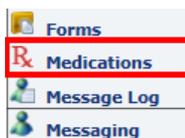


## Refill Requests from Pharmacy

**Note:** The **Medications** function is not linked to the **Orders** function.

To refill prescriptions from **Medications**:

1. Go to the prescriber's employee page by clicking on the prescriber's name on the **Employee Tab**.
2. Click on the **Medications** button on the employee navigation bar.



3. The Client Medications list will populate. Filter by **Refill Request** and click the **Filter** button.

CLIENT MEDICATIONS:							
Filter: <b>REFILL REQUEST</b>		Medication	Start Date	End Date	Has Prescription Messages		
Approve Medication	Dosage / Frequency	Quantity	Name	Status	Start Date	Change	Notes
<input type="checkbox"/> risperidone 3 mg tablet	GIVE 1 TAB BY MOUTH EVERY NIGHT AT BEDTIME *DIAGNOSIS: MOOD	28	[REDACTED]	REFILL REQUEST	11/7/2014	<a href="#">view</a>	
<input type="checkbox"/> benzotropine 1 mg tablet	Take 1 tablet (1 MG) By Oral Route 3 times per day	90	[REDACTED]	REFILL REQUEST	6/30/2014	<a href="#">view</a>	
<input type="checkbox"/> citalopram 40 mg tablet	Take 1 Tablet(s) By Oral Route 1 at bedtime	30	[REDACTED]	REFILL REQUEST	6/30/2014	<a href="#">view</a>	

4. If refill requests are present, a list of client medications and requests will display. Click on the client's name to see their medications.

CLIENT MEDICATIONS: [REDACTED]							
Filter: ALL ACTIVE		Medication	Start Date	End Date	Has Prescription Messages		
Medication	Dosage / Frequency	Quantity	Provider	Name	Status	Start Date	Change
<input type="checkbox"/> Zyprexa Zydys 15 mg disintegrating tablet	1 sublingual every evening	30	Scott Richins	[REDACTED]	ELECTRONIC - CURRENT	12/16/2013	<a href="#">refill</a> <a href="#">print</a> <a href="#">history</a> <a href="#">discont</a>
<input type="checkbox"/> OLANZAPINE ODT 15MG TABLETS	DISSOLVE 1 TABLET UNDER THE TONGUE EVERY EVENING	30	Jane Cumberland	[REDACTED]	REFILL REQUEST	12/15/2013	<a href="#">view</a>

A refill has been requested thru the pharmacy.

5. Click the **View** button on the medication with the refill request.

**Prescription for:** [REDACTED]

**Provider:** Jane Cumberland  
**Start Date:** 12/15/2013  
**Medication:** OLANZAPINE ODT 15MG TABLETS  
**Dosage:** DISSOLVE 1 TABLET UNDER THE TONGUE EVERY EVENING  
**Quantity:** 30 Tablet(s)  
**Refills:** 1  
**Addl. Comments:**

**Pharmacy:** Walgreens Drug Store 07495 [Edit](#)

**Substitutions:** SUBSTITUTIONS ALLOWED  
**# Days Supplied:** 30

[Accept Refill Request](#)
[Decline Refill Request](#)
[Decline Refill Request & Start New](#)
[Back](#)

6. Click on the **View** button. If you have SPI or NonSPI rights, you can:

- a. Accept refill request: This creates new record row in Medications and sends prescription to the pharmacy.

<b>Prescription for:</b> [REDACTED]	
<b>Provider:</b>	Jane Cumberland
<b>Start Date:</b>	12/15/2013
<b>Medication:</b>	OLANZAPINE ODT 15MG TABLETS
<b>Dosage:</b>	DISSOLVE 1 TABLET UNDER THE TONGUE EVERY EVENING
<b>Quantity:</b>	30 Tablet(s)
<b>Refills:</b>	<input type="text" value="1"/>
<b>Addt. Comments:</b>	
<b>Pharmacy:</b>	Walgreens Drug Store 07495 <input type="button" value="Edit"/>
<b>Refill Note:</b>	<input type="text"/>
<input checked="" type="radio"/> Substitutions allowed <input type="radio"/> Dispense as written (substitutions not allowed)	
<b>Substitutions:</b>	SUBSTITUTIONS ALLOWED
<b># Days Supplied:</b>	30
<input type="button" value="Accept Refill Request"/> <input type="button" value="Back"/>	

- b. Decline refill request: A reason for declining the refill must be selected.

<b>Prescription for:</b> [REDACTED]	
<b>Provider:</b>	Jane Cumberland
<b>Start Date:</b>	12/15/2013
<b>Medication:</b>	OLANZAPINE ODT 15MG TABLETS
<b>Dosage:</b>	DISSOLVE 1 TABLET UNDER THE TONGUE EVERY EVENING
<b>Quantity:</b>	30 Tablet(s)
<b>Refills:</b>	1
<b>Addt. Comments:</b>	
<b>Pharmacy:</b>	Walgreens Drug Store 07495 <input type="button" value="Edit"/>
<b>Refill Note:</b>	<input type="text"/>
<b>Decline Reason:</b>	<input type="button" value="To Decline Refill Request Select Reason --"/> <ul style="list-style-type: none"> <li><input type="radio"/> Patient unknown to the Prescriber</li> <li><input type="radio"/> Patient never under Prescriber care</li> <li><input type="radio"/> Patient no longer under Prescriber care</li> <li><input type="radio"/> Patient has requested refill too soon</li> <li><input type="radio"/> Medication never prescribed for the patient</li> <li><input type="radio"/> Patient should contact Prescriber first</li> <li><input type="radio"/> Refill not appropriate</li> <li><input type="radio"/> Patient has picked up prescription</li> <li><input type="radio"/> Patient has picked up partial fill of prescription</li> <li><input type="radio"/> Patient has not picked up prescription, drug returned to stock</li> <li><input type="radio"/> Change not appropriate</li> <li><input type="radio"/> Patient needs appointment</li> <li><input type="radio"/> Prescriber not associated with this practice or location.</li> <li><input type="radio"/> No attempt will be made to obtain Prior Authorization.</li> <li><input type="radio"/> Request already responded to by other means (e.g. phone or fax)</li> </ul>
<b>Substitutions:</b>	
<b># Days Supplied:</b>	
<input type="button" value="Decline Refill Request"/>	

- c. Decline refill request and start a new prescription: This option links to the eRx sig builder, which will be pre-populated with information from the request and allow the prescription to be edited, sent, or printed.

<b>Prescription for:</b> [REDACTED]	
<b>Provider:</b>	Jane Cumberland
<b>Start Date:</b>	12/15/2013
<b>Medication:</b>	OLANZAPINE ODT 15MG TABLETS
<b>Dosage:</b>	DISSOLVE 1 TABLET UNDER THE TONGUE EVERY EVENING
<b>Quantity:</b>	30 Tablet(s)
<b>Refills:</b>	1
<b>Addt. Comments:</b>	
<b>Pharmacy:</b>	Walgreens Drug Store 07495 <input type="button" value="Edit"/>
<b>Refill Note:</b>	<input type="text"/>
<b>Substitutions:</b>	SUBSTITUTIONS ALLOWED
<b># Days Supplied:</b>	30
<input type="button" value="Decline Refill Request &amp; Start New"/> <input type="button" value="Back"/>	