



Gerimed Profiles

Consultant Pharmacist Software





Features

- Complete Electronic Medical Record and Database
 - Lab/Monitoring
 - Medication Profile
 - Extensive Drug Interaction Screening
 - Progress Notes Including Dymo® Label
 - Customized Recommendation Text File
 - ICD-9/ Diagnosis Linking
 - On-Screen Disease Management/ Clinical Tools
 - Interfacing Capabilities with Dispensing Pharmacy Software
 - F-tag Scanning and On-Screen References for Skilled-Nursing Facilities
 - Extensive Reports and Quality Improvement Tools
 - Outcome Tracking of Clinical Interventions



Facility Log-on and Reporting Screen

The screenshot displays the GeriMed Profiles - [Facility Login] application. The 'Reports' menu is open, showing a list of report categories and specific report types. The 'Specialty Reports' sub-menu is expanded, listing various reports such as 'Record of Drug Regimen Review', 'Record of DRR w/ Progress Note', 'Record of DRR w/ Total Meds', 'Quality Indicators', 'Lab Monitoring Worksheet', 'Coumadin/ Warfarin Report', 'Psychotropic Drugs', 'Additional Medication Monitoring Report (by category)', 'Additional Monitoring (Risk)', 'Recommendation Stats', 'Recommendation Outcomes', 'Drug Utilization', and 'Clinical Statistics'. The background shows a facility information form and a main dashboard area with buttons like 'Update', 'Exit', 'Quick Report Print', and 'Import Dispensing Data'.

The Facility Log-on and Reporting Screen provides a central location for all reporting, import/export functions and facility-based statistics. All reports and data can be printed directly from profiles or exported into various files, such as, Adobe PDF's and Microsoft products for electronic file transfer (Email)



Patient Database

GeriMed Profiles - [Patient : Form]

File Edit Window Clinical Tools Regulatory Help Articles-Resources A-Z Z-A MTM

Search (F7) **Reset** Enter Name Correction: CONTRARY, MARY Q

Transfer: ADD **CONTRARY, MARY Q** ID/Study# 6139A1 Rm: 139A

DOB: 05/05/1924 Age: 82.66 Dr: **KUMAR, AJAY** Salutation:

Ht (in): 0 Wt (lbs): 0 (F8) **No Recom** Recommendation Activity La: Example Facility Tom

Sex: White-Female Payor: Medicaid Print Profile < > <> <> <> Free Text Recom Text

Allergies: PCN Psychotropic Usage Antipsychotic Sedative/Anxiolytic

Notes/ Recommendations (Shift + F1) Medications (Shift + F4)

Print Clinical Note Lab Arch List CMS F-329 Table 1

30256 30320 Dx Search (F12):

Date	Notes	Print
4/9/2007	Significant Med-related Problems: --[x] No clinically significant issues noted this review --[] Yes (if yes, list intervention): ***** Notes: Patient stable.	-1

Record: 1 of 21

Print	Due	Profile:	Monitoring:	Freq.	Numeric	Date Perform	ICD9:	Notes
<input checked="" type="checkbox"/>	08/06	---	Phenytoin I	186	10	2/2/2006		WNL
<input checked="" type="checkbox"/>	07/07	HbA1c	HbA1c	93	7.1	4/9/2007	250.02	At Goal

Record: 1 of 2

To archive labs double click grey cube on left side of the row DOUBLE CLICK FIELD TO ZOOM-EXPAND Pg Up

Date	Recommendation	Pend	Reject	Duplic	Destination	RM:	UNIT:	Code	Comment
4/13/2007	RE: CMS-F329: ANTIPSYCHOTIC GRADUAL DOSE REDUCTION	-1	0	0	Physician	139A	1	Antipsychotic Drug Evaluation	**CMS-F329: ANTIPSYCHO GRADUAL DC
4/9/2007	RE: CMS-F329: DUPLICATE ANTIDEPRESSANT DRUGS	0	-1	0	Physician	139A	1	Drug Duplication	**CMS-F329: DUPLICATE ANTIDEPRES:

Record: 1 of 22

DRUG INTERACTIONS #Routine Orders: #PRN Orders: Total # Meds Used in Last 7 Days of Last Month: Refresh

CMS F329 SCAN BY DRUG Psych QI Pg Dn

Started	End Due	Notes (dbl click field to view)	Sort	Drug	Dose	
				PHEN-TOIN (PHENYTOIN) SUSP 125 MG/5ML		Stroke (I)
2-20-07				ZYPREXA (OLANZAPINE TAB 2.5 MG)	1t qhs	Schizo-s
				ARICEPT (DONEPEZIL HYDROCHLORIDE TAB 10 MG)		
				RAMENDA (MEMANTINE HCL TAB 5 MG)		
				LEXAPRO (ESCITALOPRAM COXALATE TAB 10 MG (BASE EQUIV))	1t qd	Depress

Records: 1 of 5

ARCHIVES-To archive medications, double click grey cube on left side of the row Med Arch List Pg Up

Monthly Drug Cost: \$ 5269.00 Daily Drug Cost: \$8.97

GeriMed Profiles is a complete electronic medical record originally designed specifically for skilled-nursing facilities, but has a variety of applications toward medication therapy management in different practice settings.



Clinical Tools and Modules

The screenshot displays a patient's clinical record with various tools and data. The patient's name is "Gordian, Phillip". The interface includes a search bar, a list of clinical tools (e.g., Warfarin Dosing Tool, Charlson-Schell 1-Yr Mortality Estimate), and a table of medications.

Print	Due	Profile:	Monitoring:	Freq.	Mon
<input checked="" type="checkbox"/>	88/06	---	Phenytoin I	188	1
<input checked="" type="checkbox"/>	87/07	HbA1c	HbA1c	93	7

Date	Recommendation	Pend.	Reject	Du
2867	RE: CMS-F328: ANTIPSYCHOTIC GRADUAL DOSE REDUCTION	-1	0	0
1887	RE: CMS-F328: DUPLICATE ANTIDEPRESSANT DRUGS	0	-1	0

On-screen clinical tools, disease management modules and patient assessments are incorporated into the database for reference during medication therapy management.

The screenshot shows the "Insomnia in Older Adults" clinical tool. It features a title "A Review of Pathology, Presentation and Treatment" and a flowchart for diagnosis and treatment. The flowchart starts with a question: "1. Patient or Caregiver Reports of 2 or More Symptoms of Insomnia?".

1. Patient or Caregiver Reports of 2 or More Symptoms of Insomnia?

- Difficulty falling asleep at bedtime
- ≤ 6 uninterrupted hours of sleep each night
- Awakens > 1 time per night with difficulty reinitiating sleep
- Daytime sleepiness
 - Often dozes following lunch
 - Often dozes while watching TV
 - Often dozes while in a public place (meeting or activity)
 - Often dozes while sitting and talking
 - Often seeks to lie down and nap in the afternoon

2. Acute onset of symptoms? (defined as occurring continuously or intermittently < 4 weeks)

2a. Review for identifiable Cause of Acute Insomnia

2b. Review for identifiable Cause of Chronic Insomnia

3. Is the cause modifiable through a medical intervention and/or change in an environmental factor?

- Yes:** Add low dose of a sedating antidepressant (Non-TCA preferred)
- No:** Add short-acting, PPIA, hypnotic agent (2-4 wks)

4. Is the cause modifiable through a medical intervention and/or change in an environmental factor?

- Yes:** Add low dose of a sedating antidepressant (Non-TCA preferred)
- No:** Add low dose of a sedating antidepressant (Non-TCA preferred)



Interaction Screening

On-screen drug-drug, drug-disease, drug-food interaction screening of patient profiles updated quarterly.

The screenshot displays the GeriMed Profiles software interface. The main window is titled "GeriMed Profiles - [Patient : Form]" and shows patient information for "CONTRARY, MARY Q". The patient's DOB is 05/05/1924, age is 82.66, and they are a White Female. The drug list includes ARICEPT, ASPIRIN, LEXAPRO, NAMENDA, PHENYTOIN, WARFARIN SODIUM, and ZYPREXA. The "Drug Interactions" section shows a table of interactions found within the patient's current drug regimen, including ASPIRIN and PHENYTOIN, and ASPIRIN and WARFARIN SODIUM. The "Drug-Drug" section shows the severity of the interaction as "None". The "Drug-Food" section shows a list of references for the interaction between aspirin and warfarin.

Notes (dbl click field to view)	Sort	Drug
		ARICEPT [DONEPEZIL HYDROCHLORIDE TAB 10 MG]
		NAMENDA [MEMANTINE HCL TAB 5 MG]
		LEXAPRO [ESCITALOPRAM OXALATE TAB 10 MG (BASE EQUIV)]
		WARFARIN SODIUM [WARFARIN SODIUM TAB 5 MG]
		ASPIRIN [ASPIRIN CHEW TAB 81 MG]

Drug Interactions Found Within the Patient's Current Drug Regimen	
ASPIRIN [ASPIRIN CHEW TAB 81 MG]	PHENYTOIN [PHENYTOIN SUSP 125 MG/5ML]
ASPIRIN [ASPIRIN CHEW TAB 81 MG]	WARFARIN SODIUM [WARFARIN SODIUM TAB 5 MG]

Drug-Drug | Drug-Food

Drug Doc Level
 Established Probable Suspected Possible Doubtful

Drug Severity
 Major Moderate Minor None

Click to Show Interactions For Drug Selected From Drug List

REFERENCES: 1. Quick RM et al: J Pharmacol Exp Ther 128:95(1960). 2. Watson RM et al: Circulation 24:613(1961). 3. Barrow MV et al: Arch Intern Med 120:620(1967). 4. Weiss HJ et al: J Clin Invest 47:2169(1968). 5. Fausa O: Acta Med Scand 188:403(1970). 6. Udall JA: Clin Med 77:20(1970). 7. Zucker MB et al: J Lab Clin Med 76:66(1970). 8. O'Reilly RA et al: Ann NY Acad Sci 179:173(1971). 9. Gibaldi M et al: J Pharm Sci 64:1064(1975). 10. Dale J et al: Am Heart J 99:746(1980). 11. Chesebro JH et al: Am J Cardiol 51:1537(1983). 12. Littleton F: JAMA 263:2888(1990). <Letter> 13. Hirsh J et al: Chest 120 (Suppl):3275 [1992]. <Review> 14. Turpie AGG et al: N Eng J Med 329:524(1993). 15. Ford D et al: Aust J Hosp Pharm 26:671(1996). 16. Loewen P et al: Can J Cardiol 14:717(1998). <Review> 17. Gullow AL et al: Arch Intern Med 159:1322(1999). 18. Altia MF et al: Austr J Hosp Pharm 30:23(2000). <Letter>



CMS F-Tag Scan

GenMed Profiles - [CMS F329 Regulatory Scan]

File Edit Insert Records Window Help

SELECT	DRUG	DOSE	DIAGNOSIS	THERAPEUTIC CATEGORY
	PHENYTOIN [PHENYTOIN SUSP 125 MG/5ML]		Stroke (cerebrovascular)	
	ZYPREXA [OLANZAPINE TAB 2.5 MG]	1t qhs	Schizo-affective type	*ANTIPSYCHOTICS*
	ASPIRIN [ASPIRIN CHEW TAB 81 MG]			
	WARFARIN SODIUM [WARFARIN SODIUM TAB 5 MG]			
	ARICEPT [DONEPEZIL HYDROCHLORIDE TAB 10 MG]			
	NAMENDA [MEMANTINE HCL TAB 5 MG]			
	LEXAPRO [ESCITALOPRAM OXALATE TAB 10 MG (BASE EQUIV)]			

CMS Regulatory Monograph

Recom Key Word: Antimanic

F329- Table1 **Antimanic medications (Lithium)**

CMS REGULATORY INFORMATION MONOGRAPH

Lithium

INDICATIONS: Should generally not be given to individuals with significant renal or cardiovascular disease, severe debilitation, dehydration, or sodium depletion

DOSAGE:

DURATION:

INTERACTIONS: Serum lithium concentration levels can be affected by many other medications, e.g., thiazide diuretics, ACE inhibitors, NSAIDs

MONITORING: Toxic levels are very close to therapeutic levels. Serum lithium concentration should be monitored periodically, and dosage adjusted accordingly

ADVERSE CONSEQUENCES: May cause potentially dangerous sodium imbalance
Adverse consequences may occur at relatively low serum concentrations (1-1.5 mEq/L)

Record: 1 of 2

On-screen F-Tag scanning of patient profiles ensures that you are meeting federal drug regimen review guidelines within the skilled-nursing facility environment



Clinical Recommendations

Gerimed Profiles - [Patient : Form]

File Edit Window Clinical Tools Regulat

Search (F7) Enter letters of PatientName and pres

Transfer ADD CONTRARY, MARY Q

DOB: 05/05/1924 Age: 82.66

Ht (in): 0 Wt(lbs): 0

Sex: Patient Recommendations

Allerg: CONTRARY, MARY Q Search File By Key Word (F10)

Notes: ANTIPSY

**CMS-F329: ANTIPSYCHOTIC APPROPRIA
**CMS-F329: ANTIPSYCHOTIC DIAGNOSIS
**CMS-F329: ANTIPSYCHOTIC GRADUAL DOSE REDUCTION
**CMS-F329: ANTIPSYCHOTIC NURSING TARGET BEHAVIOR MONITORING
**CMS-F329: ANTIPSYCHOTIC OR MOOD STABILIZER GRADUAL DOSE REDUCTION- (PSYCHOSIS/BIF
**CMS-F329: ANTIPSYCHOTIC PHARMACIST ADVERSE EVENT MONITORING
Acetylcholinesterase (Exelon) Increase, Antipsychotic Decrease
ANTIPSYCHOTIC AND ACETYLCHOLINESTERASE INTERACTION
Antipsychotic Behavior/ Side Effect Monitoring
Antipsychotic Diagnosis Needed
Antipsychotic Dose Evaluation
Antipsychotic MDS 2.0 Correction
Antipsychotic use in dementia-behavior identification/ monitoring
Antipsychotic used in patients with Seizure Disorder
Antipsychotic used in the presence of a physical restraint
Antipsychotic/ Delusions Not Checked on MDS
Atypical Antipsychotic- FDA advisory
Automatic Stop Order (ASOP)- Antipsychotic Not Used in 60 days
CMS-F329: DUPLICATE ANTIPSYCHOTIC DRUGS
Description of Side Effects with Antipsychotic
FDA Antipsychotic Boxed-Text Warning
Preferred Antipsychotic Drugs (Zyprexa/ Abilify interchange)
PRN Antipsychotic Use

Comment Category: Antipsychotic Diagnosis

Comment Title: **CMS-F329: ANTIPSYCHOTIC DIAGNOSIS-JUE

General Outcome: Non-compliance with Regulatory Issue Resolved

Re AR Mo

Recommendations

Recom Date: 4/13/2007 General Outcome: D/C'd PRN Psychoactive Order

Comment Code: Antipsychotic Drug Evaluation

Comment Type: **CMS-F329: ANTIPSYCHOTIC GRADUAL DO

Close Recommendation Outcomes Amounts are not saved below after calculations are made.

Current Drug Therapy to Modify: AMT/Mo: 1

RISPERDAL [RISPERIDONE TAB 0.5 MG]

D/C Current Rx

Select Potential Drug Tx Modification: AMT/Mo: 1

RISPERDAL [RISPERIDONE TAB 0.5 MG]

Change Rx Add Rx Savings: 119.04

Med Passes Affected per Month: 0 Decreased Increased 27.30 min/n

Labs Affected per Year: 0 Decreased Increased Savings:

Since diagnoses alone do not warrant the use of antipsychotic medications, the clinical condition must also meet at least one of the following criteria: [PLEASE CHECK THE APPROPRIATE CRITERIA BELOW]

[] The symptoms are identified as being due to mania or psychosis (such as: auditory, visual, or other hallucinations; delusions (such as paranoia or grandiosity)); OR

[] The behavioral symptoms present a danger to the resident or to others; OR

[] The symptoms are significant enough that the resident is experiencing one or more of the following: inconsolable or persistent distress (e.g., fear, continuously yelling, screaming, distress associated with end-of-life, or crying); a significant decline in function; and/or substantial difficulty receiving needed care (e.g., not eating resulting in weight loss, fear and not bathing leading to skin breakdown or infection).

Physician
Nursing
D.O.N. Priority
Physician
Pharmacy
Med Rec
IDT
Formulary (Physicia

A custom recommendation text file that includes over 600 pre-formatted recommendations allows for quick generation of interventions and recommendations to the various disciplines. This file is modifiable and allows for editing or addition of recommendation templates to meet your consulting needs. Recommendation Outcomes can also be attached to the intervention showing drug and lab savings, as well as, administration time savings.



Progress Notes

The screenshot displays a medical software interface with several components:

- GerMed Profiles - [Patient : Form]**: A header bar with a menu (File, Edit, Window, Clinical Tools, Regulatory, Help, Articles) and a search field (Search (F7) with a Reset button).
- Patient Information Form**: Fields for Transfer (ADD), ID, DOB (05/05/1924), Age (82.66), Ht (0), Wt (0), Sex (White-Female), Payor (Medical), Allergies (PCN), and checkboxes for Psychotropic Usage, Antipsychotic, Sedative/Anxiolytic, Hypnotic, and Antidepressant.
- Consultant Pharmacist Note**: A pop-up window titled "CONSULTANT PHARMACIST NOTE: Label 1 of 1 1/26/2007" containing a checklist of items reviewed (Vitals, New Meds/Changes, Labs, Risk Meds, Psych Med Note) and a note by Tommy Philpot, PharmD, CGP, FASCP. The note includes the patient name "CONTRARY, MARY Q" and RM# "139A Example Facility".
- Notes/Recommendations (Shift + F1)**: A section with a table of notes and a list of medications.
- Medications Table**: A table with columns for Print, Due, Profile, and Monitoring. It lists Phenytoin I (due 08/06) and HbA1c (due 07/07).
- Recommendations Table**: A table with columns for Date, Recommendation, Pend, Reject, Duplic, Destination, RM, UNIT, Code, and Comment. It shows recommendations for CMS-F329 Antipsychotic Drug Evaluation and Duplication.

A custom progress note file allows for common note formats to be used as templates, or notes can be generated using free-text. All progress notes are printable in summaries, full-page, or using the Dymo Label Writer®, which allows for label to be placed in the patient record each month.



Compliance Tracking

Gerimed Profiles allows for compliance tracking of drug therapy and other interventions, which provides a CMS-based report card for the skilled-nursing facility. This includes F-Tags and benchmark comparisons to OSCAR data pertaining to state and federal statistics

Gerimed Profiles - [Face Sheet]

File Help

Close Save [Print] [Back] [Forward] [Home] <<<Use keys to review or print previously entered reports

Date: 3/27/2006 Facility: Example Facility Total Patients Reviewed: 88 Recalc

DO NOT BUILD STATISTICS (THIS REPORT) UNTIL YOU HAVE COMPLETED THE FACILITY FOR THE MONTH. If above census is incorrect after building report, enter the correct census and click Recalc.

Press button to build statistics for date range: 3/1/2007 - 4/1/2006

Compliance Profile Σ

% Patients Receiving Psychotropics	65.9
% Patients Receiving Antipsychotics	38.6
% Appropriate Antipsychotic Dx:	100
% Appropriate Antipsychotic Monitoring	100
% Patients Receiving Anx/ Sed	12.5
% Patients Receiving Hypnotics	4.55
% Patients Receiving Antidepressants	44.3

Appropriate drug diagnosis: 94.3 No excessive drug duration

Appropriate drug monitoring: 96.6 Med Issues of Particular Re

No duplication of drug therapy: 98.9 No excessive drug dosing

No subtherapeutic drug dosing: 100 No drug interactions

Medication Station and Cart Review

Areas Evaluated: Total Satisfactory: Satisfactory R:

Additional Information

Total Antipsychotic Dose Evaluations	0	General Re
Total Anxiolytic Interventions	1	Attempted L
Total Hypnotic Interventions	0	Total recom
Attempted non-psych dose reductions	0	Projected m

Additional Consulting Activities

Consultant Pharmacist Activity Report

Example Facility Date: 3/27/2006

Facility Compliance Profile

	Numerator	Denom.	% Compliance
F329- Medications used with appropriate diagnosis or condition:	88	/ 88	= 94.3
F329- Medications used with adequate and appropriate monitoring :	88	/ 88	= 100.0
F329- Medications used without unnecessary duplication of therapy:	88	/ 88	= 100.0
F329- Medications used with appropriate duration:	88	/ 88	= 100.0
F329- Medications used without overt or potentially significant adverse drug events:	88	/ 88	= 100.0
F329- Medications administered in appropriate or recommended dosages:	88	/ 88	= 100.0
F329- General medication issues of particular relevance avoided (from Table 1 SOM):	88	/ 88	= 100.0
F329, 428- Medication Interactions (Drug Interactions) avoided:	88	/ 88	= 100.0
F329- Antipsychotic drug use with appropriate diagnosis documented:	88	/ 88	= 100.0
F329- Potentially inappropriate drugs used in the elderly avoided: (Low Risk for ADR)	88	/ 88	= 100.0
F329- Potentially inappropriate drugs used in the elderly avoided: (High Risk for ADR)	88	/ 88	= 100.0
F329- Inappropriate medication administration avoided:	88	/ 88	= 100.0
F425- Appropriate medication documentation and complete medical records:	88	/ 88	= 100.0
F329- Hypnotic Drug Interventions-	0		
F329- Anxiolytic Drug Interventions-	1		
F329- Antipsychotic drug interventions (dose reductions/ discontinuations)	0		
F329- Non-psych drugs targeted for discontinuation (Unnecessary):	1		
F329- Non-psych drugs targeted for dose reduction (Unnecessary):	0		
F428- General drug regimen review recommendations:	12		

Additional Information

Average # Medications/ Resident (used in last 7 days of previous month)-	7.5
Average number of ROUTINE medication orders:	7.36
Average number of PRN medication orders:	2.6
Average number of medication orders (Routine + PRN):	9.96

Psychotropic Statistics: # Patients Facility% National% State% Notes



Medication Station and Cart Review

Gerimed Profiles - [Medication Station Review]

File Help

Close Save [Navigation icons] [Print icon] <<Use keys to review or print previously entered reports

Σ Calculate Compliance Total Reviewed: 41 Total Satisfactor 41 Rate (%): [] [Print icon]

Facility:

Station: Date:

Person Completing Form/ Title:

Controlled Drugs

1 Count reconciled per policy:	<input checked="" type="checkbox"/>	Controlled
2 Controlled meds have count sheets:	<input checked="" type="checkbox"/>	None
3 Discontinue/ Outdated meds stored under proper security:	<input checked="" type="checkbox"/>	
4 Active meds stored under proper security:	<input checked="" type="checkbox"/>	

Order, Receipt, Disposition

5 Orders/ Records within regulations:	<input checked="" type="checkbox"/>	Order, Re
6 Reordering procedure followed:	<input checked="" type="checkbox"/>	
7 Receipt of medication delivery within policy:	<input checked="" type="checkbox"/>	
8 No outdated, DC'd or deteriorated meds:	<input checked="" type="checkbox"/>	
9 Outdated and/or discontinued meds removed per policy:	<input checked="" type="checkbox"/>	

Security/ Storage

10 Lighting, ventilation and cleanliness with policy:	<input checked="" type="checkbox"/>	Security
11 Externals stored separately from internals:	<input checked="" type="checkbox"/>	None
12 Medication and/or keys secured:	<input checked="" type="checkbox"/>	
13 Medication and/or keys secured:	<input checked="" type="checkbox"/>	

Gerimed Profiles provides a detailed report showing compliance in 41 areas pertaining to medication station (storage rooms) and medication carts. This report complies with both Federal and JCAHO standards concerning this area of medication services

Consultant Pharmacist Report

****THIS REPORT IS BE TO USED FOR QUALITY IMPROVMENT PURPOSES ONLY***

Medication Station and Cart Review

Example Facility 3/28/2007 Station:

Controlled Drug Review F-tag 427,432

	Met (yes/no)
1 Count reconciled per policy:	Yes None
2 Controlled meds have count sheets:	No
3 Discontinue/ Outdated meds stored under proper security:	Yes
4 Active meds stored under proper security:	Yes

Order, Receipt and Disposition F-tag 427

	Met (yes/no)
5 Orders/ Records within regulations:	Yes
6 Reordering procedure followed:	Yes
7 Receipt of medication delivery within policy:	Yes
8 No outdated, DC'd or deteriorated meds:	Yes
9 Outdated and/or discontinued meds removed per policy:	Yes

Security/ Storage F-tag 432

Met (yes/no)



Data Storage and Transfer

The screenshot displays the GeriMed Profiles software interface. The main window shows a facility profile for "Eatonton Health & Rehab". A menu is open, listing options such as "Export Facility Data", "Import Complete Facility Data", and "Synchronize Team Consulting Data". A secondary window titled "Import Patient and Medication Data - Eatonton Health _Rehab Center" is active, showing a "Select file to Import" dialog box. The dialog box lists various files in the "Rph" directory, including PDF documents, executables, and database files. The "Files of type" is set to "All Files (*.*)".

GeriMed Profiles allows for the development of a data warehouse, sharing of patient files between consultants, file backups, as well as, importation (interfacing capability) of patient demographics and medications from a variety of dispensing pharmacy software packages



System Requirements

- Windows 98 or later versions
- Minimum of 64 mb of RAM
- 450 mb of hard drive space
- Internet access (recommended)
- AMD or Pentium Processor
- CD/ DVD ROM
- An available USB Port (thumb-drive preferred for backup purposes)



Agreement Terms

- Must sign licensing agreement
- Must be a committed GeriMed Member or GeriMed Network Member
- Software, manuals, updates and support is provided to GeriMed Members as benefit of membership
- The software may be provided to Non-GeriMed Members under a separate licensing agreement that includes an initial fee, followed by yearly fees for updates and support