

RESOURCE AND PATIENT MANAGEMENT SYSTEM

iCare Population Management GUI

(BQI)

Panel View User Manual

Version 2.9 Patch 5 January 2024

Office of Information Technology Division of Information Technology

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Preface

The purpose of this manual is to provide the information needed to use the latest enhancements to the Panel View window in the iCare (BQI) population management application.

This manual contains reference information about iCare views, examples of its processes, and step-by-step procedures to demonstrate how to perform activities related to the Panel View window in the latest version of the iCare application.

1.0 Introduction

iCare is a Windows-based, client-server graphical user interface (GUI) to the Indian Health Service (IHS) Resource and Patient Management System (RPMS). iCare retrieves key patient information from various components of the RPMS database and brings it together under a single, user-friendly interface. iCare is intended to help providers manage the care of their patients. The ability to create multiple panels of patients with common characteristics (e.g., age, diagnosis, community) allows users to personalize the way they view patient data.

The information included in this Panel View specific manual covers iCare Panel View functionality in iCare Version 2.9 Patch 5.

2.0 System Navigation

2.1 Panel View

Every panel, when opened, has a **Panel View**. Each panel displays data about the patients in the selected panel. Access this window by using the **Open** function from the Main View or by double-clicking a record on a specific panel in the **Panel List** from Main View.

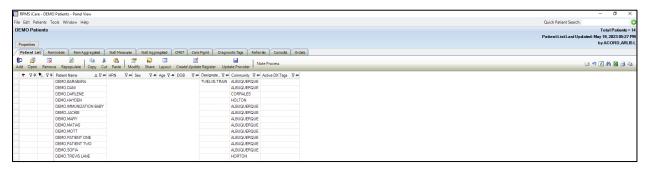


Figure 2-1: Sample Panel View window

Note: The **Repopulate** button will not display on the **Panel View** window if the patients in the panel were added manually (that is, the panel has no predefined logic).

Currently there are 13 tabs in Panel View.

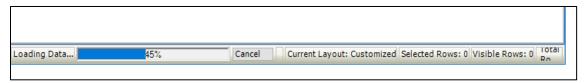


Figure 2-2: Loading Progress Information

The application displays the loading progress (in percentage) in the status bar when the panel contains a large number of patients. This feature applies to all tabs except the **Rem Aggregated** (Reminder Aggregated) tab.

Cancel the load by clicking Cancel; the application displays the Cancel display of data? dialog as confirmation to cancel the loading process. Click Yes to cancel the load (otherwise, click No).

iCare allows for more than one user to open the same shared panel simultaneously. The second and subsequent users to open the same panel will have "read only" access to the panel content, like Word or Excel functionality. If the first user closes the panel, the second user will be notified that the panel is now available for "edit" access, unless the user only has Shared Read Only access by the panel creator.

Any tab, once opened, can be viewed without re-loading the data.

2.1.1 Toolbar Buttons

There are important toolbar buttons available for users.



Figure 2-3: Left-hand side

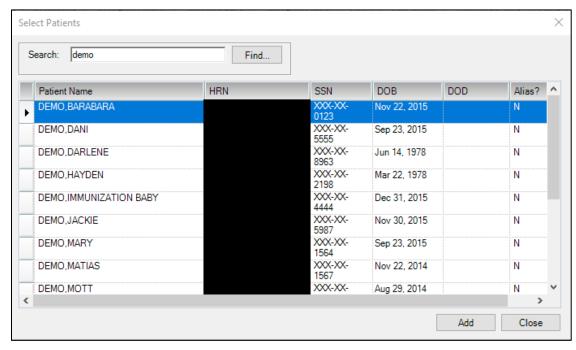
2.1.1.1 Add

Note: Add a patient to the current panel by using the **Add** function or copy a patient from another panel and paste the patient data into the current panel.

Only the panel creator or the shared user with Read/Write access can add patient names to the current panel. This is a manual add function. A patient name can be added even if the panel was originally created from a pre-defined search definition. The panel stores the original definition as well as any patients added. This is important during the repopulate action.

Add patient to the Panel View by doing one of the following:

- Clicking the **Add** (Add button
- Selecting Patients | Add Patient(s)
- Selecting the **Add Patient(s)** option on the context menu



The **Select Patients** dialog displays.

Figure 2-4: Select Patients dialog

- 1. Use any of the following to search for the patient in the **Search** field:
 - A few characters of the patient's last name
 - The patient's Health Record Number (HRN)
 - The patient's SSN
 - The patient's Date of Birth
- 2. Click **Find**. The retrieved records will display in the lower panel of the **Select Patients** dialog.
 - Refine the search (if needed) by using the **Search** field again.
 - More than one row at time can be added by selecting multiple rows using Ctrl and Shift keys while highlighting the row.
- 3. When the correct patient(s) is highlighted, click **Add** to add the patient(s) to the **Patient List** tab on the **Panel View** window. (Otherwise, click **Close**.)

2.1.1.2 Open

The Open function moves the focus to another window where the patient record (patient data information stored in the RPMS database) is viewable.

Highlight the patient name and open the patient record by doing one of the following:

- Clicking the **Open** (Open) button
- Selecting Patients | Open Patient(s)
- Selecting the **Open Patient(s)** option on the context menu
- Double-clicking the row in the grid
- Using the key combination Ctrl+O

This action opens your default tab of the Patient Record window.

By highlighting more than one row, multiple patient records open in individual windows.

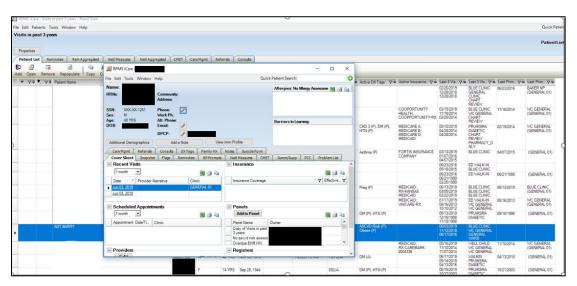


Figure 2-5: Patient View with patient selected using Open (Patients) dialog

2.1.1.3 Remove

The Remove function deletes one or more selected patients from the Patient List tab on the Panel View window. The removed patients are *not* deleted from the RPMS database but are only removed from your panel display. The Remove function is limited to the panel creator or the shared user with Read/Write access.

The panel stores the original definition as well as any patients removed or added. This is important during the repopulate action.

Remove the highlighted patients by doing one of the following:

• Clicking the **Remove** (Remove) button

- Selecting Patients | Remove Patient(s)
- Selecting the **Remove Patient(s)** option on the context menu
- Pressing the Delete key on your keyboard

After using the Delete function, the **Confirm patient remove** dialog displays, confirming the user would like to delete the selected patients. Click **Yes** to remove them. (Otherwise, click **No**.)



Figure 2-6: Remove Patients dialog

2.1.1.4 Repopulate

The Repopulate function rebuilds the contents of the panel. This function reruns the panel definition against the cached data (from the nightly job) and adds patients who meet the criteria and removes the patients that no longer meet the criteria. The Repopulate function is limited to the panel creator or the shared user with Read/Write access.

Note: The Repopulate button will not display on the Panel View if the patients in the panel were added manually (that is, the panel has no predefined logic).

Repopulate a panel by doing one of the following:

- Clicking the **Repopulate** (Repopulate) button
- Selecting Patients | Repopulate
- Selecting the **Repopulate** option on the context menu

A warning message displays that asks if the user would like to update the patient list by stating: The patient list for this panel may be updated during repopulation and cannot be undone. **Do you want to continue?** Click **Yes** to repopulate the panel. (Otherwise, click **No**.)

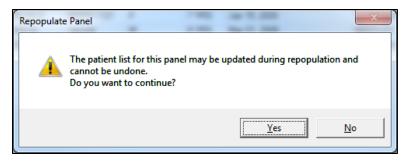


Figure 2-7: Repopulate Patients dialog

If patients were manually edited (added or removed), the Maintain Manual Changes warning message displays: This panel has been edited manually (patients added or removed). Do you want to keep your manual change while repopulating?

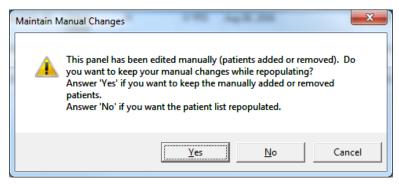


Figure 2-8: Maintain Manual Changes dialog

Click Cancel to cancel the repopulate process.

Click **Yes** to repopulate the panel and to keep the manually added or removed patients.

Click **No** to refresh the patient list. In this case, the patient list will be totally refreshed, and any added patient names will be lost as well as any deleted patient names will be added back to the panel.

iCare displays the "Background populate" information message if a panel with many patients is refreshed: **Populating the panel may take some time. Do you want to run in the background?** Click **Yes** to run the repopulate process in the background. Otherwise, click **No** to repopulate in the foreground.

2.1.1.5 Copy or Copy Patient(s)

The Copy function copies the selected patient's information to the iCare clipboard. Go to another panel view (for a different patient panel) and paste the patient's information.

Copy the selected patient's information by doing one of the following:

- Clicking the Copy (Copy) button.
- Selecting Patients | Copy Patient(s).
- Selecting the Copy Patient(s) option on the context menu.
- Using the keyboard combination Ctrl+C.

Use the **Select All** function to select all the patients on the current **Panel View** window. Once the patients are selected, copy-paste them into another panel, for example.

Select all the patients by doing one of the following:

- Selecting Edit | Select All.
- Using the keyboard combination Ctrl+A.

To deselect the patients, select the **Deselect All** option on the **Edit** menu.

2.1.1.6 Cut

The Cut function copies the selected patient's information to the iCare clipboard and removes the selected patient from the current Panel View. Go to another panel view (for a different patient panel) and paste the patient's information. The Cut function is limited to the panel creator or the shared user with Read/Write access. This function is useful for moving patients from one panel to another.

Cut the selected patient's information by doing one of the following:

- Clicking the **Cut** (Cut) button.
- Selecting Patients | Cut Patient(s).
- Selecting the **Cut Patient(s)** option on the context menu.
- Using the keyboard combination Ctrl+X.

Move to another patient panel and use the Paste function.

2.1.1.7 Paste

The Paste function places the contents of the iCare clipboard (containing patient data) into the current Panel View (this cannot duplicate patient data). If there are duplicate patients in the paste operation, the system displays a message about this condition. The Paste function is limited the panel creator or the shared user with Read/Write access.

Patients that are pasted into a panel are considered "manually added." This means that they are members of the panel that were manually selected to be on the patient list, and therefore are considered outside of the patient list that exists due to the panel's search logic.

Paste the contents of the iCare clipboard by doing one of the following:

- Clicking the **Paste** (Paste) button
- Selecting Patients | Paste Patient(s).
- Selecting the **Paste Patient(s)** option on the context menu.
- Using the keyboard combination Ctrl+V.

The patients on the clipboard are added to the current Panel View. (If there are no patients on the iCare clipboard, a warning message will display.)

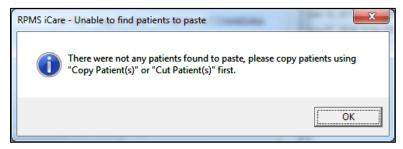


Figure 2-9: Unable to find patients to paste dialog

If there is a duplicate patient to be pasted, the Duplicate patient message displays that states: The patient that is being pasted already exists in the panel. To avoid duplicate patients, this patient will not be pasted. Click Ok to dismiss the message.



Figure 2-10: Duplicate Patient dialog

2.1.1.8 Modify

The Modify function modifies the patient panel definition information. This function is limited to the panel creator or the shared user with Read/Write access.

Modify the current panel by doing one of the following:

- Clicking the **Modify** (Modify) button
- Selecting Patients | Modify.

The **Panel Definition** window for the panel displays.

2.1.1.9 Share

The Share function defines users who can share the current panel. This function is limited to the panel creator or the shared user with Read/Write access.

Share the patient panel by doing one of the following:

- Clicking the **Share** (Share) button.
- Selecting Patients | Share.

The **Panel Definition** window opens to the **Sharing** tab of the **Panel Definition** window.

2.1.1.10 Layout

The Layout function defines which data columns to show in the current panel, the order of the columns chosen for display, and the initial sort order of the patients in the list. This layout information is stored with the panel if you decide to save the panel changes. Users with read-only access can change the layout of a panel.

Select the view layout function by doing one of the following:

- Clicking the Layout (Layout) button.
- Selecting Patients | Layout.

The Patient List Layout window opens, showing the current layout for the panel.

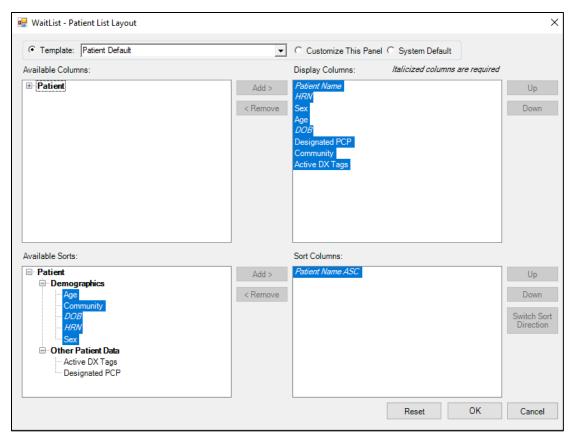


Figure 2-11: Patient List Layout

Section 4.3.2 provides information about using the various features on the layout window.

2.1.1.11 Create\Update Register

The Create\Update Register function will either add the selected patients to a newly defined register or add patients to an existing register. Users only can modify registers that they are authorized to update.

DEMO Patients Properties Patient List Reminders Rem Aggregated Natl Measures Natl Aggregated CMET Care Mgmt Diagnostic Tags Referrals Consults Orders <u></u> 3 Note Process Add Open Remove Repopulate Copy Cut Paste Modify Share Layout Create\Update Register Update Provider △ 🎖 + HRN 🔻 + Sex 🔻 + Age 🔻 + DOB 🔻 + Designate... 🖫 + Community 🔻 + Active DX Tags 🔻 + Y 7 T Patient Name CORRALES HOLTON DEMO,MARY ALBUQUERQUE DEMO,MATIAS ALBUQUERQUE DEMO,MOTT ALBUQUERQUE DEMO.PATIENT ONE ALBUQUERQUE DEMO, PATIENT TWO ALBUQUERQUE DEMO,SOFIA ALBUQUERQUE DEMO,TREVIS LANE HORTON

Select the patients by highlighting the selected patients:

Figure 2-12: Patient List selection

Select the create\update register function by doing one of the following:

- Clicking Create\Update Register (Create\Update Register) button.
- Selecting Patients | Create\Update Register.

The default selection is **New** (create a new register). Enter the Name. The Name must be a unique register name. Enter a description of the register.

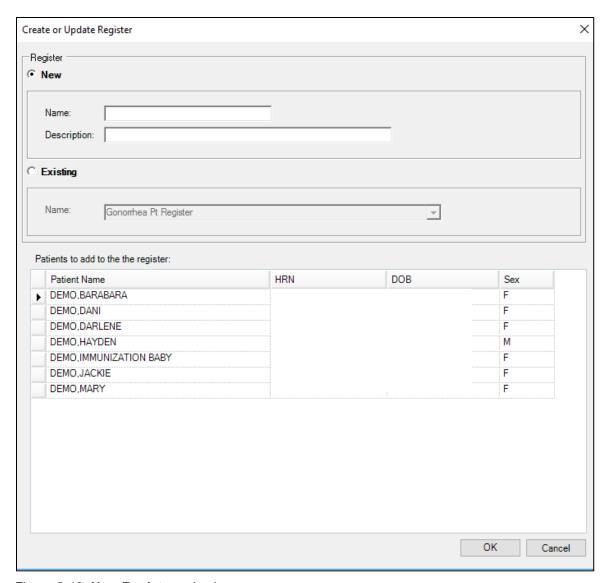


Figure 2-13: New Register selection

• Click on **Existing** if added the selected patients to an existing register. A drop down of the registers that you are authorized for will be available for your selection.

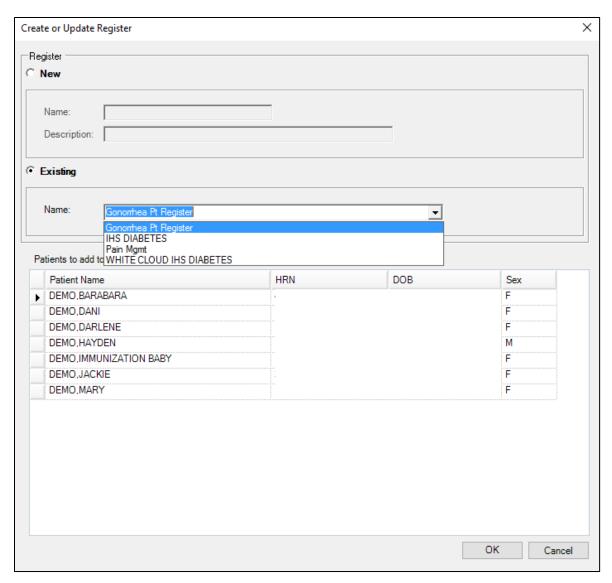


Figure 2-14: Existing Register selection

Registers in RPMS are a part of the Case Management System. Additional updates can be made there.

```
CASE MANAGEMENT SYSTEM
                               VERSION 2.0
                            2016 DEMO HOSPITAL
                                MAIN MENU
CR
       Create/Modify Register Structure
ΑU
       Add Authorized Users
       Build Supporting Lists
BL
       Display Supporting Lists ...
DL
       Add/Delete Patients ...
AD
DE
       Data Entry
RG
       Report Generation ...
       Resource Directory ...
RD
OMAN
       Q-Man (PCC Query Utility)
DEL
      Delete Entire Register
CLM
       Custom letter Management ...
      Display/Edit Register Creator
ECR
      Manage Recall Letters ...
LTR
PDM
      Install Pre-Diabetes Register
IDR
      Install IHS Diabetes Register
```

Figure 2-15: Existing Case Management menus

2.1.1.12 Update Provider

The Update Provider function used to update the Designated Primary Care Provider (DPCP) for selected patients with the entered provider. In iCare v2.9 p5, this has been changed to allow the user to batch update any Provider category. The user is required to have either DSPM Editor (BQIZDSPM) or Designated Specialty Provider Management System (BDPZMENU) security key. The following message will display if the user does not have one of the above listed keys.

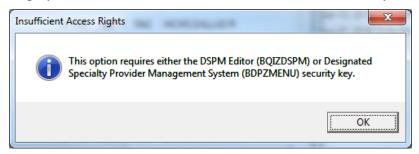


Figure 2-16: Insufficient Access Rights dialog

Select a list of patients to update their provider.

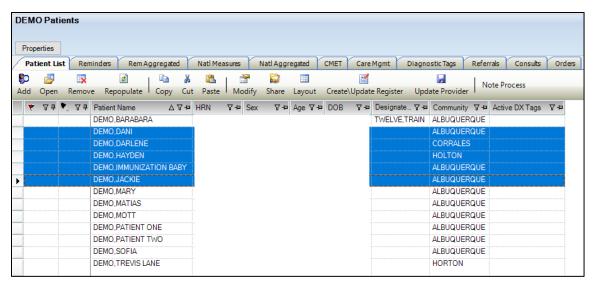


Figure 2-17: Patient selection list

Select the update provider function by doing one of the following:

- Click the **Update Provider** (Update Provider) button.
- Selecting Patients | Update Provider.

The Update Provider window opens, showing the update provider form.

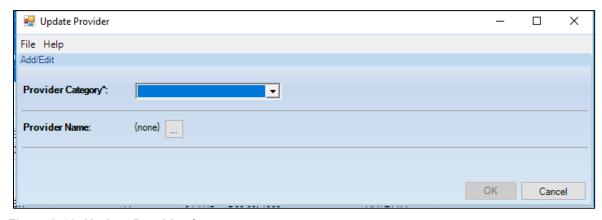


Figure 2-18: Update Provider form

Provider Category

Select the Provider Category you wish to update. Previously only the Designated Primary Care Provider (DPCP) could be updated. Now you can change any of the defined Provider Categories (also known as Specialty Providers). Select the Provider Category from the drop-down list.

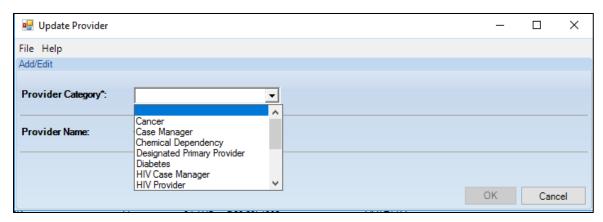


Figure 2-19: Provider Category list

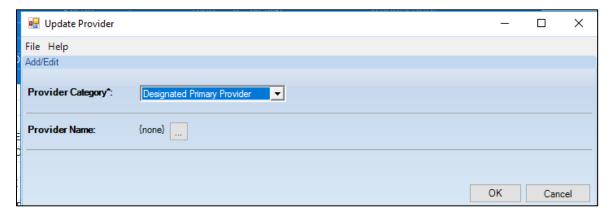


Figure 2-20: Provider Category selected

Click on the lookup () button.

2.1.1.12.1 **Add or Change**

To change or add a provider enter the name of the provider in the Search: field and click **Find**.

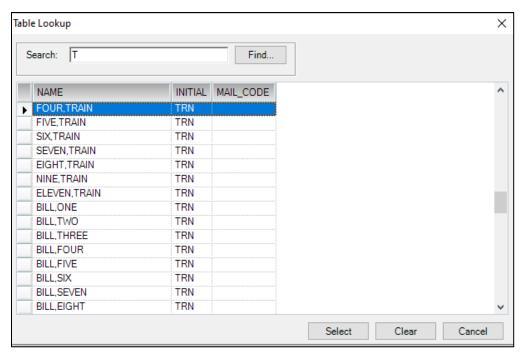


Figure 2-21: Table Lookup—Search function

Highlight the provider and click on the Select button. It will return with the selected provider. Click the **OK** button.

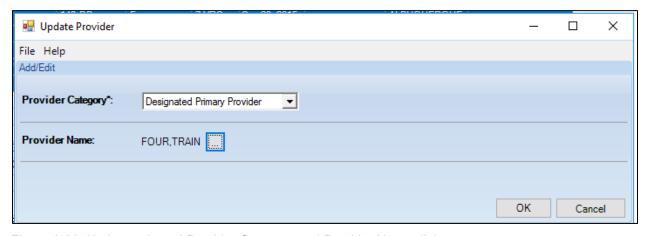


Figure 2-22: Update selected Provider Category and Provider Name dialog

Click Yes to confirm saving to RPMS.

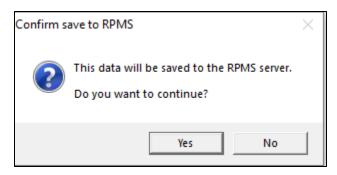


Figure 2-23: Confirm save to RPMS message

Click **OK** to refresh.

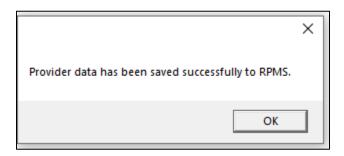


Figure 2-24: Provider data has been successfully saved

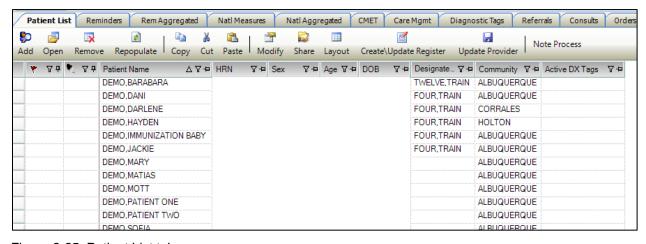


Figure 2-25: Patient List tab

2.1.1.12.2 **Remove**

To remove the provider from all selected patients for the selected Provider Category, leave the **Search**: field blank and click on the **Clear** button. It will return to the **Add/Edit** screen. Click **OK**.

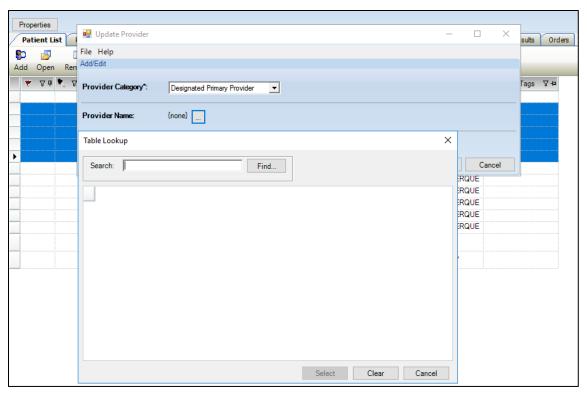


Figure 2-26: Update Selected Provider Category selection

Click Yes to confirm saving to RPMS.

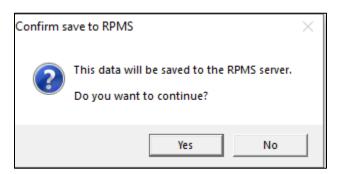


Figure 2-27: Confirm to save to RPMS message

Click **OK** to refresh.

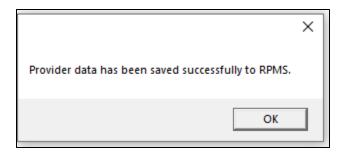


Figure 2-28: Provider data has been successfully saved

The selected Provider Category Column should be cleared out for the selected providers. To confirm, add the Provider Category (Specialty Providers) column to the layout prior to update to confirm the changes.

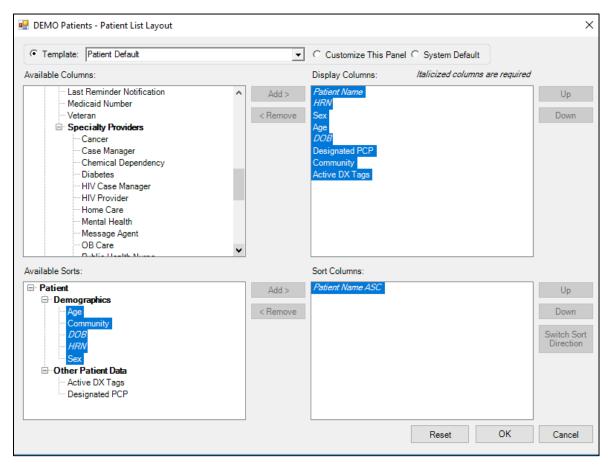


Figure 2-29: Specialty Providers list from Patient layout

Occasionally certain categories might not be updated if the patient's record was somehow out of synchronization. In those cases, it may be necessary to remove the provider by one of the following RPMS menus:

Update Primary Care Provider [BSDPCP EDIT 1PAT]

Patient List Reminders Rem Aggregated Natl Measures Natl Aggregated CMET Care Mgmt Diagnostic Tags Referrals Consults Orders Note Process Update Provider Add Open Remove Repopulate Copy Cut Paste Modify Share Layout Create\Update Register Y 7 7 T Patient Name Δ 🗸 → HRN 🔻 → Sex 🗸 → Age 🗸 → DOB 🔻 → Designate... ♀ → Community 🗸 → Active DX Tags 🔻 → DEMO,BARABARA TWELVE, TRAIN ALBUQUERQUE **DEMO DANI** ALBUQUERQUE DEMO, DARLENE CORRALES DEMO, HAYDEN HOLTON DEMO, IMMUNIZATION BABY ALBUQUERQUE DEMO, JACKIE ALBUQUERQUE ALBUQUERQUE DEMO.MARY DEMO.MATIAS ALBUQUERQUE DEMO,MOTT ALBUQUERQUE DEMO PATIENT ONE ALBUQUERQUE DEMO, PATIENT TWO ALBUQUERQUE DEMO,SOFIA ALBUQUERQUE

Update Designated Providers for One Patient [BDP UPDATE PATIENT]

Figure 2-30: Patient List tab displaying updated data

2.1.1.13 Note Process

The Note Process function allows the user to create a letter or phone note for the selected patients. The default is LETTER. To use the **Note Process**, the user must have an **Electronic Signature** set up in RPMS and default telephone and letter clinics set up in **User Preferences**, see Section 4.3.1. See Section 3.12.2.2 for more information on how to do letters or notes.

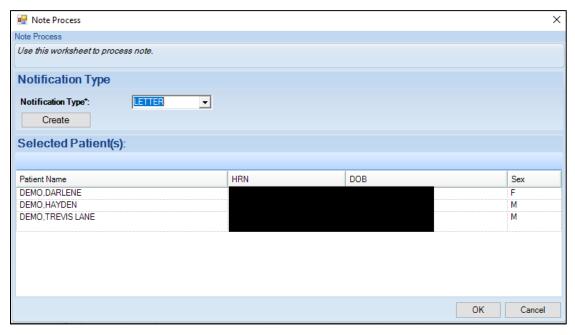


Figure 2-31: Note Process dialog

Click **Create** to start the letter or note.

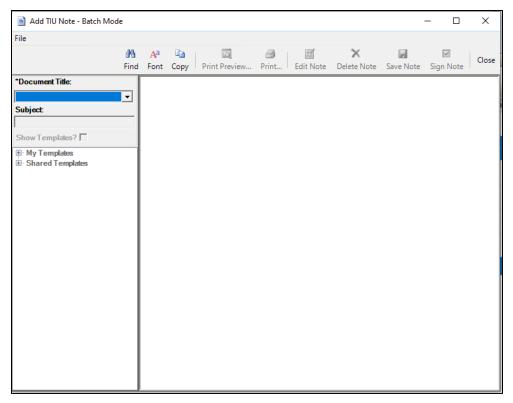


Figure 2-32: Note

2.1.2 Additional toolbar items

The buttons on the right side of any iCare window have many of the same functionality that exists on other views in iCare. For Panel View, there is one button that does not exist elsewhere in iCare and that is the **Mail Merge** button.

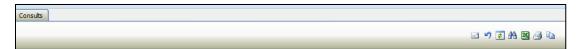


Figure 2-33: Right-hand side toolbar

These buttons might not be visible; in that case, click the drop-down list () button.

The application provides hover help for each button.

2.1.2.1 Mail Merge

The iCare application provides the capability to export patient demographic data in a format that can be used by word processing mail merge files. This is a Demographic Data Export for Letter Generation function.

Follow these steps:

- 1. Select the patients to include in the mail merge process.
- 2. Click the Mail Merge (button (or select **Tools** | **Mail Merge**) to display the **Mail Merge Export** dialog.

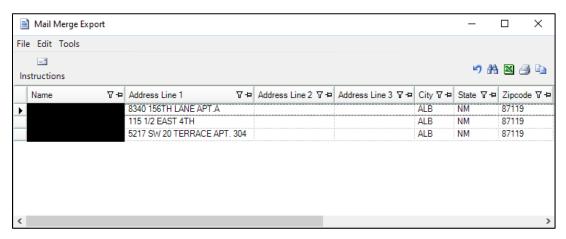


Figure 2-34: Sample Mail Merge Export Dialog

Section 2.1.2 provides information about using the buttons on the right side of the toolbar.

3. Click the **Instructions** () button to display the **Mail Merge Instructions** pop-up. Here will be the instructions for completing the mail merge process.

= *

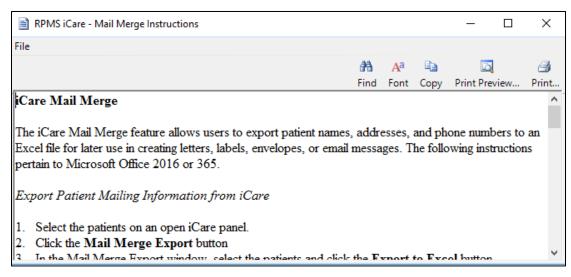


Figure 2-35: Mail Merge Instructions pop-up

Note: Print the contents by clicking the **Print** button or by selecting **File** | **Print**.

Section 4.1 provides information about the File menu and buttons on the pop-up.

2.1.2.2 Reset View

Click the Reset View () button (or select **Tools** | **Reset View**) to return the current view to the default view. Use this feature to change the view, such as resize the column width. This is the same as using the Ctrl+R key combination.

2.1.2.3 Refresh

Click the Refresh () button (or select **Tools** | **Refresh**) to update any RPMS field values on the current window with new data from the server. This is the same as pressing the F5 key on your keyboard.

2.1.2.4 Search

Click the Search (button (or select **Tools** | **Search** or use the Ctrl+F key combination) to display the **Search** dialog.

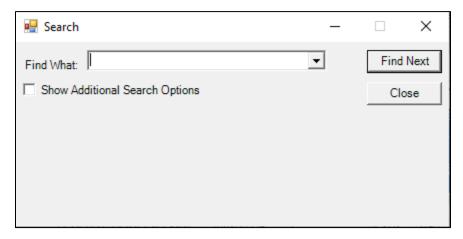


Figure 2-36: Search dialog

If the **Show Additional Search Options** check box is not selected, the search looks in all columns for a match.

If the **Show Additional Search Options** check box is selected, the **Search** dialog changes to show more options for the search.

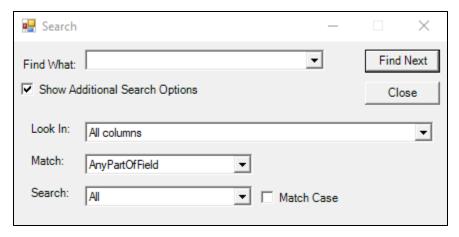


Figure 2-37: Search dialog with additional search options

Type the search criteria in the **Find What** Free Text field. The remaining fields determine the criteria for the search.

If the **Match Case** check box is selected, the search will match the case of the text in the **Find What** field.

2.1.2.4.1 **Look In Field**

Click the drop-down list for the **Look In** field to view the options for that field. The highlighted option determines what part of the window to search.

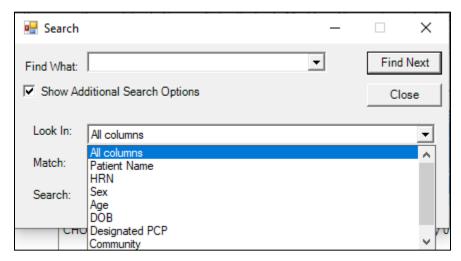


Figure 2-38: Sample drop-down list options for Look In field

The highlighted items in the upper part of the list determines the options in the lower part of the list. For example, if **Look In** field contained **All columns**, then the list of the column names would appear in the lower part of the drop-down list.

2.1.2.4.2 **Match Field**

Click the drop-down list for the **Match** field to view the options for that field.



Figure 2-39: Sample drop-down list options for Match field

The highlighted option determines what part of the **Find What** field will be matched in the search.

2.1.2.4.3 **Search Field**

Click the drop-down list for the **Search** field to view the options for that field.



Figure 2-40: Sample drop-down list options for Search field

The highlighted option determines the direction of the search.

After all fields are populated with the search criteria, click the **Find Next** button. (Otherwise, click **Close**.)

If a match is found, the matching text will be highlighted (in the grid). To continue the same search, click the **Find Next** button again; repeat this process as needed.

If a match is not found, the **Datagrid Search Results** message displays.

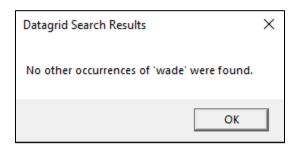


Figure 2-41: Sample Datagrid Search Results

Click **OK** to close the message and to return to the **Search** dialog.

2.1.2.5 Export to Excel

Export the information in the grid to Excel by clicking the Export to Excel () button (or by selecting **Tools** | **Excel Export** or by using the Ctrl+E key combination).

The application displays the warning message about the export.

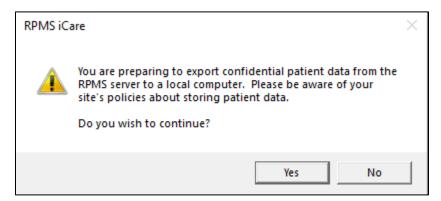


Figure 2-42: Warning message about exporting the patient data

- Click **No** to dismiss the warning and to exit the export process.
- Click Yes to continue the export process and to display the Save As dialog.

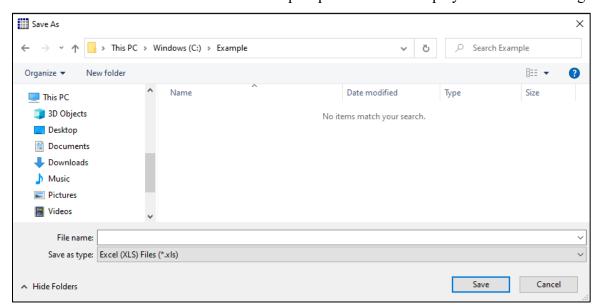


Figure 2-43: Sample Save As dialog

Make sure the file location displays in the **Save** in field.

Type the name in the **File name** field. The system will add XLS extension to the field name (automatically).

Click Save. (Otherwise, click Cancel.) The Export Panel message, Excel export has been created. displays when the Save command is complete; click **OK** to dismiss the message.

When the Excel document is viewed, the application provides a Confidential Patient Information header in the document.

2.1.2.6 Print

Print selected rows will print the selected patient's information.

Copy the selected patient's information by doing the following:

- Selecting the patients by selecting the rows or select all using Ctrl+A.
- Clicking the **Print** () button (or by selecting **Tools** | **Print** or by using the Ctrl+P key combination).

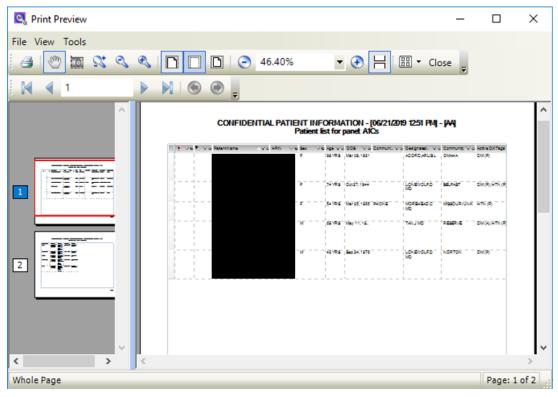


Figure 2-44: Print Preview

2.1.2.7 Copy

Copy selected rows copies the selected patient's information to the iCare clipboard. Then paste the patient's information from the clipboard.

Copy the selected patient's information by doing one of the following:

- Selecting the patients by selecting the rows or select all using Ctrl+A.
- Clicking the Copy () button (or by selecting Tools | Copy Rows to Clipboard or by using the Ctrl+Shft+C key combination).

2.1.3 Additional Information

Information about the panel is displayed in different parts of the window.

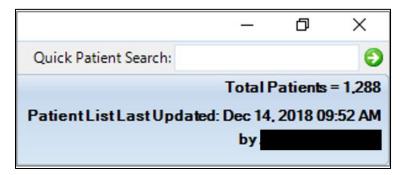


Figure 2-45: Top Right-hand

- **Total Patients**: Number of patients in the panel.
- Patient List Last Updated: Date and time the Patient List was last repopulated, either manually or auto-repopulated.
- By: Name of user who last repopulated the Patient List.

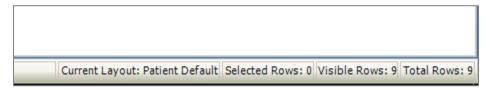


Figure 2-46: Bottom Right-hand side

Information about the current layout, how many rows are selected, if the view is filtered, how many visible rows out of a total number of rows.

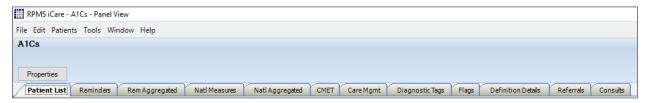


Figure 2-47: Top Left-hand side

The name of the panel and a properties button, when opened gives a description of the panel definition.

2.1.4 Properties

Click the **Properties** button located above the tabs in the Panel Information area (or select **File** | **Panel Properties**) to view the properties about the current panel. Click **OK** to dismiss the pop-up.

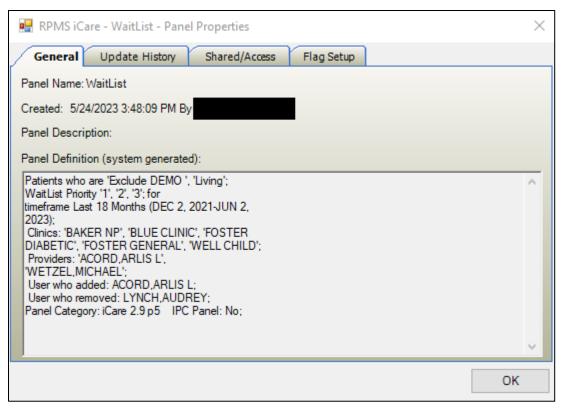


Figure 2-48: Sample Panel Properties pop-up

- The **General** tab provides information about the panel name, when the panel was created and who created it, the panel description, and any filters used to create the panel.
- The **Update History** tab provides information about the auto repopulate status of the panel, when the panel definition was last modified and who modified it, when the patient list was last populated and who modified it, and when the patient list was manually updated.
- The **Shared/Access** tab provides information about the shared users for the current panel and their access rights.
- The **Flag Setup** tab provides information about the timeframes for the flag types (defined in User Preferences).

Click **OK** to dismiss the pop-up.

2.1.5 User Preferences

Users may select to hide those tabs that they do not use or choose to change the opening tab. The default opening tab is Patient List. Users can adjust their view in User Preferences under Tools.

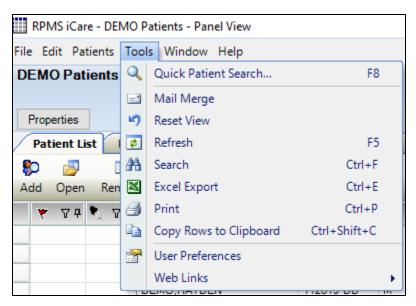


Figure 2-49: Tools list

In **User Preferences**, click on the **Panel View** tab to display a list of available tabs that can be hidden by unchecking the corresponding box. Select a **Starting Tab** to choose the first panel that appears when a panel is opened. There can be only one Starting Tab selection and there must be at least one Starting Tab selected.

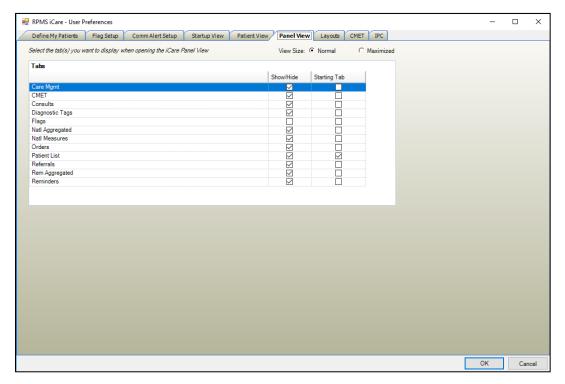


Figure 2-50: User Preferences Panel View list

3.0 Package Management

Section 2.1.2 provides information about the buttons on the right side of the toolbar.

3.1 Patient List Tab

The Patient List tab of the Panel View window displays data about the patients in the panel. The default grid displays the standard demographic columns (Name, HRN, Sex, Age, Date of Birth (DOB)) in addition to the Diagnostic Tag-related data and the condition-specific (register) fields.

Users can create notes via the Note Process button.

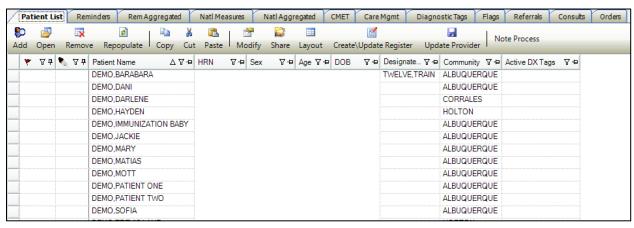


Figure 3-1: Sample Patient List tab

3.1.1 Patient List Tab Layout

Review the status bar, in Current Layout to identify which template is used. For example, it could read Current Layout: System Default.

The status bar shows information about the rows in the panel. Visible rows will be a smaller number than Total Rows if a filter has been applied.

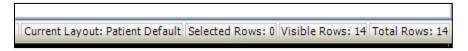


Figure 3-2: Sample row information

Sort/filter the columns and perform other functions on the columns.

The following table provides information about the default columns on the Patient List tab.

Table 3-1: Standard Patient demographic information

Column	Information
Flag T indicator	Displays when a patient has a flag. This column is always the first column and can only be removed by turning all flags "off" in the User Preferences.
•	The feather indicator in this column means that there is an open CMET with an overdue step. Go to the CMET Tracked Events sub-tab to review this condition.
Patient Name	Required field that will link to the Patient Record if you double-click the name.
HRN	Patient's health record number. The HRN will display as the HRN number followed by the facility code. HRN with a star (*) is an inactive HRN for that facility.
Sex	F (for female), M (for male) or U (for unknown).
Age	Patient's age as of today.
DOB	Patient's Date of Birth.
Designated PCP	Designated Primary Care Provider, if any. Not all facilities use this field to empanel patients.
Community	Patient's community of residence.
Active DX Tags	One or more predefined diagnosis definitions ("tags") that iCare has proposed for the patient that has a Proposed or Active status. Section 3.1.1.1 provides more information about Diagnostic Tags.

View the Community alert text by hovering your mouse over the Community Alert icon (), if any. The icon does not affect the sorting of the Community column.

3.1.1.1 Diagnostic Tags

iCare provides a diagnosis tagging function that runs as a background process on your RPMS server and reviews all patient data. Tagging is a term that refers to running a series of logic algorithms on one or multiple patients that identifies ("tags") them with one or more predefined diagnosis categories, listed below:

- ASCVD At Risk (ASCVD Risk)
- ASCVD Known (ASCVD Kn)
- Asthma (Asthma)
- COPD (COPD)
- Chronic Kidney Dis NOS (CKD NOS)
- Chronic Kidney Dis Stg 1 (CKD 1)
- Chronic Kidney Dis Stg 2 (CKD 2)
- Chronic Kidney Dis Stg 3 (CKD 3)

- Chronic Kidney Dis Stg 4 (CKD 4)
- Chronic Kidney Dis Stg 5 (CKD 5)
- Diabetes (DM)
- End Stage Renal Disease (ESRD)
- Glaucoma (Glau)
- HIV/AIDS (HIV)
- Hypertension (HTN)
- Obese (Obese)
- PreDM Metabolic Syndrome (PreDM)
- Pregnant (Preg)
- Tobacco Users (Smokers) (Smoker)

iCare will classify tags into one of five statuses: proposed (pending) (P), accepted (A), not accepted (NA), No longer valid (NLV), and Superseded (S). In the Active DX Tags column on any Panel View, the status value should be concatenated with the tag name, e.g., Asthma (A); CVD AHR (P); DM (A).

The detailed logic for each of these diagnosis tags can be found in the Diagnostic Tag glossary (found by selecting that option on the Help menu).

3.1.1.2 Patient Classified as Sensitive

A "sensitive patient" is preceded by the () symbol in the Patient Name column.

Double-click the sensitive patient record. If one of the following conditions exists:

- If the patient is Sensitive and the user is not a DG SENSITIVITY key holder
 or
- If the patient is an employee and the user is not a DG SENSITIVITY OFFICER key holder

Then, the application displays a warning message.

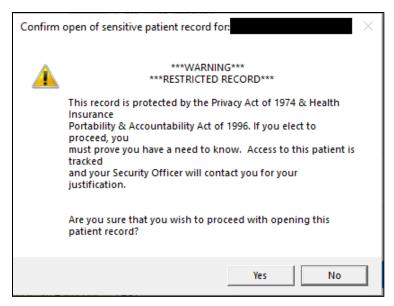


Figure 3-3: Sample Sensitive Patient warning message

Click Yes to open the patient record. Otherwise, click No.

3.2 Reminders Tab

The Reminders tab displays reminders that are pulled from RPMS; Health Summary report reminders, the EHR Clinical Reminders, the HMS Reminders, Care Management Event Tracking (CMET) Reminders, and Immunization Forecaster Reminders. The default view is the Health Summary reminders.

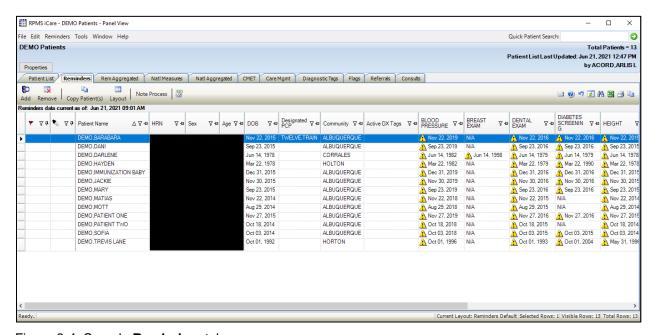


Figure 3-4: Sample Reminders tab

The Reminders Glossary contains information about each of the Reminders. To view this glossary, select **Help** | **Reminders Glossary**.

3.2.1 Reminders Tab Layout

The default view displays the standard Patient Demographic columns (see Figure 3-4) plus selected active Reminders.

Table 3-2: Sample Reminders tab

Column	Information
Individual Columns	There are individual columns for each active Reminder.

Double-click any row in the grid to access the **Reminders** tab of the **Patient Record** window.

The default sort order is alphabetical by Patient Name.

You can sort/filter the columns and perform other functions on the columns.

3.2.1.1 Due/Overdue Dates

A date will display under each of the reminder's column if the test or procedure is currently due. A yellow triangle icon displays if the test or procedure is overdue, as shown below.



Figure 3-5: Sample Overdue Date for Pelvic Exam Reminder

3.2.1.2 Tooltip for Reminder

Hover your mouse over a reminder column heading to view information about it. The information is pulled from the Reminders application. The reminder tooltip will indicate the type of reminder it is by the Source and Category.

DIABETES SCREENING Source: Health Summary Category: GENERAL Status: ACTIVE (ON) Diabetes Screening (blood glucose test) is due every 3 years for a patients starting at age 18 years who do NOT have a Problem Lis HEP A, NOS diagnosis of Diabetes. See Glossary for detailed definitions. Currently Defined Criteria in Use at this Facility: Source: IZ Forecaster Sex: FEMALE Category: Immunizations Min. Age: 1Y Max. Age: 99Y Frequency: 1Y Status: Sex: ALL GENDERS Min. Age: 12Y Max. Age: 99Y Frequency: 1Y

Figure 3-6: Reminder Hover Text

3.2.2 Reminders Tab Toolbar

The reminder logic is calculated and cached for display. The reminder logic is updated nightly by the nightly background job as well as once a week by the weekly job. The toolbar shows the date for which the data is effective.

Section 2.1.2 provides information about the buttons on right side of window of the toolbar.

3.2.2.1 Add

Click on the **Add** button if there are patients to be manually added to the panel.

3.2.2.2 Remove

Highlight patients and click on the **Remove** button if there are patients to be manually removed from the panel.

3.2.2.3 Copy Patient(s)

Highlight patients and click on the Copy Patient(s) button if there are patients to be copied to another panel.

3.2.2.4 Layout

See Section 3.2.3 for information about the Reminders Layout button.

3.2.2.5 Note Process

Highlight patients and click on the **Note Process** button if there are letters or notes to be created for the selected patients. See Section 2.1.1.13 for more information on how the Note Process works.

3.2.3 Layout

The Layout function determines which reminder columns to display for the current panel as well as the order and sorting that should be used.

To change the layout, do one of the following:

- Click the **Layout** (button.
- Select Reminders | Layout.

The **Reminders Layout** screen will display for the current panel. Select the **Reminders** columns that will display on the panel.

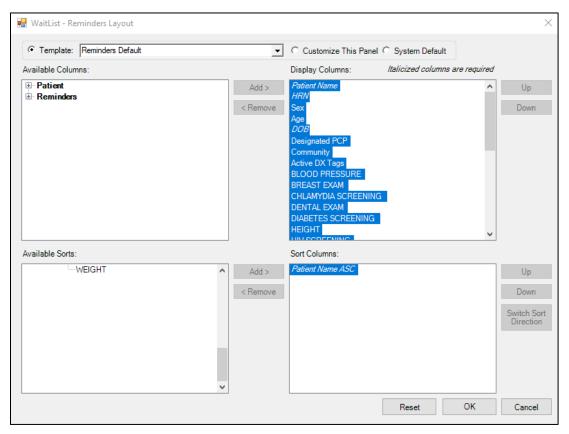


Figure 3-7: Reminders Layout window

There are three ways to configure your display of data; Template, Customize, or System Default. Templates can be managed in Template Management. If there are multiple reminder type templates, choose the one appropriate for this panel. A template can be used repeatedly for many different panels.

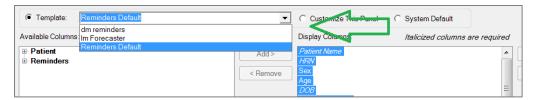


Figure 3-8: Template Selection

Select **Customize** and the configuration is only valid for this panel. **System Default** is the standard view released with iCare.

Update the Reminders columns by selecting **Reminders** and picking the appropriate "source" (on the **Reminders Layout** window) and add them to the **Display Columns.** Section 4.3.2 provides information about manipulating the columns the layout.

3.2.3.1 Status of Background Jobs

To check on the status of the background jobs, do one of the following:

- Click the background jobs (button.
- Select File | Background Jobs.

The action accesses the RPMS iCare - Background Jobs window. Section 4.1.1 provides information this window.

3.3 Rem Aggregated Tab

The **Reminders Aggregated** tab displays the percentages and counts of patients within a panel that have or have not met reminder criteria. Active reminders are reminders that are "turned on" at a site. The aggregated values of Reminders will be calculated at the time the view is opened.

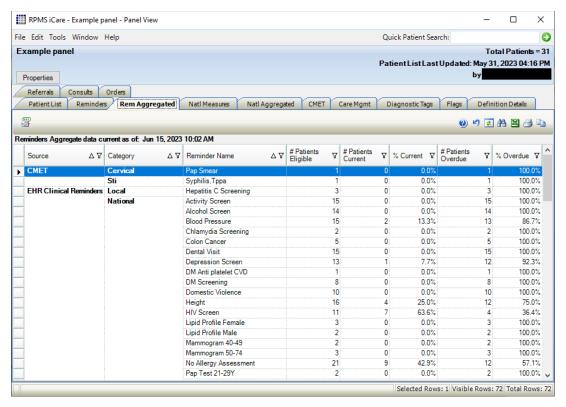


Figure 3-9: Sample Rem Aggregated tab

3.3.1 Rem Aggregated Tab Layout

The default view displays the fields on the **Reminders Aggregated** tab in the following order:

Table 3-3: Reminder Aggregated columns

Column	Meaning
Source	The name of the source for the reminder. The following reminders will be organized into Source: Asthma Reminders, CMET Reminders, EHR Clinical Reminders, Health Summary Reminders, HIV/AIDS Reminders.
Category	The name of the category for the source.
Reminder Name	The name of the reminder.
# Patients Eligible	The total number of patients in this panel who need individual reminders.
# Patients Current	"Current" is defined as any due date in the future (not including today).
% Current	The total percentage of patients in this panel who are current for an individual reminder, that is, [# Patient Current] divided by [#Patients Eligible]. Because of the one month "grace" period for the overdue definition, the total percentage of Current and Overdue cannot equal 100%.

Column	Meaning
# Patients Overdue	"Overdue" is defined as the due date equal or is before [today - 30 days]. This means the reminder is NOT counted as overdue for purposes of performance until at least a month. The total of the Patients Current and the Patients Overdue cannot equal the total Patients Eligible because of the one month "grace" period for the overdue definition.
% Overdue	The total percentage of patients in this panel who are overdue for an individual reminder. That is, [Patients Overdue] divided by [Patients Eligible]. Because of the one month grace period, the total percentage of Patients Current and Patients Overdue might not equal 100%.

You can sort/filter the columns and perform other functions on the columns.

3.3.2 Rem Aggregated Tab Toolbar

The toolbar displays the date/time the data is effective.

Section 2.1.2 provides information about the buttons on the right side of the toolbar.

To check on the status of the background jobs, do one of the following:

- Click the background jobs (button.
- Select File | Background Jobs.

This action accesses the RPMS iCare - Background Jobs window. Section 4.1.1 provides information about this window.

3.4 Natl Measures Tab

The **Natl Measures** tab displays IHS national clinical performance measures as defined and reported in the RPMS Clinical Reporting System (CRS). iCare uses CRS performance logic to display whether "your" patients are meeting annual performance goals.

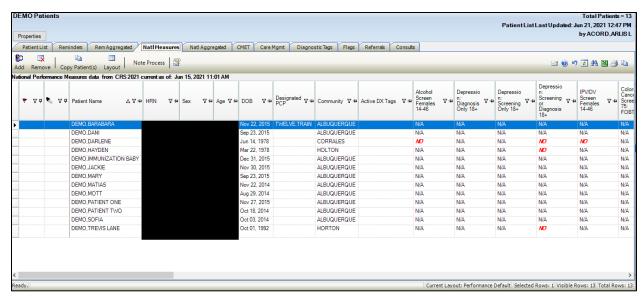


Figure 3-10: Sample National Measures tab

3.4.1 What is National Performance (GPRA)?

The Government Performance and Results Act (GPRA) requires federal agencies to report annually to Congress on how the agency measured up against the performance targets set in its annual Plan.

Most performance measures have a denominator and a numerator defined:

- The denominator is the total population being reviewed.
- The numerator is the number of patients from the denominator who meet the definition of the measure.

Some measures are just a count, such as Sealants and Topical Fluorides.

Measure example: GPRA Measure Cancer Screening: Pap Smear Rates: Maintain the proportion of female patients ages 21 through 64 without a documented history of hysterectomy who have had a Pap screen within the past three years at the previous year's level (60.0%).

The denominator is the total population that is being reviewed for a specific measure. For the Pap smear measure, the denominator is all female patients ages 21 through 64 at the beginning of the Report period. The numerator is the number of patients in the denominator who meet specific criteria. For Pap smear, the numerator is the number of patients in the denominator who had either a Pap smear, defined by certain codes, documented in RPMS any time in the three years prior to the end of the report period or a refusal of a Pap smear in the past year.

If you are not familiar with your facility's policies and practices related to national performance reporting, talk with your site GPRA coordinator.

3.4.2 Natl Measures Tab Buttons

Each tab has a standard left-hand group of buttons on the toolbar and a right-hand group of buttons on the toolbar. See Section 2.1.2 for information on the left-hand toolbar buttons.

3.4.2.1 Add

Click on the **Add** button if there are patients to be manually added to the panel.

3.4.2.2 Remove

Highlight patients and click on the **Remove** button if there are patients to be manually removed from the panel.

3.4.2.3 Copy

Highlight patients and click on the **Copy** button if there are patients to be copied to another panel.

3.4.2.4 Layout

See Section 3.4.4.1 for information about the Natl Measures Layout button.

3.4.2.5 Note Process

Highlight patients and click on the **Note Process** button if there are letters or notes to be created for the selected patients. See Section 2.1.1.13 for more information on how the Note Process works.

3.4.3 Natl Measures Tab Layout

The default view displays the standard Patient Demographic columns (see Figure 3-10) plus the active National GPRA measures.

Table 3-4: National Measures columns

Column	Information
Individual Columns	The value of the performance met.

If you double-click any record in the grid, the patient record window opens to the Natl Measures tab.

There is hover help for each performance column that displays the GPRA definition.

You can find information about all the measures in the National Measures Glossary by selecting **Help** | **Natl Measures Glossary**.

You can sort/filter the columns and perform other functions on the columns.

3.4.4 Natl Measures Tab Toolbar

The toolbar shows the date/time for which the data is effective.

Section 2.1.2 provides for more information about the buttons on the right side of the toolbar.

3.4.4.1 Layout

The **Layout** function determines which performance measures columns to display as well as the order and sorting that should be used in the current panel.

To change the layout, do one of the following:

- Click the Layout (Layout) button.
- Select National Measures | Layout.

The Natl Measures Layout screen for the current panel displays.

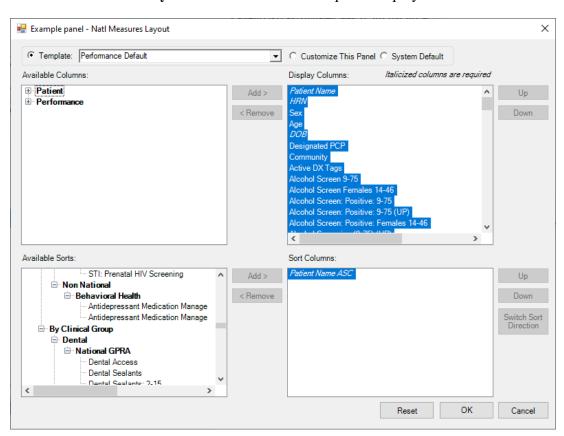


Figure 3-11: Natl Measures Layout window

If you choose to add the "CRS Pop" column (under **Patient** | **Demographics**) to the **National Measures** tab, it will display the value(s) describing the population category defined by CRS. The CRS Population categories include: UP (User Population), AC (Active Clinical), AD (Active Diabetic), etc. The population is a text string from the Denominator column of the CRS Patient List report that will be calculated for each patient within the weekly performance measures background process.

Section 4.3.2 provides information about using the features of the layout window.

3.4.4.2 Status of Background Jobs

To check on the status of the background jobs, do one of the following:

- Click the background jobs (button.
- Select File | Background Jobs.

This action accesses the **RPMS iCare - Background Jobs** window. Section 4.1.1 provides information about this window.

3.5 Natl Aggregated Tab

The **National Aggregated** tab information is based on the format of the Summary Page from the CRS National GPRA report. It displays a summarized overview of the national performance measure data for patients in the panel being viewed.

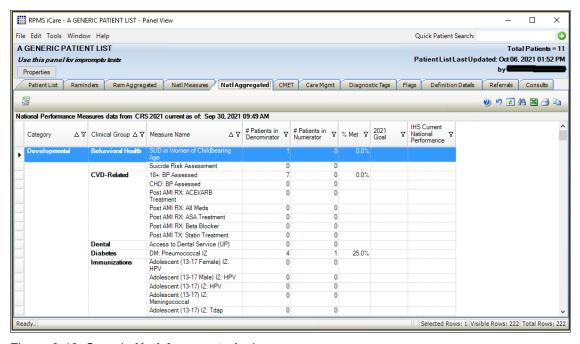


Figure 3-12: Sample Natl Aggregated tab

3.5.1 Natl Aggregated Tab Layout

The following data is displayed on the Natl Aggregated tab.

Table 3-5: Natl Aggregated columns

Column	Meaning
Category	The name of the category associated with the measure.
Clinical Group	The name of the clinical performance group.
Measure Name	The measure title derived from the Summary Report (iCare pulls from the first column of the CRS Summary Report). The hover help displays a description of the performance logic for each cell in the column.
# Patients in Denominator	The total number of patients in this panel who meet the denominator definition.
# Patients in Numerator	The total number of patients in this panel who meet the numerator definition.
% Met	The percentage of the panel who meet the measure, derived by dividing the denominator total by numerator total.
year Goal	The value will be the same as the one that displays in the "GPRA" column on the Summary Page from the CRS National GPRA report. The "year" is the most recent year with final goals recorded.
IHS Current National Performance	The value will be the same as the one that displays in the "Nat'l" column on the Summary Page from the CRS National GPRA report.

You can sort/filter the columns and perform other functions on the columns.

3.5.2 Natl Aggregated Tab Toolbar

The toolbar shows the date/time for which the data is current.

Section 2.1.2 provides more information about the buttons on the right side of the toolbar.

To check on the status of the background jobs, do one of the following:

- Click the background jobs (button.
- Select File | Background Jobs.

This action accesses the **RPMS iCare - Background Jobs** window. Section 4.1.1 provides information about this window.

3.6 CMET Tab

The CMET tab on the Panel View displays data related to the Events, Tracked Events, and Follow-up Events for the panel of patients. Please see the Care Management Event Tracking User Manual for details.



Figure 3-13: Sample CMET tabs

3.6.1 Events Sub-Tab

The **Events** sub-tab provides data that was "last mined" on the date displayed on this **Events** window.

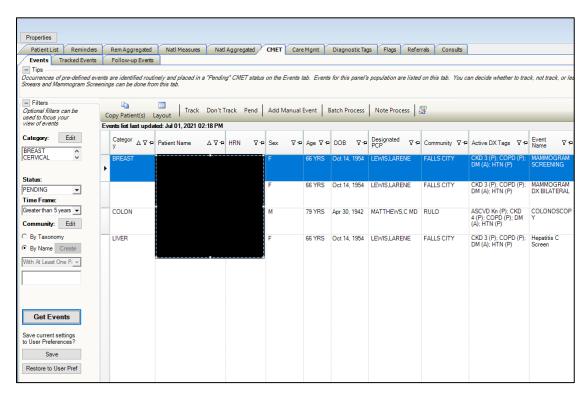


Figure 3-14: Sample Events sub-tab

The following table provides information about the default columns.

Table 3-6: Default columns

Column	Meaning
Category	The category of the event: Breast, Cervical, Colon, Skeletal, STI.

Column	Meaning
Patient Name	Required field that will link to the Events sub-tab of the CMET tab on the Patient Record if you double-click on the name.
HRN	Patient's Health Record Number.
Sex	F (for female) or M (for male)
Age	Patient's age today.
DOB	Patient's date of birth
Designated PCP	Designated Primary Care Provider, if any. Not all facilities use this field to empanel patients.
Community	Patient's community of residence.
Active DX Tags	Predefined Diagnosis definitions ("tags") that iCare has proposed for this patient, based on the tagging function.
Event Name	Name of the event.
Event Date	The date associated with the event.
Expanded Event	The definition of the event expanded for display only.
Result	The date of the result of the event. This cell also has hover help, such as V Radiology.
Expanded Result	The expanded view of the result value.
Status	The status of the event.
Status Comments	Text of the any comments about the status.
Last Modified Date/Time	The date and time the record was last modified.
Last Modified By	The name of the person who last modified the record. Initial job means it is the initial record.

Double-click the underlined Event Date to access the Visit Detail pop-up.

Double-click the underlined **Result Date** to access a particular detail pop-up, for example, Women's Health Detail.

You can sort/filter the columns and perform other functions on the columns.

3.6.1.1 Events Tab Buttons

Each tab has a standard left-hand group of buttons on the toolbar and a right-hand group of buttons on the toolbar. See Section 2.1.2 for information on the right-hand toolbar buttons.

3.6.1.1.1 **Copy Patient(s)**

Highlight patients and click on the Copy Patient(s) button if there are patients to be copied to another panel.

3.6.1.1.2 **Layout**

See Section 3.6.1.2.1 for information about Events Layout button.

3.6.1.1.3 Track

Refer to the CMET User Manual.

3.6.1.1.4 **Don't Track**

Refer to the CMET User Manual.

3.6.1.1.5 **Pend**

Refer to the CMET User Manual.

3.6.1.1.6 Add Manual Event

Refer to the CMET User Manual.

3.6.1.1.7 Batch Process

Refer to the CMET User Manual.

3.6.1.1.8 **Note Process**

Highlight patients and click on the **Note Process** button if there are letters or notes to be created for the selected patients. See Section 2.1.1.13 for more information on how the Note Process works.

3.6.1.2 Events Sub-Tab Toolbar

The toolbar shows the date/time the data is effective.

Section 2.1.2 provides information about the buttons on the right side of the window.

3.6.1.2.1 **Layout**

The Layout function determines the columns on the **Events** sub-tab for the current panel.

You can select the layout function by doing one of the following:

- Clicking the Layout (button.
- Selecting File | Layout.
- Selecting CMET | Events | Layout.

This action accesses the Events Layout window.

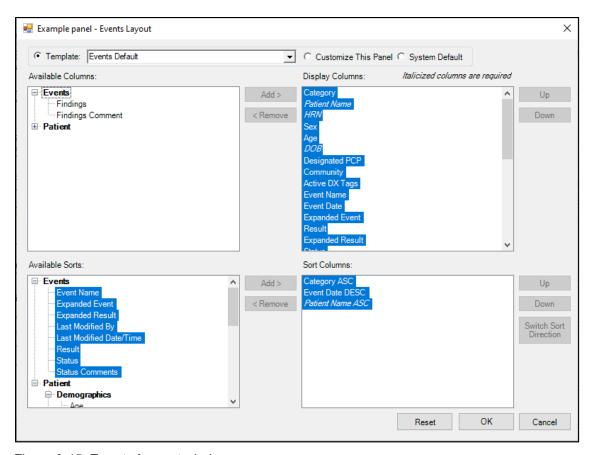


Figure 3-15: Events Layout window

Section 4.3.2 provides information about using the features of the layout window.

3.6.2 Tracked Events Sub-Tab

The CMET events that are identified as "Tracked" for the current panel will display on the **Tracked Events** sub-tab.

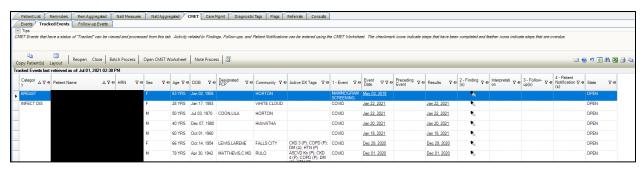


Figure 3-16: Sample Tracked Events sub-tab

3.6.2.1 Tracked Events Tab Buttons

Each tab has a standard left-hand group of buttons on the toolbar and a right-hand group of buttons on the toolbar. See Section 2.1.2 for information on the right-hand toolbar buttons.

3.6.2.1.1 **Copy Patient(s)**

Highlight patients and click on the Copy Patient(s) button if there are patients to be copied to another panel.

3.6.2.1.2 **Layout**

See Section 3.6.2.2 for information about the Event Layout button.

3.6.2.1.3 **Reopen**

Refer to the CMET User Manual.

3.6.2.1.4 Close

Refer to the CMET User Manual.

3.6.2.1.5 **Batch Process**

Refer to the CMET User Manual.

3.6.2.1.6 **Open CMET Worksheet**

Refer to the CMET User Manual.

3.6.2.1.7 Note Process

Highlight patients and click on the **Note Process** button if there are letters or notes to be created for the selected patients. See Section 2.1.1.13 for more information on how the Note Process works.

3.6.2.2 Tracked Events Sub-Tab Layout

You can sort/filter the columns and perform other functions on the columns.

The following table provides information about the columns.

Table 3-7: Columns

Column	Meaning
Category	The category of the tracked event: Breast, Cervical, Colon. Skeletal, STI.
Patient Name	Required field that will link to the Tracked Events sub-tab of the CMET tab on the Patient Record if you double-click on it.
HRN	Patient's Health Record Number.
Sex	F (for female) or M (for male)

Column	Meaning
Age	Patient's age today.
DOB	Patient's date of birth.
Designated PCP	Designated Primary Care Provider, if any. Not all facilities use this field to empanel patients.
Community	Patient's community of residence.
Active DX Tags	Predefined Diagnosis definitions ("tags") that iCare has proposed for this patient, based on the tagging function.
1 - Event	Name of the event.
Event Date	The date associated with the event.
Preceding Event	Contains the date of the preceding event. Double-click on this underlined date to open the Tracked Events of the CMET tab on the Patient Record. The chain of events in the same category is revealed. In addition, there is hover help when you move your mouse over the date (for example, PAP SMEAR 139).
Results	The date of the result of the event. Hover help will describe where the result came from (V-RADIOLOGY, V-LAB).
2 - Finding(s)	The icons indicate if the event has any findings.
Interpretation	The interpretation of the Finding.
3 - Follow- up(s)	The icon indicates if the event has follow-up data.
4 - Patient Notification(s)	The icon indicates if the event has any patient notification data.
State	The state of the tracked event (Open or Closed).

When the 2 - Finding(s) cell contains the following:

- The "feather" () icon indicates that the element is overdue; hover your mouse over the icon to view the Due Date (the tickler).
- The check () icon indicates that the step is complete; hover your mouse of the icon to view the Finding Due date and the Finding Value.
- Is blank indicates that the element is not complete but is not overdue.

When the 3 - Follow-up(s) cell contains the check icon, this means the step is complete; hover your mouse of the icon to view the Follow-up Date and the Follow-up type. If it is blank, this indicates that element is not complete but is not overdue.

When the 4 - Patient Notification(s) cell contains the check icon, this means the step is complete; hover your mouse of the icon to view the Notification Date and the Notification method. If it is blank, this indicates that element is not complete but is not overdue.

The Results column will display the date (Linked) if results have been mined during the nightly job. The data link will be the most recent result. Hover help will describe where the result came from, for example, v-lab.

3.6.2.2.1 **Layout**

Use the Layout function to determine the columns on the **Tracked Events** sub-tab for the current panel.

Select the layout function by doing one of the following:

- Clicking the Layout (button.
- Selecting File | Layout.
- Selecting CMET | Tracked Events | Layout.

This action accesses the Tracked Events Layout window.

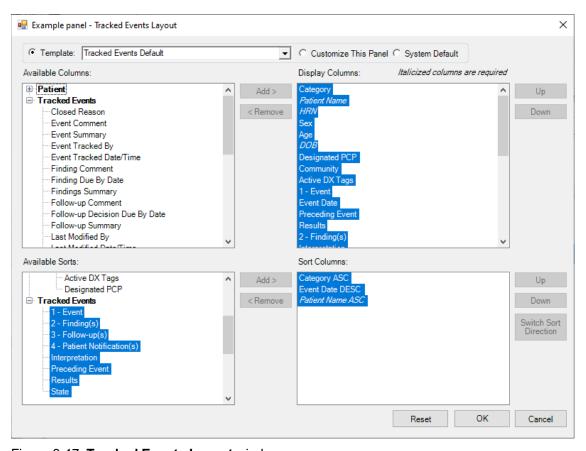


Figure 3-17: Tracked Events Layout window

Section 4.3.2 provides information about using the features of the layout window.

3.6.3 Follow-up Events Sub-Tab

The Follow-up Events sub-tab contains what you want to do for follow-up. The follow-up events are generated by the recommendation(s) made for the follow-up of the "Tracked" CMET event.

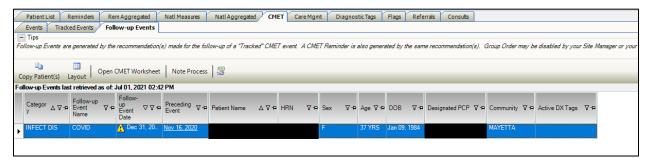


Figure 3-18: Sample Follow-up Events sub-tab

The Follow-up Event Name and Date are pulled from step 3 of the CMET process. This is the provider's recommendation for follow-up. The date is the date due for the follow-up.

A CMET Reminder is also generated by the same recommendation(s).

3.6.3.1 Follow-up Events Tab Buttons

Each tab has a standard left-hand group of buttons on the toolbar and a right-hand group of buttons on the toolbar. See Section 2.1.2 for information on the right-hand toolbar buttons.

3.6.3.1.1 **Copy Patient(s)**

Highlight patients and click on the Copy Patient(s) button if there are patients to be copied to another panel.

3.6.3.1.2 **Layout**

See Section 3.6.3.2 for information about the Event Layout button.

3.6.3.1.3 **Open CMET Worksheet**

Refer to the CMET User Manual.

3.6.3.1.4 **Note Process**

Highlight patients and click on the **Note Process** button if there are letters or notes to be created for the selected patients. See Section 2.1.1.13 for more information on how the Note Process works.

3.6.3.2 Follow-up Events Sub-Tab Layout

The data on the Follow-up Events sub-tab is effective as of the date on the window.

The following table provides information about the columns.

Table 3-8: Sub-Tab columns

Column	Meaning
Category	The category for the Follow-up Event: Breast, Cervical, Colon, Skeletal.
Follow-up Event Name	The name of the event.
Follow-up Event Date	The follow-up date for the event.
Preceding Event	Contains the date of the preceding event. Double-click on this underlined date to open the Follow-up Events of the CMET tab on the Patient Record. The chain of events in the same category is revealed.
Patient Name	Required field that will link to the Follow-up Events sub-tab of the CMET tab on the Patient Record if you double-click the name.
HRN	Patient's Health Record Number.
Sex	F (for female) or M (for male)
Age	Patient's age today.
DOB	Patient's date of birth (required)
Designated PCP	Designated Primary Care Provider, if any. Not all facilities use this field to empanel patients.
Community	Patient's community of residence.
Active DX Tags	Predefined Diagnosis definitions ("tags") that iCare has proposed for this patient, based on the tagging function.

3.6.3.2.1 **Layout**

Use the Layout function to determine the columns on the Follow-up Events sub-tab for the current panel.

Select the layout function by doing one of the following:

- Clicking the Layout (button.
- Selecting File | Layout.
- Selecting CMET | Follow-up Events | Layout.

This action accesses the Follow-up Events Layout window.

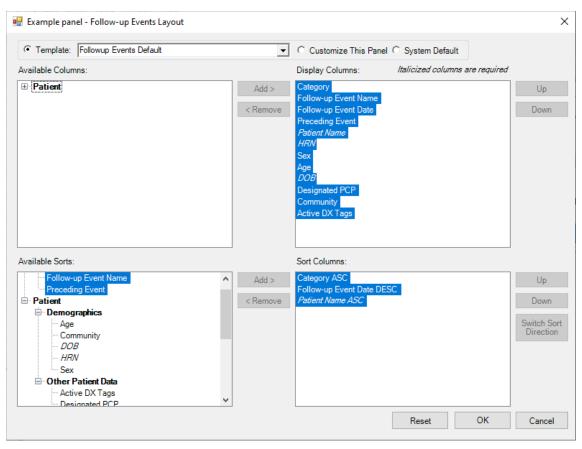


Figure 3-19: Follow-up Events Layout window

Section 4.3.2 provides information about using the features of the layout window.

3.7 Care Mgmt Tab

The **Care Mgmt** tab displays data related to various groups of the patients in the panel.



Figure 3-20: Sample Care Mgmt tab

This tab displays information from the register (shown in the **Please Select a Group** field) for the patients in the panel. You must select an option for this field to view the data.

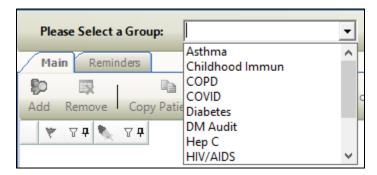


Figure 3-21: Various groups for the Care Mgmt tab

iCare provides you with specific underlying care management groups. The underlying RPMS application for the HIV/AIDS Register option is BKM. Employee Health is only seen if the user has the special security key.

The current list of Care Management groups are:

- Asthma
- Childhood Immun
- COPD
- COVID
- Diabetes
- DM Audit

- Hep C
- HIV/AIDS
- Immunizations
- Pediatric
- Prenatal
- STI/STD

3.7.1 Main Sub-Tab

The **Main** sub-tab displays specific information about the patients in the panel. Each Care Mgmt group has their own Layout.

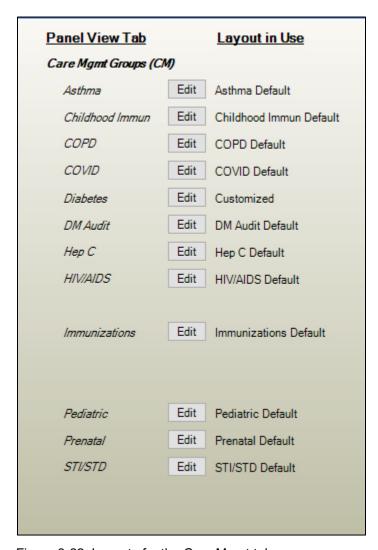


Figure 3-22: Layouts for the Care Mgmt tab

When you select a Care Mgmt group, the default layout will be displayed.

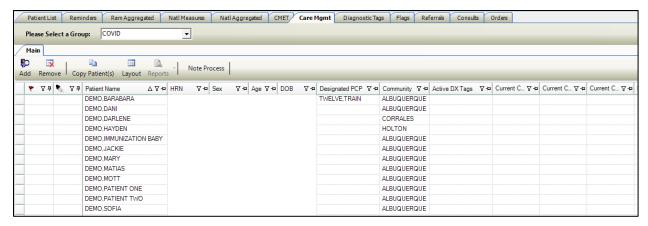


Figure 3-23: Sample Main Sub-Tab View for groups not HIV/AIDS

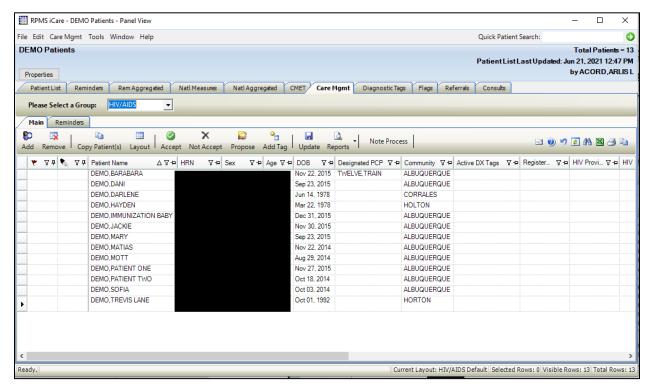


Figure 3-24: Sample Main Sub-Tab View for HIV/AIDS only

Note: The **Main** sub-tab displays for all groups. The Reminders sub-tab only displays for the HIV/AIDS group.

3.7.1.1 Main Sub-Tab Toolbar

Section 2.1.2 provides information about the buttons on the right side of the toolbar.

3.7.1.1.1 **Add**

Click on the **Add** button if there are patients to be manually added to the panel.

3.7.1.1.2 **Remove**

Highlight patients and click on the **Remove** button if there are patients to be manually removed from the panel.

3.7.1.1.3 Copy Patient(s)

Highlight patients and click on the Copy Patient(s) button if there are patients to be copied to another panel.

3.7.1.1.4 **Layout**

See Section 3.4.4.1 for information about the Natl Measures Layout button.

3.7.1.1.5 Note Process

Highlight patients and click on the **Note Process** button if there are letters or notes to be created for the selected patients. See Section 2.1.1.13 for more information on how the Note Process works.

3.7.1.1.6 Main Sub-Tab Layout

Each default view displays the standard Patient Demographic columns (see Section A.1) plus columns unique to each group in a named default template. Columns are designated as required, default or optional. Required columns cannot be removed from the layout. Default columns always display in the default view but can be removed from the layout. Optional columns do not display and must be added to the layout to be seen.

You can sort/filter the columns and perform other column functions.

3.7.1.2 Layout

Each Care Mgmt Group has their specific columns for their **Layout**. Each Group has their own Default Layout.

Click the **Layout** button (or select **Care Mgmt** | **Main** | **Layout**) to display the panel's layout of the columns.

Section 4.3.2 provides information about using the features of the layout window.

3.7.1.3 Additional Buttons

Note: The Additional buttons do not apply to those groups where there is no corresponding Diagnostic Tag; e.g., Employee Health, Hep C, Immunizations, and Pediatric.

You use the Accept, Not Accept, Propose, and Add Tag buttons to change the Status on an existing record (or select **Care Mgmt** | **Main** to select a status to change).

Select the patient record whose status you want to change and click the appropriate "change status" button to display the **Update Diagnostic Tag** dialog.

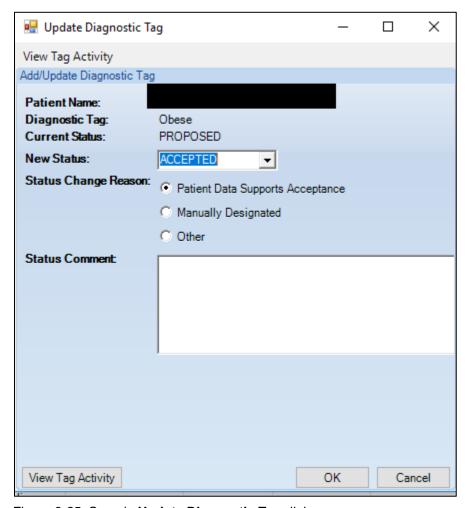


Figure 3-25: Sample Update Diagnostic Tag dialog

All fields are required on this dialog.

The radio buttons available for the Status Change Reason change according to what you select in the New Status field.

The **Not Accept** function cannot be performed on multiple patients or multiple tags.

Section 3.10.3 provides information about the fields and **View Tag Activity** button on this dialog.

3.7.1.4 Add Tag

Note: The **Add Tag** button does not apply to Employee Health, Hep C, Immunizations, and Pediatric groups since there is no corresponding Diagnostic Tag.

Select a patient to which you want to add a tag and then click the Add Tag (button (or select Care Mgmt | Main | Add Tag) to display the Add Diagnostic Tag dialog. This is a manual add that allows a provider to manually assign one or more of the diagnosis tags to patients that did not meet the tag's criteria for being proposed automatically. Section 3.10.2.3 provides information about using the Add Tag button.

3.7.1.5 Update

Note: The Update button applies to the HIV/AIDS group only.

You can batch update register data for selected patients by clicking the Update

Data dialog will display. Refer to the HIV Management System User Manual for more information.

3.7.1.6 Reports Button

Note: The Reports button applies to the HIV/AIDS group only.

Select one or more patients and click the drop-down list on **Reports** (button to view the Quality of Care report (or select **Care Mgmt** | **Main** | **Reports**). The reports define their scope based on the patients that are members of a given panel.

Refer to the HIV Management System User Manual for more information.

3.7.2 Reminders Sub-Tab for HIV/AIDS Register

The Reminders sub-tab view displays the disease/register-specific reminders for the patient. Refer to the **HIV Management System** User Manual for more information.

3.8 Diagnostic Tags Tab

The **Diagnostic Tags** tab provides a comprehensive view of all tag history for a patient (regardless of the tag status), provides auto-accept and auto-reject capabilities, allows the user to accept proposed tags for multiple patients, allows the user to reject proposed tags, and allows the user to update of tag status.

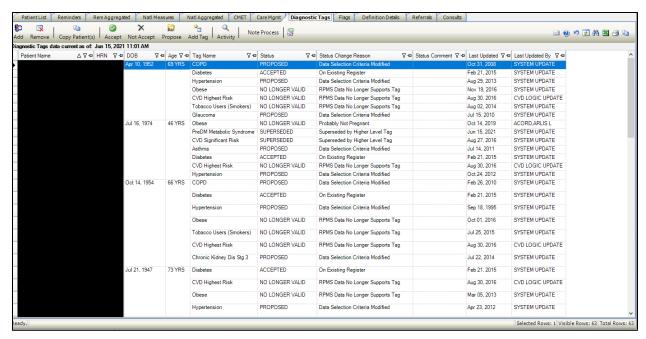


Figure 3-26: Sample Diagnostic Tags Tab

Tags that are identified through iCare's execution of the pre-defined tag criteria will start with an initial tag status of **PROPOSED**. From there you have several options including "Accepting" a tag or "Not Accepting" the validity of a tag for any patient. These statuses are editable from within this tab.

3.8.1 Diagnostic Tags Tab Layout

The following table provides information about the columns.

Table 3-9: Diagnostic tags

Column	Meaning
Patient Name	Required field that will link to the Patient Record if you double-click the name.
HRN	Patient's Health Record Number.
DOB	Patient's Date of Birth.
Age	Patient's age.
Tag Name	The name of the tag for the patient.

Column	Meaning
Status	ACCEPTED: means the patient is a member of specified formal case management registers with status of Active, Decease, Transient, Non IHS, Lost to Follow Up, or Noncompliant.
	PROPOSED: means the patient has Status Un-reviewed or Inactive in the register.
	NO LONGER VALID: means the RPMS data no longer supports the tag.
	SUPERCEDED: means the level of the tag has gone to a higher level.
Status Change Reason	The reason the status changed can be: System Generated (system), RPMS Data No Longer Supports Tab (system), Patient Data Does Not Support Acceptance (user), Manually Designated (user), Other (user - with required comment field), on Existing RPMS Register (system).
Status Comment	The text of any comments entered about the status change (used with the Other status change reason).
Last Updated	The date the content of the panel was last updated by a manual (user) repopulate, by an auto-repopulate, or the panel created date, if the panel has never been repopulated.
Last Updated By	The name of the user who either created or last repopulated the panel (in certain cases, it may contain the name of a process like SYSTEM UPDATE instead of a person).

There is hover help for the Tag Name cell that shows the name of the tag.

Double-click any record to go the **Diagnostic Tags** tab of the **Patient Record** window.

You can find information about all the tags in the **Diagnostic Tag Glossary** (select **Help** | **Diagnostic Tag Glossary**).

You can sort/filter the columns and perform other functions on the columns.

3.8.2 Diagnostic Tags Toolbar

The toolbar shows the date/time for which the data is effective.

iCare will classify tags into one of five statuses: proposed (pending) (P), accepted (A), not accepted (NA), No longer valid (NLV) and Superseded (S). Those tags with a classification of NA will not display.

Section 2.1.2 provides information about the buttons on the right side of the toolbar.

3.8.2.1 Add

Click on the Add button if there are patients to be manually added to the panel.

3.8.2.2 Remove

Highlight patients and click on the **Remove** button if there are patients to be manually removed from the panel.

3.8.2.3 Copy Patient(s)

This action copies the patient's information to the clipboard.

Select one or more patients and then do one of the following:

- Click the Copy Patient(s) (Copy Patient(s)) button.
- Select Diagnostic Tags | Copy Patient(s).
- Use the keyboard combination Ctrl+C.

You must go to another panel view (for a different patient panel) and paste the patient's information.

3.8.2.4 Note Process

Highlight patients and click on the **Note Process** button if there are letters or notes to be created for the selected patients. See Section 2.1.1.13 for more information on how the Note Process works.

3.8.2.5 Change Status

You use the Accept, Not Accept, and Proposed buttons to change the Status on an existing record (or select **Care Mgmt** | **Main** to select a status to change). Section 3.9.1.5 provides information about using these buttons.

3.8.2.6 Add Tag

Select a patient to which you want to add a tag and then click the Add Tag (button (or select Diagnostic Tags | Add Tag) to display the Add Diagnostic Tag dialog. This is a manual add that allows a provider to manually assign one or more of the diagnosis tags to patients that did not meet the tag's criteria for being proposed automatically.



Figure 3-27: Add Diagnostic Tag dialog

This dialog shows information about the patient named in the **Patient Name** field (the one you selected).

When you have completed the dialog, click **OK** to add the information to the **Diagnostic Tags** tab on the **Panel View**. (Otherwise, click **Cancel**.)

3.8.2.7 Tag Activity

You can view existing tag activity about the patient by clicking the **View Tag Activity** button. The **Diagnostic Tag Activity** pop-up displays. Section 3.10.3 provides more information about this pop-up.

3.8.2.8 Fields on Add Diagnosis Tag Dialog

All fields are required.

Patient Name: The name of the patient to which to add tag information (application populated).

Diagnostic Tag: The name of diagnostic tag to add for the patient. Select an option from the drop-down list to populate this field.

New Status: The status of the tag being added.

ACCEPTED: This option allows you to "Accept" a proposed tag to provide an affirmation of its validity for a given patient.

NOT ACCEPT: This option allows you to disapprove or "Not Accept" a diagnostic tag that has been proposed for a patient.

PROPOSED: This option allows you to change the status of a diagnosis tag back to "Proposed" so that further review can take place.

Reason: Click the appropriate reason for adding the tag.

- Patient Data Supports Acceptance use this when the patient data does support the tag.
- Manually Designated use this when you want to manually change the tag status.
- Other use this when the other reasons do not fit.

Status Comment: Type the reason for the change in this Free Text field. This feature provides a rich audit history for reasons for providers' decisions to accept or not accept proposed tag assignments.

3.8.3 Activity

You can view existing tag activity about the selected patient by clicking the Activity

button (or by selecting **Diagnostic Tags** | Activity). The **RPMS iCare - Diagnostic Tag Activity** pop-up displays. This is a view-only pop-up. Multiple people can enter the tags, so this pop-up shows all the activity.

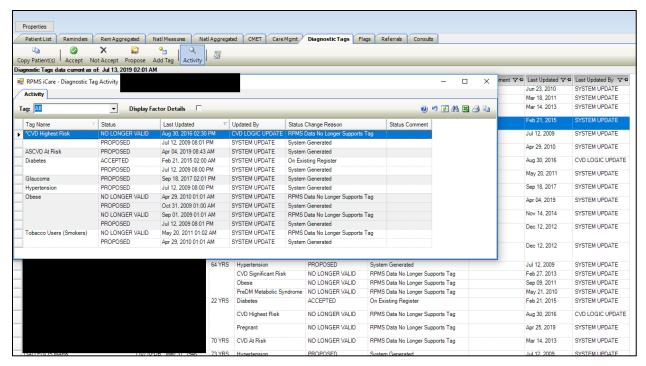


Figure 3-28: Sample Diagnostic Tag Activity Pop-up

Section 2.1.2 provides information about the buttons on the right side of the toolbar.

Click the Glossary (button to display the Diagnostic Tag Glossary.

You can sort/filter the columns and perform other functions on the columns.

You can view various tags by selecting from the drop-down list for the Tag field.

If you check the **Display Factor Details** check box, the following columns will display: **Factor**, **Date**, **Item**, **Value**. This allows you to view additional details about the tags. The default view is unchecked. You must dismiss the pop-up.

3.9 Flags Tab

The **Flags** tab of the Panel View displays the flags for the patients in the open panel.

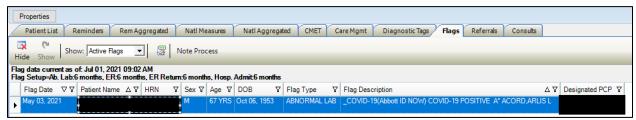


Figure 3-29: Sample Flags tab

The Flags tab displays the flag type shown in the Show field.

You can change the default flag display by changing the flag settings under User Preferences.

Double-click any record on this tab to go to the **Flags** tab of the **Patient Record** window.

3.9.1 Flags Tab Layout

The default display has the flag listed alphabetically by flag date (most recent first), by patient name, and then by flag type. No duplicate values are displayed in the first column. This means if a particular date has more than one flag, the date will be displayed only on the first row.

The iCare application will display an initial list of flags at first login only for the timeframe that is defined in the User Preferences. Likewise, you can change the flag view to display modified flag types and/or timeframes if you change the User Preferences. After changing the flag settings in User Preferences, refresh the flag view.

You can sort/filter the columns and perform other functions on the columns.

The following table provides information about the columns.

Table 3-10: Flags tab

Column	Meaning
Flag Date	The date the flag became active, e.g., the date of the hospital admission.
Patient Name	This is a required field and will link to the patient's Patient Record if you double-click the name.
HRN	Patient's Health Record Number.
Sex	Either F (for Female) or M (for Male)
Age	Patient's age.
DOB	Patient's Date of Birth.
Flag Type	This can be Abnormal Lab Values, ER Visit, Unanticipated ER Return Visit, and Hospital Visit.
Flag Description	A brief description of the event that caused the trigger.
Designated PCP	Designated Primary Care Provider, if any. Not all facilities use this field to empanel patients.

The Flag Type column contains various flag types, as defined in the following table:

Table 3-11: Flag types

Flag Type	Meaning
Abnormal Lab Values Alert	This flag type informs the user when a patient has abnormal lab values within a user-defined timeframe, based on the Kernel Alerts component. The Abnormal Lab Values alerts, generated from the RPMS Laboratory application, reside in the Kernel Alerts component. If the ALV alert is closed by the provider in Kernel Alerts, it will no longer display in iCare, regardless of the Flag Display Timeframe selected by the user in the User Preferences.
ER Visit	This flag type informs the user when a patient has an emergency room visit within a user-defined timeframe. This flag is generated directly by iCare. ER visits (clinic code 30) is the trigger for this flag.
Unanticipated ER Return Visit	This flag type informs the user when a patient has an emergency room visit designated as "unanticipated" within a user-defined timeframe. This flag is generated directly by iCare. ER visits (clinic code 30) with Visit Type "Unscheduled Revisit" is the trigger for this flag.
Hospital Admission	This flag type informs the user when a patient has a hospital visit within a user-defined timeframe. This flag is generated directly by iCare. Any visit with service category H where the discharge date is not the same day as the admission date is the trigger for this flag.

3.9.2 Flags Tab Toolbar

The text above the grid shows the flag set-up information and how current the data is.

3.9.2.1 Show Field

What flags are displayed on this window is determined by the option selected on the Show field. Your choices are:

- Active Flags: Active is defined as a flag that has not expired and has not been hidden by the users.
- Hidden Flags: Those flags that you specified to be hidden, using the Hide button.
- All Flags: All flags, hidden as well as active.

3.9.2.2 Hide

You can hide a highlighted row in the Flag List grid by doing any of the following:

• Clicking the **Hide** (button.

- Selecting File | Flags | Hide.
- Selecting the **Hide** option on the context menu.
- Pressing the F3 key on your keyboard.

You can view the hidden flags by selecting the **Hidden Flags** option on the **Show** field.

3.9.2.3 Show

If you need to cause a hidden flag to re-appear in the current view, select it from the list on the **Hidden Flags** option (from Show field) and do any of the following:

- Click the **Show** (button.
- Select File | Flags | Show.
- Select the **Show** option on the context menu.
- Press the **F4** key on your keyboard.

3.9.2.4 Note Process

Highlight patients and click on the **Note Process** button if there are letters or notes to be created for the selected patients. See Section 2.1.1.13 for more information on how the Note Process works.

3.9.2.5 Status of Background Jobs

To check on the status of the background jobs, do one of the following:

- Click the Background Jobs (button.
- Select File | Background Jobs.

This action accesses the RPMS iCare - Background Jobs window. Section 4.1.1 provides information this window.

3.9.3 Flags Tab Menu Options

The options on File and Tools menus are the same those on the Patient List tab. Section 4.0 provides more information about these menus.

The Flags menu is only available when the **Flags** tab is selected. The **Hide and Show** options work like the **Hide and Show** action buttons. The **Refresh** option refreshes the flags display, to show the most recent changes.

3.10 Referrals Tab

The **Referrals** tab displays referral data for the panel of patients.

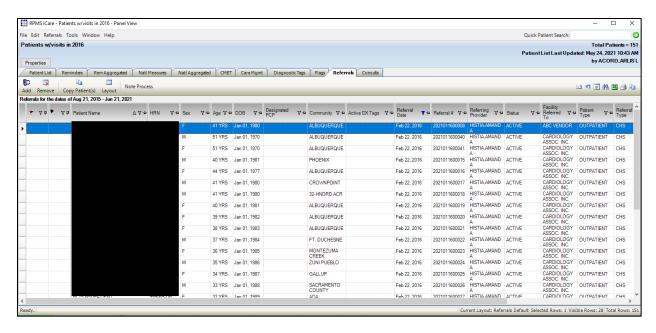


Figure 3-30: Sample Referrals tab

3.10.1 Referrals Tab Layout

The default view displays the standard Patient Demographic columns (see Figure 3-30) plus specific Referral columns.

Table 3-12: Referrals tab

Column	Information
Individual Columns	There are individual columns for each Referral.

Double-click any row in the grid to access the Referrals tab of the Patient Record window.

The default sort order is alphabetical by Patient Name.

You can sort/filter the columns and perform other functions on the columns.

3.10.2 Referrals Tab Toolbar

The toolbar shows the date/time for which the data is effective.

Section 2.1.2 provides for more information about the buttons on the right side of the toolbar.

3.10.2.1 Add

Click on the Add button if there are patients to be manually added to the panel.

3.10.2.2 Remove

Highlight patients and click on the **Remove** button if there are patients to be manually removed from the panel.

3.10.2.3 Copy

Highlight patients and click on the **Copy** button if there are patients to be copied to another panel.

3.10.2.4 Layout

The Layout function determines which referrals columns to display for the current panel as well as the order and sorting that should be used.

To change the layout, do one of the following:

- Click the **Layout** (button.
- Select Referrals | Layout.

The **Referrals Layout** screen will display for the current panel. Here you can select the **Referrals** columns you want to display on your panel.

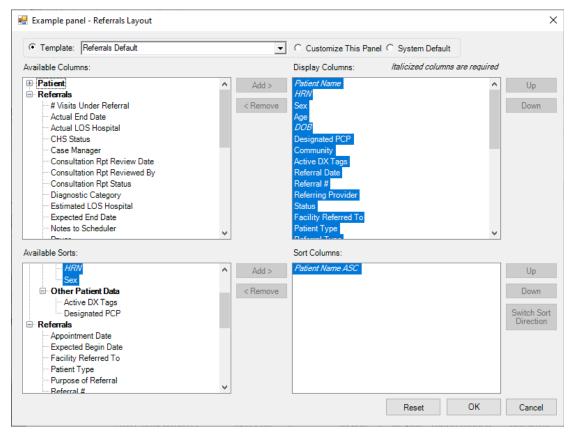


Figure 3-31: Referrals Layout window

Section 4.3.2 provides information about manipulating the columns of the view.

3.10.2.5 Note Process

Highlight patients and click on the **Note Process** button if there are letters or notes to be created for the selected patients. See Section 2.1.1.13 for more information on how the Note Process works.

3.11 Consults Tab

The Consults tab displays consult data for the panel of patients.

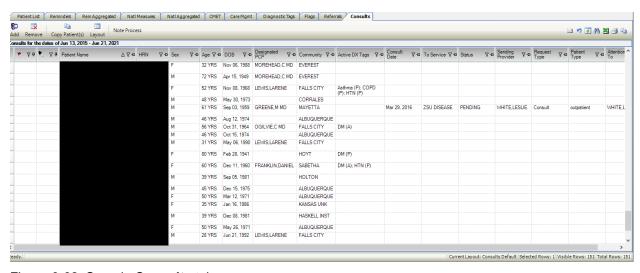


Figure 3-32: Sample Consults tab

3.11.1 Consults Tab Layout

The default view displays the standard Patient Demographic columns (see Figure 3-32) plus specific Consult columns.

Table 3-13: Consults tab

Column	Information
Individual Columns	There are individual columns for each Consult.

Double-click any row in the grid to access the Consults tab of the Patient Record window.

The default sort order is alphabetical by Patient Name.

You can sort/filter the columns and perform other functions on the columns.

3.11.2 Consults Tab Toolbar

The toolbar shows the date/time for which the data is effective.

Section 2.1.2 provides for more information about the buttons on the right side of the toolbar.

3.11.2.1 Add

Click on the **Add** button if there are patients to be manually added to the panel.

3.11.2.2 Remove

Highlight patients and click on the **Remove** button if there are patients to be manually removed from the panel.

3.11.2.3 Copy

Highlight patients and click on the **Copy** button if there are patients to be copied to another panel.

3.11.2.4 Layout

The Layout function determines which consult columns to display for the current panel as well as the order and sorting that should be used.

To change the layout, do one of the following:

- Click the Layout (button.
- Select Consults | Layout.

The **Consults Layout** screen will display for the current panel. Here you can select the **Consults** columns you want to display on your panel.

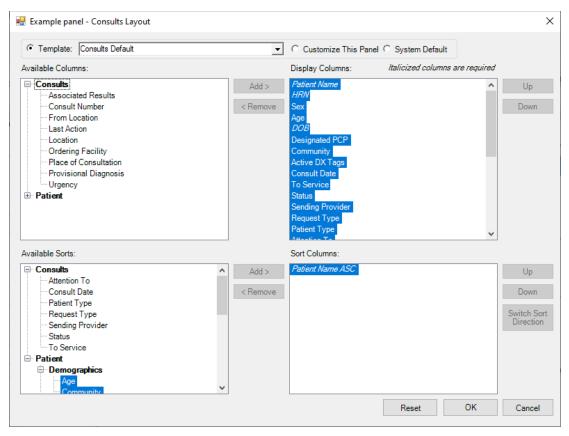


Figure 3-33: Consults Layout window

Section 4.3.2 provides information about manipulating the columns the layout.

3.11.2.5 Note Process

Highlight patients and click on the **Note Process** button if there are letters or notes to be created for the selected patients. See Section 2.1.1.13 for more information on how the Note Process works.

3.12 Definition Details

The **Definition Details** tab displays certain types of data based on the **Panel Definition** for the panel of patients. If the panel is defined using Allergies, Scheduled Appts, CPT, Exams, ER, High Risk/Immunocompromised Conditions, Health Factors, Immunizations, Inpatient, Labs, Measurements, Medications, Notes, Orders, Patient Education, POV, Problems, Reminders, Visits and/or Waitlists, an additional Definition Details tab will be visible in Panel View.



Figure 3-34: Definition Details display

The **Definition Details** tab will normally be before the **Referrals** and the **Consults** tab. If the Panel Definition has only one of the above listed Groups, it will automatically default when clicking on the Definition Details tab.



Figure 3-35: Definition Details default of Medications

Otherwise, you will need to select the **Group** to see the detail information.

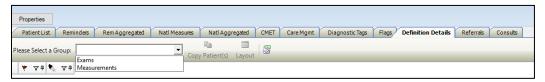


Figure 3-36: Definition Details for Exams AND Measurements

3.12.1 Definition Details Layout

The default view displays the standard Patient Demographic columns (see Figure 3-34) plus selected individual columns for the group.

Table 3-14: Definition details

Column	Information
Individual Columns	There are individual columns for each Definition Details Group .

Double-click any row in the grid to access the Patient Record for the selected patient.

The default sort order is alphabetical by Patient Name.

You can sort/filter the columns and perform other functions on the columns.

3.12.2 Definitions Detail Toolbar

Section 2.1.2 provides for more information about the buttons on the right side of the toolbar.

The normal buttons for Definitions Detail toolbar are Copy Patient(s), Layout, Note Process and Background Job.



Figure 3-37: **Definition Details** Toolbar

Reminder Notifications has an additional button Notification Process.



Figure 3-38: Definition Details Toolbar for Reminder Notifications.

3.12.2.1 Copy Patient(s)

This action copies the patient's information to the clipboard.

3.12.2.2 Layout

The Layout function determines which Definition Details columns to display for the current panel and **Group** as well as the order and sorting that should be used.

Each **Group** has their own list of columns.

To change the layout, do one of the following:

- Select the **Group**.
- Click the **Layout** button.

The appropriate **Group Layout** screen will display for the current panel. Here you can select the **Group** columns you want to display on your panel.

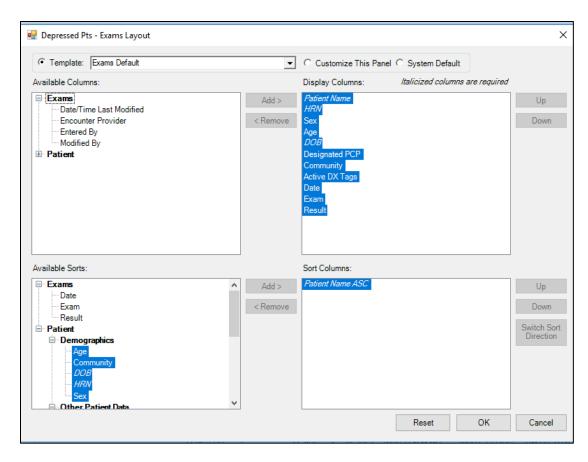


Figure 3-39: Exams Layout

3.12.2.3 Note Process

The Note Process function allows the user to create a letter or phone note for the selected patients. The default is LETTER. To use the **Note Process**, the user must have an **Electronic Signature** set up in RPMS and default telephone and letter clinics set up in **User Preferences**, see Section 4.3.1. See Section 3.12.2.2 for more information on how to do letters or notes.

3.12.2.4 Notification Process

To use the **Notification Process**, the user must have an **Electronic Signature** set up in RPMS and default telephone and letter clinics set up in **User Preferences**. See Section 4.3.1 for more information.

Select the patients to perform **Notification Process** on and click the button.

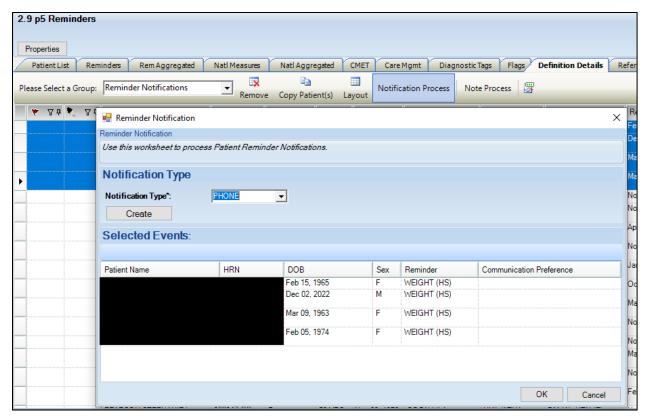


Figure 3-40: Notification patient selection

Notification Type defaults to PHONE. The current selections are PHONE, EMAIL and LETTER. Currently only PHONE and LETTER work. Selecting EMAIL will gray out the Create button.

Click on the **Create** button. You will be able to manually write a note or use an existing TIU template to generate a note.

3.12.2.4.1 TIU Note Fields

The default view displays the fields in the following order:

Table 3-15: TIU Note field

Column	Information
Document Title	Required field
Subject	Subject of the note.
Show Templates	Check box when checked allows the user to use 'My Templates' or 'Shared Templates'
My Templates	Templates set up in EHR that only the user can access.
Shared Templates	Templates set up in EHR that all users can access.

Work with your EHR CAC to help set up templates and to discuss which document title is the best to use for Reminder Notifications.

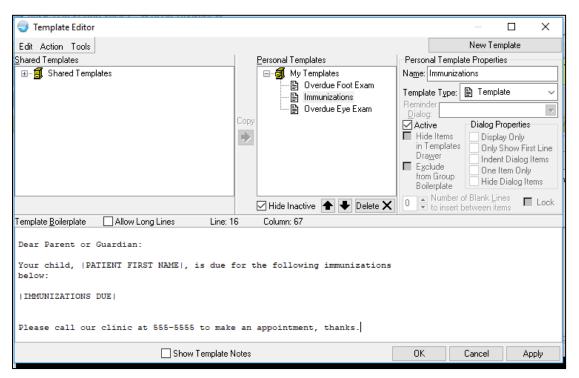


Figure 3-41: TIU Template Layout

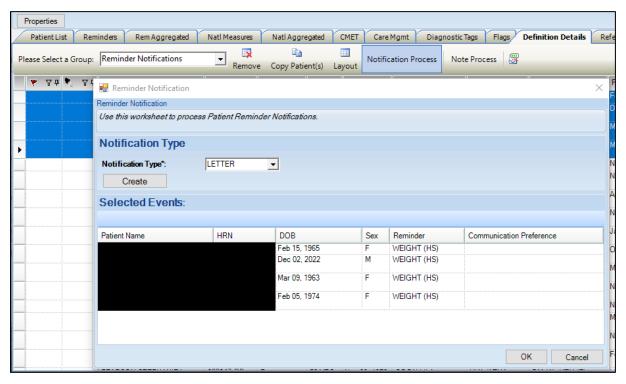


Figure 3-42: Patient selection

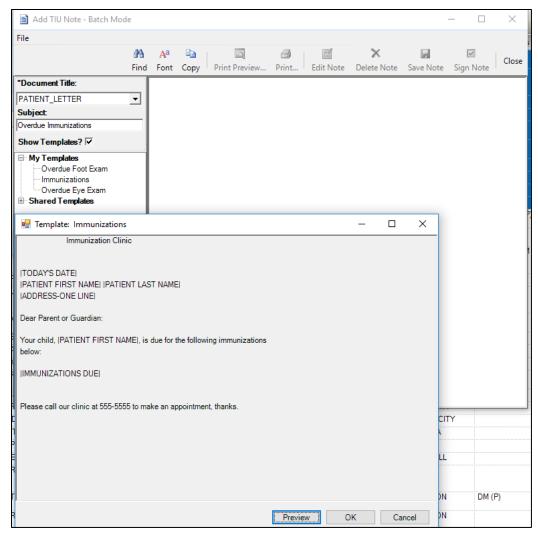


Figure 3-43: Document selection

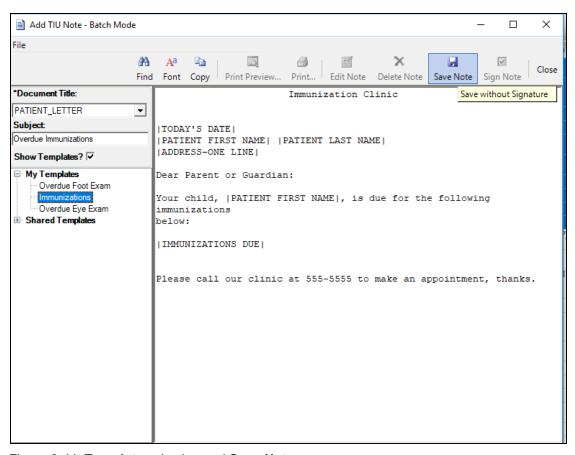


Figure 3-44: Template selection and Save Note

Once **Save Note** is no longer highlighted, it takes you back to the **Patient selection** screen where you click **OK**. You will be asked to confirm. At any time, you can click **Cancel** to end.



Figure 3-45: Save confirmation

Click **OK** and you will be prompted to enter your **Electronic Signature**. You can still **Cancel** at this point and nothing will be saved.

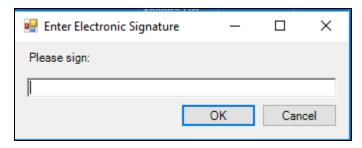


Figure 3-46: Electronic Signature entry

Once **Electronic Signature** is entered, the document is saved for every selected Patient. You will be asked you want to print the notes.

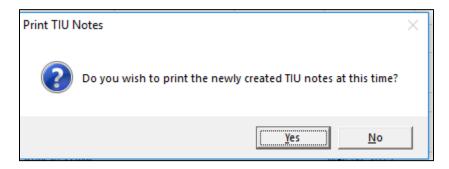


Figure 3-47: Print confirmation

You can Print Preview them and then select a printer to print them to.

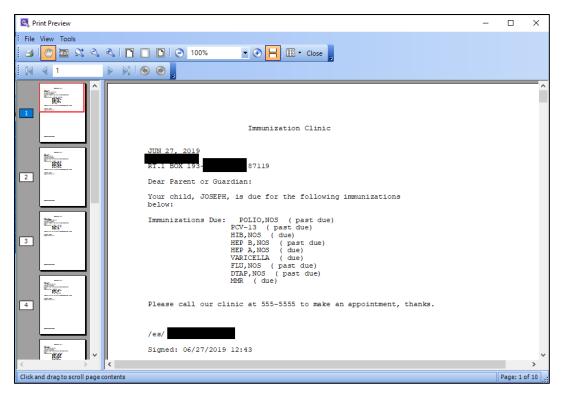


Figure 3-48: Print Dialog

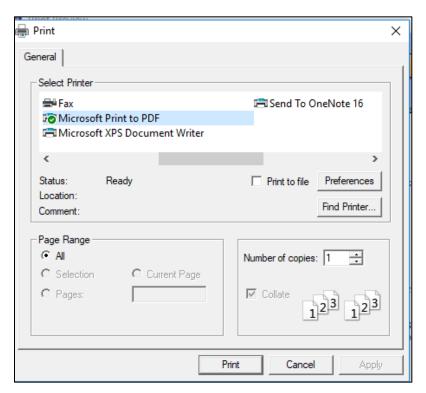


Figure 3-49: Printer selection

Check the printer before closing to make sure the letters printed out correctly. You will not be able to batch print the letters later if there was a problem. They will only be able to be printed singly. The **Notification Date** and **Notification Type** will be filled in after closing the print dialog.

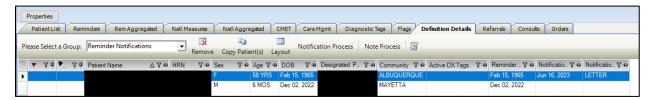


Figure 3-50: Definition Details completion

3.12.2.4.2 TIU Note Toolbar

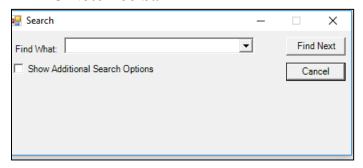


Figure 3-51: Search dialog

Find – Find a string in the letter.

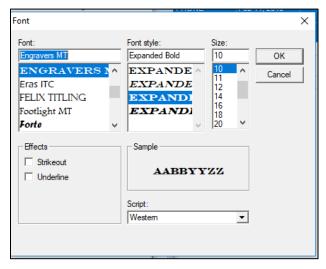


Figure 3-52: Changing fonts

Font: Change the default font.

Copy: Copy the text of the note.

Print Preview: Preview of the selected template.

Print: Disabled until saved and signed.

Edit Note: Disabled.

Delete Note: Disabled.

Save Note: When the note is completed.

Sign Note: Disabled until after the note is saved.

Close: When the note has been saved.

4.0 Package Operation

All users, when given access to the iCare GUI can create panels, view data, and perform without having any specific Security Keys. Certain keys can be given for more in-depth access. Any button needing additional access will display with a message. For example, the **Update DPCP** button requires an additional security key.



Figure 4-1: Access message

All views in iCare have the **File**, **Edit**, **Tools**, **Window** and **Help** options. Panel View additionally has a **Patients** option. Each view may have different selections within the options.



Figure 4-2: Main View options

4.1 File

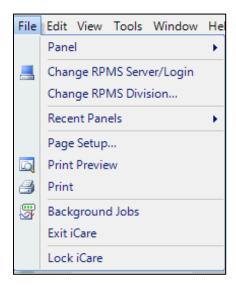


Figure 4-3: Main View File options

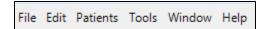


Figure 4-4: Panel View options

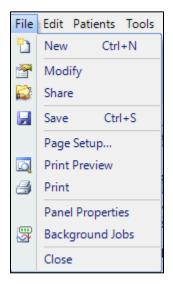


Figure 4-5: Panel View File options

4.1.1 Background Jobs

The Background Jobs icon can be found in many places in iCare as well as in the File menu. Clicking on the icon or selecting the option gives a display on the state of all the iCare background jobs.



Figure 4-6: Background Jobs

There are five individual iCare background jobs that should be scheduled in TaskMan. The Nightly job should be scheduled daily, and the four weekly jobs should be scheduled weekly (not at the same time). The monthly and weekly IPC jobs are handled automatically via the Nightly job.

If the End column is earlier than the Start column and is in red, then there may be a problem with that job.

Monitoring the Background Jobs is important so that the data seen in iCare is up to date.

4.2 Edit

The **Edit** option is the same for all views.

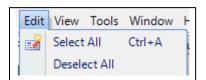


Figure 4-7: Edit options

4.3 Tools

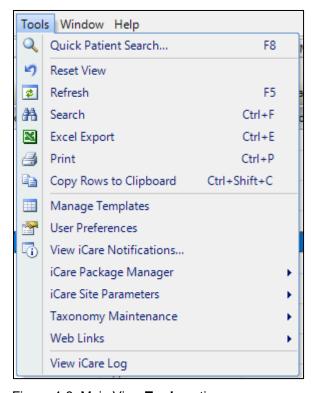


Figure 4-8: Main View Tools options

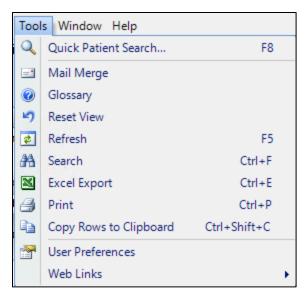


Figure 4-9: Other View Tools options

4.3.1 User Preferences

There is a **User Preference** specifically for Panel View where the user can choose which tabs to have access to display.

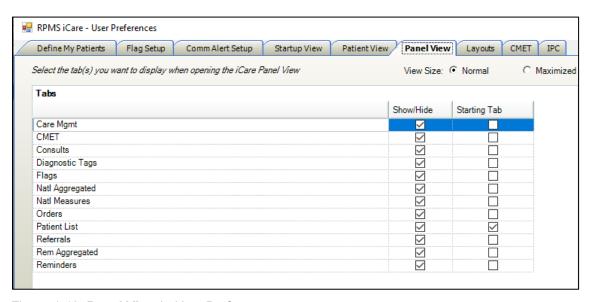


Figure 4-10: Panel View in User Preferences

Select the tab you wish to have as your **Starting Tab** when you open a panel. All tabs are defaulted to **Show**. Uncheck any tab to **Hide** tabs that may not be of interest to you. The **Definition Details** tab will always display if the panel definition indicates.

Select whether the panel view will be a **Normal** smaller size or **Maximized** size when opening.

There is a **User Preference** specifically for Patient View where the user can choose which tabs to have access to display. It also contains the default clinics needed for Letter, Telephone, and Chart Review notes.

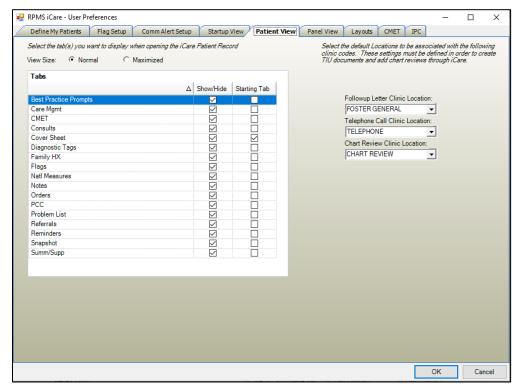


Figure 4-11: Patient View tab

4.3.2 Manage Templates

Views can be modified through Manage Templates or via the Layouts button. Every view in iCare has a Default view Template. Each view can be modified either by customizing the view, modifying the default template, or creating a new template via Manage Templates. Clicking on the Layout button takes you to the Layout window.

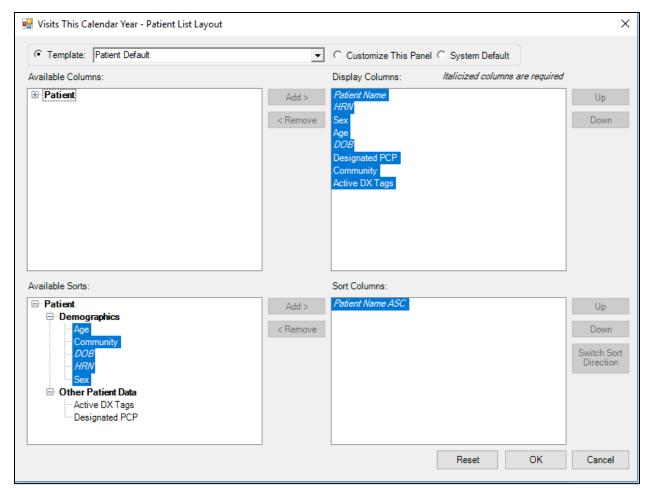


Figure 4-12: Layout window

Users can choose to keep the Template default view, customize the view for this panel only or revert to the System Default if the layout has been changed.



Figure 4-13: Views

You can pick from any selection of templates that exist for that view.

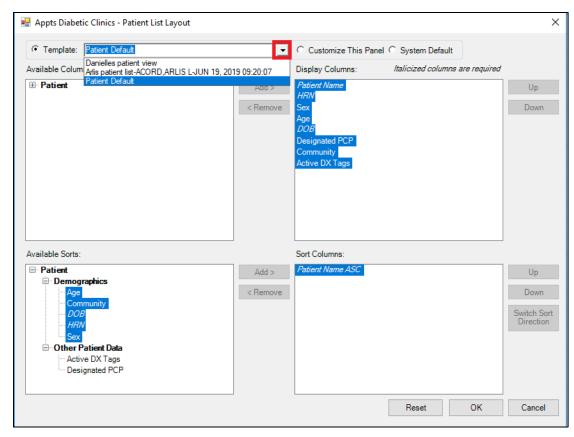


Figure 4-14: Template selection choice

There are four boxes that allow for changing of data; Available Columns (data element columns available to view); Display Columns (data element columns already selected for the view); Available Sorts (data element columns available to sort the data by) and Sort Columns (data elements already selected for sorting).

See Appendix A for a list of the data element columns available for display for all layout views.

Use the **Add** and **Remove** buttons to move data elements back and forth from the **Available Columns** and **Display Columns** boxes and from the **Available Sorts** and **Sort Columns**. They will be enabled if **Customize This Panel** is checked.



Figure 4-15: Add/Remove Buttons

Customizing the view is only for this specific panel and if the layout is changed to template or system default, the customized view will be gone.

Users can always revert to the System Default or a template.

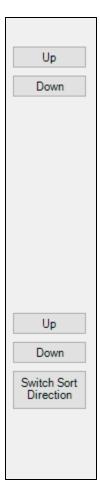


Figure 4-16: Up/Down/Switch Sort Direction buttons

The **Up/Down** buttons will move the highlighted data elements up or down in the **Display Columns** or **Sort Columns** boxes. The **Switch Sort Direction** button changes the order of the sort from the default Ascending (A-Z) to Descending (Z-A).

If you click on the column heading to change the sort, it will automatically change the value in the **Sort Columns** box.

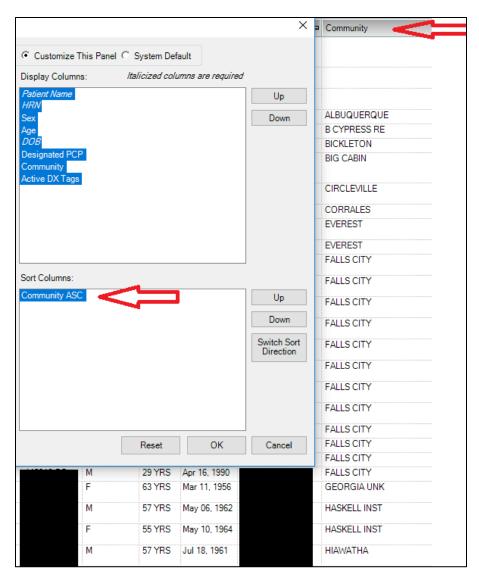


Figure 4-17: Changing the Sort Column

When leaving the panel, and column order or sort order has changed, you will be asked if you want to save the changes or not.

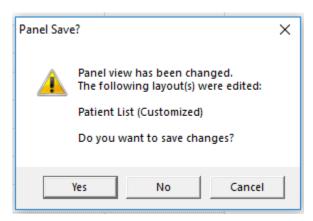


Figure 4-18: Saving changes

Appendix A Panel View Columns

A.1 Patient List

Default template for the Patient List tab is named Patient Default. Other tabs also have the **Required** and **Default** fields from this view as well as their specific column fields.

A.1.1 Address

Column	Information
Alt Phone	The OTHER PHONE number from patient registration
City	The city name of the patient's address
County	The county of the patient's community
Email Address	The current email address of the patient
Home Phone	The PHONE NUMBER [RESIDENCE] from patient registration
Location of Home	A description of where the patient's home might be found
State	The state of the patient's address
Street Address	The mailing address of the patient
Work Phone	The WORK PHONE from patient registration
Zip Code	The zip code of the patient's address

A.1.2 Contacts

Column	Information
EC Address-City	Emergency Contact's city
EC Address-State	Emergency Contact's state
EC Address-Street	Emergency Contact's street address
EC Address-Zip	Emergency Contact's zip code
Emerg Contact Phone	Emergency Contact's phone number
Emerg Contact Relationship	The relationship of the Emergency Contact to the patient.
Emergency Contact Name	Emergency Contact's name
Father's Cell Phone	The father's cell phone number
Father's Name	The name of the patient's father from patient registration
Father's Phone	The father's phone number
Mother's Cell Phone	The mother's cell phone number
Mother's Name	The name of the patient's mother from patient registration
Mother's Phone	The mother's phone number

Column	Information
NOK Address-City	Next of Kin's city
NOK Address-State	Next of Kin's state
NOK Address-Street	Next of Kin's street address
NOK Address-Zip	Next of Kin's zip code
NOK Phone	Next of Kin's phone number
NOK Relationship	The relationship of the Next of Kin to the patient.
Next of Kin Name	Next of Kin's name

A.1.3 CRS Flag

Column	Information
CRS Active Clinical	A patient who had an AMBULATORY, DAY SURGERY, HOSPITALIZATION or OBSERVATION visit to a primary care clinic in the CRS report range
CRS DM DX Ever	If patient ever had a diabetes (DM) diagnosis recorded in RPMS using taxonomy SURVEILLANCE DIABETES
CRS DM DX Report Period	If the patient had a DM diagnosis in the Report Period
CRS First DM Dx	If the patient's First DM diagnosis was before Report Period
CRS One DM Visit	If the patient had 1 DM visit in Report Period
CRS Two DM Visits	If the patient had 2 DM visits in Report Period

A.1.4 Demographics

Column	Information
Alias(es)	Any aliases that a patient has
Beneficiary	The patient's CLASSIFICATION/BENEFICIARY from patient registration, e.g., INDIAN/ALASKA NATIVE, NON-INDIAN SPOUSE, etc.
CRS Pop	Whether the patient is identified as User Population (UP) or Active Clinical (AC) by CRS
Cause of Death	In PCC, the Underlying Cause of Death (UCD) is where this information can be entered
Communication Preference	The method by which the patient has indicated they wish to be communicated with from patient registration - PHONE;EMAIL;LETTER;DO NOT NOTIFY
Date of Death	If the patient has been marked as deceased, the date of death from patient registration
Date/Time Added	The date/time the patient was added to the panel
Ethnicity	The ethnicity of the patient from patient registration

Column	Information	
Legal Name(s)	Any legal names that the patient has	
Manually Added	Identifies if the patient was manually added or removed from the panel, if blank then the patient was added via panel definition criteria	
Other Tribes	Any other tribes that the patient is associated with besides the TRIBE OF MEMBERSHIP	
Perf Met	If the patient is YES for all applicable CRS measures or not	
Preferred Language	The language by which the patient prefers to communicate in	
Preferred Name	The preferred name of the patient (when the flag is turned on)	
Race	The race of the patient	
Tribe	The TRIBE OF MEMBERSHIP of the patient	
Who Manually Added	The user who manually added a patient to the panel	

A.1.5 Measurement

Any active measurement found in the Measurement Type (File #999999.07). Measurement updates are released in AUM releases. The iCare Nightly Background job will determine which measurement is active and will add any new ones to the list.

Table A-1: Measurement

Column	Information		
Last measurement	Displays the value and date of the last measurement type		

A.1.6 Other Patient Data

Column	Information			
Active Insurance Coverage	Any active insurances that the patient has			
Advanced Directives	If the patient has any advanced directives on file in RPMS			
Allergies	If the patient has any allergies			
Employer	The employer of the patient			
Last Immunization Notification	The last recorded immunization notification in iCare			
Last Reminder Notification	The last recorded reminder notification in iCare			
Medicaid Number	If the patient has Medicaid, the Medicaid number			
Veteran	Whether the patient is a Veteran or not			

Column	Information	
Specialty Providers	The active Provider category a patient could be assigned to; e.g., Case Manager	

A.1.7 Visit Related

Column	Information			
IPC Adolescent Qualify Dates	The dates that the patient should have had an immunization visit, if the patient was 13 yrs old during the IPC report period			
IPC Depress Office Visit	If the patient had a depression office visit			
IPC Flu Office Visit	If a visit that meets the IPC Influenza Immunization Status encounter criteria			
IPC Last Office Visit	The last office visit per IPC requirements which is usually has a specific visit CPT code			
Last 3 Visit Clinics	The clinics of the last 3 visits that the patient had (no visit type filter)			
Last 3 Visit Dates	The dates of the last 3 visits that the patient had (no visit type filter)			
Last 5 Visit Clinics	The clinics of the last 5 visits that the patient had (no visit type filter)			
Last 5 Visit Dates	The dates of the last 5 visits that the patient had (no visit type filter)			
Last Appt Clinic	The clinic of the last appointment of the patient			
Last Appt Date	The date of the last appointment of the patient			
Last PC Visit Location	The last location of encounter for the last ambulatory visit whose clinic is a primary care clinic			
Last PC Visit POV Narrative	The Purpose of Visit narrative of the last ambulatory visit whose clinic is a primary care clinic			
Last PC Provider Narrative	The provider's narrative of last ambulatory visit whose clinic is a primary care clinic			
Last Primary Care Visit Clinic	The clinic of the last ambulatory visit which is a primary care clinic			
Last Primary Care Visit Date	The date of the last ambulatory visit whose clinic was a primary care clinic			
Last Primary Care Visit Provider	The provider of the last ambulatory visit whose clinic was a primary care clinic			
Last Visit Clinic	The clinic of the last visit that the patient had (no visit type filter)			
Last Visit Date	The date of the last visit that the patient had (no visit type filter)			
Last Visit Date w DPCP	The date of the last ambulatory or hospitalization visit where the assigned primary care provider was listed as a provider			
Last Visit Date/Time	The date/time of the last visit that the patient had (no visit type filter)			
Last Visit Location	The location of encounter for the last visit that the patient had (no visit type filter)			

Column	Information	
Last Visit POV Narrative	The Purpose of Visit narrative of the last visit that the patient had (no visit type filter)	
Last Visit Provider	The provider of the last visit that the patient had (no visit type filter)	
Last Visit Provider Narrative	The provider's narrative of last visit that the patient had (no visit type filter)	
Next 3 Appt Clinics	The clinics of the next 3 appointments that the patient is scheduled for	
Next 3 Appt Dates	The dates of the next 3 appointments that the patient is scheduled for	
Next 5 Appt Clinics	The clinics of the next 5 appointments that the patient is scheduled for	
Next 5 Appt Dates	The dates of the next 5 appointments that the patient is scheduled for	
Next Appt Clinic	The clinic of the next appointment that the patient is scheduled for	
Next Appt Date	The date of the next appointment that the patient is scheduled for	
Next Appt Date/Time	The date and time of the next appointment that the patient is scheduled for	
Next Appt Provider	The name of the default provider defined for the clinic of the next appointment that the patient is scheduled for	
Number of No Shows	The number of no show appointments that the patient has had in the past 12 months	
Number of Patient Cancels	The number of appointments that the patient cancelled in the past 12 months	

A.2 Reminders

There are five (5) categories of Reminders; Health Summary, EHR Clinical Reminders, IZ Forecaster, Care Management and CMET. The default Reminders template displays the default Health Summary reminders.

Each night the iCare Nightly Background job checks to see if reminders have been inactivated or if new reminders have been found (or activated). A notification message may be sent to you informing you of a newly added or newly deactivated/deleted reminder.

Table A-2: Reminders

Status	Received	From	Notification Text	Body
	Mar 27, 2019 08:11 AM		Reminder [DTAP,NOS] has been newly added. You may want to update your panel	
	00.117.00		Reminder View layouts.	

A.2.1 Default Health Summary Reminders

The default Health Summary Reminders belong to category General. Health Summary Reminders can be activated or inactivated from the Health Summary Maintenance Menu -> Health Maintenance Reminders -> Activate/Inactivate a Health Maintenance Reminder menu option.

Table A-3: Health Summary Reminders

Column
BLOOD PRESSURE
BREAST EXAM
DENTAL EXAM
DIABETES SCREENING
HEIGHT
HIV SCREENING
PELVIC EXAM
PHYSICAL EXAM
WEIGHT

A.2.2 Optional Health Summary Reminders

Behavioral Health

Column
ALCOHOL USE SCREENING
DEPRESSION SCREENING
DOMESTIC VIOLENCE/IPV SCREENING

Cancer-Related

Column
COLORECTAL CA-SCOPE/XRAY
MAMMOGRAM
PAP SMEAR
RECTAL
TOBACCO USE SCREENING

CVD-Related

Column	
CHOLESTEROL	

Elder

Column
FALL RISK ASSESSMENT
TONOMETRY
VISUAL ACUITY EXAM

Pediatric

Column
EPSDT Screening
HCT/HGB
HEAD CIRCUMFERENCE
HEARING TEST
NEWBORN HEARING TEST
PPD - TUBERCULOSIS
URINALYSIS

A.2.3 EHR Clinical Reminders

EHR Clinical Reminders are divided into two types: National reminders and Local reminders. National reminders are reminders that are released to all facilities and Local reminders are reminders that are created within a specific facility. Typically, national reminders start with IHS and local reminders will start with a local variation such as the initials of the facility.

Only those reminders that are active will be displayed in iCare. Reminders can be activated or inactivated using the Reminder Definition Management -> Activate/Inactivate Reminders menu option. Reminders with the same name will show up looking like a duplicate reminder. During the iCare Nightly Background job, if such duplicate reminders are found, a notification message will be sent any user designated as an iCare Package Manager (security key BQIZMGR).

Table A-4: EHR Clinical Reminders

Status	Received	From	Notification Text	Body
	Jun 27, 2019 11:44 AM		Duplicate EHR reminders found	The following duplicate EHR reminders are active. Please contact the EHR Reminder CAC to go to the Reminder Definition Management menu and inactivate the incorrect duplicate reminders. DM Foot Exam [IHS-DIAB FOOT EXAM 2013] DM Foot Exam [IHS-DIAB FOOT EXAM 2015]

A.2.4 IZ Forecaster Reminders

IZ Forecaster or Immunization reminders are those reminders found to be due by the Forecaster interface. There may be other immunization reminders in Health Summary or EHR Clinical Reminders, but they are not included in iCare.

Some example Immunization Forecaster immunizations are:

Table A-5: Example Immunization Forecaster immunizations

Column
DTaP
FLU,NOS
HEP A,NOS
HEP B,NOS
HIB,NOS
HPV,NOS
MMR
Men-B,NOS
MenCV4,NOS
PCV-13
POLIO,NOS
Td-ADULT
Tdap
VARICELLA
ZOS-Shgrx

A.2.5 Care Management Reminders

Currently the only specialized Care Management Reminders are for HIV patients and are a part of the HIV Management System (HMS).

Detail information about these reminders can be found in Appendix B of the HIV/AIDS Management User Manual

A.2.6 CMET Reminders

Every event in the CMET becomes a reminder if it was used as a Follow-up event.

A.3 National Measures

There are five (5) categories of National Measures; National GPRA, Non National, Other, IPC and Developmental. The default Performance template displays the National GPRA measures.

Each night the iCare Nightly Background job checks to see if a new version of IHS CLINICAL REPORTING (CRS) has been installed at your facility and will automatically update the list of measures. A notification will be sent when the new measures are updated.

Table A-6: National Measures

Status	Received	From	Notification Text	Body
	Mar 14, 2019 08:10 AM		CRS Updated	The RPMS Clinical Reporting System (CRS) has been updated on your facility's server. This update may affect your iCare Natl Measures view, because of new or inactivated performance measures. Please review your Natl Measures layout and update as needed. CRS UPDATE job scheduled to run MAR 14, 2019 20:00. Your Natl Measures data will not be up-to-date until this job has completed.

A.4 CMET

Please refer to the CMET User Manual for the details on this tab.

A.5 Care Management

The current Care Management groups are Asthma, Childhood Immun, COPD, COVID, Diabetes, DM Audit, Hep C, HIV/AIDS, Immunizations, Pediatric, Prenatal, STI/STD and Employee Health. Employee Health is only accessible if you have the appropriate security key. The access to Employee Health group should only be given to a small group of users who would be monitoring employees.

Each group has their own list of columns. The DM Audit group is based on the current release of the Diabetes Audit (BDM). When a new DM Audit is installed in RPMS, the iCare Nightly Background job will determine if there are any new columns to be added or columns that should be inactivated.

Childhood Immun is based on the type and number of immunizations needed for patients from age 0 to age 17.

A.5.1 Asthma

Column	Information	
Asthma Severity	Most recent Severity documented in Problem List Classification field. Values are: 1-Intermittent; 2-Mild Persistent; 3-Moderate Persistent; 4-Severe Persistent	
Asthma Tag Status	Most recent diagnostic tag status for Asthma only if any	
Last Asthma Visit	Date of most recent Asthma visit, defined as a face-to-face visit with ANY of the following asthma-related data elements documented: Severity, Control, Symptom Free Days, Work/School Missed, and/or Patient Education	
Best Peak Flow	Most recent Best Peak Flow value from Measurements file	
Last Peak Flow	Most recent Peak Flow value from Measurements file, obtained from a peak flow meter during a visit	
Asthma Control	What the designated asthma control is - WELL CONTROLLED;WELL CONTROLLED;VERY POORLY CONTROLLED	
FEV1/FVC	Most recent FEV1/FVC values from Measurements file, obtained from spirometry measurements during a visit	
Last Action Plan	Date of most recent Action Plan provided to this patient. Action Plans are available from the PCC Patient Wellness Handout	
Last Flu Shot	Date of most recent Influenza immunization	
Last Asthma ER/UC Visit	Date of most recent visit to the ER or Urgent Care (clinic codes 80 or 30) with Asthma as the primary POV	
Last Asthma Hospital Visit	Date of most recent hospitalization (service category H) with Asthma as the primary POV	
Last Tobacco Health Factor	Most recent Tobacco Health Factor	
On Controller Meds	Is this patient currently prescribed with Asthma Controller medications?	
On Inhaled Steroids	Is this patient currently prescribed with Inhaled Steroid medications?	
On Reliever Meds	Is this patient currently prescribed with Asthma Reliever medications?	
Asthma Quality of Care	All the following key elements documented: Asthma Severity value ever; Asthma Control and Peak Flow or FEV1 measurement and Asthma Action Plan and Flu Shot in past year; and current Controller medication prescription if Severity is Persistent (2,3 ~or 4)	
Symptom Free Days	Value of most recent Symptom Free Days documented in V Measurements	
Work/School Days Missed	Value of most recent Work/School Missed documented in V Measurements	
ASTHMA TRIGGERS	ASTHMA TRIGGERS from Health Factors broken out into each trigger separately, e.g., Air Pollutants, Dust Mites, etc.	

A.5.2 Childhood Immun

The display can be adjusted however the user wishes; all first shots, all series, etc. This is an example of how the column will look.

Table A-7: Cildhood Immun

Column	Information
1-DTaP	DTaP shot 1
1-POLIO	Polio shot 1
1-HIB	HIB shot 1
2-DTaP	DTaP shot 2
2-POLIO	Polio shot 2
2-HIB	HIB shot 2
3-DTaP	DTaP shot 3
3-POLIO	Polio shot 3
3-HIB	HIB shot 3
4-DTap	DTaP shot 4

A.5.3 COPD

Column	Information
Oximetry	The most recent O2 measurement
Spirometry	The most recent FVFC measurement
Pneumovax	The most recent pneumovax immunizations
Tobacco Assessed	When tobacco assessed
Tobacco Health Factor	The most recent tobacco health factor recorded
Active Inhaled Steroids	Checks if patient has an active medication from site-specified taxonomy BGP ASTHMA INHALED STEROIDS or BGP ASTHMA INHALED STEROIDS NDC
Abdominal Girth	The most recent abdominal girth measurement

A.5.4 COVID

Column	Information
Current COVID Lab Date	The most recent COVID lab test date
Current COVID Lab	The most recent COVID lab test name
Current COVID Lab Result	The most recent COVID lab test result
Previous COVID Lab Date	The previous COVID lab test date prior to the current one.
Previous COVID Lab	The previous COVID lab test name prior to the current one.

Column	Information
Previous COVID Lab Result	The previous COVID lab test result prior to the current one.
COVID Immunization Series	All COVID immunizations found in V Immunization that match the CVX codes in taxonomy, BQI COVID IZ CVX CODES.
High Risk Patient	'Yes' if a patient has any High Risk Conditions.
COVID Referral	If the PURPOSE OF REFERRAL in a Referral contains the word COVID, then this column will be 'Yes'.
COVID Addtl Dose	The date(s) of any additional COVID dose given to the patient using a CPT from taxonomoy BQI COVID ADDTL DOSE CPTS.
Immunocompromised Pt	Yes if the patient has met any of the Immunocompromised Conditions, No if they have not.
Immunocompromised Conditions	The immunocompromised conditions that a patient has. See Appendix C for details.
# High Risk Conditions	The count of High Risk Conditions that a patient has.
Active Orders	'Yes' if the patient has any orders that are currently active.
Current Post COVID Functional Status	The most recent entered Health Factor for category Post COVID Functional Status.
COVID Breakthrough Infection	If the patient has a positive COVID-19 lab test from taxonomies BQI COVID BRKTHRU LOINC/BQI COVID BRKTHRU TAX 14 days or more after they completed the recommended doses then value is YES
COVID Immun Status	Whether a COVID immunization is 'Complete' or 'Incomplete'
COVID Immunization Refusals	The date(s) of any COVID immunizations refusals by the patient
COVID Treatment Meds	Any drugs in taxonomy BQI COVID DRUGS used to treat COVID patients since Jan 1, 2020.
Confirmed COVID Dx Description	The confirmed COVID diagnosis code from taxonomy BQI CONFIRMED COVID-19 DXS in the IPL.
Confirmed COVID Dx Onset Date	The Onset date that a confirmed COVID diagnosis from taxonomy BQI CONFIRMED COVID-19 DXS has in IPL.
Covid Shot #1 Date	The date of the first COVID immunization shot.
Covid Shot #1 Name	The name of the first COVID immunization (Moderna, Pfizer, etc.)
Covid Shot #1 Location	The location of the first COVID immunization.
Covid Shot #1 Category	The visit service category of the first COVID immunization (Ambulatory, Event Historical)
Covid Shot #2 Date	The date of the second COVID immunization shot.
Covid Shot #2 Name	The name of the second COVID immunization (Moderna, Pfizer, etc.)

Column	Information
Covid Shot #2 Location	The location of the second COVID immunization.
Covid Shot #2 Category	The visit service category of the second COVID immunization (Ambulatory, Event Historical)
Covid Shot #3 Date	The date of the third COVID immunization shot.
Covid Shot #3 Name	The name of the third COVID immunization (Moderna, Pfizer, etc.)
Covid Shot #3 Location	The location of the third COVID immunization.
Covid Shot #3 Category	The visit service category of the third COVID immunization (Ambulatory, Event Historical)
Current Post COVID Functional Status	The most recent entered Health Factor for category Post COVID Functional Status.
High Risk Conditions	A list of all High Risk Conditions that a patient has. See Appendix B for details.
Immunosupressed Meds	Any autoimmune suppress drugs from taxonomy ATX IMMUNOSUPPRESS DRUGS for immunocompromised patients.
Occupation	The most recent entered Health Factor for category Occupation.
Personal History of COVID-	If someone entered Personal History of COVID-19 (Z86.16) in IPL.
Personal History of COVID- 19 Onset Date	Date of Onset in IPL for Personal History of COVID-19 diagnosis.
Previous Post COVID Functional Status	The previous Health Factor for category Post COVID Functional Status prior to the current one.
Probable COVID Dx Description	The probable COVID diagnosis from taxonomy BQI PROBABLE COVID-19 DXS.
Probable COVID Dx Onset Date	The Onset date of a probably COVID diagnosis in the past 30 days in IPL from taxonomy BQI PROBABLE COVID-19 DXS.
Total # COVID Immunizations	Total number of COVID immunizations given to the patient recorded in RPMS
Total # COVID Labs	A count of all COVD Labs from V Lab that a patient has had.
Travel History	The most recent entered Health Factor for category Travel History.

A.5.5 Diabetes

Column	Information
DM Onset	The date of the onset of Diabetes for this patient and where the date is documented
Last Height	The last height measurement taken for this patient
Last Weight	The most recent weight measurement taken for this patient

Column	Information
BMI	The value of the BMI calculated from the most recent height and weight measurements for the patient
Tobacco User	NO = Not a current tobacco user. YES = Current tobacco user. Taken from CRS measure Tobacco Use/Exposure Assessment 5+
HTN Diagnosed?	Has the patient been diagnosed with Hypertension?
On ACE Inhibitor?	Did the patient have an active ACE Inhibitor/ARB medication in the past year?
Aspirin Use/Anti- platelet	Patient had an active aspirin/anti-platelet medication in the past year
Last 3 BP (non ER)	The last three blood pressure measures for this patient in a non ER visit
Depression	If the patient has Depression on the Problem List, no depression screening is needed. Otherwise has the patient had a depression screening in the past year
DM Foot Exam	Has the patient had a foot exam in the past year?
DM Eye Exam	Has the patient had an eye exam in the past year?
Dental Exam	Has the patient had a dental exam in the past year?
Last Dietician Visit	The date of the patient's last visit to a dietician
Seasonal Flu	Returns the last recorded FLU immunization
Pneumovax	The last pneumovax immunization for this patient
TD (10 years)	Did the patient have a TD immunization in the past 10 years
Last TB Health Factor	Last tobacco health factor enter for the patient
HbA1c	The most recent HbA1c test result for this patient
Previous HbA1c	The previous result from the most recent HbA1c lab test for this patient
UACR (Quant A/C Ratio)	The most recent UACR (Quant A/C Ratio) lab test for this patient
Creatinine	The most recent Creatinine lab test for this patient
Estimated GFR	The most recent Estimated GFR lab test for this patient
Total Cholesterol	The most recent Total Cholesterol lab test for this patient
LDL Cholesterol	The most recent LDL Cholesterol lab test for this patient
HDL Cholesterol	The most recent HDL Cholesterol lab test for this patient
Triglycerides	The most recent Triglyceride lab test for this patient
Hep B Series Complete	If the patient has completed the Hep B series of immunizations
CVD Diagnosed?	Has the patient been diagnosed with CVD
Non-HDL Cholesterol	The most recent non-HDL Cholesterol lab test
Last Chest Xray	Date of the last Chest x-ray for the patient

Column	Information
Last Mammogram	If applicable, the date of the patient's last mammogram
Last Pap Smear	If applicable, the date of the patient's last pap smear
Last TB Test	Last TB test for this patient
Last Waist Circumference	The most recent waist circumference measurement taken for this patient
PPD Status	The status of a PPD test for the patient

A.5.6 DM Audit

See Appendix A in the Current Diabetes Audit User Addendum Manual for definitions. The list of columns enabled for iCare are as follows and can change when a new DM Audit is installed into RPMS.

Table A-8: DM Audit

Column DM Diagnosis Date DM Type Tobacco Use Tob Cessation Counsel Electronic Nicotine Last Height Last Weight BMI HTN Documented Blood Pressure DM Foot Exam DM Eye Exam Dental Exam Depression (Active Problem) Depression Screening Diet Instruction Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide Metformin	
DM Type Tobacco Use Tob Cessation Counsel Electronic Nicotine Last Height Last Weight BMI HTN Documented Blood Pressure DM Foot Exam DM Eye Exam Dental Exam Depression (Active Problem) Depression Screening Diet Instruction Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide	Column
Tobacco Use Tob Cessation Counsel Electronic Nicotine Last Height Last Weight BMI HTN Documented Blood Pressure DM Foot Exam DM Eye Exam Dental Exam Depression (Active Problem) Depression Screening Diet Instruction Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide	DM Diagnosis Date
Tob Cessation Counsel Electronic Nicotine Last Height Last Weight BMI HTN Documented Blood Pressure DM Foot Exam DM Eye Exam Dental Exam Depression (Active Problem) Depression Screening Diet Instruction Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide	DM Type
Electronic Nicotine Last Height Last Weight BMI HTN Documented Blood Pressure DM Foot Exam DM Eye Exam Dental Exam Depression (Active Problem) Depression Screening Diet Instruction Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide	Tobacco Use
Last Height Last Weight BMI HTN Documented Blood Pressure DM Foot Exam DM Eye Exam Dental Exam Depression (Active Problem) Depression Screening Diet Instruction Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide	Tob Cessation Counsel
Last Weight BMI HTN Documented Blood Pressure DM Foot Exam DM Eye Exam Dental Exam Depression (Active Problem) Depression Screening Diet Instruction Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide	Electronic Nicotine
BMI HTN Documented Blood Pressure DM Foot Exam DM Eye Exam Dental Exam Depression (Active Problem) Depression Screening Diet Instruction Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide	Last Height
HTN Documented Blood Pressure DM Foot Exam DM Eye Exam Dental Exam Depression (Active Problem) Depression Screening Diet Instruction Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide	Last Weight
Blood Pressure DM Foot Exam DM Eye Exam Dental Exam Depression (Active Problem) Depression Screening Diet Instruction Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide	BMI
DM Foot Exam DM Eye Exam Dental Exam Depression (Active Problem) Depression Screening Diet Instruction Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide	HTN Documented
DM Eye Exam Dental Exam Depression (Active Problem) Depression Screening Diet Instruction Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide	Blood Pressure
Dental Exam Depression (Active Problem) Depression Screening Diet Instruction Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide	DM Foot Exam
Depression (Active Problem) Depression Screening Diet Instruction Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide	DM Eye Exam
Depression Screening Diet Instruction Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide	Dental Exam
Diet Instruction Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide	Depression (Active Problem)
Physical Activity Instruction DM Education Insulin Sulfonylurea Glinide	Depression Screening
DM Education Insulin Sulfonylurea Glinide	Diet Instruction
Insulin Sulfonylurea Glinide	Physical Activity Instruction
Sulfonylurea Glinide	DM Education
Glinide	Insulin
	Sulfonylurea
Metformin	Glinide
	Metformin

Column
Acarbose
Pioglitazone
DPP4 inhibitors
Amylin Analogues
GLP-1 analog
Bromocriptine
Colesevelam
SGLT-2 inhibitor
ACE/ARB
Statin
CVD Documented
TB Test Done
TB Test Result
TB Result (Pos), Tx Complete
TB Result (Neg)
Seasonal Flu Vaccine
Pneumovax Ever
Td/TDAP (past 10 yrs)
Tdap (ever)
Hep B Series
HbA1c (most recent)
Total Cholesterol
HDL Cholesterol
LDL Cholesterol
Triglycerides
CREATININE
Estimated GFR
UACR
Combined Measure
eGFR and UACR
ENDS Status
Hep C Dx Ever
Hep C Screened
LEAMP
Retinopathy DX

A.5.7 Hep C

Column	Information
HCV Antibody Test	The most recent lab test from site-specified taxonomy BQI HCV ANTIBODY TAX
HCV RNA Test	The most recent lab test from site-specified taxonomy BQI HCV RNA TAX
AST Test	The most recent lab test from site-specified taxonomy DM AUDIT AST TAX
ALT Test	The most recent lab test from site-specified taxonomy DM AUDIT ALT TAX
Platelet Test	The most recent lab test from site-specified taxonomy BQI PLATELET TAX
HCV Viral Load Test	The most recent lab test from site-specified taxonomy BQI HCV VIRAL LOAD TAX
HCV Genotype Test	The most recent lab test from site-specified taxonomy BQI HEP C GENOTYPE TESTS
HIV Test	The most recent lab test from site-specified taxonomy BGP HIV TEST TAX
Fibroscan	The most recent Fibroscan procedure from taxonomy BQI FIBROSCAN CPT PROC
Liver Ultrasound	The most recent Liver Ultrasound procedure from taxonomy BQI LIVER ULTRASOUND CPT
Нер В	Hepatitis B immunization series
Hep A	Hepatitis A immunization series
Current HCV Status	This is the curent HCV status from Health Factors.
FIB-4 Calculation	The FIB-4 calculation is based on the values of the ALT, AST and Platelet lab tests and the age of the patient. The calculation will look at the most recent lab values in the past 2 years. Optimally the three labs would be on the same day but if they are not, they should be within 30 days of each other
First Hep C Dx	The first Hepatitis C diagnosis in either the Problem file or the Purpose of Visit file
Pregnant After DX	If the patient was pregnant after the first Hepatitis C diagnosis
Other Lab Tests	The most recent other identified lab test from site-specified taxonomy BQI HCV OTHER LAB TESTS
Baseline Lab Tests	The baseline value (and date) and the most recent value (and date) for any lab test from site-specified taxonomy BQI HCV BASELINE LAB TESTS

A.5.8 HIV/AIDS

See Section 2.1 in the HIV/AIDS Management User Manual for listing and definitions.

A.5.9 Immunizations

Column	Information
Immunization Short name	Any active immunization found in the IMMUNIZATION File #9999999.14

A.5.10 Pediatric

Column	Information
Activity Level	The most recent ACTIVITY LEVEL health factor
Weight	The most recent weight measurement
Height	The most recent height measurement
BMI	The most recent body mass index measurement
BMI Percentile	The most recent body mass index percentile measurement
Head Circumference	The most recent head circumference measurement
Last Infant Feeding	The most recent entered infant feeding data
Infant Feeding 2mos	Patients who were screened for infant feeding choice at the age of two months (45-89 days)
Infant Feeding 6mos	Patients who were screened for infant feeding choice at the age of six months (165-209 days)
Infant Feeding 9mos	Patients who were screened for infant feeding choice at the age of nine months (255-299 days)
Infant Feeding 1yr	Patients who were screened for infant feeding choice at the age of 1 year (350-394 days)
Lead Screening	The most recent blood lead test from site-specified taxonomy BQI BLOOD LEAD TESTS
Last Dental Visit	The most recent dental visit
ADD/ADHD Dx	The most recent diagnosis from taxonomy BQI ADD/ADHD DXS
Last 3 Well Child Visits	The last three visits where the Purpose of Visit was from SNOMED subset PXRM BQI WELL CHILD VISIT
Last ASQ	All the most recent ASQ measurements
Last Hearing Screening	The most recent hearing exam
Last Vision Screening	The most recent eye exam or vision screening measurement

A.5.11 Prenatal

Column	Information
Currently Pregnant?	The value from the Reproductive Factors file
Definitive Delivery Date	The value from the Reproductive Factors file

Column	Information
Estimated Gestational Age	The Estimated Gestational Age measurement (EGA) from the V Measurement file
High Risk	Based on the prenatal problems that have been given a High priority in the prenatal package in EHR.
Gravida	The Total Number of Pregnancies recorded in the Reproductive Factors file
3rd Trim RPR	Third trimester is considered to be weeks 27 - 40 counted from the Definitive Delivery Date.
	RPR lab test is determined from taxonomy BQI SYPHILIS REAGIN LOINC or BQI SYPHILIS REAGIN TEST TAX
3rd Trim TPA	TPA lab test is determined from taxonomy BQI SYPHILIS TP-AB LOINC or BQI SYPHILIS TP-AB TEST TAX
AOD (4P)	The current date and value of the Health Factor AOD (4PS)
Abortions	The number of abortions recorded in the Reproductive Factors file
BMI 1st Trimester	Based on the definitive delivery date, this is the BMI value that is the most current during Trimester 1
BMI 2nd Trimester	Based on the definitive delivery date, this is the BMI value that is the most current during Trimester 2
BMI 3rd Trimester	Based on the definitive delivery date, this is the BMI value that is the most current during Trimester 3
Ectopic Pregnancies	Number of ectopic pregnancies recorded in the Reproductive Factors file
Estimated Delivery Date	Based on the most recent date of the EDD (LMP), EDD (ULTRASOUND), EDD (CLINICAL PARAMETERS) or EDD (METHOD UNKNOWN) dates from the Reproductive Factors file
Full Term Births	Number of full term births recorded in the Reproductive Factors file
Initial BMI	Based on the definitive delivery date, this is the BMI value that occurred before the beginning of the first trimester.
	This is to establish a baseline for the pregnancy
Initial RPR Lab	Initial prenatal visit is determined by the date of the Initial Prenatal Visit note. If no note is found in the iCare Site Parameters - Pregnancy then it will look at CPT 0500F (INITIAL PRENATAL CARE VISIT) or CPT 0501F (PRENATAL FLOW SHEET). If no note or CPT is found, then the date range is determined to be weeks 1-13 counting back from the Definitive Delivery Date.
	RPR lab test is determined from taxonomy BQI SYPHILIS REAGIN LOINC or BQI SYPHILIS REAGIN TEST TAX
Initial TPA Lab	TPA lab test is determined from taxonomy BQI SYPHILIS TP-AB LOINC or BQI SYPHILIS TP-AB TEST TAX
Living Children	Number of living children recorded in the Reproductive Factors file

Column	Information
Miscarriages	Number of miscarriages recorded in the Reproductive Factors file
Multiple Births	Number of multiple births recorded in the Reproductive Factors file
Postpartum RPR	Postpartum is considered to be from the Definitive Delivery Date to 60 days past the Definitive Delivery Date.
	RPR lab test is determined from taxonomy BQI SYPHILIS REAGIN LOINC or BQI SYPHILIS REAGIN TEST TAX
Postpartum TPA	TPA lab test is determined from taxonomy BQI SYPHILIS TP-AB LOINC or BQI SYPHILIS TP-AB TEST TAX
Premature Births	Number of premature births recorded in the Reproductive Factors file
Syphilis Treatment	If a patient had a prescription found in RXNORM subsets; RXNO BQI BICILLIN (PCN G BENZ), RXNO BQI PCN G AQ CRYST INJ, RXNO BQI PCN G PROCAINE INJ (see Taxonomy View/Edit for matched drugs) during the expected pregnancy dates (definitive delivery date - 280 days)
Trimester 1 Dates	The expected dates of the first trimester based on the definitive delivery date (weeks 1 - 13, days 1 - 97)
Trimester 2 Dates	The expected dates of the second trimester based on the definitive delivery date (weeks 14 - 26, days 98 - 188)
Trimester 3 Dates	The expected dates of the third trimester based on the definitive delivery date (weeks 27 - 40, days 189 - 280)
Lab tests	The most recent lab tests entered in site-specified taxonomy BQI PRENATAL TAX

A.5.12 STI/STD

Column	Information
Last Chlamydia Dx	The most recent diagnosis in the IPL using taxonomy BKM CHLAMYDIA DXS and SNOMED subset PXRM BQI CHLAMYDIA
Last Gonorrhea Dx	The most recent diagnosis in the IPL using taxonomy BQI GONORRHEA DXS and SNOMED subset PXRM BQI GONORRHEA
Last Syphilis Dx	The most recent diagnosis in the IPL using taxonomy BKM SYPHILIS DXS and SNOMED subset PXRM BQI PRIMARY SYPHILIS
Last HIV Dx	The most recent diagnosis in the IPL using taxonomy BQI HIV DXS and SNOMED subset PXRM BQI HIV INFECTION OR AIDS
Most Recent Chlamydia Lab	The most recent lab test using taxonomies BQI C.TRACH SPECIFIC LOINC, BQI C.TRACH SPECIFIC TAX, BQI C.TRACH NON-SPECIFIC LOINC, BQI C.TRACH NON-SPECIFIC TAX, BQI CHLAMYDIA CULTURE LOINC, BQI CHLAMYDIA NUCLEIC LOINC, BQI CHLAMYDIA ANTIGEN LOINC

Column	Information
Most Recent Gonorrhea Lab	The most recent lab test using taxonomies BKM GONORRHEA LOINC CODES, BKM GONORRHEA TEST TAX, BQI GONORRHEA NUCLEIC LOINC, BQI GONORRHEA CULTURE LOINC
Most Recent HIV Lab	The most recent lab test using taxonomies BQI HIV AB QUAL SCREEN LOINC, BQI HIV QUAL CONFIRM LOINC, BQI HIV AB QUAL SCREEN TAX, BQI HIV QUAL CONFIRM TAX, BQI HIV ID SPEC CONFIRM LOINC, BQI HIV QUAL NUC ACID LOINC, BQI HIV ID SPEC CONFIRM TAX, BQI HIV QUAL NUC ACID TAX, BQI HIV QUAL ANTIGEN LOINC, BQI HIV VIROLOGIC TEST LOINC, BQI HIV QUAL ANTIGEN TAX, BQI HIV VIROLOGIC TEST TAX, BQI HIV AB QUANT SCREEN LOINC, BQI HIV QUANT CONFIRM LOINC, BQI HIV AB QUANT SCREEN TAX, BQI HIV QUANT CONFIRM TAX, BQI HIV QUANT NUC ACID LOINC, BQI HIV QUANT ANTIGEN LOINC, BQI HIV QUANT NUC ACID TAX, BQI HIV QUANT ANTIGEN TAX
Most Recent Syphilis Lab	The most recent lab test using taxonomies BQI SYPHILIS TP-AB LOINC, BQI SYPHILIS TP-AB TEST TAX, BQI SYPHILIS REAGIN LOINC, BQI SYPHILIS REAGIN TEST TAX
Last Chancroid Dx	The most recent diagnosis in the IPL using taxonomy BKM CHANCROID DXS and SNOMED subset PXRM BQI CHANCROID
Last Genital Herpes Dx	The most recent diagnosis in the IPL using taxonomy BKM GENITAL HERPES DX
Last Genital Warts Dx	The most recent diagnosis in the IPL using taxonomy BKM GENITAL WARTS DXS
Last HPV Dx	The most recent diagnosis in the IPL using taxonomy BKM HPV DXS
Last Hep B Dx	The most recent diagnosis in the IPL using taxonomy BKM HEP B DXS
Last Hep C Dx	The most recent diagnosis in the IPL using taxonomy BKM HEP C DXS and SNOMED subset PXRM BQI HEPATITIS C VIRUS INF
Last Lympho Venereum Dx	The most recent diagnosis in the IPL using taxonomy BKM LGV DXS
Last Trichomononas Dx	The most recent diagnosis in the IPL using taxonomy BKM TRICHOMONIASIS DXS
Most Recent Chancroid Lab	The most recent lab test using taxonomy BQI CHANCROID OTHER LOINC
Most Recent Genital Herpes Lab	The most recent lab test using taxonomies BQI HERPES SIMPLEX ANTIBODY LC, BQI HERPES SIMPLEX NUCL LOINC, BQI HERPES SIMPLEX CULT LOINC
Most Recent Hep B Lab	The most recent lab test using taxonomies BQI HEP B QUAL TEST LOINC, BQI HEP B QUANT TEST LOINC, BQI HEP B QUAL TEST TAX, BQI HEP B QUANT TEST TAX

Column	Information
Most Recent Hep C Lab	The most recent lab test using taxonomies BQI HEP C QUAL TEST LOINC, BQI HEP C QUANT TEST LOINC, BQI HEP C QUAL TEST TAX, BQI HEP C QUANT TEST TAX, BQI HEP C ANTIBODY LOINC, BQI HEP C NUCLEIC LOINC

A.5.13 Employee Health

Column	Information
FLU	The most recent influenza immunization
HEP A	The most recent Hepatitis A immunization
HEP B	The most recent Hepatitis B immunization
PPD	The most recent PPD skin test
TDAP	The most recent TDAP immunization
ILI	The most recent Influenza Like Illnesses (ILI) diagnosis
MMR	The most recent MMR immunization
HEP A SERIES	Number of Hepatitis A immunizations to see if the series is complete
HEP B SERIES	Number of Hepatitis B immunizations to see if the series is complete
MMR SERIES	Number of MMR immunizations to see if the series is complete
TB Lab	The most recent TB blood lab test or refusal

A.6 Diagnostic Tags

Column	Meaning
Patient Name	Name of the patient
HRN	Patient's Health Record Number
DOB	Patient's date of birth
Age	Patient's age today
Tag Name	Name of the diagnostic tag
Status	Current status of the tag for the patient. Values are PROPOSED, ACCEPTED, NO LONGER VALID, or SUPERCEDED.
Status Change Reason	Standard reasons why the tag status would have changed.
Status Comment	Comment entered by a user when updating a diagnostic tag.
Last Updated	Date that the tag was updated
Last Updated By	Who updated the tag? It could be a system process or a user who updated.

A.7 Flags

Column	Meaning
Flag Date	Date of the visit that meets the flag criteria
Patient Name	Name of the patient
HRN	Patient's Health Record Number
Sex	F (for female), M (for male), U (unknown), gender of patient at birth
Age	Patient's age today
DOB	Patient's date of birth
Flag Type	Type of flag; can be Abnormal Lab, Emergency Room Visit, etc.
Flag Description	Information about the visit the met the flag criteria, e.g., If not an Abnormal Lab then Provider, Purpose of Visit (POV) Narrative. If an Abnormal Lab, the lab, result, range, type of abnormal, and ordering provider
Designated PCP	The primary care primary that the patient has been assigned to

A.8 Referrals

Column	Information
Referral Date	Date the referral was initiated
Referral #	The referral number
Referring Provider	Provider who is asking for the referral
Status	Status of the referral - ACTIVE;APPROVED;CLOSED-COMPLETED;CLOSED-NOT COMPLETED
Facility Referred To	The primary vendor
Patient Type	Whether Inpatient or Outpatient
Referral Type	Type of referral - CHS;IHS (ANOTHER FACILITY);OTHER;IN-HOUSE
Expected Begin Date	The expected date for the services to begin (i.e., admission date for a hospitalization)
Appointment Date	The date the services actually began
Purpose of Referral	Text of the purpose of the referral
# Visits Under Referral	The number of outpatient visits that occurred under the authority of this referral
Actual End Date	The date the services actually ended
Actual LOS Hospital	The actual length of stay for a hospital admission
CHS Status	If the referral type is CHS, the status - PENDING; APPROVED; DENIED; PENDING APPEAL

Column	Information
Case Manager	The person who is managing this case
Diagnostic Category	The ICD diagnostic category of the referral
Estimated LOS Hospital	The estimated length of stay for a hospital admission
Expected End Date	The last date services were provided under the authority of this referral
Notes to Scheduler	Notes to be seen by the appointment clerk or the person scheduling the appointment for the patient
Payor	The entity that is primarily responsible for paying for the treatment the patient will receive based on this referral
Priority	A value indicating the priority of this referral
Procedure Category	The CPT service category for which this patient is being referred
Requesting Facility	The facility requesting the referral
Schedule with # days	The Provider records how soon to schedule an appointment for this referral

A.9 Consults

Column	Information
Consult Date	Date of actual entry of consultation request into the file
To Service	The name of the service that will complete the consult
Status	Status of the consult
Sending Provider	The provider who originated the order
Request Type	Whether the order is a consult or procedure
Patient Type	If the service is to be rendered on an outpatient or inpatient basis
Attention To	The name of a person that is to be alerted about the new consult
Associated Results	The reason for requesting the Consult or Procedure request
Consult Number	The order number of the consult
From Location	The location that sent the order to the receiving location
Last Action	The last action taken on the consult
Location	The location of the patient when the consult/request order was placed
Ordering Facility	If a consult/request sent to another Institution, then this is the SENDING hospital/institution
Place of Consultation	The place of consultation: Bedside, Consultant's Choice, On Call, Emergency Room, EKG Lab
Provisional Diagnosis	The Provisional Diagnosis the ordering clinician would specify on the Consult Form

Column	Information
Urgency	The urgency for this order (STAT, ROUTINE, NEXT AVAILABLE, EMERGENCY, TODAY, WITHIN 24 HOURS, WITHIN 48 HOURS, WITHIN 72 HOURS, etc.)

A.10 Orders

Column	Information
Order Date/Time	Date and time that the order was entered into RPMS
Order Number	The unique number assigned to the order
Ordering Provider	The person who requested the order
Order Class	The patient's classification for this order; either Inpatient or Outpatient
Order Status	The current status of the order
Order Group	This is the service to which the order is referred that determines the display group in which the order appears
Ordered Item	The individual item of the class and group that was ordered
Hospital Location	The internal location associated with the order
Order Start Date	If entered, the date that the order is to start
Order Stop Date	If entered, the date that the order is to stop
Who Entered	The person who entered the order

A.11 Definition Details

A.11.1 Allergies

Column	Information
Causative Agent	This is the agent to which the patient had an allergic reaction.
Severity	The severity of this allergic reaction.
Signs/symptoms	The signs or symptoms that are associated with this allergic reaction.
Origination Date	Date/time this allergy/adverse reaction was entered into the system.

A.11.2 Sched Appts

Column	Information
Appointment Date/Time	The date and time the appointment was scheduled for
Hosp Location	The internal location or clinic that the appointment was made for
Appt Status	The status of the appointment

Column	Information
Appt Length	How many minutes was the appointment for
Appt Made	The date the appointment was entered
Check In Entered	The date and time the check in was entered
Checked In	The date and time the patient checked in for the appointment
Checked In By	Who checked the patient in
Checked Out	The date and time the patient checked out from the appointment
Checked Out By	Who checked the patient out
Checked Out Entered	The date and time the check out was entered
Entered By	Who made the appointment

A.11.3 CPTs

Column	Information
Date	Date of the visit
CPT	The CPT code and the description.
Modifier 1	A modifier of the CPT code
Modifier 2	A modifier of the CPT code
Quantity	This is the number of times this procedure was done to the patient during the encounter
Provider	The encounter provider
Provider Narrative	The provider narrative

A.11.4 Exams

Column	Information
Date	Date of the visit
Exam	Name of the exam
Result	The exam result
Date/Time Last Modified	The date/time that the record was last modified
Encounter Provider	The encounter provider
Entered By	Who enter the exam record
Modified By	Who last modified the exam record

A.11.5 ER Visits

Column	Information
Admit Date	The date/time person was admitted to the ER
Discharge Date	The date/time person was discharged from the ER
Discharge Acuity	Acuity of the patient at discharge from the ER
Discharge Type	Type of discharge from the ER
Primary Diagnosis	What the patient's diagnosis is
Dx Narrative	Diagnosis narrative
Admitting Provider	Provider who decided to admit the patient from the ER
Discharge Nurse	Nurse at the time of discharge
Discharge Provider	Provider at the time of discharge
Presenting Complaint	Free text complaint of problem when coming into the ER
Transferred To	Where the patient was transferred to
Transport Mode	How the patient came to the ER
Triage Nurse	Nurse who triaged the incoming patient
Visit Type	The type of ER visit

A.11.6 High Risk\Immunocompromised

Column	Information
HR Condition	The name of the High Risk Condition
HR Condition Code	The code that determined the High Risk Condition
HR Onset Date	The onset date of the High Risk Condition
HR Found In	Where the code was found that determined the condition
Immunocompromised Condition	The name of the Immunocompromised Condition
Immunocompromised Code	The code that determined the Immunocompromised Condition
Immunocompromised Onset Date	The onset date of the condition
Immunocompromised Found In	Where the condition code was found

A.11.7 Health Factors

Column	Information
Visit Date	The Visit Date where the health factor was entered
Health Factor	The individual health factor

Column	Information
Health Factor Category	The category of the health factor
Date/Time Last Modified	The date and time the health factor record was last modified
Encounter Provider	The provider who was the encounter provider
Entered By	The person who entered the health factor record
Modified By	The person who last modified the health factor record

A.11.8 Immunizations

Column	Information
Visit Date	The Visit Date where the immunization was given
Vaccination	The full vaccine name of the vaccination
Vaccine Group	The group that the vaccine is assigned to
Vaccine Short Name	The short name of the vaccine
Admin Notes	Any administration notes written for the vaccination
Date Entered	The date the vaccination was entered
Date/Time Last Modified	The date and time the vaccination record was modified
Encounter Provider	The provider associated with the vaccination event
Event Date/Time	The immunization event date and time
Injection Site	The injection site of the vaccination
Last Modified By	Who last modified the vaccination record
Location	The location where the vaccination is recorded as being done
Lot #	The lot number of the vaccine
Series	Which series of immunization type was given to the patient
Service Category	The category of the visit
Vaccine Eligibility	The patient's vaccine eligibility
Who Entered	Person who entered the vaccination record

A.11.9 Inpatient

Column	Information
Admission Date	Date patient admitted
Admit Type	Type of admission
Attending Provider	Who the attending provider was
Ward	The ward(s) that the patient might have been in during their stay

Column	Information
Specialty	The treatment specialty of the patient's stay
Discharge Date	The date the patient was discharged
Discharge Type	Type of discharge
Diagnosis	The initial admitting diagnosis
Nurse	Nurses who may have done notes on the patient during their stay
Transfer Facility	Facility where the patient might have been transferred to

A.11.10 Labs

Column	Information
Date	The visit date of the lab
Lab Test	The name of the lab test
Lab Result	The result of the lab test
Normal/Abnormal	Whether the result indicates if it is abnormal or not
Ordering Physician	Provider who ordered the lab test
Accession #	The accession number of the lab test
Collection Date/Time	When the lab specimen was collected
Comment	Any comment about the lab test
Location	What facility location was the lab test associated with
Result Date/Time	The date and time the lab test was resulted
Status	The status of the lab test (resulted, accessioned, modified)

A.11.11 Measurements

Column	Information
Date	Visit date of the measurement
Measurement	The name of the measurement
Result	The measurement result
Date/Time Last Modified	The date and time the measurement was last modified
Encounter Provider	The visit provider
Entered By	Who entered the measurement record
Modified By	Who last modified the measurement record
Percentile	If the patient's age is less than 16, based on the height and weight
Qualifier(s)	The qualifier associated with the Vital Type of this measurement
Supplemental O2	The information of the supplemental oxygen
VC/VU Numerator	Vision Corrected/Vision Uncorrected value

A.11.12 Medications

Column	Information
Date	The visit date of the medication record
Medication	The name of the medication
Instructions	Any specific medication instructions
Days	Number of days the medication is prescribed for
Quantity	The quantity of the medication
Ordering Physician	Provider who ordered the medication
# of Refills	The number of refills allowed for this medication
Last Dispensed Date	Date the medication was last dispensed
Prescription Status	The status of the prescription

A.11.13 Notes

Column	Information
Date Entered	The visit date of the note
Note Title	The title of the note
Author/Dictator	The person who entered the note
Expected Cosigner	The person who is expected to be a cosigner if indicated
Hosp Location	The clinic location associated with the note
Site Location	The facility where the note was entered
Status	The status of the note
Additional Signers	If there were any additional signers to the note
Cosignature Date/Time	The date/time the note was cosigned
Cosigned By	The person who cosigned the note
Expected Signer	The person expected to be the signer of the note
Signature Date/Time	The date/time the note was signed
Signed By	The person who signed the note
Subject	The subject header for the note
Visit Date	The date of the visit that the note is associated with
Visit Type	The service category of the visit that the note is associated with

A.11.14 Orders

Column	Information
Order Date	Date and time that the order was entered into RPMS

Column	Information			
Order Number	The unique number assigned to the order			
Provider	The person who requested the order			
Class	The patient's classification for this order; either Inpatient or Outpatient			
Status	The current status of the order			
Group	This is the service to which the order is referred that determines the display group in which the order appears			
Item	The individual item of the class and group that was ordered			
Hosp Location	The internal location associated with the order			
Start Date	If entered, the date that the order is to start			
Stop Date	If entered, the date that the order is to stop			
ICD Indicator	The ICD code from the order dialog response			
Indicator Text	The ICD text from the order dialog response			
Most Recent Action Date/Time	The date/time of the most recent action taken on the order			
SNOMED Concept ID	The SNOMED concept ID code from the order dialog response			
Site Location	The facility where the order was entered			
Who Entered	The person who entered the order			

A.11.15 Patient Education

Column	Information				
Date	The visit date of the education				
Topic	The topic on which education was delivered				
Time Spent	The number of minutes that the education topic was provided				
Level of Understanding	The provider's assessment of how well the patient understood the education received				
Provider	The provider of the education topic				
Comments	Narrative text about the patient education given.				
Learning Readiness	Patient's readiness to learn the education topic				
Setting	Whether the education was provided in a group setting or to the individual patient				

A.11.16 POV

Column	Information
Date	The visit date

Column	Information			
Purpose of Visit	The ICD code purpose of visit			
Primary/Secondary	Whether this purpose of visit is the primary or a secondary reason for the visit			
First/Revisit	Is this visit a first visit for this POV or a revisit.			
Encounter Provider	The provider for the visit			
SNOMED Description	The SNOMED description for the purpose of visit			
Provider Narrative	The provider's text describing the diagnosis that was treated at the visit			
SNOMED Concept ID	The SNOMED ID for the purpose of visit			
Cause of DX	The cause of the diagnosis			
Date Entered	The date the visit was entered			
Entered By	The person who entered the visit			
External Cause	An External Cause Code for the purpose of the visit			
Last Modified	When the visit record was last modified			
Laterality Qualifier	The laterality attribute/qualifier value			
Modified By	The person who last modified the record			
Modifier	How a provider may modify the diagnosis or problem			
Place of Accident	If the purpose of visit was an accident, what the accident place is			
Place of Occurrence	A valid Place of Occurrence Code			
Present on Admission	Was this diagnosis present on admission?			

A.11.17 Problems

Column	Information			
Problem	The problem ICD code			
Date of Onset	Date of onset if entered, otherwise it is the date entered			
Status	Status of the problem			
Provider Narrative	The provider's text describing the problem			
Facility	The facility at which this problem was originally observed and documented.			
Date Last Modified	Date the problem was last modified			
Problem ID	Serves as a unique identifier for this problem			
Problem Notes	Notations appended to a problem for further clarification or information.			
SNOMED Concept	The SNOMED Concept ID used to identify the problem			

Column	Information			
Severity	The severity of the problem			
Used as Inpatient	Has this problem been used for an inpatient visit			
Used as POV	Has this problem been used for an outpatient visit as a purpose of visit			
User Last Modified	The person who last modified the problem			

A.11.18 Reminder Notifications

Column	Information				
Reminder Due	The date that the selected reminder is due by				
Notification Date	The most recent date that a notification was done for this reminder				
Notification Method	The method of the notification				
Completion Date	If the reminder was completed, the date it was no longer due				
Creator	Who created the notification				
Eligible Provider	If a particular provider is indicated for the reminder notification				

A.11.19 Visits

Column	Information			
Visit Date/Time	The date and time of the visit			
Location of Encounter	The facility of the visit			
Clinic	The clinic stop code associated with the visit			
Hosp Location	The internal location/clinic/ward associated with the visit			
Service Category	The category of the visit			
Providers	The providers associated with the visit			
Created By	The person who created the visit			
Date/Time Last Modified	The date/time the visit was last modified			
Last Modified By	The person who last modified the visit			
Outside Location	If the location of encounter is OTHER, the free text location			
Outside Provider	If the location of encounter is OTHER, the free text provider			

A.11.20 WaitLists

Column	Information
Date/Time Added	The date/time the request was added to the waitlist
Priority	The priority assigned to the waitlist request
Provider	The provider assigned to the waitlist request

Column	Information			
Clinic	The clinic of the waitlist request			
Recall Date	The date the waitlist request should be reviewed by			
Comments	Any comments associated with the waitlist request			
Add Reason	The reason the request was added to the waitlist			
Date Removed	The date the request was removed from the waitlist			
Last Appt with Clinic	The most recent appointment of the patient with the clinic of this waitlist request			
Next Appt with Clinic	The next appointment of the patient with the clinic of this waitlist request			
Resolution	The reason the request was removed from the waitlist			
Who Added	The person who added the request to the waitlist			
Who Removed	The person who removed the request from the waitlist			

Appendix B High Risk Conditions

B.1 ALCOHOL ABUSE

Code	Code	Code	Code	Code	Code
E52.	F10.239	F10.982	T51.0X3D	T51.2X3A	T51.8X2S
F10.10	F10.24	F10.988	T51.0X3S	T51.2X3D	T51.8X3A
F10.11	F10.250	F10.99	T51.0X4A	T51.2X3S	T51.8X3D
F10.120	F10.251	G62.1	T51.0X4D	T51.2X4A	T51.8X3S
F10.121	F10.259	142.6	T51.0X4S	T51.2X4D	T51.8X4A
F10.129	F10.26	K29.20	T51.1X1A	T51.2X4S	T51.8X4D
F10.14	F10.27	K29.21	T51.1X1D	T51.3X1A	T51.8X4S
F10.150	F10.280	K70.0	T51.1X1S	T51.3X1D	T51.91XA
F10.151	F10.281	K70.10	T51.1X2A	T51.3X1S	T51.91XD
F10.159	F10.282	K70.11	T51.1X2D	T51.3X2A	T51.91XS
F10.180	F10.288	K70.2	T51.1X2S	T51.3X2D	T51.92XA
F10.181	F10.29	K70.30	T51.1X3A	T51.3X2S	T51.92XD
F10.182	F10.920	K70.31	T51.1X3D	T51.3X3A	T51.92XS
F10.188	F10.921	K70.40	T51.1X3S	T51.3X3D	T51.93XA
F10.19	F10.929	K70.41	T51.1X4A	T51.3X3S	T51.93XD
F10.20	F10.94	K70.9	T51.1X4D	T51.3X4A	T51.93XS
F10.21	F10.950	T51.0X1A	T51.1X4S	T51.3X4D	T51.94XA
F10.220	F10.951	T51.0X1D	T51.2X1A	T51.3X4S	T51.94XD
F10.221	F10.959	T51.0X1S	T51.2X1D	T51.8X1A	T51.94XS
F10.229	F10.96	T51.0X2A	T51.2X1S	T51.8X1D	Z71.41
F10.230	F10.97	T51.0X2D	T51.2X2A	T51.8X1S	Z71.42
F10.231	F10.980	T51.0X2S	T51.2X2D	T51.8X2A	T51.8X2S
F10.232	F10.981	T51.0X3A	T51.2X2S	T51.8X2D	

B.2 BLOOD LOSS ANEMIA

Code	
D50.0	

B.3 BONE MARROW TRANSPLANT

Code	
Z94.81	

B.4 CEREBROVASCULAR DISEASE

Code	Code	Code	Code	Code	Code
160.00	163.311	166.02	169.090	169.249	169.822
I60.01	163.312	166.03	169.091	169.251	169.823
160.02	163.313	166.09	169.092	169.252	169.828
160.10	163.319	166.11	169.093	169.253	169.831
160.11	163.321	166.12	169.098	169.254	169.832
I60.12	163.322	I66.13	169.10	169.259	169.833
160.2	163.323	166.19	I69.11	169.261	169.834
160.20	163.329	166.21	I69.110	169.262	169.839
I60.21	I63.331	166.22	I69.111	169.263	169.841
160.22	163.332	166.23	169.112	169.264	169.842
160.30	163.333	166.29	I69.113	169.265	169.843
160.31	163.339	166.3	I69.114	169.269	169.844
160.32	I63.341	166.8	169.115	169.290	169.849
160.4	163.342	166.9	I69.118	169.291	169.851
160.50	163.343	167.0	169.119	169.292	169.852
160.51	163.349	I67.1	169.120	169.293	169.853
160.52	163.39	167.2	169.121	169.298	169.854
160.6	163.40	167.3	169.122	169.30	169.859
160.7	I63.411	167.4	169.123	169.31	169.861
160.8	I63.412	167.5	169.128	169.310	169.862
160.9	I63.413	167.6	169.131	169.311	169.863
I61.0	I63.419	167.7	169.132	169.312	169.864
I61.1	I63.421	167.81	169.133	169.313	169.865
I61.2	163.422	167.82	169.134	169.314	169.869
I61.3	163.423	167.83	169.139	169.315	169.890
I61.4	163.429	167.841	169.141	169.318	169.891
I61.5	I63.431	167.848	169.142	169.319	169.892
I61.6	163.432	167.850	169.143	169.320	169.893
I61.8	163.433	167.858	169.144	169.321	169.898
I61.9	163.439	167.89	169.149	169.322	169.90
162.00	I63.441	167.9	169.151	169.323	169.91
162.01	163.442	168.0	169.152	169.328	169.910
162.02	163.443	168.2	169.153	169.331	169.911
162.03	163.449	168.8	169.154	169.332	169.912
I62.1	163.49	169.00	169.159	169.333	169.913
162.9	163.50	I69.01	I69.161	169.334	169.914
163.00	I63.511	I69.010	169.162	169.339	169.915
I63.011	I63.512	I69.011	169.163	I69.341	169.918
I63.012	163.513	169.012	169.164	169.342	169.919

Code	Code	Code	Code	Code	Code
163.013	163.519	169.013	169.165	169.343	169.920
163.019	163.521	169.014	169.169	169.344	169.921
163.02	163.522	169.015	169.190	169.349	169.922
163.031	163.523	169.018	169.191	169.351	169.923
163.032	163.529	169.019	169.192	169.352	169.928
163.033	163.531	169.020	169.193	169.353	169.931
163.039	163.532	169.021	169.198	169.354	169.932
163.09	163.533	169.022	169.20	169.359	169.933
163.10	163.539	169.023	169.21	169.361	169.934
I63.111	163.541	169.028	169.210	169.362	169.939
163.112	163.542	169.031	169.211	169.363	169.941
163.113	163.543	169.032	169.212	169.364	169.942
163.119	163.549	169.033	169.213	169.365	169.943
163.12	163.59	169.034	169.214	169.369	169.944
163.131	163.6	169.039	169.215	169.390	169.949
163.132	163.8	169.041	169.218	169.391	169.951
163.133	I63.81	169.042	169.219	169.392	169.952
163.139	163.89	169.043	169.220	169.393	169.953
163.19	163.9	169.044	169.221	169.398	169.954
163.20	I65.01	169.049	169.222	169.80	169.959
163.211	165.02	169.051	169.223	169.81	169.961
163.212	165.03	169.052	169.228	169.810	169.962
163.213	165.09	169.053	169.231	169.811	169.963
163.219	165.1	169.054	169.232	169.812	169.964
163.22	165.21	169.059	169.233	169.813	169.965
163.231	165.22	169.061	169.234	169.814	169.969
163.232	165.23	169.062	169.239	169.815	169.990
163.233	165.29	169.063	169.241	169.818	169.991
163.239	165.8	169.064	169.242	169.819	169.992
163.29	165.9	169.065	169.243	169.820	169.993
163.30	I66.01	169.069	169.244	169.821	169.998

B.5 CHRONIC KIDNEY DISEASE

Code	Code	Code	Code	Code	Code
I12.0	N18.3	N18.6	N25.0	Z94.0	
N18.1	N18.4	N18.9	Z49.01	Z99.2	
N18.2	N18.5	N19.	Z49.02		

B.6 CHRONIC PULMONARY DISEASE

Code	Code	Code	Code	Code	Code
J40.	J44.1	J45.50	J47.9	J63.6	J67.4
J41.0	J44.9	J45.51	J60.	J64.	J67.5
J41.1	J45.20	J45.52	J61.	J65.	J67.6
J41.8	J45.21	J45.901	J62.0	J66.0	J67.7
J42.	J45.22	J45.902	J62.8	J66.1	J67.8
J43.0	J45.30	J45.909	J63.0	J66.2	J67.9
J43.1	J45.31	J45.990	J63.1	J66.8	J68.4
J43.2	J45.32	J45.991	J63.2	J67.0	J70.1
J43.8	J45.40	J45.998	J63.3	J67.1	J70.3
J43.9	J45.41	J47.0	J63.4	J67.2	
J44.0	J45.42	J47.1	J63.5	J67.3	

B.7 COAGULOPATHY

Code	Code	Code	Code	Code	Code
D65.	D68.2	D68.4	D68.62	D69.3	D69.59
D66.	D68.311	D68.51	D68.69	D69.41	D69.6
D67.	D68.312	D68.52	D68.8	D69.42	
D68.0	D68.318	D68.59	D68.9	D69.49	
D68.1	D68.32	D68.61	D69.1	D69.51	

B.8 CONGESTIVE HEART FAILURE

Code	Code	Code	Code	Code	Code
109.0	I13.2	142.7	150.23	150.43	150.84
109.2	125.5	142.8	150.30	150.810	150.89
109.9	I42.0	142.9	150.31	150.811	150.9
I11.0	I42.1	143.	150.32	150.812	P29.0
I11.9	142.2	150.1	150.33	150.813	
I13.0	142.3	150.20	150.40	150.814	
I13.10	142.4	150.21	150.41	150.82	
I13.11	142.5	150.22	150.42	150.83	

B.9 DEFICIENCY ANEMIAS

Code	Code	Code	Code	Code	Code
D56.9	D51.9	D55.0	D56.5	D58.2	D59.2
D50.0	D52.0	D55.1	D56.8	D58.8	D59.3

Code	Code	Code	Code	Code	Code
D50.1	D52.1	D55.2	D56.9	D58.9	D59.4
D50.8	D52.8	D55.3	D57.00	D59.0	D59.5
D50.9	D52.9	D55.8	D57.01	D59.1	D59.6
D51.0	D53.0	D55.9	D57.02	D59.10	D59.8
D51.1	D53.1	D56.0	D57.03	D59.11	D59.9
D51.2	D53.2	D56.1	D57.09	D59.12	
D51.3	D53.8	D56.2	D58.0	D59.13	
D51.8	D53.9	D56.3	D58.1	D59.19	

B.10 DEPRESSION

Code	Code	Code	Code	Code	Code
F31.30	F32.1	F32.8	F33.1	F33.42	F43.22
F31.31	F32.2	F32.81	F33.2	F33.8	F43.23
F31.32	F32.3	F32.89	F33.3	F33.9	F43.24
F31.4	F32.4	F32.9	F33.40	F43.20	F43.25
F32.0	F32.5	F33.0	F33.41	F43.21	F43.29

B.11 DIABETES

Code	Code	Code	Code	Code
E10.10	E11.00	E11.11	E13.00	E13.11
E10.11	E11.01	E11.9	E13.01	E13.9
E10.9	E11.10		E13.10	

B.12 DIABETES, COMPLICATED

Code	Code	Code	Code	Code	Code
E10.21	E10.3532	E11.22	E11.3533	E13.29	E13.3539
E10.22	E10.3533	E11.29	E11.3539	E13.311	E13.3541
E10.29	E10.3539	E11.311	E11.3541	E13.319	E13.3542
E10.311	E10.3541	E11.319	E11.3542	E13.321	E13.3543
E10.319	E10.3542	E11.321	E11.3543	E13.3211	E13.3549
E10.321	E10.3543	E11.3211	E11.3549	E13.3212	E13.3551
E10.3211	E10.3549	E11.3212	E11.3551	E13.3213	E13.3552
E10.3212	E10.3551	E11.3213	E11.3552	E13.3219	E13.3553
E10.3213	E10.3552	E11.3219	E11.3553	E13.329	E13.3559
E10.3219	E10.3553	E11.329	E11.3559	E13.3291	E13.359
E10.329	E10.3559	E11.3291	E11.359	E13.3292	E13.3591
E10.3291	E10.359	E11.3292	E11.3591	E13.3293	E13.3592
E10.3292	E10.3591	E11.3293	E11.3592	E13.3299	E13.3593

Code	Code	Code	Code	Code	Code
E10.3293	E10.3592	E11.3299	E11.3593	E13.331	E13.3599
E10.3299	E10.3593	E11.331	E11.3599	E13.3311	E13.36
E10.331	E10.3599	E11.3311	E11.36	E13.3312	E13.37X1
E10.3311	E10.36	E11.3312	E11.37X1	E13.3313	E13.37X2
E10.3312	E10.37X1	E11.3313	E11.37X2	E13.3319	E13.37X3
E10.3313	E10.37X2	E11.3319	E11.37X3	E13.339	E13.37X9
E10.3319	E10.37X3	E11.339	E11.37X9	E13.3391	E13.39
E10.339	E10.37X9	E11.3391	E11.39	E13.3392	E13.40
E10.3391	E10.39	E11.3392	E11.40	E13.3393	E13.41
E10.3392	E10.40	E11.3393	E11.41	E13.3399	E13.42
E10.3393	E10.41	E11.3399	E11.42	E13.341	E13.43
E10.3399	E10.42	E11.341	E11.43	E13.3411	E13.44
E10.341	E10.43	E11.3411	E11.44	E13.3412	E13.49
E10.3411	E10.44	E11.3412	E11.49	E13.3413	E13.51
E10.3412	E10.49	E11.3413	E11.51	E13.3419	E13.52
E10.3413	E10.51	E11.3419	E11.52	E13.349	E13.59
E10.3419	E10.52	E11.349	E11.59	E13.3491	E13.610
E10.349	E10.59	E11.3491	E11.610	E13.3492	E13.618
E10.3491	E10.610	E11.3492	E11.618	E13.3493	E13.620
E10.3492	E10.618	E11.3493	E11.620	E13.3499	E13.621
E10.3493	E10.620	E11.3499	E11.621	E13.351	E13.622
E10.3499	E10.621	E11.351	E11.622	E13.3511	E13.628
E10.351	E10.622	E11.3511	E11.628	E13.3512	E13.630
E10.3511	E10.628	E11.3512	E11.630	E13.3513	E13.638
E10.3512	E10.630	E11.3513	E11.638	E13.3519	E13.641
E10.3513	E10.638	E11.3519	E11.641	E13.3521	E13.649
E10.3519	E10.641	E11.3521	E11.649	E13.3522	E13.65
E10.3521	E10.649	E11.3522	E11.65	E13.3523	E13.69
E10.3522	E10.65	E11.3523	E11.69	E13.3529	E13.8
E10.3523	E10.69	E11.3529	E11.8	E13.3531	
E10.3529	E10.8	E11.3531	E13.21	E13.3532	
E10.3531	E11.21	E11.3532	E13.22	E13.3533	

B.13 DRUG ABUSE

Code	Code	Code	Code	Code	Code
F11.10	F12.23	F13.94	F15.129	F16.250	F19.122
F11.11	F12.250	F13.950	F15.14	F16.251	F19.129
F11.120	F12.251	F13.951	F15.150	F16.259	F19.14
F11.121	F12.259	F13.959	F15.151	F16.280	F19.150
F11.122	F12.280	F13.96	F15.159	F16.283	F19.151

Code	Code	Code	Code	Code	Code
F11.129	F12.288	F13.97	F15.180	F16.288	F19.159
F11.14	F12.29	F13.980	F15.181	F16.29	F19.16
F11.150	F12.90	F13.981	F15.182	F16.90	F19.17
F11.151	F12.920	F13.982	F15.188	F16.920	F19.180
F11.159	F12.921	F13.988	F15.19	F16.921	F19.181
F11.181	F12.922	F13.99	F15.20	F16.929	F19.182
F11.182	F12.929	F14.10	F15.21	F16.94	F19.188
F11.188	F12.93	F14.11	F15.220	F16.950	F19.19
F11.19	F12.950	F14.120	F15.221	F16.951	F19.20
F11.20	F12.951	F14.121	F15.222	F16.959	F19.21
F11.21	F12.959	F14.122	F15.229	F16.980	F19.220
F11.220	F12.980	F14.129	F15.23	F16.983	F19.221
F11.221	F12.988	F14.14	F15.24	F16.988	F19.222
F11.222	F12.99	F14.150	F15.250	F16.99	F19.229
F11.229	F13.10	F14.151	F15.251	F18.10	F19.230
F11.23	F13.11	F14.159	F15.259	F18.11	F19.231
F11.24	F13.120	F14.180	F15.280	F18.120	F19.232
F11.250	F13.121	F14.181	F15.281	F18.121	F19.239
F11.251	F13.129	F14.182	F15.282	F18.129	F19.24
F11.259	F13.14	F14.188	F15.288	F18.14	F19.250
F11.281	F13.150	F14.19	F15.29	F18.150	F19.251
F11.282	F13.151	F14.20	F15.90	F18.151	F19.259
F11.288	F13.159	F14.21	F15.920	F18.159	F19.26
F11.29	F13.180	F14.220	F15.921	F18.17	F19.27
F11.90	F13.181	F14.221	F15.922	F18.180	F19.280
F11.920	F13.182	F14.222	F15.929	F18.188	F19.281
F11.921	F13.188	F14.229	F15.93	F18.19	F19.282
F11.922	F13.19	F14.23	F15.94	F18.20	F19.288
F11.929	F13.20	F14.24	F15.950	F18.21	F19.29
F11.93	F13.21	F14.250	F15.951	F18.220	F19.90
F11.94	F13.220	F14.251	F15.959	F18.221	F19.920
F11.950	F13.221	F14.259	F15.980	F18.229	F19.921
F11.951	F13.229	F14.280	F15.981	F18.24	F19.922
F11.959	F13.230	F14.281	F15.982	F18.250	F19.929
F11.981	F13.231	F14.282	F15.988	F18.251	F19.930
F11.982	F13.232	F14.288	F15.99	F18.259	F19.931
F11.988	F13.239	F14.29	F16.10	F18.27	F19.932
F11.99	F13.24	F14.90	F16.11	F18.280	F19.939
F12.10	F13.250	F14.920	F16.120	F18.288	F19.94
F12.11	F13.251	F14.921	F16.121	F18.29	F19.950
F12.120	F13.259	F14.922	F16.122	F18.90	F19.951

Code	Code	Code	Code	Code	Code
F12.121	F13.26	F14.929	F16.129	F18.920	F19.959
F12.122	F13.27	F14.94	F16.14	F18.921	F19.96
F12.129	F13.280	F14.950	F16.150	F18.929	F19.97
F12.150	F13.281	F14.951	F16.151	F18.94	F19.980
F12.151	F13.282	F14.959	F16.159	F18.950	F19.981
F12.159	F13.288	F14.980	F16.180	F18.951	F19.982
F12.180	F13.29	F14.981	F16.183	F18.959	F19.988
F12.188	F13.90	F14.982	F16.188	F18.97	F19.99
F12.19	F13.920	F14.988	F16.19	F18.980	Z71.51
F12.20	F13.921	F14.99	F16.20	F18.988	Z71.52
F12.21	F13.929	F15.10	F16.21	F18.99	
F12.220	F13.930	F15.11	F16.220	F19.10	
F12.221	F13.931	F15.120	F16.221	F19.11	
F12.222	F13.932	F15.121	F16.229	F19.120	
F12.229	F13.939	F15.122	F16.24	F19.121	

B.14 HTN

Code	
I10.	

B.15 HTN, COMPLICATED

Code	Code	Code	Code	Code	Code
I12.9	I15.0	I15.1	I15.2	I15.8	I15.9

B.16 HYPOTHYROIDISM

Code	Code	Code	Code	Code	Code
E00.0	E00.9	E01.2	E03.0	E03.3	E03.8
E00.1	E01.0	E01.8	E03.1	E03.4	E03.9
E00.2	E01.1	E02.	E03.2	E03.5	E89.0

B.17 IMMUNE DEFICIENCIES

Code	Code	Code	Code	Code	Code
D80.0	D81.2	D81.819	D83.2	D86.82	D89.40
D80.1	D81.3	D81.89	D83.8	D86.83	D89.41
D80.2	D81.30	D81.9	D83.9	D86.84	D89.42
D80.3	D81.31	D82.0	D84.0	D86.85	D89.43

Code	Code	Code	Code	Code	Code
D80.4	D81.32	D82.1	D84.1	D86.86	D89.49
D80.5	D81.39	D82.2	D84.8	D86.87	D89.810
D80.6	D81.4	D82.3	D84.9	D86.89	D89.811
D80.7	D81.5	D82.4	D86.0	D86.9	D89.812
D80.8	D81.6	D82.8	D86.1	D89.0	D89.813
D80.9	D81.7	D82.9	D86.2	D89.1	D89.82
D81.0	D81.810	D83.0	D86.3	D89.2	D89.89
D81.1	D81.818	D83.1	D86.81	D89.3	D89.9

B.18 LIVER DISEASE

Code	Code	Code	Code	Code	Code
B18.0	185.11	K71.51	K73.0	K74.3	K76.4
B18.1	186.4	K71.7	K73.1	K74.4	K76.5
B18.2	K71.10	K72.00	K73.2	K74.5	K76.6
B18.8	K71.11	K72.01	K73.8	K74.60	K76.7
B18.9	K71.2	K72.10	K73.9	K74.69	K76.81
185.00	K71.3	K72.11	K74.0	K76.0	K76.89
I85.01	K71.4	K72.90	K74.1	K76.2	K76.9
I85.10	K71.50	K72.91	K74.2	K76.3	Z94.4

B.19 LYMPHOMA

Code	Code	Code	Code	Code	Code
C81.00	C81.93	C82.56	C83.39	C84.42	C85.15
C81.01	C81.94	C82.57	C83.50	C84.43	C85.16
C81.02	C81.95	C82.58	C83.51	C84.44	C85.17
C81.03	C81.96	C82.59	C83.52	C84.45	C85.18
C81.04	C81.97	C82.60	C83.53	C84.46	C85.19
C81.05	C81.98	C82.61	C83.54	C84.47	C85.20
C81.06	C81.99	C82.62	C83.55	C84.48	C85.21
C81.07	C82.00	C82.63	C83.56	C84.49	C85.22
C81.08	C82.01	C82.64	C83.57	C84.60	C85.23
C81.09	C82.02	C82.65	C83.58	C84.61	C85.24
C81.10	C82.03	C82.66	C83.59	C84.62	C85.25
C81.11	C82.04	C82.67	C83.70	C84.63	C85.26
C81.12	C82.05	C82.68	C83.71	C84.64	C85.27
C81.13	C82.06	C82.69	C83.72	C84.65	C85.28
C81.14	C82.07	C82.80	C83.73	C84.66	C85.29
C81.15	C82.08	C82.81	C83.74	C84.67	C85.80

Code	Code	Code	Code	Code	Code
C81.16	C82.09	C82.82	C83.75	C84.68	C85.81
C81.17	C82.10	C82.83	C83.76	C84.69	C85.82
C81.18	C82.11	C82.84	C83.77	C84.70	C85.83
C81.19	C82.12	C82.85	C83.78	C84.71	C85.84
C81.20	C82.13	C82.86	C83.79	C84.72	C85.85
C81.21	C82.14	C82.87	C83.80	C84.73	C85.86
C81.22	C82.15	C82.88	C83.81	C84.74	C85.87
C81.23	C82.16	C82.89	C83.82	C84.75	C85.88
C81.24	C82.17	C82.90	C83.83	C84.76	C85.89
C81.25	C82.18	C82.91	C83.84	C84.77	C85.90
C81.26	C82.19	C82.92	C83.85	C84.78	C85.91
C81.27	C82.20	C82.93	C83.86	C84.79	C85.92
C81.28	C82.21	C82.94	C83.87	C84.90	C85.93
C81.29	C82.22	C82.95	C83.88	C84.91	C85.94
C81.30	C82.23	C82.96	C83.89	C84.92	C85.95
C81.31	C82.24	C82.97	C83.90	C84.93	C85.96
C81.32	C82.25	C82.98	C83.91	C84.94	C85.97
C81.33	C82.26	C82.99	C83.92	C84.95	C85.98
C81.34	C82.27	C83.00	C83.93	C84.96	C85.99
C81.35	C82.28	C83.01	C83.94	C84.97	C88.0
C81.36	C82.29	C83.02	C83.95	C84.98	C88.2
C81.37	C82.30	C83.03	C83.96	C84.99	C88.3
C81.38	C82.31	C83.04	C83.97	C84.A0	C88.4
C81.39	C82.32	C83.05	C83.98	C84.A1	C88.8
C81.40	C82.33	C83.06	C83.99	C84.A2	C88.9
C81.41	C82.34	C83.07	C84.00	C84.A3	C90.00
C81.42	C82.35	C83.08	C84.01	C84.A4	C90.01
C81.43	C82.36	C83.09	C84.02	C84.A5	C90.02
C81.44	C82.37	C83.10	C84.03	C84.A6	C90.20
C81.45	C82.38	C83.11	C84.04	C84.A7	C90.21
C81.46	C82.39	C83.12	C84.05	C84.A8	C90.22
C81.47	C82.40	C83.13	C84.06	C84.A9	C96.0
C81.48	C82.41	C83.14	C84.07	C84.Z0	C96.2
C81.49	C82.42	C83.15	C84.08	C84.Z1	C96.20
C81.70	C82.43	C83.16	C84.09	C84.Z2	C96.21
C81.71	C82.44	C83.17	C84.10	C84.Z3	C96.22
C81.72	C82.45	C83.18	C84.11	C84.Z4	C96.29
C81.73	C82.46	C83.19	C84.12	C84.Z5	C96.4
C81.74	C82.47	C83.30	C84.13	C84.Z6	C96.5
C81.75	C82.48	C83.31	C84.14	C84.Z7	C96.6
C81.76	C82.49	C83.32	C84.15	C84.Z8	C96.9

Code	Code	Code	Code	Code	Code
C81.77	C82.50	C83.33	C84.16	C84.Z9	C96.A
C81.78	C82.51	C83.34	C84.17	C85.10	C96.Z
C81.79	C82.52	C83.35	C84.18	C85.11	
C81.90	C82.53	C83.36	C84.19	C85.12	
C81.91	C82.54	C83.37	C84.40	C85.13	
C81.92	C82.55	C83.38	C84.41	C85.14	

B.20 METASTATIC CANCER

Code	Code	Code	Code	Code	Code
C77.0	C78.00	C78.5	C79.10	C79.51	C79.81
C77.1	C78.01	C78.6	C79.11	C79.52	C79.82
C77.2	C78.02	C78.7	C79.19	C79.60	C79.89
C77.3	C78.1	C78.80	C79.2	C79.61	C79.9
C77.4	C78.2	C78.89	C79.31	C79.62	C80.0
C77.5	C78.30	C79.00	C79.32	C79.70	C80.1
C77.8	C78.39	C79.01	C79.40	C79.71	C80.2
C77.9	C78.4	C79.02	C79.49	C79.72	

B.21 OBESITY

Code	Code	Code	Code	Code	Code	Code
E66.01	E66.09	E66.1	E66.2	E66.3	E66.8	E66.9

B.22 ORGAN TRANSPLANT

Code	Code	Code	Code	Code	Code
Z94.1	Z94.3	Z94.6	Z94.82	Z94.84	Z94.9
Z94.2	Z94.5	Z94.7	Z94.83	Z94.89	

B.23 OTHER

Code	Code	Code	Code	Code	Code
E88.9	Q21.9	Q23.9	Q25.4	Q25.8	Q27.32
Q20.0	Q22.0	Q24.0	Q25.40	Q25.9	Q27.33
Q20.1	Q22.1	Q24.1	Q25.41	Q26.0	Q27.34
Q20.2	Q22.2	Q24.2	Q25.42	Q26.1	Q27.39
Q20.3	Q22.3	Q24.3	Q25.43	Q26.2	Q27.4
Q20.4	Q22.4	Q24.4	Q25.44	Q26.3	Q27.8
Q20.5	Q22.5	Q24.5	Q25.45	Q26.4	Q27.9
Q20.6	Q22.6	Q24.6	Q25.46	Q26.5	Q28.0

Code	Code	Code	Code	Code	Code
Q20.8	Q22.8	Q24.8	Q25.47	Q26.6	Q28.1
Q20.9	Q22.9	Q24.9	Q25.48	Q26.8	Q28.2
Q21.0	Q23.0	Q25.0	Q25.49	Q26.9	Q28.3
Q21.1	Q23.1	Q25.1	Q25.5	Q27.0	Q28.8
Q21.2	Q23.2	Q25.2	Q25.6	Q27.1	Q28.9
Q21.3	Q23.3	Q25.21	Q25.71	Q27.2	
Q21.4	Q23.4	Q25.29	Q25.72	Q27.30	
Q21.8	Q23.8	Q25.3	Q25.79	Q27.31	

B.24 OTHER NEUROLOGICAL DISORDERS

Code	Code	Code	Code	Code	Code
G10.	G13.1	G31.85	G40.001	G40.419	G40.919
G11.0	G13.2	G31.89	G40.009	G40.501	G40.A01
G11.1	G13.8	G31.9	G40.011	G40.509	G40.A09
G11.2	G20.	G32.0	G40.019	G40.801	G40.A11
G11.3	G21.0	G32.81	G40.101	G40.802	G40.A19
G11.8	G21.11	G32.89	G40.109	G40.803	G40.B01
G11.9	G21.19	G35.	G40.111	G40.804	G40.B09
G12.0	G21.2	G36.0	G40.119	G40.811	G40.B11
G12.1	G21.3	G36.1	G40.201	G40.812	G40.B19
G12.20	G21.4	G36.8	G40.209	G40.813	G93.1
G12.21	G21.8	G36.9	G40.211	G40.814	G93.40
G12.22	G21.9	G37.0	G40.219	G40.821	G93.41
G12.23	G25.4	G37.1	G40.301	G40.822	G93.49
G12.24	G25.5	G37.2	G40.309	G40.823	R47.01
G12.25	G31.2	G37.3	G40.311	G40.824	R47.02
G12.29	G31.81	G37.4	G40.319	G40.89	R56.00
G12.8	G31.82	G37.5	G40.401	G40.901	R56.01
G12.9	G31.83	G37.8	G40.409	G40.909	R56.1
G13.0	G31.84	G37.9	G40.411	G40.911	R56.9

B.25 PARALYSIS

Code	Code	Code	Code	Code	Code
G04.1	G81.04	G81.92	G82.52	G83.14	G83.32
G11.4	G81.10	G81.93	G82.53	G83.20	G83.33
G80.1	G81.11	G81.94	G82.54	G83.21	G83.34
G80.2	G81.12	G82.20	G83.0	G83.22	G83.4
G81.00	G81.13	G82.21	G83.10	G83.23	G83.9
G81.01	G81.14	G82.22	G83.11	G83.24	

Code	Code	Code	Code	Code	Code
G81.02	G81.90	G82.50	G83.12	G83.30	
G81.03	G81.91	G82.51	G83.13	G83.31	

B.26 PEPTIC ULCER DISEASE

| Code |
|-------|-------|-------|-------|-------|-------|-------|-------|
| K25.7 | K25.9 | K26.7 | K26.9 | K27.7 | K27.9 | K28.7 | K28.9 |

B.27 PERIPHERAL VASCULAR DISORDERS

Code	Code	Code	Code	Code	Code
170.0	170.309	170.421	170.532	170.641	170.749
170.1	170.311	170.422	170.533	170.642	170.75
170.201	170.312	170.423	170.534	170.643	170.761
170.202	170.313	170.428	170.535	170.644	170.762
170.203	170.318	170.429	170.538	170.645	170.763
170.208	170.319	170.431	170.539	170.648	170.768
170.209	170.321	170.432	170.541	170.649	170.769
170.211	170.322	170.433	170.542	170.65	170.791
170.212	170.323	170.434	170.543	170.661	170.792
170.213	170.328	170.435	170.544	170.662	170.793
170.218	170.329	170.438	170.545	170.663	170.798
170.219	170.331	170.439	170.548	170.668	170.799
170.221	170.332	170.441	170.549	170.669	170.8
170.222	170.333	170.442	170.55	170.691	170.90
170.223	170.334	170.443	170.561	170.692	170.91
170.228	170.335	170.444	170.562	170.693	170.92
170.229	170.338	170.445	170.563	170.698	I71.00
170.231	170.339	170.448	170.568	170.699	I71.01
170.232	170.341	170.449	170.569	170.701	I71.02
170.233	170.342	170.45	170.591	170.702	I71.03
170.234	170.343	170.461	170.592	170.703	171.1
170.235	170.344	170.462	170.593	170.708	171.2
170.238	170.345	170.463	170.598	170.709	171.3
170.239	170.348	170.468	170.599	170.711	171.4
170.241	170.349	170.469	170.601	170.712	I71.5
170.242	170.35	170.491	170.602	170.713	171.6
170.243	170.361	170.492	170.603	170.718	I71.8
170.244	170.362	170.493	170.608	170.719	I71.9
170.245	170.363	170.498	170.609	170.721	173.1
170.248	170.368	170.499	I70.611	170.722	173.81

Code	Code	Code	Code	Code	Code
170.249	170.369	170.501	170.612	170.723	173.89
170.25	170.391	170.502	170.613	170.728	173.9
170.261	170.392	170.503	170.618	170.729	177.1
170.262	170.393	170.508	170.619	170.731	179.0
170.263	170.398	170.509	170.621	170.732	K55.1
170.268	170.399	170.511	170.622	170.733	K55.8
170.269	170.401	170.512	170.623	170.734	K55.9
170.291	170.402	170.513	170.628	170.735	Z95.810
170.292	170.403	170.518	170.629	170.738	Z95.811
170.293	170.408	170.519	170.631	170.739	Z95.812
170.298	170.409	170.521	170.632	170.741	Z95.818
170.299	170.411	170.522	170.633	170.742	Z95.820
170.301	170.412	170.523	170.634	170.743	Z95.828
170.302	170.413	170.528	170.635	170.744	Z95.9
170.303	170.418	170.529	170.638	170.745	
170.308	170.419	170.531	170.639	170.748	

B.28 PREGNANCY

Code	Code	Code	Code	Code	Code
O03.0	O03.85	O12.24	O14.25	O22.53	O46.092
O03.1	O03.86	O12.25	O14.90	O22.8X1	O46.093
O03.2	O03.87	O13.1	O14.92	O22.8X2	O46.099
O03.30	O03.88	O13.2	O14.93	O22.8X3	O46.8X1
O03.31	O03.89	O13.3	O14.94	O22.8X9	O46.8X2
O03.32	O03.9	O13.4	O14.95	O22.90	O46.8X3
O03.33	O12.00	O13.5	O15.00	O22.91	O46.8X9
O03.34	O12.01	O13.9	O15.02	O22.92	O46.90
O03.35	O12.02	O14.00	O15.03	O22.93	O46.91
O03.36	O12.03	O14.02	O15.1	O46.001	O46.92
O03.37	O12.04	O14.03	O15.2	O46.002	O46.93
O03.38	O12.05	O14.04	O15.9	O46.003	O67.0
O03.39	O12.10	O14.05	O20.0	O46.009	O67.8
O03.4	O12.11	O14.10	O20.8	O46.011	O67.9
O03.5	O12.12	O14.12	O20.9	O46.012	O72.0
O03.6	O12.13	O14.13	O22.30	O46.013	O72.1
O03.7	O12.14	O14.14	O22.31	O46.019	O72.2
O03.80	O12.15	O14.15	O22.32	O46.021	O72.3
O03.81	O12.20	O14.20	O22.33	O46.022	Z33.3
O03.82	O12.21	O14.22	O22.50	O46.023	
O03.83	O12.22	O14.23	O22.51	O46.029	

Code	Code	Code	Code	Code	Code
O03.84	O12.23	O14.24	O22.52	O46.091	

B.29 PSYCHOSES

Code	Code	Code	Code	Code	Code	Code
F20.0	F20.3	F20.89	F23.	F25.1	F28.	F31.2
F20.1	F20.5	F20.9	F24.	F25.8	F29.	F31.5
F20.2	F20.81	F22.	F25.0	F25.9	F30.2	

B.30 PULMONARY CIRCULATION

Code	Code	Code	Code	Code	Code
I26.01	126.93	127.2	127.24	127.89	128.9
126.02	126.94	127.20	127.29	127.9	
126.09	126.99	127.21	127.81	128.0	
126.90	127.0	127.22	127.82	128.1	
126.92	127.1	127.23	127.83	128.8	

B.31 RHEMATOID ARTHRITIS

Code	Code	Code	Code	Code	Code	Code
L94.0	M05.40	M05.819	M06.80	M08.472	M12.372	M46.99
L94.1	M05.411	M05.821	M06.811	M08.479	M12.379	
L94.3	M05.412	M05.822	M06.812	M08.48	M12.38	
M05.00	M05.419	M05.829	M06.819	M08.80	M12.39	
M05.011	M05.421	M05.831	M06.821	M08.811	M30.0	
M05.012	M05.422	M05.832	M06.822	M08.812	M30.1	
M05.019	M05.429	M05.839	M06.829	M08.819	M30.2	
M05.021	M05.431	M05.841	M06.831	M08.821	M30.3	
M05.022	M05.432	M05.842	M06.832	M08.822	M30.8	
M05.029	M05.439	M05.849	M06.839	M08.829	M31.0	
M05.031	M05.441	M05.851	M06.841	M08.831	M31.1	
M05.032	M05.442	M05.852	M06.842	M08.832	M31.2	
M05.039	M05.449	M05.859	M06.849	M08.839	M31.30	
M05.041	M05.451	M05.861	M06.851	M08.841	M31.31	
M05.042	M05.452	M05.862	M06.852	M08.842	M32.0	
M05.049	M05.459	M05.869	M06.859	M08.849	M32.10	
M05.051	M05.461	M05.871	M06.861	M08.851	M32.11	
M05.052	M05.462	M05.872	M06.862	M08.852	M32.12	
M05.059	M05.469	M05.879	M06.869	M08.859	M32.13	

Code	Code	Code	Code	Code	Code	Code
M05.061	M05.471	M05.89	M06.871	M08.861	M32.14	
M05.062	M05.472	M05.9	M06.872	M08.862	M32.15	
M05.069	M05.479	M06.00	M06.879	M08.869	M32.19	
M05.071	M05.49	M06.011	M06.88	M08.871	M32.8	
M05.072	M05.50	M06.012	M06.89	M08.872	M32.9	
M05.079	M05.511	M06.019	M06.9	M08.879	M33.00	
M05.09	M05.512	M06.021	M08.00	M08.88	M33.01	
M05.10	M05.519	M06.022	M08.011	M08.89	M33.02	
M05.111	M05.521	M06.029	M08.012	M08.90	M33.03	
M05.112	M05.522	M06.031	M08.019	M08.911	M33.09	
M05.119	M05.529	M06.032	M08.021	M08.912	M33.10	
M05.121	M05.531	M06.039	M08.022	M08.919	M33.11	
M05.122	M05.532	M06.041	M08.029	M08.921	M33.12	
M05.129	M05.539	M06.042	M08.031	M08.922	M33.13	
M05.131	M05.541	M06.049	M08.032	M08.929	M33.19	
M05.132	M05.542	M06.051	M08.039	M08.931	M33.20	
M05.139	M05.549	M06.052	M08.041	M08.932	M33.21	
M05.141	M05.551	M06.059	M08.042	M08.939	M33.22	
M05.142	M05.552	M06.061	M08.049	M08.941	M33.29	
M05.149	M05.559	M06.062	M08.051	M08.942	M33.90	
M05.151	M05.561	M06.069	M08.052	M08.949	M33.91	
M05.152	M05.562	M06.071	M08.059	M08.951	M33.92	
M05.159	M05.569	M06.072	M08.061	M08.952	M33.93	
M05.161	M05.571	M06.079	M08.062	M08.959	M33.99	
M05.162	M05.572	M06.08	M08.069	M08.961	M34.0	
M05.169	M05.579	M06.09	M08.071	M08.962	M34.1	
M05.171	M05.59	M06.1	M08.072	M08.969	M34.2	
M05.172	M05.60	M06.20	M08.079	M08.971	M34.81	
M05.179	M05.611	M06.211	M08.08	M08.972	M34.82	
M05.19	M05.612	M06.212	M08.09	M08.979	M34.83	
M05.20	M05.619	M06.219	M08.1	M08.98	M34.89	
M05.211	M05.621	M06.221	M08.20	M08.99	M34.9	
M05.212	M05.622	M06.222	M08.211	M12.00	M35.01	
M05.219	M05.629	M06.229	M08.212	M12.011	M35.02	
M05.221	M05.631	M06.231	M08.219	M12.012	M35.03	
M05.222	M05.632	M06.232	M08.221	M12.019	M35.04	
M05.229	M05.639	M06.239	M08.222	M12.021	M35.09	
M05.231	M05.641	M06.241	M08.229	M12.022	M35.1	
M05.232	M05.642	M06.242	M08.231	M12.029	M35.2	
M05.239	M05.649	M06.249	M08.232	M12.031	M35.3	
M05.241	M05.651	M06.251	M08.239	M12.032	M35.4	

Code	Code	Code	Code	Code	Code	Code
M05.242	M05.652	M06.252	M08.241	M12.039	M35.5	
M05.249	M05.659	M06.259	M08.242	M12.041	M35.6	
M05.251	M05.661	M06.261	M08.249	M12.042	M35.7	
M05.252	M05.662	M06.262	M08.251	M12.049	M35.8	
M05.259	M05.669	M06.269	M08.252	M12.051	M35.9	
M05.261	M05.671	M06.271	M08.259	M12.052	M45.0	
M05.262	M05.672	M06.272	M08.261	M12.059	M45.1	
M05.269	M05.679	M06.279	M08.262	M12.061	M45.2	
M05.271	M05.69	M06.28	M08.269	M12.062	M45.3	
M05.272	M05.70	M06.29	M08.271	M12.069	M45.4	
M05.279	M05.711	M06.30	M08.272	M12.071	M45.5	
M05.29	M05.712	M06.311	M08.279	M12.072	M45.6	
M05.30	M05.719	M06.312	M08.28	M12.079	M45.7	
M05.311	M05.721	M06.319	M08.29	M12.08	M45.8	
M05.312	M05.722	M06.321	M08.3	M12.09	M45.9	
M05.319	M05.729	M06.322	M08.40	M12.30	M46.1	
M05.321	M05.731	M06.329	M08.411	M12.311	M46.80	
M05.322	M05.732	M06.331	M08.412	M12.312	M46.81	
M05.329	M05.739	M06.332	M08.419	M12.319	M46.82	
M05.331	M05.741	M06.339	M08.421	M12.321	M46.83	
M05.332	M05.742	M06.341	M08.422	M12.322	M46.84	
M05.339	M05.749	M06.342	M08.429	M12.329	M46.85	
M05.341	M05.751	M06.349	M08.431	M12.331	M46.86	
M05.342	M05.752	M06.351	M08.432	M12.332	M46.87	
M05.349	M05.759	M06.352	M08.439	M12.339	M46.88	
M05.351	M05.761	M06.359	M08.441	M12.341	M46.89	
M05.352	M05.762	M06.361	M08.442	M12.342	M46.90	
M05.359	M05.769	M06.362	M08.449	M12.349	M46.91	
M05.361	M05.771	M06.369	M08.451	M12.351	M46.92	
M05.362	M05.772	M06.371	M08.452	M12.352	M46.93	
M05.369	M05.779	M06.372	M08.459	M12.359	M46.94	
M05.371	M05.79	M06.379	M08.461	M12.361	M46.95	
M05.372	M05.80	M06.38	M08.462	M12.362	M46.96	
M05.379	M05.811	M06.39	M08.469	M12.369	M46.97	
M05.39	M05.812	M06.4	M08.471	M12.371	M46.98	

B.32 SICKLE CELL DISEASE

Code	Code	Code	Code	Code	Code	Code
D57.00	D57.20	D57.3	D57.419	D57.439	D57.459	D57.819
D57.1	D57.211	D57.40	D57.42	D57.44	D57.80	

Code	Code	Code	Code	Code	Code	Code
D57.01	D57.212	D57.411	D57.431	D57.451	D57.811	
D57.02	D57.213	D57.412	D57.432	D57.452	D57.812	
D57.03	D57.218	D57.413	D57.433	D57.453	D57.813	
D57.09	D57.219	D57.418	D57.438	D57.458	D57.818	

B.33 SMOKING

| Code |
|---------|---------|---------|---------|---------|---------|---------|
| F17.200 | F17.208 | F17.211 | F17.219 | F17.223 | F17.290 | F17.298 |
| F17.201 | F17.209 | F17.213 | F17.220 | F17.228 | F17.291 | F17.299 |
| F17.203 | F17.210 | F17.218 | F17.221 | F17.229 | F17.293 | |

B.34 SOLID TUMOR W/O METASTASIS

Code	Code	Code	Code	Code	Code	Code
C00.0	C18.9	C41.9	C44.509	C4A.0	C54.8	C69.91
C00.1	C19.	C43.0	C44.510	C4A.10	C54.9	C69.92
C00.2	C20.	C43.10	C44.511	C4A.11	C55.	C70.0
C00.3	C21.0	C43.11	C44.519	C4A.111	C56.1	C70.1
C00.4	C21.1	C43.111	C44.520	C4A.112	C56.2	C70.9
C00.5	C21.2	C43.112	C44.521	C4A.12	C56.9	C71.0
C00.6	C21.8	C43.12	C44.529	C4A.121	C57.00	C71.1
C00.8	C22.0	C43.121	C44.590	C4A.122	C57.01	C71.2
C00.9	C22.1	C43.122	C44.591	C4A.20	C57.02	C71.3
C01.	C22.2	C43.20	C44.599	C4A.21	C57.10	C71.4
C02.0	C22.3	C43.21	C44.601	C4A.22	C57.11	C71.5
C02.1	C22.4	C43.22	C44.602	C4A.30	C57.12	C71.6
C02.2	C22.7	C43.30	C44.609	C4A.31	C57.20	C71.7
C02.3	C22.8	C43.31	C44.611	C4A.39	C57.21	C71.8
C02.4	C22.9	C43.39	C44.612	C4A.4	C57.22	C71.9
C02.8	C23.	C43.4	C44.619	C4A.51	C57.3	C72.0
C02.9	C24.0	C43.51	C44.621	C4A.52	C57.4	C72.1
C03.0	C24.1	C43.52	C44.622	C4A.59	C57.7	C72.20
C03.1	C24.8	C43.59	C44.629	C4A.60	C57.8	C72.21
C03.9	C24.9	C43.60	C44.691	C4A.61	C57.9	C72.22
C04.0	C25.0	C43.61	C44.692	C4A.62	C58.	C72.30
C04.1	C25.1	C43.62	C44.699	C4A.70	C60.0	C72.31
C04.8	C25.2	C43.70	C44.701	C4A.71	C60.1	C72.32
C04.9	C25.3	C43.71	C44.702	C4A.72	C60.2	C72.40
C05.0	C25.4	C43.72	C44.709	C4A.8	C60.8	C72.41
C05.1	C25.7	C43.8	C44.711	C4A.9	C60.9	C72.42

Code	Code	Code	Code	Code	Code	Code
C05.2	C25.8	C43.9	C44.712	C50.011	C61.	C72.50
C05.8	C25.9	C44.00	C44.719	C50.012	C62.00	C72.59
C05.9	C26.0	C44.01	C44.721	C50.019	C62.01	C72.9
C06.0	C26.1	C44.02	C44.722	C50.021	C62.02	C73.
C06.1	C26.9	C44.09	C44.729	C50.022	C62.10	C74.00
C06.2	C30.0	C44.101	C44.791	C50.029	C62.11	C74.01
C06.80	C30.1	C44.102	C44.792	C50.111	C62.12	C74.02
C06.89	C31.0	C44.1021	C44.799	C50.112	C62.90	C74.10
C06.9	C31.1	C44.1022	C44.80	C50.119	C62.91	C74.11
C07.	C31.2	C44.109	C44.81	C50.121	C62.92	C74.12
C08.0	C31.3	C44.1091	C44.82	C50.122	C63.00	C74.90
C08.1	C31.8	C44.1092	C44.89	C50.129	C63.01	C74.91
C08.9	C31.9	C44.111	C44.90	C50.211	C63.02	C74.92
C09.0	C32.0	C44.112	C44.91	C50.212	C63.10	C75.0
C09.1	C32.1	C44.1121	C44.92	C50.219	C63.11	C75.1
C09.8	C32.2	C44.1122	C44.99	C50.221	C63.12	C75.2
C09.9	C32.3	C44.119	C45.0	C50.222	C63.2	C75.3
C10.0	C32.8	C44.1191	C45.1	C50.229	C63.7	C75.4
C10.1	C32.9	C44.1192	C45.2	C50.311	C63.8	C75.5
C10.2	C33.	C44.121	C45.7	C50.312	C63.9	C75.8
C10.3	C34.00	C44.122	C45.9	C50.319	C64.1	C75.9
C10.4	C34.01	C44.1221	C46.0	C50.321	C64.2	C76.0
C10.8	C34.02	C44.1222	C46.1	C50.322	C64.9	C76.1
C10.9	C34.10	C44.129	C46.2	C50.329	C65.1	C76.2
C11.0	C34.11	C44.1291	C46.3	C50.411	C65.2	C76.3
C11.1	C34.12	C44.1292	C46.4	C50.412	C65.9	C76.40
C11.2	C34.2	C44.131	C46.50	C50.419	C66.1	C76.41
C11.3	C34.30	C44.1321	C46.51	C50.421	C66.2	C76.42
C11.8	C34.31	C44.1322	C46.52	C50.422	C66.9	C76.50
C11.9	C34.32	C44.1391	C46.7	C50.429	C67.0	C76.51
C12.	C34.80	C44.1392	C46.9	C50.511	C67.1	C76.52
C13.0	C34.81	C44.191	C47.0	C50.512	C67.2	C76.8
C13.1	C34.82	C44.192	C47.10	C50.519	C67.3	C7A.00
C13.2	C34.90	C44.1921	C47.11	C50.521	C67.4	C7A.010
C13.8	C34.91	C44.1922	C47.12	C50.522	C67.5	C7A.011
C13.9	C34.92	C44.199	C47.20	C50.529	C67.6	C7A.012
C14.0	C37.	C44.1991	C47.21	C50.611	C67.7	C7A.019
C14.2	C38.0	C44.1992	C47.22	C50.612	C67.8	C7A.020
C14.8	C38.1	C44.201	C47.3	C50.619	C67.9	C7A.021
C15.3	C38.2	C44.202	C47.4	C50.621	C68.0	C7A.022
C15.4	C38.3	C44.209	C47.5	C50.622	C68.1	C7A.023

Code	Code	Code	Code	Code	Code	Code
C15.5	C38.4	C44.211	C47.6	C50.629	C68.8	C7A.024
C15.8	C38.8	C44.212	C47.8	C50.811	C68.9	C7A.025
C15.9	C39.0	C44.219	C47.9	C50.812	C69.00	C7A.026
C16.0	C39.9	C44.221	C48.0	C50.819	C69.01	C7A.029
C16.1	C40.00	C44.222	C48.1	C50.821	C69.02	C7A.090
C16.2	C40.01	C44.229	C48.2	C50.822	C69.10	C7A.091
C16.3	C40.02	C44.291	C48.8	C50.829	C69.11	C7A.092
C16.4	C40.10	C44.292	C49.0	C50.911	C69.12	C7A.093
C16.5	C40.11	C44.299	C49.10	C50.912	C69.20	C7A.094
C16.6	C40.12	C44.300	C49.11	C50.919	C69.21	C7A.095
C16.8	C40.20	C44.301	C49.12	C50.921	C69.22	C7A.096
C16.9	C40.21	C44.309	C49.20	C50.922	C69.30	C7A.098
C17.0	C40.22	C44.310	C49.21	C50.929	C69.31	C7A.1
C17.1	C40.30	C44.311	C49.22	C51.0	C69.32	C7A.8
C17.2	C40.31	C44.319	C49.3	C51.1	C69.40	C7B.00
C17.3	C40.32	C44.320	C49.4	C51.2	C69.41	C7B.01
C17.8	C40.80	C44.321	C49.5	C51.8	C69.42	C7B.02
C17.9	C40.81	C44.329	C49.6	C51.9	C69.50	C7B.03
C18.0	C40.82	C44.390	C49.8	C52.	C69.51	C7B.04
C18.1	C40.90	C44.391	C49.9	C53.0	C69.52	C7B.09
C18.2	C40.91	C44.399	C49.A0	C53.1	C69.60	C7B.1
C18.3	C40.92	C44.40	C49.A1	C53.8	C69.61	C7B.8
C18.4	C41.0	C44.41	C49.A2	C53.9	C69.62	
C18.5	C41.1	C44.42	C49.A3	C54.0	C69.80	
C18.6	C41.2	C44.49	C49.A4	C54.1	C69.81	
C18.7	C41.3	C44.500	C49.A5	C54.2	C69.82	
C18.8	C41.4	C44.501	C49.A9	C54.3	C69.90	

B.35 VALVULAR DISEASE

Code	Code	Code	Code	Code	Code
A52.00	105.2	107.2	109.81	135.8	137.8
A52.01	105.8	107.8	109.89	135.9	137.9
A52.02	105.9	107.9	134.0	136.0	138.
A52.03	106.0	108.0	134.1	136.1	139.
A52.04	106.1	108.1	134.2	136.2	Z95.2
A52.05	106.2	108.2	134.8	136.8	Z95.3
A52.06	106.8	108.3	134.9	136.9	Z95.4
A52.09	106.9	108.8	135.0	137.0	
105.0	107.0	108.9	135.1	137.1	
105.1	107.1	109.1	135.2	137.2	

B.36 WEIGHT LOSS

Code	Code	Code	Code	Code
E40.	E42.	E44.0	E45.	R63.4
E41.	E43.	E44.1	E46.	R64.

Appendix C Immunocompromised Conditions

C.1 Immune Deficiency

Code	Code	Code	Code	Code	Code
B20.	D80.1	D81.0	D81.9	D83.0	D89.810
B97.33	D80.2	D81.1	D82.0	D83.1	D89.811
C86.6	D80.3	D81.2	D82.1	D83.2	D89.812
C96.6	D80.4	D81.4	D82.2	D83.8	D89.813
D57.1	D80.5	D81.6	D82.3	D83.9	D89.82
D70.8	D80.6	D81.7	D82.4	D84.0	Q93.59
D76.2	D80.8	D81.819	D82.8	D84.89	
D80.0	D80.9	D81.89	D82.9	D84.9	

C.2 Transplant

Code	Code	Code	Code	Code	Code
C80.2	T86.09	T86.298	T86.5	T86.890	Z48.288
D47.Z1	T86.10	T86.30	T86.810	T86.898	Z48.290
E23.0	T86.11	T86.31	T86.811	T86.899	Z48.298
I15.8	T86.12	T86.32	T86.812	T86.90	Z94.0
125.811	T86.13	T86.33	T86.818	T86.91	Z94.1
177.1	T86.19	T86.39	T86.819	Z09.	Z94.2
N99.89	T86.20	T86.40	T86.850	Z48.21	Z94.3
T86.00	T86.21	T86.41	T86.851	Z48.22	Z94.4
T86.01	T86.22	T86.42	T86.852	Z48.23	Z94.81
T86.02	T86.23	T86.43	T86.858	Z48.24	Z94.82
T86.03	T86.290	T86.49	T86.859	Z48.280	Z94.83
					Z94.84

C.3 Cancer

Code	Code	Code	Code	Code	Code
C78.00	C81.37	C83.50	C84.73	C85.96	C94.22
C78.01	C81.38	C83.51	C84.74	C85.97	C94.30
C78.02	C81.39	C83.52	C84.75	C85.98	C94.32
C78.1	C81.40	C83.53	C84.76	C85.99	C94.80
C78.2	C81.41	C83.54	C84.77	C86.0	C94.82
C78.30	C81.42	C83.55	C84.78	C86.1	C95.00
C78.39	C81.43	C83.56	C84.79	C86.2	C95.02
C78.4	C81.44	C83.57	C84.90	C86.3	C95.10
C78.5	C81.45	C83.58	C84.91	C86.4	C95.12

Code	Code	Code	Code	Code	Code
C78.6	C81.46	C83.59	C84.92	C88.2	C95.90
C78.7	C81.47	C83.70	C84.93	C88.3	C95.92
C78.80	C81.48	C83.71	C84.94	C88.8	C96.0
C78.89	C81.49	C83.72	C84.95	C88.9	C96.2
C79.00	C81.70	C83.73	C84.96	C90.00	C96.4
C79.01	C81.71	C83.74	C84.97	C90.02	C96.9
C79.02	C81.72	C83.75	C84.98	C90.10	C96.A
C79.10	C81.73	C83.76	C84.99	C90.12	C96.Z
C79.11	C81.74	C83.77	C84.A0	C90.20	B27.99
C79.19	C81.75	C83.78	C84.A1	C90.22	C16.0
C79.2	C81.76	C83.79	C84.A2	C90.30	C16.1
C79.31	C81.77	C83.80	C84.A3	C90.32	C16.2
C79.32	C81.78	C83.81	C84.A4	C91.00	C16.3
C79.40	C81.79	C83.82	C84.A5	C91.02	C16.4
C79.49	C81.90	C83.83	C84.A6	C91.10	C16.5
C79.51	C81.91	C83.84	C84.A7	C91.12	C16.6
C79.52	C81.92	C83.85	C84.A8	C91.30	C18.7
C79.60	C81.93	C83.86	C84.A9	C91.31	C26.1
C79.61	C81.94	C83.87	C84.Z0	C91.32	C49.4
C79.62	C81.95	C83.88	C84.Z1	C91.40	C49.9
C79.70	C81.96	C83.89	C84.Z2	C91.50	C77.0
C79.71	C81.97	C84.00	C84.Z3	C91.52	C77.1
C79.72	C81.98	C84.01	C84.Z4	C91.60	C77.2
C79.81	C81.99	C84.02	C84.Z5	C91.61	C77.3
C79.82	C82.50	C84.03	C84.Z6	C91.62	C77.4
C79.89	C82.51	C84.04	C84.Z7	C91.90	C77.5
C79.9	C82.52	C84.05	C84.Z8	C91.92	C77.8
C81.00	C82.53	C84.06	C84.Z9	C91.A0	C77.9
C81.01	C82.54	C84.07	C85.10	C91.A2	C80.0
C81.02	C82.55	C84.08	C85.11	C91.Z0	C80.1
C81.03	C82.56	C84.09	C85.12	C91.Z2	C82.00
C81.04	C82.57	C84.10	C85.13	C92.00	C82.60
C81.05	C82.58	C84.11	C85.14	C92.02	C82.80
C81.06	C82.59	C84.12	C85.15	C92.10	C83.00
C81.07	C82.90	C84.13	C85.16	C92.12	C83.99
C81.08	C82.91	C84.14	C85.17	C92.20	C86.5
C81.09	C82.92	C84.15	C85.18	C92.22	C88.4
C81.10	C82.93	C84.16	C85.19	C92.30	C90.01
C81.11	C82.94	C84.17	C85.20	C92.32	C94.40
C81.12	C82.95	C84.18	C85.21	C92.40	C96.20
C81.13	C82.96	C84.19	C85.22	C92.42	C96.21

Code	Code	Code	Code	Code	Code
C81.14	C82.97	C84.40	C85.23	C92.50	C96.29
C81.15	C82.98	C84.41	C85.24	C92.52	C96.5
C81.16	C82.99	C84.42	C85.25	C92.60	D37.8
C81.17	C83.10	C84.43	C85.26	C92.62	D46.0
C81.18	C83.11	C84.44	C85.27	C92.90	D46.20
C81.19	C83.12	C84.45	C85.28	C92.92	D46.21
C81.20	C83.13	C84.46	C85.29	C92.A0	D46.22
C81.21	C83.14	C84.47	C85.80	C92.A2	D46.9
C81.22	C83.15	C84.48	C85.81	C92.Z0	D46.A
C81.23	C83.16	C84.49	C85.82	C92.Z2	D46.B
C81.24	C83.17	C84.60	C85.83	C93.00	D46.C
C81.25	C83.18	C84.61	C85.84	C93.02	D47.02
C81.26	C83.19	C84.62	C85.85	C93.10	D47.1
C81.27	C83.30	C84.63	C85.86	C93.12	D47.3
C81.28	C83.31	C84.64	C85.87	C93.30	D49.0
C81.29	C83.32	C84.65	C85.88	C93.32	D49.9
C81.30	C83.33	C84.66	C85.89	C93.90	D76.1
C81.31	C83.34	C84.67	C85.90	C93.92	142.5
C81.32	C83.35	C84.68	C85.91	C93.Z0	K12.30
C81.33	C83.36	C84.69	C85.92	C93.Z2	K20.90
C81.34	C83.37	C84.70	C85.93	C94.00	M31.2
C81.35	C83.38	C84.71	C85.94	C94.02	T66.XXXS
C81.36	C83.39	C84.72	C85.95	C94.20	Z51.89

Appendix D Rules of Behavior

The Resource and Patient Management (RPMS) system is a United States Department of Health and Human Services (HHS), Indian Health Service (IHS) information system that is *FOR OFFICIAL USE ONLY*. The RPMS system is subject to monitoring; therefore, no expectation of privacy shall be assumed. Individuals found performing unauthorized activities are subject to disciplinary action including criminal prosecution.

All users (Contractors and IHS Employees) of RPMS will be provided a copy of the Rules of Behavior (RoB) and must acknowledge that they have received and read them prior to being granted access to a RPMS system, in accordance IHS policy.

- For a listing of general RoB for all users, see the most recent edition of *IHS General User Security Handbook* (SOP 06-11a).
- For a listing of system administrators/managers rules, see the most recent edition of the *IHS Technical and Managerial Handbook* (SOP 06-11b).

Both documents are available at this IHS website: https://home.ihs.gov/security/index.cfm/.

Note: Users must be logged on to the IHS D1 Intranet to access these documents.

The RoB listed in the following sections are specific to RPMS.

D.1 All RPMS Users

In addition to these rules, each application may include additional RoBs that may be defined within the documentation of that application (e.g., Dental, Pharmacy).

D.1.1 Access

RPMS users shall

- Only use data for which you have been granted authorization.
- Only give information to personnel who have access authority and have a need to know.
- Always verify a caller's identification and job purpose with your supervisor or the entity provided as employer before providing any type of information system access, sensitive information, or nonpublic agency information.
- Be aware that personal use of information resources is authorized on a limited basis within the provisions *Indian Health Manual* Part 8, "Information Resources Management," Chapter 6, "Limited Personal Use of Information Technology Resources."

RPMS users shall not

- Retrieve information for someone who does not have authority to access the information.
- Access, research, or change any user account, file, directory, table, or record not required to perform their *official* duties.
- Store sensitive files on a PC hard drive, or portable devices or media, if access to the PC or files cannot be physically or technically limited.
- Exceed their authorized access limits in RPMS by changing information or searching databases beyond the responsibilities of their jobs or by divulging information to anyone not authorized to know that information.

D.1.2 Information Accessibility

RPMS shall restrict access to information based on the type and identity of the user. However, regardless of the type of user, access shall be restricted to the minimum level necessary to perform the job.

RPMS users shall

- Access only those documents they created and those other documents to which
 they have a valid need-to-know and to which they have specifically granted
 access through an RPMS application based on their menus (job roles), keys, and
 FileMan access codes. Some users may be afforded additional privileges based on
 the functions they perform, such as system administrator or application
 administrator.
- Acquire a written preauthorization in accordance with IHS policies and procedures prior to interconnection to or transferring data from RPMS.

D.1.3 Accountability

RPMS users shall

- Behave in an ethical, technically proficient, informed, and trustworthy manner.
- Log out of the system whenever they leave the vicinity of their personal computers (PCs).
- Be alert to threats and vulnerabilities in the security of the system.
- Report all security incidents to their local Information System Security Officer (ISSO).
- Differentiate tasks and functions to ensure that no one person has sole access to or control over important resources.
- Protect all sensitive data entrusted to them as part of their government employment.

• Abide by all Department and Agency policies and procedures and guidelines related to ethics, conduct, behavior, and information technology (IT) information processes.

D.1.4 Confidentiality

RPMS users shall

- Be aware of the sensitivity of electronic and hard copy information and protect it accordingly.
- Store hard copy reports/storage media containing confidential information in a locked room or cabinet.
- Erase sensitive data on storage media prior to reusing or disposing of the media.
- Protect all RPMS terminals from public viewing at all times.
- Abide by all Health Insurance Portability and Accountability Act (HIPAA) regulations to ensure patient confidentiality.

RPMS users shall not:

- Allow confidential information to remain on the PC screen when someone who is not authorized to that data is in the vicinity.
- Store sensitive files on a portable device or media without encrypting.

D.1.5 Integrity

RPMS users shall

- Protect their systems against viruses and similar malicious programs.
- Observe all software license agreements.
- Follow industry standard procedures for maintaining and managing RPMS hardware, operating system software, application software, and/or database software and database tables.
- Comply with all copyright regulations and license agreements associated with RPMS software.

RPMS users shall not:

- Violate federal copyright laws.
- Install or use unauthorized software within the system libraries or folders.
- Use freeware, shareware, or public domain software on/with the system without their manager's written permission and without scanning it for viruses first.

D.1.6 System Logon

RPMS users shall

- Have a unique User Identification/Account name and password.
- Be granted access based on authenticating the account name and password entered.
- Be locked out of an account after five successive failed login attempts within a specified time period (e.g., one hour).

D.1.7 Passwords

RPMS users shall

- Change passwords a minimum of every 90 days.
- Create passwords with a minimum of eight characters.
- If the system allows, use a combination of alpha-numeric characters for passwords, with at least one uppercase letter, one lower case letter, and one number. It is recommended, if possible, that a special character also be used in the password.
- Change vendor-supplied passwords immediately.
- Protect passwords by committing them to memory or store them in a safe place (do not store passwords in login scripts or batch files).
- Change passwords immediately if password has been seen, guessed, or otherwise compromised, and report the compromise or suspected compromise to their ISSO.
- Keep user identifications (IDs) and passwords confidential.

RPMS users shall not:

- Use common words found in any dictionary as a password.
- Use obvious readable passwords or passwords that incorporate personal data elements (e.g., user's name, date of birth, address, telephone number, or social security number; names of children or spouses; favorite band, sports team, or automobile; or other personal attributes).
- Share passwords/IDs with anyone or accept the use of another's password/ID, even if offered.
- Reuse passwords. A new password must contain no more than five characters per eight characters from the previous password.
- Post passwords.
- Keep a password list in an obvious place, such as under keyboards, in desk drawers, or in any other location where it might be disclosed.

• Give a password out over the phone.

D.1.8 Backups

RPMS users shall

- Plan for contingencies such as physical disasters, loss of processing, and disclosure of information by preparing alternate work strategies and system recovery mechanisms.
- Make backups of systems and files on a regular, defined basis.
- If possible, store backups away from the system in a secure environment.

D.1.9 Reporting

RPMS users shall

- Contact and inform their ISSO that they have identified an IT security incident and begin the reporting process by providing an IT Incident Reporting Form regarding this incident.
- Report security incidents as detailed in the *IHS Incident Handling Guide* (SOP 05-03).

RPMS users shall not:

Assume that someone else has already reported an incident. The risk of an
incident going unreported far outweighs the possibility that an incident gets
reported more than once.

D.1.10 Session Timeouts

RPMS system implements system-based timeouts that back users out of a prompt after no more than 5 minutes of inactivity.

RPMS users shall:

• Utilize a screen saver with password protection set to suspend operations at no greater than 10 minutes of inactivity. This will prevent inappropriate access and viewing of any material displayed on the screen after some period of inactivity.

D.1.11 Hardware

RPMS users shall

- Avoid placing system equipment near obvious environmental hazards (e.g., water pipes).
- Keep an inventory of all system equipment.

• Keep records of maintenance/repairs performed on system equipment.

RPMS users shall not

• Eat or drink near system equipment.

D.1.12 Awareness

RPMS users shall

- Participate in organization-wide security training as required.
- Read and adhere to security information pertaining to system hardware and software.
- Take the annual information security awareness.
- Read all applicable RPMS manuals for the applications used in their jobs.

D.1.13 Remote Access

Each subscriber organization establishes its own policies for determining which employees may work at home or in other remote workplace locations. Any remote work arrangement should include policies that:

- Are in writing.
- Provide authentication of the remote user through the use of ID and password or other acceptable technical means.
- Outline the work requirements and the security safeguards and procedures the employee is expected to follow.
- Ensure adequate storage of files, removal, and nonrecovery of temporary files created in processing sensitive data, virus protection, and intrusion detection, and provide physical security for government equipment and sensitive data.
- Establish mechanisms to back up data created and/or stored at alternate work locations.

Remote RPMS users shall

Remotely access RPMS through a virtual private network (VPN) whenever
possible. Use of direct dial in access must be justified and approved in writing and
its use secured in accordance with industry best practices or government
procedures.

Remote RPMS users shall not

• Disable any encryption established for network, internet, and Web browser communications.

D.2 RPMS Developers

RPMS developers shall

- Always be mindful of protecting the confidentiality, availability, and integrity of RPMS when writing or revising code.
- Always follow the IHS RPMS Programming Standards and Conventions (SAC) when developing for RPMS.
- Only access information or code within the namespaces for which they have been assigned as part of their duties.
- Remember that all RPMS code is the property of the U.S. Government, not the developer.
- Not access live production systems without obtaining appropriate written access and shall only retain that access for the shortest period possible to accomplish the task that requires the access.
- Observe separation of duties policies and procedures to the fullest extent possible.
- Document or comment all changes to any RPMS software at the time the change or update is made. Documentation shall include the programmer's initials, date of change, and reason for the change.
- Use checksums or other integrity mechanism when releasing their certified applications to assure the integrity of the routines within their RPMS applications.
- Follow industry best standards for systems they are assigned to develop or maintain and abide by all Department and Agency policies and procedures.
- Document and implement security processes whenever available.

RPMS developers shall not:

- Write any code that adversely impacts RPMS, such as backdoor access, "Easter eggs," time bombs, or any other malicious code or make inappropriate comments within the code, manuals, or help frames.
- Grant any user or system administrator access to RPMS unless proper documentation is provided.
- Release any sensitive agency or patient information.

D.3 Privileged Users

Personnel who have significant access to processes and data in RPMS, such as, system security administrators, systems administrators, and database administrators, have added responsibilities to ensure the secure operation of RPMS.

Privileged RPMS users shall

- Verify that any user requesting access to any RPMS system has completed the appropriate access request forms.
- Ensure that government personnel and contractor personnel understand and comply with license requirements. End users, supervisors, and functional managers are ultimately responsible for this compliance.
- Advise the system owner on matters concerning information technology security.
- Assist the system owner in developing security plans, risk assessments, and supporting documentation for the certification and accreditation process.
- Ensure that any changes to RPMS that affect contingency and disaster recovery
 plans are conveyed to the person responsible for maintaining continuity of
 operations plans.
- Ensure that adequate physical and administrative safeguards are operational within their areas of responsibility and that access to information and data is restricted to authorized personnel on a need-to-know basis.
- Verify that users have received appropriate security training before allowing access to RPMS.
- Implement applicable security access procedures and mechanisms, incorporate appropriate levels of system auditing, and review audit logs.
- Document and investigate known or suspected security incidents or violations and report them to the ISSO, Chief Information Security Officer (CISO), and systems owner.
- Protect the supervisor, superuser, or system administrator passwords.
- Avoid instances where the same individual has responsibility for several functions (i.e., transaction entry and transaction approval).
- Watch for unscheduled, unusual, and unauthorized programs.
- Help train system users on the appropriate use and security of the system.
- Establish protective controls to ensure the accountability, integrity, confidentiality, and availability of the system.
- Replace passwords when a compromise is suspected. Delete user accounts as quickly as possible from the time that the user is no longer authorized system. Passwords forgotten by their owner should be replaced, not reissued.
- Terminate user accounts when a user transfers or has been terminated. If the user has authority to grant authorizations to others, review these other authorizations. Retrieve any devices used to gain access to the system or equipment. Cancel logon IDs and passwords and delete or reassign related active and backup files.

- Use a suspend program to prevent an unauthorized user from logging on with the current user's ID if the system is left on and unattended.
- Verify the identity of the user when resetting passwords. This can be done either in person or having the user answer a question that can be compared to one in the administrator's database.
- Shall follow industry best standards for systems they are assigned to and abide by all Department and Agency policies and procedures.

Privileged RPMS users shall not

- Access any files, records, systems, etc., that are not explicitly needed to perform their duties.
- Grant any user or system administrator access to RPMS unless proper documentation is provided.
- Release any sensitive agency or patient information.

Glossary

Aggregated

A sum total of data.

Context Menu

The menu of options that displays when you right-click on an entity.

Designated Primary Care Provider (DPCP)

In RPMS, the provider name that is assigned as the primary care physician for a patient or group of patients at a specific facility. This is not a required function.

Free Text Field

A field where the user can type text, just like typing a note to someone.

iCare Package Manager

The designated person with authority to manage all information settings for iCare.

Panel List

The list of patient panels owned by the user.

Providers

Any staff member in an I/T/U facility who provides direct healthcare to patients, e.g., general practice or specialty physicians, registered nurses, social workers, physician assistants, etc.

Within RPMS, the term "provider" has different specific meanings. See definitions for Designated Primary Care Provider (DPCP); Primary Provider; Visit Providers.

Reminders

Health Maintenance Reminders review patient data and alert the provider to procedures that might be overdue for the patient. Reminders can be based on age and gender and include typical clinical prevention measures, such as pap smears.

"Tagging"

A process to review the patient's data and categorize ("tag") the patient with one or more clinical diagnoses, such as Known CVD or Diabetes. Tags will be used to provide more accurate reminders that are prioritized more appropriately for a patient's multiple conditions.

Taxonomy

In RPMS, a grouping of functionally related data elements, such as ICD codes, that are created and maintained within the RPMS Taxonomy Setup application. Taxonomies will be used as definitions for diagnoses, procedures, lab tests, medications, and other clinical data types.

If you need a change or addition to an existing taxonomy, please see your CRS coordinator.

Tooltip/Hover Help

A common GUI element used to provide additional information to users. To display a Tooltip, hover the mouse pointer, without clicking, over a column heading or field.

Visit Provider

In RPMS, the provider(s) who cared for a patient on a specific visit. Each patient visit must have at least a primary provider entered. Visits can also have one or more secondary providers. The primary visit provider might or might not be the same provider as the patient's DPCP, and can change on each visit, depending on the visit type or the clinic staffing.

Acronym List

Acronym	Meaning
CAC	Clinical Application Coordinator
CMET	Care Management Event Tracking
CRS	Clinical Reporting System
CVD	Cardiovascular Disease
DOB	Date of Birth
EHR	Electronic Health Record
ER	Emergency room
GPRA	Government Performance and Results Act
GUI	Graphical User Interface
HRN	Health Record Number.
HTN	Hypertension
IHS	Indian Health Service
NLV	No longer valid
PCP	Primary Care Physician
RPMS	Resource and Patient Management System
SSN	Social Security Number
TIU	Text Integrated Utility

Contact Information

For any questions or comments regarding this distribution, please contact the IHS IT Service Desk.

Phone: (888) 830-7280 (toll free)

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