

Configure and Approve MAR

Users assigned with the *MAR Configuration Approve* role can create and approve new Medication Administration Records (MARs).

MAR forms need to be configured each month for an individual.

1. On the **Health** tab, click on the **New** link beside the **Configure** option under the **Medication Administration Record** section.

To Do	Medication	Administration Record
Individual	Configuration	New Search
Health	Data	Record Data Due Medications Search Report
Agency	Н	ealth Tracking
Billing	Appointments	New Search Calendar View

2. Select the appropriate program from the **Program List** page.



Program List

All A B C D E	F G H I J K L M N C	P Q R S T U V	W X Y Z				
Filter			1	5 v Records			
Program Name	\$	Program Type	Cost Center Number	Program			
(Demo) Academic Activities	Therap Global Demonstration Provider	Preschool		02			
(Demo) Education and Development	(Demo) TG Center for Children With Special Needs	Individualized Skills Development		123			

3. On the **MAR Configuration Selection** page, select the appropriate individual, month and year from the respective fields and click on the **Submit** button.

	MAR Configuration Selection	
MAR Configuration Select Select Individual * Select Month * Select Year *	Mary, Angela V July V 2023 V	
Kernel Cancel	Su	bmit

Note: Fields marked with a Red Asterisk (*) are necessary and must be filled in.

Users can only create the MAR for an individual for the previous two months from the present date. Otherwise, the users will receive an error message.



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 You may only create MAR for the previous two months

4. The Medication History form will display the message **"No current medication(s) found"** if an individual does not have any current medication entered. Click on the **Create New Medication History Form** link to configure a new medication for the individual.

	No current medication(s) found
Actions	
Create New Medication History Form	
Back	

5. The **Medication Administration Record Configuration** page will be displayed for the month that has been selected. Here, all the active medications that have been prescribed for the individual will be displayed. Users will be able to add new medications as well as different schedules for the same medication.



Individual Name: A Birth Date: 05/01/2 Form ID: MAR-DEMO Form Status: New Time Zone: Asia/Ma	Medication ngela Mary 010 DTPHL-M964ND4ZG nila	Administr 8426	ation Record	Configurat	tion - July ,	2023	
Due Data	already recorded						
						Ad	ld New Medicatio
Astemizole - Table	cation(s)	heduled (Medi	cation)			N	Indication Details
Character Face Da			entities (Dente Her	nitel Dhillinin e	`		icultation Details
Give Amount / C Begin Date & Tin Schedule Repeat Instruction: Give	Quantity: Once a d ne: 05/31/2023 2: Every Day 1 time medicine once a d	ay Tablet Freq 00 pm End Da (s) a day Sche ay. 0+1+0	uency: 1 X DAILY te & Time: 08/31/ edule Time Slot(s	/2023): 2:00 pm)		
Time 1 2 SAT SL 2:00 pm	2 3 4 5 6 7	8 9 10 1	L 12 13 14 15 10	5 17 18 19 20 N MON TUE WED THU	21 22 23 24 J FRI SAT SUN MON	25 26 27 28	29 30 31 SAT SUN MON
Indication/Purp	ose						
To cure, halt, or p	revent Allergic rhini	tis, unspecified	Ι.				
- Instruction/Con	nments						
Give the medicine	once at day.						
Fexofenadine - Ta	blet, Oral (mouth),	Scheduled (M	edication)			N	ledication Details
Strength: 120mg	Prescriber: Sharm	a Prendy					
Give Amount / C Begin Date & Tin Schedule Repeat Instruction: Give	Quantity: Once a d ne: 04/27/2023 : Every Day 1 time once daily.	ay Tablet Freq	uency: 1 X DAILY edule Time Slot(s): Unspecified			
Time 1 2 SAT SU	2 3 4 5 6 7	8 9 10 1	L 12 13 14 15 10 E WED THU FRI SAT SU	5 17 18 19 20 N MON TUE WED THU	21 22 23 24 J FRI SAT SUN MON	25 26 27 28 TUE WED THU FRI	29 30 31 SAT SUN MON
Indication /Pum	000						
Medication given o	ue to allergy.						
- Instruction/Con	ments						
Give one tablet ev	eryday.						
Other Medicatio	on(s)						
Neutrogena Shee	r Zinc Dry Touch	Mineral Face	Sunscreen - Crea	ams, Other, Oth	er	N	ledication Details
Strength: 50Applic	ation Prescriber:	Dr. Jhon Paul /	Physiotherapist ([) Demo Hospital P	hillipines)		
Give Amount / C Begin Date & Tin Schedule Repeat Instruction: Use	Quantity: Use when ne: 03/08/2023 11 t: Every Day 2 time whenever going ou	never going ou :00 am (s) a day Sche tside or going	tside or going dayli Edule Time Slot(s daylight.	ght.Creams Fre	equency: EVER	Y DAY	
Apply in the outer	areas of body whe	never going ou	t in daylight.				
Allergies							
Allergies : Pennicili	s : Known Drug All	ergy					
- Sharod Contact							
Name		Organization	Name	Specialty		Р	hone
Dr. Jhon Paul / Phys	iotherapist	Demo Hospita	l Phillipines	Physical Medic	ine & Rehabilita	tion ()112423597
Medical Diagno	sis						
Active Diagnoses							
Diagnosis Coding Type	nosis Code	Descript	ion	DSM-5	Billable	Diagnosis Date	Diagnosed By
ICD-10 F84.0) - Autistic disorder	Faces dif commun understa saying to	ficulties to cate and nd what people are her.	Yes	Yes	02/01/2017	Ahmad Imam / Dr. (Demo Hospital)
Dietary Guidelin	ies						
Mary can eat only pr	ocessed foods						
« Back Cance	el					Submit	Approve



Note: Data can only be recorded for the schedule that is active in the current month

• To add new medications, click on the **Add New Medication** link and to view the medication details, click on the **Medication Details** link of the form.

Individual Nat Birth Date: 05 Form ID: MAR- Form Status: 1 Time Zone: As Legend	me: /01/ ·DEN New ia/M	Ang (201 (OTI	Mela 0 PHL a	edi Ma -M9	.ca ry 164N	tio ND4	on A	Ad 1 8426	mi	nis	tra	tio	on]	Re	co	rd	С	onf	ïg	ur	ati	ior	1 -	J	uly	',	20)23	3					
Due	Dat	a alı	read	dy r	ecor	rdeo	d																											
Scheduled	Me	dica	atio	n(s))																									Ad	dd N	ew N	/ledi	catio
Astemizole	Tab	olet,	Ora	al (r	nou	th)	, Scl	hedu	uled	l (Me	edic	atio	n)																	N	/ledi	catio	n De	etails
Strength: 5m	ng I	Pres	cri	ber	: Dr	: Jh	non I	Paul	/ P	hysi	othe	erap	ist (Der	mo l	Hos	pit	al P	hillij	pin	es)													
Give Amou Begin Date Schedule R Instruction	nt / & T epe : Gi	Qu ime at: ve n	ant e: 0 Eve ned	5/3 ry [icin	On 1/20 Day e on	D23 1 ti nce	a da 2:0 ime(a da	iy Ta)0 pi (s) a ay. C	able m E a da)+1	t Fro End I iy So +0	equ Dat cheo	en e & dul	cy: 1 Tin e Tir	LX ne: me	DAI 08/ Slo	LY 31/ t(s)	20)): 2	23 2:00) pn	n														
Time	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	5 1	7 1	8 1	9	20	21	22	2	3 2	4	25	26	27	28	29	30	31	
	SAT	SUN I	MON	TUE	WED	тни	J FRI	SAT	SUN	MON	TUE	WED	тни	FRI	SAT	SUN	м м	א אכ	JE W	ED	тни	FRI	SAT	r si	л м	ON 1	TUE	WED	тни	FRI	SAT	SUN	и мо	N
2:00 pm																																		
 Indication, To cure, halt Instruction 	/Pu ;, or n/Co	rpos prev omn	e ven ien	t All ts –	lergi	ic r	hinit	is, i	unsj	pecif	fied.																							
Give the me	dicir	ne or	nce	at o	day.																													

• Once the necessary edits are made, users will be able to click on the **Submit** button or **Approve** button at the bottom of the page.





6. After submitting or approving the form, a success message will be displayed.

