

**Purpose:** The purpose of this document is to summarize the workflow of Tufts Medicine Integrated Network (TMIN) pharmacy referrals through Epic. Clinicians and clinical support staff (including care managers, social workers, etc.) with order-entry capability are able to enter a pharmacy referral.

## Referral Overview:

**Pharmacy Referral Types:** Referrals are for patients needing any of the following services:

- **Patient Outreach**
  - Experiencing medication side effect (side effect and believed causative agent to be included)
  - Lack of medication adherence (background/specific medication/source of information to be included)
  - Lack of medication affordability (background/specific medication to be included)
  - Need for medication counseling/education (medication(s) to be included)
  - Need for medication reconciliation (reason, background, and all relevant medications from PCP/specialists to be included in referral)
  - Polypharmacy
  - Lack of therapeutic response, treatment goal achievement, or recent hospital admission (including the following conditions, but not limited to)
    - Chronic Obstructive Pulmonary Disease (COPD) or Asthma
    - Congestive Heart Failure (CHF)
    - New or unstable cardiac conditions
    - Diabetes (DM)
    - Chronic Kidney Disease (CKD) (stages 3 and higher)
    - Pneumonia
    - Kidney & Urinary Tract Infections (UTI)
    - Multiple medication changes
  - Other (description to be included)
- **Drug Information Question**
  - Medications causing a certain side effect
  - Appropriate medication for specified disease state
  - Dosing recommendation
  - Other
- **Comprehensive Medication Review**
  - Detailed and thorough clinical and comprehensive medication review, evaluating all recent EMR notes (e.g. progress, discharge summary, consult), labs, vaccinations, renal dosing, deprescribing, etc.
- **Diabetes Management and Education**
- **Hypertension Management and Education**

The pharmacist may contact the ordering user for additional information needed to complete the request. Once complete, the pharmacist will route the completed Medication Optimization encounter to the PCP and, if applicable, the ordering user.

# Tufts Medicine Integrated Network

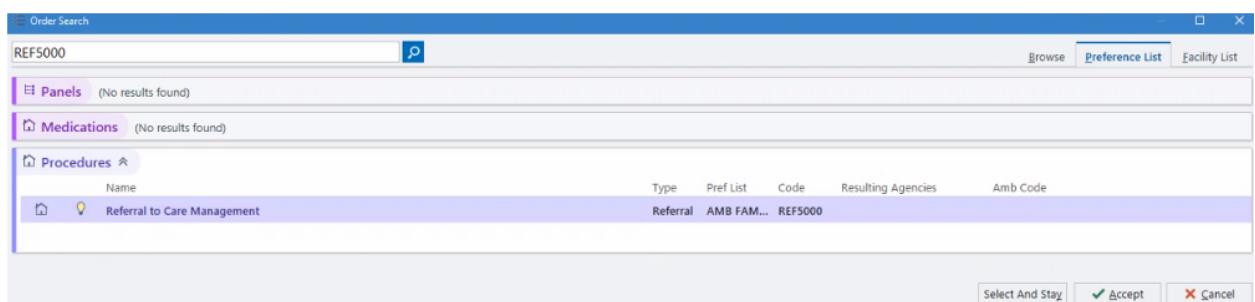
## Epic Pharmacy Referrals

### Epic Pharmacy Referral Process:

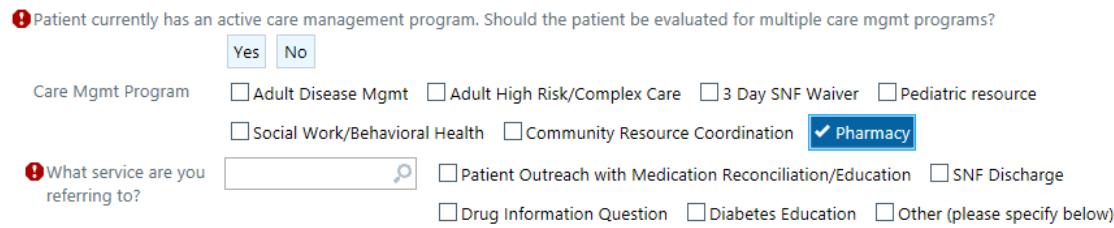
- While within an encounter, click on “Add Order”



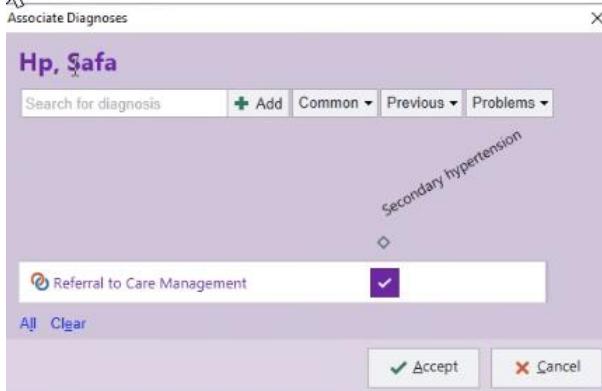
- Type “ref5000” or “Referral to Care Management” and hit enter. Select the referral and click Accept



- Fill out the fields within the referral order. Select “Pharmacy” for the care management program type. Select the desired service(s) and enter any pertinent comments in the text box. Click Accept



- When you try to sign the order, a pop-up will appear requiring you to associate the order with a diagnosis. You can search and select the appropriate diagnosis or select one from the available dropdowns. Once you have associated the order, click accept



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**Tufts Medicine Integrated Network**  
**Epic Pharmacy Referrals**

- **Care managers & clinical support staff** will be prompted to enter an authorizing provider. For “order mode” click the magnifying glass icon to select **per protocol no cosign required**

Providers

Ordering Information

Order mode

Filter:  Nearby

Title	Number
Ordered during downtime	104
Per protocol: cosign required	103
<b>Per protocol: no cosign required</b>	<b>105</b>
Telephone with readback	102
Transcribed from paper	106
Verbal with readback	101

Encounter Supervision

Type of supervision

Encounter supervisor

Accept Cancel

- Enter the PCP for authorizing provider, click accept, and sign the order

Providers

Ordering Information

Order mode

Per protocol: no cosign required

Ordering provider

WALLACE, LAURIE

Authorizing Providers

For procedures

SAVORY, MATTHEW

Entry Comments

Encounter Supervision

Type of supervision

Encounter supervisor

Accept Cancel

After Visit

Referral to Care Management

P Patient currently has an active care management program. Should the patient be evaluated for multiple care mgmt programs? Yes Care Mgmt Program: Pharmacy

What service are you referring to? Other (please specify in comments) Internal Referral

Select a pharmacy

PRINT AVS PEND SIGN ORDERS (1)

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