

# EHRp13 Configuration

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EHR Program

# EHRp13 Patch Contents

EHRp13 KIDS and Executable files include the following content:

- OR\*3.0\*1012
- BEHO\*1.1\*011006
- CIAN\*1.1\*001010
- BEHO\*1.1\*065001
- BEHO\*1.1\*005011
- BGO\*1.1\*13
- BEHO\*1.1\*001010
- GMPL\*2.0\*1003
- BEHO\*1.1\*034002
- BEHO\*1.1\*044004
- BEHO\*1.1\*066001
- BEHO\*1.1\*067001
- BEHO\*1.1\*009011
- BEHO\*1.1\*027003
- BEHO\*1.1\*045007
- BEHO\*1.1\*068001
- EHR BUSA 1.1
- BEHO\*1.1\*039002
- IHS IMAGING 1.0
- PX\*1.0\*1002

# EHRp13 Patch Contents (cont.)

The following documentation is contained in the release:

- ehr\_0110.13n Installation notes (this file)
- ehr\_0110.13o.pdf Release Notes
- ehr\_0110.13iv.pdf IHS Image Viewer User Guide
- ehr\_0110.13u.pdf User Guide
- ehr\_0110.13s.pdf Setup Guide
- ehr\_0110.13sapdf Troubleshooting guide

# TIUv1.0 1011/1012 Patch Contents

TIUv1.0p1011 is a mega patch to update the application with the VA patches needed for CPRS 28 and Reminders 2.0.

TIUv1.0p1012 contains updated objects to support Meaningful Use 2014 changes delivered in the RPMS suite of applications.

# BHSv1.0 p8

Updated components to support Meaningful Use 2014 changes in the RPMS suite of applications.

# GMTS v2.7 p1003

Mega patch to update VA Health Summary application.

# PXRMv2.0 p1001/1002 Patch Contents

## PXRM v2.0

VA Clinical Reminders version 2.0

## PXRM v2.0 p1001

Contains IHS modifications to PXRM v2.0 routines

## PXRM v2.0 p1002

Contains updated National Reminder set

# Layout Considerations

- Visit Diagnoses are selected from the problem list and component is now view only
- Consider grouping “Problem Management” to include IPL, Family History, Surgical History and other problem/POV focused documentation
- Consider grouping “Services” on a tab with display of selected POV’s

# Sample Layouts:

## IPL with Selected Visit Diagnoses

- Users will need to know which problems have been used as POV.
- EHRp14 will introduce a column with a check box when in a visit the user can see which problems are used as POV.

The screenshot displays an EHR interface with a 'Problem List' tab highlighted in red. Below the navigation tabs, there are filters for 'Chronic', 'Episodic', and 'Sub-acute' problems. A table lists various medical conditions with columns for Status, Onset Date, Provider Narrative, Comments, PHx, PIP, IP, and ICD. Below this, a 'Visit Diagnosis' section is visible, showing a table with columns for SNOMED CT, Provider Narrative, Provider Text, ICD, Priority, Asthma Control, Cause, Injury Date, Injury Cause, Injury Place, Modifier, and Onset Date.

Status	Onset Date	Provider Narrative	Comments	PHx	PIP	IP	ICD
Chronic		Home unsettled					9999
Chronic	01/03/2012	Elbow fracture   This is a test	fdasfdsa :				812.40
Chronic		Benign hypertension					401.1
Chronic		Acral persistent papular mucinosis					701.8
Chronic	09/21/2005	Median nerve compression in forearm	Moderate median neuropathy at both wrists of focal demyelinating type. left worse than right :				354.0
Chronic		Impaired glucose tolerance with hyperinsulism					790.21   251.1
Chronic		Angina					413.9
Chronic		Onychia of toe					681.11
Chronic		*ALLERGY: MORPHINE, ERYTHRO, AMOXICILLIN					995.2
Chronic		Family history of diabetes mellitus type 1					V18.0
Chronic		Diabetes mellitus					250.00

SNOMED CT	Provider Narrative	Provider Text	ICD	Priority	Asthma Control	Cause	Injury Date	Injury Cause	Injury Place	Modifier	Onset Date
Benign hypertension	Benign hypertension		401.1	Primary							
Acral persistent papular mucinosis	Acral persistent papular mucinosis		701.8	Secondary							

# Sample Layouts: With Health Summary

- Health Summary can sit on top when converting problem lists

The screenshot displays a medical software interface with a 'PROBLEMS' window open. The window title is 'Problem List Advs React Medications'. The interface includes a top navigation bar with tabs for 'NOTIFICATIONS', 'COVER SHEET', 'TRIAGE', 'PROBLEMS', 'PRENATAL', and 'WELL CHI'. Below this, there are sub-tabs for 'Problem List', 'Family History', 'Surgical Hx', 'Patient Goals', 'AMI', and 'Anticoagulation'. The 'PROBLEMS' tab is active, showing a list of chronic conditions with columns for 'Status', 'Onset Date', and 'Provider Narrative'. A 'Visit Diagnosis' section is visible at the bottom left, showing a table with columns for 'SNOMED CT', 'Provider Narrative', 'Provider Text', 'ICD', 'Priority', and 'As'. The main content area displays details for several chronic problems, including Asthma, Diabetes Mellitus, and Adverse Effects of Drugs. A table on the right side of the window shows columns for 'Hx', 'PIP', 'IP', and 'ICD' with numerical values.

Status	Onset Date	Provider Narrative
Chronic		Home unsettled
Chronic	01/03/2012	Elbow fracture   This is a test
Chronic		Benign hypertension
Chronic		Acral persistent papular mucinosis
Chronic	09/21/2005	Median nerve compression in forearm
Chronic		Impaired glucose tolerance with hyperinsulism
Chronic		Angina
Chronic		Onychia of toe
Chronic		*ALLERGY: MORPHINE, ERYTHRO, AMOXICI
Chronic		Family history of diabetes mellitus type 1
Chronic		Diabetes mellitus

SNOMED CT	Provider Narrative	Provider Text	ICD	Priority	As
Benign hypertension	Benign hypertension		401.1	Primary	
Acral persistent papular mucinosis	Acral persistent papular mucinosis		701.8	Secondary	

# Sample Layouts: IPL with RPMS for Pharmacy

NOTIFICATIONS COVER SHEET TRIAGE PROBLEMS PRENATAL WELL CHILD WELLNESS MEDS LABS ORDERS CONSULTS NOTES REPORTS MORE ...

Problem List Family History Surgical Hx Patient Goals AMI Anticoagulation Asthma Eyeglass Stroke Superbill

**Integrated Problem List** Expand All  Ct  Sc Ed i Get SCT Pick List POV Add Edit Delete

Status	Onset Date	Provider Narrative	Comments	PHx	PIP	IP	ICD
Episodic		Hyperlipidemia					272.4
Episodic	09/03/2012	Diabetes mellitus   This is a test :	This is a test :				250.00
Episodic		*diabetes					.9999

\* Requires update to SNOMED CT

**RPMS** Enter EHR for username, no password.  
barbara.hers@ihs.gov

Volume set: TENRC-ERBIBLE UCI: TENRC Device: ITHIRHQ#094-17224-5071016580 08  
Q#094-17224/507101

ACCESS CODE : \*\*\*\*\*  
VERIFY CODE : \*\*\*\*\*  
Device: ITHIRHQ#094-17224-5071016580

Not a valid ACCESS CODE/VERIFY CODE pair.

ACCESS CODE : \*\*\*\*\*  
VERIFY CODE : \*\*\*\*\*

Good evening RICHARDS,SUSAN P  
You last signed on today at 21:52  
You have 242 new messages. (242 in the 'IN' basket)

Enter "IN" to read your new messages.  
You've got PRIORITY mail!

Site set to 2011 DEMO HOSPITAL

CORE Core Applications ...

**Visit Diagnosis** Ed i

SNOMED CT	Provider Narrative	Provider Text	ICD	Priority	Asthma Control	Cause	Injury
Hyperlipidemia	Hyperlipidemia		272.4	Primary			
Diabetes mellitus	Diabetes mellitus		250.00	Secondary			

**Historical Diagnosis** Ed i

Visit Date	Provider Narrative	ICD	Asthma Control	Facility
01/27/2014	Diabetes mellitus   This is a test	250.00		2011 Demo Hospital
09/03/2013	Diabetes mellitus   This is a test	250.00		2011 Demo Hospital
03/13/2014	Hyperlipidemia	272.4		2011 Demo Diabetes Clinic
01/27/2014	Hyperlipidemia	272.4		2011 Demo Hospital
05/29/2005	SPIRAL FX R DISTAL FIBULA NON DISPLACED	824.8		2011 Demo Hospital
03/24/2014	Telephone encounter   TELEPHONE CALL	V65.9		2011-demo Sgi
03/24/2014	Chart evaluation by healthcare professional   CHART REVIEW	V68.9		2011-demo Sgi

RICHARDS,SUSAN P | 2011 DEMO-HO.ABQ.IHS.GOV | 2011 DEMO HOSPITAL | 09-Apr-2014 22:07

# Sample Layouts: With Health Summary

- Health Summary can sit on top when converting problem lists

The screenshot displays a medical software interface with a 'PROBLEMS' window. The window title is 'Problem List' and it shows a list of medical problems categorized into Chronic, Sub Acute, and Episodic. A 'Health Summary' window is overlaid on the right side of the screen, displaying a blue background with the text 'name, no password.' Below the summary, there is a table with columns for 'Asthma Control' and 'Facility'.

**Problem List Summary:**

- CHRONIC PROBLEMS**
  - DB4 ENT. MODIFIED 12/03/13 03/12/14 410.80-ACUTE MYOCARDIAL INFARCTION OF OTHER SPECIFIED SITES, EPISODE OF CARE UNSPECIFIED; Acute infarction of papillary muscle | (Status: CHRONIC)
- SUB ACUTE PROBLEMS**
  - Problem List Reviewed On: Apr 04, 2014 By: RICHARDS,SUSAN P
  - Problem List Updated On: Apr 04, 2014 By: RICHARDS,SUSAN P
  - No Active Problems Documented On: By:
- EPISODIC PROBLEMS**
  - DB5 ENT. MODIFIED 12/03/13 04/02/14 250.00-DIABETES MELLITUS WITHOUT MENTION OF COMPLICATION, TYPE II OR UNSPECIFIED TYPE, NOT STATED AS UNCONTROLLED; Diabetes mellitus |

**Health Summary Table:**

	Asthma Control	Facility
0		
0.00		2011 Demo Hospital
0.80		2011 Demo Hospital
99		2011 Demo Hospital
0.00		2011 Demo Hospital
0.80		2011 Demo Hospital
7.32		2011 Demo Hospital

# Sample Layouts: Visit Services

NOTIFICATIONS \ COVER SHEET \ TRIAGE \ PROBLEMS \ PRENATAL \ WELL CHILD \ WELLNESS \ MEDS \ LABS \ ORDERS \ CONSULTS \ NOTES \ SUPERBILL \ REPORTS \ MORE ...

**Evaluation and Management** New Patient  Established

Type of Service

- Office Visit
- Consultation
- Preventive Medicine
- Emergency Services
- Other ER Services
- Initial Hospital Care
- Subsequent Hospital Care
- Observation Inpatient Care

Level of Service

History and Exam	Complexity	Approx. Time	CPT Codes
<input type="checkbox"/> Brief	Nurse Visit	5 min	99211
<input type="checkbox"/> Problem Focused	Straightforward	10 min	99212
<input type="checkbox"/> Expanded	Low	15 min	99213
<input type="checkbox"/> Detailed	Moderate	25 min	99214
<input type="checkbox"/> Comprehensive	High	40 min	99215

**Visit Services** Add Edit Delete

Code	Narrative	Qty	Diagnosis	Prim	Modifier 1	Modifier 2	Provider	CPT Name

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**Super-Bills** Display  Freq. Rank  Code  Description Cols 2

- Acupuncture
- Alcohol
- Analenisgi Behavioral Health
- Asthma Education
- Baby Love
- Barbara's Super Superbill
- Biopsy

<input type="checkbox"/> Acupuncture, With Electrical Stimulation	<input type="checkbox"/> Individual Psychotherapy, Insight Oriented, Behavior Modifying And/or Supportive, ...
<input type="checkbox"/> Acupuncture, w/o Stimulation (Each Additional 15min)	
<input type="checkbox"/> Acupuncture, w/o Stimulation (First 15 min)	
<input type="checkbox"/> Acupuncture,With Electrical Stimulation, Initial 15 Minutes	
<input type="checkbox"/> Education And Training For Patient Self-management By A Qualified, Nonphysician ...	

Show All

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**Historical Diagnosis** Ed T

Visit Date	Provider Narrative	ICD	Asthma Control	Facility
03/04/2014	Diabetes mellitus I	250.00		2011 Demo Hospital
03/04/2014	Acute infarction of papillary muscle I	410.80		2011 Demo Hospital
10/07/2013	Chronic atrial fibrillation I	427.32		2011 Demo Hospital
10/01/2013	Chronic atrial fibrillation I	427.32		2011 Demo Hospital
09/17/2013	Chronic atrial fibrillation I	427.32		2011 Demo Hospital
04/23/2011	Paronychia L 4th finger	681.02		2011 Demo Hospital
02/11/2011	paronychia	681.02		2011 Demo Hospital

# Sample Layouts: Consults and Referrals

NOTIFICATIONS \ COVER SHEET \ TRIAGE \ PROBLEM MGMT \ SUPERBILL \ WELLNESS \ MEDS \ LABS \ ORDERS \ CONSULTS \ NOTES \ REPORTS \ MORE ...

Consults  
Referrals

Main New Tab1

Add Template Referral Add Referral Edit Referral Add Secondary Referral Clinical Consultation

Referral Date From Sunday, October 28, 2012 To Monday, October 28, 2013 Status Active/Approve

Referral Date	Purpose	Referring Provider	Referral Number	Status	Facility Referred To	Appointment Date/Time	Clinical Consulta...	Printed By	Print Date
JUL 22, 2013	ER Visit/Admission	RICHARDS,SUSAN P	2321011111491	ACTIVE	<UNKNOWN>		REVIEWED		
SEP 23, 2013	Asthma I	RICHARDS,SUSAN P	2321011300011	ACTIVE	<UNKNOWN>		REVIEWED		

# Sample Layouts

NOTIFICATIONS COVER SHEET TRIAGE PROBLEM MGMT SUPERBILL WELLNESS MEDS LABS ORDERS CONSULTS NOTES REPORTS MORE ...

Personal Health Infant feeding **Reproductive**

### Reproductive Factors

Menstrual Period  
Last

Lactation  
Status

Family Planning

STERILIZATION (FEMALE)	10/1998	Review
		Update

History

Total # of pregnancies	<input type="text" value="3"/>	Spontaneous Abortions (Miscarriages)	<input type="text" value="1"/>
Full Term	<input type="text" value="2"/>	Induced Abortions	<input type="text" value="0"/>
Premature	<input type="text" value="0"/>	Ectopic Pregnancies	<input type="text" value="0"/>
Multiple Births	<input type="text" value="0"/>	Menarche Age	<input type="text"/> years
Living Children	<input type="text" value="2"/>	Cotiarche Age	<input type="text"/> years
DES Daughter	<input type="text"/>	Menopause Onset Age	<input type="text"/> years

Pregnancy

Currently Pregnant

EDD (Estimated Due Date)  Comments

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### Chief Complaint

Author  Chief Complaint

Allergies/ADR

Agent	Type	Reaction	Status	InAct Date
ASPIRIN	Drug	ANXIETY;...	Verified	

Status  
 All  Active

Vital Display

Vital	Value	Date	Modifier
PHQ9	3	11-May-2011 13:...	
PHQ2	1	16-Aug-2013 08:...	
VU	20/20	16-Aug-2013 08:...	
VC	25/20	06-Jul-1999 13:18	
PF	410	24-Jul-2007 14:54	
O2	98 %	31-Aug-2011 15:...	
PA	9	31-Aug-2011 15:...	

# Sample Layouts (cont.)

NOTIFICATIONS \ COVER SHEET \ TRIAGE \ PROBLEM MGMT \ SUPERBILL \ WELLNESS \ MEDS \ LABS \ ORDERS \ CONSULTS \ NOTES \ REPORTS \ MORE ...

Ed/Exams/HF  
Imms/Skin Tests

## Immunization Record

**Forecast**  
Tdap due

**Contraindications** Add Delete

**Vaccinations** Add Edit Delete

Print Record Due Letter Profile Case Data

Vaccine	Visit Date	Age@Visit	Location	Reaction	Volume	Inj. Site	Lot	Manufacturer	VIS Date	Administered By	Vaccine Eligibility	Admin Notes
HEP B,NOS	11/02/1994	17 yrs	2011 DEMO INDIAN HOSPITAL									
HEP B,NOS	04/03/1995	17 yrs	2011 DEMO INDIAN HOSPITAL									
TdADULT	04/12/2004	26 yrs	2011 DEMO HOSPITAL				U1001AA		06/10/1994	GENERIC,REVA LYNN		
HEP B ADLT	05/07/2008	30 yrs	2011 DEMO HOSPITAL		1	Left Deltoid IM	AHBVB448AA	GLAXOSMITHKLINE	07/18/2007	BAIRD,SALVATORE J		
DTaP	07/11/2013	36 yrs	2011 DEMO HOSPITAL		0.5		AC14B114DA	GLAXOSMITHKLINE	05/17/2007	RICHARDS,SUSAN P		
DTaP-INVALID SEE IMV	08/06/2013	36 yrs	2011 DEMO HOSPITAL		0.5	Left Thigh SQ	U3009BA	AVENTIS BEHRING I	05/17/2007	RICHARDS,SUSAN P	Am Indian/AK Native	

**Skin Test History** Print Record Add Edit Delete

Visit Date	Skin Test	Location	Age@Visit	Result	Reading	Read Date	Reading Provider	Administered By	Other Locat	Site	Volume
02/26/2010	PPD	2011 DEMO HOSPITAL	32 yrs	Negative	0	03/01/10	MILHOLEN,DIANNE W	MCGUIRE,JEFFERY J			
04/12/2004	PPD	2011 DEMO HOSPITAL	26 yrs	Negative	0	04/14/04		GENERIC,REVA LYNN			

# **VA HEALTH SUMMARY**

# BHS – Rebuild Ad Hoc List

## REVIEW: Rebuild Ad Hoc List

Navigate to Health Summary Maintenance Menu [GMTS IRM/ADPAC MAINT MENU]

Select **4 Rebuild Ad Hoc Health Summary Type**

Select Health Summary Maintenance Menu Option: **4 Rebuild Ad Hoc Health Summary Type**

This option rebuilds the Ad Hoc Health Summary to include ALL components alphabetized by name. If you wish, you may exclude DISABLED components.

Do you wish to continue? NO// **YES**

Should DISABLED components be included? YES// **NO**

Rebuilding Ad Hoc Summary.....

Done

Press RETURN to continue...

# **CLINICAL REMINDERS**

# What Do I Need to Do Before the PXRv2.0p1001, 1002 are Loaded?

- *Verify you have created all of your clinical indexes.* You should have done this with PXRv1.5p1009/EHRp11 installation. See manual, Section 2.6.

<ftp://ftp.ihs.gov/rpms/patches/pxrm0150.1009o.pdf>

- You will not be able to install PXRv2.0 patches until ALL the indexes have been built.

# What Do I Need to Do Right After Install and Before Clinical Use?

- **Inactivate existing Mammogram reminder and install new Mammogram reminders (there are three).**
- **Install all the new Immunization reminders from the exchange.**
  - If you have any Immunization reminders deployed, you must install the new Immunization reminders.
  - You do not have to move these into production immediately but should replace your old immunization reminders with the new ones fairly soon.

# What Do I Need to Do Right After Install? (cont.)

- **Check the following parameters in the XX General Parameters** menu and set both to “YES” at the system level. This will ensure your Reminder Drawer is available after selecting a note on the Notes tab.
  - PXRM GUI REMINDERS ACTIVE
  - ORQQPX NEW REMINDER PARAMS
- **Check existing reminders** to make sure nothing is significantly changed in formatting. The remaining reminders should work as before.
- **Review new reminders and determine if any need immediate updating.**

# Then What Do I Need to Do... Eventually

- Update your reminders with the v2.0 set – prioritize with reminders you need to attest for MU2. Prioritize this work so complete before reporting period for MU2 begins.
- Review new functionality – reminders you have wanted to build may now be possible.

**CCDA**

# CCDA Parameters

## Set XPAR Parameters at system and/or division level

### BEHOCCD DIRECT EMAIL ADDRESS

#### Direct Email Server Address

- This is the Email server the Direct Agent will be sending email from. .
- If it is not populated [NULL] you can still generate CCDA and print. They can “Submit” which stores to Vista Imaging but cannot yet sent the document via Direct email.
- If it’s null and you try to send email you will get an error message... “Host cannot be null...etc”.

### BEHOCCD DIRECT USE SSL

#### Use SSL for DIRECT

- Some Email Servers may require it for authentication
- If it is not populated [NULL], can still generate a CCDA and PRINT. But they may not be able to Log in to their Email Server in order to send the CCDA via email. It depends on the Email Server. Were setting it to true by default. User can toggle this in the Email Screen to True/False as needed. .

### **BEHOCCD DIRECT PORT you must set up**

#### Direct E-mail port on the server

- This is the port of the Vista imaging Server that is passed in to the ActiveX control.
- If populated [NULL] you cannot store docs to VI. You will not be able to customize any CCDAs.

# CCDA Parameters (cont.)

## Set XPAR Parameters at system and/or division level

### BEHOCCD SHARE

Share drive to store CCDA *not used in CCDA*

### BEHOCCD URL

Enter the URL to the CCDA Server

- This is the GDIT WebService Endpoint used to Connect to the CCDA Document Web Service i.e., <http://192.168.66.11:57772/csp/CCDAPFRTEEN/BCCD.Prod.Services.ClinicalDocumentService.cls>

# CCDA

## Create a New User for Storage of a CCDA to VistA Imaging

1. Set up MAGUSER for CCDA (example) profile.
  - *Do not clone anyone* and do not assign access/verify codes when you create user. You will be able to identify who you MAGUSER is using the BEHOCCD MAG A\_V CODES menu option.
  - First name (example): CCDA
  - Last name (example): MAGUSER
  - Access
  - Verify
  - In New Person file, set verify code to 'never expires'
2. Assign the following secondary menu
  - MAG WINDOWS
  - MAG DICOM GATEWAY FULL
  - MAGJ VISTARAD WINDOWS
3. Assign MAGUSER for CCDA user and the user setting up the MAGUSER the BEHOCCDMAG key
  - At Select CCDA VistA Imaging user: enter the user
  - Enter the Access and Verify codes for the user
4. Assign CCDA VistA Imaging user and Access/Verify codes
  - From programmer prompt >d ^XUP
  - Select option BEHOCCD MAG A\_V CODES
  - At "Select CCDA Vista Imaging User" enter user created in Step 1 above
  - Enter Access and Verify codes for user

# CCDA (cont.)

- Place on EHR GUI (toolbar)
  - Object “CCDA Request Tool”

# **CLINICAL INFORMATION RECONCILIATION**

# CIR

- Place on EHR GUI (toolbar)
  - Object “CIR Tool”

# Set

Set Parameter BEHOCIR SOURCES to populate the dropdown selection of sources on the CIR.

- This will be used when a user is reconciling information from the patient or from a paper list of medications.

BEHOCIR SOURCES may be set for the following:

10 Division	DIV	[2011 DEMO HOSPITAL]
20 System	SYS	[2011 DEMO-HO.ABQ.IHS.GOV]

Enter selection: 20 System 2011 DEMO-HO.ABQ.IHS.GOV

----- Setting BEHOCIR SOURCES for System: 2011 DEMO-HO.ABQ.IHS.GOV -----

Select Sequence: 5

Are you adding 5 as a new Sequence? Yes// YES

Sequence: 5// 5

Source: Patient history

Select Sequence: 10

Are you adding 10 as a new Sequence? Yes// YES

Sequence: 10// 10

Source: Caregiver history

Select Sequence: 15

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

Sequence: 15// 15

Source: Patient med list

Select Sequence: 20

Are you adding 20 as a new Sequence? Yes// YES

Sequence: 20// 20

Source:

# Clinical Information Reconciliation

In order to view incoming CCDA, CCD, and other scanned Clinical Summary and Transitions of Care documents you must have CCDA set up (see CCDA set up) and have Vista Imaging on your system.

# **CONSULT PACKAGE**

# Consult Clinical Indication

If you want to expose the Clinical Indicator prompt on the Consult Request dialog, you must perform two steps:

1. Enable clinical indicator prompt for Consults.
2. Set Clinical Indication (new field in Consult Request file). This is delivered “NULL” which defaults to “Mandatory”.
  - Set to “O” if you want the prompt optional.

# Set Clinical Indicator Prompt for Consults

Set XPAR Parameter: BEHOORPA CLINICAL INDICTOR

**BEH>ORD>PAR> IND** Enable Clinical Indicator Prompt

Enable Clinical Indicator Prompt may be set for the following:

800 Division    DIV    [choose from INSTITUTION]

**900 System    SYS    [2013-DEMO.NA.IHS.GOV]**

Enter selection: 900 System 2013-DEMO.NA.IHS.GOV

----- Setting Enable Clinical Indicator Prompt for System: 2013-DEMO.NA.IHS.GOV -----

-----  
Select Package:

Select Package: **CONSULT/REQUEST TRACKING    GMRC**

Are you adding CONSULT/REQUEST TRACKING as a new Package? Yes// **YES**

Package: CONSULT/REQUEST TRACKING//    CONSULT/REQUEST TRACKING    GMRC    CONSULT/REQUEST TRACKING

Enabled: YES

Select Package:

# Set Clinical Indication to “Optional”

**BEH>CON>SS** Set up consult service

New Clinical Indication prompts

Select Service/Specialty: PA NUTRITION <<<*Set for individual consults*

SERVICE NAME: PA NUTRITION//

ABBREVIATED PRINT NAME (Optional):

INTERNAL NAME:

Select SYNONYM:

SERVICE USAGE:

SERVICE PRINTER:

NOTIFY SERVICE ON DC:

REPRINT 513 ON DC:

PREREQUISITE:

No existing text

Edit? NO//

Select one of the following:

Optional

CLINICAL INDICATION: // <<<< *enter “O” (the letter “Oh”) if you want clinical indication to be optional*

# Updating SNOMED Consult Type

BEH>CON>SS

Select Service/Specialty://PA NUTRITION

SERVICE NAME: PA NUTRITION//

ABBREVIATED PRINT NAME (Optional):

<skip down to SNOMED Consult type>

SPECIAL UPDATES INDIVIDUAL:

RESULT MGMT USER CLASS:

UNRESTRICTED ACCESS: YES//

Select SUB-SERVICE/SPECIALTY:

ADMINISTRATIVE:

**SNOMED Consult Type**

Current value is:

Would you like to edit? Y

Select SNOMED TYPE: 7 Patient referral to dietitian <<< enter number from list of consult types on next slides, or ?? To display)

Add/Edit Another Service? NO//

# SNOMED Consult Type

1	Burns referral
2	Referral to surgeon
3	Patient referral
4	Patient referral for dental care
5	Patient referral for alcoholism rehabilitation
6	Patient referral for medical consultation
7	Patient referral to dietitian
8	Patient referral to non-physician provider
9	Referral to nutrition professional
10	Refer to mental health worker
11	Refer to terminal care consult
12	Refer to weight management program
13	Referral for exercise therapy
14	Referral to Accident and Emergency doctor
15	Referral to adult intensive care specialist
16	Referral to intensive care specialist
17	Referral to breast surgeon
18	Referral to cardiac surgeon
19	Referral to cardiothoracic surgeon
20	Referral to cardiologist
21	Referral to thoracic surgeon
22	Referral to chest physician
23	Referral to child and adolescent psychiatrist
24	Referral to psychiatrist
25	Referral to chiropractor

26	Referral to clinical allergist
27	Referral to clinical geneticist
28	Referral to geneticist
29	Referral to clinical immunologist
30	Referral to clinical physiologist
31	Referral to clinical psychologist
32	Referral to clinical social worker
33	Referral to colorectal surgeon
34	Referral to gastrointestinal surgeon
35	Referral to community alcohol team
36	Referral to community drug and alcohol team
37	Referral to dental surgeon
38	Referral to oral surgeon
39	Referral to orthodontist
40	Referral to pediatric dentist
41	Referral to dermatologist
42	Referral to ear, nose and throat surgeon
43	Referral to endocrine surgeon
44	Referral to endocrinologist
45	Referral to family planning doctor
46	Referral to gastroenterologist
47	Referral to general surgeon
48	Referral to genitourinary physician
49	Referral to gynecologist
50	Referral to obstetrician and gynecologist

# SNOMED Consult Type (cont.)

51	Referral to hand surgeon
52	Referral to hematologist
53	Referral to infectious diseases physician
54	Referral to pediatric intensive care specialist
55	Referral to maxillofacial surgeon
56	Referral to medical oncologist
57	Referral to oncologist
58	Referral to mental health counseling service
59	Referral to neonatologist
60	Referral to nephrologist
61	Referral to neurologist
62	Referral to neurosurgeon
63	Referral to nuclear medicine physician
64	Referral to nurse midwife
65	Referral to occupational health physician
66	Referral to occupational therapist
67	Referral to radiotherapist
68	Referral to ophthalmologist
69	Referral to optometrist
70	Referral to orthopedic surgeon
71	Referral to osteopath
72	Referral to pain management specialist
73	Referral to palliative care physician
74	Referral to pediatric cardiologist
75	Referral to pediatric neurologist

76	Referral to pediatric oncologist
77	Referral to pediatric surgeon
78	Referral to physical activity program
79	Referral to plastic surgeon
80	Referral to podiatrist
81	Referral to radiologist
82	Referral to rehabilitation physician
83	Referral to rheumatologist
84	Referral to specialist alcohol treatment service
85	Referral to speech and language therapist
86	Referral to transplant surgeon
87	Referral to vascular surgeon

# **INTEGRATED PROBLEM LIST**

# IPL

Place on EHR GUI

- Object “Integrated Problem List”

Remove old problem list

Secondary menu options (for SNOMED search tool)

- BSTSRPC
- BMXRPC

# IPL – Care Plan templates

## Set XPAR Parameters:

*The following parameters can be used to assign TIU Templates to add content to care plan, goal note, or visit instructions in IPL.*

BGO IPL CARE TEMPLATE

List of TIU Templates for IPL Care Notes

BGO IPL GOAL TEMPLATE

List of TIU Templates for IPL Goal Notes

BGO IPL VISIT TEMPLATE

List of TIU Templates for IPL Visit Instruction Notes

*\*\*\* Template must be in SHARED templates and not in a folder.\*\*\**

***Not all TIU templates will work correctly in the care planning component. This will be corrected in EHRp14. We will provide a sample template that does function.***

***Strongly consider delaying use of care plan templates until EHRp14.***

# IPL – Education Topics

## **BGO PROBLEM EDUCATION Parameter**

- A set of most commonly used education codes to be attached to a problem DX is stored in this parameter. It is released with a System level setting.
- You may change the setting to change the choice of topics.

# IPL – Refresh SNOMED Search Filters and Pick Lists

First refresh the SNOMED content

BSTSMENU      IHS Standard Terminology  
Management

WEB    Add/Edit Terminology Web Service

ESP    Edit Terminology Site Parameters

TST    Terminology Web Service Test

***REF    Refresh IHS Standard Terminology Subsets***

# IPL – Refresh SNOMED Search Filters and Pick Lists (cont.)

Select IHS Standard Terminology Management Option: *ref Refresh IHS Standard Terminology Subsets*

This option refreshes the IHS BSTS Terminology Subsets  
It will mark each concept's subsets as out of date and then start a background process to retrieve the subsets assigned to each concept.

Are you sure you want to do this? NO// **y YES**

Select the codeset to refresh: **36 SCTUSEXT**

# IPL - Pick Lists

**Refresh your Pick Lists IF you want all to import at once** *(not recommended for most sites)*

**Menu option: BGO PICKLIST UPDATE**

- When this option is run, it locates all sub-sets that begin with the letters PICK, and refreshes the BGO SNOMED picklists accordingly within the Picklist option of the Integrated Problem List (IPL) component.

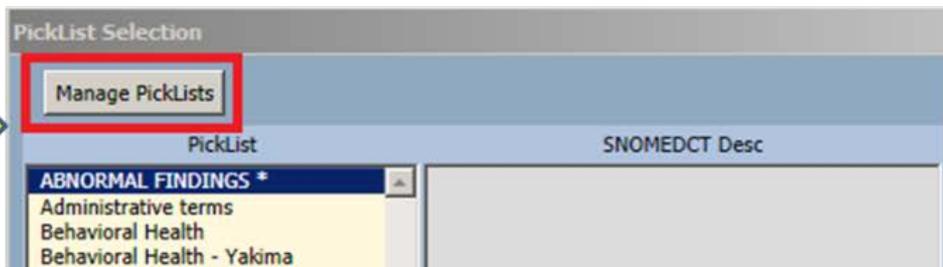
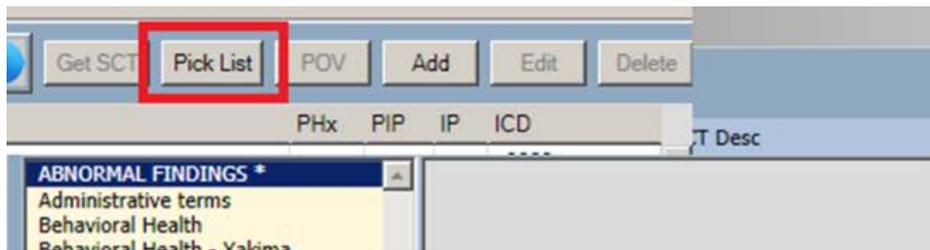
# IPL – Pick Lists (cont.)

## **BGO DEFAULT PICKLIST Lookup XPAR Parameter**

- To set the BGO DEFAULT PICKLIST Lookup XPAR Parameter to define a SNOMED pick list that will be the first one on the list.
- May be set at System or Division level.

# Import Pick List from Terminology Server (DTS)

Click **Pick List** > **Manage Pick Lists** > **Edit Pick Lists**



# Import Pick List from Terminology Server (DTS) (cont.)

- Select Pick List to import.
- Change if desired.
- Click **Import**.

Manage PickLists

PickList	Hosp. Location	Clinic	Provider	Class	Owner	
ABNORMAL FINDINGS *						Add
Administrative terms					RICHARDS,SUSAN P	Edit
Behavioral Health						Delete
Behavioral Health - Yakima						Exit
CASE MANAGEMENT						Import Subset
CQM PROBLEMS						
DIABETIC RETINOPATHY						
ENT - Ear						
Eye General						
EYE GENERAL						

Import Subset

Subset: PICK Family Practice

New Subset Name: Family Practice

# Edit Imported Pick List: Option to Group Items

- Highlight one or more items
- Click **Group**.
  - This will initially be blank.
  - Type in desired group name and **Save**. Each time you type in new group, you populate a drop down selection list for this pick list.
- Ungrouped display followed by grouped entries.
  - Recommend group all or none.

The screenshot shows the 'Manage Quick Picks' window. At the top, there is a 'Pick Lists' dropdown menu set to 'Family Practice - option to change name' and an 'Edit Pick Lists' button. Below this is the 'Pick List Items' section, which contains a table with the following columns: Freq, Group, Provider Narrative, Status, SNOMED ConceptID, and Mapped ICD. The table lists 11 items, including 'Severe depression', 'Severe persistent asthma', 'Shoulder joint pain', 'Sinus tachycardia', 'Sinusitis', 'Sjögren's syndrome', 'Skin tag', 'Sore throat symptom', 'Sprain of ankle', 'Sprain of ankle and/or foot', 'Sprain of knee', 'Sprain of knee and leg', 'Sprain of lower extremity', 'Sprain of sacroiliac region', and 'Sprain of shoulder'. A modal dialog box is open over the table, titled 'Change the Group for 11 PickList item(s)'. It features a 'Group' dropdown menu with 'Ortho' selected, and 'Save' and 'Cancel' buttons. On the right side of the window, there is a vertical toolbar with buttons for 'Add', 'Delete', 'Group', 'Status', 'Merge', 'Query', 'Import', 'Export', 'Zero Freq', and 'Exit'.

Freq	Group	Provider Narrative	Status	SNOMED ConceptID	Mapped ICD
0		Severe depression		310497006	
0		Severe persistent asthma		426656000	
0		Shoulder joint pain		267949000	
0		Sinus tachycardia		11092001	
0		Sinusitis		36971009	
0		Sjögren's syndrome		83901003	
0		Skin tag		201091002	
0		Sore throat symptom		267102003	
0		Sprain of ankle		44465007	
0		Sprain of ankle and/or foot		209529003	
0		Sprain of knee		54888009	
0		Sprain of knee and leg		269137006	
0		Sprain of lower extremity		5853003	
0		Sprain of sacroiliac region		111653006	
0		Sprain of shoulder		3100001	

# Edit Imported Pick List: Option to Default Status of Items

- Highlight one or more items
- Click **Status**
  - Select Status
  - If status is not defaulted, will be episodic when stored.
  - Consider setting admin type problems to “inactive”

The screenshot displays the 'Manage Quick Picks' application window. At the top, there is a 'Pick Lists' dropdown menu set to 'Family Practice - option to change name' and an 'Edit Pick Lists' button. Below this is the 'Pick List Items' section, which contains a table with the following columns: Freq, Group, Provider Narrative, Status, SNOMED ConceptID, and Mapped ICD. The table lists various medical conditions such as 'Chronic sinusitis', 'Common cold', 'Conjunctivitis', 'Frontal sinusitis', 'Maxillary sinusitis', 'Otagia', 'Otitis externa', 'Otitis media', 'Pharyngitis', 'Recurrent sinusitis', 'Sinusitis', 'Streptococcal sore throat', 'Streptococcal tonsillitis', 'Shoulder joint pain', 'Sprain of ankle', 'Sprain of ankle and/or foot', and 'Sprain of knee'. A 'Status' dialog box is open over the table, titled 'Change the Status for 2 PickList item(s)'. It features a 'Status' dropdown menu with 'Chronic' selected, and 'Save' and 'Cancel' buttons. The 'Status' button in the table's right-hand column is highlighted with a red box.

Freq	Group	Provider Narrative	Status	SNOMED ConceptID	Mapped ICD
0	HEENT	Chronic sinusitis		40055000	
0	HEENT	Common cold		82272006	
0	HEENT	Conjunctivitis		9826008	
0	HEENT	Frontal sinusitis		78737005	
0	HEENT	Maxillary sinusitis		88348008	
0	HEENT	Otagia		16001004	
0	HEENT	Otitis externa		3135009	
0	HEENT	Otitis media		65363002	
0	HEENT	Pharyngitis		405737000	
0	HEENT	Recurrent sinusitis		195788001	
0	HEENT	Sinusitis		36971009	
0	HEENT	Streptococcal sore throat		43878008	
0	HEENT	Streptococcal tonsillitis		41582007	
0	Ortho	Shoulder joint pain		267949000	
0	Ortho	Sprain of ankle		44465007	
0	Ortho	Sprain of ankle and/or foot		209529003	
0	Ortho	Sprain of knee		54888009	

# Edit Imported Pick List Items: Add/Delete Items

- Click one or more and click **delete**
- Click **Add** and search for a SNOMED term and click **select**
- Configure group and/or status
- When pick list changes are complete, click **exit**

# Pick List Ideas:

## Lab Orders from Outside Providers

For Labs – outside labs often come in with ICD diagnoses.

- IF the diagnosis is not on the problem list, then for lab only a POV needs entry.
- You can utilize the “group” to create a pick list that displays ICD codes to assist your lab staff.

# Pick List Ideas: Lab Orders from Outside Providers

Search and select SNOMED for the pick list. Note the ICD code then add

Your resulting pick list will have ICD codes displayed.

The screenshot shows the 'Manage Quick Picks' window. At the top, there is a 'Pick Lists' dropdown menu set to 'Lab - outside orders' and an 'Edit Pick Lists' button. Below this is a table of 'Pick List Items' with columns for Freq, Group, Provider Narrative, Status, SNOMED ConceptID, and Mapped ICD. A dialog box is open over the table, titled 'Change the Group for 1 PickList item(s)', with a 'Group' dropdown menu set to '446.2' and 'Save' and 'Cancel' buttons.

Freq	Group	Provider Narrative	Status	SNOMED ConceptID	Mapped ICD
0		Hypersensitivity angitis		60555002	
0	285.9	Anemia		271737000	
0	714.0	Rheum		69896004	

The screenshot shows the 'PickList Selection' window. It has a 'Manage PickLists' button at the top. Below is a table with two columns: 'PickList' and 'SNOMEDCT Desc'. The 'PickList' column contains a list of terms, and the 'SNOMEDCT Desc' column contains the corresponding ICD codes and descriptions. The 'Lab - outside orders' pick list is selected, showing ICD codes 244.9, 285.9, 446.2, and 714.0. The 'Hypersensitivity angitis' and 'Rheumatoid arthritis' terms are highlighted in the list.

PickList	SNOMEDCT Desc
Administrative terms *	
Behavioral Health	244.9 1
ENT - Ear	<input type="checkbox"/> Hypothyroidism
Eye General	
Immunizations	285.9 1
Immunizations Test	
Lab - outside orders	<input type="checkbox"/> Anemia
Medicine - Inpatient	
my picklist	446.2 1
new picklist	
Nutrition	<input type="checkbox"/> Hypersensitivity angitis
PHYSICAL REHABILITATION	
PICK Prenatal - Problem Pregnancy	714.0 1
PICK Public Health Nursing	
PICK Womens Health	<input type="checkbox"/> Rheumatoid arthritis
PODIATRY	
PRENATAL	
Prenatal - Care	
Prenatal - Problem Fetus	
PRENATAL CARE	
PRENATAL PROBLEM FETUS	
PRENATAL PROBLEM PREGNANCY	
PRENATAL RISK	
Public Health Nursing	
SOCIAL ENVIRONMENTAL	
SOCIAL SERVICES	
Test BH	
Test Import Subset	
test pick list	
Test Picklist	
Test Picklist womens health	
Test Picklist2	
Whatever i want	

# TIU

- See separate module on TIU 1011/1012
- Review TIU objects and replace in TIU notes as desired

# DEPLOYMENT APPROACH

# Prior to Install of Patches

- **Clean up problem lists.**
- Superbill – remove diagnoses from Superbill associations.
- Clinical Reminders - Consider removing options in dialogs that allow users to select POVs. They will not store but may be confusing to users.

# Monitor Metrics

Baseline productivity so you can see when you return to baseline:

- If you deploy June 1, 2014 then run Jun, Jul, Aug, Sep, Oct, Nov productivity by provider and/or clinic for 2013.

Monitor progress each month to demonstrate for users and leadership when you return to baseline.

# Workflow Issues to Discuss: Problem List Migration to SNOMED

Who will assist in Problem List migration:

- It is NOT appropriate to engage non-clinician staff (clerks, coders, medical records) in the migration of the problem lists from ICD-9 to SNOMED.
- Recommend leveraging ***all clinicians*** to participate as they encounter opportunities to update in their workflow:
  - Nursing – are performing triage and often ordering labs by standing orders. Updating the problems prior to selecting Clinical Indication is appropriate (examples: diabetes, hyperlipidemia, hypertension, PCOS, hypothyroid, etc.).
  - Pharmacy – are adding POV's to refill visits. Updating chronic and recurring problems such as diabetes, hypertension, hyperlipidemia, chronic pain would fit into their workflow.

# Workflow Issues to Discuss: Medication Reconciliation

Medication Reconciliation for performance measure changes:

- Do not need to assign an education code.
- Need to make sure the chart review button is “turning green” by managing medications on the Med Management component or in Clinical Information Reconciliation tool.

# Workflow Issues to Discuss: Clinical Summaries

Once Meaningful Use 2014 certified software is installed, the Patient Wellness handout will not “count” for generating Clinical Summaries.

- You must use the CCDA component to generate Clinical Summaries.

# Workflow Issues to Discuss: Care Planning

Expected progressive use of IPL:

1. Problems and POV selection
2. Add visit instructions and education
3. Care planning (goals and care plan notes)

Although you will not use Visit Instructions and Care Planning right away, you can begin to engage users in vetting templates.

# Do Immediately

Package/Component	Timing	Action	Dependency
<b>EHR – GUI</b>	Critical – prior to user log on deployment day	Develop new GUI layout that must include removing old Problem List and adding new IPL	
<b>EHR – Pick List</b>	Critical – prior to user log on deployment day	<ol style="list-style-type: none"> <li>1. Import critical pick lists.</li> <li>2. If you want ALL picklists to import at once, run the option BGO PICKLIST UPDATE. When this option is run, it locates all sub-sets that begin with the letters PICK, and imports them into the Pick List tool.</li> <li>3. (optional) If you want to default a pick list to the top of the list for your users, then set this parameter at system or division: BGO DEFAULT PICKLIST</li> </ol>	BSTS is set up
<b>EHR – SNOMED search</b>	Critical – prior to user log on deployment day	Add secondary menu options for users (BSTSRPC, BMXRPC)	BSTS is set up
<b>EHR – “I” button</b>	Important – try to set prior to log on deployment day	<ol style="list-style-type: none"> <li>1. Set BGO DEFAULT WEB SEARCH SITE and system or division level to UpToDate</li> </ol>	

# Do Immediately (cont.)

Package/Component	Timing	Action	Dependency
<b>Clinical Reminders</b>	Critical – prior to user log on deployment day	<ol style="list-style-type: none"> <li>1. Remove and inactivate Mammo reminder and replace with 3 new ones</li> <li>2. Install all Imms reminders from exchange (you do not have to deploy them in GUI)</li> </ol>	
<b>Clinical Reminders</b>	Critical – prior to user log on deployment day	<p>Check the following parameters in the XX General Parameters menu and set both to “YES” at the system level. This will ensure your Reminder Drawer is available after selecting a note on the Notes tab.</p> <ul style="list-style-type: none"> <li>• PXRМ GUI REMINDERS ACTIVE</li> <li>• ORQQPX NEW REMINDER PARAMS</li> </ul>	
<b>TIU</b>	Important – as soon as possible	Swap out V POV and V POV Multiline objects for V Prob w/dates object in templates	
<b>BHS (VA Health Summary Components)</b>	Important – helps review issues	Rebuild Ad Hoc List	
<b>RxNorm look up parameters</b>	Default is Local	Change is only necessary if site wishes to remap RxNorm to the National Drug File [waiting on more clarification]	

# Do Soon

Package/Component	Timing	Action	Dependencies
<b>Consults</b>	Soon but does not have to be day of load	<ol style="list-style-type: none"> <li>1. Turn on Clinical Indicator for Consults using BEHOORPA CLINICAL INDICTOR parameter</li> <li>2. Populate the SNOMED Consult Type in the Set Up Consult Service option</li> <li>3. Determine which, if any consults require entry in clinical indication (defaults to optional and is set by consult)</li> </ol>	
<b>CCDA</b>	Soon but does not have to be day of load. Be aware that once EHRp13 is installed, CS measure uses CCDA generated summaries	<ol style="list-style-type: none"> <li>1. EHR configuration parameter set up</li> <li>2. Add object to EHR GUI</li> <li>3. Create a New User for Storage of a CCDA to VistA Imaging</li> </ol>	CCDA server set up
<b>CIR</b>	Soon but does not have to be day of load. Depends on how many summaries may be viewed currently and which stage of MU site is trying to attain.	<ol style="list-style-type: none"> <li>1. Add object to EHR</li> <li>2. Set up parameter BEHOCIR SOURCES</li> </ol>	CCDA server set up VI
<b>Image Viewer</b>	Soon but does not have to be day of load.	See set up instructions in manual	VI

# Do Soon (cont.)

Package/Component	Timing	Action	Dependencies
<b>Consults</b>	Soon but does not have to be day of load	<ol style="list-style-type: none"> <li>1. Turn on Clinical Indicator for Consults using BEHOORPA CLINICAL INDICTOR parameter</li> <li>2. Populate the SNOMED Consult Type in the Set Up Consult Service option</li> <li>3. Determine which, if any consults require entry in clinical indication (defaults to optional and is set by consult)</li> </ol>	
<b>PHR Set up</b>			
<b>Direct access set up</b>			

# Do Over Time

Package/Component	Timing	Action	Dependencies
TIU	Over time	Clean up and map note titles  Review new objects and make adjustments in templates	
IPL – care planning	Over time	<ol style="list-style-type: none"> <li>1. Develop TIU templates for Visit Instructions then Care Plans and Goals <b><i>Strongly consider delaying implementation of templates to populate care planning fields as the behavior is erratic EHRp14</i></b></li> <li>2. Change the patient education topic selections on Care Planning and POV selection tool using BGO PROBLEM EDUCATION parameter. May set at System, Division, Location level</li> </ol>	
Clinical Reminders	Over time	<ol style="list-style-type: none"> <li>1. Review and update National Reminders with 2.0</li> <li>2. Review functionality and build any new reminders/dialogs as needed</li> </ol>	

# Resources

Clinical Applications Documentation repository

[http://www.ihs.gov/RPMS/index.cfm?module=Applications&option=View&AC\\_ID=0](http://www.ihs.gov/RPMS/index.cfm?module=Applications&option=View&AC_ID=0)