

# Adding a New Medication (Multi-Timings)

Select the "Select/View Resident" link.

**Resident**

Add New Resident | **Select/View Resident** | Pending Residents | Resident Monitor | Resident Reports | ADL Charting | ADL Charting (Custom)

## Step 1. Select a resident to add a new medication

View By Photos

### All Residents

Search By: Last Name | Starts With | Search

Search within current results

Select	Preferred Full Name	Move-In/Admit Date	Birth Date	Room/Bed #	Pharmacy Patient Id
Select	Ayer, Arm	07/09/2013 12:00AM	05/13/1925		
Select	Bench, Jonny	10/29/2015 9:54AM			
Select	Carter, Samantha	05/01/2015 12:00PM	09/04/1978	Demo Unit→110	123445554
Select	Compiler 2, Test	04/03/2015 9:14AM	04/03/1810	Demo Unit→109	123456
Select	count, medication	12/02/2015 10:00AM	08/13/1940	Demo Unit→105	
Select	Count, Test	10/20/2015 10:34AM			
Select	Flintstone, Fred	12/04/2015 11:36AM	12/03/1932	Demo Unit→104	
Select	Harriman (Resident), Walter	10/05/2012 12:00PM	08/21/1969		
Select	Jackson , Danielle	04/18/2013 2:02PM	08/02/1942		1596635

## Step 2. Go to the left hand navigation and select the link "Medication – Prescribed"

Carter, Samantha

### Information

- Summary
- Name and E-mail
- General Resident
  - Resident Info
  - Individual Worksheet
  - Agreement Summary
  - Primary Contacts
  - Providers
  - Insurance
  - Personal Belongings
  - Prior Res/Services
  - Admissions/Re-Admission
  - Discharge/Transfer
- Assessments
  - Nursing Assessment
  - Service Plan
  - Resident Bio
- Medications
  - Medication - Prescribed**
  - Medication Prompts
  - Imported Medication Order
  - Medication - MAR
  - 1 Month MAR Summary

Click the "New Entry" button

### Medication - Prescribed

Carter, Samantha

Code status: Do NOT Resuscitate (DNR)	Current date: 01/11/2016
Age: 37	Primary care physician: Crossno, Peter
Date of birth: 09/04/1978	Physician phone: (801) 507-4000 Fax: [no data]
Gender: Female	Room #: Demo Unit→110
Spouse: George	Location: [no data]
Status: Widowed	Facility: Demo Unit
Chart #: 555,555	Admission: 05/01/2015 12:00PM

ACTIVE MEDICATIONS New Entry

### Step 3. Fill out required fields or other fields as necessary.

**MEDICATION INFORMATION**

Medication \* Coumadin

Drug Dosage Form ? \* Tablet

Medication Classification  C2  C3 or C4  C5  Standard

Diagnosis \* Diabetes

Route of Administration \* 01 Oral (PO)

Vital Signs Required  vital signs must be taken with this medication

Assistance needed \*  Self-Administer  Reminder to take  Open container  Significant (Total)  
 Self-Directed  Family/Designated Person  Refill reminder

Physician's Instructions \* Take 1 tab every MWF at 8am

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**MAR SCHEDULING**

Dosage \* 2.5

Scheduling Options \*  Daily or PRN  Every (Interval) days  Specific days of the week  Specific days of the month

Start Date \* 01/11/2016

End Date

Days of the Week \*  Su  M  Tu  W  Th  F  Sa

Scheduled Time(s) \*  AM  2:30am  6:30am  10:30am  2:30pm  6:30pm  10:30pm  
 PM  3:00am  7:00am  11:00am  3:00pm  7:00pm  11:00pm  
 Bedtime  3:30am  7:30am  11:30am  3:30pm  7:30pm  11:30pm  
 12:00am  4:00am  8:00am  12:00pm  4:00pm  8:00pm  PRN  
 12:30am  4:30am  8:30am  12:30pm  4:30pm  8:30pm  
 1:00am  5:00am  9:00am  1:00pm  5:00pm  9:00pm  
 1:30am  5:30am  9:30am  1:30pm  5:30pm  9:30pm  
 2:00am  6:00am  10:00am  2:00pm  6:00pm  10:00pm

MAR Instructions \* Administer 2.5 Oral (PO) at 8:00am

Done Void

Dosage Date(s) Schedule Instructions Created Edit Void

Adding Timing...

Additional Timing

Med Group Cart 1

**Step 4.** Note: If an additional timing is required (ie Coumadine 5 mg on opposite days as the 2.5 mg) then select the “Additional Timings” button. When this button is selected a copy of the “Coumadin 2.5mg is created and displayed in the same window with all of the copied fields ready to be edited for the new timing. (See below) You will see the original timing listed below the MAR Scheduling section

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Vital Signs Required  vital signs must be taken with this medication

Assistance needed \*  Self-Administer  Reminder to take  Open container  Significant (Total)  
 Self-Directed  Family/Designated Person  Refill reminder

Physician's Instructions \* Take 1 tab every MWF at 8am

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**MAR SCHEDULING**

Dosage \* 2.5

Scheduling Options \*  Daily or PRN  Every (Interval) days  Specific days of the week  Specific days of the month

Start Date \* 01/11/2016

End Date

Days of the Week \*  Su  M  Tu  W  Th  F  Sa

Scheduled Time(s) \*  AM  2:30am  6:30am  10:30am  2:30pm  6:30pm  10:30pm  
 PM  3:00am  7:00am  11:00am  3:00pm  7:00pm  11:00pm  
 Bedtime  3:30am  7:30am  11:30am  3:30pm  7:30pm  11:30pm  
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 1:00am  5:00am  9:00am  1:00pm  5:00pm  9:00pm  
 1:30am  5:30am  9:30am  1:30pm  5:30pm  9:30pm  
 2:00am  6:00am  10:00am  2:00pm  6:00pm  10:00pm

MAR Instructions \* Administer 2.5 Oral (PO) at 8:00am

Done Void

Dosage Date(s) Schedule Instructions Created Edit Void

2.5 01/11/2016 8:00am every M, W, F Administer 2.5 Oral (PO) at 8:00am Now

Adding Timing...

Additional Timing

Med Group Cart 1

Edit this field to say “5”

Edit the days of the week to say Su, Tu, Th Sa

MAR instructions populate automatically. This is what is displayed when administering a med. These instructions can also be edited

Click the “Done” button when finished editing

You will now see both timings displayed for this medication order. One for 2.5 mg and the other for 5 mg.

MAR SCHEDULING						
Dosage	Date(s)	Schedule	Instructions	Created	Edit	Void
2.5	01/11/2016	8:00am every M, W, F	Administer 2.5 Oral (PO) at 8:00am	Now		
5	01/11/2016	8:00am every Su, Tu, Th, Sa	Administer 5 Oral (PO) at 8:00am	Now		

Additional Timing

Med Group Cart 1

**Step 5.** Complete the medication order by selecting a Prescriber and by checking the “Data entered by” signature box.

Finally click the  button.

### AUTHORIZATIONS

*Prescription must be authorized prior to ordering*

Prescribed By \*  ▼

Add New Prescriber 

Data entered by \*  I certify this information complete and correct

Nursing/Administrator Review  I certify this information complete and correct

RX Number

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**\* Required**  