



Medication Effectiveness Update

This update will allow you to choose any medication to be triggered for an effectiveness alert. These medications can be PRN's or scheduled medications.

To set up this feature, click on Community>Community Record

BlueStep GROVE OF FARMINGTON							Alerts	$^{\odot}$ The Grove of Farmington $ullet$
CareDash	HR	Providers/Vendors	Marketing	Resident	Charting	Community	Reports	
The Grove of Farmington User Dashboard					Community Community All Commun Scheduling C Shared Files	Record Ities Calendar		

Then navigate to Setup >Medication>Setup: Medication System.

The Grove of Farmington						
Setup: Community Information	Setup - Reports -		Community -		Family Connect 🗸	
	Community Rooms/Beds Record Reviews		•			
Record Summar			•	>		
Use this page to get a quick snaps	Maintenance		•	nformation on this page, use the links		
Setup: Community Inf	Care		ŀ			
Administrator	Billing		•	aan Larko		
Phone	Medication Notifications			Setup: N	Aedication System	
Address			•	Setup: N	led Groups	
Consulting Decremonic	t Casility	Depart		Setup: N	MAR Exceptions	





MEDICATION - PRESCRIBED FORM	Scroll down to the Medication – Prescribed Form				
Med Count	section and choose the Medication Effectiveness option "All Medications" or "PRN's Only".				
Medication Look-up Properties 🛛 🕐 🖃	Generic Route of Admin Dose Form Strength Route of Admin (abbr.) Dose Form (abbr.)				
Medication Interaction System [no	data]				
Diagnoses 🖉	Make diagnoses required				
Medication Effectiveness *	All Medications				

Select a resident and enter a new medication.

Note: If you would like to add an effectiveness alert to an existing medication you will need to DC the medication and then use the copy forward option on that DC'd med.

Medications @)							
* Required								
MEDICATION INFOR	RMATION							
Medication	* Lortab Oral Elixi	Lortab Oral Elixir 10-300 MG/15ML						
Drug Dosage Form 🛛 🕐	* Tablet	•						
Medication Classification	* • C2	C3 or C4	Standard					
Drug Categories	Analgesics	Antipsychotic	Mood	Stabilizer				
	Antibiotics	Cardiac	Pain	annic Preparations				
	Anticoagulant	Diabetic	Psycho	otropic				
	Anticonvulsants	Diuretic	Sedati	ve				
	Antidepressant	Hypnotic	Stimul	ant				
	Antidiuretic	Laxative	Supple	ment				
Strength ?	10-300 MG/15	ИГ						
Diagnosis	No options availabl	e. There are no entries which me	et the criteria specified.					
Add New Diagnosis	Add New Diagn	osis						
Route of Administration	* 01 Oral (PO)	•						
Vital Signs Required vital signs must be taken with this medication								
Vitals Required	* Blood Pressure	Glucose/Blood Sugar	r Weight					
	Heart Rate	Respiratory Rate	O2 Sats					
	Temperature							



Written Order	Yes						
Pharmacy Dispensing							
Assistance needed	Assistance needed * Self-Administer						
	Self-Directed	Family/Designated Person	Refill reminder				
Physician's Instructions	* Take one tab daily at 12:00 noo	n.					
MAR SCHEDULIN	G	12					
Quantity/Unit	* 1.0 Tablet	*					
Dosage	* 325mg						
Scheduling Options	* Daily or PRN	Every (Interval) days	O Specific days of the week	Specific days of the month			
Start Date	* 10/12/2018	Amodi	cation offective	noss con ho trig	gorod		
Number of Days -		for a sc	beduled medica	ition or a PRN	gereu		
OR- End Date		101 a sc	inequied medica				
Scheduled Time(s)	* AM 4:00a	m 8:30am	12:00nm 3:0	00nm 6:20nm	9:30nm		
	PM 5:00a	m 9:00am	12:30pm 3:3	30pm 7:00pm	10:00pm		
	□ Bedtime □ 6:00a	m 9:30am	□ 1:00pm □ 4:0	00pm 7:30pm	□ 10:30pm		
	□ 12:00am □ 7:00a	m 10:00am	□ 1:30pm □ 4:3	30pm 8:00pm	11:00pm		
	🗆 1:00am 🔲 7:30a	m 🗆 10:30am	2:00pm 5:0	00pm 8:30pm	11:30pm		
	2:00am 8:00a	m 11:00am	2:30pm 5:3	30pm 9:00pm	PRN		
	3:00am	11:30am	6:0	00pm			
MAR Instructions	MAR Instructions * Administer at 12:30pm. Follow up after 30						
	minutes.	10					
	Done Void						
Docage Date(c)	Schedule Instruct	ions		Created	Edit Void		
325mg 10/12/20	18 12:00pm Admin	ister at 12:30pm. Follow up aft	er 30 minutes.	Now			
			To activate the	effectiveness.	alert click		
Additional Liming			the button "Re	ecord effectiver	less after		
Record Enectiveness	 Recorded effectiveness after adr 	ninistering this Medication	administering	this Medicatio	n"		
Effectiveness Follow-up * 30 minutes *							
Med Group		East Hall	Define the tim	e you want this	s alert to		
	be triggered after the med is						
AUTHORIZATIONS administered.							
Prescribed By No options available. There are no entries which meet the criteria specified.							
Add New Prescriber Add New Prescriber							
Data entered by * I certify this information complete and correct							
Nursing/Administrator Review							
RX Number							
OMP Inbound Messages Relationship [no data]							
Required		Save Cancel					





