



An MHA Solution

RxPertise™ Consulting Software

Version 8.9 Standard Edition

Sample Reports & Graphs



RxPertise™, An MHA Solution Managed
Health Care Associates, Inc.
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RxPertise™ 8.9 Reports & Graphs

Our RxPertise™ 8.9 Report & Graph Options windows are an incredibly flexible and powerful engine that provides a customizable view of the reports and graphs for your practice. All reports may be exported to multiple formats, allowing for electronic delivery and archiving.

<u>RxPertise Reports & Graphs</u>	
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This document contains the following sample reports for your reference:

- > MRR Nursing Report Sample
- > MRR MD Report Sample
- > Psychoactive Utilization by Resident Report Sample

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Note To Attending Physician/Prescriber

Resident: Zander, Al X

Care Center: **Happy Face Hill**

Station: **EAST**

Room: **1**

Bed: **A**

Physician/Prescriber: **Love, Gene S MD**

*** YOUR CUSTOMIZED PAGE HEADER APPEARS HERE ***

Do you feel the resident could tolerate a dose reduction to 0.25mg qHS at this time? 0.5mg qHS has been dosed since at least 3/12, and there is a noted decrease in agitated episodes. If present therapy is warranted, could you please update the bottom of this form or your progress notes, to reflect the risks being outweighed by the benefits, so the center may remain compliant?

Ima Consultant, Pharm.D.

Ima Consultant, Pharm.D.
 Consultant Pharmacist

Physician/Prescriber Response

*** YOUR CUSTOMIZED PAGE FOOTER APPEARS HERE ***

- AGREE** *** YOUR CUSTOMIZED "AGREE" COMMENT APPEARS HERE ***
- DISAGREE** *** YOUR CUSTOMIZED "DISAGREE" COMMENT APPEARS HERE ***
- OTHER** *** YOUR CUSTOMIZED "OTHER" COMMENT APPEARS HERE ***

Signature: _____ Date: _____



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Consultant Pharmacist's Medication Regimen Review

For Recommendations Created Between 7/1/2012 And 7/31/2012

Care Center: **Happy Face Hill**

Station **EAST**

Page 2 of 4

Room	Bed	Resident Name and Comments	Physician:	Follow-Through
23	A	Loblaw, Bob Recommendation Type: Medication reduction request (non-psychoactive) Priority: Normal Thanks for considering a Cr last month. The calculated CrCl was determined to be 28.5, indicating Memantine should be dosed at 5mg bid. Would this be clinically relevant? Thank you.	Zhivago, Edward MD MRR Date : 7/16/2012	Note written to physician
1	A	Zander, Al X Recommendation Type: Antipsychotic therapy recommendation Priority: Normal Do you feel the resident could tolerate a dose reduction to 0.25mg qHS at this time? 0.5mg qHS has been dosed since at least 3/12, and there is a noted decrease in agitated episodes. If present therapy is warranted, could you please update the bottom of this form or your progress notes, to reflect the risks being outweighed by the benefits, so the center may remain compliant?	Love, Gene S MD MRR Date : 7/16/2012	Note written to physician
2	B	Hamlet, Prince Recommendation Type: Antipsychotic therapy recommendation Priority: Normal NOTE ONLY (NO RESPONSE NECESSARY): Psych consult 7/12 caused many changes in this resident's complicated psychoactive regimen. Still taking 2 concurrent antipsychotics, but both were reduced in dose. Will follow up next month for behavioral summary review and possible taper to monotherapy.	Love, Gene S MD MRR Date : 7/16/2012	
3	A	Katt, Freddy Recommendation Type: Unused PRN Medications Priority: Normal Fingersticks have not required sliding scale insulin for several weeks. Current therapy appears stable. Consider asking the MD to change FS to weekly and to DC the sliding scale insulin.	Feelgood, George MD MRR Date : 7/16/2012	

Consultant Pharmacist: Ima Consultant, Pharm.D.

Date: 10/29/2012



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Psychoactive & Sedative/Hypnotic Utilization By Resident

For Records Updated Between 08/01/2012 And 08/31/2012

Prepared For: **Happy Face Hill**

The following is a comprehensive list of all psychoactive and hypnotic orders for each resident. The Next Evaluation field is the pharmacist's recommendation for the next formal assessment of the particular order.

Station	Room	Resident	Medication Class	Medication	Dose and Directions	Ordered	Last GDR	Next Eval
WEST	6	Daylight, Seymour	Antidepressant	Trazodone Hcl (Trazodone Hcl Tab 50 Mg)	TAKE 1 OR 2 TABS BY MOUTH DAILY AT BEDTIME AS NEEDED	3/3/2012 DC'd:7/16/2012		PRN - attempt dc 6/12
WEST	6	Daylight, Seymour	Anxiolytic	Lorazepam (Lorazepam Tab 0.5 Mg)	TAKE 1 TABLET BY MOUTH TWICE DAILY	3/9/2012		6/12 - pending psych consult
WEST	5	DeWhayle, Jonah	Antidepressant	Mirtazapine (Mirtazapine Tab 15 Mg)	TAKE 1 TABLET BY MOUTH DAILY AT BEDTIME	1/18/2012	6/14/2012 (Contraind.)	9/12
EAST	1	Elsworth, Nick	Antidepressant	Mirtazapine (Mirtazapine Tab 15 Mg)	TAKE 1 CAPSULE BY MOUTH EVERY NIGHT AT BEDTIME	5/12/2012		9/12 - meet with SS
EAST	1	Elsworth, Nick	Antidepressant	Fluoxetine Hcl (Fluoxetine Hcl Cap 20 Mg)	TAKE 1 CAPSULE BY MOUTH EVERY MORNING	5/12/2012 DC'd:7/12/2012		
EAST	1	Elsworth, Nick	Sedative/Hypnotic	Zolpidem Tartrate (Zolpidem Tartrate Tab 5 Mg)	TAKE 1 TABLET BY MOUTH AT BEDTIME AS NEEDED	5/12/2012 DC'd:7/16/2012		PRN

Prepared by: Ima Consultant, Pharm.D.

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2/28/2014