

Landing Page



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Oregon Prescription Drug Monitoring Program



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Oregon Healthcare Providers and Pharmacists Query Site

The Oregon Prescription Drug Monitoring Program (PDMP) is a tool to help healthcare providers and pharmacists provide patients better care in managing their prescriptions. Oregon Revised Statute 431.962 requires the Oregon Health Authority to establish and maintain a PDMP system for the reporting of all Schedules II, III and IV controlled substances dispensed by Oregon-licensed pharmacies to Oregon residents. The protected health information is collected and stored securely. The program was started to support the appropriate use of prescription drugs. The information is intended to help people work with their healthcare providers and pharmacists to determine what medications are best for them.

The Oregon Health Authority grants system access accounts to licensed healthcare providers and pharmacists and their staff. By law access to PDMP information by authorized system users is limited to patients under their care.



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If you need further assistance, please contact the PDMP Help Desk

Oregon Prescription Monitoring Program - IPE

800 NE Oregon St, Suite 772

Portland, OR 97232

Phone: (971) 673-0741 / Fax: (971) 673-0990 / TTY: (971) 673-0372

Email: pdmp.health@state.or.us

Click "Access System"

Login

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Provider/Pharmacist Access
Access
Practitioner Access
Login
Retrieve User Name
Retrieve Password

Authentication Required

The server https://orpdmp-ph.hidinc.com:443 requires a username and password. The server says: webuser.

User Name:
Password:

Log In Cancel

Monitoring Program

Oregon Health Authority

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Your User name is assigned to you based on your account type

Prescribers: your DEA #

Pharmacists: begins ORRPH, ends with the way you entered your number into the application

Delegates: Your first name, a period, your last name

Query page

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Recipient Query
Prescriber History Query
Prescriber DEA Query


Oregon Healthcare Providers and Pharmacists Query Site

Query Creation Tip

Make your query as general as possible and then drill down to more specific information once you have identified the person for whom you are looking. For example, you could enter the last name of the individual, the first letter of the first name, and a birth date, and then click Next. When the preliminary results are displayed on the screen, you can highlight the person that you want to query and then click Submit to submit the query for processing.

If you enter a specific birth date for an individual and the query results are blank, click the Within field just below the Date of Birth field and resubmit the query with a wider date range, for example, within two years of birth date, to create a query with broader search criteria.

Once you have submitted the query for processing, you will be redirected to the Report Queue. In the Report Queue, click the Job Sequence ID number to view the report you requested. If the Job Sequence ID is not a hyperlink, click your browser's refresh button. The Job Sequence ID will appear as a hyperlink when the report is ready for viewing.

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Recipient Query: look up patient information

Prescriber History Query: look up queries that have been run on patients

Prescriber DEA Query: see what controlled substances have been prescribed using your DEA #

Liability Statement

The screenshot shows the Oregon Prescription Drug Monitoring Program (PDMP) website. At the top left is the Oregon.gov logo. The main header reads "Oregon Prescription Drug Monitoring Program" with a background image of a beach. Below the header is a navigation bar with links for Home, Query (highlighted in blue), Report Queue, User Management, Help, and Quick Links. A Log Out link is on the right. On the left side, there is a yellow sidebar with a "Recipient Query" button highlighted. The main content area is titled "Oregon PDMP Liability Statement for Provider/Pharmacist" and contains several paragraphs of text, a checkbox for accepting terms, a disclaimer, and a final instruction to accept conditions before continuing.

OREGON.gov Oregon Prescription Drug Monitoring Program

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Recipient Query
Prescriber History Query
Prescriber DEA Query

Oregon PDMP Liability Statement for Provider/Pharmacist

I certify that I have read and accept the Terms & Conditions of Account Use Agreement and have been approved by the State of Oregon to access information in the Prescription Drug Monitoring Program (PDMP) database.
I certify that the patient for whom I am requesting PDMP data is under my care or the care of the healthcare provider who authorized me delegate access or is seeking to have a Schedule II, III or IV controlled substance prescription filled.

I understand that I am responsible for all use of my user name and password and that I am prohibited from sharing this information with any other individual or entity including medical assistants, staff, and co-workers.

I understand that inappropriate access or disclosure of PDMP data is a violation of Oregon law and may result in criminal, civil, or administrative sanctions, including disciplinary action by the appropriate licensing board and/or my employer as well as revocation of my database access privileges. I agree to treat any information accessed as confidential and will reasonably ensure the privacy and security of the information pertaining to my patient.
I understand that the PDMP will conduct auditing activities to monitor for unusual or potentially unauthorized use of the system.
I understand that patients can request a copy of their record that contains a list of who has accessed their record and may question my authority to access to their information.
I understand the PDMP database is not intended to provide any advice regarding diagnosis and treatment.

I accept the above conditions and certify that I have met the requirements to be eligible to access the Oregon PDMP database.

Disclaimer: The Oregon PDMP makes no claims, promises, or guarantees about the accuracy, completeness, or adequacy of the contents of this report, and expressly disclaims liability for errors and omissions in the contents of this report. The records herein are based on information submitted by pharmacies. Records in this report should be verified with the patient before any clinical decisions are made or actions are taken. Access to the record of an individual who is not a patient under the care of the person accessing the record is not permitted by law.

You must accept the above conditions before you can continue.

You must agree to the liability statement every time you conduct a query. The more in depth “Terms and Conditions” should be read thoroughly by every user and can be found at www.orpdmp.com.

Recipient Query

(This is test data)

*Last Name:

*First Name:

Search Method:

*Date of Birth:
mm/dd/yyyy

Within:

County:

ZIP Code:

*Dispensed Start Date:
mm/dd/yyyy

*Dispensed End Date:
mm/dd/yyyy

*Required Field
All required fields must be filled in.
However, for the best search results, fill in as many fields as possible.

Next Clear

Oregon Health Authority
Oregon Prescription Monitoring Program
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Portland, OR 97232
Phone: (971) 673-0741 / Fax: (971) 673-0990 / TTY: (971) 673-0990

All fields with an asterisk (*) must be filled out. If your search yields too many results enter data into the optional fields to refine your search

Results

The screenshot shows the Oregon Prescription Drug Monitoring Program interface. At the top, there is the Oregon.gov logo and the program title. A navigation menu includes Home, Query, Report Queue, User Management, Help, and Quick Links. A sidebar on the left contains links for Recipient Query, Prescriber History, Query, and Prescriber DEA Query. The main content area is titled 'Recipient Report' and displays the following information:

Recipient Information:
Last Name: Purple
First Name: Lara
Date of Birth: 06/17/1932
County: [blank]
Zip Code: [blank]
Dispensed Start Date: 06/01/2011
Dispensed End Date: 01/29/2014

Recipients: 1 out of 1 Recipient(s) Selected - Click to View

| Contest | Date Dispensed/Date Prescribed | Drug Name/ NDC | Quantity Dispensed/ Days Supply | RX# | Prescriber | Dispenser | Recipient | *Payment Method |
|---------|--------------------------------|----------------------------------------------|---------------------------------------|----------|-----------------------------|----------------------------------------|--------------------------------------------------------------------|--------------------|
| | 06/30/2011 02/28/2011 | ZOLPIDEM TARTRATE 5 MG TABLET 00093007301 | 36 0 | 40048824 | VRANNA LEE E MD | AMERIPHARM INC SIOUX FALLS, SDSt | Purple, Lara 06/17/1932 111-9090 Commodo Donald, OR 97020 | |
| YES | 06/30/2011 04/15/2011 | ACETAMINOPHEN- COD #3 TABLET 00093015001 | 90 0 | 40050286 | COLLINS DAVID MCAVLEY MD | AMERIPHARM INC SIOUX FALLS, SDSt | Purple, Lara 06/17/1932 111-9090 Commodo Donald, OR 97020 | |

Success! The data shown here is an example (fake test data).