 2
Displays the type of drug information, different from Drug Line 1 that is printed on the vial label.

Half-size SIG
When this flag is activated, it will cause the SIG to print at half the size it normally prints at. This option is useful for drug products that usually have long SIG instructions, for example eye drops.

Track Lot Num
When this flag is activated, you will be required to enter the lot number of the drug product into the Motorola handheld during the filling stage.

Track Expiry
When this flag is activated, you will be required to enter the expiry date (MM/YYYY) of the drug product into the Motorola handheld during the filling stage.

Refrigerated
When this flag is activated, the word “Refrigerated” will appear on the handheld during filling and at point of sale during the prescription pick up stage.

Drug Substitutions
The Drug Sub function allows users to point the drug record to an interchangeable substitute. This function allows users to switch away from using one brand to another. When a Drug Sub is entered into this field, you will be prompted to use the substitution when inputting a prescription.

Comments
Drug records can have an unlimited number of comments. To add a comment, click **Ins**, press **Insert** on the keyboard, or simply begin typing the comment.

Select a topic for the comment by clicking on the down arrow or pressing the down arrow on the keyboard to view the list of choices. A topic must be selected in order to save the comment.

Each comment has three options. To enable an option, use the mouse to click on the checkbox or TAB to the desired option and use the spacebar to select.

Show On Rx
Enabling this option will display the comment on the F12-Filling Screen.

Print on Hardcopy
Enabling this option will print the comment on the hardcopy portion of the Rx label. Note that only one drug comment can be flagged on the hardcopy due to limited space.

Alert
Enabling this flag will cause the comment to pop up every time the drug card is accessed.

To delete a comment, highlight the appropriate comment entry and click **Del**, or press **Delete** on the keyboard. A window will appear to confirm the deletion.

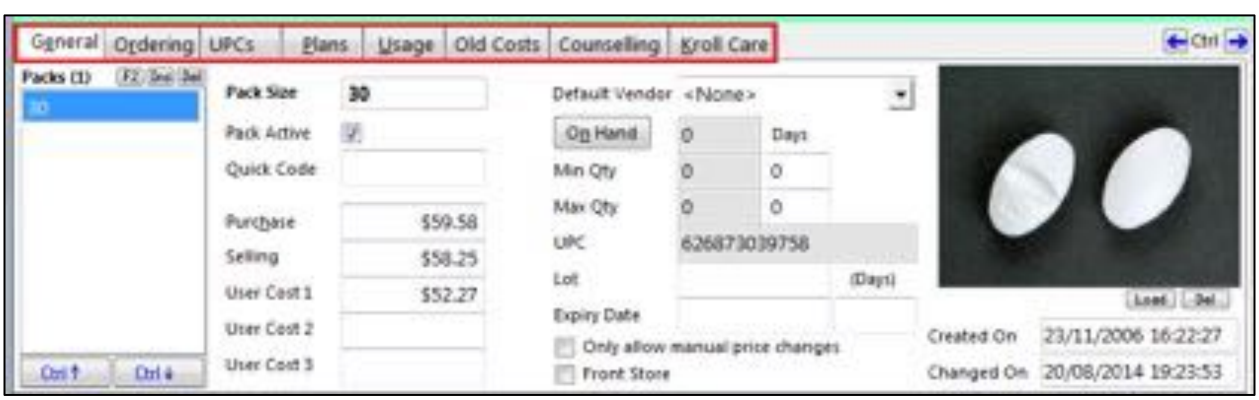
To edit a comment, highlight the applicable comment entry and either:

- Click **F2** with the mouse
- Press **F2** on the keyboard
- Double click on the comment and make the necessary changes.
- Click **Save** or press **Enter** to save changes.

Groups
Drugs can be included in a "group" for a wide range of reporting purposes. Drug Groups are created by head office and can be applied to any number of drug records. For example, a drug group called "Diabetic Supplies" can be created and attached to a drug records for diabetic supplies. Also note that drugs can belong to more than one Drug Group.

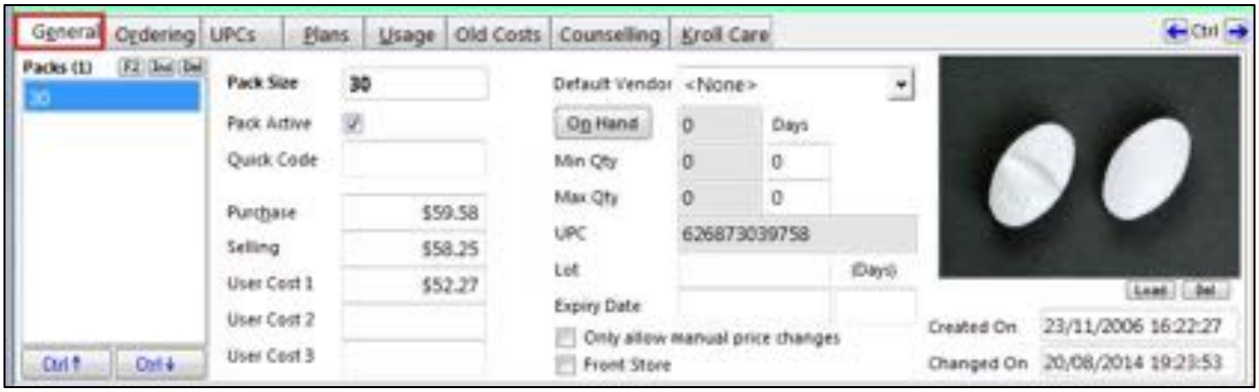
Drug Information Tabs

The drug record contains tabs of information located at the bottom right of the screen. To move to a specific tab, press **CTRL** on the keyboard and the underlined letter on the tab (e.g. Press **CTRL**+**R** to access the **Ordering** tab). You can also flip from tab to tab by pressing **CTRL**+**→** to move right or **CTRL**+**←** to move left.



General

The **General** tab displays general information about cost and quantity that pertains to the selected drug.



Packs (#)
This area displays the different pack sizes available for the drug product (in Ontario, this area will also display ODB pack sizes). When a drug pack is highlighted, the information displayed to the right will refer to the specific pack size selected.

Pack Active
Pack sizes that are actively being used, or have been used recently in a prescription should have the Pack Active flag enabled. Users can remove the Pack Active flag for pack sizes that have been discontinued, or are no longer in use by the pharmacy. Inactive drug packs will not be returned on a regular drug search; an advanced drug search must be executed in order to view inactive drug packs.

Quick Code
Enter a short code that represents the drug record which facilitates searching (e.g. T3 for Tylenol with Codeine #3). Note that the Quick Code must be preceded by a period (.) in the drug search screen to indicate that you is searching using Quick Code convention.

Purchase Price
The first price field always displays the price used to purchase the drug product from the vendor (i.e. acquisition cost). Pricing strategies within the system may pull from this field.

Price Fields
The four price fields located below the Purchase field will vary from province to province and will be centrally maintained by head office. Pricing strategies set within the system may pull from one of these fields.

Default Vendor
The default vendor will be set to K&F for all drug records.

On Hand
The On Hand field displays the current amount of medication available for dispensing. Users will be required to enter their User Initials and Password in order to modify values in the field.

Min Qty
The minimum quantity field displays the point when a drug pack is triggered for reordering. For example, if the minimum quantity is set at 100, when the on hand drops below 100 units, the drug pack will be placed on order. The **Days** field will display the minimum number of days' supply that triggers reordering and is related to **Min Qty** through a calculated formula. **Min Qty** is required for perpetual inventory.

Max Qty
The maximum quantity tells the system how much of a drug product should be reordered. For example, if a drug pack has a **Max Qty** set to 300, the system will order enough so that the current on hand reaches 300 units. The **Days** field displays the maximum days' supply a store should have on hand and is related to **Max Qty** through a calculated formula. Max Qty is optional for perpetual inventory; when the field is empty the system will always order 1 package of the drug pack.

UPC
The UPC field displays the drug pack UPC. If there is more than one UPC for the drug pack, the UPC marked as "default" will be displayed here (See UPC section for further details).

Lot
User can optionally enter the Lot number of the drug product in this field. Note that this field cannot account for multiple lot numbers.

Expiry Date
Users can optionally enter the expiry date of the drug (DDMMYYY) in this field, or type in the number of **Days** that the drug is good for once it is dispensed. The expiry date will print on the vial label. Note that this field cannot account for multiple expiries.

Only allow manual price changes
A checkmark in this field ensures when updates are ran against the drug card, the pricing fields will not updated.

Front Store
A checkmark in this flag indicates that the product is available over-the-counter.

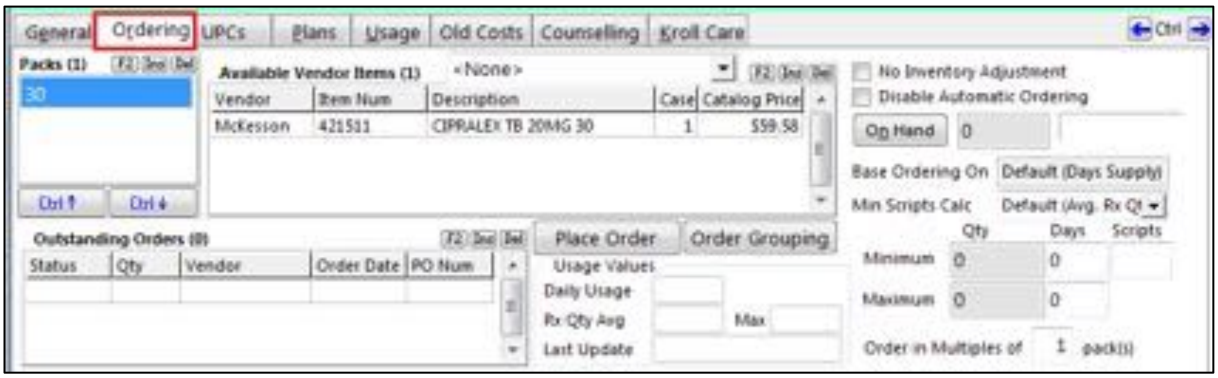
Drug Picture
A large majority of drug records will have a drug picture attached. Periodic updates from central maintenance will ensure that drug records have an associated drug picture.

Created On
The timestamp indicates the date and time the drug record was created.

Changed On
The timestamp indicates the date and time the drug record was last changed.

Ordering

The ordering tab contains information and configurations related to drug ordering.



Packs (#)
This area displays the different pack sizes available for the drug product (in Ontario, this area will also display ODB pack sizes). When a drug pack is highlighted, the information displayed to the right will refer to the specific pack size selected.

Available Vendor Items
This area displays the default vendor. In addition, the item number, description and catalog price for the drug product is displayed here.

No Inventory Adjustment
When this flag is activated, the On Hand field will not be adjusted when the drug is dispensed, nor will it be adjusted when the product is received into the system; in other words, this flag causes the On Hand field to remain static. This flag may be used for OTC products that you create a “Not Dispensed” prescription for because you want it in the patient’s medication history, but you don’t want to deduct inventory from the drug record.

Disable Automatic Ordering
When this flag is activated, the drug product will not be included in the automatic order even when the **On Hand** quantity is less than the Minimum. Users may activate this flag for expensive products they want to order on demand rather than through the automatic ordering system.

On Hand
The **On Hand** field displays the current amount of medication available for dispensing. Users will be required to enter their User Initials and Password in order to modify values in the field. This field is also available from the General Tab.

Base Ordering On
Ordering points can be based on **Min/Max** or **Usage/Days Supply** (default). In both scenarios, if automatic ordering is activated, a drug product will be placed on order when the **On Hand** value drops below the **Minimum** value. When Min/Max is selected, the Days Supply fields will be greyed out and vice-versa.

Benefits of Min/Max ordering
You can control the exact point at which a drug is reordered by setting an exact minimum value.

The Min/Max values do not change once they are set because the values are independent of usage. This is particularly useful for drugs that the pharmacy wishes to under-stock or overstock.

Drawbacks of Min/Max ordering
The Min/Max values do not change once they are set, so you must be aware of drug usage and adjust ordering points accordingly when required.

Benefits of Usage (Days Supply) ordering
Drug reorder points are dynamic values that increase or decrease depending on how often the drug is dispensed within the days supply indicated. This is particularly useful for cyclical drugs like allergy medications that are dispensed frequently during some parts of the year and less during other parts.

Drawbacks of Usage (Days Supply) ordering

The minimum and maximum values are not open for manipulation as they are calculated values; this may result in less control over the exact point the drug is ordered.

Min Scripts Calc

The system can calculate Script quantity based on **Maximum Rx Quantity** or **Average Rx Quantity**.

Order in Multiples of ___ Packs

This configuration is useful for products that are dispensed in multiple packs. For example, birth control is usually dispensed in packs of three, so you may wish to order product in multiples of threes.

Place Order

Accessing the **Place Order** function will allow you to add a *manual* order for the drug; this *manual* order will become a part of the *automatic* order when it is generated. To create a manual order, simply select the **Vendor** (i.e. McKesson), enter the quantity being ordered, and enter the Order Date. This function is most commonly used when the pharmacy wants to order more of a product even when the On Hand quantity is greater than the minimum required.

Additionally, accessing the **Place Order** function allows you to future-date a drug order so that the drug product will be placed on order on the date specified. This is useful for drug products that have short expiries or are costly to stock in advance of dispensing. To future-date an order simply enter the date in the future that you would like the drug product to be ordered.

Order Grouping

This function is used to create re-order points for a drug grouping. By grouping interchangeable drugs Kroll will re-order the primary assigned pack when stock depletes from each drug card in the group.

Usage Values

Usage Values provide users with a succinct snapshot drug movement in terms of daily usage, average Rx quantity, and maximum Rx quantity. Usage values help users to make optimal decisions on replenishment.

Outstanding Orders

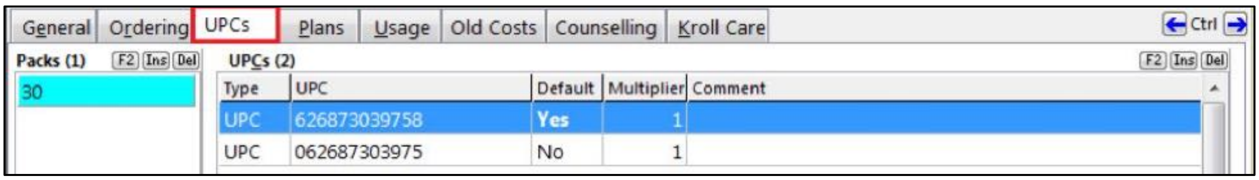
Whenever the drug product has been ordered, an entry will be created under **Outstanding Orders** to indicate that the drug product is on its way to the pharmacy, or is in the process of being ordered.

Whenever there is an entry under **Outstanding Orders**, the drug product will NOT be ordered even when the On Hand is below the minimum required; this prevents the system from duplicating orders for drug products.

UPCs

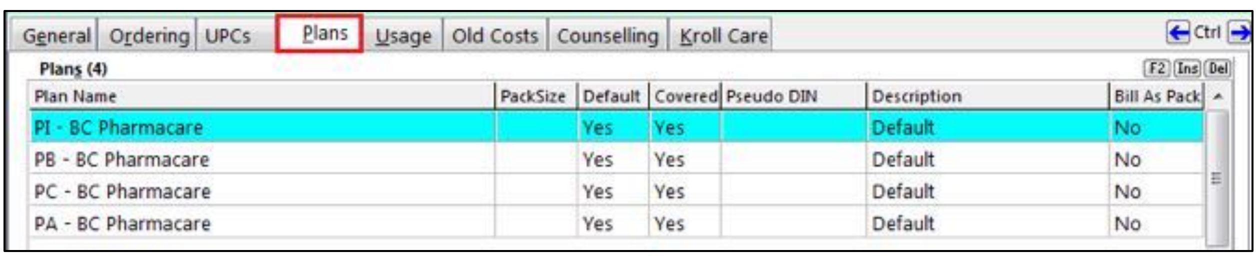
The **UPCs** tab contains all UPCs listed for the selected drug pack. Highlight the applicable drug pack on the right hand side to view UPCs corresponding to the pack size. UPCs are centrally maintained; therefore, any errors should be communicated to the Pharmacy Support Helpdesk for correction.

The UPCs listed in this section are used to verify that the product being used to package an Rx at the filling stage is the correct product.



Plans

The information contained in the **Plans** tab is centrally maintained by head office and serves two purposes. The first is to display formulary coverage for the drug product. You can look under this tab and locate the entry for the provincial plan (in this case ODB for Ontario) and see if the drug product is covered or not. Provincial coverage is updated regularly through formulary updates to the system.

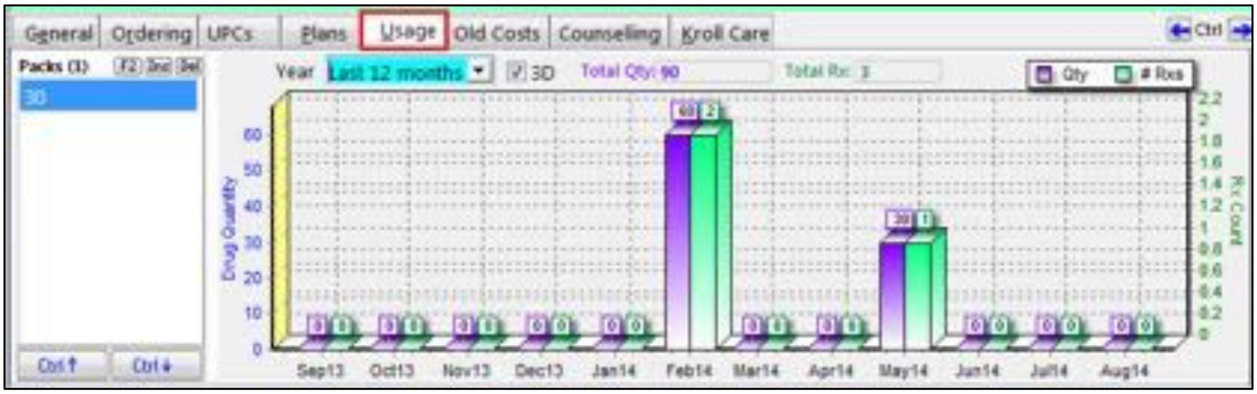


The second purpose of the **Plans** tab is to house **Pseudo DINs** that are adjudicated to third parties for financial reimbursement. To view details of a pseudo DIN, highlight entry of choice and press **F2** on the keyboard, or **double click** on the entry. This will call up the **Drug-Plan Information** window where detailed pseudo DIN information is displayed.

From the **Drug-Plan Information** window, users can see which pack sizes the pseudo DIN is being applied to. When the **Default** flag is checked, it means that the pseudo DIN will be automatically sent to the third party during adjudication; if the **Default** flag is NOT checked, the DIN on the drug record will be sent to the third party rather than the pseudo DIN. A checkmark next to the **Covered** flag indicates that the third party plan will pay for the drug product; this flag serves information purposes only.

Usage

The **Usage** tab displays information regarding how often and in what volume a drug product is being dispensed over a specified time period. This information helps you to determine if current ordering points (i.e. Min/Max values) support optimal replenishment. The graph on the **Usage** tab displays how many prescriptions have been filled for the drug product and the total drug quantity dispensed monthly. Use the **Year** dropdown menu to specify a date range.



Old Costs

The **Old Costs** tab displays pricing changes made to any of the 5 price fields located on the **General Tab** of the drug record. Each of the five pricing fields will display **Current Costs**, **Old Cost**, **Changed On** and **Changed By** columns so that users can accurately identify when, why and by whom a price change was made.

Counseling

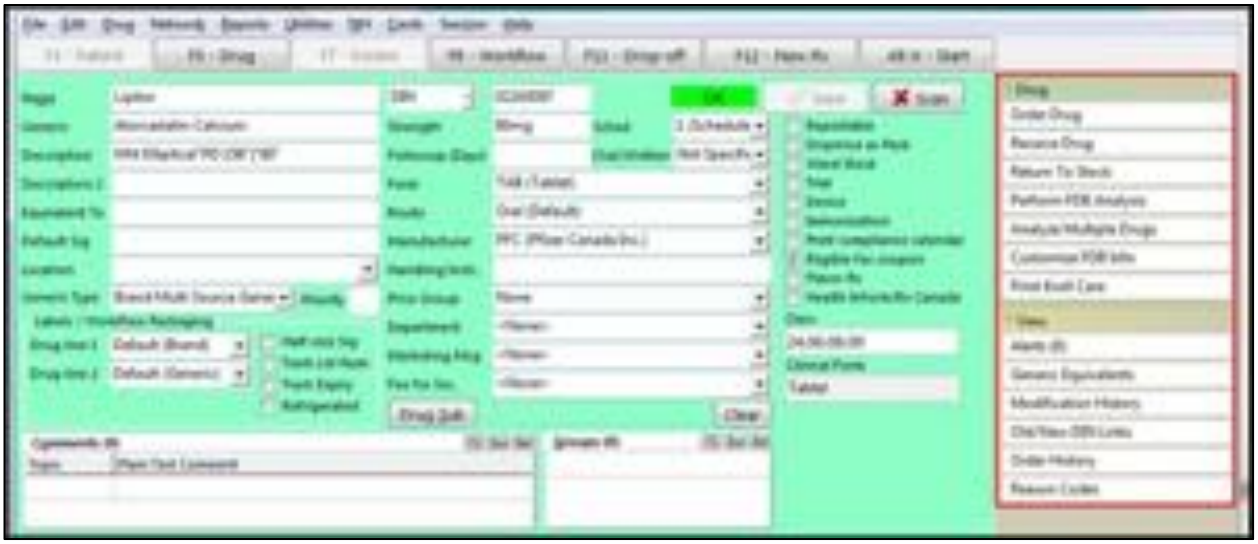
The **Counseling** tab displays patient counseling messages extracted from the First Data Bank (FDB) clinical drug module. Counseling messages are broken down into **Patient Messages** and **Professional Messages**.

Kroll Care

The **Kroll Care** tab displays the Drug Information Monograph that is printed out and handed to the patient during the prescription filling process. The content of Kroll Care is provided by the First Data Bank (FDB) clinical drug module. Users can print the drug information monograph on demand by clicking **Print Kroll Care** from the drug sidebar, or by accessing the **Drug** dropdown menu and selecting the command to **Print Kroll Care.**

Drug Sidebar Functions

The Drug sidebar is available at the right of the screen whenever a Drug Record is accessed. The Sidebar options allow users to quickly access functions related to the drug with just a click of the mouse. The following section will explain how each of the Drug Sidebar functions is used.



Order Drug

Accessing the **Order Drug** function from the sidebar will open up the same window as pressing the **Place Order** button under the **Ordering** tab. This window allows you to add a *manual* order for the drug; this *manual* order will become a part of the *automatic* order when it is generated.

To create a manual order, simply select the **Vendor** (i.e. K&F), enter the **Order Quantity**, and enter the **Order Date**. This function is most commonly used when the pharmacy wants to order more of a product even when the On Hand quantity is greater than the minimum required.

Additionally, accessing the **Place Order** function allows users to future-date a drug order so that the drug product will be placed on order on the date specified. This is useful for drug products that have short expiries or are costly to stock in advance of dispensing. To future-date an order, enter the date in the future that you would like the drug product to be ordered.

Receive Drug

The **Receive Drug** function is used to add drugs to your pharmacy's drug inventory. When drugs are received into the system, the on hand quantity for that drug is updated accordingly.

To record that an order has bene received, select **Receive Drug** to open the **Receive a Drug** form. Enter the number of **Packs** being received, the **Lot Number**, **Expiry Date**, and the **Reason** for adjusting the on-hand quantity for that drug. Click **Save** to save your changes.

Returning to Stock

From the drug card side menu you can choose to return inventory to stock using the **Return to Stock** feature. Enter the **Qty to return to stock** and select a **Reason** for returning to stock. Click **Save** to save your changes.

Perform FDB Analysis

Users can initiate a First Data Bank (FDB) clinical analysis of a drug by selecting **Perform FDB Analysis** from the sidebar.

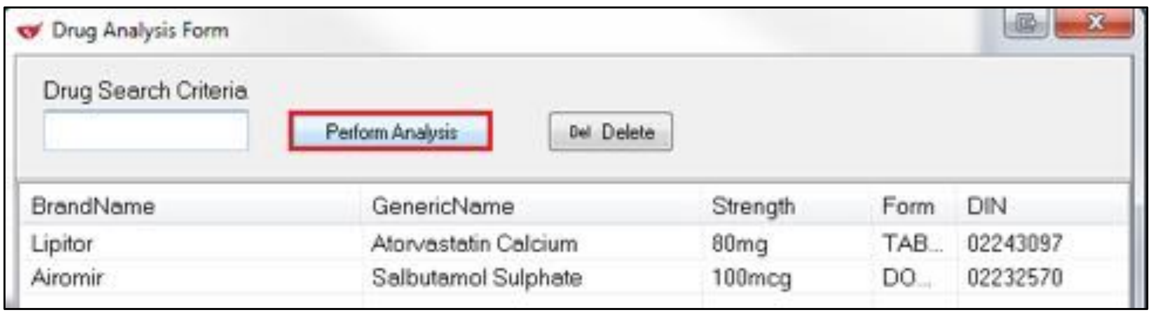
Place a checkmark next to the clinical drug information you want to retrieve. The **Select All** and **Select None** buttons allow you to quickly check or uncheck all options. Once selections have been made, click **OK** or press **Enter** on the keyboard to retrieve data from First Data Bank (FDB).

Results of the analysis will be displayed in the **Clinical Reports** window under separate tabs across the top of the screen. Click **Back** to move left a tab, click **Next** to move right a tab. There is also an option to print the clinical report by selecting **File** > **Print**.

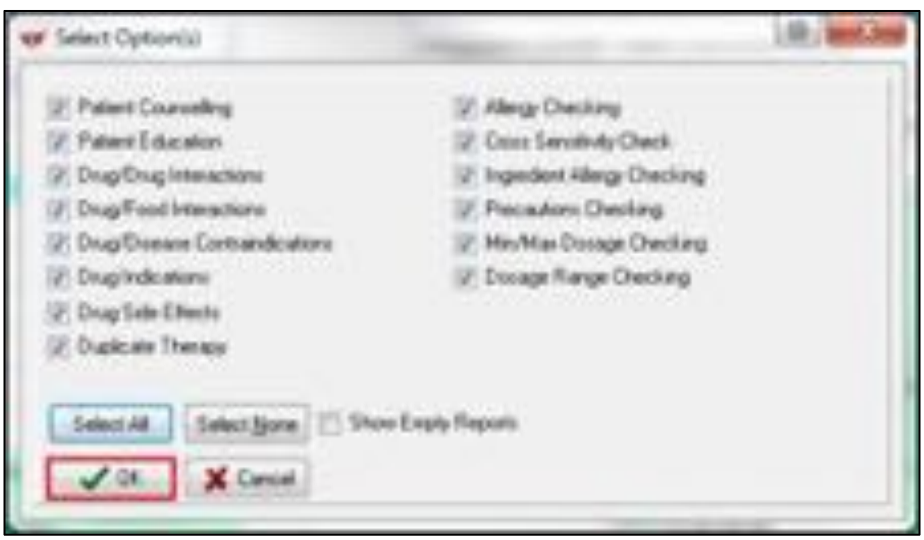
Analyze Multiple Drugs

The option to **Analyze Multiple Drugs** allows you to view interactions between two or more drugs. The analysis is based on the First Data Bank (FDB) clinical module.

When **Analyze Multiple Drugs** is selected, the **Drug Analysis Form** will be displayed. Locate the **Drug Search Criteria** field and search and select the drug(s) you want to perform the interactions checking against. Users can add any number of drugs into the analysis. Once you has added all the drugs they want to analyze, click **Perform Analysis**.



A selection screen will appear where you can select what elements you would like to analyze. Once selections have been made, click **OK** or press **Enter** on the keyboard to retrieve data from First Data Bank (FDB).



Results of the analysis will be displayed in the **Clinical Reports** window under separate tabs across the top of the screen. Click **Back** to move left a tab, click **Next** to move right a tab. There is also an option to print the clinical report by selecting **File** > **Print**.

Customize FDB Info

Customize FDB Info allows you to customize if, when, and for whom **Counseling messages**, **Kroll Care**, and **Auxiliary labels** are printed for the drug, and the order which they appear.

Click **Apply** to apply you FDB information changes.

Print Kroll Care

Kroll Care is an information printout that is provided to patients upon receiving their prescribed medication. The content of Kroll Care is provided by the First Data Bank (FDB) clinical drug module. Click **Print Kroll Care** to generate.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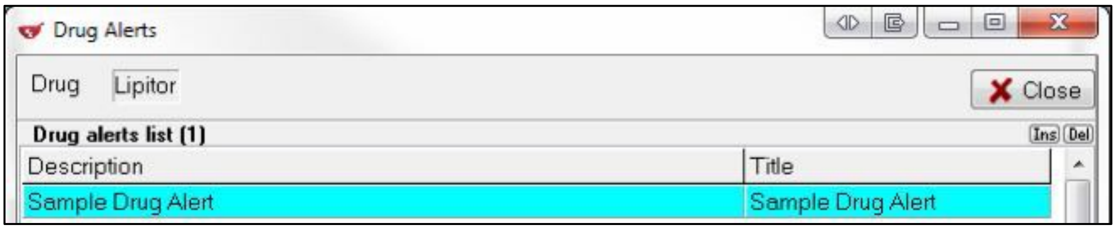
Alerts

Alerts are messages regarding the drug products that are pushed down from head office. Click on the **Alerts** button to read the details of the message. The bracketed number next to the **Alert** button indicates the number of alert messages for the drug product. Alert messages are printed along with Kroll care and distributed to the patient as additional drug information. Drug alerts are added by head office and can be found under **Edit** > **Lists** > **Drug Alerts**.



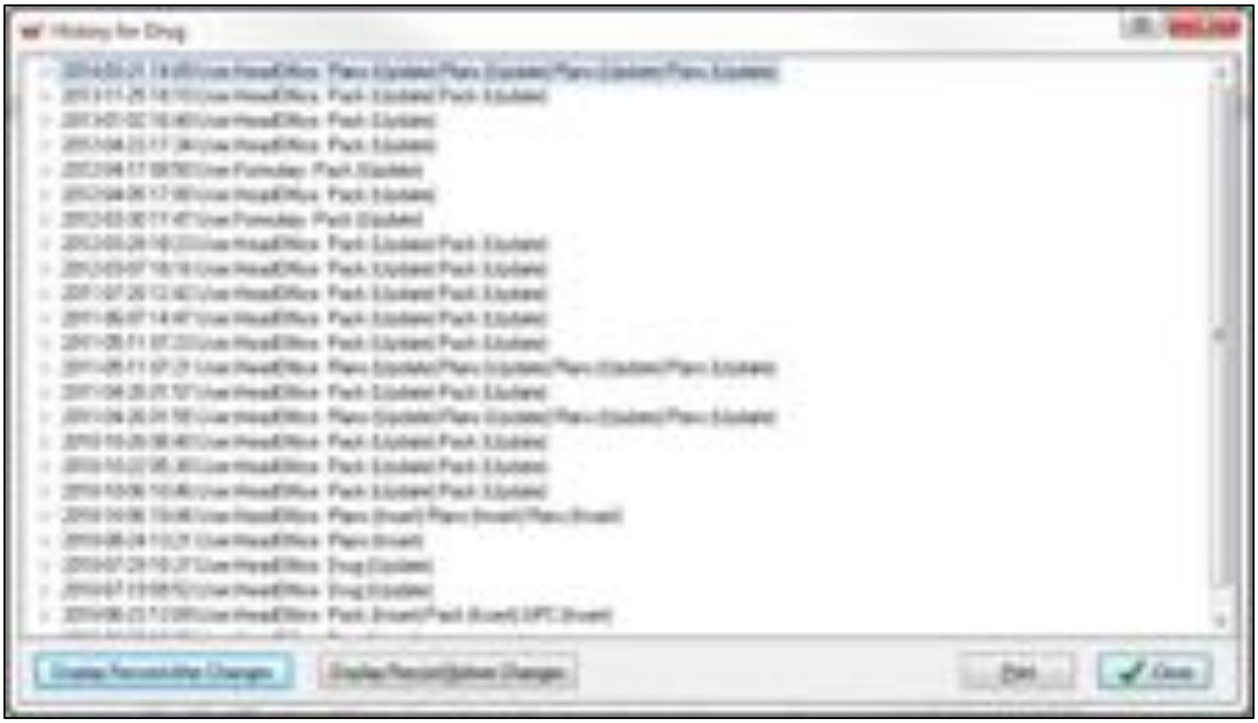
Generic Equivalents

The **Generic Equivalents** function allows you to view a comprehensive list of generic equivalents for a drug product. In Alberta and British Columbia, the **Generic Equivalent** list is maintained by **First Data Bank** (FDB) **Updates**, whereas in the rest of the provinces, the **Generic Equivalent** list is maintained by **Provincial Formulary Updates**. Highlight a generic equivalent entry and click **Select** or press **Enter** on the keyboard to pull up the corresponding drug record. Each entry will display the following information:

- Preferred Brand Indicator (1 = Preferred; 2 = 2nd Preferred, etc.)
- DIN
- Drug Name
- Manufacturer
- Unit Cost (Acquisition Cost ÷ Pack Size)
- On Hand quantity (Allows users to quickly see what brands are stocked)
- Extra info comment if applicable

Modification History

The **Modification History** function calls up read-only data regarding any and all changes made to the drug record. Details of the changes can be expanded (click on the **+** sign) or condensed (click on the **-** sign) depending on the level of detail you wants to see. For example, if there is inventory missing or overstated in the drug record, users can go into **Modification History** to view what changes were made to the **On Hand** field.



Select a change record and click **Display Record After Changes** to view what the drug profile looked like after that particular change was made.

Select a change record and click **Display Record Before Changes** to view what the drug profile looked like before that particular change was made.

Old/New DIN Links

DIN Links are centrally maintained by head office. Din Links appear for drug products that have had a DIN change. The function of the DIN Link is to link the old DIN to the new DIN so that the system recognizes both DINs are for the same product. Users cannot create a DIN Link, but they can remove a DIN Link by highlighting the entry and clicking **Del** or pressing **Delete** on the keyboard.

Order History

The **Order History** function displays read-only information on when the drug product was placed on order (i.e., InitPO), sent (i.e., Ord), and received (i.e., Rec). You can access the **Pack Size** dropdown menu to view order history for different packs of the drug product. This screen helps you determine root causes of ordering issues and/or discrepancies.

Reason Codes

The **Reason Codes** function is only applicable to pharmacies operating in the province of Ontario. Drug products that are eligible to be billed to the provincial plan (ODB) using Limited Use (LU) Codes can access the **Reason Code** sidebar function to view all codes, descriptions and expiries for the LU drug. You can print the codes by clicking **Print** or pressing **CTRL+P** on the keyboard.

Mixture Records

Mixture records are composed of two or more drug records. The drug records within a mixture are referred to as "components". The following sections will describe two methods of searching for mixtures in Kroll Version 10.

Searching for a Mixture

Method 1: From the F5 - Drug Screen

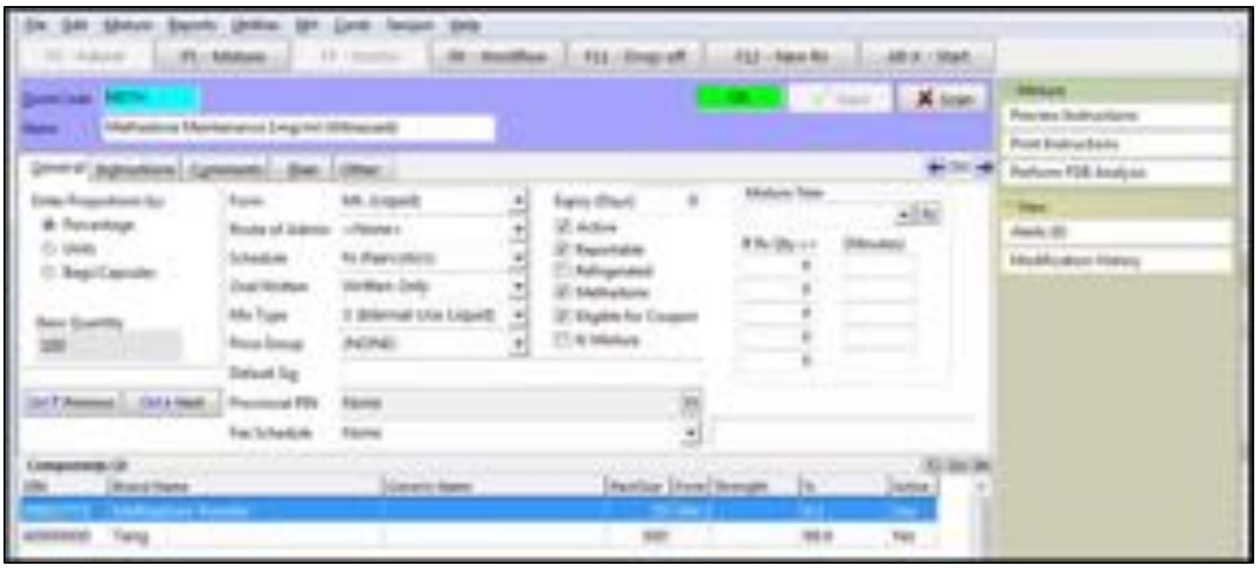
1. Select **F5 - Drug** from the **Alt-X Start** screen.

2. Place a checkmark next to **Mixture** and enter one of the following search criteria:

   a) Search using Mixture **Description**, also known as Mixture **Name**.
   b) Search using mixture **Components**; type in the full or partial *component* names separated by commas. It does not matter what order the components are entered. For example, to search for "Hydrocortisone 1% Powder in Clotrimaderm 1% Cream" users can search "hydro, clot" or "clot, hydro".

c) Search by entering a period (.) followed by the Mixture **QuickCode**. If a mixture does not have a Quick Code assigned to it, this type of search cannot be executed.
d) Search for **ALL** mixtures in the database by entering an asterisk (*).

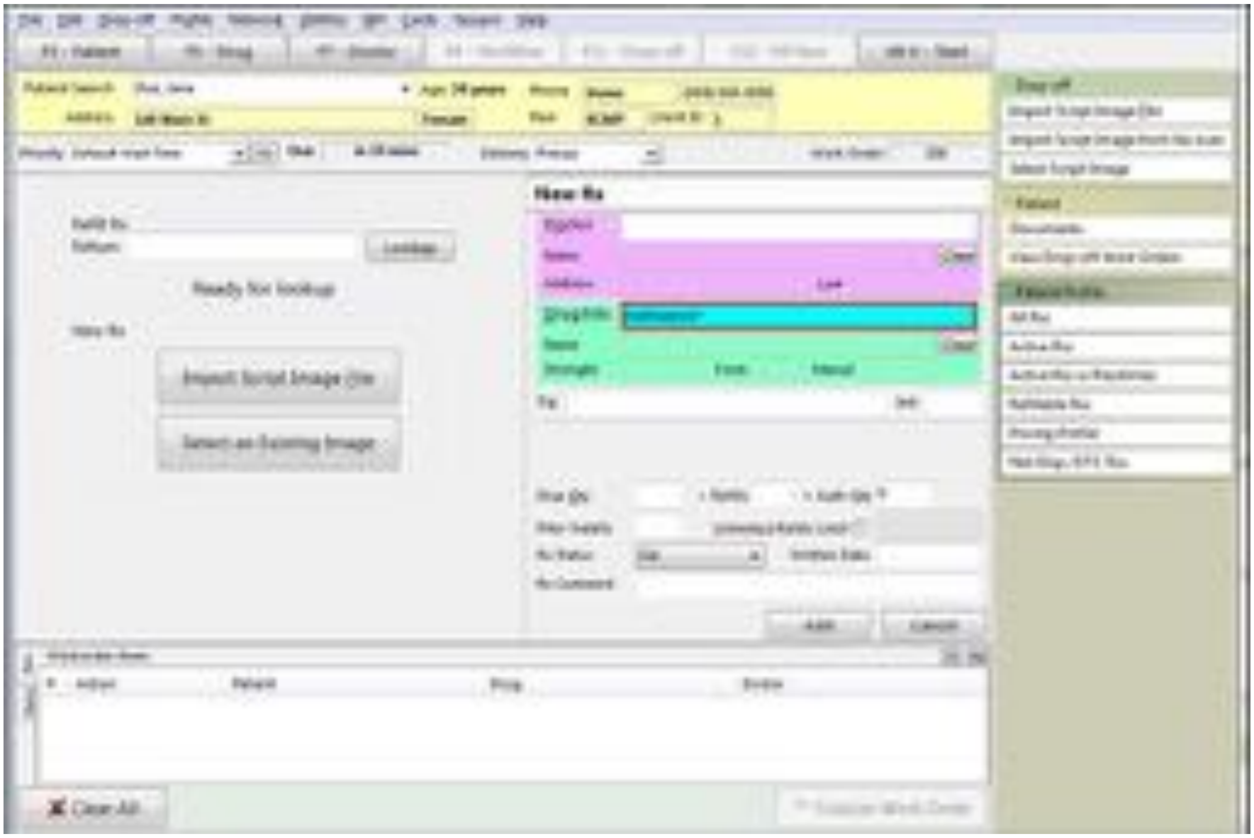
3. Double-click the mixture record. The **F5 - Mixture** screen will display.



Method 2: From the F11 - Drop-Off Screen

1. Call up the **F11 - Drop-Off** screen and perform a patient search. Once you have selected a patient, the **Drug/Mix** field will become available.

2. Enter any of the search criteria described above in the **Drug Search** field and press the **Enter** key on your keyboard.

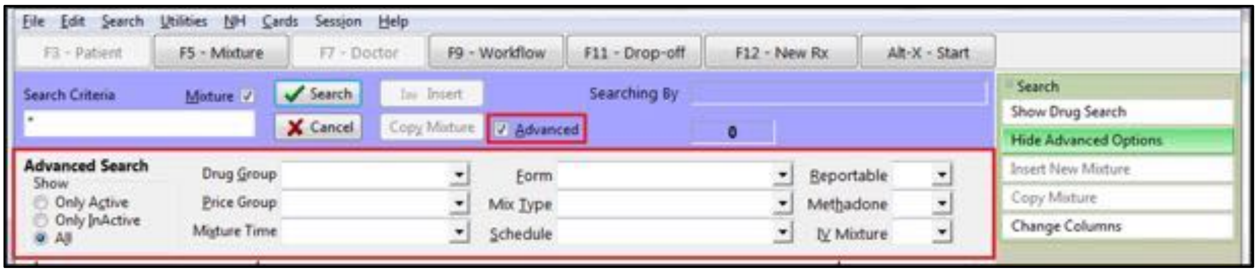


3. A list of mixtures matching the search criteria will be displayed. Double-click the applicable mixture record. The **F5 - Mixture** screen will display.

Performing an Advanced Mixture Search

If a mixture is not found through a regular mixture search as described in the previous section, an **Advanced Mixture Search** can be performed.

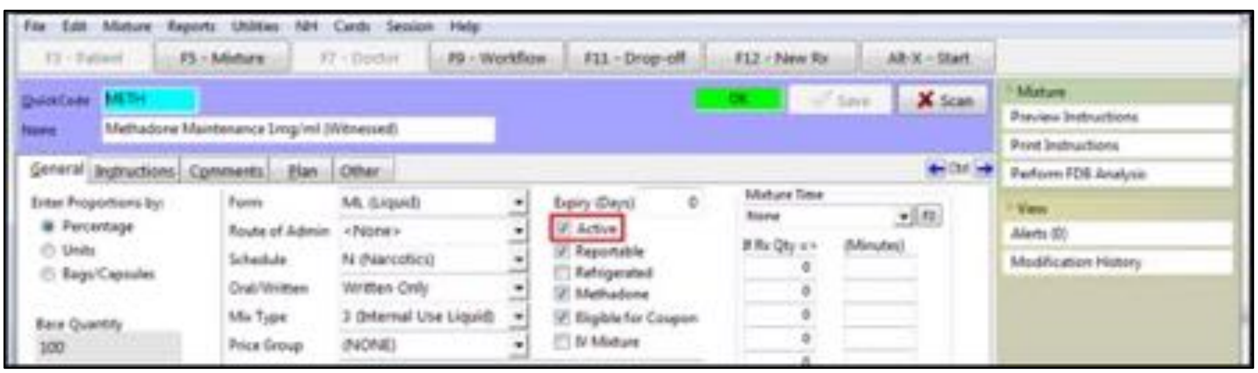
1. Call up the **F5 - Mixture** search screen and place a checkmark next to **Advanced**. The **Advanced Search** pane will appear.



Enter any available advanced mixture search criteria and click **Search**.

Inactive Mixture Records

Similar to drug records, you have the ability to inactivate mixture records if they become obsolete or are no longer used. To inactivate a mixture record, uncheck the **Active** flag. Inactivated mixtures will not show up in the “regular” mixture search; an “advanced” search for **Inactive** records must be initiated in order to access mixture information.

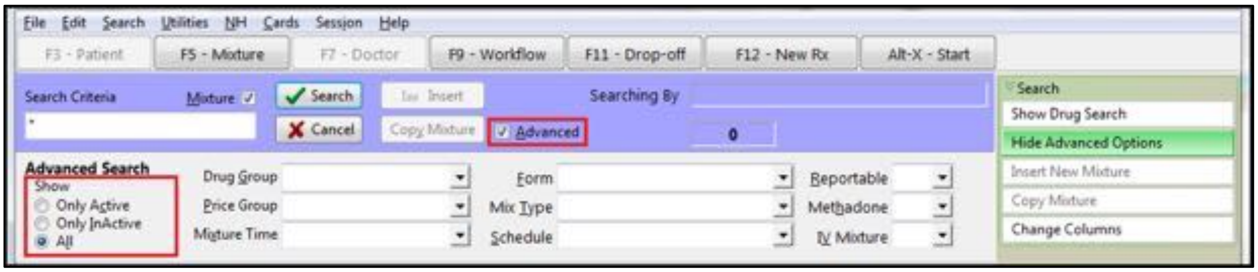


NOTE: Inactive mixture records cannot be used in prescriptions. The **Active** flag must be turned on in order to fill prescriptions for that mixture.

Inactivating mixture records that are not actively being used to fill prescriptions allows the regular search to provide more succinct results thereby reducing the chances of selecting the wrong mixture into a prescription.

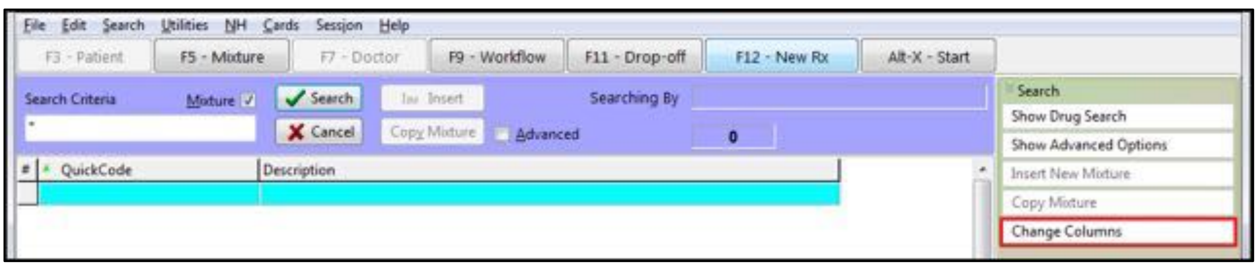
Inactivating mixture records that are not actively being used to fill prescriptions allows the regular search to provide more succinct results thereby reducing the chances of selecting the wrong mixture into a prescription.

To locate inactivated mixtures in the system, perform an **Advanced** search and make sure the **Only Inactive** or **All** flag is marked on the far left. Search as usual to find the applicable record.



Configuring the Columns in the Mixture Search Screen

You can configure the columns that are displayed on the **Mixture Search** screen by clicking **Change Columns** from the right navigation pane.



The **Edit Scan Columns** window will appear. Place a checkmark next to the columns you want displayed and click **OK**.

Mixture Naming Conventions (Recommended)

When creating a new mixture record, it is recommended to use the following ***Mixture Description*** naming convention:

1. Active Ingredient(s) should come before base ingredient(s). If there is more than one active ingredient, the one with the higher concentration goes first, followed by the active ingredient with the second highest concentration, etc.
2. Base ingredient(s) go after active ingredients. If there is more than one base ingredient, the one with the higher proportion goes first, followed by the base ingredient with the second highest proportion, etc.
3. Percentages/ratios go after the name of a component (e.g. “Hydrocortisone Powder 1%”, rather than “1% Hydrocortisone Powder).
4. Spell out full component names and forms when possible. If there is not enough room, abbreviate the form before abbreviating the components; furthermore, abbreviate the base components before active components.

Whenever possible, enter mixture proportions by percentage so that the system can automatically calculate how much of each component is needed to make the mixture regardless of dispense quantity.

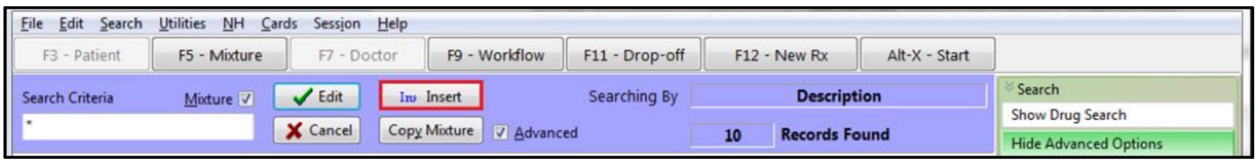
Creating a New Mixture Record

Mixture records are added and maintained by store-level users, not by the central system, which makes understanding them especially important. Avoid adding a mixture record without performing a thorough search of the system; duplicate mixture records cause confusion for the pharmacy and potentially for the patient.

NOTE: If a mixture component is inactive or missing during mixture creation, you will have to open a new Kroll session to reactivate/add the component before continuing to create the mixture record.

1. Perform a thorough search to ensure the mixture does not already exist in the database. You will be prompted to perform an **Advanced** search for inactive drugs as well.

2. Once you have determined that the drug does not exist in the system, click **Insert** or press the **Insert** key on the keyboard.



2. A blank **F5 - Mixture** screen will appear. Complete the mixture fields and click **Save**.

Inserting Mixture Components

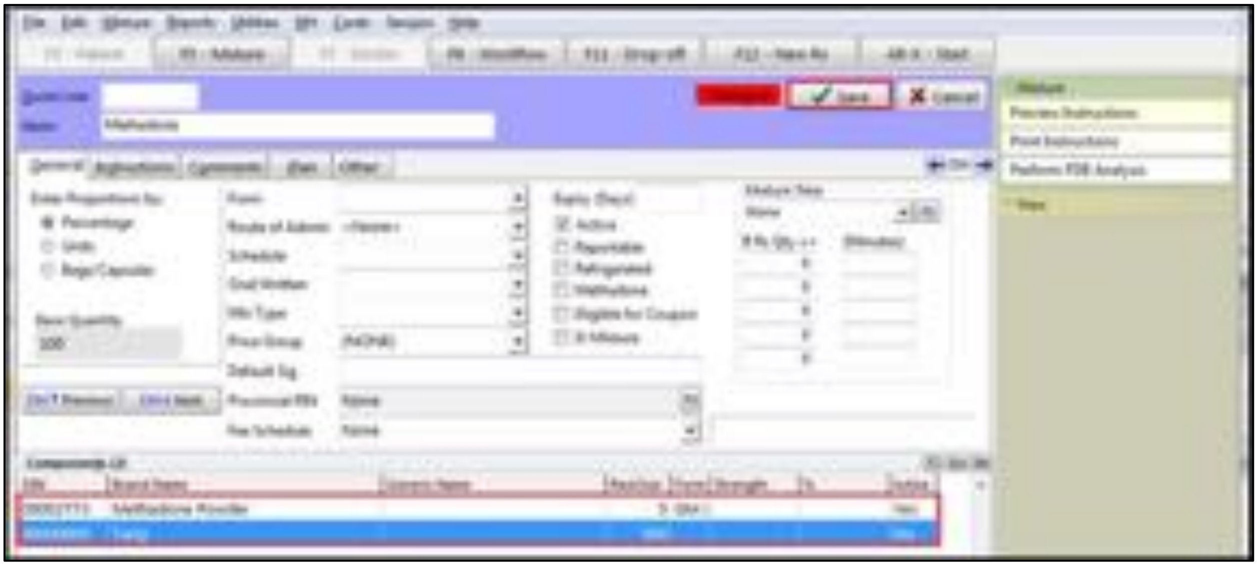
A mixture record is not complete without the addition of mixture components. In fact, users cannot save a mixture record until components have been selected.

1. Call up the Mixture card for the mixture you want to add components to and click **Ins** or press the **Insert** key on your keyboard from the **Components** pane.

2. Perform a drug search. Highlight the applicable component and click **Select**.
3. The **Compound Component** form will appear. Click **Add**.

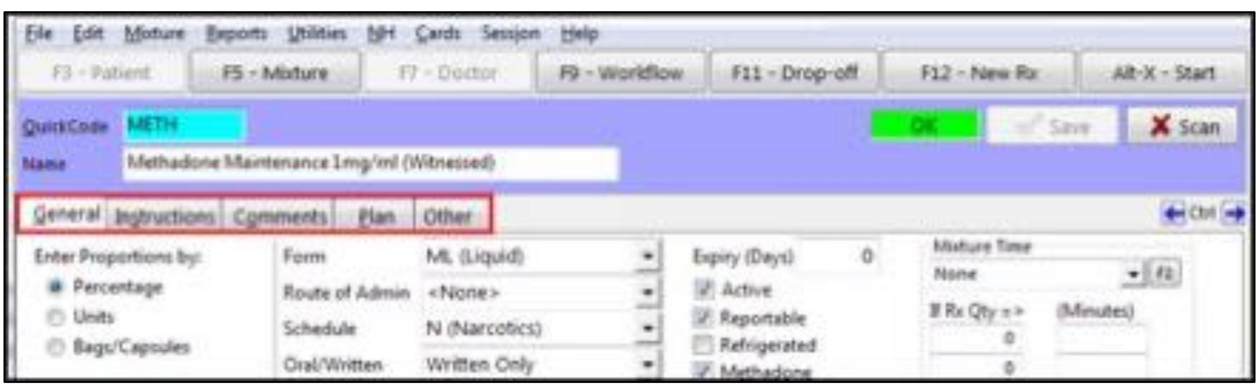
4. Repeat steps 2-3 for each component you want to add to the mixture. When you have finished adding components, click **Close** to exit the drug search screen.

5. The drug components will appear in the **Components** pane. Click **Save** to save the mixture record.



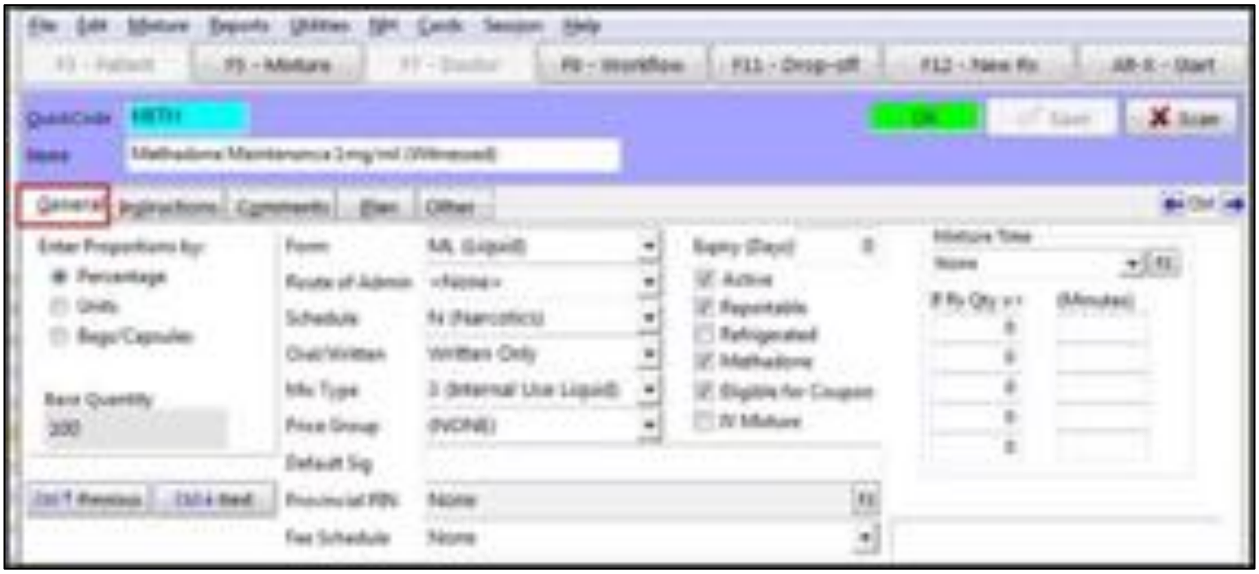
Mixture Information Tabs

The mixture record contains tabs of information located at the bottom right of the screen. To move to a specific tab, press **CTRL** on the keyboard and the underlined letter on the tab (e.g. Press **CTRL+R** to access the **Ordering** tab). You can also flip from tab to tab by pressing **CTRL+→** to move right or **CTRL+←** to move left.



General

The **General** tab displays general information about the selected mixture.



Enter Proportions by
Identify the best, or most applicable, way to enter the proportions of the mixture.

- **Percentage**: Whenever possible, use percentages (i.e. ratios) to enter mixture proportions. Using percentages allows the system to calculate how much of each ingredient is required to compound any dispensing quantity. The Base Quantity for mixtures entered in percentage proportions is always equal to 100.
- **Units**: Compounds made up of ingredients with different forms may require components to be entered by units rather than percentages. When **Units** are used to enter mixture proportions, you must indicate the quantity being prepared in the **Base Quantity** field in order for the system to correctly calculate how much of each ingredient is required for compounding.
- **Bags/Capsules**: When preparing I.V. bags or pharmacy prepared capsules, enter proportions by **Bags/Capsules**. When Bags/Capsules is selected, you must indicate the number of bags or capsules being prepared in the **Base Quantity** field in order for the system to correctly calculate how much of each ingredient is required for compounding.

Base Quantity
Specify the physical quantities of the mixture components and must reflect the selected proportion type (**Percentage**, **Units**, or **Bags/Capsules**).

Form
Specify the physical state of the mixture (i.e., liquid, powder, vaccine).

Route of Admin
Specify how the mixture must be administered (i.e., injection, topical, oral).

Schedule
Select the drug schedule of the mixture if it contains controlled component.

Oral/Written
Indicate whether the mixture requires an oral or written prescription; if neither option applies, select **Not Specified**.

Mix Type
The mixture type is required for adjudication purposes. Select from one of the following mixture types:

- 0-Topical Cream
- 1-Topical Ointment
- 2-External Lotion
- 3-Internal Use Liquid
- 4-External Powder
- 5-Internal Powder
- 6-Injection or Infusion
- 7-Ear/Eye Drop
- 8-Suppository
- 9-Other

Price Group
Created by head office, price groups are used to price Rxs. If this mixture requires special pricing, the price group field can be populated to maintain the automatic pricing.

Default SIG
If the mixture is always dispensed with the same SIG instructions, users can optionally enter a "Default SIG" in this field. The SIG will automatically be carried over to the prescription filling screen when the mixture record is selected, but can be overridden.

Provincial PIN
Each province's provincial plan covers certain mixtures; these mixtures have assigned pseudo DINs (i.e. PINs) which can be viewed under the **Provincial PIN** dropdown menu. If the mixture record is covered by one of the pseudo DINs, select the correct PIN from the dropdown menu.

Expiry (Days)
If applicable, enter the number of days the mixture is good for once it has been compounded; the system will calculate a calendar date for when the mixture reaches expiry and prints this date on the vial label.

Active

The **Active** flag is checked by default. Uncheck the **Active** flag if the mixture record is no longer being used in any active prescriptions, or if the mixture has become obsolete.

Reportable

Place a checkmark next to the **Reportable** flag if the mixture contains a narcotic component. When the Reportable flag is checked, the mixture will be tracked in the system's **Narcotic Report**.

Refrigerated

Place a checkmark next to the **Refrigerated** flag if the mixture requires refrigeration. When the Refrigerated flag is checked, a message will appear during the filling stage to remind you that the mixture needs to be stored in a refrigerator subsequent to preparation.

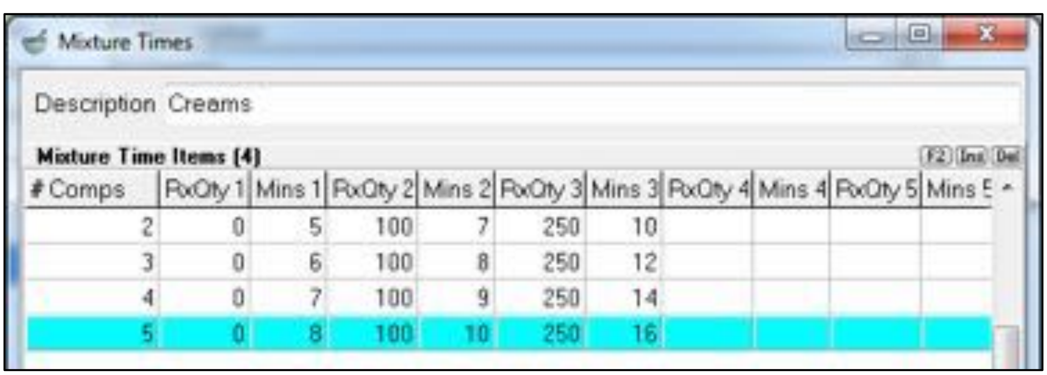
Methadone

The methadone flag should only be checked for methadone mixture records. Activation of this flag enables the "carries" function and other methadone related dispensing functions.

Mixture Time

The **Mixture Time** chart allows users to configure the **Mixture Fee** charged to the patient based on the amount of mixture being dispensed. Each mixture will have its own mixture fee tier. Each row in the chart represents a pricing tier:

- The first row represents the minimum mixture fee charged to the patient. The Rx quantity should equal zero because any dispense quantity greater than zero requires a minimum base fee to be charged.
- The second row of the chart is the second tier for the mixture fee; the Rx quantity entered here should be the threshold value where making more than that quantity will mean graduating to the next tiered fee.
- You can choose to add up to 5 mixture pricing tiers, however this is not required and depends on the complexity of the mixture.


Mixture Times

Description Creams

Mixture Time Items (4)

# Comps	RxQty 1	Mins 1	RxQty 2	Mins 2	RxQty 3	Mins 3	RxQty 4	Mins 4	RxQty 5	Mins 5
2	0	5	100	7	250	10				
3	0	6	100	8	250	12				
4	0	7	100	9	250	14				
5	0	8	100	10	250	16				

The last entry in the chart or the final pricing tier represents the maximum mixture fee charged; any dispense quantity greater than the Rx quantity listed here will charge the maximum mixture fee only.

The above **Mixture Time** chart reads, "When the Rx (dispense) quantity is equal to or greater than 0, then charge 8 minutes of mixture time; when the Rx (dispense) quantity is equal to or greater than 100, then charge 10 minutes of mixture time; when the Rx (dispense) quantity is equal or greater than 250, then charge 16 minutes of mixture time; and any dispense quantity greater than 250, charge a maximum of 16 minutes of mixture time.

Instructions

The **Instructions** tab records any special instructions that must be followed when compounding the mixture (e.g., heating time, use of mixing solutions).

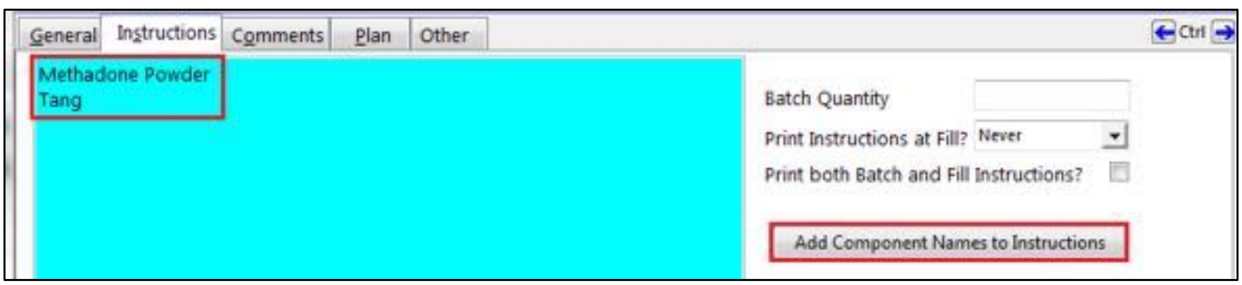
Handling Instructions
Enter any instructions that must be followed when preparing the compound.

Batch Quantity
Batch quantities of a mixture may be compounded at store level because it is dispensed frequently. Enter the volume of the batch in this field and the system will deduct quantities dispensed against the value entered here (equivalent to the drug On Hand).

Print Instructions at Fill
Select **Never** if you do not want instructions to print when and Rx for the mixture is filled; select **Always** if you do want instructions to print, and **Prompt** if you want to be prompted to print instructions.

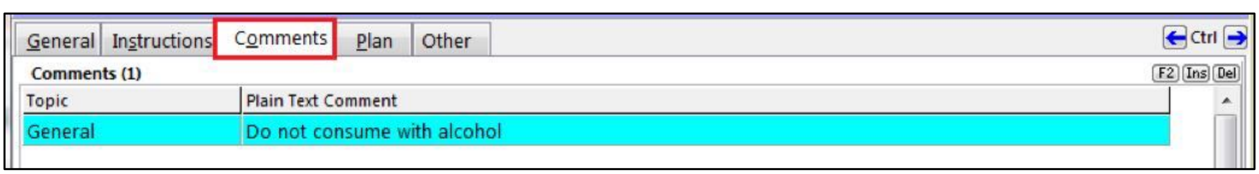
Print both Batch and Fill Instructions
Place a checkmark next to this option if you want both batch and fill instructions to be printed when an Rx for the mixture is filled or batched.

Add Component Names to Instructions
Click this button to include the names of the mixture components in the instructions field.



Comments

The **Comments** tab displays any general comments that pertain to the mixture.



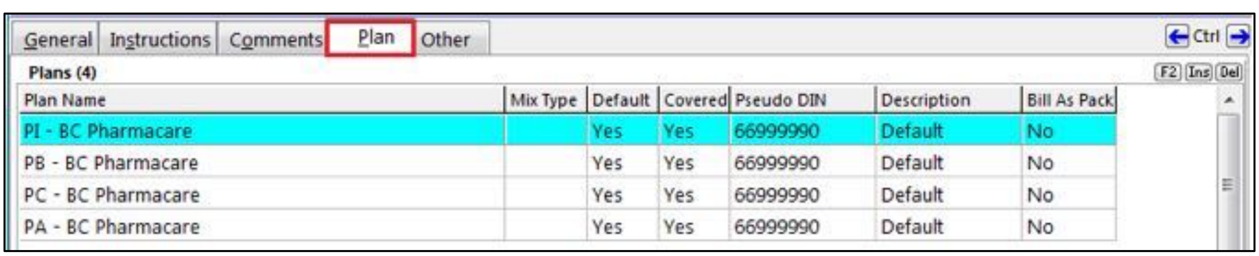
To insert a new comment, click **Ins** or press the **Insert** key on your keyboard. The **Comments** window will open. Select a **Topic** and enter your comment.

Place a checkmark next to **Show On Rx** if you want the comment to appear when filling an Rx for the mixture, **Alert** if you want a popup message to appear when filling an Rx for the mixture indicating that a comment is present, and **Print On Hardcopy** if you want the comment to print on hardcopies when an Rx is filled for the mixture. Click **Save** to save the comment.

Click **F2** to edit an existing comment and **Del** to delete a comment.

Plan

The **Plans Tab** of the mixture record houses **Pseudo DINs** that are adjudicated to third parties for purposes of financial reimbursement. Mixture Pseudo DINs will need to be added and maintained by store-level users.



To add a new plan, click **Ins** or press the **Insert** key on your keyboard. The **Mixture-Plan Information** form will appear.

SubPlan
Select the third party plan that is associated with the pseudo DIN from the dropdown menu.

Description
Enter a general description or a note associated with the pseudo DIN. This field will be set to **Default** if no description is specified.

Default
This option is enabled by default and instructs the system to automatically send the pseudo DIN to the third party plan whenever an Rx is processed for the mixture.

DIN
Select from **PDIN** (pseudo DIN), **NPN** (Natural Product Number), **HDIN** (Homeopathic DIN), **OPIN** (OPINIONS). Proceed by entering the 8-digit drug identification number in the field to the right.

Covered
This is an information flag that indicates third party coverage. Place a checkmark next to this flag if the associated third party covers the costs of the medication.

Mix Type
Place a checkmark next to this option if the third party plan requires submission of a **Mix Type** that is different than what is set on the **Mixture Record**. This field is commonly used for Methadone mixtures billed to Green Shield.

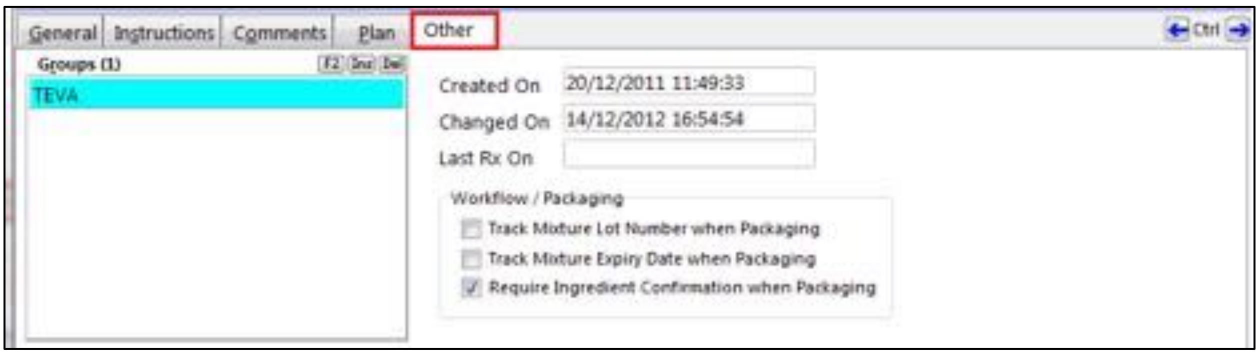
Bill As Pack
Place a checkmark next to this flag if the mixture needs to be billed to the third party by packs rather than by units.

Fee Schedule
This field specifies the fee category the mixture will be billed as to the third party plan.

Click **F2** to edit an existing plan and **Del** to delete a plan.

Other

The **Other** tab displays information about when the mixture was created, last changed, last used in an Rx, and any groups the mixture may belong to.



Created On
The date the mixture record was created.

Changed On
The date the mixture record was last modified.

Last Rx On
The date an Rx was last filled for the mixture.

Workflow/Packaging

- **Track Mixture Lot Number when Packaging**: Activate this flag if you would like to require the lot number for each component to be entered/ scanned during mixture packaging verification (i.e. filling).
- **Track Mixture Expiry Date when Packaging**: Activate this flag if you would like to require the expiry date for each component to be entered/ scanned during mixture packaging verification (i.e. filling).
- **Require Ingredient Confirmation when Packaging**: Activate this flag if you would like to require the UPC for each component to be scanned during mixture packaging verification (i.e. filling).

Groups
Mixtures can be included in a group for reporting or dispensing purposes. Mixture groups are created by head office and can be applied by pharmacy users to any number of mixtures. For example, a group called "Methadone" can be created and attached to all methadone mixture records. Also note that a mixture record can belong to more than one Mixture Group.

To add a drug group, click **Ins** or press **Insert** on your keyboard. The **Add/Delete Groups** window will appear.

Highlight the desired item(s) from the **Available Groups** pain and click **Insert**. The group(s) will appear in the **Selected Groups** pain. Click **OK** to close the **Add/Delete Groups** window.

Click the **F2** button to modify an existing group and the **Del** button to delete a group from the mixture profile.

Mixture Pricing

Mixture pricing is made up of a number of elements:

Price/Minute
Dollar amount charged for each minute of mixture time (centrally maintained according to provincial standards).

Mixture Fee
Derived from the **Mixture Time Chart** on the mixture record. Mixture Fee is calculated based on the quantity dispensed in the prescription.

Cost of the components
Derived from acquisition cost for mixture components (i.e., drug records). Acquisition cost is maintained through invoice receiving or catalogue feeds.

Markup Strategy
Set by home office and centrally maintained.

Setting Minimum & Maximum Mixture Fee

To set a minimum and maximum mixture fee, users must first call up the mixture record and refer to the **Mixture Time Chart**. The first line of the Mixture Time Chart configures the minimum fee charged for the mixture; in the chart below, even if the pharmacy makes one gram (1 gm) of mixture, there will be a minimum of 5 minutes charged. The last line of the Mixture Time Charge configures the maximum fee charged for the mixture; in the chart below, even if the pharmacy makes 1000gm of mixture, the maximum time charged will be 10 minutes.

The lines (or tiers) in between the minimum and maximum charge account for prescriptions where the dispense quantity lies between the two barrier points. For example, according to the Mixture Time Chart above, if a prescription has a dispense quantity of 100gm, 7 minutes of mixture time will be charged.

Setting a Flat Mixture Fee

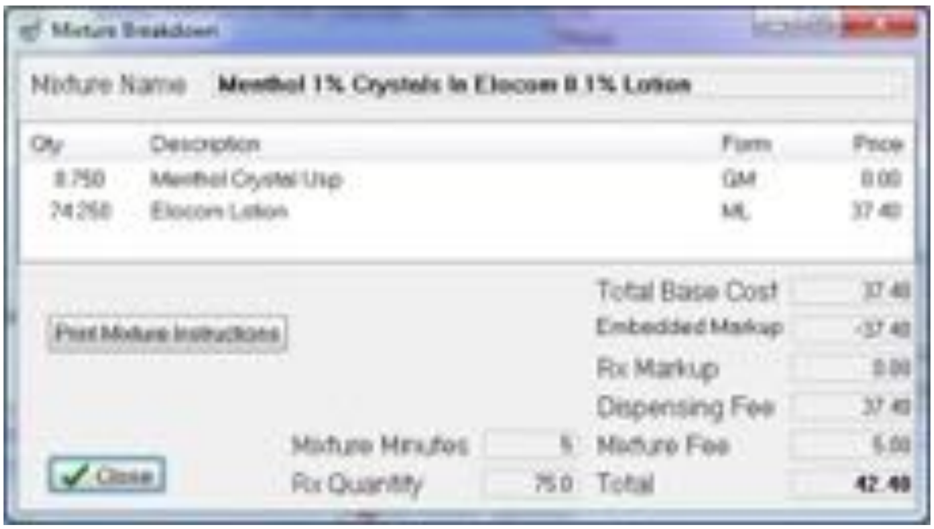
A flat fee can be set for a mixture, which means that no matter how much is dispensed, the same mixture fee will be applied to the prescription. A flat fee configuration is achieved by setting a single line in the Mixture Time Chart. The following flat fee configuration reads any dispense quantity greater than zero will be charged 12 minutes of mixture time.

Mixture Breakdown

Whenever a user is filling a prescription for a mixture, it is always recommended to review the "Mixture Breakdown" before adjudicating the Rx. The Mixture Breakdown provides exact dollar amounts for elements that make up mixture pricing (e.g. Mixture Fee, Component Costs, etc.).

Access the Mixture Breakdown from the F12-Filling Screen as follows:

1. From the **F12** screen, all prescription information should be entered and populated:
2. From the prescription sidebar, click **Mixture Breakdown**, or press **ALT+V+M** on the keyboard. The **Mixture Breakdown** window will appear.



Component Quantity and Associated Cost

Total Base Cost
Total acquisition cost of all components.

Embedded/Rx Markup
Centrally maintained.

Dispensing Fee
Regular and Customary Rx Dispensing Fee (centrally maintained).

Mixture Fee
Based on Mixture Time Chart and quantity dispensed

Mixture Minutes
Used to calculate Mixture Fee

Rx Quantity
Rx Dispense Quantity

Users also have an option to **Print Mixture Instructions** which will print the comments inputted in the **Instructions Tab** of the mixture record as well as other relevant information.

Once the **Mixture Breakdown** has been reviewed, click **Close** or press **Enter** on the keyboard to escape back to the mixture prescriptions.

Prescriber Records

Prescriber records contain comprehensive information about prescribers' contact details, licence numbers, and other specifics. This section explains how to prescriber searches and how to create and manage prescriber records.

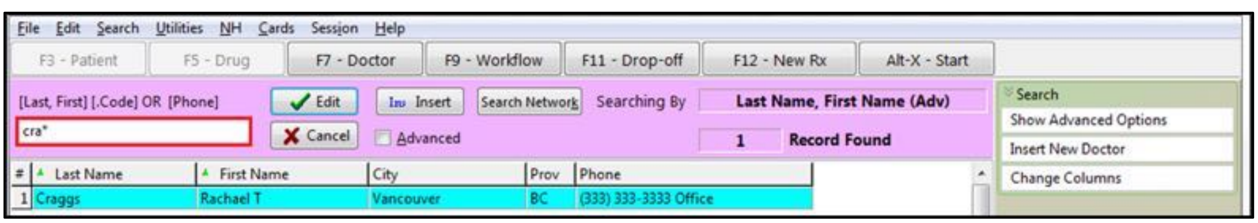
Searching for a Prescriber Record

Method 1: From the F7 - Doctor Screen

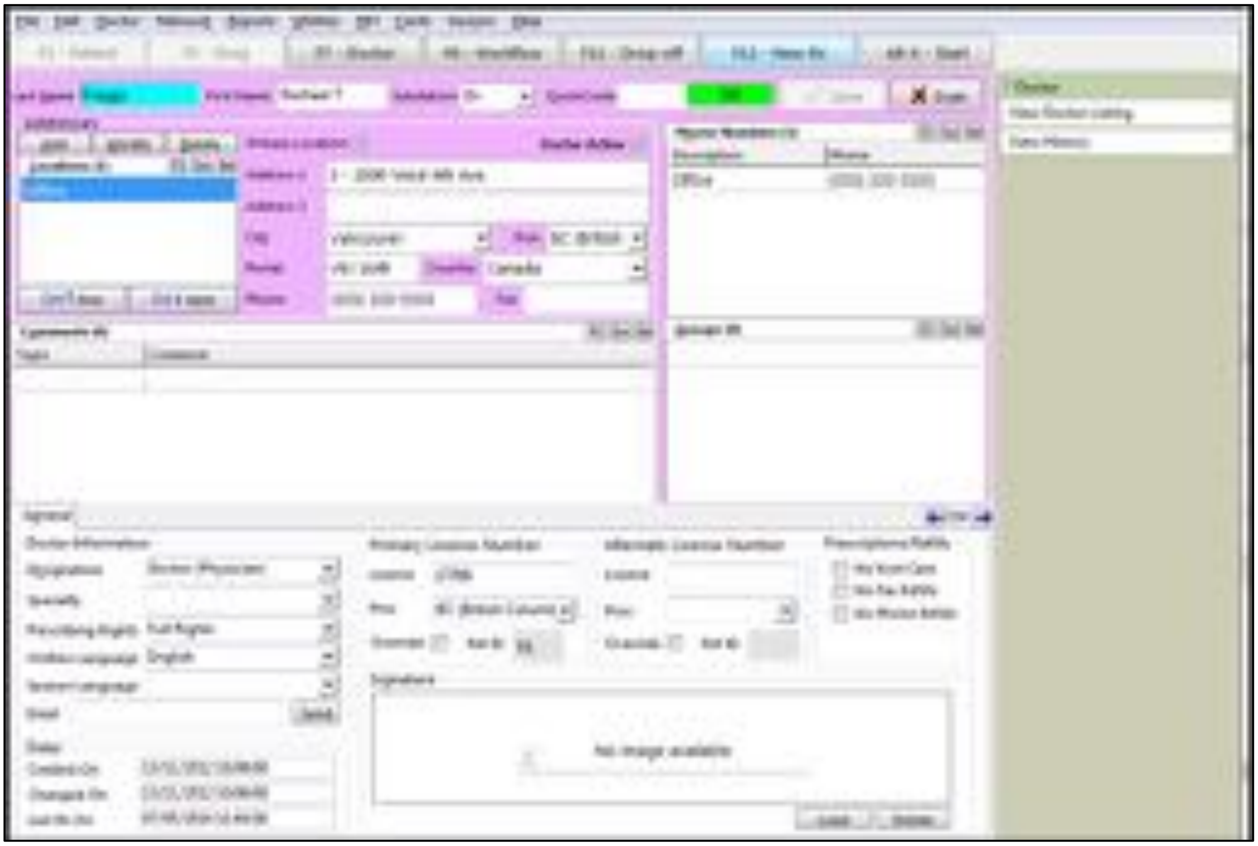
1. Select **F7 - Doctor** from the **Alt-X Start** screen.

2. Enter one of the following patient search criteria and click **Search**:

    a) Last Name, First Name (e.g. "house, greg" **OR** "hou, g" **OR** "house" **OR** ",greg").
    b) A period (.) and the Doctor Quick Code (e.g. ".house").
    c) 7 or 10 digit phone number of the prescriber office.
    d) A number sign (#) and the prescriber license number (e.g. #123454).
    e) An asterisk (*) to search for ALL prescribers in the database.

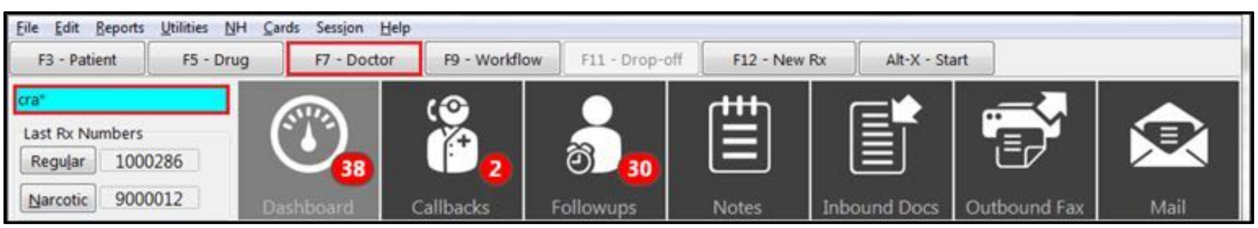


3. Double-click the prescriber record. The **F7 - Doctor** screen will display.

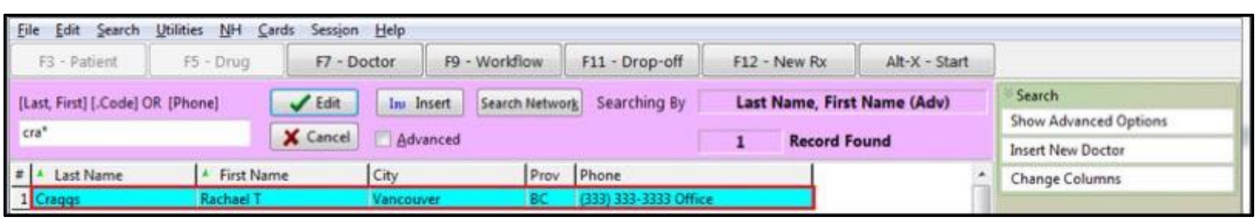


Method 2: From the Alt - X Start Screen

1. Enter any of the search criteria described above in the **Universal Search Field**, located on the **Alt - X Start** screen, and click **F7 - Doctor**.



2. A list of prescribers matching the search criteria will be displayed. Double-click the applicable prescriber record.

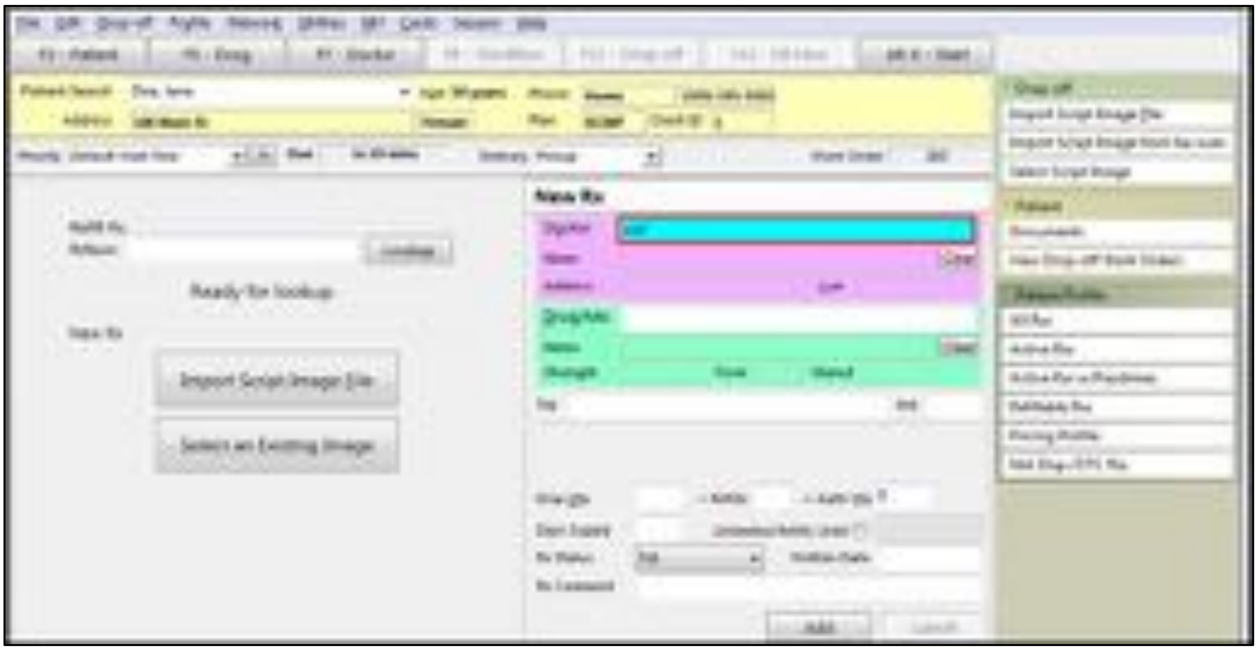


The **F7 - Doctor** screen will display.

Method 3: From the F11 - Drop-Off Screen

1. Call up the **F11 - Drop-Off** screen and perform a patient search. Once you have selected a patient, the **Doctor** field will become available.

2. Enter any of the search criteria described above in the **Doctor** search field and press the **Enter** key on your keyboard.

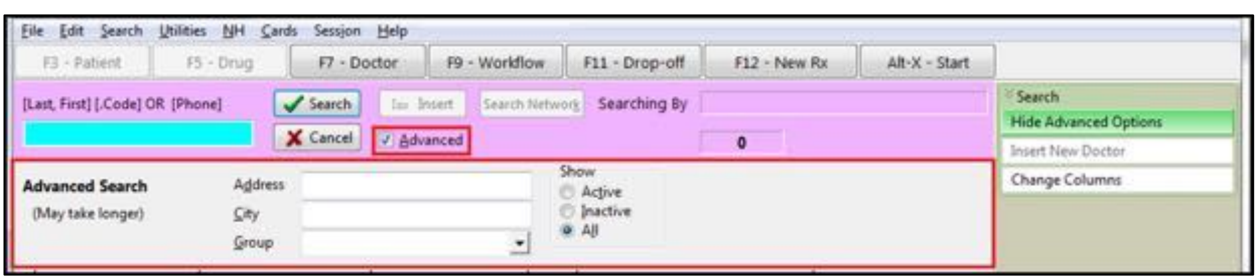


3. A list of prescribers matching the search criteria will be displayed. Double-click the applicable prescriber record. The **F7 - Doctor** screen will display.

Performing an Advanced Prescriber Search

If a prescriber is not found through a regular prescriber search as described in the previous section, an **Advanced Drug Search** can be performed.

1. Call up the **F7 - Doctor** search screen and place a checkmark next to **Advanced**. The **Advanced Search** pane will appear.



2. Enter any available prescriber information and click **Search**.

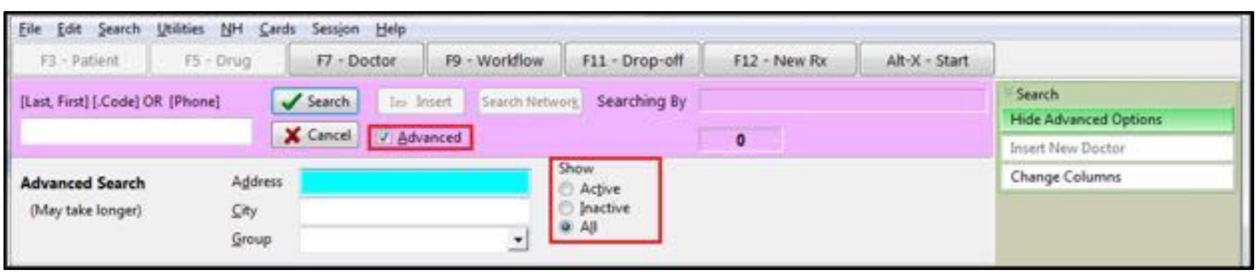
Inactive Prescriber Records

You have the ability to inactivate prescriber records in the system by un-checking the **Doctor Active** flag located on the drug record. Inactivating a prescriber record means that the prescriber will not show up in the regular prescriber search; an **Advanced** search for inactive prescribers will have to be initiated in order to access the record.

NOTE: Inactive prescriber records cannot be used in prescriptions. The **Doctor Active** flag must be turned on in order to fill prescriptions for that prescriber.

There are various reasons why you may choose to inactivate a prescriber record. For example, a prescriber may be inactivated because they have retired, or has been relocated to a different region. Inactivating these records allows the regular search to provide more succinct results; this reduces the chances of selecting the incorrect prescriber into a prescription.

To access inactive prescriber records in the system, perform an **Advanced** search and make sure the **Inactive** or **All** flag is marked. Search for the prescriber as usual to find the applicable record.



Configuring the Columns in the Prescriber Search Screen

You can configure the columns that are displayed on the **Prescriber Search** screen by clicking **Change Columns** from the right navigation pane.

The **Edit Scan Columns** window will appear. Place a checkmark next to the columns you want displayed and click **OK**.

Creating a New Prescriber Record

1. Perform a thorough search to ensure the prescriber does not already exist in the database. You will be prompted to perform an **Advanced** search for inactive prescribers as well.

2. Once you have determined that the prescriber does not exist in the system, click **Insert** or press the **Insert** key on the keyboard.

3. A blank **F7 - Doctor** screen will appear. Complete the prescriber fields and click **Save**.

Prescriber Record Fields

Last Name
Type in the Last Name of the prescriber (do not add any symbols to this field).

First Name
Type in the First Name of the prescriber (do not add any symbols to this field).

Salutation
From the dropdown menu, select from Dr. Miss. Mr. Mrs. Ms.

Quick Code
Enter an optional code for searching the prescriber. For example, “Dr. Gary Thomson” may have a quick code of “THOMG”. The quick code field can also be used to identify doctors working at the same clinic or hospital. For example, users can enter a quick code “CLINIC” for all doctors working at the nearby clinic; when you searches “.CLINIC” all patients with that quick code will be displayed.

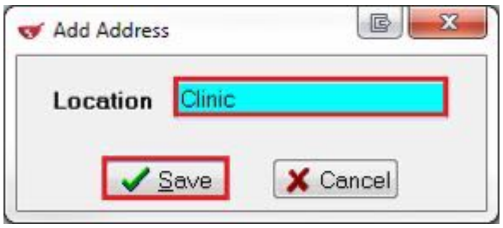
Address
Type in the prescriber’s street address in one or both lines.

City, Province, Postal, Country
Type in the rest of the address information.

Locations
Physicians who practice in more than one physical location can have multiple addresses and contact numbers in their record. Place a checkmark next to **Primary Location** if the location

listed is the prescriber's primary place of practice. When the prescriber is used in a prescription, the location will default to the primary location unless otherwise specified.

Click **Ins** or press the **Insert** key on your keyboard to add a new location. A window will appear prompting you to enter a description for the new location (e.g., Clinic, Hospital, etc.). Enter the new location and click **Save**.



The **Address**, **City**, **Province**, **Postal Code**, **Country**, **Phone**, and **Fax** fields will become available to input details for the secondary location; fill out these fields accordingly.
Click **F2** to edit an existing location and **Del** to delete a location. When a location is deleted, the address and contact information is also removed from the record.

Comments
Prescribers can have an unlimited number of comments and each comment can have an unlimited amount of content.

To add a comment, click **Ins** or press the **Insert** key on your keyboard. The **Comments** window will appear.

Select a **Topic** and enter your comment in the comment field. Place a checkmark next to **Show On Rx** if you want the comment to appear on the Rx, **Print On Hardcopy** if you want the comment to show on hardcopy printouts, and **Alert** if you would like to be alerted of the comment whenever the prescriber record is accessed.

Click **Save** to save the comment.

Click **F2** to edit an existing comment and **Del** to delete a comment.

Show on Rx
Enabling this option will display the comment on the F12-Filling Screen.

Print on Hardcopy
Enabling this option will print the prescriber comment on the hardcopy. Note that only one prescriber comment can be flagged for this option as there is limited space on the hardcopy.

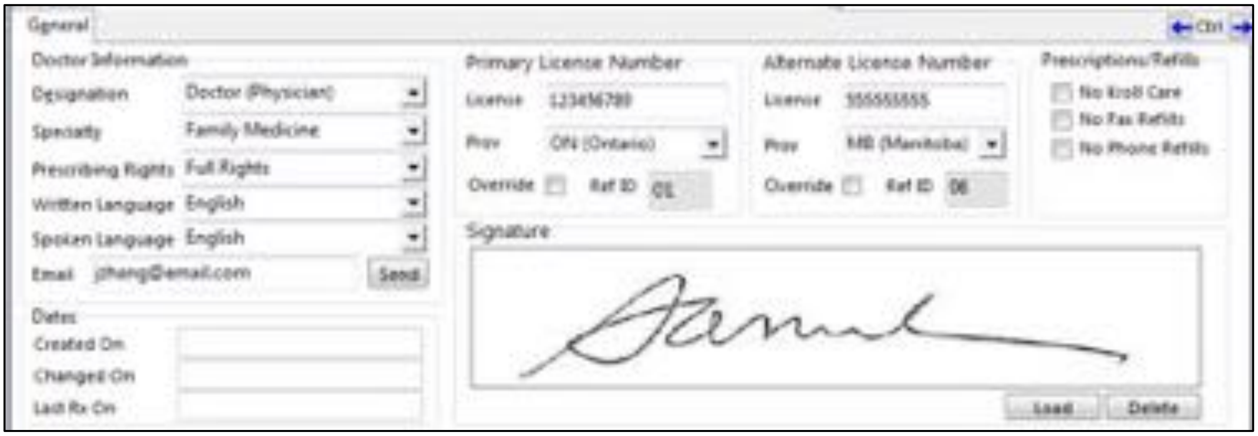
Alert
Enabling this flag will cause the comment to pop up every time the prescriber record is accessed and every time an Rx is filled for the patient.

Prescriber Groups
Prescribers can be included in a group for a wide range of reporting purposes. Prescriber groups are created by head office and can be applied to any number of prescriber records. For example, a prescriber group called “Walk-In Clinic” can be created and attached to prescriber(s) that work at the walk-in clinic; reports on Rx volume can be generated for the group.

To add a group, click **Ins** or press the **Insert** key on your keyboard to call up a selection window displaying the available groups to insert.

Use the **F2** button to modify an existing group and **Del** to delete a group.

General Information Tab



Designation
Select a designation for the prescriber by clicking the down arrow or by pressing the down arrow on the keyboard.

Specialty
Optionally select a specialty for the prescriber by clicking the down arrow or by pressing the down arrow on the keyboard.

Dispensing Rights
Select from the following options:

- **Full Rights**: This selection means the prescriber can dispense Schedule 1, 2, 3, Targeted, Controlled and Narcotic prescriptions.
- **No Narcs**: This selection means the prescriber cannot dispense Narcotic substances. If you attempt to process a narcotic Rx using the prescriber record, the system will display a warning message, “This doctor is not allowed to dispense narcotics”, and prevent the Rx from moving to the next Rx processing stage.
- **No Narcs or Controlled**: This selection means the prescriber cannot dispense Narcotic or Controlled substances. If you attempt to process a narcotic or controlled Rx using the prescriber record, the system will display a warning message, “This doctor is not allowed to dispense narcotics or controlled drugs”, and prevent the Rx from moving to the next Rx processing stage.

Written Language
This field is defaulted to English, but can be overridden to another language. This field is not tied to any functionality and only serves information purposes.

Spoken Language
This field is blank by default, but can be selected to reflect the spoken language of the prescriber. This field is not tied to any functionality and only serves information purposes.

Email
Enter the email address of the prescriber.

Primary License Number
Enter the license number of the prescriber in this field. Select the applicable province from the dropdown menu. Note that the Ref ID (or Reference ID) is automatically set when a “designation” is selected for the prescriber record; however, it can be overridden, by placing a checkmark next to Override.

Alternate License Number
If the prescriber practices in more than one region, they may have an alternate license number which can be entered in this field.

No Kroll Care
Activation of this flag means that Kroll Care will not be generated for prescriptions from this prescriber.

No Fax Refills
Activation of this flag will cause a warning message to appear whenever the “Fax Doctor Report” is generated. The warning will indicate that the prescriber does not accept fax requests for prescription refills; however, you will still have the option to print the “Fax Doctor Report” after acknowledging the warning.

No Phone Refills
Activation of this flag will cause a warning message to appear whenever the option to “Call Doctor” is selected from the Rx Filling Screen, or from the patient profile. The warning will indicate that the prescriber does not accept phone requests for refills.

Signature Load
For terminals hooked up to a Document scanner, users can load the prescriber signature into the system by scanning the written prescription and cropping the signature. Once the signature has been scanned and saved, it will be available during “Check” stages for cross-checking.

To load a prescriber signature, feed the written prescription into the Document scanner and click Load from the prescriber record.

Once the image has been loaded, users can crop the scanned image from the **Doctor Signature** window by clicking and dragging a box around the signature. Click **Save** or press **Enter** to save the signature.

To remove an existing prescriber image, simply click **Delete** from prescriber record.

Dates

- **Created On**: Indicates when the prescriber record was created.
- **Changed On**: Indicates when the prescriber record was last changed.
- **Last Rx On**: Indicates when the last time and Rx was filled using the prescriber record.

Workflow Management

Workflow management in Kroll allows pharmacy users to process prescriptions in a structured and standardized manner. This user guide illustrates how a typical prescription progresses through the Kroll system with the following workflow elements activated:

- Multiple workflow queues including 'Waiting for Pickup'
- No hardcopy generation
- Electronic signature capture
- Thermal printing

The model described in this document describes workflow management at its highest potential, using the latest available technology. Workflow management can be tailored to meet the needs of any pharmacy environment. If you require further information, please contact the Kroll sales team at 416-383-1010 (option 3), or 1-800-263-5876 (option 3), or sent an email to sales@kroll.ca.

Start Screen

A. Workflow queues configured for the system.

- **ToDo/Data Input**: Items in this queue require data to be entered in order to complete the record. Use the scanned image of the written prescription as a reference and enters the appropriate information. Note that refill prescriptions ordered via an IVR system are placed into this queue for processing.

- **Data Verification/Adjudication**: After the prescription data has been entered successfully, the record moves to the Data Verification/Adjudication queue. At this point, a pharmacy team member will confirm that the data inputted in the previous step is correct by comparing the scanned image of the original written prescription to the data that was inputted. Once the correct data has been confirmed, the internal DUE process commences and any potential ADR's are identified. Once managed, adjudication occurs if the prescription is being paid for by the patient's third party plan.

- **Packaging**: Once adjudication has been completed, the record moves to the Packaging queue. When selected, the prescription is displayed on the Packaging screen. It is here that the pharmacy team member will scan the UPC code on the product to confirm that the correct item has been selected from the shelf. If desired, the pharmacy team member can also record the lot number and expiry date for each pack used to complete the packaging step of this prescription.

- **Package Verification**: Once packaging has been completed, the prescription moves to the Package Verification queue. When selected, the prescription is displayed on the Package Verification screen. The pharmacy team member, with vial in hand, will compare what is on the original prescription, to what was key entered into Kroll, to what is on the label and finally to what is in the vial.

- **Clinical Verification**: Once all other steps have been completed, the pharmacist is provided with the opportunity to evaluate the prescription and determine that it is clinically correct for the patient.

- **Incomplete Pickup**: This queue should always have zero prescriptions in it. If a prescription is listed, it means that something occurred during pickup that needs to be resolved.

- **Waiting for Pickup**: Prescriptions stay in this queue until they have been picked up out of Kroll.

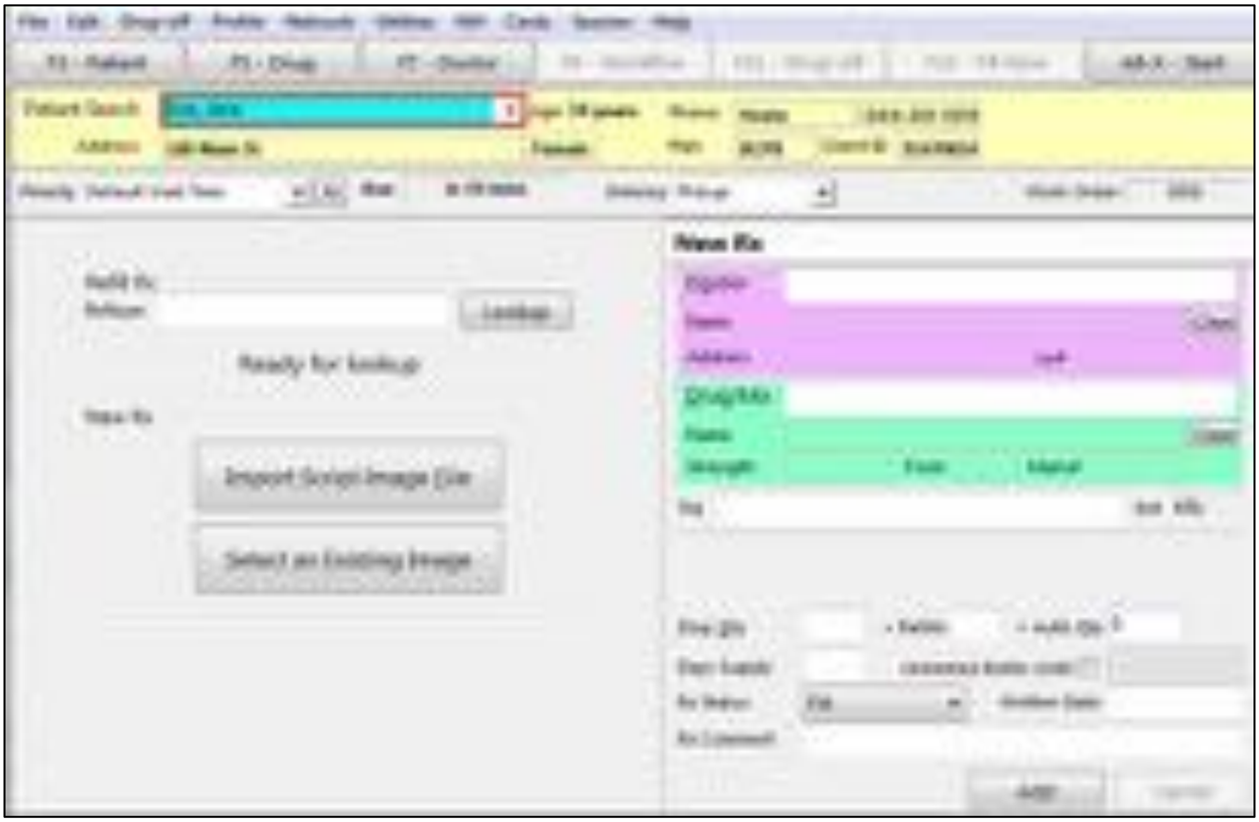
B. **Grid:** The numbers on the grid represent the number of prescriptions currently located within each queue and when they are due to be completed. This provides the pharmacy team with the ability to quickly see where the bulk of the work is. Once seen, then adjustments to the operations can be implemented in order to keep up with the work.

C. **Pickup Grid**: This grid provides the pharmacy team with a picture of how many prescriptions are in their pickup bin/drawer and how long they have been there. The value noted in the Total field should equal the total number of prescriptions found in the pickup bin/drawer. The value noted in the Total $ space represents the total coat (actual acquisition cost) of all prescriptions in the pickup bin/drawer.

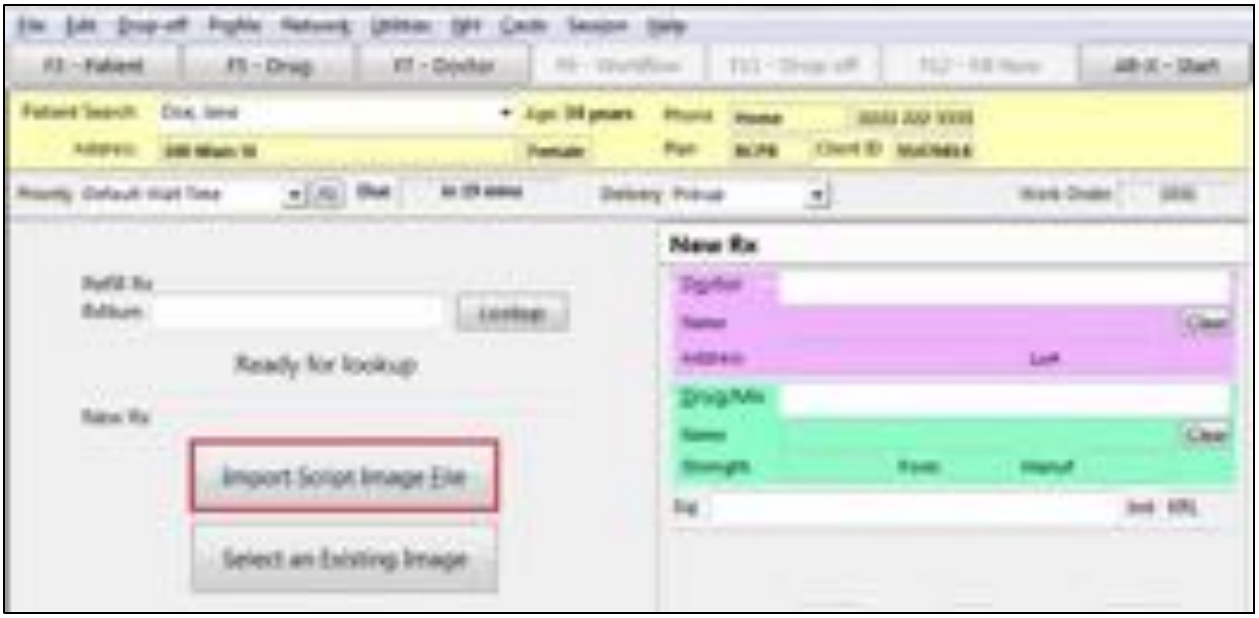
Drop-off

The Drop-off screen allows users to enter Rx information quickly and efficiently. Most of the entry work can be completed while the patient is still in the pharmacy, thus reducing lineups and wait time.

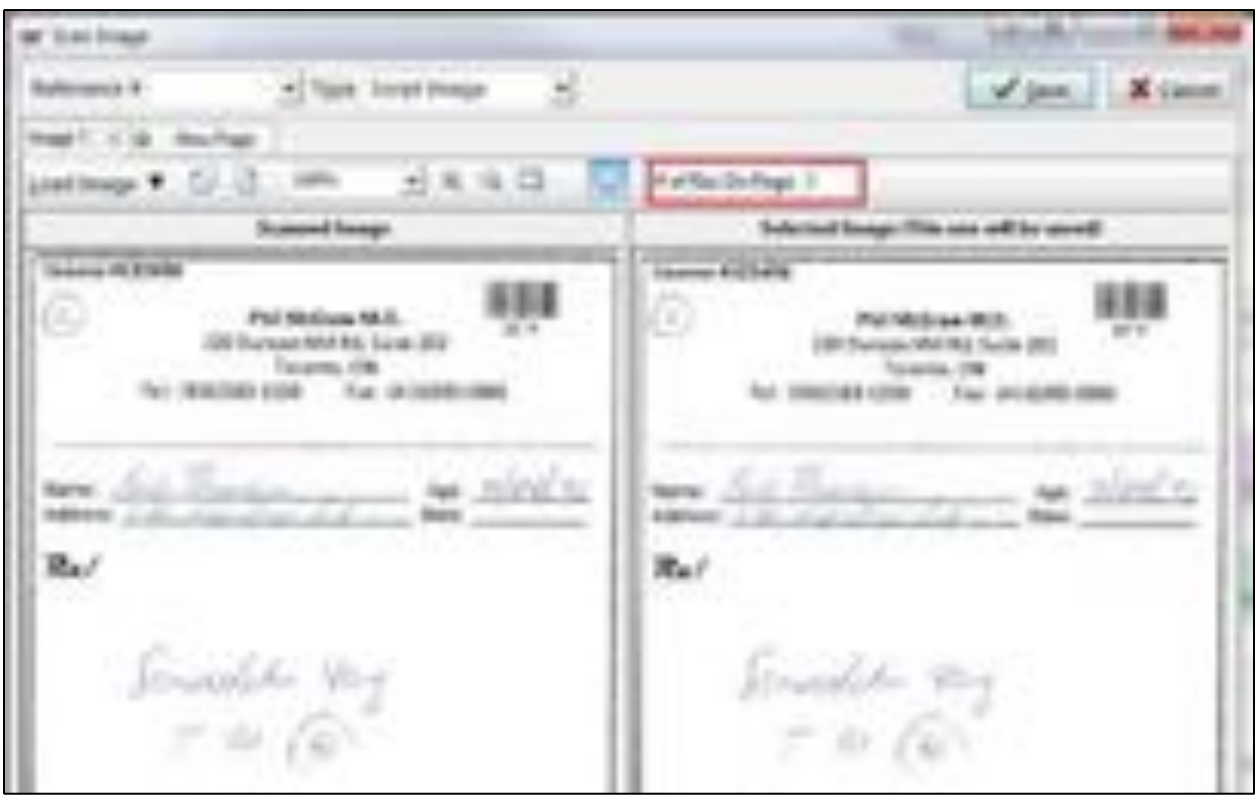
1. Call up the **F11 - Drop-off** screen and perform a patient search. Double-click the patient record and click the **Drop-off** button.



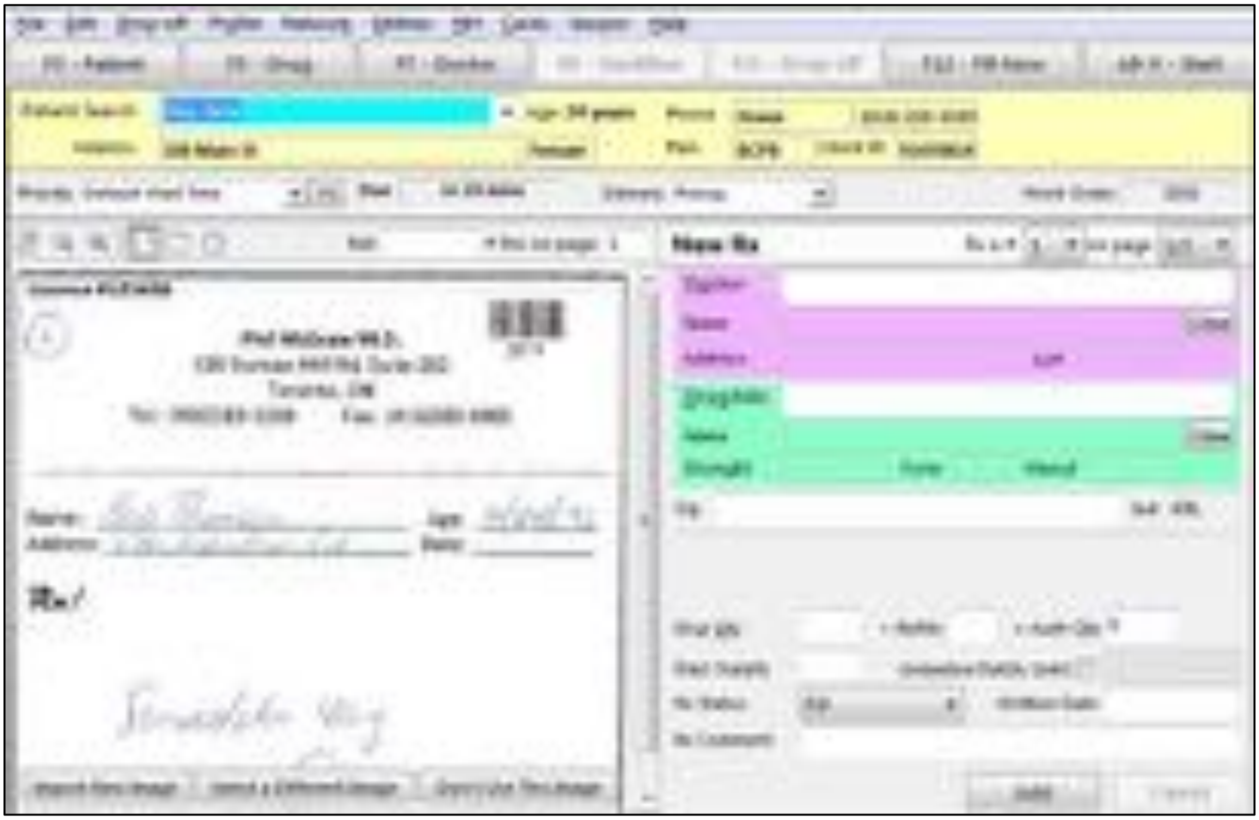
2. Place the written prescription face down in the document scanner and select **Import Script Image File**.



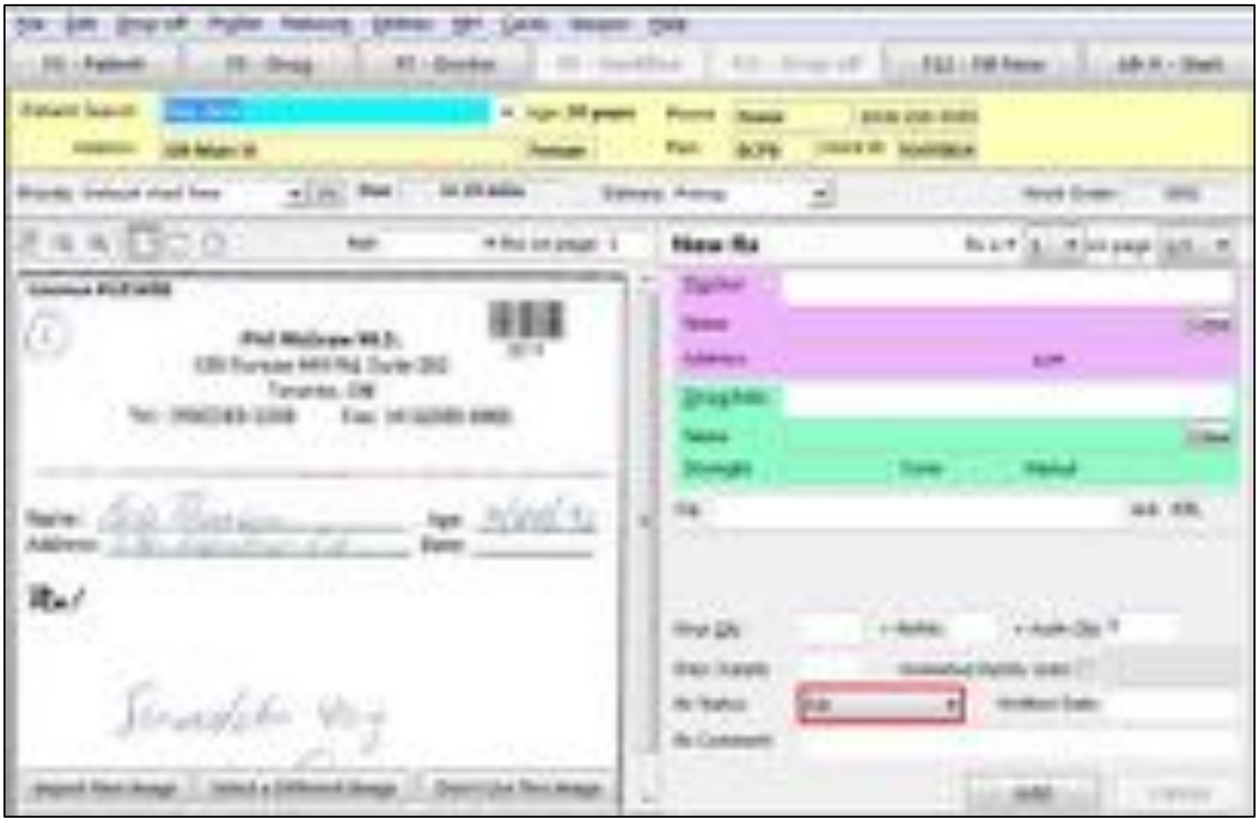
3. The **Scan Image** screen will appear with the scanned image displayed. If there is more than one item on the written prescription, enter the total number of items in the **# of Rxs On Page** field.



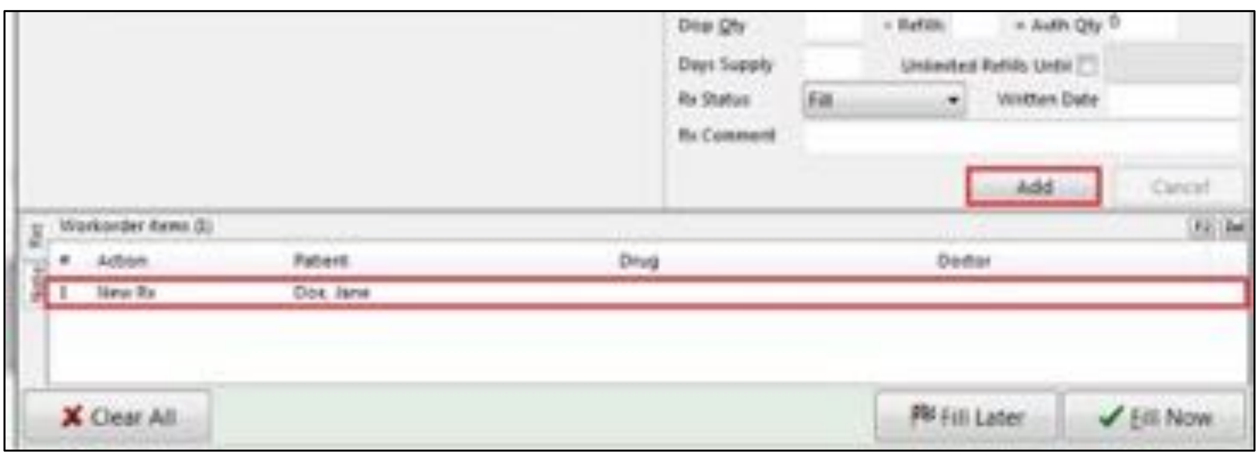
4. Click **Save**. The prescription image will appear in the **Drop-off** screen.



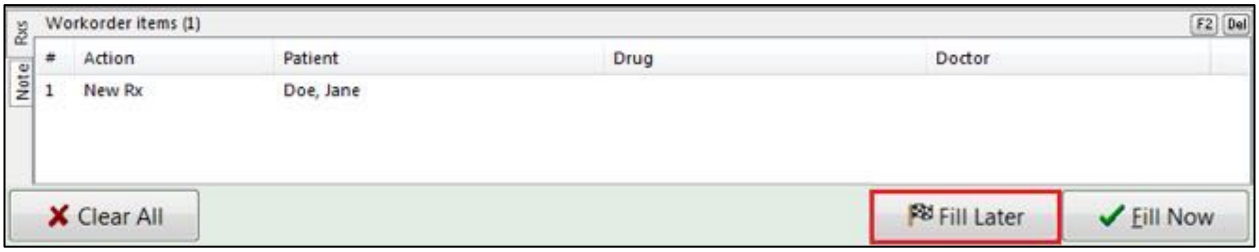
5. Ask the patient when they want to pick up the prescription. Based on their response, select an option from the **Rx Status** field. (Options include Fill, Unfill, Not Disp, and Stock Trans.) Your choice will dictate how the Rx will progress through the system.



6. Click **Add**. The prescription will be placed into the workorder.



7. Click **Fill Later**. The prescription record will progress to the next workflow step and the **Drop-off** screen will refresh. You can begin serving the next patient in line.



NOTE: If the pharmacy is not busy, you can complete the Rx fields on the Drop-off screen before adding the prescription to the workorder.

For more information about **Drop-off**, see the [Drop-off – F11] section on our website.

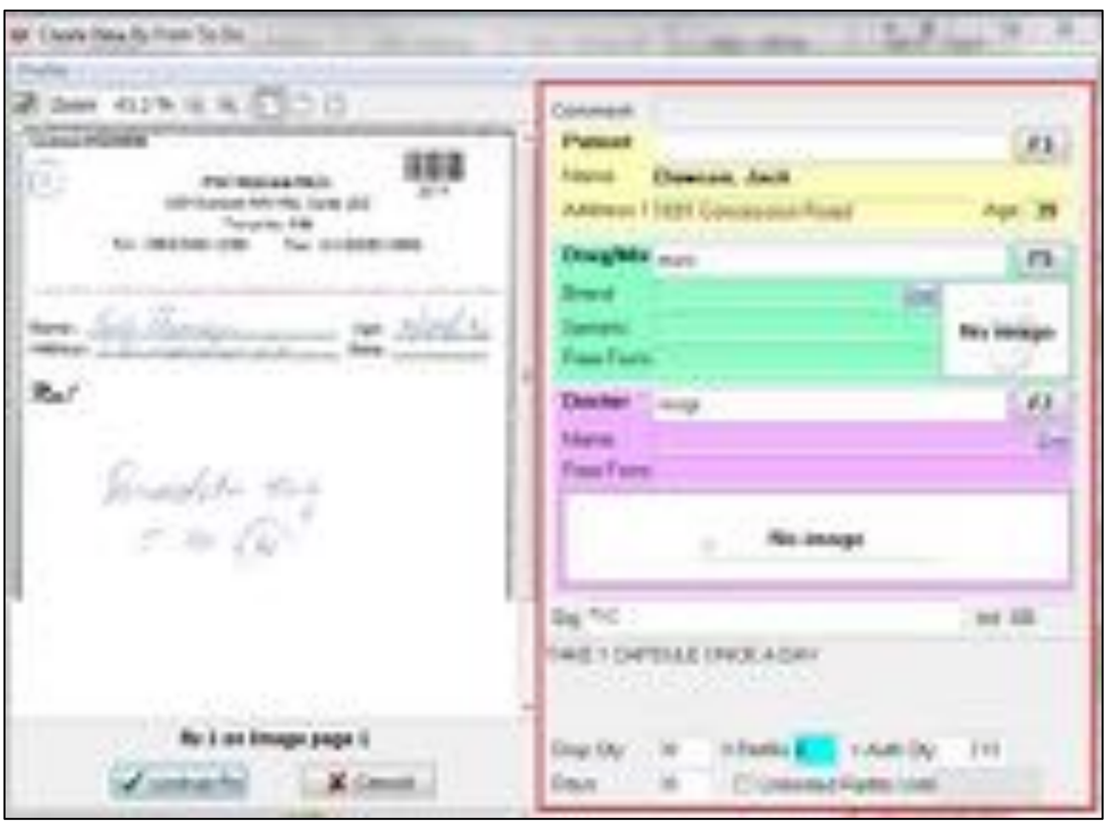
ToDo/Data Input

Once the Drop-off step has been completed, the prescription will move to the ToDo/Data Input queue.

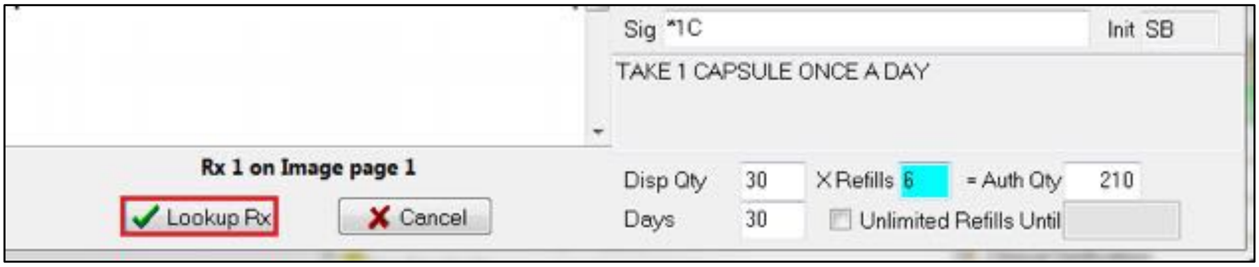
1. Select **F9 - Workflow** from the **Alt-X Start** screen. Click **ToDo/Data Input** to view all prescriptions currently in the ToDo/Data Input queue. The prescriptions will display in order of priority (those with sooner due times are displayed first).

2. Double-click the prescription you want to work on, or click **Get Work** to consecutively work on each prescription in the queue, in order of priority.

3. The **Create New Rx From To Do** screen will display. Complete the Rx fields based on the information available on the script image.

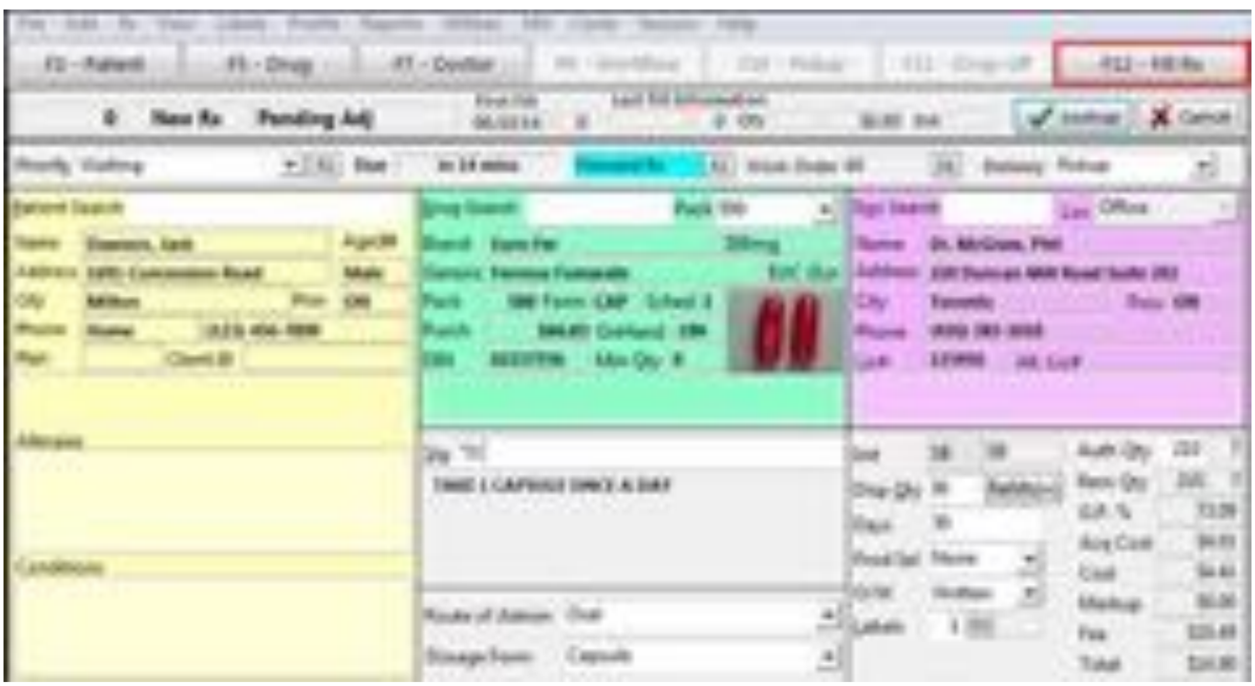


4. Click **Lookup Rx**. The system will perform a drug/mixture search and a doctor search based on the information entered. Select the correct drug/mixture and doctor records.



5. When you are finished entering information in the **Create New Rx From To Do** screen, click **Save**.

6. The **F12 - Fill Rx** screen will appear with all the Rx details entered. Review the information and make any necessary changes. Click **F12 - Fill Rx** to move the prescription to the next workflow step.



Data Verification/Adjudication

Once the ToDo/Data Input step has been completed, the prescription will move to the Data Verification/Adjudication queue.

1. Select **F9 - Workflow** from the **Alt-X Start** screen. Click **Data Verification/Adjudication** to view all prescriptions currently in the Data Verification/Adjudication queue. The prescriptions will display in order of priority (those with sooner due times are displayed first).

2. Double-click the prescription you want to work on, or click **Get Work** to consecutively work on each prescription in the queue, in order of priority.

3. The **Data Verification** screen will display. Using the scanned prescription image on the left, ensure all of the entered information is correct. If you detect an error, do one of the following to have it resolved:

   f) Click **F12 - Return to Rx**. The F12 screen will display where you can make the necessary changes. Click **F12 - Save** to save your changes. The **Data Verification** screen will display again.

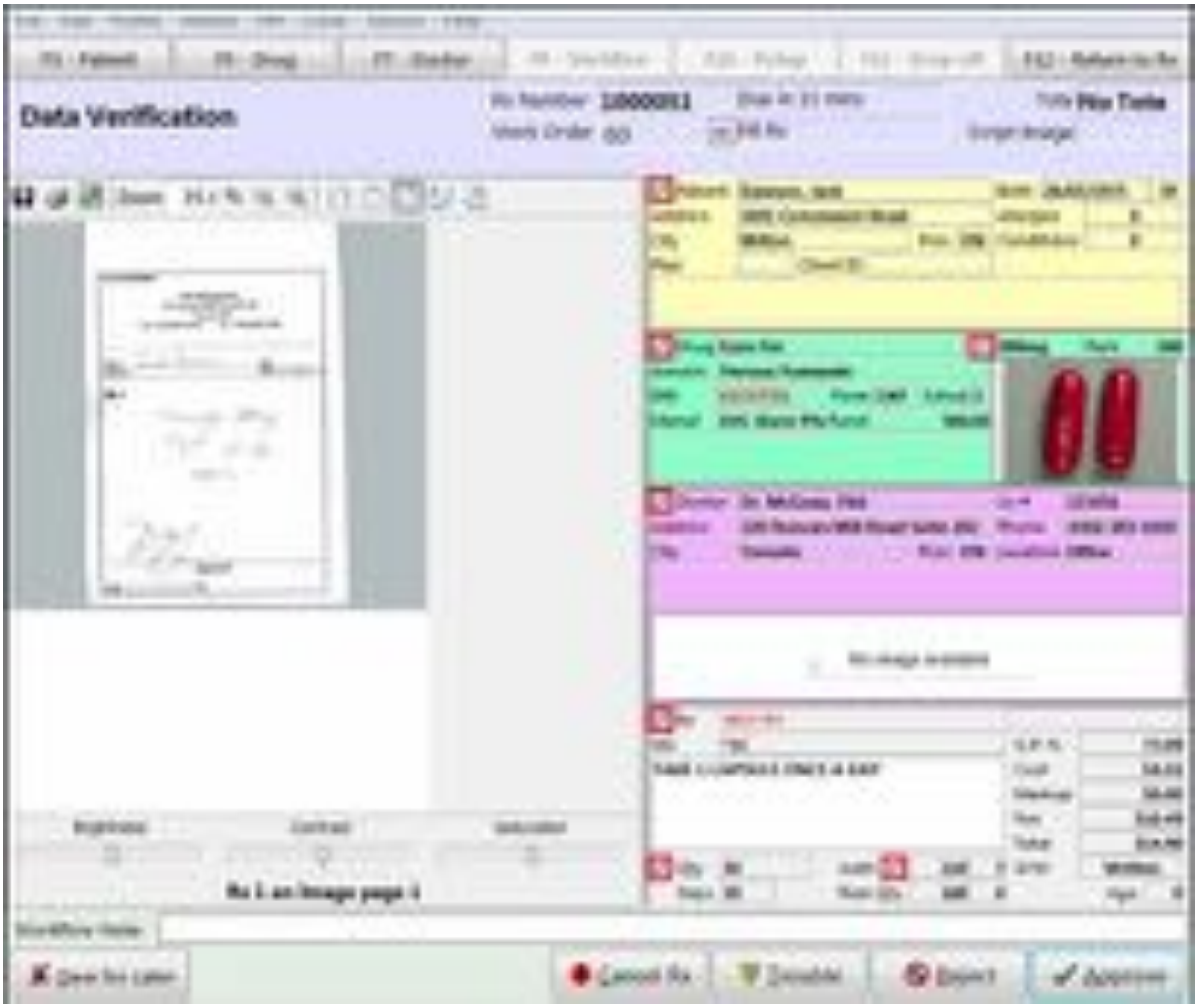
   g) Click **Save for Later**. The Rx will be placed back into the queue where it can be completed later.

   h) Click **Cancel Rx**. The Rx will be cancelled outright.

   i) Click **Trouble**. The Rx will be placed in the Trouble queue. You will be prompted to specify why the prescription is being moved; this allows the prescription to be moved out of the flow without disrupting the prescriptions that follow behind it. Another user can manage the prescription from the Trouble queue, if need be.

j) Click **Reject**. The Rx will be sent back to the previous workflow step. You will be prompted to specify why the prescription is being rejected; this ensures the next user knows why the prescription was rejected and can make the necessary changes before progressing the Rx to the next workflow step.

4. To confirm that you have performed the Data Verification step correctly, click the checkboxes (which are configurable) next to each key piece of information. You must check each box before the **Approve** button will become available. The key pieces of information that must be checked are Patient, SIG, Drug, Qty, Prescriber, Auth Qty, and Drug Strength.



5. Click **Approve**.

NOTE: If you have electronic signatures linked to this step, you will be prompted for your signature after you have clicked **Approve**.

6. The internal DUE process will display any important messages that the pharmacist should view. If configured, the pharmacist will be required to entire their login credentials before the prescription can continue.
7. If the patient has a third party plan in their profile, the claim will be transmitted once the DUE has been completed. Review and adjust the information on the **Adjudication Response** screen as per the current process.

Packaging

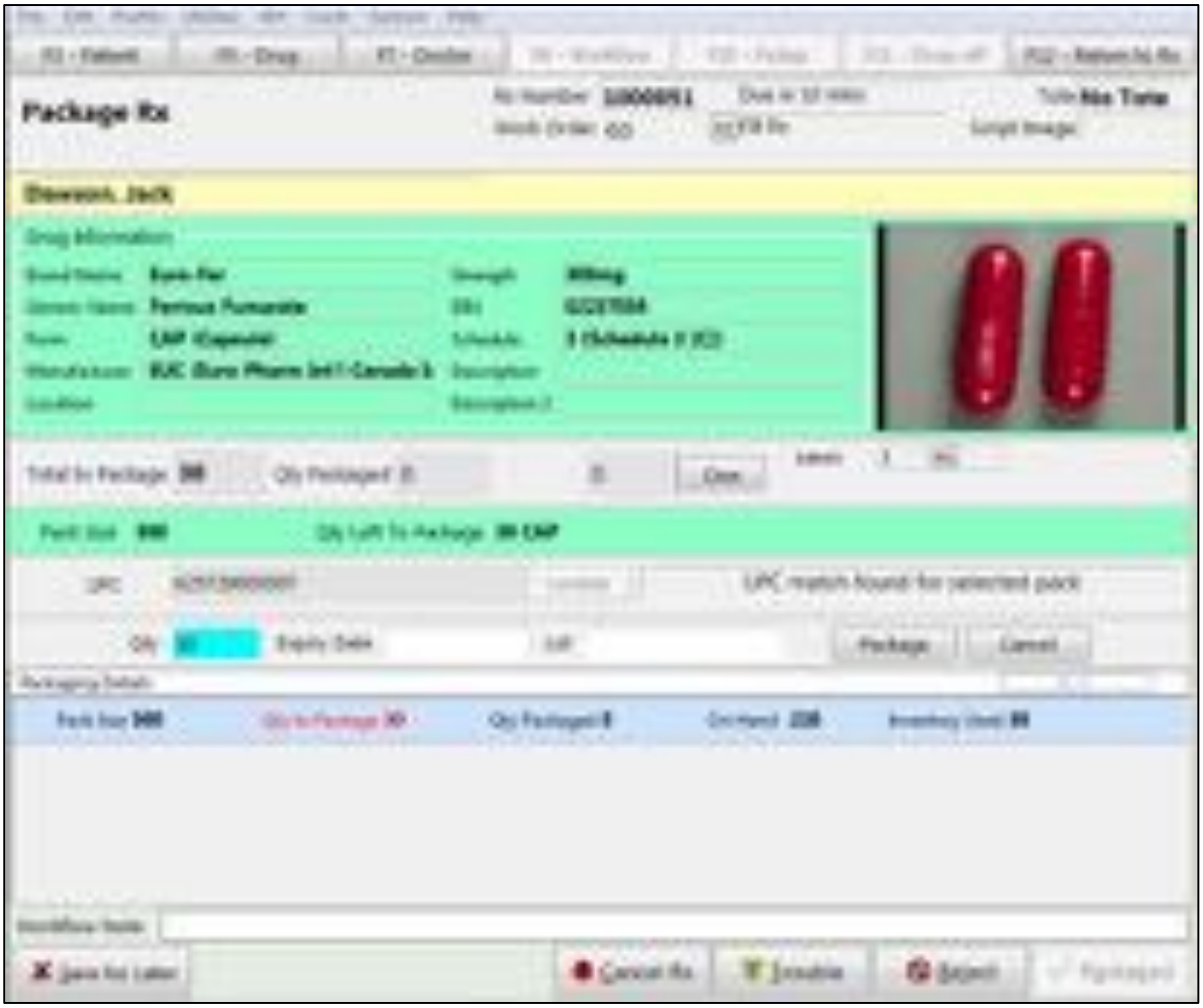
Once the Data Verification/Adjudication step has been completed, the prescription will move to the Packaging queue.

1. Select **F9 - Workflow** from the **Alt-X Start** screen. Click **Packaging** to view all prescriptions currently in the Packaging queue. The prescriptions will display in order of priority (those with sooner due times are displayed first).

NOTE: To maximize efficiency, the Packaging workstation should have a barcode scanner connected to it.

2. Double-click the prescription you want to work on, or click **Get Work** to consecutively work on each prescription in the queue, in order of priority.

3. The **Package Rx** screen will display. Based on the displayed information, retrieve the medication from the shelves.



4. Using the bar code scanner, scan the UPC on the product. If the correct drug and pack size are selected, a '**UPC match found for selected pack**' message will display and you can continue.

   If the wrong pack size is selected, the '**UPC matches a different pack size for this drug**' message highlighted in yellow will display. You must change the prescription to include the correct pack size. You can do this in one of two ways:

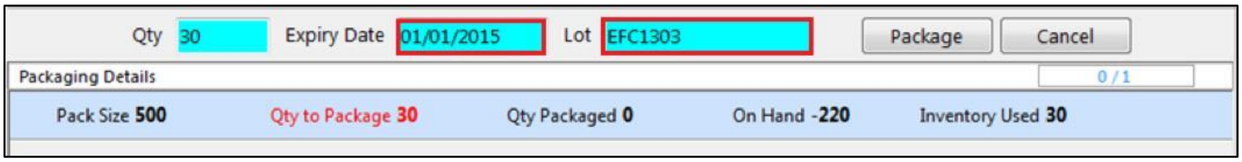
   k) Click **F12 - Return to Rx**. The **F12** screen will display. Make the necessary changes and click **F12 - Save Changes**.

   l) Select **Change Pack Sizes** from the right navigation pane. Follow the prompts to select the correct pack size. If the wrong drug is selected and scanned, a message stating

'**The UPC does not match**' will display in red. You cannot proceed until the correct item has been selected and scanned successfully.

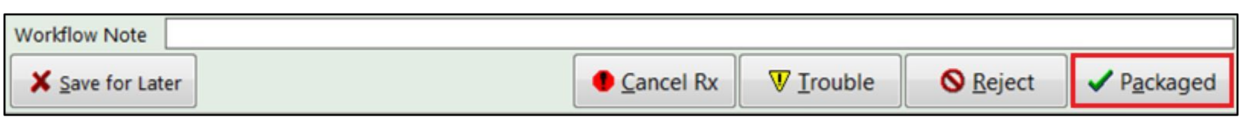
5. Press **Enter**.

6. If desired, scan the bottle or manually enter the **Expiry Date** and **Lot** number for the product.

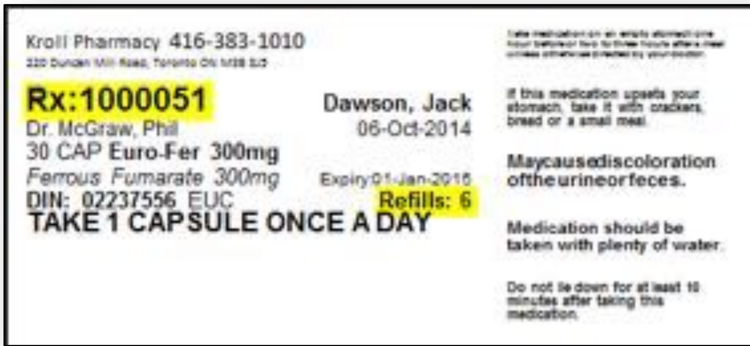


7. When all of the information has been entered successfully, click **Package**.

8. The **Packaged** button will become available. Click to proceed.



A vial label will print from the thermal printer associated with the Packaging workstation.



NOTE: The **Packaging** screen allows you to record if more than one pack of a product was used to complete the prescription, as well as how many tablets/capsules/millilitres were used from each pack. If you discover that you do not have enough product to completely fill the prescription, you can arrange to owe the patient a portion of their prescription by clicking the **Owe** button. You will be prompted to enter the quantity that you are dispensing up front. The system will automatically create a second ‘Owe’ transaction and place it in the Trouble queue with a reason of ‘Insufficient inventory’. Once the inventory is replenished, access the Trouble queue and remove the ‘Owe’ status. The transaction will be place into the Packaging queue where it can be processed like any other prescription.

Package Verification

Once the Packaging step has been completed, the prescription will move to the Package Verification queue.

1. Select **F9 - Workflow** from the **Alt-X Start** screen. Click **Package Verification** to view all prescriptions currently in the Package Verification queue. The prescriptions will display in order of priority (those with sooner due times are displayed first).

2. Double-click the prescription you want to work on, or click **Get Work** to consecutively work on each prescription in the queue, in order of priority.

3. The **Package Verification** screen will display. Confirm that what is in the vial and what is printed on the vial label matches what has been entered on the right side of the screen.

If an error is detected, do one of the following:

a) Click **F12 - Return to Rx**. The F12 screen will display where you can make the necessary changes. Click **F12 - Save** to save your changes. The **Package Verification** screen will display again.

b) Click **Save for Later**. The Rx will be placed back into the queue where it can be completed later.

c) Click **Cancel Rx**. The Rx will be cancelled outright.

d) Click **Trouble**. The Rx will be placed in the Trouble queue. You will be prompted to specify why the prescription is being moved; this allows the prescription to be moved out of the flow without disrupting the prescriptions that follow behind it. Another user can manage the prescription from the Trouble queue, if need be.

e) Click **Reject**. The Rx will be sent back to the previous workflow step. You will be prompted to specify why the prescription is being rejected; this ensures the next user knows why the prescription was rejected and can make the necessary changes before progressing the Rx to the next workflow step.

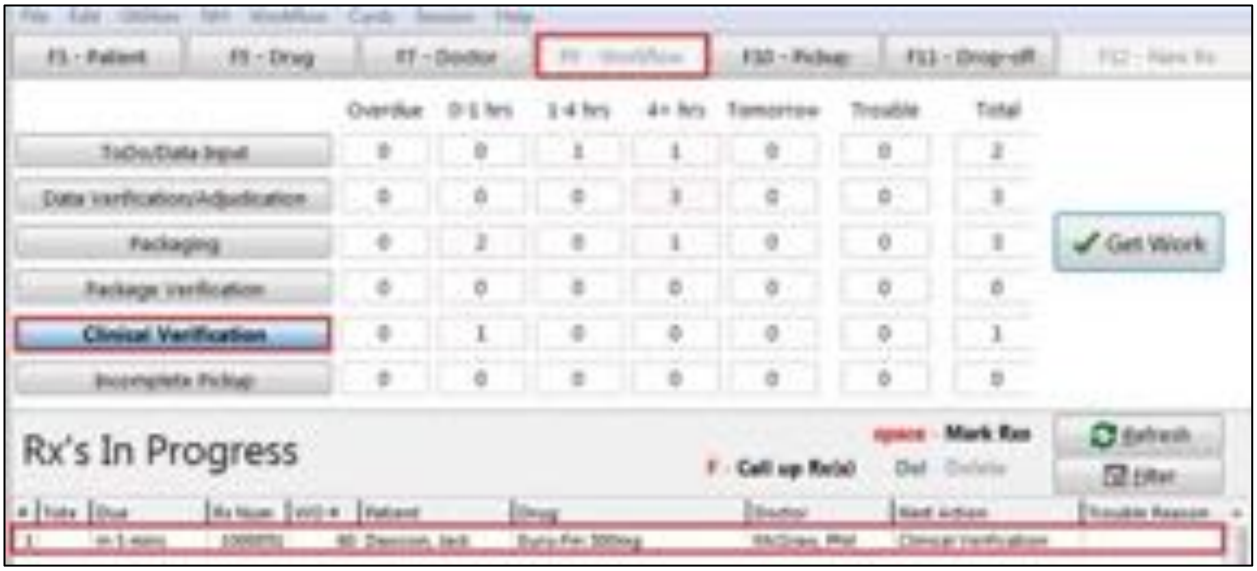
4. Once the prescription has been completely verified, click **Approve**.

5. You will be prompted for a pharmacist's signature. Using the stylus, sign your name. Touch the **Done** button on the signature pad or click **OK** on the screen.

Clinical Verification

Once the Package Verification step has been completed, the prescription will move to the Clinical Verification queue.

1. Select **F9 - Workflow** from the **Alt-X Start** screen. Click **Clinical Verification** to view all prescriptions currently in the Clinical Verification queue. The prescriptions will display in order of priority (those with sooner due times are displayed first).

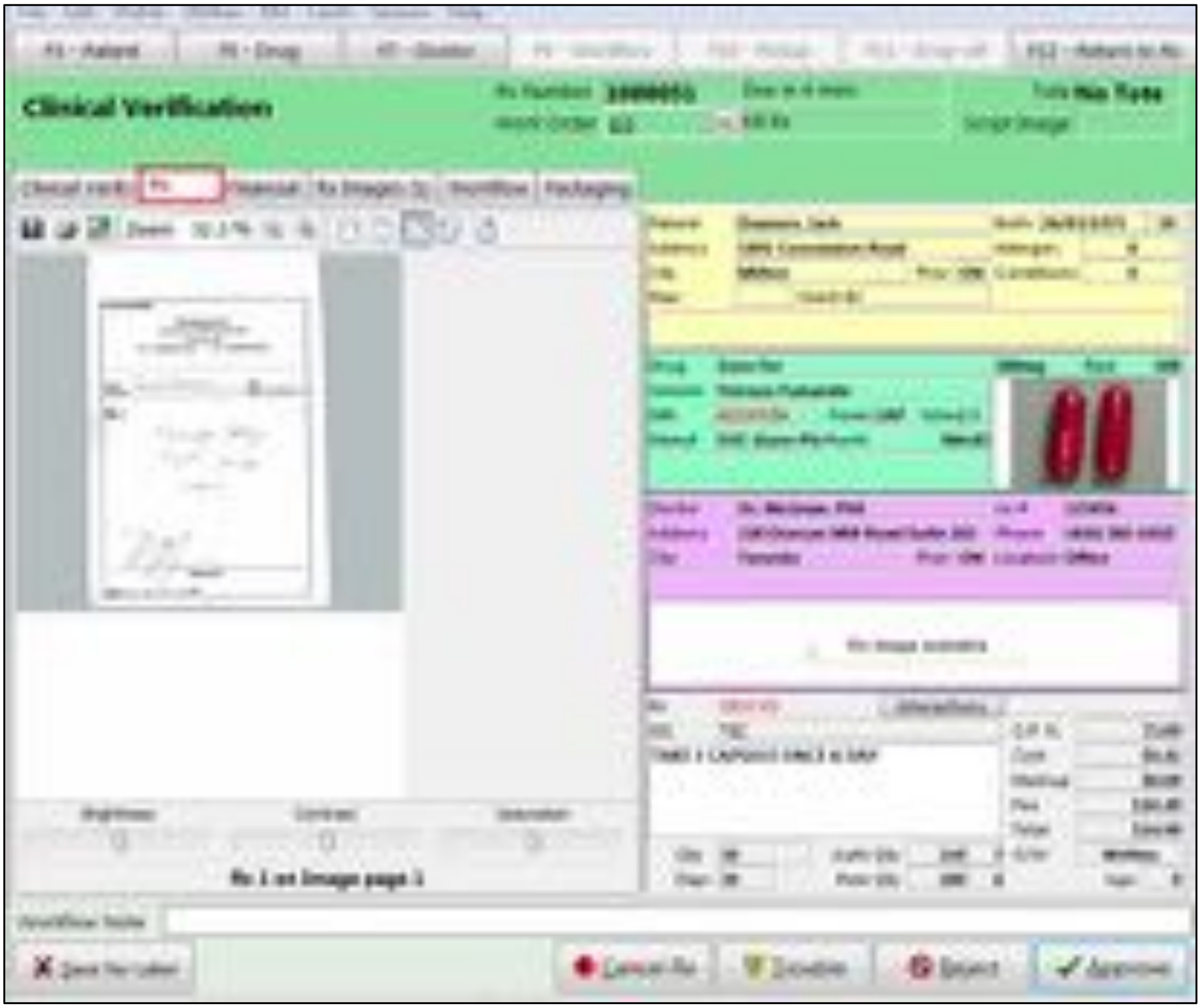


2. Double-click the prescription you want to work on, or click **Get Work** to consecutively work on each prescription in the queue, in order of priority.

3. The **Clinical Verification** screen will display. This screen has several tabs across the top that provide all of the necessary information that you require to properly evaluate the prescription.

    - **Clinical Verify** tab:

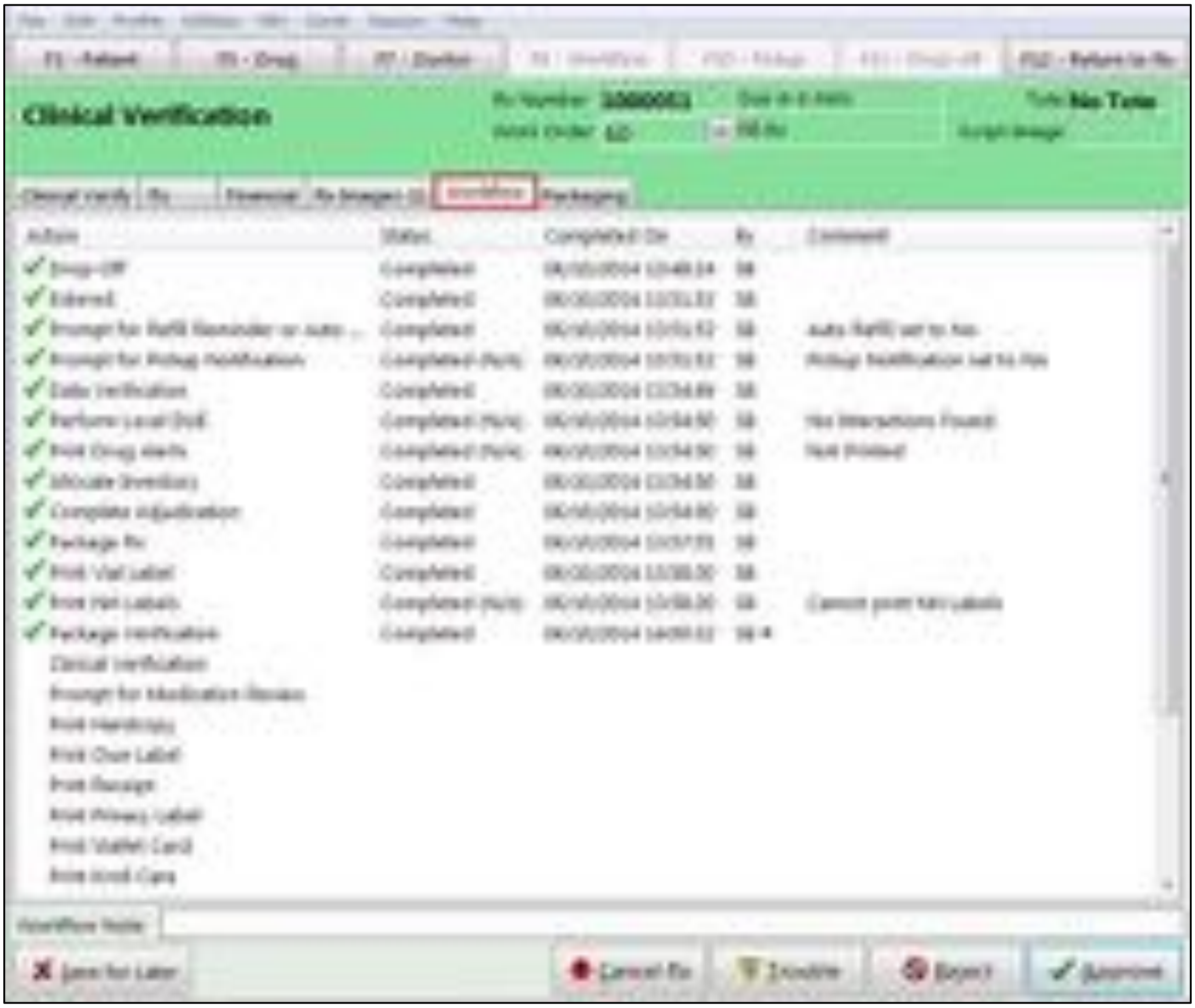
- **Rx** tab:



- **Financial** tab:

- **Rx Images** tab:

- **Workflow** tab:



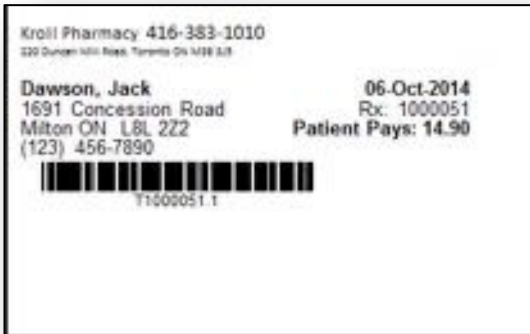
- **Packaging** tab:

4. Once the prescription has been completely verified, click **Approve**.

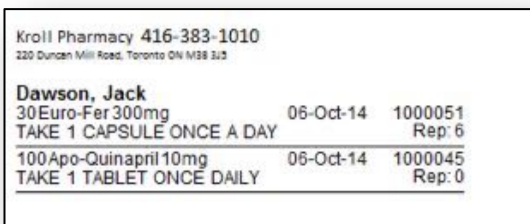
5. You will be prompted for a pharmacist's signature. Using the stylus, sign your name. Touch the **Done** button on the signature pad or click **OK** on the screen.

A prescription receipt will print from the thermal printer associated with the Clinical Verification workstation.

A privacy label will print from the thermal printer associated with the Clinical Verification workstation.



A wallet card will print from the thermal printer associated with the Clinical Verification workstation. Wallet cards can be configured to print one per patient or one per work order.



If configured, a Kroll Care sheet will print from the laser printer.

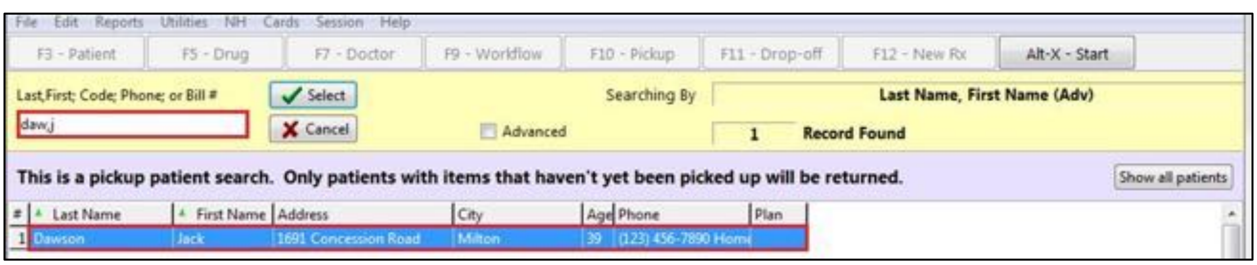

Patient Medical Information

Waiting for Pickup

Once the Clinical Verification step has been completed, the prescription will move to the Rxs Waiting for Pickup queue. The medication should be bagged and placed in a drawer where it will wait to be picked up by the patient.

1. When the patient arrives at the Pickup counter, select **F10 - Pickup** from the **Alt-X Start** screen.

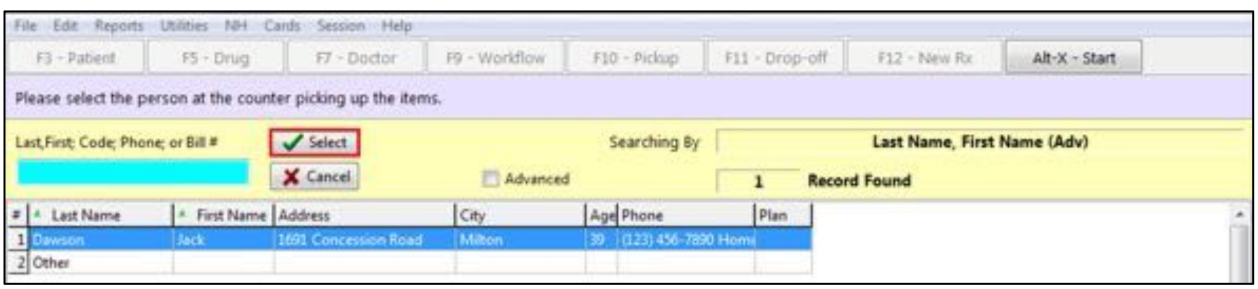
2. Enter the patient's name in the search field and click **Search**. A lost of patients who have prescriptions in progress and who match the search criteria will display.



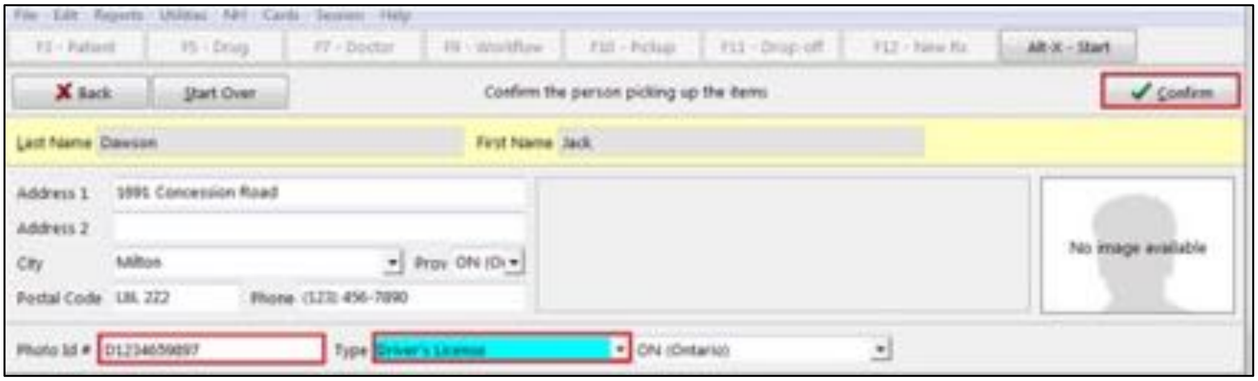
3. Ask a few confirming questions to ensure you have located the correct patient and prescription. Click **Select**. A list of prescriptions associated with the patient will appear, along with its current workflow state.

4. Place a checkmark next to the prescription(s) that is being picked up and click **Pickup [x] Item(s)**.

5. The patient search screen will display. Highlight the patient's name and click **Select**.



6. Depending on your configuration settings, you may be required to enter an identification number for the patient. Enter the patient's identification number in the **Photo ID #** field and select an identification **Type** from the menu. When you are finished, click **Confirm**.



7. Retrieve the patient's medication and scan the barcode on the privacy label using the barcode scanner. You can also manually enter the barcode information. This step ensures that the correct prescription has been taken from the drawer.

8. Click **Confirm [x] Item(s)**.

The screen will refresh so you can begin serving the next patient who is waiting to pick up their medication.

Workstations

Implementing a structured approach to prescription processing allows you to assign a specific function to each workstation in your pharmacy. Below is a diagram that illustrates how you can assign each workflow queue to a separate workstation:

To assign each workflow queue to a separate workstation, call up the **F9 - Workflow** screen and click the workflow queue(s) you want to activate. Work from the activated queue(s) will be displayed and worked on at that workstation.

If you do not have a large number of workstations, you can still designate specific workstations for specific tasks by turning on the queues that you want activated at that workstation. The only limitation is the peripheral equipment. For example, if you want a workstation to be used for Packaging, then that workstation must have a barcode scanner and thermal printer associated with it. If you want a workstation to be used for Clinical Verification, then that workstation must have a digital signature pad and a thermal printer associated with it.

In a multi-workstation scenario, Kroll recommends at least one workstation be set up as an “all-in-one” workstation. This workstation allows a single pharmacist who is working alone to be able to perform all workflow steps from one spot in the dispensary. In order to accomplish this, the following peripheral equipment must be associated with the workstation:

- Thermal printer for vial labels
- Thermal printer for receipts/wallet cards/privacy labels

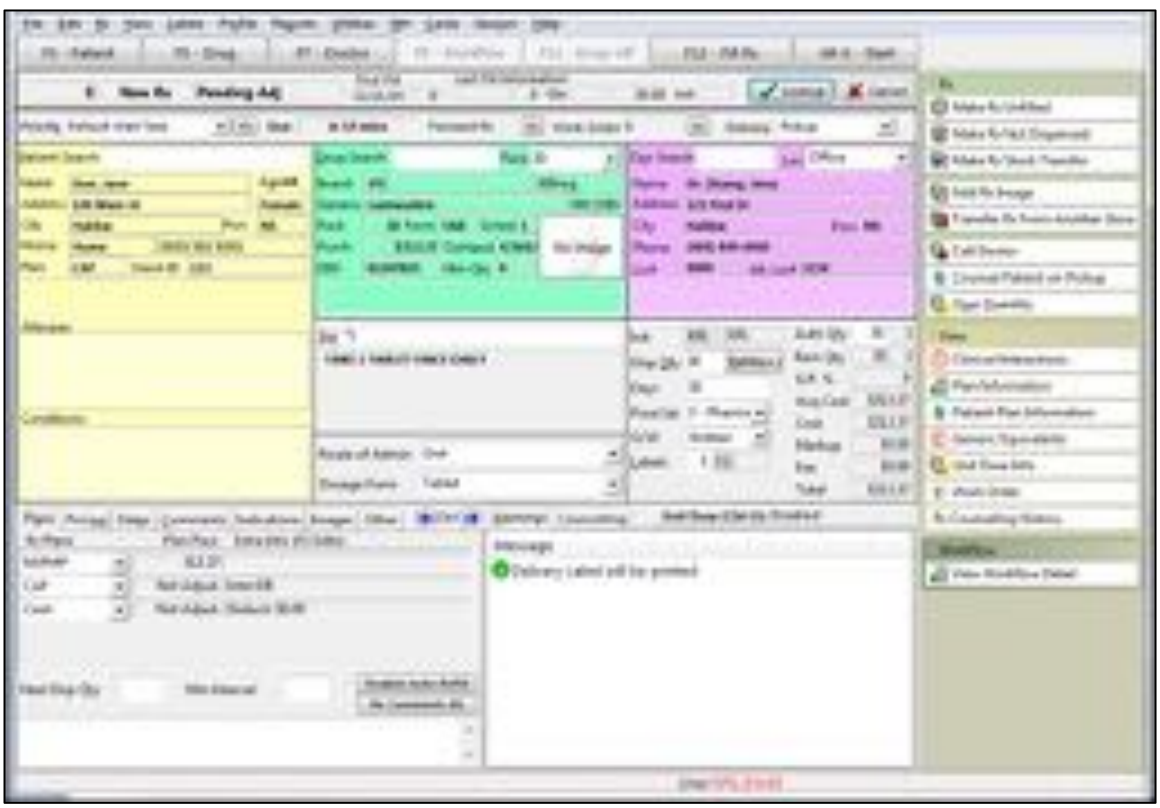
- Barcode scanner
  - For product scanning at Packaging
  - For prescription scanning at Pickup
- Digital Signature Pad

F12 - Fill Rx Screen

The F12 screen contains all the Rx information that is entered during the prescription filling process. This section explains each component of this screen, including the Rx fields, the options in the menus and on the navigation pane, and how to manage warnings and Rx messages.

Main Screen

The F12 screen is the focal point of a prescription. It brings all the main elements of a prescription together on one screen. Included are details on who filled the prescription and any legacy details about the prescription. A ribbon bar provides functionality at your fingertips along with access to a robust arrangement of reports and utilities that can be accessed without exiting the program.



Information Bar

The information bar is located along the top of the F12 screen, directly below the function keys. Below is a description of each field in the information bar.

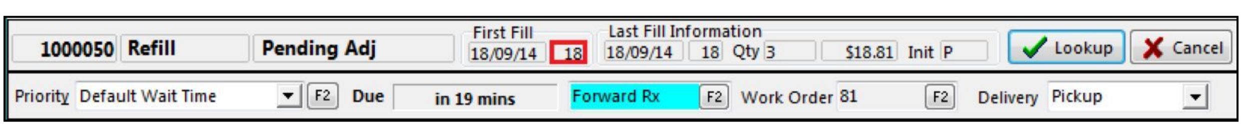
Last Rx Number: This read-only field shows last Rx number filled for the Rx.

Rx Label: This read-only field displays shows what mode the Rx has been called up in (i.e., New Rx, Refill, Modify Rx).

Pending Adjudication: This read-only field indicates that the Rx is pending adjudication if the adjudication step has not been completed. The field is blank once adjudication is complete.

First Fill: This read-only field shows the original fill date for the Rx.

Number of days since First Fill: This read-only field shows the number of days that have passed since the original fill date.



Last Fill Information: This read-only field shows the last fill date for the Rx

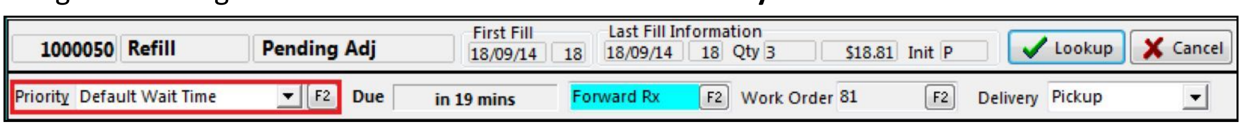
Number of days since Last Fill: This read-only field shows the number of days that have passed since the last time the Rx was filled.

Qty: This read-only field shows the quantity that was dispensed the last time the Rx was filled.

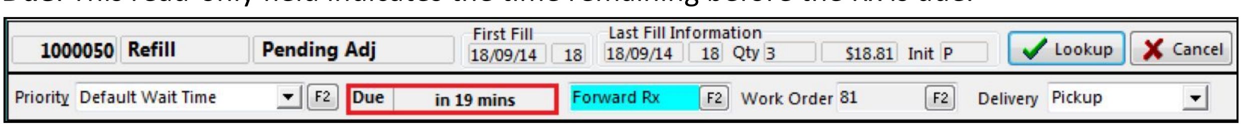
Last total: This read-only field shows the amount that was charged the last time the Rx was filled.

Init: This read-only field shows the initials of the user who last filled the Rx.

Priority: Indicates if the Rx has a due time (pick up time). Select an option from the menu to specify a priority. Priorities can be configured in the **Store-Level Configuration Parameters** screen. Click **F2** to change this field to a **Date and Time** field to enter a specific due time. Click **F2** again to change the **Date and Time** field back to **Priority**.



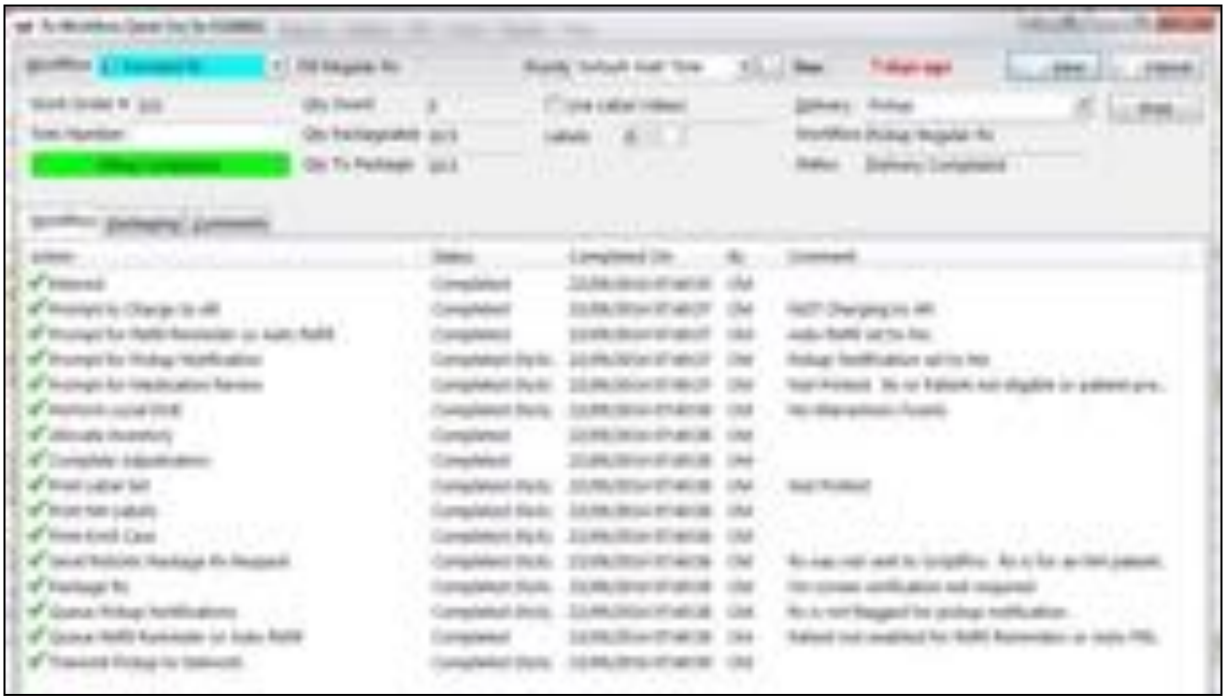
Due: This read-only field indicates the time remaining before the Rx is due.



Workflow Detail: This read-only field indicates the Workflow type (i.e., Forward, Reversal, Inactivation, Owe, etc.)

Click **F2** to access the **Rx Workflow Detail for Rx** screen. This screen consists of three tabs:

- **Workflow tab**: Displays all of the workflow actions that are connected to the prescription, along with the status of each action, the date of completion, the initials of the user who completed the action, and any comments that were entered.

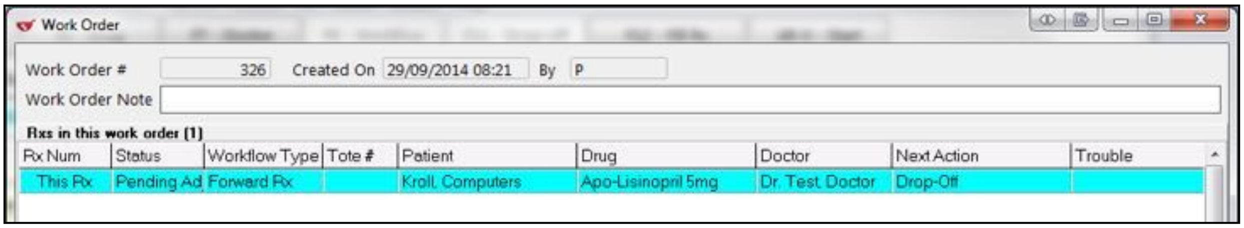


- **Packaging tab**: Identifies the drug that was filled in the prescription. Information such as owed quantities, quantities packaged, tote number, and delivery status are also available on this screen.

- **Comments tab**: Displays comments that pertain to the workflow action or steps. Click **Ins** to insert a new comment.

Work Order: Rxs with the same work order number are presented together as one work order when completing the pickup process.

Click **F2** to view the work order screen. The work order screen will display all Rxs that belong to the same work order.



Delivery: This menu allows you to select a delivery route. Options include Pickup, Store Delivery, and Mail Order Courier.

Lookup: This key is used to refresh the F12 screen after information has been entered or changed. For example, if the plan has changed on the prescription, you can press **Enter** or click **Lookup** to refresh your changes.

Cancel: Returns you to the last screen viewed before you accessed the F12 filling screen.

Unit Dose

The Unit Dose section is used to identify Rxs that should be taken at a certain time. Kroll supports multiple unit dose packaging types including DisPill, PillPak, Dosettes, and a number of generic compliance reports.

1. To enable unit dose on an Rx, go to **View** > **Unit Dose Info** or select **Unit Dose Info** from the right navigation pane.

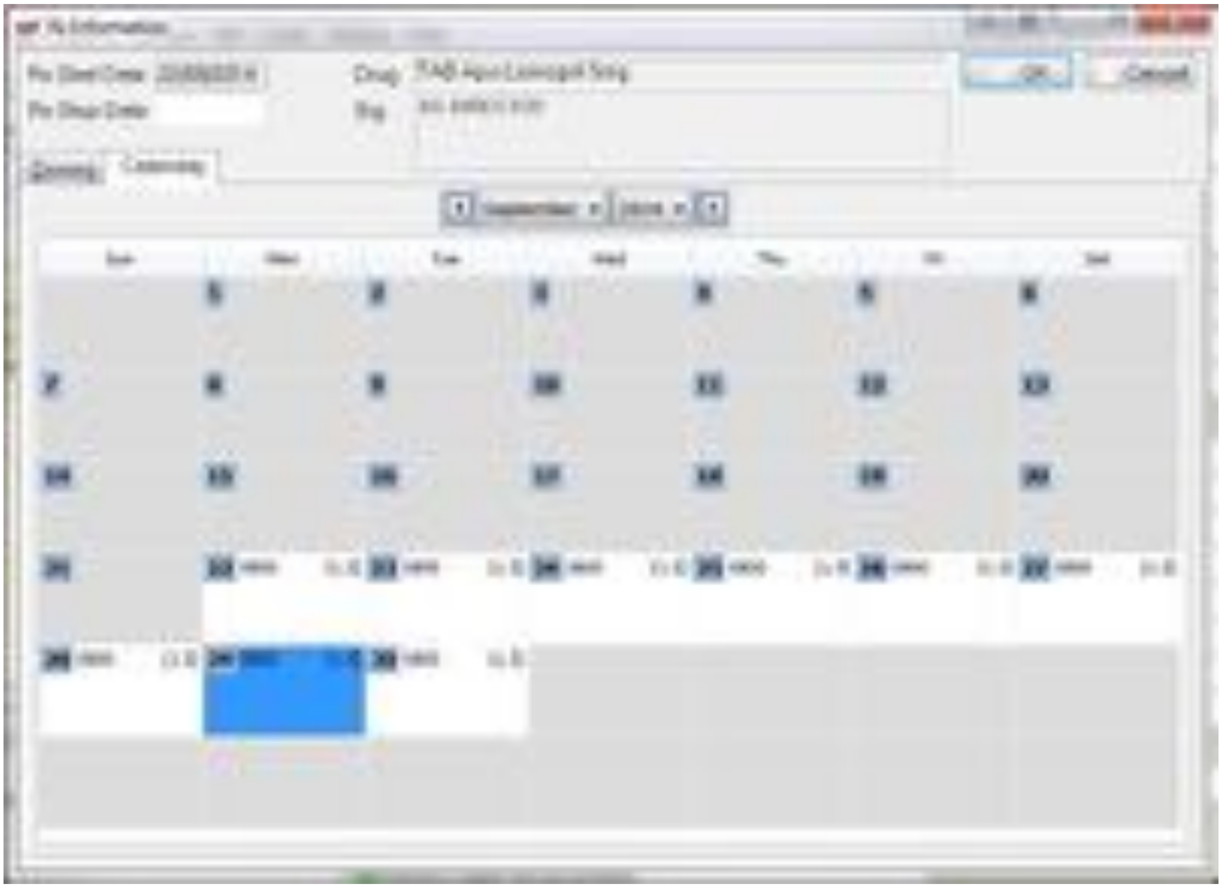
1. The **Rx Information** screen will appear.

    - **Rx Start Date:** The start date will be populated with the start date from the F12 **Dates** tab. The start date can be modified from this section but in turn when changed will also change the **Start Date** in the **Dates** tab. This start date will be the first date the medication will be populated on the Unit dose packaging reports.
    - **Rx Stop Date:** The stop date will be populated with the stop date from the F12 **Dates** Tab (if populated). The stop date can be modified from this section but in turn when changed will also change the **Stop Date** in the **Dates** tab. This stop date will be the last date the medication will be populated on the Unit dose packaging reports (date inclusive).
    - **Drug**: Displays the selected drug.
    - **Sig**: Displays the Sig that has been entered for the Rx.

Dosing tab:

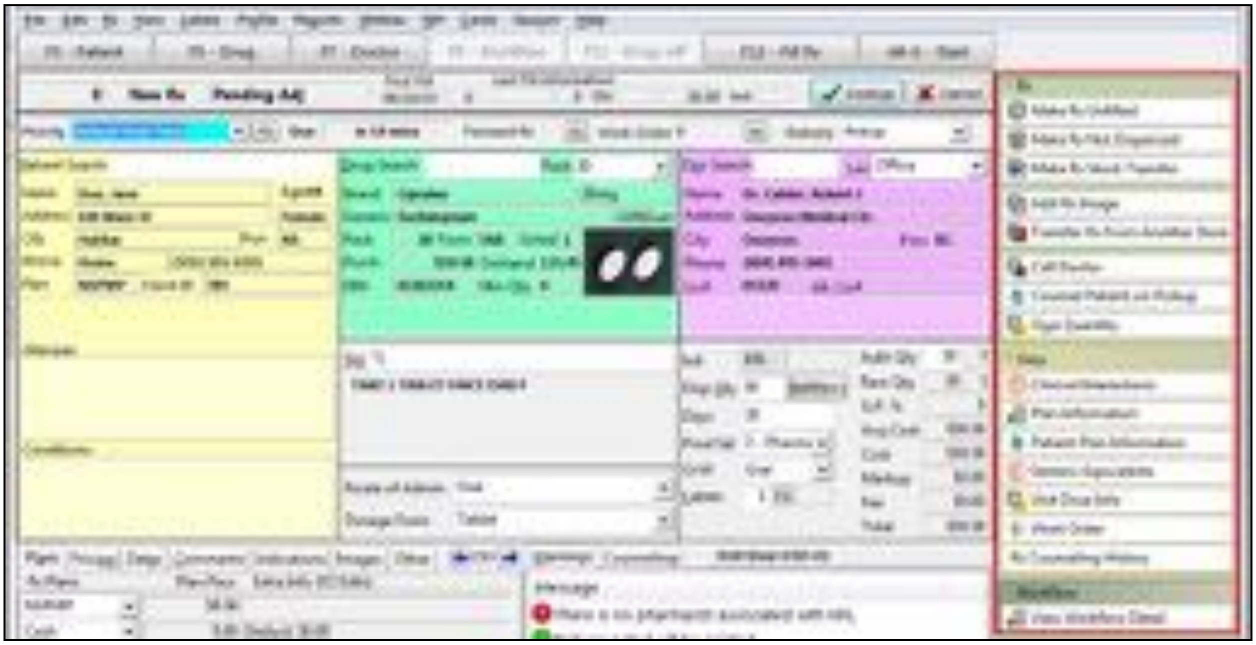
- **Unit Dose**: Select to enable unit dosing for the Rx; doing so will make the other fields on the tab available.
- **Frequency**: Select a dosing frequency from the menu.
- **Card Number**: Enter a card number so Rxs can be grouped according to unit dose packaging type. The default for all Rxs is 1.
- **Quantity**: The available quantity fields depend on the selected frequency. Enter a dosage quantity for **Breakfast**, **Lunch**, **Dinner**, and **Bedtime**.

Calendar tab: This is a monthly display of unit dose times and quantity of dose based on the selected frequency and quantity.



Navigation Pane

The navigation pane is located on the right side of the F12 filling screen and contains a variety of functions that pertain to the Rx.



Make Rx Unfilled*:* Use this option to mark the Rx as Unfilled (on hold). This option is available for new Rxs only and can also be accessed via the **Rx** menu.

Make Rx Not Dispensed: Use this option to mark the Rx as Not Dispensed. This is used to mark over-the-counter items so they can be logged on the patient profile without passing through the different filling stages and generating labels and receipts. This option is available for new Rxs only and can also be accessed via the **Rx** menu.

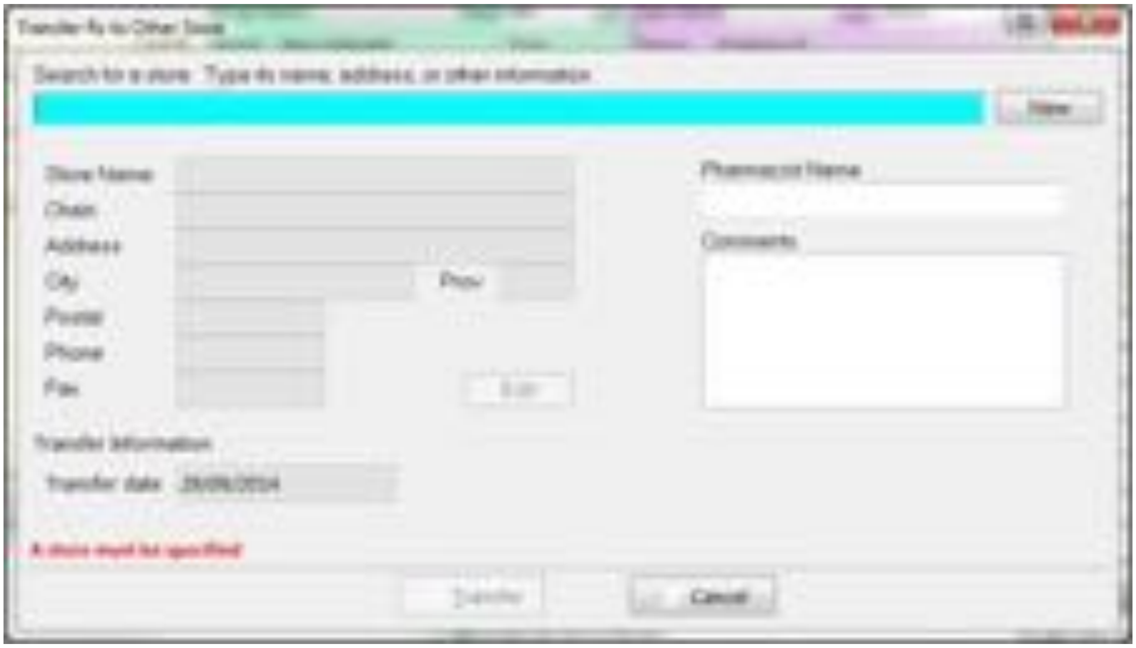
Make Rx Stock Transfer: Use this option to mark the Rx as a stock transfer to another pharmacy. This option is available for new Rxs only and can also be accessed via the **Rx** menu.

Copy to New Rx: Use this option to inactivate the current Rx chain and begin a new Rx using the same information. This option is available for refill Rxs only and can also be accessed via the **Rx** menu.

Add Rx Image: Selecting this option displays the **Rx Image** screen where you can import a script image or select an existing image to add to the Rx. This option can also be accessed via the **Rx** menu.

Transfer Rx from Other Store: If the prescription is being transferred from another pharmacy, select this option to input information regarding the pharmacy that is transferring the prescription. This option is available for new modify Rxs only and can also be accessed via the **Rx** menu.

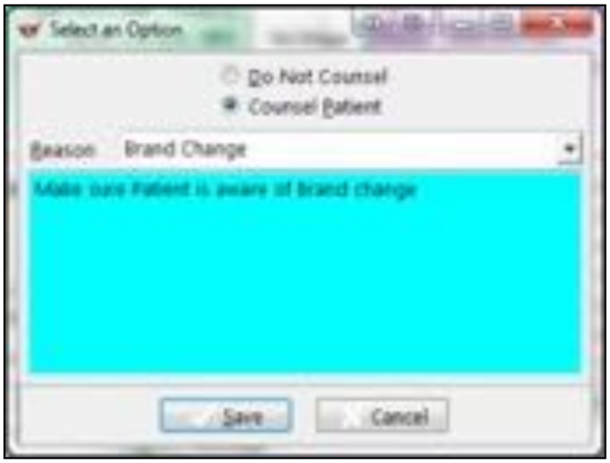
Transfer Rx to Another Store: If the prescription is being transferred to another pharmacy, select this option to input information regarding the pharmacy that receiving the transferring the prescription. This option is available for modify Rxs only and can also be accessed via the **Rx** menu.



Charge to AR: This option will only be available if the Accounts Receivable module is turned on and the patient in the Rx has an AR account. Selecting this option will add charge the remaining cash amount to the patient's AR account. This option is available for all Rx types and can also be accessed via the **Rx** menu.

Call Doctor: Select this option to create a callback record to remind pharmacy users to contact the prescriber regarding the Rx (for Sig confirmation, refill requests, etc.) Once selected, a 'Call Doctor is Enabled' message will appear in the Warnings section on the F12 screen. This option is available for all Rx types and can also be accessed via the **Rx** menu.

Counsel Patient on Pickup: Select this option to arrange for patient counseling at pickup. A form will appear where you can select a reason for conducting the counseling session. This option is available for all Rx types and can also be accessed via the **Rx** menu.



Inactivate Rx: Select this option to discontinue an Rx. These options are only available for refill and modify Rxs and can also be accessed via the Rx menu.

Owe Quantity: Select this option to display the **Edit Rx Owe** screen where you can select a drug quantity to owe the patient for a return pickup. An owing amount will print on the label. This option is available for all Rx types and can also be accessed via the **Rx** menu.

Cancel Rx: Select this option to reverse an Rx. This option is available for modify Rxs only.

Clinical Interactions: Select this option to perform a clinical review of the prescription against the rest of the patient medication history derived from the FDB database. This option is available for all Rx types.

Mixture Breakdown: Select this option to display the **Mixture Breakdown** screen. It is recommended that you view this screen prior to adjudicating the Rx. This screen provides exact dollar amounts for elements that making up the mixture pricing. This option can also be accessed via the **View** menu.

Plan Information: Select this option to display the **Rx Plan Information** screen where you can enter plan-specific information. If more than one plan applies to the Rx, tabs will appear across the top of the screen, one for each drug plan. This option is available for all Rx types and can also be accessed via the **View** menu.

- **Intervention Code 1**: Click **F2** to search and select the applicable code. If you want to remove an intervention code, click **F2** again and select **None**.
- **Intervention Code 2**: Click **F2** to search and select a second applicable code. If you want to remove an intervention code, click **F2** again and select **None**.
- **Special Authorization #:** A special authority grants full benefit status to a medication that would otherwise be a partial benefit or a limited coverage drug. Enter the special authorization number in this field for billing.
- **Special Services Code**: Select a special services code from the menu. This field is often used to bill service fees to Indian Affairs.
- **Reason Code**: Click **F2** to view available reason codes for the drug in the prescription, if applicable. This option is available in Ontario only.
- **Claim Type**: Do not change this field as it should be configured according to the parameters of the prescription.
- **Real Time Plan**: Do not change this flag as it is configured according to the third party plans present in the prescription. Incorrect deactivation of this flag could mean having to manually bill for a prescription that could have been billed electronically in real time.
- **Pseudo DIN**: Displays the pseudo DIN being sent to the third party for the prescription. You can also override the field to send a onetime pseudo DIN with the prescription.

Refill Information: Select this option to display the refill history for the Rx. This option is available for refill and modify Rxs only and can also be accessed via the **View** menu.

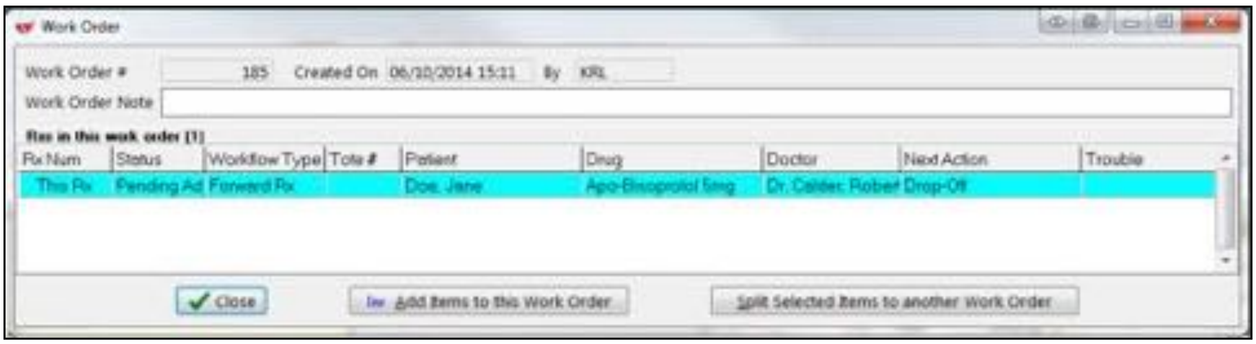
Patient Plan Information: Select this option to display the **Patient Plan Information** screen, which displays the patient's third party plan information. If more than one plan applies to the Rx, tabs will appear across the top of the screen, one for each drug plan. Adjust the third party plan information and re-adjudicate the Rx, if necessary. This option is available for all Rx types and can also be accessed via the **View** menu.

Generic Equivalents: Select this option to view the generic equivalents for the selected drug. At the Input stage, you can highlight a generic equivalent and click **Select** to select an alternate drug record for the Rx. This option is available for all Rx types and can also be accessed via the **View** menu.

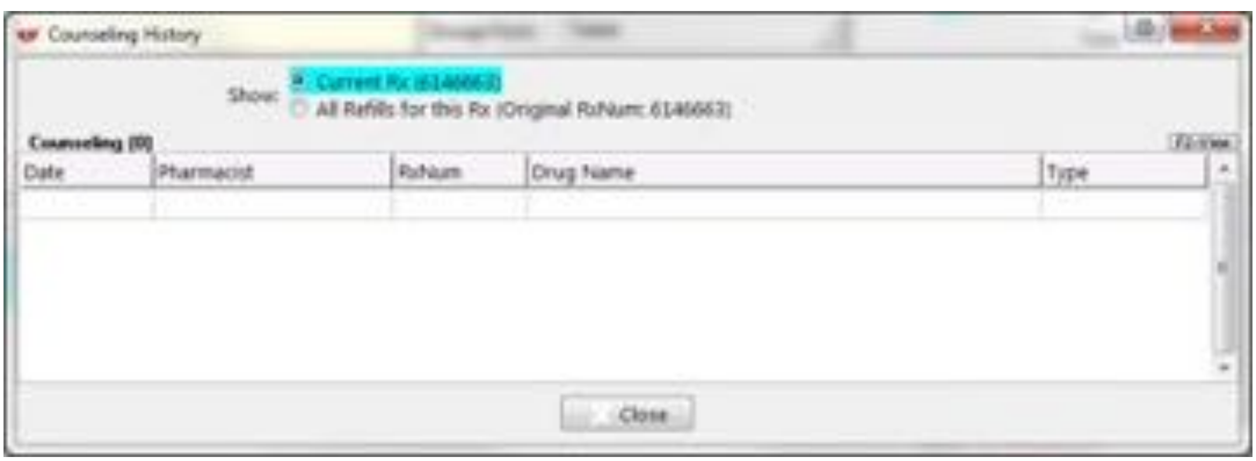
Rx as it was Filled: Select this option to display to display the F12 screen for the first fill of the Rx. This option is available for modify Rxs only and can also be accessed via the **View** menu.

Unit dose Info: Select this option to view the **Unit Dose Rx Information** screen for the Rx. This option is available for all Rx types and can also be accessed via the **View** menu.
See the Unit Dose section on our website for more information.

Work Order: This field displays the work order number (Rxs filled with the same work order number are intended to be picked up together utilizing the pickup application). Click **F2** to display the work order screen, which displays all Rxs belonging to the same work order. This option is available for all Rx types and can also be accessed via the **View** menu.



Rx Counseling History: Select this option to display the **Counseling History** screen, which shows records of all past counseling sessions associated with the Rx. This option is available for all Rx types.



Workflow Detail: See the Workflow Detail section for information about this option.

Menu Bar

Rx

Make Rx Unfilled: Use this option to mark the Rx as Unfilled (on hold). This option is available for new Rxs only and can also be accessed via the navigation pane.

Make Rx Not Dispensed: Use this option to mark the Rx as Not Dispensed. This is used to mark over-the-counter items so they can be logged on the patient profile without passing through the different filling stages and generating labels and receipts. This option is available for new Rxs only and can also be accessed via the navigation pane.

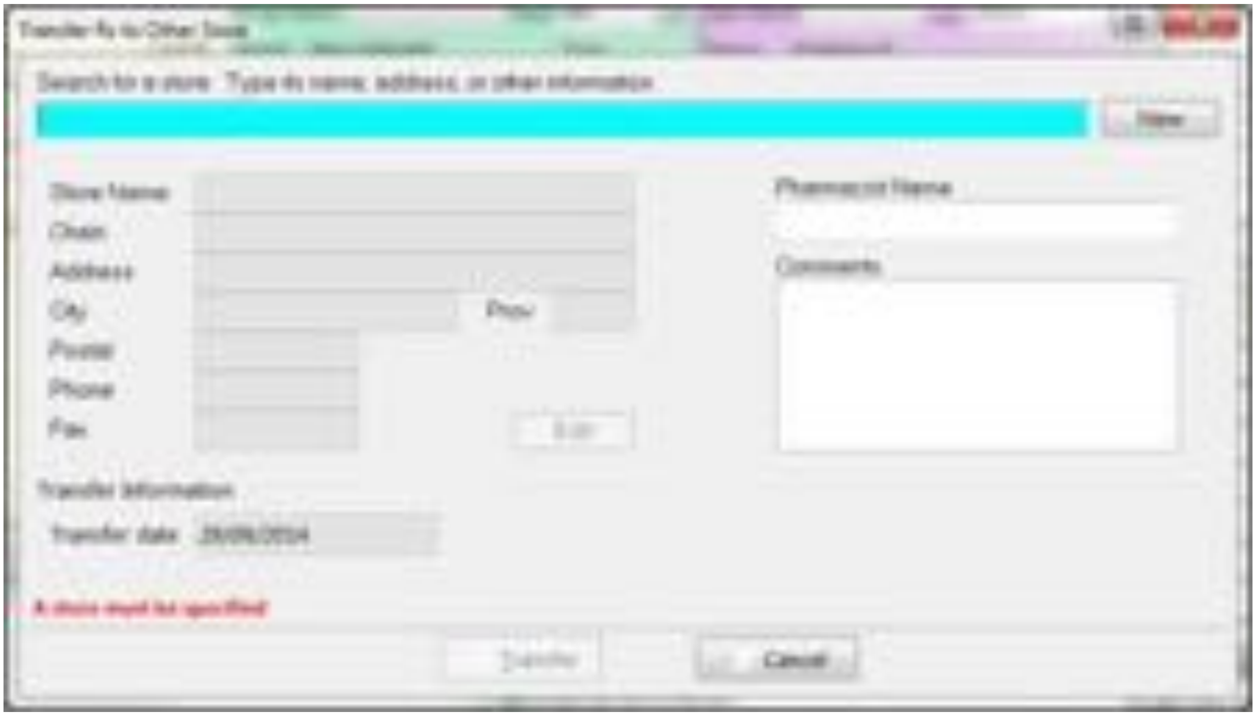
Make Rx Stock Transfer: Use this option to mark the Rx as a stock transfer to another pharmacy. This option is available for new Rxs only and can also be accessed via the navigation pane.

Copy to New Rx: Use this option to inactivate the current Rx chain and begin a new Rx using the same information. This option is available for refill Rxs only and can also be accessed via the navigation pane.

Inactivate Rx: Select this option to discontinue an Rx. This option is available for refill and modify Rxs only and can also be accessed via the navigation pane.

Transfer Rx from Other Store: If the prescription is being transferred from another pharmacy, select this option to input information regarding the pharmacy that is transferring the prescription. This option is available for new modify Rxs only and can also be accessed via the navigation pane.

Transfer Rx to Another Store: If the prescription is being transferred to another pharmacy, select this option to input information regarding the pharmacy that receiving the transferring the prescription. This option is available for modify Rxs only and can also be accessed via the navigation pane.



Back Date Rx: Select this option to change the fill date of an Rx before it is processed. This option is only available for new and refill Rxs.

Add Rx Image: Selecting this option displays the **Rx Image** screen where you can import a script image or select an existing image to add to the Rx. This option can also be accessed via the navigation pane.

Modify Next Fill Parameters: Select this option to display the **Modify Next Fill Parameters** form. The next time the Rx is called up in fill mode, the changes entered in this form will be applied. This option is available for modify Rxs only.

Call Doctor: Select this option to create a callback record to remind pharmacy users to contact the prescriber regarding the Rx (for Sig confirmation, refill requests, etc.) Once selected, a 'Call Doctor is Enabled' message will appear in the Warnings section on the F12 screen. This option is available for all Rx types and can also be accessed via the navigation pane.

Counsel Patient on Pickup: Select this option to arrange for patient counseling at pickup. A form will appear where you can select a reason for conducting the counseling session. This option is available for all Rx types and can also be accessed via the navigation pane.

Charge to AR: This option will only be available if the Accounts Receivable module is turned on and the patient in the Rx has an AR account. Selecting this option will add charge the remaining cash amount to the patient's AR account. This option is available for all Rx types and can also be accessed via the navigation pane.

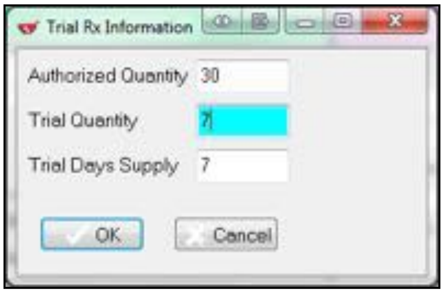
Change Rx Pack Size Qty: Select this option to display the **Change Rx Pack Sizes** form where you can change or divide the Rx quantity among pack sizes. This option is available for all Rx types, but only if more than one active pack size is available.

Owe Quantity: Select this option to display the **Edit Rx Owe** form where you can select a drug quantity to owe the patient for a return pickup. An owing label will be printed on the label when this owe amount is populated. This option is available for all Rx types and can also be accessed via the navigation pane.

Order Drug: Select this option to display the **Place Order** form where you can select a vendor and the quantity to order. This will place the selected drug in a manual order. This option is available for all Rx types.

Part Fill: Select this option when the entire authorized quantity has not been dispensed. A part fill label will be generated. This option is available for new Rxs only.

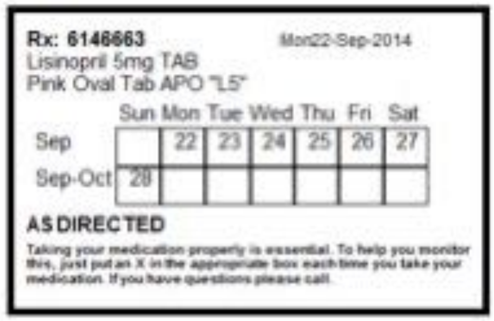
Trial Rx: Select this option to bring up the **Trial Rx Information** screen where you can specify the trail amount that will be dispensed for the first fill. This option is available for new Rxs only.



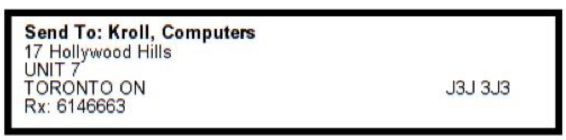
Print Authorization Label Now: Select this option to print an Authorization Label for the pharmacist to call the doctor and record information regarding the Rx on a hardcopy label for easy attachment to the original hardcopy/approve phone refill. This option is available for modify and refill Rxs only.

Print Kroll Care Now: Select this option to print the drug information monograph. The content of Kroll Care is provided by the First Data Bank (FDB) clinical drug module. This option is available for all Rx types.

Print Compliance Calendar: Select this option to print a compliance calendar on the label set. A custom printer beginning with the start date will print with as many consecutive days as is populated in the days supply field. On the label, the pharmacist can circle the days the patient needs to take the dose or write in the quantity of pills to take on each date. This is typically used for complicated Rxs or tapering doses. This option is available for all Rx types.



Print delivery label (Send To): Select this option to print a delivery label if your system is not configured to do so for every label. This option is available for all Rx types.



Print Wallet Card (Profile): Select this option to print a wallet card or patient profile if one is not configured to print on every label set. This option is available for all Rx types.

Interventions/SA Numbers: Select this option to display the **Rx Plan Information** screen where you can enter plan-specific information. If more than one plan applies to the Rx, tabs will appear across the top of the screen, one for each drug plan. This option is available for all Rx types and can also be accessed via the **View** menu.

- **Intervention Code 1**: Click **F2** to search and select the applicable code. If you want to remove an intervention code, click **F2** again and select **None**.
- **Intervention Code 2**: Click **F2** to search and select a second applicable code. If you want to remove an intervention code, click **F2** again and select **None**.
- **Special Authorization #:** A special authority grants full benefit status to a medication that would otherwise be a partial benefit or a limited coverage drug. Enter the special authorization number in this field for billing.
- **Special Services Code**: Select a special services code from the menu. This field is often used to bill service fees to Indian Affairs.
- **Reason Code**: Click **F2** to view available reason codes for the drug in the prescription, if applicable. This option is available in Ontario only.
- **Claim Type**: Do not change this field as it should be configured according to the parameters of the prescription.
- **Real Time Plan**: Do not change this flag as it is configured according to the third party plans present in the prescription. Incorrect deactivation of this flag could mean having to manually bill for a prescription that could have been billed electronically in real time.
- **Pseudo DIN**: Displays the pseudo DIN being sent to the third party for the prescription. You can also override the field to send a onetime pseudo DIN with the prescription.

Make this doctor that family doctor for this patient: Select this option to make the selected doctor the family doctor for the patient. This option is available for all Rx types.

Elston (Ontario Only): Select this option to enable Elston Pricing for the Rx. This will charge the full purchase cost with no markup and is available for all Rx types.

Allow more than 2 ODB fees per month (Ontario Only): Select this option to send a fee for all Rxs after the second fill for fee exception drugs. This option is available for all Rx types.

View

Suspensions: Select this option to display the **Suspensions for Rx** screen where you can view past suspensions that apply to the Rx or insert a new suspension. This option is available for modify and refill Rxs only.

Mixture Breakdown: Select this option to display the **Mixture Breakdown** screen. It is recommended that you view this screen prior to adjudicating the Rx. This screen provides exact dollar amounts for elements that making up the mixture pricing. This option can also be accessed via the navigation pane.

Work Order: This field displays the work order number (Rxs filled with the same workorder number are intended to be picked up together utilizing the pickup application). Click **F2** to display the work order screen, which displays all Rxs belonging to the same work order. This option is available for all Rx types and can also be accessed via navigation pane.

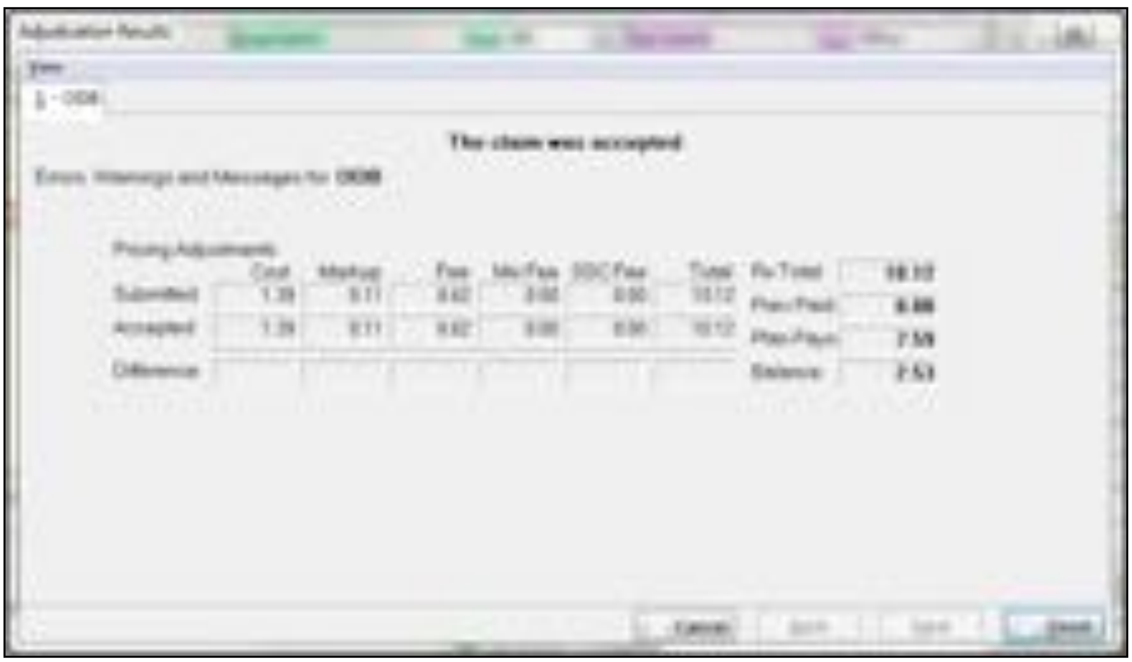
Workflow Detail: This read-only field indicates the Workflow type (i.e., Forward, Reversal, Inactivation, Owe, etc.)

Drug Interactions: This option is the same as the **Clinical Interactions** option on the navigation pane. Select this option to perform a clinical review of the prescription against the rest of the patient medication history derived from the FDB database. This option is available for all Rx types. This is available for all Rx types.

Generic Equivalents: Select this option to view the generic equivalents for the selected drug. At the Input stage, you can highlight a generic equivalent and click **Select** to select an alternate drug record for the Rx. This option is available for all Rx types and can also be accessed via the navigation pane.

Unit Dose Info: Select this option to view the **Unit Dose Rx Information** screen for the Rx. This option is available for all Rx types and can also be accessed via the navigation pane. See the Unit Dose section for more information.

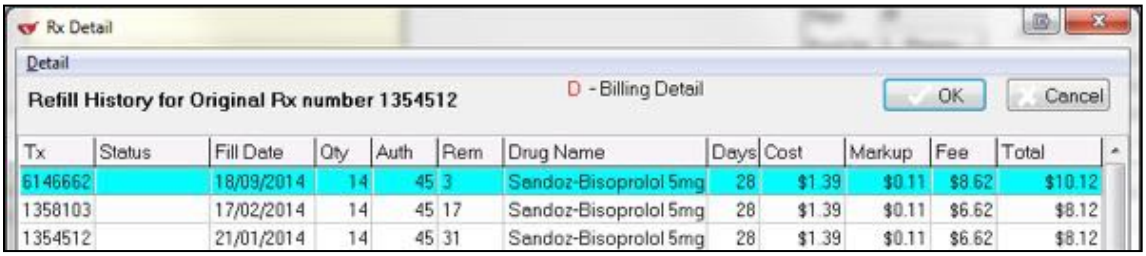
Adjudication Results: Select this option to display the **Adjudication Results** screen where you can view how the Rx was last adjudicated. This option is available for modify Rxs only.



Plan Information: Select this option to view the **Rx Plan Information** screen, which displays information about the plans being applied to the Rx. If more than one plan applies to the Rx, tabs will appear across the top of the screen, one for each drug plan. This option is available for all Rx types.

Patient Plan Information: Select this option to display the **Patient Plan Information** screen, which displays the patient's third party plan information. If more than one plan applies to the Rx, tabs will appear across the top of the screen, one for each drug plan. Adjust the third party plan information and re-adjudicate the Rx, if necessary. This option is available for all Rx types and can also be accessed via the navigation pane.

Refill Information: Select this option to display the **Rx Detail** screen where you can view refill history for the Rx. These options are only available for refill and modify Rxs and can also be accessed via the navigation pane.



Rx as it was Filled: Select this option to display to display the F12 screen for the first fill of the Rx. This option is available for modify Rxs only and can also be accessed via the navigation pane.

Refill/Modification History: Select this option to display the **History of original Rx Number** screen where you can view all changes made to the Rx since its original fill. This option is only available for refill and modify Rxs.

Comments from previous fill/cancel: Select this option to display the **Comments from previous fill/cancel** screen where you can view the last Rx fill/cancel comment. This option is available for refill Rxs only.

Labels

The options available in the Labels menu pertain to the Rx label that is generated when filling the Rx.

Generic: Select this option to override the first drug name.

Second Drug Name: Select this option to override the current second drug name. Available options are Brand, Generic, description, description 2, equivalent To, and None.

Half Size Sig: When enabled, the Sig will print at half the size it normally prints. This is useful for drug products with long Sig instructions.

Preview Label Printing Action: Select this option to preview the label set or Kroll Care.

Message: Select a message to be printed on the label. Rx messages can be configured in **Utilities** > **Labels** > **User Labels**.

Profile Lines to Skip: Select this option to choose how many lines from the top to not display on the wallet card.

Profile

There are seven patient profile views available in the Kroll Pharmacy Software. The Profile menu allows you to view each of these profiles from the F12 filling screen. Different views allow you to filter and display prescription information that is relevant to your needs at that time.

All Rxs: Displays all prescriptions filled for the patient regardless of when the Rx was filled or the Rx status. This view is useful for viewing prescriptions that have been inactivated or transferred out.

Active Rxs: Displays prescriptions that have 'Active' prescription status. Prescriptions that are unfilled, not dispensed, transferred-in, or that have a <blank> status are considered active and will be displayed in this view. This is useful for filtering out prescriptions that have been inactivated or transferred-out.

Pricing Profile: Displays all prescriptions filled for the patient with columns displaying cost, markup, fee, and the Rx total. The values represent amounts pulled from the last filled Rx in the prescription chain. This view is useful for determining prescription pricing and resolving pricing discrepancies.

Not Disp/OTC Profile: Displays prescriptions that have been marked with a status of 'Not Dispensed'. Over-the-counter (OTC) products are added to the patient profile by marking them as 'Not Dispensed' to allow drug interaction checking to occur without generating official prescription receipts.

Rxs Filled in Error: Displays prescriptions filled in error for the patient. Entries in this profile are excluded from drug interactions checking and should not influence dispensing decisions.

Therapeutic Equivalents: Display any therapeutic equivalents the patient may have had in the past for the Rx currently on the F12 filling screen.

Reports

Fax Doctor: Generates a refill request report for prescription that is currently displayed on the F12 filling screen.

Limited Use Request: This option is available only in Ontario. For certain medications, ODB will only reimburse prescriptions for a medication if it complies with a medical reason for use as defined by ODB. The **Limited Use Request** form generates a request report to the prescriber for a limited use code for the Rx currently displayed on the F12 filling screen.

Rx Workflow Detail Report: Generates report for all the information found in the Rx workflow detail screen (at time of print) for the prescription currently displayed on the F12 filling screen.

Section 8 Request: This option is available only in Ontario. This is a request sent to a prescriber for special coverage of a product that is not normally covered under the ODB formulary. The prescriber, on behalf of the patient, can request coverage for a particular drug product not normally covered under ODB for a specific period of time. The **Section 8 Request** form generates a request report to the prescriber for a Section 8 for the Rx currently displayed on the F12 filling screen.

Pharmacist Prescription Adaptation: To adopt a prescription, you can copy it from an existing prescription using the pharmacist as the doctor and a new prescription number, or fill it as a new prescription. When making changes to a prescription that has not been previously filled, the Rx would be entered as new with the adaptation mode on the first fill using the pharmacist as the doctor. This report is what is sent to the original prescribing doctor.

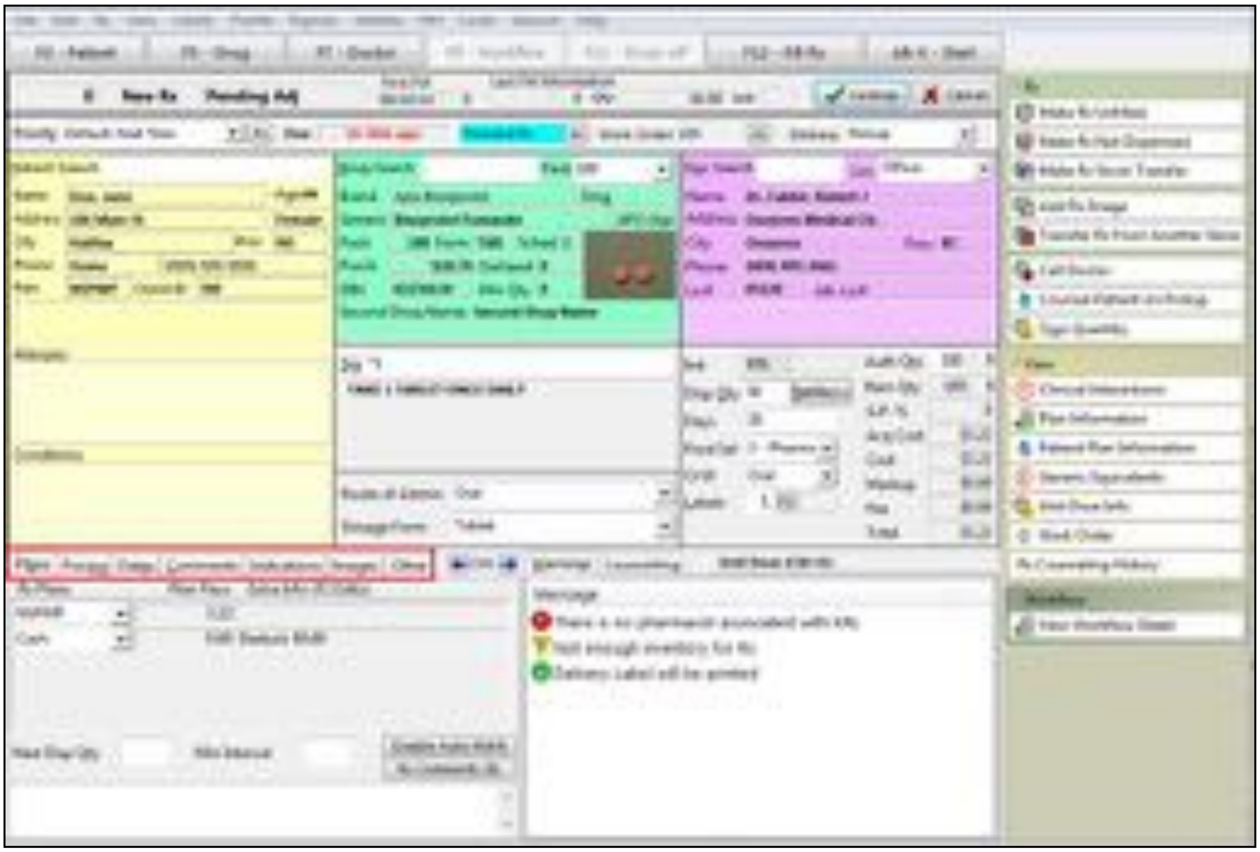
Drug Benefit Claim/Reversal Report: This option is available only in Ontario. Selecting this option will generate a ODB reversal claim.

All: Select this option to display all Kroll reports (not just F12 specific reports).

Search: Select this option to call up a search window where you can search for the name of a specific report.

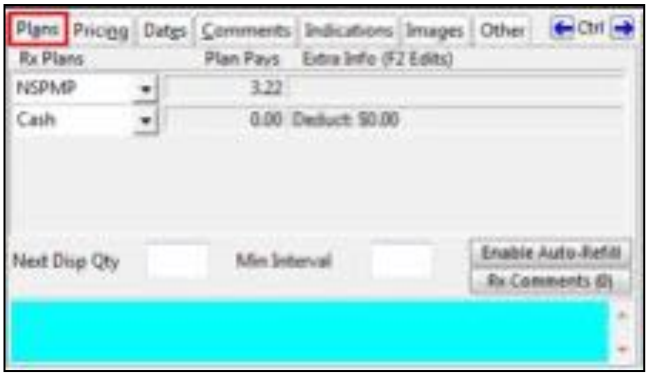
Bottom Tool Bar

The bottom tool bar provides additional information about the Rx being processed. Use the left and right arrow keys to navigate through the tabs.



Plans

Rx Plans: You can select to exclude third party plans from the prescription, or change the order of billing from this tab (remove). The first plan listed is where the Rx is being billed to first; the second plan is where the Rx is billed to second, etc.



Plan Pays: Displays how much each plan has paid for the Rx displayed on the F12 filling screen.

Extra Info: Display intervention codes or any other options populated in the plan info screen for each plan for the Rx displayed on the F12 filling screen.

Next Dispense Qty: You can enter a new dispense quantity for the next refill. This is especially useful for trial prescriptions where the first order has a lower dispensing quantity than the next.

Min Interval: Used for narcotic prescriptions to prevent refilling until a specified number of days have elapsed.

Enable Auto Refill: Select this option to enable auto-refill on Rxs so when the days supply of the Rx has elapsed, the Rx will be displayed in the To Do queue for processing.

Rx Comment: Selecting this option displays the number of comments that have been added to the Rx. Select this button to display the comments tab.

Comment field: Used for entering prescription comments. Enter any free form comment. It will be saved with the prescription record. Rx comments appear in this section for those Rxs which have the **Show on Rx** option enabled.

Pricing

The pricing tab displays information regarding the pricing strategy used to calculate the Rx. pricing strategies are set in **Edit** > **Plans/Pricing**.

Strategy: A read-only name of the pricing strategy being used in the Rx and that is set up in edit plans/pricing. Hovering the mouse over the strategy will display the drug price group and patient price group being used.

Unit Dose Strategy: A read-only name of the unit dose pricing strategy being used in the Rx and that is set up in **Edit** > **Plans/Pricing**.

Acq Cost: The acquisition cost field displays read-only calculation based on the purchase price of the drug card.

G.P. %: The Gross Profit percentage field displays read-only information that will based on the following calculation: (Rx Total $$$ - ACC)/RX total $$$

Unit Drug Cost: Displdays read-only information that will identify the cost per pill based on the following calculation: Drug pack size/Purchase Cost of the drug card.

Manual Price: If a pricing needs to be overridden, users can place a checkmark next to the Manual Price flag which will open up the Cost, Markup, Fee, Mix Fee and SSC fields for manual manipulation. Manual pricing should only be used in emergency situations; incorrectly priced prescriptions should be reported to the Kroll Support Helpdesk so the root cause of the pricing issue is resolved at the root.

Pricing Row: Displays the individual pricing breakdown for the Rx.

Cost: Displays the read-only dollar amount calculated by the system as set up in the pricing strategies specific to cost.

Markup: Displays read-only dollar amount calculated by the system as set up in the pricing strategies specific to markup.

Fee: Displays read-only dollar amount calculated by the system as set up in the pricing strategies specific to fee.

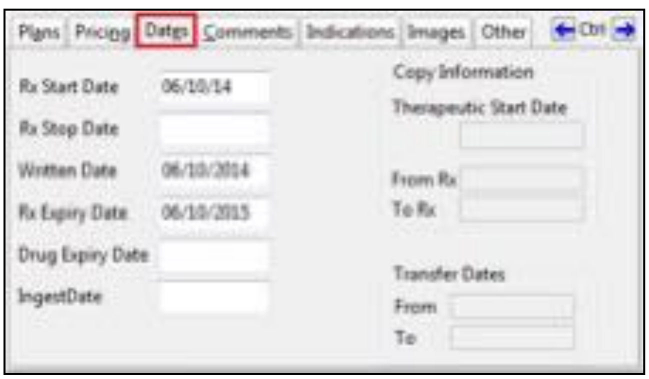
Mix Fee: Displays read-only dollar amount calculated by the system as set up in the pricing strategies and/or the mixture card specific to fee.

Total: Displays read-only dollar amount calculated by the system as set up in the pricing strategies specific to the sum of all the fields.

Discounts: Displays the discounts that have been applied to each price field for waiving cost differences during adjudication.

Net Amounts: Displays the net amount (original pricing – discount) that has been applied to each price field.

Dates



Rx Start Date: This field will automatically be populated with the date the Rx was processed. You can change this for New Rxs to populate the date the patient will start taking the medication.

Rx Stop Date: Enter a stop date for the prescription, if applicable. You will not be able to fill the prescription past the stop date unless the stop date is removed.

Written Date: This field will be automatically populated with the date the Rx was processed, but can be overridden to whatever date the prescription was actually written.

Rx Expiry Date: This field will be auto-populated depending on the drug schedule, the province the Rx was processed in, and the written date.

Drug Expiry Date: Enter a drug expiry date for the prescription, if applicable. If a date is entered here, it will be printed on the vial label so that the patient can also see the drug expiry. This option is especially useful for liquid antibiotics.

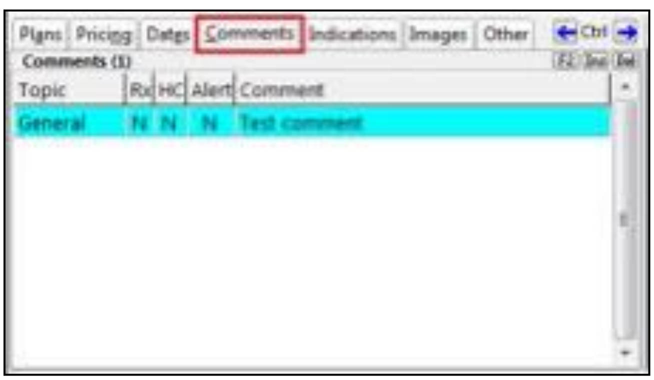
Ingest Date: Used to record the ingest date for methadone prescriptions.

Copy Information: Displays read-only information on the original therapeutic start date, as well as the Rx number for where the Rx was copied from or the Rx number for where the Rx was copied to.

Transfer Dates: Displays read-only information on where a prescription was transferred to or where it was transferred from.

Comments

Comments can be added under the Plans tab; however, inserting an entry from the Comments tab allows you to activate certain configurations for the comment as well as allowing you to enter more than one comment entry to the prescription record.



Click **Ins** or press the **Insert key** on your keyboard to add a new comment, **F2** to edit an existing comment, and click **Del** or press the **Delete** key on your keyboard to delete an existing comment.

Click **Ins** to call up the **Rx Comment** form:

Topic: Select a topic for the comment by clicking on the down arrow or pressing the down arrow on the keyboard to view the list of choices. A free-form comment can also be populated as well. A topic must be selected in order to save the comment.

Show on Rx: Enabling this option will display the comment on the F12-Filling screen in the white section on the Plans tab (bottom left of the F12 filling screen).

Alert: Enabling this flag will cause the comment to pop up every time the Rx is accessed. The comment will also be displayed with red font in the comment section.

Print on Hardcopy: When enabled, the comment will print on the hardcopy under the Rx comment. Only one Rx comment will print per Rx.

Keep Comment for Refills: When enabled, the comment will also be saved for any refills against the prescription.

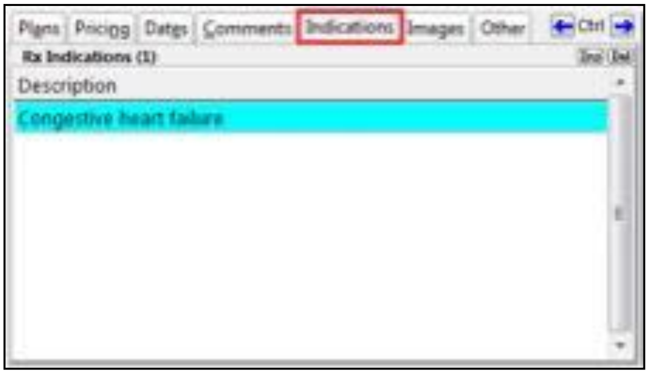
Keep Comment for Copied Rxs: When enabled, the comment will be copied to a new prescription record if the original is copied.

Workflow Alerts Edit: When enabled, the 'Edit' option to the right of workflow alerts is displayed. Place a check mark on the workflow in which you want this comment to appear.

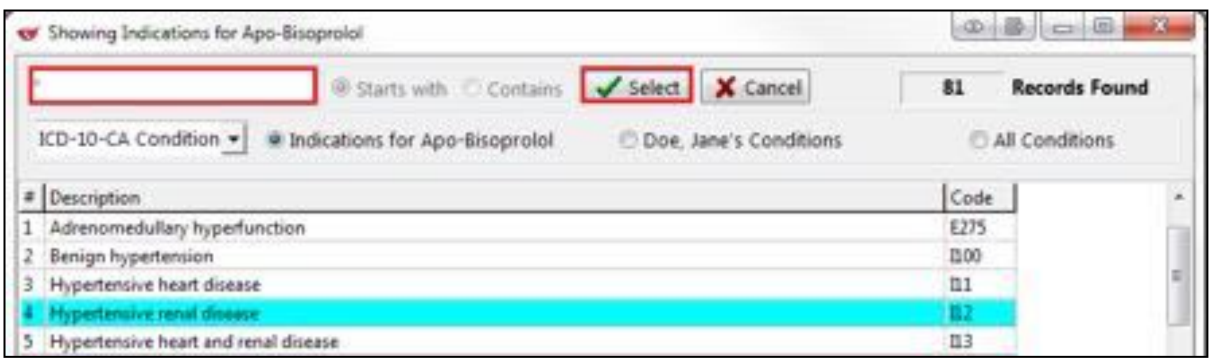
NOTE: If you select more than one workflow to display this comment, it will only be displayed at the first workflow unless you escape out of the Rx and get back to the Rx for the next workflow screen of that Rx.

Indications

The **Indications** tab allows you to identify what condition(s) the prescription is treating. Click **Ins** or press the **Insert key** on your keyboard to add a new indication, **F2** to edit an existing indication, and click **Del** or press the **Delete** key on your keyboard to delete an existing indication.

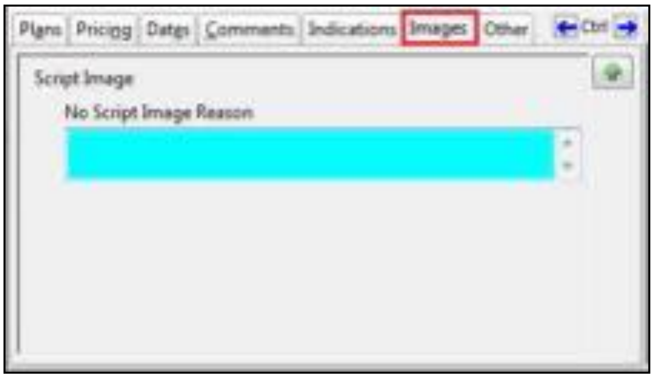


Clicking **Ins** calls up a list of ICD-10-CA and/or FDB conditions. Search for the applicable condition, highlight the record, and click **Select**.



Images

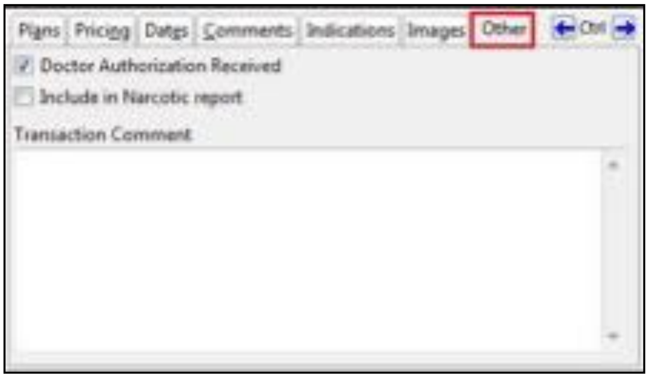
The **Images** tab allows you to import a script image or indicate a reason for not including a script image.



No Script Image Reason: If a work order does not have a written Rx that accompanies it, enter a reason for the script image not being present.

+: Allows you to add an Rx image. This option is also available via the navigation pane and in the Rx menu. Click this button to display the **Rx Images** screen where you can import a script image file or select an existing image:

Other



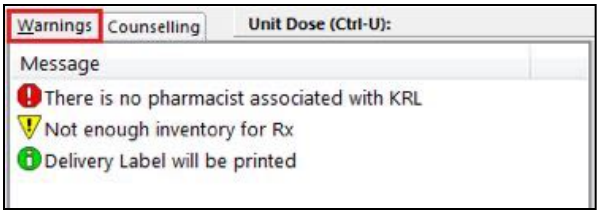
Doctor Authorization Received: This option should always be checked as it indicates that prescriber authorization has been received to dispense the prescription.

Include in Narcotic report: Check this option to include the Rx in the narcotic report even if it is not a narcotic prescription.

Transaction Comment: Displays any comments specific to the transaction. This can be a user comment, system comment, or a comment transferred from the To Do comment section. This comment will not be transferred to refills or copied Rxs.

Rx Warnings and Counselling: The **Warnings** and **Counselling** tabs are found to the left of the navigation pane at the bottom of the screen. The **Warnings** tab displays messages that inform you of important information or problems that pertain to the Rx. The **Counseling** tab shows the information that will be printed on the Kroll Care leaflet.

Warnings tab

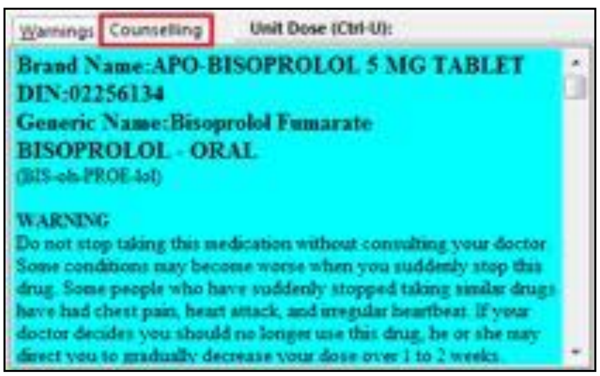


Error Messages: Indicate there is a problem with the Rx. You will be prevented from moving the Rx to the next filling stage when error messages are present.

Warning Messages: Indicate that there may be a potential issue with the Rx. Addressing these warnings may prevent an input error. Rxs can be finalized while these messages are present.

Information Messages: Indicate a general purpose message. Rxs can be finalized while these messages are present.

Counselling tab



The **Counseling** tab displays patient messages extracted from the First Data Bank (FDB) clinical drug module. Counseling messages are broken down into Patient Messages and Professional Messages – Kroll Care.

Filling a Prescription

This section explains the procedure for filling a prescription from the F12 screen.

Patient Details

1. Enter one the following search criteria in the Patient Search field and press Enter:

- Last Name, First Name (e.g. "Doe, Jane" **OR** "doe,j" **OR** "Doe" **OR** ",Jane")
- A period (.) and the Patient Quick Code (e.g. ".DoeJ")
- 7 or 10 digit phone number (e.g. 800-263-5876 or 263-5876)
- A number sign (#) and the +Third Party Billing number (e.g. #123456789)
- An asterisk (*) to search ALL patients in the database

2. A list of patients matching the search criteria will be displayed. Select the applicable patient record by:

- Highlighting the patient record and pressing the **Enter** key on your keyboard or clicking **F12 - Return to Rx**.
- Typing in the line number corresponding to the applicable entry and pressing **Enter** to select.
- Double clicking the patient record.

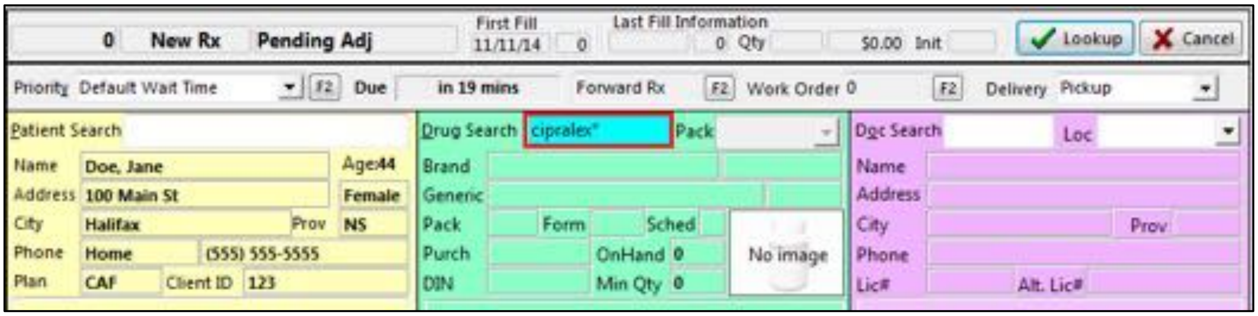
3. The **F3 - Patient** screen will be displayed. Click **Rx** or press the **Enter** key on your keyboard.

The **F12** screen will display with the selected patient's information populated in the patient fields.

Drug/Mixture Details

1. Enter one the following search criteria in the **Drug Search** field and press **Enter**:

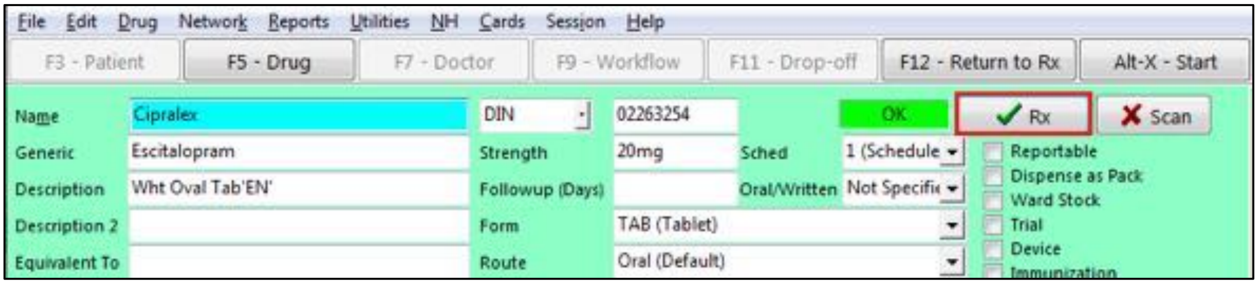
    - Brand/Generic Name, Strength/Pack Size (e.g. Apo-Metformin, 500/360)
    - DIN (5-8 digits)
    - UPC (11-12 digits)
    - A period (.) and the Drug Quick Code (e.g. TYLE3)
    - # symbol and the Catalog Item Number (e.g. #78945)



2. A list of drugs/mixtures matching the search criteria will be displayed. Select the applicable drug/mixture record by:

    a) Highlighting the entry and pressing **Enter** on the keyboard or clicking **F12 - Return to Rx**.
    b) Typing in the line number corresponding to the applicable entry and pressing **Enter** to select.
    c) Double clicking the drug/mixture record.

3. The **F5 - Drug** screen will be displayed. Click **Rx** or press the **Enter** key on your keyboard.



The **F12** screen will display with the selected drug/mixture information populated in the drug fields.

Prescriber Details

1. Enter one the following search criteria in the **Doc Search** field and press **Enter**:

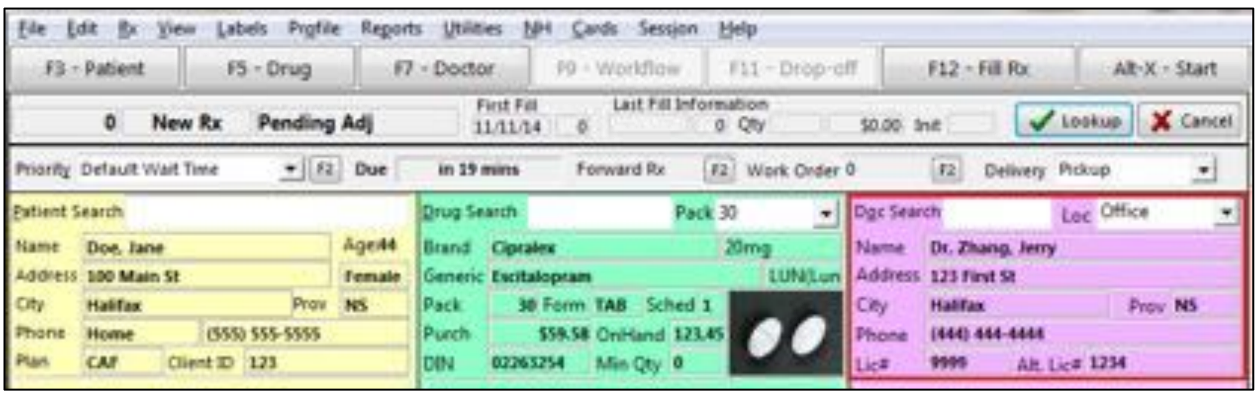
   - Last Name, First Name (e.g. “house, greg” OR “hou, g” OR “house” OR “,greg”)
   - A period (.) and the Doctor Quick Code (e.g. “.house”)
   - 7 or 10 digit phone number of the prescriber office.
   - A number sign (#) and the prescriber license number (e.g. #123454)
   - An asterisk (*) to search for ALL prescribers in the database.

2. A list of prescribers matching the search criteria will be displayed. Select the applicable prescriber record by:

   - Highlighting the entry and pressing **Enter** on the keyboard or clicking **F12 - Return to Rx**.
   - Typing in the line number corresponding to the applicable entry and pressing **Enter** to select.
   - Double clicking the prescriber record.

3. The **F7 - Doctor** screen will be displayed. Click **Rx** or press the **Enter** key on your keyboard.

The **F12** screen will display with the selected prescriber information populated in the prescriber fields.



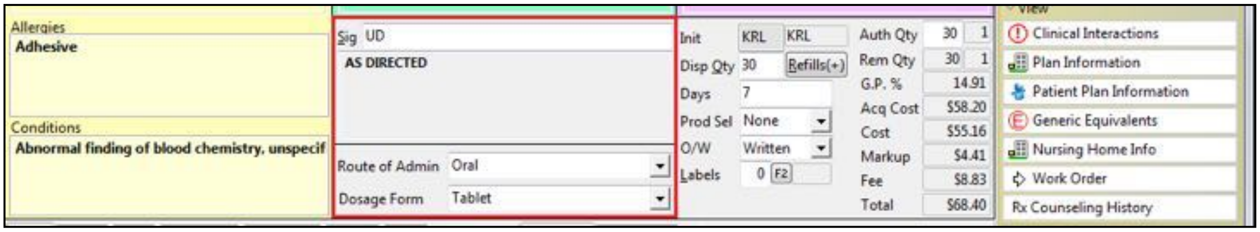
Sig Details

Enter the Sig for the appropriate administration instructions in the **Sig** field. A read-only expansion will appear below the field. Sig codes and expansions can be edited in **Edit** > **Sig Codes**.

Enter the Sig in the SIG field and the expansion will appear in read only format in the grey box below. Sig tokens and Sig expansions can be edited in Edit/Sig Codes.

Route of Admin: Select a route of administration for the drug product (e.g., oral, topical, intravenous, etc.)

Dosage Form: Select the form of the drug product (e.g., capsule, tablet, injection, etc.)



Dispense Details

Init: Enter your user initials. Your system may be configured to auto-populate the initials of the currently logged in user.

Dispense Qty: Enter the dispense quantity for the prescription. Entering a dispense quanitty followed by a ‘P’ will multiply the dispense quantity by the pack size.

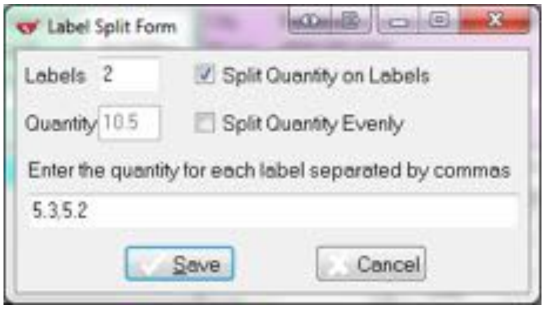
Refills (+): Click to add refills to the Rx. The **Specify number of repeats for a new Rx** form will appear where you can enter the number of repeats and/or authorized quantity. Place a checkmark next to **Unlimited Refills** and enter an **Until** date if the prescription has unlimited refills until a specific date.

Days: Enter the day’s supply for the dispense quantity indicated.

Product Sel: Indicates a reason why the drug cannot be substituted. Options include **Prescriber’s Choice**, **Patient’s Choice**, **Pharmacist’s Choice**, and **Existing Therapy**. If you select **None**, no drug substitution restrictions will be applied.

O/W: Indicates how the Rx has been received into the pharmacy. Options include **Written**, **Oral**, and **Faxed**.

Labels: Specify the number of vial labels to be printed. If two or more labels are selected, you can spit the labels using the F2 option. This will display the label split form. If you select **Split Quantity on Labels**, the quantity will be divided by the number of labels.



Auth Qty: This field will auto-populate if the **Disp Qty** and **Refills** fields are filled out. If this field is blank, enter the total authorized quantity for the prescription.

Rem Qty: This field is auto-populated with read-only information pertaining to the number of pills not dispensed, based on the authorized quantity. The field to the right indicates the remaining refills based on the dispensed quantity that is currently populated.

G.P.%: The Gross Profit percentage field displays read-only information that is based on the following calculation: (Rx Total $$$ - ACC)/RX total $$$

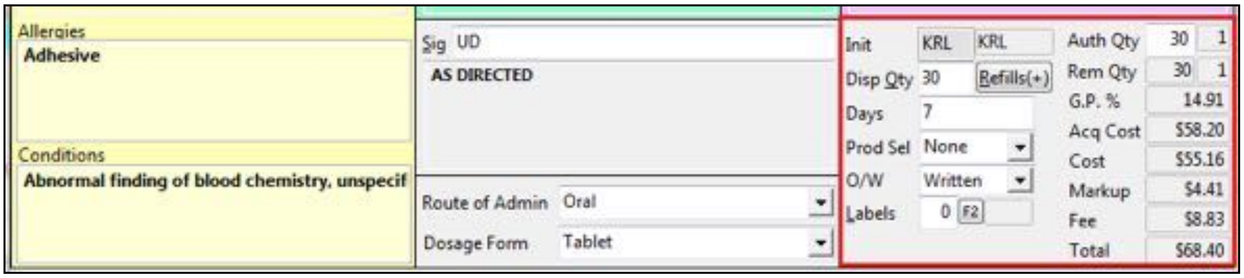
Acq Cost: The acquisition cost field displays a read-only calculation based on the purchase price on the drug card.

Cost: Displays the read-only dollar amount calculated by the system as set up in the pricing strategies specific to cost

Markup: Displays a read-only dollar amount calculated by the system as set up in the pricing strategies specific to markup.

Fee: Displays a read-only dollar amount calculated by the system as set up in the pricing strategies specific to fee.

Total: The total field displays read-only dollar amount calculated by the system as set up in the pricing strategies specific to the sum of all the fields.



Processing the Rx

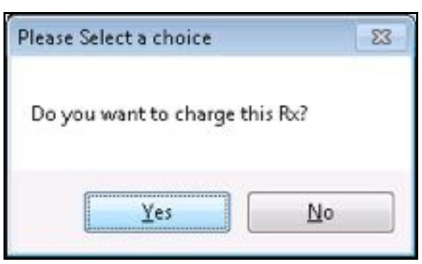
Once the Rx fields are populated, click **F12 - Fill Rx**. This must be completed whether you are logging an Unfill, a Stock Transfer, a Not Dispensed, filling a new Rx, or saving changes on a modify. This must be done so an Rx number can be assigned to the prescription. (A Tx number will not be created when modifying an Rx.)

After selecting **F12 - Fill Rx**, the Rx will progress through the workflow actions available for your selected workflow type. The default workflow actions are described below. Note that workflow orders or actions can only be changed by contacting Kroll Support.

Prompt for AR

In order for the AR prompt to be displayed the store must have all of the following in place:

- The AR module must be enabled.
- The patient must have an AR account.
- The **Charge Rxs** field in **File** > **Configuration** > **Store** > **AR** is set to **Prompt**.

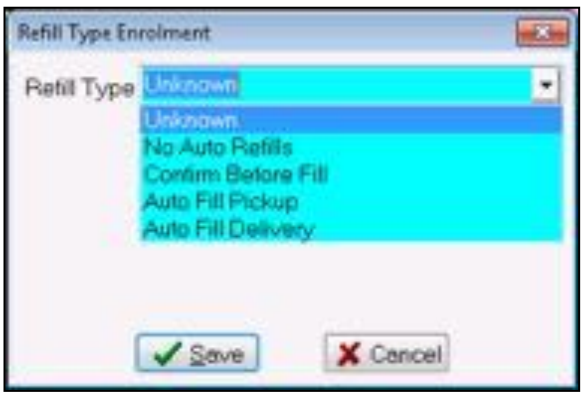


If you select **Yes**, the cash remainder will be charged to the patient's AR profile. If you select **No**, nothing will be charged to the patient's AR profile. If all three criteria of the above criteria are not met this workflow action will be skipped.

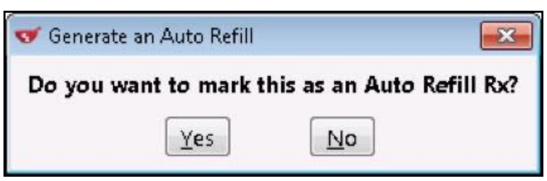
Prompt for Refill Reminder or Auto- Refill

If nothing is populated in the patient communication tab, the following prompt will be displayed. Note that this is dependent on the configuration settings in **File** > **Configuration** > **Store** > **Interfaces** > **Outbound Communication**.

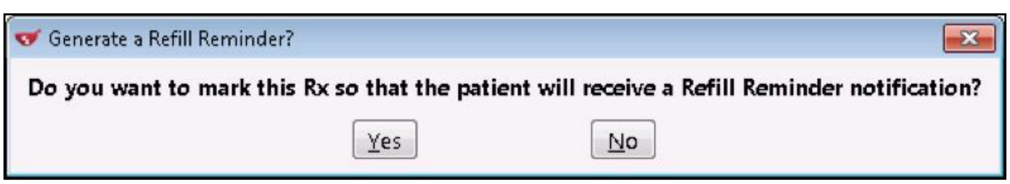
If you select **Yes**, you will be prompted to select a **Refill Type**.



If the **Message Type** is set to **Rx Ready for Pickup** in **F3 - Patient** > **Communications** > **Communication Methods**, the following prompt will appear:

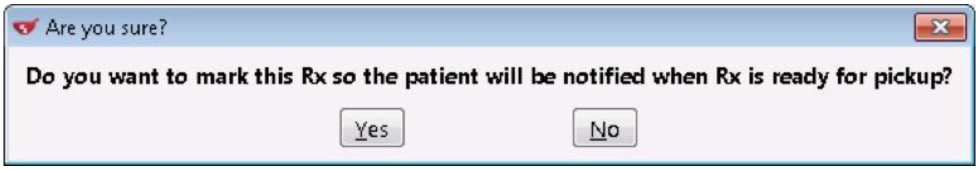


If the **Message Type** is set to **Refill Reminder** in **F3 - Patient** > **Communications** > **Communication Methods**, the following prompt will appear:



Prompt for Pickup Notification

If the **Message Type** is set to **Rx Ready for Pickup** in **F3 - Patient** > **Communications** > **Communication Methods** and the **Pickup** field is set to **Ask for each Rx**, the following prompt will appear:



Prompt for Medication Reviews

Depending on your province and store configuration settings, you may be prompted to perform a medication review if the patient is eligible. If your system is configured for paper medication reviews, the following prompt will appear:

If your system is configured for electronic medication reviews, the following prompt will appear:

Preform Local DUE

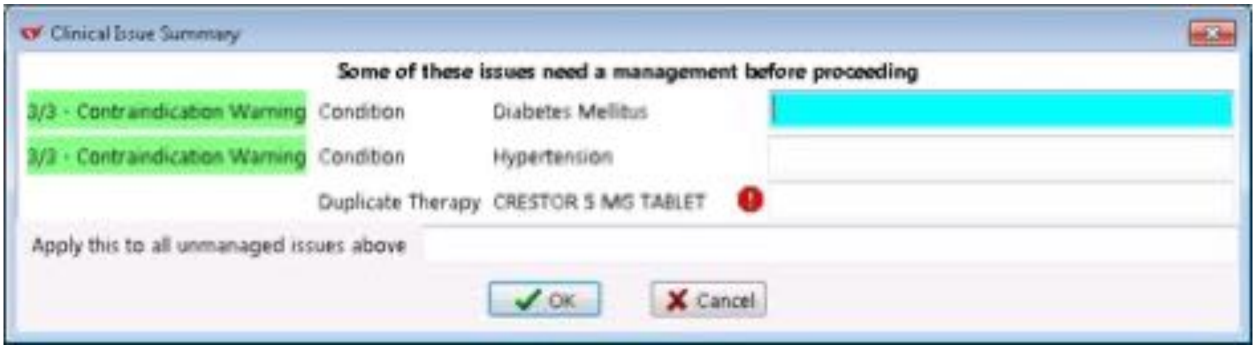
You can review First Data Bank (FDB) clinical interactions analysis for a patient's patient profile when filling an Rx. This occurs within the Perform Local DUE workflow action. The analysis will be based on information in the patient profile and the drug selected in the F12 filling screen. Results of the analysis will be displayed in the **Clinical Reports** window under separate tabs across the top of the window. The displayed tabs depend on the settings in **File** > **Configuration** > **Store** > **FDB**. Click **Next** to proceed through the tabs.

There is also an option to print the clinical report by selecting **File** > **Print**, as well as an option to counsel the patient at pickup from the **Rx** menu.

A **Proceed** button will be displayed if an interaction needs to be viewed. You can not bypass a required tab by selecting enter on the tab. You must click the **Proceed** button or press **Ctrl** + **P** to proceed.

A **Finish** button will appear on the last tab. Click to close the **Clinical Reports** screen.

Depending on you store configuration settings, you may be required to manage interactions. A **Clinical Issue Summary** screen will be displayed after selecting finish on the **Clinical Reports** screen.



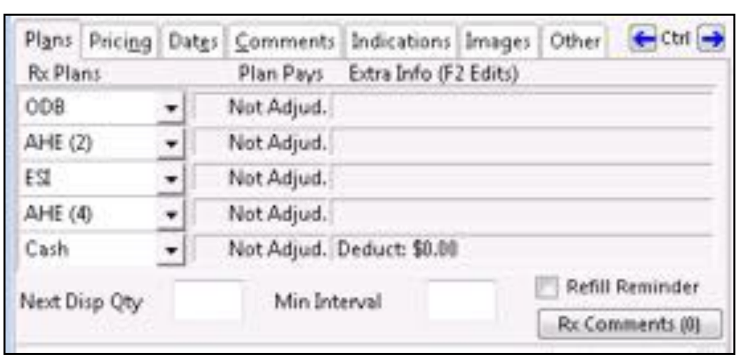
Allocate Inventory

Allocating Inventory is the process of dedicating the Rxs dispensing quantity amount for the on-hand quantity for the selected drug. This action happens in the background; no prompts will be displayed. This will determine if an owing prompt needs to be displayed if not enough inventory is available.

Adjudication to Real Time Insurance

Once the prescription has been locally approved, the next step is to complete adjudication and bill the online insurance plan(s). Each Rx will adjudicate to the plan(s) listed within the plans tab in the order they appear in the Rx.

In the example below, there are five plans listed. This Rx will first bill ODB (Ontario Drug Benefit), next to AHE 2 (Assure Health), next to ESI (Express Scripts), next to AHE 4 (Assure Health), and the remainder will be billed to cash which is the final amount the patient pays.



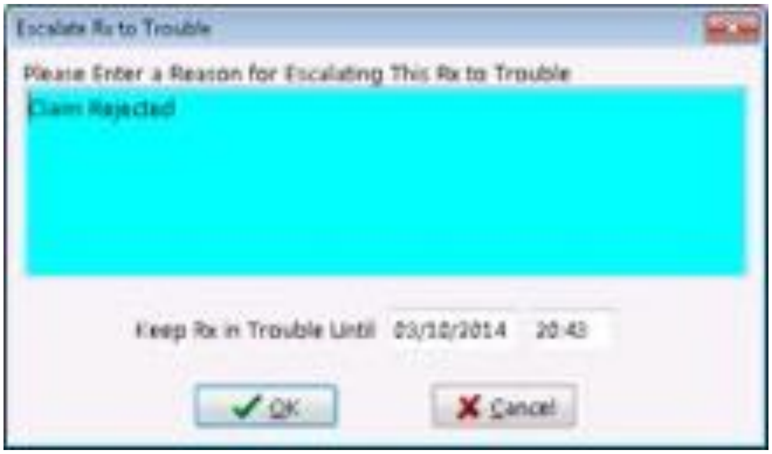
NOTE: If the Patient has more than one of the same plan, the plan code will be displayed followed by the plan order in parenthesis.

Adjudication Response Screen

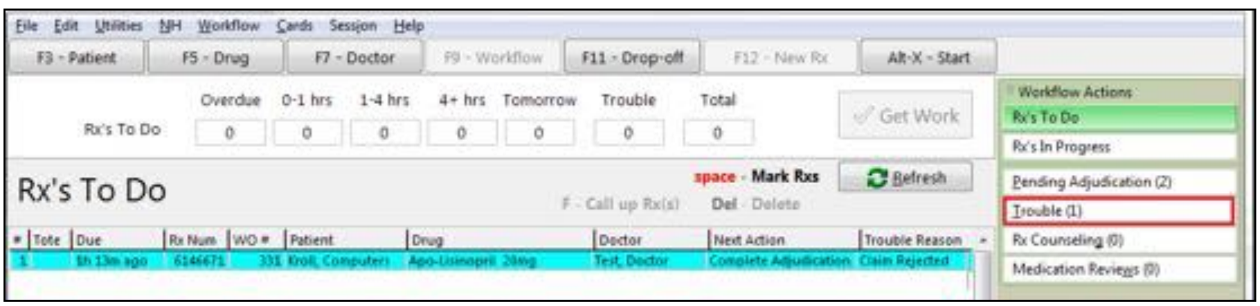
The **Adjudication Response** screen will be displayed when billing electronic online plans at the Complete Adjudication stage. The following screen will be displayed for each plan the Rx is being billed to until the total cost has been fully paid.

- **Submitted**: This row displays the pricing break down of what is billed to the plan.
- **Accepted**: This row displays the pricing break down of what is accepted from the plan.
- **Difference**: This row displays the difference between what was submitted and what was accepted from the plan for each cost field.
- **Rx Total:** This field displays the entire Rx Total calculated in Kroll.
- **Prev Paid:** This field displays the sum of payments towards this Rx that has been billed before this plan.
- **Plan Pays:** This field displays to the user the total amount that this specific plan has paid.
- **Balance**: This field displays to the user the remaining unpaid amount.

If you select **Trouble**, the Rx will be placed in the Trouble queue for a specified amount of time. This will move the Rx out of the queue priority so that other Rxs can be processed. An **Escalate Rx to Trouble** window will display where you can enter a reason for sending the Rx to the Trouble queue. Enter a date and time in the **Keep Rx in Trouble Until** fields.



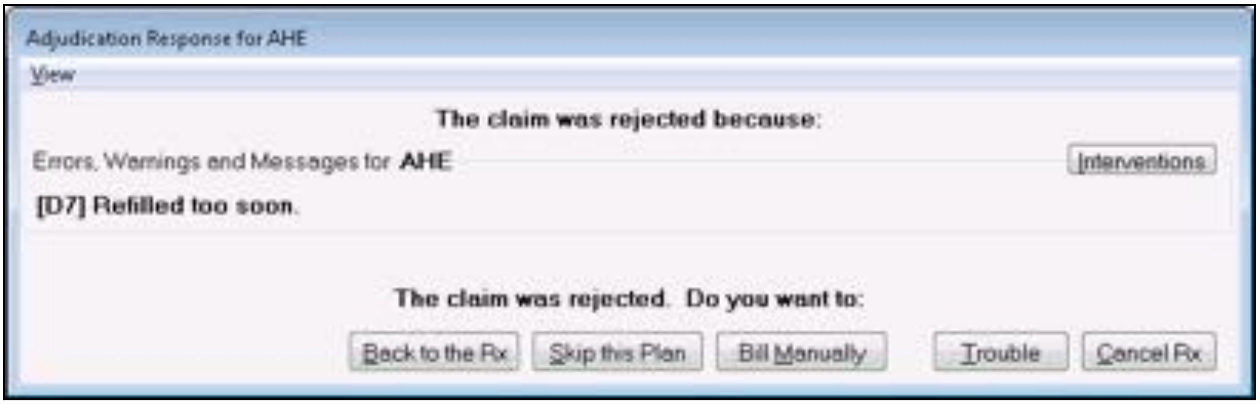
To access the Trouble queue, call up the **F9 - Workflow** screen and select **Trouble** from the right navigation pane.



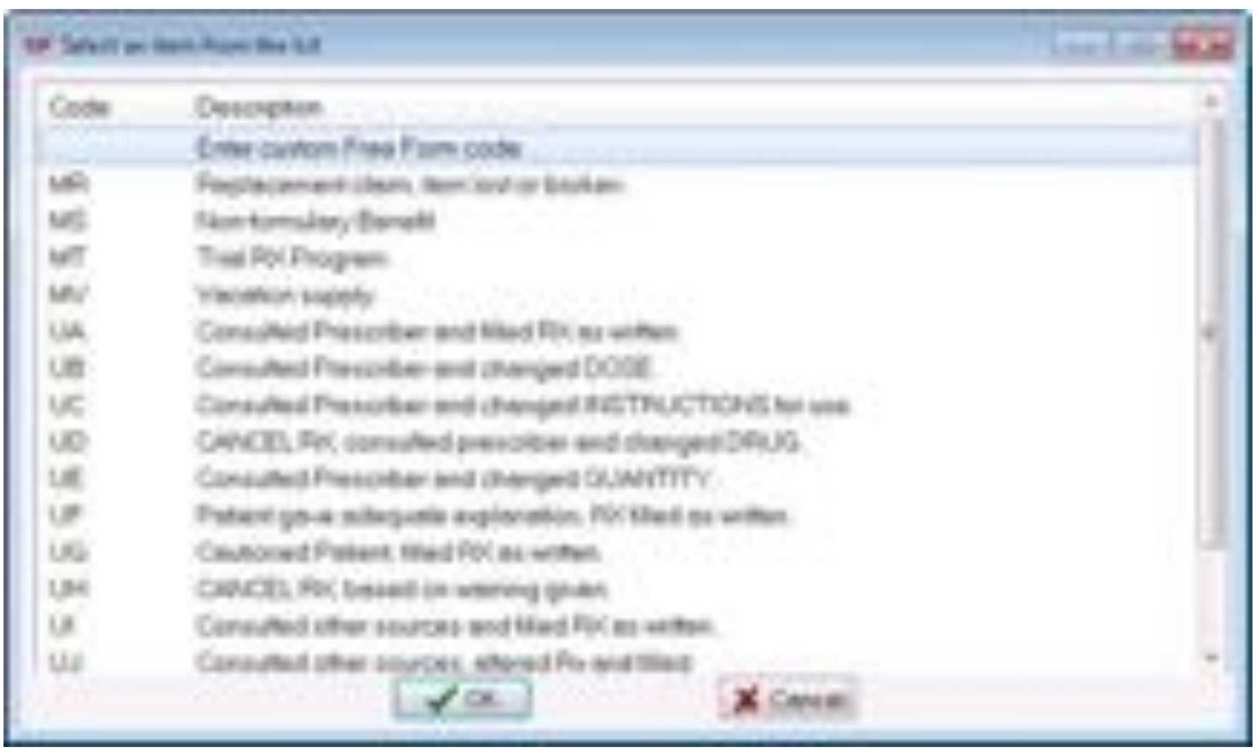
If you select **Cancel Rx**, the Rx will be reversed.

Rejection Messages

If a plan rejects a claim, the **Adjudication Response** screen will display a rejection code and a reason why the claim was rejected.



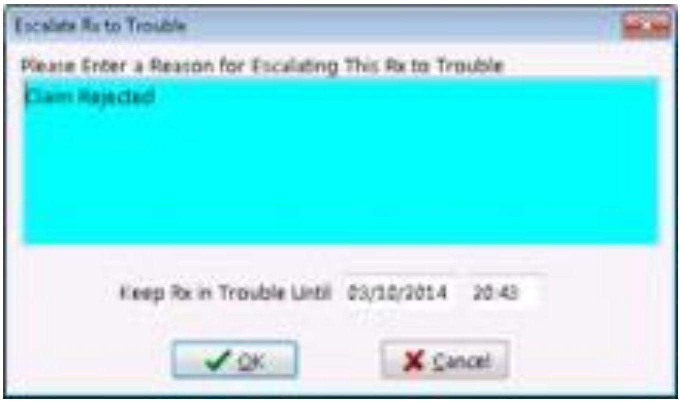
If you select **Interventions**, a list of available intervention codes to potentially override the rejection will be displayed. Select an intervention code, or select **Enter custom Free Form code** to enter your own.



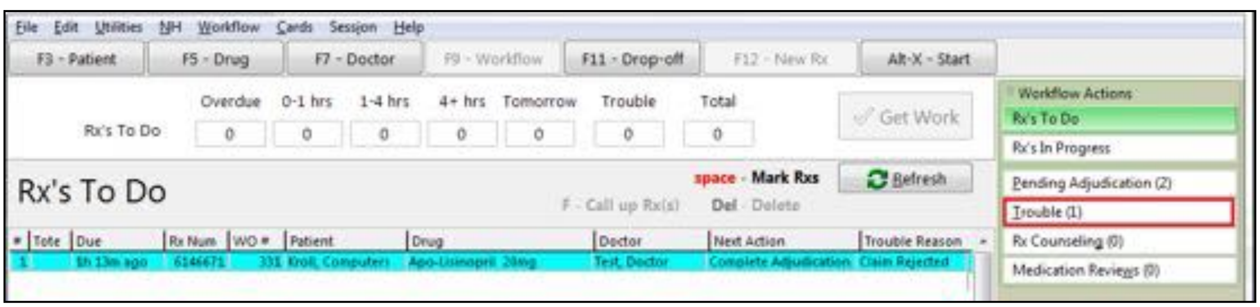
If you select **Back to the Rx**, the **Adjudication Response** screen will close and you will be directed back to the **F12** screen to make changes to the Rx, if necessary. Once changes are made, click **F12** to retry adjudication.

If you select **Bill Manually**, the remainder of the cost will be manually billed to the plan instead of billed online. In this case, the pharmacy is required to submit a claims invoice to the insurance company in order to receive payment.

If you select **Trouble**, the Rx will be placed in the Trouble queue for a specified amount of time. This will move the Rx out of the queue priority so that other Rxs can be processed. An **Escalate Rx to Trouble** window will display where you can enter a reason for sending the Rx to the Trouble queue. Enter a date and time in the **Keep Rx in Trouble Until** fields.



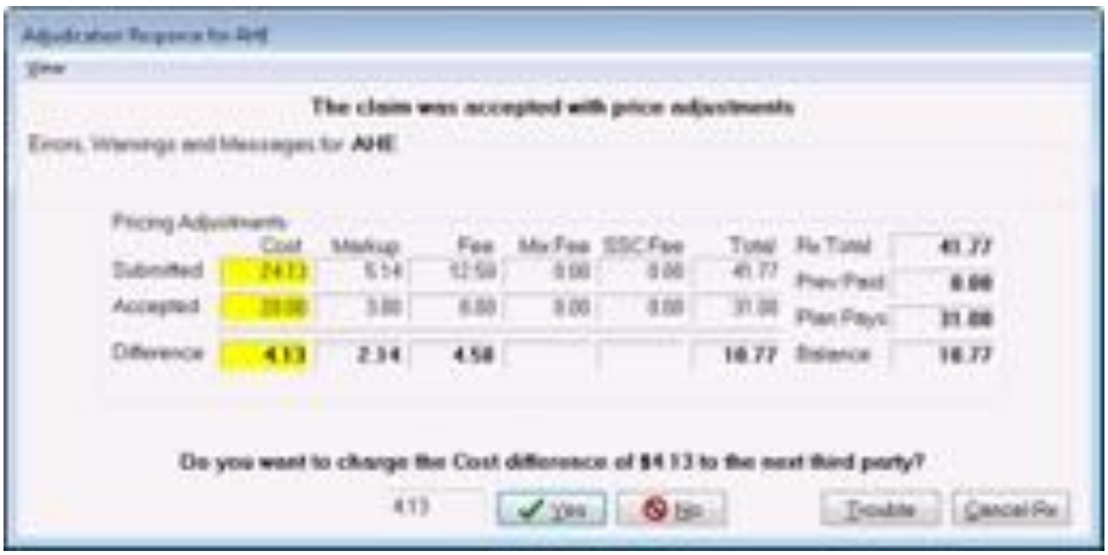
To access the Trouble queue, call up the **F9 - Workflow** screen and select **Trouble** from the right navigation pane.



If you select **Cancel Rx**, the Rx will be reversed.

Cost Differences

If there are any cost differences between what was submitted to the insurance company and what was accepted from the plan, the **Adjudication Response** screen will require you to enter a response for each pricing field that contains a cost difference. If this is not the last Rx plan before cash, you will be asked if you want to charge the cost difference to the next third party.



If you select **No**, the system will waive the cost difference on the Rx.

If you select **Yes**, you will be able to change the cost difference amount.

If you click **OK**, the system will ask the same question for the remaining cost difference field(s), if there are any and will send the difference to the remaining online plan or charge the patient.

Completing the Prescription

After the above steps are completed successfully the Rx has been billed and processed successfully and a label will be printed.

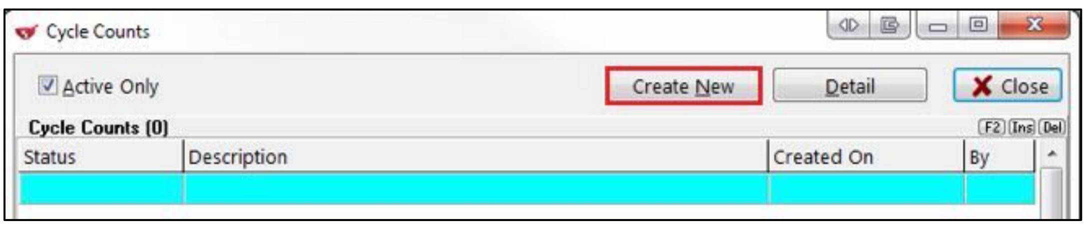
Cycle Counts

Drug on-hand quantities can be managed through a cycle count process using the cycle count feature. The implementation of a cycle count process provides more accurate inventory and more efficient tracking of incoming and outgoing product. With the cycle count process you have the ability to count 'sections' of inventory for example specific schedules, manufacturers, drug types and therapeutic class.

The cycle count process is a convenient way for inventory values to be verified during quiet periods and is not necessarily intended solely for yearend inventory counts.

NOTE: Only pharmacists and pharmacy managers have permission to adjust inventory counts.

1. From the **Alt-X Start** screen, go to **Utilities** > **Drug** > **Drug Inventory Counts**.
2. The **Cycle Counts** screen will appear. Click **Create New**.



3. Select from the **Create Cycle Count** prompt.

Pre-select Drugs to Count

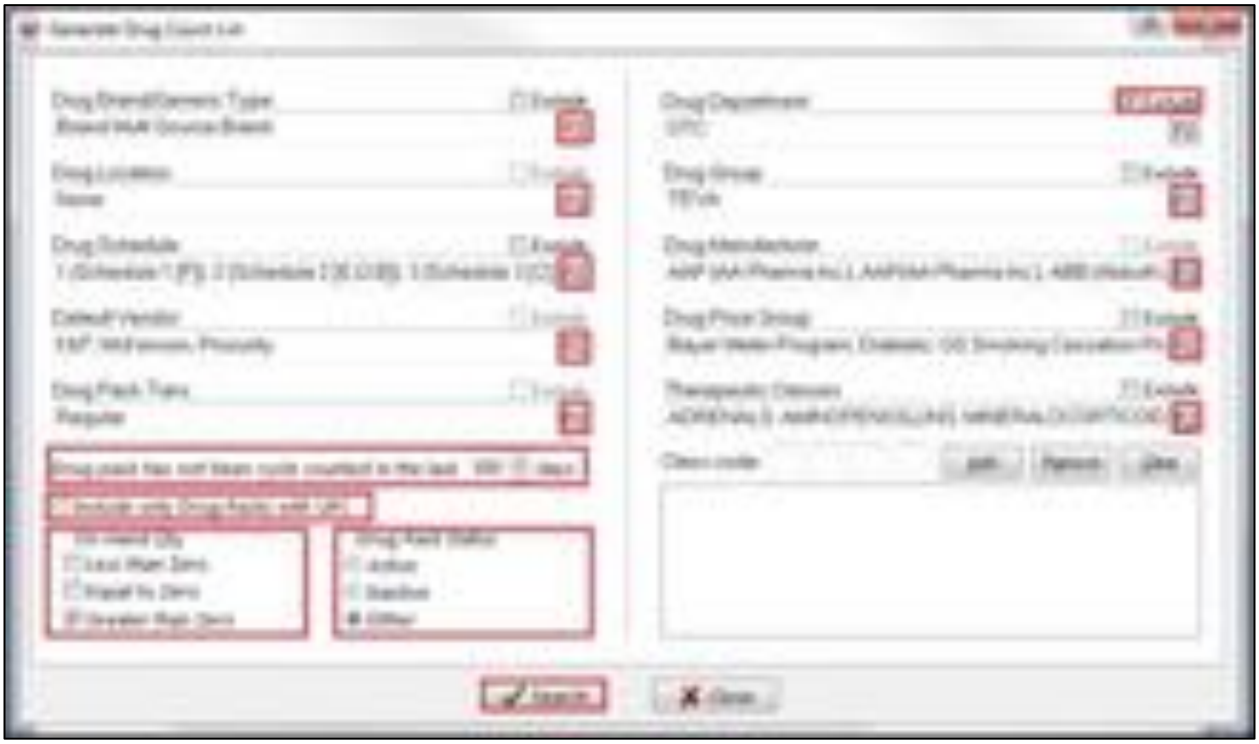
1. If you select **Pre-select drugs to count**, the **Generate Drug Count List** form will appear displaying the options available for the specific types of drugs that can be counted.

2. Click the **F2** button next to each field to select criteria for the pre-selected drugs. Select the appropriate options under the **Available** column by clicking the items and selecting **Insert**. The item will appear under the **Selected** column.

3. Repeat step 5 for each field you want to select criteria for.

- Place a checkmark next to **Exclude** to exclude that category from the cycle count.
- Use the **Drug pack has not been cycle counted in the last [x] days** to specify a date range.
- Place a checkmark next to **Include only Drug Packs with UPC**, if necessary.
- Use the **On Hand Qty** checkboxes to specify on on-hand quantity.
- Select a **Drug Pack Status** to specify if you want to perform the cycle count for **Active**, **Inactive**, or **Either** type of drug.

Any fields left blank will default to **(All)**. When you are ready to proceed to the next step, click **Search**.



4. The **Generate Drug Count List** screen will appear. At this stage you can rename the drug count, if desired, and use the **Limit results to** option to specify the number of results you want displayed. Click **Start Counting**.

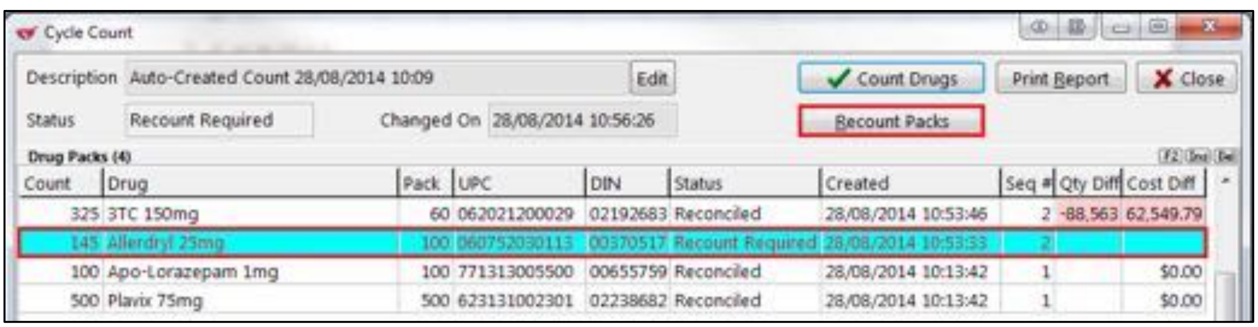
5. The selected drugs will be placed into a count. Click **Count Drugs**.

6. The first drug in the count will appear in the **Cycle Count Pack** form. Enter the **Quantity Counted** (the number of pills that are in the stock bottle you just counted). If you counted the drug by number of packagers, you can enter this value followed by the letter P (e.g., 3P to specify three packagers). Click **Add Qty**.

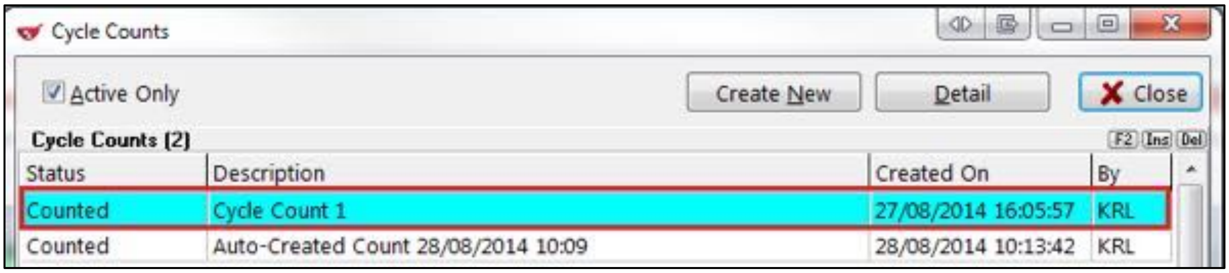
The **Quantity Counted** value will appear in the **Total Quantity Counted** pane. Repeat this step for each pack you have counted for that drug.

7. Repeat step 9 for each drug you want to count. When you are finished, click **Cancel** to close the **Cycle Count Pack** form.

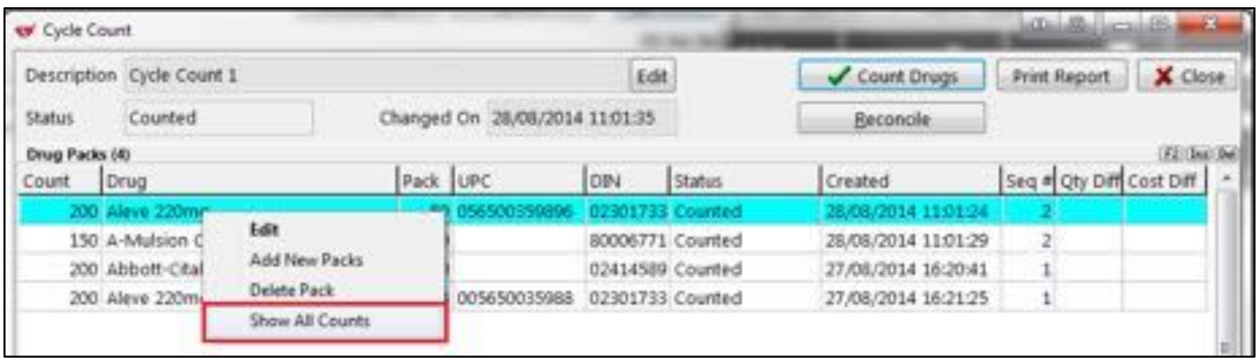
8. The **Cycle Count** screen will show a status of '**Reconciled**' for each drug you just counted and an updated **Count** value. If you want to recount a drug, highlight the drug record and click **Reconcile**. The drug will appear in red text and will show a status of **Recount Required**.



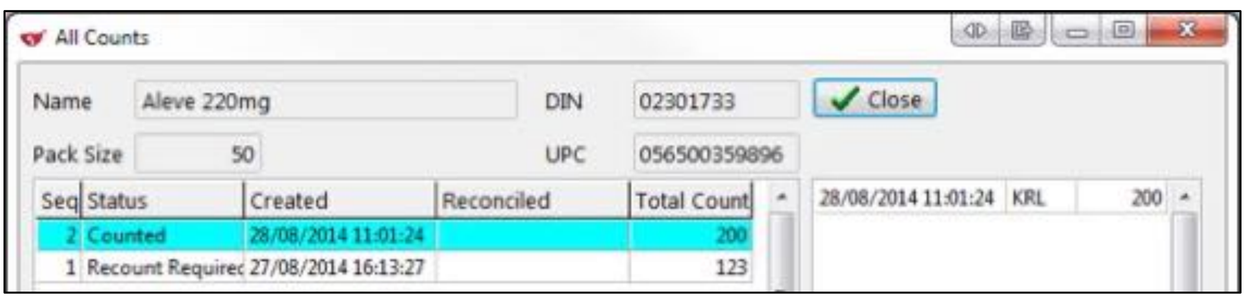
Highlight the drug record again and click **Count Drugs**. Repeat step 9 to recount the drug. Once all drug packs have been counted, the cycle count will show a status of **Counted**.



9. If you want to view the counts for a drug, call up the **Cycle Count** screen, right-click the drug you want to view counts for, and select **Show All Counts**.

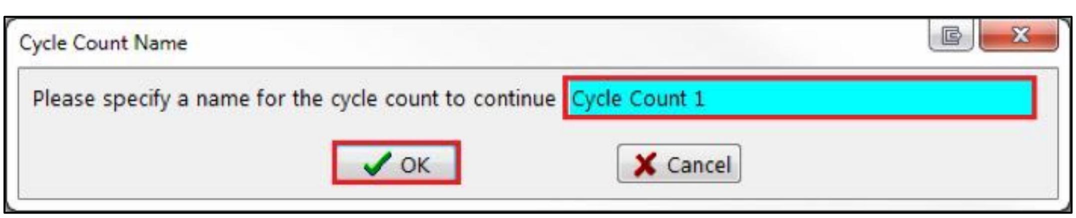


The **All Counts** screen will appear, displaying all counts for the selected drug. Click **Close** to close the **All Counts** screen.

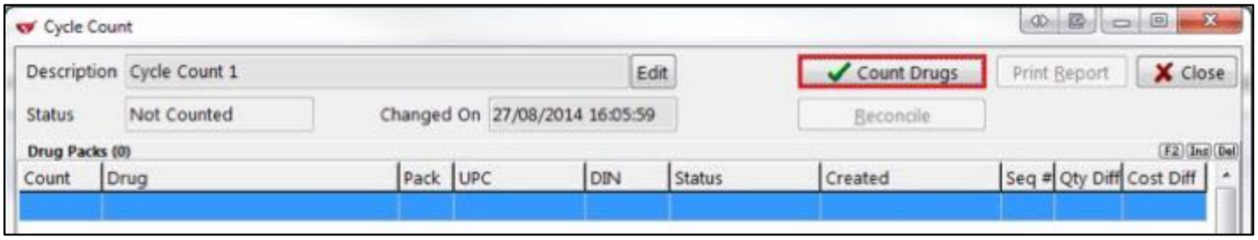


Scan and go - start counting now

1. Enter a **Cycle Count Name** and click **OK**.



2. The **Cycle Count** screen will appear. Click **Count Drugs**.



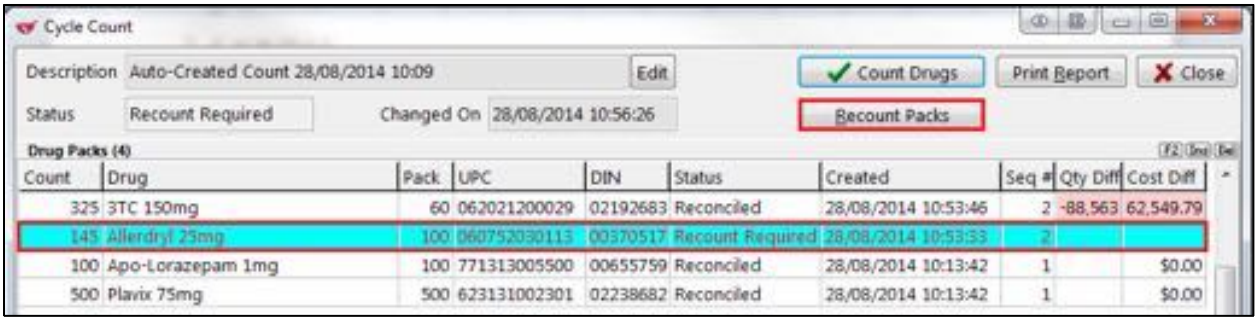
3. The **Cycle Count Pack** form will appear. Scan the first drug to be counted. If the drug does not have a UPC, a regular drug search can be performed by clicking the **F5** button next to the **Drug** field. The **Cycle Count Pack** form will populate information that pertains to the scanned drug.

4. Enter the **Quantity Counted** (the number of pills that are in the stock bottle you just counted). If you counted the drug by number of packagers, you can enter this value followed by the letter P (e.g., 3P to specify three packagers). Click **Add Qty**.

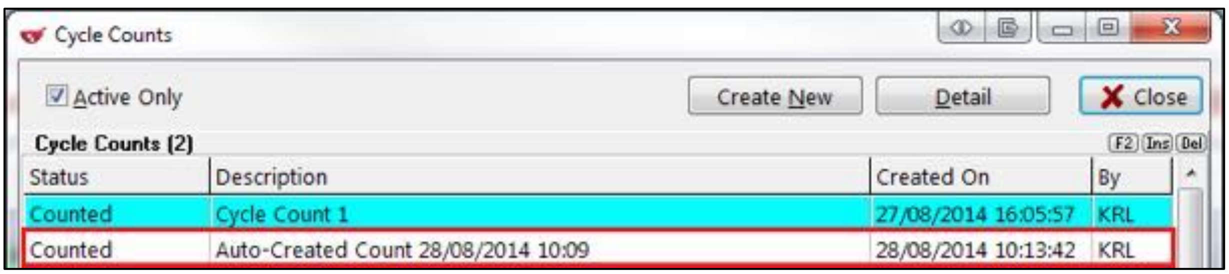
The **Quantity Counted** value will appear in the **Total Quantity Counted** pane. Repeat this step for each pack you have counted for that drug.

5. Repeat step 7 for each drug you want to count. When you are finished, click **Cancel** to close the **Cycle Count Pack** form.

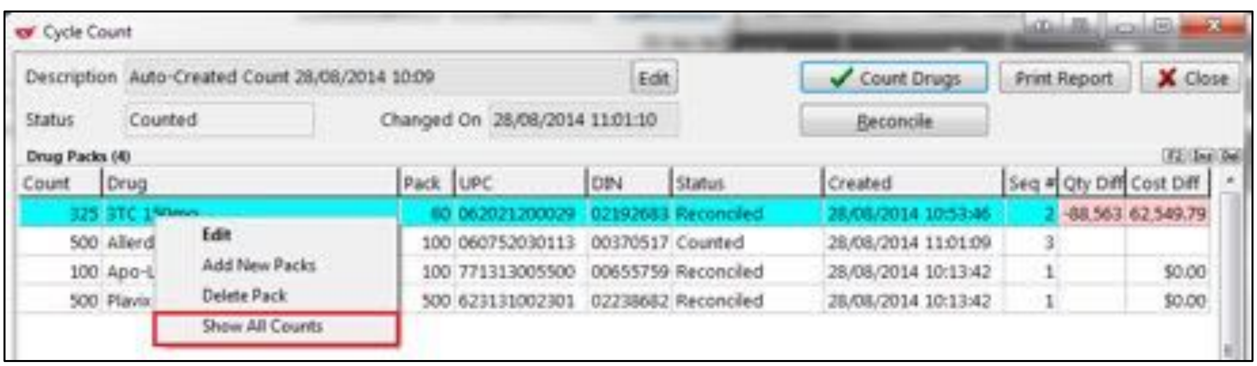
6. The **Cycle Count** screen will show a status of '**Reconciled**' for each drug you just counted and an updated **Count** value. If you want to recount a drug, highlight the drug record and click **Reconcile**. The drug will appear in red text and will show a status of **Recount Required**.



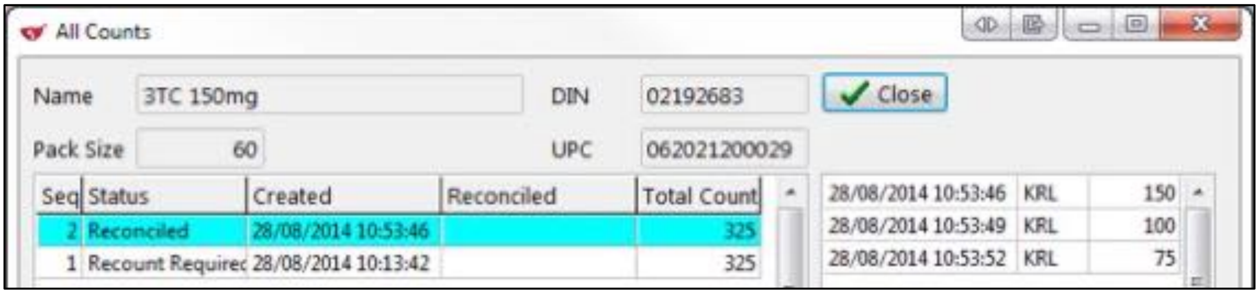
Highlight the drug record again and click **Count Drugs**. Repeat step 9 to recount the drug. Once all drug packs have been counted, the cycle count will show a status of **Counted**.



7. If you want to view the counts for a drug, call up the **Cycle Count** screen, right-click the drug you want to view counts for, and select **Show All Counts**.

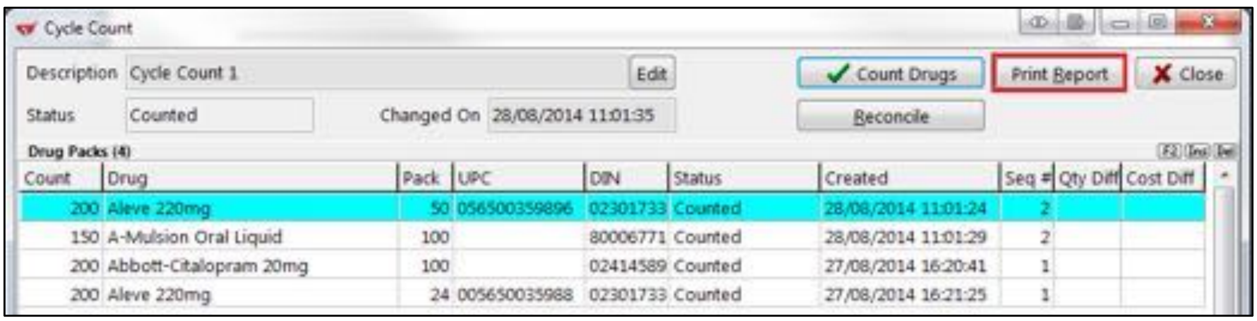


The **All Counts** screen will appear, displaying all counts for the selected drug. Click **Close** to close the **All Counts** screen.



Printing the Drug Inventory Count Report

1. Once all drugs have been counted, call up the **Cycle Count** screen for the selected cycle count and click **Print Report**.



2. Select the desired printing options from the **Drug Inventory Count Report** form and click **Print**. The report will generate.

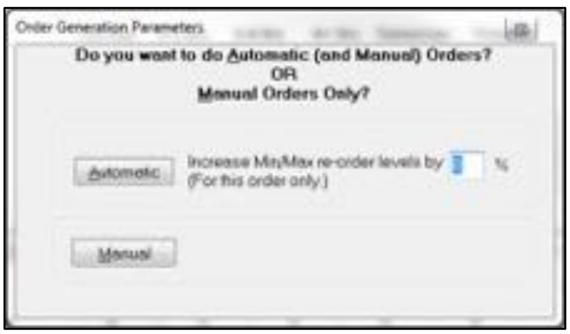
Drug Orders

The following section provides information on the requirements and set-up of File Transfer Protocol (FTP) vendor ordering and receiving. Detailed instructions are given on how to upload drug orders and how to download invoices into your system.

Creating a Drug Order

1. From the **Alt-X Start** screen, go to **Utilities** > **Drug Ordering** > **Generate Order**.

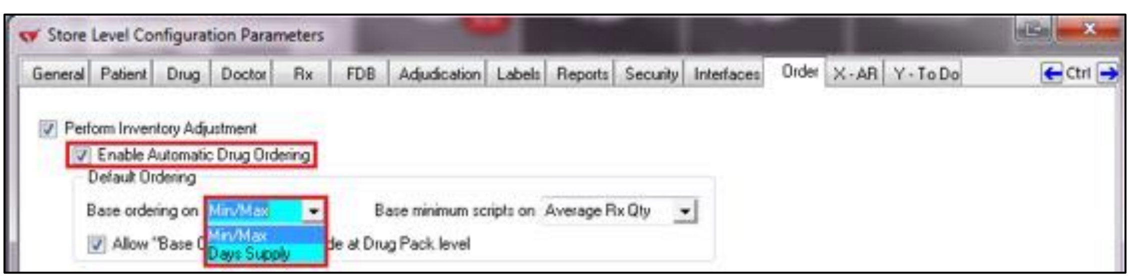
2. A prompt will appearing asking if you want to generate an **Automatic** or **Manual** order. Select **Automatic** to generate an order based on the **Min/Max** or **Days Supply** values in the Drug card; select **Manual** to generate an order from the wholesaler catalog.



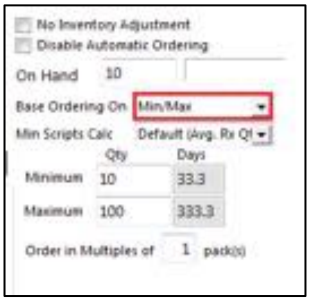
NOTE: A percentage field is available for instances where you want to inflate the quantity of drugs being ordered for all items in the order. For example, '**Increase Min/Max re-order levels by 10% (For this order only)**' would cause the order quantity to increase by 10% for all items in the order.

Automatic Orders (Perpetual Inventory)

Automatic ordering can only be performed when the option **Enable Automatic Drug Ordering** is enabled in **File** > **Configuration** > **Store** > **Order**.

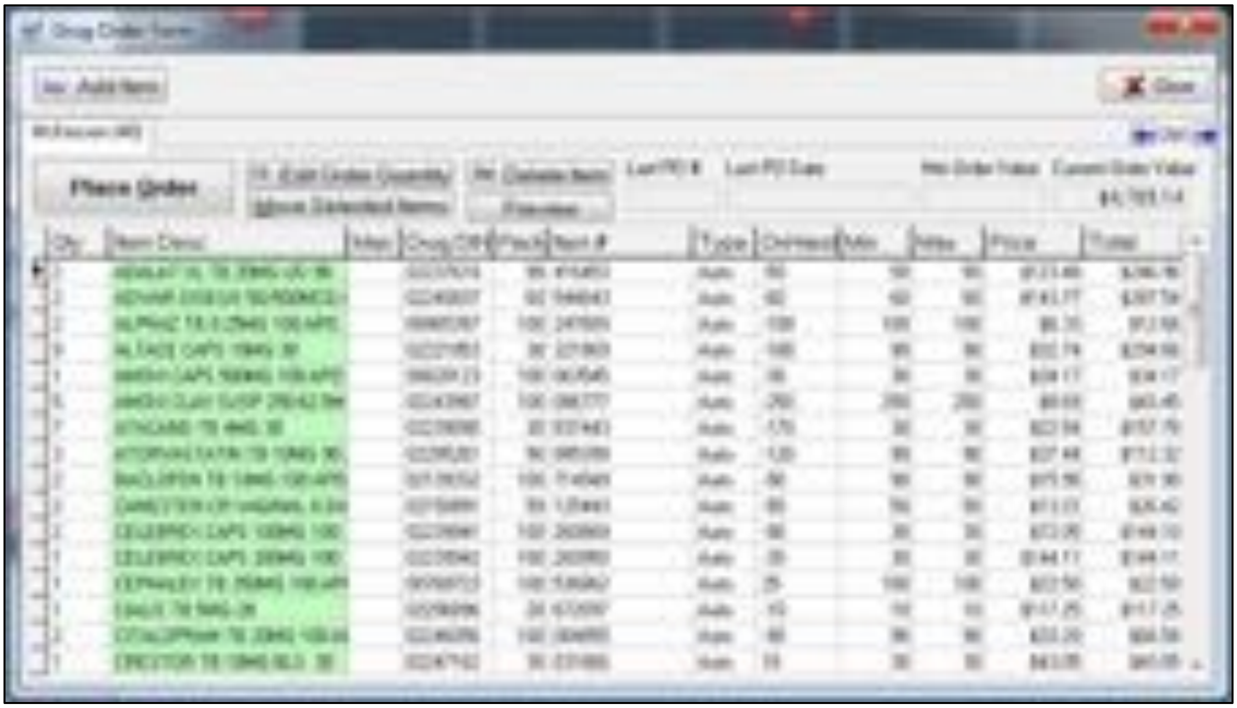


If you select **Min/Max** from the **Base ordering on** dropdown menu, automatic ordering will occur when the **Min/Max** values on the Drug card are below minimum.



If you select **Days Supply** from the **Base ordering on** dropdown menu, automatic ordering will occur when the **Days** value on the Drug card is below minimum. This value is determined by the average sales levels of the drug.

If **Automatic** ordering is selected, the system will check all drugs with automatic ordering enabled and generate a suggested order similar to the one below:



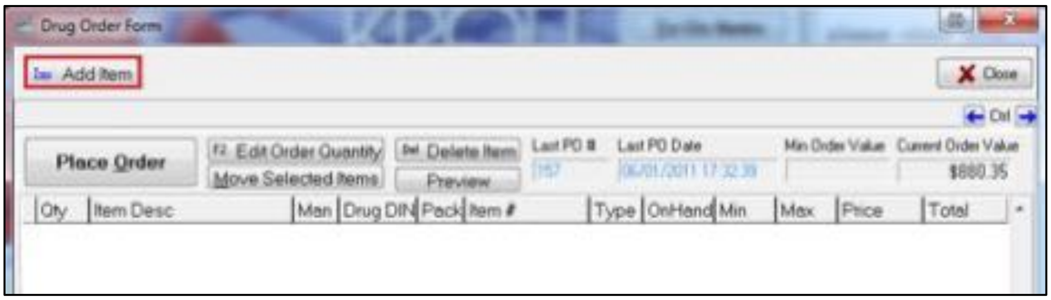
NOTE: Drugs that have an **On Hand** value lower than the **Minimum** will be placed on order given that the drug has automatic ordering enabled. The **Minimum** value is either entered manually by you or calculated based on the days' supply (i.e., usage).

Manual Orders

If **Manual** ordering is selected, you can choose specific items from the catalog to be placed on order instead of having the system auto-generate a suggested order based on min/max and on-hand values.

Method 1: Ordering from the Drug Order Form

1. Click **Add Item** to access the wholesaler catalog.



2. The **Insert Order Item** screen will appear. You can search for items from this screen using the following criteria:

- Description
- Drug Identification Number (DIN)
- Item Number
- Pack Size
- UPC

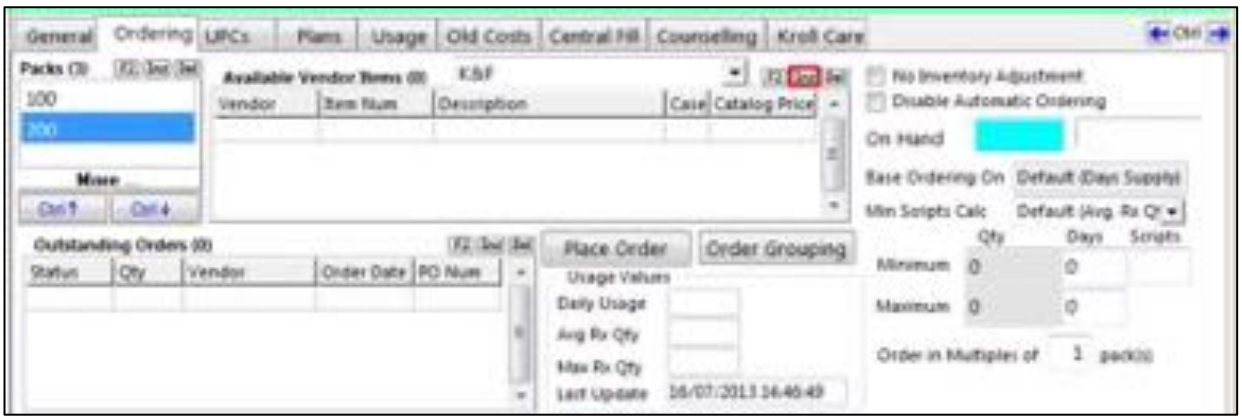
NOTE: The method used to search for drugs in the wholesaler catalog is differing from the method used to search for drugs in Kroll. For example, if you are searching for Altace 10mg, typing "Altace, 10" in the description field will yield 'no items found'.

3. Highlight the drug and click **Select** to add it to the order.

4. Enter the quantity you want ordered and click **OK**.

Ordering from the Drug Card

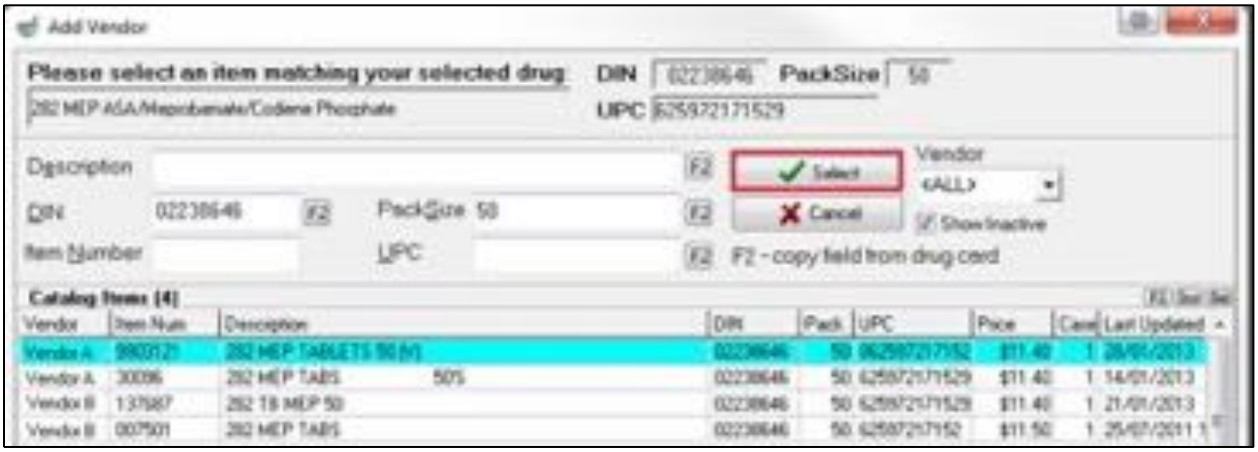
1. Bring up the drug you want to order in the Drug card. Access the **Ordering** tab and click **Ins** in the **Available Vendor Items** section.



2. Select the appropriate vendor from the **Vendor** dropdown menu.

3. Enter the item number in the **Item Number** field and click **Save**. Or, click **Select From Catalog** to select the drug from the catalog.

a. If you chose **Select From Catalog**, highlight the drug from the **Catalog Items** list and click **Select**.



4. The item will be added to the **Available Vendor Items** list on the Drug card.

Min/Max Versus Days Supply Ordering

There are two ways to set re-order points for drug products in the Kroll Pharmacy Software: **Min/Max Ordering** versus **Days Supply Ordering**. In both scenarios, a drug will be placed on order when the **On Hand** value drops below the **Minimum** value, given the drug is activated for automatic ordering in the system. A **Maximum** value can be entered optionally, and instructs the system to order up-until a certain value when the On Hand drops below the minimum. The benefits of **Min/Max Ordering** versus **Days Supply Ordering** are explained in the following sections.

Min/Max Pros and Cons

When **Min/Max Ordering** is turned on, the **Ordering** tab of the drug card will have the **Days** fields greyed out because minimum and maximum values are populated manually by you and are independent of drug usage.

Potential Benefits of Min/Max Ordering

You can control the exact point at which a drug is reordered by setting the ***Minimum*** value. The **Minimum/Maximum** values do not change once they are sent because the values are independent of usage. This is particularly useful for drugs that need to be overstocked or under-stocked.

Potential Drawbacks of Min/Max Ordering

Minimum and **Maximum** values have to be set manually for each drug record because dosage formats and usage will vary from product to product. **Minimum** and **Maximum** values do not change once they are set, so users must manually adjust min/max values during spikes or dips in product usage.

Days Supply Pros and Cons

When **Days Supply** ordering is activated, the **Ordering** tab of the drug record will have the **Minimum** and **Maximum** fields greyed out and the **Days** fields open. The **Min/Max** fields are now calculated values based on the day's supply. You cannot directly manipulate the **Min/Max** fields and must instead base reorder points on the day's supply they would like to stock.

Potential Benefits of Days Supply Ordering

With **Days Supply** ordering, reorder points are dynamic values that increase or decrease depending on how often the drug is dispensed within the days supply indicated. This is particularly useful for cyclical drugs like allergy medications that are dispensed frequently during some parts of the year, but less during others.

Users do not have to manually input min/max values for each drug record because they will be calculated based on the days supply that is set globally.

Potential Drawbacks of Days Supply Ordering

The Minimum and Maximum fields are not open for manipulation as they are now calculated values; this means users have less control over the exact point the drug is placed on order.

The Minimum and Maximum values change depending on how frequently the drug is dispensed; therefore, this may be a problem for products the pharmacy wishes to overstock or under-stock.

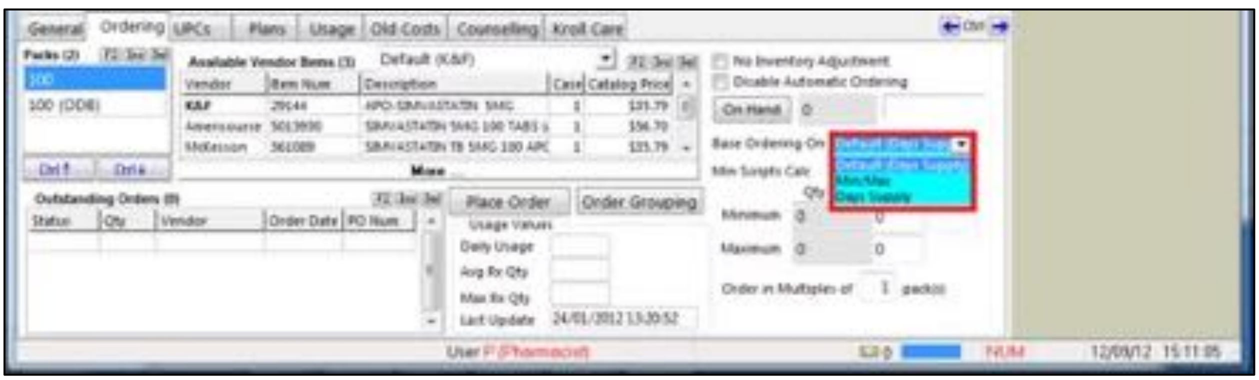
The Best of Both Worlds

Since there are advantages to using both Min/Max Ordering and Days Supply Ordering, the system has created a drug specific configuration that allows some drug records to use Min/Max reorder points, while others use Days Supply reorder points.

NOTE: Generally, all drugs will default to use Days Supply Ordering, but users can manually override this configuration to use Min/Max Ordering for exception drug records.

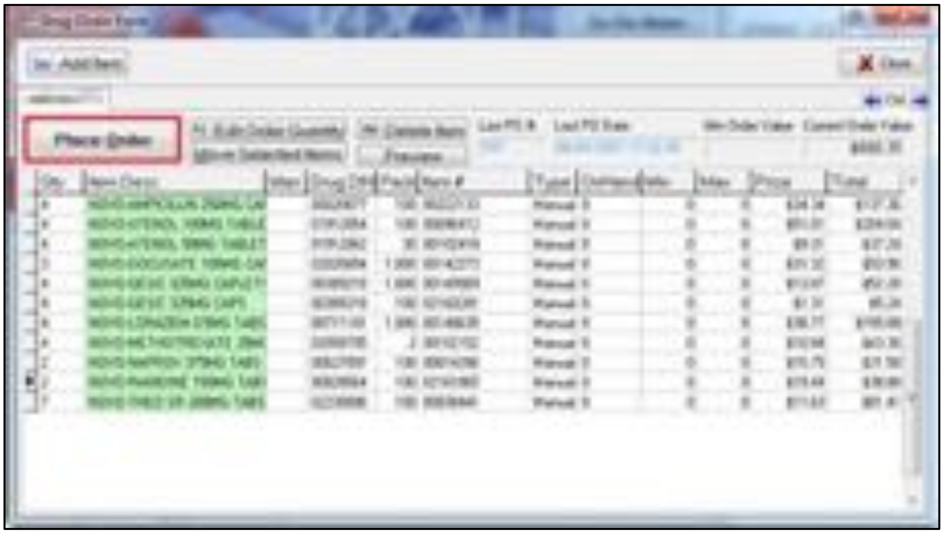
To override Days Supply Ordering with Min/Max Ordering:

1. Use the **F5 - Drug** search screen to call up the applicable drug record.
2. Select the **Ordering** tab.
3. Locate the **Base Ordering On** field and click on the down arrow to select **Min/Max**. Once **Min/Max** is selected, the **Days** fields will be greyed out and you **Minimum** and **Maximum** fields will open up for manual manipulation.

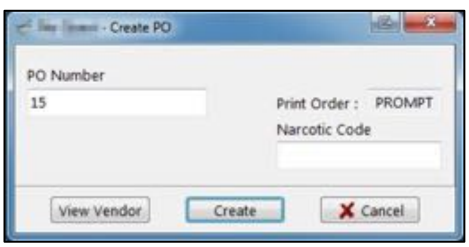


Sending a Drug Order

1. Click on **Place Order** from the **Drug Order Form** to call up the **Create Purchase Order** screen.



2. A purchase order (PO) number will automatically be assigned to the order if you enabled **Auto Increment PO Numbers** in **File** > **Configuration** > **Store** > **Order**. If this option is not enabled, enter a PO number in the **PO Number** field. Click **OK** or press **Enter** to proceed.

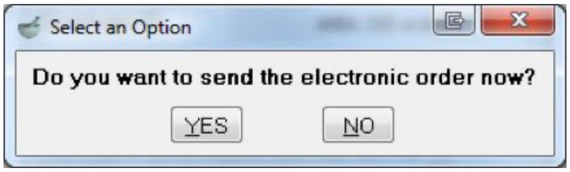


If the vendor considers one or more items in your order to be a narcotic, enter the vendor-specific narcotic code in the **Narcotic Code** field.

NOTE: Click **View Vendor** to view the vendor settings. Details listed on this screen are for information purposes only and cannot be edited.

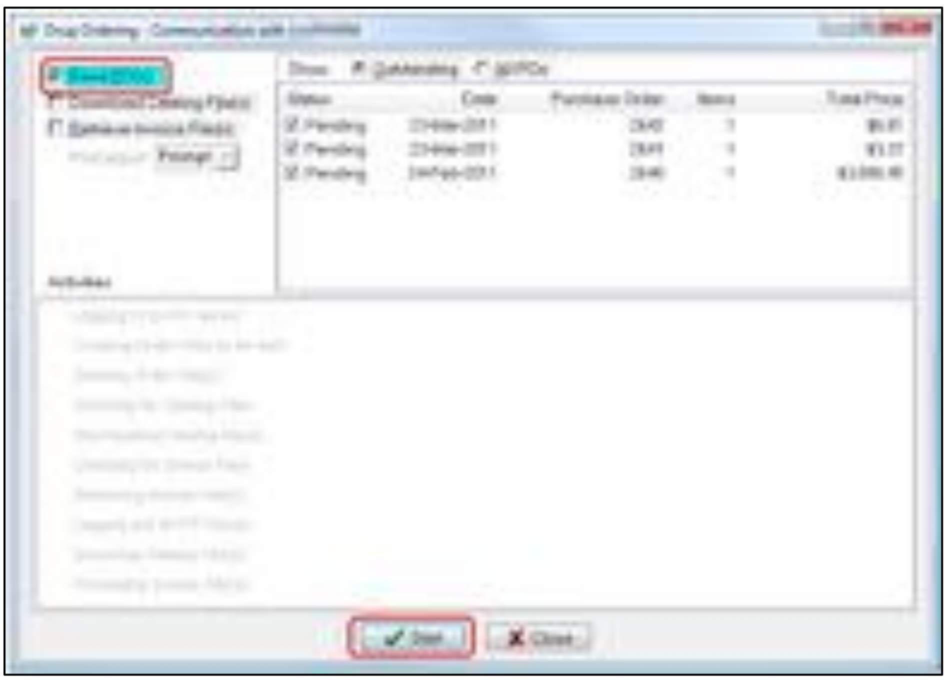
3. Click **Create** or press **Enter** on the keyboard to generate the order so that it can be sent electronically to the Vendor.

4. Answer **Yes** when asked '**Do you want to send the electronic order now?**'



NOTE: Answering **No** will place the order into **Pending Orders** so that it can be sent at a later stage from **Utilities** > **Drug Ordering** > **Communication with** > **[Vendor name]**.

5. Click **Start** or press **Enter** from **Drug Ordering** > **Communication with** > **[Vendor name]**. This will begin the process of sending the PO to the vendor.



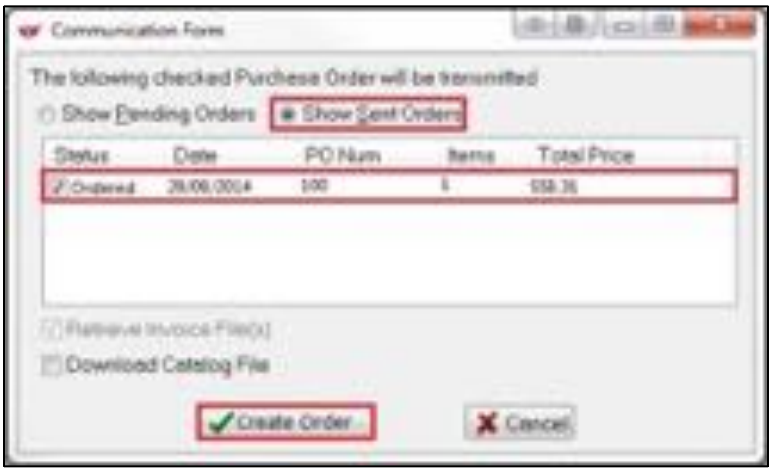
6. As the purchase order is being sent to the vendor, the **Activities** portion of the screen will begin to populate with the status of actions being taken.

7. When the order has been transmitted successfully, click **Finish** or press **Enter** to close the communication screen.

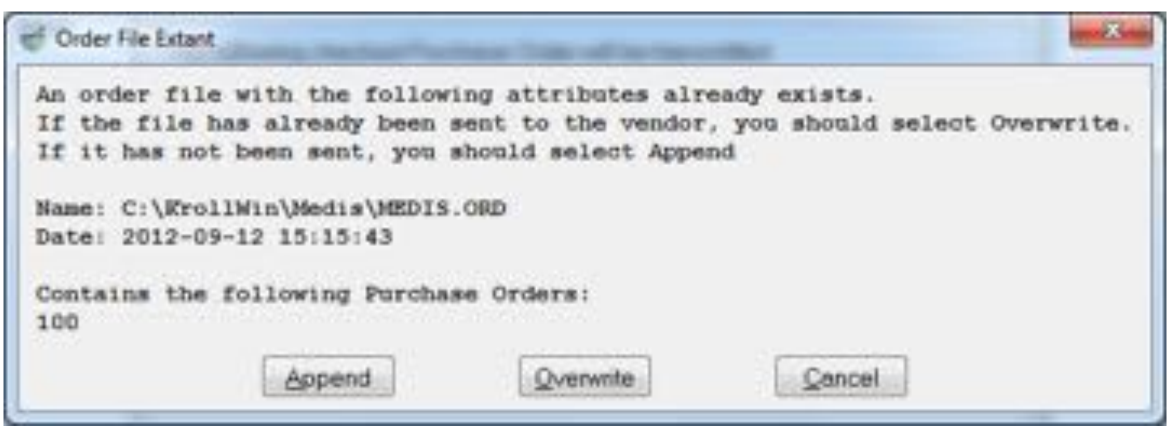
Resending and Ordering

You may need to resend an order if it does not transmit properly on the first try.

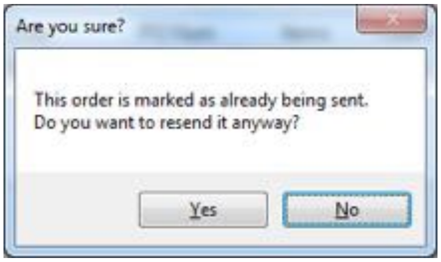
1. From the **Alt-X Start** screen, go to **Utilities** > **Drug Ordering** > **Communicate With** > **[Vendor]** > **Recreate Purchase Order**.
2. The communication form for the selected vendor will appear. Select **Show Sent Orders.**
3. Place a checkmark next to the order that needs to be re-sent.
4. Click **Create Order** or press **Enter** on the keyboard.



If an existing order is still waiting to be sent a prompt will occur asking to append to that current order or to Overwrite the existing order, answer accordingly.



You is then prompted to confirm re-sending the order. Click **Yes** or Press **Y** on the keyboard.



A final confirmation screen will appear with the new order file details.

Receiving a Drug Order

Once the pharmacy physically receives their drug order from the wholesaler, the order must be received into the Kroll Pharmacy Software to update **On Hand** values and **Pricing**. An order can be received electronically (i.e. based on the vendor's invoice download) or manually (i.e., based on the purchase order generated by you).

The process of retrieving invoice files consists of three tasks:

- Checking for invoice files
- Retrieving invoice files
- Processing invoice files

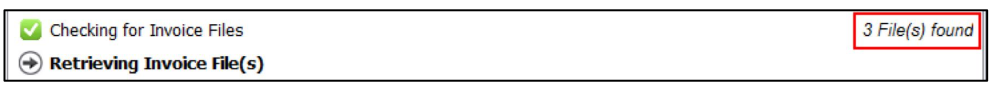
Checking for Invoice File(s) and **Retrieving Invoice File(s)** are done in sequence. The **Processing Invoice File(s)** task is executed after logging out of the vendor's server.

Checking for Invoice Files

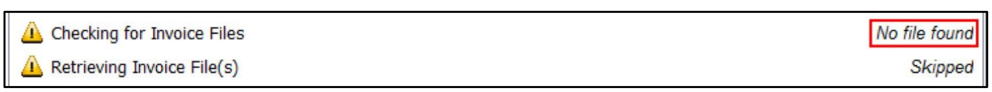
Each vendor has a unique invoice file naming convention.

Similar with other tasks, the information panel will show when the **Checking for Invoice File(s)** task is in progress.

When the **Checking for Invoice File(s)** task is complete, the information panel will show a status of **Completed**, along with the number of invoice files that were found.

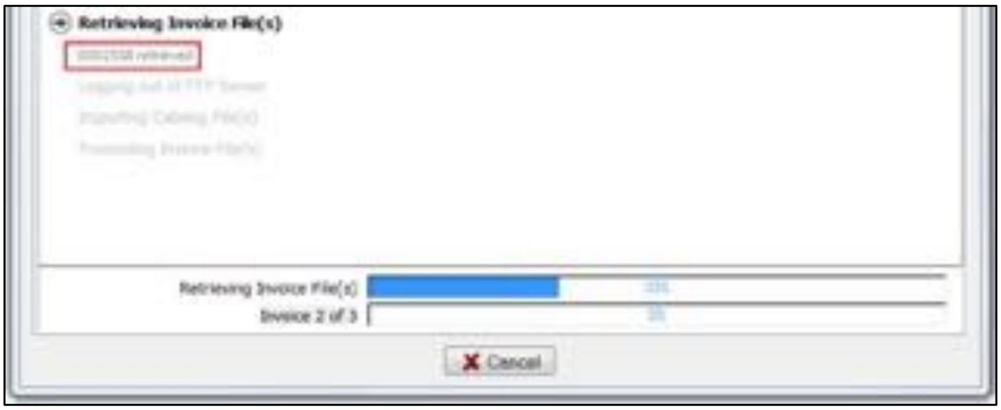


If no files were found, the **Retrieving Invoice File(s)** task will be skipped since there are no files to retrieve. Later, the **Processing Invoice File(s)** task will be skipped as well.



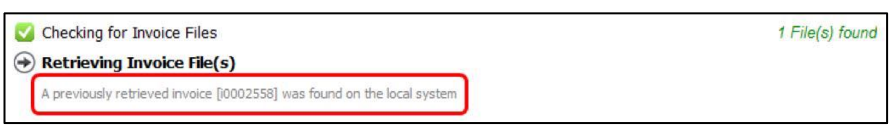
Retrieving Invoice Files

If invoice files were found during the **Checking for Invoice Files** task, the **Retrieve Invoice File(s)** activity will automatically initiate. As soon as each file is retrieved, the information panel will show the corresponding filename. You can follow the progress of each file being retrieved on the top progress bar; the bottom progress bar tracks what percentage of all invoices has been retrieved.



The invoice files will be temporarily saved in the designated vendor directory. The invoices will be saved in this folder until they are updated into the Kroll system.

If an invoice file was retrieved from the vendor's server, but was not processed because you cancelled it, it will be picked up in the next communication process.

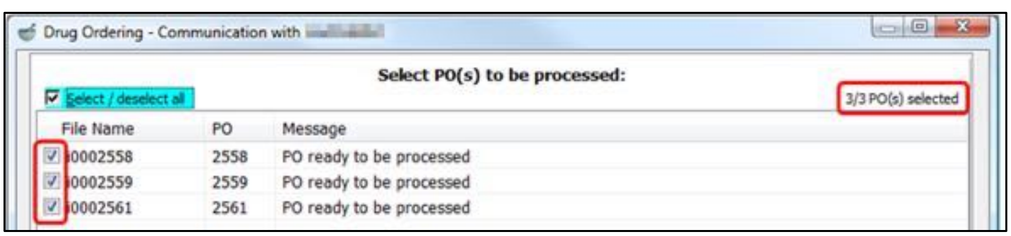


Processing Invoice Files

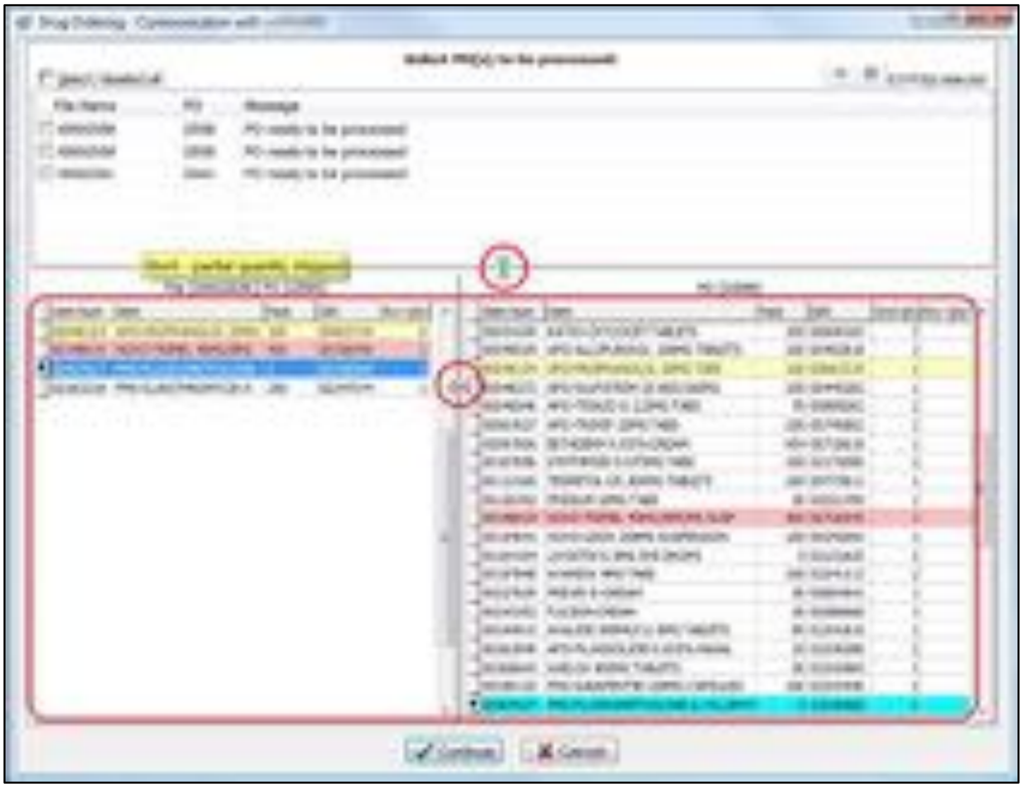
If invoice files were found and retrieved, the **Processing Invoice File(s)** activity will be automatically initiated. At this point, the communication process will try to match information in the invoice file to a purchase order in Kroll. When the process finds a match between an invoice file and a Kroll PO, you will see a screen similar to the one below:

The above screen contains a top panel and a bottom panel. The top panel shows a list of retrieved invoice files with associated PO numbers. As well, an information message is shown to the left of the PO number; this message will help you decide which file to process.

There is a checkbox on the upper left hand side of the screen that helps you select or deselect all invoice files/POs in the list. As well, there is an indicator on the upper right hand side that indicates x of y PO(s) have been selected.



The bottom panel shows a left and right grid; the information displayed is related to one of the invoice files shown in the top panel. The left grid shows the information contained in the invoice file. The right grid shows all the items within a PO in Kroll. You can resize the panels to show more or less information.

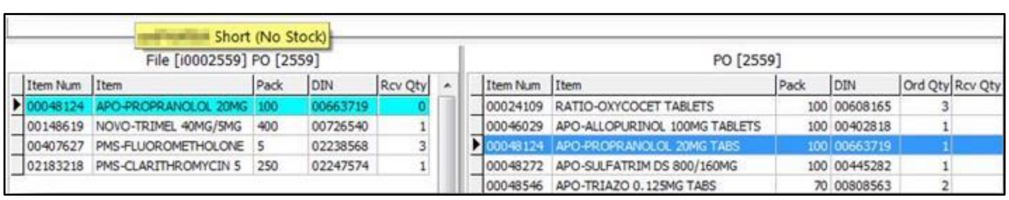


In the above screen, the invoice file on the left (i0002559) is associated with PO 2559 on the right. The invoice file contains only four items. The idea is to allow you to see information inside the invoice file compared to information in the PO before the file is processed. Clicking on any item on either side of the grid will highlight the corresponding item on the opposite side if available.

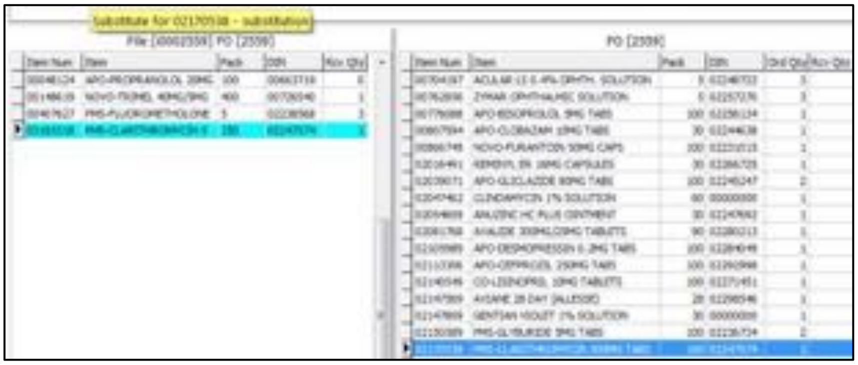
Looking at the right-hand grid above, item 00148619 (NOVO-TRIMEL 40MG/5ML SUSP), which is highlighted in red, was ordered for one pack (Ord Qty column). Comparing with the left grid, we can see that the received quantity (Rcv Qty column) is also one pack, which means everything ordered was received.

Looking at the right-hand grid below, item 00407627 (PMS-FLUOROMETHOLONE 0.1%), which is highlighted in aqua, was ordered for four packs, but the invoice file indicates that the vendor only sent three packs. Take note of the floating yellow message that reads “Short-Partial quantity shipped”.

Looking at the right-hand grid below, item 000481124 (APO-PROPRANOLOL 20MG), which is highlighted in aqua, is out of stock and nothing was shipped, although the left-hand grid indicates that one pack was ordered. Take note of the floating yellow message that reads “[Vendor name] Short (No Stock)”.



On the right-hand grid below, item 02170538 (PMS-CLARITHROMYCIN 500MG TABS) was ordered, but the invoice file on the left indicates that the vendor sent item 02170530 as a substitution. Take note of the floating yellow box that reads “Substitute for 02170538 – substitution”. The vendor will only send substitutions for customers that provide consent to do so.



When the **Processing Invoice File(s)** task does not find a matching PO in Kroll, you must decide what to do with the invoice. You will see a screen similar to the one below.

There are three options to choose from:

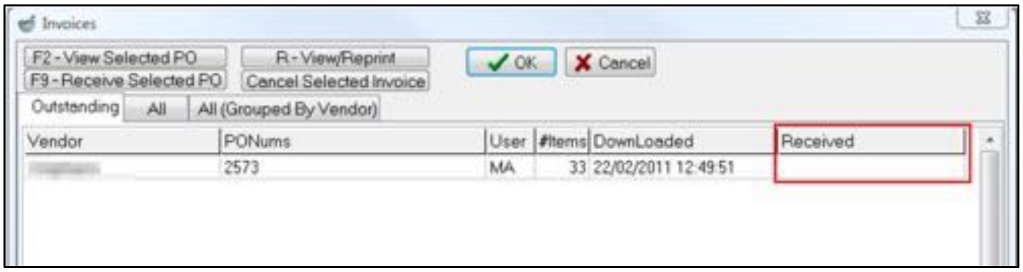
- **Treat as no stock received**: This option will receive the invoice file, taking into consideration that no equivalent PO exists in Kroll; however, no on-hand quantities will be updated; only catalog prices will be updated, if necessary. This option should be used when an order was placed outside of the Kroll application for items that do not have inventory and prices monitored within Kroll (e.g., OTC items).

- **Treat like non-PO receive**: This option will receive the invoice file, taking into consideration that no equivalent PO exits in Kroll, and the process will update the on-hand quantity and prices for associated drug packs, if available. This option should be used when an order was placed outside of the Kroll application for items that have inventory and prices monitored within Kroll (e.g., Rx order sent directly from the vendor's website).

- **Skip this PO**: This option means the invoice file will not be processed and will remain outstanding.

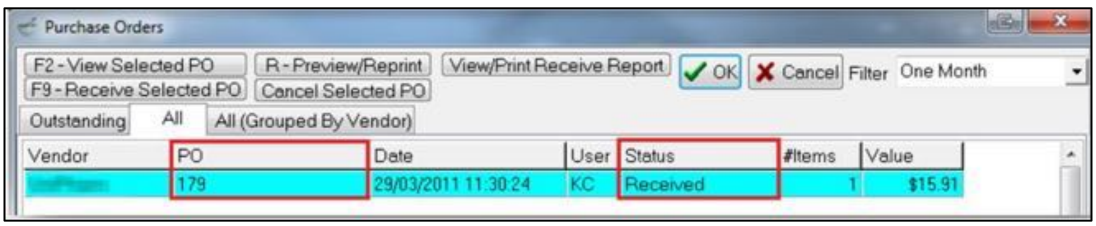
To set a default action for this option, go to **Utilities** > **Drug Ordering** > **Edit Vendor List** > **[Vendor name]** > **Receiving** and select the appropriate option from the **Default Action when PO not found** dropdown menu.

If you do not select an invoice file/PO equivalent, the invoice will sit in **Utilities** > **Drug Ordering** > **Electronic Invoice Receiving** with no **Received** date.



Processing an invoice consists of four steps:

5. **Update Purchase Order information in Kroll**: In this step, the purchase order status will be set to "Received" or "Partially Received". This step will not be executed when the file/PO is configured to be treated like a non-PO receive, or no stock received.



6. **Update Drug Pack Prices**: In this step, the system will look at the **Receiving** settings set in **Utilities** > **Drug Ordering** > **Edit Vendor List** > **[Vendor name]** > **Receiving** to determine if and where drug pack prices are updated. This step will not be executed when the file/PO is configured to be treated as "no stock received".

7. **Adjust Drug Pack Inventory**: In this step, the on-hand quantity of a drug pack will be adjusted if the following settings are in place:
    - **Perform Inventory Adjustment** in **File** > **Configuration** > **Store** > **Order** must be turned on.
    - **No Inventory Adjustment** in the Ordering tab on the Drug card must be turned off. This step will not be executed when the file/PO is configured to be treated as "no stock received".

8. **Update Catalog Prices**: In this step, the system will look at the **Catalog File Loading** rules set in **Utilities** > **Drug Ordering** > **Edit Vendor List** > **[Vendor name]** to determine if and where drug pack prices are updated via the catalog.

When the **Processing Invoice File(s)** task is complete, the status will show as **Completed** and the information panel will display the message "**### End of Activities ###**". As well, two new buttons, **Retry** and **Finish**, will appear at the bottom of the communication screen to indicate that communication has finished. Click **Finish** or press Enter on the keyboard to close the communication screen. Click **Retry** or press **CTRL+R** to start another communication with the vendor.

New Rxs

The prescription filling process is a well-defined series of steps that pharmacy users carry out to produce prescriptions for our patients. The Kroll Pharmacy Software is designed to work with the established prescription filling process to provide the safest, most efficient and reliable prescriptions and services to our patients. Different types of prescriptions are filled every day in the pharmacy (e.g., new Rxs, on hold Rxs, refill Rx, OTC to profile Rxs, professional service Rxs, etc.) and will be explained in the following sections. The steps for filling a new Rx are as follows:

- Drop-Off
- Input
- Fill
- Check
- Release
- Sell

Drop-Off

There are a number of fields and options available from the F11 - Drop-Off window. However, the following steps must be performed at the Drop-Off stage to ensure patient safety and to proceed to the next Rx Processing Stage in the system:

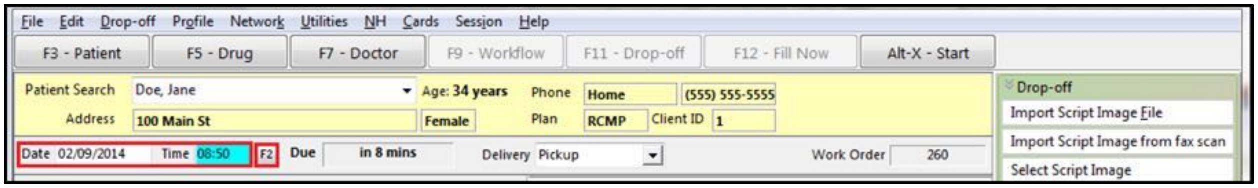
a) Search and select a patient record
b) Review the patient medication history
c) Indicate a prescription due time (i.e., pick up time),
d) Select a status for the prescription (i.e., Fill, Unfill, Not Disp, Stock Transfer)
e) Scan the written prescription into the system
f) Indicate the number of Rxs on the written prescription

Pharmacy Assistants, Pharmacy Technicians, and Pharmacists can Drop-Off prescriptions into the system as follows:

1. From the **ALT+X Start** screen, click **F11 - Drop-Off** or press **F11** on the keyboard.

2. The cursor will default to the **Patient Search Field**; search and select the applicable patient record (see Searching for a Patient from the F11-Drop Off Screen). Users should not continue the Drop-off process without entering a patient record.

3. Select a wait time from the **Priority** menu. If you want to enter a custom wait time, click the **F2** button. **Date** and **Time** fields will appear, allowing you to enter custom wait time information.



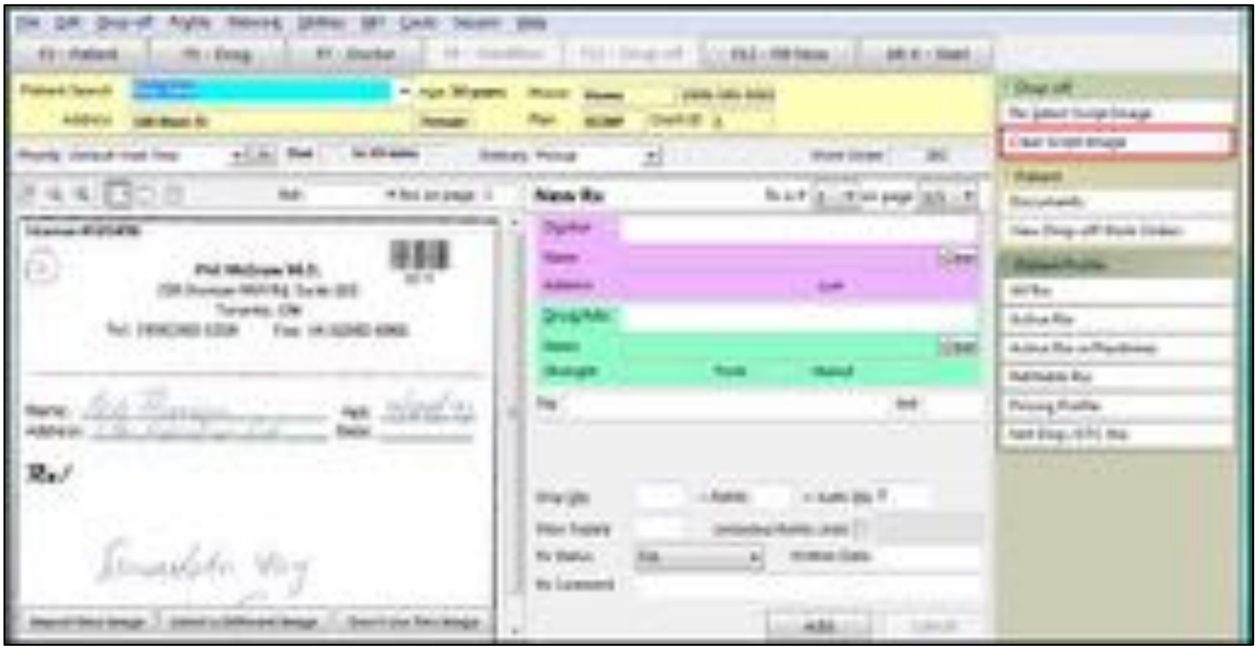
The **Delivery** field will default to **Pickup**.

4. Once an Rx barcode sticker has been adhered to the written prescription, feed it into the document scanner and click the **Import Script Image File** button or select **Select Script Image** from the right navigation pane. If the prescription was faxed to the pharmacy, select **Import Script Image from fax scan** which allows you to select and attach a faxed image to the work order.

5. Once the image has been scanned into the system you can choose to **Crop**, **Flip**, **Rotate** and/or **Fit to Window**. Once the necessary changes have been made, click **Save** or press **Enter** on the keyboard to insert the image into the Drop-off screen.

6. Enter the number of medications on the written prescription in the **# of Rxs On Page** field. This will tell the system how many Rxs are associated with the Rx image.

7. To **Clear** (i.e. delete) or **Re-Scan** a script image, select **Clear Script Image** from the right navigation pane. This will remove the existing image and allow you to re-scan the old image or scan a new image.



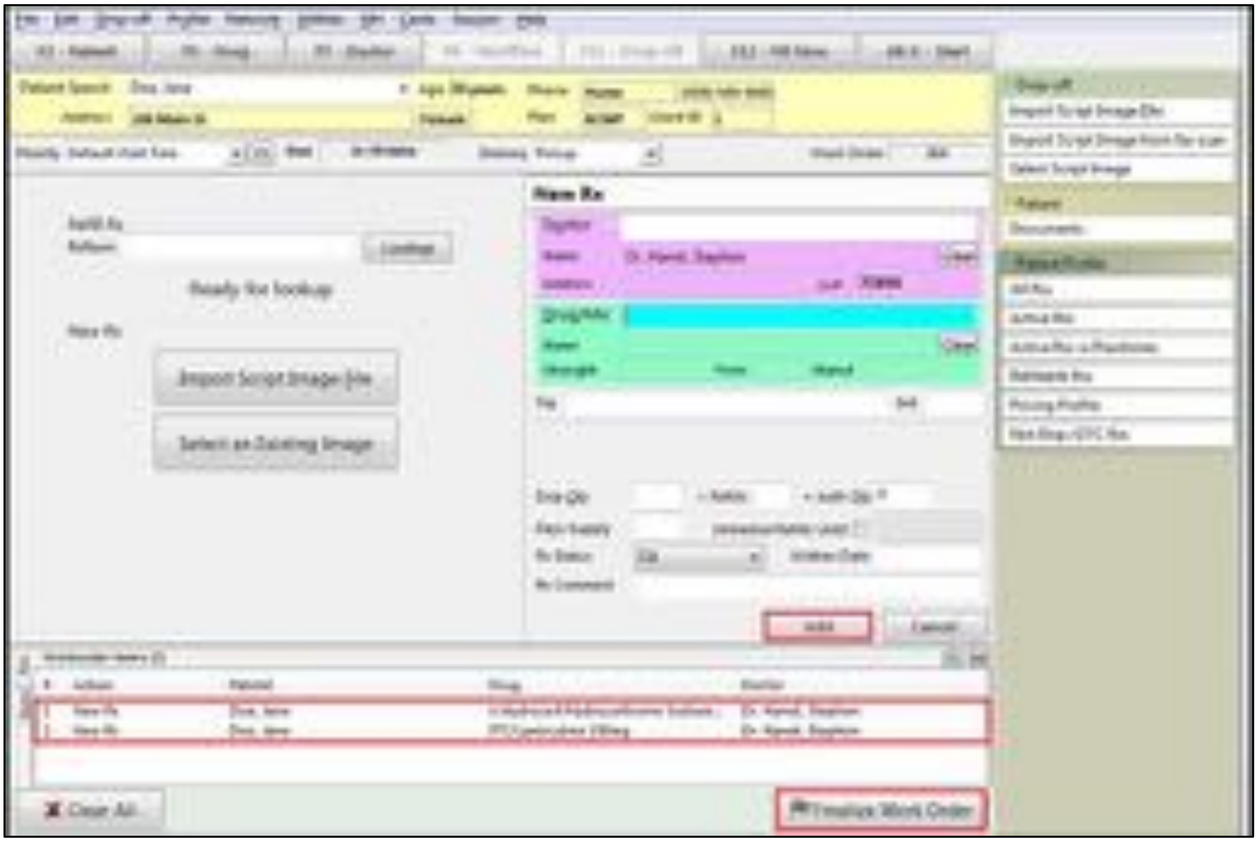
8. Select an **Rx Status** from the menu:

- **Fill**: Process and dispense the Rx
- **Unfill**: Put the Rx on hold
- **Not Disp**: Mark the Rx as OTC to Profile
- **Stock Transfer**: Mark the Rx as a stock transfer to another pharmacy

9. Enter any workflow-specific notes in the **Note** tab located near the bottom of the screen. The note will be displayed a t each Rx filling stage for the prescription.

10. Click **Add** to create the work order. The Rx will appear in the **Workorder items** pane.

11. Repeat steps 10-11 for each Rx you want to add to the work order for that patient. When you are finished, click **Finalize Work Order**.



Once **Finalize Work Order** is selected, a blank **F11-Drop-Off** screen will appear to allow another work order to be dropped.

NOTE: If, for whatever reason, you are not able to scan the script image into the system, you can instead enter a Drug/Mixture, Doctor, Dispense Quantity, Days Supply, and Sig.

Tracking a Work Order after Drop-Off

Once a work order for a new Rx has been dropped off it will proceed to the **Enter** stage. You can access the **F9-Workflow** window from the **ALT+X-Start** screen by clicking **F9-Workflow** or by pressing **F9** on the keyboard.

The dropped order will appear in the **Enter** queue under the applicable due-time column. Additionally, there will be a list of **Rxs in Progress** on the lower half of the window for users to see which orders are coming up next in the selected queue. Entries on the lower half of the window are for information purposes only, users cannot change the work order due time on any of the entries listed.

Enter

The **Enter** stage is where you enter prescription information such as Drug, SIG, Dispense Quantity, Intervention Codes, etc. into the system for processing. Extra care taken at this point will ensure that the work order passes through the **Check** quickly without having to make time consuming changes later on. Typically, **Enter** should be performed by a Pharmacy Assistant, but can also be performed by Licensed Technicians and Pharmacists.

1. Select **F9 - Workflow** from the **Alt-X Start** screen.

2. Click **Enter** to display the enter queue.

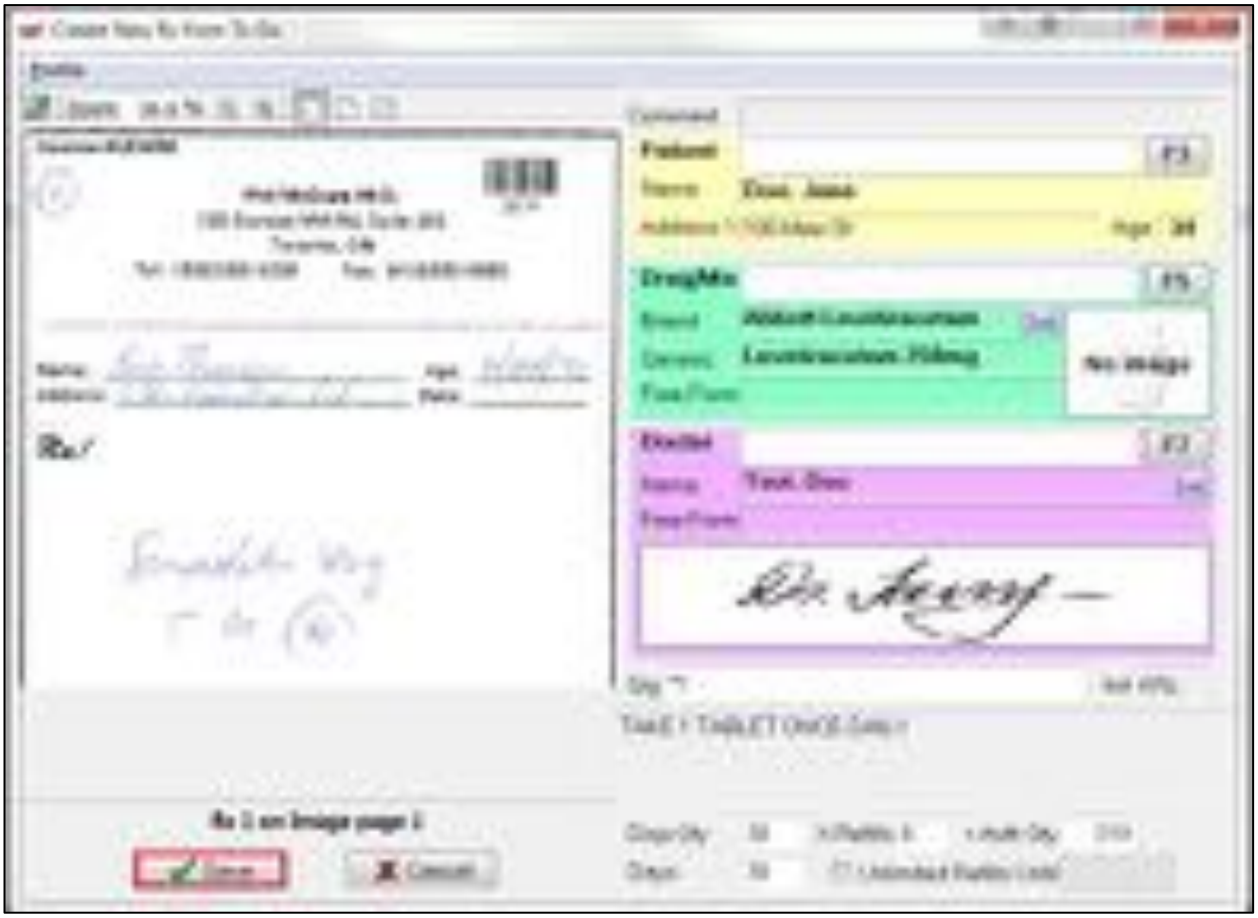
3. Click **Get Work** to view the work orders that need inputting. Work orders are always presented to you in priority sequence according to the due time assigned to the work order. Double-click the Rx you want to input.

4. The **Create New Rx From To Do** screen will appear. Search and select the appropriate drug record from the **Drug/Mix** search field and appropriate prescriber from the **Doctor** search field.

5. Enter dispensing information for the prescription:
   - **SIG**: Enter the Sig in the SIG field and the expansion will appear in read only format in the grey box below.
   - **Disp Qty**: Enter the dispense quantity for the prescription.
   - **Days**: Enter the day's supply for the dispense quantity indicated.
   - **Refills**: Enter the number of refills on the prescription.
   - **Auth Qty**: The authorized quantity field will auto-populate if the Disp Qty and Refills fields are filled out. If the Auth Qty field is blank, enter the total authorized quantity for the entire prescription.

- **Unlimited Refills Until**: Place a checkmark next to this flag if the prescription has unlimited refills until a specific date.

6. When you are finished, click **Save**.

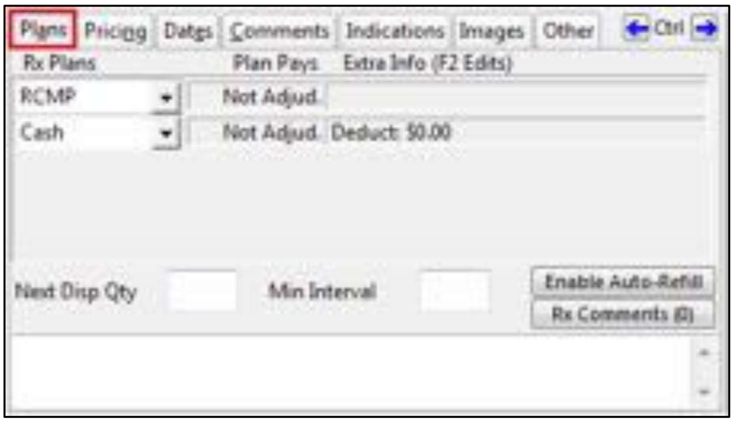


The Rx will appear in the **F12** screen.

F12 Screen Information Tabs

Plans

Users can select to exclude third party plans from the prescription, or change the order of billing from this tab (remove). The first plan listed is where the Rx is being billed to first; the second plan is where the Rx is billed to second, etc.



Next Disp Qty
Users can enter a new ***Dispense Quantity*** for the next refill (this is especially useful for trial prescriptions where the first order has a lower dispensing quantity than the next).

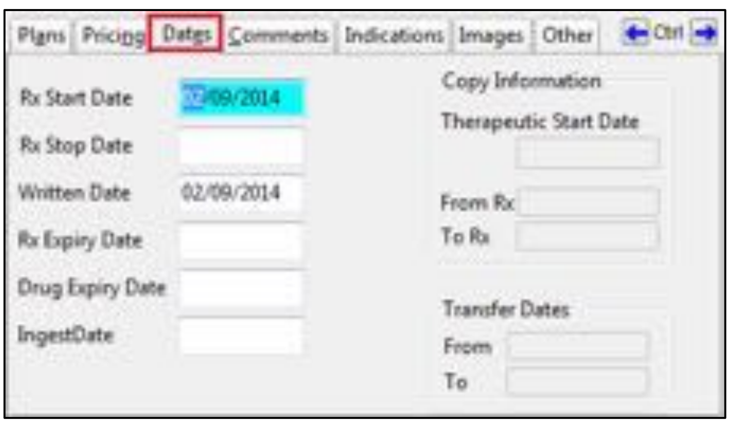
Min Interval
This field is used for narcotic prescriptions to prevent refilling until a specified number of days have elapsed.

The bottom field is used for entering prescription comments; enter a free form comment and it will be saved with the prescription record.

Pricing

The **Pricing** tab displays information regarding the pricing strategy used to calculate the Rx. Pricing strategies are set by home office and cannot be modified; however, if a pricing needs to be overridden, users can place a checkmark next to the **Manual Price** flag which will open up the Cost, Markup, Fee, Mix Fee and SSC fields for manual manipulation (Manual Pricing should only be used in emergency situations; incorrectly priced prescriptions should be reported to the Pharmacy Support Helpdesk so the root cause of the pricing issue is resolved at the root).

Dates



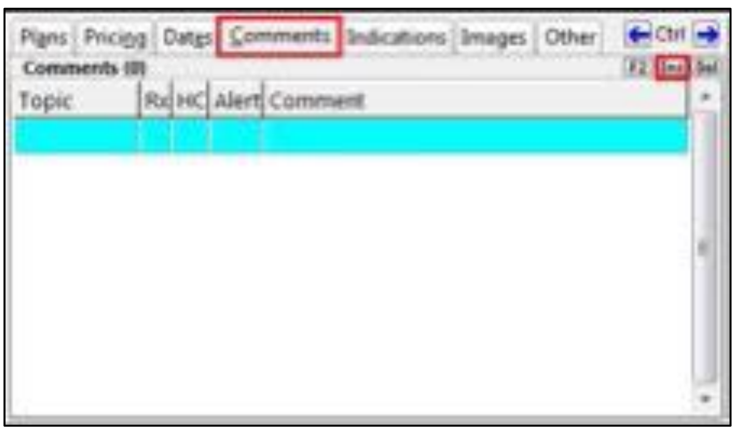
- **Rx Start Date**: This field will automatically be populated with the date the Rx was processed.
- **Rx Stop Date:** Optionally enter a stop date for the prescription. Users will not be able to fill the prescription past the stop date unless it is removed.
- **Written Date:** This field will be automatically populated with the date the Rx was processed, but can be overridden to whatever date the prescription was actually written.

- **Rx Expiry Date:** This field will be auto-populated depending on the drug schedule, the province the Rx was processed in, and the Written Date.
- **Drug Expiry Date**: You can optionally enter a drug expiry date for the prescription. If a date is entered here, it will be printed on the vial label so that the patient can also see the drug expiry. This option is especially useful for liquid antibiotics.
- **Ingest Date**: This field is used to record the ingest date for methadone prescriptions.

Comments

Comments can be quickly added under the **Plans** tab, however inserting an entry from the **Comments** tab allows you to activate certain configurations for the comment and allows you to enter more than one comment entry to the prescription.

To add a comment, click **Ins** or press the **Insert** key on your keyboard.

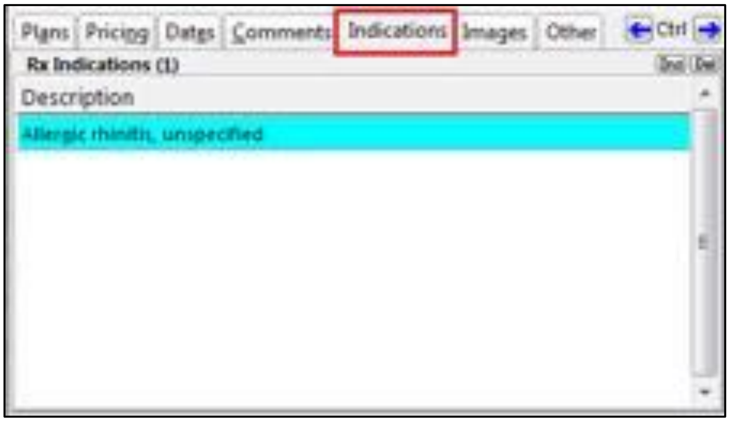


The **Rx Comment** window will appear. Select a **Topic** and enter the comment in the space provided.

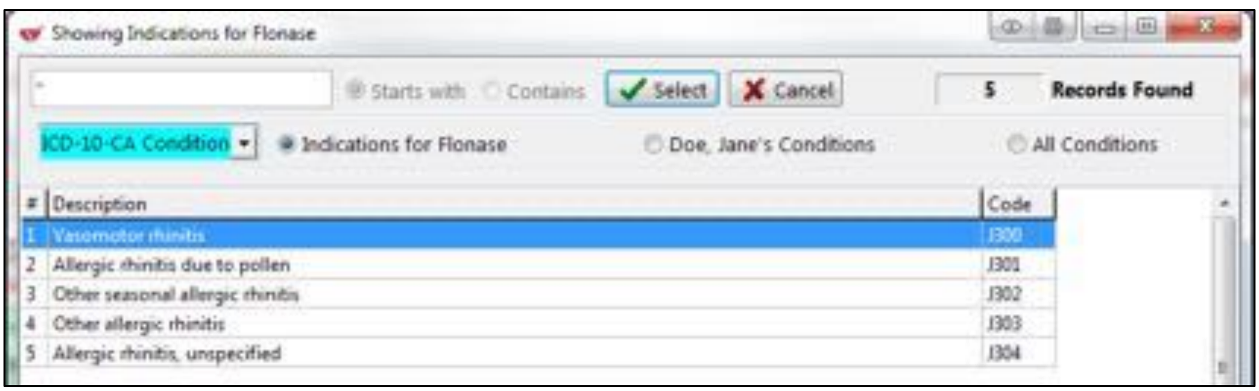
In addition to the regular comment options of **Show On Rx***,* **Alert**, and **Print On Hardcopy**, there are two additional comment options:

- **Keep Comments for Refill**: When this option is checked, the comment will also be saved for any refills against the prescription.
- **Keep Comments for Copied Rxs**: When this option is checked, the comment will be copied to a new prescription record if the original is copied.

Indications



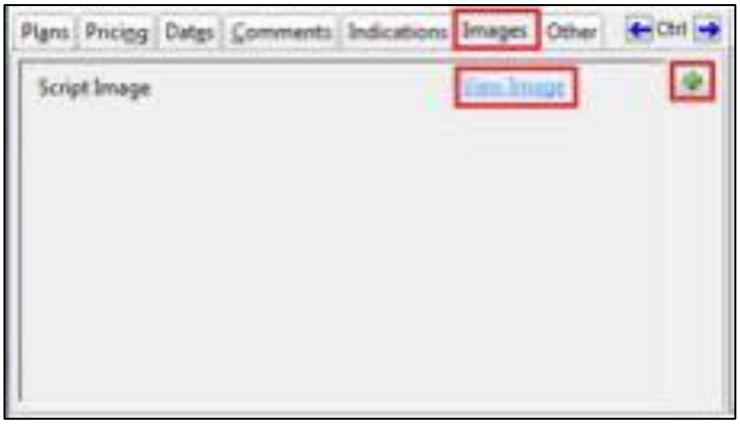
The **Indications** tab allows you to identify which condition the prescription is treating. When you click **Ins** or press **Insert** on your keyboard, a list of ICD- 10-CA and/or FDB conditions will be displayed.



Highlight the indication you want to apply to the prescription and click **Select**.

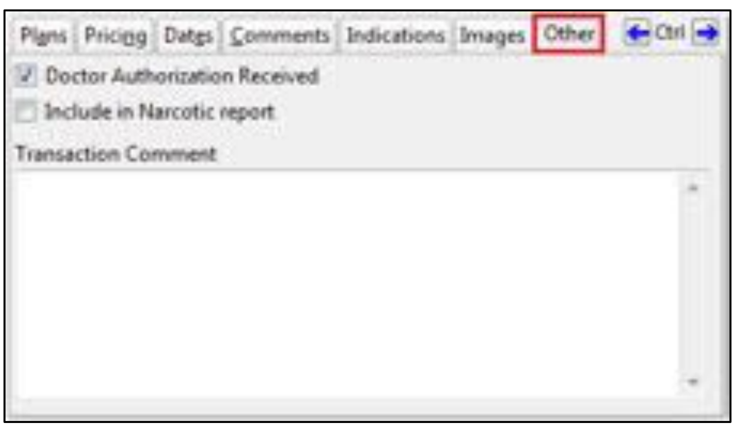
Images

The **Images** tab displays the script image that was scanned during Drop-Off. Click **View Image** to view the scanned image and **+** to add a new image.



Other

The **Other** tab indicates if Doctor Authorization has been received and if a Narcotic report will be printed for the Rx. A space to insert a comment is also provided.



Fill

1. Call up the **F9 - Workflow** screen and select the **Fill** queue.

2. All Rxs ready to be filled will be displayed. Click **Get Work** to view the next work order that needs to be filled.

3. The **Fill Rx** screen will be displayed. Scan the **UPC** or enter the **DIN** located on the stock bottle.

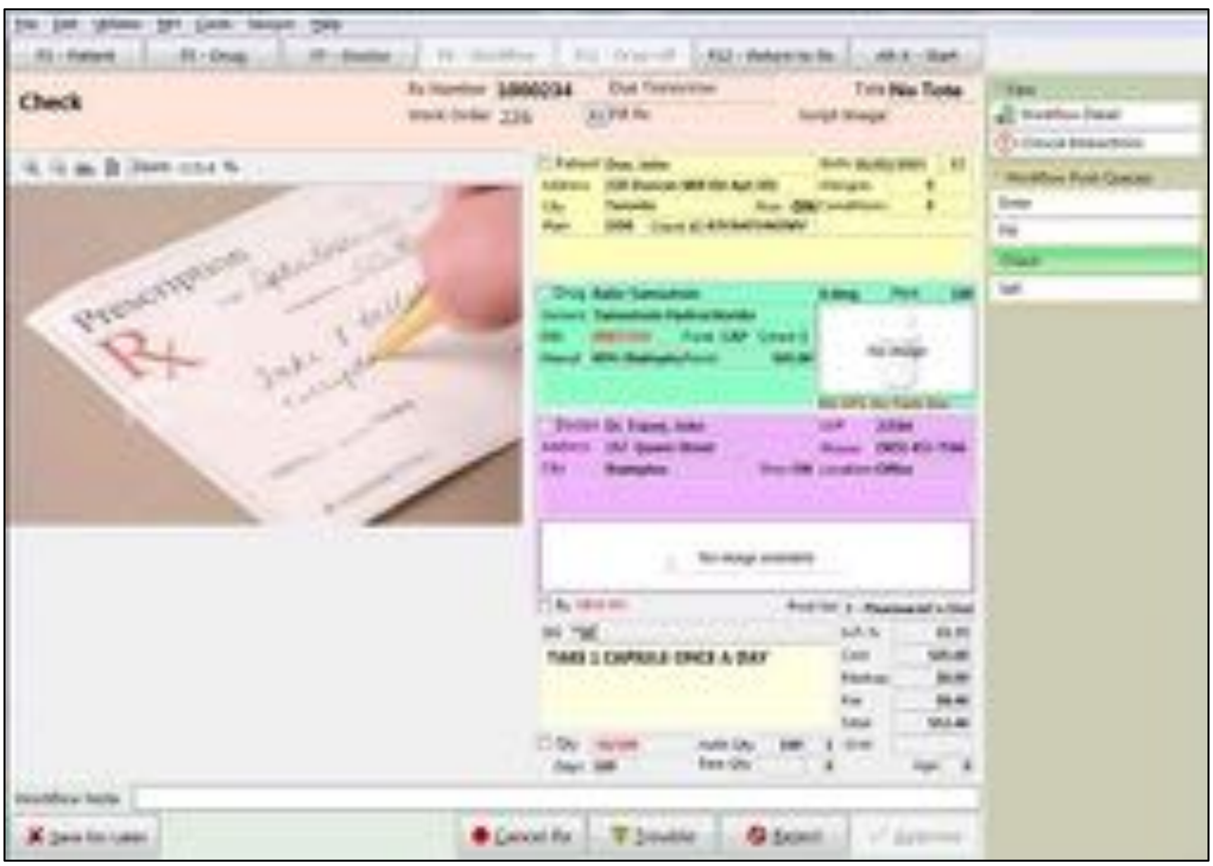
4. Enter the dispensed quantity in the **Qty** field.

5. If a balance owing is required, click the **Owe** button. If the order can be fulfilled, click **Packaged** to continue.

Check

The Check stage must be performed by a pharmacist or licensed technician. Check is the final check that is made before the prescription is bagged and filed away in the pickup drawers. At this point, you should be looking at the filled prescription and verifying that against the written prescription and the electronic drug image displayed on the screen.

6. Call up the **F9 - Workflow** screen and select the **Check** queue.
7. All Rxs ready to be verified will be displayed. Click **Get Work** to view the next work order that needs to be verified.
8. The **Check** screen will be displayed. Verify that the packaged prescription matches the electronic drug image and can select one of the following:
    a) **Save for Later**: Returns you to the **F9 - Workflow** screen.
    b) **Cancel Rx**: Reverses the prescription and marks it as Cancelled in the patient profile. Cancelled Rxs can be filled again later.
    c) **Reject**: Rejects the Rx and sends it to the previous stage while still maintaining the work order priority sequence.
    d) **Trouble**: Removes the Rx from the work order priority queue.
    e) **Approve:** Packaged prescription that match the electronic drug image.



Pickup

The prescription pick up stage includes the following steps:

- Verifying the identity of the person picking up the prescription(s).
- Identifying the number of prescriptions that need to be retrieved from the Pickup bins.
- Identifying the location of a prescription.
- Identifying what stage of the prescription filling process an Rx is at.

At this stage you can either create an OTC to profile record for patients purchasing OTC products, or check the status of prescriptions for those picking up.

Creating an OTC to Profile Record for New and Existing Patients

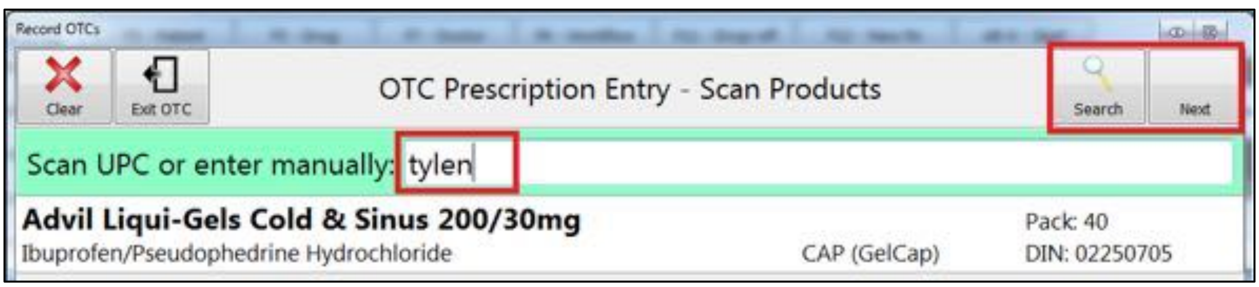
1. Log into the **Pickup** application and select **OTC** from the top right corner of the screen.

2. Enter one of the following search criteria in the drug search field:

   f) Brand/Generic Name, Strength/Pack Size (e.g. Apo-Metformin, 500/360)
   g) DIN (5-8 digits)
   h) UPC (11-12 digits)
   i) A period (.) and the Drug Quick Code (e.g. TYLE1)
   j) #symbol and the Catalog Item Number (e.g. #78945)

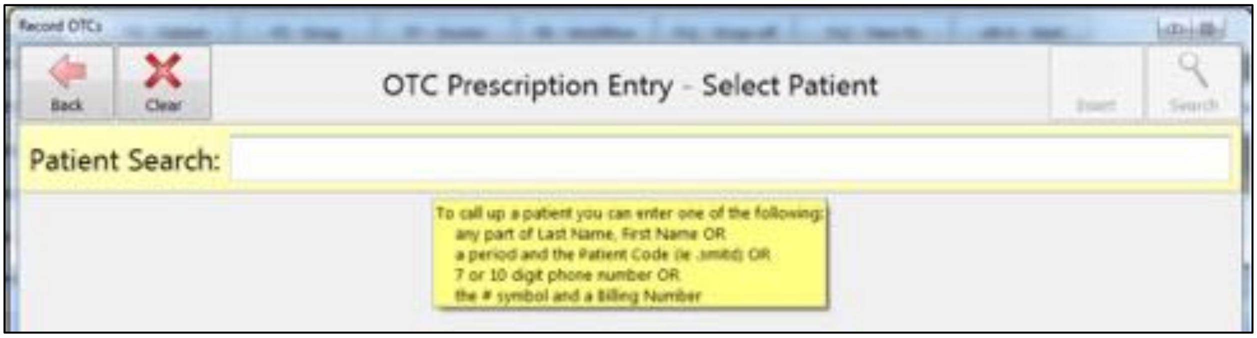
3. Use the arrow buttons to locate the correct product. Double-click the product or highlight it and click **Select**.

4. Repeat steps 2-3 for each product you want to add. If there are no other products to add, click **Next**.



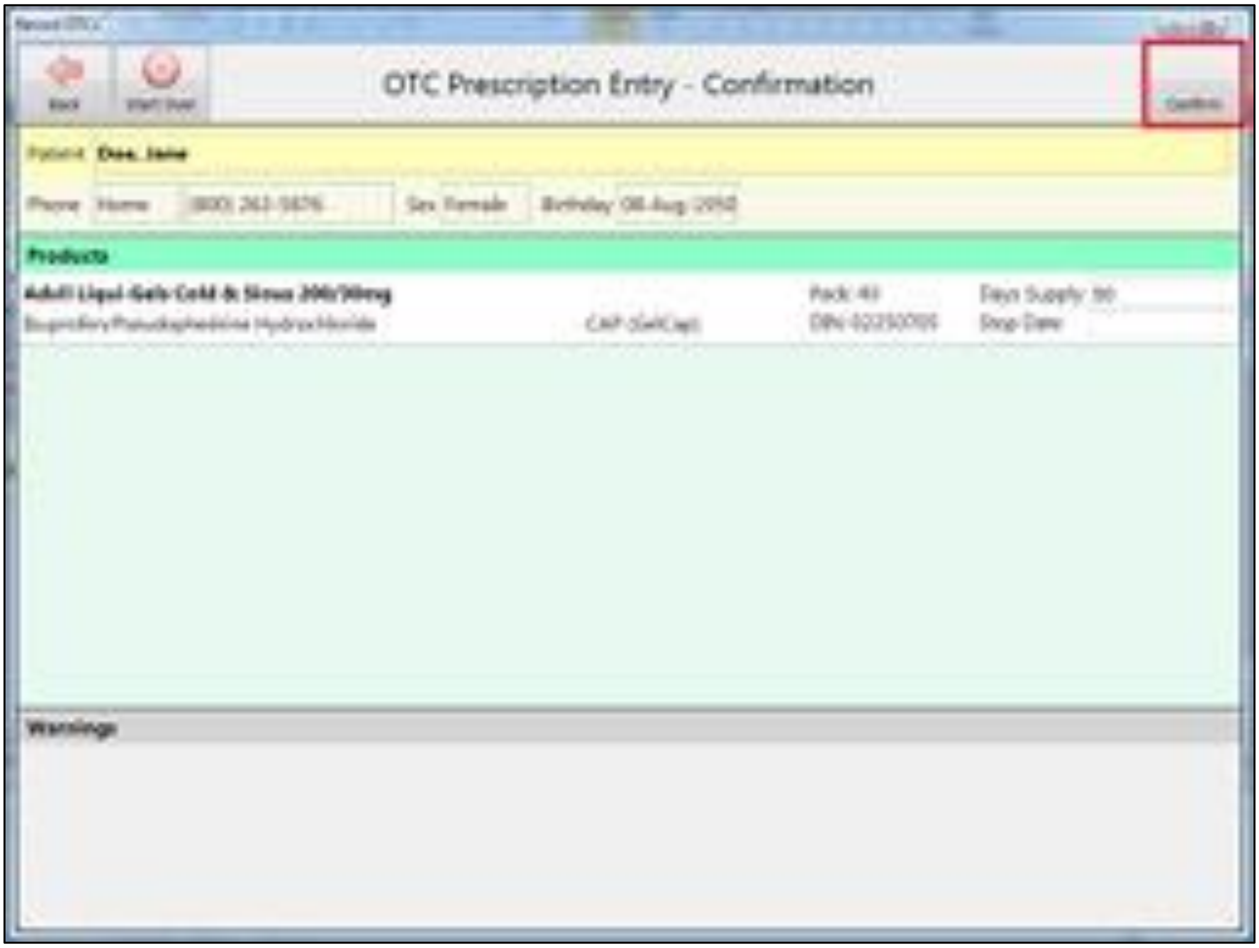
5. The patient search screen will appear. Search for the patient by entering one of the following patient search criteria:

    a) Last Name, First Name (e.g. "Doe, Jane" **OR** "doe,j" **OR** "Doe" **OR** ",Jane")
    b) A period (.) and the Patient Quick Code (e.g. ".DoeJ")
    c) 7 or 10 digit phone number (e.g. 800-263-5876 or 263-5876)
    d) A number sign (#) and the +Third Party Billing number (e.g. #123456789)
    e) An asterisk (*) to search ALL patients in the database



6. If the patient already exists, highlight the patient and click **Select**. If it is a new patient, click **Insert** and complete the patient fields. Click **Save**.

7. The pickup confirmation screen will appear. If all the information on the screen is correct, click **Confirm** from the top right corner. If you need to make any changes, click **Back** or **Start Over**. You may enter a stop date, if necessary.



NOTE: Clicking **Confirm** may produce DUR actions for the pharmacist to resolve.

Prescription Pickup

1. Log into the **Pickup** application and click the **Pickup** icon located in the top right corner.

2. In the patient search field, enter one of the following patient search criteria:
   a) Last Name, First Name (e.g. "Doe, Jane" **OR** "doe,j" **OR** "Doe" **OR** ",Jane")
   b) A period (.) and the Patient Quick Code (e.g. ".DoeJ")
   c) 7 or 10 digit phone number (e.g. 800-263-5876 or 263-5876)
   d) A number sign (#) and the +Third Party Billing number (e.g. #123456789)
   e) An asterisk (*) to search ALL patients in the database

3. Once the patient's information is confirmed, highlight the information and click **Select** in the top right corner.

4. The patient's medication history will appear, indicating what stage of the Prescription Filling Process the medications are in. For example, none of Jane Doe's medications are ready for pick up and are in the Input stage.

To pickup prescriptions ensure they have a green check mark, then click **Pickup [x] Item**.

- **[Blank]-** Indicates Identification is required to pickup this Rx
- **Counsel Patient** – Indicates this prescription requires the pharmacist to counsel the patient.
- **Refrigerated** – Indicates this prescription can be found in the refrigerator

Refill Rx

Refill Rxs can be filled for patients who have already had their previous prescription filled at the same pharmacy location. Typically, refill information is entered when the prescription is initially filled, and patients can choose if they want to enrol in the Refill Reminder program, which notifies them when their prescription refills are ready. See the Auto Fill Functionality user guide on our website for more information about this program.

From the F3 - Patient Screen

1. Select **F3 - Patient** from the **Alt-X Start** screen.

2. Enter one of the following patient search criteria and click **Search**:

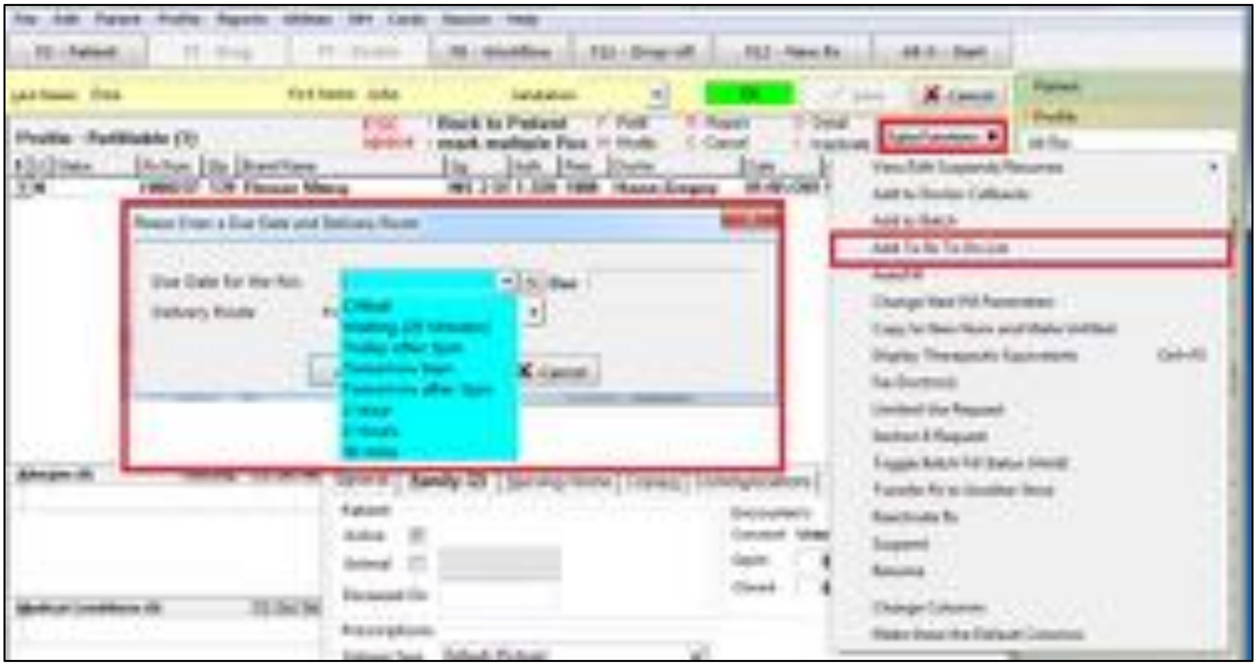
   a) Last Name, First Name (e.g. "Doe, Jane" **OR** "doe,j" **OR** "Doe" **OR** ",Jane")
   b) A period (.) and the Patient Quick Code (e.g. ".DoeJ")
   c) 7 or 10 digit phone number (e.g. 800-263-5876 or 263-5876)
   d) A number sign (#) and the +Third Party Billing number (e.g. #123456789)
   e) An asterisk (*) to search ALL patients in the database

3. Double-click the patient record. The **F3 - Patient** screen will display.

4. Select **Refillable Rxs** from the right navigation pane.

5. Highlight the medication(s) that the patient would like to refill and tag them using the spacebar and either right click on the patient profile or click on **Extra Functions** and select **Add to Rx to Do List**.

6. Select a **Due** time for the work order. This will add the prescription to the **Enter** queue.



7. Complete the **Input**, **Filling**, and **Check** stages described in the **New Rxs** section.

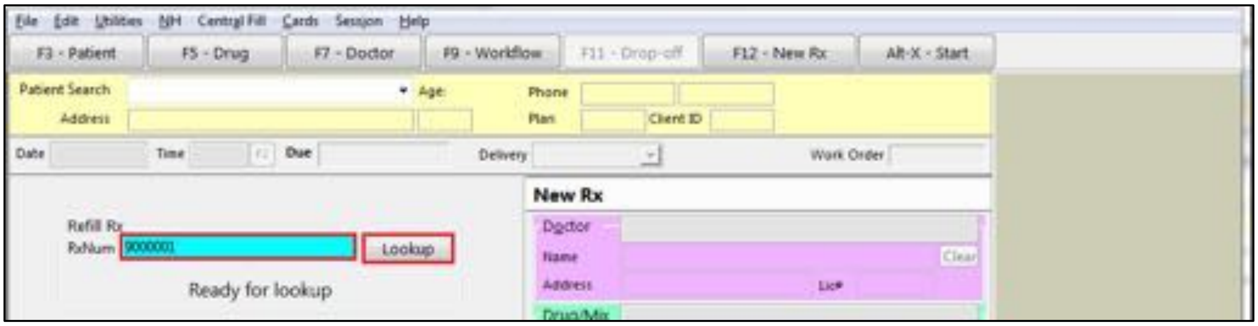
Unfill Rx (On Hold)

There can be many reasons why patients may not need some of their prescriptions filled at Drop-Off. For documentation purposes and convenience these prescriptions will be put on hold and referred to as **Unfilled Rxs**. An Unfill Rx will pass through **Drop-Off**, **Enter**, and **Check** of the Rx processing steps.

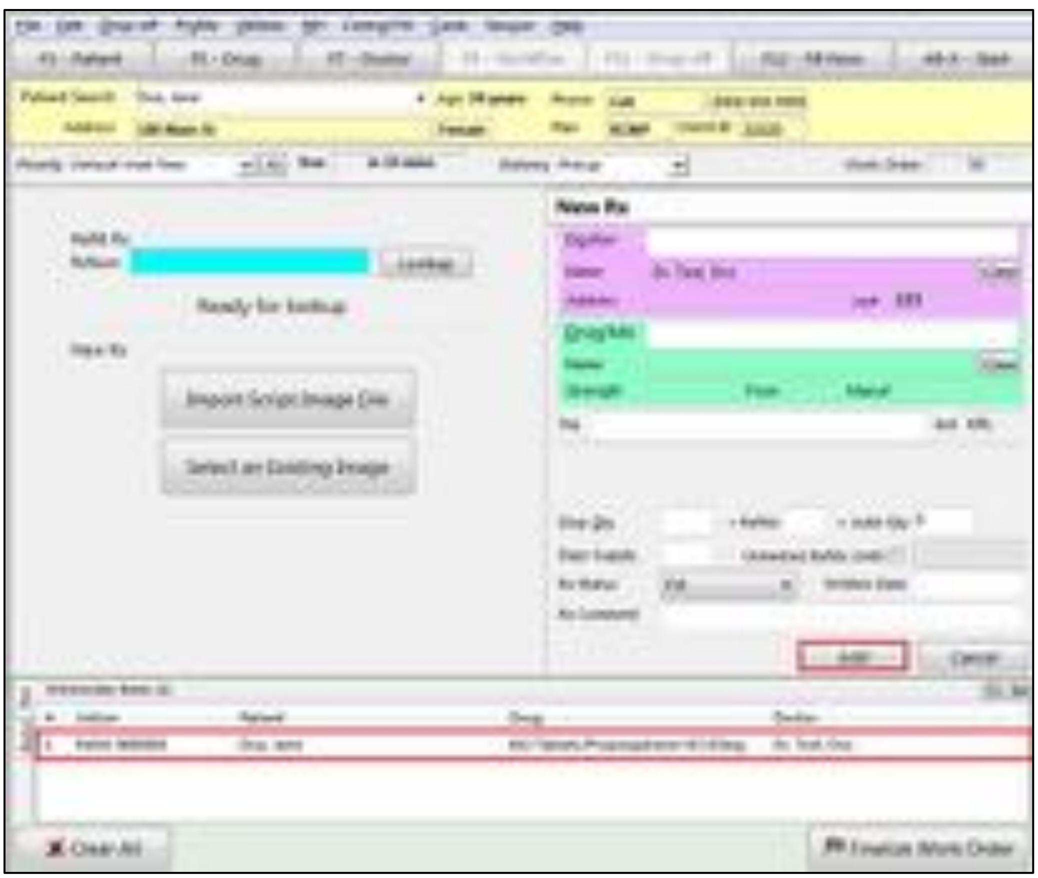
From the F11 - Drop-Off Screen

With Rx Number

1. From the **ALT+X Start Screen**, click **F11- Drop-Off** or press **F11** on your keyboard.
2. Enter the prescription number in the **Refill Rx Number** field and click **Lookup.**



3. The Rx will populate on the **F11 - Drop-Off** screen. Enter a **Due** time. This will add the prescription to the **Enter** queue.
4. Click **Add** to add the Rx to the **Workorder Items** list.



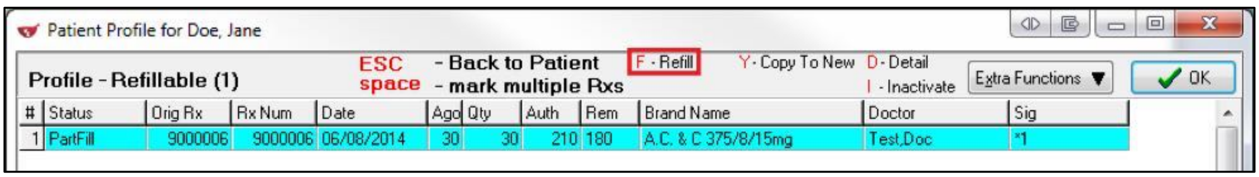
Click **Finalize Work Order** to move the prescription to adjudication. If any DUR messages are present they will first need to be resolved by the pharmacist before the prescription moves to the filling queue.

Without Rx Number

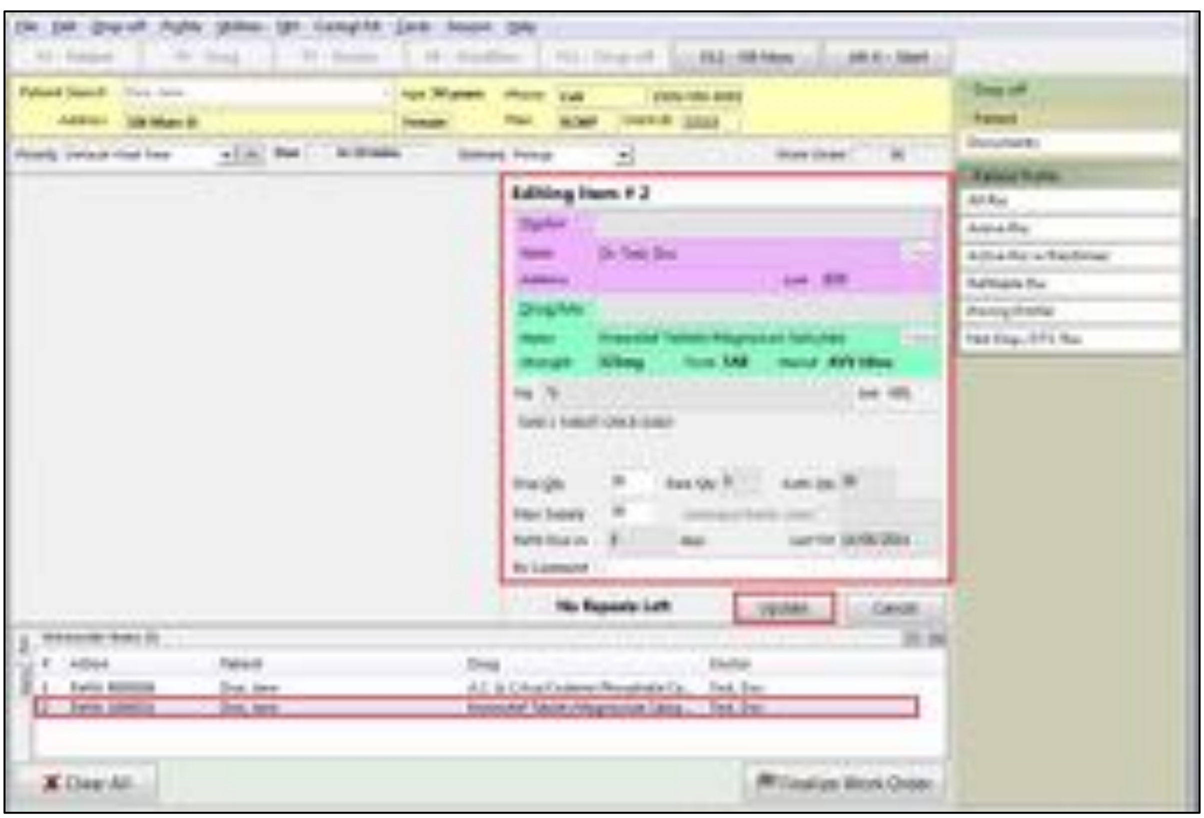
1. Call up the **F11- Drop-Off** screen and perform a patient search.

2. Select **Refillable Rxs** from the right navigation pane.

3. The patient profile for the patient will be displayed. Use the spacebar to highlight the Rx(s) you want to refill and click **F - Refill** or press the **F** key on your keyboard.



4. The Rx(s) will appear in the **Workorder Items** list on the **F11 - Drop-Off** screen. If you want to edit any of the information in the Rx, double-click the Rx entry from the list. The Rx information will populate in the **F11 - Drop-Off** fields. Make the necessary changes and click **Update**.



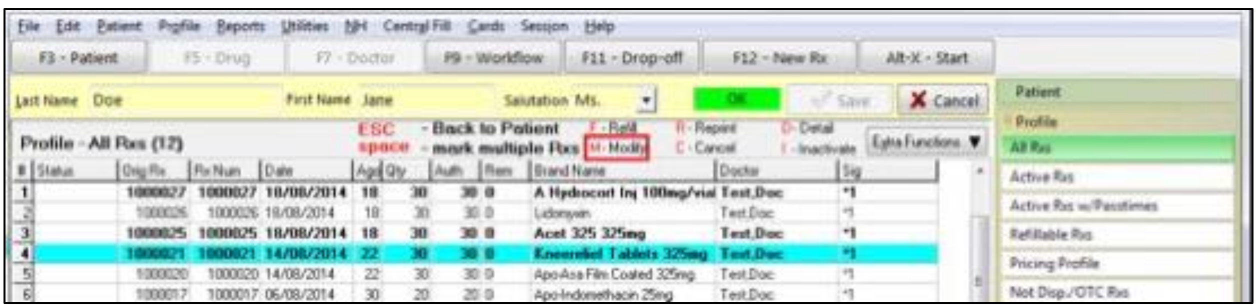
5. Click **Finalize Work Order**.

Modify Rx

Once a prescription has been processed, there are some fields that can be modified and some that cannot. For those fields that can be modified, namely prescription comments, refills, unit dose activation, and other fields that do not have clinical or financial impact, you can modify the prescription to edit those fields.

Method 1: From the F3 - Patient Screen

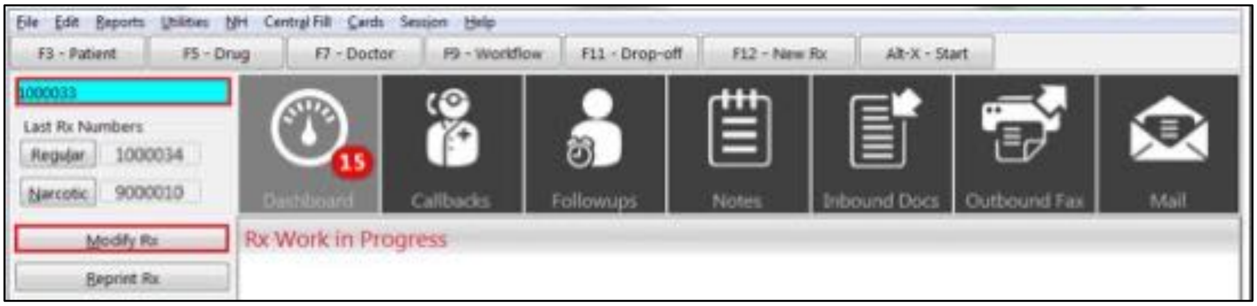
1. Select **F3 - Patient** from the **Alt-X Start** screen and perform a patient search. Double-click the patient record.
2. The patient profile for the selected patient will be displayed. Select **All Rxs** from the right navigation pane.
3. Use the spacebar on your keyboard to tag the Rx(s) you want to modify. Click **M - Modify** or press the **M** key on your keyboard.



4. The Rx will appear on the **F12** screen in **Modify** mode. Modify any of the editable fields (dispense quantity, authorize quantity, interchangeable drugs, and unit dose information).
5. When you are finished, click **F12 - Save Changes**.

Method 2: From the Alt-X Start Screen

1. Enter the Rx number in the **Universal Search** field and click **Modify Rx**.



2. The Rx will appear on the **F12** screen in **Modify** mode. Modify any of the editable fields (dispense quantity, authorize quantity, interchangeable drugs, and unit dose information).

3. When you are finished, click **F12 - Save Changes**.

Copy Rx

The Copy Rx function allows you to copy information from an existing prescription to a new prescription. This function is often useful when the doctor renews a patient's existing medications and there is no change in dosage or SIG. It is not recommended to use this function when there are changes in dose, SIG, or prescriber because when a prescription is copied, a link is created between the new and old prescriptions. The original prescription that was copied will automatically have a status of "Inact (Copied)" and cannot be transferred out.

Method 1: From the F3 - Patient Screen

1. Select **F3 - Patient** from the **Alt-X Start** screen and perform a patient search. Double-click the patient record.

2. The patient profile for the selected patient will be displayed. Select **All Rxs** from the right navigation pane.

3. Use the spacebar on your keyboard to tag the Rx(s) you want to modify. Click **F - Refill** or press the **F** key on your keyboard. If there are no remaining refills for the Rx, a prompt will appear asking if you want to copy the Rx to a new number. Click **Yes**.

4. The Rx will appear on the **F12** screen as a **New Rx**. Select a **Due** time and make any necessary changes to the prescription.

5. When you are finished, click **F12 - Fill Rx**.

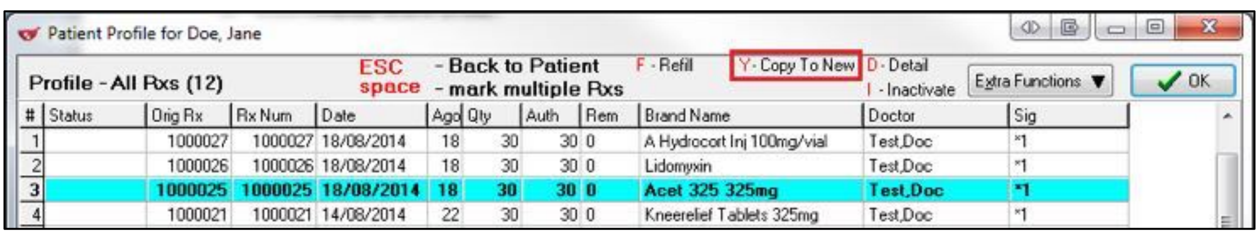
6. Complete the **Input**, **Filling**, and **Check** stages described in the **New Rxs** section for each Rx you have selected.

Method 2: From the F11 - Drop-Off Screen

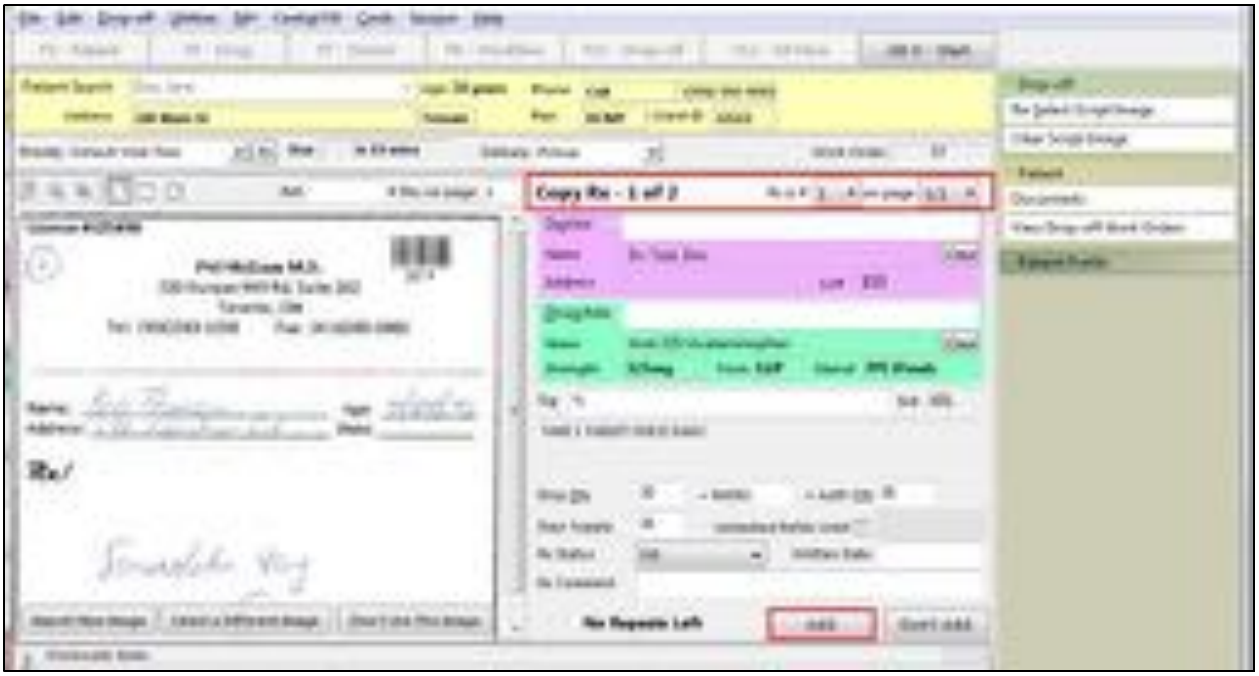
1. Call up the **F11-Drop Off** screen and perform a patient search. Enter a **Due** time.

2. Select **All Rxs** from the right navigation pane.

3. The patient profile for the patient will be displayed. Use the spacebar to highlight the Rx(s) you want to copy and click **Y - Copy To New** or press the **Y** key on your keyboard.



4. The Rx(s) will appear on the **F11 - Drop-Off** screen. The **Rx is # [x] on page [x/x]** indicates how many Rxs are about to be copied. Click **Add** to add the Rx to the **Workorder Items** list.



NOTE: Prescriber, drug, and dispensing information will be copied from the old Rx record but can be modified if necessary.

5. Repeat step 4 for each Rx you have selected to copy. When you are finished, click **Finalize Work Order**.

6. Complete the **Input**, **Filling**, and **Check** stages described in the **New Rxs** section for each Rx you have selected.

Cancel Rx

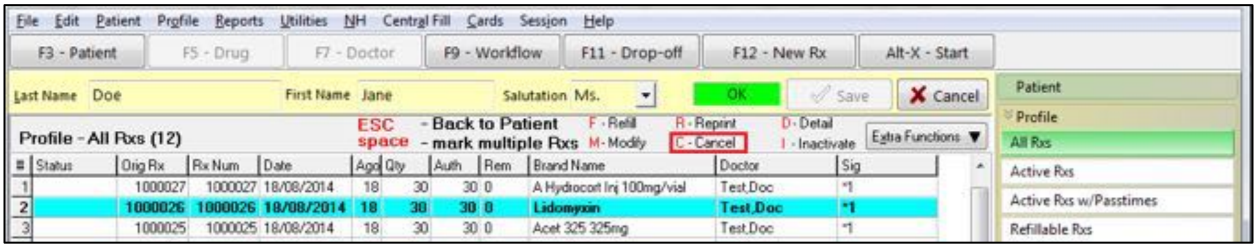
Cancelling a prescription means reversing a prescription which includes reversing claims sent to third party plans. You may need to cancel prescriptions for various reasons. For example, a change in dispensing quantity, wrong SIG inputted; patient does not want the prescription anymore.

Method 1: From the F3 - Patient Screen

1. Select **F3 - Patient** from the **Alt-X Start** screen and perform a patient search. Double-click the patient record.

2. The patient profile for the selected patient will be displayed. Select **All Rxs** from the right navigation pane.

3. Use the spacebar on your keyboard to tag the Rx(s) you want to modify. Click **C - Cancel** or press the **C** key on your keyboard.



Depending on the type of prescription you are cancelling the system will prompt you with different messages for cancelling the prescriptions.

Method 2: From the Alt-X Start Screen

1. Enter the Rx number in the **Universal Search** field and click **Cancel Rx**.

2. A prompt will appear asking if you are sure you want to cancel the Rx. Select **Yes**.

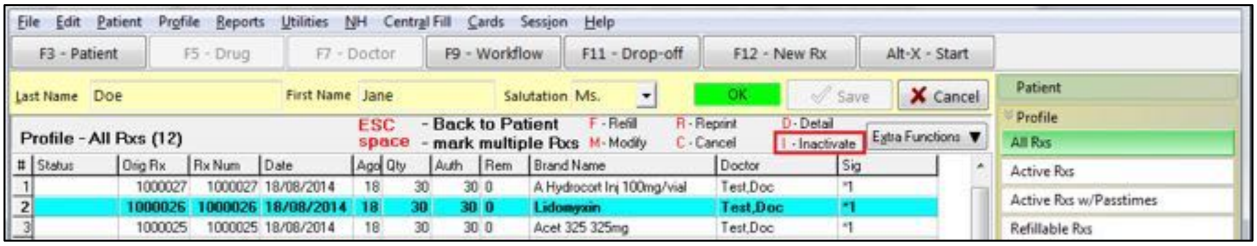
Inactivate Rx

Prescriptions should be inactivated if patients are no longer using certain medications as a part of their medication therapy. Prescriptions are automatically inactivated when they are copied to a new prescription number or if they are transferred out of the pharmacy; otherwise any Rx that needs to be inactivated will need to be done manually.

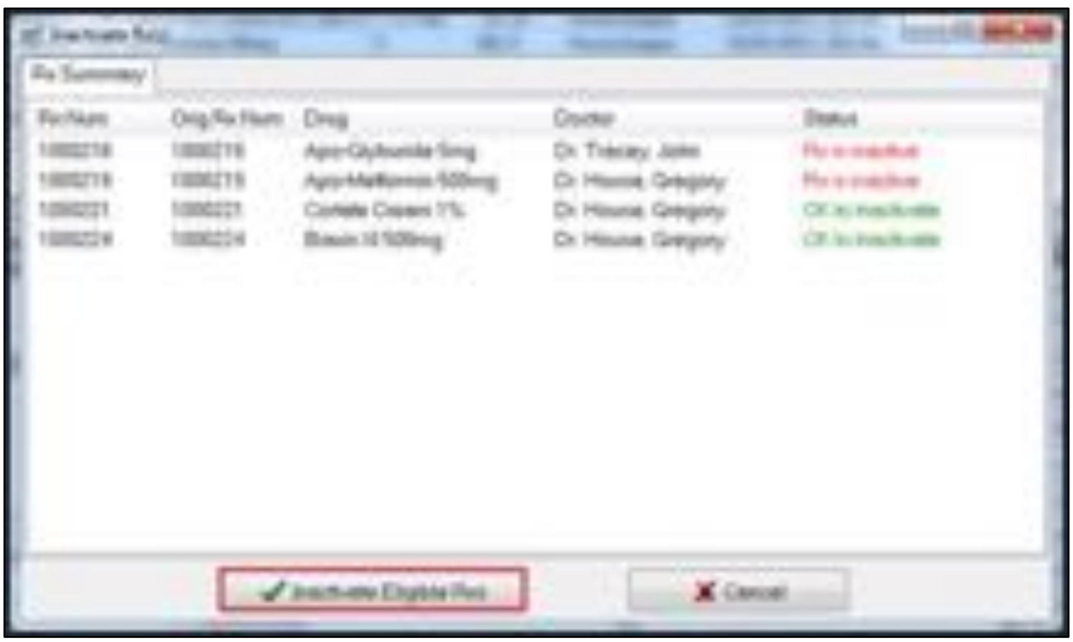
1. Select **F3 - Patient** from the **Alt-X Start** screen and perform a [patient search](). Double-click the patient record.

2. The patient profile for the selected patient will be displayed. Select **All Rxs** from the right navigation pane.

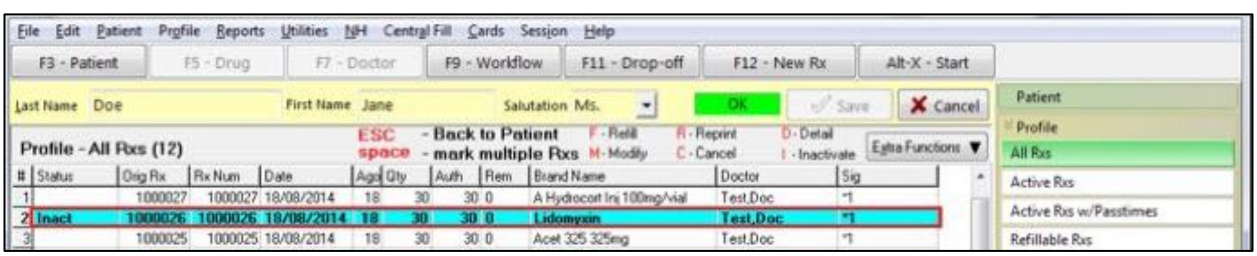
3. Use the spacebar on your keyboard to tag the Rx(s) you want to modify. Click **I - Inactivate** or press the **I** key on your keyboard.



4. The **Inactivate Rx(s)** window will appear, displaying the selected Rx(s). Each Rx will have a status indicating if it is eligible to be inactivated. If the Rx information is correct, click **Inactivate Eligible Rxs.**



5. You will be prompted to enter an optional reason for inactivating the Rx. Click **Save** to continue. The status of the prescription will be show a status of '**Inact**' in the patient profile.



NOTE: Prescriptions will automatically become inactive if they are copied or have been transferred to another pharmacy.

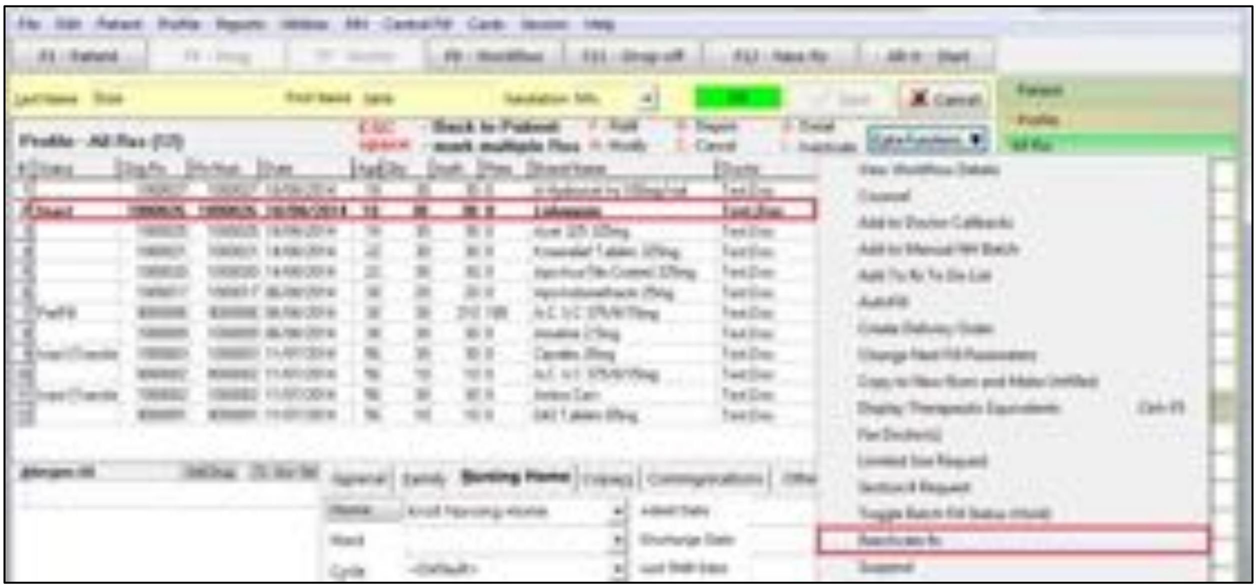
Reactivate Rx

Introductory paragraph.

1. Select **F3 - Patient** from the **Alt-X Start** screen and perform a patient search. Double-click the patient record.

2. The patient profile for the selected patient will be displayed. Select **All Rxs** from the right navigation pane.

3. Use the spacebar on your keyboard to tag the Rx(s) you want to modify. Select **Extra Functions** > **Reactivate Rx**.



4. The **Reactivate Rx** window will appear, displaying the selected Rx(s). Each Rx will have a status indicating if it is eligible to be reactivated. If the Rx information is correct, click **Reactivate Eligible Rxs**.

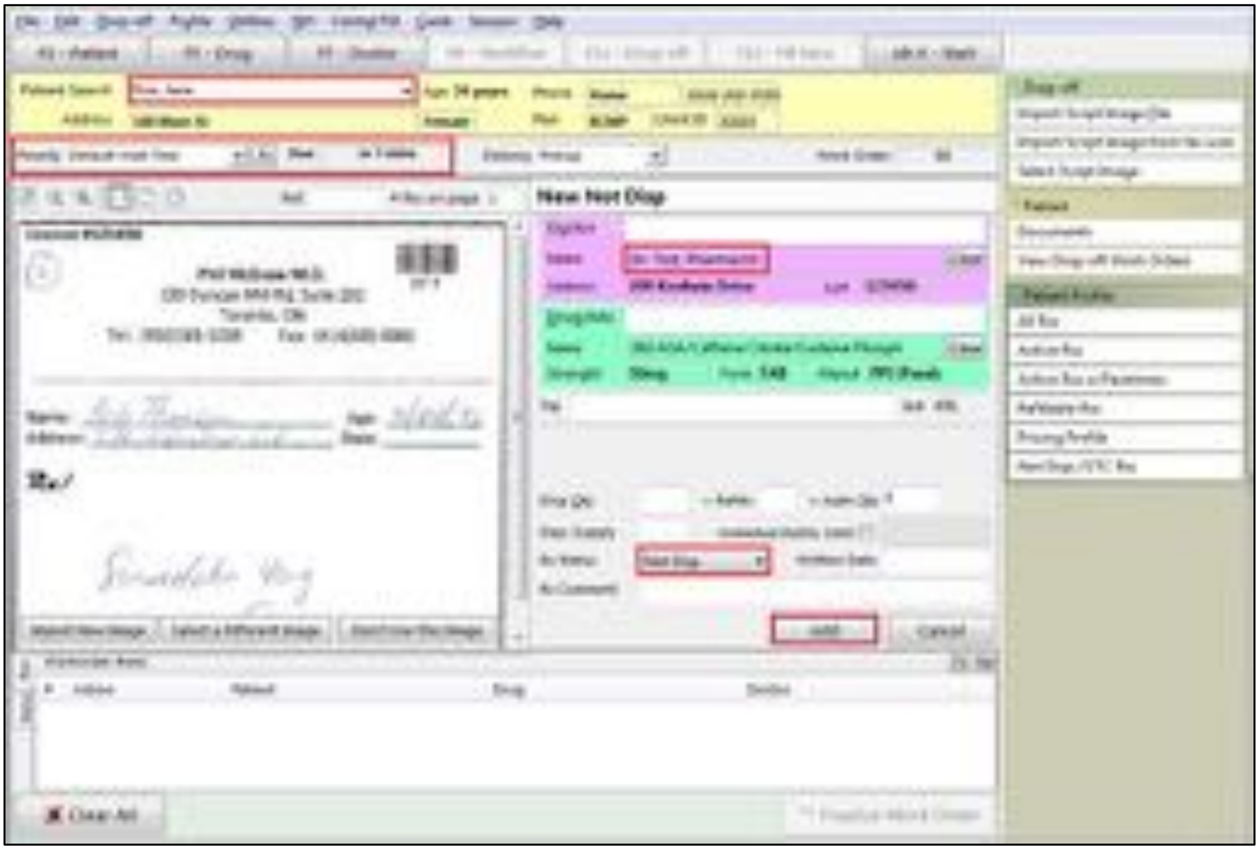
Not Dispensed Rx

Creating an OTC to profile record for patients is known as **Not Dispensed Rxs** in the system. The term not dispensed is used because these prescriptions are not dispensed by the pharmacist. Rather they are over-the-counter medicines that are taken by the patient and therefore included in the patient profile for drug interaction analysis.

Drop-Off

1. From the **ALT+X Start** screen, click **F11- Drop-Off** or press **F11** on your keyboard.
2. Search for the patient in the patient search field and select a **Due** time. If there are any counseling notes written in regards to the OTC product it should be scanned into the system via the document scanner.
3. Set the Rx status to **Not Dispensed**.
4. Enter the name of the pharmacist on duty in the **Doctor** field.

5. Once all the relevant information has been entered, click **Add** to add the work order to the **Workorder items** list**.**



6. Click **Finalize Work Order**.

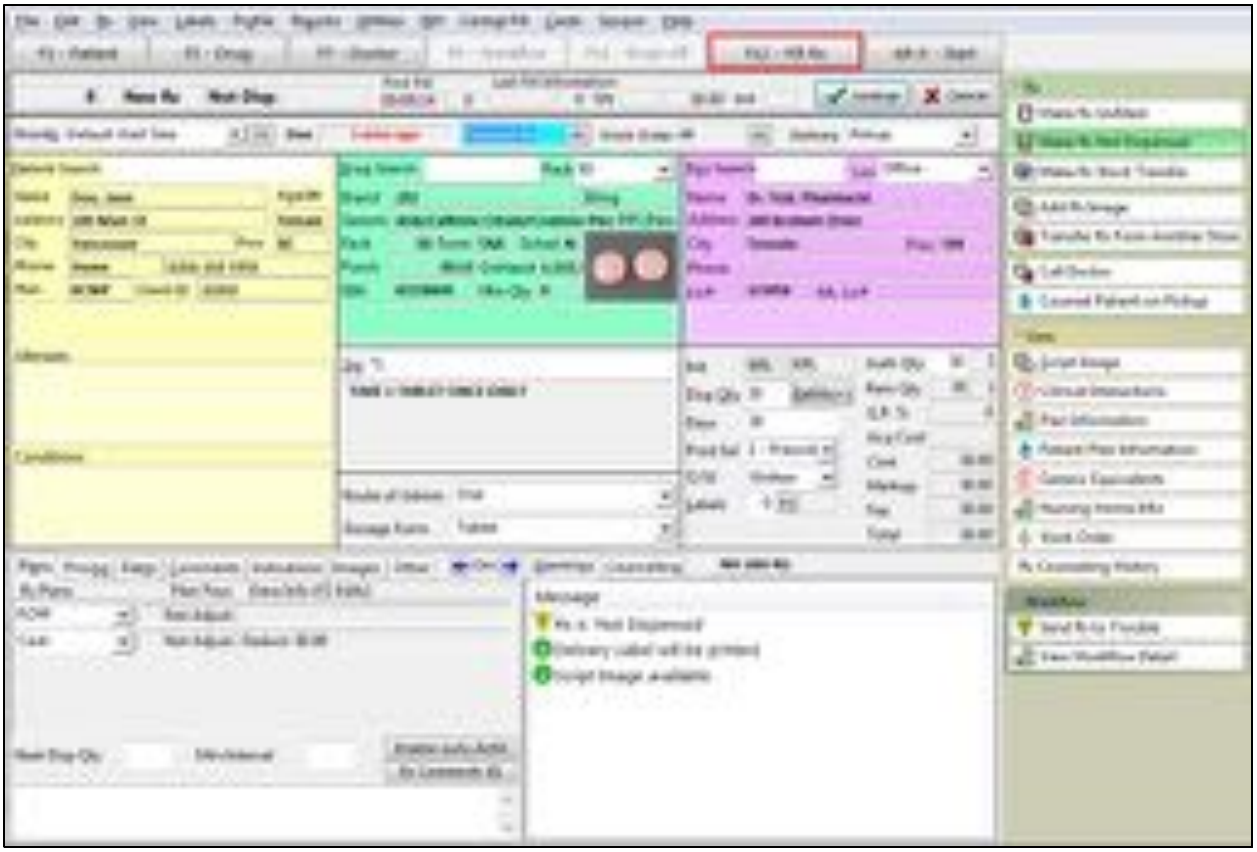
Enter

The **Enter** stage is where you enter prescription information such as Drug, SIG, Dispense Quantity, Intervention Codes, etc. into the system for processing.

1. Select **F9 - Workflow** from the **Alt-X Start** screen.
2. Click **Enter** to display the enter queue.
3. Double-click the Not Dispensed Rx record.
4. The **F12** screen will appear, displaying the Rx details entered at Drop-Off. Enter any remaining Rx information (Dispense Quantity, Intervention Codes, etc.).

   If you want to enter a stop date, click the **Dates** tab and enter an **Rx Stop Date**. For stores connected to a Drug information System, entering stop dates for Not Dispensed/OTC to profile Rxs may be required.

5. Click **F12 - Fill Rx** or press the **F12** key on your keyboard.

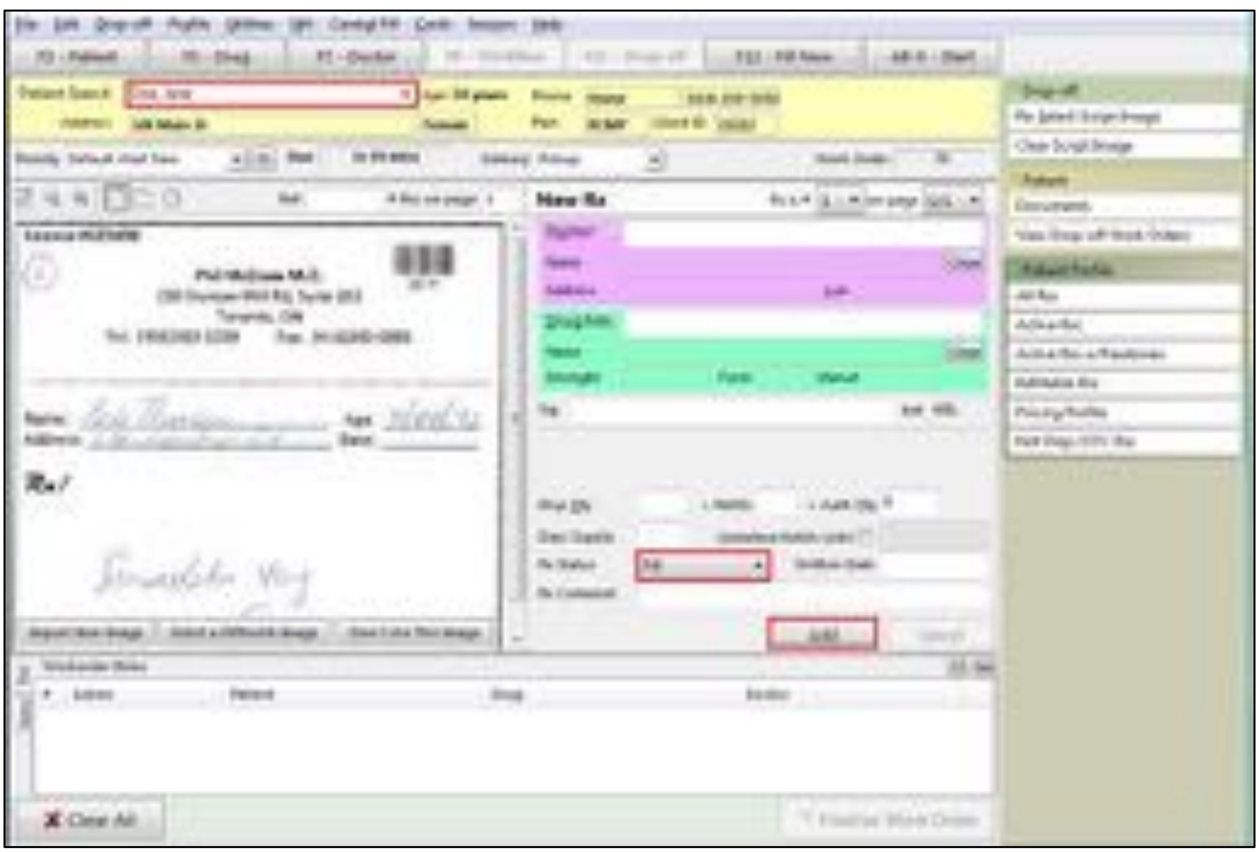


Fee for Service Rx

Fee for service prescriptions are prescriptions billed to third parties for professional service rendered by the pharmacist to the patient. For example, some Fee for Service prescriptions can be prescription adaptation services, medication reviews, refusals to fill, smoking cessation etc. Since services are not physically tangible and do not involve the dispensing of a dug product, some elements of prescription processing may be eliminated. Fee for service prescriptions should always be filled after the service has been provided to the patient.

Drop-Off

1. From the **ALT+X Start** screen, click **F11- Drop-Off** or press **F11** on your keyboard.
2. Search for the patient in the patient search field and select a **Due** time.
3. Set the Rx status to **Fill**.
4. Once all the relevant information has been entered, click **Add** to add the work order to the **Workorder items** list**.**



5. Click **Finalize Work Order**.

Enter

Fee for Service “drug records” typically have a DIN or Pseudo DIN used for billing, but do not have a UPC, counseling, drug monograph, or ordering tabs because these do not apply for services rendered to a patient.

1. Select **F9 - Workflow** from the **Alt-X Start** screen.
2. Click **Enter** to display the enter queue.
3. Double-click the Rx record.
4. The **F12** screen will appear, displaying the Rx details entered at Drop-Off. Use the **Drug Search** field to search for and select the applicable professional service.

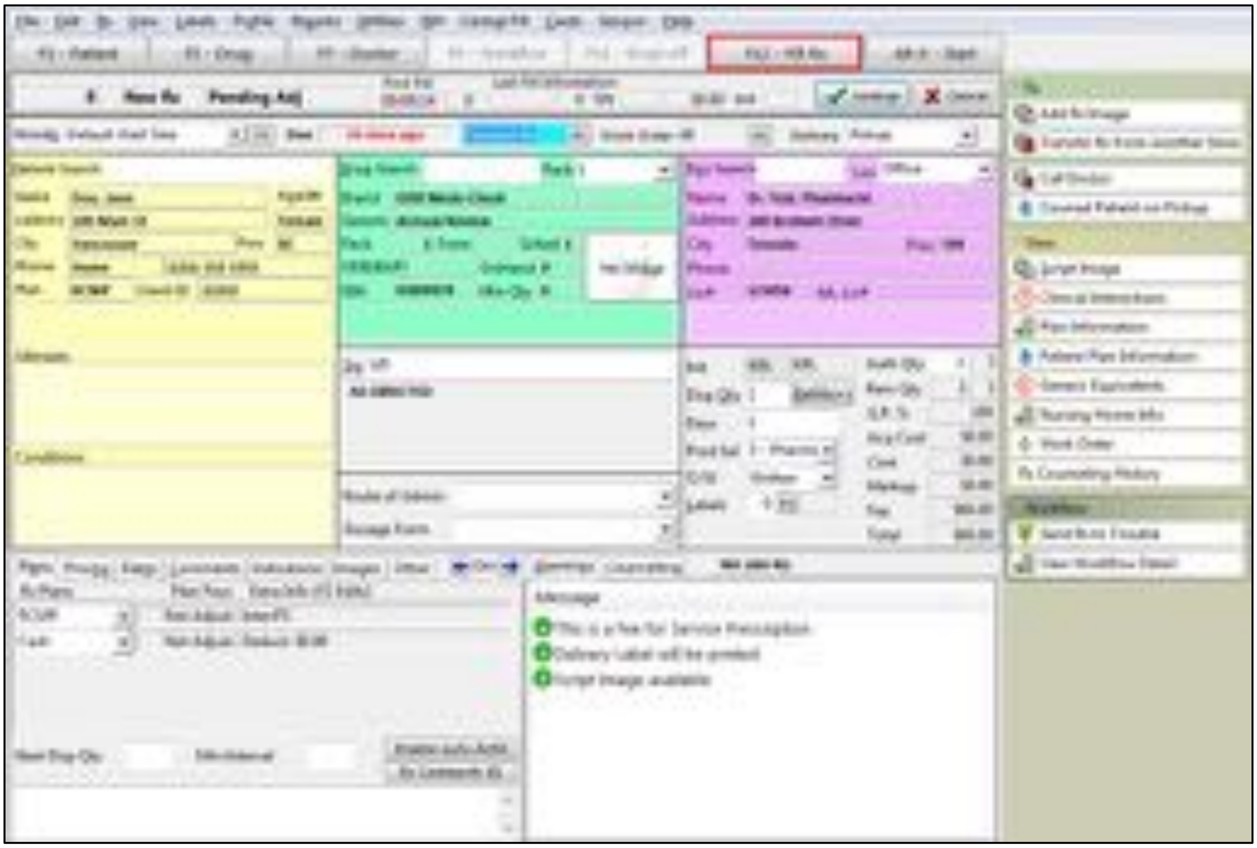
   In some cases, depending on the selection made in this field, the system will send a Special Services Code, Intervention Code, Rx prefix, etc. to third parties as a part of billing requirements.

NOTE: The **Drug Price Group** field may have a strategy applied to the drug record to instruct the system to use a specific pricing strategy for prescriptions filled for the service.

5. Enter the name of the pharmacist who provided the professional service in the **Doctor** field.
6. To view any intervention codes or special service codes that will be submitted to third parties as part of the claim, select **Plan Information** from the right navigation pane. The **Rx Plan Information** window will appear.

Click **OK** to close the **Rx Plan Information** screen.

7. Enter any remaining Rx information and click **F12 - Fill Rx** or press the **F12** key on your keyboard.



Transfer Rx

Prescriptions can be transferred into or out of the pharmacy. In both cases, information regarding the transfer should be recorded in the system.

Transferring an Rx from Another Store

Transfers received from other pharmacies are treated as new prescriptions and must go through the same stages as a new prescription.

Drop-Off

1. From the **ALT+X Start Screen**, click **F11- Drop-Off** or press **F11** on your keyboard.

2. Perform a patient search.

3. Feed the transfer report into the document scanner and click **Import Script Image File**.

4. Click **Add** to add the work order to the **Workorder items** list**.**

5. Click **Finalize Work Order**.

Enter

1. Select **F9 - Workflow** from the **Alt-X Start** screen.

2. Click **Enter** to display the enter queue.

3. Double-click the Rx record.

4. The **F12** screen will appear, displaying the Rx details entered at Drop-Off. Select **Transfer Rx From Another Store** from the right navigation pane.

5. The **Transfer Rx from other store** screen will appear. In the **Search for a store** field, begin typing the name of the originating pharmacy. If a matching pharmacy is located, either double-click the entry or highlight the entry and press the **Enter** key on your keyboard.

   a) If a matching pharmacy cannot be found click, **New** to insert a new transfer pharmacy record. Complete the **Create Store** form and click **OK**.

6. Enter the name of the pharmacist on duty in the **Pharmacist Name** field and enter any available Rx information in the **Rx information from other store** fields.

7. Click **OK**.

8. Complete the remaining Rx fields and click **F12 - Rill Rx**.

Transferring an Rx to Another Store

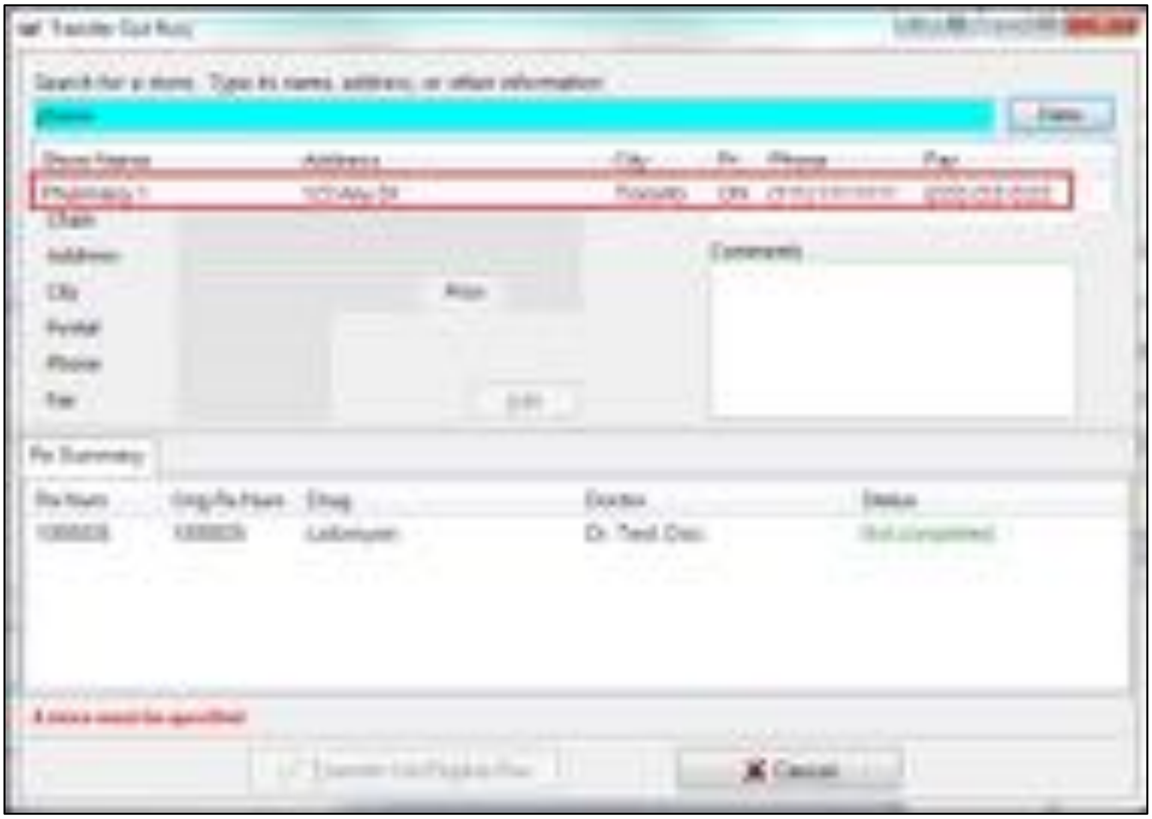
1. Call up the **F3 - Patient** screen and perform a patient search. Double-click the patient record.

2. Select **All Rxs** from the right navigation pane.

3. Use the spacebar to tag the Rx(s) you want to transfer.

4. Select **Extra Functions** > **Transfer Rx to Another Store**.

5. The **Transfer Out Rx(s)** screen will appear. In the **Search for a store** field, begin typing the name of the pharmacy you want to transfer the Rx to. If a matching pharmacy is located, either double-click the entry or highlight the entry and press the **Enter** key on your keyboard.



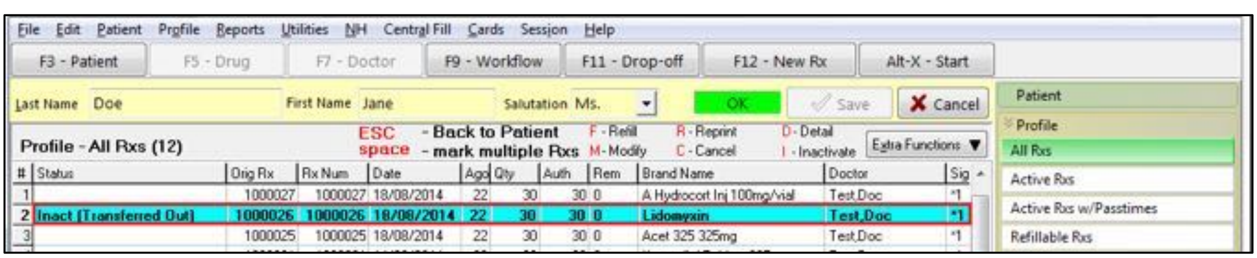
a) If a matching pharmacy cannot be found click, **New** to insert a new transfer pharmacy record. Complete the **Create Store** form and click **OK**.

6. Enter the name of the pharmacist on duty in the **Pharmacist Name** field.

7. Click **Transfer Out Eligible Rxs**.

8. A prompt will appear asking if you want to print the Transfer Report. Answer **Yes** or **No** accordingly.

9. The Rx will show a status of **Inact (Transferred Out)** in the patient profile.



#	Status	Orig Rx	Rx Num	Date	Age	Qty	Auth	Rem	Brand Name	Doctor	Sig
1		1000027	1000027	18/08/2014	22	30	30	0	A Hydrocort Inj 100mg/vial	Test,Doc	*1
2	Inact (Transferred Out)	1000026	1000026	18/08/2014	22	30	30	0	Lidomyxin	Test,Doc	*1
3		1000025	1000025	18/08/2014	22	30	30	0	Acet 325 325mg	Test,Doc	*1

Rx with LU Code/ Section / SSC / Special Auth

In Ontario, some prescriptions require supplementary plan information to facilitate billing; this can take the form of a Limited Use Code, Section 8 Intervention code, Special Authorization, or special service code. Some of these supplementary items will be added to the system automatically; for example, DA and DB interventions. Other supplementary items need to be added manually.

Drop-Off

1. From the **ALT+X Start** screen, click **F11- Drop-Off** or press **F11** on your keyboard.
2. Perform a patient search.
3. Feed the transfer report into the document scanner and click **Import Script Image File**.
4. Click **Add** to add the work order to the **Workorder items** list**.**
5. Click **Finalize Work Order**.

NOTE: There is no field for entering supplementary plan information in the **F11 - Drop-Off** screen. This must be done at the Enter stage.

Enter

1. Select **F9 - Workflow** from the **Alt-X Start** screen.
2. Click **Enter** to display the enter queue.
3. Double-click the Rx record.
4. The **F12** screen will appear, displaying the Rx details entered at Drop-Off. Enter the drug, prescriber, and dispensing information as usual. Click **F12 - Fill Rx**.
5. If an ODB plan exists in the patient record and the drug has a Limited Use Code, a prompt will appear asking how you want to bill the drug. Select **Bill to ODB with a Reason Code**.

6. The **Limited Use Product Form** will appear. Select the appropriate limited use code and click **OK**.

If you accidentally bypassed the Limited Use prompt or if you want to add an intervention code, SSC, or Special Authorization number to the prescription, select **Plan Information** from the right navigation pane.

The **Rx Plan Information** screen will open, displaying a separate tab for each plan listed in the patient profile. If the drug in the Rx is a Limited Use drug, click **F2** next to the **Reason Code** field to view all codes associated with the drug. Re-select the code and click **OK**.

The **Claim Type, Real Time Plan** flag, and **Pseudo DIN** fields are automatically populated and should not be changed. Once all necessary Plan Information has been set, click **OK** or press **Enter** on the keyboard to continue. Proceed to move the prescription to the next Rx processing stage.

7. Click **F12 - Fill Rx**.

Merges

Drug merging in Kroll allows users to combine two different patient, drug, or prescriber records into a single, unified record. This section explains how to perform patient merges, drug merges, and prescriber merges.

Patient Merges

1. From the **Alt-X Start** screen, go to **Utilities** > **Merge** > **Patients**.
2. The **Transfer Patient Profiles Form** will appear. Perform a search for the patient record you want to keep in the **New Patient to be transferred TO** field. The patient's address information will populate.

3. Perform a search for the patient record you want merged in the **Old Patient to be transferred FROM** field. The patient's address information will populate.

4. Click **Transfer**.

5. A prompt will appear asking if you are sure you want to merge the two patients. Answer **Yes**.

6. Click **Cancel** to close the **Transfer Patient Profiles Form**.

Drug Merges

1. From the **Alt-X Start** screen, go to **Utilities** > **Merge** > **Drugs**.

2. The **Merge Drugs Form** will appear. Enter the drug names in the respective **New Drug to be merged TO** and **Old Drug to be merged FROM** fields and click **Lookup**.

3. From the list of search results, select the drug you want to merge **to** and click **Select**. Click **Select** again.

4. From the list of search results, select the drug you want to merge **from** and click **Select**. Click **Select** again.

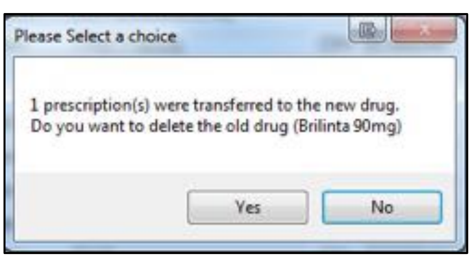
5. Both drugs will populate on the **Merge Drugs Form**. Click **Transfer**.

6. A prompt will appear asking if you are sure you want to merge the drugs. Select **Yes**.

7. The **Merge Pack Size** form will appear asking you which drug pack you want to keep and if you want to merge the on-hand quantities for both drugs. Select **From Drug** to retain the drug pack for the drug you merged from, or **To Drug** to retain the drug pack for the drug you merged to.

   Place a checkmark next to **Merge On Hand Quantities** if you want the on-hand quantities for both drugs to be merged.

8. A prompt will appear to confirm the number of prescriptions that were transferred to the new drug, and ask you if you want to delete the old drug from the system. If you select **Yes**, the old drug will be deleted and you will be left with the drug you merged to. If you select **No**, the drug you merged from will remain in the system.



Prescriber Merges

1. From the **Alt-X Start** screen, go to **Utilities** > **Merge** > **Doctors**.

2. The **Merge Doctors Form** will appear. Perform a search for the prescriber record you want to keep in the **New Doctor to be transferred TO** field. The prescriber's address information will populate.

3. Perform a search for the prescriber record you want merged in the **Old Doctor to be transferred FROM** field. The prescriber's address information will populate.

4. Click **Transfer**.

5. A prompt will appear asking if you are sure you want to merge the two prescribers. Answer **Yes**.

6. Click **Cancel** to close the **Merge Doctors Form**.

Patient Credit Cards

To ensure the privacy and security of patient credit card information in accordance with Payment Card Industry (PCI) compliance, Kroll has designated an area in the software for entering such information. Permission settings within the system can limit access to this area to certain groups of individuals within the pharmacy.

You must belong to a user group that has the **Allow Credit Card Password Management** permission enabled in order to manage patient credit cards. Refer to the Permissions section to enable this permission setting.

Creating a Credit Card Access Password

1. From the **Alt-X Start** screen, go to **Utilities** > **Credit Card Password Manager**.

2. The **Credit Card Password Manager** window will appear. Click **Create new Credit Card Access Password**.

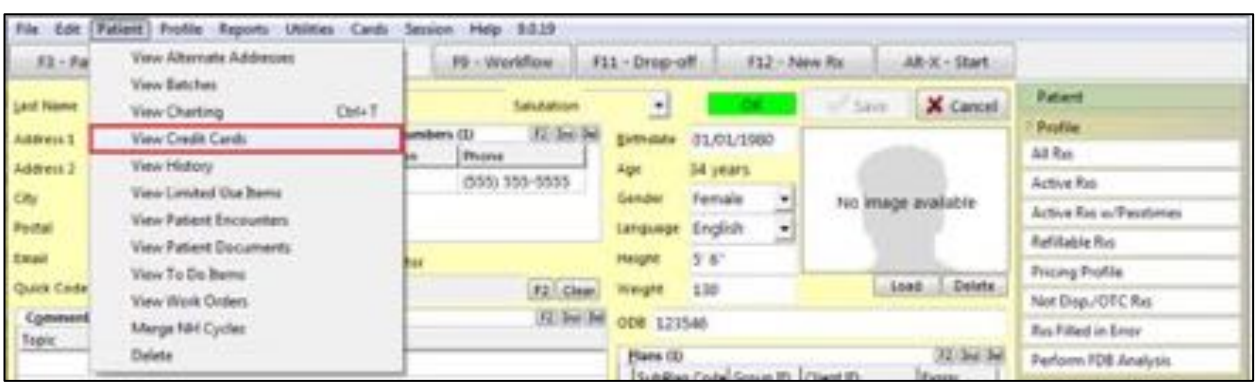
3. The **Create New Credit Card Password** form will appear. Enter the credit card password in the **New Password** and **Verify New Password** fields and click **OK**.

NOTE: Passwords must be at least seven characters in length and contain both alpha and numeric characters.

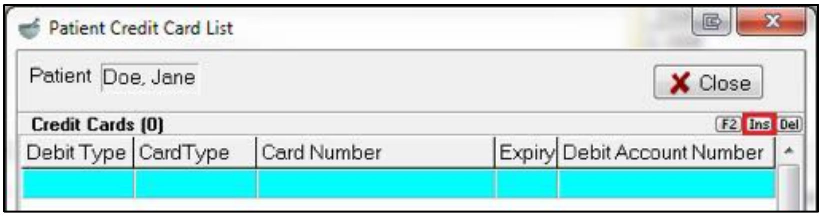
4. The **Credit Card Password Manager** window will show an **Expiry date** of three months from today's date. Click **Close** to exit the window.

Recording a Patient Credit Card

1. Call up the patient profile and go to **Patient** > **View Credit Cards**.



2. The **Patient Credit Card List** screen will appear. Click **Ins** or press the **Insert** key on your keyboard.

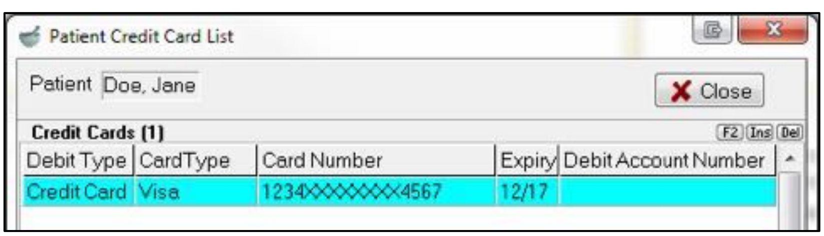


3. The **Patient Credit Card Information** form will appear with the patient's address information prepopulated. Select a **Card Type** and complete the **Card Number**, **Expiry Date**, and **Cardholder Name** fields. Click **Save**.

If you want to add a debit account rather than a credit card account, select **Debit** from the **Debit Type** menu and complete the **Bank Number**, **Transit Number**, and **Account Number** fields. Click **Save**.

4. Enter the credit card password in the **Password** field and click **OK**.

5. The credit card will appear in the **Credit Cards** list in the **Patient Credit Card List** screen. Click **Close** to exit.



Modifying a Credit Card Record

1. Call up the patient profile and go to **Patient** > **View Credit Cards**.

2. The **Patient Credit Card List** screen will appear. Select the credit card you want to modify and click **F2** or press the **F2** key on your keyboard.

3. Make the necessary changes to the patient's credit card information and click **Save**.

4. Click **Close** to exit the **Patient Credit Card List** screen.

Deleting a Credit Card Record

1. Call up the patient profile and go to **Patient** > **View Credit Cards**.

2. The **Patient Credit Card List** screen will appear. Select the credit card you want to modify and click **Del** or press the **Delete** key on your keyboard.

3. A prompt will appear asking if you are sure you want to delete the credit card record. Answer **Yes**.

4. Click **Close** to exit the **Patient Credit Card List** screen.

Reports

Reports can be accessed from the Alt-X Start screen under the Reports menu; patient reports are available under Reports > Patient, and can also be accessed from the F3 - Patient screen in the Reports menu. The following reports are supported in Kroll 10:

Patient

- AR Taxes Breakdown Report
- ATC Report
- AutoMed Report
- Compliance Label
- Creatinine Clearance Report
- Dispill Report
- DistriMedic Report
- Drug Interaction Analysis Report
- EcoloPharm EcoPill Report
- FlexRx Label Report
- MAR Pak Report
- Medical Expense Invoice
- Medical Expenses
- Medical History
- Medication Reconciliation Report
- Medication Sheet
- MRx Label Report

- MTS OnDemand
- PACMED Report
- Passtime Summary
- Patient (Comment Report)
- Patient CSV Dump
- Patient Drug Summary Report
- Patient Encounters Report
- Patient Listing Report
- Patient Mailing List Report
- Patient Medical Conditions
- Patient Medication Chart
- Patient Profile Report
- Persa-Kit
- Plain Paper MAR
- Shipping Report
- SynMed Report
- Tax Receipt

Rx

- Adjudication Totals
- Claims Invoice
- Compound Prescription Audit Report
- Daily/Monthly Totals
- Daily/Weekly Workload Report
- DTC Report
- DUR Letter Report
- DUR Report
- Electronic Hardcopy
- Expanded Scope of Practice Report
- Future Usage Report
- Hardcopy Report
- IMS Report
- Laser Label Report
- Narcotic Control Record
- Narcotic Rx Request Report
- NIHB Claims Invoice
- Plan Billing Summary
- Plan Breakdown
- Plan Discount Report
- Plan Summary
- Prescription Sales Analysis Report

- Price Strategy Summary
- Print Script Image Report
- Profit/Loss
- Refills Due
- Rx (Comments Report)
- Rx Breakdown
- Rx Canada Report
- Rx for Drug/Doctor Groups
- Rx Stop/Expiry/Inactivated/Copied
- Rx Summary
- Rx Totals Report
- Rx Transfers Report
- Rxs in Bins
- Special Services Fees Report
- Therapeutic Class Report
- Time Distribution Report
- Undeliverable Rxs Report
- Will Call BIN Report
- Workflow Daily Sales Report
- Workflow DUE Report

Drug

- Active Drug Listing Report
- Drug (Comments Report)
- Drug Future Orders Report
- Drug Inventory History Report
- Drug Inventory Listing Report
- Drug Listing Report
- Drug Price Change Report
- Drug Purchases Report
- Drug Usage Report
- Drug Utilization Audit Report
- Generic Sales Analysis Report
- Inventory Report
- Mixture Listing Report
- Narcotic Report

Doctor

- Doctor (Comments Report)
- Doctor Listing Report
- Doctor Rx Filled Report
- Patient / Primary Prescriber Ratio List

Nursing Home

- Active Drug Listing Report
- Nursing Home (Comments Report)
- Nursing Home Drug Usage Report
- Nursing Home Drug Utilization Report
- Nursing Home Listing/Info Report
- Nursing Home Passtime Report
- Nursing Home Patient Listing Report
- Nursing Home Patient Statistics
- Standing Orders Recall Report

Administration

- AR Adjustments Audit Report
- Field Modification History Report
- Paid Same Report
- Patient Network Audit Report
- Pharmacy Business Analysis Report
- Pre-Authorized Charges Report
- Rx Counseling Report
- Rx Reprint / Modify Report
- Submitted / Received Difference
- User Information Report
- Workflow Business Summary Report

Other

- AR (Comments Report)
- Bin / Totes Report
- Comments Report
- Dayforce Data Report
- Delivery Order Summary Report
- Mailing List Report
- Medication Review Summary Report
- Network vs Adjudication Totals
- Pre-Authorized Charges Report
- Price Tree Report
- Security Audit Report
- Sig Code Listing
- ToDo Report
- Weekly Comparison Report

Old

- Old Daily Totals
- Old Dispill (Style 1) Report
- Old Dispill (Style 2) Report
- Old Monthly Totals

Reports can also be accessed by clicking **Reports** > **Search** and typing in any part of the report name.

Common Daily Reports

This section outlines the most commonly used daily reports in Kroll.

End of Day Report

The End of Day Report provides a snapshot of the prescription totals for the day.

1. To generate this report, go to **File** > **Exit** or press **Alt** + **F** + **X** on your keyboard.

2. A prompt will appear asking if you want to print the End of Day Report. Select **Yes**.

Sample End of Day Report:

Totals For 10-Sep-2014			
New Rxs	0	Acq	0.00
Repeat Rxs	0	Eff. Mkup	0.00
Total Rxs	0	[illegible]	0.00
Printed On		Fee	0.00
[illegible]		Total	0.00
		G.P. %	0.00

Totals For 10-Sep-2014			
New Rxs	0	Acq	0.00
Repeat Rxs	0	Eff. Mkup	0.00
Total Rxs	0	[illegible]	0.00
Printed On		Fee	0.00
[illegible]		Total	0.00
		G.P. %	0.00

Totals For 10-Sep-2014			
New Rxs	0	Acq	0.00
Repeat Rxs	0	Eff. Mkup	0.00
Total Rxs	0	[illegible]	0.00
Printed On		Fee	0.00
[illegible]		Total	0.00
		G.P. %	0.00

Network Totals Report (Adjudication Totals From Network)

At the end of the day, a Network Totals Report will communicate real time to the third party plans providing the totals of the day for those plans. The Day End Report and Network Totals Report should balance.

You will be prompted to generate the Network Totals Report after generating the End of Day Report.

Sample Network Totals Report:

Adjudication Totals From Network

ReportParameters
Adjudication Date - 10/09/2014

Adjudication Totals From Network
Printed on: 10/09/2014 16:33:51

Code	Plan Name	Claims Amount	#	Same Day Reversals Amount	#	Prior Day Reversals Amount	#	Net Amount
AHE	Assure Health (SHNS)	Failed to get totals: Could not connect to IP Address: Port:6180□Error: WinSock Error: 1110						
Total		0.00	0	0.00	0	0.00	0	0.00

Common Weekly Reports

This section outlines the most commonly used weekly reports in Kroll.

Adjudication Totals Report

The Adjudication Totals Report represents what Kroll has recorded as being paid by the third parties (unlike the Network Totals Report, the Adjudication Totals Report does not communicate real time to the third party plans).

1. To generate this report, go to **Reports** > **Rx** > **Adjudication Totals**.
2. The **Adjudication Totals Report** form will appear.
   - In the **Selection** tab, use the **Date Range**, **Starting**, and **Ending** fields to specify a date range. Click the **F2** button next to the **Plans** field to select the plans you want included in the report (optional).
   - Click the **Options** tab to specify the report parameters. Use the **Group By** options to specify how the report will be organized.

3. Click **Preview** to preview the report or **Print** to generate a printout of the report.

Sample Adjudication Totals Report:

Daily/Monthly Totals Report

The Daily/Monthly Totals Reports summarizes the total dollar values for the date range specified on either grouping them daily or monthly based on your selections in the report. It is important to note that this is a fill-based report, meaning it will only reconcile with other fill-based reports.

1. To generate this report, go to **Main Menu** > **Reports** > **Rx** > **Daily/Monthly Totals**.
2. The **Daily/Monthly Totals Report** form will appear.
   - Use the **Date Range**, **Starting**, and **Ending** fields to specify a date range.
   - Click the **F2** button next to the **Patient Groups** field to select the patient groups you want included in the report (optional).
   - If you want to generate the report for specific patients only, select the **Patient** button and click **Add**. Perform a patient search for each patient you want included in the report.

- If you want to generate the report for specific nursing homes only, select the **Home** button and click **Add**. Select the **Home** and applicable **Ward** and click **OK**. Repeat this step for each home you want included in the report.

3. Click **Preview** to preview the report or **Print** to generate a printout of the report.

Sample Daily/Monthly Totals Report:

Plan Summary Report

The Plan Summary Report summarizes the total dollar values generated for all plans including cash within a specified date range.

1. To generate this report, go to **Reports** > **Rx** > **Plan Summary**.

2. The **Plan Summary Report** form will appear.

   - Use the **Date Range**, **Starting**, and **Ending** fields to specify a date range.
   - Click the **F2** button next to the **Patient Groups** field to select the patient groups you want included in the report (optional).
   - If you want to generate the report for specific nursing homes only, select the **Home** button and click **Add**. Select the **Home** and applicable **Ward** and click **OK**. Repeat this step for each home you want included in the report.

3. Click **Preview** to preview the report or **Print** to generate a printout of the report.

Sample Plan Summary Report:


Plan Summary Report

Other Common Reports

This section outlines the other most commonly used reports in Kroll.

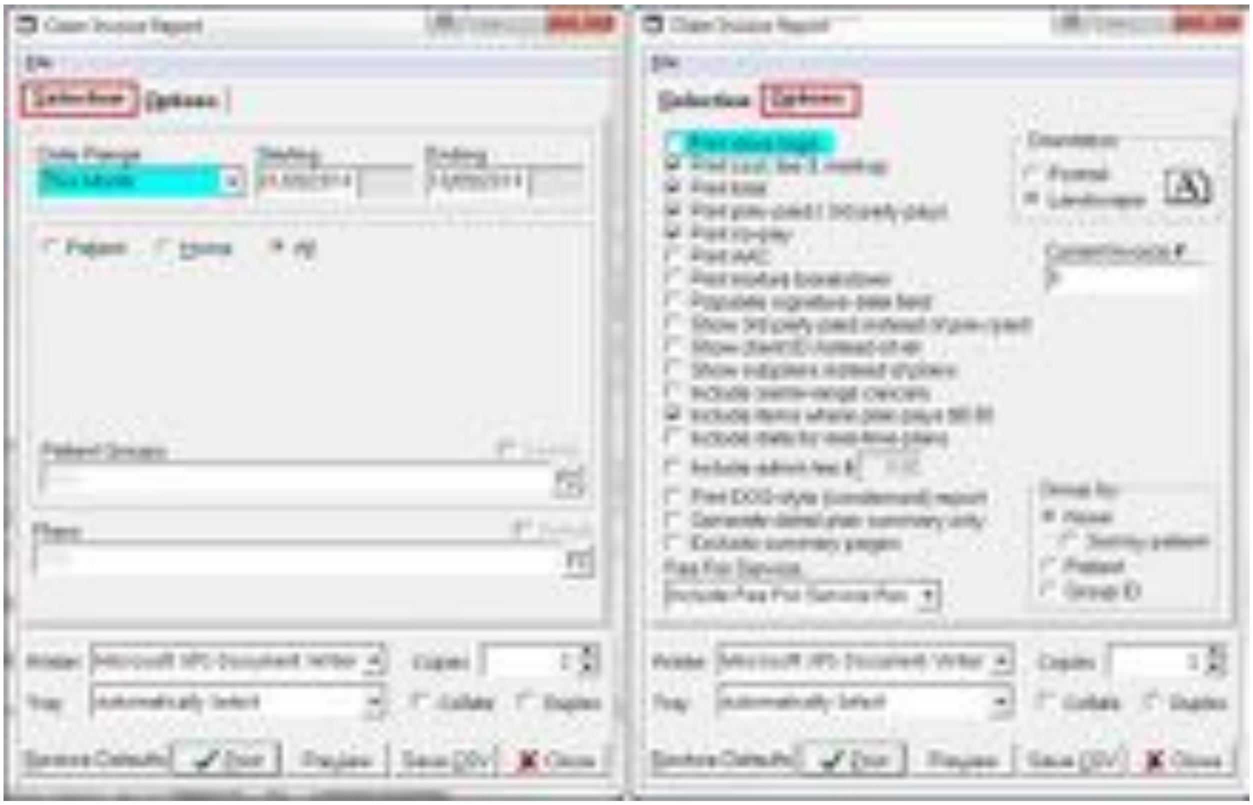
Claims Invoice Report

The Claims Invoice Report captures the prescriptions filled to non-real time plans (i.e., manual billing plans).

1. To generate this report, go to **Reports** > **Rx** > **Claims Invoice**.
2. The **Claims Invoice Report** form will appear.

- Use the **Date Range**, **Starting**, and **Ending** fields to specify a date range.
- Click the **F2** button next to the **Patient Groups** field to select the patient groups you want included in the report (optional).
- If you want to generate the report for specific patients only, select the **Patient** button and click **Add**. Perform a patient search for each patient you want included in the report.
- If you want to generate the report for specific nursing homes only, select the **Home** button and click **Add**. Select the **Home** and applicable **Ward** and click **OK**. Repeat this step for each home you want included in the report.

- Click the **Options** tab to specify the report parameters. Use the **Group By** options to specify how the report will be organized.



The **Options** tab determines how the report is generated. The most common fields that should be enabled are described below:

Print Cost, Fee & Markup

This is required when manually submitting to a plan in order for them to pay.

Print Total

The plan wants to see this information.

Print Prev Paid/3rd Party Pays

This is important to the manual bill plan if a previous online plan has paid any of the amount of the claim.

Print Co-pay

This is also important to the manual bill plan if there is a preset deductible for that plan. (i.e. the manual plan pays 80% and the patient pays 20%).

Show Sub-plans Instead of Plans

This covers if the plan is a manual bill plan of another for example: I create a manual bill plan under the Assure plan, it then becomes a sub plan of Assure.

Include Same-Range Cancels

This is important to include in case the prescription has been cancelled and then rebilled. The manual billed plan will want to see the cancel for that number and then the rebill with the new Rx number.

Include Items Where Plan Pays $0.00

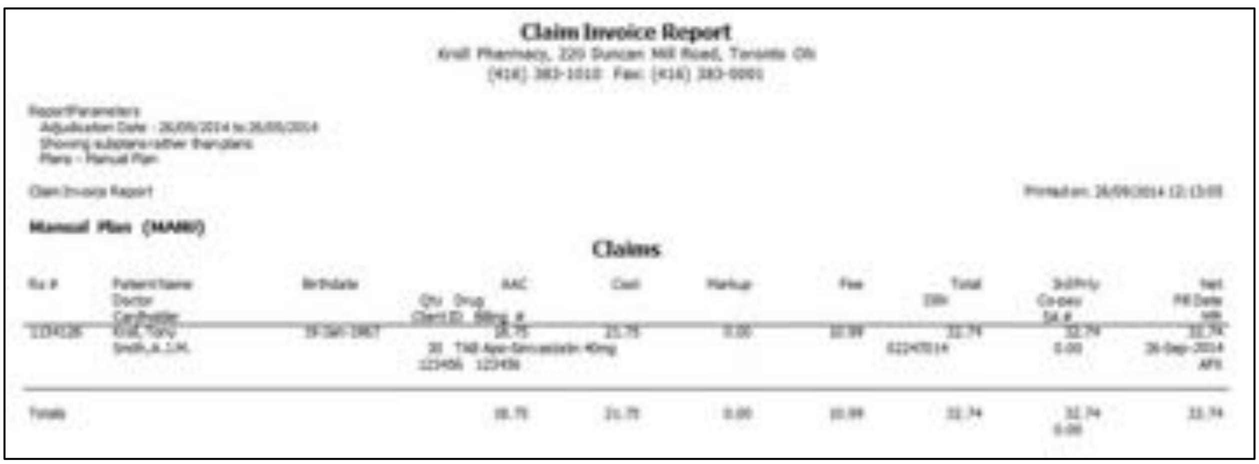
Best to include this amount so that it picks up any of the plans where we have said bill manually.

Include Data for Real-Time Plans

We want to include the data of real time plans that may have paid a portion of the prescription previously or we have said to bill manually.

3. Click **Preview** to preview the report or **Print** to generate a printout of the report.

<u>Sample Claim Invoice Report (Claims):</u>



Claim Invoice Report

Claims

The second page printed for the report shows the total number of Rxs billed, reversed, and the net amounts due. It also includes the cost, markup, fee total, copay, and third party amounts. This is typically kept for pharmacy records.

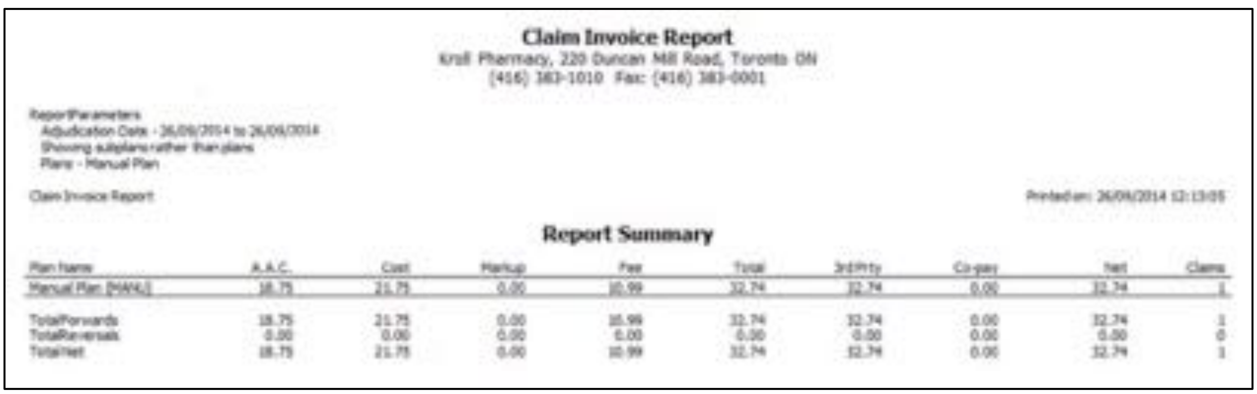
Sample Claim Invoice Report (Plan Summary):

Claim Invoice Report

Plan Summary

The last page is the Report Summary. This page is typically kept by the pharmacy to track what they have submitted.

Sample Claims Invoice Report (Report Summary):



Claim Invoice Report
Kroll Pharmacy, 220 Duncan Mill Road, Toronto ON
(416) 383-1010 Fax: (416) 383-0001

Report Parameters
Adjudication Date - 26/09/2014 to 26/09/2014
Showing subplans rather than plans
Plans - Manual Plan

Claim Invoice Report

Printed on: 26/09/2014 12:13:05

Report Summary

Plan Name	A.A.C.	Cost	Markup	Fee	Total	3rd Prty	Co-pay	Net	Claims
Manual Plan (MANU)	18.75	21.75	0.00	10.99	32.74	32.74	0.00	32.74	1
Total Forwards	18.75	21.75	0.00	10.99	32.74	32.74	0.00	32.74	1
Total Reversals	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0
Total Net	18.75	21.75	0.00	10.99	32.74	32.74	0.00	32.74	1

Narcotic Report

The Narcotic Report is used to track the reportable and forced reportable drugs that have been dispensed by the pharmacy.

1. To generate this report, go to **Reports** > **Drug** > **Narcotic Report**.
2. The **Narcotic Report** form will appear.
   - Use the **Date Range**, **Starting**, and **Ending** fields to specify a date range.
   - Click the **F2** button next to the **Drug Schedule** field to select the drug schedule(s) you want included in the report (optional).
   - Use the **Show** menu to specify if you want the report to show **All Rxs**, **Rxs with Doctor Authorization**, or **Rxs without Doctor Authorization**.
   - Use the **Sort By** menu to specify if you want the report sorted by **Date**, **Brand/Date**, **Generic/Date**, or **Patient/Date**.
   - Place a checkmark next to the options you want applied to the report.

3. Click **Preview** to preview the report or **Print** to generate a printout of the report.

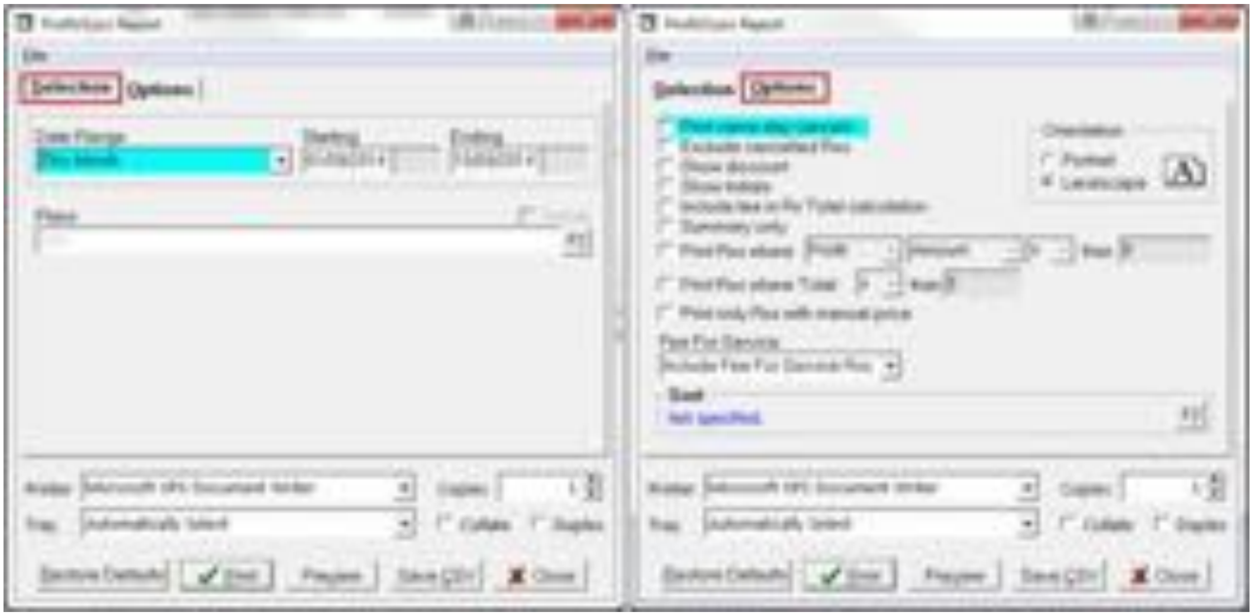
Sample Narcotic Report:

Profit/Loss Report

The Profit/Loss Report is used to identify profit and loss margins. This report can print all Rxs for a specific profit and loss amount or percentage for date range selected. It will also identify discounts provided by users during the adjudication process.

1. To generate this report, go to **Reports** > **Rx** > **Profit/Loss**.
2. The **Profit/Loss Report** form will appear.
   - Use the **Date Range**, **Starting**, and **Ending** fields to specify a date range.
   - Click the **F2** button next to the **Plans** field to select the plans you want included in the report (optional).

- Click the **Options** tab to specify the report parameters.



The **Options** tab determines how the report is generated. The most common fields that should be enabled are described below:

Print Same Day Cancels
When enabled, this option will include Rxs that were cancelled on the same day they were filled.

Exclude Cancelled Rxs
When enabled, this option will exclude cancelled Rxs from the report.

Show Discount
Enable this option to include any discounts that were given to the prescriptions by you during the adjudication process.

Show Initials
Enable this option to include users Initials who filled the prescription

Include Fee in Rx Total Calculation
Enable this option if you wish to include the Fee in total $ calculations.

Summary Only
Enable this option to print a summary (no details) of the options enabled.

Print Rxs where the Profit Amount > than XX

Enable this option to open up fields to include profile, loss or discounts, amounts or percentages that are >, <, =, >=, or <= than a specific dollar amount.

Print Rxs where Total > than 0

Enable this option to include Rxs where the total is >, <, =, >=, <=, than XXX (any given dollar amount).

Print only Rxs with Manual Price

Enable this option to include only the prescriptions that have been setup with a manual price override.

Fee for Service

Enable this option to include Rxs flagged as Fee for Service, exclude Rxs flagged as Fee for Service or only include Rxs flagged as Fee for Service.

3. Click **Preview** to preview the report or **Print** to generate a printout of the report.

Sample Profit/Loss Report:


Profit/Loss Report

Patient Medical History Report

The Patient Medical History Report prints the contents of the patient's patient profile.

1. To generate this report, go to **Reports** > **Patient** > **Patient Medical History**.
2. The **Patient Medical History Report** form will appear.

- Use the **Date Range**, **Starting**, and **Ending** fields to specify a date range.
- Click the **F2** button next to the **Patient Groups** field to select the patient groups you want included in the report (optional).
- If you want to generate the report for specific patients only, select the **Patient** button and click **Add**. Perform a patient search for each patient you want included in the report.
- If you want to generate the report for specific nursing homes only, select the **Home** button and click **Add**. Select the **Home** and applicable **Ward** and click **OK**. Repeat this step for each home you want included in the report.
- Click the **Options** tab to specify the report parameters.

The **Options** tab determines how the report is generated. The most common fields that should be enabled are described below:

Print Store Logo

Enable this option to print your store logo on the report.

Print Billing Info

Enable this option to include patient billing information such as the patient plan and billing number.

Include Inactive Rxs

Enable this option to include prescriptions that are inactive for the patient.

Display Refills

Enable this option to group refills together.

Print Disclaimer

Enable this option to print a disclaimer at the bottom of every page or the option to only print the disclaimer at the end of the report.

3. Click **Preview** to preview the report or **Print** to generate a printout of the report.

<u>Sample Patient Medical History Report:</u>

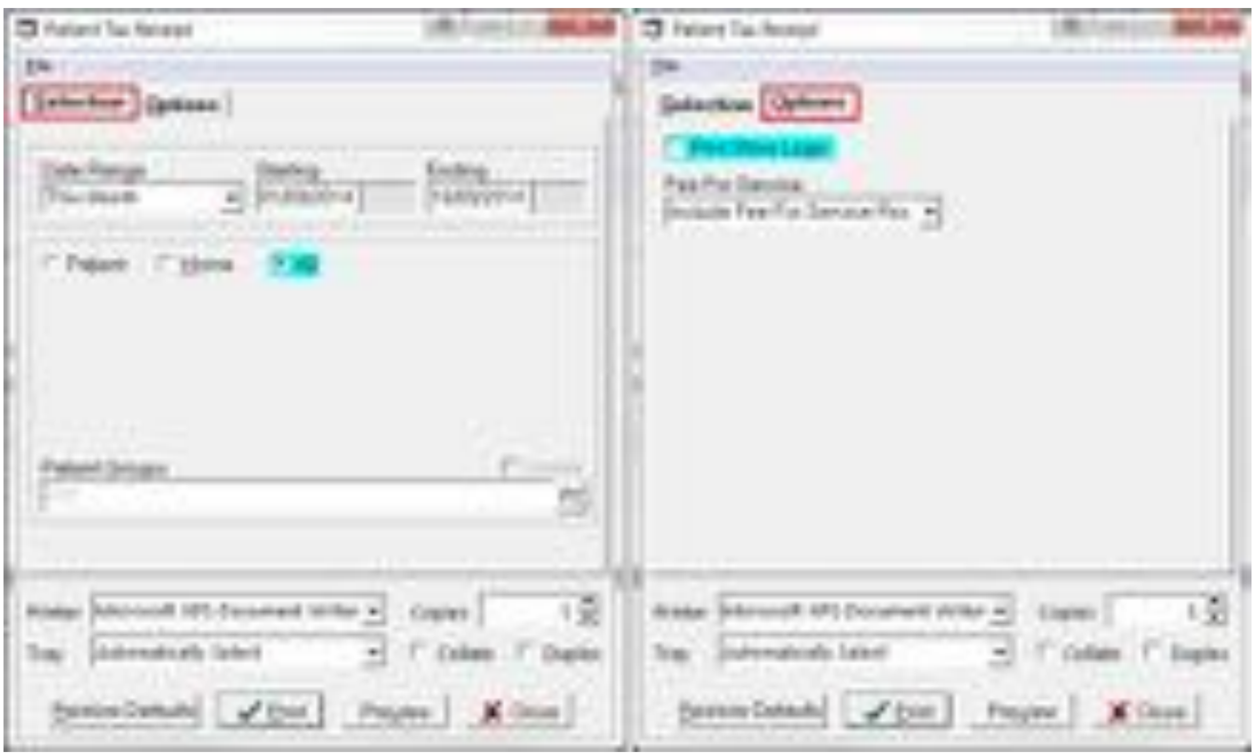
Patient Tax Receipt Report

The Patient Tax Receipt Report prints the totals amount prescription dollar spent and is commonly used for tax purposes. This is not a detailed report as Revenue Canada only requires the total dollars spent and not the Rx details.

1. To generate this report, go to **Reports** > **Patient** > **Tax Receipt**.

2. The **Patient Tax Receipt** form will appear.

    - Use the **Date Range**, **Starting**, and **Ending** fields to specify a date range.
    - Click the **F2** button next to the **Patient Groups** field to select the patient groups you want included in the report (optional).
    - If you want to generate the report for specific patients only, select the **Patient** button and click **Add**. Perform a patient search for each patient you want included in the report.
    - If you want to generate the report for specific nursing homes only, select the **Home** button and click **Add**. Select the **Home** and applicable **Ward** and click **OK**. Repeat this step for each home you want included in the report.
    - Click the **Options** tab to specify the report parameters.



3. Click **Preview** to preview the report or **Print** to generate a printout of the report.

Sample Patient Tax Receipt Report:

Patient Tax Receipt Report

Test, John

OFFICIAL RECEIPT

Rx for Drug/Doctor Group Report

The Rx for Drug/Doctor Groups report is used to find a particular dispense for a specific drug, doctor, drug group, or doctor group. This report is especially useful for drug recalls.

1. To generate this report, go to **Reports** > **Rx** > **Rx for Drug/Doctor Groups**.
2. The **Rx for Drug/Doctor Groups Report** form will appear.

Selection tab:

- Select **All active Rxs** to generate the report for all currently active Rxs, or **Rxs filled** to specify a **Date Range**, **Starting** date, and **Ending** date.
- Use the **Rx Lot Number** field to specify what lot numbers you want included in the report (optional).

- Click the **F2** button next to the **Plans** field to select the plans you want included in the report (optional).

Patient tab:

- If you want to generate the report for specific patients only, select the **Patient** button and click **Add**. Perform a patient search for each patient you want included in the report.
- If you want to generate the report for specific nursing homes only, select the **Home** button and click **Add**. Select the **Home** and applicable **Ward** and click **OK**. Repeat this step for each home you want included in the report.
- Click the **F2** button next to the **Patient Groups** field to select the patient groups you want included in the report (optional).
- Click the **F2** button next to the **Provinces/States** field to select the provinces or states you want included in the report (optional).

Drug tab:

- Click the **F2** button next to the **Drug Groups** field to select the drug groups you want included in the report (optional).
- Click the **F2** button next to the **Drug Schedule** field to select the drug schedules you want included in the report (optional).
- Click the **F2** button next to the **Drug Departments** field to select the drug departments you want included in the report (optional).
- If you want to generate the report for specific drugs only, click the **Add** button below the **Drug** field. Perform a drug search for each drug you want included in the report. The **Remove** button will remove individual items from the **Drug** list, and the **Clear** button will remove all items from the **Drug** list.

Doctor tab:

- Click the **F2** button next to the **Doctor Groups** field to select the doctor groups you want included in the report (optional).
- If you want to generate the report for specific prescribers only, click the **Add** button below the **Doctor** field. Perform a prescriber search for each prescriber you want included in the report. The **Remove** button will remove individual prescribers from the **Doctor** list, and the **Clear** button will remove all prescribers from the **Doctor** list.

Options tab:

- Click the **Options** tab to specify the report parameters.
- Use the **Group By** options to specify how the report will be organized.
- Select **Include Fee For Service Rxs**, **Exclude Fee For Service Rxs**, or **Only Fee For Service Rxs** to specify how you want the report to handle Fee For Service Rxs.

The **Options** tab determines how the report is generated. The most common fields that should be enabled are described below:

Print Unfills
Include all Unfills (Rxs placed on Hold) in the report

Print Not Dispensed
Include all Rxs marked as Not Dispensed (i.e. OTC Rxs)

Print Inactive
Include all Rxs that have a status of Inactive

New Rxs only
This option will only print new prescriptions

Show Drug
This will print the drug name

Show Lot#
If you maintain lot numbers in your drug cards this will include them on the report

Show Rx Details
When this option is enabled it will print the Rx quantity, the status, the first fill, remaining quantity, authorized quantity and the current fill date.

Financial Breakdown
This option will include all financial details of the prescription, for example: Actual Acquisition Cost, Effective Markup, Markup Percentage, Fees, Special Services Code Fee, Total of the prescription (including the previous amounts), and Gross Profit Percentage along with the Co-Pay amount.

Separate Special Services Fee
With this option enabled, it will separate the SSC field (Special Services Fee Field) from the other cost fields.

Print Sig Codes
With this option enabled, it will print with the sig code for the prescription.

Sort by Province/State
When this option is enabled, it will sort by Province or State.

Page break on new Prov/State
With this option enabled, it will print all patients in the same province or state that are grouped together on a separate page.

Show Patient Address Information
When selected this will include patient address and telephone number

Show Extended Patient Information
When enabled, it will print Nursing Home, Ward, and Postal Code information.

Show Room and Bed Number
If a patient is in a Nursing Home, it will include the Bed Number assigned to that patient.

Show extended Doctor Information
When this option is selected it will then include doctors License number, phone number and address.

Checked by
With this option enabled, it will print a signature line found at the bottom of the report.

Group by options
This option allows you to group the report either by Drug (which works well if you have selected more than one drug), Patient (works well also if you have selected more than one Patient) or by Rx # (which will group in chronological order of dispense by Rx number).

Page Break
This allows you to have select items print on separate pages, like the page break on new prov/state you may also choose to have a separate page to print for each of the following: Nursing Home, Ward, Doctor, Patient or Room.

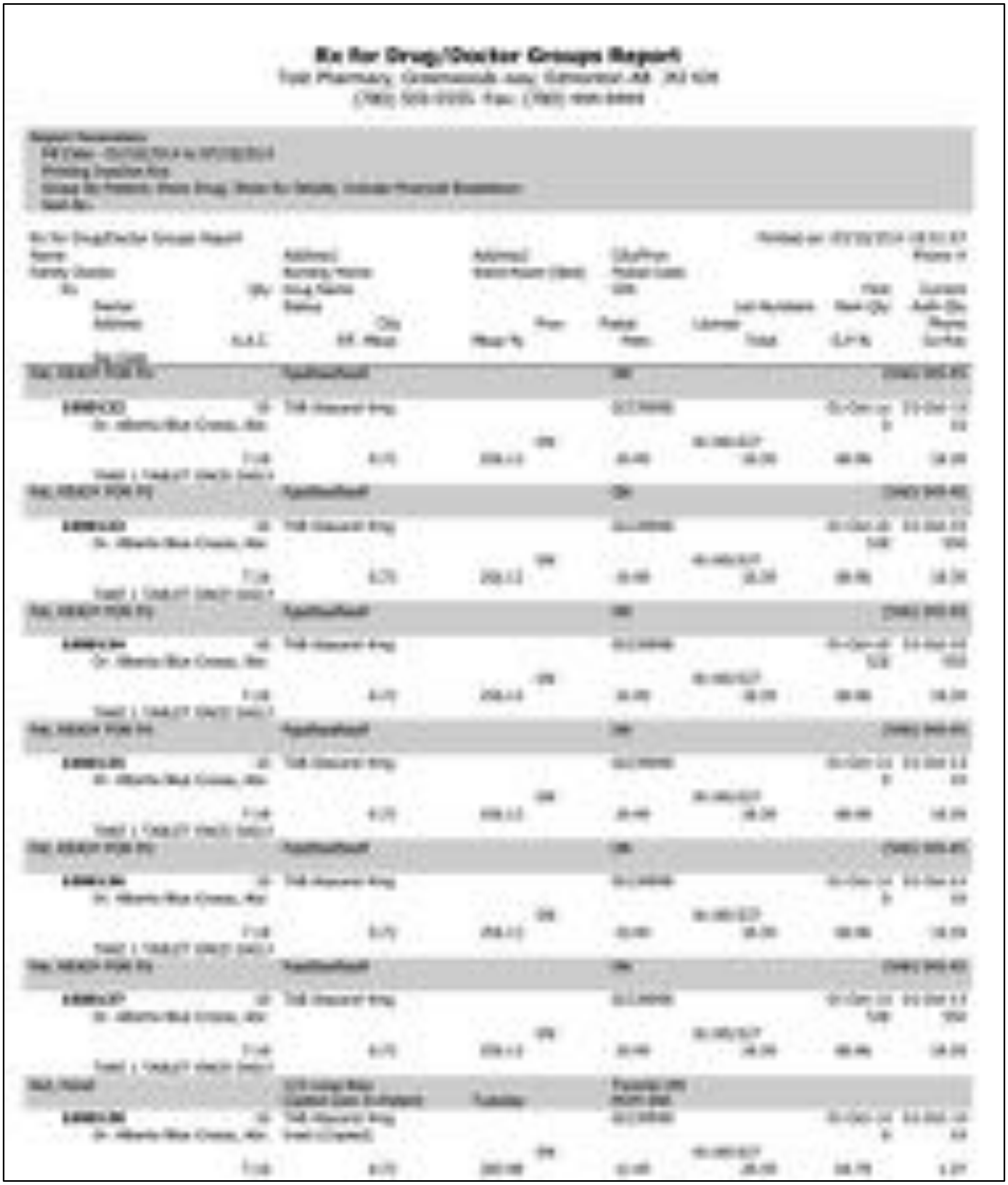
Fee for Service
This gives you the option to include fee for service items or not include them.

Sort By
This sort option is only enabled when grouping by patient. If you sort by Patient are presented with the following sort options:

- Doctor/Home/Ward/Patient
- Doctor/Home/Ward/Room/Bed
- Doctor/Patient
- Home/Doctor/Patient
- Home/Ward/Doctor/Patient
- Home/Ward/Patient
- Home/Ward/Room/Bed
- Patient

3. Click **Preview** to preview the report or **Print** to generate a printout of the report.

Sample Drug/Doctor Groups Report:



Drug Inventory Listing Report

The Drug Inventory Listing Report prints a list of drugs and their inventory values and the details are based on the options you choose. This report can be run to show a total value of inventory in the pharmacy or a line for each drug.

1. To generate this report, go to **Reports** > **Drug** > **Drug Inventory Listing Report**.
2. The **Drug Inventory Listing Report** form will appear.

Selection tab:

- Click the **F2** button next to the **Groups** field to select the drug groups you want included in the report (optional).
- Click the **F2** button next to the **Price Group** field to select the price groups you want included in the report (optional).
- Click the **F2** button next to the **Manufacturer** field to select the manufacturers you want included in the report (optional).
- Click the **F2** button next to the **Schedule** field to select the drug schedules you want included in the report (optional).
- Click the **F2** button next to the **Default Vendor** field to select the vendors you want included in the report (optional).
- Click the **F2** button next to the **Tiers** field to select the drug tiers you want included in the report (optional).
- Click the **F2** button next to the **Departments** field to select the department groups you want included in the report (optional).

Options tab:

- Select **Active**, **Inactive**, or **Either** from the **Pack Status** section to specify what drug packs will be included in the report.
- Select **Less Than Zero**, **Equal To Zero**, and/or **Greater Than Zero** from the **On Hand (per pack)** section to specify what on-hand values will be included in the report.

Include 'No Inventory Adjustment' Packs

This will print all drugs not flagged for inventory adjustment (i.e. during the "**Receive** "process).

Show Only Packs not Dispensed Since XXX

If this option is enabled with a date, it will only include drugs that have not been dispensed (filled) by the date entered.

Print Packs with an Inventory Value Greater than XX

Enable this option to print all drugs with an inventory value greater than i.e. 500.00 (the report would not include drugs with an inventory less than $500.00)

Show Only Drugs with an Onhand Qty Greater than XX Days Supply

When enabled, this report will print any values greater or less than the days supply selected.

Show Inventory Total Only

If enabled, only an inventory value will print, not a detailed list.

Show only Drugs Excluded from Kroll Price Updates

When enabled, this will present a list of drugs that have been excluded in Kroll price updates. This is determined from a flag in the Drug Card ‘Only allow manual price changes’

Sort By

Select the sorting option you desire, i.e. sort by Brand Name:

Options 2 tab:

Show Quickcode

Enable this option to print any quickcode assigned to a drug. When selected there is also an option to then sort by quickcode.

Show Manufacturer

Enable this option to print the manufacturer of the drug

Show Din
Enable this option to print the drug identification number

Show Pack Size
Enable this option to include the drugs pack size

Show Acquisition Cost
Enable this option to print the acquisition costs of the drugs

McKesson
Enable this option to include the dollar value listed in the McKesson field of the drug card

KF
Include this option to include the dollar value listed in the KF field of the drug card.

ODB BAP
Enable this option to include the ODB BAP value (Ontario Only)

ODB MAC
Enable this option to include the ODB MAC (Ontario Only)

Show On-Hand Min
Enable this option to include the min on-hand value (this appears when inventory control is set to min/max)

Show On-Hand Max
Enable this option to include the max on hand (this appears when inventory control is set to min/max)

Show Days Supply
Enable this option to include the days' supply set inventory control (this appears when inventory control is set to days' supply)

Show Average Daily Usage
Enable this option to include the average daily usage

Show Brand and Generic Names
Enable this option to print the brand and generic names of the drugs

Show UPC
Enable this option to include the UPC. It will include the UPC for each individual drug.

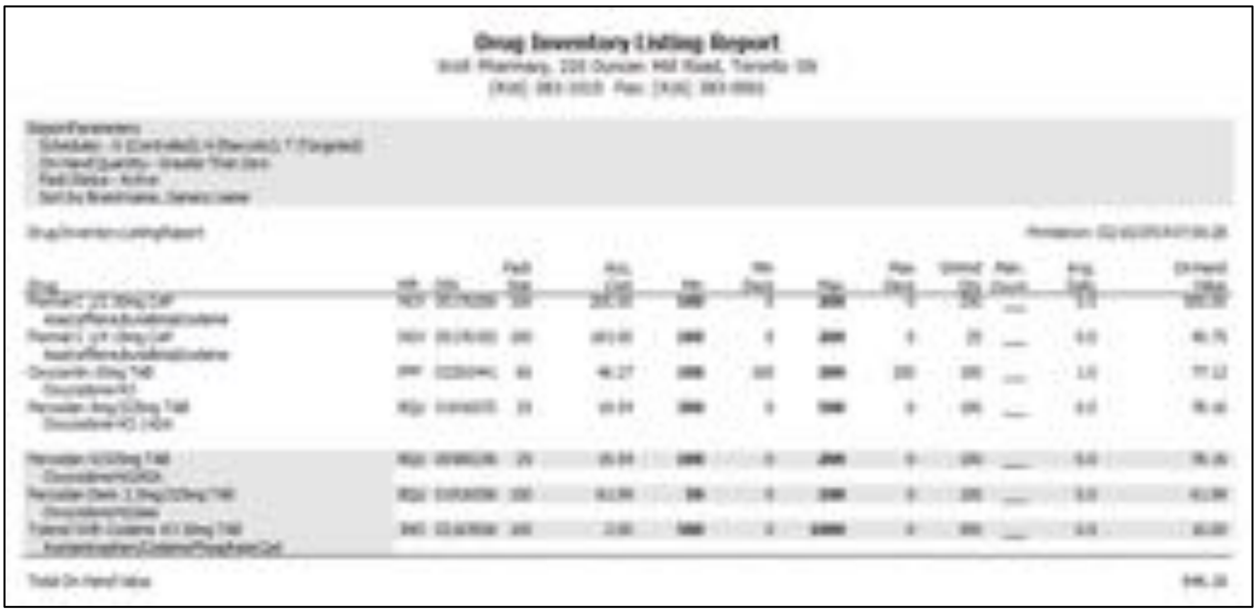
Show Last Used Date
Include this option to print the last time the drug was filled in a prescription

Show Central Maintenance Flag
Include this option to print when a drug is centrally maintained.

Show Blank Line after On-Hand Quantity
Enable this option to present a line after each on hand value. This is often used to record the number of tablets counted during fiscal inventory process.

3. Click **Preview** to preview the report or **Print** to generate a printout of the report.

Sample Drug Inventory Listing Report:



Drug Inventory History Report

The Drug Inventory History Report gives a historical snapshot of drug inventory values based on the options you choose.

1. To generate this report, go to **Reports** > **Drug** > **Drug Inventory History**.
2. The **Drug Inventory History Report** form will appear.

Selection tab:

- Select **All active Rxs** to generate the report for all currently active Rxs, or **Rxs filled** to specify a **Date Range**, **Starting** date, and **Ending** date.
- Click the **F2** button next to the **Manufacturer** field to select the drug manufacturers you want included in the report (optional).
- Click the **F2** button next to the **Drug Groups** field to select the drug groups you want included in the report (optional).

- Click the **F2** button next to the **Drug Schedule** field to select the drug schedules you want included in the report (optional).
- Click the **F2** button next to the **Drug Pricing Groups** field to select the drug pricing groups you want included in the report (optional).
- Click the **F2** button next to the **Inventory Changes** field to select sources of inventory change you want included in the report (optional).

Selection 2 tab:

- Click the **F2** button next to the **Drug Tiers** field to select the drug tiers you want included in the report (optional).
- Click the **F2** button next to the **Drug Departments** field to select the drug departments you want included in the report (optional).

- If you want to generate the report for specific drugs only, click the **Add** button below the **Drug** field. Perform a drug search for each drug you want included in the report. The **Remove** button will remove individual drugs from the **Drug** list, and the **Clear** button will remove all drugs from the **Drug** list.

Options tab:

Print each drug pack on a new page
When selected each pack size will print on a separate page.

Show DIN
When enabled, this will include the Drug Identification Number of the drug(s) selected.

Show Schedule
When enabled, this option will include the drug schedule.

Show Reportable
When enabled, this option will indicate if the reportable flag on the drug card.

Show Acq Cost
When enabled, the drug acquisition cost will be included.

Show Primary Vendor's Item Number
When enabled, this will include the drugs primary vendor item number.

Show Secondary Vendor’s Item Number

When enabled, this will include the drugs secondary vendor item number.

Show dollar value of Units moved

When enabled, this will include the dollar value of the units moved.

Show Manufacturer

Enable this option to include the manufacturer’s short code, for example APX for Apotex.

Show Brand/Generic Type

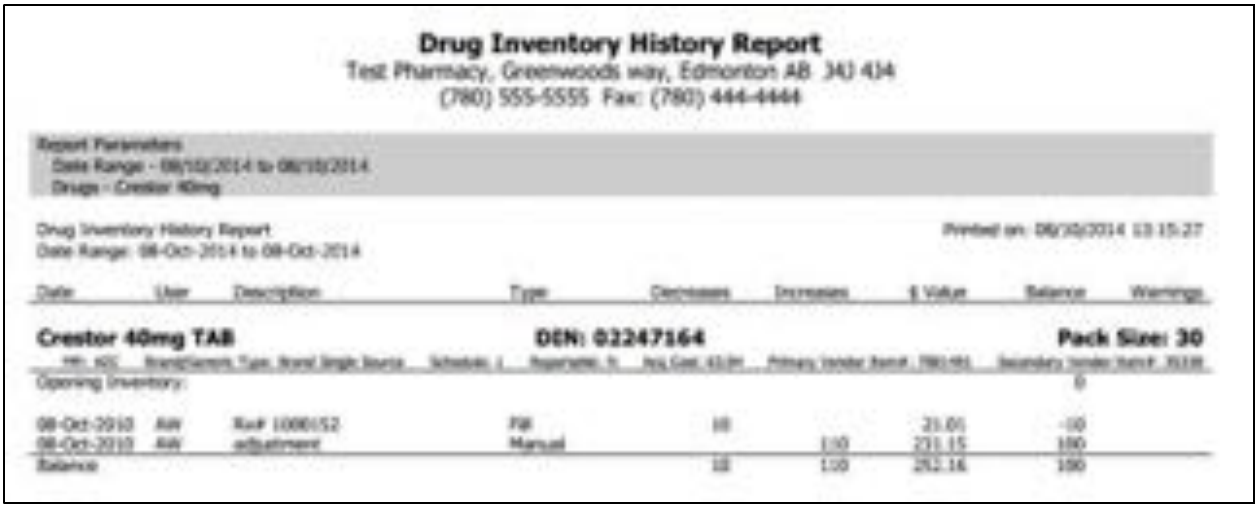
Enable this option to print the type of drug, for example: Generic Multi Source, Generic Single source, Brand, Brand single source, or Brand Multi source.

Show reason for Inventory Change

When enabled, this option will print the reason for the change in inventory, at the time you made the change.

3. Click **Preview** to preview the report or **Print** to generate a printout of the report.

<u>Sample Drug Inventory History Report:</u>



Drug Inventory History Report
Test Pharmacy, Greenwoods way, Edmonton AB J4J 4J4
(780) 555-5555 Fax: (780) 444-4444

Report Parameters
Date Range - 08/10/2014 to 08/10/2014
Drugs - Crestor 40mg

Drug Inventory History Report
Date Range: 08-Oct-2014 to 08-Oct-2014
Printed on: 08/10/2014 13:15:27

Date	User	Description	Type	Decreases	Increases	$ Value	Balance	Warnings
Crestor 40mg TAB			**DIN: 02247164**				**Pack Size: 30**	
Opening Inventory							0	
08-Oct-2010	AW	Rx# 1000152	Fill	10		21.01	-10	
08-Oct-2010	AW	adjustment	Manual		110	231.15	100	
Balance				10	110	252.16	100	

Rx Totals Report

The Rx Totals Report prints the number of new Rxs, repeat Rxs, total Rxs, and percentage totals based on your selected report options.

1. To generate this report, go to **Reports** > **Rx** > **Rx Totals**.
2. The **Rx Totals Report** form will appear.

Selection tab:

- Use the **Date Range**, **Starting**, and **Ending** fields to specify a date range.
- If you want to generate the report for specific patients only, select the **Patient** button and click **Add**. Perform a patient search for each patient you want included in the report.
- If you want to generate the report for specific nursing homes only, select the **Home** button and click **Add**. Select the **Home** and applicable **Ward** and click **OK**. Repeat this step for each home you want included in the report.
- Click the **F2** button next to the **Patient Groups** field to select the patient groups you want included in the report (optional).
- Click the **F2** button next to the **Plans** field to select the drug plans you want included in the report (optional).

Doctor tab:

- Click the **F2** button next to the **Doctor Groups** field to select the doctor groups you want included in the report (optional).

- If you want to generate the report for specific prescribers only, click the **Add** button below the **Doctor** field. Perform a prescriber search for each prescriber you want included in the report. The **Remove** button will remove individual prescribers from the **Doctor** list, and the **Clear** button will remove all prescribers from the **Doctor** list.

Drug tab:

- Click the **F2** button next to the **Drug Price Groups** field to select the drug price groups you want included in the report (optional).
- Click the **F2** button next to the **Drug Groups** field to select the drug groups you want included in the report (optional).

Users tab:

- Click the **F2** button next to the **Users** field to select users you want included in the report (optional).
- Click the **F2** button next to the **User Groups** field to select user groups you want included in the report (optional).

Options tab:

The **Options** tab determines how the report is generated. The most common fields that should be enabled are described below:

Summary Only
Enable this option to print only a summary of the information you have selected for the report.

Show Address Information
Enable this option to include the patient or doctor address.

Show Percentages of Total
Enable this option to include the percentage of the total Rxs and the total dollar value.

Print NH-Inactive Patients
Enable this option to include inactive Nursing home patients.

Print Deceased Patients
Enable this option to include patients who have been set as deceased within the time frame of the report.

Print Discharged Patients
Enable this option to include patients who have been discharged from a Nursing Home within the time frame of the report.

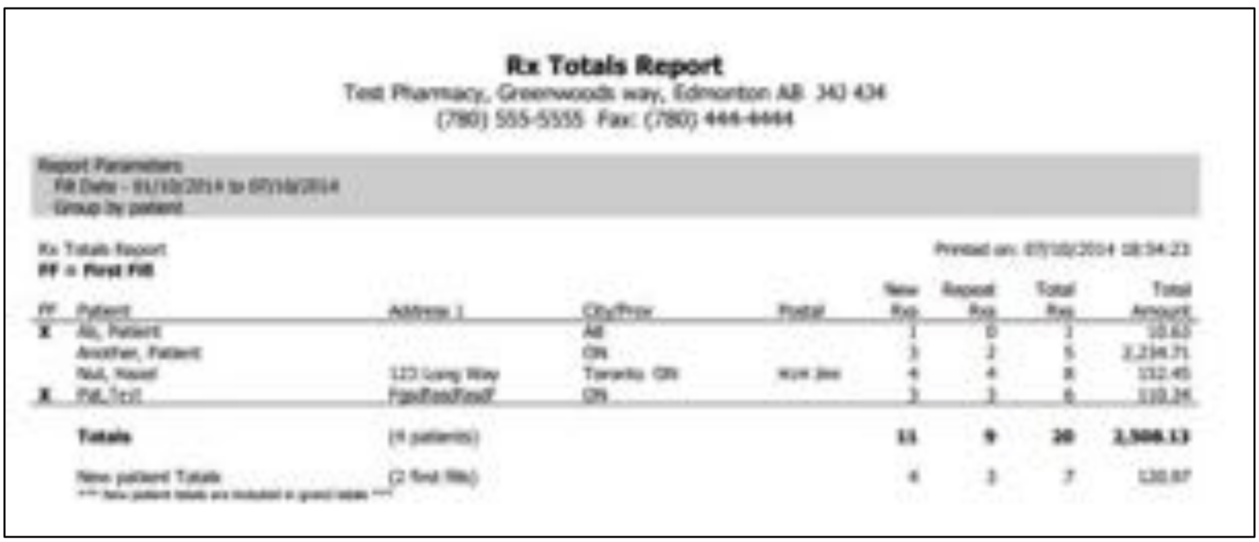
Include unfilled Rxs
Enable this option to include unfilled Rxs in the Rx count of the report.

Group By
Enable any one of these options to group together on the report.

Show
When **All** is selected, the report will include All Rxs. When **Top XX** is selected the report will only include the top amount indicated.

3. Click **Preview** to preview the report or **Print** to generate a printout of the report.

<u>Sample Rx Totals Report:</u>



Rx Totals Report
Test Pharmacy, Greenwoods way, Edmonton AB 343 434
(780) 555-5555 Fax: (780) 444-4444

Price Tree Report

The Price Tree Report provides all the pricing information setup in the Kroll system, including pricing strategies, patient price groups, drug price groups, and the pricing strategies attached to the plans.

1. To generate this report, go to **Reports** > **Other** > **Price Tree Report**.

2. The **Price Tree Report** form will appear.

   - Place a checkmark next to the items you want included in the report.

3. Click **Preview** to preview the report or **Print** to generate a printout of the report.

Sample Price Tree Report:


Price Tree Report

Plans

Price Tree Report Printed on: 13/10/2014 15:04:39

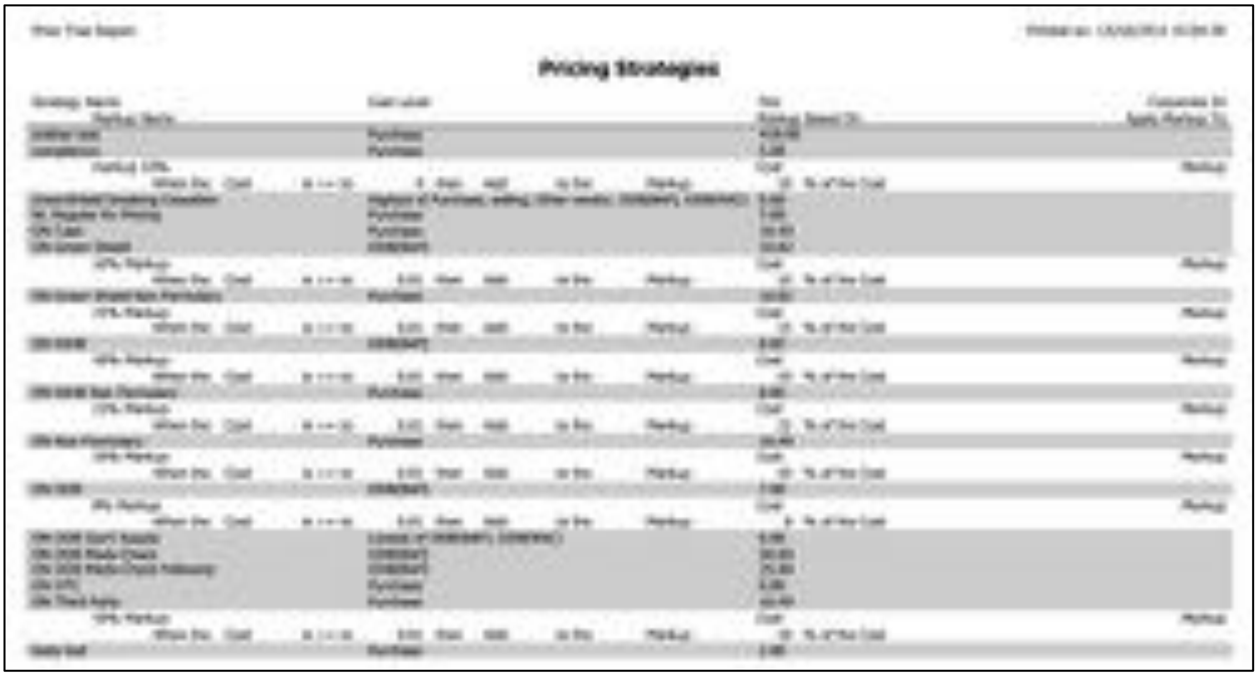
Drug Price Groups

Drug Price Group	Corporate ID	Only for Exceptions	Type	Brand/Generic Type	Strategy
accute tx		No	All	Any Brand/Generic Type	testy test
GS Smoking Cessation Program		Yes	All	Any Brand/Generic Type	GreenShield Smoking Cessation
	SubPlan				
Exceptions:	GS - Green Shield Canada		All	Any Brand/Generic Type	GreenShield Smoking Cessation
ODB Gov't Supply		No	All	Any Brand/Generic Type	ON ODB Gov't Supply
ODB Meds-Check		No	All	Any Brand/Generic Type	ON ODB Meds-Check
ODB Meds-Check FollowUp		No	All	Any Brand/Generic Type	ON ODB Meds-Check FollowUp
OTC		Yes	All	Any Brand/Generic Type	ON OTC

Price Tree Report Printed on: 13/10/2014 15:04:39

Patient Price Groups

Patient Price Group	Corporate ID	Override Plan/Drug Group Strategy	Type	Brand/Generic Type	Strategy
another test		Yes	All	Any Brand/Generic Type	anither test
compliance patients		Yes	All	Any Brand/Generic Type	compliance
high fee		Yes	All	Any Brand/Generic Type	anither test
test NH		No	All	Any Brand/Generic Type	testy test


Pricing Strategies

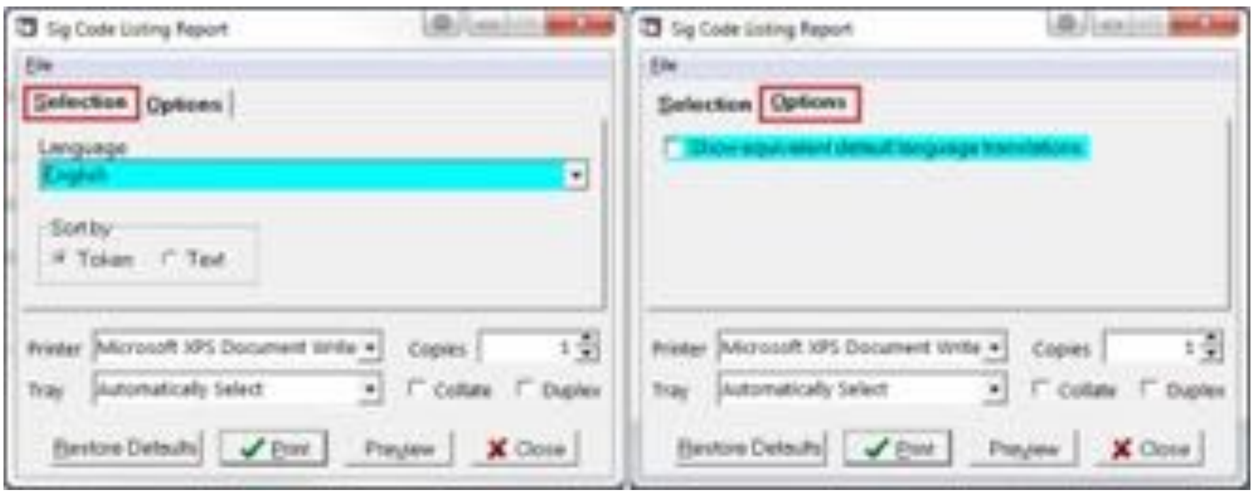
Sig Code Listing Report

The Sig Code Listing Report prints all sig codes set up in your Kroll system.

1. To generate this report, go to **Reports** > **Other** > **Sig Code Report**.

2. The **Sig Code Listing Report** form will appear.

   - Select a **Language** from the dropdown menu.
   - Select a **Sort by** option. If you select **Token**, the actual sig code will be printed on the report (i.e., BID). If you select **Text**, the sig code definition will be printed on the report (i.e., 'twice a day').
   - Place a checkmark next to **Show equivalent default language translations** on the **Options** tab if you want the report to show the English translation if another language is selected on the **Selection** tab.



3. Click **Preview** to preview the report or **Print** to generate a printout of the report.

Sample Sig Code Listing Report:


Sig Code Listing Report

Future Usage Report

The Future Usage Report prints the prescriptions due for refill within a specified time frame. This is helpful when preparing medication orders specifically for inventory you do not readily keep on hand.

1. To generate this report, go to **Reports** > **Rx** > **Future Usage Report**.

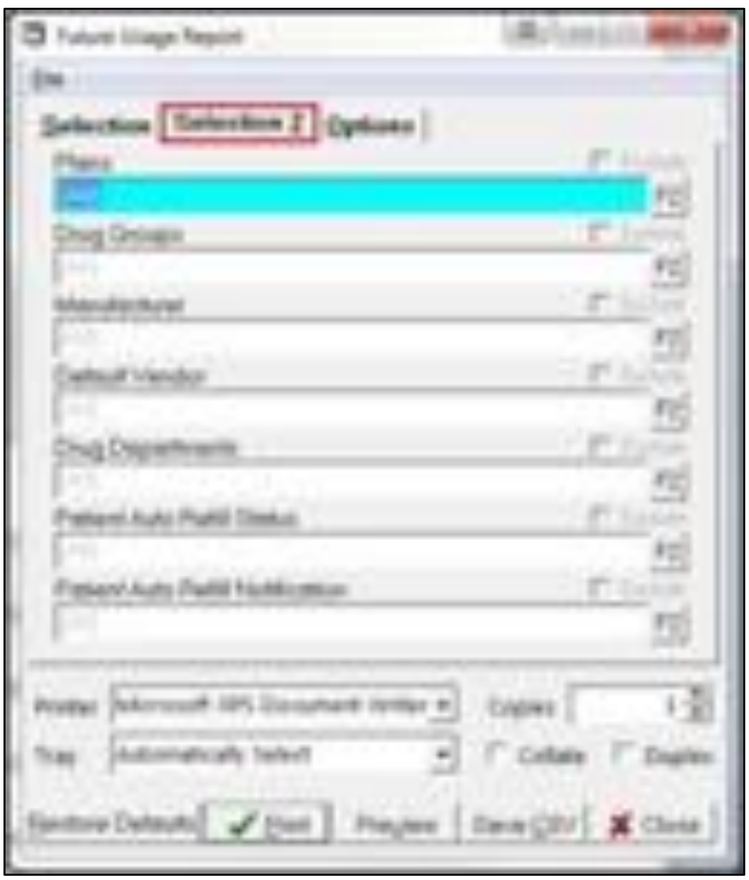
2. The **Future Usage Report** form will appear.

Selection tab:

- Use the **Date Range**, **Starting**, and **Ending** fields to specify a date range.
- If you want to generate the report for specific patients only, select the **Patient** button and click **Add**. Perform a patient search for each patient you want included in the report.
- If you want to generate the report for specific nursing homes only, select the **Home** button and click **Add**. Select the **Home** and applicable **Ward** and click **OK**. Repeat this step for each home you want included in the report.
- Click the **F2** button next to the **Patient Groups** field to select the patient groups you want included in the report (optional).

Selection 2 tab:

- Click the **F2** button next to the **Plans** field to select the drug plans you want included in the report (optional).
- Click the **F2** button next to the **Drug Groups** field to select the drug groups you want included in the report (optional).
- Click the **F2** button next to the **Manufacturer** field to select the manufacturers you want included in the report (optional).
- Click the **F2** button next to the **Default Vendor** field to select the vendors you want included in the report (optional).
- Click the **F2** button next to the **Drug Departments** field to select the drug departments you want included in the report (optional).
- Click the **F2** button next to the **Patient Auto Refill Status** field to select the auto refill statuses you want included in the report (optional).
- Click the **F2** button next to the **Patient Auto Refill Notification** field to select the auto refill notification methods you want included in the report (optional).



Options tab:

- Select the parameters you want applied to the report.

3. Click **Preview** to preview the report or **Print** to generate a printout of the report.

Sample Future Usage Report:

Compliance Label Report

The Compliance Label Report works in conjunction with the Unit Dose feature found at the prescription level. This report allows you to create compliance labels for 7-day pill packs that can be affixed onto a Jones Box compliance package, thus replacing the need to print a label for every Rx.

1. To generate this report, go to **Reports** > **Patient** > **Compliance Label**.
2. The **Compliance Label Report** form will appear.

Selection tab:

- The **Effective Date** field will default to today's date; however, you may enter the effective date of the first package.
- Enter the number of cycles you want to run the report for in the **# of Weeks** field.
- If you want to generate the report for specific patients only, select the **Patient** button and click **Add**. Perform a patient search for each patient you want included in the report.
- If you want to generate the report for specific nursing homes only, select the **Home** button and click **Add**. Select the **Home** and applicable **Ward** and click **OK**. Repeat this step for each home you want included in the report.

- Click the **F2** button next to the **Patient Groups** field to select the patient groups you want included in the report (optional).

Selection 2 tab:

- Select **All Rxs** if you want all Rxs in the patient profile to be included in the report. If you want to specify what kind of Rxs are included, select **Show only** or **Exclude** and an Rx type from the dropdown menus.
- Place a checkmark next to **Include unfills** if you want the report to include all Unit Dose unfills in the patient profile included in the report. This is especially helpful if you have copied to a new number and put a prescription on hold.
- Place a checkmark next to **Include ward stock** if you want the report to include Rxs marked as ward stock for nursing home patients.
- Click the **F2** button next to the **Cards** field to select the cards you want included in the report (optional). This is used for prescriptions that have been separated by a card number.
- Place a checkmark next to **Show only meds filled on** and enter a date if you want the report to show Rxs filled on a particular date only.

Options > **General** tab:

- The **Pass Time** fields are populated by default but can be changed (i.e., Breakfast, Lunch, Dinner, Bedtime).
- Use the **Panels** section to specify the number of panels you want printed on each page. This is particularly important if you have pre-defined compliance labels in a 2, 4, o4 6-panel layout.
- Use the **X Offset** and **Y Offset** controls to adjust the layout of the report; **X Offset** controls left justification and **Y Offset** controls vertical alignment.
- Place a checkmark next to **Print Compliance Checklist** if you want the report to include a check list for packaging the compliance packages.
- Use the **Sort By** field to specify how you want the report to be organized.
- Use the **Med Sort** field to specify the order in which the compliance label will be printed.

Options > **Header** tab:

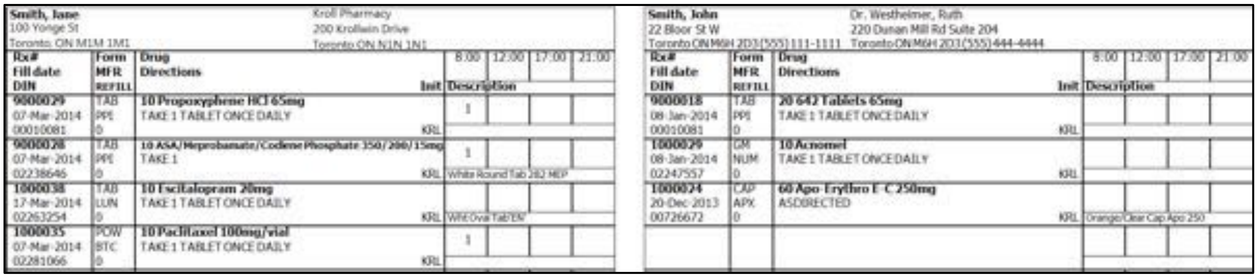
- **Swap Patient and store info**: This option changes the position of the patient and store information on the report.
- **Print family doctor**: This information comes from the patient card 'Family Doctor' field. If a family doctor is selected on the patient it will print the family doctor on this report.
- **Replace patient addr. With NH info**: Replaces the patients address with the Nursing home information
- **Print effective date**: This option prints the date the compliance package is effective
- **Print Card Numbers**: This option prints the card numbers assigned in the Unit Dose section of the prescription.
- **Print "Page x of y"**: This option prints for example page 1 of 1 on the top right corner of the report.

Options > **Body** tab:

- The options available on this tab depend on the selected **Panel style**. The screenshot below show the options available for **Style 1**. Select the options you want included in the report.

3. Click **Preview** to preview the report or **Print** to generate a printout of the report.

Sample Compliance Label Report; 2 panels:



Smith, Jane
100 Yonge St
Toronto ON M1M 1M1

Kroll Pharmacy
200 Krollwin Drive
Toronto ON N1N 1N1

Rx# / Fill date / DIN	Form / MFR / REFILL	Drug / Directions	Init	8:00	12:00	17:00	21:00	Description
9000029 / 07-Mar-2014 / 00010081	TAB / PPE / 0	10 Propoxyphene HCl 65mg / TAKE 1 TABLET ONCE DAILY	KRL	1				
9000028 / 07-Mar-2014 / 02238646	TAB / PPE / 0	10 ASA/Meprobamate/Codeine Phosphate 350/200/15mg / TAKE 1	KRL	1				White Round Tab 282 MEP
1000038 / 17-Mar-2014 / 02263254	TAB / LUN / 0	10 Escitalopram 20mg / TAKE 1 TABLET ONCE DAILY	KRL					Wht Oval Tab'EN'
1000035 / 07-Mar-2014 / 02281066	POW / BTC / 0	10 Paclitaxel 100mg/vial / TAKE 1 TABLET ONCE DAILY	KRL	1				

Smith, John
22 Bloor St W
Toronto ON M6H 2D3 (555) 111-1111

Dr. Westheimer, Ruth
220 Dunan Mill Rd Suite 204
Toronto ON M6H 2D3 (555) 444-4444

Rx# / Fill date / DIN	Form / MFR / REFILL	Drug / Directions	Init	8:00	12:00	17:00	21:00	Description
9000018 / 08-Jan-2014 / 00010081	TAB / PPI / 0	20 642 Tablets 65mg / TAKE 1 TABLET ONCE DAILY	KRL					
1000029 / 08-Jan-2014 / 02247557	GM / NUM / 0	10 Acnomel / TAKE 1 TABLET ONCE DAILY	KRL					
1000024 / 20-Dec-2013 / 00726672	CAP / APX / 0	60 Apo-Erythro E-C 250mg / ASDIRECTED	KRL					Orange/Clear Cap Apo 250

4 panels:

6 panels:

Report Discrepancies Explained

Report discrepancies may occur when multiple systems are used to measure various pharmacy metrics. This section explains how to identify and resolve discrepancies, and how to minimize these discrepancies in the future.

Fill Date vs. Adjudication Date

An Rx has different date components. The fill date is obvious – there is one fill date for an Rx and this fill date may have been backdated. However, for each plan associated with the Rx, an adjudication date is also available.

For real time plans, the adjudication date is returned by the third party. For paper plans, the adjudication date is typically equal to “today”. A singe Rx could have two or more real time third party plans whereby the adjudication date fall under different days and each of those can even be different than the actual fill date. This can be especially true with Rx's that are backdated – the fill date may be set to an earlier day, but the adjudication date is still "today".

In most but not all cases, the fill date and the adjudication date will match. It is those exceptions that can appear to throw off certain reports.

When attempting to compare one report against another, always look at the report header – it will indicate if the report is based on fill or adjudication date. Never compare a fill date report against an adjudication date report. They might match up, but over a large period, they likely will not.

Note that most Rx-based reports use the fill date and most plan-based reports use the adjudication date. Kroll's Plan Summary Report is a bad one for dates. Retail clients wanted to be able to count the number of Rx's filled for each plan. Therefore, this is effectively an Rx-based report but broken down by plan, which is usually based on adjudication date. As a single Rx can contain multiple plans, we can only count the Rx once. Therefore, the Rx is attributed to either the first paying plan or the primary plan (based on a user option). Never use this report to compare against other plan-based reports. It will never appear to balance. Note the disclaimer on the bottom of this report, "...do not use this report to reconcile your third party claims..."

Reversals and Net Totals

All of our reports will include explicit "Reversal" amounts and subtract them from the forward amounts to provide a "Net Totals" value. Typically, if an Rx is filled and reversed within the report date range, it will simply not be included in the totals. When you do see a "Reversal" amount, it will be for an Rx that was reversed during the report period but was originally filled prior to the report period. A script that was filled in January and reversed in February will appear as a forward claim when printing a report with a January period; will appear as a reversal when printing a report with a February period; but will simply not appear at all if printing a report that encompasses the entire January/February period.

Most reports will designate these prior period reversals as "Reversals" or "Prior Day Reversals", all of which should be read as "prior period" reversals. Note that the Adjudication Totals Report is different in that it separates reversals into "same day" and "prior day" reversals. Even if this report is run for a monthly period, any Rx reversed on a day other than the day it was filled will be counted in the "Prior Day" column. This report works this way as it is intended to match exactly with the values returned by real time third party plans when requesting on-line daily summaries. If you run this report and compare it against another adjudication date-based report, the reversals count may appear differently as all other Kroll reports are using the entire report date range to determine if a reversal fell outside of the entire range.

Backdates

Please be aware that if you run a fill date-based report immediately at the completion of a period and then at a later date, rerun that report for the same date range, it may not match the original report, this is caused by backdates. A backdate is the only way that a report run in the past can effectively be changed in the future.

When reconciling one report against another, especially with fill-based reports, always use reports that are printed on the same date and approximately at the same time – never try to balance a fill-based report printed at the end of March with another report for the same period range but printed at the end of April. If you have specific reporting periods and an Rx is backdated to a previous period, you might want to manually record this Rx on a form so it can be properly reconciled. The Kroll database records the real date (today) when a backdate takes place and this is noted on some reports.

Note that adjudication date-based reports are not affected by backdating. You cannot change today's date. No matter what date you backdate the Rx, today is always the adjudication date for this Rx's plan (unless the real time third party should happen to return a different date such as for a script filled after midnight, Eastern Time.)

Claims Invoice Report

Net Amount Representation

For retail purposes, when submitting a claim to a third party insurer, some request that the amount billed on the invoice be inclusive of the local patient co-payment amount; others require the amount to exclude the co-payment.

The same two claims are shown below, one with and the other without the co-payment amount included in the **Net** column.

Total DIN SA #	PrevPaid Co-pay	Net Fill Date Mfr
187.60	150.08	32.54
02246354	4.98	15-Mar-2006
		Mfr: AMG
1,838.80	1,471.04	346.94
02246360	20.82	28-Mar-2006
		Mfr: AMG
2,026.40	1,621.12	379.48
25.80		

Total DIN SA #	PrevPaid Co-pay	Net Fill Date Mfr
187.60	150.08	37.52
02246354	4.98	15-Mar-2006
		Mfr: AMG
1,838.80	1,471.04	367.76
02246360	20.82	28-Mar-2006
		Mfr: AMG
2,026.40	1,621.12	405.28
25.80		

By default, the Kroll system will include the co-payment amount in the Net column as most third parties request it this way. This Net amount is also shown in the summary sections of this report. However, please note that all other Kroll reports always show the amount being billed to that third party exclusive of the local patient co-payment. If any one of your third parties are set to the default and you attempt to match up the report summary of the Claims Invoice report against another report showing the amount billed to the third party, the amounts will not appear to match when co-payments are involved!

If your paper plan(s) require the non-default operation – the net amount should not include the co-payment value – please contact Kroll for assistance to set up each third party to use the **Paper Claim- Net Amount** reporting option for each individual plan affected. Only if all third party plans are set to the non-default setting will the report's grand total Net amount balance with other plan-based Kroll reports. As this is unlikely, you will not be able to match the Net amount on this report with that on other reports

Claims Invoice Report Options

If the Group By option is set to **None**, all claims will be printed on the same page ordered by fill date. Grouping by patient is used if you require claims for a single patient to appear on a page by itself. Group ID will order claims by the patient's Group ID entered under their third party plan. You should ensure the option **Include data for real-time plans** is not checked. There are other reports that would be more efficient to report real-time plan totals such as the Adjudication Totals report. Also, by using the above option, the report grand totals should then match with other Kroll reports that break out paper claims totals assuming there are no tertiary plans billed as noted in the next section.

Tertiary Plans Imbalances

For each third party claim, we will provide the various dollar values such as Cost, Mark up, Fees and Totals if those items have not been hidden via the options on the report form. However, those values are entities of the Rx as a whole. If the same Rx should have another plan that is being billed during the same pass of this report, we will also show that plan the same Rx Cost, Markup, Fee and Total. For each plan, we will subtotal these amounts and then, for the overall report summary, each plan is shown and the grand total for the report is the sum of all these.

If you had only a single Rx for $100 that was billed to two different plans, both of which are included in this report, then the subtotal for each plan will show the $100 Rx total, and one claim. However, the report grand total will show each plan’s subtotal and add these together to produce a grand total of $200 and 2 claims when in fact, the true total Rx cost is only $100 and involves only a single Rx. This anomaly in this report’s grand totals is unavoidable and will make the grand total of this report to not balance with other reports.

Reconciling

Reconciling is the process of balancing one report against another. For fill date-based reports, you can run the following on the same day for any range and all should balance:

- Daily/Monthly Totals
- Rx Breakdown
- Rx Totals
- Profit/Loss

When explicitly broken out, always look at the Net amounts. For adjudication date-based reports, run the following:

- Plan Breakdown (do not check any of the “Exclude” options)
- Adjudication Totals (do not exclude “zero-amount” claims)

Claims Invoice (best to **Exclude items where plan pays 0.00** and NOT **Include data for real-time plans** as this helps to eliminate most tertiary plan billing that will misrepresent the grand totals as noted above)

Plan Breakdown breaks out the online plans versus manually billed plans as well as providing a grand total. Adjudication Totals will also provide the same kind of breakdown. Claims Invoice report, assuming you have used the options noted above, will show a grand total that should match the Manual Plans amount of the two other reports.

Summary

Please be aware of the following key points noted above when attempting to reconcile reports:

- Never compare fill date-based reports with adjudication date-based reports. When in doubt, look at the report header that shows which date is being used.
- Never use the Plan Summary Report in comparing with other reports.
- Always compare reports printed on the same date – look at the “Printed On” date on the report header.
- Be aware of how previous-period reversals are reported – always use the “Net” amount columns when comparing reports.

Configuration

This section explains each of the configuration settings that are available in the Kroll Windows application. The configuration screens are accessed via **File** > **Configuration**.

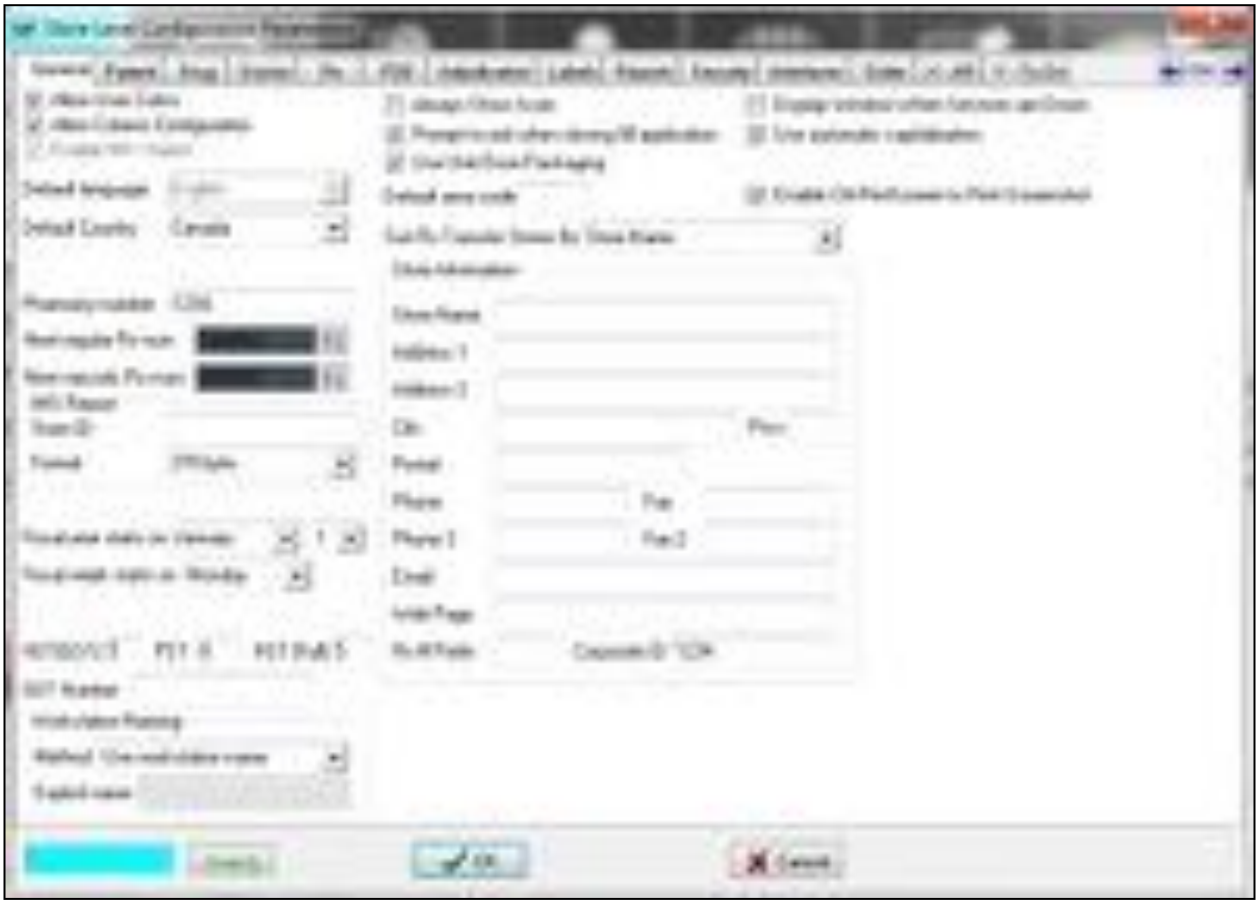
Store Level & Head Office Configuration

At first glance, the Store-level and Head Office-level configuration screens are identical. There are some small differences, however, especially for chain locations.

In the Head Office configuration screen, right click the settings to lock them down. This greys out the setting so it cannot be changed at the store level. This is used to enforce business rules for chains that want stores to have the same level of access to the settings.

General

The following section describes the configuration settings available on the **General** tab.



Allow User Colours – Allows the use of custom colour settings within windows.*

Allows Column Configuration – Allows users to change the appearance of the preset columns in the F3, F5 and F7 cards. *

Enable NH / Batch – Allows users to access to the basic nursing home module, allowing customer to use batch filling, as well as plain paper MARs and TMRs.

Default language – The language that all patient cards will default to. Users have the ability to change this to another language within individual patient cards.

Default country – The country that all patient and doctor cards will default to. Users have the ability to change this to another country within individual patient and doctor cards.

Next Regular Rx Num – The next prescription number the system will use when filling a regular prescription.

Next Narcotic Rx Num – The next prescription number the system will use when filling a narcotic prescription.

IMS – Used for an interface between companies outside of Kroll. If the store takes part in IMS reporting, the account information will be obtained by IMS and entered here.

Fiscal Week Starts On – A fiscal week is set by a store; the day the store determines their financial week starts on.

HST, PST – Tax- related; most Rxs are non taxable, however veterinary prescriptions are taxable, as well as some charges to AR accounts might need to have taxes charged.

GST Number – The government sales tax number for tax purposes.

Always Show Scan – Enables the 'Scan' button for searches, which saves all changes and returns the user to the search screen.

Prompt to exit when closing fill application – A prompt will appear asking if the user is sure they want to exit. As well, users will have the option to print the Day End Label and the Network Totals. *

Use Unit Dose Packaging – Allows uses to choose unit dose packaging on the patients card level, we are then able to set types of unit dose, cycles medication is to be filled, as well as set up specific strategies for pricing on unit dose prescriptions. *

Defaults Area Code – Allows users to use a set area code. If this is set and a patient, doctor, etc., is added, 7-digit phone numbers will automatically have this area code prefixed.

Store Information – Your pharmacy's information; prints on headers and reports.

Display Window When Services Are Down – Displays a prompt message upon launching Kroll indicating that a service is not working. Works in conjunction with the Kroll Reporting Service.

Use automatic capitalization – Capitalizes the first character of each word when filling out a form.*

Enabled Ctrl-PrintScreen to Print Screenshot – Allows use of the printscreen function.*

Patient

The following section describes the configuration settings available on the **Patient** tab.

Provincial Plan – Select your province so the F3 Patient card recognizes the correct province.

Provincial plan label – Displays the default plan name on the F3 - Patient screen.

Quick Code Label – Allows for F3 - Patient searches using a period followed by a quick code. This can also be sued to store reward card numbers.

Prompt to Create AR account For NH Patients – Allows for prompting when creating an AR account for nursing home patients.

Defaults Delivery Charge – If your pharmacy always charges a certain amount for delivery, enter that amount here so when the delivery option is select it will charge the same amount each time.

The following options allow you to choose how cancelled, inactive, stopped, and expired prescriptions are treated in the patient profile:

- **Hide Cancels in All Patients Profiles**
- **Hide Cancels in the "Active" (Shift F5) Profile**
- **Hide Expired Rx's in the "Active" (Shift F5) Profile**
- **Hide Stopped Rx's in the "Active" (Shift F5) Profile**

Ignore Provincial Plans In Patient Scan – Excludes provincial plans when searching for a patient.

Ignore Clinical Plans In Patient Scan – Excludes clinical plans when searching for a patient.

Prompt for Patient Privacy Consent – Displays a patient privacy consent message when entering information in a patient profile; this message will display until the pharmacy has recorded whether the patient has given consent to record their information locally and/or on the network. Users can choose Unknown, Written, Verbal, or No Consent. Once an option is selected the privacy consent message will not display again for that patient.

Require Patients privacy consent to fill Rx – Forces you to respond to the patient privacy consent message before being able to fill a prescription.

Prompt To Add New or Modified Plans to Existing Rxs – Displays a prompt on the F12 screen when a new plan has been entered into the patients profile and has not been used for previous Rxs.

Enable bill to by default on first new alternate address – Automatically bills the patients AR account to the alternative address entered on the F3 screen.

Prompt to print labels when inactivating Rxs from the patient profile or Rx screen – Displays a prompt asking if you want to print a label set with inactivating an Rx.

Default Unit Dose Strategy – If the unit dose feature is enable in File > Configuration > Store > General, you can specify what pricing strategy is defaulted when Unit Dose is select on the F3 screen.

Initially display the following tabs when showing a patient for retail patients / for nursing home patients – Allows you to customize the patient profile for easier accessibility.

Automatically close auto fill batch if successful – Closes the batch fill window once batch is completed.

Require patient gender on patient card – Forces you to to add the gender to the patient card before it is saved.

Require postal code on patient's card – Makes the postal code field on the patient card mandatory.

Prompt for Options after scanning a script from the patient card – Prompts users to specify user options when attaching and saving a script image.

Prompt to complete delivery order – Prompts you to complete a delivery order when applicable.

Prompt to select allergy ingredients when selecting FDB medication names – Prompts you to select allergy ingredients when you select FDB medication names.

Creatinine Clearance Equation – Select one of the following, depending on how creatinine clearance is calculated:

b) Using body weight
c) Using IBW (ideal body weight)
d) Using adjusted body weight

Include copied patient in original patient's family – Select Always, Never, or Prompt. Patients will be linked from the F3 screen depending on the option selected.

Quick Code type – Choose which program the quick code represents.

Show items in network profile from the last [x] months – Allows you to set the amount of time, in months, that items will appear network profile window.

Retain Highlight in Patient Profile – Any Rxs highlighted in the patient profile will remain highlighted after you have modified them.

Drug

The following section describes the configuration settings available on the **Drug** tab.

Fee Per Minute for Mixtures – Allows a default monetary value to be entered that will be charged for each minute that is selected to prepare a mixture. This must be entered in cents.

Don’t Charge Mixture fees for mixtures less than or equal to [x] minutes – Allows you to default that any mixtures that take under a certain amount of time to make.

Percentage of Mix Fee to be added to the upcharge – Allows you hide/mask part of the mix fee in the markup of the Rx.

Prompt when absolute value of On Hand, Min Qty or Max Qty is greater than 500000 – Allows you to correct any error in numerical value. If the value in any of the three fields mentioned is greater than six digits, you will get an exception error when doing an automatic order.

There are 5 user cost fields on the drug with in KrollWin. One is automatically assigned as purchase price; the next four can be manipulated in the below fields, depending on what vendor is used or provincial pricing these fields can vary. Below is a sample of what you might see in an Ontario pharmacy.

- **User Cost 0 Label** – McKesson
- **User Cost 1 Label** – K&F
- **User Cost 2 Label** – ODB (BAP) – This is locked down for Ontario
- **User Cost 3 Label** – ODB (MAC) – This is locked down for Ontario

(BAP = Best available Price MAC = Maximum Allowed Cost)

OTC Price Group – Allows you to specify a default drug price group to apply to all drugs that are classified as an OTC schedule.

Automatically assign Fake DINS to new drugs / Next DIN to be assigned – Allows you to select a DIN range. This is only used when a DIN is not entered. If a drug product has a DIN, ensure it is entered in the F5 drug screen.

Prompt to create DIN Link if Din changes – When a DIN on a drug card changes, this option will link the DINs under Edit > Din Links on the F5 screen. This ensures the old DIN references the drug when searching for a drug by DIN.

Show All Drug Pack Tiers in Scan by default – Allows for multiple tiers to be shown when searching for drugs in the F5 screen.

Use Secondary Drug Pack Tiers For Mixture Pricing – Allows the system to choose the secondary tier to price mixtures. *

Check for Interchangeability Preference – Checks the drug database for interchangeable drugs in the system.

Allow changes to mixtures with Rx usage – Allows you to make changes to the mixture card with each Rx.

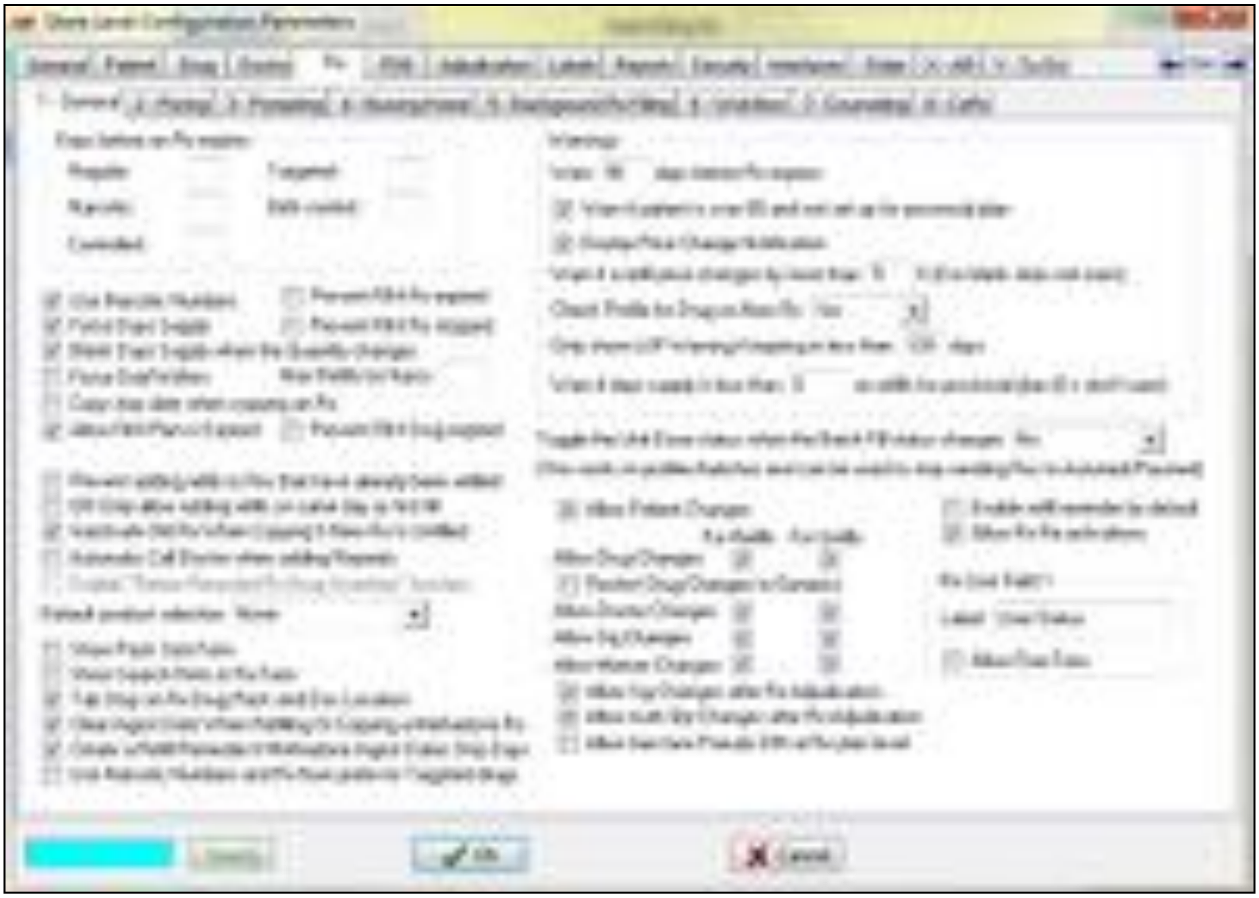
Default Mixture Time Set – Allows you to default what mixture will automatically be applied to the mixture card, depending on Rx quantity

Only update On Hand Qty when merging a drug pack into a CM drug pack – On hand quantities will only be updated if you merge into a centrally maintained drug pack otherwise it will not work.*

Rx

The following section describes the configuration settings available on the **Rx** tab.

General



Days Before an Rx expires – This is broken down in five different sections. In some provinces, this is automatically populated because the provincial legislation states that an Rx expires after a specified number of days. The breakdown is Regular, Narcotic, Controlled, Targeted, and Birth Control. Typically, Narcotic, Controlled, and Targeted are set with an expiry.

Use Narcotic Numbers – Allows for a separate set of number range for narcotic prescriptions.

Prevent Fill if Rx Expired – Prevents users from filling a prescription if it has expired.

Force Days Supply – Forces users to enter a days' supply before completing an Rx.

Prevent Fill if Rx Stopped – Prevents users from filling a prescription if the Rx has been stopped.

Blank Days Supply when Quantity changes – Forces you to re-enter the days' supply when the quantity dispensed changes.

Force Oral / Written – Forces users to specify whether the prescription was oral or written on the F12 screen

Max Refills for Narcs – Specifies how many refills a narcotic Rx are allowed.

Copy stop date when copying an Rx – When an Rx is copied to a new number, the stop date is also copied.

Allow Fill if Plan is Expired – Allows the pharmacy to send an Rx to the drug plan even if the drug plan is marked as expired on the F3 screen.

Prevent Fill if Drug expired– Prevent users from filling an Rx if the drug is expired.

Prevent adding refills to Rxs that have already been refilled – Prevents users from changing the authorized quantity on an Rx once the Rx has already been filled.

OR ONLY allow adding refills on same day as first fill – Allows users to change the authorized quantity only on the day the Rx was originally filled.

Inactivate Old Rx When Copying if New Rx is Unfilled – Inactivates the old Rx and prevents it from being filled when a new Rx is brought to the pharmacy.

Automatically Call Doctor when adding Repeats – Adds the Rx to the ToDo queue so the doctor is called when adding repeats to an existing Rx.

Enable "Returned Recycled Rx Drug Inventory" function – Allows you to return drugs back to inventory. This is only available in some provinces.

Default Product Selection – There are five options that can be selected: None, 1 - Prescribers Choice, 2 - Patients Choice, 3 - Pharmacists Choice, 4 - Existing Therapy. The option is defaulted to None in Ontario; however, in some provinces this is defaulted to Existing Therapy.

Show Pack Size form – Displays a prompt message on the F12 screen when there is more the one pack size that is active on the drug card that belongs to the same tier.

Show Search hints in Rx Form –Shows the yellow hint boxes when filling on the F12 screen under the patient, drug, and doctor forms.

Tab Stop on Rx Drug Pack and Doc Location – Hitting the tab button while filling an Rx will cycle through fields and stop on drug pack and doctor location.

Clear Ingest Date When refilling or Copying a Methadone Rx – Clears the ingest date when filling Methadone prescription so a new ingest date can be entered.

Create Refill Reminder if Methadone Ingest Dates Skip Days – Creates a refill reminder and a refill to do item whenever there is a gap in the patient's ingest date.

Use Narcotic numbers and Rx Num prefix for Targeted drugs – Uses narcotic numbers for targeted prescriptions.

Warn 90 days to warn before Rx expires – Defaulted to 90, however this can be changed. This option shows a yellow yield sign on the Rx screen if the prescription is going to expire within the allotted number of days.

Warn if patient is over 65 and is not set up for provincial plan – Displays a warnings when the patient is 65 years or older and does not have a provincial plan in the patient profile.

Display Price Change Notifications – Displays a prompt message if the last Rx had a manual price and you need to decide if they want to use the old manual price or the new calculated price.

Warn if a Refill Price changes by more than 5 percent (0 or blank does not warn) – Defaulted to 5 %; displays a warning message on the Rx screen when the price of the Rx has changed by more than the specified value.

Check Profile for Drug on New Rx – Defaulted to Yes; scans the patient's card to see if the patient has taken the drug before.

Only show LUP warning if expiring in less than 120 days – Specifies the expiration range for LUP warnings. This defaults to 120 days but can be changed.

Warn if days supply is less than 0 on refills for provincial plan (0=don't warn) – Displays a warning if the days supply is less than zero on refills for a provincial plan. This is used if the provincial government will not accept certain a days' supplies.

Toggle the Unit Dose status when the Batch Fill Status changes –By default, this is set to N. Other options include Yes and Prompt. (This only works in profiles/batches and can be used to stop sending Rxs to Automed/Pacmed.)

Enable refill reminder by default – Automatically enrolls patients in the refill reminder program.

Allow Rx Re-activations – Allows users to reactivate an Rx after it has been inactivated. This does not work if the Rx has been inactivated because it was copied over to a new number or transferred out to another pharmacy.

Allow Patient/Drug/Doctor/Sig/Mixture changes – Each option can be further broken down by selecting Refills or Unfilled Rxs Only. This options allow users to customize what parts of the prescription can be changed.

Allow Sig Changes after Rx Adjudication – Allows users to change the sig code for the Rx even if the Rx has already been adjudicated.

Allow Auth Qty Changes after Rx Adjudication –Allows users to change the authorized quantity for the Rx post-adjudication.

Allow free form Pseudo Din at Rx plan level – Allows user to add a free form DIN and plan information at the Rx level.

Pricing

If Purch + [x] is greater than Cost + Markup then charge Purchase = [x] % – Enabled by default and set to 10%, however this value can be changed.

Ignore for Provincial Plan – Ignores the configured markup costs for provincial plans.

Apply the difference to the [Cost] – Select Cost, Markup, or Fee. Automatically adds a defaulted markup rolled into the selected area.

Provincial Plan (Formulary Drugs) – Allows users to set what plan is pulled for formulary drugs when filling the Rx. You can also choose the priority of this plan in relation to the Clinical Provincial Plan.

Clinical Provincial Plan – Allows users to choose a clinical provincial plan and also select its priority in relation to the provincial plan. A clinical provincial plan only sends Rx data.

If Pat has Prov plan, but Rx is Cash, use Prov Plan Pricing – Uses the provincial pricing strategy instead of the cash strategy when dealing with patients that have a provincial plan but are paying for a cash Rx.

Warn if there are lower priced formulary items – Warns users if there is a cheaper interchangeable product available.

Only for provincial plan – Searches for lower priced formulary items for the provincial plan only.

Warn if Gross Profit is less than [x] % – Warns users if the overall gross profit of the prescription is less than the selected figured.

Prevent filling for Negative Gross Profit – Prevents users from filling the Rx if there is a negative overall gross profit.

Allow Copay Adjustment after Adjudication – Allows users to alter the amount being charged to the patient by calling up the Rx in modify mode, right clicking on the copay/price amount beside cash total, and adjusting the copay amount. Users cannot charge more than the original copay returned by the plans.

Warn if Drug Pack cost lever is older than [x] days – Displays a warning on the Rx warnings tab if the drug cost has not been updated since the specified number of days.

Always use Formulary Cost Level if applicable / **Don't use formulary pricing if product sel. Is Patient or Doctor Choice** – Changes the cost level pulled from formulary drugs to non-formulary, allowing users to charge a higher or lower price point. If 'Don't use formulary pricing…' is enabled, the formulary pricing strategy is overridden if the patient or doctor is selected on the Rx card.

Prevent Filling if Drug Price Field is Blank – Prevents users from filling an Rx if your Drug Price Field is blank on the Rx card.

When calculating Elston, use BAP + 10 % – Also known as the MI intervention. Allows users to apply for the Elston difference if the customer was losing money based on the amount allowed by the government is lower than the purchase price of the drug (Ontario only).

Prompting

Prompt to use Drug Subs – Displays a prompt on the F12 fill screen asking if you want to use the drug sub, when there is a drug sub listed on the F5 drug card.

Automatically use Drug Subs – Automatically uses the drug sub that is entered on the F5 drug screen.

Use Drug Subs when Batching – Automatically uses the drug sub that is entered on the F5 drug card when the prescriptions are being sent through on a batch.

Prompt if Doctor Refused Repeat When Cancelling Rx – Displaysa prompt on the F12 fill screen when cancelling an Rx. If users select Yes to indicate that the doctor has refused the repeat, the system will remove the any authorized quantity remaining from prescription.

Prompt for Comments when Cancelling an RX – Displays a prompt on the F12 fill screen when cancelling an Rx asking the user to enter a reason why the Rx is being cancelled.

Always require comment – Forces users to comply with the above option.

Prompt for Comments when Inactivating an Rx – Displays a prompt on the F12 fill screen when inactivating an Rx asking the user to enter in a reason why the Rx is being inactivated.

Always require comment – Forces users to comply with the above option.

Prompt for Patient Counselling on new Rx – Displays a prompt on the F12 fill screen asking users if they want to print the Patient Counselling information on new Rxs.

Prompt to Batch Nursing home Rxs – Displays a prompt on the F3 patient card asking you to enter the patient’s prescriptions in a batch when they are entered into the nursing home.

Prompt when not dispensing as drug’s Pack Size – Displays a prompt informing users that the Rx quantity is not a multiple of the drug packs size, if filling a prescription for drug that has dispensed as pack enabled on the F5 drug card and the Rx quantity is not a multiple of the drug pack size. Users can continue filling for this Rx quantity or multiply the Rx quantity by the pack size. If the user chooses to continue filling for the Rx quantity, they will be given the option to Split the quantity between different pack sizes, to switch to a different pack size or ignore.

Prompt for repeats When Copying an Rx – Displays a prompt asking for the customer to specify the number of repeats for a new Rx.

Prompt to Use Manual Price from Last Refill – Displays a prompt asking you to select one of two options when the previous fill had a manually entered price. Users are asked to use either the new price or the old price.

Remove Manual Price for Batched Rxs – Automatically removes the manual price from any prescription that batched filled.

Prompt if Doctor Authorization Received for Narcotic Rxs – Displays a prompt asking if you have received the doctor authorization for the narcotic Rx.

Prompt if there is not enough inventory to fill the Rx – Displays a prompt warning users that there is not enough inventory on hand to fill the Rx. Users can choose to owe the patient, split the quantity between different pack sizes, switch to a different pack size, or ignore. This only functions when the ‘Allow Inventory Adjustment’ setting is enabled (Ordering tab).

Prevent copying an Inactive Rx to a new number – Prevents users from copying an already inactive Rx.

Show local patient profile on fill – Displays the patient’s local profile when F12 is clicked on the Rx screen.

Prompt to Copy "Mistake" Rxs to a New Number – Displays a prompt asking users if they want to copy mistake Rxs to a new number.

Show thermal/dot matrix label config on autofill – Displays label configuration options for autofilled Rxs.

Prompt to Print Script Image for 1st Fill of an Unfilled Rx – Prompts users to print the script image the first time an unfilled Rx is filled.

Prompt for AADL Plan Information if SA number is NOT set – Prompt for AADL plan information if the Rx lacks a special authorization number. This only applies to certain drugs in certain jurisdictions.

Force ODB Fee Restrictions – Forces ODB fee restrictions on Rxs filled using the ODB plan.

Prompt if Was Undeliverable when Cancelling an Rx – Displays a prompt asking users if the reason they are cancelling an Rx iss because it is undeliverable.

Prompt to copy workflow packaged info for cancel and refill Rxs – Prompts users to copy workflow packaged information for cancelled and refilled Rxs.

Prompt to copy to new number if refilling an Rx with no repeats – Displays a prompt when calling up an Rx with no remaining quantity.

Automatically Apply Elston for Eligible Products (Do not Prompt) – Automatically applies the MI intervention code if the Elston criteria is met. Do not turn this feature on without speaking with a supervisor or manager.

Prompt for ODB Meds Check – Prompts users to print a Meds Check Report when the patient has met the criteria.

Force ODB Fee Restrictions – Forces the ODB fee restriction guidelines when filling a prescription for more than two fills each month.

Drug Programs – The following options should be enabled for stores using a drug information interface such as Rx Canada or Access Point.

- Participate in the Rx Canada/Health Inform Program
- Participate in the Xalatan Program - NOT USED ANY LONGER
- Participate in Pharmacy Access Program
- Use substation directories for Pharmacy Access
- Enable Rx Canada Program (RxGateway)

- Enable Humira Pen & Progress Information

Prompt to Enrol Patients in Refill Reminder or Auto Refill Program – Prompts users to enrol patients in the refill reminder or auto refill program with filing an Rx for the patient for the first time.

Prompt to Enrol NH Patients in Refill Reminder or Auto Refill Program – Prompts users to enrol nursing home patients in the refill reminder or auto refill program with filing an Rx for the patient for the first time.

Prompt to Enable Rxs for Refill Reminder and Auto Refill Program – Prompts users to enrol patients in the refill reminder and auto refill program each time an Rx is filled.

Enrol Patients for Pickup Notification – Select Yes, No, or Ask. If Yes is selected, patients will be automatically enrolled in the pickup notification service; if No is selected, no action is taken; if Ask is selected, users will be prompted to ask the patient if they would like to enrol in the pickup notification service.

Enrol NH Patients for Pickup Notification – Select Yes, No, or Ask. If Yes is selected, nursing home patients will be automatically enrolled in the pickup notification service; if No is selected, no action is taken; if Ask is selected, users will be prompted to ask the nursing home patient if they would like to enrol in the pickup notification service.

Prompt for Due Date on autofill batches – Each Rx in the autofill batch will trigger a prompt for priority time.

Prompt for Tx comment on autofill batches –The system will prompt you to enter a Transaction Comment for autofill batches.

Save Route code from Rx as default value if no default value is set – Select Yes, No, or Ask. If Yes is selected, the route code from the Rx will always be used if there is no default; if No is selected, no action is taken; if Ask is selected, a prompt will appear asking users if they would like to use the route code from the Rx.

Save Form code from Rx as default value if no default value is set – Select Yes, No, or Ask. If Yes is selected, the form code from the Rx will be used if there is no default; if No is selected, no action is taken; if Ask is selected, a prompt will appear asking users if they want to use the form code from the Rx.

Automatically Apply Elston For Eligible Products – Bypasses the Elston prompt when the ACC and ODB BAP difference is greater than 8%.

Prompt for ODB MedsCheck – Prompts users to print the MedsCheck report when filling an Rx.

Track ODB MedsCheck Rejection Reasons – Prompts users to specify a reason why the patient has refused MedsCheck.

Allow 'Never Prompt' for ODB Med Checks – Allows users to forgo prompting for ODB MedsCheck.

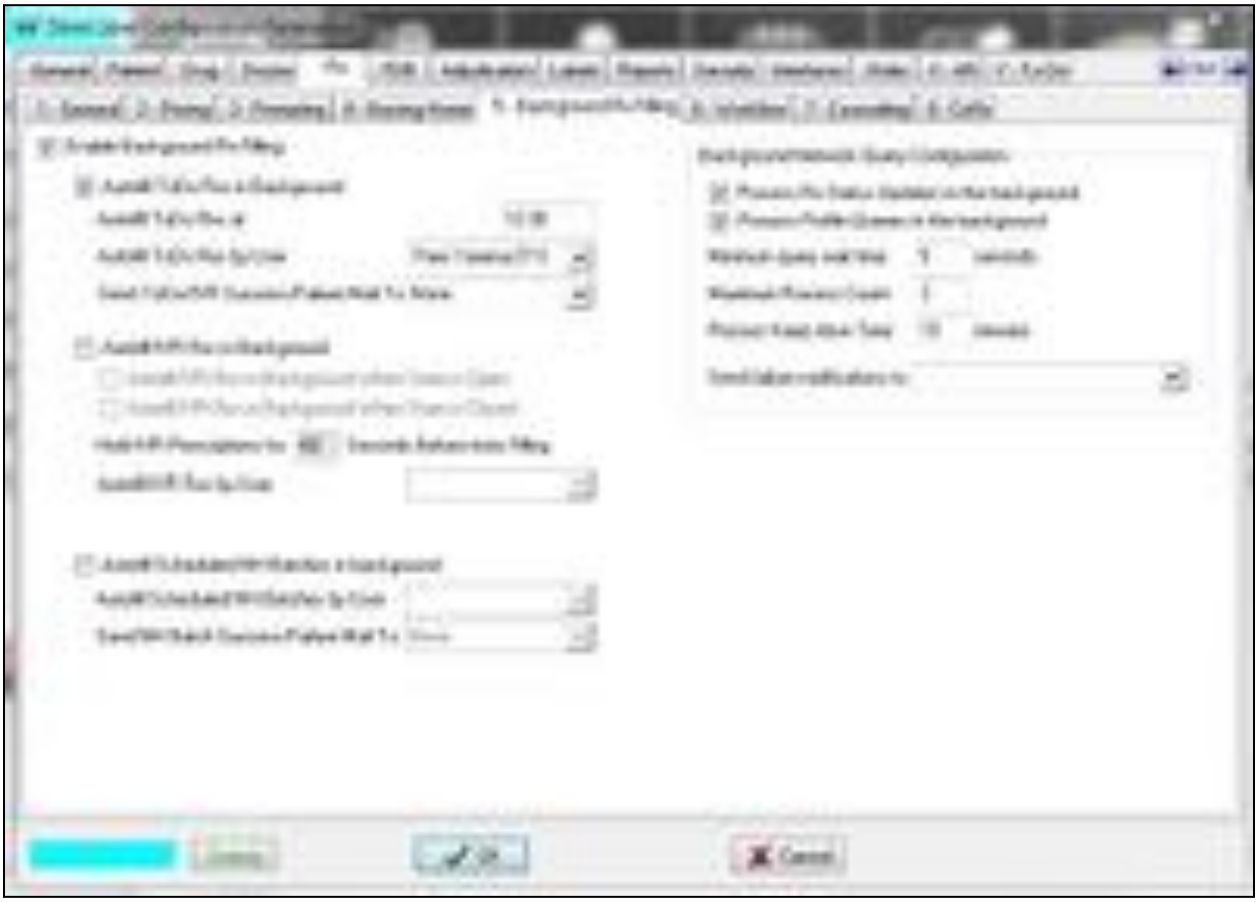
Nursing Home

Check for Bad Cycles When Creating a Batch – Scans newly created batches for bad cycles.

Allow Entering Pass Time Quantities if Unit Dose is Not Checked – Allows users to add pass times to the ATN box on the F12 screen if the Unit Dose feature is not being used.

Exclude Non-Numeric Passtimes from Unit Dose Automatic Dispenser Daily Dosage Calculations – Excludes any non-numeric passtimes from the Unit Dose automatic dispenser daily dosage calculations.

Background Rx Filling



Enable Background Rx Filling – Enables the background Rx filling feature.

Autofill ToDo Rx in Background – Allows the background Rx service fill all ToDo prescriptions.

Autofill ToDo Rxs at – Allows users to schedule a time when the background Rx service will begin filling ToDo items.

Autofill ToDo Rxs by User – Allows users to select the user that the service will fill all the items as.

Send ToDo/IVR Success /Failure Mail To – Use the menu to specify where ToDo and IVR success/failures are sent.

Autofill IVR Rxs in Background – Enables the background Rx service to fill all prescriptions received by the IVR.

Autofill IVR Rxs in Background When Store is Open – Tells the background service to only fill IVR prescriptions during store operating hours.

Autofill IVR Rxs in Background When Store is Closed – Tells the background service to only fill IVR prescriptions during hours the store is closed.

Hold IVR Prescriptions for [x] Seconds Before Auto Filling – Allows users to set the amount of time the background Rx service will wait before filling prescriptions that came from the IVR.

Autofill IVR Rxs by User – Allows users to select the user that the background Rx service uses to fill IVR prescriptions.

Autofill Scheduled NH Batches in background – Forces background Rx service complete NH batches.

Autofill Scheduled NH Batches by User – Allows users to select the user that the background Rx service uses to fill NH batches.

Send NH Batch Success/Failure Mail To – Select the mail group the pharmacy sends NH batch success and failure messages to.

Process Rx Status Updates in the background – Sends a status update query to Alberta Netcare S2S when a patient profile is called up.

Process Profile Queries in the background – Sends a patient profile query to Alberta Netcare in the following scenarios:

- When viewing the local patient profile it launches the patient profile query.
- On the Rx filling screen and the patient has not been filled in yet, as soon as the patient is filled in it sends the patient profile query in the background.
- When a user searches for a patient and on the patient card hit F12 to fill a new Rx, it launches the patient profile query in the background.
- When an Rx is being refilled from the start screen it launches the patient profile query in the background.

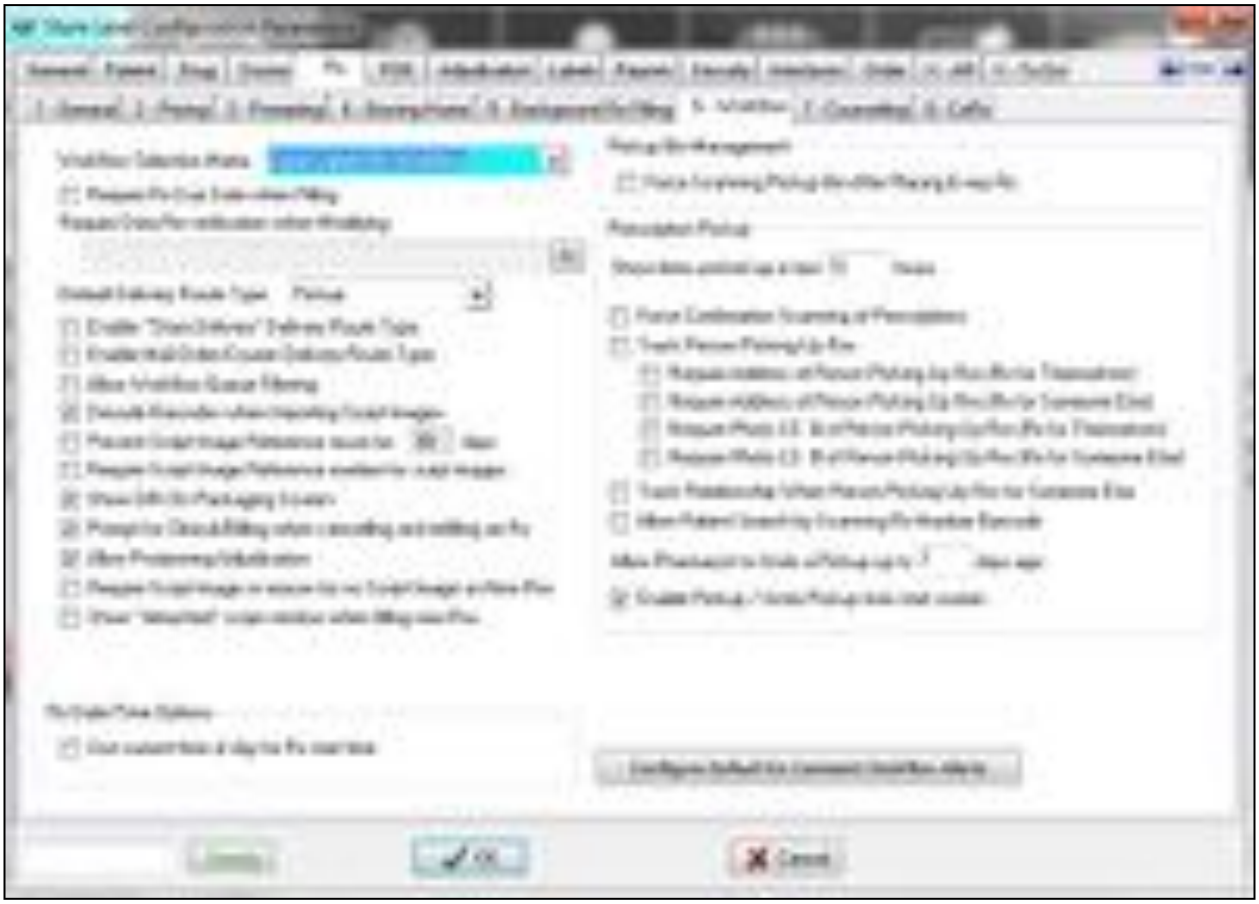
Minimum query wait time – Specifies how long you are forced to wait for a profile query to complete (when applicable) before being allowed to cancel the request in order to proceed without viewing the network profile.

Minimum Process Count – Specifies how many background sessions will be used (more sessions can increase speed because more requests can sometimes be processed at the same time, but more sessions consume more CPU and memory).

Process Keep Alive Time – Specifies how long a background session stays running without receiving a command before it is terminated (longer means we don't have to fire up new sessions as often, which can make requests faster, but also means that more memory is being consumed during idle time).

Send failure notifications to – Allows you to choose the mail group that will receive notifications.

Workflow



Workflow Selection Matrix – Allows users to select a preconfigured Workflow Matrix.

Require Rx Due Date when Filling – Ensures a due date is required when filling a prescription.

Require Data Re-verification when Modifying – Forces users to review data for any of the items selected in the list.

Default Delivery Route Type – Allows users to specify a default delivery route type. Options are Mail Order/Courier, Pickup, and Store Delivery.

Enable "Store Delivery" Delivery Route Type – Ensures the delivery route type is available for selection in the Rx screen.

Enable Mail Order/Courier Delivery Route Type – Ensures the delivery route type is available for selection in the Rx screen.

Allow Workflow Queue Filtering – Allows users to filter Rxs by current workflow stage from the Workflow screen.

Decode Barcode when Importing Script Images – Forces the background Rx service to decode any barcodes found in documents imported via the document scan utility.

Prevent Script Image Reference reuse for [x] days – Allows users to set the number of days that must laps before a barcode image can be rescanned.

Require Script Image Reference number for script images – Requires each Rx to have a barcode referenced script image.

Show DIN On Packaging Screen – Shows the DIN on the Packaging workflow screen.

Prompt for Clinical/Billing when cancelling and refilling an Rx – Prompts users to change billing or clinical data before cancelling an Rx.

Allow Postponing Adjudication – Allows users to postpone adjudication when data transmission fails so it can be resent later.

Require Script Image or reason for no Script Image on New Rxs – Requires that new Rxs have attached script images. A reason must be provided when no script image is available.

Show "detached" script window when filling new Rxs – Superimposes the Rx screen when filling a new Rx.

Use current time of day for Rx start time – The current time will be used as the Rx start time.

Force Scanning Pickup Bin After Placing Every Rx – Requires users to scan a pickup bin when filling an Rx so it becomes associated with that bin.

Show items picked up in last [x] hours – Allows users to set the number of hours picked up items will remain in the picked up window.

Force Confirmation Scanning of Prescriptions – Requires users to scan the Rx barcode on pick up.

Track Person Picking Up Rxs – Requires that users ask the person picking up the Rx how they are related to the patient.

Require Address of Person Picking Up Rxs (Rx for Themselves) – Requires users to obtain the address of the person picking up the Rx.

Require Address of Person Picking Up Rxs (Rx for Someone Else) – Requires users to obtain the address of the person related to the patient who is picking up the Rx.

Require Photo I.D . # of Person Picking Up Rxs (Rx for Themselves) – Requires that patients provide a photo ID number when picking up a prescription.

Require Photo I.D . # of Person Picking Up Rxs (Rx for Someone Else) – Requires that persons picking up a prescription on behalf of a patient provide a photo ID number.

Track Relationship When Person Picking Up Rxs for Someone Else – Requires users to specify the relationship to the patient when someone other than the patient picks up a prescription.

Allow Patient Search by Scanning Rx Number Barcode – Allows users to perform a patient search by scanning an Rx barcode.

Allow Pharmacist to Undo a Pickup up to [x] days ago – Allows users to set the maximum number of days after pickup a pharmacist can undo a pickup of a prescription.

Enable Pickup/Undo Pickup from start screen – Enables the F10 pickup button at the start screen and the undo pickup option under the Utilities menu.

Counselling

Allow editing counseling time – Allows users to edit counseling times when filling an Rx prior to saving the record.

Users Permitted to Finalize Accepted Counseling (Pharmacist/Pharmacist Intern/Pharmacy Student/Licensed Technician/Pharmacy Tech Student/Pharmacy Assistant/IT Support) – Allows users to specify who can finalize accepted counseling.

Visible Tabs (Hardcopy Tab/Rx Tab/Financial Tab/Rx Images Tab/Workflow Tab/Packaging Tab) – Allows users to select the tabs that are visible during Rx verification. All tabs are enabled by default.

Require Document Scan to Complete Paper Med Review – Require users to scan the Med Review document in order to confirm that you have completed the Med Review step.

Enable Electronic Med Reviews – Enables electronic (paperless) medication reviews.

Require Electronic Signature – Requires electronic signatures during the Rx verification steps.

On New Rx – Displays the counseling screen for new Rxs.

Only flag if patient hasn't had the drug in the last [x] days – Flags patients for automatic counselling after the patient has exceeded the set days since they last had the prescribed drug.

On Refills – Displays the counseling screen for refills.

On Drug Changes – Displays the counseling screen when a drug is changed.

Allow User to Turn OFF Automatic Counseling for an Rx – Allows the pharmacist to opt out a patient for automatic counselling.

CeRx

Copy Sig Code when creating local Rxs from network Orders – Uses the Sig from the network order when a local Rx is created.

FDB

FDB refers to the First Data Bank. First Data Bank provides Kroll with a database that has allergy and interaction checking, drug information leaflets and much more. We will explore each individual tab in the following pages.

Drug-Drug Interactions – Checks for interactions between drugs.

Max SL – Set the maximum severity level. Level 3 indicates low severity; level 1 indicates high severity.

Drug/Disease Contraindications – Checks to ensure the prescribed drug will not adversely affect the patient's existing medical conditions.

Drug Side Effects – Displays any applicable drug side effects.

Duplicate Therapy – Warns users if the patient is taking more than one of the same type of drug for the same therapy.

Allergy Checking – Checks for patient allergies when filling an Rx.

Cross Sensitivity Check – Checks for patient drug sensitivity when filling an Rx.

Ingredient Allergy Checking – Checks for patient drug ingredient allergies when filing an Rx.

Check Interactions – Checks for drug interactions when filling an Rx.

Only Check for New Rxs – Checks for drug interactions when filling new Rxs only.

Don't Check Rxs older than [x] Days – Specify the maximum number of days that can pass before Rxs are no longer checked.

On Rx Analysis Force Confirmation – Requires users to enter their login credentials before completing an Rx.

Adjudication

The following section describes the configuration settings available on the **Adjudication** tab.

General

Use the Cost/Markup/Fee parameters (on the Retail/Nursing Home tabs) if there are other plans – Uses the cost/markup/fee parameters set on the Retail and Nursing Home tabs if other drug plans are present.

Prompt to rollback Copay for Last Rx Plan – Automatically sends the copay from the primary plan to the next plan, allowing users to adjust the final copay once the Rx has been sent through all plans.

Always Prompt to rollback Copay for Provincial Plan – Displays a prompt asking if users want to waive part or all of the copay amount before it is sent to the next plan.

When rolling back Cost, Markup Fee and Copay Adjustments – Allows users to specify the sequence in which rollbacks are applied.

Automatically switch Routes when they are down – Marks the primary route as down in File > Configuration > Adjudication and automatically switches to the secondary route when the route is down.

Allow marking fiscal plans down if there is only one route – Allows users to mark any financial plans down if only one route is available for adjudication.

Allow marking clinical plans down if there is only one route – Allows users to mark any clinical plans down if only one route is available for adjudication.

Ignore these warning Messages when batching DH, DI, and DJ (F2) – Ignores interventions when completing a batch.

Ignore batched CeRx Issues with a severity less than or equal to – Select high, medium, or low. If an option is not chosen then the system will force users to correct any severity level that is returned during batching.

Ignore batched NECST Issues with a severity less than or equal to – Select high, medium, or low. If an option is not chosen then the system will force users to correct any severity level that is returned during batching.

Ignore these NECST warning Messages when batching DH, DI, and DJ (F2) – Ignores NECST warnings when completing a batch.

Retail/Nursing Home

The **Retail** and **Nursing Home** tabs contain the same settings. Users must configure both tabs, depending on the settings that apply to the pharmacy. Users can select different values for retail Rxs and nursing home Rxs; the selected parameters will apply regardless of whether Rxs are filled manually or in a batch.

If the Cost + Markup difference is < = $ 0 then discount the difference (0 or blank means Do Not Discount) – Differences between these two values will be passed on to the patient. The value must match the less than value in Fee + Mixfee Difference section

If the Cost + Markup difference is > = $0.01 then force pharmacist to review (0 or blank always means pass the difference on to the patient) – Ensures any difference greater or equal to the amount specified will prompt the pharmacist to review the prescription. This is by default set to $0.01 .

If the Fee + MixFee difference is < = $ [x] then discount the difference (0 or blank means Do Not Discount) – Ensures differences between these two values will be passed on to the patient. The value must match the less than value for Cost + Markup section.

If the Fee+MixFee difference is > = $[x] then force pharmacist to review (0 or blank means always pass the difference on to the patient) – The value must match the greater than value entered for the Cost + Markup section.

Automatically Credit Copays if less than or equal to $[x] – Automatically waives the credit copay value to zero if the amount returned is equal or less than the preset amount.

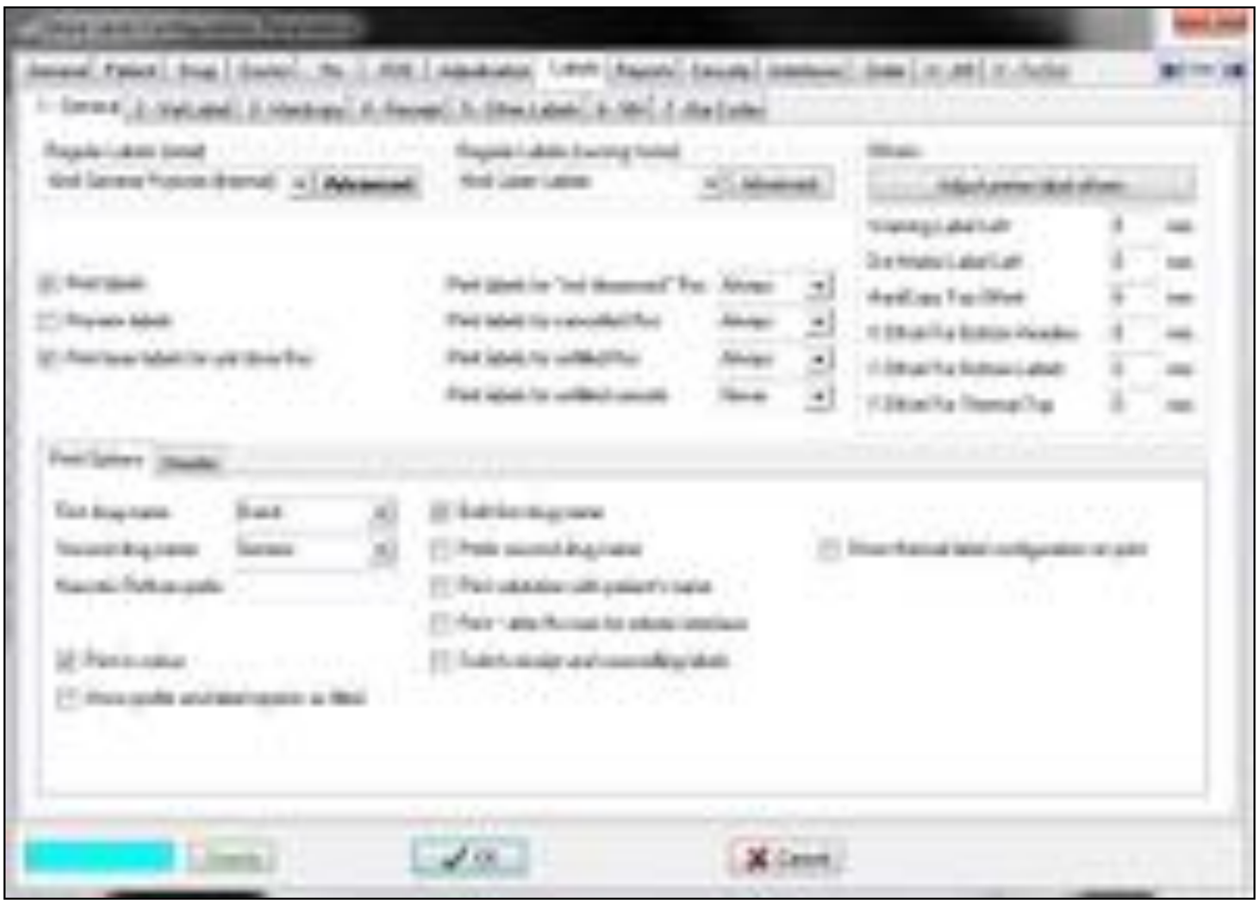
For CASH Rxs, only charge a fee for the first Refill of the month (for batched Rxs only) – Only applies to nursing home Rxs that are filled in a batch; allows users to fill the Rx multiple times throughout the month but only charges the fee to the first fill only.

Labels

The following section describes the configuration settings available on the **Labels** tab.

General

The **General** tab allows users to configure the label settings for retail and nursing home Rxs.The **Advanced** settings allow users to define additional label mappings and create new stocks. This tab also contains controls for adjusting the printer offsets.



Regular Labels (retail/nursing home) – Select the label types that the settings enabled on the Labels > General tab will ne applied to.

Print Labels – Labels will be printed for generated for each Rx.

Preview Labels – Displays a label preview before it is printed.

Print laser labels on unit dose Rxs – Prints a laser label when unit dose is selected on the Rx.

Print labels for "not dispensed" Rxs – Select Always, Never, or Prompt. This controls whether labels are printed for not dispensed Rxs.

Print labels for cancelled Rxs – Select Always, Never, or Prompt. This controls whether labels are printed for cancelled Rxs.

Print labels for unfilled Rxs – Select Always, Never, or Prompt. This controls whether labels are printed for unfilled Rxs.

Print labels for unfilled cancels – Select Always, Never, or Prompt. This controls whether labels are printed for unfilled, cancelled Rxs.

First drug name – Select Brand, Description, Equivalent to, Generic, or None. This determines what prints as the first drug name on the vial label.

Second drug name – Select Brand, Description, Equivalent to, Generic, or None. This determines what prints as the second drug name on the vial label.

Print in colour – Allows for colour printing.

Show profile and label reprints as filled – Shows a status of 'filled', rather than 'reprint' on the hardcopy.

Bold first Drug Name – Bolds the first drug name on the vial label.

Prefix second drug name – Prefixes the second drug name to the first drug name.

Print Salutation with patient's name – The salutation set on the F3 - Patient screen will show in the vial label.

Print * after Rx num for robotic interface – If an Rx is filled by a robotic interface, pill counter, etc., the system with place an asterisks after the Rx number, which indicates that it is being filled by the machine.

Switch Receipt and Counselling Labels – Switches the positions of the receipt and counseling labels.

Show thermal label configuration on print – Displays a label configuration screen before labels are printed.

Adjust printer label offsets – Allows users to adjust the printer offsets.

The following options allow you to adjust just particular parts of the label:

- **Warning label Left [x] mm**
- **Dot Matrix label Left [x] mm**
- **Hardcopy Top offset [x] mm**
- **X Offset for Bottom Headers [x] mm** – X offsite moves the label left (negative number) or right (positive number).
- **Y Offset for Bottom Labels [x] mm** – Y offset moves the labels up (negative number) or down (positive number).

Header – Enter the pharmacy's address information as it should appear on laser labels.

Print headers on NH laser Labels – Forces the system to print the free form header that is entered on vial label, receipt, and counselling position of the nursing home laser label.

Print heads only on NH laser receipt –The free form header will only print on the nursing home laser label receipt.

Print header only on NH laser receipt –The header will print only on receipts generated for nursing homes on a laser printer.

Print headers on Ontario Standard labels –The header will print on Ontario Standard Labels.

Print header on lower right label – The free form header will print on the wallet card.

For Patient "label header" comments replace – Select None, Line 1, Line 2, and Line 3 or All.

Vial Label

Please keep in mind that the options available on this tab will change depending on whether laser labels, dot matrix labels, or thermal printer labels are configured on the **General** tab. The options available for laser labels are described below.

Print Original Rx number – Forces the system to print the original Rx number for each prescription filled in a chain.

Print Pharmacist initials – Pharmacist initials will print on the vial label

Print manual drug expiry (don't use expiry dates) – A blank expiry label will print on the bottom of the vial label allowing you to enter a free form expiry date.

Print Drug DIN (don't use PDIN) – The DIN will print on the vial label, instead of the pseudo DIN that was used for billing.

Print refills on label if zero – Prints refills as zero if the patient does not have repeats left on the prescription.

Print refill expiry – Prints the refill expiry date.

Print qty remaining instead of refills – Prints the actual pill count in the refill position instead of the number of refills left.

Print refill info on unlimited refills – Prints unlimited refills as well as the expiry date on vial label

Bold Sig – Bolds the sig line on the vial label.

Print native language if printing foreign sig – Prints the native language on the hardcopy if printing foreign sigs.

Print English Child warning – Prints a warning along the left hand side of the vial label stating to keep out of reach of children in English.

Print French Child warning – Prints a warning along the left hand side of the vial label stating to keep out of reach of children in French.

Print narrow vials (my labels have pre-printed child warnings) – Applies to provinces where child warnings must be printed. This provides a narrow label to make room for the pre-printed child warning.

Print watermark for Unfills – Prints a watermark going diagonally across the label that states unfilled.

Watermark darkness [x]% – Allows you to adjust the darkness of the watermark.

Print DOS – style vials –Allows you to print DOS style vial labels, which changes the look of the current vial label set up to the old style.

Print vial labels for unfills – Allows you to have vial labels print for unfilled prescription. If disabled, system defaults to printing a hardcopy but no vial label.

Always print 2 vial labels – Prints vial labels in sets of two.

Always print on all vials on each page – All vial labels will be printed on for each label set; none will be left blank.

Print pastimes on NH Laser Labels – Prints the passtime set on a regular label set if the patient is in a nursing home.

Use NH style vials for NH patients – Uses nursing home-style vial labels for nursing home patients.

Print home name – Prints the home name on nursing home labels.

Print ward name – Prints the ward name on nursing home labels.

Print room – Prints the room number on nursing home labels.

Print bed – Prints the bed number on nursing home labels.

Print DIN – Prints the DIN on nursing home labels.

Print Methadone label on vial 2 – A methadone label will print for methadone prescriptions so the signatures of the patient and the witness can be recorded. This prints on the second vial label.

Print Pickup Signature label for Monitored Drugs – A pickup signature label will print for monitored drugs.

Watermark darkness [x]% – Set the watermark opacity by percentile increments.

Hardcopy

Please keep in mind that the options available on this tab will change depending on whether laser labels, dot matrix labels, or thermal printer labels are configured on the **General** tab. The options available for laser labels are described below.

Hardcopy TxNum Prefix Rx – Enter the prefix that should appear before the Rx number on the vial label. This is typically set to 'Rx', although some provinces set this to 'Tx'.

Print store header on laser hardcopy – Prints the header that is configured in the Labels > General tab on the laser hardcopy.

Printer watermark for Unfilled Rxs – Prints a watermark on the hardcopy for unfilled Rxs.

Print transaction number on bottom of hardcopy – Prints the Tx number on the bottom of the hardcopy.

Print fill time – Prints the time at which the Rx was filled.

Print patient gender – Prints the patient's gender on the hardcopy.

Print patient allergy and conditions – Prints any allergies or conditions that have been entered in the patient profile.

Print patient DOB on thermal labels – Prints the patient's date of birth on the thermal label.

Print patient Quick Code (laser) – Prints the quick code that if one has been entered on the patient profile.

Always print Brand and Generic drug names – Prints the drug's brand name and generic name on the hardcopy.

Print pack size and cost – Prints the pack size and the cost of the pack on the hardcopy.

Print lot and drug expiry date – Prints the lot and expiry date that is entered on the F5 - Drug screen.

Print pseudo DIN (dot matrix and thermal) – Prints the pseudo DIN in the DIN field on thermal and dot matrix labels.

Print plan-specific DINs for mixtures – Prints the DIN that is entered on the Plans tab on the F5 - Mixture screen.

Show default vendors item number – The default vendor item number entered on the Ordering tab on the F5 - Drug screen will be printed on the hardcopy.

Print drug location – Prints the location where the drug can be found, if the location is entered on the F5 - Drug screen.

Print NH room –The patient's nursing home room number will print on the hardcopy.

Do not print hardcopy when electronic signatures enabled – Hardcopies will be disabled when a signature pad is configured.

Include due date in Rx messages – The due date for the Rx will appear on the hardcopy.

Print refill 'days early/late' message – Prints a message letting the pharmacist know if the refill is early or late.

Print native language sig when printing foreign sig – Prints the sig on the hardcopy in the native language, even when printing a foreign language sig.

Replace total with patient pays on dot matrix/ thermal labels –The patient pays amount will be printed on the label instead of the total cost.

Print patient, drug and doctor hardcopy comments – Prints the comments entered on F3, F5 or F7 screens when a comment is entered.

On new Rxs – Prints the counselling message checkbox on the hardcopy for new Rxs.

On refill Rxs – Prints the counselling message checkbox on the hardcopy for refill Rxs.

Print hardcopy on second vial label – The hardcopy will print on the second vial label instead of in the usual position.

Print watermark for cancelled Rxs – A watermark stating "cancelled" will print diagonally across the hardcopy.

Print watermark for reprint Rxs – A watermark stating "reprint" will print diagonally across the hardcopy.

Print sig status on hardcopy – "New" will print in front of the sig if it has been changed since the original fill.

Print Gross Profit on hardcopy –The total gross profit will print on the hardcopy.

Print NH Code – The nursing home code will print on the hardcopy.

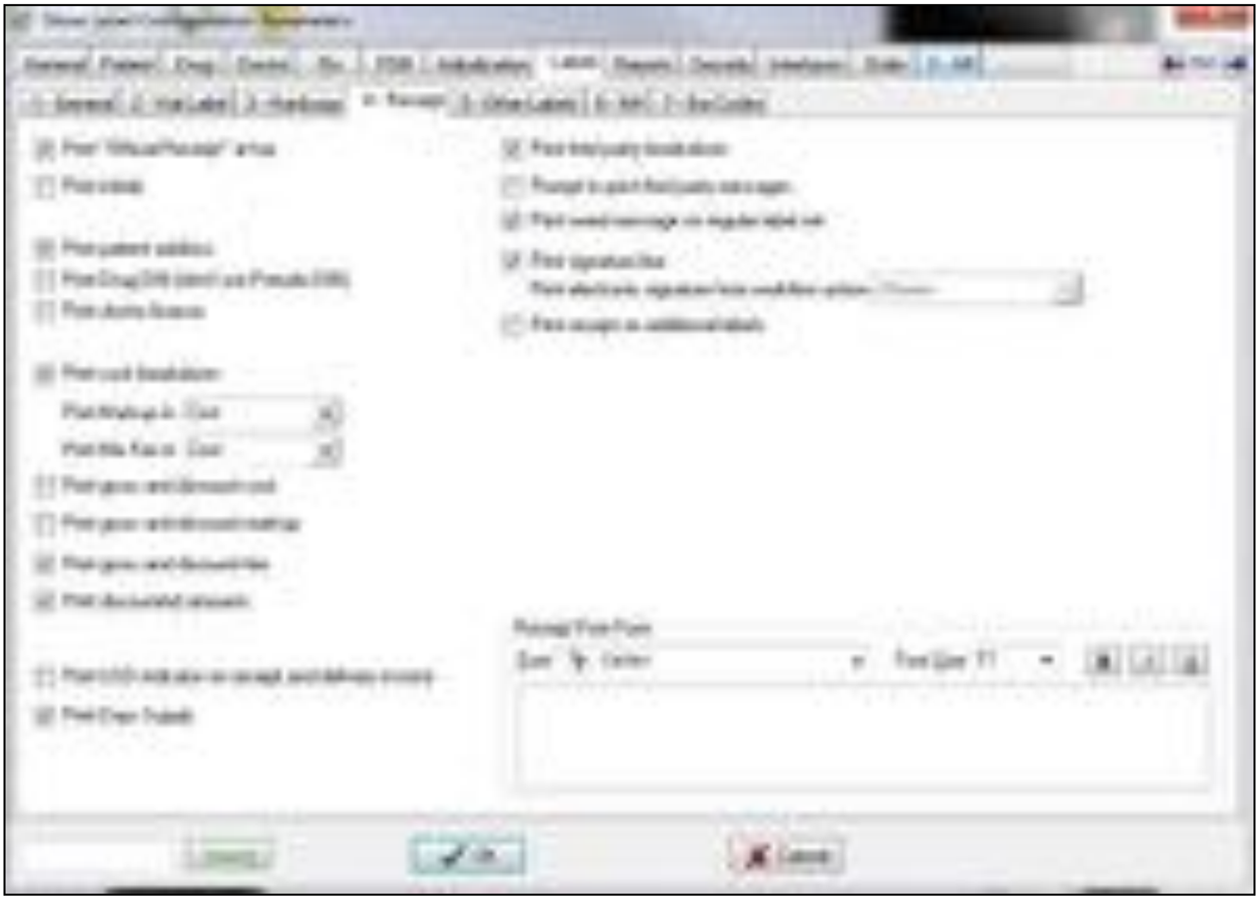
Print MedType – The MedType will print on the hardcopy.

Print Ward Short Form Code – The Ward Short Form Code will print on the hardcopy.

Print Pass Times – The pass times will print on the hardcopy.

Hardcopy Rx Comment Priorities – Click to select the order in which Rx comments are printed.

Receipt



Print "Official Receipt" at top – Prints 'Official Receipt' across the top of the laser receipt.

Print initials – The initials of the user who filled the prescription will print on the receipt.

Print patient address – Prints the address entered on the F3 - Patient screen on the hardcopy.

Print Drug DIN (don't use Pseudo DIN) – Prints the DIN on the receipt. This setting is required if the patient is using the official receipt to submit to a drug plan.

Print doctor license – Prints the doctors license number that is entered on the F7 - Doctor screen.

Print cost breakdown – Prints the markup and mix fees.

Print gross and discount cost – Prints the cost of the drug and the discounted amount.

Print gross and discount markup – Prints the gross and discount markup on the receipt.

Print gross and discount fee – Prints the gross cost of the Rx and the discounted amount.

Print discounted amounts – Prints any discounted amount on the receipt.

Print USD indicator on receipt and delivery invoice – Prints a USD indicator (U.S. dollars) on the receipt and invoice.

Print days supply – Prints the days supply quantity on the receipt.

Print third party breakdown – Prints the amounts that third party has paid on the receipt.

Prompt to print third party messages – Prompts users to print third party messages on the receipt.

Print owed messages of regular label set – Prints the owed amount on the bottom of the receipt, when an owing label is selected of the F12 screen.

Print signature line – Prints a signature line at the bottom of the receipt for the pharmacist to sign.

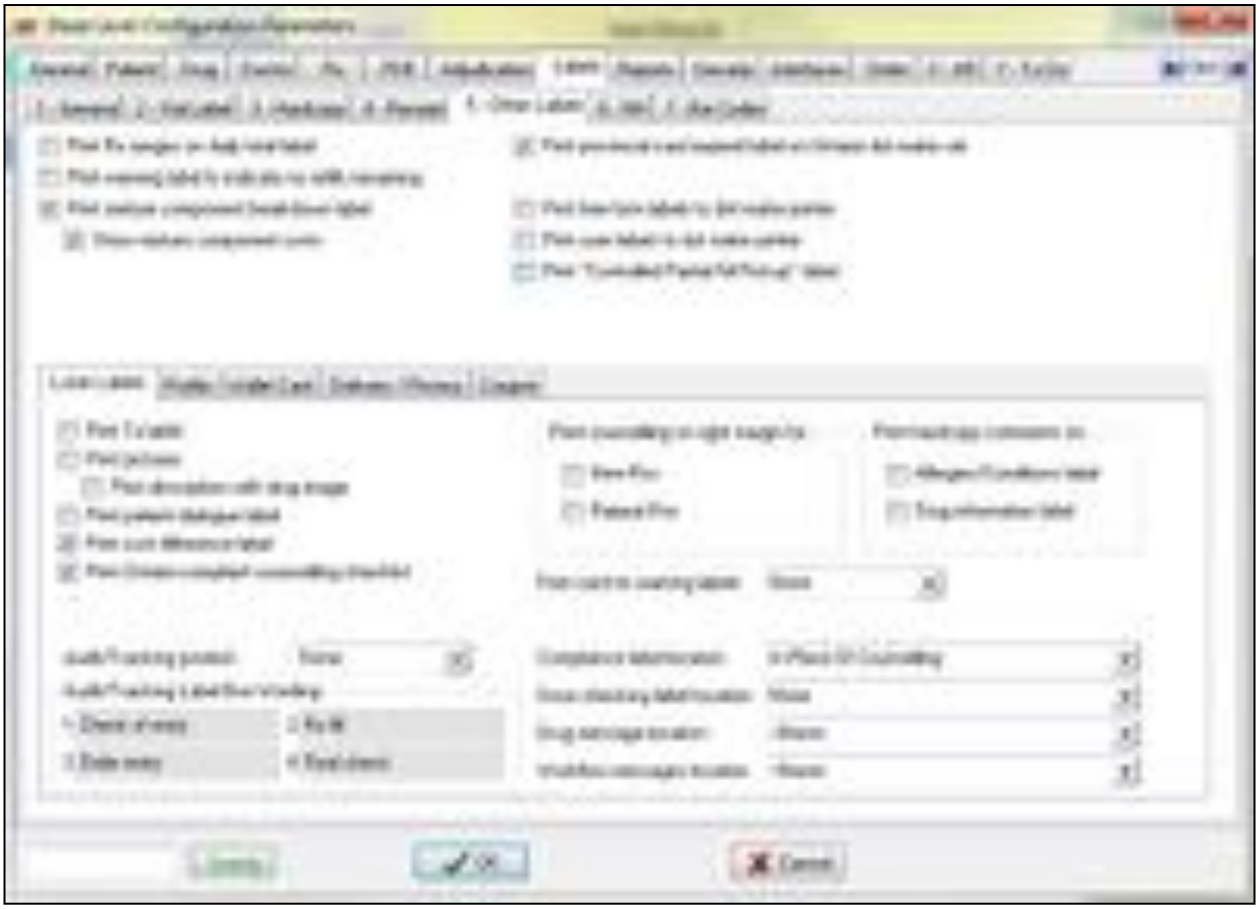
Print electronic signature from workflow action – Prints the pharmacist's signature on the receipt when signed using the electronic signature pad.

Print receipt on additional labels – Receipts will print when additional labels are printed.

Receipt Free Form – Enter any additional information (store hours, specials, etc.) that you want printed on the bottom of the labels.

Other Labels

Please keep in mind that the options available on this tab will change depending on whether laser labels, dot matrix labels, or thermal printer labels are configured on the **General** tab. The options available for laser labels are described below.



Print Rx range on daily totals – Prints the Rx regular and narcotic range used for the day on the end of day totals.

Print warning label to indicate no refills remaining – A warning (auxiliary) label will print warning that the patient no longer has repeats remaining.

Print mixture component breakdown label – Prints a mixture breakdown when an Rx is printed and is a mixture.

Show mixture components costs – The cost of each component in a mixture will be shown on the Drug Info Label.

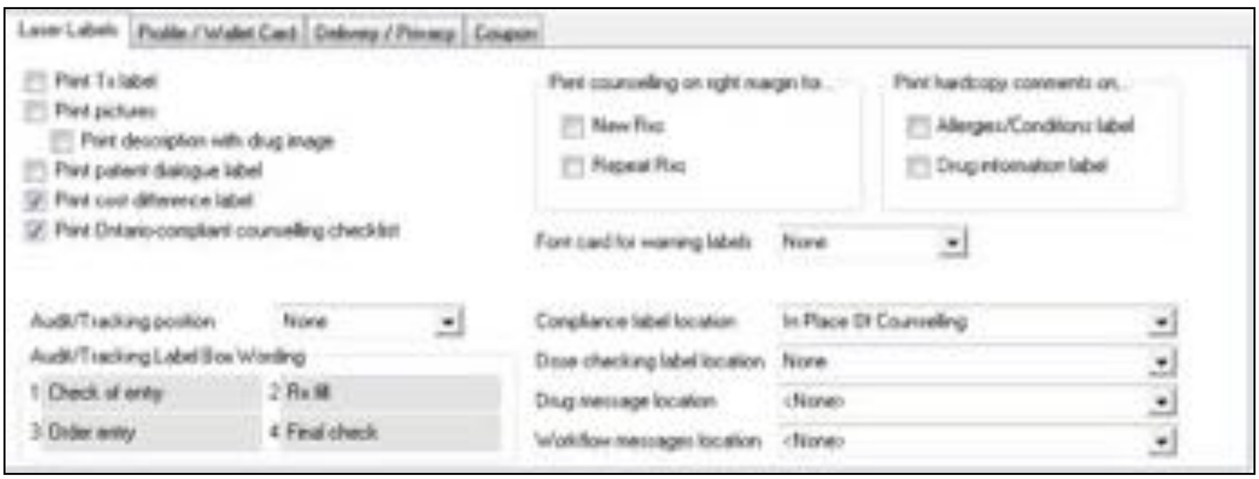
Print Provincial card expiry label on dot matrix set – Prints the expiry date that is entered on the F3 card. This will only print on a dot matrix label set.

Print free form labels to dot matrix printer – All free form labels will be sent to a configured dot matrix printer.

Print user labels to dot matrix printer – All user labels will be sent to a configured dot matrix printer.

Print "Controlled Partial Fill Pickup" label – The Controlled Partial Fill Pickup label will be printed after partially filling an Rx for a controlled drug.

Laser Labels



Print Tx label – Prints a transaction label on the label set.

Print pictures – Prints any applicable images on the label.

Print description with drug image – An image of the drug will print alongside the description on the label set.

Print patient dialogue label – The patient dialog label will print on the label set. This label has a checklist to ensure all relevant topics are explained to the patient.

Print patient cost difference label – The patient pays amount will print on the label set.

Print Ontario-compliant counselling checklist – A counselling checklist will be printed on the hardcopy label.

Audit Tracking position – Allows users to choose where audit/tracking information is located. Select Tx1, Tx2, or Hardcopy.

Audit / Tracking Label Box Wording – Enter the wording for each box as it should appear on the Audit/Tracking label.

Print counselling on right margin for… – Select New Rxs and/or Repeat Rxs. Counseling information will print in the right margin for the selected Rx type(s).

Print hardcopy comments on… – Select Allergies/Conditions label and/or Drug information label. Hardcopy comments will print on the selected label(s).

Front card for warning label – Allows users to choose font cards for compatibility with different interfaces.

Compliance label location – Select In Place of Counseling, On Second Label Set, or On Two Labels Above Counseling. This determines the compliance label location.

Dose checking label location – Select Allergies/Conditions Label, Right Margin, Second Vial Label, or None. This determines where dose checking appears on the laser label.

Drug message location – Select Add to patient counseling, Add to receipt, Replace patient counseling, or None. This determines where drug messages appear on the laser label.

Workflow messages location – Select Append allergies/conditions, Append to hardcopy, Replace allergies/conditions, Replace patient counseling, Replace right-middle, Replace second vial, or None. This determines where workflow messages appear on the laser label.

Profile/Wallet Card

Print Wallet card by default (can change on Rx) – Prints a wallet-sized patient profile on the bottom right hand side of laser label set.

Don't Print small profile when Print Wallet Card is off (laser only) – The patient profile will never print on the laser set, even if the option is select on the F12 screen.

Print generic drug name – The generic name of the drug will print on the wallet card.

Print Sig – Prints the Rx sig on the wallet card.

Print refills remaining – Prints the number of remaining repeats per Rx on the wallet card.

Include inactive Rxs – Inactive Rxs in the patient's profile will print on the wallet card.

Include Unfill Rxs – Prints any Unfilled Rxs from the patients profile on the wallet card.

Delivery/Privacy Label

Always print delivery label – Prints a delivery label each time an Rx is filled.

Print phone number – Prints the phone number listed as the first phone number in the patient profile.

Print Rx number – Prints the Rx number on the delivery label.

Print copay – Prints the copay on the delivery label.

Print pending medication review notification – A pending medication review will print.

Print signature line – Prints on the delivery label.

Position – Use the privacy options to specify what items are printed on the privacy label:

- Print Phone number
- Print Patient Pays
- Print third party amount
- Print signature line

Position – Allows users to control whether delivery/privacy labels are printed on the Right Bottom, Right Middle, Second Vial Label, or None.

Coupon

The **Coupon** tab allows users to specify the X and Y offset, width, and height of printed coupons. Use the **Load** button to import a coupon image and adjust the parameters so it prints correctly. Note that the dollar value is set b y the image and cannot be changed without loading a new image.

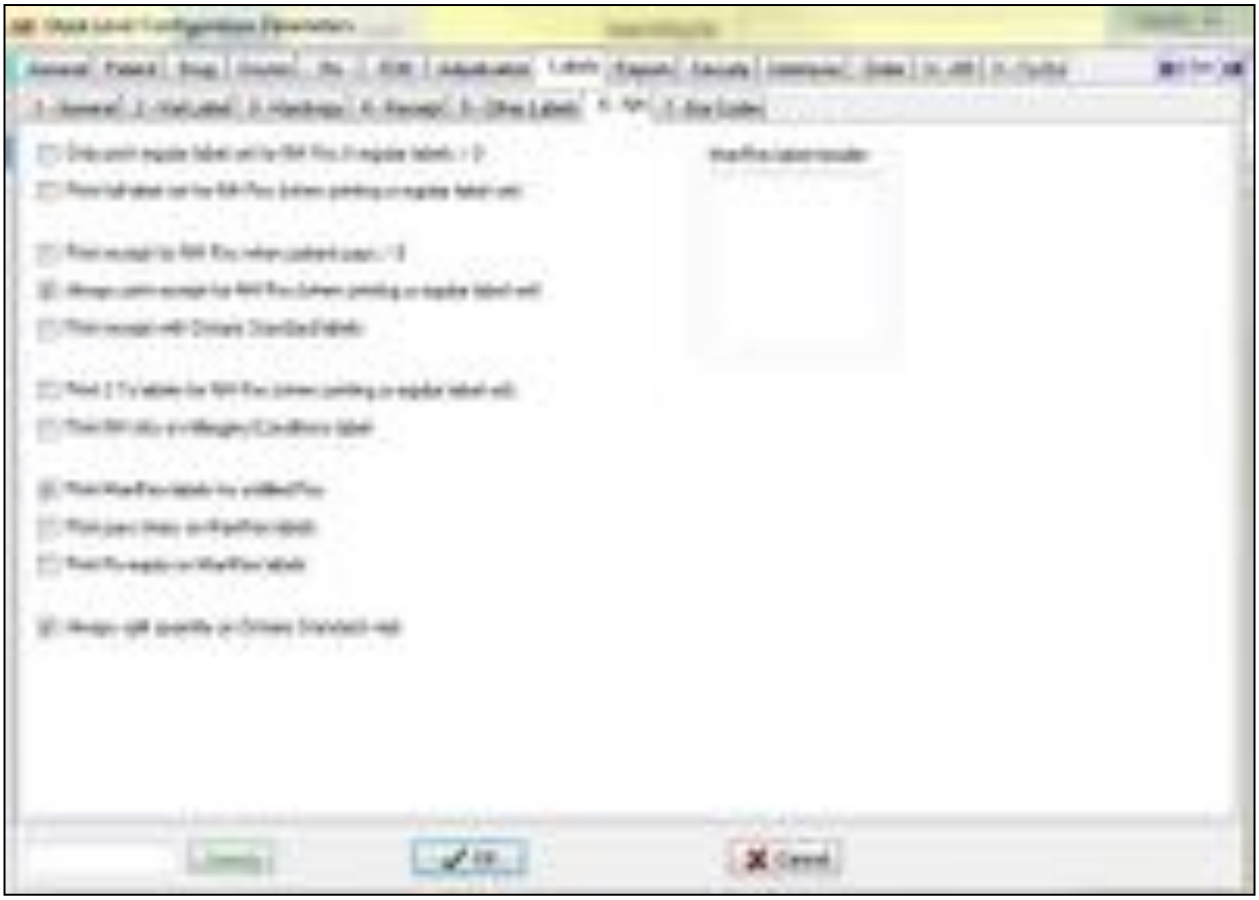
Print coupon –The coupon will print for New, Refill Rxs, or both. Use the Value (% of Rx price) field to set a value and the Minimum value field to set a minimum value.

Override using plan settings based on – Select the criteria overrides using plan settings will be based on. Options include?

- First non due plan
- First override
- First paying plan
- First plan
- Highest coupon value
- Highest paying plan
- Lowest coupon value
- None

Message – Enter any free-form text to be printed on the coupon.

Nursing Home



Only Print regular label set for NH Rxs if regular labels > 0 – Prints a regular label set if NH regular labels are set to greater than zero on the F12 fill screen.

Print full label set for NH Rxs (when print a regular label set) – Prints a full regular label set when print regular labels

Print receipt for NH Rxs when patient pays > 0 – Prints a laser receipt when a nursing home patient pays is greater than zero.

Always print receipt for NH Rxs (when printing a regular label set) – Prints a receipt when a full laser label set is printing.

Print receipt with Ontario Standard labels – A receipt will be printed with the Ontario Standard Labels.

Print 2 Tx labels for NH Rxs (when printing regular label set) – Prints 2 Tx labels when printing a full label set.

Print NH info on Allergies/Conditions Label – Prints the allergies and conditions when printing a laser label set.

Print ManRex labels for unfilled Rxs – Prints a ManRex label for unfilled Rxs when ManRex labels are selected as label set for nursing home on file configuration label, general.

Print pass times on ManRex labels – Prints the pastimes that are set on the F12 fill screen under ALT N, when ManRex labels are set for nursing home on file configuration label, general.

Print Rx expiry on ManRex Labels – Prints the prescriptions expiry date on the ManRex label, as long as ManRex labels are set for nursing home in File > Configuration > Labels > General.

ManRex label header – Enter the pharmacy's address information as it should appear on ManRex labels.

Bar Codes

The **Bar Codes** tab allows users to set up barcodes. Before doing so, users must know what type of system they are using, as not all POS systems are interfaced with Kroll. Once the barcode type has been selected, users can choose where they want the barcode to print. Typically, users choose to place barcodes on receipts and on privacy labels.

The **2D Bar Coding** section allows you to choose where the 2D barcodes will print.

Reports

The following section describes the configuration settings available on the **Reports** tab.

General

Global Store Logo – For pharmacies who have their own store logo, they can create save a jpg file of their logo on the hard drive and if load it in this area it will print on any reports where the user has enabled an option to 'print store logo'.

Insert Row Breaks into Report – Adds blank space between rows on any given report.

Reports Shading 0 % – Shading presents a visual shadow within the data to help separate the data so it is more visual and easier to read.

Include cancelled Rxs on MAR/TMR forms – Cancelled Rxs will appear on Mar and TMR forms.

Include cancelled Rxs on compliance reports – Cancelled Rxs will appear on the compliance reports.

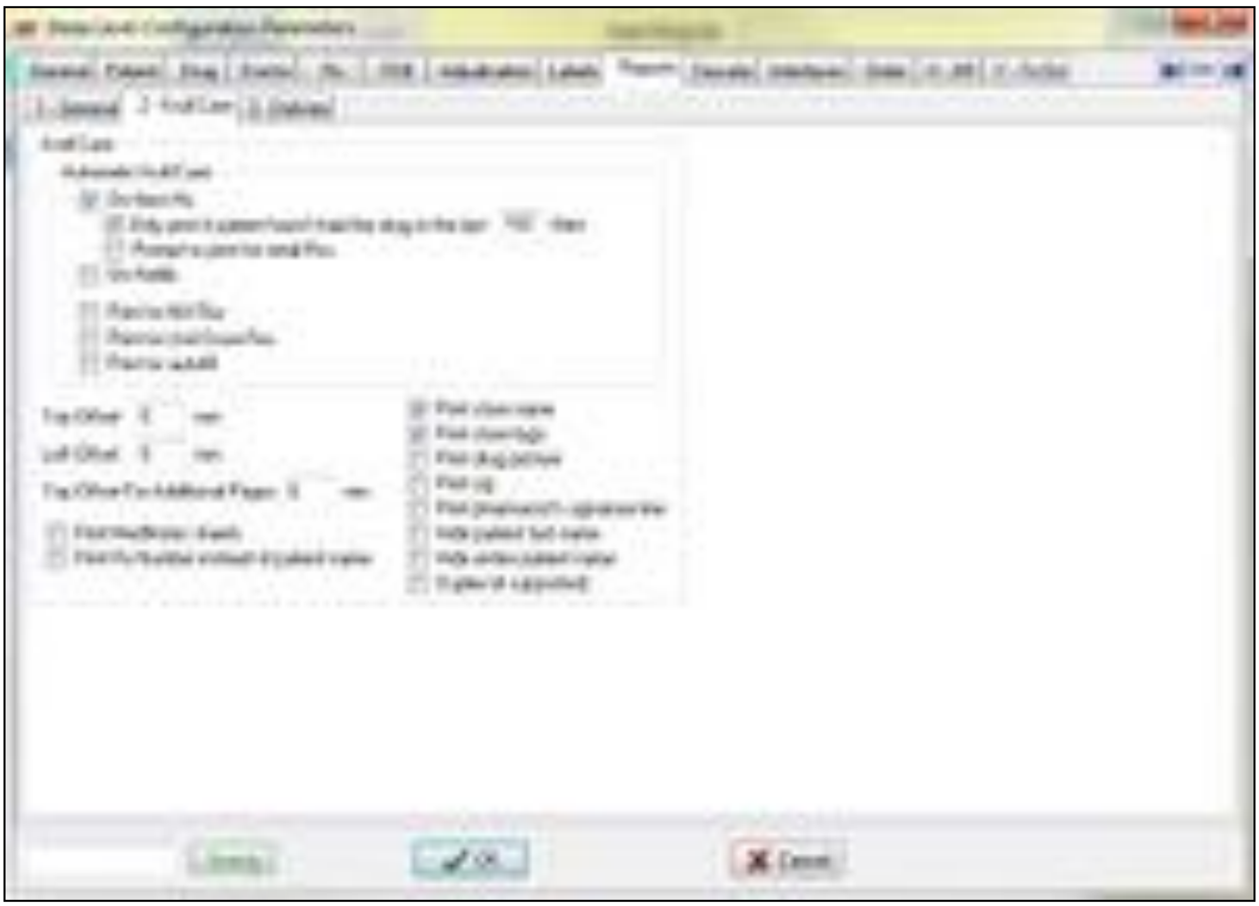
Exclude full suspension period Rxs on MAR/TMR forms – Excludes full suspension period Rxs from MAR/TMR forms.

Always show masked Credit Card Numbers – Masks credit card numbers on reports, etc. when credit card information is entered.

Send scheduled report failure notifications to – Select which user on the Kroll mailing list will receive failure notifications.

Kroll Care

Kroll Care is also known as the patient information leaflet. This leaflet explains what the drug is used for, how the patient should take the medication, precautions, side effects, and so on.



Automatic Kroll Care On New Rx – A Kroll Care leaflet will print for each new Rx.

Only print if patient hasn't had the drug in the last [x] days – A Kroll Care leaflet will print only if the patient has not had the medication in a specific amount of days (whatever value the user sets.)

Prompt to print for retail Rxs – Prompts to print a Kroll Care leaflet if you are filling for retail (non-Nursing Home Rx).

On Refills – Prompts to print a Kroll Care leaflet if it is a refill Rx.

Print for NH Rxs – Prompts to print a Kroll Care leaflet for Nursing Home Rxs (not commonly enabled)

Print for Unit Dose Rxs – Prompts to print a Kroll Care leaflet for unit dose or compliance pack Rxs.

Print for Autofill – Prompts to print a Kroll Care leaflet for any prescriptions that are automatically filled in a retail batch.

Print Store name – Prompts to print the pharmacy name at the top of the Kroll Care leaflet.

Print Store logo – Prompts to print the store logo at the top of the Kroll Care leaflet.

Print drug picture – Prompts to print t a picture of the drug at the top of the Kroll Care leaflet.

Print sig – Prompts to print the doctor’s directions at the top of the Kroll Care leaflet.

Print pharmacists signature line – Prompts to print a signature line at the top of the Kroll Care leaflet.

Hide patient last name – The patient’s last name will not print at the top of the Kroll Care leaflet.

Hide entire patient name – The patient’s last name will not print the patient’s first or last name at the top of the Kroll Care leaflet.

Duplex (if supported) – Duplex is an option that comes with some printers allowing the printout to print double sided.

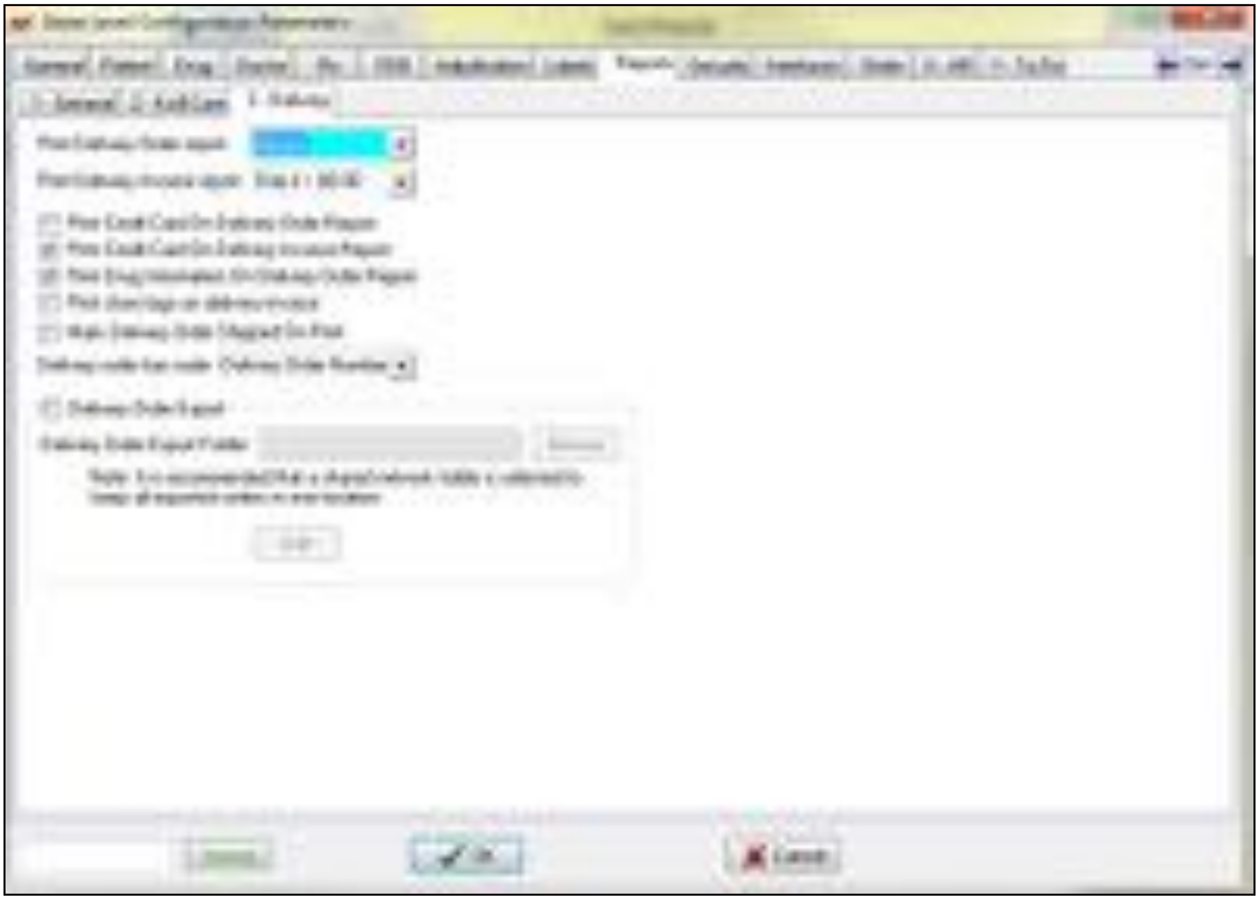
Print Rx Number instead of patient name – The patient’s name will print instead of the Rx number on the Kroll Care leaflet.

The Offset settings are set to 0 mm by default but can be edited. These settings allow users to control the printing parameters.

- Top Offset
- Left Offset
- Top Offset for Additional Pages

Delivery

The options selected for the delivery order report will vary depending on the needs of the pharmacy.



Print Delivery Order Report – Select Always, Never, or Only if > than $0.00. This determines when the Delivery Order Report is generated.

Print Delivery Invoice Report – Select Always, Never, or Only if > than $0.00. This determines when the Delivery Invoice Report is generated.

Print Credit Card on Delivery Order Report – Prints the patient's credit card number on the Delivery Order Report.

Print Credit Card on Delivery Invoice Report – Prints the patient's credit card number on the Delivery Invoice Report.

Print Drug Information on Delivery Order Report – Prints the drug name and drug information on the Delivery Order Report.

Print Store Logo on Delivery Invoice – Prints the store logo that is saved as the 'global store logo' in the General tab.

Mark Delivery Order Shipped On Print – Marks the delivery order as 'shipped' upon printing the report.

Delivery order Barcode – Select Delivery order number to print the delivery order number as the barcode number on the report, or None to print no number.

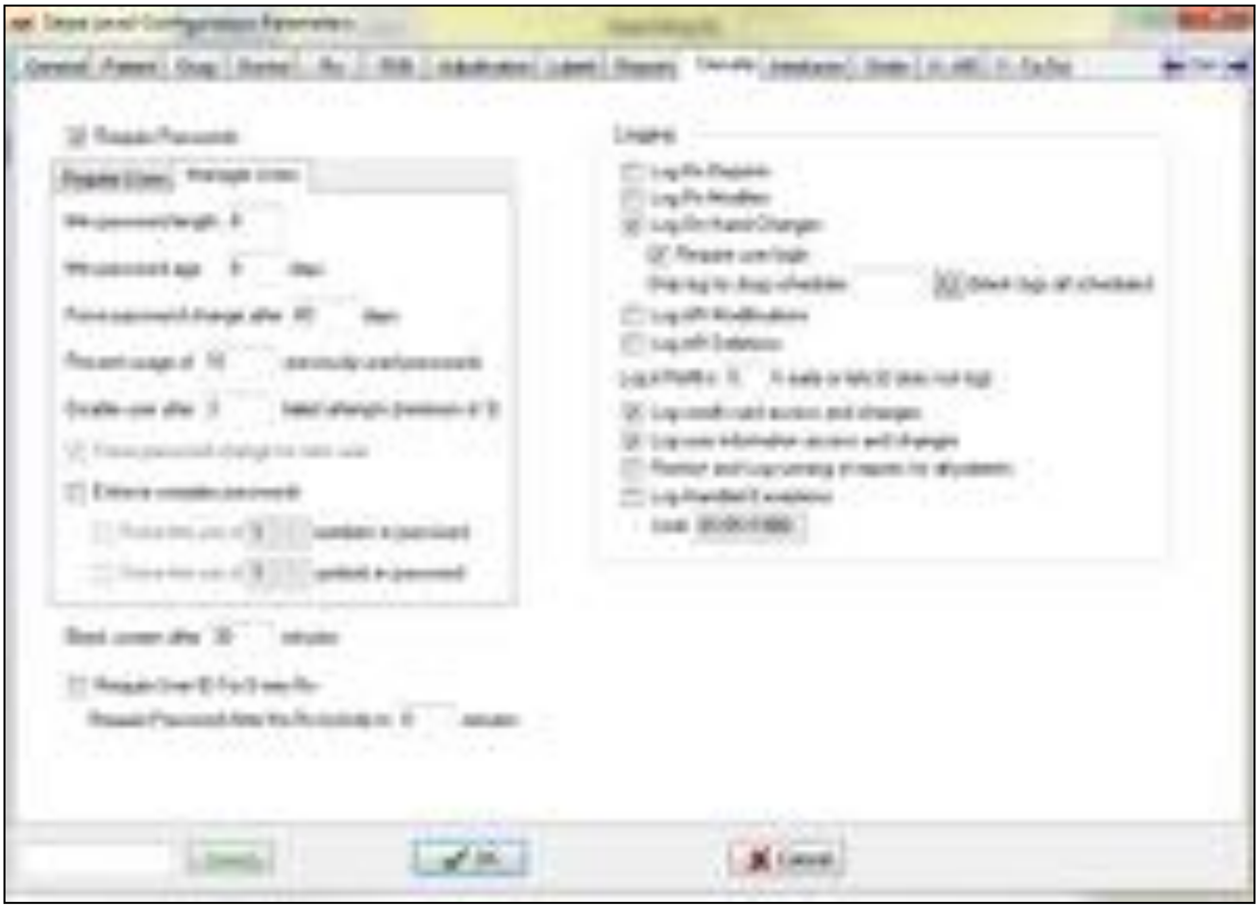
Delivery Order Export – Creates a file which contains the information from the delivery order report.

Delivery Order Export Folder – Select the folder where delivery order exports are saved. It is recommended that a shared network folder is used.

Edit – Allows users to edit the information that will be printed on the Delivery Order Report.

Security

The **Security** tab allows users to configure the level of security within the application. The selected options will vary according to store, chain, and province.



Require Passwords – Requires that users enter a password when logging into Kroll.

Min Password Length – The minimum number of characters required when a user creates a password.

Min Password Age – The number of days that must pass before a password can be reused.

Force Password Change after [x] Days – The number of days passwords remain valid. If this option is blank the system will not prompt to change a password.

Prevent usage of [x] previously used passwords – The number of previously used of passwords that cannot be reused.

Disable User After [x] Failed Attempts (minimum 3) – The number of times a user can unsuccessfully enter a password before that user is disabled.

Force password change for new user – Prompts the user to change their password the first time they log in, this is on by default.

Enforce complex passwords – Allows users to choose the amount of numbers and symbols required to create a password.

Blank Screen After [x] Minutes – The number of minutes of inactivity that must pass before the screen blanks out.

Requires User ID for Every Rx – Requires that users enter their login credentials before filling an Rx.

Require Password after no Activity in [x] Minutes – When the session is unattended for the specified number of minutes, users will be asked to enter their login credentials before the session can be resumed.

Logging – Logs each of the functions users perform.

Log Rx Reprints – Creates a log when an Rx is reprinted.

Log Rx Modifies – Creates a log when an Rx is modified.

Log On Hand Changes – Logs when users make changes to the on-hand quantity.

Require user Login – Requires users to enter their login credentials before changing on-hand values.

Only Log for Drug Schedules (blank logs all schedules) – Select the drug schedule(s) that will be logged.

Log AR Modifications – Creates a log when AR settings are modified.

Log AR Deletions – Creates a log when AR accounts are deleted.

Log if Refill is [x]% Early or Late (0 does not log) – Creates a log when refills are early or late by the specified percentage.

Log user information access and changes – Creates a log when user accounts are accessed and modified.

Restrict and Log running of reports for all patients – Creates a log and requires login credentials when reports are run for all patients.

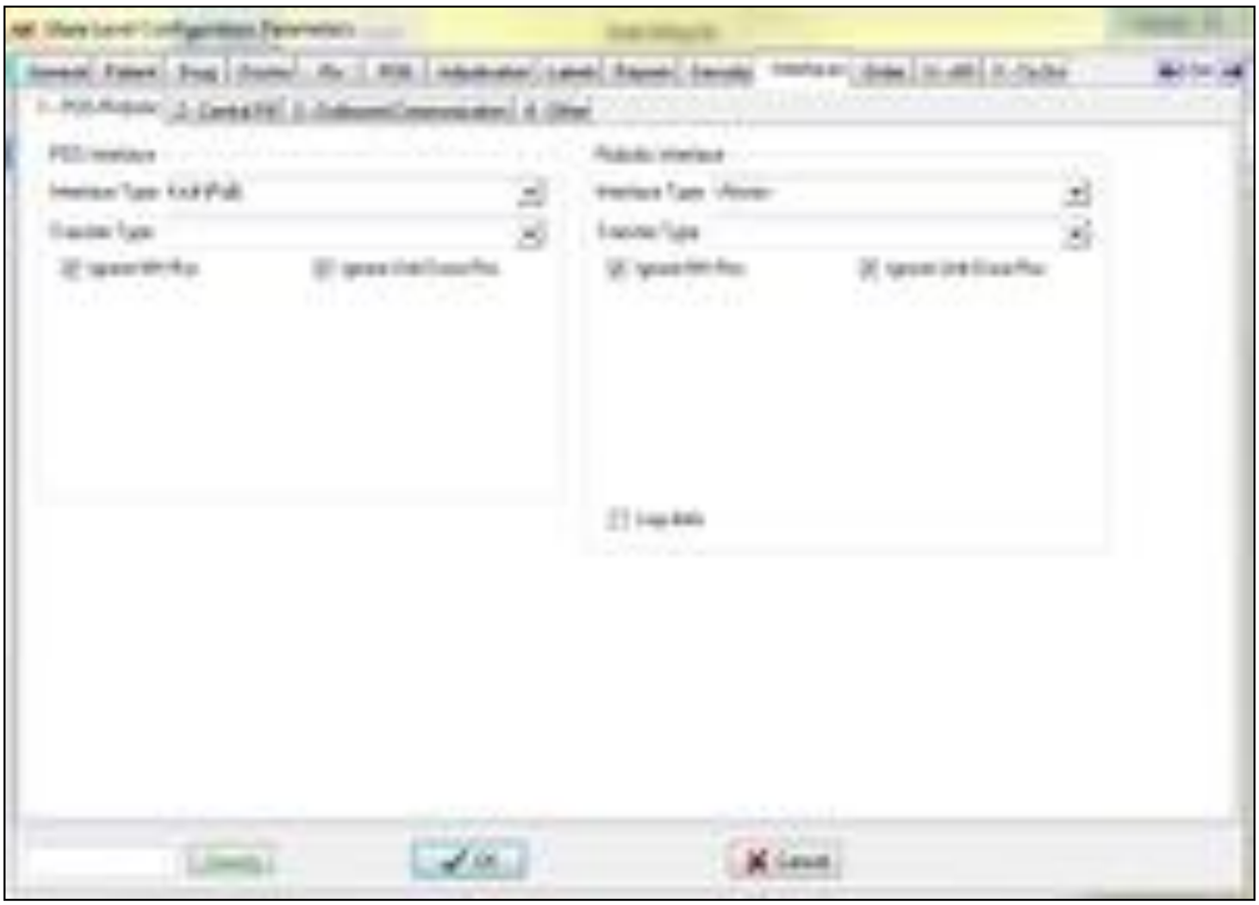
Log Handled Exceptions Until [dd/mm/yyyy] – The log handled exceptions expiration date.

Interfaces

The following section describes the configuration settings available on the **Interfaces** tab.

POS/Robotic

In this tab is where POS systems, Pill Counters, Pacmed, Automed etc are set up.

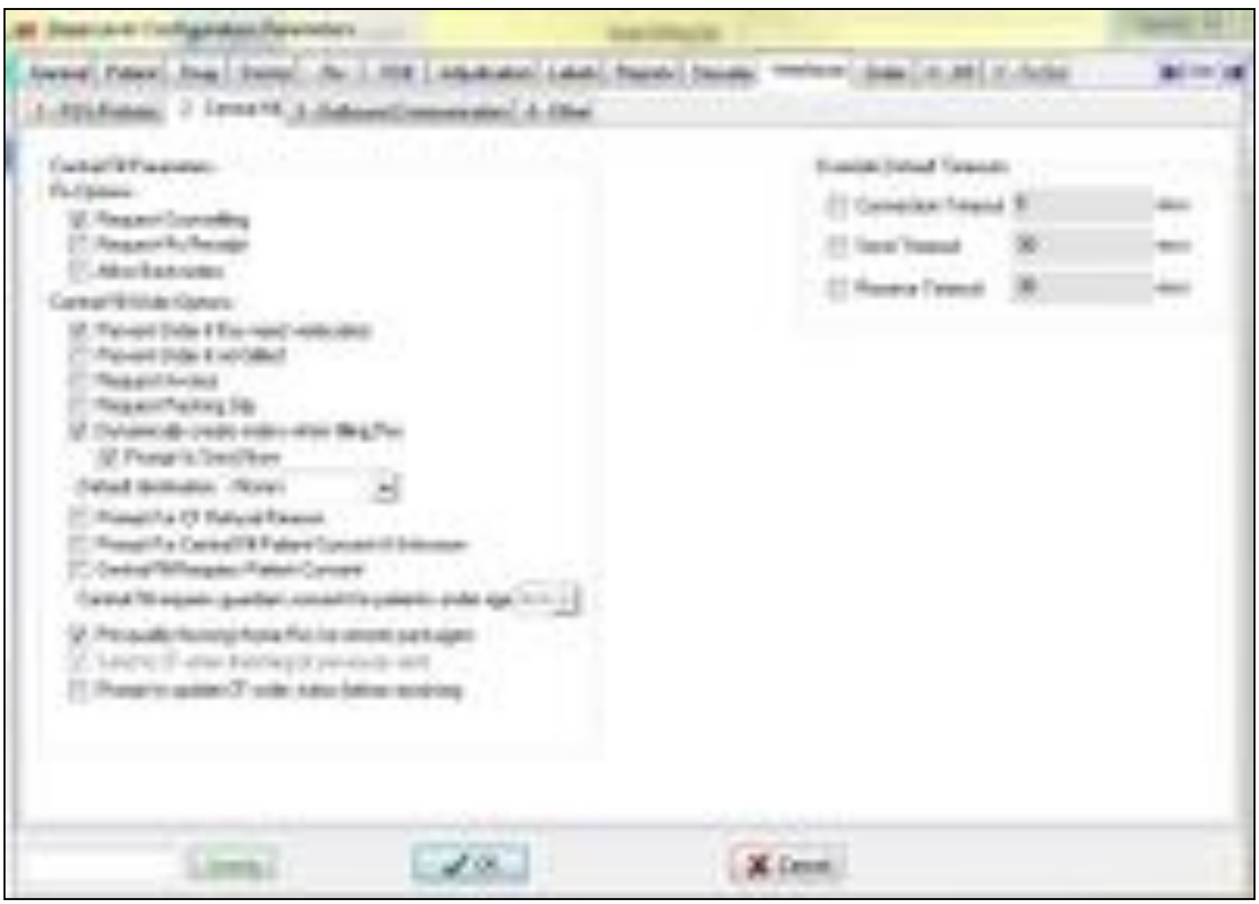


The **POS Interface** section allows users to select an **Interface Type** from a drop down menu. There are 11 different interfaces to choose from. There is also a **Transfer Type** drop down menu which allows users to choose in which method files will be transferred. There are 3 options which are FTP, SFTP, and Logical Drive.

Robotic Interface section allows users to select an **Interface Type** from a drop down menu. There are 14 different interfaces to choose from. There is also a **Transfer Type** drop down menu which allows users to choose in which method files will be transferred. There a few different options for Robotic Interfaces that are limited by which interface type the user have chosen. The types are FTP, DCOM, Winsock, and Logical drive. Users can also choose if they want the Robotic Interface to ignore filling NH or Unit Dose Rxs. Users can also have robotic interface data logged.

Central Fill

The **Central Fill** tab only appears if the Central Fill module had been enabled in the Kroll Configuration Parameters screen. Note that this is a billable module. The purpose of Central Fill is to allow users to process an Rx at one location and send it to Central Fill where it gets dispensed, packaged, and shipped back to the store, directly to the patient, or to a nursing home.



Request Counselling – Prompts for counselling on the client side.

Request Rx Receipt – Prompts for a receipt.

Allow Backorders – Allows Rxs to be filled even if there is insufficient drug quantity.

Prevent Order if Rxs need verification – Prevents users from completing orders for Rxs that require verification.

Prevent Order if not billed – Prevents users from completing orders if the order has not been billed/adjudicated.

Request Invoice – Prints an invoice showing a successful transfer.

Request Packing Slip – Requests the CF facility to include either an invoice and/or a packing slip with an order.

Dynamically create orders when filling Rxs – Automatically creates a CF order to be sent to the CF host when filling an Rx.

Prompt to Send Now – Prompts users to immediately send CF orders to the CF host.

Default destination – Allows users to choose which central fill site will be pre-selected as the destination for data transmission.

Prompt For CF Refusal Reason – Prompts users to enter a refusal reason when choosing to not send an Rx to the CF host.

Prompt For Central Fill Patient Consent if Unknown – Prompts for patient consent if the patient consent is unknown.

Central Fill Requires Patient Consent – A prompt will appear asking if the patient would like to participate in the central fill program

Central Fill requires guardian consent for patient under age [x] – Allows users to set the age at which patients will need a parent or guardians permission to participate in the CF program.

Pre-qualify Nursing Home Rxs for remote packagers – Makes all NH prescriptions eligible to be filled by a packager by default.

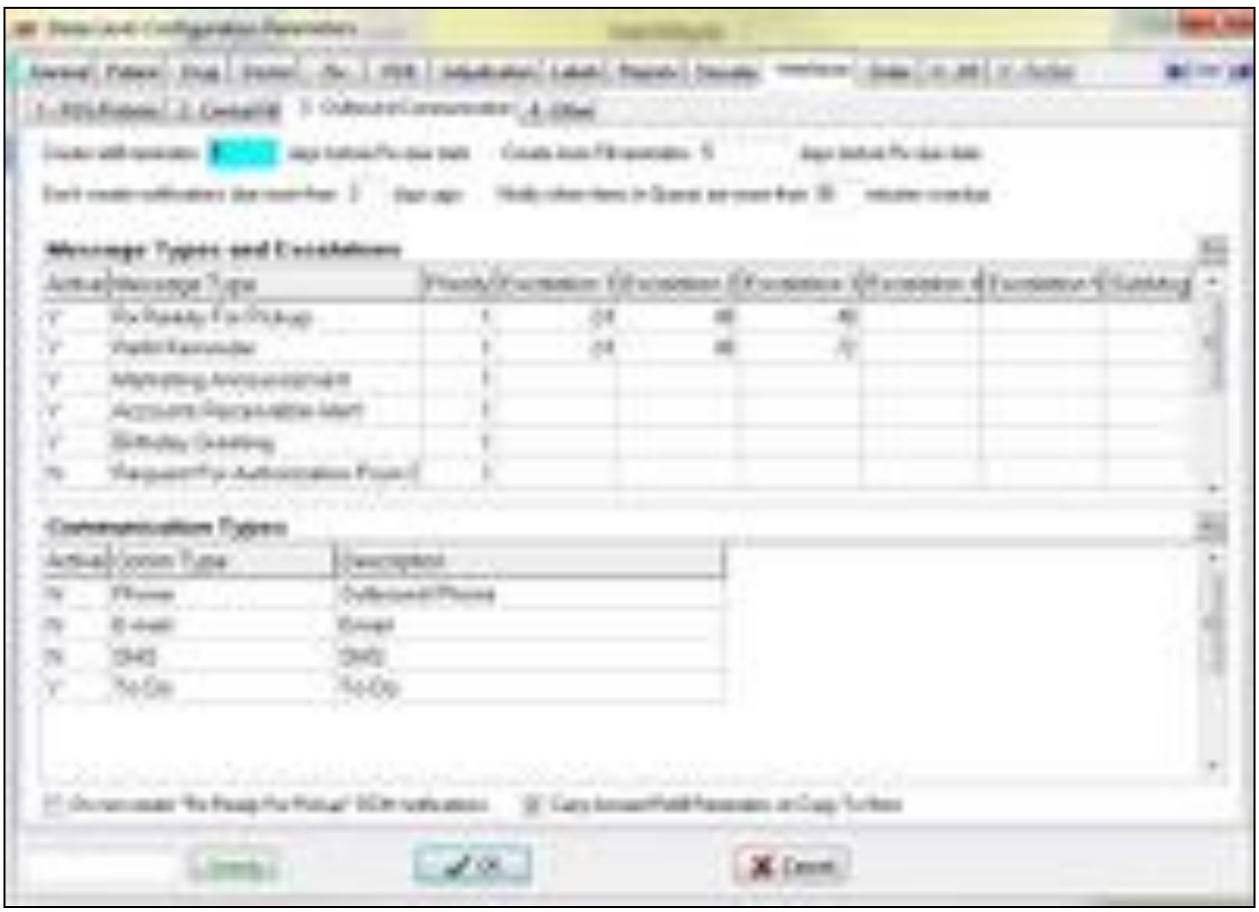
Send to CF when Batching (if previously sent) – The system will reference the last time the Rx was sent to CF and then send it again when performing a batch fill. The drug must be eligible for CF.

Prompt to update CF order status before receiving – When receiving a CF order, users will not be able to receive the order unless they have updated the order status to a filled state. When updating the order status it will send a request to the CF host to find out what the status of the order is.

Override Default Timeouts – Set the timeout parameters for Connection Timeouts, Send Timeouts, and Receive Timeouts.

Outbound Communications

The Outbound Communications interface works in conjunction with the IVR system (Voiceport and VoiceTech). In order for this to be activated, the pharmacy must be using the most recent version of the IVR system and the service will need to be installed. Currently, only the Rx Ready for Pickup and the Refill Reminder by phone services are used.



Other

The **Other** tab contains Enhanced PASI (Access Point) and External Interfaces settings. The External Interface settings contain several configurable third party interfaces, including MedECare, Catalyst, Clearscribe, ZoomMed, WebApi, and PointClickCare. Most of the interfaces in this tab are billable and are run through the Kroll Reporting Service Client.

Order

The following section describes the configuration settings available on the **Order** tab.

Perform Inventory Adjustment – Enables inventory tracking.

Enable Automatic Ordering – Allows users to use automatic ordering.

Default Ordering – Use the **Base ordering on** and **Base minimum scripts on** menus to specify the pharmacy's reordering parameters.

Allow "Base ordering On" override at drug pack level – Allows users to change ordering options on a drug card level.

Auto Increment PO Numbers – Automatically assigns PO numbers to drug orders.

Allow Non Po Receive – Allows users to receive all products into the system whether a PO was linked or not.

Base reorder on the inventory of the primary product –The primary product will be what is used to determine inventory level when there is an order grouping in place.

Use catalogue CaseQty for linkage – The Case Qty set on the Ordering tab on the F5 - Drug screen will be used.

Default supplier – Allows users to set the pharmacy's default supplier.

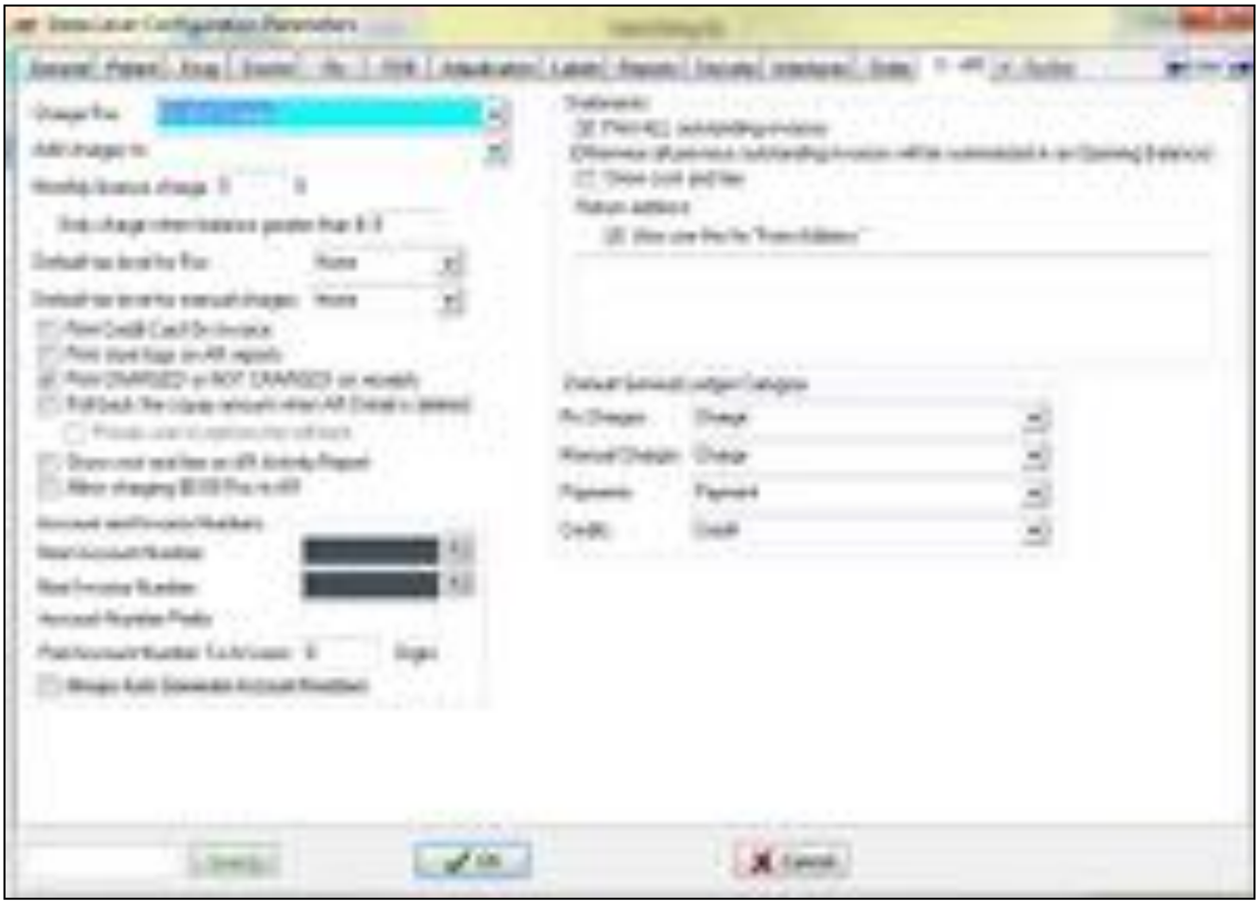
#of Days to Base Average Daily Usage and Average Script Quantity Calculations on (must be integer greater than zero) – default = 100 – The number of days the average usage will be calculated on.

Show warning if Unresolved Purchase Order Greater than 0 days (Zero = do not show warning) – If a numeric value is set higher than 0 the system will warn when if a purchase order has not been received within the days that are set.

AR

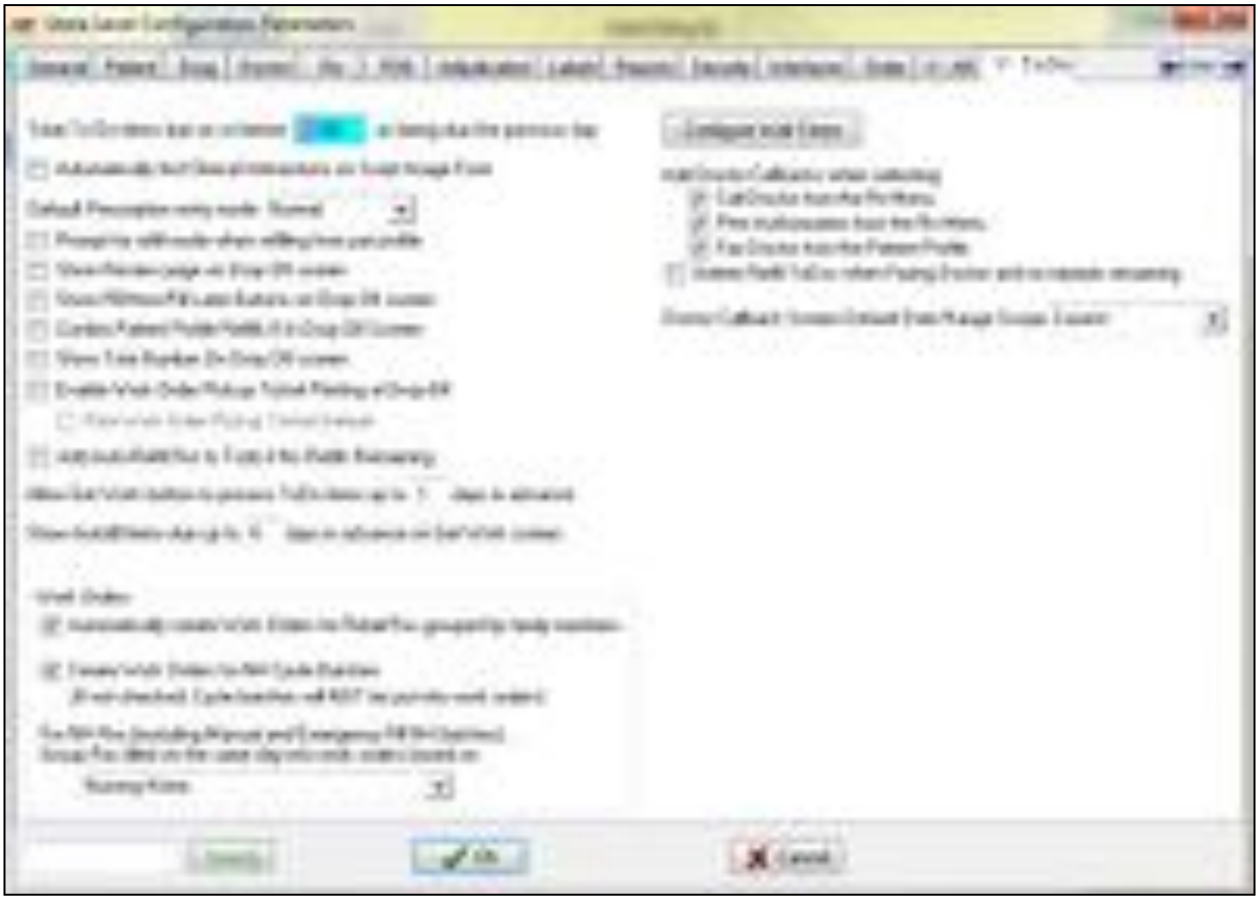
The AR module must be enabled in the Kroll Configuration Parameters screen. There is no charge for the AR module; however, pharmacy users should consult with a supervisor or manager before enabling it.

These options should only be set and changed with the customer on the phone to determine which option is best suited for their location.



To Do

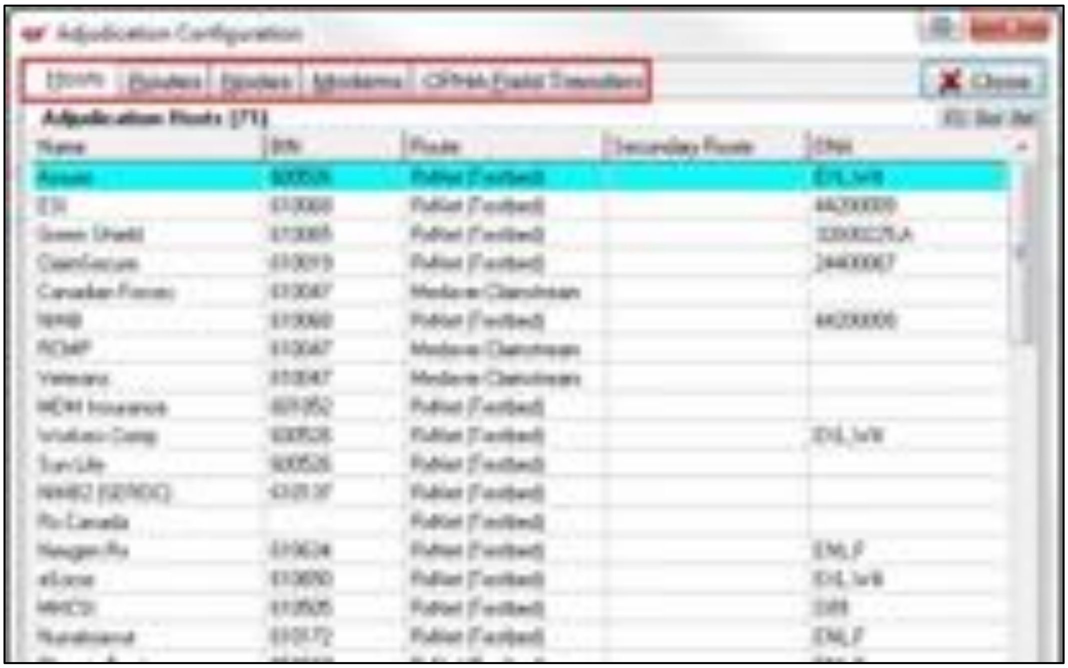
The **To Do** tab works in conjunction with the To Do tabs on the Alt-X screen. It is recommended that users contact Kroll support before making any To Do configuration changes.



Adjudication Configuration

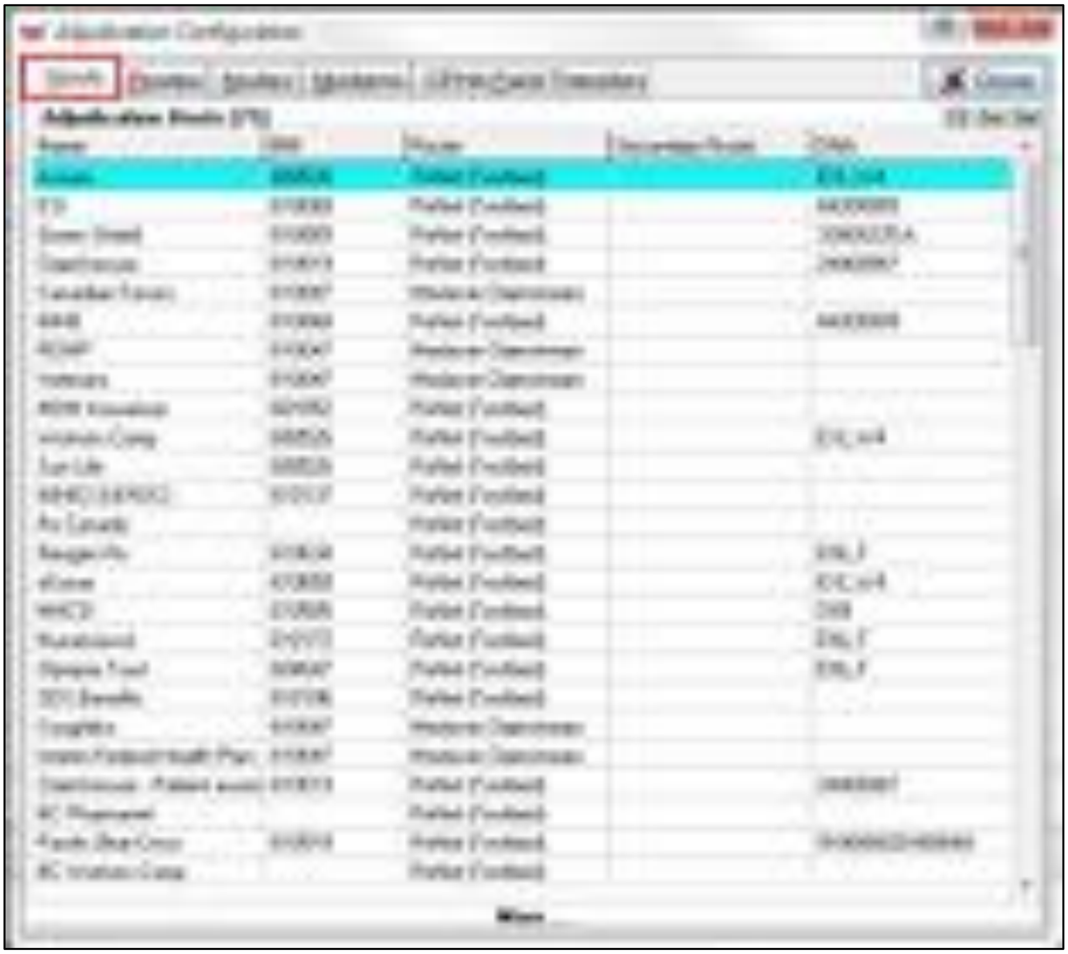
Adjudication settings in Kroll allow you to configure how data is transmitted to third party insurance providers

The **Adjudication Configuration** screen has five tabs across the top that allow you to configure different parts of the adjudication process.



Hosts Tab

The **Hosts** tab shows a list of providers and the routes used to communicate with them.



Click **Ins** or press the **Insert** key on your keyboard to add a new host. Existing hosts can be edited by double-clicking the record or selecting **F2**.

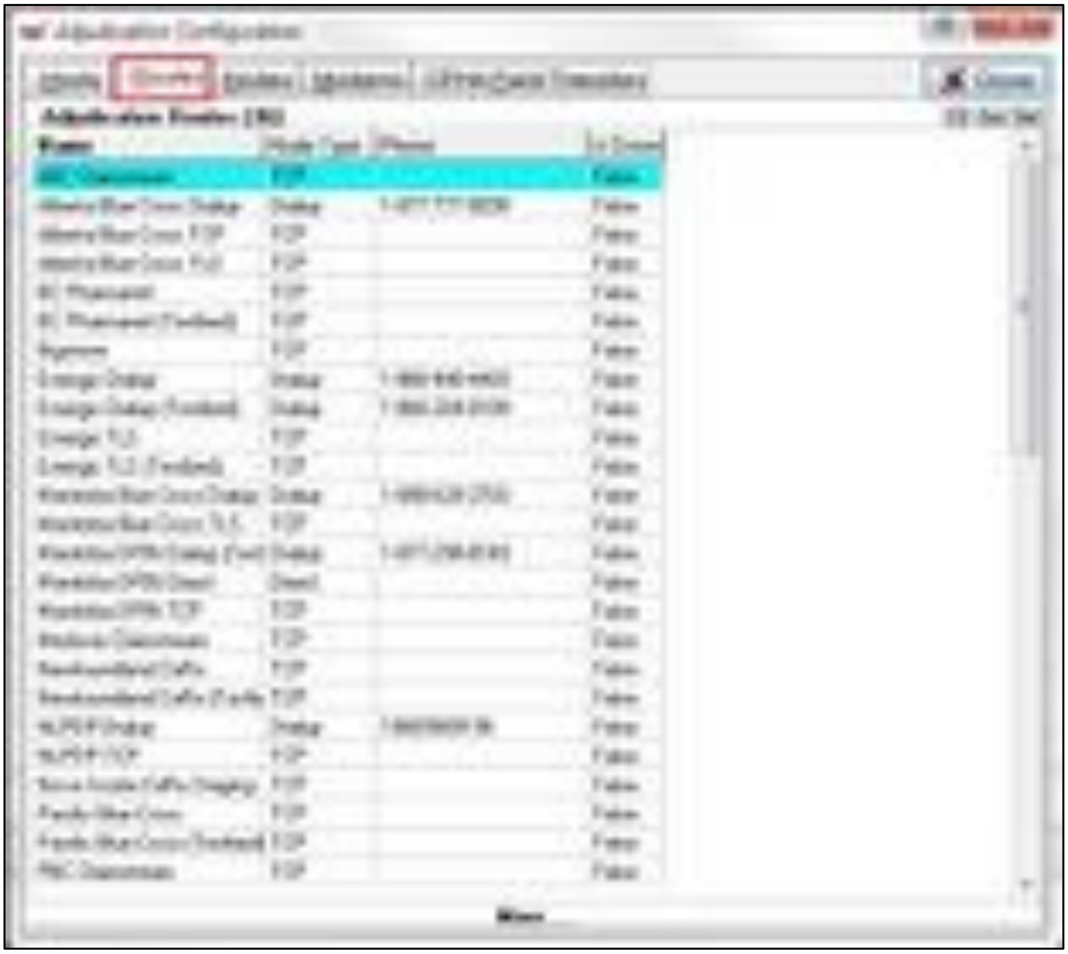
Both actions will call up the **Adjudication Host Edit Form** where you can enter/edit the adjudication host details.

- **Name** – Select a provider from the menu.
- **Route** – Select an adjudication route from the menu. Ensure you select the appropriate route for the provider.
- **Sec Route** – This is a secondary route that can be configured as the backup route of transmission. This is usually a dial-up connection.
- **BIN** – Identification number that corresponds with the selected adjudication host.
- **Transmit Timeout** – Enter the length of time in seconds that should pass before the adjudication service reports that the transmission has failed because it took too long.

Click **Save** to save your changes.

Routes Tab

The **Routes** tab shows the configured routes available to communicate with. It shows the name of the route, the type of connection it uses, and the phone number it uses to dial out if it is configured as a dial-up connection. The **Is Down** column indicates whether you should mark the route as 'down' after a failed adjudication attempt if the connection is not available.



Click **Ins** or press the **Insert** key on your keyboard to add a new route. Existing routes can be edited by double-clicking the record or selecting **F2**.

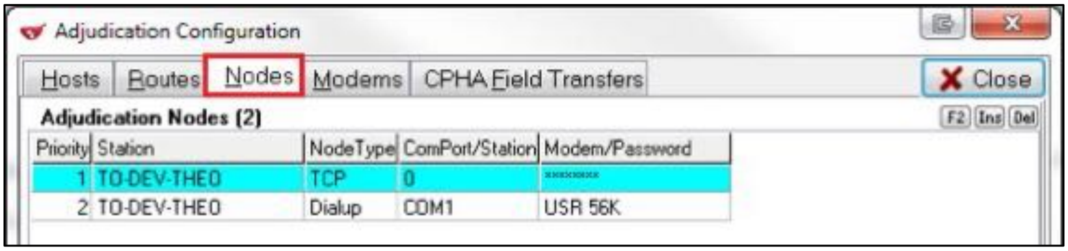
Both actions will call up the **Adjudication Route Edit Form** where you can enter/edit the adjudication route details.

- **Name** – Enter a name for the adjudication route.
- **Node Type** – Select a node type from the menu. Options include TCP, Direct, SPDP, POS Service, and Dial-up. The selected node type may change the data fields in the configuration form.
- **Route Type** – Select a route type from the menu. Options include Production, Testing, Development, Training, and Certification.
- **Protocol** – Select a protocol type from the menu. The selected protocol may change the fields in the configuration form according to what is required for the protocols connection.

Click **Save** to save your changes.

Nodes Tab

The **Nodes** tab shows where each connection type will be routed for communication with third party providers. There are usually only two nodes present, though more can be added. Nodes are usually set to the system the adjudication service is hosted on.



Click **Ins** or press the **Insert** key on your keyboard to add a new route. Existing routes can be edited by double-clicking the record or selecting **F2**.

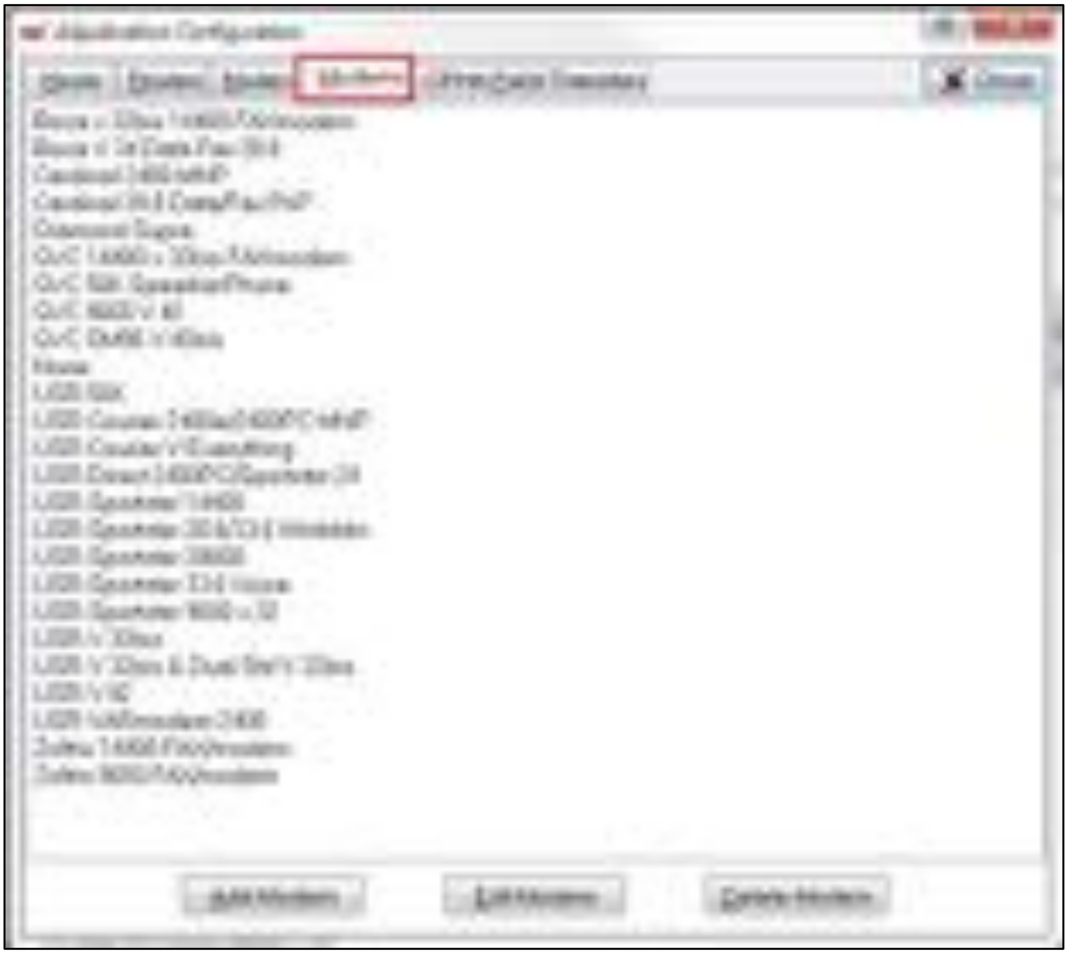
Both actions will call up the **Node Edit Form** where you can enter/edit the node details.

- **Station** – Enter the name of your station.
- **Node Type** – Select a node type from the menu. Options include TCP, Dial-up, Direct, and SPDP. The selected node type may change the data fields in the configuration form.
- **Priority** – Select the order in which the node will be used.

Click **Save** to save your changes.

Modems Tab

The **Modems** tab shows a list of all pre-configured modems. Depending on the firmware used by the modem and a number of other factors, some configuration changes may be required.



Click **Add Modem** to add a new modem, **Edit Modem** to edit an existing modem, and **Delete Modem** to remove a modem from the list.

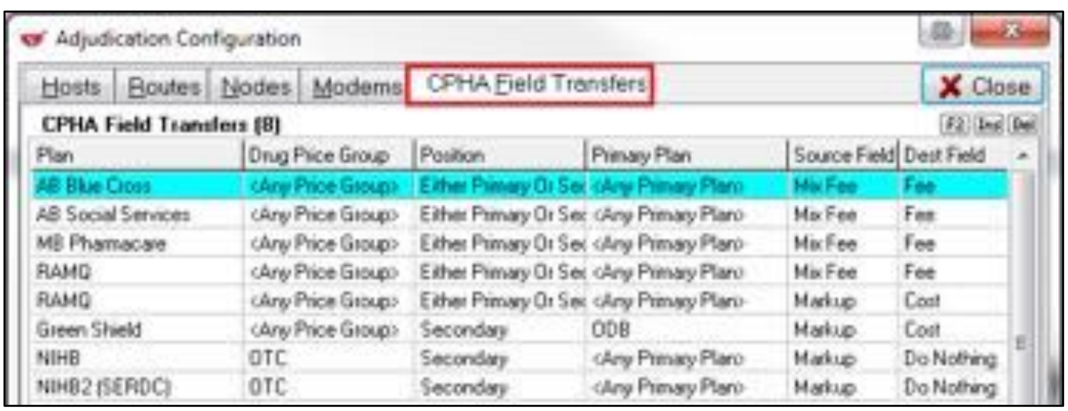
Selecting **Add Modem** or **Edit Modem** will call up the **Modem Edit Form** where you can enter/edit the modem details.

- **Name** – Enter the modem name.
- **Config cmd** – Each modem has a unique configuration string. It is important that you enter the correct initialization string, as this determines if the configured modem will function. Websites such as Modem Help or Jay's Page of of Modem Inits can assist in finding an initialization string if the string for the modem is unknown.
- **Hangup Cmd** – This command is used to end the connection on the phone line, thus terminating data transmission. This field is usually set to 'DTR'.

Click **OK** to save your changes.

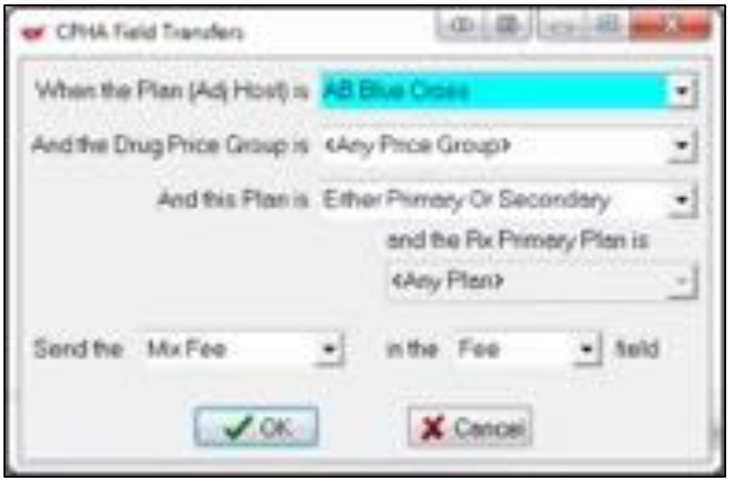
CPHA Field Transfers Tab

The **CPHA Field Transfers** tab determines what type of information is sent and in what field when an Rx is sent for adjudication.



Click **Ins** or press the **Insert** key on your keyboard to add a new field transfer. Existing field transfers can be edited by double-clicking the record or selecting **F2**.

Both actions will call up the **CPHA Field Transfers** form where you can enter/edit the field transfer details.



- **When the Plan (Adj Host) is** – Select the adjudication host the field transfer will be applied to.
- **And the Drug Price Group is** – Select the drug price group that must be used in order for the field transfer to be applied. If you select <Any Price Group>, the field transfer will be applied regardless of the selected price group.
- **And this Plan is** – Indicate whether the drug plan must be the primary or secondary plan in order for the field transfer to be applied.
- **and the Rx Primary Plan is** – Indicate what Rx primary plan must be used in order for the field transfer to be applied. This option is only available when the 'And this Plan' is field is set to Secondary.
- **Send the ____ in the ____ field** – Use these fields to indicate what piece of information should appear in what field. Options in the 'Send the' menu include Cost, Markup, Fee, and Mix Fee; options in the other menu include Do Nothing, Cost, Markup, Fee, and Mix Fee.

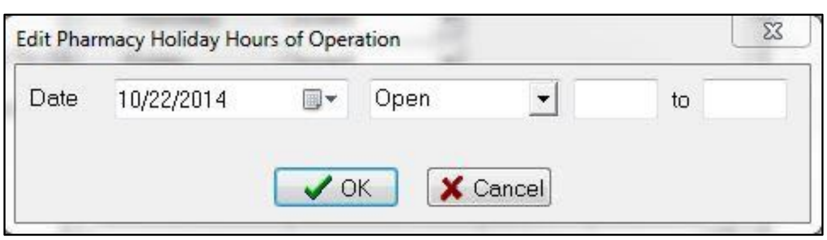
Click **OK** to save your changes.

Hours of Operation

Hours of operation can be configured by accessing **File** > **Configuration** > **Hours of Operation**. The **Pharmacy Hours of Operation** screen will appear.

Use the dropdown menus next to each day to indicate whether the store is **Open** or **Closed**.

Click **Ins** from the **Holiday Hours** section to set holiday hours. The **Edit Pharmacy Holiday Hours of Operation** form will appear where you can select a date, and open or closed status, and hours of operation for that day.



Permissions

The Permissions settings in Kroll can be configured to allow or prevent access to certain areas within the software to specific user groups. Each user group can be assigned a unique set of permissions. Ensure you have set up one or more user groups before proceeding.

Assigning Permissions

1. From the **Alt-X Start** screen, go to **File** > **Configuration** > **Permissions** and select the user group you want to set permissions for.

2. Enter your login credentials and click **OK**.

3. Place a checkmark next to the actions you want to give the selected user group permission to perform. Click **OK**.

Group Permissions Descriptions

View Clinical Info – Controls whether you have access to view any patient related drug information. When unchecked, you will not have access to view patient allergies and conditions, patient profile, or F12 screen. You can access individual drugs and doctors, but not as it pertains to a specific patient.

Allow Viewing Rx Screen – Allows you to access the F12 screen.

View Patient – Allows you to search for and access patient profiles. If unchecked, you will be able to refill prescriptions but you will not be able to fill new prescriptions.

Allow Patient Changes – Allows you to make changes to patient profiles.

View Doctor – Allows you to search for and access doctor profiles. If unchecked, you will be able to refill prescriptions but you will not be able to fill new prescriptions.

Allow Doctor Changes – Allows you to make changes to doctor profiles.

View Drug/Mixture – Allows you to search for and access drug/mixture profiles. If unchecked, you will be able to refill prescriptions but you will not be able to fill new prescriptions.

Allow Drug/Mixture Changes – Allows you to make changes to drug/mixture profiles.

Allow Drug Bases Changes – Allows you to make drug base changes. If unchecked, you will only be able to change variable drug information like pricing and on-hand quantities.

Allow Adding New Drugs/Packs – Allows you to add and copy new drugs into the database. If unchecked, you will only have permission to add new pack sizes to existing drugs.

Allow Drug Price Changes – Allows you to make drug price changes.

Allow Drug Inventory Changes – Allows you to make changes to the on-hand and min/max/days fields. You will also be able to enable the **No Inventory Adjustment** and **Disable Automatic Ordering** flags on the F5 screen.

Allow Custom FDB Changes – Allows you to make customized FDB changes to counseling messages, Kroll Care, and auxiliary labels.

Allow Creation of Purchase Orders – Allows you to generate and send purchase orders.

Apply Drug Inventory Counts – Allows you to generate cycle counts.

View Financial Reports – Allows you to view the following financially sensitive reports:

Patient Reports

- Medical Expense
- Patient Drug Summary
- Patient Mailing List

Rx Reports

- Network Totals Adjudication Totals Claims Invoice
- Compound Prescription Audit Report Coughlin Import
- Daily/Monthly Totals
- NIHB Claims Invoice
- Plan Billing Summary Plan Breakdown Plan Discount Report Plan Summary
- Prescription Sales Analysis
- Price Strategy Summary Profit/Loss
- Rx Breakdown
- Rx for Drug/Doctor Groups Rx Summary
- Rx Totals Report
- Special Services Fee Report
- Time Distribution Report

Drug Reports

- Drug Inventory Listing Report
- Drug Listing Report

- Drug Price Change Report
- Drug Usage Report
- Generic Sales Analysis Report
- Inventory Report

Nursing Home Reports

- Nursing Home Drug Usage Report
- Nursing Home Drug Utilization Report

Administration Reports

- AR Adjustments Audit Report
- Pre-Authorized Charges Report
- Submitted/Received Difference

Other Reports

- Mailing List Report
- Network vs. Adjudication Totals Pre-Authorized Charges Report Price Tree Report
- Weekly Comparison Report Workflow Data Report

Old Reports

- Old Daily Totals
- Old Monthly Totals

View Non-Financial Reports – Allows you to view the following non-financial reports:

Patient Reports

- Active Drug Listing Report Compliance Label
- Drug Interaction Analysis Report Eligibility/Physician List
- Limited Use and Section 8 Expiry Report Limited Use Request
- MAR Pak Report Medical Expense Invoice Medical History Medication Sheet
- Patient (Comments Report)
- Patient Encounters Report
- Patient Limited Use Report Patient Listing Report Patient Medical Conditions Patient Medication Chart Patient Profile Report Persa-Kit
- Plain Paper MAR
- Plain Paper TMR
- Section 8 Request
- Shipping Report Tax Receipt

Rx Reports

- Daily/Weekly Workload Report
- DUR Letter Report

- DUR Repot
- Future Usage Report
- Hardcopy Report
- Narcotic Control Record
- Narcotic Rx Request Report
- Refills Due
- Rx (Comments Report)
- Rx Stop/Expiry
- Rx Transfers Report
- Therapeutic Class Report

Drug Reports

- Drug (Comments Report)
- Drug Inventory History Report
- Drug Utilization Audit Report
- Narcotic Report

Doctor Reports

- Doctor (Comments Report)
- Doctor Prescribed Med Report
- Doctor Rx Filled Report
- Patient/Primary Prescriber Ratio List

Nursing Home Reports

- Active Drug Listing Report
- Nursing Home (Comments Report)
- Nursing Home Passtimes Report
- Nursing Home Patient Listing Report
- Nursing Home Patient Statistics
- Standing Orders Recall Report

Administration Reports

- User Information Report

Other Reports

- AR (Comments Report)
- Comments Report
- Delivery Order Summary Report

- ToDo Report

Old Reports

- Old Dispill (Style 1) Report
- Old Dispill (Style 2) Report

Allow Running Reports for All Patients – Allows you to run patient reports.

View AR Information – Allows you to access the Patient AR Profile screen.

Add AR Charges – Allows you to charge items to patients' Accounts Receivable accounts.

Edit/Delete AR Charges – Allows you to edit and delete charge items in patients' Accounts Receivable accounts.

Add AR Payments – Allows you to add payment items to the Payments tab on the patient's Accounts Receivable profile.

Edit/Delete AR Payments – Allows you to edit and delete payment items from the Payments tab on the patient's Accounts Receivable profile.

Run AR Reports – Allows you to access the AR Adjustment Audit Report and the AR Taxes Breakdown Report.

View Credit Card Numbers – Allows you to view, add, delete, and edit patient credit card entries.

Allow Credit Card Password Management – Allows you to access the credit card password manager, located in the Utilities menu.

Allow Merges – Allows you to merge duplicate patient, drug, and doctor records.

Allow Viewing History Records – Allows you to view history records from the Patient, Drug, and Doctor screens.

Allow Use of Drug Update Utility – Allows you to update drug configuration and drug fields for multiple drug records at the same time.

Allow Manual Communication Queue Changes – Allows you to manually change the communication queue. Only applicable to pharmacies with the Kroll Outbound Call Module (OCM).

View Deleted Faxes/Network Scans – Allows you to view deleted inbound/outbound faxes and network scans.

Maintenance Permissions

Change Plans – Allows you to access the Plans tab in the Plans/Pricing screen.

Change Pricing – Allows you to access the Strategies, Strategy Exceptions, Drug Price Groups, Patient Price Groups, and Copay tabs on the Plans/Pricing screen.

Change Master Lists – Allows you to access the menus in the Master Lists screen.

Change Users – Allows you to access the Users and Groups screen.

Change Sig Codes – Allows you to add, edit, and delete Sig codes from the Edit Sig Codes screen.

Change Vendor List – Allows you to add, edit, and delete vendors in the Edit Vendor List screen.

Change Nursing Homes – Allows you to add, edit, and delete nursing home information in the Edit Nursing Home List screen.

Change Adjudication Config – Allows you to make changes to adjudication configuration.

Change Head Office Config – Allows you to access the Head Office Configuration Parameters screen.

Change Store Config – Allows you to access the Store-Level Configuration Parameters screen.

Change Services Config – Allows you to access the Services Configuration screen.

Change Workflow Config – Allows you to access the Workflow Configuration screen.

Change Workstation Config – Allows you to access the Workstation Configuration screen.

Change Central Fill Config – Allows you to access the Central Fill Configuration screen. This option is only available to pharmacies that use the Central Fill module.

Change Province – Allows you to change the system’s default province.

Change User Permissions – Allows you to access the Edit Permissions screens.

Change Mail Distribution Lists – Allows you to edit mail distribution lists.

Manager – Signifies that the user is in the Manager group.

Printers

Printers can be configured by accessing **File** > **Configuration** > **Printers**. The **Printer Configuration** screen will appear, displaying all detected/installed printers.

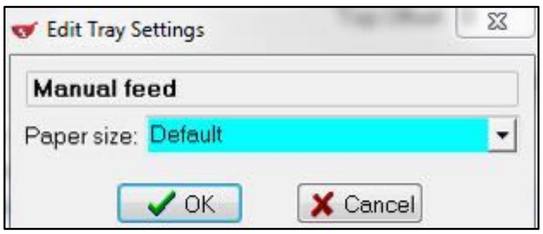
To edit a printer entry, double-click the printer name or highlight the printer name and click **Edit**. The **Edit Printer Settings** screen will appear.

- **Emulation**: Select from Laser, Thermal, Epson, Okidata, or Toshiba. Ensure you select the appropriate emulation for the printer you are setting up (e.g., do not configure thermal emulation for a laser printer).

- **Bar Code**: Enter a barcode number that will be used to select a printer when filling an Rx. This will allow you to print vial labels using a scanner.

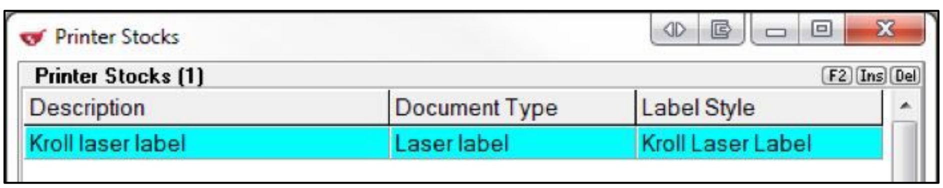
- **Label Offsets**: Use the label offsets controls to adjust label alignment.

- **Tray options**: The displayed printer trays depend on your printer hardware. Double-click an entry or highlight an entry and click **Edit** to edit a tray. The **Edit Tray Settings** form will appear. Select a paper size for the tray and click **OK**.

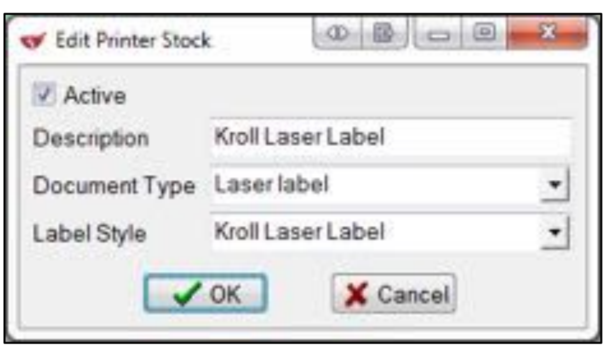


Printer Stocks

Printer stocks can be configured by accessing **File** > **Configuration** > **Printer Stocks**. The **Edit Printer Stocks** screen will appear.



Click **Ins** to add a new printer stock or **F2** to edit an existing printer stock. The **Edit Printer Stock** form will appear.



- **Description**: Enter a descriptive name for the printer stock.

- **Document Type**: Select a document type. Options include Laser label, Dot matrix label, Thermal label, and Report. Once you select a document type, the Label Style menu will appear.
- **Label Style**: The available label styles depend on your selected document type.

Click **OK** when you are finished.

Services Configuration

Services configuration can be set by accessing **File** > **Configuration** > **Services Configuration**. The **Services Configuration** screen will appear.

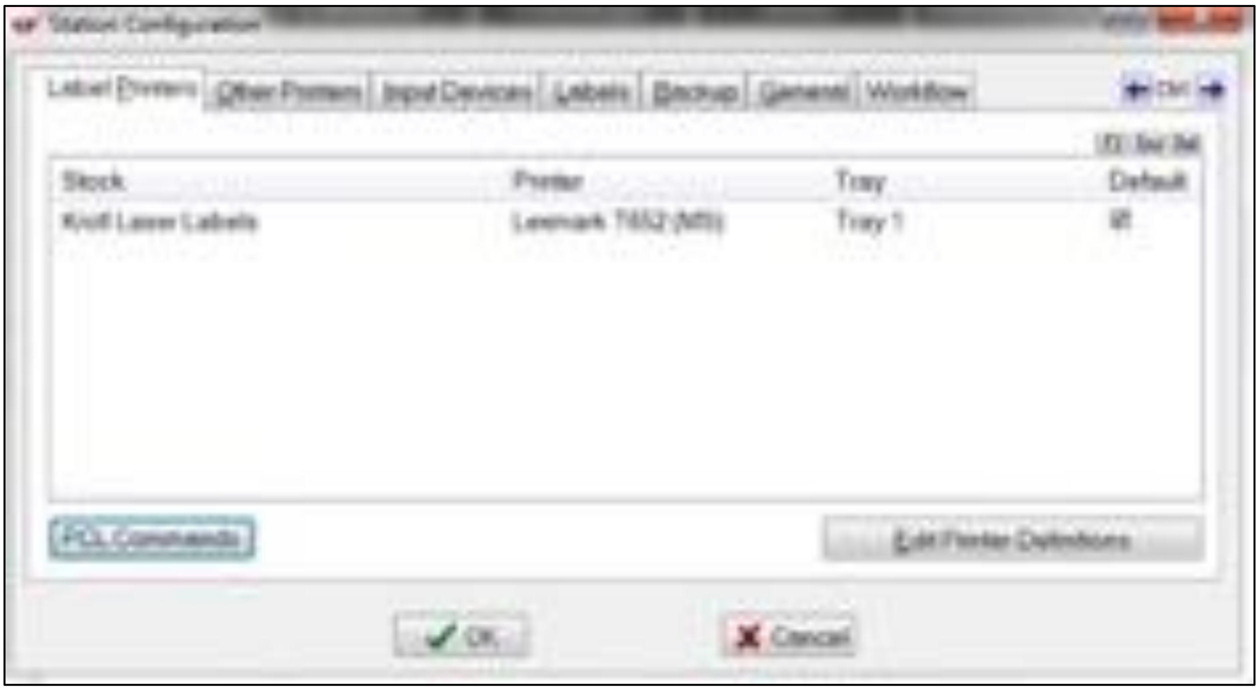
Specify where each service is located by entering the name of the host computer in the **Host** field located below each service type. Ports can be changed for each service if the service has been set up to operate on a port that is different from the default ports.

Workstation Configuration Parameters

This section describes the various configuration settings that are available in **File** > **Configuration** > **Work Station** > **This Workstation**.

Label Printers

This section describes the configuration settings available on the **Label Printers** tab.



F2 – Allows you to modify the settings of each configured printer.

Ins – Allows you to add a new printer and configure stocks and trays.

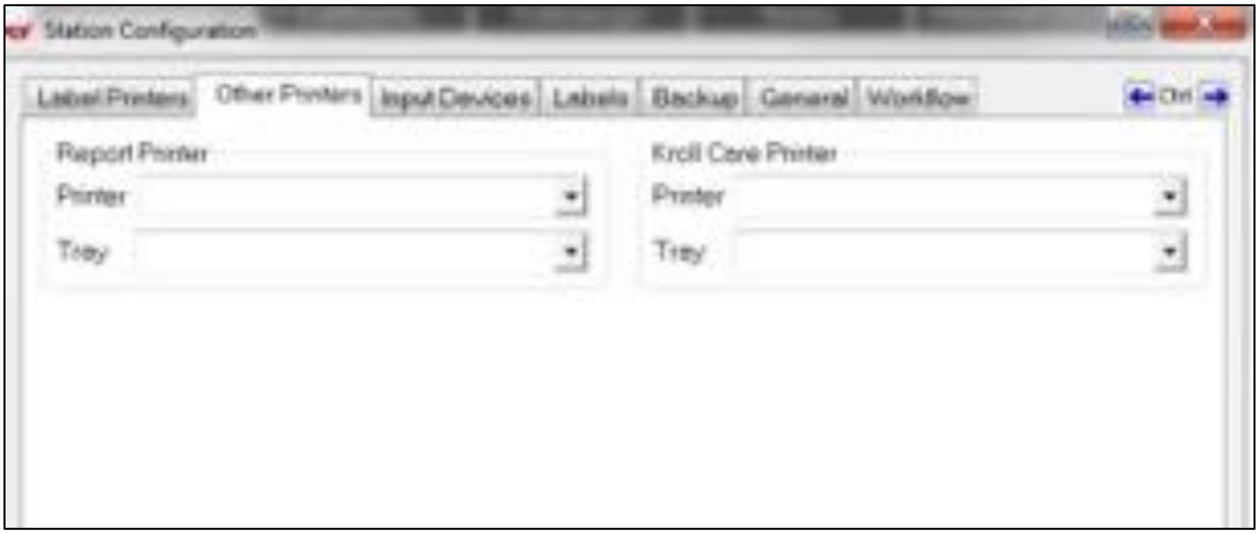
Del – Allows you to delete the configured printers.

PCL Commands – Allow you to set tray options that are sent as RAW PCL commands to the printer.

Edit Printer Definitions – Allows you to manage the following printer types: IE, Laser, Thermal, and Oki Data. Also allows you to configure custom barcodes that allow scanning from handheld devices to initiate automatic printing. You can also modify the offsets to move labels left/right and up/down.

Other Printers

This section describes the configuration settings available on the **Other Printers** tab.



Report Printer – Allows you to configure the printer that will be used for printing reports. Select a **Printer** and **Tray** from the menus.

Kroll Care Printer – Allows you to configure the printer that will be used for printing Kroll Care leaflets.

Input Devices

This section describes the configuration settings available on the **Input Devices** tab.

Scanner – Allows you to configure a scanner for importing documents and images.

Resolution – Allows you to configure the dots per inch for higher and lower resolution scans. The default is 100DPI.

Mode – Allows you to specify whether documents and images are scanned in grey scale, black and white, or colour. Set to grey scale by default.

JPEG Quality – Allows you to compress the image without compromising the quality of the image. Maximum is 50%. Set to 40% by default.

Iterative Crop – Allows for expansive cropping options for more precise image cropping.The cycle is repeated several times until the image border is no longer visible or minimally visible.

Brightness – Allows you to modify the lighting on the scanned image.

Contrast – Allows you to adjust the sharpness of colours of the scanned image.

Saturation – Allows you to adjust the intensity of the scanned images colour.

This Scanner auto-crops the image – Auto-crops scanned images once they are imported into the system.

Camera – Allows you to configure a camera device.

Resolution DPI – Allows you to configure the dots per inch from a picture taken from the camera. Default is 300DPI.

JPEG Quality – Allows you to compress images without compromising the image quality. Set to 80% by default.

Signature Tablet – If you have signature tables configured in the Kroll Device Helper, a list of configured signature tablets will appear in the menu. Select a configured signature tablet and click **Identify**. This will ensure you are prompted to sign the electronic signature when patient or pharmacist signatures are required.

Labels

This section describes the configuration settings available on the **Labels** tab.

The **Labels** tab allows you to configure a custom label header, which overwrites what is configured in **File** > **Configuration** > **Store**. Use the controls to specify the **Font**, **Font Size**, and make the text bold (**B**), italic (*I*), or underlined (U).

Print Test Page – Prints a test page so you can preview the custom label header.

Backup

This section describes the configuration settings available on the **Backup** tab.

Warn if backup file is older than 2 days – Displays a warning when you logs into Kroll for the first time to inform you that the configured backup is older than two days.

Backup Location – Allows you to configure the file to be backed up each day.

General

This section describes the configuration settings available on the **General** tab.

Blank screen after [x] minutes – Allows you to specify how many minutes should pass before the touch pickup station is locked.

Use on-screen keyboard in touch mode – Allows you to use the on-screen keyboard to input entries. This setting is enabled by default.

Launch Kroll Device Helper on Startup – Automatically launches the Kroll Device Helper when Kroll is launched.

Auto-detect Devices – Automatically detects barcodes on scanners and signature pads.

Client Type – Allows you to configure the current environment. If the user environment is using the device locally then Windows Thick client should be enabled. If you are using an RDP with a Simply Core USB Redirector to redirect the USB device to the RDP environment, then Thin Client (Simply Core USB Redirector) should be used. If you is using RDP with Fabulatech USB Redirector to redirect the USB device to the RDP environment, then Thin Client (Fabulatech USB Redirector) should be used. If you are using RDP with Wyse TCX to redirect the USB device to the RDP environment, then Thin Client (Wyse TCX) Redirector should be used.

Workflow

This section describes the configuration settings available on the **Workflow** tab.

Workflow Queues to Enable on Startup – Displays a list of workflow queues that you can assign to the Dashboard of a particular station. The station is only allowed to action upon queues that have been enabled.

Who to Call Phone List

If you encounter problems using Kroll, refer to the phone list below. Kroll offers specialized support depending on the equipment involved.

Equipment	Supported by	Contact
Workstations 	Kroll	866-285-4457
Printers 	Kroll	866-285-4457
Fax Machines 	Kroll	866-285-4457
IVR Servers 	Kroll	866-285-4457

Kroll Helpdesk Information

Head Office – Toronto

220 Duncan Mills Road Suite 201
Toronto, Ontario
M3B 3J5
Tel: 416-383-1010
Toll Free: 1-800-263-5876
Fax: 416-383-0001
support@kroll.ca

Western Canada – Edmonton

#313, 9622 – 42nd Avenue NW
Edmonton, Alberta
T6E 5Y4

Eastern Canada – Dartmouth

33 Ochterloney Street, Suite 260
Dartmouth, Nova Scotia
B2Y 4P5