## **GHB** Controls

07/24/2024 2:50 pm EDT

As part of DrChrono's DEA audit process, when prescribing a drug containing Gamma Hydroxburic Acid (GHB), the **Notes to Pharmacy** field is required.

Clinical Dashboard	New Prescription Patient	ent's Prescriptions +	
Documents	Medication Favorite me	nedications V	
Eligibility	ravineme	rouldatulis *	
Tasks	Type* Medication Compound Supply		
Problem List	Medication*     A Con	ontrolled Substance Level 3	
Medication List	Xyrem 500 mg/mL oral liquid	+	
Send eRx	SIG* ()	N/A: U Brand RX Effective Date	
Allergy List	(NKDA)     20 / 140		
Drug Interactions	Dispense* Dispense Unit* DAW Days Su	Supply Refills	
CQMs	Image: Solution   Milliller   Yes   No	0	
Intake Data	Add to Favorites Add to Medication List 0		
Lab Orders	Notes to Pharmacist* * Please do not enter SIG, Effective Date, Drug Name, Strength, Quantity or Dispense Uni		
Immunizations	* Please do not enter Sits, Effective Date, Drug Name, Strength, Quantity or Dispense Unit Please do not enter Sits, Effective Date, Drug Name, Strength, Quantity or Dispense Unit (1997)		
Growth Charts			
	Select Pharmacy           Name / Location / Phone / NGPDP ID         Q         Show Favorites         Pa	Patient's Default Mail Order Retail On	ther Pro
	● WALGREENS #07080 ♀ 105 E.E. CAMINO REAL, SURNYVALE, CA 940871937 └ + 1.408.991.9013 ☆ Fax: +1.408.991.9025 ● Retail		dd to Fav et as Patie
		Previe	ew Preso

You will see an error message if the field is not filled out.

lew Prescription	Patient's Prescriptions	
Medication	Favorite medications	
The DEA requires you to fill in Notes to Pharmacist if you hydroxybutyrate (GHB) or Sodium Oxybate (Xyrem, Xyw		
Type* Medication Compound Supply		
Medication*	A Controlled Substance Level 3	
Xyrem 500 mg/mL oral liquid	+	
SIG*	N/A: U Brand RX Effective Date	
10 milliliter(s)		
Dispense* Dispense Unit* DAW 500 Milliliter V Yes No	Days Supply Refills	
<ul> <li>Add to Favorites Add to Medication List ()</li> <li>Notes to Pharmacist*</li> <li>* Please do not enter SIG, Effective Date, Drug Name, Strength, Quantit</li> </ul>	y or Dispense Unit in this field.	

To proceed with the prescription, fill in the notes field and click **Preview Prescription**. The prescription will be transmitted with the notes.

Medication	Favorite medications					
The DEA requires you to fill in Notes to Pharmacist if you hydroxybutyrate (GHB) or Sodium Oxybate (Xyrem, Xyrem, Xy						
Type* Medication Compound Supply						
Medication*						
Xyrem 500 mg/mL oral liquid	+					
SIG*   I0 milliliter(s)	N/A: U Brand RX Effective Date					
20 / 140						
Dispense* Dispense Unit* DAW	Days Supply Refills					
■ 500 Milliliter V Yes N	0					
<ul> <li>Add to Favorites Add to Medication List <sup>(1)</sup></li> <li>Notes to Pharmacist*</li> <li>* Please do not enter SIG, Effective Date, Drug Name, Strength, Quantity or Dispense Unit in this field.</li> </ul>						
Narcolepsy treatment						
Select Pharmacy						
Name / Location / Phone / NCPDP ID         Q         Show Favorites         Patient's Default	Mall Order Retail Other Proximity •					
●         WALGREENS #07080           ♀         105 E EL CAMINO REAL, SUNNYVALE, CA 940871937           └         +1.408.991.9013           Image: Factor and the state of the s	Add to Favorites					
	Preview Prescription					

GHB Controls on the iPad