

# ArcBI TS Newsletter

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## ArcSys Hot Tip

The PrtScr button on your keyboard is a handy way of taking a snapshot of your desktop. If you go into Word or your e-mail, you can then do a ctrl-V to paste the screen shot in the document. If you press alt-PrtScr, then a snapshot of only the *active* window is taken. This way you don't have to worry about cluttering the e-mail with other things that were on your desktop.

## Backup Rotations

Although it is a simple procedure, we thought it would be a good idea to share some tips about the concept of doing the nightly backup. As there are staff turn-overs or office responsibilities change, information on this very critical task may get lost.

Your server is running a program known as Mvbase. This is the data base program provided and supported by Tigerlogic. At least once a day a process is run that prepares what we call a Filesave. This takes the data in the dynamic space of Mvbase and writes it into a folder on the server into a static file.

For purposes of discussion, we will refer to the static folder as c:\backup even though it may be different on your server. Within this folder you will find filenames such as BACKUP1.VTF or FILESAVE2.VTF, and so forth. Depending on how much disk space is available on your server and how we may have configured things, you could have from 2 to 10 of these types of files. Ideally, they will all be about the same size and should be dated within a day of each other. We say that we "rotate" through these filenames. In the old days when we had 1/2 tape drives, there was a set of tapes for each day of the week and they would be cycled through as needed.

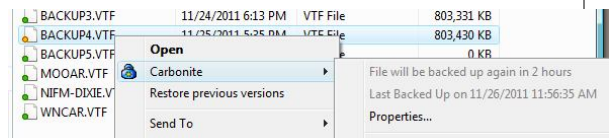
One of the reasons we "rotate" is to be able to recover data that may have been generated a few days ago that now needs to be recovered. As a minimum, you need to have 2 files that you rotate through. This is because in the event your system were to die in the middle of doing a backup, you would at least have one file

from which you could restore.

*Your responsibility is to make certain that the **most recent file** be saved to a CD, flash drive, tape, or backup service **each day**.*

Let's put this into a practical perspective and say the Filesave process runs somewhere between 10pm and 11pm on a Monday. Before you leave for the day on Tuesday, you copy the most recent backup to a flash drive. Pretend (heaven forbid) that your machine crashes and burns at noon on Wednesday. In your mind, you did the backup on Tuesday, but in essence you really only have the data as of Monday night. Thus, the better thing to do is to perform your copy to the off-site media on Tuesday morning. If nothing else, you at least know that it was for Monday night.

If you are a user of Carbonite for off-site storage, you need to be aware that the actual backup seems to be delayed by about 24 hours when dealing with large (100MB+) files. You can verify this by browsing to the folder and doing a right-click on the filename, and then a right-click on Carbonite.



Last, but not least, you need to know that your backup media can be read by another computer. If you copy to a flash drive, make certain you can load the flash drive on a different pc and then copy the file. If you use Carbonite, make certain you can restore from their server. Trust us, you'll sleep better at night knowing your data is recoverable.



## How do you spell Acetaminophen? An Introduction to RxNorm



One of the requirements of meeting Meaningful Use is being able to share information with other providers. This becomes a challenge when sharing prescription information because of the vast number of meds and dosing options available. To comply with Meaningful Use, we have opted to use a data base known as RxNorm. This file contains all of the variations in naming and dosing that are available.

The challenge in implementing this file is merging it into your existing RX and MEDS files. As we have examined the contents of these files at various clients, we have come across a wide variety of things where spelling and dosing have been askew. We have implemented a conversion process that has two steps:

1. The Key of the Rx entries has been a 2 to 4 digit number. These keys will be changed to have the letter Q in front. Additionally, the description of the medication has been changed to be all lower case. So old key 169 was listed as CIPROFLOXACIN HLC but is now known as Q169 ciprofloxacin hlc. (The reason we need to append Q is that there is a possibility that one of your keys matches an existing RxNorm key. Adding the Q will eliminate the problem.)

2. The second step is more complex. A search and comparator is performed on each entry in the Meds file and the closest/best match is made to link it to the RxNorm record. In the past, you may have used code 169 and entered the dose of 500 MG. Now, you would use the RxNorm code 465397 for CIPROFLOXACIN / D 500MG EXAMETHASONE. Similarly, if you had used code 2763 in the past to prescribe CIPRO 500 MG then the code would now be 205770A for CIPRO 5000 MG ORAL TABLET.

What does this all mean? You will need to spell (better) and type a little more than you have used to be doing. Let's say you were going to look up ACETAMINOPHEN. The list (there are actually 2000+ variations on this med) would appear as:

```
ACETAMINOPHEN
ACETAMINOPHEN 1.06 MG/ML
ACETAMINOPHEN 1.06 MG/ML \ ASPIRIN 2.2 MG/ML \ CAFFEINE 0.137 MG/ML ORAL SOLUTION
ACETAMINOPHEN 1.25 MG/ML
ACETAMINOPHEN 1.25 MG/ML \ CHLORPHENIRAMINE 0.01 MG/ML \ PHENYLEPHRINE 0.025 MG/ML ORAL SOLUTION
ACETAMINOPHEN 1.35 MG/ML
ACETAMINOPHEN 1.35 MG/ML \ PHENIRAMINE 0.083 MG/ML \
```

If you wanted the 500 MG choices you would need to type in ACETAMINOPHEN 500 and the list would appear as:

```
ACETAMINOPHEN 500 MG
ACETAMINOPHEN 500 MG CHEWABLE TABLET
ACETAMINOPHEN 500 MG DISINTEGRATING TABLET
ACETAMINOPHEN 500 MG ORAL CAPSULE
ACETAMINOPHEN 500 MG ORAL CAPSULE [MAPAP]
ACETAMINOPHEN 500 MG ORAL TABLET
ACETAMINOPHEN 500 MG ORAL TABLET [ACTAMIN]
```

And, of course, if you had typed in ACETIMINOFEN, the (not wanted) list would come up as:

```
ACETIC ACID
ACETIC ACID 0.009 MG/MG
ACETIC ACID 0.009 MG/MG \ OXYQUINOLINE 0.00025 MG/MG VAGINAL GEL
ACETIC ACID 0.009 MG/MG \ OXYQUINOLINE 0.00025 MG/MG VAGINAL GEL [FEM PH]
ACETIC ACID 0.009 MG/MG \ OXYQUINOLINE 0.00025 MG/MG [FEM PH]
ACETIC ACID 0.009 MG/MG \ OXYQUINOLINE SULFATE 0.00025 MG/MG VAGINAL GEL
ACETIC ACID 0.009 MG/MG \ OXYQUINOLINE SULFATE 0.00025 MG/MG VAGINAL GEL [RELAGARD]
```

When looking at the list of meds for a patient, if you see a med listed in all lower case this will be a visual cue that this was an entry that was not converted. Also, you will see in the Comment field of the Meds screen an entry that says (old Q169 ciprofloxacin hlc) that will tell you what the original Rx code was.

What to watch for: You will see some entries where a dosing may have been listed as 2.5 MG but there never was such a valid dose for the specific med. There may have been 2, 5, 10, and 20 per the RxNorm database. An example is ABILIFY. There is 2 MG and 20 MG. But if you had prescribed it as 2.5 MG, the conversion program would matched this up with the RxNorm entry ABILIFY 20 MG ORAL TABLET. Going into the future you would lookup ABILIFY 2 MG. In terms of the conversion, you would see the original dosing of 2.5 still sitting in the Dose field and the (old Q2757 abilify) in the Comment field.

If you come across a patient with a Qxxxx number, you should manually convert this to the proper RxNorm code.

We recommend that you schedule a time with us to perform this conversion process. It only takes a few minutes,

## Mission to Mars

(AP) CAPE CANAVERAL, Fla. — The world's biggest extra-terrestrial explorer, NASA's Curiosity rover, rocketed toward Mars on Saturday on a search for evidence that the red planet might once have been home to itsy-bitsy life. It will take 8½ months for Curiosity to reach Mars following a journey of 354 million miles. An unmanned Atlas V rocket hoisted the rover, officially known as Mars Science Laboratory, into a cloudy late morning

sky. A Mars frenzy gripped the launch site, with more than 13,000 guests jamming the space center for NASA's first launch to Earth's next-door neighbor in four years, and the first send-off of a Martian rover in eight years.

