



RESOURCE AND PATIENT MANAGEMENT SYSTEM

IHS PCC SUITE

(BJPC)

Addendum to User Manual

Version 2.0 Patch 4 June 2010

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1.0 Introduction

This addendum to Indian Health Service (IHS) Patient Care Component (PCC) Suite Version 2.0 describes the changes made in Patch 4 to Version 2.0. The purpose of BJPC Version 2.0 Patch 4 is to add Veterans Administration (VA) Vital and Measurement fields to the PCC vitals and measurements file. The Electronic Health Record (EHR) Patch 7 nursing flowsheet requirements necessitate this change. This enhancement includes PCC data entry, health summary, and management report changes.

1.1 Summary of Changes

- A. The following fields are added to the V measurement file:
 - Date/Time Vitals Taken
 - Supplemental 02
 - Entered in Error
 - Reason Entered in Error
 - Qualifier
- B. Users are not allowed to modify or delete a measurement entered in error. The user is prompted to see if they want to mark the measurement as entered in error. If the response is Yes, the "REASON ENTERED IN ERROR" prompt displays.
- C. Measurements marked as entered in error do not display on patient management reports, patient visits, health summaries, patient wellness handouts, or supplements.
- D. When a user is running a QMAN report and selects a measurement attribute, the user is given the option to display associated qualifiers.
- E. Health summary measurement and measurement panel components names have been changed to indicate that they are Outpatient values.
- F. Measurement qualifiers have been added to the Health Summary measurement component.
- G. Measurements/Qualifiers is a new VGEN Print Item Selection search option.

2.0 New Functionality

2.1 Measurement Qualifiers

Qualifiers from the GMRV Vitals Qualifier file are now available for data entry. After a measurement value is entered, the qualifier field displays and allows the user to enter the corresponding qualifier for that measurement. See the tables below for measurements and their associated qualifiers.

Qualifiers for BLOOD PRESSURE:

Location	Position	Method	Cuff Size
L ARM: LA	LYING: Ly	CUFF: Cu	ADULT: Ad
L LEG: LL	SITTING: Si	DOPPLER: Dop	LG ADULT: LgA
R ARM: RA	STANDING: St	NON-INVASIVE: N-I	PEDIATRIC: Ped
R LEG: RL		PALPATED: Pal	SM ADULT: SmA
THIGH: Thi			

Qualifiers for PULSE:

Location	Site	Method	Position
APICAL: Ap	LEFT: Lt	AUSCULTATE: Aus	LYING: Ly
BILATERAL	RIGHT: Rt	DOPPLER: Dop	SITTING: Si
PERIPHERALS: BiP		PALPATED: Pal	STANDING: St
BRACHIAL: Bra			
CALF : Clf			
CAROTID: Car			
DORSALIS PEDIS: DP			
FEMORAL: Fem			
OTHER: Oth			
PERIPHERAL: Per			
POPLITEAL: Pop			
POSTERIOR TIBIAL: PT			
RADIAL: Rad			
ULNAR: Uln			

Qualifiers for RESPIRATION:

Method	Position
ASSISTED	LYING: Ly
VENTILATOR: AV	-
CONTROLLED	SITTING: Si
VENTILATOR: CV	
SPONTANEOUS: S	STANDING: St

Qualifiers for TEMPERATURE.

Location:

• AXILLARY: A

• CORE: C

• ORAL: O

• RECTAL: R

• SKIN: S

• TYMPANIC: T

Qualifiers for CIRCUMFERENCE MEASURES:

Location	Site
WAIST CIRCUMFERENCE (WC)	ABDOMEN: Abd
HEAD CIRCUMFERENCE (HC)	HEAD: Hd

Qualifiers for HEIGHT:

Quality:

• ACTUAL: A

• ESTIMATED: E

Qualifiers for Oxygen Saturation, Supplemental O2:

Method:

• AEROSOL/HUMIDIFIED MASK: AM

• FACE TENT: FT

• MASK: M

• NASAL CANNULA: NC

• NON RE-BREATHER: NRB

• PARTIAL RE-BREATHER: PRB

• T-PIECE: TP

• TRACHEOSTOMY COLLAR: TC

• VENTILATOR: Ven

• VENTURI MASK: VM

2.2 Supplemental O2 Qualifier

Supplemental O2 displays automatically as a qualifier after a value is entered for the oxygen (O2) saturation measurement.

```
MNEMONIC: 02
                   02 Saturation
                                      ALLOWED
                                                  VISIT RELATED ONLY
VALUE: 55
SUPPLEMENTAL 02:
Select QUALIFIER: ??
     You may enter a new QUALIFIER, if you wish
     A list of qualifiers associated with this measurement.
Choose from:
AEROSOL/HUMIDIFIED MASK
FACE TENT
MASK
NASAL CANNULA
NON RE-BREATHER
PARTIAL RE-BREATHER
T-PIECE
TRACHEOSTOMY COLLAR
VENTILATOR
VENTURI MASK
Select QUALIFIER: MASK
Select QUALIFIER:
```

Figure 2-1: The supplemental O2 qualifier

To bypass the "Qualifier" prompt, press the Enter key. The "DATE/TIME VITALS TAKEN" prompt displays. Enter the date and time the encounter provider recorded the vitals.

```
DATE/TIME VITALS TAKEN: T@08:00 (MAR 25, 2010@08:00)
```

Figure 2-2: The "DATE/TIME VITALS TAKEN" prompt

2.3 Modifying Measurements

Input templates used for data entry modify mode will not allow a measurement to be modified or deleted. To modify a previously entered measurement, mark the measurement "entered in error" and indicate a reason. After marking the measurement as entered in error, return to Add/Append mode to enter a new value.

```
PCC Data Entry Module
                        ******
                         * MODIFY Mode *
Select PATIENT NAME: TEST, CHAUCER
                                      M 12-30-2009
                                                               DEMO 9876
VISIT related? YES//
Enter VISIT date: T-3 (MAR 22, 2010)
MNEMONIC: PU
                            ALLOWED
                  Pulse
                                       VISIT RELATED ONLY
Please Note: You are NOT permitted to modify or delete a measurement.
A measurement must be marked as 'entered in error' and then re-entered
through Add or Append mode of PCC data entry.
Please choose which measurement you would like to mark 'Entered in Error',
if you do not wish to mark any in error, simply press 'enter' to bypass.
      PU
             200
 1)
Which Measurement: (1-1): 1
You have selected: PU Value: 200
Are you sure you want to mark this measurement entered in error? Y// Y
Please enter the reason the measurement was entered in error. Choices are:
         1 INCORRECT DATE/TIME
             INCORRECT READING
         3
             INCORRECT PATIENT
         4
             INVALID RECORD
Select REASON ENTERED IN ERROR: 1 (1 INCORRECT DATE/TIME)
MNEMONIC:
```

Figure 2-3: Selecting a reason the measurement was entered in error

Note: Measurements entered in error do not display on reports, in patient visit displays, health summaries, health reminders, supplements, or patient wellness handouts.

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

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