

EMR Digital Health Drug Repository (DHDR)

Requirements

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Table of Contents

1. INTRODUCTION	3
1.1 OVERVIEW	3
1.2 VERSION HISTORY	3
1.3 SCOPE	7
1.3.1 <i>In Scope</i>	7
1.3.2 <i>Out of Scope</i>	7
1.4 ASSUMPTIONS	7
1.5 DEPENDENCIES	7
1.6 NOTES	7
1.7 RELATED DOCUMENTS, REFERENCES AND SOURCES	8
2. EMR REQUIREMENTS	9
2.1 EHR SERVICE	10
2.2 SEARCH DRUG AND PHARMACY SERVICE DISPENSE EVENTS	11
2.3 DHDR EHR VIEWS	14
2.3.1 <i>Drug Dispense Summary View</i>	18
2.3.2 <i>Drug Dispense Comparative View</i>	21
2.3.3 <i>Drug Dispense Detailed View</i>	23
2.3.4 <i>Pharmacy Service Summary View</i>	24
2.3.5 <i>Pharmacy Service Comparative View</i>	27
2.4 PATIENT CONSENT DIRECTIVE	28
2.4.1 <i>PCOI Connection</i>	28
2.4.2 <i>Identifying a Patient Consent Directive</i>	29
2.4.3 <i>Proceeding with a Temporary Consent Override</i>	31
2.4.3.1 Setting the Context Data in the Context Management Service	31
2.4.3.2 Initiating a Consent Override Request	32
2.4.3.3 Handling Consent Override Responses	33
2.5 ONTARIO DRUG BENEFIT (ODB) FORMULARY AND EXCEPTIONAL ACCESS PROGRAM (EAP)	34
2.6 PRINTING AND REPORTING	35
2.7 ERROR AND WARNING MANAGEMENT	37
2.8 LOGGING AND AUDITING	39
3. APPENDIX A: ADDITIONAL REFERENCES	41

1. INTRODUCTION

1.1 Overview

This document defines the requirements for an EMR Offering to integrate with the provincial Digital Health Drug Repository (DHDR) EHR Service, which is hosted on the ONE Access Gateway (OAG). The intended audiences of this document are business and technical implementers interested in implementing functionality within an EMR Offering to access patients' drug dispense events and pharmacy service events information retrieved from the DHDR EHR Service.

1.2 Version History

VERSION	REVISION DATE	NOTES
1.0	2019-12-13	a) Initial Draft for Comment release.
2.0	2020-07-13	a) Updated reference to DHDR HL7 FHIR Implementation Guide to the latest version. b) Updated PCOI from patient consent to provincial consent. c) Updated DHDR02.01 for clarity of where the search function needs to exist. d) Updated DHDR02.02 to align patient search parameters available in the DHDR. e) Updated DHDR02.03 for automatic population of search parameters. f) Updated DHDR02.05 and DHDR02.06 for searching and displaying dispense history. g) Added DHDR03.03 for disabling the disclaimer. h) Updated DHDR03.04, DHDR03.05, and DHDR03.06 for retrieving dispense events. i) Updated DHDR09.01 dealing with the EMR Offering being able to handle a consent directive response. j) Added DHDR09.02 for the ability to display a consent directive message. k) Updated DHDR09.03 to reflect handling consent blocks more accurately. l) Updated DHDR09.05 for consent block cancellation messaging. m) Updated section 2.4.2.1 referencing context sharing parameters. n) Updated DHDR10.03 to reference EMR Integration with Viewlet Framework documentation. o) Updated DHDR12.01 to clarify the URL and how it may be instantiated.
2.2	2020-12-09	a) Updated DHDR01.02 to make it required to restrict changes to the EHR Service endpoint values to certain users only. b) Updated DHDR02.04 to identify that a user-defined default setting is acceptable for the default date range for DHDR searches. c) Re-sequenced requirements beginning with DHDR03.01 to DHDR03.04 to accommodate for the re-organization of the requirements. d) Updated DHDR03.01 to include displaying all dispense events in descending chronological order. e) Updated DHDR03.02 for clarity and to include functionality to identify discrepancies in patient information between an EMR Offering and the EHR Service. f) Updated DHDR04.01 to include dose and frequency information in the Summary View and to display in reverse chronological order in the Summary View. g) Updated DHDR04.02 to clarify the set of requirements to group similar drug dispense events. h) Updated DHDR05.01 to include displaying patient medication records from the EMR in the Drug Dispense Comparative View.

VERSION	REVISION DATE	NOTES
		<ul style="list-style-type: none"> i) Retired DHDR05.04. The requirement is already defined in DHDR05.02. j) Retired DHDR05.05. The requirement is already defined in DHDR05.01. k) Updated DHDE06.01 to clarify the mandatory prescriber information in the Detailed View. l) Updated DHDR07.01 to rename “Service Date” to “Packaged Date” and replaced the pharmacy phone number with a pharmacy fax number. m) Updated DHDR07.02 to clarify the displaying and sorting of grouped events in the Pharmacy Service View. n) Updated DHDR08.01 to identify the source of information for the Pharmacy Service Comparative View. o) Updated DHDR08.02 to identify the source of information for Pharmacy Service Comparative View and to identify that any grouping of Pharmacy Service events is not needed. p) Added DHDR09.01 for extraction and use of PCOI endpoint values. This functionality existed in Viewlet Framework requirements and was moved to DHDR requirements instead. q) Re-sequenced DHDR09.02 (previously DHDR09.01) to DHDR09.06 (previously DHDR09.05) to accommodate the new requirement DHDR09.01. r) Updated DHDR13.03 for clarity on reporting and to include patient name and health card in reports and search functionality. s) Updated DHDR15.01 to be more consistent with standard logging requirements.
2.3	2021-05-20	<ul style="list-style-type: none"> a) Updated specification status to Draft for Use (DFU). b) Updated reference to Check Medication Coverage – Drug Formulary. c) Updated reference to ONE Access Viewlet Framework – Developer Guide. d) Updated reference to Ontario Digital Health Drug Repository (DHDR) – Point of Care Systems Access – HL7 FHIR Implementation Guide. e) Removed reference to Best Possible Medication History which is no longer available. f) Updated reference to Special Authorization Digital Information Exchange (SADIE). g) Added reference to Electronic Health Record Request for Correction to Personal Health Information Policy for ministry policies and processes (beyond EMR functionality) to correct EHR data or modify a consent directive. h) Updated CDS-S FHIR references to match the current version of the CDS-S and added a note to identify when CDS-S elements are referenced in requirements. i) Corrections to errata. j) Updated DHDR02.04 to add a recommendation to include time components when a search is sent with a date component. k) Updated DHDR02.05 for consistency in informing the user of returned search results. l) Updated DHDR03.03 for criteria when a warning is displayed to be consistent with DHIR. m) Re-sequenced DHDR05.04 (Previously DHDR05.06) to accommodate for retired requirements. n) Updated DHDR09.04 for clarity on actions performed by the EMR Offering. o) Updated DHDR13.01 to standardize printing functionality and to identify the source of the patient demographics needed on printouts. p) Updated DHDR15.01 for clarity on the FHIR Message ID.
2.3	2021-05-31	Updated specification status to Final.
3.0	2023-09-18	<ul style="list-style-type: none"> a) Updated reference links in Section 1.7 Related Documents, References and Sources. b) Modified DHDR01.01 to utilize DHDR target endpoint.

VERSION	REVISION DATE	NOTES
		<ul style="list-style-type: none"> c) Enhanced DHDR01.02 with dynamic endpoint details, current value, and reference. d) Clarified DHDR02.01, adding a reference to the FHIR implementation guide. e) Refined DHDR02.02, adding Date of Birth, optional Gender, Last Name, First Name, and clearer guidelines. f) Merged DHDR02.02 and DHDR02.03 to reduce redundancy and ensure that related guidelines are presented together for a more comprehensive understanding, renumbered subsequent requirements. g) Specified 120 days as suggested date range in DHDR02.03, allowing default change at clinic/user level. h) Clarified wording in DHDR02.05. i) Described Pharmacy comparative view in DHDR EHR Views as medication history from EMR Offering in Section 2.3. j) Added Pharmacy Service Views to DHDR03.01. k) Enhanced clarity in DHDR03.02, specifying unacceptable solutions. l) Defined presentation of disclaimer in DHDR03.03. m) Retired DHDR03.04, renumbered subsequent requirements. n) Modified DHDR03.04 to enable date range filtering and excluded Therapeutic Class for pharmacy service events. o) Limited sorting to Summary and Comparative Views in DHDR03.05. p) Introduced new requirement DHDR03.06 for standard Date format. q) Enriched DHDR04.01 with additional fields and improved guidelines clarity. r) Updated DHDR04.03 to collapse grouped dispense events by default, allowing optional functionality. s) Clarified DHDR05.01 requirement, merged and streamlined DHDR05.03. t) Simplified DHDR05.02 and included Prescription Written or Start date, chronological order. u) Retired DHDR05.03, renumbered as DHDR05.03. v) Modified DHDR06.01, removing the "Important" statement to align with updated FHIR elements. w) Revised DHDR07.01, changing Packaged date to Dispense date, displaying total Pharmacy service events count, and updating FHIR elements. x) Merged DHDR08.02 into DHDR08.01 for consistent wording; retired DHDR08.02; renumbered DHDR08.03 to DHDR08.02. y) Clarified DHDR09.01, added PCOI key's current value. z) Updated DHDR09.02 reference to the latest DHDR HL7 FHIR Implementation Guide version. a) Enhanced clarity in DHDR09.03's wording. b) Revised DHDR09.04 guideline to include cancel option, record reason for continuing and refuse actions and improved clarity.

VERSION	REVISION DATE	NOTES
		<ul style="list-style-type: none"> c) Retired DHDR09.05, merged with DHDR09.04, and renumbered. d) Modified DHDR09.05: removed reason for cancel workflow, clearer guidelines. e) Clarified DHDR10.01 and added profiles in the guidelines. f) Enhanced DHDR10.02 clarity, moved to "Initiating a Consent Override Request" section. g) Added note in DHDR10.03: EMR Offering doesn't need to wait for CMS reply. h) Updated section titles of 2.4.3.2 and 2.4.3.3. i) Referenced ONE Access Viewlet Framework document in DHDR11.01. j) Renumbered DHDR11.02 to DHDR10.04, moved to 2.4.3.2. k) Clarified DHDR11.03: info auto resubmitted to DHDR EHR Service. l) Retired DHDR11.04 due to PCOI message source change. m) Expanded DHDR12.01 and DHDR12.02 with info and optional features. n) Updated DHDR13.01: display DHDR disclaimer and EMR confidentiality statement; reworded for clarity. o) Updated DHDR13.02 (previously DHDR13.03) for consistency, including EMR User's status choices, Unique ID instead of HCN, Audit note. p) Merged DHDR 13.02 and DHDR13.04 with DHDR13.01 and retired this requirement. q) Notified unresponsive DHDR service in DHDR14.01 and added displayed Data elements. r) Enhanced DHDR15.01: added patient identifier, improved clarity. s) Updated DHDR15.02 to match DHDR15.01 field names, removed Unique ID of EMR user. t) Retired DHDR15.03 since the suppress disclaimer functionality is removed.

1.3 Scope

1.3.1 In Scope

- Retrieval of drug dispense events and pharmacy service events for patients from the DHDR EHR Service and presenting it in the EMR Offering
- EMR functionality to interact with the Provincial Consent Override Interface (PCOI) Viewlet to process any encountered temporary patient consent block in the DHDR EHR Service
- EMR functionality to interact with the PCOI Viewlet using patient context management

1.3.2 Out of Scope

- EMR functionality to reconcile prescription events in the EMR Offering and drug dispense events in the DHDR EHR Service
- Submission of prescription or drug dispense events from the EMR Offering to the DHDR EHR Service
- EMR functionality to make corrections to provider, patient and drug or pharmacy event information maintained in the DHDR EHR Service

1.4 Assumptions

- Readers have a general understanding of EMRs and clinical workflows.
- Readers have a level of understanding of Health Level Seven (HL7) Fast Healthcare Interoperability Resources (FHIR).
- Readers have a level of understanding of RESTful APIs.

1.5 Dependencies

To streamline the user experience, maintain security, and safeguard the privacy of PHI, an EMR Offering must adhere to the EMR EHR Connectivity Specification to be able to connect to any provincial EHR service.

1.6 Notes

FHIR elements may be identified in the requirements using either square brackets or rounded brackets. Examples:

- **Round brackets:** (Patient.name.given) references an element following the EMR Core Data Set Standard (CDS-S), which may not necessarily match the EHR Service implementation guide.
- **Square brackets:** [Organization.name] references an element from the implementation guide specific to the EHR Service.

1.7 Related Documents, References and Sources

ID	NAME	VERSION	DATE
1	Check Medication Coverage – Drug Formulary (Ministry of Health, 2023) https://www.ontario.ca/check-medication-coverage/	N/A	2023-07-30
2	EMR EHR Connectivity Specification (OMD, 2022) https://www.ontariomd.ca/emr-certification/library/specifications	2.4	2021-05-31
3	ONE Access Viewlet Framework – Developer Guide (Ontario Health Digital Services, 2021) https://ehealthontario.on.ca/en/standards/one-access-viewlet-framework-developer-guide	1.7	2021-03
4	Ontario Digital Health Drug Repository – HL7 FHIR Implementation Guide (Ministry of Health, 2023) https://ehealthontario.on.ca/en/standards/ontario-digital-health-drug-repository-hl7-fhir-implementation-guide	4.0.0 (Draft)	2023-03-31
5	Special Authorization Digital Information Exchange (SADIE) (Ministry of Health, 2022) http://www.health.gov.on.ca/en/pro/programs/sadie/	N/A	2022-10-05
6	Information Available to Health Care Providers through the Digital Health Repository (Ministry of Health, 2021) http://www.forms.ssb.gov.on.ca/mbs/ssb/forms/ssbforms.nsf/FormDetail?OpenForm&ACT=RDR&TAB=PROFILE&SRCH=&ENV=WWE&TIT=5056-87E&NO=014-5056-87E	2017/02	2021-05

2. EMR REQUIREMENTS

This section consists of the EMR functional requirements to interact with the DHDR EHR Service.

Support:

M = Mandatory. EMR offerings certified for this specification **MUST** support this requirement.

O = Optional. EMR vendors **MAY** choose to support this requirement in their certified EMR offering.

Status:

N = New requirement for this EMR Specification version.

P = Previous requirement.

U = Updated requirement from the previous EMR Specification version.

R = Retired requirement from the previous EMR Specification version.

OMD #:

A unique identifier that identifies each requirement within OMD's EMR Specifications Library

CONFORMANCE LANGUAGE

The following definitions of the conformance verbs are used in this document:

- **SHALL/MUST** – Required/Mandatory
- **SHOULD** – Best Practice/Recommendation
- **MAY** – Acceptable/Permitted

The tables that follow contain column headings named: 1) "Requirement," which generally contains a high-level requirement statement; and 2) "Guidelines," which contains additional instructions or detail about the high-level requirement. The text in both columns is considered requirement statements.

2.1 EHR Service

The following EMR requirements apply to EMR Functionality specific to interfacing and connecting to the DHDR EHR Service.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR01.01	The EMR Offering MUST be able to interface with the DHDR EHR Service.	The EMR Offering MUST support the HL7 Fast Healthcare Interoperability Resources (FHIR) messages in accordance with the DHDR HL7 FHIR Implementation Guide to interface with the DHDR EHR Service.	M	U
DHDR01.02	The EMR Offering MUST use the DHDR target endpoint(s) to access the DHDR EHR Service.	<p>The EMR Offering MUST dynamically build the DHDR target endpoint using the FHIR issuer endpoint extracted from the OAuth2 toolbar and DHDR endpoint.</p> <p>The EMR Offering MUST restrict the ability to change the endpoint value to specific EMR role(s).</p> <p>The EMR Offering MAY support the configuration of the DHDR endpoint.</p> <p>The current value of the DHDR endpoint is "MedicationDispense". This value may change over time.</p> <p>Refer to the One Access Gateway requirements in the EMR EHR Connectivity Specification for specific fields needed.</p> <p>Informational: The EHR Service endpoint value will be provided by OHDS during connectivity testing for the various EHR Service environments.</p>	M	U

2.2 Search Drug and Pharmacy Service Dispense Events

The following EMR requirements apply to EMR functionality specific to searching medication events.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR02.01	The EMR Offering MUST have the functionality to allow the EMR user to search the DHDR EHR Service from the patient chart.	<p>The functionality to search the DHDR EHR Service MUST be available to support the workflow to display the patient's medications.</p> <p>It is acceptable to build the functionality within the patient medication management module.</p> <p>NOTE: Refer to Profile:MedicationDispense section in DHDR-FHIR Implementation Guide (MedicationDispense.category) for additional information about the type of medication dispensed to distinguish between drugs and professional pharmacy services.</p>	M	U
DHDR02.02	The EMR Offering MUST have the functionality to initiate a query to the DHDR EHR Service using the patient's demographics, and patient information stored in the EMR Offering MUST be used to automatically populate DHDR EHR Service search parameters.	<p>The Ontario Health Card Number (HCN) (Patient.identifier:JHN.value) from the EMR Offering MUST be automatically included in the request to the DHDR EHR Service.</p> <p>The EMR Offering MAY search using additional patient demographic data as supported by the DHDR EHR Service.</p> <ol style="list-style-type: none"> 1. Last Name (Patient.name.family) 2. First Name (Patient.name.given) 3. Date of Birth (Patient.birthDate) 4. Gender (Patient.gender), ensure to only send the patient genders that are supported by the DHDR EHR Service <p>The EMR Offering MUST NOT allow a request to be sent to the DHDR EHR Service if any mandatory patient data is missing.</p>	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		<p>The EMR user MUST NOT be required to manually provide patient values to the DHDR EHR Service search parameters when patient values are stored and can be provided by the EMR Offering without EMR user intervention.</p> <p>Additionally, the EMR Offering MUST NOT allow the EMR user to manually fill in the missing DHDR Search parameters when launching the DHDR Search.</p> <p>The ability for an EMR Offering to populate patient information MUST be restricted to a patient chart or window that explicitly references an individual patient.</p> <p>It is not acceptable to automatically populate information where it may be ambiguous as to which patient data was referenced (e.g., from a window that displays information about two or more patients).</p> <p>Note: Only Ontario HCNs are supported currently. Refer to the DHDR HL7 FHIR Implementation Guide for the most up-to-date list of supported HCNs.</p> <p>Refer to the “Supported Search Parameters” in the “Medication Dispense Search” section in the DHDR HL7 FHIR Implementation Guide for more information on search parameters.</p>		
DHDR02.03	The EMR Offering MUST have the functionality to search the DHDR EHR Service for the patient’s dispense history by date range.	<p>At a minimum, the EMR Offering MUST have the functionality to allow searching by all the following date range options for the patient:</p> <ul style="list-style-type: none"> a) Number of days prior to the current date (suggested default is 120 days). b) A date range manually entered or adjustable by the EMR user. c) The ability to search for all available events (with no explicit date range). 	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		<p>The EMR Offering MUST have the functionality to allow the EMR user to change the default value for number of days and date range options (a and b above) at the clinic level or on a per-user basis.</p> <p>The EMR Offering MUST have the functionality to change the default date range.</p> <p>The EMR Offering MUST NOT replace the default date range at the clinic or EMR user level when the user modifies the date range while performing a DHDR EHR search.</p> <p>To ensure an accurate date range is searched, the EMR Offering MAY use less than or equal to (\leq), greater than or equal to (\geq) operators to define the date range when searching the DHDR EHR Service.</p> <p>Refer to the “Search Medication and Pharmacy Service Dispenses” section of the “DHDR FHIR – Implementation Guide” for details on search parameters supported by the EHR Service.</p>		
DHDR02.04	The EMR Offering MUST inform the EMR user when a search to the DHDR EHR Service for the patient’s drug dispense history returns no records.	<p>Where there is a valid return of 0 (zero) results, the following is a suggested message to display:</p> <p>“No records found for the specified search date period.”</p> <p>Note: No events being returned may be a result of the patient having no history, or no events existing for the period searched.</p>	M	U
DHDR02.05	The EMR Offering MUST display the search period along with all search results from DHDR EHR Service.	Whenever a search for a patient’s drug dispense history is performed (where zero or more drug dispense events are returned for the patient), the search period (date range, absolute value or all events) used MUST be displayed along with the search results.	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		The EMR Offering SHOULD use consistent Date format when displaying the results from DHDR EHR Service or indicate that the search includes dispense events with non-explicit date range(s) (e.g., searching for all available dispense events may not require explicit start and end dates and times).		

2.3 DHDR EHR Views

There are five different views of the patient’s drug dispense history and two views of the patient’s pharmacy service history:

1. **Drug Dispense Summary View** – Provides a means to list multiple drug dispense events for a given patient. Drug dispense events that share the same generic name, strength, and dosage form are grouped under the most recent drug dispense event in that grouping, with the means to show and hide the grouped events.
2. **Drug Dispense Comparative View** – Displays a list of recorded medications within an EMR for a given patient, with drug dispense history from the DHDR EHR Service. The Comparative View does not reconcile information from the EMR Offering and the DHDR EHR Service.
3. **Drug Dispense Detailed View** – Provides a means to drill down or expand on a single drug dispense event to provide more information.
4. **Pharmacy Service Summary View** – Provides a means to list multiple pharmacy service events for a given patient. Pharmacy service events that share the same pharmacy service type are grouped under the most recent pharmacy service in that grouping with the means to show and hide the grouped events.
5. **Pharmacy Service Comparative View** – Displays a list of recorded medications within an EMR Offering for a given patient, with pharmacy service events from the DHDR EHR Service. The Comparative view does not reconcile information from the EMR Offering and the DHDR EHR Service.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR03.01	The EMR Offering MUST have the functionality to display all drug dispense and pharmacy service events retrieved from the DHDR EHR Service.	<p>The EMR Offering MUST support the following DHDR EHR Views:</p> <ul style="list-style-type: none"> a) Drug Dispense Summary View b) Drug Dispense Comparative View c) Drug Dispense Detailed View d) Pharmacy Service Summary View e) Pharmacy Service Comparative View <p>The EMR Offering MUST indicate the total number of results returned from a search for every view listed above.</p> <p>All drug dispense and pharmacy service events received from DHDR EHR Service MUST be displayed in descending chronological order (with the most recent event first) by default.</p>	M	U
DHDR03.02	When displaying drug dispense or pharmacy service events retrieved from the DHDR EHR Service, the patient MUST be identified.	<p>The following patient information (if available) from both the EMR Offering and DHDR EHR service, MUST be displayed whenever displaying events retrieved from the DHDR EHR Service:</p> <ul style="list-style-type: none"> a) First name (Patient.name.given) b) Last name (Patient.name.family) c) Health Card Number (HCN) (Patient.identifier:JHN.value) d) Gender (Patient.gender) e) Date of birth or age (Patient.birthDate) <p>The EMR Offering MUST visually or otherwise identify and display any patient information that does not match between the EMR Offering and the DHDR EHR Service.</p>	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		<p>It is not acceptable for the EMR Offering to automatically update patient information stored within the EMR Offering to match patient information retrieved from the EHR Service.</p> <p>It is not acceptable for the EMR Offering to run a report or navigate to a different location to identify patient information.</p> <p>Refer to the DHDR FHIR Implementation Guide in the Profile: Patient section for the list of patient information returned by the DHDR EHR Service.</p>		
DHDR03.03	<p>The EMR Offering MUST include the DHDR disclaimer when displaying drug dispense events or pharmacy service events retrieved from the DHDR EHR Service.</p>	<p>The EMR Offering MUST display the following DHDR disclaimer in both Summary and Comparative views, regardless of the number of returned drug dispense events (i.e., zero, one, or more). However, the DHDR disclaimer must not overlay on top of the returned drug events or affect usability.</p> <p>The implementation should be non-intrusive to the EMR workflow, allowing users to view results without the need to "close" the DHDR disclaimer.</p> <p><i>"Warning: Limited to Drug and Pharmacy Service Information available in the Digital Health Drug Repository (DHDR) EHR Service. To ensure a Best Possible Medication History, please review this information with the patient/family and use other available sources of medication information in addition to the DHDR EHR Service. For more details on the information available in the DHDR EHR Service, please click [URL]."</i></p> <p>The EMR Offering MUST include a URL to the referenced form as a functioning hyperlink in the DHDR disclaimer.</p> <p>Refer to "Information Available to Health Care Providers through the Digital Health Repository" in the Related Documents, References and Sources section of this document for the webpage of where to obtain the URL to the form to insert into the DHDR disclaimer.</p>	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		<p>Note: This DHDR disclaimer is subject to change by the MOH.</p>		
DHDR03.04	The EMR Offering MUST have the functionality to filter the drug dispense events and pharmacy service events retrieved from the DHDR EHR Service.	<p>The EMR Offering MUST allow the EMR user to filter by the following elements in all Summary and Comparative views:</p> <ul style="list-style-type: none"> a) Generic name [Medication.code.coding:drugGeneric.display] b) c) Dispensed date [MedicationDispense.whenPrepared] d) Prescriber Name [Practitioner.name.family], [Practitioner.name.given] <p>The EMR Offering MUST indicate the elements that are being actively filtered and have the ability to remove these active filters,</p> <p>The EMR Offering MUST pre-populate the filters with distinct values received from the DHDR EHR Service.</p> <p>Note: Any pre-existing filtering capabilities for medication data maintained in the EMR Offering SHOULD be supported in the Comparative View.</p>	M	U
DHDR03.05	The EMR Offering MUST have the functionality to sort the drug dispense and pharmacy service events in ascending/descending order when they are retrieved from the DHDR EHR Service.	<p>The EMR Offering MUST allow the EMR user to sort the drug dispense and pharmacy service events from DHDR EHR service and drug dispense events in the EMR Offering by the following elements:</p> <ul style="list-style-type: none"> a) Generic name [Medication.code.coding:drugGeneric.display] b) Dispensed date [MedicationDispense.whenPrepared] <p>The EMR Offering MUST indicate the elements are being actively sorted in the Comparative View.</p>	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		Note: Any pre-existing sorting capabilities for medication data maintained in the EMR Offering SHOULD be supported in the Comparative View.		
DHDR03.06	The EMR Offering MUST display date fields in a consistent date format across DHDR EHR views.		M	N

2.3.1 Drug Dispense Summary View

The following EMR requirements apply to functionality specific to the Drug Dispense Summary View.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR04.01	The EMR Offering MUST have the functionality to display a Drug Dispense Summary View for drug dispense events by default.	<p>The following information for each drug dispense event retrieved from the DHDR EHR Service MUST be displayed in the Drug Dispense Summary View:</p> <p><u>Drug Information</u></p> <ul style="list-style-type: none"> a) Dispensed Date [MedicationDispense.whenPrepared] b) Pickup date [MedicationDispense.whenHandedOver] c) Generic name (of the dispensed drug) [Medication.code.coding:drugGeneric.display] d) Drug strength [Medication.amount Or Medication.ingredient.strength] e) Drug dosage form (e.g., tablet, capsule, injection) [Medication.form] f) Dose [MedicationDispense.dosageInstruction.doseAndRate.dose[x]] g) Frequency [MedicationDispense.dosageInstruction.timing] h) Estimated days' supply [MedicationDispense.daysSupply.value] i) Dispensed quantity [MedicationDispense.quantity.value], [MedicationDispense.quantity.unit] j) Refills remaining [MedicationDispense.extension:DispenseRemainingRefills] 	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		<p>k) Quantity remaining [MedicationDispense.extension:DispenseRemainingQuantity]</p> <p><u>Prescriber Information</u></p> <p>l) Prescriber first name (Practitioner.name.given)</p> <p>m) Prescriber last name (Practitioner.name.family)</p> <p>The EMR Offering MUST have the below information. However, they MAY have the functionality to show or hide this information on the Summary view.</p> <p>n) Prescriber phone number [Practitioner.telecom:TelecomPhone.value]</p> <p><u>Pharmacy Information</u></p> <p>o) Dispensing Pharmacy [Organization.name]</p> <p>p) Dispensing Pharmacy fax number [Organization.telecom:TelecomFax]</p> <p>The Unit of Measure MUST be included wherever it is applicable.</p> <p>The drug dispense events received from DHDR EHR Service MUST be displayed in descending chronological order (with the most recent event first) by default.</p> <p>The EMR Offering MUST display the total number of drug dispense events in the view.</p> <p>Refer to the MedicationDispense Profiles in the DHDR FHIR Implementation Guide for more information on drug dispense events.</p>		

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		Refer to the Business View document in this specification for a sample of the Medication Summary View.		
DHDR04.02	The EMR Offering MUST have the functionality to allow the EMR user to group related drug dispense events in the Drug Dispense Summary View.	<p>Drug dispense events MUST be grouped by default when all the following values match for two or more events:</p> <ul style="list-style-type: none"> a) Generic name of the dispensed drug [Medication.code.coding:drugGeneric.display] b) Dispensed drug strength [Medication.amount Or Medication.ingredient.strength] c) Drug dosage form (e.g., tablet, capsule, injection) [Medication.form] <p>Groups of drug dispense events MUST be ordered by Dispensed Date in descending chronological order (with the most recent event first).</p> <p>Drug dispense events within an expanded group MUST be displayed in descending chronological order (with the most recent event first).</p> <p>A group is represented by displaying only the most recent event in that group according to the Dispensed Date.</p> <p>A group MUST be identified differently than an event that is not part of any group.</p> <p>The EMR Offering MUST generate and indicate the count of individual events for each group.</p> <p>Note: Drug Dispense Summary View may contain a list of grouped and ungrouped events.</p>	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		Refer to the Summary View section of the Business View document in this specification for a sample illustration of the grouping of events.		
DHDR04.03	The EMR Offering MUST be able to expand and collapse a grouping of drug dispense events in the Drug Dispense Summary view.	<p>The grouped drug dispense events MUST be collapsed by default. The EMR Offering MUST have the functionality to allow the EMR user to select an individual group and expand to display the drug dispense events in that group in descending chronological order by Dispense Date.</p> <p>The EMR Offering MUST have the functionality to allow the EMR user to collapse an expanded group.</p> <p>The EMR Offering MUST have the additional functionality to expand or collapse in a single action (e.g., expand all, collapse all).</p> <p>Refer to EMR–DHDR - Business View in this specification for sample Medication Summary View (expanded group).</p>	M	U

2.3.2 Drug Dispense Comparative View

The following EMR requirements apply to functionality specific to the Drug Dispense Comparative View.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR05.01	The EMR Offering MUST have the functionality to display both recorded medications from the EMR Offering and drug dispense events from the DHDR EHR Service in the Drug Dispense Comparative View.	<p>The Drug Dispense Comparative View MUST display a side-by-side view of the following information about the patient:</p> <ul style="list-style-type: none"> a) Medication records from the EMR Offering (Refer to DHDR05.02 for the information to include) b) Drug Dispense events from the DHDR EHR Service (Refer to DHDR04.01 for the information to include) 	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		<p>The EMR Offering MUST distinguish between the records from the EMR Offering and the events from the DHDR EHR Service.</p> <p>The EMR Offering MUST display the full list of events retrieved the DHDR EHR Service. Displaying events in their grouped format is NOT acceptable.</p> <p>The EMR Offering MUST display the total number of drug dispense events in the view.</p> <p>Note: Functionality to reconcile between EMR Offering records and DHDR EHR Service events is not required.</p>		
DHDR05.02	The EMR Offering MUST display EMR-recorded medications in the Drug Dispense Comparative VIEW.	<p>When displaying the patient's recorded medications from the EMR Offering, the following information MUST be displayed if available, in descending chronological order (with the most recent event first) by default:</p> <ul style="list-style-type: none"> a) Prescription Written Date or Start Date b) Drug Identification Number (DIN) c) Name of medication (Brand Name or Generic Name) d) Drug strength (value and unit of measure) e) Dosage (value and unit of measure) f) Frequency g) Duration and/or quantity (of the first fill) h) Number of refills/ repeats allowed or Number of authorized fills i) Refill duration and/or quantity (value and unit of measure) j) Prescriber first and last name <p>The EMR Offering MAY allow the user to select and display additional information of any EMR prescription on the comparative view.</p>	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		Note: This list also applies to the Pharmacy Service Comparative View. Refer to EMR-Baseline Requirement & Core Data Set for details about medication data elements recorded in the EMR Offering.		
DHDR05.03	The EMR Offering MUST have the functionality to allow the user to show and hide the patient's drug dispense history from DHDR EHR Service in the Drug Dispense Comparative View.	Hiding the drug dispense history retrieved from the DHDR EHR Service will result in the display of just the medication records from the EMR Offering.	M	U

2.3.3 Drug Dispense Detailed View

The following EMR requirements apply to functionality specific to the Drug Dispense Detailed View.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR06.01	The EMR Offering MUST have the functionality to select and display the DHDR Drug Dispense history in the Drug Dispense Detailed View.	<p>The following information for each drug dispense event retrieved from the DHDR EHR Service MUST be displayed in the Drug Dispense Detailed View:</p> <ul style="list-style-type: none"> a) All information required in the Drug Dispense Summary View (Refer to DHDR04.01 in the Drug Dispense Summary view section) <p>In addition, the Detailed View MUST display the following information:</p> <p><u>Drug Information</u></p> <ul style="list-style-type: none"> b) Drug Identification Number (DIN) or Product Identification Number (PIN) [Medication.code.coding:drugDIN.code] c) Medical condition/reason for Use [MedicationRequest.reasonCode.coding.display] d) Current Rx number [MedicationDispense.identifier:currentRxNo.value] 	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		<p><u>Prescriber Information</u></p> <p>e) Prescriber ID (e.g., practitioner license or CPSO number) [Practitioner.identifier.value]</p> <p>f) Prescriber Professional ID [Practitioner.identifier.system]</p> <p><u>Pharmacy Information</u></p> <p>g) Pharmacist name [Practitioner.name.given], [Practitioner.name.family]</p> <p>h) Pharmacy phone number [Organization.telecom:TelecomPhone.value]</p> <p>It is acceptable to leverage and expand on the Summary or Comparative Views, instead of creating a separate View, if all information included in the Drug Dispense Detailed View is displayed on the same screen.</p> <p>Drug dispense detailed view is available from the Summary and Comparative views.</p> <p>Note: The Prescriber Professional ID is the regulatory body to which the prescriber belongs (e.g., College of Physicians and Surgeons of Ontario, College of Nurses of Ontario).</p>		

2.3.4 Pharmacy Service Summary View

The following EMR requirements apply to functionality specific to the Summary View for Pharmacy Service Events.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR07.01	The EMR Offering MUST have the functionality to display a Pharmacy Service Summary View for the pharmacy	The following information (if available) MUST be displayed for each pharmacy service event retrieved from the DHDR EHR Service in the Pharmacy Service Summary View in descending chronological order:	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
	service events retrieved from DHDR HER service.	<p><u>Pharmacy Service Information</u></p> <ul style="list-style-type: none"> a) Dispensed date [MedicationDispense.whenPrepared] b) Pickup date [MedicationDispense.whenHandedOver] c) Pharmacy service type [MedicationDispense.type] d) Pharmacy service description [MedicationDispense.type] e) Rx Number [MedicationDispense.identifier] <p>The EMR Offering MUST have the below information. However, they MAY have the functionality to show or hide this information on the Pharmacy Service Summary view.</p> <p><u>Pharmacy Information</u></p> <ul style="list-style-type: none"> f) Pharmacy name [Organization.name] g) Pharmacist name [Practitioner.name.given], [Practitioner.name.family] h) Pharmacy fax number [Organization.telecom:TelecomFax] <p>The EMR Offering MUST have the functionality to display the total count of pharmacy service events retrieved from the DHDR EHR Service.</p> <p>Note: Refer to EMR DHDR - Business View for a sample of the Pharmacy Service Summary View.</p> <p>Refer to DHDR-FHIR Implementation Guide for information about dispensed medications, medication prescriber and dispensing pharmacy.</p>		
DHDR07.02	The EMR Offering MUST have the functionality to allow the EMR user to group related pharmacy service events in	Pharmacy service events MUST be automatically grouped by default when the Pharmacy service type [MedicationDispense.type] matches for two or more events.	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
	the Pharmacy Service Summary View by default.	<p>A group of events MUST be sorted by Dispense Date in descending chronological order (most recent event first), by default.</p> <p>A group is represented by displaying only the most recent event in that group according to the Dispense Date.</p> <p>A group MUST be identified differently than an event that is not part of any group.</p> <p>The EMR Offering MUST generate and indicate the count of individual events represented within each group.</p> <p>Refer to the Summary View section of the EMR DHDR - Business View document in this specification for a sample illustration of the grouping of events.</p>		
DHDR07.03	The EMR Offering MUST be able to expand and collapse a grouping of pharmacy service events.	<p>The grouped Pharmacy Service events MUST be collapsed by default.</p> <p>The EMR Offering MUST have the functionality to allow the EMR user to select an Individual collapsed group and expand to display the pharmacy service events in the group.</p> <p>The EMR Offering MUST have the functionality to allow the EMR user to collapse an expanded group.</p> <p>The EMR Offering MUST have the additional functionality to expand or collapse all pharmacy service events in a single action (e.g., expand all, collapse all).</p>	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		Refer to the Summary View section of the EMR DHDR - Business View document in this specification for a sample illustration of the grouping of events.		

2.3.5 Pharmacy Service Comparative View

The following EMR requirements apply to functionality specific to the Comparative View for Pharmacy Service events.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR08.01	The EMR Offering MUST have the functionality to display both EMR-recorded medications and Pharmacy service events from the DHDR EHR service in the Pharmacy Service Comparative View.	<p>The Pharmacy Service Comparative View MUST display a side-by-side view of the following information about the patient:</p> <ul style="list-style-type: none"> a) Medication records from the EMR Offering (Refer to DHDR05.02 for the information to include) b) Pharmacy Service events from the DHDR EHR Service (Refer to DHDR07.01 for the information to include) <p>The EMR Offering MUST distinguish between the records from the EMR Offering and the events from the DHDR EHR Service.</p> <p>The EMR Offering MUST display the full list of events retrieved from the DHDR EHR Service. Displaying events in their grouped format is NOT acceptable.</p> <p>Note: Functionality to reconcile between EMR Offering records and DHDR EHR Service events is not required.</p>	M	U
DHDR08.02	The EMR Offering MUST have the functionality to allow the user to show and hide the patient's pharmacy service	Hiding the pharmacy service events retrieved from the DHDR EHR Service will result in the display of just the medication records from the EMR Offering.	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
	events from DHDR EHR Service in the Pharmacy Service Comparative View.			

2.4 Patient Consent Directive

A patient consent directive blocks access for an EMR Offering to retrieve that patient's drug dispense history information from the DHDR EHR Service. The following requirements in this section and sub-sections apply where a patient consent directive is encountered.

2.4.1 PCOI Connection

The URL key value for the PCOI Viewlet is published as a parameter within the toolbar parameter. The toolbar parameter resides in the OAuth2 token request return. The EMR Offering extracts and uses the key value to launch the PCOI Viewlet when an EMR user proceeds with a temporary patient consent unblock.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR09.01	The EMR Offering MUST extract and use the PCOI key value to interact with the PCOI Viewlet.	<p>The PCOI key MUST be used to retrieve the PCOI endpoint value from the OAuth toolbar to connect and interact with the PCOI Viewlet. It is not acceptable to hardcode the PCOI endpoint value.</p> <p>The current value of the "PCOI Key" is "PCOI_url". This value may change over time.</p> <p>The EMR Offering MAY have the functionality to configure the PCOI key and MUST restrict the access to modify the configurable field to specific EMR users or EMR vendor support staff.</p> <p>Refer to "PCOI_url" in the Generic Use Case section of the ONE Access Viewlet Framework document for more information.</p>	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		<p>Note: The OAuth2 toolbar parameter contains additional parameters for other purposes not related to this specific requirement.</p> <p>Refer to the “Patient Consent Directives” section in the EMR Digital Health Drug Repository (DHDR) Business view for more information on PCOI workflow</p>		

2.4.2 Identifying a Patient Consent Directive

The following EMR requirements apply to EMR functionality specific to searching immunization events.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR09.02	The EMR Offering MUST be able to identify a patient consent block directive received from the DHDR EHR Service.	<p>When attempting to retrieve the patient’s drug dispense history, the DHDR EHR Service may return a patient consent block directive instead of the patient's drug dispense history.</p> <p>The EMR Offering MUST be able to identify that a temporary patient consent block exists.</p> <p>Refer to the “Consent Indicator in OperationOutcome” section in the “Profile: OperationOutcome” link in the DHDR HL7 FHIR Implementation Guide for information on identifying a consent block.</p> <p>Refer to ONE Access Viewlet Framework – Developer Guide (Ontario Health Digital Services, 2021) For more information about PCOI.</p>	M	U
DHDR09.03	The EMR Offering MUST display a message where a consent block exists from the DHDR EHR Service.	Where a consent block directive exists, the EMR Offering MUST display the following message to inform the EMR user of the consent block.	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		<i>"Access to Drug and Pharmacy Service information has been blocked by the patient."</i>		
DHDR09.04	The EMR Offering MUST prompt the EMR user with options to respond to the patient consent block directive from the DHDR EHR service.	<p>The EMR Offering MUST provide the EMR user with the following choices to continue with a temporary patient consent unblock:</p> <ul style="list-style-type: none"> a) Continue (The patient agrees to proceed with a temporary patient consent unblock and EMR Offering continues with the workflow) b) Refuse (The patient refuses to proceed with a temporary patient consent unblock and EMR Offering will not continue with the workflow) c) Cancel (The EMR User cancels the temporary patient consent unblock workflow and EMR Offering will not continue with the workflow) <p>Important: The choice to continue, refuse or cancel a temporary patient consent unblock occurs within the EMR Offering. Refer to the "Proceeding with a temporary consent override" section of this document for more information on how to proceed with a temporary patient consent unblock.</p> <p>The EMR Offering MUST proceed with the continuation, or refusal choice selected and include the reason to record additional information applicable.</p> <p>Note: The "Cancel" option covers the case when the provider launches the DHDR Search without the patient (or SDM) being present at the time the DHDR Search is launched.</p>	M	U
DHDR09.05	The EMR Offering MUST inform the EMR user if a temporary consent unblock is refused or cancelled.	<p>Where the EMR user chooses not to proceed with a consent override, the EMR Offering MUST display the following appropriate message:</p> <p>Message to display if the response is: Refuse</p> <p><i>"Access to Drug and Pharmacy Service Information has been refused."</i></p>	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		<p>Message to display if the response is: Cancel</p> <p><i>“Access to Drug and Pharmacy Service Information has been cancelled.”</i></p> <p>The message displayed MUST persist for a short period and close automatically without further interaction from the EMR user.</p>		

2.4.3 Proceeding with a Temporary Consent Override

The following section (and its sub-sections) defines EMR requirements to proceed with a Temporary Consent Override request by the EMR user through the EMR Offering to the DHDR EHR Service after the patient has accepted consent. The DHDR EHR Service will need context data to be set and the PCOI Viewlet launched which will collect all the necessary information to accept the patient’s consent. Once patient consent information is collected and complete, the Viewlet will automate the request to temporarily override consent for the requesting clinic organization to which the EMR user belongs. Although there is supporting functionality documented in the “Ontario Digital Health Drug Repository – HL7 FHIR Implementation Guide”, the EMR Offering needs to follow the functionality defined in this section.

2.4.3.1 Setting the Context Data in the Context Management Service

The following EMR requirements apply to EMR functionality specific to setting context data in the Context Management System.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR10.01	The EMR Offering MUST send the context data to CMS before launching PCOI Viewlet.	<p>When setting the patient context data, the EMR Offering MUST adhere to the Context Sharing requirements set out in the Context Sharing document in the EMR EHR Connectivity Specification.</p> <p>The EMR Offering MUST send the following profiles to CMS:</p> <ul style="list-style-type: none"> a) Organization b) Location 	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		c) Practitioner d) Patient Refer to the Context Sharing documents in the EHR Connectivity Specification and the ONE Access Viewlet Framework document for more information on how to set patient context data.		

2.4.3.2 Initiating a Consent Override Request

The following EMR requirement applies to EMR functionality specific to initiating a consent override request.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR10.02	Where a patient chooses to continue with the consent override, the EMR Offering MUST submit a consent change event to the Context Management Service (CMS) before launching PCOI Viewlet.	Refer to “OH.consentTargetChange” in the ONE Access Viewlet Framework document for more information on the consent change event.	M	U
DHDR10.03	Where the EMR user chooses to proceed with the consent override, The EMR Offering MUST have the functionality to present the EMR user with the PCOI Viewlet.	Where the EMR user chooses to proceed with the consent override, the EMR Offering MUST have the functionality to launch a Viewlet. Refer to “User Interacts with the PCOI Viewlet” in the ONE Access Viewlet Framework document for more information on PCOI Viewlet. Note: The EMR Offering should expect to receive a reply message from CMS but does not have to wait to launch the PCOI Viewlet.	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR10.04	The EMR Offering MUST be able to support the PCOI Viewlet print functionality.	<p>The EMR Offering MUST have the ability to support printing from the PCOI Viewlet to print to a local printer.</p> <p>The EMR Offering MAY have the functionality to save the printed PCOI Viewlet on the patient chart</p>	M	U

2.4.3.3 Handling Consent Override Responses

The following EMR requirements apply to EMR functionality specific to processing a consent override response.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR11.01	The EMR Offering MUST be able to process PCOI Viewlet responses.	<p>Once the PCOI Viewlet processes the consent override request, the EMR Offering MUST be able to process the following possible responses returned from the PCOI Viewlet:</p> <ul style="list-style-type: none"> a) Successful: Consent has been overridden b) Failed: Consent was not accepted or failed <p>Refer to “Appendix A: Viewlet Framework Response Codes” in the ONE Access Viewlet Framework document for more information on success and failed messages.</p> <p>Note: There may be a scenario where the EMR does not receive a timely response from the PCOI Viewlet. In this scenario where no response is returned by the PCOI Viewlet, the EMR should assume that it was successful.</p>	M	U
DHDR11.02	Where the patient consent override response was returned to the EMR Offering, it MUST automatically re-submit the request for the patient’s drug		M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
	and pharmacy service information from the DHDR EHR Service			

2.5 Ontario Drug Benefit (ODB) Formulary and Exceptional Access Program (EAP)

The following EMR requirements apply to EMR functionality specific to the ODB formulary and EAP.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR12.01	The EMR Offering MUST provide a link to the “Check Medication Coverage – Drug Formulary” within the EMR workflow used to prescribe medication.	<p>The link MUST be made available on the same screen where the EMR user inputs the required information for a prescription.</p> <p>The EMR Offering MUST provide access to ODB Formulary from the medication module.</p> <p>The EMR Offering MAY support the configuration of the URL link.</p> <p>The EMR Offering MAY restrict the ability to configure the URL link (e.g. admin role)</p> <p>The EMR Offering MAY implement functionality to open the link within the EMR Offering (e.g., iFrame) or by using an external browser window.</p> <p>NOTE: The ODB Formulary is a tool that allows the search for medications covered under the ODB program.</p>	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		Refer to “Check Medication Coverage – Drug Formulary” in the Related Documents, References and Sources section of this document for the URL to make available to the EMR user.		
DHDR12.02	The EMR Offering MUST provide a link to the EAP within the EMR workflow used to prescribe medication.	<p>The link to the EAP MUST be provided to the EMR user. Refer to “Special Authorization Digital Information Exchange” (SADIE) in the Related Documents, References, and Sources section for the URL.</p> <p>The link MUST be made available on the same screen where the EMR user inputs the required information for a prescription.</p> <p>The EMR Offering MUST make the link available on the same screen where the EMR user inputs the required information for a prescription.</p> <p>The EMR Offering MUST provide access to EAP from the Medication module.</p> <p>The EMR Offering MAY support the configuration of the URL link.</p> <p>The EMR Offering MAY restrict the ability to configure the URL link (e.g., admin role). The EMR Offering MAY implement functionality to open an external browser to the Drug Formulary.</p> <p>Note: SADIE is a portal for submitting EAP drug requests for ODB recipients.</p>	M	<u>U</u>

2.6 Printing and Reporting

The following EMR requirements apply to EMR functionality specific to printing and reporting medication events. Additionally, the following EMR requirements apply to functionality specific to printing and auditing for the DHDR EHR Service and are supplementary to the requirements for a physician to print a prescription identified in the Medication Management section of the Primary Care Baseline Specification.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR13.01	The EMR Offering MUST provide the functionality to print the patient's drug dispense history and pharmacy service history retrieved from DHDR EHR Service.	<p>The print functionality MUST support printing of all the dispense events from DHDR EHR Service for the patient. The dispense events MUST be fully expanded and in descending chronological order (with most recent event first).</p> <p>The printed document MUST contain:</p> <ul style="list-style-type: none"> a) the patient's demographic information (i.e., first and last name, HCN, date of birth, gender, age) as maintained by the EMR Offering, on each page printed. b) The patient's demographic information (i.e., first and last name, HCN, date of birth, gender, age) as maintained by the DHDR EHR Service, on each page printed. c) the date and time printed, on each page d) all data elements required for the View (ungrouped) e) the page number along with total number of pages on each printed page f) the record count to indicate the total number of records printed. g) DHDR disclaimer on each page (Refer to DHDR03.03 for the disclaimer message.) h) EMR Confidentiality statement on each page <p>The print functionality MAY support printing of dispense events from DHDR EHR Service for the patient from any of the DHDR EHR Views.</p> <p>It is recommended that any applied filtering and sorting be identified on the printed copy.</p>	M	U
DHDR13.02	The EMR Offering MUST be able to generate a report on all temporary	The report MUST include the following information from the EMR Offering:	M	P

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
	consent unblock requests submitted to the DHDR EHR Service.	<p>a) Date and time the request was made to override a patient consent unblock</p> <p>b) First and Last Name of the EMR user who requested the temporary consent unblock</p> <p>c) Unique ID of the patient</p> <p>d) Patient First and Last Name</p> <p>e) Patient Health Card Number</p> <p>f) The choice selected to continue, refuse or cancel temporary consent unblock.</p> <p>At a minimum, the EMR Offering MUST allow the EMR user to search the report by the following patient data:</p> <p>g) Patient Last Name</p> <p>h) Unique ID of the patient</p> <p>The report MUST be accessible from the EMR Offering interface.</p> <p>Note: This report MAY also be used for auditing purposes.</p>		

2.7 Error and Warning Management

The following EMR requirements apply to functionality specific to error warning and management for the DHDR EHR Service.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR14.01	The EMR Offering MUST be able to provide notification to the EMR user of errors/warning/info messages received from the DHDR EHR Service including when the service is not responding.	The EMR user MUST be notified of any error or warning messages received from the DHDR EHR Service. This also includes when there is a lack of communication from the EHR Service.	M	U

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		<p>At a minimum, the following data elements MUST be presented to the EMR user, if available:</p> <ul style="list-style-type: none"> a) Error code b) Error description c) Severity d) Date and Time of the incident <p>It is recommended that notifications to the EMR user be user-friendly.</p> <p>Warning messages MUST provide the user with appropriate direction to resolve the issue or receive support.</p> <p>The EMR user MUST not require admin role access to be notified of the error messages.</p> <p>Refer to the “HTTP Response Codes” section of the DHDR HL7 FHIR Implementation Guide for more details on error messages that can be returned by the DHDR EHR Service.</p>		

2.8 Logging and Auditing

EMR systems log various information and interactions and may contain private health information (PHI). As a result, consideration should be taken to log only what is necessary to avoid unintentionally saving or providing access to logged PHI and should be regarded with the same sensitivities as data containing PHI. The following EMR requirements apply to functionality specific to logging and auditing for the DHDR EHR Service and are supplementary to the requirements identified in the Primary Care Baseline Specification.

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
DHDR15.01	The EMR Offering MUST log all interactions including successful and failed transactions with the DHDR EHR Service.	<p>At a minimum, the following information MUST be logged for each interaction:</p> <ul style="list-style-type: none"> a) The interacting EHR Service (e.g., fixed as the “DHDR EHR Service”) b) A transaction identifier generated by the EMR Offering, if available c) A transaction identifier generated by the DHDR EHR Service d) Unique ID of the patient related to the transaction, if available e) Date and time the transaction was initiated f) The EMR user (or system) that initiated the transaction g) The transaction type (e.g., retrievals, consent unblock requests) h) The transaction status (success, failure) i) Any transaction return code and the message from the DHDR EHR Service j) Resource IDs for both the FHIR Message and Medication Dispense (MessageHeader.id and MedicationDispense.id, respectively) <p>Any additional information needed to facilitate troubleshooting and auditing MUST also be logged.</p> <p>Refer to the “HTTP Response Codes” section of the DHDR HL7 FHIR Implementation Guide for more details on error messages that can be</p>	M	P

OMD #	REQUIREMENT	GUIDELINES	M/O	STATUS
		returned by the DHDR EHR Service and to the “Infrastructure Resources” section for more information on the FHIR Message ID		
DHDR15.02	The EMR Offering MUST log all requests to override a patient consent directive.	<p>The following patient consent directive data from the EMR Offering MUST be logged:</p> <ul style="list-style-type: none"> a) Date and time the transaction was initiated b) The EMR user (or system) that initiated the transaction c) Unique ID of the patient related to the transaction <p>The following data from interactions with the DHDR EHR Service MUST be logged:</p> <ul style="list-style-type: none"> d) Unique Message ID of the request for drug dispense history e) Type of transaction with the DHDR EHR Service attempted f) Response status from the DHDR EHR Service (OperationOutcome) <p>Refer to the “OperationOutcome Resource” section in the DHDR HL7 FHIR Implementation Guide for response status information provided by the DHDR EHR Service to capture.</p> <p>Refer to “Resource – Base Resource Definitions” in the DHDR HL7 FHIR Implementation Guide for the Unique Message ID as it applies to the retrieval of the medication history.</p>	M	P

3. APPENDIX A: ADDITIONAL REFERENCES

The following is a table of supporting documentation and **recommended** further reading.

NAME	VERSION	DATE
Electronic Health Record Request for Correction to Personal Health Information Policy (Ontario Health, Digital Services, 2022) https://ehealthontario.on.ca/en/our-privacy-commitment	N/A	2022
Health Care Provider Access to Drug and Pharmacy Service Information – Questions and Answers (Ministry of Health, 2021) https://www.ontario.ca/mydruginfo	N/A	2021-05-21
HL7 FHIR Release 4 (Health Level Seven, 2022) https://hl7.org/fhir/	4.3.1	2022-05-28
Medicine Act, 1991 (Ministry of Health, 2021) https://www.ontario.ca/laws/statute/91m30	N/A	2021-06-03
MedsCheck (Ministry of Health, 2016) http://www.health.gov.on.ca/en/pro/programs/drugs/medscheck/	N/A	2016-07-04
Pharmacy Smoking Cessation Program (Ministry of Health, 2019) http://www.health.gov.on.ca/en/pro/programs/drugs/smoking/	N/A	2019-06-26
Temporary Unblocking of Access to Drug and Pharmacy Service Information Form (Ministry of Health, 2016) http://www.forms.ssb.gov.on.ca/mbs/ssb/forms/ssbforms.nsf/FormDetail?OpenForm&ACT=RDR&TAB=PROFILE&SRCH=1&ENV=WWE&TIT=5047-87&NO=5047-87E	N/A	2016-11