**Standardized Documentation/Data Entry into Computer Operating Systems**

**Section:** Record Keeping, Admission, Licensure, Risk Management

**Compliance:** URAC Specialty Pharmacy 2.1

**URAC Standards:** PHARM Core 2, 17, 27, 29

**ACHC Standards:** DRX5-1A

**Policy ID:** 9.3

**Approved by:**

**POLICY**

All <insert practice name> personnel shall use standard forms for all documentation. Further, patient files shall be organized in a systematic way, ensuring standardization at all locations.

Data entry into <insert practice name> computer operating systems will follow the standards that have been established **[PHARM Core 17] [PHARM Core 29 (b)]**

**PROCEDURE**

1. All staff, who are responsible for creating and updating patient's home care record, shall use the forms prescribed by <insert practice name>
2. Procedures for data entry/data lookup into <insert pharmacy operating system/practice EMR> will be demonstrated to all new employees by their manager or designated experienced employees as part of their New Hire Orientation process. **[PHARM Core 27 (a)] [PHARM Core 29 (b)]**
3. All patient/consumer records will include at the minimum the following:
* Identification data - demographics, contact information and insurance or other coverage information
* Name of a family member and/or legal guardian, emergency contact, caregiver
* Source of referral
* Referral date from hospital or clinic
* Physician responsible for oncology and or hematology care
* Diagnosis or Disease State (when required by payor)
* Physician’s orders
* Signed release of information and other documents for PHI
* Admission and informed consent documents
* Initial pharmacist assessment
* Ongoing assessments, if needed
* Signed notice of receipt of Patient’s Rights and Responsibilities
1. All appropriate personnel will receive initial orientation and ongoing training regarding the purpose and use of these forms **[PHARM Core 27 (a)]**
2. Only <insert practice name> <dispensing program supervisor> can approve changes to the Company’s forms, including patient care documentation **[PHARM Core 2 (d)]**
3. At any time a form is modified due to a change in policy or process, all appropriate personnel will be notified. **[PHARM Core 27 (a)]**
4. All form changes must be approved by <insert practice name> <dispensing program supervisor> and new forms will be placed in the Company Policy Manual. **[PHARM Core 2 (d)]**

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| **DATE:** | **REVISED BY:** | **REVISION:** |
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