Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department of Pharmacy Started By: \_\_\_\_\_\_\_\_\_\_\_

New/Change Product Checklist

* Brand Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Refrigerated Drug: Yes**□ **No**□
* Generic Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Inner NDC: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ABC8 #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Outer NDC: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reason for Switch:** □ **Brand to Generic** □ **Drug Shortage/Backorder** □ **New Drug** □ **NDC/Barcode Change**

 **Info**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Systems to Update: □ **New Primary**

* Automated Medication Management Systems (ex. Talyst) Initials
	+ Drug set up (Inner NDC Number – Outer NDC Number) \_\_\_\_\_\_
	+ Scan Bar Codes \_\_\_\_\_\_
	+ Add New Location/A Location \_\_\_\_\_\_
	+ Add/Change wholesaler, product ID and par levels (min/max) \_\_\_\_\_\_
* Drug Dispensing Cabinets (ex. Pyxis)
	+ Assign Pyxis ID \_\_\_\_\_\_\_\_
	+ Drug set up (Inner NDC Number – Outer NDC Number – Barcodes) \_\_\_\_\_\_
	+ Set up in C2 Safe \_\_\_\_\_\_
	+ Scan bar codes \_\_\_\_\_\_
	+ Med stations update par levels \_\_\_\_\_\_
* Electronic Health Record Systems (ex. Cerner)
	+ Add new product/update existing \_\_\_\_\_\_
	+ Unit cost \_\_\_\_\_\_
	+ Package cost \_\_\_\_\_\_
	+ Billing Information \_\_\_\_\_\_
		- COD/COA \_\_\_\_\_\_
		- CDM Code \_\_\_\_\_\_
		- Pricing Schedule \_\_\_\_\_\_
		- HCPCS Code \_\_\_\_\_\_
	+ Barcode \_\_\_\_\_\_
	+ Update Order Catalog (Mask – Linking) \_\_\_\_\_\_
	+ Update Charge Services (JCODE/QCF) \_\_\_\_\_\_
* Pharmacy Workflow Managers (ex. DoseEdge)
	+ Drug Set up (Inner NCD Number – Outer NDC Number – Barcodes \_\_\_\_\_\_
* 340B Management (ex. MacroHelix)
	+ Add/Update Product (NDC – Pyxis ID – BUPP – Vendor) \_\_\_\_\_\_
	+ 340B Qualification settings \_\_\_\_\_\_
* Charge Master (ex. Craneware)
	+ New CDM Request \_\_\_\_\_\_
* Repackaging
	+ Use Existing Canister \_\_\_\_\_\_
	+ Purchase New Canister? \_\_\_\_\_\_
	+ Auto Pack or MILT \_\_\_\_\_\_

**Clinical Review Completed By:** \_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| Category | Old Medication | Replacement Medication |
| Haz Med / Haz Waste |  |  |
| Carbohydrate Warning |  |  |
| Latex / Alcohol / CHO / Gluten Free |  |  |
| Preservatives: BA, Methylparaben |  |  |
| Multiuse or Single Use |  |  |