## Document Revision History

<table>
<thead>
<tr>
<th>Date of Change</th>
<th>Location of Revision</th>
<th>Review</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 13, 2012</td>
<td>Chapter 20</td>
<td>Added sections 20.4, 20.5, 20.6</td>
</tr>
<tr>
<td>March 27, 2012</td>
<td>Throughout</td>
<td>Updated link to PCC Health Maintenance Reminder Manual</td>
</tr>
<tr>
<td>March 27, 2012</td>
<td>Section 20.10, 20.11, 2012</td>
<td>Added three new sections to the Common Install/Questions/Issues chapter</td>
</tr>
<tr>
<td>June 12, 1012</td>
<td>Section 17</td>
<td>Added fileman report instructions for active reminders</td>
</tr>
</tbody>
</table>
Table of Contents

Document Revision History .................................................................................................................... ii
Table of Contents ................................................................................................................................. iii
Preface ...................................................................................................................................................... ix

1.0 Introduction ........................................................................................................................................ 1
  1.1 Clinical Reminders Resources ......................................................................................................... 1

2.0 What’s New ......................................................................................................................................... 2
  2.1 Fixes .................................................................................................................................................. 2
  2.2 Retired Reminders ............................................................................................................................ 2
  2.3 New Reminders ............................................................................................................................... 3
  2.4 Reminders with Logic Changes ....................................................................................................... 3
  2.5 Reminders with Minor Updates ...................................................................................................... 4
  2.6 Updated Reminder Dialogs ........................................................................................................... 5
  2.7 New Dialogs (with Associated Reminder) ....................................................................................... 5
  2.8 New Dialogs (Standalone Dialogs) .................................................................................................. 6

3.0 Installation Checklist .......................................................................................................................... 7

4.0 Review National Reminder Definitions ............................................................................................. 9
  4.1.1 IHS-ACTIVITY SCREEN 2011 ................................................................................................... 10
  4.1.2 IHS-ALCOHOL SCREEN 2012 .................................................................................................. 10
  4.1.3 IHS-ALLERGY 2012 .................................................................................................................. 10
  4.1.4 IHS-ANTICOAG CBC 2011 ....................................................................................................... 11
  4.1.5 IHS-ANTICOAG DURATION OF TX 2011 ............................................................................... 12
  4.1.6 IHS-ANTICOAG INR GOAL 2011 ............................................................................................. 13
  4.1.7 IHS-ANTICOAG OCCULT BLOOD 2011 ................................................................................. 14
  4.1.8 IHS-ANTICOAG THERAPY END DATE 2011 ...................................................................... 15
  4.1.9 IHS-ANTICOAG UA 2011 ......................................................................................................... 16
  4.1.10 IHS-ASTHMA CONTROL 2011 ............................................................................................. 17
  4.1.11 IHS-ASTHMA ACTION PLAN 2012 ...................................................................................... 18
  4.1.12 IHS-ASTHMA PRIM PROV 2012 ............................................................................................ 19
  4.1.13 IHS-ASTHMA RISK EXACERBATION 2011 ......................................................................... 20
  4.1.14 IHS-ASTHMA SEVERITY 2012 .............................................................................................. 21
  4.1.15 IHS-ASTHMA STERIODS 2012 .............................................................................................. 22
  4.1.16 IHS-BLOOD PRESSURE 2012 ............................................................................................... 23
  4.1.17 IHS-CHLAMYDIA SCREEN 2011 ............................................................................................ 24
  4.1.18 IHS-COLON CANCER 2012 ..................................................................................................... 25
  4.1.19 IHS-CVD 2011 .......................................................................................................................... 26
  4.1.20 IHS-DENTAL VISIT 2011 ........................................................................................................ 27
  4.1.21 IHS-DEPO PROVERA 2012 .................................................................................................... 28
  4.1.22 IHS-DEPRESSION SCREEN 2011 ......................................................................................... 29
  4.1.23 IHS-DIAB ACE/ARB 2012 ....................................................................................................... 30
<table>
<thead>
<tr>
<th>Section</th>
<th>Document Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1.24</td>
<td>IHS-DIAB ANTIPLT KNOWN CVD 2012</td>
<td>20</td>
</tr>
<tr>
<td>4.1.25</td>
<td>IHS-DIAB ASPIRIN FEMALE 2011</td>
<td>20</td>
</tr>
<tr>
<td>4.1.26</td>
<td>IHS-DIAB ASPIRIN MALE 2011</td>
<td>21</td>
</tr>
<tr>
<td>4.1.27</td>
<td>IHS-DIAB BP CONTROL 2012</td>
<td>22</td>
</tr>
<tr>
<td>4.1.28</td>
<td>IHS-DIAB EYE EXAM 2011</td>
<td>22</td>
</tr>
<tr>
<td>4.1.29</td>
<td>IHS-DIAB FOOT EXAM 2011</td>
<td>22</td>
</tr>
<tr>
<td>4.1.30</td>
<td>IHS-DIAB HGBA1C 2011</td>
<td>23</td>
</tr>
<tr>
<td>4.1.31</td>
<td>IHS-DIAB HGBA1C CONTROL 2012</td>
<td>23</td>
</tr>
<tr>
<td>4.1.32</td>
<td>IHS-DIAB NEPHRO SCR/MON 2012</td>
<td>24</td>
</tr>
<tr>
<td>4.1.33</td>
<td>IHS-DIABETES SCREENING 2011</td>
<td>25</td>
</tr>
<tr>
<td>4.1.34</td>
<td>IHS-DOMESTIC VIOLENCE 2012</td>
<td>25</td>
</tr>
<tr>
<td>4.1.35</td>
<td>IHS-EPSTD SCREENING 2012</td>
<td>25</td>
</tr>
<tr>
<td>4.1.36</td>
<td>IHS-FALL RISK SCREEN 2011</td>
<td>26</td>
</tr>
<tr>
<td>4.1.37</td>
<td>IHS-FUNCTIONAL ASSESSMENT 2011</td>
<td>26</td>
</tr>
<tr>
<td>4.1.38</td>
<td>IHS-HCT/HGB 2011</td>
<td>27</td>
</tr>
<tr>
<td>4.1.39</td>
<td>IHS-HEAD CIRCUMFERENCE 2012</td>
<td>27</td>
</tr>
<tr>
<td>4.1.40</td>
<td>IHS-HEARING TEST 2011</td>
<td>27</td>
</tr>
<tr>
<td>4.1.41</td>
<td>IHS-HEIGHT 2012</td>
<td>27</td>
</tr>
<tr>
<td>4.1.42</td>
<td>IHS-HIV SCREEN 2012</td>
<td>28</td>
</tr>
<tr>
<td>4.1.43</td>
<td>IHS-IMMUNIZATION FORECAST 2011</td>
<td>28</td>
</tr>
<tr>
<td>4.1.44</td>
<td>IHS-LIPID FEMALE 2012</td>
<td>28</td>
</tr>
<tr>
<td>4.1.45</td>
<td>IHS-LIPID MALE 2012</td>
<td>29</td>
</tr>
<tr>
<td>4.1.46</td>
<td>IHS-MAMMOGRAM 2011</td>
<td>29</td>
</tr>
<tr>
<td>4.1.47</td>
<td>IHS-NEWBORN HEARING SCREEN 2011</td>
<td>30</td>
</tr>
<tr>
<td>4.1.48</td>
<td>IHS-NUTRITIONAL SCREENING 2012</td>
<td>30</td>
</tr>
<tr>
<td>4.1.49</td>
<td>IHS-OSTEOPOROSIS SCREEN 2011</td>
<td>31</td>
</tr>
<tr>
<td>4.1.50</td>
<td>IHS-PPD 2012</td>
<td>31</td>
</tr>
<tr>
<td>4.1.51</td>
<td>IHS-PAP SMEAR 2011</td>
<td>31</td>
</tr>
<tr>
<td>4.1.52</td>
<td>IHS-RUBELLA IMMUNITY 2012</td>
<td>32</td>
</tr>
<tr>
<td>4.1.53</td>
<td>IHS-SENIOR HEIGHT 2011</td>
<td>32</td>
</tr>
<tr>
<td>4.1.54</td>
<td>IHS-SENIOR VISION 2011</td>
<td>32</td>
</tr>
<tr>
<td>4.1.55</td>
<td>IHS-TOBACCO SCREEN 2011</td>
<td>33</td>
</tr>
<tr>
<td>4.1.56</td>
<td>IHS-VISION EXAM 2011</td>
<td>33</td>
</tr>
<tr>
<td>4.1.57</td>
<td>IHS-WEIGHT 2012</td>
<td>33</td>
</tr>
<tr>
<td>4.2</td>
<td>Immunization Reminders</td>
<td>34</td>
</tr>
<tr>
<td>4.3</td>
<td>National Reminder Dialogs</td>
<td>35</td>
</tr>
<tr>
<td>4.3.1</td>
<td>IHS-ACTIVITY SCREEN 2011</td>
<td>35</td>
</tr>
<tr>
<td>4.3.2</td>
<td>IHS-ALCOHOL SCREEN 2012</td>
<td>36</td>
</tr>
<tr>
<td>4.3.3</td>
<td>IHS-ALLERGY 2012</td>
<td>38</td>
</tr>
<tr>
<td>4.3.4</td>
<td>IHS-ANTICOAG</td>
<td>39</td>
</tr>
<tr>
<td>4.3.5</td>
<td>IHS-ASTHMA CONTROL 2011</td>
<td>39</td>
</tr>
<tr>
<td>4.3.6</td>
<td>IHS-ASTHMA ACTION PLAN 2011</td>
<td>40</td>
</tr>
<tr>
<td>4.3.7</td>
<td>IHS-ASTHMA PRIM PROV 2012, IHS-ASTHMA RISK EXACERBATION 2011, IHS-ASTHMA SEVERITY 2012</td>
<td>41</td>
</tr>
<tr>
<td>4.3.8</td>
<td>IHS-ASTHMA STEROID 2012</td>
<td>42</td>
</tr>
</tbody>
</table>
4.3.9 IHS-BLOOD PRESSURE 2012 ................................................................. 43
4.3.10 IHS-CHLAMYDIA SCREEN 2011 .......................................................... 44
4.3.11 IHS-COLON CANCER 2012 ................................................................. 45
4.3.12 IHS-CVD 2011 .................................................................................... 45
4.3.13 IHS-DENTAL VISIT 2011 ................................................................. 47
4.3.14 IHS-DEPO PROVERA 2012 ................................................................. 48
4.3.15 IHS-DEPRESSION SCREENING 2011 ................................................ 51
4.3.16 IHS-DIAB ACE/ARB 2012 ................................................................. 52
4.3.17 IHS-DIAB ANTPLT KNOWN CVD 2012 .......................................... 53
4.3.18 IHS-DIAB ASPIRIN (MALE/ FEMALE) 2011 ....................................... 53
4.3.19 IHS-DIAB BP CONTROL 2012 ........................................................... 54
4.3.20 IHS-DIAB EYE EXAM 2011 ............................................................... 55
4.3.21 IHS-DIAB FOOT EXAM 2011 ............................................................. 55
4.3.22 IHS-DIAB HGBA1C and IHS-DIAB HGBA1C CONTROL 2012 ......... 56
4.3.23 IHS-DIABETES SCREENING 2011 .................................................... 57
4.3.24 IHS-DIAB NEPHRO SCR/MON 2012 ............................................... 57
4.3.25 IHS-DOMESTIC VIOLENCE 2012 ...................................................... 58
4.3.26 IHS-EPSDT SCREENING 2012 ........................................................ 59
4.3.27 IHS-FALL RISK SCREEN 2011 ........................................................ 60
4.3.28 IHS-FUNCTIONAL ASSESSMENT 2011 ......................................... 60
4.3.29 IHS-HCT/HGB 2011 ......................................................................... 61
4.3.30 IHS-HEAD CIRCUMFERENCE 2012 .................................................. 61
4.3.31 IHS-HEARING TEST 2011 ............................................................... 62
4.3.32 IHS-HEIGHT 2012 ........................................................................... 62
4.3.33 IHS-HIV SCREEN 2012 .................................................................. 63
4.3.34 IHS-IMMUNIZATIONS ..................................................................... 63
4.3.35 IHS-LIPID FEMALE/MALE 2012 ...................................................... 65
4.3.36 IHS-MAMMOGRAM 2011 ................................................................. 66
4.3.37 IHS-NEWBORN HEARING 2011 ...................................................... 69
4.3.38 IHS-NUTRITIONAL SCREENING 2012 ....................................... 70
4.3.39 IHS-OSTEOPOROSIS SCREENING 2011 ....................................... 71
4.3.40 IHS-PAP 2011 .................................................................................. 72
4.3.41 IHS-SENIOR HEIGHT 2011 .............................................................. 73
4.3.42 IHS-SENIOR VISION ..................................................................... 74
4.3.43 IHS-TOBACCO SCREEN 2011 ........................................................ 75
4.3.44 IHS-WEIGHT 2012 ......................................................................... 76

5.0 Setup Quick Orders in Dialogs .................................................................. 78
6.0 Setup TIU Objects in Dialogs .................................................................... 80
7.0 Setup Health Summary Objects .................................................................. 82
  7.1 ASTHMA TRIGGERS ............................................................................. 82
  7.2 LAST HF OCCUPATION ....................................................................... 84
  7.3 PXRM DEPO PROVERA ....................................................................... 85
  7.4 PWH MED REC FOR MTM .................................................................. 87
Addendum to Installation Notes
July 2012

Table of Contents

8.0 Remove Old Reminders From Exchange ....................................................... 89
9.0 Dialog Preparation ............................................................................................ 90
10.0 Install the KIDS Build ................................................................................. 93
11.0 Install the Reminder ..................................................................................... 94
   11.1 Programmer Access .............................................................................. 94
   11.2 Installing the Reminder .......................................................................... 96
   11.3 Taxonomy Error ................................................................................... 100
      11.3.1 Create the Taxonomy Manually ..................................................... 101
12.0 Install the Dialogs ...................................................................................... 103
   12.1 Activate the Dialog ............................................................................... 104
      12.1.1 Reminder Dialog Management (DLG) ........................................ 104
      12.1.2 Dialog Doesn’t Link Automatically ............................................. 106
13.0 Dialog Parameter Changes ........................................................................... 108
   13.1 Disable the Diagnoses Code for Historical Entries .............................. 108
   13.2 Editing Asthma Diagnosis Taxonomy Dialog .................................. 109
14.0 Review Reminder Terms ............................................................................. 111
15.0 Manually Update Dialogs ........................................................................... 114
16.0 EHR Reminder Configuration ...................................................................... 115
17.0 Inactivate the Old Reminder and Dialog ..................................................... 118
18.0 Setup TIU Reminder Dialogs as Templates ............................................... 121
   18.1 IHS-ASBI BNI 2011 ........................................................................... 122
   18.2 IHS-ASBI SCREENING 2012 .............................................................. 124
   18.3 IHS-ASTHMA INTAKE 2012 ............................................................... 125
   18.4 IHS-MED ED 2011 ............................................................................. 127
   18.5 IHS-MED THERAPY MNGT 2011 ....................................................... 128
   18.6 IHS-PED PEDIARIX IMMUN 2012 ...................................................... 130
   18.7 IHS-PHN HOSPITAL DC VISIT 2011 ............................................... 131
   18.8 IHS-PHQ9 SCREEN 2011 ................................................................... 136
   18.9 IHS-SCREENING BUNDLE 2011 ....................................................... 138
19.0 Reviewing the Reminder and Dialog ............................................................ 140
   19.1 Reminder Test ..................................................................................... 140
   19.2 View Reminders Due .......................................................................... 142
   19.3 View Reminders on Cover Sheet ......................................................... 142
   19.4 View Reminders Icon ........................................................................ 143
      19.4.1 Clinical Maintenance ..................................................................... 144
      19.4.2 Do a Reminder Inquiry ................................................................. 145
      19.4.3 Look at the Reminder Icons ....................................................... 146
   19.5 View Reminders on the Health Summary ............................................ 147
   19.6 View Best Practice Prompts on Health Summary ................................ 148
Appendix A: Common Install Questions/Issues ................................. 152
A.1 All of my immunization reminders are showing as DUE after I loaded the patch ................................................................. 152
A.2 Programmer access message during installation ........................................ 152
A.3 Taxonomy error message during installation ........................................ 152
A.4 Error On Install From Exchange: EDUCATION TOPICS Entries ........ 153
A.5 Error Encountered Installing IHS-Pneumovax Immun 2012 Dialog ..... 154
A.6 When I Look At the Dialog After I Installed It In Reminder Exchange, the Findings Say “None” ....................................................... 159
A.7 The BPXRM objects do not work .................................................... 161
A.7.1 The BPXRM LIPID PROFILE object does not display the last lipid profile results ........................................................................ 161
A.7.2 The BPXRM HGBA1C object is does not display the last lab data ... 166
A.8 Medication Reminders - Last Occurrence Date ................................... 169
A.9 Problems Getting Reminders Visible For Everyone ........................... 170
A.10 Reminder is Due When it Shouldn’t be Due ...................................... 171
A.11 Why is the Due Date Tomorrow? .................................................... 172
A.12 Access Violation Error When Processing Dialogs ........................... 172

Appendix B: National Reminders Summary ........................................ 174

Appendix C: Reminder Taxonomies ................................................... 183
C.1 IHS-ASTHMA 2007 ..................................................................... 183
C.2 IHS-BILATERAL MASTECTOMY 2008 .......................................... 183
C.3 Taxonomies for IHS-COLON CANCER 2009 ................................. 183
C.3.1 IHS-BARIUM ENEMA ............................................................ 183
C.3.2 IHS-COLONOSCOPY 2007 .................................................... 184
C.3.3 IHS-COLORECTAL CANCER ................................................. 184
C.3.4 IHS-SIGMOIDOSCOPY .......................................................... 184
C.3.5 IHS-DEPO PROVERA ADMINISTRATION .............................. 185
C.3.6 IHS-DIABETES DX 2007 ....................................................... 185
C.3.7 IHS-DIABETES PROBLEMS ONLY ....................................... 185
C.3.8 IHS-DIAETIC NEPHROPATHY .............................................. 185
C.3.9 IHS-DIALYSIS ................................................................. 186
C.3.10 IHS-FUNDOSCOPIC EYE CODES 2007 ..................................... 186
C.3.11 IHS-HYSTERECTOMY 2009 .................................................. 186
C.3.12 IHS-ISCHEMIC HEART DISEASE 2007 ..................................... 187
C.3.13 IHS-OSTEOPOROSIS DX .................................................... 187
C.3.14 IHS-TB/POS PPD 2011 ....................................................... 187

Appendix D: Reminder Terms ............................................................ 188
D.1 IHS-ACTIVITY LEVEL ............................................................ 188
D.2 IHS-ASTHMA CONTROL ......................................................... 188
D.3 IHS-ACE/ARB ............................................................................. 188
D.4 IHS-ASPIRIN ................................................................. 188
D.5 IHS-CLOPIDOGREL .............................................................. 188
Addendum to Installation Notes
July 2012
Preface

This documentation applies to those reminders distributed in patch 1008 of clinical reminders.
1.0 Introduction

This guide was designed to supplement the patch installation notes and provide guidance in setting up the Clinical Reminders contained in the PXRM 1008 patch. We strongly recommend reviewing this entire document before installing and setting up the Clinical Reminders 1008 patch.

This guide is intended to be used by the following individuals who are responsible for installing, supporting, maintaining, and testing this package:

- Information Resources Management (IRM)
- Clinical Application Coordinator (CAC)

1.1 Clinical Reminders Resources

This guide is intended to be used by individuals who have previous experience with the Clinical Reminders. Additional and more comprehensive information related to Clinical Reminders can be found in the following locations:

PXRM 1008 installation notes, manuals, software can be downloaded here: http://www.ihs.gov/RPMS/index.cfm?module=home&option=index

Reminder Managers Manual

Reminder course materials

Clinical Reminders Document Library
Manuals, presentations, and other information related to Clinical Reminders can be downloaded here: ftp://ftp.ihs.gov/pubs/EHR/Training/Guides/EHR%20Reminders/

Clinical Reminders Office Hours
Office hours are announced periodically on the EHR and Reminders Listservs

Clinical Reminders Listserv
Send a question to the EHR Reminders Listserv: http://www.ihs.gov/listserv/index.cfm?module=signUpForm&list_id=159
2.0 What’s New

This section provides an overview of the major changes in the Clinical Reminders patch 1008.

There are 87 reminders/dialogs in this patch. The logic for some reminders changed significantly and other changed slightly. New dialogs have been developed. In order to make the transition as easy as possible for sites, it was decided to rename all the national reminders to append the year 2011 or 2012 on them.

All reminders have been updated. These new reminders replace the reminders being used at the site and the old reminders should be in-activated in the reminder definition menu after you have installed and deployed the 2011 and 2012 reminders.

2.1 Fixes

Reminder taxonomy fixes:

- Reminder picks up problems changed from inactive to active.
- Reminder filters out entered in error problems

Reminder filters out entered in error measurements.

Reminders that use drugs in their resolution logic will display the fill date as the last occurrence date.

Reminders that use Non VA Meds will display today’s date as the last occurrence date.

Reminders that use drugs in their resolution logic will resolve correctly when the drug name uses mixed case (tall man).

2.2 Retired Reminders

- IHS-DIAB ASPIRIN 2009 reminder has been retired. It is being replaced by three reminders: IHS-DIAB ASPIRIN FEMALE 2011, IHS-DIAB ASPIRIN MALE 2011, IHS-DIAB ANTPTL KNOWN CVD 2011.
- IHS-DIAB MICROALBUMIN reminder is being retired and replaced with IHS-DIAB NEPHRO SCR/MON 2011 reminder.
- IHS-HIGH RISK FLU 2007 and IHS-HIGH RISK PNEUMO 2007 are being retired. The high risk forecasting is included in the new reminders for the pneumovax and influenza.
2.3 New Reminders

IHS-ACTIVITY SCREEN 2011
IHS-ANTICOAG CBC 2011
IHS-ANTICOAG DURATION OF TX 2011
IHS-ANTICOAG INR GOAL 2011
IHS-ANTICOAG OCCULT BLOOD 2011
IHS-ANTICOAG THERAPY END DATE 2011
IHS-ANTICOAG UA 2011
IHS-CHLAMYDIA SCREEN 2011
IHS-CVD 2011
IHS-DEPO PROVERA 2012
IHS-DIAB ASPIRIN FEMALE 2011
IHS-DIAB ASPIRIN MALE 2011
IHS-DIAB ANTPLT KNOWN CVD 2012
IHS-DIAB BP CONTROL 2012
IHS-DIAB HGBA1C CONTROL 2012
IHS-DIAB NEPHRO SCR/MON 2012
IHS-FALL RISK SCREEN 2011
IHS-FUNCTIONAL ASSESSMENT 2011
IHS-HIV SCREEN 2012
IHS-NEWBORN HEARING 2011
IHS-NUTRITIONAL SCREENING 2012
IHS-RUBELLA IMMUN 2012
IHS-ZOSTER IMMUN 2012

2.4 Reminders with Logic Changes

IHS-DIAB ACE/ARB 2012
IHS-DIAB HGBA1C 2011
IHS-HPV IMMUN 2012
IHS-INFLUENZA IMMUN 2012
IHS-MAMMOGRAM 2011
IHS-MENINGITIS IMMUN 2012
IHS-PAP SMEAR 2011
IHS-PED ROTAVIRUS IMMUN 2012
IHS-PED POLIO IMMUN 2012
IHS-PED PEDVAXHIB IMMUN 2012
IHS-PED DTAP IMMUN 2012
IHS-PED HIBTITER IMMUN 2012
IHS- PNEUMOVAX IMMUN 2012
IHS-TDAP IMMUN 2012
IHS-WEIGHT IMMUN 2012
2.5 Reminders with Minor Updates

IHS-ALCOHOL SCREEN 2012
IHS-ALLERGY 2012
IHS-ASTHMA CONTROL 2011
IHS-ASTHMA ACTION PLAN 2011
IHS-ASTHMA PRIM PROV 2012
IHS-ASTHMA RISK EXACERBATION 2011
IHS-ASTHMA SEVERITY 2012
IHS-ASTHMA STEROID 2012
IHS-BLOOD PRESSURE 2012
IHS-COLON CANCER 2012
IHS-DENTAL VISIT 2011
IHS-DEPRESSION SCREENING 2011
IHS-DIAB EYE EXAM 2011
IHS-DIAB FOOT EXAM 2011
IHS-DIABETES SCREENING 2011
IHS-DOMESTIC VIOLENCE 2012
IHS-EPSDT SCREENING 2012
IHS-HCT/HGB 2011
IHS-HEAD CIRCUMFERENCE 2012
IHS-HEARING TEST 2011
IHS-HEIGHT 2012
IHS-HEP A ADULT IMMUN 2012
IHS-HEP B ADULT IMMUN 2012
IHS-IMMUNIZATION FORECAST 2011
IHS-LIPID FEMALE 2012
IHS-LIPID MALE 2012
IHS-OSTEOPOROSIS SCREENING 2011
IHS-PED DT IMMUN 2012
IHS-PED FLU IMMUN 2012
IHS-PED HEPA IMMUN 2012
IHS-PED HEPB IMMUN 2012
IHS-PED MMR IMMUN 2012
IHS-PED PNEUMOCOCCAL IMMUN 2012
IHS-PED VARICELLA IMMUN 2012
IHS-PPD 2012
IHS-SENIOR HEIGHT 2011
IHS-SENIOR VISION 2011
IHS-TD IMMUN 2012
IHS-TOBACCO SCREEN 2011
IHS-VISION 2011
2.6 Updated Reminder Dialogs

- ALL immunization dialogs have been updated to allow documentation that the vaccine was given “per provider order” “per standing order” or “per provider referral”

- Dialogs with major changes
  - IHS-ALCOHOL SCREEN 2012
  - IHS-ASTHMA CONTROL 2011
  - IHS-ASTHMA STEROID 2012
  - IHS-DEPRESSION SCREENING 2011
  - IHS-PPD 2012
  - IHS-TOBACCO SCREEN 2011
  - IHS-DIAB ACE/ARB 2012
  - IHS-MAMMOGRAM 2011

- Dialogs (in addition to Immunization dialogs) with minor changes
  - IHS-ASTHMA ACTION PLAN 2012
  - IHS-ASTHMA RISK EXACERBATION 2011
  - IHS-ASTHMA SEVERITY 2012
  - IHS-COLON CANCER 2012
  - IHS-DIABETES SCREENING 2011
  - IHS-LIPID FEMALE 2012
  - IHS-LIPID MALE 2012

2.7 New Dialogs (with Associated Reminder)

IHS-ACTIVITY SCREEN 2011
IHS-ANTICOAG CBC 2011
IHS-ANTICOAG DURATION OF TX 2012
IHS-ANTICOAG INR GOAL 2011
IHS-ANTICOAG OCCULT BLOOD 2011
IHS-ANTICOAG THERAPY END DATE 2011
IHS-ANTICOAG UA 2011
IHS-CHLAMYDIA SCREEN 2011
IHS-CVD 2011
IHS-DEPO PROVERA 2012
IHS-DIAB ASPIRIN FEMALE 2011
IHS-DIAB ASPIRIN MALE 2011
IHS-DIAB ANTPLT KNOWN CVD 2012
IHS-DIAB BP CONTROL 2012
IHS-DIAB HGBA1C CONTROL 2012
2.8 New Dialogs (Standalone Dialogs)

This patch contains several standalone dialog templates. These items are attached to blank reminders for uploading purposes and are NOT intended to be added to the GUI reminders for evaluation.

IHS-ASBI BNI 2011
IHS-ASBI SCREENING 2012
IHS-ASTHMA INTAKE 2012
IHS-MED ED 2011
IHS-MED THERAPY MNGT 2011
IHS-PED PEDIARIX IMMUN 2012
IHS-PHN HOSP DC VISIT 2011
IHS-PHQ9 SCREEN 2011
IHS-SCREENING BUNDLE 2011
3.0 Installation Checklist

Review the patch notes and this guide. The following steps should be performed by the appropriate IRM or CAC staff in the order that it is presented.

1. Review the list of reminders to determine which ones you will install/activate at your site. (Section 4.0)

2. Setup Quick Orders (Section 5.0).

3. Setup TIU Objects (Section 6.0).

4. Setup HS Objects (Section 7.0).

5. Remove Old Reminders from Reminder Exchange (Section 8.0).

6. Dialog Preparation: If the site has made local changes to existing national dialogs, especially by adding ADDITIONAL FINDINGS to dialogs, there might be some problems. Follow the instructions in this guide to look for the additional findings and remove them before installing the reminder. You can add them back after installation. (Section 9.0)

7. Install the KIDS build by appropriate IRM personnel. (Section 10.0)

   **Note:** After the KIDS build has been installed, the computed findings that are used to check the immunization forecaster will not function properly until the new immunization reminders are installed through reminder exchange.

8. You must install the immunization reminders through exchange immediately if you have any immunization reminders deployed. You do not have to move these into production immediately but should replace your old immunization reminders with the new ones fairly soon.

9. Install the reminders in Reminder Exchange that will be used at the facility. (Section 11.0)

10. Setup the VA Health Summary Object for Depo Provera after the IHS-DEPO PROVERA reminder is installed and before the dialog is installed. (Section 7.0)

11. Install, link and enable the dialogs. (Section 12.0)

12. Edit the Dialog Parameters for IHS-ASTHMA 2007 taxonomy. Disable diagnosis codes for historical entries. (Section 13.0)
13. Review reminder terms and populate reminder terms that contain labs or drugs. Failure to do this will result in MANY reminders being due all the time. (Section 14.0)

14. If you removed additional findings in Step 5, then add them back in. Consider manually updating the dialogs. Refer to chapter 16. NEVER use an additional finding that is used in any other reminder dialog. Only absolutely unique finding items may be used as additional findings. (Section 15.0)

15. Configure the Electronic Health Record to display the reminders. Sites may choose to activate the reminders just for specific individuals during a testing phase. If needed, add the REMINDER COMPONENTS to the health summary so they can be seen and printed on the Reports tab. (Section 16.0)

16. Inactivate Old Reminders (Section 17.0)

17. Setup TIU Reminder Dialogs as Templates (Section 18.0)

18. Review the installed reminders and dialogs (Section 19.0)
4.0  **Review National Reminder Definitions**

The following provides information about all the National Reminder Definitions.

4.1.1  **IHS-ACTIVITY SCREEN 2011**

**APPLICABLE TO:** Patients age 5 and older

**REMINDER DUE**: if age 5 and older and no activity health factor AND no exercise education documented in past year

**FREQUENCY:** Annually

**RESOLUTION:** Documentation of:
- Health factor of type: Inactive, Some Activity, Active, Very Active
- AND education topic HPDP-EXERCISE

4.1.2  **IHS-ALCOHOL SCREEN 2012**

**APPLICABLE TO:** Patients age 13 and older

**REMINDER DUE**: Patient is aged 13-110 and has no alcohol screening (exam, measurement, health factor, POV) documented in the past year.

**FREQUENCY:** Annually

**RESOLUTION:** This reminder resolves using the RPMS data found by the PCC Health Maintenance Reminder look up for Alcohol Use Screening.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123. [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

4.1.3  **IHS-ALLERGY 2012**

This reminder uses a computed finding to warn providers if the patient does not have an allergy assessment on file.

**APPLICABLE TO:** All patients

**FREQUENCY:** The reminder will check for an allergy assessment or adverse reaction every day.

**RESOLUTION:** documentation of an allergy assessment or adverse reaction
4.1.4 IHS-ANTICOAG CBC 2011
APPLICABLE TO: Patients, all ages on anticoagulation therapy (patients with V Med entry in previous 120 days that has not been discontinued)

REMINDER DUE: if patient is on anticoagulation therapy and no CBC found in past 1 year.

FREQUENCY: Annually

RESOLUTION: This reminder resolves when the ANTICOAGULATION: SAFETY MEASURE: CBC Best Practice Prompt is no longer active. Once a CBC is done, the PCC Best Practice Prompt is no longer active and the reminder resolves.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123.  http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf

4.1.5 IHS-ANTICOAG DURATION OF TX 2011
APPLICABLE TO: Patients, all ages on anticoagulation therapy (patients with V Med entry in previous 120 days that has not been discontinued)

REMINDER DUE: if patient is on anticoagulation therapy and no Duration of Anticoagulation Therapy is documented.

REMINDER ON: as needed.

RESOLUTION: This reminder resolves when the duration of therapy is documented through PCC Data Entry using the mnemonic ACTH. Once documented, the ANTICOAGULATION: DURATION OF ANTICOAG THERAPY Best Practice Prompt is no longer active and the reminder resolves.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123.  http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf

The duration of therapy is stored in the V ANTICOAGULATION file and entered in PCC and displayed on the anticoagulation patient care supplement of the health summary.

4.1.6 IHS-ANTICOAG INR GOAL 2011
APPLICABLE TO: Patients, all ages on anticoagulation therapy (patients with V Med entry in previous 120 days that has not been discontinued)

REMINDER DUE: if patient is on anticoagulation therapy and no INR goal is recorded.
RESOLUTION: This reminder resolves when the INR goal is documented through PCC Data Entry using the mnemonic ACTH. Once the INR is documented, the ANTICOAGULATION: INR GOAL Best Practice Prompt is no longer active and the reminder resolves.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123.  [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

4.1.7 IHS-ANTICOAG OCCULT BLOOD 2011

APPLICABLE TO: Patients, all ages on anticoagulation therapy (patients with V Med entry in previous 120 days that has not been discontinued)

REMINDER DUE: if patient is on anticoagulation therapy and no test for Fecal Occult Blood found in past 1 year.

REMINDER ON: as needed.

FREQUENCY: Annually

RESOLUTION: This reminder resolves when the ANTICOAGULATION: SAFETY MEASURE: FOBT Best Practice Prompt is no longer active. Once the FOBT is done, the Best Practice Prompt is no longer active and the reminder resolves.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123.  [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

4.1.8 IHS-ANTICOAG THERAPY END DATE 2011

APPLICABLE TO: Patients, all ages on anticoagulation therapy (patients with V Med entry in previous 120 days that has not been discontinued)

REMINDER DUE: if patient is on anticoagulation therapy and therapy end date is in less than 45 days. Consider reassessing your patient's continued need for Warfarin therapy and extending the Duration of Anticoagulation Therapy if indicated.

REMINDER ON: as needed

RESOLUTION: This reminder resolves when the ANTICOAGULATION THERAPY END DATE is documented through PCC Data Entry using the mnemonic ACTH. Once documented, the Best Practice Prompt is no longer active and the reminder resolves.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123.  [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)
The therapy end date is stored in the V Anticoagulation file and displayed on the Anticoagulation Patient Care supplement of the health summary.

4.1.9 IHS-ANTICOAG UA 2011

APPLICABLE TO: Patients, all ages on anticoagulation therapy (patients with V Med entry in previous 120 days that has not been discontinued)

REMINDER DUE: if patient is on anticoagulation therapy and no urinalysis found in past 1 year. REMINDER ON: as needed.

RESOLUTION: Urinalysis lab result. This reminder resolves using the RPMS data found by the ANTICOAGULATION: SAFETY MEASURE: URINALYSIS Best Practice Prompt. When the UA is done, the Best Practice Prompt is no longer active and the reminder resolves.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123. [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

4.1.10 IHS-ASTHMA CONTROL 2011

APPLICABLE TO: Patients with an active problem of asthma or visit diagnosis of asthma in past 2 years

REMINDER DUE if patient has not had an asthma control documented (can be documented on Visit Diagnosis of Asthma) in the past AND has asthma defined as:

- Severity of Mild, Moderate or Severe Persistent OR
- iCare active Asthma Tag [proposed or accepted] OR
- 3 instances of Asthma as primary dx in past 6 mo

FREQUENCY: Annually

RESOLUTION: Documentation of asthma control on the Visit Diagnosis component will inactivate ASTHMA CONTROL CLASSIFICATION Best Practice Prompt and resolve the reminder.

Refer to the PCC Health Summary User Manuals for the logic and RPMS taxonomies. Appendices start on page 123. [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

Refer to the iCare User manual for the logic for Asthma Tags: [http://www.ihs.gov/RPMS/PackageDocs/BQI/bqi_022u.pdf](http://www.ihs.gov/RPMS/PackageDocs/BQI/bqi_022u.pdf)
4.1.11  IHS-ASTHMA ACTION PLAN 2012

APPLICABLE TO: Patients with an active problem of asthma or visit diagnosis of asthma in past 2 years

REMINDER DUE if patient has not had an Asthma Action Plan (Patient Ed ASM-SMP) documented in the past AND has asthma defined as:

- Severity of Mild, Moderate or Severe Persistent OR
- iCare active Asthma Tag [proposed or accepted] OR
- 3 instances of Asthma as primary dx in past 6 mo OR
- Last documented Asthma Control was “not well controlled” or “very poorly controlled" OR
- Asthma exacerbation in past year OR
- One ER or Urgent care visit in past year with primary dx of Asthma.

FREQUENCY: Annually

RESOLUTION: Documentation of an Asthma Action plan (Patient Ed ASM-SMP) will inactivate the ASTHMA ACTION PLAN Best Practice Prompt and resolve the reminder.

Refer to the PCC Health Summary User Manuals for the logic and RPMS taxonomies. Appendices start on page 123. [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

Refer to the iCare User manual for the logic for Asthma Tags: [http://www.ihs.gov/RPMS/PackageDocs/BQI/bqi_022u.pdf](http://www.ihs.gov/RPMS/PackageDocs/BQI/bqi_022u.pdf)

4.1.12  IHS-ASTHMA PRIM PROV 2012

APPLICABLE TO: Patients with an active problem of asthma or visit diagnosis of asthma in past 2 years

REMINDER DUE if patient does not have a Designated Primary Care Provider documented AND has asthma defined as:

- Severity of Mild, Moderate or Severe Persistent OR
- iCare active Asthma Tag [proposed or accepted] OR
- 3 instances of Asthma as primary dx in past 6 mo

RESOLUTION: Documentation of a Designated Primary Care Provider in RPMS will inactivate the ASTHMA PRIMARY CARE PROVIDER Best Practice Prompt and resolve the reminder.
4.1.13 IHS-ASTHMA RISK EXACERBATION 2011

APPLICABLE TO: Patients with an active problem of asthma or visit diagnosis of asthma in past 2 years

REMINDER DUE if patient at increased risk for Asthma Exacerbation defined as:

- Two or more ER, Urgent Care or inpatient visits in past year with a documented primary diagnosis of asthma; OR
- One prescription for oral corticosteroids on the same day as a visit with primary Asthma diagnosis in the last year for patients with ONLY asthma severity 1 (intermittent); OR
- Two prescriptions for oral corticosteroids on the same day as a visit with primary Asthma diagnosis in the last year for patients with ANY asthma severity 2, 3, or 4 (persistent); OR
- At least one ER, Urgent Care or inpatient visit in the last year with a documented primary diagnosis of asthma AND one prescription for oral corticosteroids on the same day as a visit with primary Asthma diagnosis in the last year on a date at least 2 weeks (14 days) before or after the ER/UC/inpatient visit.

RESOLUTION: This reminder uses a computed finding to get data from ASTHMA: INCREASED RISK FOR EXACERBATION Best Practice prompt. The reminder is due while the patient is at an increased risk for exacerbation, and will not resolve while the best practice prompt is active for the patient.

Refer to the PCC Health Summary User Manuals for the logic and RPMS taxonomies. Appendices start on page 123.
http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf

Refer to the iCare User manual for the logic for Asthma Tags:
http://www.ihs.gov/RPMS/PackageDocs/BQI/bqi_022u.pdf

4.1.14 IHS-ASTHMA SEVERITY 2012

APPLICABLE TO: Patients with an active problem of asthma or visit diagnosis of asthma in past 2 years

REMINDER DUE if patient does not have documented Asthma Severity Classification (on problem list) AND has Asthma defined as:
• iCare active Asthma Tag [proposed or accepted] OR
• 3 instances of Asthma as primary dx in past 6 mo

RESOLUTION: This reminder resolves when the ASTHMA SEVERITY CLASSIFICATION Best Practice Prompt is no longer active. Documenting the Asthma Severity Classification on the problem list will inactivate the ASTHMA SEVERITY CLASSIFICATION Best Practice prompt and resolve the reminder.

Refer to the PCC Health Summary User Manuals for the logic and RPMS taxonomies. Appendices start on page 123. 
http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf

Refer to the iCare User manual for the logic for Asthma Tags: 
http://www.ihs.gov/RPMS/PackageDocs/BQI/bqi_022u.pdf

4.1.15 IHS-ASTHMA STEROIDS 2012

APPLICABLE TO: Patients with an active problem of asthma or visit diagnosis of asthma in past 2 years

REMINDER DUE if patient does not have a prescription in the past 6 months for inhaled corticosteroids AND has Asthma defined as:
• Severity of Mild, Moderate or Severe Persistent OR
• iCare active Asthma Tag [proposed or accepted] OR
• 3 instances of Asthma as primary dx in past 6 mo

RESOLUTION: This reminder resolves when the ASTHMA: ADD/INCREASE INHALED STEROIDS Best Practice Prompt is no longer active. A prescription for an inhaled steroid in will inactivate the Best Practice Prompt and resolve the reminder.

**Note:** The Best Practice Prompt will look for inhaled steroids that are listed in the BAT ASTHMA INHALED STEROIDS taxonomy. Please verify that the inhaled steroids that are dispensed at your facility are included in this taxonomy. Failure to do so will result in the best practice prompt and reminder being due, even though the patient has received a recent prescription for an inhaled steroid.

This taxonomy can be populated through iCare. To edit the taxonomy, the iCare user must possess the BGPZ TAXONOMY EDITOR key.

Login to iCare | Tools | Taxonomy Maintenance | View/Edit Taxonomy Entries | All Site Populated | Medication Taxonomy | BAT Asthma Inhaled Steroids | Add.
Refer to the PCC Health Summary User Manuals for the logic and RPMS taxonomies. Appendices start on page 123.
http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf

Refer to the iCare User manual for the logic for Asthma Tags:
http://www.ihs.gov/RPMS/PackageDocs/BQI/bqi_022u.pdf

4.1.16 IHS-BLOOD PRESSURE 2012

APPLICABLE TO: Patients age 2 and older. Hypertensive and diabetic patients are excluded from this reminder. This is a blood pressure screening reminder for normal risk individuals.

REMINDER DUE: if patient does not have hypertension or diabetes AND
- Last BP was over 139 OR 89
- No BP recorded in past 1 year if over 21 OR if under 21 and last DBP 85-89
- No BP recorded in past 2 years if age 2-20

RESOLUTION: blood pressure at the recommended interval

4.1.17 IHS-CHLAMYDIA SCREEN 2011

APPLICABLE TO: Females aged 16-25

REMINDER DUE: if female patient 16-25 and no chlamydia screening in past year. May be deferred if patient is not engaged in sexual intercourse.

FREQUENCY: Annually

RESOLUTION: Resolved by a Chlamydia lab result, lab procedure, or diagnosis code. This reminder resolves using the RPMS data found by the CHLAMYDIA SCREENING Health Maintenance Reminder.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123. http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf

4.1.18 IHS-COLON CANCER 2012

REMINDER APPLICABLE if age 51-80
- and no history of neoplasm of the colon
- and no evidence of colonoscopy in past 9yrs 9mos
- and no evidence of sigmoidoscopy or barium enema in past 4yrs 9mos

REMINDER DUE if no Fecal test done in past year
REMINDER ON if due within 3 months

RESOLUTION:

- Fecal test resulted
- Colonoscopy done (status N/A for 9yrs 3mos)
- Sigmoidoscopy or barium enema (status N/A for 4yrs 9mos)

REMINDER TERM: IHS-FECAL OCCULT BLOOD will need to contain the names of the lab(s) that the site uses.

4.1.19 IHS-CVD 2011

APPLICABLE TO: All patients

REMINDER APPLICABLE AND DUE: the patient has an iCare diagnostic tag of CVD risk, known CVD. See Reminder Dialog and/or PCC Best Practice Prompts to see what iCare tag is assigned and what is recommended for this patient.

NO RESOLUTION: This reminder uses a computed finding to determine if the patient has an iCare CVD diagnostic tag [proposed or accepted] and if so the reminder is applicable and due. The reminder does not resolve and is intended to alert the user to PCC best practice prompts that may be active for the patient.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123. [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

Refer to the iCare User manual for the logic for CVD Tags: [http://www.ihs.gov/RPMS/PackageDocs/BQI/bqi_022u.pdf](http://www.ihs.gov/RPMS/PackageDocs/BQI/bqi_022u.pdf)

4.1.20 IHS-DENTAL VISIT 2011

APPLICABLE TO: All patients, all ages

REMINDER DUE: If no dental visit documented in past year.

REMINDER ON: 3 months before due date.

FREQUENCY: Annually

RESOLUTION: This reminder resolves using the RPMS data found by the DENTAL EXAM Health Maintenance Reminder.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123. [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)
4.1.21 IHS-DEPO PROVERA 2012

Note: *** You must install the reminder and dialog separately.

1. Install reminder first
2. Create VA Health Summary Object called |PXRM DEPO PROVERA|
3. Install dialog, link and activate

APPLICABLE TO: Women who have an order for medroxyprogesterone injection that is not discontinued.

Patient has order for Depo Provera (orderable item of medroxyprogesterone, inj) that is not discontinued.

***This order may be expired*** If patient is no longer using Depo Provera, then discontinue the active or expired order to remove from cohort.

REMINDER DUE SOON (ON TIME for injection) if patient has order that is not discontinued for Depo Provera and it has been 10 weeks since the last injection (CPT code J1055)

*** The standard administration schedule is every 12 weeks. If patient is due soon, ensure that an appointment is schedule for their scheduled injection and/or follow local policy for timing of injections. ***

REMINDER DUE (OVERDUE for injection) if it has been more than 13 weeks longer since the last injection (CPT code J1055).

*** Check status of order. Reminder will be active for patients with expired orders. Follow site's policy and procedure for renewing orders ***

*** Follow your site's policy and procedure for screening, assessment including UHCG screening and on time, late and restart administration of Depo Provera ***

FREQUENCY: Every 13 weeks

RESOLUTION: Documentation of Depo-Provera administration (CPT code J1055) during the defined time interval.
REMINDER TERM: The reminder term IHS-DEPO PROVERA ORDERABLE ITEM as an orderable item will need to be populated at the site.

INSTALL NOTES:

(1) Install reminder first
(2) Create VA Health Summary Object |PXRM DEPO PROVERA|
(3) Install dialog, link and activate

4.1.22 IHS-DEPRESSION SCREEN 2011

APPLICABLE TO: All patients, starting at age 18 years

REMINDER DUE: Patient is aged 18 and older and has no depression screening (exam, measurement, POV) or mood disorder documented in the past year.

FREQUENCY: Annually

RESOLUTION: This reminder resolves using the RPMS data found by the DEPRESSION SCREENING Health Maintenance Reminder.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123. http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf

4.1.23 IHS-DIAB ACE/ARB 2012

Diabetic patients who have hypertension or nephropathy should be on either an ACE inhibitor or an ARB unless they are allergic to both.

APPLICABLE TO:

- Patients with an active problem of diabetes or visit diagnosis of diabetes in the past 3 years
- AND (either hypertension or nephropathy or UA/CR>30)
- AND NOT allergic to both ACEI and ARB

REMINDER DUE: if patient has an active problem or diagnosis of Diabetes AND either a diagnosis of nephropathy or hypertension or a UA/CR >30 and does not have an active, filled prescription for an ACEI or ARB.

EXCLUSION: patient removed from cohort if documented allergy/ADR to both ACEI and ARB

RESOLUTION: Reminder resolved by current prescription for ACEI or ARB, including outside medications
REMINDER TERMS: IHS-NEPHROPATHY needs to be populated with the lab(s) that the site uses for UA/Cr. IHS-ACE/ARB needs to be populated with the medications that the site uses.

4.1.24 IHS-DIAB ANTIPLT KNOWN CVD 2012

Diabetic patients with known cardiovascular disease should be evaluated for the appropriateness for antiplatelet therapy. Reminder checks medication listing to see if patient is on aspirin or clopidogrel. The previous DIAB ASPIRIN reminder is being replaced with 3 reminders, for males, females and those with coronary vascular disease (CVD).

APPLICABLE TO:

- Patients with an active problem of diabetes or visit diagnosis of diabetes in the past 3 years
- AND known CVD
- AND NOT on current anticoagulation therapy
- AND NOT allergic to both aspirin and clopidogrel

REMINDER DUE if has an active problem or visit diagnosis of Diabetes in the past 3 years and an active problem or visit diagnosis of CVD AND

- Not on warfarin therapy
- No documented allergy to BOTH aspirin and clopidogrel AND
- No current and filled RX for aspirin or clopidogrel

RESOLUTION: current prescription for aspirin or clopidogrel, including outside medications

REMINDER TERMS: IHS-ASPIRIN, IHS-CLOPIDOGREL needs to be populated with the medications that that site uses for these items.

4.1.25 IHS-DIAB ASPIRIN FEMALE 2011

Female diabetic patients over 60 years of age who have an additional risk for cardiovascular disease should be considered for Aspirin therapy. Clinical judgment should be exercised in determining appropriateness of therapy based on age and other risk factors such as bleeding risk.

APPLICABLE TO:

- Female patients age over 60 with an active problem of diabetes or visit diagnosis of diabetes in the past 3 years
• AND DO NOT have an active problem or visit diagnosis of CVD
• AND NOT on warfarin therapy
• AND NOT allergic to aspirin
REMINDER DUE if patient female, age over 60 and has an active problem diagnosis of Diabetes or visit diagnosis of Diabetes in the past 3 years

AND
• Not on warfarin therapy
• No documented allergy to aspirin
• No current and filled RX for aspirin (clopidogrel will also resolve reminder to avoid the patient being prescribed 2 antiplatelet agents inadvertently)

FREQUENCY: Annually

RESOLUTION: current prescription for aspirin or clopidogrel, including outside medications

REMINDER TERMS: IHS-ASPIRIN, IHS-CLOPIDOGREL need to be populated with the medications that that site uses for these items.

4.1.26 IHS-DIAB ASPIRIN MALE 2011
Male diabetic patients over 50 years of age who have an additional risk for cardiovascular disease should be considered for Aspirin therapy. Clinical judgment should be exercised in determining appropriateness of therapy based on age and other risk factors such as bleeding risk.

APPLICABLE TO:
• Male patients age 50 and older with an active problem of diabetes or visit diagnosis of diabetes in the past 3 years
• AND DO NOT have an active problem or visit diagnosis of IHD
• AND NOT on warfarin therapy
• AND NOT allergic to both aspirin and clopidogrel
REMINDER DUE if patient is male, age over 50 and has an active problem diagnosis of Diabetes or visit diagnosis of Diabetes in the past 3 years

AND
• Not on warfarin therapy
• No documented allergy to aspirin
• No current and filled RX for aspirin (clopidogrel will also resolve reminder to avoid the patient being prescribed 2 antiplatelet agents inadvertently)

FREQUENCY: Annually

RESOLUTION: current prescription for aspirin or clopidogrel, including outside medications

REMEMBER TERMS: IHS-ASPIRIN, IHS-CLOPIDOGREL needs to be populated with the medications that that site uses for these items.

4.1.27 IHS-DIAB BP CONTROL 2012

APPLICABLE TO: Patients with an active problem of diabetes or visit diagnosis of diabetes in the past 3 years

REMINDER DUE if patient has an active problem diagnosis of Diabetes or visit diagnosis of Diabetes in the past 3 years AND no BP recorded in 3 months

REMINDER DUE next visit if systolic BP 130 or greater OR diastolic BP 80 or greater

FREQUENCY: Every 3 months or every visit if BP is elevated

RESOLUTION: blood pressure during the recommended interval.

4.1.28 IHS-DIAB EYE EXAM 2011

APPLICABLE TO: Patients with an active problem of diabetes or visit diagnosis of diabetes in the past 3 years

REMINDER DUE if patient has an active problem of Diabetes or visit diagnosis of Diabetes in the past 3 years AND no Dilated Eye exam in the past year

REMINDER ON if no Dilated Eye exam in the past year.
REMINDER ON if due within 3 months

FREQUENCY: Annually

RESOLUTION: Eye exam from the exam file or a CPT code for a fundoscopic eye exam documented

4.1.29 IHS-DIAB FOOT EXAM 2011

APPLICABLE TO: Patients with an active problem of diabetes or visit diagnosis of diabetes in the past 3 years
REMINDER DUE if patient has an active problem of Diabetes or visit diagnosis of Diabetes in the past 3 years AND no Diabetic foot exam in the past year

REMINDER ON if due within 3 months

FREQUENCY: Annually

RESOLUTION: Diabetic Foot Exam Code documented

4.1.30 IHS-DIAB HGBA1C 2011

APPLICABLE TO: Patients with an active problem of diabetes or visit diagnosis of diabetes in the past 3 years

REMINDER DUE if patient has an active problem diagnosis of Diabetes or visit diagnosis of Diabetes in the past 3 years AND no HGBA1C in the 6 months

FREQUENCY: Every 6 months

RESOLUTION: HGBA1C lab result

REMINDER TERM: HGBA1C needs to be populated with the lab(s) that the site uses

4.1.31 IHS-DIAB HGBA1C CONTROL 2012

Patients with diabetes should have their A1C measured at least twice per year. Patients who are not meeting treatment goals or whose therapy has changed should have A1C quarterly. This reminder is designed to be site dependent. Each facility will need to determine what the “threshold” will be to trigger a re-evaluation of the HgbA1c every 3 months

APPLICABLE TO: Patients with an active problem of diabetes or visit diagnosis of diabetes in the past 3 years

REMINDER DUE in 6 months: If no A1C in past 6 months.

REMINDER DUE in 3 months: If last A1C exceeds site defined threshold in “IHS-HGBA1C REEVALUATE” term.

RESOLUTION: HGBA1C lab result

REMINDER TERMS: IHS-HGBA1C needs to be populated with the lab(s) that the site uses. Sites will need to include the condition that will trigger this reminder for each lab entered.
CLASS: VISN/
REVIEW DATE:
DESCRIPTION:
   No existing text
   Edit? NO/

Select FINDING ITEM: HEMOGLOBIN A1C// Enter your sites HGBA1C test name. If there are more than 1 HGBA1C lab tests setup at your site, you will need to set each one up.

   FINDING ITEM: HEMOGLOBIN A1C/
   EFFECTIVE PERIOD:
   USE INACTIVE PROBLEMS:
   WITHIN CATEGORY RANK:
   EFFECTIVE DATE:
   MH SCALE:

   CONDITION: I V>6.9// In this example: If the HGBA1C is greater than 6.9, it will be due in 3 months. This condition may be modified.

Enter the condition for each lab added

CONDITION CASE SENSITIVE:
RX TYPE:

Figure 4-1: HGBAIC Reminder Term

4.1.32 IHS-DIAB NEPHRO SCR/MON 2012

The microalbumin test will no longer be a national reminder.

APPLICABLE TO: Patients with an active problem of diabetes or visit diagnosis of Diabetes in the past 3 years who are NOT on long term dialysis

REMINDER DUE if patient has an active problem diagnosis of Diabetes or visit diagnosis of Diabetes in the past 3 years

   AND
   • AND NOT long term dialysis
   • AND no quant urine albumin(UACR)
   • AND eGFR (eGFR requires a creatinine) in past year

FREQUENCY: Annually

RESOLUTION: Quantitative Urine Albumin (UACR) and eGFR lab result

REMINDER TERMS: IHS-URINE ALBUMIN and IHS-EGFR needs to be populated with the lab(s) that the site uses.
4.1.33 IHS-DIABETES SCREENING 2011

APPLICABLE TO: Patients age 18 and older who do not have an active problem or visit diagnosis in past 3 years of diabetes

REMINDER DUE: Patient is aged 18 and older, without diagnosis of Diabetes on the problem list and no glucose screening test documented in the past 3 years.

FREQUENCY: Every 3 years

RESOLUTION: Resolved by a glucose lab result. This reminder resolves using the RPMS data found by the DIABETES SCREENING Health Maintenance Reminder.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123. [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

4.1.34 IHS-DOMESTIC VIOLENCE 2012

APPLICABLE TO: Females age 15 and older

REMINDER DUE: Patient is female, 15 or older and no documented Intimate Partner Violence exam in the past year.

REMINDER ON: 3 months before due date.

FREQUENCY: Annually

RESOLUTION: This reminder resolves using the RPMS data found by the DOMESTIC VIOLENCE/IPV SCREENING Health Maintenance Reminder look up.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123. [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

4.1.35 IHS-EPSTD SCREENING 2012

The Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program is the child health component of Medicaid. EPSDT requires states to assess a child's health needs through initial and periodic evaluations to assure that health problems are diagnosed and treated early, before they become more complex and their treatment more costly.

APPLICABLE TO: Patients age 0-20 yrs.

REMINDER DUE: If pt. is 0-20 yrs. and no documented screening during the recommended screening interval.
FREQUENCY: EPSDT Screening is due 5 times at the following intervals:

- Age less than 1 year
- Age 1 through 4 years
- Age 5 through 11 years
- Age 12 through 17 years
- Age 18 through 20 years

RESOLUTION: This reminder resolves using the procedure (CPT) codes found by the EPSDT Screening Health Maintenance Reminder.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123. [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

### 4.1.36 IHS-FALL RISK SCREEN 2011

**APPLICABLE TO:** Patients age 65 and older

**REMINDER DUE:** Patient is over 65 and no fall risk assessment done (Fall Risk exam, POV, injury code)

**REMINDER ON:** 3 months before due date.

**FREQUENCY:** Annually

**RESOLUTION:** This reminder resolves using the RPMS data found by the FALL RISK ASSESSMENT Health Maintenance Reminder.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123. [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

### 4.1.37 IHS-FUNCTIONAL ASSESSMENT 2011

**APPLICABLE TO:** Patients age 55 and older

**REMINDER DUE:** Patient is over 55 without documentation of any ADL or IADL data in the past year (documented in Functional Status in Personal Health).

**REMINDER ON:** 3 months before due date.

**FREQUENCY:** Annually

**RESOLUTION:** This reminder resolves using the RPMS data found by the FUNCTIONAL ASSESSMENT Health Maintenance Reminder.
Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123.  http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf

4.1.38 IHS-HCT/HGB 2011
Children should have a screening HCT or HGB at approximately age 12 months and 4 years of age.

APPLICABLE TO: Patients age 12 months to 5 years

REMINDER DUE if age 12 months to 5 years and no HCT or HGB in past 3 years.

REMINDER ON if over 12 months and due within 3 months.

FREQUENCY: Every 3 years

RESOLUTION: HCT or HGB lab result

REMINDER TERM: IHS-HCT/HGB needs to be populated with the lab(s) that the site uses.

4.1.39 IHS-HEAD CIRCUMFERENCE 2012

APPLICABLE TO: Patients birth to 3 years

REMINDER DUE Reminder due every 2 mos until age 6 mos, and then every 6 mos until 3 Y

REMINDER ON if due within 7 days

RESOLUTION: Vital measurement of head circumference documented

4.1.40 IHS-HEARING TEST 2011

APPLICABLE TO: Patients age 4 to 7 years

REMINDER DUE: hearing test should be done once for ages 4 to 7 years

RESOLUTION: This reminder resolves with documentation of a hearing exam code 17 found by the HEARING TEST Health Maintenance Reminder.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123.  http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf

4.1.41 IHS-HEIGHT 2012

APPLICABLE TO: Patients age birth to 49 years
REMINDER DUE: age birth -49 years height is due

- every 2 months until age 6 month,
- every 6 months from age 7 to 35 months,
- every year from age 3 to 18 years,
- every 5 years from 19 to 49 years

REMINDER ON If due within 7 days

RESOLUTION: Vital measurement of height documented

4.1.42 IHS-HIV SCREEN 2012

APPLICABLE TO: Ages 13-64 and no diagnosis of HIV

REMINDER DUE: If patient is 13 to 64, not diagnosed with HIV, and no HIV screening has been done.

RESOLUTION: Resolved with HIV screening lab test, procedure, or diagnosis. This reminder resolves using the RPMS data found by the HIV SCREENING Health Maintenance Reminder.


4.1.43 IHS-IMMUNIZATION FORECAST 2011

This reminder forces the forecaster to run before viewing a patient’s reminders. This ensures that the most current immunization forecast is displayed in the reminders. The immunization forecast reminder should always be the first item on the Cover Sheet Reminder List in EHR. Refer to EHR Configuration section of this manual.

FREQUENCY: It is never due.

4.1.44 IHS-LIPID FEMALE 2012

APPLICABLE TO:

- Female patients age 45 to 64 years who do not have an active problem or visit diagnosis of diabetes in the past 3 years
- All ages if patient has an active problem or visit diagnosis of diabetes in the past 3 years

REMINDER DUE if female age 45 to 64 and no lipid profile in past 5 years if diabetic of any age and no lipid profile in 1 year

REMINDER ON if due within 3 months
FREQUENCY: Every 5 years. Every year if diabetic.

RESOLUTION: Lipid profile lab result including and LDL

REMINDER TERM: IHS-LIPID LAB TEST needs to be populated with the lab(s) that the site uses to document a lipid profile. Use individual tests, not a profile since a profile does not have results. Recommend using LDL and Direct LDL to resolve reminder.

4.1.45  IHS-LIPID MALE 2012

APPLICABLE TO:
- Male patients age 45 to 64 years who do not have an active problem or visit diagnosis of diabetes in the past 3 years
- All ages if patient has an active problem or visit diagnosis of diabetes in the past 3 years

REMINDER DUE if male age 35 to 64 and no lipid profile in past 5 years if diabetic of any age and no lipid profile in 1 year

REMINDER ON if due within 3 months

FREQUENCY: Every 5 years. Every year if diabetic.

RESOLUTION: Lipid profile lab result including and LDL

REMINDER TERM: IHS-LIPID LAB TEST needs to be populated with the lab(s) that the site uses to document a lipid profile. Use individual tests, not a panel since a panel does not have results. Recommend using LDL and Direct LDL to resolve reminder.

4.1.46  IHS-MAMMOGRAM 2011

APPLICABLE TO: Mammography is recommended in women from ages 50-74. Mammography should be discussed with patients from 40-49 and 75 and older and screening performed based on clinical judgment.

Routine Screening Mammogram recommendations (2011)
- US Preventive Services Taskforce: Recommends screening mammograms every 2 years from age 50-74. Recommends against routine screening in women aged 40-49.
- American College of Obstetrics and Gynecology: Recommends screening mammograms every 1-2 years for women aged 40-49 and yearly for women aged 50-74. Provider should discuss with patients whether mammography should be continued for ages 75 and older.
• American Cancer Society: Recommends screening mammograms yearly starting at age 40 as long as a woman is in good health.

Clinicians should discuss the benefits and risks of mammography with patients aged 40-49 and 75 or older and screen based on clinical judgment.

REMINDER DUE:
Women aged 50-74 who have not had a mammogram documented in past year.

Women aged 40-49 and 75-99 who have not had Women’s Health-Mammogram education or mammogram documented in the past year.

EXCLUDED: Patients who have had a bilateral mastectomy documented [in PCC using SHX mnemonic which stores an ICD procedure code for bilateral mastectomy].

RESOLUTION:
Ages 40-49 and 75-99: Documentation of Women’s Health-Mammogram patient education or Mammogram

Ages 40-99: Mammogram

This reminder resolves using the RPMS data found by the MAMMOGRAM Health Maintenance Reminder.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123.  http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf

4.1.47 IHS-NEWBORN HEARING SCREEN 2011
APPLICABLE TO: Patients age 0-12 months

REMINDER DUE: if patient is between 0 and 12 months and no newborn hearing screening is found (if documenting exam, requires documenting Newborn Hearing Exam for BOTH ears).

FREQUENCY: Once

RESOLUTION: This reminder resolves using the RPMS data found by the NEWBORN HEARING SCREENING Health Maintenance Reminder.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123 .http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf

4.1.48 IHS-NUTRITIONAL SCREENING 2012
APPLICABLE TO: Patients age 70 and older
REMINDER DUE if patient is 70 or older and no Nutritional Risk Screening has been done in past year.

FREQUENCY: Annually

RESOLUTION: Nutritional Risk Screening is entered in PCC Data Entry using the NRS mnemonic.

4.1.49 IHS-OSTEOPOROSIS SCREEN 2011

APPLICABLE TO: Women 65 and older who do not have dx of osteopenia/osteoporosis, every 2 years

REMINDER DUE: Patient female, 65 and older without documented history of osteoporosis and no osteoporosis screening documented in past 2 years.

RESOLUTION: This reminder resolves using the RPMS data found by the OSTEOPOROSIS Health Maintenance Reminder.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123. [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

4.1.50 IHS-PPD 2012

APPLICABLE TO: Patients age 4 years to 17 years

REMINDER DUE: Every 7 years for patients without a documented history or current diagnosis of tuberculosis at age 4 years and 11 years with no documented PPD. This reminder will continue to appear for patients through age 18, until the test is documented.

FREQUENCY: Two times; Once at age 4 years and once at age 11 years.

RESOLUTION: Documentation of a skin test in the computer

4.1.51 IHS-PAP SMEAR 2011

APPLICABLE TO: Patients age 21 to 65 years who have no history of hysterectomy

REMINDER DUE: For female patients with intact cervix
  - Ages 21-29 if no Pap test documented in past 2 years
  - Ages 30-64 if no Pap test documented in past 3 years

REMINDER ON: 3 months before due date

RESOLUTION: This reminder resolves using the RPMS data found by the PAP SMEAR Health Maintenance Reminder for Pap Smear.
Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123.  [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

### 4.1.52 IHS-RUBELLA IMMUNITY 2012

**APPLICABLE TO:** Patients 18-51

**REMINDER DUE** for Patients who are not documented as immune or with no documented Rubella immunization since age 1 year: Born in 1957 or later who are at least 18.

**FREQUENCY:** Once

**RESOLUTION:** This reminder resolves when the RUBELLA IMMUNIZATION Best Practice Prompt is no longer active. Documentation of Rubella immunization or immunity will inactivate the Best Practice Prompt and the reminder resolves.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123.  [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

### 4.1.53 IHS-SENIOR HEIGHT 2011

**APPLICABLE TO:** Patients age 50 and older

**REMINDER DUE**
- every 2 years from age 50-64
- every 1 year age 65 and older

**REMINDER ON** if due within 3 months

**RESOLUTION:** Vital Measurement of height documented

### 4.1.54 IHS-SENIOR VISION 2011

**APPLICABLE TO:** patients age 65 and older

**REMINDER DUE:** Patient over 65 and no vision screening (measurement, CPT, ICD)

**REMINDER ON:** 3 months before due date.

**FREQUENCY:** Annually

**RESOLUTION:** This reminder resolves using the RPMS data found by the VISUAL ACUITY EXAM Health Maintenance Reminder.
Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123. [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

### 4.1.55 IHS-TOBACCO SCREEN 2011

**APPLICABLE TO:** All patients, all ages

**REMINDER DUE:** All patients and no tobacco screening, diagnosis or counseling (health factor, CPT or POV/Problem) documented in the past year.

**REMINDER ON:** 3 months before due date.

**FREQUENCY:** Annually

**RESOLUTION:** This reminder resolves using the RPMS data found by the TOBACCO USE SCREENING Health Maintenance Reminder.

Refer to the PCC Health Summary User Manuals for the logic. Appendices start on page 123. [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

### 4.1.56 IHS-VISION EXAM 2011

**APPLICABLE TO:** Patients age 7 to 9 years

**REMINDER DUE if patient is between 7 and 9 and no vision exam has been recorded**

**FREQUENCY:** Once

**RESOLUTION:** Documentation of vision exam codes

### 4.1.57 IHS-WEIGHT 2012

**APPLICABLE TO:** All patients, all ages.

**REMINDER DUE**
- every visit if under 6 months,
- every 2 months for ages 6 through 11 months
- every 3 months for ages 1 through 5 years
- every 6 months starting at age 6

**REMINDER ON if due within 7 days.**

**RESOLUTION:** Vital measurement for weight documented
4.2 Immunization Reminders

All immunizations in reminder definitions work the same way:

1. A computed finding will check the immunization forecaster.

2. Sites must install the 2012 Immunization Reminders from the Reminder Exchange onto their RPMS for the computed findings to work properly.

3. Sites must also verify that the Immunization Reminder Terms are populated properly. Some immunization package (BI namespace) patches deliver new vaccines and the existing Reminder Terms are not updated automatically.

4. The forecaster returns whether or not the reminder is due by checking the age, sex, date last immunization given and the schedule for childhood immunizations in the Immunization Package. It is not forecasted if there is a contraindication documented for the vaccine.

5. Resolution is documentation of the appropriate immunization or contraindication to the vaccine in the immunization package.

<table>
<thead>
<tr>
<th>Immunization</th>
<th>Applicable To</th>
<th>Reminder Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>IHS-HPV IMMUN 2012</td>
<td>11yrs-26yrs</td>
<td>REMINDER DUE if patient 11 to 26 years old AND Immunization forecaster indicates HPV is due. If male has had initial dose, 2nd and 3rd doses will be forecast by Immunization Forecaster</td>
</tr>
<tr>
<td>IHS-HEP A ADULT IMMUN 2012</td>
<td>18yrs and older</td>
<td>REMINDER DUE if patient 18 or older AND Immunization forecaster indicates Hep B is due</td>
</tr>
<tr>
<td>IHS-HEP B ADULT IMMUN 2012</td>
<td>20yrs and older</td>
<td>REMINDER DUE if patient 20 or older AND Immunization forecaster indicates Hep A is due</td>
</tr>
<tr>
<td>IHS-INFLUENZA IMMUN 2012</td>
<td>18yrs and older and no egg allergy</td>
<td>REMINDER DUE if patient age 18 or older AND NOT allergic to eggs AND Immunization forecaster indicated Flu is due</td>
</tr>
<tr>
<td>IHS-MENINGITIS IMMUN 2012</td>
<td>11yr-18yr</td>
<td>REMINDER DUE if age 11 to 18 years AND Immunization forecaster indicated MCV4 is due</td>
</tr>
<tr>
<td>IHS-PED DT IMMUN 2012</td>
<td>1m*-6yrs</td>
<td>REMINDER DUE if patient at least 6 weeks and &lt; 7 years old AND Immunization forecaster indicates DT is due <em><strong>for patients unable to receive pertussis vaccine</strong></em></td>
</tr>
<tr>
<td>IHS-PED DTAP IMMUN 2012</td>
<td>1m*-6yrs</td>
<td>REMINDER DUE if patient at least 6 weeks and &lt; 7 years old AND Immunization forecaster indicates DTaP is due</td>
</tr>
<tr>
<td>IHS-PED FLU IMMUN 2012</td>
<td>6mo-17Y and no egg allergy</td>
<td>REMINDER DUE if age 6 months to 17 years AND NOT allergic to eggs AND Immunization forecaster indicated Flu is due</td>
</tr>
<tr>
<td>IHS-PED HEPA IMMUN 2012</td>
<td>12mos-17yrs</td>
<td>REMINDER DUE if patient 12 mos and &lt; 18 years old AND Immunization forecaster indicates Hep A is due</td>
</tr>
<tr>
<td>IHS-PED HEPB IMMUN 2012</td>
<td>2d-19yrs</td>
<td>REMINDER DUE if patient is 2 days to 19 years old AND Immunization forecaster indicates Hep B is due</td>
</tr>
</tbody>
</table>
### IHS-PED HIBTITER 2012
1m*-59mos
REMINDER DUE if patient at least 6 weeks and < 5 years old AND Immunization forecaster indicates HIB is due

### IHS-PED MMR IMMUN 2012
12m-18yrs
REMINDER DUE if patient 12 months to 18 years AND Immunization forecaster indicates MMR is due

### IHS-PED PEDVAXHIB 2012
1m*-59mos
REMINDER DUE if patient 6 weeks to 59 months AND Immunization forecaster indicates Pedvaxhrib is due.

### IHS-PED PNEUMOCOCCAL 2012
1m*-59mos
REMINDER DUE if patient 6 weeks to 59 months old AND Immunization forecaster indicates Pneumococcals is due

### IHS-PED POLIO IMMUN 2012
1m*-18yrs
REMINDER DUE if patient between 6 weeks and 18 yrs of age AND Immunization forecaster indicates IPV is due

### IHS-PED ROTAVIRUS 2012
1m*-32wks
REMINDER DUE if patient is 6 to 32 weeks old AND Immunization forecaster indicates Rotavirus is due

### IHS-PED VARICELLA 2012
12mos-18yrs
REMINDER DUE if patient is 12 months to 18 years old AND Immunization forecaster indicates Varicella is due

### IHS-PNEUMOVAX IMMUN 2012
5yrs-64 yrs, and >65yrs
REMINDER DUE if patient 65 or older AND Immunization forecaster indicates Pneumovax is due REMINDER DUE for patients 5-64 and older AND Immunization forecaster is set to forecast for 5-64 or if the immunization forecaster is set to forecast 5-64 year olds who have had two visits in the past 3 years for high risk medical condition.

### IHS-TD IMMUN 2012
7 and older
REMINDER DUE if patient age 7 and older AND Immunization forecaster indicates Tetanus vaccine is due

### IHS-TDAP IMMUN 2012
7 and older
REMINDER DUE if patient age 7 and older AND Immunization forecaster indicates Tdap is due

### IHS-ZOSTER IMMUN 2012
60 and older
REMINDER DUE if patient age 60 and older AND Immunization forecaster indicates Zoster vaccine is due

---

### 4.3 National Reminder Dialogs

#### 4.3.1 IHS-ACTIVITY SCREEN 2011

Activity screen is new. This dialog allows the reminder to be resolved by entering a health factor AND patient education.
4.3.2 IHS-ALCOHOL SCREEN 2012

The alcohol screen includes use guidance and ability to document the following: Alcohol Screening Exam, CRAFFT, AUDIT-C, AUDIT, CAGE, and Brief Negotiated Interview.

CRAFFT is a copyrighted tool. You CANNOT change the dialog in any way or this violates copyright. CRAFFT is documented as a measurement.

http://www.ceasar-boston.org/clinicians/crafft.php

AUDIT is documented as a measurement.

http://www.ceasar-boston.org/clinicians/crafft.php

AUDIT-C is documented as a measurement. See ASBI guide below.

Information about Alcohol Screening and Brief Intervention (ASBI) please refer the following resources:

http://www.ihs.gov/NonMedicalPrograms/NC4/index.cfm?module=asbi
All of the screening tools now contain an interview, patient education and referrals.
4.3.3 IHS-ALLERGY 2012

Information only dialog

Figure 4-5: Alcohol Screen Orders

Figure 4-6: No Allergy Assessment dialog
4.3.4 **IHS-ANTICOAG**

This is a new dialog. All of the ANTICOAG dialogs use the same dialog which contains orders for CBC, urinalysis, and fecal occult blood as well as information on where to enter the other data to resolve the reminder.

- CBC 2011
- DURATION OF TX 2011
- INR GOAL 2011
- OCCULT BLOOD 2011
- THERAPY END DATE 2011
- UA 2011

![Anticoagulation therapy monitoring](image)

---

**Anticoagulation therapy monitoring**

--- INR Goal:
- Enter using PCC Data Entry amnesic ACTH

--- Duration of Anticoagulation Therapy:
- Enter using PCC Data Entry amnesic ACTH

--- Therapy end date:
- Enter duration of therapy if indicated using PCC Data Entry amnesic ACTH

INR: 1.1

- -- Ordered INR
  - C per standing order
  - C per provider order
  - C per provider referral

- -- Ordered CBC
  - C per standing order
  - C per provider order
  - C per provider referral

- -- Ordered Fecal, Occult Blood test
  - C per standing order
  - C per provider order
  - C per provider referral

- -- Ordered Urinalysis
  - C per standing order
  - C per provider order
  - C per provider referral

- -- Education provided --
  - Anticoagulation—Medication education provided at this encounter.
  - Anticoagulation—Nursing education provided at this encounter.
  - Anticoagulation—Follow up education provided at this encounter.

Figure 4-7: Anticoagulation dialog

4.3.5 **IHS-ASTHMA CONTROL 2011**

This dialog allows resolution of the asthma control reminder. EHR patch 10 will introduce the ability to document asthma control, asthma purpose of visit, and add
asthma as an active problem. The dialog is being delivered but cannot be used for entry until EHR patch 10 is released. Sites will then need to remove the DO NOT USE UNTIL EHR PATCH 10 warning.

Figure 4-8: Asthma Control dialog

4.3.6 IHS-ASTHMA ACTION PLAN 2011

Asthma management documentation has been changed to use the Asthma Self-Management Plan patient education topic.
Addendum to Installation Notes

July 2012

Review National Reminder Definitions

41

4.3.7 IHS-ASTHMA PRIM PROV 2012, IHS-ASTHMA RISK EXACERBATION 2011, IHS-ASTHMA SEVERITY 2012

These dialogs do not have any data entry. The user is instructed on what actions need to be taken in PCC or in other components in the EHR to resolve the reminder.
This dialog provides allows documentation of a steroid medication order. Sites need to make an order menu for Asthma Steroid Meds.
4.3.9 **IHS-BLOOD PRESSURE 2012**

This dialog allows documentation of the blood pressure.
4.3.10 IHS-CHLAMYDIA SCREEN 2011

This dialog allows documentation of a chlamydia lab test order and patient education.
4.3.11 IHS-COLON CANCER 2012

This dialog allows documentation of colon cancer screening and education. The dialog has been expanded to include documentation of implementation of standing order.

![Figure 4-16: Colon Cancer dialog](image)

4.3.12 IHS-CVD 2011

The reminder is based on an iCare CVD diagnostic tag. The dialog contains the CVD-TP object which displays active PCC Best Practice prompts for CVD and allows documentation of items that are needed to resolve the PCC Best Practice prompts.
Figure 4-17: CVD dialog Part 1

Patient's active iCare Diagnostic Tag is CVD Highest Risk

High BP: At least 2 recent BP values for this patient were greater than (>) 130/80. Consider more aggressive anti hypertensive therapy.

High LDL: On JUL 7,2011, patient’s LDL was 200. Patient is not documented as currently on a statin medication. Consider prescribing a statin medication or another lipid lowering agent, if not contraindicated.

No KKG: Patient has no documented KKG ever. KKG should be ordered.

No Recent Exercise Education: Discuss and document exercise education with this patient.

Measurements
- Height:
- Weight:
- Blood Pressure:

Orders
- Ordered KKG

* Indicates a Required Field

<No encounter information entered>
4.3.13 IHS-DENTAL VISIT 2011

The dental visit dialog allows documentation of a current or historical dental exam.
4.3.14  IHS-DEPO PROVERA 2012

This is a new reminder dialog for documenting Depo Provera administration. The PXRM DEPO PROVERA object displays the reminder information for this patient. The dialog includes a screening section and an assessment section as well as documentation of patient education and CPT for the administration of Depo Provera. It is important that sites review the documentation tool and copy/edit as needed to comply with their facility policies and procedures.
Addendum to Installation Notes
July 2012

Review National Reminder Definitions

Figure 4-20: Depo Provera dialog with Reminder Detail
Figure 4-21: Depo Provera dialog Screening section
Figure 4-22: Depo Provera dialog Order and Education sections

4.3.15 IHS-DEPRESSION SCREENING 2011

This dialog allows documentation of depression screening exam and PHQ-2 score.
4.3.16 IHS-DIAB ACE/ARB 2012

This dialog allows documentation of an ACE/ARB medication order. Sites need to make an order menu for ACE/ARB.
4.3.17 IHS-DIAB ANTPLT KNOWN CVD 2012
This dialog allows documentation of Aspirin or Clopidogrel orders.

4.3.18 IHS-DIAB ASPIRIN (MALE/FEMALE) 2011
This dialog allows documentation of an aspirin order.
4.3.19  IHS-DIAB BP CONTROL 2012

This dialog allows documentation of blood pressure.
4.3.20  IHS-DIAB EYE EXAM 2011

This dialog allows documentation of fundoscopic eye exams.

![Diabetic Eye Exam dialog](image)

Figure 4-28: Diabetic Eye Exam dialog

4.3.21  IHS-DIAB FOOT EXAM 2011

This dialog has been enhanced and allows documentation of foot exam and patient education.
### 4.3.22 IHS-DIAB HGBA1C and IHS-DIAB HGBA1C CONTROL 2012

This dialog has been expanded to include documentation of implementation of standing order.
4.3.23 IHS-DIABETES SCREENING 2011

This dialog has been expanded to include documentation of implementation of standing order.

Figure 4-31: Diabetes Screening dialog

4.3.24 IHS-DIAB NEPHRO SCR/MON 2012

The Microalbumin reminder has been retired and replaced with this reminder and dialog. This dialog allows documentation of nephropathy lab test orders. Sites need to make an order menu which contains the nephropathy labs that are being used at the
facility. The reminder is resolved by Urine albumin and eGFR. eGFR is calculated from creatinine.

![Reminder Resolution: DM Nephropathy Screen](image)

4.3.25 IHS-DOMESTIC VIOLENCE 2012

This dialog allows documentation of domestic violence screening exam and education.
4.3.26 IHS-EPSDT SCREENING 2012

This is an information only dialog.
4.3.27  **IHS-FALL RISK SCREEN 2011**
Resolution is Exam code.

Figure 4-35: Fall risk dialog

4.3.28  **IHS-FUNCTIONAL ASSESSMENT 2011**
This is an information only dialog.

Figure 4-36: Functional Assessment dialog
4.3.29  IHS-HCT/HGB 2011
This dialog has been expanded to include documentation of implementation of standing order.

![Figure 4-37: HGB/HCT dialog]

4.3.30  IHS-HEAD CIRCUMFERENCE 2012
This dialog allows documentation of the head circumference.

![Figure 4-38: Head Circumference dialog]
4.3.31 **IHS-HEARING TEST 2011**

This dialog allows documentation of the hearing test.

![Hearing Test Dialog](image)

Figure 4-39: Hearing Test dialog

4.3.32 **IHS-HEIGHT 2012**

This dialog allows resolution of the reminder by entry of height.

![Height Dialog](image)

Figure 4-40: Height dialog
4.3.33 IHS-HIV SCREEN 2012

This is new dialog includes an order for HIV screening test to resolve the reminder and patient education documentation.

![HIV Screen dialog](image)

Figure 4-41: HIV Screen dialog

4.3.34 IHS-IMMUNIZATIONS

All the immunizations use the same type of dialog. Only one will be displayed here but they should all be essentially the same. Users can document an immunization given during the visit, at a previous visit or a refusal. Education can also be documented. This dialog has been expanded to include documentation of implementation of standing order.
Figure 4-42: Immunization received at this visit-dialog
Figure 4-43: Immunization received at another facility and refused at this visit dialog

4.3.35 IHS-LIPID FEMALE/MALE 2012

This dialog has been expanded to include documentation of implementation of standing order.
4.3.36 IHS-MAMMOGRAM 2011

This dialog allows resolution by order of mammogram for ages 50-74, education or mammogram for ages 40-49 or aged 75 and older. Dialog was updated to also include documentation of BIRAD category for historical mammograms.
Figure 4-45: Mammogram order dialog
Figure 4-46: Mammogram not ordered dialog
4.3.37 IHS-NEWBORN HEARING 2011

New dialog allows documentation of newborn hearing. Vital Sign resolution-must be documented in both ears.
4.3.38 IHS-NUTRITIONAL SCREENING 2012

This is a new information only dialog.
4.3.39  IHS-OSTEOPOROSIS SCREENING 2011

This dialog has been expanded to include documentation of implementation of standing order. If your site receives reports of osteoporosis screening studies other than Dexascan, copy the dialog element and populate with the appropriate CPT (consult coding staff) and add to the historical data section of the dialog.
**Figure 4-50: Osteoporosis Screen dialog**

**4.3.40 IHS-PAP 2011**

Reminder Dialog allows documentation of order for Pap with or without STD testing, documentation that a Pap was not ordered and historical entry of Pap and Hysterectomy. Note that documenting a subtotal hysterectomy with cervix retained does not remove the patient from the reminder cohort.
Figure 4-51: Pap Smear dialog

4.3.41 IHS-SENIOR HEIGHT 2011

This dialog allows documentation of height.
4.3.42 **IHS-SENIOR VISION**

Resolution by Vital Sign

---

Figure 4-52: Senior Height

Figure 4-53: Senior Vision
4.3.43 IHS-TOBACCO SCREEN 2011

Tobacco screen dialog has been updated to include recent Tobacco Health Factors. The dialog is designed to capture both Smoking and Smokeless and offers appropriate education based on health factor selected.

The top level has use assessment and exposure assessment.

![Image of Tobacco Screen Upper Level](image)

Figure 4-54: Tobacco Screen Upper Level

The second level documents tobacco screening for current tobacco users. The amount of tobacco use documented, education documented and orders for referrals also documented. Note that selecting the group “current and former smoker, never used smokeless tobacco” stores “never used smokeless tobacco” health factor. The user then selects the smoking health factor.
4.3.44 IHS-WEIGHT 2012

The dialog allows documentation of weight.
Figure 4-56: Weight dialog
5.0 Setup Quick Orders in Dialogs

The following is information about Step 2: Setup Quick Orders in Dialogs.

Several of the dialogs prompt the user to order items. When you are installing the dialogs, the computer will ask you to replace the “quick order” that comes in the reminder with one at your site unless you have a quick order with the same name. Make sure you have quick orders for these items already created, or a list of your local quick orders, when you load the reminder.

You can replace any quick order with a menu on install. For instance, if you want to have a small menu so the provider can choose between Screening and Diagnostic Mammograms, you could create a menu called ORZM MAMMOGRAM FOR REMINDERS and place both options on the menu. You could do this also with Dexascan – if you want to offer your clinicians DXA or SXA for example you could create a menu called ORZM BONE DENSITY TESTS FOR REMINDERS and place the options on the menu. When you install the dialog, if you do not have the exact quick order name you will be offered a choice to replace it with your local quick order or menu.

A quick order might be substituted for another type of quick order, depending on the sites’ processes and capabilities. For example, if your site does not do DEXA on site but refers them out to another facility, the quick order for a DEXASCAN (ORZ DEXASCAN) can be substituted with a consult quick order (GMRCZ DEXASACAN).

If not, you can choose to either exit installing the dialog or just not install that dialog element. If your site does not do mammograms, for example, that might be the correct choice.

Lab Quick Orders
LRZ CBC
LRZ CHLAMYDIA
LRZ GLUCOSE
LRZ HGB
LRZ HGBA1C
LRZ HIV SCREENING
LRZ INR
LRZ LIPID PROFILE
LRZ OCCULT BLOOD
LRZ PAP
LRZ URINALYSIS
LRZ URINE HCG
Medication Quick Orders
PSOZ ASPIRIN (EC) 81MG DAILY
PSOZ DEPO PROVERA 150MG IM
PSOZ CLOPIDOGREL 75MG DAILY

Consult Quick Orders
GMRCZ BH CONSULT
GMRCZ COLONOSCOPY
GMRCZ MAMMOGRAM
GMRCZ MENTAL HEALTH
GMRCZ TOBACCO CESSATION

Other Quick Orders
ORZ EKG
ORZ DEXASCAN
RAZ BILATERAL MAMMOGRAM

Order Sets
LRZSET PAP: Order set with Pap lab tests
LRZSET DIAB NEPHRO: This order set should contain orders for UA/CR and whatever test that your facility uses that calculates the eGFR (consult lab). Some facilities use the BMP or CMP which have the eGFR in the panel.

Menus:
PSOZM ACE/ARBS: order menu with ACE/ARB medications
PSOZM ASTHMA STEROIDS: order menu with Asthma Steroid medications
6.0 Setup TIU Objects in Dialogs

The following is information about Step 3: Setup TIU Objects in Dialogs.

TIU template fields will automatically be installed when the reminder is loaded from reminder exchange. However, objects will not. You need to make sure that the objects listed below are on your system and active. Many of these objects are stock objects that were installed during a TIU patches or will be in TIU 1009 patch. Check with your site manager to ensure that you have TIUv1.5p1009 installed at your site. After that patch is installed, create the missing objects*. Make sure to name them exactly as you see here.

ACTIVE MEDICATIONS
ACTIVE PROBLEMS
ALLERGIES/ADR
BPXRM ALCOHOL SCREEN
BPXRM BP
BPXRM CAGE TEST
BPXRM DENTAL EXAM
BPXRM DEPRESSION SCREEN
BPXRM DIABETIC EYE
BPXRM FALL RISK
BPXRM FOOT EXAM
BPXRM HEAD CIRCUMFERENCE
BPXRM HEIGHT
BPXRM HGB AND HCT
BPXRM HGBA1C
BPXRM INTIMATE PARTNER VIOLENCE
BPXRM LAST 2 WEIGHTS
BPXRM LAST ASPIRIN
BPXRM LAST PHQ2
BPXRM LAST PHQ9
BPXRM MAMMOGRAM
BPXRM UPDATED TOBACCO
CVD TP
LAST AUDIT 3*
LAST AUDITC 3*
LAST BPF*
LAST CRAFFT 3*
LAST LAB INR 3*
LAST LIPID PROFILE*
TODAY'S LABS
V CHIEF COMPLAINT
V MEASUREMENT
*Objects which need to be created locally.
### 7.0 Setup Health Summary Objects

The following is information about Step 4: Setup Health Summary Objects. It describes the setup for the health summary objects that are used by the reminder dialogs.

### 7.1 ASTHMA TRIGGERS

The ASTHMA TRIGGERS health summary object is displayed in the ASTHMA INTAKE DIALOG ONLY. This object displays the last occurrence of each asthma trigger health factor.

This object contains the PCE HEALTH FACTOR SELECTED component with the ASTHMA TRIGGERS component selection.

Select RPMS-EHR Configuration Master Menu Option: | TIU Configuration Option | HIS TIU Menu for Medical Records ... | Select TIU Maintenance Menu | DDM Document | Definitions (Manager) ... | DDM6 Create TIU/Health Summary Objects.

<table>
<thead>
<tr>
<th>TIU Object Name</th>
<th>Health Summary Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 BH MEASUREMENT</td>
<td>BEHAVIORAL HEALTH FLOWSHEET</td>
</tr>
<tr>
<td>2 PWH MED REC FOR MTM</td>
<td>PWH MED REC FOR MTM</td>
</tr>
<tr>
<td>3 PXRM DEPO PROVERA</td>
<td>PXRM DEPO PROVERA</td>
</tr>
<tr>
<td>4 REMINDERS SUMMARY</td>
<td>REMINDERS SUMMARY</td>
</tr>
<tr>
<td>4 TIU TPBN FUTURE APPTS</td>
<td>TIU TPBN FUTURE APPTS</td>
</tr>
</tbody>
</table>

--- Create TIU/Health Summary Object ---

Enter a New TIU OBJECT NAME: ASTHMA TRIGGERS

Object Name: ASTHMA TRIGGERS

Is this correct? YES// YES

Use a pre-existing Health Summary Object? NO// NO

Checking ASTHMA TRIGGERS3 (TIU) with Health Summary...

Creating Health Summary Object 'ASTHMA TRIGGERS (TIU)'

Select Health Summary Type: ASTHMA TRIGGERS

Are you adding 'ASTHMA TRIGGERS' as a new HEALTH SUMMARY TYPE (the 35th)? No// YES

NAME: ASTHMA TRIGGERS/

TITLE:

SUFFPRESS PRINT OF COMPONENTS WITHOUT DATA:

SUFFPRESS SENSITIVE PRINT DATA:

LOCK:

Do you wish to copy COMPONENTS from an existing Health Summary Type? YES// NO

Select COMPONENT: SHF  PCE HEALTH FACTORS SELECTED

SUMMARY ORDER: 5// 5

OCCURRENCE LIMIT: 1

TIME LIMIT:
HEADER NAME: Health Factor Select Replace

No selection items chosen.

Select new items one at a time in the sequence you want them displayed.
You may select any number of items.

Select SELECTION ITEM: ASTHMA TRIGGERS

Searching for a HEALTH FACTOR, (pointed-to by SELECTION ITEM)

ASTHMA TRIGGERS
ASTHMA TRIGGERS

...OK? Yes// YES

Are you adding 'ASTHMA TRIGGERS' as a new SELECTION ITEM (the 1ST for this STRUCTURE)? No// YES
Select SELECTION ITEM:
Select COMPONENT:

Do you wish to review the Summary Type structure before continuing? NO// NO
Please hold on while I resequence the summary order.

Do you want to overwrite the TIME LIMITS in the Health Summary Type 'ASTHMA TRIGGERS'? N// NO
Print standard Health Summary Header with the Object? N// NO

Partial Header:
Print Report Date? N// NO
Print Confidentiality Banner? N// NO
Print Report Header? N// NO
Print the standard Component Header? Y// NO
Print the date a patient was deceased? N// NO

Print a LABEL before the Health Summary Object? N// NO

Suppress Components without Data? N// NO

OBJECT DESCRIPTION:
No existing text
Edit? NO// NO

Create a TIU Object named: ASTHMA TRIGGERS

Ok? YES//YES

TIU Object created successfully.

<table>
<thead>
<tr>
<th>TIU Object Name</th>
<th>Health Summary Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASTHMA TRIGGERS</td>
<td>ASTHMA TRIGGERS</td>
</tr>
<tr>
<td>BH MEASUREMENT</td>
<td>BEHAVIORAL HEALTH FLOWSHEET</td>
</tr>
<tr>
<td>PWH MED REC FOR MTM</td>
<td>PWH MED REC FOR MTM</td>
</tr>
<tr>
<td>PXM DEPO PROVERA</td>
<td>PXRM DEPO PROVERA</td>
</tr>
<tr>
<td>REMINDERS SUMMARY</td>
<td>REMINDERS SUMMARY</td>
</tr>
<tr>
<td>TIU TPBN FUTURE APPTS</td>
<td>TIU TPBN FUTURE APPTS</td>
</tr>
</tbody>
</table>

Enter ?? for more actions
Create New TIU Object Find
Detailed Display/Edit TIU Object Detailed Display/Edit HS Object
Quit
Figure 7-1: Creating Asthma Triggers Health Summary Objects

Select Action: Quit// Detailed Display

Figure 7-2: Asthma Triggers Health Summary Object Display

7.2 LAST HF OCCUPATION

This health summary object is displayed in the PHN dialog. This object displays the last occurrence of each Occupation health factor.

This object contains the PCE HEALTH FACTOR SELECTED component with the OCCUPATION component selection.
HS Object: LAST HF OCCUPATION (TIU)
Health Summary Type: LAST HF OCCUPATION
Report Period:
Creator: JOHNSON, CAROLYN J

Print Label: NO         Print Report Date and Time: NO
Print Blank Line after Label: NO   Print Confidentiality Banner: NO
Customized Header: YES         Print Report Date and Time: NO
Suppress Components w/o Data: NO   Print Component Header: NO
Print Deceased Information: NO   Print Time-Occurrence Limits: NO
National Object: NO         Underline Component Header: NO
Blank Line After Header: NO

Enter ?? for more actions
Edit HS Object                          Inquire about a HS Type
Change HS Type                          Edit HS Type
Select Action: Quit/

Figure 7-4: Detailed Display for LAST HF OCCUPATION

Type Name: LAST HF OCCUPATION
Title:          JOHNSON, CAROLYN J
SUPPRESS PRINT OF COMPONENTS WITHOUT DATA:
SUPPRESS SENSITIVE PRINT DATA:

<table>
<thead>
<tr>
<th>Max</th>
<th>Hos</th>
<th>ICD</th>
<th>Pro</th>
<th>CPT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Abb   Ord Component Name    Occ Time Loc Text Nar Mod Selection
SHF   5     Health Factor Select 1

OCCUPATION

Figure 7-5: LAST HF OCCUPATION

7.3 PXRM DEPO PROVERA

This object is displayed in the DEPO PROVERA dialog. The PXRM DEPO PROVERA health summary object uses the IHS-DEPO PROVERA 2011 reminder.

Note: You need to install the reminder first so that it is there before you can create this object to be used in the dialog

--- Create TIU/Health Summary Object ---
Enter a New TIU OBJECT NAME: PXRM DEPO PROVERA
Object Name: PXRM DEPO PROVERA
Is this correct? YES// YES
Use a pre-existing Health Summary Object? NO// NO
Checking PXRM DEPO PROVERA (TIU) with Health Summary...
Creating Health Summary Object 'PXRM DEPO PROVERA (TIU)'

Select Health Summary Type: PXRM DEPO PROVERA

Are you adding 'PXRM DEPO PROVERA' as a new HEALTH SUMMARY TYPE (the 43th)? No// YES

NAME: PXRM DEPO PROVERA/
TITLE: Depo Provera
SUPPRESS PRINT OF COMPONENTS WITHOUT DATA:
SUPPRESS SENSITIVE PRINT DATA:
LOCK:
OWNER: USER, DEMO/

Do you wish to copy COMPONENTS from an existing Health Summary Type? YES// NO
Select COMPONENT: CLINICAL REMINDERS BRIEF
SUMMARY ORDER: 5// 5
HEADER NAME: Reminders Brief/

No selection items chosen.

Select new items one at a time in the sequence you want them displayed. You may select any number of items.

Select SELECTION ITEM: IHS-DEPO

Searching for a CLINICAL REMINDER/MAINTENANCE, (pointed-to by SELECTION ITEM)

Searching for a CLINICAL REMINDER/MAINTENANCE
IHS-DEPO PROVERA 2011 VISN
...OK? Yes// YES
Are you adding 'IHS-DEPO PROVERA 2011' as a new SELECTION ITEM (the 1ST for this STRUCTURE)? No// YES
Select SELECTION ITEM:
Select COMPONENT:

Do you wish to review the Summary Type structure before continuing? NO// NO
Please hold on while I resequence the summary order.

Do you want to overwrite the TIME LIMITS in the Health Summary Type 'PXRM DEPO PROVERA'? N// NO
Print standard Health Summary Header with the Object? N// NO

Partial Header:
Print Report Date? N// NO
Print Confidentiality Banner? N// NO
Print Report Header? N// NO
Print the standard Component Header? YES// NO
Use report time/occurrence limits? N// NO
Underline Component Header? N// NO
Add a Blank Line after the Component Header? N// NO
Print the date a patient was deceased? N// NO

Print a LABEL before the Health Summary Object? N// NO
Suppress Components without Data? N// NO

OBJECT DESCRIPTION:
No existing text
Edit? NO//NO

Create a TIU Object named: PXRM DEPO PROVERA

Ok? YES//

TIU Object created successfully.

Enter RETURN to continue...

Figure 7-6: Reminder in TIU object

Detailed Display for PXRM DEPO PROVERA

    HS Object: PXRM DEPO PROVERA (TIU)
    Health Summary Type: PXRM DEPO PROVERA
    Report Period:
    Creator: JOHNSON,CAROLYN J

    HS Object

    Print Label: NO          Print Report Date and Time: NO
    Print Blank Line after Label: NO  Print Confidentiality Banner: NO
    Customized Header: YES    Print Report Date and Time: NO
    Suppress Components w/o Data: NO    Print Component Header: NO
    Print Deceased Information: NO    Print Time-Occurrence Limits: NO
    National Object: NO    Underline Component Header: NO
                          Blank Line After Header: NO

    Enter ?? for more actions

    Edit HS Object                          Inquire about a HS Type
    Change HS Type                          Edit HS Type
    Select Action: Quit//

Figure 7-7: PXRM Depo Provera Object Summary

Type Name: PXRM DEPO PROVERA
    Title:
    Owner: JOHNSON,CAROLYN J
    SUPPRESS PRINT OF COMPONENTS WITHOUT DATA:
    SUPPRESS SENSITIVE PRINT DATA:

<table>
<thead>
<tr>
<th>Abb</th>
<th>Ord</th>
<th>Component Name</th>
<th>Occ</th>
<th>Time</th>
<th>Loc</th>
<th>Text</th>
<th>Nar</th>
<th>Mod</th>
<th>Selection</th>
</tr>
</thead>
<tbody>
<tr>
<td>CMB</td>
<td>5</td>
<td>Reminder Brief</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>IHS-DEPO PROV</td>
</tr>
<tr>
<td>ERA</td>
<td>2011</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Figure 7-8: PXRM Depo Provera Health Summary Type Summary

7.4 PWH MED REC FOR MTM

This object is displayed in the MED THERAPY MGT DIALOG ONLY. This object contains 1 health summary component, the PATIENT WELLNESS HANDOUT with the MEDICATION RECONCILIATION component selection.
HS Object: PWH MED REC FOR MTM (TIU)
Health Summary Type: PWH MED REC FOR MTM
Report Period:

HS Object

Print Label: NO        Print Report Date and Time: NO
Print Blank Line after Label: NO    Print Confidentiality Banner: NO
Customized Header: YES        Print Report Date and Time: NO
Suppress Components w/o Data: NO    Print Component Header: NO
Print Deceased Information: NO    Print Time-Occurrence Limits: NO
National Object: NO    Blank Line After Header: NO

Enter ?? for more actions
Edit HS Object                Inquire about a HS Type
Change HS Type                Edit HS Type
Select Action: Quit//

Figure 7-9: PWH MED REC Object Summary

Type Name:  PWH MED REC
Title:  PWH MED REC
Owner:  HESS,BARBARA
SUPPRESS PRINT OF COMPONENTS WITHOUT DATA:  no
SUPPRESS SENSITIVE PRINT DATA:

<table>
<thead>
<tr>
<th>Abb</th>
<th>Ord</th>
<th>Component Name</th>
<th>Occ</th>
<th>Time</th>
<th>Loc</th>
<th>Text</th>
<th>Nar</th>
<th>Mod</th>
<th>Selection</th>
</tr>
</thead>
<tbody>
<tr>
<td>PWS</td>
<td>5</td>
<td>Handout Selected</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>MEDICATION RE</td>
</tr>
</tbody>
</table>

Figure 7-10: PWH MED REC  Health Summary Type
8.0 Remove Old Reminders From Exchange

The following is information about Step 5: Remove Older Reminders From Exchange.

Follow these instructions to remove the old reminders from displaying in the Reminder Exchange. It does not inactivate the reminders from your system. There are 87 new reminders and it is recommended that you clear the old National Reminders (IHS prefix, no year appended OR 2007, 2008, 2009, 2010 appended) out of exchange prior to installing the patch.

<table>
<thead>
<tr>
<th>+</th>
<th>Entry</th>
<th>Source</th>
<th>Date Packed</th>
</tr>
</thead>
<tbody>
<tr>
<td>31</td>
<td>IHS-COLON CANCER 2007</td>
<td>HAGER@DEMO HOSPITA</td>
<td>08/28/2008@11:42:51</td>
</tr>
<tr>
<td>32</td>
<td>IHS-COLON CANCER 2010</td>
<td>HAGER@DEMO HOSPITA</td>
<td>02/04/2010@10:19:27</td>
</tr>
<tr>
<td>33</td>
<td>IHS-DENTAL VISIT</td>
<td>HAGER@DEMO HOSPITA</td>
<td>02/04/2010@10:19:41</td>
</tr>
<tr>
<td>34</td>
<td>IHS-DEPRESSION SCREEN 2008</td>
<td>HAGER@DEMO HOSPITA</td>
<td>05/22/2009@10:03:29</td>
</tr>
<tr>
<td>35</td>
<td>IHS-DEPRESSION SCREEN 2009</td>
<td>HAGER@DEMO HOSPITA</td>
<td>02/04/2010@10:19:56</td>
</tr>
<tr>
<td>36</td>
<td>IHS-DIAB ACE/ARB 2007</td>
<td>HAGER@DEMO HOSPITA</td>
<td>08/28/2008@11:43:30</td>
</tr>
<tr>
<td>37</td>
<td>IHS-DIAB ASPIRIN 2009</td>
<td>HAGER@DEMO HOSPITA</td>
<td>02/04/2010@10:20:10</td>
</tr>
<tr>
<td>38</td>
<td>IHS-DIAB EYE EXAM 2007</td>
<td>HAGER@DEMO HOSPITA</td>
<td>08/28/2008@11:44:46</td>
</tr>
<tr>
<td>39</td>
<td>IHS-DIAB HGBA1C 2007</td>
<td>HAGER@DEMO HOSPITA</td>
<td>08/28/2008@11:45:18</td>
</tr>
<tr>
<td>40</td>
<td>IHS-DIAB MICROALBUMIN 2007</td>
<td>HAGER@DEMO HOSPITA</td>
<td>08/28/2008@11:45:38CFE</td>
</tr>
</tbody>
</table>

Create Exchange File Entry | IH Installation History
CHF Create Host File | LHF Load Host File
CMM Create MailMan Message | LMM Load MailMan Message
DFE Delete Exchange File Entry | LR List Reminder Definitions
IFE Install Exchange File Entry | RI Reminder Definition Inquiry
Select Action: Next Screen// | DFE
Select Entry(s): (1-10): 31-40 | Enter the number(s) of the reminder(s) that you wish to delete. You may Enter a number, a list, or a range e.g., 1,3,5 or 2-4,8.

Figure 8-1: Removing Old Reminders from Exchange
9.0 Dialog Preparation

The following is information about Step 6: Dialog Preparation.

If your site has NOT made any changes to the existing national dialogs, skip to the next section.

If your site has made local changes to existing national dialogs, especially by adding ADDITIONAL FINDINGS to dialogs, there might be some problems. Print the following Fileman search to look for these findings. Remove them from the elements before installing the reminder. You can add them back after installation.

```plaintext
Select OPTION: 3 SEARCH FILE ENTRIES
OUTPUT FROM WHAT FILE: PACKAGE// REMINDER DIALOG (330 entries)
-A- SEARCH FOR REMINDER DIALOG FIELD: ADDITIONAL FINDINGS (multiple)
-A- SEARCH FOR REMINDER DIALOG ADDITIONAL FINDINGS SUB-FIELD: ?
Answer with ADDITIONAL FINDINGS SUB-FIELD NUMBER, or LABEL:
   .01 ADDITIONAL FINDINGS
-A- SEARCH FOR REMINDER DIALOG ADDITIONAL FINDINGS SUB-FIELD: .01
ADDITIONAL FINDINGS
-A- CONDITION: 'NULL <- "not null"
-B- SEARCH FOR REMINDER DIALOG ADDITIONAL FINDINGS SUB-FIELD:
-B- SEARCH FOR REMINDER DIALOG FIELD:
IF: A// REMINDER DIALOG ADDITIONAL FINDINGS NOT NULL
DO YOU WANT THIS SEARCH SPECIFICATION TO BE CONSIDERED TRUE FOR CONDITION -A-
1) WHEN AT LEAST ONE OF THE 'ADDITIONAL FINDINGS' MULTIPLES SATISFIES IT
2) WHEN ALL OF THE 'ADDITIONAL FINDINGS' MULTIPLES SATISFY IT
3) WHEN ALL OF THE 'ADDITIONAL FINDINGS' MULTIPLES SATISFY IT,
   OR WHEN THERE ARE NO 'ADDITIONAL FINDINGS' MULTIPLES
CHOOSE 1-3: 1// 1
STORE RESULTS OF SEARCH IN TEMPLATE:
SORT BY: NAME//
START WITH NAME: FIRST//
FIRST PRINT FIELD: NAME
THEN PRINT FIELD: ADDITIONAL FINDINGS (multiple)
THEN PRINT ADDITIONAL FINDINGS SUB-FIELD: .01 ADDITIONAL FINDINGS
THEN PRINT ADDITIONAL FINDINGS SUB-FIELD:
THEN PRINT FIELD:
Heading (S/C): REMINDER DIALOG SEARCH Replace
DEVICE: CONSOLE Right Margin: 60//
REMINDER DIALOG SEARCH MAY 19,2009 14:00 PAGE 1
NAME
ADDITIONAL FINDINGS
--------------------------------------------------------------------
EX DEPRESSION
V79.0
IM INFLUENZA DONE
V04.8
IM INFLUENZA NASAL
V04.8
IM INFLUENZA SPLIT
V04.8
IM INFLUENZA WHOLE
V04.8
5 MATCHES FOUND
```

Figure 9-1: Fileman search
Addendum to Installation Notes
July 2012

BEH>REM>DLG>DLG ... CV (change view) to Element or Group (depending on whether the component with the additional finding is an element of a group)

Dialog List

+Item Dialog Name                              Dialog type          Status
609  IM INFLUENZA DONE                       Dialog Element       
610  IM INSTRUCTIONS                         Dialog Element       
611  IM IPV DONE                              Dialog Element       
612  IM IPV NOT DONE                          Dialog Element       
613  IM MMR DONE                              Dialog Element       
614  IM MMR NOT DONE                          Dialog Element       
615  IM PED CONTRAINDICATION SCREEN           Dialog Element       
616  IM PEDIARIX DONE                         Dialog Element       
617  IM PEDIARIX NOT DONE                    Dialog Element       
618  IM PNEUMO CRITERIA2                     Dialog Element       
619  IM PNEUMO CRITERIA3                     Dialog Element       
620  IM PNEUMO-PS CONTRAINDICATION           Dialog Element       
621  IM PNEUMO-PS CRITERIA1                  Dialog Element       
622  IM PNEUMOVACCINE NOT DONE               Dialog Element       
623  IM VARICELLA DONE                       Dialog Element       
624  IM VARICELLA NOT DONE                   Dialog Element       

+         + Next Screen   - Prev Screen   ?? More Actions                    >>>
AD   Add                  CV   Change View          INQ  Inquiry/Print
CO   Copy Dialog          PT   List/Print All       QU   Quit

Select Item: Next Screen//609 <<< select the dialog element to edit

Dialog Name:  IM INFLUENZA DONE

CURRENT DIALOG ELEMENT/GROUP NAME: IM INFLUENZA DONE
Used by:  GRP FLU SHOT (Dialog Group)

NAME: IM INFLUENZA DONE//
DISABLE:
CLASS: LOCAL//
SPONSOR:
REVIEW DATE:
RESOLUTION TYPE: DONE AT ENCOUNTER//
ORDERABLE ITEM:
FINDING ITEM: INFLUENZA [TIV], SEASONAL, INJ//
DIALOG/PROGRESS NOTE TEXT:
Influenza immunization was administered today.

Edit? NO//
ALTERNATE PROGRESS NOTE TEXT:
No existing text
Edit? NO//
EXCLUDE FROM PROGRESS NOTE:
SUPPRESS CHECKBOX:
Select ADDITIONAL FINDINGS: V04.8// @
SURE YOU WANT TO DELETE? Y
Select ADDITIONAL FINDINGS: ? <<< check for any more additional findings. Here there are none.

You may enter a new ADDITIONAL FINDINGS, if you wish
Enter additional finding items for this dialog element.
Enter one of the following:
ED.EntryName to select a EDUCATION TOPICS
IM.EntryName to select a IMMUNIZATIONS
ST.EntryName to select a SKIN TEST
EX.EntryName to select a EXAM
HF.EntryName to select a HEALTH FACTORS
CPT.EntryName to select a PROCEDURE
ICD9.EntryName to select a ICD9 DIAGNOSIS
VM.EntryName to select a VITAL TYPE
Q.EntryName to select a ORDER DIALOG
MT.EntryName to select a MEASUREMENT

To see the entries in any particular file type <Prefix.?>

Select ADDITIONAL FINDINGS:^ <enter>

Figure 9-2: Removal of additional findings
10.0 **Install the KIDS Build**

The following is information about Step 7: Install the KIDS Build.

Installation of PXRM 1008 should be done by the appropriate IRM personnel using the instructions in the patch notes.

Installation of patch 1008 will put the reminders into the REMINDER EXCHANGE file. It does NOT install them. The new reminders will not work until they are installed and activated.

**Note:** After the KIDS build has been installed, the computed findings that are used to check the immunization forecaster will not function properly until the new immunization reminders are installed through reminder exchange.

You must install the immunization reminders through exchange immediately if you have any immunization reminders deployed. You do not have to move these into production immediately but should replace your old immunization reminders with the new ones in the near future. The look up to the immunization forecaster will work in your old reminders but much of the cohort logic has been updated in the newest set of reminders.
11.0 Install the Reminder

The following is information about Step 8: Install the Reminder.

Follow these instructions to install the national reminders. The Clinical Application Coordinator or other designated person should then install them using REMINDER EXCHANGE.

**Note:** Once the patch has been installed, the immunization reminders will not function properly until they are installed through exchange.

11.1 Programmer Access

Programmer access is required to install the reminders that contain a new computed finding.

If you do not have programmer access (@ level fileman access) you will see the following message when you are installing reminders that contain a new computed finding:

```
Only programmers can install routines.
Only programmers can install Reminder Computed Findings.
```

If there are no new computed findings packed in the reminder then ignore the message and continue through the installation process. If the computed finding was previously installed there will be an X under the column “Exists” on the right of the Reminder Computed Finding in the Reminder Exchange.
If there are new computed findings and the Clinical Applications Coordinator does not have @ access, follow these steps to complete the installation.

Ask the site manager or other personnel who has Programmer Access to log in under their credentials, navigate to the Reminder Exchange and use IS “Install Selected” and install the new Computed Findings following the instructions in the next section. *NEVER OVERWRITE A ROUTINE!* After the Computed Findings are installed, the Clinical Applications Coordinator may then install the new reminders.

Reminders with New Computed Findings:

- IHS-DIAB ANTIPLT KNOWN CVD 2011
- IHS-DIAB ASPIRIN FEMALE 2011
- IHS-DIAB ASPIRIN MALE 2011
- IHS-ANTICOAG CBC 2011
- IHS-ANTICOAG DURATION OF TX 2011
- IHS-ANTICOAG THERAPY END DATE 2011
- IHS-ANTICOAG OCCULT BLOOD 2011
- IHS-ANTICOAG UA 2011
- IHS-ANTICOAG INR GOAL 2011
- IHS-ANTICOAG THERAPY END DATE 2011
- IHS-CHLAMYDIA SCREEN 2011
- IHS-CVD 2011
- IHS-FALL RISK SCREEN 2011
- IHS-HIV SCREEN 2011
- IHS-NEWBORN HEARING SCREEN 2011
11.2 Installing the Reminder

1. Select Reminder Exchange from the Reminder Configuration menu. You will be presented with a list of packed reminders that reside in the RPMS file system.

<table>
<thead>
<tr>
<th>Entry</th>
<th>Source</th>
<th>Date Packed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>IHS-ACTIVITY SCREEN 2011</td>
<td>USER@DEMO HOSPITA 01/13/2012@09:00:36</td>
</tr>
<tr>
<td>2</td>
<td>IHS-ALCOHOL SCREEN 2011</td>
<td>USER@DEMO HOSPITA 01/13/2012@09:01:11</td>
</tr>
<tr>
<td>3</td>
<td>IHS-ALLERGY 2011</td>
<td>USER@DEMO HOSPITA 01/13/2012@09:01:34</td>
</tr>
<tr>
<td>4</td>
<td>IHS-ANTICOAG CBC 2011</td>
<td>USER@DEMO HOSPITA 01/13/2012@09:01:51</td>
</tr>
<tr>
<td>5</td>
<td>IHS-ANTICOAG DURATION OF TX</td>
<td>USER@DEMO HOSPITA 01/13/2012@09:02:07</td>
</tr>
<tr>
<td>6</td>
<td>IHS-ANTICOAG INR GOAL 2011</td>
<td>USER@DEMO HOSPITA 01/13/2012@09:02:30</td>
</tr>
<tr>
<td>7</td>
<td>IHS-ANTICOAG OCCULT BLOOD 2</td>
<td>USER@DEMO HOSPITA 01/13/2012@09:03</td>
</tr>
<tr>
<td>8</td>
<td>IHS-ANTICOAG THERAPY END DA</td>
<td>USER@DEMO HOSPITA 01/13/2012@09:03:20</td>
</tr>
<tr>
<td>9</td>
<td>IHS-ANTICOAG UA 2011</td>
<td>USER@DEMO HOSPITA 01/13/2012@09:03:35</td>
</tr>
<tr>
<td>10</td>
<td>IHS-ASBI BNI 2011</td>
<td>USER@DEMO HOSPITA 01/13/2012@09:03:56</td>
</tr>
</tbody>
</table>

Tip: Use the up/down arrows to scroll through the list. If you are searching for a specific reminder, use the command SL to search for the reminder name.

2. Select IFE – Install Exchange File Entry to install the reminder.

3. Enter the number of the reminder to install.
3 IHS-ALLERGY 2011   USER@DEMO HOSPITA   01/13/201209:01:34
4 IHS-ANTICOAG CBC 2011   USER@DEMO HOSPITA   01/13/201209:01:51
5 IHS-ANTICOAG DURATION OF TX   USER@DEMO HOSPITA   01/13/201209:02:07
6 IHS-ANTICOAG INR GOAL 2011   USER@DEMO HOSPITA   01/13/201209:02:30
7 IHS-ANTICOAG OCCULT BLOOD 2   USER@DEMO HOSPITA   01/13/201209:03
8 IHS-ANTICOAG THERAPY END DA   USER@DEMO HOSPITA   01/13/201209:03:20
9 IHS-ANTICOAG UA 2011   USER@DEMO HOSPITA   01/13/201209:03:35
10 IHS-ASBI BNI 2011   USER@DEMO HOSPITA   01/13/201209:03:56

Figure 11-4: Installing Reminders

4. Use the up and down arrows to view the individual components of the reminder. Before starting an installation, you should examine the list of components in the packed reminder and determine which ones already exist on your system. You should decide what to do with each component and have a plan of action before proceeding with the installation.

<table>
<thead>
<tr>
<th>Component/File Entry</th>
<th>Category</th>
<th>Exists</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reminder: IHS-DEPRESSION SCREEN 2011</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Source: USER,DEMO at DEMO HOSPITAL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date Packed: 01/13/201209:10:18</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Description: Yearly screening for depression starting at age 18.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Keywords: No keywords given</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Components: ROUTINE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 BPXRMPCC</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>EXAM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DEPRESSION SCREENING</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>MEASUREMENT TYPE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PHQ2</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>REMINDER COMPUTED FINDINGS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 IHS-DEPRESSION 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TIU TEMPLATE FIELD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 IHS ADDL SIGN</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>4 GEN TEXT BOX LONG4</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>5 IHS PHQ9 ANSWERS</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>6 WSP PHQ2 SCORING</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>REMINDER DEFINITION</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
5. INSTALL COMPUTED FINDING ONLY - There are two choices, IA or IS. Choose IS to install selected components. During installation, the application will ask what you want to do about all the elements in this reminder. If the item exists on your system, the default will be to skip installing it again. If it is new, the default is to install it.

- Select the component you want to install (#2)
- Take the default

Figure 11-5: Sample Exchange File Components window

6. INSTALL REMINDER AND DIALOG - There are two choices, IA or IS. Choose IA to install all components. During installation, the application will ask you want to do about all the elements in this reminder. If the item exists on your system, the default will be to skip installing it again. If it is new, the default is to install it.

- Take all the defaults as you load the reminder unless you have loaded a previous version of reminders. If you’ve loaded a previous version of the reminders always re-install the reminder definition itself but not any of the other elements.

Caution: Never overwrite a routine!

Figure 11-6: Remaining Instructions
REMINDER COMPUTED FINDINGS entry IHS-DEPRESSION 2009 is NEW, what do you want to do?

Select one of the following:

C  Create a new entry by copying to a new name
I  Install or Overwrite the current entry
Q  Quit the install
S  Skip, do not install this entry

Enter response: I// Take the default. If this is a new component, it will default to “install”. If you’ve installed this reminder before, it will default to SKIP.

TIU TEMPLATE FIELD entry IHS ADDL SIGN already EXISTS, what do you want to do?

Select one of the following:

C  Create a new entry by copying to a new name
I  Install or Overwrite the current entry
Q  Quit the install
S  Skip, do not install this entry

Enter response: S// Take the default. If this is a new component, it will default to “install”. If you’ve installed this reminder before, it will default to SKIP.

TIU TEMPLATE FIELD entry GEN TEXT BOX LONG4 already EXISTS, what do you want to do?

Select one of the following:

C  Create a new entry by copying to a new name
I  Install or Overwrite the current entry
Q  Quit the install
S  Skip, do not install this entry

Enter response: S// Take the default. If this is a new component, it will default to “install”. If you’ve installed this reminder before, it will default to SKIP.

TIU TEMPLATE FIELD entry IHS PHQ9 ANSWERS already EXISTS, what do you want to do?

Select one of the following:

C  Create a new entry by copying to a new name
I  Install or Overwrite the current entry
Q  Quit the install
S  Skip, do not install this entry

Enter response: S// Take the default. If this is a new component, it will default to “install”. If you’ve installed this reminder before, it will default to SKIP.

TIU TEMPLATE FIELD entry WSP PHQ2 SCORING already EXISTS, what do you want to do?

Select one of the following:
Addendum to Installation Notes

Install the Reminder

July 2012

100

The update failed, UPDATE^DIE returned the following error message:

MSG("DIERR")=1^
MSG("DIERR",1)=701
MSG("DIERR",1,"PARAM",0)=3
MSG("DIERR",1,"PARAM",3)=403.9
MSG("DIERR",1,"PARAM","FIELD")=.01
MSG("DIERR",1,"PARAM","FILE")=811.23102
MSG("DIERR",1,"TEXT",1)=The value '403.9 ' for field SELECTABLE DIAGNOSIS in SEL
ECTABLE DIAGNOSIS SUB-FIELD in file REMINDER TAXONOMY is not valid.
MSG("DIERR","E",701,1)=

REMINDER TAXONOMY entry IHS-HYPERTENSION 2007 did not get installed!

Figure 11-7: Example of reminder installation

7. If you are installing the Depo Provera Reminder, create the PXRM Depo Provera health summary object as described in Chapter 7.

8. Proceed to the next section to install the dialogs.

11.3 Taxonomy Error

A taxonomy is a selection of ICD0, ICD9, or CPT codes. The user inputs them from the starting code to the ending code. One taxonomy can have multiple selection lists of codes. There is a secondary file that stores every entry between the starting and ending codes. Therefore an error in any code in the interval could cause the install to fail. If a site has two entries of the same code or the computer cannot tell the difference between two codes, the install will fail.

This section describes an error that may occur during install and how to fix the error by manually creating the taxonomy and re-installing the reminder.
Examine the above error message for the reason.

Figure 11-8: Taxonomy Error Example

11.3.1 Create the Taxonomy Manually

1. Write down the exact name of the taxonomy that displayed in the error.

2. Finish the installation of the reminder

3. Create the taxonomy: Reminder Configuration Menu | Reminder Taxonomy Management | Edit Taxonomy Item

4. NOTE: Enter the EXACT name of the taxonomy from the error.

5. Use the descriptions of the taxonomies found in the Taxonomy section (appendix) of this manual to enter all the groupings of ICD0, ICD9, and/or CPT codes that apply to this taxonomy. For a single entry, the low value and the high value are the same entry. For ranges, enter the lowest entry in the range and then the highest. The computer will add all codes in that range.

Select Reminder Taxonomy: IHS-HYPERTENSION 2007

Are you adding IHS-HYPERTENSION 2007 as a new REMINDER TAXONOMY? No/\YES

NAME: IHS-HYPERTENSION 2007 Replace

BRIEF DESCRIPTION:

CLASS: LOCAL/

SPONSOR:

REVIEW DATE:

PATIENT DATA SOURCE: /EN,PL <-

USE INACTIVE PROBLEMS:

INACTIVE FLAG:

ICD0 Range of Coded Values

Select ICD0 LOW CODED VALUE:

ICD9 Range of Coded Values

Select ICD9 LOW CODED VALUE: //401.0 <-

ICD9 LOW CODED VALUE: //401.0

ICD9 HIGH CODED VALUE: //405.99 <-

Select ICD9 LOW CODED VALUE:

CPT Range of Coded Values

Select CPT LOW CODED VALUE:

Figure 11-9: Adding a Taxonomy

6. Return to Reminder Exchange and reinstall the reminder. Accept all of the defaults! When finished, all of the items should have an X in the Exists column, including the taxonomy and the reminder definition.

<table>
<thead>
<tr>
<th>Component File</th>
<th>Entry</th>
<th>Category</th>
<th>Exists</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEASUREMENT TYPE</td>
<td>BF</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>REMINDER TAXONOMY</td>
<td>IHS-HYPERTENSION 2007</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>2</td>
<td>IHS-DIABETES DX 2007</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---------------------</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>REMINDER TERM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>IHS-HIGH DIASTOLIC</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>IHS-HIGH BP 2007</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>REMINDER DEFINITION</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>IHS-BLOOD PRESSURE 2011</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>REMINDER DIALOG</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>+</td>
<td>+ Next Screen - Prev Screen ?? More Actions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IA</td>
<td>Install all Components</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IS</td>
<td>Install Selected Component</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Select Action: Next Screen//</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Figure 11-10: Sample Exchange File Components Window Showing X in Exists Column
12.0 Install the Dialogs

The following information is about Step 9: Install the Dialogs.

Note: The following dialogs were not intended to be setup as reminders. Do not link these dialogs to their reminder. The reminder is a blank reminder that was used as a vehicle to import/export the dialog. You do NOT need to install the reminder. You can use IS to install selected, and install only the dialog. Follow the instructions in the TIU Reminder Dialogs Section to set these up as templates instead of Reminders.

IHS-ASBI BNI 2011
IHS-ASBI SCREENING 2011
IHS-ASTHMA INTAKE 2011
IHS-MED ED 2011
IHS-MED THERAPY MNGT 2011
IHS-PED PEDIARIX IMMUN 2011
IHS-PHN HOSP DC VISIT 2011
IHS-PHQ9 SCREEN 2011
IHS-SCREENING BUNDLE 2011

1. In reminder exchange, after installing the reminder, you will be presented with the Dialog Components screen.

2. Choose IA: Install ALL.

3. One of the prompts will ask you which reminder to attach the dialog.

4. The dialogs and the reminders have the same name so they can be easily linked.

5. After installing, make sure that there is an X under the Exists column on the screen.

<table>
<thead>
<tr>
<th>Item</th>
<th>Seq.</th>
<th>Dialog Findings</th>
<th>Type</th>
<th>Exists</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>IHS-BLOOD PRESSURE 2011</td>
<td>dialog</td>
<td></td>
</tr>
</tbody>
</table>
Addendum to Installation Notes
Install the Dialogs
July 2012

104
Addendum to Installation Notes

July 2012

105
Addendum to Installation Notes
July 2012

106

Figure 12-6: Sample Dialog Edit List window

1. Select the dialog. It will say Disabled instead of Linked.

2. Choose ED (Edit/Delete Dialog).

3. The second prompt will have: DISABLE: DISABLED IN EXCHANGE Replace.

4. Enter @ to delete this and say YES when it asks SURE YOU WANT TO DELETE?

5. Type ^ to quit editing.

6. The dialog should now say Linked.

12.1.2 Dialog Doesn’t Link Automatically

Follow these steps if you do not see a dialog name under Linked Dialog Name and Dialog status:

<table>
<thead>
<tr>
<th>Item</th>
<th>Reminder Name</th>
<th>Linked Dialog Name &amp; Dialog Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>IHS-ANTICOAG DURATION OF TX 2011</td>
<td>IHS-ANTICOAG DURATION OF TX</td>
</tr>
<tr>
<td>9</td>
<td>IHS-ANTICOAG INR GOAL 2011</td>
<td>IHS-ANTICOAG INR GOAL 2011</td>
</tr>
<tr>
<td>10</td>
<td>IHS-ANTICOAG OCCULT BLOOD 2011</td>
<td>IHS-ANTICOAG OCCULT BLOOD 2</td>
</tr>
<tr>
<td>11</td>
<td>IHS-ANTICOAG THERAPY END DATE 2011</td>
<td>IHS-ANTICOAG THERAPY END DA</td>
</tr>
<tr>
<td>12</td>
<td>IHS-ANTICOAG UA 2011</td>
<td>IHS-ANTICOAG UA 2011</td>
</tr>
<tr>
<td>13</td>
<td>IHS-ASBI BNI 2011</td>
<td>IHS-ASBI BNI 2011</td>
</tr>
</tbody>
</table>
Figure 12-7: Reminder Dialog – Linking dialog to the reminder
13.0 Dialog Parameter Changes

The following describes Step 10: Dialog Parameter Changes. It describes two modifications to the dialog parameters that must be made after installing the dialogs in this patch.

13.1 Disable the Diagnoses Code for Historical Entries

Reminder Configuration | Reminder Dialog Management | Dialog Parameters | General Finding Type Parameters

<table>
<thead>
<tr>
<th>General Finding Type Parameters</th>
</tr>
</thead>
<tbody>
<tr>
<td>HFR  Health Factor Resolutions</td>
</tr>
<tr>
<td>ITM  Finding Item Parameters</td>
</tr>
<tr>
<td>RES  Reminder Resolution Statuses</td>
</tr>
<tr>
<td>TAX  Taxonomy Dialog Parameters</td>
</tr>
<tr>
<td>TYP  General Finding Type Parameters</td>
</tr>
</tbody>
</table>

Select Dialog Parameters Option: TYP

Finding Type Parameters

Item Finding Type Parameter

1  ASTHMA CONTROL
2  PROCEDURE (CPT)
3  EDUCATION TOPIC
4  EXAM
5  HEALTH FACTOR
6  IMMUNIZATION
7  ORDERABLE ITEM
8  DIAGNOSIS (POV)  Select 8
9  REFUSAL TYPE
10  SKIN TEST
11  VITAL MEASUREMENT

<table>
<thead>
<tr>
<th>FINDING TYPE PARAMETER NAME: POV - Diagnosis (Taxonomy)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resolution Status</td>
</tr>
<tr>
<td>1 DONE AT ENCOUNTER</td>
</tr>
<tr>
<td>.</td>
</tr>
<tr>
<td>1] PXRM PRIMARY DIAGNOSIS</td>
</tr>
<tr>
<td>2] PXRM COMMENT</td>
</tr>
<tr>
<td>3] PXRM ADD TO PROBLEM LIST</td>
</tr>
<tr>
<td>2 DONE ELSEWHERE (HISTORICAL) History of Diagnosis/</td>
</tr>
<tr>
<td>.</td>
</tr>
<tr>
<td>1] PXRM VISIT DATE</td>
</tr>
<tr>
<td>2] PXRM OUTSIDE LOCATION</td>
</tr>
<tr>
<td>3] PXRM COMMENT</td>
</tr>
<tr>
<td>4] PXRM PRIMARY DIAGNOSIS</td>
</tr>
</tbody>
</table>
5] PXRM ADD TO PROBLEM LIST

+ Next Screen    - Prev Screen    ?? More Actions    >>>
INQ Inquiry/Print    QU Quit

Select number of Resolution Status to Edit: Quit//2
DONE ELSEWHERE

ED - EDIT FINDING TYPE PARAMETER

FINDING TYPE PARAMETER NAME: POV - Diagnosis (Taxonomy)
RESOLUTION STATUS : DONE ELSEWHERE (HISTORICAL)

DISABLE RESOLUTION STATUS: DISABLED <=
DISABLE RESOLUTION STATUS: DISABLED
PREFIX TEXT: History of Diagnosis Replace "uhat" to quit

Figure 13-1: Beginning instructions

FINDING TYPE PARAMETER NAME: POV - Diagnosis (Taxonomy)

Resolution Status Prefix//Suffix & Prompts/Values/Actions Status
1 DONE AT ENCOUNTER Diagnosis recorded at encounter/ Enabled
/. 1] PXRM PRIMARY DIAGNOSIS 2] PXRM COMMENT
3] PXRM ADD TO PROBLEM LIST

2 DONE ELSEWHERE (HISTORICAL) History of Diagnosis/ Disabled
/. 1] PXRM VISIT DATE 2] PXRM OUTSIDE LOCATION
3] PXRM COMMENT 4] PXRM PRIMARY DIAGNOSIS
5] PXRM ADD TO PROBLEM LIST

+ Next Screen    - Prev Screen    ?? More Actions    >>>
INQ Inquiry/Print    QU Quit
Select number of Resolution Status to Edit: Quit/

Figure 13-2: Example of Disabling the Diagnosis Code for Historical Entries

13.2 Editing Asthma Diagnosis Taxonomy Dialog

Reminder Configuration | Reminder Dialog Management | Dialog Parameters | General Finding Type Parameters

General Finding Type Parameters

HFR Health Factor Resolutions
ITM Finding Item Parameters

Addendum to Installation Notes
July 2012

Dialog Parameter Changes

109
Addendum to Installation Notes
July 2012

Figure 13-3: Editing the Asthma 2007 Dialog Header
14.0 Review Reminder Terms

The following is information about Step 11: Review Reminder Terms. It describes how to review and populate reminder terms.

Reminder terms that are education topics, exams, health factors or VA drug classes are installed automatically when the build is installed and do not need to be edited. Reminder terms that are laboratory tests or individual drugs need to be edited by the site. Since each site has different lab tests or drugs, these terms come empty and therefore, reminders will not resolve until they are populated.

The following are reminder terms that need to be checked in PXRM 1.5p1008. If you used OVERWRITE when installing the term, you may have overwritten a term that you had previously populated. Please refer to the Appendix for a detailed list of all reminder terms and their contents.

IHS-ASPIRIN
IHS-DEPO PROVERA
IHS-DEPO PROVERA ORDERABLE ITEM
IHS-DIAB NEPHROPATHY LABS
IHS-EGFR
IHS-FECAL OCCULT BLOOD
IHS-HGBA1C
IHS-HGBA1C REEVALUATE
IHS-LIPID LAB TESTS
IHS-MAMMOGRAM TERMS
IHS-PAP SMEAR
IHS-CLOPIDOGREL
IHS-URINE ALBUMIN

1. Reminder Configuration Menu | Reminder Term Management | Inquire about Reminder Term menu option.

2. Review the term first using the “Inquire about Reminder Term” menu option.

<table>
<thead>
<tr>
<th>Reminder Term Management</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPY</td>
</tr>
<tr>
<td>EDT</td>
</tr>
<tr>
<td>INQ</td>
</tr>
</tbody>
</table>

Select Reminder Term Management Option: INQ

Inquire about Reminder Term
Select Reminder Term: IHS-HGBA1c
1 IHS-HGBA1c VISN
Addendum to Installation Notes

Review Reminder Terms

July 2012

112

Figure 14-1: Beginning instructions

3. Edit the Reminder: Select “Reminder Term Edit” from the Reminder Term Management Menu

CPY    Copy Reminder Term
EDT    Reminder Term Edit
INQ    Inquire about Reminder Term

Select Reminder Term Management Option EDT

Select Reminder Term:    IHS-HGBA1C     VISN
...OK? Yes//   (Yes)

NAME: IHS-HGBA1C//
CLASS: VISN//
REVIEW DATE:
DESCRIPTION:
The lab tests at a site that are the hemoglobin A1c test

Edit? NO//
Select FINDING ITEM: // ??

Choose from:
HGBA1C
HGB A1C (REF)
HGB A1C (WH)

You may enter a new FINDINGS, if you wish
Enter one of the following:
DR.EntryName to select a DRUG
ED.EntryName to select a EDUCATION TOPIC
EX.EntryName to select a EXAM
HF.EntryName to select a HEALTH FACTOR
IM.EntryName to select a IMMUNIZATION
LT.EntryName to select a LABORATORY TEST
MT.EntryName to select a MEASUREMENT TYPE
OI.EntryName to select a ORDERABLE ITEM
RP.EntryName to select a RADIOLOGY PROCEDURE
CF.EntryName to select a REMINDER COMPUTED FINDING
TX.EntryName to select a REMINDER TAXONOMY
ST.EntryName to select a SKIN TEST
DC.EntryName to select a VA DRUG CLASS
DG.EntryName to select a VA GENERIC
VM.EntryName to select a VITAL MEASUREMENT

To see the entries in any particular file type <Prefix.?>

If you simply enter a name then the system will search each of
the above files for the name you have entered. If a match is
found the system will ask you if it is the entry that you desire.

However, if you know the file the entry should be in, then you can
speed processing by using the following syntax to select an entry:
<Prefix>.<entry name>
or
<Message>.<entry name>
or
<File Name>.<entry name>

Also, you do NOT need to enter the entire file name or message
to direct the look up. Using the first few characters will suffice.

Select FINDING ITEM: HGBA1C// LT.HGBA1C

Searching for a LABORATORY TEST, (pointed-to by FINDING ITEM)
HGBA1C
...OK? Yes// YES
FINDING ITEM: HGBA1C//
EFFECTIVE PERIOD:
USE INACTIVE PROBLEMS:
WITHIN CATEGORY RANK:
EFFECTIVE DATE:
MH SCALE:
CONDITION:
CONDITION CASE SENSITIVE:
RX TYPE:
Select FINDING ITEM:
Input your edit comments.
Edit? NO//

Figure 14-2: Adding a lab test to a lab reminder term

Important: If there is more than one test that will satisfy the
reminder, enter each one!
15.0 Manually Update Dialogs

The following is information about Step 12: Manually Update Dialogs

If your site has NOT made any changes to the existing national dialogs, skip to the next section.

If you removed additional findings in Step 5, then you might want to add them back in. Consider manually updating the dialogs. If you’ve modified a dialog, installation of a new dialog element/group with the same name from the exchange will overwrite:

a. any populated field resolution, finding item, dialog text, etc.

b. blank fields do not overwrite anything and will not remove additional findings if you added them previously. This can cause errors on install and/or require manual updating.
16.0 EHR Reminder Configuration

The following is information about Step 13: EHR Reminder Configuration

It describes how to configure the Electronic Health Record to display the reminders. Sites can choose to activate the reminders just for specific users during a testing phase. If needed, add the REMINDER COMPONENTS to the health summary so they can be seen and printed on the Reports tab.

This section describes how to remove the old reminders from the EHR and add the new ones. If your site does not use the reminder, then do not add the reminder to EHR because it will always show up as due.

Follow these steps to remove the old reminders from the display:

1. From EHR, click on the reminder clock

2. Select Action | Edit Cover Sheet Reminder List. Reminders can be edited for the System, Division, Service, Location, User Class or User. Sites can choose to activate the reminders for specific users during a testing phase.

3. Sites should remove old reminders from the System Level once they are ready to deploy the new reminders across the facility. Double click on the old reminder(s) listed in the bottom right pane to remove it from the cover sheet list.

4. Select the reminders with the date 2011 from the “Available Reminders & Categories” column and double click to add them to the System Level Reminders column.

Note: The IHS-IMMUNIZATION FORECAST 2011 reminder must be at the top of the list.
Figure 16-1: Clinical Reminders and Reminder Categories displays on Cover Sheet window

Note: The following dialogs were not intended to be setup as reminders. Do not link these dialogs to their reminder. The reminder is a blank reminder that was used as a vehicle to import/export the dialog. Follow the instructions in the TIU Reminder Dialogs Section to set these up as templates instead of Reminders.

IHS-ASBI BNI 2011
IHS-ASBI SCREENING 2011
IHS-ASTHMA INTAKE 2011
IHS-MED ED 2011
IHS-MED THERAPY MNGT 2011
IHS-PED PEDIARIX IMMUN 2011
IHS-PHN HOSP DC VISIT 2011
IHS-PHQ9 SCREEN 2011
IHS-SCREENING BUNDLE 2011
17.0 Inactivate the Old Reminder and Dialog

The following is information about Step 14: Inactivate the Old Reminder and Dialog

When the new reminders are active, inactivate the old dialogs and all the old reminders:

1. Inactivate the dialog through the Reminder Dialog menu option:

   Reminder Dialog Management | Reminder Dialogs | Select Reminder # | Select Dialog # | Edit/Delete Dialog | Enter YES at the DISABLED prompt.

   ![Figure 17-1: Dialog Edit List window](image)

   **Figure 17-1: Dialog Edit List window**

2. Use the Activate/Inactivate Reminders Menu Option to inactivate the Reminder:

   RPMS-EHR Configuration Master Menu Option | Reminder Managers Menu Option | Reminder Definition Management | Activate/Inactivate Reminders

   ```
   DEMO INDIAN HOSPITAL          RPMS-EHR Management                Version 1.1
   Reminder Definition Management

   CPY    Copy Reminder Definition
   EDT    Add/Edit Reminder Definition
   INQ    Inquire about Reminder Definition
   LST    List Reminder Definitions
   RA    Activate/Inactivate Reminders <--
   
   Select Reminder Definition Management Option: RA

   select REMINDER DEFINITION NAME: IHS-ASTHMA CONTROL
   1   IHS-ASTHMA CONTROL 2009   NATIONAL
   ```
Figure 17-2: Inactivating the Old Reminder and Dialog

3. You may wish to print a fileman report that lists all of your Active Reminder Definitions:

Generate a list of Active Clinical Reminders in Fileman
Select Search Template System Option: fgen  FileMan (General)

1. Enter or Edit File Entries
2. Print File Entries
3. Search File Entries
4. Inquire to File Entries

Select FileMan (General) Option: 3

<table>
<thead>
<tr>
<th>Prompt</th>
<th>User entry</th>
</tr>
</thead>
<tbody>
<tr>
<td>OUTPUT FROM WHAT FILE: REPRODUCTIVE FACTORS//REMINDER DEFINITION</td>
<td>REMINDER DEFINITION</td>
</tr>
<tr>
<td>-A- SEARCH FOR REMINDER DEFINITION FIELD:</td>
<td>1.6</td>
</tr>
<tr>
<td>-A- CONDITION:</td>
<td>Null</td>
</tr>
<tr>
<td>-B- SEARCH FOR REMINDER DEFINITION FIELD:</td>
<td>&lt;enter&gt;</td>
</tr>
<tr>
<td>IF: A// INACTIVE FLAG NULL</td>
<td>&lt;enter&gt;</td>
</tr>
<tr>
<td>STORE RESULTS OF SEARCH IN TEMPLATE:</td>
<td>&lt;enter&gt;</td>
</tr>
<tr>
<td>SORT BY: NAME//</td>
<td>&lt;enter&gt;</td>
</tr>
<tr>
<td>START WITH NAME: FIRST//</td>
<td>&lt;enter&gt;</td>
</tr>
<tr>
<td>FIRST PRINT FIELD:</td>
<td>.01;L50</td>
</tr>
<tr>
<td>THEN PRINT FIELD:</td>
<td>1.6;L10</td>
</tr>
<tr>
<td>Heading (S/C): REMINDER DEFINITION SEARCH</td>
<td>Replace...&lt;enter&gt; With Active Reminders</td>
</tr>
<tr>
<td>Replace</td>
<td>&lt;enter&gt;</td>
</tr>
<tr>
<td>STORE PRINT LOGIC IN TEMPLATE:</td>
<td>&lt;enter&gt;</td>
</tr>
<tr>
<td>DEVICE: CONSOLE   Right Margin: 80//</td>
<td>&lt;enter&gt; (to scroll on screen 0;80;99999 (if you want have session log on )</td>
</tr>
</tbody>
</table>

Figure 17-3: Generate list of Active Reminders in Fileman
Your list will look similar to this:

<table>
<thead>
<tr>
<th>Active Reminders</th>
<th>JUN 12,2012 13:06 PAGE 9</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME</td>
<td>INACTIVE</td>
</tr>
<tr>
<td>IHS-PED DT IMMUN 2012</td>
<td></td>
</tr>
<tr>
<td>IHS-PED DTAP IMMUN 2008</td>
<td></td>
</tr>
<tr>
<td>IHS-PED DTAP IMMUN 2011</td>
<td></td>
</tr>
<tr>
<td>IHS-PED DTAP IMMUN 2012</td>
<td></td>
</tr>
<tr>
<td>IHS-PED FLU IMMUN 2011</td>
<td></td>
</tr>
<tr>
<td>IHS-PED FLU IMMUN 2012</td>
<td></td>
</tr>
<tr>
<td>IHS-PED HEPA IMMUN 2011</td>
<td></td>
</tr>
<tr>
<td>IHS-PED HEPB IMMUN 2011</td>
<td></td>
</tr>
<tr>
<td>IHS-PED HEPB IMMUN 2012</td>
<td></td>
</tr>
<tr>
<td>IHS-PED HibTiter IMMUN 2011</td>
<td></td>
</tr>
</tbody>
</table>

Figure 17-4: Active Reminders list from Fileman
18.0 Setup TIU Reminder Dialogs as Templates

The following is information about Step 15:

Setup TIU Reminder Dialogs as Templates. Several TIU reminder dialogs were included in this build. Sites can create these as TIU templates using the following instructions.

1. Select the menu options: RPMS-EHR Configuration Master Menu Option | TIU Parameters ... | Reminder Dialogs Allowed as Templates

2. Add the Dialogs to the TIU parameter TIU TEMPLATE REMINDER DIALOGS

| T IU TEMPLATE REMINDER DIALOGS may be set for the following: |
|-------------------|--------------------------|
| 1 User USR [choose from NEW PERSON] |
| 3 Service SRV [choose from SERVICE/SECTION] |
| 4 Division DIV [choose from INSTITUTION] |
| 5 System SYS [DEMO.MEDSPHERE.COM] |

Enter selection: 5 System DEMO.MEDSPHERE.COM

--- Setting TIU TEMPLATE REMINDER DIALOGS for System: DEMO.MEDSPHERE.COM ---

Select Display Sequence: ?

<table>
<thead>
<tr>
<th>Display Sequence</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>561</td>
</tr>
<tr>
<td>2</td>
<td>IHS-ALLERGY 2011</td>
</tr>
<tr>
<td>3</td>
<td>IHS-PED PEDIARIX IMMUN</td>
</tr>
<tr>
<td>4</td>
<td>TEST VITAL</td>
</tr>
<tr>
<td>5</td>
<td>LOCAL EKG</td>
</tr>
<tr>
<td>6</td>
<td>TEST</td>
</tr>
<tr>
<td>7</td>
<td>GROUP ORDERS</td>
</tr>
<tr>
<td>8</td>
<td>TIU-ASTHMA DOCUMENTATION</td>
</tr>
<tr>
<td>10</td>
<td>IHS-ASBI BNI 2011</td>
</tr>
<tr>
<td>11</td>
<td>IHS-ASBI SCREENING 2011</td>
</tr>
<tr>
<td>12</td>
<td>IHS-ASTHMA INTAKE 2011</td>
</tr>
<tr>
<td>13</td>
<td>IHS-MED ED 2011</td>
</tr>
<tr>
<td>14</td>
<td>IHS-MED THERAPY MGNT 2011</td>
</tr>
</tbody>
</table>

Select Display Sequence: 15
Are you adding 15 as a new Display Sequence? Yes// YES

Display Sequence: 15// 15
Clinical Reminder Dialog: IHS-PHQ9 SCREEN 2011 reminder dialog LOCAL ...OK? Yes// (Yes)

Select Display Sequence: 16
Are you adding 16 as a new Display Sequence? Yes// YES

Display Sequence: 16// 16
Clinical Reminder Dialog: IHS-SCREENING BUNDLE 2011 reminder dialog LOCAL ...OK? Yes// (Yes)
3. In the Template Editor on the Notes Tab in TIU, you can set these templates up as Reminder templates.

4. Create a New Template and name it.
   Select the type to be Reminder Dialog from the dropdown

5. Select the dialog to attach from the other drop down menu:

6. Click Apply to save your template. It can now be used in any way that you normally use a TIU template.

18.1 IHS-ASBI BNI 2011

Alcohol documentation which includes CPT coding and education codes.
Figure 18-3: ABSI Documentation Part 1
18.2 IHS-ASBI SCREENING 2012

Alcohol Screening dialog tool with 3 different types of screening
18.3 IHS-ASTHMA INTAKE 2012

Asthma Intake tool for asthma data. Allows for input of vital signs, triggers and symptom history.
Figure 18-6: Asthma Intake Part 1
18.4 IHS-MED ED 2011

Medication counseling dialog template
18.5 IHS-MED THERAPY MNGT 2011

Dialog for documentation of medication management therapy including a patient wellness handout. Sites need a health summary object called PWH MED REC FOR MTM to load this dialog. Includes action plan, documentation of education and the CPT codes for this activity.
Figure 18-9: Medication Therapy part 1
18.6 IHS-PED PEDIARIX IMMUN 2012

This dialog is used to document the immunization. It is not intended to be used in a reminder for forecasting information. Please refer to the reminder for each individual component of this vaccine for forecasting information.
18.7 **IHS-PHN HOSPITAL DC VISIT 2011**

This dialog allows documentation of PHN Hospital discharge visit information. This extensive template allows for documentation of Occupational Health Factors, tobacco, alcohol, depression, IPV screening, functional status, and visit SOAP information.
Figure 18-12: PHN Hospital DC Visit Documentation
Figure 18-13: Screening section of the dialog
Figure 18-14: Objective section of the dialog
Figure 18-15: Assessment section of the dialog
18.8 IHS-PHQ9 SCREEN 2011

Input dialog to store results of PHQ9 screening tool. Includes a risk assessment and follow up actions.
Figure 18-17: PHQ9 part 1
This dialog was combines the ability to resolve six screening reminders at the same time: Tobacco Use, Activity Level, Alcohol, Depression, Colon Cancer, and IPV/Domestic Violence Screening. Refer to the individual screening dialogs in this section of the guide for details.

### 18.9 IHS-SCREENING BUNDLE 2011

This dialog was combines the ability to resolve six screening reminders at the same time: Tobacco Use, Activity Level, Alcohol, Depression, Colon Cancer, and IPV/Domestic Violence Screening. Refer to the individual screening dialogs in this section of the guide for details.
Figure 18-19: Screening Bundle
19.0 Reviewing the Reminder and Dialog

The following is information about Step 16: Reviewing the Reminder and Dialog.

19.1 Reminder Test

Refer to RPMS Clinical Reminders Managers Manual Setup and Maintenance guide for instructions on testing reminders.

1. Select Reminder Test (TST) from the Reminder Configuration menu.

2. Enter a patient name and the reminder.

3. Use the scroll bar to scroll backwards and view the data.

This is an example of a reminder test for IHS-ALCOHOL SCREEN 2011. This reminder is due for this patient.
Addendum to Installation Notes  
Reviewing the Reminder and Dialog  
July 2012

Figure 19-1: Reminder Test Output

This is an example of a reminder test for the IHS-LIPID FEMALE reminder. The patient has diabetes and therefore should have a lipid done yearly.

Figure 19-2: Reminder Test Output
19.2 **View Reminders Due**

Users will report when a reminder is due and should not be. They are less likely to notice and report when a reminder is not due when it should be or not applicable when it should be. The Clinical Applications Coordinator must test for this specifically or risk deploying a reminder system that will omit patients erroneously. This results in missed opportunities to screen, monitor and identify interventions for high risk patients.

Follow these steps:

1. Log into the RPMS-EHR application. If you’ve installed any new reminders/dialogs, you will need to log off and then log back on again.

2. Pick a patient who would have one of the reminders applicable and due.
   
   a. The reminder alarm clock should be RED in someone with a reminder due.
   
   b. If you click on the alarm clock, you should see a list of reminders due.
   
   c. Right-click on the reminder due and review any of the options in the drop-down menu

3. Pick a patient who would have one of the reminders applicable but not due
   
   a. The reminder alarm clock should be BLUE in someone with a reminder resolved

4. Pick a patient who would not have one of the reminders applicable
   
   a. The reminder clock should be WHITE in someone for whom the reminder is not applicable
   
   b. Be sure to check all the reminders before adding them to the system level.

19.3 **View Reminders on Cover Sheet**

Below shows Reminders that are “Due Now” or “Due Soon” on Cover Sheet.
19.4 View Reminders Icon

The reminder icon is an alarm clock. The clock appears red if reminders are due and blue if there is nothing due. Clicking on the clock displays when reminders are due and when it was last done.

Click on the reminder icon (in the toolbar) to open up the list of items to view.
Right-click on any item in the list and there will be a selection of items from which to choose.

19.4.1 Clinical Maintenance

The Clinical Maintenance dialog shows why the reminder is due. For the new reminders with computed findings, it will display only the item returned in the PCC reminder call.

The clinical maintenance displays in two places:
1. Right click on the reminder and select Clinical Maintenance
2. While processing the reminder dialog select Clinical Maintenance button from the bottom of the screen
19.4.2 Do a Reminder Inquiry

A reminder inquiry displays the reminder logic. Reminder Inquiry data can be displayed by right clicking on the reminder and selecting Reminder Inquiry.

```
IHS-EPSDT SCREENING 2011          No.  179
--------------------------------------------
Print Name:                   EPSDT Evaluation
Class:                        NATIONAL
Sponsor:
Review Date:
Usage:                        CPRS, DATA EXTRACT, REPORTS
Related VA-* Reminder:
Reminder Dialog:              IHS-EPSDT SCREENING 2011
Priority:
Reminder Description:
  Reminder for a preventative medicine evaluation for those under 20
Technical Description:
  This reminder uses a computed finding to get data from PCC Health Maintenance Reminder to resolve the reminder.
Edit History:
  Edit date:  Jan 19, 2012@16:02:33   Edit by:    JOHNSON,CAROLYN J
  Edit Comments: Exchange Install
```
Baseline Frequency:

- Do In Advance Time Frame: Do if DUE within 3 months
- Sex Specific:
- Ignore on N/A:
- Frequency for Age Range: 1 year for ages 1D to 20Y
- Match Text:
- No Match Text:

Findings:

- Finding Item: IHS-EPSDT 2009  (FI(1)=CF(39))
- Finding Type: REMINDER COMPUTED FINDING
- Use in Resolution Logic: OR

General Patient Cohort Found Text:
EPSDT Screening Definition (uses Health Maintenance Reminder logic)
- Procedures (CPT Codes): V CPT
- Age less than 1 year: New Patient 99381; Established Patient 99391
- Age 1 through 4 years: New Patient 99382; Established Patient 99392
- Age 5 through 11 years: New Patient 99383; Established Patient 99393
- Age 12 through 17 years: New Patient 99384; Established Patient 99394
- Age 18 through 20 years: New Patient 99385; Established Patient

***This reminder resolves using the RPMS data found by the PCC Health Maintenance Reminder look up***

General Patient Cohort Not Found Text:

General Resolution Found Text:

General Resolution Not Found Text:

Default PATIENT COHORT LOGIC to see if the Reminder applies to a patient: (SEX)&(AGE)

Expanded Patient Cohort Logic:
(SEX)&(AGE)

Default RESOLUTION LOGIC defines findings that resolve the Reminder:
FI(1)
Expanded Resolution Logic:
FI(IHS-EPSDT 2009)

Web Sites:
Web Site URL:
http://mchb.hrsa.gov/epsdt/

Figure 19-7: Reminder Inquiry of a Reminder

19.4.3 Look at the Reminder Icons

Below explains the various Reminder icons.
19.5 View Reminders on the Health Summary

You can also view the Reminders in a Health Summary on the Reports tab. Users can either create a VA Health Summary type for reminders or the VA Health Summary components that already exist can be added to the Ad Hoc report.

Once created the summary type is added using the parameter ORWRP HEALTH SUMMARY LIST.

If you have already added reminders to health summaries, these will need to be updated by removing the old reminders and adding in the ones that came with this patch.
19.6 View Best Practice Prompts on Health Summary

Definitions for the Best Practice Prompts are available in the iCare glossary or in the PCC Health Summary Manual:

http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf

iCare: The Best Practice Prompt tab in iCare displays a list of best practices that are recommended for specific patient.

Health Summary: The Best Practice Prompt Component displays a list of Best Practices recommended for a specific patient. This section describes how to create/modify health summary to display the Best Practice Prompts.
1. If the Best Practice Prompts do not display on the health summary, you can use the Create/Modify Health Summary Type Menu option to add the Best Practice Prompts to the summary. Alternately, create a small health summary with only Best Practice Prompts and make this available to your users using a Health Summary Button on the Toolbar in EHR.

RPMS EHR Configuration Master Menu | Report Configuration | Health Summary Configuration | IHS Health Summary Configuration | Create/Modify Health Summary Type

Health Summary: TEST

STRUCTURE:
Select HEALTH SUMMARY TYPE NAME: TEST
NAME: TEST/
LOCK://
STRUCTURE:
Order Component Max occ Time Alternate Title

GENERAL:
Clinic Displayed on outpatient components:
ICD Text Display:
Provider Narrative Displayed:
Display Provider Initials in Outpatient components:
Provider Initials displayed on Medication components:

MEASUREMENT PANELS:
<none>

LAB TEST PANELS:
+ Enter ?? for more actions

<table>
<thead>
<tr>
<th>MS</th>
<th>Modify Structure</th>
<th>FS</th>
<th>Flow Sheets</th>
<th>GI</th>
<th>General Info</th>
</tr>
</thead>
<tbody>
<tr>
<td>MP</td>
<td>Mod Meas Panel</td>
<td>HF</td>
<td>Health Factors</td>
<td>HS</td>
<td>Sample Health Summary</td>
</tr>
<tr>
<td>LP</td>
<td>Lab Panel</td>
<td>PC</td>
<td>Provider Class Scrn</td>
<td>Q</td>
<td>Quit</td>
</tr>
<tr>
<td>HM</td>
<td>Health Main Remind</td>
<td>CS</td>
<td>Clinic Screen</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BP</td>
<td>Best Practice Prompt</td>
<td>SP</td>
<td>Supplements</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Select Action: +// MS Modify Structure

You can add a new component by entering a new order number and component name. To remove a component from this summary type select the component by name or order and then enter an '0'.

Select SUMMARY ORDER: 10

Add the individual Best Practices to the Best Practice component that you just added using BP Best Practice Prompt menu option:

Figure 19-10: Adding Best Practice Prompts to the Health Summary
Health Summary: TEST

<table>
<thead>
<tr>
<th>STRUCTURE:</th>
<th>Order Component</th>
<th>Max occ Time</th>
<th>Alternate Title</th>
</tr>
</thead>
</table>

**GENERAL:**
- Clinic Displayed on outpatient components:
- ICD Text Display:
- Provider Narrative Displayed:
- Display Provider Initials in Outpatient components:
- Provider Initials displayed on Medication components:

**MEASUREMENT PANELS:**
- <none>

**LAB TEST PANELS:**
- + Enter ?? for more actions

<table>
<thead>
<tr>
<th>Component</th>
<th>Action</th>
<th>Category/Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>MS</td>
<td>Modify Structure</td>
<td>FS Flow Sheets</td>
</tr>
<tr>
<td>MP</td>
<td>Mod Meas Panel</td>
<td>HF Health Factors</td>
</tr>
<tr>
<td>LP</td>
<td>Lab Panel</td>
<td>PC Provider Class Scrn</td>
</tr>
<tr>
<td>HM</td>
<td>Health Main Remind</td>
<td>CS Clinic Screen</td>
</tr>
<tr>
<td>BP</td>
<td><strong>Best Practice Prompt</strong></td>
<td>SP Supplements</td>
</tr>
</tbody>
</table>

Select Action: +// BP

Health Summary: TEST

**Note:** any Best Practice Prompt flagged as inactive will not display on the summary even though you selected it for display. The Best Practice Prompt must be activated. Any Best Practice Prompts with (DEL) should be removed as they are no longer used.

Currently defined BEST PRACTICE PROMPTS on the TEST summary type

<table>
<thead>
<tr>
<th>SEQ</th>
<th>Best Practice Prompts</th>
<th>Category/Group</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Other BEST PRACTICE PROMPTS not yet selected that can be added to this summary type:
- HEARING INQUIRY
- STRABISMUS/AMBLYOPIA SCREEN
- ASTHMA: ADD/INCREASE INHALED STEROIDS

+ Enter ?? for more actions

<table>
<thead>
<tr>
<th>Action</th>
<th>Action</th>
<th>Category/Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>AR</td>
<td>Add Best Practice Prompt</td>
<td>RG Remove Group of Best Pract Prompts</td>
</tr>
<tr>
<td>RI</td>
<td>Remove Best Practice Prompt</td>
<td>HS Sample Health Summary</td>
</tr>
<tr>
<td>AG</td>
<td>Add Group of Best Pract Prompts</td>
<td>Q Quit</td>
</tr>
</tbody>
</table>

Select Action: +// AG

Select the Category/Group of Best Practice Prompts to ADD:

**Figure 19-11: Adding Best Practice Prompts to the Health Summary**

Add the following Best Practice Prompts Groups:
- Asthma
- CVD Related
**Anticoagulation**

Add the Rubella best practice prompt:

<table>
<thead>
<tr>
<th>SEQ</th>
<th>Best Practice Prompts</th>
<th>Category/Group</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Seq 1: Rubella</td>
<td>ELDER</td>
</tr>
</tbody>
</table>

Other BEST PRACTICE PROMPTS not yet selected that can be added to this summary type:
- HEARING INQUIRY
- STRABISMUS/AMBLYOPIA SCREEN
- ASTHMA: ADD/INCREASE INHALED STEROIDS

+ Enter ?? for more actions

**Select Action:** + // AR Add Best Practice Prompt

Enter the sequence number to put this Best Practice Prompt and then enter the prompt by name.

Select BEST PRACTICE PROMPT ORDER: 20
BEST PRACTICE PROMPT ORDER BEST PRACTICE PROMPT: rubella

Figure 19-12: Adding the Rubella best practice prompt
Appendix A: Common Install Questions/Issues

This section describes common install issues, questions, and solutions.

A.1 All of my immunization reminders are showing as DUE after I loaded the patch.

After the KIDS build has been installed, the computed findings that are used to check the immunization forecaster will not function properly until the new immunization reminders are installed through reminder exchange.

You must install the immunization reminders through exchange immediately if you have any immunization reminders deployed. You do not need to move these into production immediately but should eventually replace your old immunization reminders with the new ones.

A.2 Programmer access message during installation

Programmer access is required to install the reminders that contain a new computed finding.

If you do not have programmer access (@ fileman access) you will see the following message when you are installing reminders that contain a new computed finding:

Only programmers can install routines.
Only programmers can install Reminder Computed Findings.

Figure A-1: Messages

If there are no new computed findings packed in the reminder then ignore the message and continue through the installation process. If the computed finding was previously installed there will be an X under the column “Exists” on the right of the Reminder Computed Finding in the Reminder Exchange. Detailed instructions are available in Section 11.1 of this guide.

A.3 Taxonomy error message during installation

A taxonomy is a selection of ICD0, ICD9, or CPT codes. The user inputs them from the starting code to the ending code. One taxonomy can have multiple selection lists of codes. There is a secondary file that stores every entry between the starting and ending codes. Therefore an error in any code in the interval could cause the install to fail. If a site has two entries of the same code or the computer cannot tell the difference between two codes, the install will fail.

To resolve this issue, create the template manually using the detailed instructions in Section 11.3 of this manual.
A.4 Error On Install From Exchange: EDUCATION TOPICS Entries

The update failed, UPDATE^DIE returned the following error message:
MSG("DIERR")=2^2
MSG("DIERR",1)=299
MSG("DIERR",1,"PARAM",0)=2
MSG("DIERR",1,"PARAM",1)=FP-Depot Medroxyprogesterone Injections
MSG("DIERR",1,"PARAM","FILE")=999999.09
MSG("DIERR",1,"TEXT",1)=More than one entry matches the value(s) 'FP-Depot Medroxyprogesterone Injections'.
MSG("DIERR",2)=701
MSG("DIERR",2,"PARAM",0)=3
MSG("DIERR",2,"PARAM",3)=ED.FP-Depot Medroxyprogesterone Injections
MSG("DIERR",2,"PARAM","FIELD")=15
MSG("DIERR",2,"PARAM","FILE")=801.41
MSG("DIERR",2,"TEXT",1)=The value 'ED.FP-Depot Medroxyprogesterone Injections' for field FINDING ITEM in file REMINDER DIALOG is not valid.
MSG("DIERR","E",299,1)=
MSG("DIERR","E",701,2)=
REMINDER DIALOG entry ED FP-DEPO did not get installed!
Examine the above error message for the reason
Warning there are 2 EDUCATION TOPICS entries with the name FP-Depot Medroxyprogesterone Injections Install reminder dialog and all components with no further changes:NO/NO

Figure A- 2: Error example

This error occurs when you have 2 Patient Education Topics with the same name (the system tells you which one has a duplicate). Most systems have a few of these so you may encounter this error.

FIX: Your site manager (you will need fileman edit access) needs to change the name of one of the EDUCATION topics. You can simply append the name with a number or letter. Make sure you do not change the name of the ACTIVE Pt Ed topic! After your site manager has edited the entry, reinstall the reminder.

^VA Fileman
Enter or Edit File Entries
Print File Entries
Search File Entries
Modify File Attributes
Inquire to File Entries
Utility Functions ...
Data Dictionary Utilities ...
Transfer Entries
Other Options ...

Select VA FileMan Option:

Select VA FileMan Option: enter or Edit File Entries
INPUT TO WHAT FILE: EDUCATION TOPICS
EDIT WHICH FIELD: ALL

Select EDUCATION TOPICS NAME: FP-DEPO
1. FP-DEPOT MEDROXYPROGESTERONE INJECTIONS      FP-DPO
2. FP-Depot Medroxy progesterone Injections FP-FPO

CHOOSE 1-2:

Select EDUCATION TOPICS NAME: FP-Depot Medrocyprogesterone Injections FP-DPO
NAME: FP-Depot Medrocyprogesterone Injections    Replace INACTIVE FLAG: INACTIVE <--This topic is inactive.

Select EDUCATION TOPICS NAME: FP-Depot Medroxyprogesterone Injections FP-DPO
NAME: FP-Depot Medroxyprogesterone Injections   Replace:Injections With Injections OLD
INACTIVE FLAG: INACTIVE^ uphat out to quit

Select EDUCATION TOPICS NAME: FP-Depot Medroxyprogesterone Injections OLD

Figure A-3: Instructions

Reinstall the reminder dialog and the error will be gone.

A.5 Error Encountered Installing IHS-Pneumovax Immun 2012 Dialog

This error has occurred at a couple of sites – it is not common but if you encounter it, follow the steps in the next section.

ERROR ENCOUNTERED:

Packed reminder dialog: IHS-PNEUMOVAX IMMUN 2011

The update failed, UPDATE^DIE returned the following error message:
MSG("DIERR")=2^2
MSG("DIERR",1)=299
MSG("DIERR",1,"PARAM",0)=1
MSG("DIERR",1,"PARAM",1)=`90764
MSG("DIERR",1,"TEXT",1)=More than one entry matches the value(s) '``90764'.
MSG("DIERR",2)=701
MSG("DIERR",2,"PARAM",0)=3
MSG("DIERR",2,"PARAM",3)=`90764
MSG("DIERR",2,"PARAM","FIELD")=.01
MSG("DIERR",2,"PARAM","FILE")=801.4118
MSG("DIERR",2,"TEXT",1)=The value '``90764' for field ADDITIONAL FINDINGS in ADDITIONAL FINDINGS SUB-FIELD in file REMINDER DIALOG is not valid.
REMINDER DIALOG entry IM-PNEUMO-PS2 DONE 2011 did not get installed!
Examine the above error message for the reason.

Figure A-4: Error encountered

**FIX**

1. Manually create IM-PNEUMOVAX-2 DONE dialog element
2. Reinstall the dialog and replace the element with the IM-PNEUMOVAX-2 DONE element you created in the previous step.

### RPMS-EHR Configuration Master Menu

<table>
<thead>
<tr>
<th>ART</th>
<th>Adverse Reaction Tracking Configuration ...</th>
</tr>
</thead>
<tbody>
<tr>
<td>CCX</td>
<td>Chief Complaint Configuration ...</td>
</tr>
<tr>
<td>CON</td>
<td>Consult Tracking Configuration ...</td>
</tr>
<tr>
<td>EDU</td>
<td>Patient Education Configuration ...</td>
</tr>
<tr>
<td>ENC</td>
<td>Encounter Context Configuration ...</td>
</tr>
<tr>
<td>EXM</td>
<td>Exam Configuration ...</td>
</tr>
<tr>
<td>HFA</td>
<td>Health Factor Configuration ...</td>
</tr>
<tr>
<td>IMM</td>
<td>Immunization Configuration ...</td>
</tr>
<tr>
<td>LAB</td>
<td>Lab Configuration ...</td>
</tr>
<tr>
<td>MED</td>
<td>Medication Management Configuration ...</td>
</tr>
<tr>
<td>NOT</td>
<td>Notification Configuration ...</td>
</tr>
<tr>
<td>ORD</td>
<td>Order Entry Configuration ...</td>
</tr>
<tr>
<td>PAT</td>
<td>Patient Context Configuration ...</td>
</tr>
<tr>
<td>PHX</td>
<td>Personal Health Hx Configuration ...</td>
</tr>
<tr>
<td>PLS</td>
<td>Problem List Configuration ...</td>
</tr>
<tr>
<td>POV</td>
<td>POV Configuration ...</td>
</tr>
<tr>
<td>PRC</td>
<td>Procedure Configuration ...</td>
</tr>
<tr>
<td>REM</td>
<td>Reminder Configuration ...</td>
</tr>
<tr>
<td>RPT</td>
<td>Report Configuration ...</td>
</tr>
<tr>
<td>SPL</td>
<td>Spellchecking Configuration ...</td>
</tr>
<tr>
<td>TIU</td>
<td>TIU Configuration ...</td>
</tr>
<tr>
<td>VIT</td>
<td>Vital Measurement Configuration ...</td>
</tr>
</tbody>
</table>

Select RPMS-EHR Configuration Master Menu Option: Reminder Configuration

YAKAMA HEALTH CENTER IHS RPMS-EHR Management Version 1.1
Reminder Configuration

| CFM  | Reminder Computed Finding Management ...  |
| DEF  | Reminder Definition Management ...        |
| **DLG** | Reminder Dialog Management ...           |
| EXC  | Reminder Exchange                         |
| INF  | Reminder Information Only Menu ...        |
| PAR  | Reminder Parameters ...                   |
| RPT  | Reminder Reports ...                      |
| SPO  | Reminder Sponsor Management ...           |
| TAX  | Reminder Taxonomy Management ...          |
| TRM  | Reminder Term Management ...              |
| TST  | Reminder Test                             |
Select Reminder Configuration Option: DLG

Select Reminder Dialog Management Option: DLG

REMINDER VIEW (ALL REMINDERS BY NAME)

+Item Reminder Name                      Linked Dialog Name & Dialog Status
126  IHS-PED ROTAVIRUS IMMUN 2008       IHS-PED ROTAVIRUS IMMUN 200
127  IHS-PED ROTAVIRUS IMMUN 2011       IHS-PED ROTAVIRUS IMMUN 201
128  IHS-PED TD IMMUNIZATION            WS-PED GROUP
129  IHS-PED VARICELLA IMMUN           WS-PED GROUP
130  IHS-PED VARICELLA IMMUN 2008       IHS-PED VARICELLA IMMUN 200   Disabled
131  IHS-PED VARICELLA IMMUN 2011       IHS-PED VARICELLA IMMUN 201
132  IHS-PNEUMOVAX IMMUN 2008           IHS-PNEUMOVAX IMMUN 2008   Disabled
133  IHS-PNEUMOVAX IMMUN 2011           IHS-PNEUMOVAX IMMUN 2011
134  IHS-PNEUMOVAX IMMUNIZATION         WS-ADULT IMM GRP
135  IHS-PPD                            IHS-PPD
136  IHS-RUBELLA IMMUNITY 2011          IHS-RUBELLA IMMUNITY 2011
137  IHS-SENIOR HEIGHT                  IHS-SENIOR HEIGHT             Disabled
138  IHS-SENIOR HEIGHT 2011             IHS-SENIOR HEIGHT 2011
139  IHS-SENIOR VISION 2009             IHS-SENIOR VISION 2009        Disabled
140  IHS-SENIOR VISION 2011             IHS-SENIOR VISION 2011
141  IHS-TD IMMUN 2008                  IHS-TD IMMUN 2008             Disabled
142  IHS-TD IMMUN 2011                  IHS-TD IMMUN 2011

Select Item: Next Screen// CV

Select one of the following:

D Reminder Dialogs
E Dialog Elements
F Forced Values
G Dialog Groups
P Additional Prompts
R Reminders
RG Result Group (Mental Health)
RE Result Element (Mental Health)

TYPE OF VIEW: R// E

Dialog List           Jul 29, 2008 08:38:47           Page: 1 of 26
DIALOG VIEW (DIALOG ELEMENTS)

<table>
<thead>
<tr>
<th>Item</th>
<th>Dialog Name</th>
<th>Dialog type</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>CPT 92002</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>CPT 92004</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>CPT 92012</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>CPT 92014</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>CPT 92015</td>
<td>Dialog Element</td>
<td></td>
</tr>
</tbody>
</table>
Select DIALOG to add: **IM PNEUMOVAX-2 DONE**  <- use this name

Are you adding IM PNEUMO-PS2 DONE as a new REMINDER DIALOG (the 490TH)? No// YES

Not used by any other dialog

NAME: IM PNEUMOVAX-2 DONE/
DISABLE:
CLASS: L
SPONSOR:
REVIEW DATE:
RESOLUTION TYPE: DONE AT ENCOUNTER
...OK? Yes// YES

ORDERABLE ITEM:

FINDING ITEM: IM.PNEUMO
  1  PNEUMOCOCCAL  PNEUMO-PS  33
  2  PNEUMOCOCCAL CONJUGATE  PNEUM-CONJ  100
  3  PNEUMOCOCCAL, NOS  PNEUMOCOCC  109

CHOOSE 1-3: 1
DIALOG/PROGRESS NOTE TEXT:
  No existing text
  Edit? No// YES

==[ WRAP ]==[ INSERT ] =====< DIALOG/PROGRESS NOTE TEXT >====[ <PF1>H=Help ]====
Patient received pneumo-ps at this encounter{FLD:IHS PXRM STANDING ORDER}.

When you are done typing, exit by selecting
The F1(function key) plus the letter E:

F1 E

<= =====T =====T =====T =====T =====T =====T =====T

ALTERNATE PROGRESS NOTE TEXT:
  No existing text
  Edit? No//
EXCLUDE FROM PROGRESS NOTE:
SUPPRESS CHECKBOX:
Select ADDITIONAL FINDINGS: **ICD9.V03.82**

Searching for a ICD9 DIAGNOSIS, (pointed-to by ADDITIONAL FINDINGS)

Searching for a ICD9 DIAGNOSIS
Select SEQUENCE: 1
ADDITIONAL PROMPT/FORCED VALUE: PXRM LOT NUMBER prompt NATIONAL
...OK? Yes// YES
OVERRIDE PROMPT CAPTION:
START NEW LINE: YES
EXCLUDE FROM PN TEXT:
REQUIRED: YES
Select SEQUENCE: 2
ADDITIONAL PROMPT/FORCED VALUE: PXRM IMM SITE prompt NATIONAL
...OK? Yes// YES
OVERRIDE PROMPT CAPTION:
START NEW LINE: YES
EXCLUDE FROM PN TEXT:
REQUIRED: YES
Select SEQUENCE: 3
ADDITIONAL PROMPT/FORCED VALUE: PXRM VOLUME prompt NATIONAL
...OK? Yes// YES
OVERRIDE PROMPT CAPTION:
START NEW LINE: YES
EXCLUDE FROM PN TEXT:
REQUIRED: YES
Select SEQUENCE: 4
ADDITIONAL PROMPT/FORCED VALUE: PXRM IMM VIS DATE prompt NATIONAL
...OK? Yes// YES
OVERRIDE PROMPT CAPTION:
START NEW LINE: YES
EXCLUDE FROM PN TEXT:
REQUIRED: YES
Select SEQUENCE: 5
ADDITIONAL PROMPT/FORCED VALUE: PXRM COMMENT prompt NATIONAL
...OK? Yes// YES
OVERRIDE PROMPT CAPTION:
START NEW LINE: YES
EXCLUDE FROM PN TEXT:
REQUIRED: YES
Select SEQUENCE:
Input your edit comments.
Edit? NO//

NOW go to the Exchange and install the reminder and dialog again. After the Error in the dialog installation:

Install reminder dialog and all components with no further changes:Y// YES
The update failed, UPDATE^DIE returned the following error message:
MSG("DIERR")=2^2
MSG("DIERR",1)=299
MSG("DIERR",1,"PARAM",0)=1
MSG("DIERR",1,"PARAM",1)=`90764
MSG("DIERR",1,"TEXT",1)=More than one entry matches the value(s) '`90764'.
MSG("DIERR",2)=701
MSG("DIERR",2,"PARAM",0)=3
A.6 When I Look At the Dialog After I Installed It In Reminder Exchange, the Findings Say “None”

It can be confusing when you first look at your dialog definitions. Here is an example where the dialog definition looks like the finding items did not load correctly. In the exchange file, it looks like the finding did not load. This is because some components of dialogs do not have findings and this is expected. (See second screen shot).
In the example above, you’ll notice that the Groups (under Type) do not have findings. This is expected. If you actually navigate to the Group Edit screen and look at the detail of the Group (see below), you’ll see that each element in the group has an appropriate finding.
A.7  The BPXRM objects do not work

A.7.1  The BPXRM LIPID PROFILE object does not display the last lipid profile results.

The BPXRM LIPID PROFILE object it not working and will be fixed in a future TIU patch. In the meantime you can create another object and use it in the dialog.

1. Create a new object which contains your site’s LIPID PROFILE by copying the LAST LAB PANEL (SAMPLE) object.

2. Edit the dialog: replace the BPXRM LIPID PROFILE with the object that you created in step 1.

Step 1: Create a new object which contains your site’s LIPID PROFILE by copying the LAST LAB PANEL (SAMPLE) object.
DDM1  Edit Document Definitions  
DDM2  Sort Document Definitions  
DDM3  Create Document Definitions  
**DDM4  Create Objects**  
DDM5  List Object Descriptions  
DDM6  Create TIU/Health Summary Objects  
DDM7  Title Headers/Footers  

Select Document Definitions (Manager) Option: **DDM4**  
Create Objects  

<table>
<thead>
<tr>
<th>(DEMO INDIAN HOSPITAL)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DDM4 Create Objects</strong></td>
</tr>
<tr>
<td>DDM5 List Object Descriptions</td>
</tr>
<tr>
<td>DDM6 Create TIU/Health Summary Objects</td>
</tr>
<tr>
<td>DDM7 Title Headers/Footers</td>
</tr>
</tbody>
</table>

**START DISPLAY WITH OBJECT: FIRST**/

Objects

<table>
<thead>
<tr>
<th></th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ACTIVE MEDICATIONS</td>
</tr>
<tr>
<td>2</td>
<td>ACTIVE MEDS COMBINED</td>
</tr>
<tr>
<td>3</td>
<td>ACTIVE MEDS IN AND OUT</td>
</tr>
<tr>
<td>4</td>
<td>ACTIVE MEDS INPATIENT</td>
</tr>
<tr>
<td>5</td>
<td>ACTIVE MEDS ONE LIST</td>
</tr>
<tr>
<td>6</td>
<td>ACTIVE MEDS OUTPATIENT</td>
</tr>
<tr>
<td>7</td>
<td>ACTIVE PROBLEMS</td>
</tr>
<tr>
<td>8</td>
<td>ACTIVE PROBLEMS W/O DATES</td>
</tr>
<tr>
<td>9</td>
<td>ADDRESS—ONE LINE</td>
</tr>
<tr>
<td>10</td>
<td>ADMITTING DX</td>
</tr>
<tr>
<td>11</td>
<td>ADMITTING PROVIDER</td>
</tr>
<tr>
<td>12</td>
<td>ALLERGIES/ADR</td>
</tr>
<tr>
<td>13</td>
<td>ASTHMA CONTROLLER MEDS</td>
</tr>
<tr>
<td>14</td>
<td>ASTHMA REGISTRY</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>109</td>
<td>LAST LAB INR 3</td>
</tr>
<tr>
<td>110</td>
<td>LAST LAB PANEL (CHEM PANEL)</td>
</tr>
<tr>
<td>111</td>
<td><strong>LAST LAB PANEL (SAMPLE)</strong></td>
</tr>
<tr>
<td>112</td>
<td>LAST LAB PANEL LIPID</td>
</tr>
<tr>
<td>113</td>
<td>LAST LAB TEST (BRIEF)</td>
</tr>
<tr>
<td>114</td>
<td>LAST LAB TEST (NO CAP)</td>
</tr>
<tr>
<td>115</td>
<td>LAST LAB TEST (SAMPLE)</td>
</tr>
<tr>
<td>116</td>
<td>LAST LAB TEST DATE (SAMPLE)</td>
</tr>
<tr>
<td>117</td>
<td>LAST MAMM</td>
</tr>
<tr>
<td>118</td>
<td>LAST MEASUREMENT LIST</td>
</tr>
<tr>
<td>119</td>
<td>LAST MEASUREMENT LIST</td>
</tr>
<tr>
<td>120</td>
<td>LAST MED (SAMPLE)</td>
</tr>
</tbody>
</table>

Select Action: Next Screen/ Find  
Search for: //**LAST LAB PANEL (SAMPLE)**
121    LAST MED CLASS (SAMPLE)      I
122    LAST MED CLASS/PHARM PT (SAMPLE)    I
+         ?Help   >ScrollRight   PS/PL PrintScrn/List   +/-                  >>>
...searching for 'LAST LAB PANEL (sample'

Stop Here? Yes//

Select Action: Next Screen// COPY

Select Entry to Copy:  (109-122): 111 enter the number of the LAST LAB PANEL (SAMPLE)
   Yours may be different.

Copy into (different) Name: LAST LAB PANEL (SAMPLE)
   Replace SAMPLE With LIPID PROFILE
   Replace                 LAST LAB PANEL (LIPID PROFILE)

OBJECT copied into File Entry #665
Press RETURN to continue or '^' or '^^' to exit:
   Feb 14, 2012 15:38:44          Page:    8 of   21

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>111</td>
<td>LAST LAB PANEL (LIPID PROFILE)</td>
<td>I</td>
<td></td>
</tr>
<tr>
<td>112</td>
<td>LAST LAB PANEL (SAMPLE)</td>
<td>I</td>
<td></td>
</tr>
<tr>
<td>113</td>
<td>LAST LAB PANEL LIPID</td>
<td>A</td>
<td></td>
</tr>
<tr>
<td>114</td>
<td>LAST LAB TEST (BRIEF)</td>
<td>I</td>
<td></td>
</tr>
<tr>
<td>115</td>
<td>LAST LAB TEST (NO CAP)</td>
<td>I</td>
<td></td>
</tr>
<tr>
<td>116</td>
<td>LAST LAB TEST (SAMPLE)</td>
<td>I</td>
<td></td>
</tr>
<tr>
<td>117</td>
<td>LAST LAB TEST DATE (SAMPLE)</td>
<td>I</td>
<td></td>
</tr>
<tr>
<td>118</td>
<td>LAST MAMM</td>
<td>A</td>
<td></td>
</tr>
<tr>
<td>119</td>
<td>LAST MEASUREMENT LIST</td>
<td>A</td>
<td></td>
</tr>
<tr>
<td>120</td>
<td>LAST MEASUREMENT LIST</td>
<td>A</td>
<td></td>
</tr>
<tr>
<td>121</td>
<td>LAST MAMM</td>
<td>I</td>
<td></td>
</tr>
<tr>
<td>122</td>
<td>LAST MED CLASS (SAMPLE)</td>
<td>I</td>
<td></td>
</tr>
<tr>
<td>123</td>
<td>LAST MED CLASS/PHARM PT (SAMPLE)</td>
<td>I</td>
<td></td>
</tr>
<tr>
<td>124</td>
<td>LAST PAIN</td>
<td>A</td>
<td></td>
</tr>
</tbody>
</table>

Select Action: Next Screen// DETAILED
Select Entry:  (111-124): 111
Object LAST LAB PANEL (LIPID PROFILE)

Basics
   Name:     LAST LAB PANEL (LIPID PROFILE)
   Abbreviation:
   Print Name:
      Type:   OBJECT
      IFN:   665
   National
      Standard:   NO
   Status:   INACTIVE
   Owner:    CLINICAL COORDINATOR

Technical Fields
   Object Method:   S X=##LABPANL^BTIUPCC(DFN,"LAB PANEL NAME")

Description
   ? Help       +, - Next, Previous Screen   PS/PL
Addendum to Installation Notes

Common Install Questions/Issues

July 2012

164
<table>
<thead>
<tr>
<th>RE</th>
<th>Result Element (Mental Health)</th>
</tr>
</thead>
<tbody>
<tr>
<td>TYPE OF VIEW: R// E</td>
<td></td>
</tr>
</tbody>
</table>

### DIALOG VIEW (DIALOG ELEMENTS)

<table>
<thead>
<tr>
<th>+Item</th>
<th>Dialog Name</th>
<th>Dialog type</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ASBI CPT COMM INS 30 MIN</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>ASBI CPT MEDICAID</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>ASBI CPT MEDICAID 15 MIN</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>ASBI CPT MEDICARE</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>ASBI CPT MEDICARE 30 MIN</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>ASBI ED AOD-COMPLICATIONS</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>ASBI ED AOD-CULTURAL/SPIRIT</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>ASBI ED AOD-DISEASE PROCESS</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>ASBI ED AOD-FOLLOWUP</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>ASBI ED AOD-HEALTH PROMOTION DISEASE PR</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>ASBI ED AOD-HELP LINE</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>ASBI ED AOD-INFORMATION AND REFERRAL</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>ASBI ED AOD-INJURIES</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>ASBI ED AOD-LIFESTYLE ADAPTATIONS</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>ASBI ED AOD-MEDICATIONS</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>ASBI ED AOD-NUTRITION</td>
<td>Dialog Element</td>
<td></td>
</tr>
</tbody>
</table>

+ Next Screen - Prev Screen ?? More Actions CO

Copy Dialog PT List/Print All QU Quit

Select Item: Next Screen SL

Search for: HD LIPID
Stop Here: YES HD LIPID should be highlighted at the top of the screen:

### DIALOG VIEW (DIALOG ELEMENTS)

<table>
<thead>
<tr>
<th>+Item</th>
<th>Dialog Name</th>
<th>Dialog type</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>277</td>
<td>HD LIPID</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>278</td>
<td>HD MAMMO ALREADY SCHEDULED</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>279</td>
<td>HD MAMMO REFERRAL DONE</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>280</td>
<td>HD MAMMOGRAM EDUCATION</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>281</td>
<td>HD MED COUNSELING INFO</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>282</td>
<td>HD MED PROBLEM LIST</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>283</td>
<td>HD MENINGITIS TEXT</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>284</td>
<td>HD MMR TEXT</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>285</td>
<td>HD MTM ADDL INFO</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>286</td>
<td>HD MTM FOLLOW UP</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>287</td>
<td>HD NEPHRO SCREEN</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>288</td>
<td>HD NEWBORN HEARING</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>289</td>
<td>HD OSTEOPOROSIS SCREENING</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>290</td>
<td>HD PAP NOT DONE TEXT</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>291</td>
<td>HD PED FLU</td>
<td>Dialog Element</td>
<td></td>
</tr>
<tr>
<td>292</td>
<td>HD PEDAL PULSES</td>
<td>Dialog Element</td>
<td></td>
</tr>
</tbody>
</table>

+ Next Screen - Prev Screen ?? More Actions AD CV INQ CO PT QU

Select Item: Next Screen 277 (enter the number of the HD LIPID element. In this example, it is number 277. Yours may be different.)

CURRENT DIALOG ELEMENT/GROUP NAME: HD LIPID
Used by: IHS-LIPID FEMALE 2011 (Reminder Dialog)
IHS-LIPID MALE 2011 (Reminder Dialog)

NAME: HD LIPID
DISABLE:
Figure A-9: Instructions

Log out of EHR and log in again. Test the object by processing the IHS-LIPID dialog(s) on a patient who has a recent lipid profile result. Confirm that you can see the last lipid profile results.

A.7.2 The BPXRM HGBA1C object is does not display the last lab data.

This might occur with any of the BPXRM (lab test) objects. This object needs to contain the name of the HGBA1C lab test that is being used at your facility. This example describes how to map the HGBA1C lab test that is used at the facility to the BPXRM HGBA1C object.

1. Go to DDM4 in your TIU menu: RPMS-EHR Configuration Master Menu | TIU Configuration | TIU Menu For Medical Records | TIU Maintenance Menu | Document Definitions (Manager)
Object BPXRM HGBA1C

Basics
Name: BPXRM HGBA1C
Abbreviation: HGBA1C
Print Name: BPXRM HGBA1C
Type: OBJECT
IFN: 49
National Standard: NO
Status: ACTIVE
Owner: CLINICAL COORDINATOR

Technical Fields
Object Method: SX=$$SLAB^BTIUPCC(+G(DFN),"HGBA1C")

Description
+S$ Help +, - Next, Previous Screen PS/PL
Basics Find Description Edit
Technical Fields Delete
Try Quit

Select Action: Next Screen/BASICS go to Basics to inactivate the object so you can edit it.

Edit Owner and Status only; Entry not Inactive
CLASS OWNER: CLINICAL COORDINATOR Replace
STATUS: (A/I): ACTIVE// I Inactivate the entry so you can edit it.
Object BPXRM HGBA1C

Basics
Name: BPXRM HGBA1C
Abbreviation:
Print Name:
Type: OBJECT
IFN: 49
National
Standard: NO
Status: INACTIVE
Owner: CLINICAL COORDINATOR

Technical Fields
Object Method: $S X=\$SLAB^BTIUPCC(+$G(DFN),"HGBA1C")

Description
+ ? Help +, - Next, Previous Screen PS/PL
Basics Find Description Edit
Technical Fields Delete
Try Quit
Select Action: Next Screen//

Replace HGBA1C With HGB A1C (use the exact name of the HGBA1C test that is in use at your facility)

Detailed Display
Feb 14, 2012 15:07:14 Page: 1 of 2
Object BPXRM HGBA1C

Basics
Name: BPXRM HGBA1C
Abbreviation:
Print Name:
Type: OBJECT
IFN: 49
National
Standard: NO
Status: INACTIVE
Owner: CLINICAL COORDINATOR

Technical Fields
Object Method: $S X=\$SLAB^BTIUPCC(+$G(DFN),"HGB A1C")

double check the name of the test

Description
+ ? Help +, - Next, Previous Screen PS/PL
Basics Find Description Edit
Technical Fields Delete
Try Quit
Select Action: Next Screen//Basics

now go back into Basics to activate the object.

NAME: BPXRM HGBA1C/
ABBREVIATION:
PRINT NAME:
CLASS OWNER: CLINICAL COORDINATOR  Replace

STATUS: (A/I): INACTIVE// ACTIVE

Object BPXRM HGBA1C

Basics
   Name:   BPXRM HGBA1C
   Abbreviation:
   Print Name:
   Type:   OBJECT
   IFN:   49

National
   Standard:   NO
   Status:   ACTIVE
   Owner:   CLINICAL COORDINATOR

Technical Fields
   Object Method:   S X=SSLAB^BTIUPCC(+$G(DFN),"HGB A1C")

Description
   +         ? Help       +, - Next, Previous Screen     PS/PL
   Basics                    Find                      Description Edit
   Technical Fields          Delete
   Try                       Quit
   Select Action: Next Screen//Q

Figure A-10: Instructions

A.8 Medication Reminders - Last Occurrence Date

Reminders that use medications in the resolution logic: DM-ASPIRIN, DM-
ACE/ARB, DM-ANTIPLATLET CVD use the last fill date as the LAST
OCURRENCE DATE.

![Figure A-11: Example of a DM Aspirin reminder that was last filled on 2/2/2012](image)

If the medication is an OUTSIDE MEDICATION, it will display today’s date as the
LAST OCCURRENCE DATE. In the example below, the Outside Med was
documented last month. Outside Meds do not have an associated fill date. The
reminder uses TODAY’S date as the LAST OCCURRENCE DATE. In this example, today is 2/14/2012.

Figure A-12: Example of an Outside Med displayed on 2/14/201

A.9 Problems Getting Reminders Visible For Everyone

If you have reminders showing up for most users but not for others, the culprit is likely in the parameters. Usually it means that the NEW parameter is set to YES for system but NO at a lower level, such as class or user. Entering parameters is easiest from the RPMS-EHR Master Configuration menu | REM Reminder Configuration | PAR Reminder Parameters Menu | New Reminder Parameters:

<table>
<thead>
<tr>
<th>NEW</th>
<th>New Reminder Parameters (ORQQPX NEW REMINDER PARAMS)</th>
</tr>
</thead>
</table>

Use New Reminder Parameters may be set for the following:

1. User USR [choose from NEW PERSON]
2. Service SRV [choose from SERVICE/SECTION]
3. Division DIV [DEMO INDIAN HOSPITAL]
4. System SYS [DEMO.OKLAHOMA.IHS.GOV]
5. Package PKG [ORDER ENTRY/RESULTS REPORTING]

Enter selection: RICHARDS, SUSAN P

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Instance</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>USR: RICHARDS,SUSAN P</td>
<td>1</td>
<td>NO if this were set to no, like here, this user would only see what was set up in the cover sheet reminder list (CVR above) and not what was set up in the GUI reminder configuration. To remove, edit the parameter and @ at the prompt so the value is empty</td>
</tr>
<tr>
<td>SYS: YAKIMA-HC.PRT.IHS.GOV</td>
<td>1</td>
<td>YES</td>
</tr>
</tbody>
</table>

Figure A-13: Instructions
A.10 Reminder is Due When it Shouldn’t be Due

This can happen if the reminder uses Health Maintenance Reminder (HMR) or Best Practice Prompts (HMR) in their resolution logic and the lab test or medications that are needed to resolve the HMR or BPP are not members of the RPMS taxonomy.

Examples:

My patient has a recent chlamydia test, but the IHS-CHLAMYDIA reminder shows as due.

My patient has a recent prescription for asthma inhaled steroid, but the IHS-ASTHMA STEROIDS reminder shows as due. My patient’s [best practice/hmr] reminder shows as due when it should not be due.

These reminders use the data found by the Health Maintenance Reminder or Best Practice to determine if they are due or not. You’ll need to look at the logic that the HMR or BPP uses. Confirm that the drug or lab that is being used to resolve the reminder is a member of the HMR or BPP taxonomy. HMR/BPP RPMS taxonomies can be edited using iCare or CRS.

1. Review the Logic Detail for the health maintenance reminder or best practice prompt logic in one of the following locations:
   - Appendix of this guide (or current version).
     http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf
   - iCare: Click on the glossary button and select Reminders Glossary (health summary reminders) or Best Practice Prompts Glossary

2. Confirm that the lab test/medication/etc. item that the reminder is looking at is a member of the taxonomy.

Example- The CHLAMYDIA Health Maintenance Reminder uses the BGP CHLAMYDIA TESTS taxonomy to look for the chlamydia test(s) that is being used by your facility

| LOGIC DETAIL: (from iCare Glossary or Health Summary User Manual Appendix) |
| Chlamydia Test Definition: |
| - Procedures (CPT Codes): V CPT 86631, 86632, 87110, 87270, 87320, 87490-87492, 87810 [BGP CHLAMYDIA CPTs] |
| - LOINC Codes: V Lab as predefined in [BGP CHLAMYDIA LOINC CODES] |
| - Site Defined Lab Tests: V Lab site-defined tests in [BGP CHLAMYDIA TESTS TAX] |

Figure A-14: Instructions

3. This taxonomy can be populated with the appropriate labs/drugs through iCare or Clinical Reporting System (CRS).
iCare:
To edit the taxonomy, the iCare user must possess the BGPZ TAXONOMY EDITOR key. Add the test(s) that is being used at your facility.

Login to iCare | Tools | Taxonomy Maintenance | View/Edit Taxonomy Entries | All Site Populated | Lab Tests | BGP Chlamydia Tests | add the chlamydia lab test(s) that are ordered at your facility.

CRS:
To edit the taxonomy; you must posses the appropriate security keys and menu options or ask the appropriate staff to edit the taxonomy.

CRS Main Menu | System Setup | Taxonomy Setup | Taxonomy Setup-All CRS Reports | Select a Taxonomy | add the chlamydia lab test(s) that are ordered at your facility

A.11 Why is the Due Date Tomorrow?

Figure A- 15: Reminder Due Date

The reminder is due to check tomorrow to see if the immunization is due. This is the case for all immunization reminders; several of the anti-coagulation and asthma reminders, and CVD reminder.

A.12 Access Violation Error When Processing Dialogs

An Access Violation Error occurs if you are processing a dialog and you select the Clinical Maintenance Button from within the dialog. When you exit/save the dialog, you will receive this error message:

Figure A- 16: Access Violation Error
This is a known issue that will be fixed in a future RPMS-EHR patch. If you receive this error, logout of RPMS-EHR and back in again. We recommend that you do not use the CLINICAL MAINTENANCE button when processing dialogs. Instead, right-click on a reminder or reminder dialog and select Clinical Maintenance.
## Appendix B: National Reminders Summary

The following table is the up-to-date list of currently released EHR (Clinical) Reminders with a list of taxonomies, terms, computed findings (CF’s), Quick Orders, and Objects in each reminder dialog.

*Reminder Taxonomy Descriptions: Refer to Appendix C.*

**RPMS Taxonomy Descriptions: These taxonomies are used by the PCC Health Maintenance Reminders and Best Practice Prompts. A description of these taxonomies can be found in the PCC Health Summary manual. [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)

<table>
<thead>
<tr>
<th>Reminder</th>
<th>Reminder Taxonomies* RPMS taxonomies**</th>
<th>Reminder Terms</th>
<th>CFs</th>
<th>Quick Orders</th>
<th>Objects</th>
</tr>
</thead>
<tbody>
<tr>
<td>IHS-ACTIVITY SCREEN 2011</td>
<td>RPMS taxonomies</td>
<td>IHS-ACTIVITY ACTIVITY LEVEL</td>
<td>IHS-EXERCISE EDUCATION</td>
<td>LAST AUDIT 3</td>
<td>LAST AUDITC 3</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>LAST CRAFFT 3</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>V INSURANCE</td>
</tr>
<tr>
<td>IHS-ALCOHOL SCREEN 2012</td>
<td>RPMS taxonomies</td>
<td></td>
<td>IHS-ALCOHOL 2009</td>
<td>LAST AUDIT 3</td>
<td>LAST AUDITC 3</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>LAST CRAFFT 3</td>
</tr>
<tr>
<td>IHS-ALLERGY 2012</td>
<td></td>
<td>PCALLERGY</td>
<td></td>
<td></td>
<td>V MEASUREMENT</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>LAST BPF</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>BPXRM UPDATED TOBACCO</td>
</tr>
<tr>
<td>IHS-ANTICOAG CBC 2011</td>
<td>RPMS taxonomies</td>
<td></td>
<td>IHS-ANTICOAG CBC IHS-WARFARIN PT</td>
<td>PATIENT NAME</td>
<td>PWH MED REC FOR MTM</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-ANTICOAG DURATION OF TX 2011</td>
<td>RPMS taxonomies</td>
<td></td>
<td>IHS-INR DURATION IHS-WARFARIN PT</td>
<td>IMMUNIZATIONS DUE</td>
<td></td>
</tr>
</tbody>
</table>

*Reminder Taxonomy Descriptions: Refer to Appendix C.

**RPMS Taxonomy Descriptions: These taxonomies are used by the PCC Health Maintenance Reminders and Best Practice Prompts. A description of these taxonomies can be found in the PCC Health Summary manual. [http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf](http://www.ihs.gov/RPMS/PackageDocs/BJPC/bjpc0200.07u_apch.pdf)
<table>
<thead>
<tr>
<th>Reminder</th>
<th>Reminder Taxonomies* RPMS taxonomies**</th>
<th>Reminder Terms</th>
<th>CFs</th>
<th>Quick Orders</th>
<th>Objects</th>
</tr>
</thead>
<tbody>
<tr>
<td>IHS-ANTICOAG INR GOAL 2011</td>
<td>RPMS taxonomies</td>
<td>IHS-ANTICOAG INR GOAL IHS-WARFARIN PT</td>
<td>IHS-ANTICOAG FOBT IHS-WARFARIN PT</td>
<td>BPXRM LAST PHQ2 BPXRM LAST PHQ9, PATIENT NAME, PATIENT SEX, PATIENT AGE-DETAILED, BPXRM ALCOHOL SCREEN, LAST AUDIT C 3, LAST CRAFFT 3, BPXRM UPDATED TOBACCO, BPXRM DEPRESSION SCREEN, BPXRM INTIMATE PARTNER VIOLENCE, LAST HF OCCUPATION, V MEASUREMENT, V POV MULTI LINE, V ACTIVITY TIME, V TRAVEL TIME, V TOTAL TIME,</td>
<td></td>
</tr>
<tr>
<td>IHS-ANTICOAG OCCULT BLOOD 2011</td>
<td>RPMS taxonomies</td>
<td>IHS-ANTICOAG FOBT IHS-WARFARIN PT</td>
<td>IHS-ANTICOAG END IHS-WARFARIN PT</td>
<td>BPXRM LAST PHQ2 BPXRM LAST PHQ9</td>
<td></td>
</tr>
<tr>
<td>IHS-ANTICOAG THERAPY END DATE 2011</td>
<td>RPMS taxonomies</td>
<td>IHS-ANTICOAG FOBT IHS-WARFARIN PT</td>
<td>IHS-ANTICOAG END IHS-WARFARIN PT</td>
<td>BPXRM LAST PHQ2 BPXRM LAST PHQ9, BPXRM INTIMATE PARTNER VIOLENCE, BPXRM UPDATED TOBACCO</td>
<td></td>
</tr>
<tr>
<td>IHS-ANTICOAG UA 2011</td>
<td>RPMS taxonomies</td>
<td>IHS-ANTICOAG FOBT IHS-WARFARIN PT</td>
<td>IHS-ANTICOAG END IHS-WARFARIN PT</td>
<td>BPXRM LAST PHQ2 BPXRM LAST PHQ9, BPXRM INTIMATE PARTNER VIOLENCE, BPXRM UPDATED TOBACCO</td>
<td></td>
</tr>
<tr>
<td>IHS-ASTHMA CONTROL 2011</td>
<td>IHS-ASTHMA 2007 RPMS taxonomies</td>
<td>IHS-ASTHMA CONTROL</td>
<td>IHS-ASTHMA CONTROL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reminder</td>
<td>Reminder Taxonomies* RPMS taxonomies**</td>
<td>Reminder Terms</td>
<td>CFs</td>
<td>Quick Orders</td>
<td>Objects</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>----------------------------------------</td>
<td>----------------------------------------------------</td>
<td>-------------------</td>
<td>--------------</td>
<td>----------------</td>
</tr>
<tr>
<td>IHS-ASTHMA ACTION PLAN 2012</td>
<td>IHS-ASTHMA 2007 RPMS taxonomies</td>
<td></td>
<td>IHS-ASTHMA PLAN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-ASTHMA PRIM PROV 2012</td>
<td>IHS-ASTHMA 2007 RPMS taxonomies</td>
<td></td>
<td>IHS-ASTHMA PRIMARY</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-ASTHMA RISK EXACERBAT ION 2011</td>
<td>IHS-ASTHMA 2007 RPMS taxonomies</td>
<td></td>
<td>IHS-ASTHMA EXACERBATION</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-ASTHMA SEVERITY 2012</td>
<td>IHS-ASTHMA 2007 RPMS taxonomies</td>
<td></td>
<td>IHS-ASTHMA SEVERITY</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-ASTHMA STEROIDS 2012</td>
<td>IHS-ASTHMA 2007 RPMS taxonomies</td>
<td></td>
<td>IHS-ASTHMA STEROIDS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-ASTHMA INTAKE (DIALOG ONLY)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-CHL0041MY DIA SCREEN 2011</td>
<td>RPMS taxonomies</td>
<td></td>
<td></td>
<td>IHS-CHLAMYDIA</td>
<td></td>
</tr>
<tr>
<td>IHS-COLON CANCER 2012</td>
<td>IHS-SIGMOIDOSCOPY IHS-COLONOSCOPY 2007 IHS-FECAL OCCULT LAB TEST IHS-BARIUM EMEMA IHS-COLORECTAL CANCER</td>
<td></td>
<td>IHS-FECAL OCCULT BLOOD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reminder</td>
<td>Reminder Taxonomies* RPMS taxonomies**</td>
<td>Reminder Terms</td>
<td>CFs</td>
<td>Quick Orders</td>
<td>Objects</td>
</tr>
<tr>
<td>---------------------------</td>
<td>---------------------------------------</td>
<td>-----------------------------------</td>
<td>----------------------</td>
<td>---------------</td>
<td>--------------</td>
</tr>
<tr>
<td>IHS-CVD 2011</td>
<td>RPMS taxonomies</td>
<td></td>
<td>IHS-CVD RISK</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-DENTAL VISIT 2011</td>
<td>IHS-DENTAL PROVERA ADMINISTRATION</td>
<td></td>
<td>IHS-DENTAL 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-DEPO PROVERA 2012</td>
<td>IHS-DEPO PROVERA ORDERABLE ITEM</td>
<td></td>
<td>IHS-DEP 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-DEPRESSION SCREEN 2011</td>
<td>RPMS taxonomies</td>
<td></td>
<td>IHS-DEPRESSION 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-DIAB ACE/ARB 2012</td>
<td>IHS-DIABETES DX 2007</td>
<td></td>
<td>IHS-ALLERGY ACE/ARBS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-DIAB ASPIRIN FEMALE 2011</td>
<td>IHS-DIABETES DX 2007</td>
<td></td>
<td>IHS-ALLERGY 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-DIAB ASPIRIN MALE 2011</td>
<td>IHS-DIABETES DX 2007</td>
<td></td>
<td>IHS-ALLERGY 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-DIAB ANTPT KNOWN CVD 2012</td>
<td>IHS-DIABETES DX 2007</td>
<td></td>
<td>IHS-ALLERGY 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-DIAB EYE EXAM 2011</td>
<td>IHS-DIABETES DX 2007</td>
<td></td>
<td>IHS-ALLERGY 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reminder</td>
<td>Reminder Taxonomies* RPMS taxonomies**</td>
<td>Reminder Terms</td>
<td>CFs</td>
<td>Quick Orders</td>
<td>Objects</td>
</tr>
<tr>
<td>----------------------------------</td>
<td>----------------------------------------</td>
<td>----------------</td>
<td>-----------</td>
<td>--------------</td>
<td>----------------</td>
</tr>
<tr>
<td>IHS-DIAB FOOT EXAM 2011</td>
<td>IHS-DIABETES DX 2007</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-DIAB HGBA1C 2011</td>
<td>IHS-DIABETES DX 2007</td>
<td></td>
<td>IHS-HGBA1C</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-DIAB HGBA1C CONTROL 2012</td>
<td>IHS-DIABETES DX 2007</td>
<td></td>
<td>IHS-HGBA1C</td>
<td>IHS-HGBA1C</td>
<td>REEVALUATE</td>
</tr>
<tr>
<td>IHS-DIAB NEPHRO SCR/MON 2012</td>
<td>IHS-DIABETES DX 2007 IHS-DIALYSIS</td>
<td></td>
<td>IHS-URINE ALBUMIN IHS-EGFR</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-DIABETES SCREENING 2011</td>
<td>IHS-DIABETES PROBLEMS ONLY</td>
<td></td>
<td>IHS-DIABETES 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-DOMESTIC VIOLENCE 2012</td>
<td>RPMS taxonomies</td>
<td></td>
<td>IHS-IPVS 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-EPSTD SCREENING 2012</td>
<td>RPMS taxonomies</td>
<td></td>
<td>IHS-EPSDT 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-FUNCTIONAL ASSESSMENT 2011</td>
<td></td>
<td></td>
<td>IHS-FUNCTION 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-FALL RISK 2011</td>
<td></td>
<td></td>
<td>IHS-FALL RISK</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-HCT/HGB 2011</td>
<td></td>
<td></td>
<td>IHS-HCT/HGB</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-HEAD CIRCUMFERENCE 2012</td>
<td></td>
<td></td>
<td>IHS-HEAD CIRCUMFERENCE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-HEARING TEST 2011</td>
<td>RPMS taxonomies</td>
<td></td>
<td>IHS-HEARING 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-HEIGHT 2012</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reminder</td>
<td>Reminder Taxonomies* RPMS taxonomies**</td>
<td>Reminder Terms</td>
<td>CFs</td>
<td>Quick Orders</td>
<td>Objects</td>
</tr>
<tr>
<td>-------------------------</td>
<td>---------------------------------------</td>
<td>-------------------------------------</td>
<td>--------------------</td>
<td>--------------</td>
<td>---------------</td>
</tr>
<tr>
<td>IHS-HEP A ADULT 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-HEPADULT IMMUNIZATION</td>
<td>IHS-HEPA ADULT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-HEP B ADULT 2011</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-HEBADULT IMMUNIZATION</td>
<td>IHS-HEPB ADULT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-HPV IMMUNIZATION 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-HPV IMMUNIZATION</td>
<td>IHS-HPV</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-HIV SCREEN 2012</td>
<td>IHS-HIV DX</td>
<td></td>
<td></td>
<td></td>
<td>IHS-HIV</td>
</tr>
<tr>
<td>IHS-IMMUNIZATION FORECAST 2011</td>
<td><em><strong>forecaster</strong></em></td>
<td></td>
<td></td>
<td></td>
<td>IHS-IMM FORECAST</td>
</tr>
<tr>
<td>IHS-INFLUENZA IMMUNIZATION 2011</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-INFLUENZA 2007</td>
<td></td>
<td></td>
<td>IHS-FLU IHS-ALLERGY EGG</td>
</tr>
<tr>
<td>IHS-LIPID FEMALE 2012</td>
<td>IHS-DIABETES DX 2007</td>
<td>IHS-LIPID LAB TESTS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-LIPID MALE 2012</td>
<td>IHS-DIABETES DX 2007</td>
<td>IHS-LIPID LAB TESTS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-MAMMOGRAM 2011</td>
<td>IHS-BILATERAL MASTECTOMY 2008 RPMS taxonomies</td>
<td>IHS-MAMMOGRAM 2009</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-MENINGITIS IMMUNIZATION 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-MENINGITIS IMMUNE</td>
<td></td>
<td></td>
<td>IHS-MENINGITIS</td>
</tr>
<tr>
<td>IHS-NEWBORN HEARING 2011</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>IHS-NEWBORN HEARING</td>
</tr>
<tr>
<td>IHS-NUTRITIONAL SCREENING 2012</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>IHS-NUTRITION</td>
</tr>
<tr>
<td>Reminder</td>
<td>Reminder Taxonomies* RPMS taxonomies**</td>
<td>Reminder Terms</td>
<td>CFs</td>
<td>Quick Orders</td>
<td>Objects</td>
</tr>
<tr>
<td>----------</td>
<td>--------------------------------------</td>
<td>----------------</td>
<td>-----</td>
<td>--------------</td>
<td>---------</td>
</tr>
<tr>
<td>IHS-OSTEOPOROSIS SCREEN 2011</td>
<td>IHS-OSTEOPOROSIS DX RPMS taxonomies</td>
<td></td>
<td>IHS-OSTEO 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-PAP SMEAR 2011</td>
<td>IHS-HYSTERECTO MY 2009 RPMS taxonomies</td>
<td></td>
<td>IHS-PAP 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-PED DT IMMUNIZATION 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-PED TD IMMUNIZATION</td>
<td>IHS-TDPEDS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-PED DTAP IMMUNE 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-DTAP IMMUNIZATION</td>
<td>IHS-DTAP</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-PED FLU IMMUNE 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-INFLUENZA 2007</td>
<td>IHS-FLU IHS-ALLERGY EGG</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-PED HEPA IMMUNE 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-HEPA IMMUNIZATION</td>
<td>IHS-HEPA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-PED HEPB IMMUNE 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-HEPB IMMUNIZATION</td>
<td>IHS-HEPB</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-PED HIBTITER IMMUNE 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-HIBTITER IMMUNIZATION</td>
<td>IHS-HIB</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-PED MMR IMMUNE 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-MMR IMMUNIZATION</td>
<td>IHS-MMR</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-PED PNEUMOCOCCAL CONJUGATE 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-PED PNEUMOVA X IMMUNIZATION</td>
<td>IHS-PNEUPED</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-PED POLIO IMMUNE 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-POLIO IMMUNIZATION</td>
<td>IHS-POLIO</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reminder</td>
<td>Reminder Taxonomies* RPMS taxonomies**</td>
<td>Reminder Terms</td>
<td>CFs</td>
<td>Quick Orders</td>
<td>Objects</td>
</tr>
<tr>
<td>-------------------</td>
<td>----------------------------------------</td>
<td>-------------------------------------</td>
<td>-------------</td>
<td>--------------</td>
<td>-------------</td>
</tr>
<tr>
<td>IHS-PED ROTAVIRUS 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-ROTAVIRUS IMMUNIZATION</td>
<td>IHS-ROTA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-PED VARICELLA IMMUNE 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-VARICELLA IMMUNIZATION</td>
<td>IHS-VARICELLA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-PEDVAXHIB 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-PEDVAXHIB IMMUNIZATION</td>
<td>IHS-PEDVAXHIB</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-PNEUMOVA X IMMUN 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-PNEUMOVA X IMMUNIZATION</td>
<td>IHS-PNEUMO</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-PPD 2012</td>
<td>IHS-TB/POS PPD 2011</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-RUBELLA IMMUN 2012</td>
<td>RPMS taxonomies</td>
<td>IHS-RUBELLA IMMUNIZATION</td>
<td>IHS-RUBELLA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-SENIOR HEIGHT 2011</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-SENIOR VISION 2011</td>
<td></td>
<td></td>
<td>IHS-VISIO</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-TD IMMUNIZATION 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-TD IMMUNIZATION</td>
<td>IHS-TD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-TDAP IMMUNE 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-TDAP IMMUNE</td>
<td>IHS-TDAP</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-TOBACCO SCREEN 2011</td>
<td>RPMS taxonomies</td>
<td></td>
<td>IHS-TOBACCO 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-VISION EXAM</td>
<td></td>
<td></td>
<td>IHS-VISION 2009</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-WEIGHT 2012</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-ZOSTER IMMUNE 2012</td>
<td><em><strong>forecaster</strong></em></td>
<td>IHS-ZOSTER IMMUNIZATION</td>
<td>IHS-ZOSTER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DIALOG ONLY</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reminder</td>
<td>Reminder Taxonomies* RPMS taxonomies**</td>
<td>Reminder Terms</td>
<td>CFs</td>
<td>Quick Orders</td>
<td>Objects</td>
</tr>
<tr>
<td>--------------------------</td>
<td>----------------------------------------</td>
<td>----------------</td>
<td>-----</td>
<td>--------------</td>
<td>--------------------------------------------------------------------------</td>
</tr>
<tr>
<td>IHS-ASBI BNI 2011</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-ASBI SCREENING 2012</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-ASTHMA INTAKE 2012</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-MED THERAPY MNGT 2011</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-PED PEDIARIX IMMUN 2012</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IHS-PHN HOSPITAL DC VISIT</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>BPXRM LAST PHQ2 BPXRM LAST PHQ9, PATIENT NAME, PATIENT SEX, PATIENT AGE-DETAILED, BPXRM ALCOHOL SCREEN, LAST AUDIT C 3, LAST CRAFFT 3, BPXRM UPDATED TOBACCO, BPXRM DEPRESSION SCREEN, BPXRM INTIMATE PARTNER VIOLENCE, LAST HF OCCUPATION, V MEASUREMENT, V POV MULTI LINE, V ACTIVITY TIME, V TRAVEL TIME, V TOTAL TIME,</td>
</tr>
<tr>
<td>IHS-PHQ9 SCREEN 2011</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>BPXRM LAST PHQ2 BPXRM LAST PHQ9</td>
</tr>
<tr>
<td>IHS-SCREENING BUNDLE 2011</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>BPXRM LAST PHQ2 BPXRM LAST PHQ9, BPXRM INTIMATE PARTNER VIOLENCE,, BPXRM UPDATED TOBACCO</td>
</tr>
</tbody>
</table>
Appendix C: Reminder Taxonomies

The following provides information about reminder taxonomies released in previous patches as well as updated and new Reminder Taxonomies of PXRM 1008 that will be installed through the exchange.

If this is the first time you have installed this category of reminder (example: Asthma) then the Reminder Taxonomy will be installed through the exchange.

C.1 IHS-ASTHMA 2007

<table>
<thead>
<tr>
<th>Code Sets:</th>
<th>ICD9 RANGE</th>
<th>ICD0 RANGE</th>
<th>CPT RANGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>LOW HIGH</td>
<td>LOW HIGH</td>
<td>LOW HIGH</td>
<td>LOW HIGH</td>
</tr>
<tr>
<td>493.00 493.92</td>
<td>LOW HIGH</td>
<td>LOW HIGH</td>
<td>LOW HIGH</td>
</tr>
</tbody>
</table>

Figure C-1: IHS-ASTHMA 2007

C.2 IHS-BILATERAL MASTECTOMY 2008

<table>
<thead>
<tr>
<th>Code Sets:</th>
<th>ICD9 RANGE</th>
<th>ICD0 RANGE</th>
<th>CPT RANGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>LOW HIGH</td>
<td>LOW HIGH</td>
<td>LOW HIGH</td>
<td>LOW HIGH</td>
</tr>
<tr>
<td>85.42 85.42</td>
<td>85.44 85.44</td>
<td>85.42 85.44</td>
<td>85.44 85.44</td>
</tr>
</tbody>
</table>

Figure C-2: IHS-BILATERAL MASTECTOMY 2008

C.3 Taxonomies for IHS-COLON CANCER 2009

The following provides information the various taxonomies for colon cancer.

C.3.1 IHS-BARIUM ENEMA

<table>
<thead>
<tr>
<th>Code Sets:</th>
<th>ICD9 RANGE</th>
<th>ICD0 RANGE</th>
<th>CPT RANGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>LOW HIGH</td>
<td>LOW HIGH</td>
<td>LOW HIGH</td>
<td>LOW HIGH</td>
</tr>
<tr>
<td>74270 74280</td>
<td>G0106 G0106</td>
<td>G0120 G0120</td>
<td>G0120 G0120</td>
</tr>
</tbody>
</table>

Figure C-3: IHS-BARIUM ENEMA
C.3.2 IHS-COLONOSCOPY 2007

<table>
<thead>
<tr>
<th>Patient Data Source:</th>
<th>EN, PL, IN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Code Sets:</td>
<td></td>
</tr>
<tr>
<td>ICD9 RANGE</td>
<td>ICD0 RANGE</td>
</tr>
<tr>
<td>LOW      HIGH</td>
<td>LOW HIGH</td>
</tr>
<tr>
<td>45.22    45.22</td>
<td>45355</td>
</tr>
<tr>
<td>45.23    45.23</td>
<td>45378</td>
</tr>
<tr>
<td>45.25    45.25</td>
<td>G0105</td>
</tr>
<tr>
<td>76.51    76.51</td>
<td>G0121</td>
</tr>
</tbody>
</table>

Figure C- 4: IHS-COLONOSCOPY 2007

C.3.3 IHS-COLORECTAL CANCER

<table>
<thead>
<tr>
<th>Patient Data Source:</th>
<th>EN, PL</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICD9 RANGE</td>
<td>ICD0 RANGE</td>
</tr>
<tr>
<td>LOW     HIGH</td>
<td>LOW     HIGH</td>
</tr>
<tr>
<td>153.0   153.9</td>
<td>44150    44153</td>
</tr>
<tr>
<td>154.0   154.1</td>
<td>44155    44156</td>
</tr>
<tr>
<td>197.5   197.5</td>
<td>44210    44212</td>
</tr>
</tbody>
</table>

Figure C- 5: IHS-COLORECTAL CANCER

C.3.4 IHS-SIGMOIDOSCOPY

<table>
<thead>
<tr>
<th>Patient Data Source:</th>
<th>EN, PL, IN</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICD9 RANGE</td>
<td>ICD0 RANGE</td>
</tr>
<tr>
<td>LOW     HIGH</td>
<td>LOW     HIGH</td>
</tr>
<tr>
<td>45.24   45.24</td>
<td>45330    45345</td>
</tr>
<tr>
<td>45.42   45.42</td>
<td>G0104    G010</td>
</tr>
</tbody>
</table>

Figure C- 6: IHS-SIGMOIDOSCOPY
### C.3.5 IHS-DEPO PROVERA ADMINISTRATION

<table>
<thead>
<tr>
<th>Patient Data Source:</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICD9 RANGE</td>
<td>ICD0 RANGE</td>
</tr>
<tr>
<td>LOW</td>
<td>HIGH</td>
</tr>
<tr>
<td>J1055</td>
<td>J1055</td>
</tr>
</tbody>
</table>

Figure C-7: IHS-DEPO PROVERA ADMINISTRATION

### C.3.6 IHS-DIABETES DX 2007

<table>
<thead>
<tr>
<th>Patient Data Source:</th>
<th>EN,PL</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICD9 RANGE</td>
<td>ICD0 RANGE</td>
</tr>
<tr>
<td>LOW</td>
<td>HIGH</td>
</tr>
<tr>
<td>250.00</td>
<td>250.93</td>
</tr>
</tbody>
</table>

Figure C-8: IHS-DIABETES DX 2007

### C.3.7 IHS-DIABETES PROBLEMS ONLY

<table>
<thead>
<tr>
<th>Patient Data Source:</th>
<th>PL</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICD9 RANGE</td>
<td>ICD0 RANGE</td>
</tr>
<tr>
<td>LOW</td>
<td>HIGH</td>
</tr>
<tr>
<td>250.00</td>
<td>250.93</td>
</tr>
</tbody>
</table>

Figure C-9: Diabetes Problems Only

### C.3.8 IHS-DIABETIC NEPHROPATHY

<table>
<thead>
<tr>
<th>Patient Data Source:</th>
<th>EN,PL</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICD9 RANGE</td>
<td>ICD0 RANGE</td>
</tr>
<tr>
<td>LOW</td>
<td>HIGH</td>
</tr>
<tr>
<td>250.40</td>
<td>250.43</td>
</tr>
</tbody>
</table>

Figure C-10: Diabetic Nephropathy Codes
## C.3.9 IHS-DIALYSIS

<table>
<thead>
<tr>
<th>Patient Data Source:</th>
<th>EN, PL</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICD9 RANGE</td>
<td>ICD0 RANGE</td>
</tr>
<tr>
<td>LOW</td>
<td>HIGH</td>
</tr>
<tr>
<td>V45.1</td>
<td>V45.12</td>
</tr>
</tbody>
</table>

Figure C-11: Dialysis Codes

## C.3.10 IHS-FUNDOSCOPIC EYE CODES 2007

<table>
<thead>
<tr>
<th>Patient Data Source:</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICD9 RANGE</td>
<td>ICD0 RANGE</td>
</tr>
<tr>
<td>LOW</td>
<td>HIGH</td>
</tr>
<tr>
<td>V72.0</td>
<td>V72.0</td>
</tr>
</tbody>
</table>

Figure 4.9 Fundoscopic Eye Codes

## 22.1.15 IHS-HYPERTENSION 2007

<table>
<thead>
<tr>
<th>Patient Data Source:</th>
<th>EN, PL</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICD9 RANGE</td>
<td>ICD0 RANGE</td>
</tr>
<tr>
<td>LOW</td>
<td>HIGH</td>
</tr>
<tr>
<td>401.0</td>
<td>405.99</td>
</tr>
</tbody>
</table>

Figure C-12: Hypertension Codes

## C.3.11 IHS-HYSTERECTOMY 2009

<table>
<thead>
<tr>
<th>Patient Data Source:</th>
<th>EN, PL, IN</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICD9 RANGE</td>
<td>ICD0 RANGE</td>
</tr>
<tr>
<td>LOW</td>
<td>HIGH</td>
</tr>
<tr>
<td>68.4</td>
<td>68.9</td>
</tr>
</tbody>
</table>
### C.3.12  IHS-ISCHEMIC HEART DISEASE 2007

<table>
<thead>
<tr>
<th>Patient Data Source:</th>
<th>EN, PL</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICD9 RANGE</td>
<td>ICD0 RANGE</td>
</tr>
<tr>
<td>LOW</td>
<td>HIGH</td>
</tr>
<tr>
<td>410.0</td>
<td>412.0</td>
</tr>
<tr>
<td>429.2</td>
<td>429.2</td>
</tr>
</tbody>
</table>

**Figure C-13: Hysterectomy Codes**

### C.3.13  IHS-OSTEOPOROSIS DX

<table>
<thead>
<tr>
<th>Patient Data Source:</th>
<th>EN, PL</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICD9 RANGE</td>
<td>ICD0 RANGE</td>
</tr>
<tr>
<td>LOW</td>
<td>HIGH</td>
</tr>
<tr>
<td>733.00</td>
<td>733.99</td>
</tr>
</tbody>
</table>

**Figure C-14: Ischemic Heart Disease Codes**

### C.3.14  IHS-TB/POS PPD 2011

<table>
<thead>
<tr>
<th>Patient Data Source:</th>
<th>EN, PL</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICD9 RANGE</td>
<td>ICD0 RANGE</td>
</tr>
<tr>
<td>LOW</td>
<td>HIGH</td>
</tr>
<tr>
<td>010.00</td>
<td>018.90</td>
</tr>
<tr>
<td>795.5</td>
<td>795.5</td>
</tr>
</tbody>
</table>

**Figure C-15: Osteoporosis Codes**

**Figure C-16: Positive TB Codes**
Appendix D: Reminder Terms

D.1 IHS-ACTIVITY LEVEL

CLASS: VISN
FINDING ITEM:
ACTIVE (FI(1)=HF(74))
INACTIVE (FI(2)=HF(72))
SOME ACTIVITY (FI(3)=HF(73))
VERY ACTIVE (FI(4)=HF(75))

Figure D-1: Used in the IHS-ACTIVITY SCREEN 2011 reminder

D.2 IHS-ASTHMA CONTROL

CLASS: VISN
FINDING ITEM:
WELL CONTROLLED (FI(1)=ASM(1))
NOT WELL CONTROLLED (FI(2)=ASM(2))
VERY POORLY CONTROLLED (FI(3)=ASM(3))

Figure D-2: Used in the IHS-ASTHMA CONTROL 2011 reminder

D.3 IHS-ACE/ARB

CLASS: VISN
DESCRIPTION: Groupings of ace/arb drugs
FINDING ITEM: CV800
FINDING ITEM: CV805

Figure D-3: Used in the IHS-DIAB ACE/ARB 2011 reminder.

D.4 IHS-ASPIRIN

CLASS: VISN
FINDING ITEM: ASPIRIN

Figure D-4: Used in the IHS-DIAB ANTIPLT KNOWN CVD 2011, IHS-DIAB ASPIRIN FEMALE 2011, IHS-DIAB ASPIRIN MALE 2011 reminders

D.5 IHS-CLOPIDOGREL

CLASS: VISN
FINDING ITEM: CLOPIDOGREL (FI(1)=DG(3467))

Figure D-5: Used in the IHS-DIAB ANTIPLT KNOWN CVD 2011, IHS-DIAB ASPIRIN FEMALE 2011, IHS-DIAB ASPIRIN MALE 2011 reminders
D.6 23.6 IHS-DEPO PROVERA ORDERABLE ITEM

| CLASS: VISN |
| FINDING ITEM: MEDROXYPROGESTERONE (FI(1)=DG(194)) |

Figure D-6: Used in the IHS-DEPO PROVERA 2011 reminder

D.7 IHS-DTAP IMMUNIZATION

| CLASS: VISN |
| DESCRIPTION: DTaP immunization from the immunization file |
| FINDING ITEM: DTaP |

Figure D-7: Used in the IHS-PED DTAP IMMUNE 2011 reminder.

D.8 IHS-DIAB NEPHRONEPHROPATHY LABS

| CLASS: VISN |
| FINDING ITEM: |

Figure D-8: Used in the IHS-DIAB ACE/ARB 2011 reminder

D.9 IHS-DM BLOOD PRESSURE

| CLASS: VISN |
| NAME: IHS-DM BLOOD PRESSURE |
| FINDING ITEM: BP |
| CONDITION: I ($P(V,"/",1)>129)!($P(V,"/",2)>79) |

Figure D-9: Used in the IHS-DIAB BP CONTROL 2011 reminder

D.10 IHS-EGFR

| CLASS: VISN |
| FINDING ITEM: |

Figure D-10: Used in the IHS-DIAB NEPHRO SCR/MON 2011 reminder.

D.11 IHS-EXERCISE EDUCATION

| CLASS: VISN |
| FINDING ITEM: HPDP-EXERCISE |

Figure D-11: Used in the IHS-ACTIVITY SCREEN 2011 reminder
D.12  IHS-FECAL OCCULT BLOOD

CLASS: VISN  
FINDING ITEM:  

Figure D-12: Information

D.13  IHS-HEPADULT IMMUNIZATION

CLASS: VISN  
FINDING ITEM: HEP A, ADULT  

Figure D-13: Used in the IHS-HEP A ADULT IMMUN 2011 reminder

D.14  IHS-HEBADULT IMMUNIZATION

CLASS: VISN  
FINDING ITEM: HEP B, ADULT  

Figure D-14: Used in the IHS-HEP B ADULT IMMUN 2011

D.15  IHS-HPV IMMUNIZATION

CLASS: LOCAL  
FINDING ITEM: HPV QUADRIVALENT  
FINDING ITEM: HPV, bivalent  

Figure D-15: Used in the IHS-HPV IMMUNIZATION 2011 reminder

D.16  IHS-HCT/HCB

CLASS: VISN  
FINDING ITEM:  

Figure D-16: Used in the IHS-HCG/HCT 2011 reminder

D.17  IHS-HEPA IMMUNIZATION

CLASS: VISN  
FINDING ITEM: HEP A, PED/ADOL, 2 DOSE  
FINDING ITEM: HEP A, PEDIATRIC, NOS  
CLASS: VISN  

Figure D-17: Used in the IHS-PED HEPA IMMUNE 2011 reminder

D.18  IHS-HEPB IMMUNIZATION

CLASS: VISN  
DESCRIPTION: Hep B vaccine from immunization file
FINDING ITEM: HEP B, ADOLESCENT OR PEDIATRIC

Figure D- 18: Used in the IHS-PED HEPB IMMUNE 2011 reminder

D.19 19IHS-HGBA1C

CLASS: VISN
DESCRIPTION: The lab tests at a site that are the hemoglobin A1c test
FINDING ITEM:

Figure D- 19: Used in the IHS-DIAB HGBA1C 2011, IHS-DIAB HGBA1C CONTROL 2011 reminders

D.20 IHS-HGBA1C REEVALUATE

CLASS: VISN
FINDING ITEM: HEMOGLOBIN A1C (FI(1)=LT(97))
CONDITION: I V>6.9
Condition: Enter the threshold for every lab added. By default the threshold is set to 6.9. I V>6.9 will make the reminder due every 3 months if the HEMOGLOBIN A1C is above 6.9.

Figure D- 20: Used in the IHS-DIAB HGBA1C CONTROL 2011 reminder

D.21 IHS-HIBTITER IMMUNIZATION

CLASS: VISN
DESCRIPTION: Hibtiter from the vaccination file
FINDING ITEM: HIB (HBOC)
FINDING ITEM: HIB, NOS

Figure D- 21: Used in the IHS-PED HIBTITER IMMUNE 2011 reminder

D.22 IHS-HIGH DIASTOLIC

CLASS: LOCAL
FINDING ITEM: BP
EFFECTIVE PERIOD: 1Y
CONDITION: I ($P(V,"/",2)>84)&($P(V,"/",2)<90)

Figure D- 22: Used in the IHS-BLOOD PRESSURE 2011 reminder

D.23 IHS-HIGH BP 2007

NAME: IHS-HIGH BP 2007
FINDING ITEM: BP
CONDITION: I ($P(V,"/",1)>139)!($P(V,"/",2)>89)

Figure D- 23: Used in the IHS-BLOOD PRESSURE 2011 reminder
D.24  IHS-INFLUENZA 2011

| CLASS: LOCAL |
| FINDING ITEM: INFLUENZA, NOS |
| FINDING ITEM: INFLUENZA, SPLIT [TIVhx] (INCL PURIFIED) |
| FINDING ITEM: INFLUENZA, INTRANASAL |
| FINDING ITEM: INFLUENZA, WHOLE |
| FINDING ITEM: INFLUENZA [TIV], SEASONAL, INJ |
| FINDING ITEM: INFLUENZA [TIVpf], SEASONAL INJ, P FREE |
| FINDING ITEM: INFLUENZA, HIGH DOSE SEASONAL |

Figure D-24: Used in the IHS-INFLUENZA IMMUNIZATION 2011 reminder

D.25  IHS-LIPID LAB TESTS

| CLASS: VISN |
| FINDING ITEM: |

Figure D-25: Used in the IHS-LIPID FEMALE 2011 and IHS-LIPID MALE 2011 reminders

D.26  IHS-MENINGITIS IMMUNE

| CLASS: VISN |
| FINDING ITEM: MENINGOCOCCAL, NOS |
| FINDING ITEM: MENINGOCOCCAL C CONJUGATE |
| FINDING ITEM: MENINGOCOCCAL |
| FINDING ITEM: MENINGOCOCCAL A,C,Y,W-135 DIPHTHERIA CONJ |

Figure D-26: Used in the IHS-MENINGITIS IMMUNIZATION 2011 reminder

D.27  IHS-MMR IMMUNIZATOIN

| CLASS: VISN |
| DESCRIPTION: MMR vaccinations from the immunization file |
| FINDING ITEM: MMR |

Figure D-27: Used in the IHS-PED MMR IMMUNE 2011 reminder

D.28  IHS-PED PNEUMOVAX IMMUNIZATION

| CLASS: LOCAL |
| FINDING ITEM: Pneumococcal, PCV-7 |
| FINDING ITEM: Pneumococcal, PCV-13 |

Figure D-28: Used in the IHS-PED PNEUMOCOCCAL IMMUN 2011 reminder
D.29  IHS-PED TD IMMUNIZATION

CLASS: LOCAL
NAME: IHS-PED TD IMMUNIZATION
FINDING ITEM: DT (PEDIATRIC)

Figure D-29: Used in the IHS-PED DT IMMUNIZATION 2011 reminder

D.30  HS-PEDVAXHIB IMMUNIZATION

CLASS: VISN
FINDING ITEM: HIB (PRP-OMP)
FINDING ITEM: HIB, NOS

Figure D-30: Used in the IHS-PEDVAXHIB IMMUN 2011 reminder

D.31  IHS-PNEUMOVAX IMMUNIZATION

CLASS: VISN
FINDING ITEM: PNEUMOCOCCAL

Figure D-31: Used in the IHS-PNEUMOVAX IMMUN 2011 reminder

D.32  IHS-POLIO IMMUNIZATION

CLASS: LOCAL
NAME: IHS-POLIO IMMUNIZATION
FINDING ITEM: IPV

Figure D-32: Used in the IHS-PED POLIO IMMUN 2011 reminder

D.33  IHS-ROTAVIRUS IMMUNIZATION

CLASS: LOCAL
NAME: IHS-ROTAVIRUS IMMUNIZATION  DATE CREATED: DEC 07, 2007
FINDING ITEM: ROTAVIRUS TETRAVALENT
FINDING ITEM: ROTAVIRUS, MONOVALENT
FINDING ITEM: ROTAVIRUS, NOS
FINDING ITEM: ROTAVIRUS, PENTAVALENT

Figure D-33: Used in the IHS-PED ROTAVIRUS 2011 immunization reminder

D.34  IHS-RUBELLA IMMUNIZATION

CLASS: VISN
FINDING ITEM:: RUBELLA (FI(1)=IM(114))

Figure D-34: Used in the IHS-RUBELLA 2011 reminder
D.35 IHS-TD IMMUNIZATION

CLASS: VISN
NAME: IHS-TD IMMUNIZATION
FINDING ITEM: TD (ADULT)

Figure D-35: Used in the IHS-TD IMMUNIZATION 2011 reminder

D.36 IHS-TDAP IMMUN

CLASS: VISN
NAME: IHS-TDAP IMMUNE
FINDING ITEM: Tdap

Figure D-36: Used in the IHS TDAP IMMUNE 2011 reminder

D.37 IHS-URINE ALBUMIN

CLASS: VISN
FINDING ITEM:

Figure D-37: Used in the IHS-DIAB NEPHRO SCR/MON 2011 reminder

D.38 IHS-VARICELLA IMMUNIZATION

CLASS: VISN
DESCRIPTION: Varicella immunization terms from the immunization file
FINDING ITEM: VARICELLA

Figure D-38: Used in the IHS-PED VARICELLA IMMUNE 2011 reminder

D.39 IHS-ZOSTER IMMUNIZATION

CLASS: VISN
FINDING ITEM: ZOSTER (FI(1)=IM(227))

Figure D-39: Used in the IHS-ZOSTER IMMUN 2011 reminder
Appendix E: Reminders Using Computed Findings

Reminders use computed findings to return the following types of data from RPMS:

- Health Maintenance Reminders
- Best Practice Prompts
- Immunization Forecast
- Special cases

E.1 Reminders Using Health Maintenance Reminder Computed Finding

The computed findings from these reminders will return the finding from Health Maintenance Reminders resolution – see Chapter 4 for resolution logic. The cohort and the frequency are configured within the EHR Reminder.

IHS-ALCOHOL SCREEN 2012
IHS-CHLAMYDIA SCREEN 2011
IHS-DENTAL VISIT 2011
IHS-DEPRESSION SCREENING 2011
IHS-DIABETES SCREENING 2011
IHS-DOMESTIC VIOLENCE 2012
IHS-EPSDT SCREENING 2012
IHS-FALL RISK SCREEN 2011
IHS-FUNCTIONAL ASSESSMENT 2011
IHS-HEAD CIRCUMFERENCE 2012
IHS-HIV SCREEN 2012
IHS-MAMMOGRAM 2011
IHS-NEWBORN HEARING 2011
IHS-NUTRITIONAL SCREENING 2012
IHS-OSTEOPOROSIS SCREENING 2011
IHS-PAP SMEAR 2011
IHS-SENIOR VISION 2011
IHS-TOBACCO SCREEN 2011

E.2 Reminders Using PCC Best Practice Prompt Computed Finding

The computed findings from these reminders will return whether the Best Practice Prompt for the patient is active. If it is active, the reminder is due. See Chapter 4 for resolution logic. The cohort and the frequency are configured within the EHR Reminder.
IHS-ANTICOAG CBC 2011
IHS-ANTICOAG DURATION OF TX 2011
IHS-ANTICOAG INR GOAL 2011
IHS-ANTICOAG OCCULT BLOOD 2011
IHS-ANTICOAG THERAPY END DATE 2011
IHS-ANTICOAG UA 2011
IHS-ASTHMA CONTROL 2011
IHS-ASTHMA ACTION PLAN 2012
IHS-ASTHMA PRIM PROV 2012
IHS-ASTHMA RISK EXACERBATION 2011
IHS-ASTHMA SEVERITY 2012
IHS-ASTHMA STEROID 2012

E.3 Reminders Using Immunization Forecast Computed Finding

The computed findings from these reminders return whether an immunization is due or not due. They are used in resolution logic to resolve reminder.

IHS-HEP A ADULT IMMUN 2012
IHS-HEP B ADULT IMMUN 2012
IHS-HPV IMMUN 2012
IHS-INFLUENZA IMMUN 2012
IHS-MENINGITIS IMMUN 2012
IHS-PED DT IMMUN 2012
IHS-PED DTAP IMMUN 2012
IHS-PED FLU IMMUN 2012
IHS-PED HEPA IMMUN 2012
IHS-PED HEPB IMMUN 2012
IHS-PED HIBTITER IMMUN 2012
IHS-PED MMR IMMUN 2012
IHS-PED PEDVAXHIB IMMUN 2012
IHS-PED PNEUMOCOCCAL IMMUN 2012
IHS-PED POLIO IMMUN 2012
IHS-PED ROTAVIRUS IMMUN 2012
IHS-PED VARICELLA IMMUN 2012
IHS-PNEUMOVAX IMMUN 2012
IHS-TD IMMUN 2012
IHS-TDAP IMMUN 2012
IHS-ZOSTER IMMUN 2012

E.4 Reminders Using Special Case Computed Findings

IHS-IMMUNIZATION FORECASTER 2011
IHS-CVD2011
IHS-ALLERGY 2012

IHS-CVD 2011 Reminder: Uses a computed finding to return the CVD iCare tag. If the patient has an iCare CVD diagnostic tag, the reminder is applicable and due. If not it is not applicable. This reminder does not resolve (It will never be blue).

IHS-Allergy 2012 Reminder: is applicable and due if no allergy assessment has ever been done. Removed from cohort once an allergy assessment or no known allergies is documented in the allergy/adverse reaction component. This reminder does not resolve (it will never be blue).

IHS-Immunization forecaster 2011 Reminder: is a placeholder. It is always applicable and never due.

E.5 Computed Findings Entry Points

<table>
<thead>
<tr>
<th>Name</th>
<th>Routine</th>
<th>Entry Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>IHS-ALCOHOL 2009</td>
<td>BPXRMPCC</td>
<td>ALCOHOL</td>
</tr>
<tr>
<td>IHS-ALLERGY ASPIRIN 2009</td>
<td>BPXRMALL</td>
<td>ALLASP</td>
</tr>
<tr>
<td>IHS-ALLERGY ACE/ARBS</td>
<td>BPXRMAL1</td>
<td>AAREM</td>
</tr>
<tr>
<td>IHS-ALLERGY EGG</td>
<td>BPXRMALL</td>
<td>ALLEGG</td>
</tr>
<tr>
<td>IHS-ALLERGY PLAVIX</td>
<td>BPXRMALL</td>
<td>ALLCLOP</td>
</tr>
<tr>
<td>IHS-ANTICOAG CBC</td>
<td>BPXRMTPT</td>
<td>AACPT</td>
</tr>
<tr>
<td>IHS-ANTICOAG END</td>
<td>BPXRMTPT</td>
<td>INREND</td>
</tr>
<tr>
<td>IHS-ANTICOAG FOBT</td>
<td>BPXRMTPT</td>
<td>ACFOBT</td>
</tr>
<tr>
<td>IHS-ANTICOAG URINE</td>
<td>BPXRMTPT</td>
<td>ACURIN</td>
</tr>
<tr>
<td>IHS-ASTHMA CONTROL</td>
<td>BPXRMASM</td>
<td>CONTROL</td>
</tr>
<tr>
<td>IHS-ASTHMA EXACERBATION</td>
<td>BPXRMASM</td>
<td>RISK</td>
</tr>
<tr>
<td>IHS-ASTHMA PLAN</td>
<td>BPXRMASM</td>
<td>PLAN</td>
</tr>
<tr>
<td>IHS-ASTHMA PRIMARY</td>
<td>BPXRMASM</td>
<td>PRIMARY</td>
</tr>
<tr>
<td>IHS-ASTHMA SEVERITY</td>
<td>BPXRMASM</td>
<td>SEVERITY</td>
</tr>
<tr>
<td>IHS-ASTHMA STEROIDS</td>
<td>BPXRMASM</td>
<td>STEROID</td>
</tr>
<tr>
<td>IHS-BLOOD PRESSURE 2011</td>
<td>BPXRMPCC</td>
<td>DENTAL</td>
</tr>
<tr>
<td>IHS-CHLAMYDIA</td>
<td>BPXRMPC1</td>
<td>CHYLAMYDI</td>
</tr>
<tr>
<td>IHS-CVD RISK</td>
<td>BPXRMTPT</td>
<td>CVD</td>
</tr>
<tr>
<td>IHS-DENTAL 2009</td>
<td>BPXRMPCC</td>
<td>DENTAL</td>
</tr>
<tr>
<td>IHS-DEPRESSION 2009</td>
<td>BPXRMPCC</td>
<td>DEPRESS</td>
</tr>
<tr>
<td>IHS-DIAB ASPIRIN 2009</td>
<td>BPXRMALL</td>
<td>ALLASP</td>
</tr>
<tr>
<td>Name</td>
<td>Routine</td>
<td>Entry Points</td>
</tr>
<tr>
<td>--------------------</td>
<td>---------------</td>
<td>--------------</td>
</tr>
<tr>
<td>IHS-DIABETES 2009</td>
<td>BPXRMPCC</td>
<td>DIABETES</td>
</tr>
<tr>
<td>IHS-DTAP</td>
<td>BPXRMMM</td>
<td>DTAP</td>
</tr>
<tr>
<td>IHS-EPDST 2009</td>
<td>BPXRMPCC</td>
<td>EPSDT</td>
</tr>
<tr>
<td>IHS-FALL RISK</td>
<td>BPXRMPC1</td>
<td>FALL</td>
</tr>
<tr>
<td>IHS-FLU</td>
<td>BPXRMI1</td>
<td>FLU</td>
</tr>
<tr>
<td>IHS-FUNCTION 2009</td>
<td>BPXRMPCC</td>
<td>FUNCTION</td>
</tr>
<tr>
<td>IHS-HEARING 2009</td>
<td>BPXRMPCC</td>
<td>HEAR</td>
</tr>
<tr>
<td>IHS-HEPA</td>
<td>BPXRMI1</td>
<td>HEPA</td>
</tr>
<tr>
<td>IHS-HEPA ADULT</td>
<td>BPXRMI1</td>
<td>HEPADULT</td>
</tr>
<tr>
<td>IHS-HEPB</td>
<td>BPXRMI1</td>
<td>HEPB</td>
</tr>
<tr>
<td>IHS-HEPB ADULT</td>
<td>BPXRMI1</td>
<td>HEPBADULT</td>
</tr>
<tr>
<td>IHS-HIB</td>
<td>BPXRMMM</td>
<td>HIB</td>
</tr>
<tr>
<td>IHS-HIV</td>
<td>BPXRMPC1</td>
<td>HIV</td>
</tr>
<tr>
<td>IHS-HPV</td>
<td>BPXRMI1</td>
<td>HPV</td>
</tr>
<tr>
<td>IHS-INR DURATION</td>
<td>BPXRMTTP</td>
<td>INRDUR</td>
</tr>
<tr>
<td>IHS-INR GOAL</td>
<td>BPXRMTTP</td>
<td>INRGOAL</td>
</tr>
<tr>
<td>IHS-IPVS 2009</td>
<td>BPXRMPCC</td>
<td>IPVS</td>
</tr>
<tr>
<td>IHS-MAMMOGRAM 2009</td>
<td>BPXRMPCC</td>
<td>MAMMO</td>
</tr>
<tr>
<td>IHS-MениNGITIS</td>
<td>BPXRMI1</td>
<td>MENING</td>
</tr>
<tr>
<td>IHS-MMR</td>
<td>BPXRMMM</td>
<td>MMR</td>
</tr>
<tr>
<td>IHS-NEWBORN HEARING</td>
<td>BPXMRPC1</td>
<td>NBHS</td>
</tr>
<tr>
<td>IHS-NUTRITION</td>
<td>BPXRMPCC</td>
<td>NUTR</td>
</tr>
<tr>
<td>IHS-OSTEO 2009</td>
<td>BPXRMPCC</td>
<td>OSTEO</td>
</tr>
<tr>
<td>IHS-PAP 2009</td>
<td>BPXRMPCC</td>
<td>PAP</td>
</tr>
<tr>
<td>IHS-PEDVAXHIB</td>
<td>BPXRMMM</td>
<td>PEDIAVAC</td>
</tr>
<tr>
<td>IHS-PNEUMO</td>
<td>BPXRMI1</td>
<td>PNEUMO</td>
</tr>
<tr>
<td>IHS-PNEUPED</td>
<td>BPXRMI1</td>
<td>PNEUPED</td>
</tr>
<tr>
<td>IHS-POLIO</td>
<td>BPXRMMM</td>
<td>POLIO</td>
</tr>
<tr>
<td>IHS-ROTA</td>
<td>BPXRMMI3</td>
<td>ROTA</td>
</tr>
<tr>
<td>IHS-RUBELLA</td>
<td>BPXRMPC1</td>
<td>RUB</td>
</tr>
<tr>
<td>IHS-TD</td>
<td>BPXRMI1</td>
<td>TD</td>
</tr>
<tr>
<td>IHS-TDAP</td>
<td>BPXRMI1</td>
<td>TDAP</td>
</tr>
<tr>
<td>IHS-TDPEDS</td>
<td>BPXRMI1</td>
<td>TDPED</td>
</tr>
<tr>
<td>IHS-TOBACCO 2009</td>
<td>BPXRMPCC</td>
<td>TOBACCO</td>
</tr>
<tr>
<td>IHS-VARICELLA</td>
<td>BPXRMMM</td>
<td>VARI</td>
</tr>
<tr>
<td>IHS-VISION 2009</td>
<td>BPXRMPCC</td>
<td>VISION</td>
</tr>
<tr>
<td>Name</td>
<td>Routine</td>
<td>Entry Points</td>
</tr>
<tr>
<td>--------------------</td>
<td>-----------</td>
<td>--------------</td>
</tr>
<tr>
<td>IHS-WARFARIN PT</td>
<td>BPXRMTPT</td>
<td>WAR</td>
</tr>
<tr>
<td>IHS-ZOSTER</td>
<td>BPXRMI3</td>
<td>ZOSTER</td>
</tr>
</tbody>
</table>
Appendix F: Reminder Parameter Summary

This section describes the locations of the menu options that are used when configuring reminders. Reminders maybe configured in three different menu options:

- REM Reminder Managers Menu ... [PXRM MANAGERS MENU]
- CP CPRS Reminder Configuration [PXRM CPRS CONFIGURATION]
- XX General Parameter Tools ... [XPAR MENU TOOLS]

This table describes the menu paths for each parameter:

<table>
<thead>
<tr>
<th>Name</th>
<th>RPMS-EHR Master menu</th>
<th>CPRS config menu</th>
<th>XX menu</th>
<th>What does it do?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reminder GUI Resolution Active</td>
<td>REM</td>
<td>PAR</td>
<td>ACT</td>
<td>RA</td>
</tr>
<tr>
<td>Add/Edit Reminder Categories</td>
<td>REM</td>
<td>PAR</td>
<td>CAT</td>
<td>CA</td>
</tr>
<tr>
<td>Allow EHR Configuration in GUI</td>
<td>REM</td>
<td>PAR</td>
<td>CFG</td>
<td></td>
</tr>
<tr>
<td>EHR Cover Sheet Reminder List</td>
<td>REM</td>
<td>PAR</td>
<td>CVR</td>
<td>CS</td>
</tr>
<tr>
<td>EHR Lookup Categories</td>
<td>REM</td>
<td>PAR</td>
<td>LKP</td>
<td>CL</td>
</tr>
<tr>
<td>Default Outside Location</td>
<td>REM</td>
<td>PAR</td>
<td>LOC</td>
<td>OL</td>
</tr>
<tr>
<td>New Reminder Parameters</td>
<td>REM</td>
<td>PAR</td>
<td>NEW</td>
<td>NP</td>
</tr>
<tr>
<td>Progress Note Headers</td>
<td>REM</td>
<td>PAR</td>
<td>PNH</td>
<td>PN</td>
</tr>
</tbody>
</table>
### Name

<table>
<thead>
<tr>
<th>Name</th>
<th>RPMS-EHR Master menu</th>
<th>CPRS config menu</th>
<th>XX menu</th>
<th>What does it do?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Position Reminder Text at Cursor</td>
<td>REM</td>
<td>PAR</td>
<td>POS</td>
<td>PT</td>
</tr>
<tr>
<td>New Cover Sheet Reminders Parameter</td>
<td></td>
<td></td>
<td>ORQQPX COVER SHEET REMINDERS</td>
<td>This just lists an RPMS view of what is configured from the GUI dialog. You will not alter this parameter from the RPMS side.</td>
</tr>
<tr>
<td>Reminder Dialogs Allowed as Templates</td>
<td>TIU</td>
<td>PAR</td>
<td>REM</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>DANE0: Due, Applicable, Not Applicable, All Evaluated, Other</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Addendum to Installation Notes
July 2012
Reminder Parameter Summary

201
Contact Information

If you have any questions or comments regarding this distribution, please contact the OIT Help Desk (IHS).

**Phone:** (505) 248-4371 or (888) 830-7280 (toll free)

**Fax:** (505) 248-4363

**Web:** [http://www.ihs.gov/GeneralWeb/HelpCenter/Helpdesk/index.cfm](http://www.ihs.gov/GeneralWeb/HelpCenter/Helpdesk/index.cfm)

**Email:** support@ihs.gov