



Pharmacy Information System (PhIS) and Clinic Pharmacy System (CPS)

Full Based User Manual Adverse Drug Reaction (ADR) & Drug Allergy Card (DAC)

Version	: 9th EDITION
Document ID	: FB_U. MANUAL_ADR_DAC



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Application reference: PhIS & CPS v2.0



Table of Contents

1.0	Introduction	1
1.1	Overview of PhIS	1
1.2	Purpose and Objectives	1
1.3	Organised Sections.....	1
2.0	Application Standard Features	2
2.1	PhIS Legend.....	2
3.0	Adverse Drug Reaction & Drug Allergy Card.....	4
	Overview	4
	User Group.....	4
	Functional Diagram	4
	Functional Description	4
3.1	ADR Reporting.....	5
3.2	NPRA Feedback	14
3.3	Adverse Event Following Immunization.....	17
3.4	Print Allergy Card	21
4.0	Acronyms.....	23
5.0	Links to Clinical Modules.....	23

1.0 Introduction

1.1 Overview of PhIS

Pharmacy Information System or better known as PhIS, is a complete and comprehensive system that integrates pharmacy related services geared towards pharmacy excellence. PhIS implementation would transform most of current manual process to electronic system to benefit facility end user in the health care sector.

There are 12 modules to assist services delivery by the health care sector which comprises of:

1. Order Management
2. Inpatient Pharmacy
3. Outpatient Pharmacy
4. Medication Counselling
5. Ward Pharmacy
6. Pharmacy Inventory
7. Manufacturing of Cytotoxic Drug Reconstitution, Parenteral Nutrition, IV Admixture & Eye Drop, Radiopharmaceuticals and Extemporaneous
8. Adverse Drug Reaction & Drug Allergic (ADR & DAC)
9. Clinical Pharmacokinetics Services (TDM)
10. Drug Information & Consumer Education (DICE)
11. Medication Therapy Adherence Clinic (MTAC)
12. Data Mining (PhARM)

1.2 Purpose and Objectives

This user manual outlines the Adverse Drug Reaction (ADR) and Drug Allergy Card (DAC) sub-module and its key features and functionalities. The primary objective is to guide user through the process of completing PhIS application process.

User will understand the following activities in details:

- ADR Reporting
- NPRA Feedback
- Adverse Event Following Immunisation
- Print Allergy Card

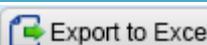
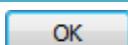
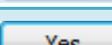
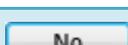
1.3 Organised Sections

These are the sections within this document:

- Section 1 : Introduction
- Section 2 : Application Standard Features
- Section 3 : Adverse Drug Reaction (ADR) & Drug Allergy Card (DAC)
- Section 4 : Acronyms
- Section 5 : Links to Clinical Modules

2.0 Application Standard Features

2.1 PhIS Legend

Standard Legend			
	Login to PhIS		Logout from PhIS
	Close All Open Tabs		Refresh Screen
	Expand Menu		Collapse Menu
	Expand Module		Collapse Module
	Add/Create New Record		Save
	Close Window		Calendar Icon
	Save Transaction		Delete Record
	Export Report From PDF file to Excel file		OK Button
	Yes Button		No Button
	Radio Button	<input type="checkbox"/>	Checkbox
	System Automatic Generate Record No.		Automatically Display/Retrieve Box
	Reset Login Screen		Cancel
	Display Home Tab		Search Icon
	Show Help		Edit Record
	Search Record		Cancel Button
	Dropdown Box	<input type="text"/>	Empty Text Box
*	Mandatory Field		



ADR & DAC Module Legend			
Print In Malay	Print DAC card in Malay	Causality Grading	Causality Grading Guide
Print In English	Print DAC card in English	WHO Terminology Guide	WHO Terminology Guide Hyperlink

Note

To learn more about Login Information, kindly click [Login Information](#) module for descriptive steps.

3.0 Adverse Drug Reaction & Drug Allergy Card

Overview

The Adverse Drug Reaction module converse the implementation of a safe, organised, and efficient adverse drug reaction reporting, adverse reaction after immunisation reporting and allergy card printing

User Group

This module is intended for pharmacist and prescriber.(subject to the user assigned by the facility)

Functional Diagram

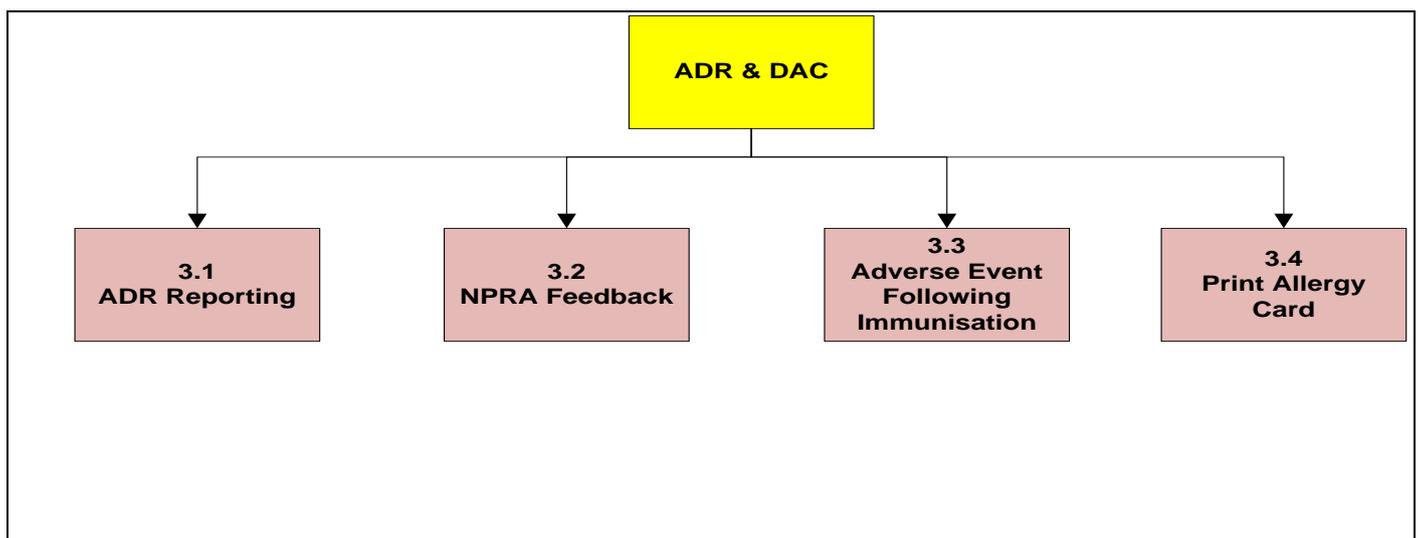


Figure 3.0

Functional Description

ADR & DAC comprises of four (4) main functions:

- **ADR Reporting**
This process is used by prescriber and pharmacist to record any adverse drug reaction of the patient. The format is similar to the Adverse Drug Reaction Form by National Pharmaceutical Control Bureau (NPCB).
- **NPCB Feedback**
This process is used by pharmacist to record any feedback on the ADR Reporting sent to National Pharmaceutical Control Bureau (NPCB) into the system.
- **Adverse Event Following Immunisation**
This process used by prescriber and pharmacist to record any adverse reaction after immunisation.
- **Print Allergy Card**
This process is used by pharmacist to print an allergy card for the patient. The allergy record is created based on allergy reported by prescriber.

3.1 ADR Reporting

This function is used to record any drug reaction of the patient before sending to NPRA.

Figure 3.1-1 ADR Reporting Listing Page

Note

PhIS Screen menu/sub menu will be displayed according to user access right.

STEP 1

Click on 'Adverse Drug Reaction' menu

STEP 2

Click on 'ADR Reporting' sub-menu

STEP 3

Click on the button to search for patient record

Note

Search for ADR Reporting record by below criteria :-

Basic Search			
No	Field	Description	Remark
a	ADR No	–	Allow to search record by full or partial ADR No
b	MRN	Patient MRN	Allow to search by patient full or partial MRN No
c	Suspected Drug Description	Drug Name	Allow to search by full or partial drug name
d	ADR Description	–	Allow to search by full or partial ADR description exp, Rash, Rashes
Advance Search			
e	Reported Date From	–	Allow to search date before current date
f	Reported Date To	–	Allow to search date later than date on Reported Date From field

g k	Reported By Status	User Login Name – All – Confirmed – Verify – Recorded	Allow to search by full or partial User Login Name – All - Allow to search for records by status Confirmed, Verify and Recorded – Confirmed - Allow to search for records that have been confirmed – Verify - Allow to search for records that are verified but not yet confirmed – Recorded - Allow to search for records that are not yet verified and confirmed
l	Department	–	Allow to search by full or partial department name in facility

Table 3.1

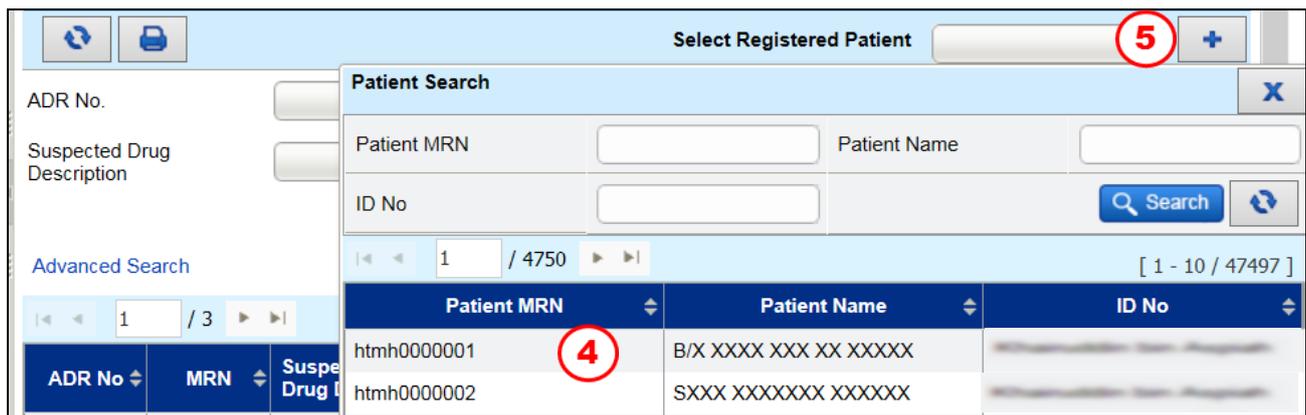


Figure 3.1-2 Enter/Select search MRN

STEP 4

Double-click on selected patient record

STEP 5

Click on the  button and system will generate '**ADR Reporting**' screen

ADVERSE DRUG REACTION

Mykad: [REDACTED]
Age: 66 Years 04 Months 20 Days
Gender: Female
MRN: HPSF000

Address: [REDACTED]
Phone And Email: [REDACTED]
Diagnosis: [REDACTED]
No known Allergies

Height: [REDACTED] cm
Weight: [REDACTED] kg
BMI/BSA: 0/0 m²
Update (Last Updated:)
Nationality: Warganegara

1. ADR DETAILS

Adverse Reaction Description

Patient experienced swelling of lips and eyes, dry throat with sputum containing trace of blood and shortness of breath 30 minutes after taking T. Paracetamol (Brand unknown). Patient has similar reaction after taking penicillins (brand unknown).

[WHO Terminology Guide](#)

Race: Chinese

Please Classify for Skin Reaction: Skin Reaction

Date Of Reaction: 30/09/2009 12:00 AM

Date End Of Reaction: [REDACTED]

Time To Onset Of Reaction: 30 Minutes

Treatment Of Adverse Reaction: Patient claimed symptoms resolved slowly while waiting for transport to hospital.

Outcome: 1 = Recovered/Resolved

Seriousness: No

Additional Information: No

Extent of Reaction: 2 = Moderate

Action Taken With Suspected Drug: 1 = Drug Withdrawn

Reaction Subsided after stopping drug or Reducing Dose: 3 = Unknown

Reaction reappeared after reintroducing drug: 3 = Unknown

Drug Relationship: 3 = Possible

WHO Causality Categories/Naranjo Algorithm

Figure 3.1-3 ADR Details Information

STEP 6

Enter the information in the mandatory field in **ADR Details** section:

- a) **Adverse Reaction Description.**
- b) **Date Of Reaction**
- c) **Date End Of Reaction**
- d) **Time To Onset of Reaction**
- e) **Treatment of Adverse Reaction**
- f) **Outcome**
- g) **Seriousness**
- h) **Extent of Reaction**
- i) **Action Taken With Suspected Drug**
- j) **Reaction Subsided after stopping drug or Reducing Dose**
- k) **Reaction reappeared after reintroducing drug**
- l) **Drug Relationship**

Note

- **Non mandatory fields below can be entered if applicable**
 - a) **Please Classify for Skin Reaction**
 - b) **Additional Information**
- User can refer the guideline from the link [WHO Terminology Guide](#) to enter the information in the field '**Adverse Reaction Description**'
- If "Yes" is selected for '**Additional Information**' from drop down box, another drop down box will appear with the following:
 - Brand Switching
 - Drug Interaction
 - Medication Error
 - Medication Ineffective
 - Others

- **Race** field is retrieved from patient registration.
- If “Yes” is selected for ‘**Seriousness**’ from drop down box, another drop down box will appear with the following:
 - **Results In Death** (if this is selected, another field will appear and user need to fill in the information of **Date of Birth, Was Autopsy Done, Autopsy Determined Cause of Death and Cause of Death**)
 - **Life Threatening**
 - **Hospitalization/Prolong Hospitalization**
 - **Disability/Incapacity**
 - **Birth Defect**



Figure 3.1-4 Skin Reaction Screen

Note

- If ‘**Please Classify for Skin Reaction**’ checkbox is selected, [Skin Reaction](#) hyperlink is displayed. Click on the hyperlink, system will display as shown in Figure 3.1-4. Select the checkbox and click on the  button to save the record.

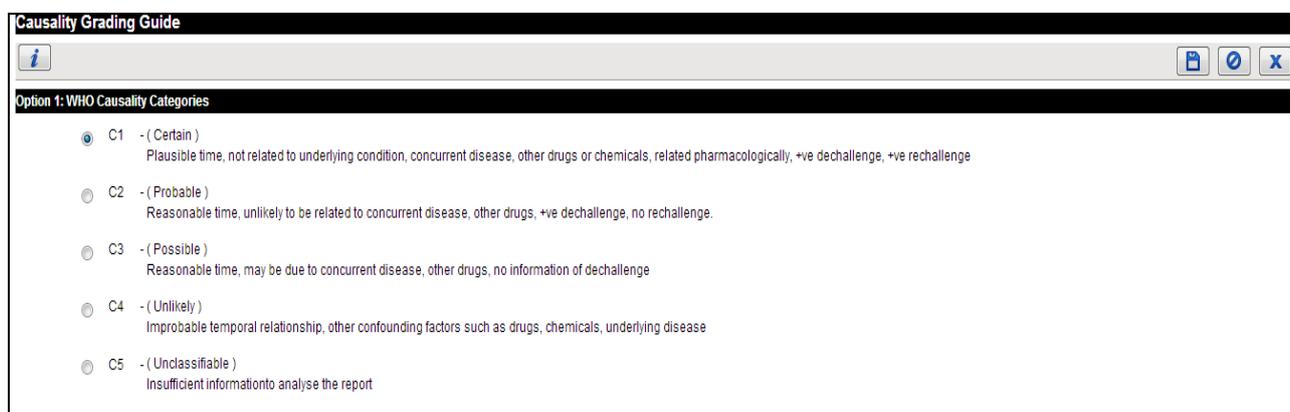
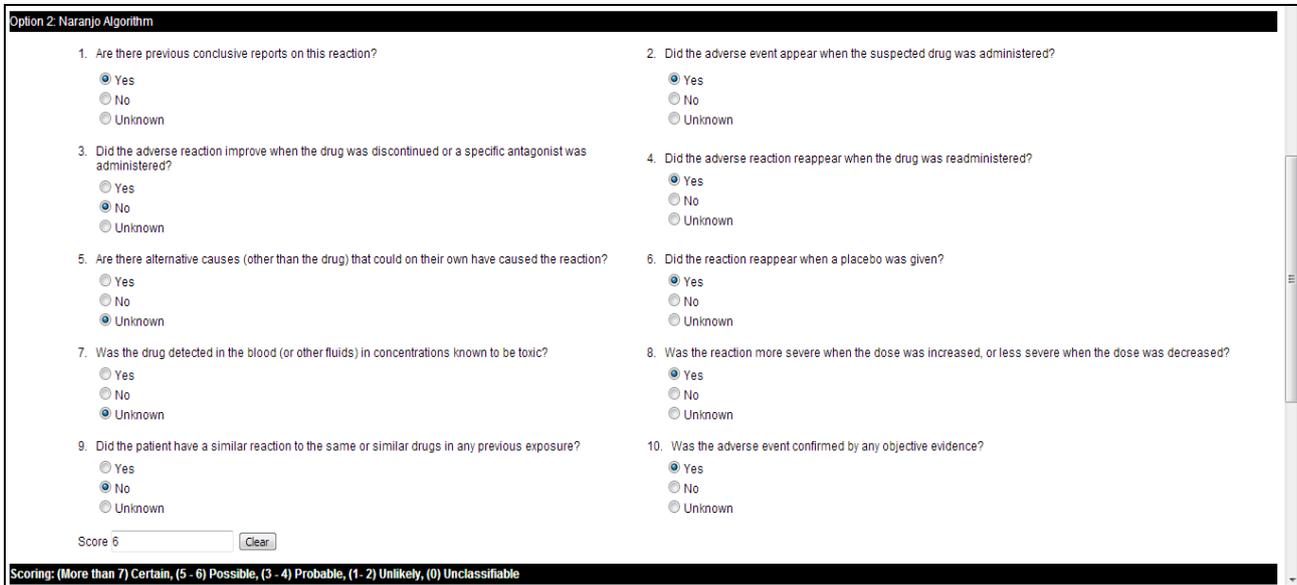


Figure 3.1-5 WHO Causality Grading

Note

- **Drug Relationship** field is selected from drop down box or by clicking on the [WHO Causality Categories/Naranjo Algorithm](#) hyperlink. System will display the screen as shown in Figure 3.1-5 and Figure 3.1-6.
- Results selected from WHO Causality Grading will be displayed at the Drug Relationship field.



Option 2: Naranjo Algorithm

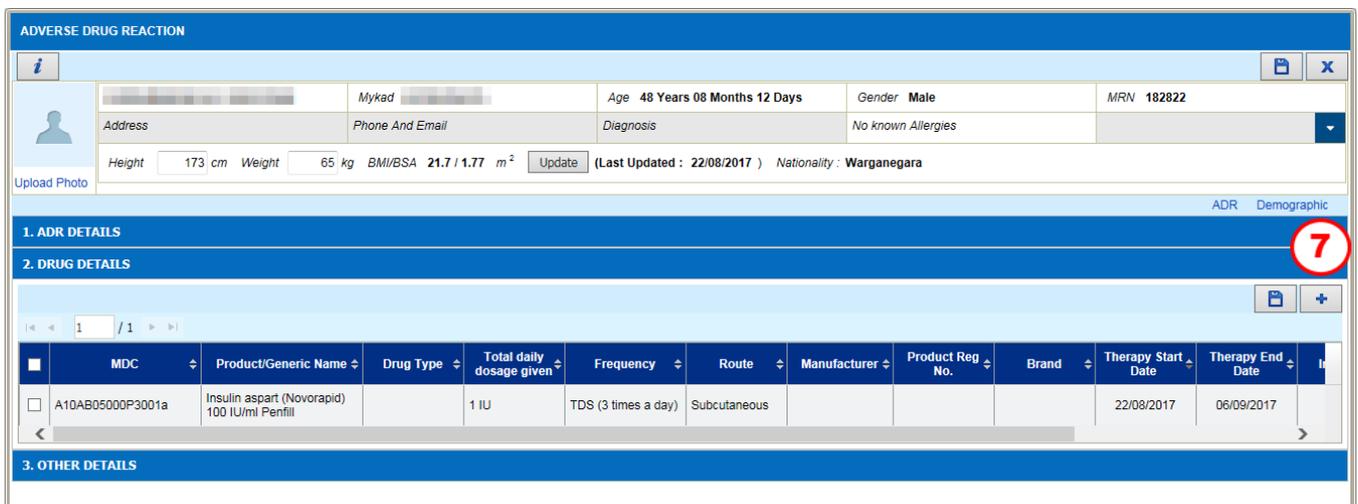
- Are there previous conclusive reports on this reaction?
 Yes
 No
 Unknown
- Did the adverse event appear when the suspected drug was administered?
 Yes
 No
 Unknown
- Did the adverse reaction improve when the drug was discontinued or a specific antagonist was administered?
 Yes
 No
 Unknown
- Did the adverse reaction reappear when the drug was readministered?
 Yes
 No
 Unknown
- Are there alternative causes (other than the drug) that could on their own have caused the reaction?
 Yes
 No
 Unknown
- Did the reaction reappear when a placebo was given?
 Yes
 No
 Unknown
- Was the drug detected in the blood (or other fluids) in concentrations known to be toxic?
 Yes
 No
 Unknown
- Was the reaction more severe when the dose was increased, or less severe when the dose was decreased?
 Yes
 No
 Unknown
- Did the patient have a similar reaction to the same or similar drugs in any previous exposure?
 Yes
 No
 Unknown
- Was the adverse event confirmed by any objective evidence?
 Yes
 No
 Unknown

Score 6

Scoring: (More than 7) Certain, (5 - 6) Possible, (3 - 4) Probable, (1- 2) Unlikely, (0) Unclassifiable

Figure 3.1-6 Naranjo Algorithm

- Naranjo Algorithm is used as a guideline only. Results from this questionnaire will not be used as the causality grading.
- Select on the radio button and click on the  button to save the record



ADVERSE DRUG REACTION

Mykad: [Redacted] Age: 48 Years 08 Months 12 Days Gender: Male MRN: 182822

Address: [Redacted] Phone And Email: [Redacted] Diagnosis: [Redacted] No known Allergies

Height: 173 cm Weight: 65 kg BMI/BSA: 21.7 / 1.77 m² Update (Last Updated: 22/08/2017) Nationality: Warganegara

ADR Demographic

1. ADR DETAILS

2. DRUG DETAILS

	MDC	Product/Generic Name	Drug Type	Total daily dosage given	Frequency	Route	Manufacturer	Product Reg No.	Brand	Therapy Start Date	Therapy End Date
<input type="checkbox"/>	A10AB05000P3001a	Insulin aspart (Novorapid) 100 IU/ml Penfill		1 IU	TDS (3 times a day)	Subcutaneous				22/08/2017	06/09/2017

3. OTHER DETAILS

Figure 3.1-7 Drug Details

STEP 7

Click on the  button as shown in Figure 3.1-7 and 'Add Drug Detail' screen will be displayed as shown in Figure 3.1-8

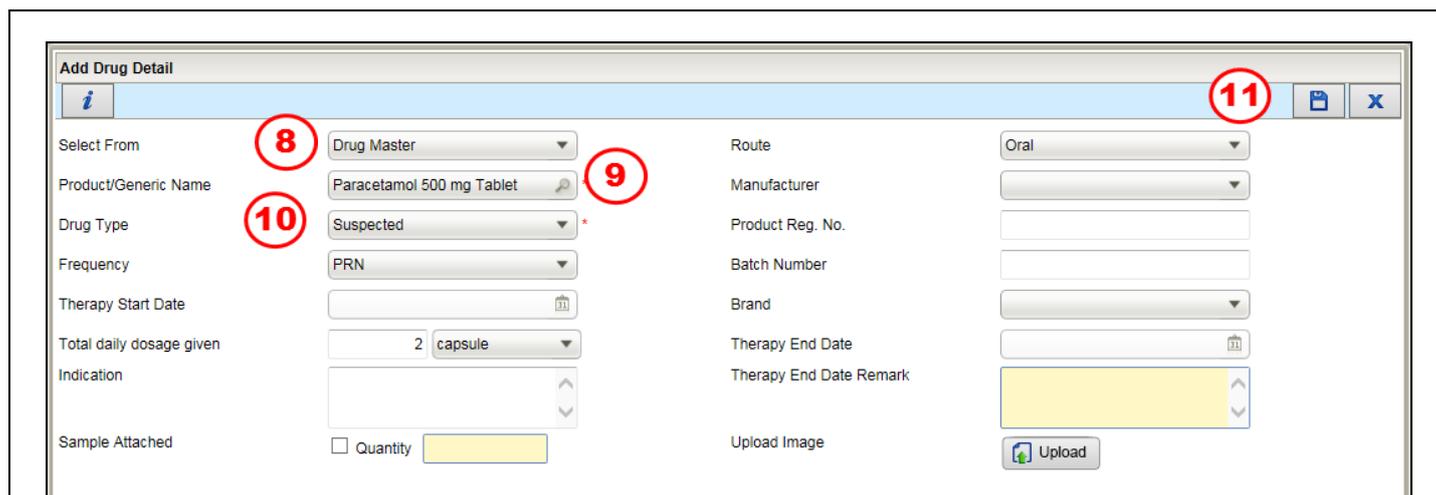


Figure 3.1-8 Add Drug Details

STEP 8

Select and enter from Select From drop down box:

- Drug Master
- Others

Note

- *Drug Master- The searching of drugs will be from the Drug Master list.*
- *Others – Free text field provided. User can record drugs which are not setup in the drug configuration file. e.g.: traditional herbs.*

STEP 9

Enter **Product/Generic Name**. The selection will be based on the selected criteria in the **Select From** field

STEP 10

Select and enter from Drug Type drop down box:

- Concomitant
- Interaction
- Suspected

Note

- *Enter the other optional field if applicable*
 - a) **Frequency**
 - b) **Therapy Start Date**
 - c) **Indication**
 - d) **Total daily dosage given**
 - e) **Route**
 - f) **Manufacturer**
 - g) **Product Reg No**
 - h) **Batch No**
 - i) **Brand**
 - j) **Therapy End Date**
 - k) **Therapy End Date Remarks**
 - l) **Sample Attached**
 - m) **Upload Image**
- **Select From** field = Drug Master, **Frequency** and **Route** field is displayed as drop down box.
- **Select From** field = Other, **Frequency** and **Route** field is displayed as free text fields.
- Select the checkbox **Sample Attached** and enter the quantity if sample is available from patient.

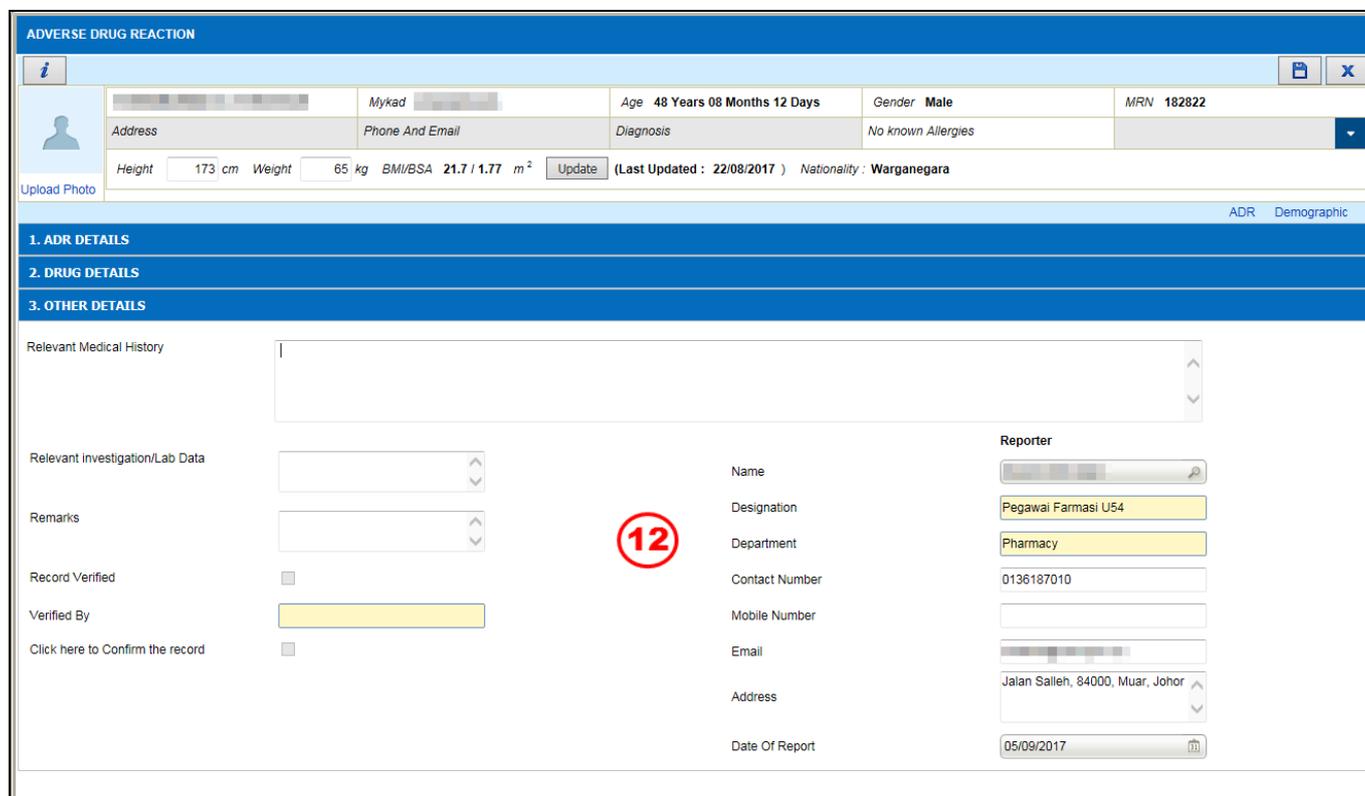
- Click on the **Upload** button to upload the image of the drug if available.

STEP 11

Click on the  button to save the record

Note

User is allowed to add same drug with different dosage, frequency or route



ADVERSE DRUG REACTION

Mykad: [Redacted] Age: 48 Years 08 Months 12 Days Gender: Male MRN: 182822
 Address: [Redacted] Phone And Email: [Redacted] Diagnosis: [Redacted] No known Allergies
 Height: 173 cm Weight: 65 kg BMI/BSA: 21.7 / 1.77 m² Update (Last Updated: 22/08/2017) Nationality: Warganegara

1. ADR DETAILS
2. DRUG DETAILS
3. OTHER DETAILS

Relevant Medical History: [Text Area]

Relevant investigation/Lab Data: [Dropdown]

Remarks: [Text Area] **12**

Record Verified:

Verified By: [Dropdown]

Click here to Confirm the record:

Reporter

Name: [Redacted]
 Designation: Pegawai Farmasi U54
 Department: Pharmacy
 Contact Number: 0136187010
 Mobile Number: [Text Field]
 Email: [Redacted]
 Address: Jalan Salleh, 84000, Muar, Johor
 Date Of Report: 05/09/2017

Figure 3.1-9 Other Details

STEP 12

Enter the information for below if applicable:

- Relevant investigation Lab Data**
- Relevant Medical History**
- Remarks**
- Mobile Number**
- Date Of Report**

Note

Fields of Reporter section that will be extracted automatically from the user account are:

- Name**
- Designation**
- Department**
- Contact Number**
- Email**
- Address**

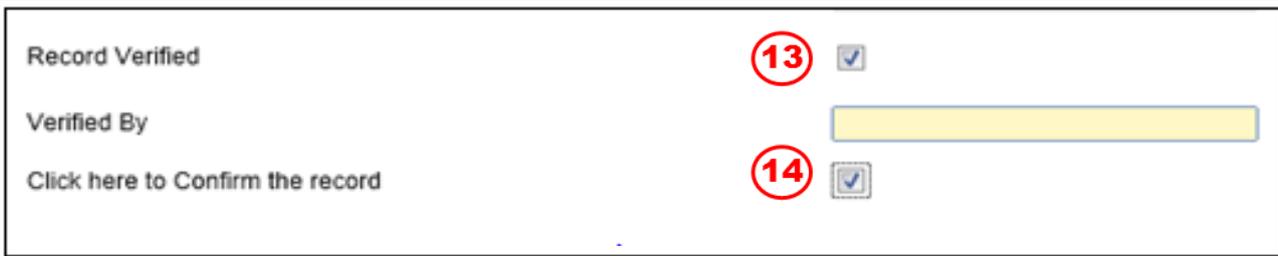


Figure 3.1-10 Record Verified

STEP 13

Select the **Record Verified** checkbox to verify the record. Once the checkbox is selected, adding and editing of data are not allowed

STEP 14

Click on the **Click here to Confirm the record** checkbox then print the form to send the form to NPCB

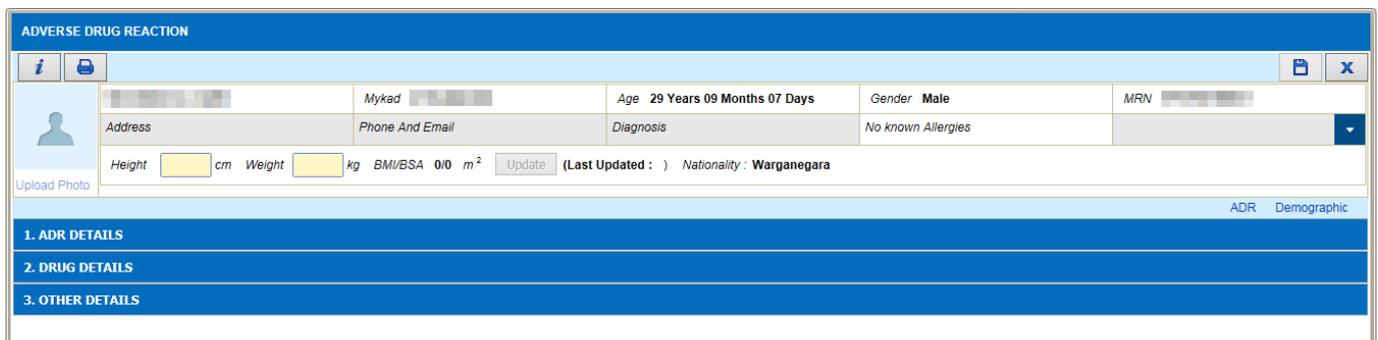


Figure 3.1-11 Save Record

STEP 15

Click on the  button to save the record

Note

- Click on the  button to print the ADR Report as Figure 3.1-12
- Click on the  button to close the transaction



REPORT ON SUSPECTED ADVERSE DRUG REACTION									
NATIONAL CENTRE FOR ADVERSE DRUG REACTION MONITORING									
<i>www.bpfk.gov.my</i>									
(Please report all suspected drug reaction including those for vaccines and traditional medicines. Do not hesitate to report if some details are not known. Identities of Reporter, Patient and Institution will remain Confidential .)									
REPORT No (for office use only)									
PATIENT INFORMATION									
R/N or Initials	Age	Sex	Wt	Ethnic Group	Institution				
HPSF00071539	35 Years 04 Months 22 Days	Female		Malay	Hospital Pakar Sultanah Fatimah, Muar				
ADVERSE REACTION DESCRIPTION									
Patient came to KLWP department on 15/9/17 with the complain of normal rashes. At KLWP, Dr gave Cloxacillin Capsule 1000mg QID, Tablet Diclofenac Sodium 50 mg TDS for the pain and Tablet paracetamol 1000mg QID. Few mins after taking, patient appeared to have rashes around the neck, body, armpits and at the upper limbs. A day later, blisters appeared around the neck & body. Patient was then treated with IV Hydrocortisone 200 mg STAT on 22/9. Patient rashes and blister resolving soon.									
Additional Information :									
Skin Reaction :									
Please specify Part of Body Affected :									
Time to onset of reaction :	5 Minutes	Date of reaction	15/09/2017	Date end of reaction :	25/10/2017				
Reaction subsided after stopping drug/reducing dose :	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unknown <input checked="" type="checkbox"/>						
Reaction reappeared after reintroducing drug :	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Not applicable <input checked="" type="checkbox"/>						
Extent of reaction :	Mild <input type="checkbox"/>	Moderate <input checked="" type="checkbox"/>	Severe <input type="checkbox"/>						
Treatment of adverse	1)Hydrocortisone Sodium Succinate Injection 200mg STAT 2)Chlorpheniramine 10mg/ml Injection 10mg STAT								
Outcome :	Recovered <input type="checkbox"/>	Recovering <input checked="" type="checkbox"/>	Recovered With Sequelae <input type="checkbox"/>	Not Recovered <input type="checkbox"/>	Unknown <input type="checkbox"/>				
Seriousness:	Life Threatening <input type="checkbox"/>	Hospitalization / Prolong Hospitalization <input checked="" type="checkbox"/>	Disability / Incapacity <input type="checkbox"/>	Birth Defect <input type="checkbox"/>	Results In Death <input type="checkbox"/>	- Date of death:			
Drug Reaction Relationship	Certain <input type="checkbox"/>	Probable <input type="checkbox"/>	Possible <input checked="" type="checkbox"/>	Unlikely <input type="checkbox"/>	Unclassifiable <input type="checkbox"/>				
Suspected Drug :									
Products/Generic Name	Dosage Given	Route	Frequency	Manufacturer	Product Reg. No.	Batch No.	Therapy Dates		Indication
							Start	End	
Paracetamol 500 mg Tablet	2 tablet	Oral	TDS (3 times a day)	CCM Pharmaceutical s Sdn. Bhd.		bm v	22/09/2017	29/09/2017	
Concomitant Drug :									
Products/Generic Name	Dosage Given	Route	Frequency	Manufacturer	Product Reg. No.	Batch No.	Therapy Dates		Indication
							Start	End	
Cloxacillin 500mg Capsule	4000 mg	Oral	QID (4 times a day)	Dynapharm (M) Sdn Bhd	17c0751		15/09/201	22/09/201	
Calamine Lotion	1 app	LA	PRN				22/09/201	29/09/201	
Hydrocortisone Sodium Succinate 100mg Injection	100 mg	Intravenous	QID (4 times a day)				22/09/201	29/09/201	
Diclofenac Sodium 50 mg Tablet	150 mg	Oral	TDS (3 times a day)				15/09/201	20/09/201	For pain relief
Interaction Drug :									
** Please attach further papers if necessary									
Relevant Investigations/Laboratory Data					Relevant Medical History				
					NKMI				
Reporter									
Name:	Ko Wei Cheng			Address :Jalan Salleh, ,					
Designation :	Pegawai Farmasi U41			Tel No :638					
Email Address :	weichengko@hotmail.com			Date of Report :25/09/2017			Signature :		

Figure 3.1-12 ADR Report

3.2 NPRA Feedback

The function of this menu is to record any feedback from NPRA into the system

Figure 3.2-1 NPRA Feedback

Note

Search for NPRA Feedback record by below criteria:-

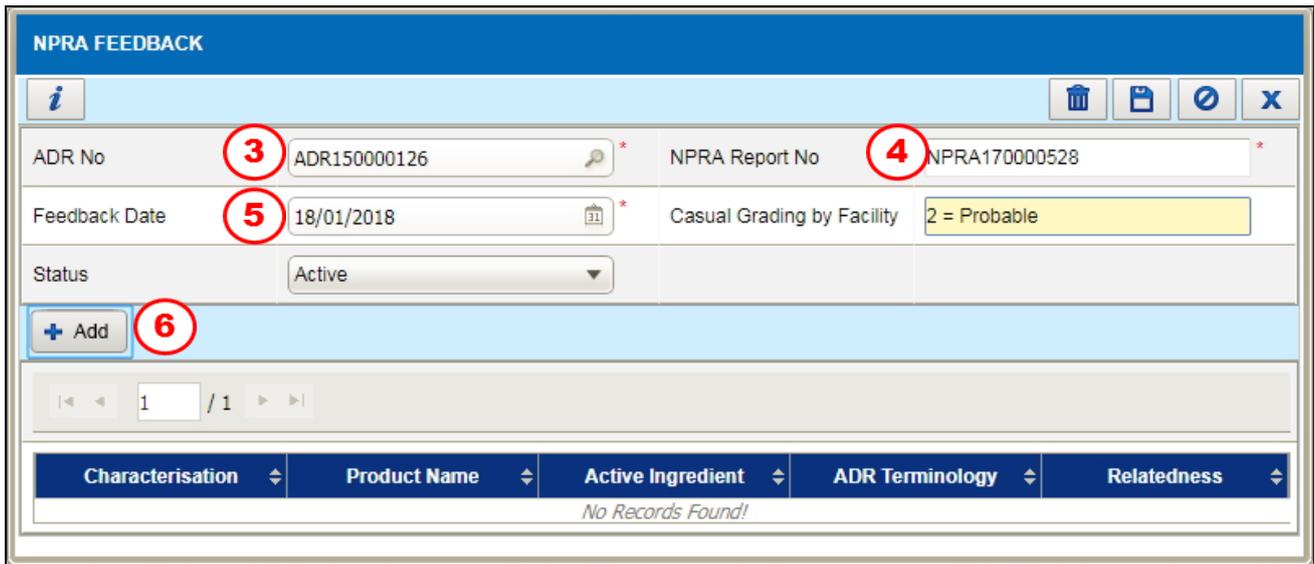
No	Field	Description	Remark
a	ADR No	Search by selecting a number from ADR No	Allow user to search existing transaction based on ADR No
b	NPRA Report No	Search by entering NPRA Report No	Allow user to search existing transaction based on NPRA Report No
c	Integration with NPRA	Select from drop down menu: - All - Yes - No	All – allow to search all transaction Yes – allow to search data that synchronized from NPRA No – allow to search data recording by user

STEP 1

Click on the 'Adverse Drug Reaction' menu follow by ' NPRA Feedback' sub menu

STEP 2

Click on the button and NPRA Feedback screen will be displayed as Figure 3.2-2



NPRA FEEDBACK

ADR No **3** ADR150000126 * NPRA Report No **4** NPRA170000528 *

Feedback Date **5** 18/01/2018 * Casual Grading by Facility 2 = Probable

Status Active

6 + Add

1 / 1

Characterisation Product Name Active Ingredient ADR Terminology Relatedness

No Records Found!

Figure 3.2-2 NPRA Feedback

STEP 3

Select **ADR No** from the  search button

Note

Casual Grading by Facility will auto displayed based on the value recorded in ADR Reporting

STEP 4

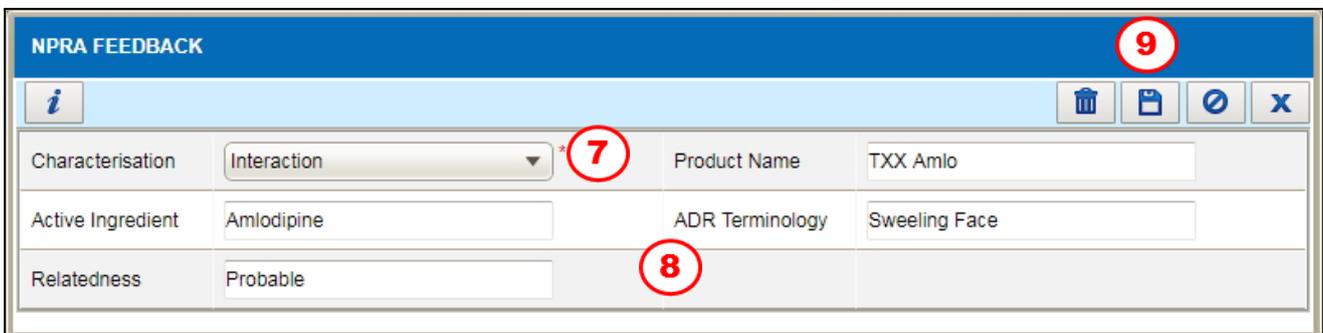
Enter **NPRA Report No**

STEP 5

Select **Feedback Date**

STEP 6

Click on the  button and NPRA Feedback screen will be displayed as Figure 3.2-3



NPRA FEEDBACK **9**

Characterisation Interaction * **7** Product Name TXX Amlo

Active Ingredient Amlodipine ADR Terminology Sweeling Face

Relatedness Probable **8**

Figure 3.2-3 NPRA Feedback

STEP 7

Select **Characterisation** from drop down menu:

- Concomitant
- Interaction
- Suspected

STEP 8

Enter value in below field (if applicable):

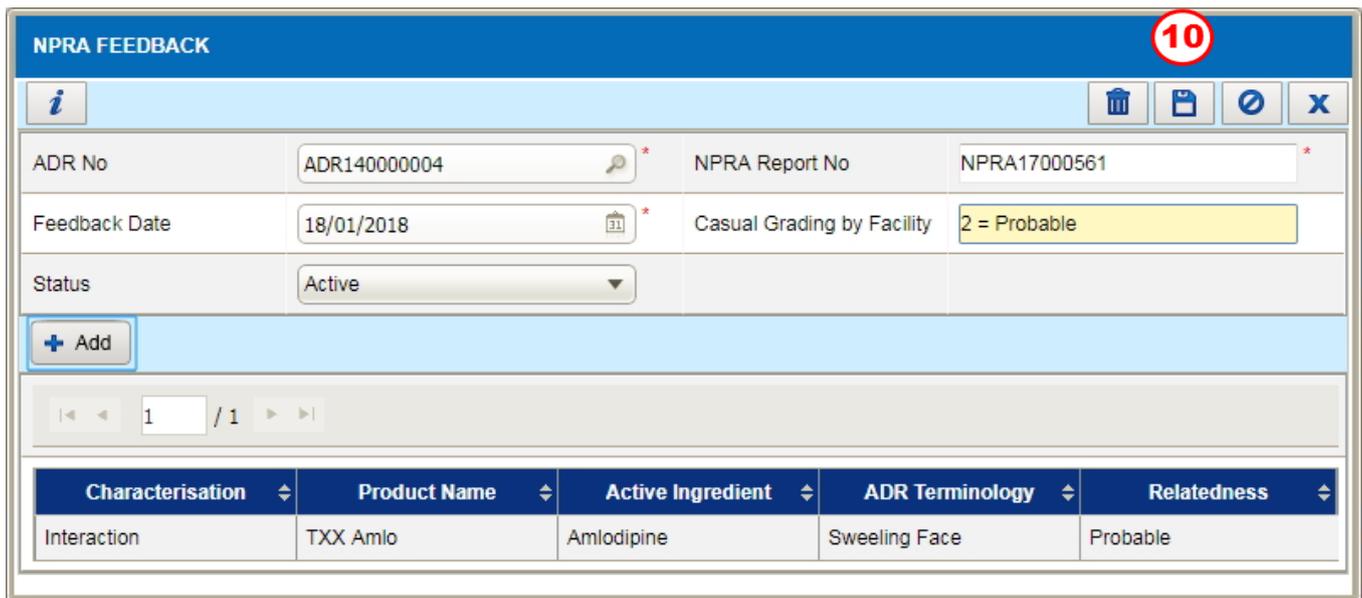
- **Active Ingredient**
- **Product Name**
- **ADR Terminology**
- **Relatedness**

STEP 9

Click on the  button to save the record

Note

Record will be updated as shown in Figure 3.2-4



The screenshot shows the 'NPRA FEEDBACK' form with a red '10' notification badge in the top right corner. The form contains the following fields:

ADR No	ADR140000004	NPRA Report No	NPRA17000561
Feedback Date	18/01/2018	Casual Grading by Facility	2 = Probable
Status	Active		

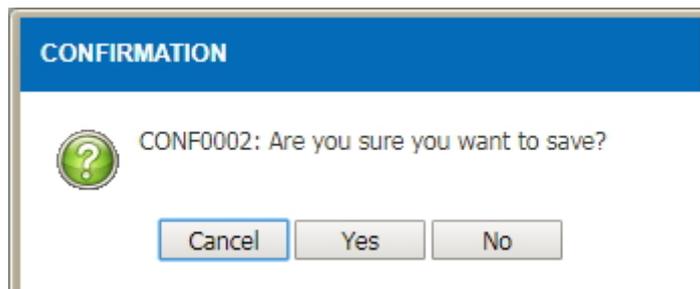
Below the form is a table with the following data:

Characterisation	Product Name	Active Ingredient	ADR Terminology	Relatedness
Interaction	TXX Aml	Amlodipine	Sweeling Face	Probable

Figure 3.2-4 NPRA Feedback

STEP 10

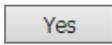
Click on the  button to save the NPRA Feedback and confirmation message will be displayed as Figure 3.2-5



The confirmation message dialog box has a blue header with the text 'CONFIRMATION'. Below the header is a green question mark icon and the text 'CONF0002: Are you sure you want to save?'. At the bottom of the dialog are three buttons: 'Cancel', 'Yes', and 'No'.

Figure 3.2-5 Confirmation Message

Note

Click on the  button so save the record

3.3 Adverse Event Following Immunization

The function of this menu is to record any vaccine reaction of the patient

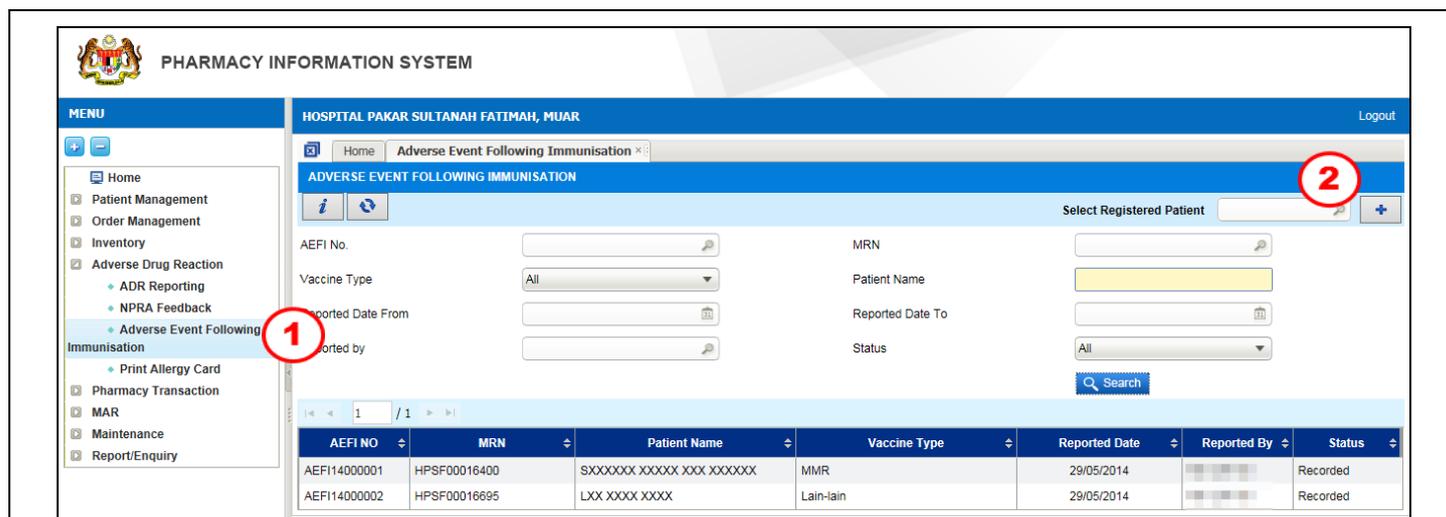


Figure 3.3-1 Adverse Event Following Immunisation Listing Page

Note

Search for AEFI record by below criteria:-

No	Field	Description	Remark
a	AEFI No	–	Allow to search record by full or partial AEFI No
b	MRN	Patient MRN	Allow to search patient by full or partial MRN No
c	Vaccine Type	<ul style="list-style-type: none"> – All – Diphtheria/Tetanus/Pertussis – Diphtheria/Tetanus/Pertussis/Poliomyelitis – Hepatitis B – Human Papillomavirus (HPV) – Lain-lain – MMR 	<ul style="list-style-type: none"> – All – Allow to search from criteria Diphtheria/Tetanus/Pertussis until MMR – Diphtheria/Tetanus/Pertussis – Allow to search Diphtheria/Tetanus/Pertussis vaccine type – Diphtheria/Tetanus/Pertussis/Poliomyelitis-Allow to search Diphtheria/Tetanus/ Pertussis/ Poliomyelitis vaccine type – Hepatitis B – Allow to search Hepatitis B vaccine type – Human Papillomavirus (HPV) - Allow to search Human Papillomavirus (HPV) vaccine type – Lain-lain – Allow to search vaccine which not classified – MMR – Allow to search MMR vaccine type
d	Reported Date From	–	Allow to search date before current date
e	Reported Date To	–	Allow to search date later than date on Reported Date From field
f	Reported By	User Login Name	Allow to search by full or partial User Login Name
g	Status	<ul style="list-style-type: none"> – All – Recorded – Submitted 	<ul style="list-style-type: none"> – All - Allow to search record by status Recorded and Submitted – Recorded - Allow to search for records that are saved but not yet confirmed – Submitted - Allow to search for records that are saved and confirmed

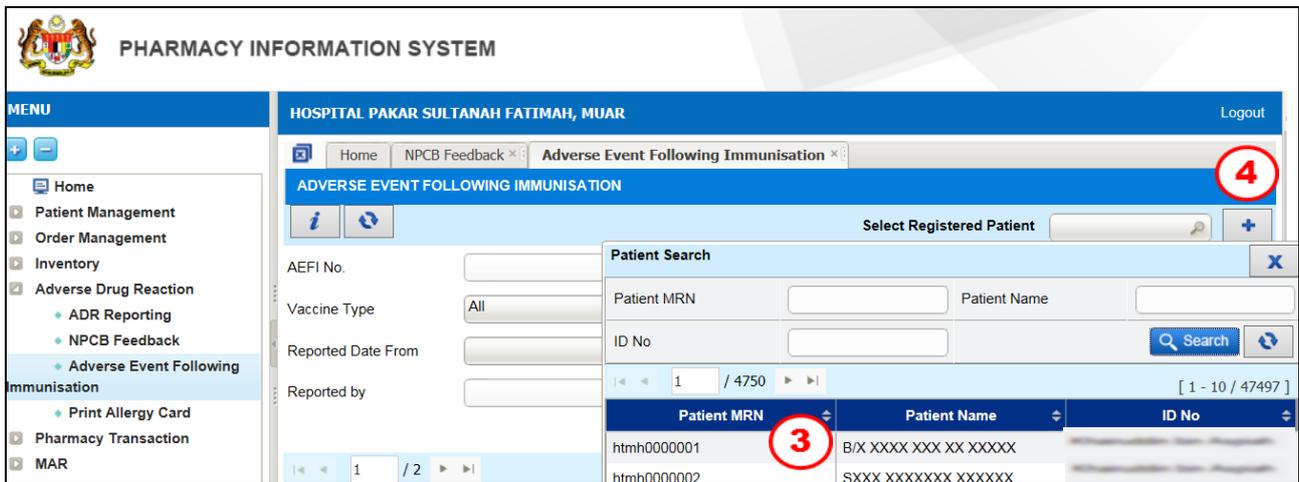
Table 3.3

STEP 1

Select 'Adverse Drug Reaction' menu follow by 'Adverse Event Following Immunisation' sub menu

STEP 2

Click on the  button to create new patient record



The screenshot shows the 'ADVERSE EVENT FOLLOWING IMMUNISATION' interface. On the left is a 'MENU' with options like Home, Patient Management, Order Management, Inventory, Adverse Drug Reaction (including ADR Reporting, NPCB Feedback, Adverse Event Following Immunisation, and Print Allergy Card), Pharmacy Transaction, and MAR. The main area is titled 'HOSPITAL PAKAR SULTANAH FATIMAH, MUAR' and contains a search bar for 'Select Registered Patient' (circled in red with '4'). Below this is a 'Patient Search' table with columns for Patient MRN, Patient Name, and ID No. The first row is highlighted with a red circle '3'.

Patient MRN	Patient Name	ID No
htmh0000001	B/X XXXX XXX XX XXXXX	
htmh0000002	SXXX XXXXXXXX XXXXXX	

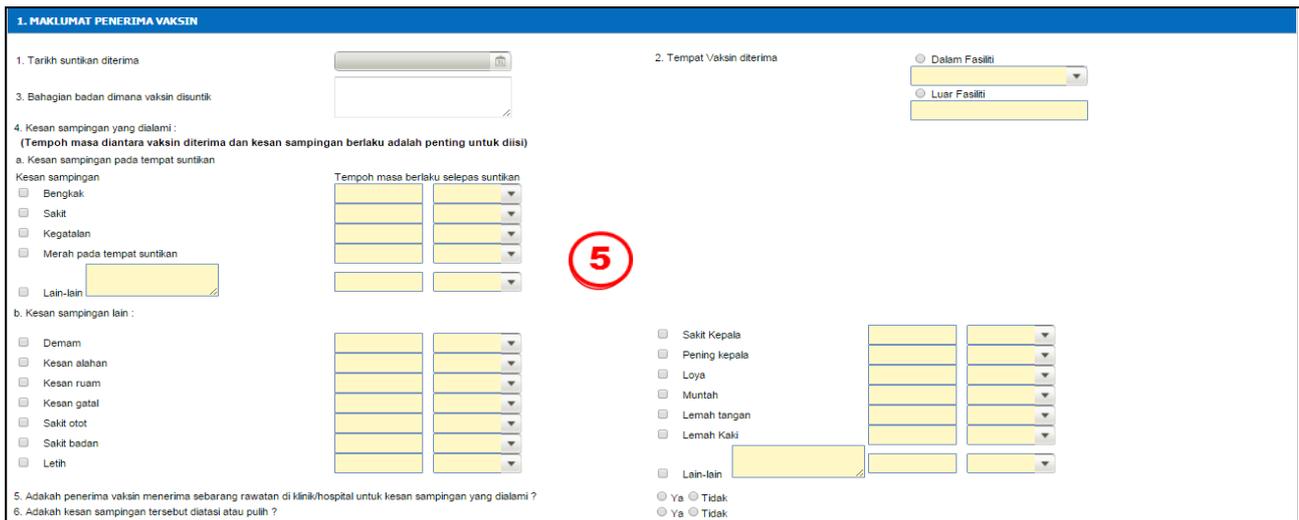
Figure 3.3-2 Select Registered Patient

STEP 3

Select patient record

STEP 4

Click on the  button to begin recording Adverse Event Following Immunisation for the selected MRN



The screenshot shows the '1. MAKLUMAT PENERIMA VAKSIN' form. It contains six main questions:

- Tarikh suntikan diterima
- Tempat Vaksin diterima (with radio buttons for 'Dalam Fasilitas' and 'Luar Fasilitas')
- Bahagian badan dimana vaksin disuntik
- Kesan sampingan yang dialami: (Tempoh masa diantara vaksin diterima dan kesan sampingan berlaku adalah penting untuk diisi)
 - a. Kesan sampingan pada tempat suntikan: Includes checkboxes for 'Bengkak', 'Sakit', 'Kegatalan', 'Merah pada tempat suntikan', and 'Lain-lain'. A table for 'Tempoh masa berlaku selepas suntikan' is present.
 - b. Kesan sampingan lain: Includes checkboxes for 'Demam', 'Kesan alahan', 'Kesan ruam', 'Kesan gatal', 'Sakit otot', 'Sakit badan', 'Letih', 'Sakit Kepala', 'Pening kepala', 'Loya', 'Muntah', 'Lemah tangan', 'Lemah Kaki', and 'Lain-lain'.
- Adakah penerima vaksin menerima sebarang rawatan di klinik/hospital untuk kesan sampingan yang dialami?
- Adakah kesan sampingan tersebut diatasi atau pulih?

 A red circle '5' highlights the 'Kesan sampingan' section.

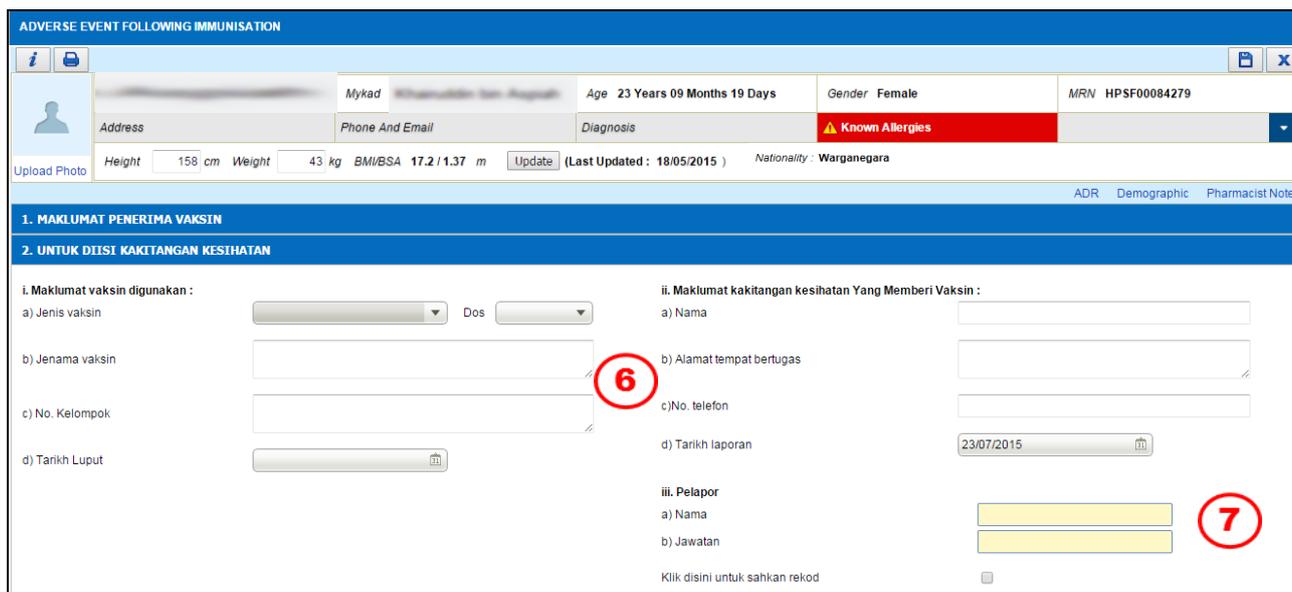
Figure 3.3-3 Maklumat Penerima Vaksin

STEP 5

Enter the information in Maklumat Penerima Vaksin section based on 6 main question if applicable:

1. Tarikh suntikan diterima
2. Tempat Vaksin diterima
3. Bahagian badan dimana vaksin disuntik
4. Kesan sampingan yang dialami
5. Adakah penerima vaksin menerima sebarang rawatan di klinik/hospital untuk kesan sampingan yang dialami

6. Adakah kesan sampingan tersebut diatasi atau pulih



ADVERSE EVENT FOLLOWING IMMUNISATION

Mykad: [REDACTED] Age: 23 Years 09 Months 19 Days Gender: Female MRN: HPSF00084279

Address: [REDACTED] Phone And Email: [REDACTED] Diagnosis: [REDACTED] **Known Allergies**

Height: 158 cm Weight: 43 kg BMI/BSA: 17.2 / 1.37 m Update (Last Updated: 18/05/2015) Nationality: Warganegara

1. MAKLUMAT PENERIMA VAKSIN

2. UNTUK DIISI KAKITANGAN KESIHATAN

i. Maklumat vaksin digunakan :

a) Jenis vaksin: [Dropdown] Dos: [Dropdown]

b) Jenama vaksin: [Text]

c) No. Kelompok: [Text]

d) Tarikh Luput: [Date]

ii. Maklumat kakitangan kesihatan Yang Memberi Vaksin :

a) Nama: [Text]

b) Alamat tempat bertugas: [Text]

c) No. telefon: [Text]

d) Tarikh laporan: 23/07/2015

iii. Pelapor

a) Nama: [Text]

b) Jawatan: [Text]

Klik disini untuk sahkan rekod

Figure 3.3-4 Untuk Diisi Kakitangan Kesihatan

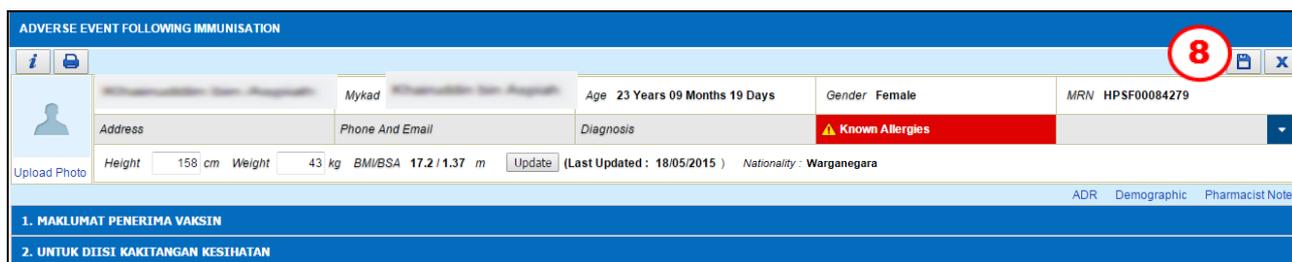
STEP 6

Enter the information in Diisi Kakitangan Kesihatan section based on 2 sub sections below:

- i. Maklumat vaksin digunakan
 - a) Jenis vaksin
 - b) Jenama vaksin
 - c) No Kelompok
 - d) Tarikh Luput
- ii. Maklumat kakitangan kesihatan Yang Memberi Vaksin
 - a) Nama
 - b) Alamat tempat bertugas
 - c) No telefon
 - d) Tarikh Laporan

STEP 7

Click on the checkbox 'Click here to confirm the record' to complete the report



ADVERSE EVENT FOLLOWING IMMUNISATION

Mykad: [REDACTED] Age: 23 Years 09 Months 19 Days Gender: Female MRN: HPSF00084279

Address: [REDACTED] Phone And Email: [REDACTED] Diagnosis: [REDACTED] **Known Allergies**

Height: 158 cm Weight: 43 kg BMI/BSA: 17.2 / 1.37 m Update (Last Updated: 18/05/2015) Nationality: Warganegara

1. MAKLUMAT PENERIMA VAKSIN

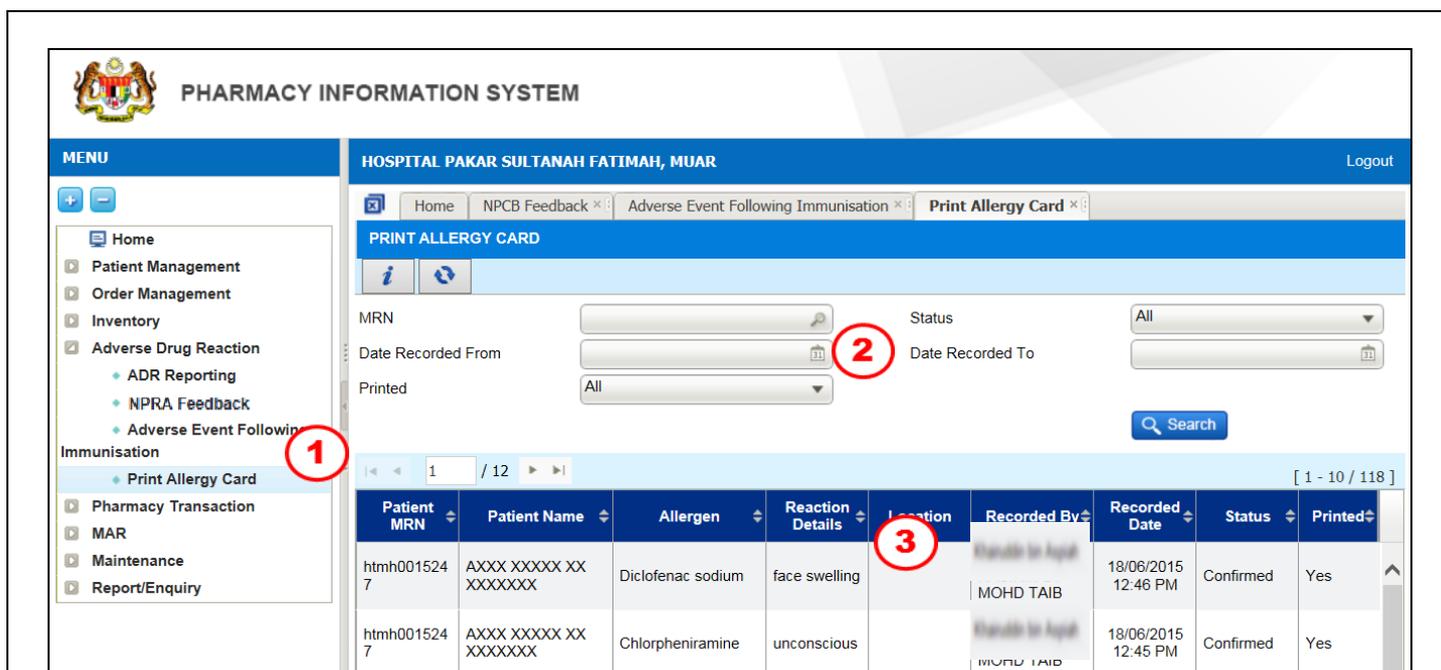
2. UNTUK DIISI KAKITANGAN KESIHATAN

Klik disini untuk sahkan rekod

Figure 3.3-5 Save Record

3.4 Print Allergy Card

The function of this menu is to print an allergy card for the patient



PHARMACY INFORMATION SYSTEM

HOSPITAL PAKAR SULTANAH FATIMAH, MUAR

Logout

Home NPCB Feedback Adverse Event Following Immunisation Print Allergy Card

PRINT ALLERGY CARD

MRN: Status: All

Date Recorded From: Date Recorded To:

Printed: All

Search

1 / 12 [1 - 10 / 118]

Patient MRN	Patient Name	Allergen	Reaction Details	Location	Recorded By	Recorded Date	Status	Printed
htmh0015247	AXXX XXXXX XX XXXXXXXX	Diclofenac sodium	face swelling		MOHD TAIB	18/06/2015 12:46 PM	Confirmed	Yes
htmh0015247	AXXX XXXXX XX XXXXXXXX	Chlorpheniramine	unconscious		MOHD TAIB	18/06/2015 12:45 PM	Confirmed	Yes

Figure 3.4-1 Print Allergy Card Listing Page

STEP 1

Select on 'Adverse Drug Reaction' menu followed by 'Print Allergy Card' sub menu

STEP 2

Search for the patient by below criteria:

No	Field	Description	Remark
a	MRN	Patient MRN	Allow to search patient by full or partial MRN No
b	Status	<ul style="list-style-type: none"> - All - Confirmed - Pending for Confirmation - To Print 	<ul style="list-style-type: none"> - All - Allow to search records by status Confirmed, Pending for Confirmation and To Print - Confirmed - Allow to search records of patients with confirmed drug allergy - Pending For Confirmation - Allow to search records of patient with drug allergy that is pending confirmation - To Print - Allow to search records of patient with confirmed drug allergy where allergy cars is not printed yet
c	Date Occurance From	-	Allow to search date before current date
d	Date Occurance To	-	Allow to search date later than date on Date Occurance From field

Table 3.4-1

Click on the  button and the system will display all related records

STEP 3

Double-click on record then select the checkbox as shown in Figure 3.4-1

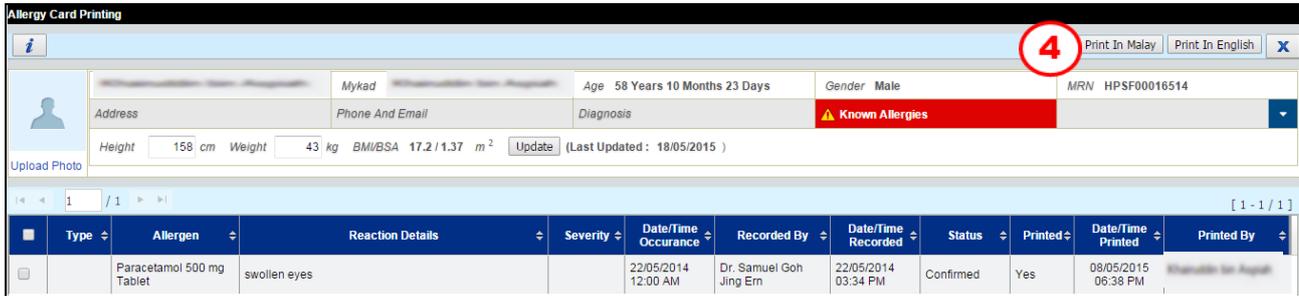


Figure 3.4-2 Selected Patient

Select to print the card in Malay or English by clicking on one of the below button:



System will display as shown in Figure 3.4-3.

Note

- Condition to print Allergy Card is:
 - Allergy record with status Confirmed and Suspected
 - Allergen Type = Drug

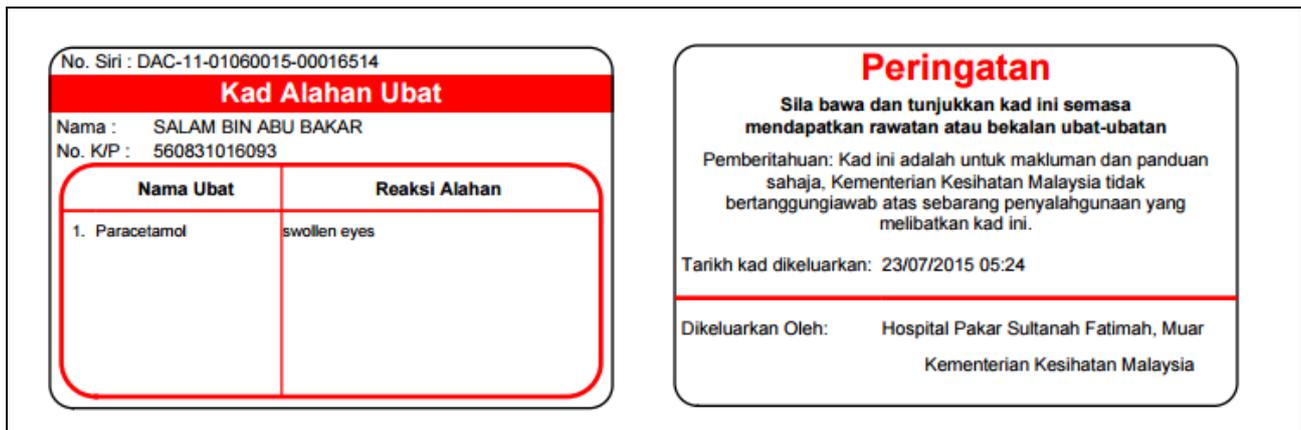


Figure 3.4-3 Allergy Card Sample

4.0 Acronyms

Abbreviation	Definition
PhIS	Pharmacy Information System
CPS	Clinical Pharmacy System
MOH	Ministry Of Health
MRN	Medical Record Number
ADR & DAC	Adverse Drug Reaction and Drug Allergic Card

5.0 Links to Clinical Modules

No	Module	PDF Links	No	Module	PDF Links
1	<i>Inpatient</i>	Click Here	12	<i>CDR Dispensing</i>	Click Here
2	<i>CDR Order</i>	Click Here	13	<i>Methadone Dispensing</i>	Click Here
3	<i>TDM Order</i>	Click Here	14	<i>PN Dispensing</i>	Click Here
4	<i>PN Order</i>	Click Here	15	<i>Order Management</i>	Click Here
5	<i>IV Order</i>	Click Here	16	<i>Patient Management</i>	Click Here
6	<i>Prepacking</i>	Click Here	17	<i>Radiopharmaceuticals</i>	Click Here
7	<i>Galenical</i>	Click Here	18	<i>Outpatient</i>	Click Here
8	<i>MTAC</i>	Click Here	19	<i>Special Drug Request</i>	Click Here
9	<i>ADR & DAC</i>	Click Here	20	<i>MAR</i>	Click Here
10	<i>Medication Counselling</i>	Click Here	21	<i>DICE</i>	Click Here
11	<i>Ward Pharmacy</i>	Click Here	22		