

## **Medication Review - List of Active Medications**

Users with the **'HT Submit'** or **'HT Update'** role can access the Medication Review option on their Dashboard.

1. From the Dashboard, click on the Medication Review link beside the Medication History option under the Health Tab.



2. In the Medication Review page that follows, select the Program Name and the Individual Name from the drop down menu.

	Medication Review
Program Name * Individual Name *	1st Street Group Home (Group Home)   Active, Mary
Cancel Back	Create Review List Attach Review Document

Then click on the 'Create Review List' button.

3. Select the Date range for Active Medication(s) from the Active Medication(s) page and click on the 'Show Medication(s)' button.

Individual Name:	Mary Active	
Date range for active Medication(s):	From * 01/01/2015	To * 08/31/2015
Home Medication:		



4. Once you click on the 'Show Medication(s)', a list of all Active Medications will appear for the given date range.

Active Medication(s)													
	Individual Name Date range for a Medication(s):	: active	Mar Fro	y Active om 01/01/	2015			To 08/31/2	015				
Sel	Medication(s) ect: None				•								
	Medication Name		Measurement Unit	Dose form	Home Medication	lome Iedication		Medication Type	Begin Date	End Date	Discontinued Date	ontinued e	
	NAPROSYN 250 MG TABLET			Tablet	Yes	Oral (mouth)		Other	02/01/2012			Approved	1st Street
	ANSAID 100 MG TABLET	.125	Unit dose	Tablet		Oral (mouth)	1 X DAILY	Scheduled (Treatment)	03/13/2012			Approved	1st Street
	ABCD				No			Other	01/01/2013			Approved	1st Street
	Napa Tablet				No			Other	02/01/2013			Approved	1st Street
	Napa Tablet				No			Scheduled (Medication)	02/01/2013			Approved	1st Street
	Napa Tablet				No			Scheduled (Medication)	02/01/2013			Approved	1st Street
	GEMFIBROZIL 600 MG TABLET	600	mg	Tablet	No	Oral (mouth)	AS NEEDED	Scheduled (Medication)	04/01/2013			Approved	1st Street
	GABITRIL 12 MG TABLET	12	mg	Tablet	No	Oral (mouth)	EVERY OTHER DAY	Scheduled (Medication)	04/01/2013			Approved	1st Street

 You may click on any of the Medication Type links and the checkbox(es) beside the particular medications will be checked.

> You may click on the 'Change Date Range' button to change the date range and generate another Medication list. To export the Active Medication(s) list to PDF, click on the PDF' 'Export to button.

	Indi	vidu	al Name	e:		м	ary Active										
Date range for active From 01/01/2015 Medication(s):							rom 01/01	/2015	.5 To 08/31/2015								
	Medi	cati	on(s)														
le	ect:	Nor	ne					•									
	Medication Name NAPROSYN 250 MG TABLET		Dose <sup>Measure</sup> Unit		ureme	ntDose form	Home Medicat	ion <sup>Route</sup>	Frequency	Medication	Begin Da	ate End Date	Discontinu Date	<sup>ed</sup> Status	Program	n	
1			YN 250 .ET	N 250 ET			Tablet	Yes	Oral (mouth)	,	Other	02/01/2012	012		Approve	d 1st Street	
7	ANS TAE	SAID BLET	100 MG	.125	Unit d	ose	Tablet		Oral (mouth)	1 X DAILY	Scheduled (Treatment	) 03/13/20	012		Approve	d 1st Street	
7	ABCD Napa Tablet						No			Other	01/01/20	013		Approve	d 1st Street		
1			blet				No			Other	02/01/20	013		Approved	d 1st Street		
7	Nap	а Та	blet					No			Scheduled (Medication	) 02/01/20	013		Approve	d 1st Street	
7	Na GE	Acetan		inophe	en	mg		Tablet	No	Oral (mouth)	Si (M	cheduled 1edication)	10/01/2014 0	7/16/2015 08	/27/2015	Discontinued	1 S G H
7	G/ T/		ACEBUT 400 MG CAPSUL	FOLOL .E				Capsules	No	Oral (mouth)	0	ther	07/01/2015			Approved	1 S G H
		CAT'S CLAW CAPSULE				Capsules	No	Oral (mouth)	Oth	ther	07/31/2015			Approved	1 S G H		
	ACEBU 400 MC CAPSU		ACEBUT 400 MG CAPSUL	EBUTOLOL MG Application PSULE		Capsules	No	Oral (mouth)	0	ther	07/30/2015			Approved	1 5 6 F		
			GATIFLO 0.5% E DROPS	OXAC: YE	IN			Drops	No		Si (M	cheduled 1edication)	08/01/2015			Approved	1 5 0 1