

Controlled Substances Prescription Monitoring Program

Dean Wright, RPh
CSPMP Director
Arizona State Board of Pharmacy

Controlled Substances Prescription Monitoring Program

Faculty Disclosure Declaration:

I have no actual or potential conflict of interest in relation to this program or presentation.

Controlled Substances Prescription Monitoring Program

Learning Objectives:

- Explain how to gain access and general information about the AZ Controlled Substance Prescription Monitoring Program (AZ CSPMP)

Practitioner/Pharmacist Procedures for Requesting Access

Controlled Substances PMP Website

File Edit View History Bookmarks Tools Help

Arizona State Board of Pha... x Arizona State Board of Pha... x +

https://pharmacympm.az.gov

CareerMap login NIC Fax Log CSPMP Database

State Agencies State Services

Search az.gov az.gov



Arizona State Board of Pharmacy

CONTROLLED SUBSTANCES PRESCRIPTION MONITORING PROGRAM



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LATEST NEWS

Summary

The Controlled Substances Prescription Monitoring Program (CSPMP) is a program developed to promote the public health and welfare by detecting diversion, abuse, and misuse of prescription medications classified as controlled substances under the Arizona Uniform Controlled Substances Act. To learn more about Arizona's Controlled Substances Prescription Monitoring Program history, [click here](#).

CRITICAL CHANGES TO CSPMP ACCESS

The CSPMP changed vendors to Optimum Technologies effective December 21, 2013. Notice of this change was sent via email to all current users. Your original PIN # is needed to reset your password in order to gain access to the CSPMP database. **Your username (which the previous vendor called Login ID) remains the same.** If you do not have your original PIN #, or are unable to access the system, please email chunter@azpharmacy.gov from the email associated to your account. If your email has changed we'll need your user name and the last four digits of your SSN to verify your registration.

REGISTRATION

Step 1 for Medical Practitioners (not pharmacists - see below)

A.R.S. § 36-2606 requires each medical practitioner who is licensed under Title 32 and who possesses a DEA license to register with the CSPMP. **Each DEA license should have an associated registration.** There is NO fee to the practitioner for this registration. This registration includes: MD, DO, DDS, DMD, DPM, HMD, PA, NP, ND, OD, and DVM.

Residents may register using the hospital DEA number and appropriate suffix.

[Register now](#)

CONTACT INFORMATION

Dean Wright
CSPMP Director



Phone: (602) 771-2744



E-mail: dwright@azpharmacy.gov

Cindi Hunter
CSPMP Manager



Phone: (602) 771-2732



E-mail: chunter@azpharmacy.gov

ASBP Mailing Address
P.O. Box 18520 Phoenix, AZ 85005

USER ACCESS

Medical Practitioners, Pharmacists,
Boards, Law Enforcement, & AHCCCS

[Login to Database](#)

(for authorized users and data uploaders)

MEDICAL PRACTITIONER REGISTRATION

[Registration/Renewal](#)

(for medical practitioners only)

Registration Step 1

The screenshot shows a web browser window with the URL <https://pharmacympm.az.gov>. The page content is as follows:

REGISTRATION

Step 1 for Medical Practitioners (not pharmacists - see below)

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Residents may register using the hospital DEA number and appropriate suffix.

[Register now](#)

Medical Practitioners, Pharmacists, Boards, Law Enforcement, & AHCCCS

[Login to Database](#)

(for authorized users and data uploaders)

MEDICAL PRACTITIONER REGISTRATION

[Registration/Renewal](#)

(for medical practitioners only)

RESOURCES

- [Emergency Department Practices](#)
- [Pharmacist Best Practices](#)
- [Rules](#)

New Registration

Firefox | Practitioner Self Look-up | https://www.azrx...n.com/Login.aspx | AZ Board of Pharmacy | Microsoft Word - ArizonaPDMD... | Arizona Medical Board - Protecting... | maricopa city county

Most Visited | dotStaff™ | Board of Pharmacy | CSPMP Login | PDFSplit! - Split PDF fil... | PMP Database | AZ HID | Careermap | Medical Board Search | Nursing Board Search | Gmail | My FMS - Sign In | ACJC



Arizona Board of Pharmacy CSPMP Registration and Renewal Database

Welcome to the Arizona State Board of Pharmacy's (ASBP) online Controlled Substance Prescription Monitoring Program (CSPMP) Registration and Renewal system.

A.R.S. § 36-2606 requires each medical practitioner who is licensed under Title 32 and who possesses a DEA registration to also possess a current controlled substances prescription monitoring program registration issued by the Board. There is no fee to the practitioner for this registration. This registration includes: MD, DO, DDS, DMD, DPM, HMD, PA, NP, ND, OD, and DVM.

To renew your registration please login and click Renew button.

Note: The renewal period is March 1 and May 31. The length of the renewal period (one year or two) is pre-determined by the registration number. The Web site is available for registrations year-round.

IF YOU ARE UNABLE TO RENEW YOUR REGISTRATION ONLINE FOR ANY REASON - YOU WILL HAVE TO RENEW BY MAIL OR IN PERSON.

Please direct all registration questions to the CSPMP Program Director, Dean Wright.
Dean Wright, Prescription Monitoring Program Director
Arizona State Board of Pharmacy
1616 West Adams, Suite 120
Phoenix, Arizona 85007-2835
Phone: (602) 771-2744
Fax: (602) 771-2748
E-mail: dwright@azpharmacy.gov

Member Login

Login as Admin:

CSPMP ID:

[Recover CSPMP ID](#)

DEA #:

Login

Not a member? [Register](#)

Not yet verified? [Verify Email](#)

To begin a new registration click the [Register](#) link.

To renew an existing registration log in and follow the prompts for renewing your registration.



New Registration Screen

Firefox | User Details Page | https://www.azrx...egistration=true | AZ Board of Pharmacy | Microsoft Word - ArizonaPMD... | Arizona Medical Board - Protecting... | maricopa city county

Most Visited | dotStaff™ | Board of Pharmacy | CSPMP Login | PDFSplit! - Split PDF fil... | PMP Database | AZ HID | Caremap | Medical Board Search | Nursing Board Search | Gmail | My FMS - Sign In | ACJC

Profile Information

DEA Number: * DEA Suffix (Resident Only): State License Number: * DEA Schedule: 2 2N 3 3N 4 5

DEA Expiration Date: * License Expiration Date: * Dispenser: No Yes

Contact Information

First Name: * Middle Name: Last Name: * Suffix:

Facility Name: Degree: *

Physical Address 1: * Address 2: City: * County: *

State: * Zip: *

Mailing Address is the same

Mailing Address 1: * Address 2: City: * County: *

State: * Zip: *

Home Phone: Cell Phone: Fax Number: * Work Phone: * Extension:

Email Address: *

I certify to the best of my knowledge the registration application is complete and accurate.

Register Cancel

Windows taskbar with icons for Internet Explorer, File Explorer, Outlook, Word, PowerPoint, and system tray showing date and time: 3:27 PM 1/13/2014

Email Verification

Arizona Registration Confirmation - Message (HTML)

File Message McAfee E-mail Scan

Ignore X Delete Reply Reply All Forward More Meeting

Compliments To Manager Team E-mail Done Reply & Delete Create New

Rules OneNote Actions Move Mark Unread Categorize Tags Find Related Select Zoom

Translate Editing

From: AZRXReporting@otech.com Sent: Wed 5/28/2014 1:25 PM
To: Dean Wright
Cc:
Subject: Arizona Registration Confirmation

To: 

Thank you for registering for the Arizona CSPMP Registration and Renewal database. Your CSPMP ID is **PMP027827**.

Prior to logging into the system you will need to verify your email address by clicking [here](#). The verification code you will need to use is **712290**.

Thank you,

Optimum Technology, Inc

See more about: AZRXReporting@otech.com.

Enter CSPMP ID and Verification Code

File Edit View History Bookmarks Tools Help

Arizona State Board of Pha... x Arizona State Board of Pha... x https://www.azr...erifyEmail.aspx x +

https://www.azrxregistration.com/VerifyEmail.aspx

CareerMap login NIC Fax Log CSPMP Database



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To renew your registration please login and click Renew button.

Note: The renewal period is March 1 and May 31. The length of the renewal period (one year or two) is pre-determined by the registration number. The Web site is available for registrations year-round.

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Dean Wright, Prescription Monitoring Program Director
Arizona State Board of Pharmacy
1616 West Adams, Suite 120
Phoenix, Arizona 85007-2835
Phone: (602) 771-2744
Fax: (602) 771-2748
E-mail: dwright@azpharmacy.gov

Email Verification

CSPMP ID:

Verification Code:

[Back to Login](#)

To begin a new registration click the [Register](#) link.

To renew an existing registration log in and follow the prompts for renewing your registration.

Login w/ CSPMP ID and DEA number



Arizona Board of Pharmacy CSPMP Registration and Renewal Database

LOGOUT

[Home](#) > Registration

Welcome DEAN.WRIGHT

Registration Details

CSPMP Id: PMP027835 Created Date: 5/29/2014 Expiration Date: 4/30/2015

Profile Information

DEA Number: [REDACTED] DEA Suffix (Resident Only): [REDACTED] State License Number: [REDACTED] DEA Schedule: 2 2N 3 3N 4 5

DEA Expiration Date: 08/31/2014 License Expiration Date: 02/14/2015 Dispenser: No Yes

Contact Information

First Name: [REDACTED] Middle Name: [REDACTED] Last Name: [REDACTED] Suffix: [REDACTED]

Facility Name: [REDACTED] Degree: MD - Medical Doctor

Physical Address 1: [REDACTED] Address 2: [REDACTED] City: Phoenix County: Maricopa

State: Arizona Zip: 85004

Mailing Address is the same

Home Phone: [REDACTED] Cell Phone: [REDACTED] Fax Number: [REDACTED] Work Phone: [REDACTED] Extension: [REDACTED]

Email Address: [REDACTED]

Admin

Inactive Comment: [REDACTED] Inactive:

Registration verified:

I certify to the best of my knowledge the registration application is complete and accurate.

Print Certificate Save Back

Gaining Access to Patient Data

NP, ND, OD, and DVM.

Residents may register using the hospital DEA number and appropriate suffix.

[Register now](#)

[Registration/Renewal](#)

(for medical practitioners only)

RESOURCES

- [Emergency Department Practices](#)
- [Pharmacist Best Practices](#)
- [Rules](#)
- [Statutes](#)

DATA REQUESTS

- [AHCCCS request form](#)
- [Law Enforcement request form](#)
- [Licensing Board request form](#)
- [Patient request form](#)
- [Privacy statement](#)

MANUALS

- [Manual - Uploaders](#)
- [Manual - Users](#)

ACCESSING THE DATA

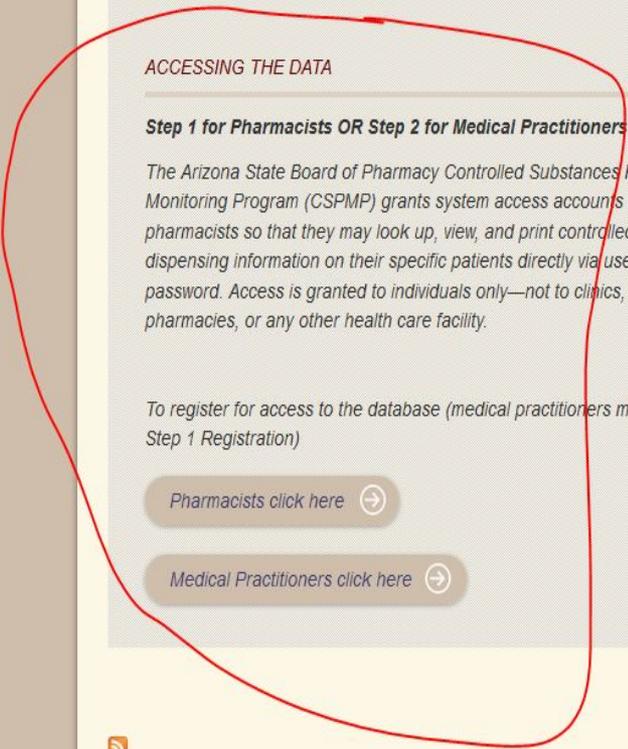
Step 1 for Pharmacists OR Step 2 for Medical Practitioners

The Arizona State Board of Pharmacy Controlled Substances Prescription Monitoring Program (CSPMP) grants system access accounts to practitioners and pharmacists so that they may look up, view, and print controlled substance dispensing information on their specific patients directly via user name and password. Access is granted to individuals only—not to clinics, hospitals, pharmacies, or any other health care facility.

To register for access to the database (medical practitioners must have completed Step 1 Registration)

[Pharmacists click here](#)

[Medical Practitioners click here](#)



New Access USER registration

Firefox Registration + AZPMP Practice Training on AZPMP Computer Model - New User Profile

https://staging.otech.com/AZPMP/NewRegistration.aspx Google

Most Visited dotStaff™ Board of Pharmacy CSPMP Login PDFSplit! - Split PDF fil... PMP Database AZ HID Careermap Medical Board Search az Nursing Board Search Gmail My FMS - Sign In ACJC

New Registration

Profile Information

Organization:	Occupation:	DEA Number:	Specialty Care:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name:	Middle Name:	Last Name:	Date Of Birth:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Four Digits Of SSN:			
<input type="text"/>			

Contact Information

Address: (Care Of)	Street:	City:	State:	Zip:
<input type="text"/>	<input type="text"/>	<input type="text"/>	AZ <input type="text"/>	<input type="text"/>
Home Phone:	Cell Phone:	Fax Number:	Work Phone:	Extension:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Pager Number:	Email Address:	Region:	Notification Method:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	Email <input type="text"/>	

User Job and Identification

User Job:	<input type="text" value="Prescriber"/>
DEA Number	<input type="text"/>
State License Number	<input type="text"/>
DEA Suffix Number	<input type="text"/>

Security Questions

What is Your Mother's Maiden Name?	<input type="text"/>
------------------------------------	----------------------

Reason For Registration

Access Registration (Step 2)

Once completed your Access Registration will be confirmed and a user name and password will be e-mailed to you, usually within 24-48 business hours.

Except, if you have a nonresident license, you need to print your Access Registration and read and sign the Privacy Statement and have it notarized. Then mail both documents along with a copy of your nonresident State license and your Driver's License. Once received and process, a user name and password will be emailed to you.

Access Registration (Step 2)



Arizona CSPMP Prescription Drug Monitoring
Program

6/30/2014

Arizona State Board of Pharmacy, 1616 W. Adams, Suite 120,
Phoenix, AZ 85007

Page 1 of 3

Phone :866-683-2476 Fax :866-262-7079 Email :azrxreporting@atech.com

Your registration has been submitted to the PMP Administrator for verification of your qualifications for access. You will receive an e-mail with your username and password once approved.

Profile Information

First Name:

[REDACTED]

Middle Name:

[REDACTED]

Last Name:

[REDACTED]

User Job Identification

User Job:

Pharmacist

State License Number:

[REDACTED]

Contact Information

Address:

[REDACTED]

City, State, Zip:

[REDACTED]

Home Phone:

Work Phone:

[REDACTED]

Fax number:

Email:

[REDACTED]@hs.gov

Reason For Registration

To verify the patient medical history before dispensing controlled medication

Access Registration (Step 2)



Arizona CSPMP Prescription Drug Monitoring Program
Arizona State Board of Pharmacy, 1616 W. Adams, Suite 120,
Phoenix, AZ 85007
Phone :888-683-2476 Fax :866-282-7678 Email :azrxreporting@otech.com

6/30/2014

Page 3 of 3

PRIVACY STATEMENT

Statutory Authority:

Section 2602 of Arizona Revised Statutes Title 36, Chapter 28, the Arizona Controlled Substances Prescription Monitoring Program Act, requires the Arizona State Board of Pharmacy (ASBP) to establish a computerized controlled substance tracking system to track the prescribing, dispensing, and consumption of Schedule II, III, and IV controlled substances dispensed by a medical practitioner or by a pharmacy. The purpose of the program is to improve the State's ability to identify controlled substances in an efficient and cost effective manner that will not impede the appropriate medical utilization of licit controlled substances.

Access to Information:

A.R.S. 236-2604 (C) (1) authorizes ASBP to release the data from the Controlled Substances Prescription Monitoring Program (CSPMP) to persons authorized to prescribe or dispense controlled substances for the purpose of providing medical, pharmaceutical care to a patient or to evaluate a patient.

A.R.S. 236-2604 (C) (3), (4), and (5) authorizes ASBP to release data from the CSPMP to a professional licensing board, a local, state, or federal law enforcement agency or criminal justice agency, and the Arizona Health Care Cost Containment System (AHCCCS) Administration, after receiving a written request that states that the information is necessary for an open investigation or complaint.

Unlawful Disclosure:

Any person who is granted access to the information in the CSPMP database and who knowingly disclosed the information in a manner inconsistent with a legitimate profession or regulatory purpose, a legitimate law enforcement purpose, the terms of a court order, or as otherwise expressly authorized by A.R.S. Title 36, Chapter 28 is guilty of a Class 6 felony.

I understand that inappropriate access or disclosure of this information is a violation of Arizona law and may result in disciplinary action by my licensing board and/or revocation of database access privileges.

Account Agreement:

By signing this agreement I hereby agree to follow the security and password policies of the Controlled Substances Prescription Monitoring Program. I agree not to disclose, misrepresent, any data or protected health information to any unauthorized person or party. I agree that I will not share my account information, login name, or password with anyone, even if they are authorized users of the program.

Signature: _____ Date: _____

Print Name: _____

STATE OF _____)

_____) SS.

County of _____)

Subscribed and sworn or affirmed and acknowledged before me this _____ day of _____, 2014.

Notary Public

My Commission Expires: _____

Login Screen

Firefox Registration CSPMP Login
S009789
Google
Most Visited dotStaff™ Board of Pharmacy CSPMP Login PDFSplit! - Split PDF fil... PMP Database AZ HID Caremap Medical Board Search az Nursing Board Search Gmail My FMS - Sign In ACJC

ARIZONA CSPMP

Welcome to Arizona's Controlled Substances Prescription Monitoring Program (PMP). Please login to continue.



Not a member? [Register](#)

[Download Arizona CSPMP Reporting Manual!](#)

Username

Password

[Forgot/Reset Password?](#)

Login

Please use the above link if you have forgotten your password. If you have unresolved issues, please contact the Administrator at:

Phone: 1-866-683-2476

Email: azrxreporting@otech.com

Due to the increase in support call volume it is recommended that you contact us via email at azrxreporting@otech.com if you need help accessing the AZ CSPMP program. Please allow 24-48 business hours for a response from the AZ CSPMP support team. We apologize for the inconvenience.

Please review your 'My Account' section to ensure that this information is accurate. After you login, go to 'My Account' to review and update all necessary information.



AZ CSPMP Database Home Page

Firefox | dotStaff™ | Prescription Monitoring Pr... | https://www....d=PMP026558 | AZ Prescription Monitoring... | Arizona Medical Board - Pr... | AZ Prescription Monitoring... | +

https://www.azxreporting.com/Default.aspx | Google

Most Visited | dotStaff™ | Board of Pharmacy | CSPMP Login | PDFSplit! - Split PDF fil... | PMP Database | AZ HID | Careermap | Medical Board Search | Nursing Board Search | Gmail | My FMS - Sign In | ACJC

ARIZONA CSPMP

Welcome, Dean Wright | MY ACCOUNT | LOGOUT

Request | Notification | Data Collection

Home

Other Links

- Messages (1)
- Info Center
- FAQ
- Related Links

Latest News

Alerts

STAY ALERT

You don't have rights to view this section

Messages

Password Changed Succe...-1/24/2014

[Click here to view all Messages](#)

Requests

Wright,Pressly-1/24/2014-Pat
Wright,Pressly-10/28/2013-Pat
wright,press-9/27/2013-Pat
wright,Pressly-8/29/2013-Pat

[Click here to view all Requests](#)

Announcements

No New Announcements

[Click here to view all Announcements](#)

News

No New News

[Click here to view all News](#)

Program Guides & Information

No New News

[Click here to view all Program Guide & Information](#)

10:59 AM 1/27/2014

New Requests

Firefox | dotStaff™ | Prescription Monitoring Pr... | https://www....d=PMP026558 | AZ Prescription Monitoring... | Arizona Medical Board - Pr... | AZ Prescription Monitoring... | +

https://www.azxreporting.com/Default.aspx | Google

Most Visited | dotStaff™ | Board of Pharmacy | CSPMP Login | PDFSplit! - Split PDF fil... | PMP Database | AZ HID | Careermap | Medical Board Search | az Nursing Board Search | Gmail | My FMS - Sign In | ACJC

ARIZONA CSPMP

Welcome, Dean Wright | MY ACCOUNT | LOGOUT

Request | Notification | Data Collection

- View Request
- New Request**
- Messages (1)
- Info Center
- FAQ
- Related Links

Latest News

Alerts

STAY ALERT

You don't have rights to view this section

Messages

Password Changed Succ...-1/24/2014

Click here to view all Messages

Requests

Wright,Pressly-1/24/2014-Pat
Wright,Pressly-10/28/2013-Pat
wright,press-9/27/2013-Pat
wright,Pressly-8/29/2013-Pat

Click here to view all Requests

Announcements

No New Announcements

Click here to view all Announcements

News

No New News

Click here to view all News

Program Guides & Information

No New News

Click here to view all Program Guide & Information

https://www.azxreporting.com/Request/Entity.aspx

10:54 AM 1/27/2014

Patient information entry

Firefox Registration Request

https://www.azxreporting.com/Request/Entity.aspx

ARIZONA CSPMP

Welcome, Dean Wright MY ACCOUNT LOGOUT

Request Notification Data Collection

Home > Request > New Request

View Request

New Request

Other Links

Messages (1)

Info Center

FAQ

Related Links

Latest News

Request

Patient

Patient Details

Last Name:

First Name:

Middle Name:

Birth Date:

Gender:

Contact Details

Street:

City:

State: AZ

Zip:

Aliases

Prescription Range

Set default to last 12 months date range

Date Filled From:

Date Filled To:

Options

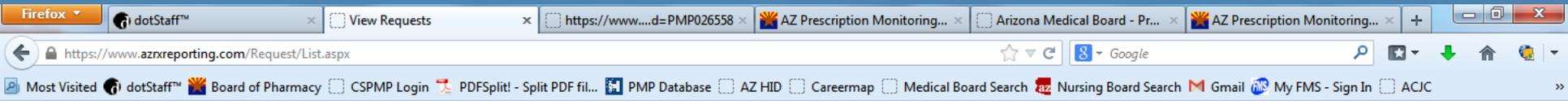
Format: PDF

I certify that the information I have entered above is accurate.

Create

2:24 PM 1/27/2014

View Request Screen



ARIZONA CSPMP Welcome, Dean Wright [MY ACCOUNT](#) [LOGOUT](#)

Request | Notification | Data Collection

[Home](#) > [Request](#) > View Request

[View Request](#)

[New Request](#)

Other Links

[Messages \(1\)](#)

[Info Center](#)

[FAQ](#)

[Related Links](#)

Latest News

View Request

First Name: <input type="text"/>	Last Name: <input type="text"/>	Requested Type: <input type="text"/>
Submitted date From: <input type="text" value="12/27/2013"/>	Submitted date To: <input type="text"/>	Request Status: <input type="text"/>
Submitted By: <input type="text" value="AZRPH7849"/>		
DEA Num: <input type="text"/>		

[Export to Excel](#) [Search](#) [Clear](#)

Showing 1-1 of 1

Name	Type	Submitted By	Submitted On	Status
Presly Wright	Patient	Dean Wright	1/24/2014 9:33:00 AM	Auto Fulfilled

Items Per Page

Home | [Related Links](#) | [Info Center](#) | [FAQ](#) | [Contact Us](#) | Version 5.0.7.845
© 2010, Optimum Technology Inc. All rights reserved



Open the PDF File

Firefox | dotStaff™ | Request | https://www....d=PMP026558 | AZ Prescription Monitoring... | Arizona Medical Board - Pr... | AZ Prescription Monitoring... | +

https://www.azrxreporting.com/Request/RequestView.aspx?EntityID=4236010 | Google

Most Visited | dotStaff™ | Board of Pharmacy | CSPMP Login | PDFSplit! - Split PDF fil... | PMP Database | AZ HID | Careemap | Medical Board Search | az Nursing Board Search | Gmail | My FMS - Sign In | ACJC

ARIZONA CSPMP

Welcome, Dean Wright | MY ACCOUNT | LOGOUT

Request | Notification | Data Collection

Home > Request > View Request

Request

Patient

User Name	Response	Sent On	Attachment
Dean Wright	Your request has been processed automatically	1/24/2014 9:33:00 AM	Patient Rx History Report.PDF

Current Response

Dean Wright on Fri 1/24/2014 9:33 AM Attachment: [Patient Rx History Report.PDF](#)

Your request has been processed automatically

No file selected.

Patient Details

Last Name: First Name: Middle Name:

Birth Date: Gender:

Contact Details

Street: City: State: Zip:

Aliases

Alias	Last Name	First Name	Middle Name	Date of Birth	Remove
-------	-----------	------------	-------------	---------------	--------

Prescription Range

Set default to last 12 months date range Date Filled From: Date Filled To:

Windows Taskbar: 10:52 AM 1/27/2014

Sample Report



Arizona CSPMP Prescription Drug Monitoring Program
Arizona State Board of Pharmacy, 1616 W. Adams, Suite 120, Phoenix, AZ 85007

Phone:866-683-2476 Email:azrxreporting@otech.com Fax:866-282-7076

Patient RX History Report

PRESSLY WRIGHT

Date: 01-24-2014

This report may contain more than one patient's prescription information. Please review the "Patients that Match Search Criteria" section below to ensure all prescriptions belong to the requested patient.

Page: 1 of 1

Search Criteria: ((Last Name Begins 'Wright' AND First Name Contains 'Pressly') AND (D.O.B = '07/09/1949' AND State = 'AZ')) AND Request Period = '04/01/2009' To '01/24/2014'

Patients that match search criteria

Pt ID	Name	DOB	Address
6421	WRIGHT, PRESSLY	07/09/1949	13170 W. ALVARADO CIR GOODYEAR AZ 85338

Prescriptions

Fill Date	Product, Str, Form	Quantity	Days	Pt ID	Prescriber	Written	Rx #	N/R	Pharm	Pay
07/22/2010	CHERATUSSIN AC, 10 MG/5 ML-100 MG/5 ML, LIQUID	120.00	2	6421	BRY DA53	07/22/2010	420892	N	BX9625560	01

N/R: N=New R=Refill

Pay:01=Private Pay 02=Medicaid 03=Medicare 04=Commercial Ins. 05=Military Inst. and VA 06=Workers Comp 07=Indian Nations 99=Other

Total Prescriptions: 1

Prescribers for prescriptions listed

BRY DA53 DAVID BRYMAN 12020 S. WARNER ELLIOTT LOOP, SUITE 104 PHOENIX AZ 85044

Pharmacies that dispensed prescriptions listed

BX9625560 XPRESS CARE PHARMACY; 13055 W. MCDOWELL ROAD, BUILDING E, SUITE 103 AVONDALE AZ 85392 , PHONE

Disclaimer: The State of Arizona does not warrant the above information to be accurate or complete. This Report is based on the search criteria entered and the data reported by the dispensing pharmacy. For more information about any prescription, please contact the dispensing pharmacy or the prescriber.

Delegates

We can now give access to prescriber and pharmacist delegates. Prescriber may authorize Licensed and Unlicensed Delegates. Pharmacists may authorize Licensed Delegates.

Prescriber Delegates:

- Licensed: Registered Nurse, Licensed Practical Nurse, or Dental Hygienist
- Unlicensed: Medical Records Technician, Medical Assistant, or Office Manager

Pharmacist Delegates:

- Licensed: Pharmacy Intern, Pharmacy Technician, or Pharmacy Technician Trainee

New Registration

Registration Instructions

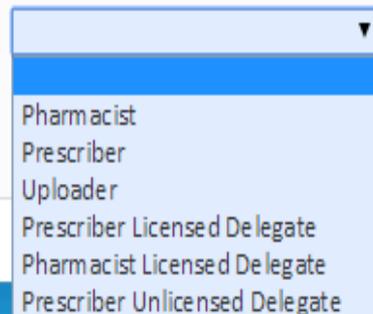
Welcome to the Arizona CS PMP registration process.

To begin the registration process

1. select the job type that best describes your profession.
2. Click the Next button.
3. Please fill out the information requested.
4. Click the Register button and follow the on screen instructions If you have any questions please contact the PMP Help desk at Phone: (866) 683-2476 Email: azrxreporting@otech.com

- **Please select the Account Type that matches your profession or most accurately describes your use of the Arizona CSPMP.**

Job:



▼

- Pharmacist
- Prescriber
- Uploader
- Prescriber Licensed Delegate
- Pharmacist Licensed Delegate
- Prescriber Unlicensed Delegate

New Registration

Profile Information

Organization:	Occupation Type:	License Number:	
<input type="text"/>	<input type="text" value="Registered Nurse (RN)"/> ▼ *	<input type="text"/>	
First Name:	Registered Nurse (RN)	Last Name:	Date Of Birth:
<input type="text"/>	Licensed Practical Nurse (LPN)	<input type="text"/>	<input type="text"/>
Last Four Digits Of SSN:	Dental Hygienist		
<input type="text"/>			

Contact Information

Address: (Care Of)	Street:	City:	State:	Zip:
<input type="text"/>	<input type="text"/>	<input type="text"/>	AZ ▼	<input type="text"/>
Home Phone:	Cell Phone:	Fax Number:	Work Phone:	Extension:
<input type="text"/>				
Pager Number:	Email Address:	Region:	Notification Method:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	Email ▼	

User Job and Identification

User Job: ▼

Supervisor Relationships

Supervisor's DEA Number:

Security Questions

What is Your Mother's Maiden Name? ▼

New Registration

Profile Information

Organization:	Occupation Type:	License Number:	
<input type="text"/>	<input type="text" value="▼"/> •	<input type="text"/>	
First Name:	Medical Record Technician	Last Name:	Date Of Birth:
<input type="text"/> •	Medical Assistant	<input type="text"/>	<input type="text"/>
Last Four Digits Of SSN:	Office Manager		
<input type="text"/> •			

Contact Information

Address: (Care Of)	Street:	City:	State:	Zip:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="AZ"/> ▼	<input type="text"/>
Home Phone:	Cell Phone:	Fax Number:	Work Phone:	Extension:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> •	<input type="text"/>
Pager Number:	Email Address:	Region:	Notification Method:	
<input type="text"/>	<input type="text"/> •	<input type="text" value="▼"/>	<input type="text" value="Email"/> ▼	

User Job and Identification

User Job: ▼

Supervisor Relationships

Supervisor's DEA Number:

New Registration

Profile Information

Organization:	Occupation Type:	License Number:	
<input type="text"/>	<input type="text" value="▼"/> *	<input type="text"/>	
First Name:	Pharmacy Technician	Last Name:	Date Of Birth:
<input type="text"/>	Pharmacy Intern	<input type="text"/>	<input type="text"/>
Last Four Digits Of SSN:			
<input type="text"/>			

Contact Information

Address: (Care Of)	Street:	City:	State:	Zip:
<input type="text"/>	<input type="text"/>	<input type="text"/>	AZ ▼	<input type="text"/>
Home Phone:	Cell Phone:	Fax Number:	Work Phone:	Extension:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Pager Number:	Email Address:	Region:	Notification Method:	
<input type="text"/>	<input type="text"/>	<input type="text" value="▼"/>	Email ▼	

User Job and Identification

User Job: ▼

Supervisor Relationships

Supervisor's State License Number:	Issuing State:	
<input type="text"/>	AZ ▼	<input type="button" value="Add"/>

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	AZ <input type="text"/>
Home Phone:	Cell Phone:	Fax Number:	Work Phone:	Extension:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Pager Number:	Email Address:	Region:	Notification Method:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	Email <input type="text"/>	

User Job and Identification

User Job:

Supervisor Relationships

Supervisor's DEA Number:

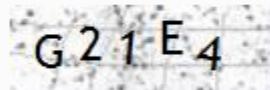
Add

Security Questions

What is Your Mother's Maiden Name?

Reason For Registration

Verification Code:



Can't read this code

Welcome to Arizona's Controlled Substances Prescription Monitoring Program (PMP). Please login to continue.



Not a member? [Register](#)

Username

Password

[Forgot/Reset Password?](#)

Login

Please use the above link if you have forgotten your password. If you have unresolved issues, please contact the Administrator at:

Phone: 1-866-683-2476

Email: azrxreporting@otech.com

Please review your 'My Account' section to ensure that this information is accurate. After you login, go to 'My Account' to review and update all necessary information.

Latest News

Alerts



You don't have rights to view this section

Messages



You don't have rights to view this section

Requests



No New Announcements

[Click here to view all Requests](#)

Announcements



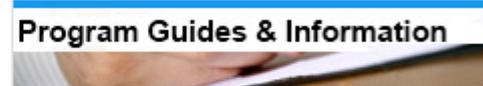
You don't have rights to view this section

News



You don't have rights to view this section

Program Guides & Information



View Request

New Request

Latest News

Request

Patient

Patient Details

Last Name:

First Name:

Middle Name:

Birth Date:

Gender:

Contact Details

Street:

City:

State:

Zip:

Aliases



Prescription Range

Set default to last 12 months date range

Date Filled From:

Date Filled To:

Select Supervisor

Select Supervisor User:

Please Select a Supervisor

I certify that the information I have entered above is accurate

Create

- View Request
- New Request
- Unsolicited - Received
- Unsolicited - Send
- Practitioner Self-Lookup
-
- Other Links**
- Messages (5)
- Alerts
- Info Center
- FAQ
- Related Links
-
- Latest News
-

View Request

First Name: <input type="text"/>	Last Name: <input type="text"/>	Requested Type: <input type="text" value="v"/>
Submitted date From: <input type="text" value="07/28/2014"/>	Submitted date To: <input type="text"/>	Request Status: <input type="text" value="v"/>
Submitted By: <input type="text"/>	IPAddress: <input type="text"/>	Email Address: <input type="text"/>
DEA Num: <input type="text"/>	Pharmacy Name: <input type="text"/>	

Export to Excel

« 1 »»

Showing 1-6 of 6

<u>Name</u>	<u>Type</u>	<u>Submitted By</u>	<u>Submitted On</u>	<u>Status</u>	
DEBORAH EPSTEIN	Patient	Delegate_Fname Delegate_Lname	8/22/2014 1:29:00 PM	Auto Fulfilled	
DEBORAH EPSTEIN	Patient	Delegate_Fname Delegate_Lname	8/22/2014 1:26:00 PM	Auto Fulfilled	
DEBORAH EPSTEIN	Patient	Delegate_Fname Delegate_Lname	8/22/2014 10:33:00 AM	Auto Fulfilled	
DEBORAH EPSTEIN	Patient	Delegate_Fname Delegate_Lname	8/22/2014 10:31:00 AM	Auto Fulfilled	
Smith	Patient	Delegate_Fname Delegate_Lname	8/19/2014 12:00:00 PM	Under Review	
DEBORAH EPSTEIN	Patient	Delegate_Fname Delegate_Lname	8/19/2014 11:35:00 AM	Auto Fulfilled	

Items Per Page v

- Unsolicited - Received
 - Unsolicited - Send
 - Practitioner Self-Lookup
- Other Links
- Messages (5)
 - Alerts
 - Info Center
 - FAQ
 - Related Links

- Latest News

User Name	Response	Sent On	Attachment	Delete
Delegate_Fname Delegate_Lname	Your request has been processed automatically	8/22/2014 1:29:00 PM	Patient Rx History Report.PDF	

Current Response

Delegate_Fname Delegate_Lname on Fri 8/22/2014 1:29 PM

Attachment: [Patient Rx History Report.PDF](#)

Pure Excel

Your request has been processed automatically

No file selected.

Patient Details

Last Name:

First Name:

Middle Name:

Birth Date:

Gender:

Contact Details

Street:

City:

State:

Zip:

Aliases

Alias	Last Name	First Name	Middle Name	Date of Birth	Remove
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Prescription Range

Set default to last 12 months date range

Date Filled From:

Date Filled To:

Supervisor Location

Location Detail:

Request To State(s) *The interstate request may take longer for response

Authorization: I certify that the information I have entered above is accurate.

Authorization Date: 8/22/2014 1:29:00 PM

User Name	Response	Sent On	Attachment	Delete
Delegate_Fname Delegate_Lname	Your request has been processed automatically	8/22/2014 1:29:00 PM	Patient Rx History Report.PDF	

Current Response

Delegate_Fname Delegate_Lname on Fri 8/22/2014 1:29 PM

Attachment: [Patient Rx History Report.PDF](#)

Pure Excel

Your request

Opening Patient Rx History Report.PDF ✕

You have chosen to open:

Patient Rx History Report.PDF
 which is: Adobe Acrobat Document
 from: https://staging.otech.com

What should Firefox do with this file?

Open with Adobe Reader (default) ▾

Save File

Do this automatically for files like this from now on.

OK
Cancel

Patient Data

Last Name:

EPSTEIN

Birth Date:

08/16/1960

Contact Data

Street:

Middle Name:

Zip:

Aliases

Alias	Last Name	First Name	Middle Name	Date of Birth	Remove
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Prescription Range

Set default to last 12 months date range

Date Filled From:

Date Filled To:

Supervisor Location

Location Detail: ▾

Request To State(s) *The interstate request may take longer for response

Authorization: I certify that the information I have entered above is accurate.

Authorization Date: 8/22/2014 1:29:00 PM

IPAddress: 69.61.233.196

WHO USES?

Who is using the database?

Practitioners make 58.82% of the queries

Pharmacists make 41.11% of the queries

Law Enforcement make 0.04% of the queries

Healthcare Boards make 0.03% of the queries

DATABASE USE

How often is the database being used?

Q2 2014	Average per day
Practitioners	3975
Pharmacists	2278
Law Enforcement	2.7
Healthcare Boards	1.7

Interstate Queries?	Quarter
Practitioners	1980
Pharmacists	2563

QUESTIONS?

Arizona State Board of Pharmacy

Web page: www.azpharmacy.gov

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