



RESOURCE AND PATIENT MANAGEMENT SYSTEM

Clinical Reminders (PXRM)

Patch 1005 National Reminder Setup

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Office of Information Technology (OIT)
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11/5/05		Added information on the national reminders included in Patch 1003
3/15/07		Added the information about dialogs for the national reminders
12/20/07		Added more data for updates
4/14/08		Added more data for updates

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1.0 Introduction

CACS and site managers should install the national reminders together.

National Clinical Reminders and dialogs are being released together in a patch to the clinical reminders package. Patch 1005 contains:

- All the immunization reminders and their associated dialogs. These reminders run with the immunization forecaster and the results should be identical. Giving the immunizations will resolve the reminder.
- The clinical reminders and their associated dialogs that are used in the HEALTH SUMMARY MAINTENANCE reminders. Converting them over to clinical reminders will make them available to clinicians who are using the electronic health record and not relying on paper.

Site managers and clinical applications coordinators will need to review the manual pxrm_010m.doc, Clinical Reminders Managers Manual, for information on reminder setup.

Sites need to review the list of reminders that are being sent in the patch. This list is in the next section and details what turns the reminder on and what turns it off.

If a site does not use the reminder (i.e., the site does not have a MICROALBUMIN test), PLEASE do not add those reminders to the EHR because they will always show up as being due.

The steps for setup of national clinical reminders are:

- 1. Install the KIDS build. This build will only put the reminders and the dialogs into the Reminder Exchange file.
- 2. The clinical coordinator should manually install the reminders which the site uses using REMINDER EXCHANGE. A site might need to manually create taxonomies if there are errors in the sites ICD9 file.
- 3. Map the local terms to the REMINDER TERM file. Failure to do this will result in MANY reminders being due all the time.
- 4. Review all the reminders and determine which ones should be activated at a site.
- 5. Use the options to setup the Electronic Health Record to display the reminders. Sites can choose to activate the reminders just for specific individuals during a testing phase.
- 6. If needed, add the REMINDER COMPONENTS to the health summary so they can be seen and printed on the Reports tab.

The main reminders menu is called:

REMINDER CONFIGURATION and is found on the

RPMS-EHR CONFIGURATION MENU (BEHOMENU)

All setup is done from this menu.

```
Reminder Configuration
      Reminder Computed Finding Management ...
DEF
      Reminder Definition Management ...
DLG
      Reminder Dialog Management ...
EXC
      Reminder Exchange
INF
      Reminder Information Only Menu \dots
      Reminder Parameters ...
PAR
RPT
      Reminder Reports ...
SPO
      Reminder Sponsor Management ...
TAX
      Reminder Taxonomy Management ...
       Reminder Term Management ...
TRM
TST
      Reminder Test
```

2.0 Reminder Definitions

Besides, installing reminders and doing the setup so they appear in the EHR, reminder testing means checking each reminder with several patients to see if the reminder is working correctly.

2.1 Reminder Definition Menu (DEF)

This menu lets view, edit, and copy reminders.

A site cannot edit national reminders; they will not show up on the list. However, they can be viewed using the option RI.

```
Reminder Definition Management

CPY Copy Reminder Definition

EDT Add/Edit Reminder Definition

INQ Inquire about Reminder Definition

LST List Reminder Definitions
```

2.1.1 Inquire about Reminder Definitions (INQ)

Choose the reminder and display the data.

```
IHS-ALCOHOL SCREEN
Print Name:
                              Alcohol Screen
Class:
                              NATIONAL
Sponsor:
Review Date:
Usage:
                              CPRS, DATA EXTRACT, REPORTS
Related VA-* Reminder:
Reminder Dialog:
                             IHS-ALCOHOL SCREEN 2007
Priority:
Reminder Description:
    Patients are screened annually for alcohol use starting at age 13
Technical Description:
Edit History:
    Edit date: Apr 24, 2008@10:33:40 Edit by: HAGER, MARY G
    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 13Y to 110Y
                   Match Text:
                No Match Text:
Findings:
                 Finding Item: IHS-ALCOHOL SCREEN (FI(1)=RT(43))
                Finding Type: REMINDER TERM
      Use in Resolution Logic: OR
                   Found Text:
               Not Found Text:
                 Finding Item: IHS-ALCOHOL SCREEN (FI(3)=RT(76))
                Finding Type: REMINDER TERM
      Use in Resolution Logic: OR
                 Finding Item: ALCOHOL SCREENING (FI(4)=EX(34))
                 Finding Type: EXAM
      Use in Resolution Logic: OR
                 Finding Item: IHS-ALCOHOL SCREEN 2007 (FI(5)=TX(59))
                 Finding Type: REMINDER TAXONOMY
      Use in Resolution Logic: OR
General Patient Cohort Found Text:
    REMINDER DUE Patient is over 13 AND no alcohol screening or alcohol
    related diagnosis in the past year
    REMINDER ON if due within 3 months
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)!FI(3)!FI(4)!FI(5)
Expanded Resolution Logic:
    FI(IHS-ALCOHOL SCREEN)!FI(IHS-ALCOHOL EDUCATION)!FI(ALCOHOL SCREENING)!
    FI(IHS-ALCOHOL SCREEN 2007)
Web Sites:
```

2.1.2 Copy Reminder Definition (CPY)

```
Reminder Definition Management

CPY Copy Reminder Definition
```

```
EDT Add/Edit Reminder Definition
INQ Inquire about Reminder Definition
LST List Reminder Definitions
```

You can copy a national reminder and then edit that reminder. **You cannot edit a** national reminder. This allows you to change the ages, frequencies, or findings.

```
Select Reminder Definition Management Option: cpy Copy Reminder Definition
                               Copy Reminder Definition
Select the reminder item to copy: IHS-ALCOHOL SCREEN
                                                           NATIONAL
PLEASE ENTER A UNIQUE NAME: ALCOHOL SCREEN
The original reminder IHS-ALCOHOL SCREEN has been copied into ALCOHOL SCREEN.
Do you want to edit it now? YES
     Select one of the following:
                   All reminder details
          G
                   General
         В
                   Baseline Frequency
          F
                   Findings
                   Logic
         T.
                   Reminder Dialog
          D
                   Web Addresses
Select section to edit:
NAME: ALCOHOL SCREEN//
PRINT NAME: Alcohol Screen//
CLASS: LOCAL//
SPONSOR:
REVIEW DATE:
USAGE: *//
RELATED REMINDER GUIDELINE:
INACTIVE FLAG:
REMINDER DESCRIPTION:
Patients are screened annually for alcohol use starting at age 13
 Edit? NO//
TECHNICAL DESCRIPTION:
 No existing text
 Edit? NO//
PRIORITY:
Baseline Frequency
DO IN ADVANCE TIME FRAME: 3M//
SEX SPECIFIC:
IGNORE ON N/A:
Baseline frequency age range set
Select REMINDER FREQUENCY: 1Y//
                                         <- Can change
 REMINDER MINIMUM AGE: 13Y//
                                         <- Can change
 MAXIMUM AGE: 110Y//
                                         <- Can change
```

```
AGE MATCH TEXT:
   No existing text
   Edit? NO//
 AGE NO MATCH TEXT:
Patient not in age range for alcohol screening
   Edit? NO//R FREQUENCY: 1Y//
Findings:
Choose from:
      ALCOHOL SCREEN
Select FINDING:
Patient Cohort and Resolution Logic
CUSTOMIZED PATIENT COHORT LOGIC (OPTIONAL):
GENERAL PATIENT COHORT FOUND TEXT:
 No existing text
 Edit? NO//
GENERAL PATIENT COHORT NOT FOUND TEXT:
 No existing text
 Edit? NO//
CUSTOMIZED RESOLUTION LOGIC (OPTIONAL):
GENERAL RESOLUTION FOUND TEXT:
 No existing text
 Edit? NO//
GENERAL RESOLUTION NOT FOUND TEXT:
 Edit? NO//
Reminder Dialog
LINKED REMINDER DIALOG:
                                     <- No dialogs for now
Web Addresses for Reminder Information
Select URL:
```

2.2 National Reminder Definitions – Immunization Reminders

2.2.1 IMMUNIZATION FORECASTER

This reminder is only used to run the forecaster. This reminder MUST be NUMBER 1 in the GUI. This reminder does NOT have an associated dialog.

2.2.2 IHS-HEP A ADULT

Immunization for adults

Cohort: all adults 18 to 100, determined by computed finding to check immunization forecaster

Resolution: Determined by a Hep A immunization in the immunization file

2.2.3 IHS-HEP B ADULT

Immunization for adults

Cohort: all adults 18 to 100, determined by computed finding to check immunization forecaster

Resolution: Documentation of a Hep B immunization in the immunization file

2.2.4 IHS-HIGH RISK FLU 2007

Adult Immunization

Frequency Every year

Cohort: Patients with high risk taxonomy of diseases and determined by checking the immunization forecaster

Resolution: Documentation of immunization in the immunization file and not appearing in the due list in the immunization forecaster

2.2.5 IHS-HIGH RISK PNEUMO 2007

Adult Immunization

Frequency One time

Cohort: Patients with high risk taxonomy of diseases and determined by checking the immunization forecaster.

Resolution: Documentation of immunization in the immunization file and not appearing in the due list in the immunization forecaster.

2.2.6 IHS-HPV IMMUNIZATION

Childhood and young adult immunization

Cohort – Determined by computed finding to check immunization forecaster; females only; ages 11 to 26

Resolution – Documentation of immunization in the immunization file

2.2.7 IHS-INFLUENZA IMMUNIZATION 2007

Yearly immunization for adults over 50

Frequency: yearly

Cohort: (1) Adult over 50 Determined by computed finding to check immunization forecaster.

Resolution: Documentation of an immunization in the immunization file

2.2.8 IHS- MENINGITIS IMMUNIZATION

One time immunization for those over 11

Cohort: Children and young adults over 11 and up to 25 determined by computed finding to check immunization forecaster.

Resolution: Documentation of an immunization in the immunization file

2.2.9 IHS-PED DT IMMUNIZATION

Childhood immunization

Cohort: Determined by computed finding to check immunization forecaster, ages: 6 months to 7 years

Resolution: Documentation of immunization in the immunization file

2.2.10 IHS-PED DTAP IMMUN

Childhood immunization

Cohort: Determined by computed finding to check immunization forecaster, ages: 6 weeks to 7 years

Resolution: Documentation of immunization in the immunization file

2.2.11 IHS-PED FLU 2007

Childhood immunization

Cohort: Determined by computed finding to check immunization forecaster, ages: 6m to 59 months

Resolution: Documentation of immunization in the immunization file

2.2.12 IHS-PED HEPA IMMUN

Childhood immunization

Cohort: Determined by computed finding to check immunization forecaster, ages: 24m to 18 years

Resolution: Documentation of immunization in the immunization file

2.2.13 IHS-PED HEPB IMMUN

Childhood immunization

Cohort: Determined by computed finding to check immunization forecaster, ages:

Birth to 18 years

Resolution: Documentation of immunization in the immunization file

2.2.14 IHS-PED HIBTITER IMMUN

Childhood immunization

Cohort: Determined by computed finding to check immunization forecaster, ages: 6 weeks to 59 months Use this or the PEDVAXHIB

Resolution: Documentation of immunization in the immunization file

2.2.15 IHS-PED MMR IMMUN

Childhood immunization

Cohort: Determined by computed finding to check immunization forecaster, ages:

12mos to 18years

Resolution: Documentation of immunization in the immunization file

2.2.16 IHS PED-PEDVAXHIB

Childhood immunization

Cohort: Determined by computed finding to check immunization forecaster, ages: 6 weeks to 59 months. Use this or the HIBTITER

Resolution: Documentation of immunization in the immunization file

2.2.17 IHS-PED PNEUMOCOCCAL CONJUGATE

Childhood immunization

Cohort: Determined by computed finding to check immunization forecaster, ages: 2 months to 60 months

Resolution: Documentation of immunization in the immunization file

2.2.18 IHS-PED POLIO IMMUN

Childhood immunization for IPV

Cohort: Determined by computed finding to check immunization forecaster, ages: 6 weeks to 10 years

Resolution: Documentation of immunization in the immunization file

2.2.19 IHS-PED ROTAVIRUS

Childhood immunization

Cohort: Determined by computed finding to check immunization forecaster, ages: 2mos to 14mos

Resolution: Documentation of immunization in the immunization file

2.2.20 IHS-PED VARICELLA IMMUN

Childhood immunization

Cohort: Determined by computed finding to check immunization forecaster, ages: 12 month to 18 years

Resolution: Documentation of immunization in the immunization file

2.2.21 IHS-PNEUMOVAX IMMUNIZATION

Immunization for the elderly

Cohort: Determined by computed finding to check immunization forecaster, ages: >65

Resolution: Documentation of immunization in the immunization file and not appearing in the due list in the immunization forecaster

2.2.22 IHS-TD IMMUNIZATION

Adult immunization

Frequency: Every 10 years

Cohort: Determined by computed finding to check immunization forecaster, ages 10 to 100

Resolution: Documentation of immunization in the immunization file and not appearing in the due list in the immunization forecaster.

2.3 National Reminders – Health Maintenance Reminders

2.3.1 IHS- ALCOHOL SCREEN 2007

Alcohol screening is done yearly. Users document the CAGE test health factors on he wellness tab of the EHR to indicate the screening was performed.

Frequency: Yearly

Cohort: Any person aged 13 and older

Resolved by: A reminder term consisting of the 4 health factors for the Cage test

Any one of those 4 health factors documented in the last year will turn the reminder off

A DX that indicates alcohol screening was done

Education codes that document alcohol education was done

Alcohol exam code

2.3.2 IHS-ALLERGY

Reminder checks to see if an allergy assessment has been done.

Frequency: Yearly

Cohort: Everyone

Resolved by an entry into the adverse tracking file or the allergy assessment file for this patient

2.3.3 IHS-ASTHMA PLAN

For patients with asthma, an active asthma plan should be documented in the asthma registry.

Frequency: Plan must be documented in the last 12 months

Cohort: Patients have a diagnosis using the ICD9 codes found in the reminder taxonomy for asthma

Resolution: A computed finding searching the asthma registry to see if a plan has been documented

2.3.4 IHS-ASTHMA PRIM PROV

Patients with asthma need a designated primary care provider

Frequency – one time Cohort: Patients have a diagnosis using the ICD9 codes found in the reminder taxonomy for asthma

Resolution: A computed finding searching to find a documented designated primary care provider

2.3.5 IHS-ASTHMA SEVERITY

Patient with asthma who are being seen frequently in clinic or and have respiratory difficulties should have their severity documented in the asthma registry

Cohort: Patients have a diagnosis using the ICD9 codes found in the reminder taxonomy for asthma

Resolution: This reminder is used in conjunction with the asthma management system. Taxonomies must be setup for the asthma package

If the severity of asthma has not been documented in PCC and this patient has had 3 or more asthma visits in the past 6 months or has a brochodilator/bronchodialtor inflammatory index of >.33 then the reminder will be due.

2.3.6 IHS-ASTHMA STEROIDS

Reminder checks for patients with asthma, respiratory difficulties and persistent severity who are not on steroids. Those patients can benefit from inhaled steroids.

Cohort: Patients have a diagnosis using the ICD9 codes found in the reminder taxonomy for asthma

Resolution: This reminder is used in conjunction with the asthma tracking package

Taxonomies must be setup in the asthma package:

- 1. If patient is on register and has a mild persistent, moderate persistent, or severe persistent severity documented and is not on inhaled steroids
- 2. If patient has had 4 or more fills of asthma medication which includes at least 1 bronchodilator and the bronchodilator/bronchiodilator inflammatory index >.
- 3. If patient has had 3 or more asthma visits in the past 6 months

2.3.7 IHS-BLOOD PRESSURE

Blood pressure needs to be checked regularly. If a patient has a BP > 139/89, it needs to be checked on every visit.

Frequency: Every 2 years from 2 until 21

Every year over 21

Every six months for patients with diabetes Every visit if last SBP > 139 or DBP > 89

Cohort: Patients with a DX of hypertension are excluded unless they have diagnosis of Diabetes, then reminder is still due every 6 months.

Resolution: Blood pressure reading in the time allowed

2.3.8 IHS-COLON CANCER 2007

Patients need to be checked for colon cancer after the age of 50.

Frequency: Every 1 year if the result is from a fecal occult blood test

Every 5 years for a flexible sigmoidoscopy or a contrast barium enema

Every 10 years for a colonoscopy

Cohort: People over 50 unless they have a diagnosis of colon cancer

Resolution: Fecal occult blood test, sigmoidoscopy, barium enema or colonoscopy

2.3.9 IHS-DEPRESSION SCREEN 2007

This reminder is yearly for anyone over the age of 18, or any patient with diabetes or heart disease.

Frequency: Yearly

Cohort: Patients over 18; diagnosis of diabetes or heart disease

Resolution: ICD9 code for depression screen or Depression exam code or a refusal of

the exam

2.3.10 IHS-DIAB ACE/ARB 2007

Patients with diabetes should be on an ACE or an ARB to help prevent heart disease

Frequency – Yearly

Cohort: Pts with DX of diabetes in the last 2 years

Resolution: Active prescription for an ACE or an ARB or allergy to both ACE and ARB medications

2.3.11 IHS-DIAB ASPIRIN 2007

Patients with diabetes should be on aspirin to help prevent heart disease

Cohort: Pts with DX of diabetes in the last 2 years

Resolution: Active prescription for aspirin or allergy to aspirin

2.3.12 IHS-DIAB DENTAL EXAM 2007

Patients with diabetes need a yearly dental exam

Frequency – yearly

Cohort: Pts with Dx of diabetes in the last 2 years.

Resolution: Dental Exam recorded from the exam file or ADA codes from dental taxonomy. The codes are taken from the APCH DM ADA EXAMS taxonomy.

2.3.13 IHS-DIAB EYE EXAM 2007

Patients with diabetes need a yearly dilated pupil eye exam every year to prevent retinopathy

Frequency: Yearly

Cohort: Pts with Dx of diabetes in the last 2 years

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

2.3.14 IHS-DIAB FOOT EXAM 2007

Patients with diabetes need to have their feet checked every year to prevent neuropathy

Frequency – yearly

Cohort: Pts with DX of diabetes in the last 2 years

Resolution: Diabetic foot exam from the exam file

2.3.15 IHS- DIAB HGBA1C 2007

Patients with diabetes needs a yearly lab HGBA1c to help keep their diabetes under control and prevent long term complications

Frequency – yearly

Cohort: Pts with DX of diabetes in the last 2 years

Resolution: Lab result for HgbA1c

2.3.16 IHS-DIAB MICROALBUMIN 2007

Patients with diabetes need s urine microalbumin yearly to help prevent nephropathy

Frequency – yearly

Cohort: Pts with DX of diabetes in the last 2 years

Resolution: Lab test for microalbumin or Taxonomy for diabetic nephropathy

2.3.17 IHS-DOMESTIC VIOLENCE 2007

If a site wishes to turn this on, be aware that it will show up most women

Frequency: Yearly

Cohort: All women 15 to 40

Resolution: Documentation of domestic violence exam or domestic violence

education codes or a refusal of the exam

2.3.18 IHS-HCT/HCT

Hematocritt or hemoglobin is checked at ages 1 and 4

Frequency – Every 3 years for ages 12mos to 5 years

Cohort: all children

Resolution: Lab results for HCT or HGB

2.3.19 IHS-HEAD CIRCUMFERENCE

Head circumference is checked with decreasing frequency in infants and children for growth and for diagnosis of hydrocephaly

Frequency:

2 months for ages 1D to 6M

6 months for ages 6M to 27M

Cohort: everyone in age group

Resolution: Vital measurement of head circumference documented

2.3.20 IHS-HEARING TEST

All children need a hearing test at age 4 before going to school

Frequency – One time at age 4 to 5

Cohort – all children between 4 and 5

Resolution - Measurement result for hearing test documented in computer

2.3.21 IHS-HEIGHT

Height is checked in decreasing frequency on infants and children to determine growth patterns.

Frequency: 2 months for ages 7D to 6M

6 months for ages 6M to 18M 1 year for ages 2Y to 18Y

Every 5 years for adult up to 50

Cohort: Everyone in age range

Resolution: Measurement result for height documented in computer

2.3.22 IHS-LIPID FEMALE

Frequency: Every 5 years

Every year if pt is diabetic

Cohort: Females 45 to 64 or females with diabetes

Resolution: Lab test for lipid profile including an LDL

2.3.23 IHS-LIPID MALE

Frequency: Every 5 years

Every year if diabetic

Cohort: Males 35 to 64 or males with diabetes

Resolution: Lab test for lipid profile including an LDL

2.3.24 IHS-MAMMOGRAM 2007

Mammograms done yearly on women to screen for breast cancer

Frequency - Yearly

Cohort: Women ages 50 to 70 unless they have had a bi-lateral mastectomy

Resolution: Radiology test results for mammogram

CPT codes for mammogram studies

Computed finding checking women's health package for results

Refusal satisfies for one year

2.3.25 IHS-PAP SMEAR 2007

Pap smears done every 3 years on women to screen for cervical cancer

Frequency – Every 3 years

Cohort: Women 18 to 70 unless hysterectomy is documented

Resolution: CPT codes for pap smear

Pap smear if it's a lab result

Computed finding to check women's health for pap smear

Refusal satisfies for 1 year

2.3.26 IHS-PPD

Tuberculosis test

Frequency: 7 years for ages 4 years to 12 years

Cohort: All children in that age range

Resolution: Documentation of a skin test in the computer

2.3.27 IHS-SENIOR HEIGHT

Seniors checked for height deceases due to osteoporosis

Frequency: yearly

Cohort: People 50 and older

Every 2 years for ages 50 to 65.

Yearly for those over 65

Resolution: Documentation of measurement in the computer

2.3.28 IHS-TOBACCO SCREEN 2007

Yearly screening test for tobacco use

Frequency: yearly

Cohort: Those people 5 and older

Resolution: Documentation of health factors to determine smoking status

Or documentation of education topics relating to tobacco use

Or diagnosis relating to tobacco use

2.3.29 IHS-VISION EXAM

Childhood vision exam at age 7

Frequency – once

Cohort: Children ages 7 to 9

Resolution: Documentation of a visual screen (vital measurement) in the computer

2.3.30 IHS-WEIGHT

Weight is checked with deceasing frequency in children and adult.

In children it is a measure for growth and development

Frequency: 1 year for those 16 and older

6 months for ages 6Y to 16Y 3 months for ages 1Y to 6Y 2 months for ages 6M to 12M 7 days for ages 1D to 6M

Cohort: Everyone

Resolution: Documentation of weight in the computer

3.0 Reminder Taxonomy Management (TAX)

```
Reminder Taxonomy Management

CPY Copy Taxonomy Item

EDT Edit Taxonomy Item

INQ Inquire about Taxonomy Item
```

A site might need to make its own taxonomy if the import does not work.

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

3.1 Inquire about Taxonomy Item (INQ)

Below is the list for diabetes:

```
REMINDER TAXONOMY INQUIRY
                                                  September 18, 2005 2:07:01 pm Page 1
        NUMBER: 48
IHS-DIABETES DX
Brief Description:
   Codes for diabetes
Class:
                               NATIONAL
Sponsor:
Review Date:
Edit History:
    Edit Date: SEPTEMBER 17,2005 09:27 Edit By: HAGER, MARY G
    Edit Comment: Exchange Install
Patient Data Source: EN,PL
Use Inactive Problems:
ICD9 Codes:
    Range 250.00-250.90
               ICD Diagnoses
      ____
      250.00 DM UNCOMPL/T-II/NIDDM,NS UNCON
      250.01 DM UNCOMPL/T-I/IDDM,NS UNCONT
      250.02 DM UNCOMPL/T-II/NIDDM,UNCONTR
      250.03 DM UNCOMP T-I/IDDM,UNCONTR
250.10 DM KETOACI/T-II/NIDDM,NS UNCON
```

```
DM KETOACID/T-I/IDDM, NS UNCONT
250.11
       DM KETOACID/T-II/NIDDM,UNCONTR
250.12
250.13 DM KETOACID/T-I/IDDM,UNCONTR
250.20 DM HYPEROSMO/T-II/NIDDM,NS UNC
250.21 DM HYPEROSMOL/T-I/IDDM,NS UNC
250.22 DM HYPEROSMOLAR/T-II/NIDDM, UNC
250.23 DM HYPEROSMOLAR/T-I/IDDM,UNC
250.30 DM COMA NEC/T-II/NIDDM, NS UNC
250.31 DM COMA NEC/T-I/IDDM/NS UNCONT
250.32 DM COMA NEC/T-II/NIDDM,UNC
250.33 DM COMA NEC/T-I/IDDM, UNCONTR
250.40 DM RENAL/T-II/NIDDM,NS UNCON
       DM RENAL/T-I/IDDM,NS UNCONTR
DM RENAL MANIF/T-II/NIDDM,UN
DM RENAL MANIF/T-I/IDDM,UNC
250.41
250.42
         DM RENAL MANIF/T-II/NIDDM, UNC
250.43
250.50 DM OPHTH/T-II/NIDDM/NS UNCONTR
        DM OPHTH/T-I/IDDM,NS UNCONT
250.51
250.52 DM OPHTH MANIF/T-II/NIDDM,UNC
250.53 DM OPHTH MANIF/T-I/IDDM, UNCONT
250.60 DM NEURO/T-II/NIDDM,NS UNCONT
250.61 DM NEURO/T-I/IDDM, NS UNCONT
250.62 DM NEURO MANIF/T-II/NIDDM,UNC
250.63 DM NEURO MANIF/T-I/IDDM,UNCONT
250.70 DM CIRCULA/T-II/NIDDM,NS UNCON
250.71 DM CIRCULA/T-I/IDDM,NS UNCONT
250.72 DM PERIPH CIRC/T-II/NIDDM,UNC
250.73 DM PERIPH CIRC/T-I/IDDM,UNCONT
250.80
         DM/MANIF NEC/T-II/NIDDM, NS UNC
250.81
         DM/MANIF NEC/T-I/IDDM, NS UNCON
250.82
         DM W MANIF NEC/T-II/NIDDM, UNC
250.83
         DM W MANIF NEC/T-I/IDDM,UNC
       DM COMPL NOS/T-II/NIDDM,NS UNC
250.90
```

3.2 Edit Taxonomy Item (EDT)

Choose edit to build a taxonomy.

```
NAME: IHS-PAP//
BRIEF DESCRIPTION: Codes for Pap Smears Replace
CLASS: LOCAL//
SPONSOR:
REVIEW DATE:
PATIENT DATA SOURCE: EN//
   This is a list of comma separated patient data sources.
You may use any combination of valid entries.
Valid entries are:
   IN - inpatient from PTF
   INDXLS - inpatient DXLS diagnosis only
   INPR - inpatient primary diagnosis only
   EN - encounter PCE data
   ENPR - encounter PCE data primary diagnosis only
   PL - Problem List
   RA - radiology CPT only
USE INACTIVE PROBLEMS:
```

```
INACTIVE FLAG:
ICDO Range of Coded Values
Select ICD0 LOW CODED VALUE: 91.46//
  ICDO LOW CODED VALUE: 91.46//
  ICDO HIGH CODED VALUE: 91.46//
Select ICDO LOW CODED VALUE:
ICD9 Range of Coded Values
Select ICD9 LOW CODED VALUE: V76.2//
 ICD9 LOW CODED VALUE: V76.2//
 ICD9 HIGH CODED VALUE: V76.2//
Select ICD9 LOW CODED VALUE:
CPT Range of Coded Values
                                       <- Multiple sets of CPT codes
Select CPT LOW CODED VALUE: Q0091// ?
   Answer with CPT RANGE OF CODED VALUES CPT LOW CODED VALUE
   Choose from:
  88141
   00091
   88174
```

3.3 Taxonomies Used in Reminders

A reminder can use codes as part of the:

Cohort: diabetes codes for reminders due only for diabetics

Resolution: CPT codes to document a mammogram

Clinical reminders set up taxonomies to contain these codes. The taxonomies are part of the national reminders patches, but occasionally a taxonomy might not load because of a problem with the ICD9 file at a site.

If a site needs to create a taxonomy because of a problem with their ICD9 file, the list includes codes for immunizations.

3.3.1 Example

Start in the Reminder Manager menu. Choose Reminder Taxonomy Management (TAX)

```
Reminder Configuration
CFM
      Reminder Computed Finding Management ...
      Reminder Definition Management ...
DEF
      Reminder Dialog Management ...
DLG
EXC
      Reminder Exchange
      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
```

Choose Reminder Taxonomy Management (TAX) on the Reminder Configuration screen.

```
Reminder Taxonomy Management

CPY Copy Taxonomy Item

EDT Edit Taxonomy Item

INQ Inquire about Taxonomy Item
```

Choose Edit Taxonomy Item (EDT) on the Reminder Taxonomy Management screen.

```
General Taxonomy Data
NAME: IHS-MAMMOGRAM //
BRIEF DESCRIPTION: Mammogram codes//
CLASS: VISN// <- Use this or Local, you cannot make national taxonomies
SPONSOR:
REVIEW DATE:
PATIENT DATA SOURCE: EN, PL <- Entries from problem list or encounter
USE INACTIVE PROBLEMS:
INACTIVE FLAG:
ICDO Range of Coded Values
Select ICD0 LOW CODED VALUE: 87.36//
 ICDO LOW CODED VALUE: 87.36// <-Enter the start code
 ICDO HIGH CODED VALUE: 87.36//
                                     <-Enter the end code
Select ICDO LOW CODED VALUE: 87.37
 ICD0 LOW CODED VALUE: 87.37//
                                       If low and high are the same, one code is
 ICDO HIGH CODED VALUE: 87.37//
                                        Stored
Select ICD9 LOW CODED VALUE: V76.11//
 ICD9 LOW CODED VALUE: V76.11//
  ICD9 HIGH CODED VALUE: V76.12//
Select ICD9 LOW CODED VALUE:
Select CPT LOW CODED VALUE: 76090//
 CPT LOW CODED VALUE: 76090//
                                       <-Range of codes
  CPT HIGH CODED VALUE: 76092//
```

3.3.2 IHS-ALCOHOL SCREEN 2007

	ICD9 RA	NGE	ICDO RA	NGE	CPT R	ANGE	
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH	
IHS-AL	COHOL SCREEN						
	V11.3	V11.3	94.46	94.46			
	V79.1	V79.1	94.53	94.53			
	303.00	303.90	94.61	94.63			
	305.00	305.03	94.67	94.69			
	357.5	357.5					
	291.0	291.9					

3.3.3 ALL ASTHMA REMINDERS

IHS-ASTHMA PLAN IHS-ASTHMA PRIM PROV IHS-ASTHMA SEVERITY IHS-ASTHMA STEROIDS

NAME	ICD9 RANGE LOW	HIGH	ICD0 RANGE LOW	HIGH	CPT RANGE LOW	HIGH
						nign
IHS-ASTHMA						
	493.00	493.92				

3.3.4 IHS-BLOOD PRESSURE

	ICD9 RANGE		ICDO RANGE		CPT RANGE	
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH
IHS-HYPI	ERTENSION					
-	401.0	405.99				

3.3.5 IHS-COLON CANCER 2007

This reminder has multiple taxonomies.

IHS-BARIUM ENEMA

	ICD9 RA	NGE	ICD0 RANGE		CPT RANGI	2
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH
IHS-BARIU	JM ENEMA				74270 G0106 G0120	74280 G0106 G0120

IHS-COLONOSCOPY 2007

NAME	ICD9 RANG LOW	EE HIGH	LOW	ICDO RANGE HIGH	LOW	CPT RANGE HIGH
IHS-COLO	NOSCOPY - 20) <u>07</u>				
		<u>_</u>	45.22	45.22	45355	45355
			45.23	45.23	45378	45387
			45.25	45.25	G0105	G0105
			76.51	76.51	G0121	G0121
					44388	44394
					44397	44397
					44394	44394
					45391	45391

IHS-COLORECTAL CANCER 2007

	ICD9 RAN	GE	ICD0 RANG	GE	CPT RANG	GE
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH

IHS-COLORECTAL CANCE	R 2007		
153.0	153.9	44150	44153
154.0	154.1	44155	44156
197.5	197.5	44210	44212
V10.05	V10.05		

IHS-FECAL OCCULT LAB TEST

	ICD9 RANG	GE	ICD0 RANGE		CPT RANGE	
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH
IHS-FECAI	OCCULT LA	3 TEST				
					82270	82270
					82274	82274
					G0107	G0107
					89205	89205

IHS-SIGMOIDOSCOPY

NAME	ICD9 RANG LOW	E HIGH	ICDO RANGE LOW	HIGH	CPT RANGE LOW HIGH		
IHS-SIGMO	DIDOSCOPY		45.24 45.42	45.24 45.42	45330 G0104	45345 G0104	

3.3.6 IHS-DEPRESSION SCREEN 2007

IHS-DEPRESSION SCREEN HI

IHS-DEPRESSION SCREEN									
	ICD9 RANGE		ICD0 RANGE		CPT RANGE				
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH			
IHS-DEPRESSION SCREEN									
	V79.0	V79.0							

IHS-DEPRESSION CODES 2007

IHS-I	DEPRESSION C	ODES 2007					
	ICD9 RANGE		ICD0 RAN	IGE	CPT RAN	GE	
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH	
	296.00	296.99					
	291.89	291.89					
	292.84	292.84					
	293.83	293.83					
	300.4	300.4					
	301.13	301.13					
	311.	311.					

IHS-DIABETES DX 2007

	ICD9 RAN	GE	ICD0 RAN	GE	CPT RAI	IGE	
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH	
							-

IHS-DIABETES DX 2007				
250.00	250.93			

IHS-ISCHEMIC HEART DISEASE 2007

NAME	ICD9 RAN	IGE HIGH	ICDO RANG LOW	E HIGH	CPT RAN LOW	IGE HIGH	
IHS-ISCHEM	HEART 410.0 414.0 428.0 429.2	112. 412. 414.9 428.9 429.2	<u>07</u>				

3.3.7 ALL DIABETES REMINDERS

IHS-DIAB ACE/ARB 2007

IHS-DIAB ASPIRIN 2007

IHS-DIAB DENTAL EXAM 2007

IHS-DIAB EYE EXAM 2007

IHS-DIAB FOOT EXAM 2007

IHS-DIAB HGBA1C 2007

IHS-DIAB MICROALBUMIN 2007

IHS-DIABETES DX 2007

	ICD9 RANGE		ICDO RANGE		CPT RANG				
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH			
IHS-DIABI	IHS-DIABETES DX 2007								
	250.00	250.93							

3.3.8 IHS-DIAB EYE EXAM 2007

IHS-FUNDOSCOPIC EYE CODES 2007

NAME	ICD9 LOW	RANGE	HIGH	ICD0 RANGE LOW	HIGH	CPT RANGE LOW	HIGH
11471.172	пοм		111.011	TOM	111.011	TOM	111-011
IHS-FUND	OSCOPIC	EYE CO	DES 2007				
1115 1 0112	V72.0		V72.0			92012	92012
						92014	92015
						92002	92002
						92004	92004
						92250	92250

3.3.9 IHS-DIAB DENTAL EXAM 2007

IHS-DENTAL CODE

	ICD9 RANG	E	ICD0 RA	ANGE	CPT RAI	IGE	
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH	

IHS-DENTAL CODE

V72.2 V72.2

3.3.10 IHS-DIAB MICROALBUMIN

IHS-DIABETIC NEPHROPATHY

	ICD9 I	RANGE	ICD0	RANGE	CPT	RANGE
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH
IHS-DIA	BETIC NEP	HROPATHY				
	250.40	250.43				
	791.0	791.0				

IHS-END STAGE RENAL DISEASE

	ICD9 RANGE		ICD0 RAN	ICD0 RANGE		S E	
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH	
	585.5	585.6			90918	90925	
	V45.1	V45.1					

3.3.11 IHS-DOMESTIC VIOLENCE 2007

IHS-DOMESTIC VIOLENCE 2007

	ICD9 RANGE	l I	ICD0 RANGE		CPT RANGE	
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH
IHS-DOME	ESTIC VIOLENCE	2007				
	995.80	995.83				
	995.85	995.85				
	V15.41	V15.41				
	V15.42	V15.42				
	V15.49	V15.49				
	V61.11	V61.11				

3.3.12 IHS-HIGH RISK FLU 2007

We STRONGLY recommend that the site create this taxonomy first.

Make sure it is named IHS-HIGH RISK FLU 2007

IHS-HIGH RISK FLU 2007											
	ICD9 RA	NGE	ICD0 R	ANGE	CPT F	RANGE					
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH					
	042.0	043.9									
	044.9	044.9									
	250.00	250.93									
	393.	398.99									

```
402.91
402.00
404.00
          404.93
410.00
          414.9
415.0
          416.9
424.0
          424.99
425.0
          425.9
428.0
          428.9
429.2
          429.2
491.9
          491.9
492.0
          492.8
493.00
          493.91
494.0
          496.
501.
          505.
571.0
          571.9
581.0
          581.9
585.
          585.
          996.89
996.80
V42.0
          V42.89
V58.1
          V58.1
V67.2
          V67.2
```

3.3.13 IHS-HIGH RISK PNEUMO 2007

We STRONGLY recommend that the site create this taxonomy first.

Make sure it is named IHS-HIGH RISK PNEUMO 2007

	ICD9 RANG	Ε	ICD0 RANG	ξE	CPT RANG	}E
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH
IHS-HIG	H RISK PNEUMO	2007				
	042.0	043.9				
	044.9	044.9				
	250.00	250.93				
	303.90	303.91				
	428.0	428.9				
	429.2	429.2				
	492.0	492.8				
	494.0	496.				
	505.	505.				
	571.0	571.9				
	581.0	581.9				
	585.	585.				
	865.00	865.19				
	996.80	996.89				
	V42.0	V42.89				
	V58.1	V58.1				
	V67.2	V67.2				

3.3.14 IHS-MAMMOGRAM 2007

IHS-MAMMOGRAM 2007

	ICD9 RANGE			ANGE	CPT	RANGE	
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH	
		_					
IHS-MAN	MMOGRAM 2007	<u>/</u>					
	V76.11	V76.12	87.37	87.37	76090	76092	

87.36	87.36	G0204	G0204	
		G0206	G0206	
		G0202	G0202	
		77055	77057	
		58951	58951	

IHS-BILATERAL MASTECTOMY

	ICD9 RANGE		ICD0 RANGE		CPT RANGE		
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH	
IHS-BII	LATERAL MA	ASTECTOMY					
			85.42	85.42	19180	19180	
			85.44	85.44	19200	19200	
			85.46	85.46	19220	19220	
			85.48	85.48	19240	19240	

3.3.15 IHS-PAP SMEAR 2007

IHS-PAP

	ICD9 RANGE		ICD0 RANGE		CPT RANG	S E
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH
THE DAD						
IHS-PAP	V76.2	V76.2	91.46	91.46	88141	88167
			91.40	91.40		
	V76.49	V76.49			Q0091	Q0091
	V72.32	V72.32			88174	88175
	V76.47	V76.47				

IHS-HYSTERECTOMY 2007

	ICD9 RANGE		ICD0 RANGE		CPT RANGE	
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH
						
IHS-HYS	STERECTOMY 2007					
			68.4	68.8	51925	51925
					56308	56308
					58150	58150
					58152	58152
					58200	58294
					58550	58554
					58953	58954
					59135	59135
					59525	59525
					58951	58951

3.3.16 IHS-PPD

IHS-TB/POS PPD

	ICD9 RANGE		ICDO RANG		CPT RANG		
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH	
IHS TB/POS	PPD						
'-	010.00	018.90					
	795.5	795.5					

3.3.17 IHS-TOBACCO SCREEN 2007

IHS-TOBACCO USE 2007

ICD9 RANGE		ICD0 RA	ICD0 RANGE		ANGE		
NAME	LOW	HIGH	LOW	HIGH	LOW	HIGH	
IHS-TOBAC	CO USE 200) <u>7</u>					
	305.1	305.12					
	V15.82	V15.82					
	649.00	649.04					

4.0 Reminder Term Management (TRM)

Reminder terms are very similar to taxonomies except that they involve other files such as drugs, labs, exams, immunizations, etc. The reminder terms for immunizations are populated, but a site might need to add other immunizations, if necessary, when using immunizations that are not standard.

```
Reminder Term Management

CPY Copy Reminder Term

EDT Reminder Term Edit

INQ Inquire about Reminder Term
```

4.1 Inquire about Reminder Term (INQ)

Review the term first.

4.2 Reminder Term Edit (EDT)

```
Select Reminder Term Management Option: te Reminder Term Edit

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

NAME: IHS-HIBTITER IMMUNIZATION//
CLASS: VISN//
REVIEW DATE:
DESCRIPTION:
Hibtiter from the vaccination file

Edit? NO//

Select FINDING ITEM: IM.HIB
**** ENTER THE NAME OF THE IMMUNIZATION THAT IS A HIBTITER AT YOUR SITE ****
```

```
The choices for reminder terms are:
        You may enter a new FINDINGS, if you wish
        Enter a new finding item
        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
          MEA.EntityName to select a MEASUREMENT TYPE
```

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

```
FINDING ITEM: HIB, NOS//
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//
```

4.3 Reminder Terms in National Reminders

Reminder terms can map to several files in RPMS. In many cases, the term can be created and sent nationally since each site will have the indicated items. An example is Health Factors, where each Indian Health facility has the same health factors.

However for some items, such as lab tests and drugs, each site can have different tests because there is no national standard. Sites therefore must MAP their local lab tests to the reminder terms. Below is a listing of the reminders terms sent in patch 1005 that need to be mapped and an example of how to do the mapping.

4.3.1 IHS-ALCOHOL EDUCATION

Used in the IHS ALCOHOL SCREEN 2007 reminder

```
Class: VISN
Date Created:
Sponsor:
```

```
Review Date:
   Description:
  CD-COMPLICATIONS
  CD-DIET
  CD-DISEASE PROCESS
  CD-NUTRITION
  CD-PATIENT LITERATURE
  CD-PREVENTION
  CD-EXERCISE
  CD-FOLLOW-UP
  CD-MEDICATIONS
  AOD-COMPLICATIONS
  AOD-CONTINUUM OF CARE
  AOD-CULTURAL/SPIRITUAL ASPECTS OF HEALTH
  AOD-DISEASE PROCESS
  AOD-EXERCISE
  AOD-PATIENT INFORMATION LITERATURE
  AOD-LIFESTYLE ADAPTATIONS
  AOD-MEDICATIONS
  AOD-MEDICAL NUTRITION THERAPY
  AOD-NUTRITION
  AOD-PREVENTION
.. AOD-PLACEMENT
  AOD-SCREENING
  AOD-STRESS MANAGEMENT
  AOD-TESTS
  AOD-WELLNESS
  CD-HOME MANAGEMENT
  CD-LIFESTYLE ADAPTATIONS
  CD-SCREENING
  CD-STRESS MANAGEMENT
  CD-TESTS
   Findings:
    Enter any additional or local education topics your site uses to
satisfy alcohol education.
```

4.3.2 IHS-ALCOHOL SCREEN

Used in the IHS ALCOHOL SCREEN 2007 reminder

```
NAME: IHS-ALCOHOL SCREEN//
CLASS: VISN//
REVIEW DATE:
DESCRIPTION:
No existing text
Edit? NO//
Findings;;
Choose from:
CAGE 0/4
CAGE 1/4
CAGE 2/4
CAGE 3/4
CAGE 4/4
```

4.3.3 IHS-ASPIRIN

Used in the IHS DIAB ASPIRIN 2007 reminder

Sites should feel free to enter the whole generic drug of aspirin if they prefer. This would eliminate entering each drug individually

```
Class: VISN
Date Created:
Sponsor:
Review Date:
Description:
Findings: ASPIRIN 81 MG TAB
ASPIRIN 81 MG TAB CHEWABLE

Enter the names of the aspirin products that would satisfy the reminder or
Use the generic drug term for aspirin to include all aspirin types
```

4.3.4 IHS-ACE/ARB

Used in the IHS DIAB ACE/ARB 2007 REMINDER

Sites should feel free to add any different drugs they want, or they can delete the drug classes and enter individual drugs or the VA generic drug if desired.

```
NAME: IHS-ACE/ARB//
CLASS: VISN//
REVIEW DATE:
DESCRIPTION:
Groupings of ace/arb drugs

Edit? NO//
Select FINDING ITEM: CV805// ?

CV805
CV800
```

4.3.5 IHS-DOMESTIC VIOLENCE EDUCATION

Used in the IHS DOMESTIC VIOLENTCE 2007 reminder

```
Class:
                  VISN
   Date Created:
    Sponsor:
    Review Date:
   Description:
   Findings:
   V-DISEASE PROCESS
   DV-FOLLOW-UP
   DV-PATIENT LITERATURE
  DV-PREVENTION
  DV-SAFETY & INJURY PREVENTION
  DV-TREATMENT
   DV-PSYCHOTHERAPY
Enter the names of the education topics your site uses in domestic violence
education
```

4.3.6 IHS-FECAL OCCULT BLOOD

Used in the IHS-COLON CANCER 2007 reminder

```
NAME: IHS-FECAL OCCULT BLOOD Replace
CLASS: VISN//
REVIEW DATE:
DESCRIPTION:
No existing text
Edit? NO//
Select FINDING ITEM: ?

Enter the name of the lab test that is used for fecal occult blood testing.
```

4.3.7 IHS-HCT/HGB

Used in the IHS-HCT/HGB reminder

```
Class: VISN

Date Created:
Sponsor:
Review Date:
Description:
Findings: HEMOGLOBIN (FI(1)=LT(3))
HCT (VENOUS) (FI(2)=LT(4))

Enter the names of the HGB and HCT test(s) used at the site to satisfy the reminder
```

4.3.8 IHS-HGBA1C

Used in the IHS-DIAB HGBA1C 2007 reminder

```
Class: VISN
Date Created:
Sponsor:
Review Date:
Description: The lab tests at a site
that are the hemoglobin Alc test
Findings: HEMOGLOBIN AlC (FI(1)=LT(97))
Enter the name of the HGBAlC test used at the site
```

4.3.9 IHS-LIPID LAB TESTS

Used in the IHS-LIPID FEMALE and IHS-LIPID MALE reminders

```
Class: VISN
Date Created:
Sponsor:
Review Date:
Description:
Findings: CHOLESTEROL (FI(1)=LT(183))
LIPID PANEL (FI(2)=LT(9999068))
LIPID PANEL W/ LDL-D (FI(3)=LT(9999059))
LDL CHOLESTEROL (FI(4)=LT(901))
Enter the name of the lipid tests that will satisfy this reminder. There will probably be several tests included here. The list above is an example
```

4.3.10 IHS-MAMMOGRAM TERMS

Used in the IHS-MAMMOGRAM 2007 reminder

```
Class: VISN
Date Created:
Sponsor:
Review Date:
Description:
Findings: MAMMOGRAM BILAT (FI(1)=RP(436))
SCREENING MAMMOGRAM (FI(2)=RP(657))
MAMMOGRAM UNILAT (FI(3)=RP(435))

Enter the names of the radiology exams that will satisfy the mammogram reminder
```

4.3.11 IHS-MICROALBUMIN

Used in the IHS-DIAB MICROALBUMIN 2007 reminder

```
Class: VISN
Date Created:
Sponsor:
Review Date:
Description: The lab tests used at a site to resolve the microalbumin reminder
Findings: PROTEIN (URINE) (FI(1)=LT(149))
MICRO-ALBUMIN (FI(2)=LT(9003))

If the site does a microalbumin, enter the lab tests. DO NOT add this reminder to the list in the GUI or inactivate this reminder IF the site does not have a microalbumin test.
```

4.3.12 IHS-PAP SMEAR

Used in the IHS-PAP SMEAR 2007 reminder

```
Class: VISN
Date Created:
Sponsor:
Review Date:
Description:
Findings:
Only enter a finding here if the site has defined pap smear as a lab test
```

4.3.13 IHS-TOBACCO SCREEN EDUCATION TOPICS

Used in the IHS-TOBACCO SCREEN 2007 reminder

```
NAME: IHS-TOBACCO SCREEN EDUCATION TOPICS Replace
CLASS: LOCAL//
REVIEW DATE:
DESCRIPTION:
Tobacco screening education topics

Edit? NO//
Select FINDING ITEM:
Choose from:
```

```
TO-FOLLOW-UP
TO-PATIENT LITERATURE
TO-COMPLICATIONS
TO-DISEASE PROCESS
TO-EXERCISE
TO-LIFESTYLE ADAPTATIONS
TO-MEDICATIONS
TO-QUIT
```

4.3.14 IHS-TOBACCO SCREEN HF 2007

Used in the IHS-TOBACCO SCREEN 2007 reminder

```
NAME: IHS-TOBACCO SCREEN HEALTH FACTORS Replace
CLASS: LOCAL//
REVIEW DATE:
DESCRIPTION:
All health factors and education topics that encompass a tobacco screen
 Edit? NO//
Select FINDING ITEM: CESSATION-SMOKELESS// ?
Answer with FINDINGS FINDING ITEM
Do you want the entire 11-Entry FINDINGS List? Y (Yes)
   Choose from:
  CEREMONIAL USE
  SMOKER IN HOME
  SMOKE FREE HOME
  CURRENT SMOKER & SMOKELESS
  CESSATION-SMOKELESS
   CESSATION-SMOKER
  NON-TOBACCO USER
   CURRENT SMOKER
   EXPOSURE TO ENVIRONMENTAL TOBACCO SMOKE
   CURRENT SMOKELESS
  PREVIOUS SMOKER
   PREVIOUS SMOKELESS
```

5.0 Reminder Exchange

The instructions below are on how to install the national reminders. Installation of patch 1005 will put the reminders into the REMINDER EXCHANGE file. The clinical application coordinator should then install them using REMINDER EXCHANGE.

5.1 Install the Reminder

Start in the Reminder Configuration menu. Choose Reminder Exchange (EXC)

```
Reminder Configuration
       Reminder Computed Finding Management ...
CFM
DEF
       Reminder Definition Management ...
       Reminder Dialog Management ...
       Reminder Exchange
EXC
INF
       Reminder Information Only Menu ...
       Reminder Parameters ...
      Reminder Reports ...
RPT
      Reminder Sponsor Management ...
SPO
      Reminder Taxonomy Management ...
TAX
       Reminder Term Management ...
TST
       Reminder Test
```

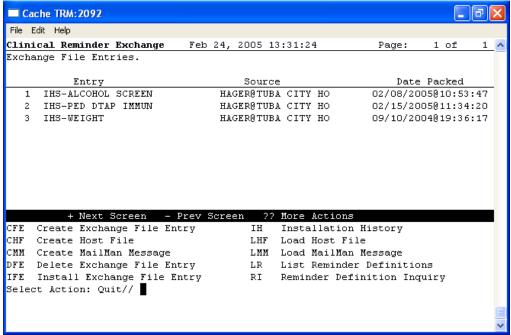


Figure 5-1: Sample Clinical Reminder Exchange

The reminder should be visible in exchange. Use IFE – Install Exchange File Entry.

Enter the number of the DTAP IMMUNIZATION to install.

Select Action: (IFE/DFE/IH): IFE//

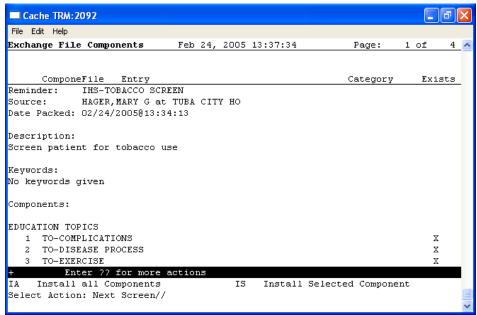


Figure 5-2: Sample Exchange File Components Screen

Two choices, IA or IS. Choose IA to install all components.

As you install, you will be asked 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.

Take all the defaults as you load the reminder unless you have loaded a previous version of reminders. Then, always re-install the reminder itself.

EXAMPLE: Computed finding already exists on the system.

```
COMPUTED FINDING entry IHS-DTAP already EXISTS, what do you want to do?
 Select one of the following:
                   Create a new entry by copying to a new name
                   Install or Overwrite the current entry
         I
                   Quit the install
                   Skip, do not install this entry
Enter response: S//
   EXAMPLE: NEW REMINDER TERM
   REMINDER TERM entry IHS-DTAP IMMUN is NEW,
what do you want to do?
         Select one of the following:
             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//
```

5.2 Install the Dialog

The second part is to install the dialog pieces. At the top left, the computer tells you that you are looking at the Dialog Components. Choose IA: Install ALL

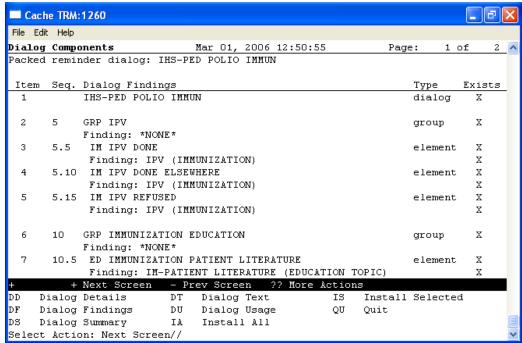


Figure 5-3: Sample Dialog Components Screen

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

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

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

5.3 Objects in the Dialog

Several of the imported dialogs have TIU objects in them to display data to the users.

These have been included in TIU patch 1003. If this patch is not loaded, the install will ask you for the names of your local objects to replace the ones in the national reminder. Make sure that this patch is installed before you load the reminders. The objects included are:

BPXRM	ALCOHOL SCREEN	A
BPXRM	BP	A
BPXRM	CAGE TEST	A
BPXRM	DENTAL EXAM	A
BPXRM	DEPRESSION SCREEN	A
BPXRM	DIABETIC EYE	A
BPXRM	FOOT EXAM	A
BPXRM	HEAD CIRCUMFERENCE	A
BPXRM	HEIGHT	A
BPXRM	HGB AND HCT	

BPXRM	HGBA1C	A
BPXRM	INTIMATE PARTNER VIOLENCE	A
BPXRM	LAST TD	A
BPXRM	LIPID PROFILE	A
BPXRM	MAMMOGRAM	A
BPXRM	MICROALBUMIN	A
BPXRM	PAP	A
BPXRM	TD	A
BPXRM	TOBACCO SCREEN	A

The site will need to create the following MEDICATION objects to use the dialogs for Diabetes reminders. If you do not have these objects, you will need someone with programmer access to use the Copy Function in TIU objects to create these objects.

LAST MED CLASS ACEI (Use the copy function for LAB MED CLASS (SAMPLE) then replace "DRUG CLASS" with CV800

LAST MED CLASS ARB (Use the copy function for LAB MED CLASS (SAMPLE), then replace the "DRUG CLASS" with CV850

LAST ASPIRIN (Use the copy function for LAB MED (SAMPLE), then replace the "DRUG NAME" with ASPRIN.

Don't forget to make the object ACTIVE before you use it.

5.4 Quick Orders in Dialogs

Several of the dialogs allow the user to order a lab test, one orders a medication and one orders a mammogram. 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 when you load the reminder.

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, that would be the correct choice.

The quick orders included in this build:

```
LRZ LIPID PROFILE

LRZ HGB&HCT

LRZ HGBA1C

LRZ MICROALBUMIN

RAZ MAMMOGRAM

PSOZ ASPIRIN (EC) 81MG DAILY

GMRAOR ALLERGY ENTER/EDIT

ORZ EYE APPOINTMENT

GMRCZ TOBACCO CESSATION
```

5.5 Activate the dialog

All dialogs are inactive if they are loaded in reminder exchange.

It is important to remember to active the dialog before using it in the EHR.

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

5.5.1 Reminder Dialog Management (DLG)

The Reminder Dialog Management options are:

```
Reminder Dialog Management
DLG Reminder Dialogs
PAR Dialog Parameters ...
```

5.5.2 Reminder Dialogs (DLG)

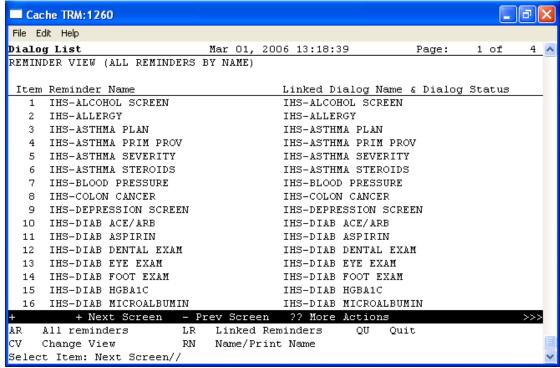


Figure 5-4: Sample Reminder View (All Reminders by Name) Screen

Choose CV and then Choose D for dialogs

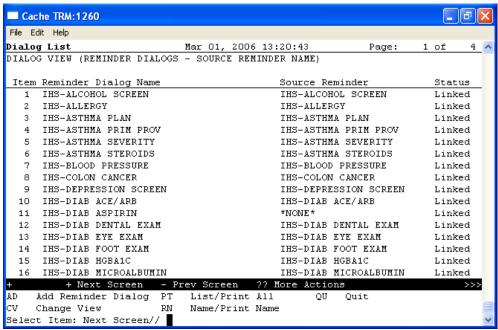
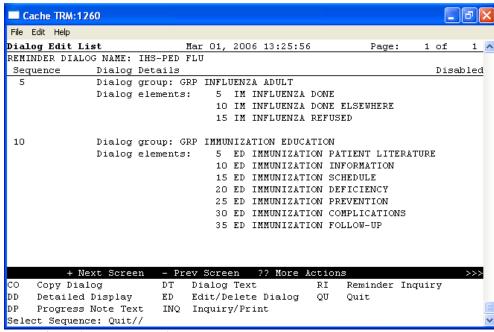


Figure 5-5: Sample Dialog View (Reminder Dialogs - Source Reminder Name) Screen

Choose the number of the item you wish to edit.



- : Reminder Dialog Name Screen for IHS-PED FLU
- 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. Then you can use the ^ to quit editing. The dialog should now say Linked.

5.5.3 Dialog Doesn't Link Automatically

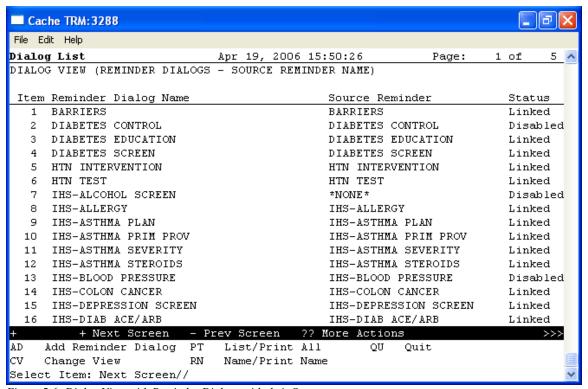


Figure 5-6: Dialog View with Reminder Dialogs with their Sources

If you see a NONE under the source reminder after uploading from reminder exchange, follow these steps

- 1. Enter the number of the reminder to edit
- 2. Type E to edit the reminder at the "Select Item" prompt (as shown below).

```
Select Sequence: Next Screen// e Edit/Delete Dialog
NAME: IHS-ALCOHOL SCREEN//
```

3. Remove the DISABLE data (as shown below)

```
DISABLE: DISABLED IN EXCHANGE Replace @
SURE YOU WANT TO DELETE? Yes
```

4. Enter the Source Reminder – Reminders and dialogs have the same name (as shown here).

```
CLASS: LOCAL//
SPONSOR:
REVIEW DATE:
SOURCE REMINDER: IHS-ALCOHOL SCREEN
```

6.0 National Reminder Dialogs

6.1 Immunization Dialogs

The dialogs for all the immunizations are the same, the only difference being the name of the immunization. The example below is what you should see if using an immunization dialog.

This is the standard dialog. The first check box is to document the immunization.

The second checkbox is to document education done during this visit.

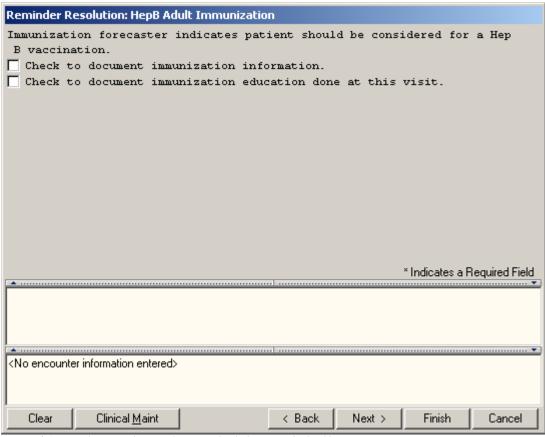


Figure 6-1: Sample Reminder Resolution - Check the Second Checkbox

The first dialog shows the prompts for documenting an immunization done at the site (shown below).

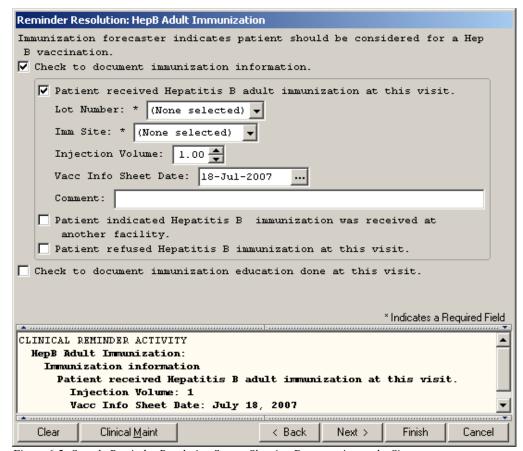


Figure 6-2: Sample Reminder Resolution Screen Showing Documenting at the Site

The second dialog is for documenting an immunization done at somewhere else (shown below).

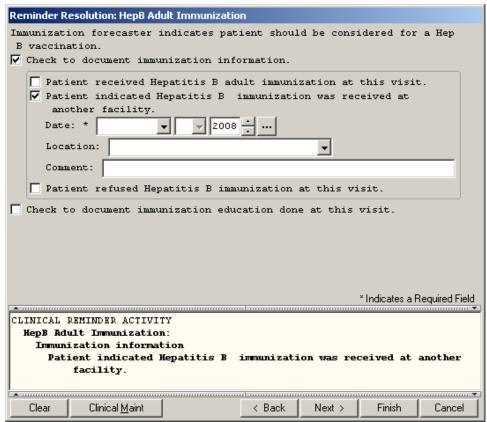


Figure 6-3: Sample Reminder Resolution Screen Showing Documenting Somewhere Else

The third dialog is for a refusal (shown below).

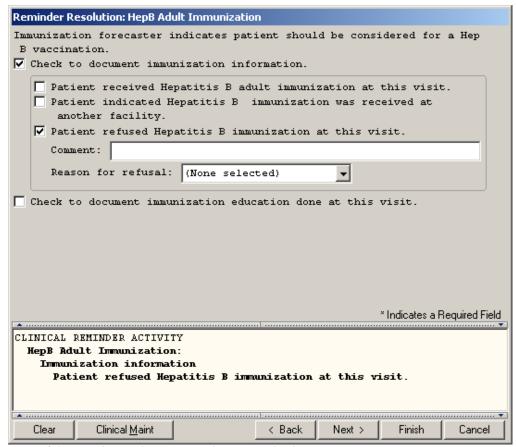


Figure 6-4: Reminder Resolution Screen showing a Refusal

6.2 Alcohol Screen

The alcohol dialog has room for the CAGE test, the screening Exam, Alcohol education, or a refusal (shown below).

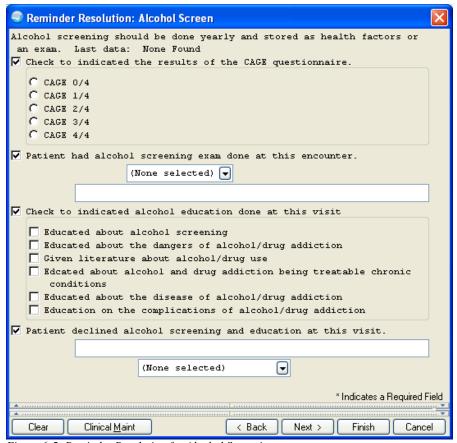


Figure 6-5: Reminder Resolution for Alcohol Screening

6.3 Allergy Reminder

The allergy reminder only displays if a person has not had an allergy assessment done. The dialog informs users to enter the allergy and/or assessment.

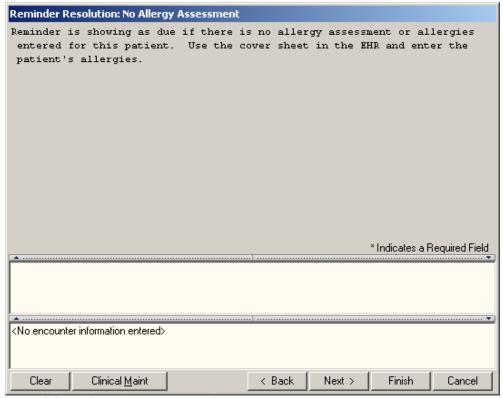


Figure 6-6: No Allergy Assessment Reminder

6.4 Asthma Reminder(s)

All asthma reminders are resulted in the asthma package. The reminder dialog is only for information about what caused the reminder to appear.

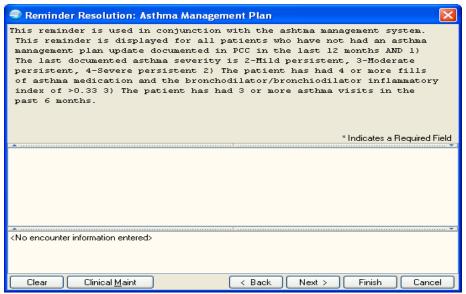


Figure 6-7: Sample Asthma Management Plan

6.5 Vital Sign Dialogs

The vital sign dialogs are essentially all the same. The dialogs are for blood pressure, head circumference, hearing test, height, senior height, vision and weight.

The blood pressure reminder can be resulted by entering a BP (as shown below).

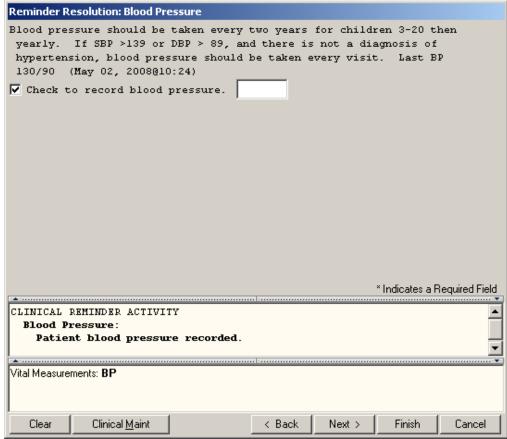


Figure 6-8: Sample Blood Pressure Reminder Resolution

6.6 Diabetic – Ace Inhibitors

This is information only. A site could easily ADD a quick order menu of medications that could be ordered while in this dialog. It will be up to the site to create this menu since every site has different medications on its formulary.

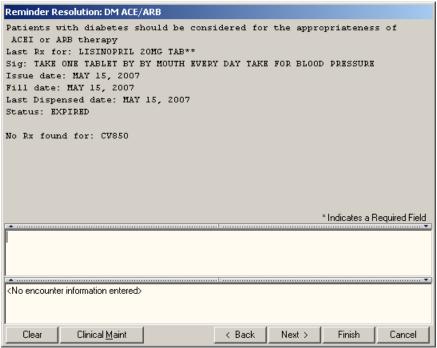


Figure 6-9: Sample Reminder Resolution for DM ACE/ARB

6.7 Diabetic – Aspirin

This dialog is attached to a quick order for aspirin. The medication can be ordered after clicking Finish on the dialog. Below is an example of a medication quick order.

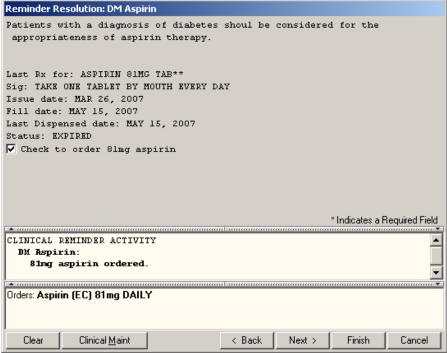


Figure 6-10: Sample Medication Quick Order

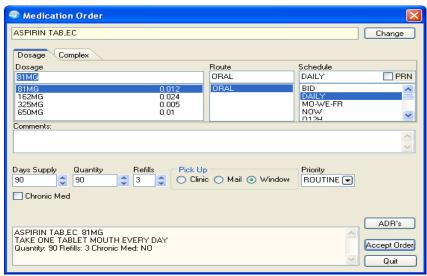


Figure 6-11: Sample Medication Order for Aspirin

6.8 Exams

The exam dialogs are depression screen, intimate partner violence, diabetic dental, diabetic foot exam and diabetic eye exam.

These exam dialogs are the same. The exam is documented as either done at this encounter or done elsewhere.



Figure 6-12: Specifying Where the Exam is Done

6.9 Lab Dialogs

Lab dialogs are for lipid, hgb&hct, hgba1c and microalbumin. They are all the same. The dialog is attached to a quick order for the lab test which can be ordered when the FINISH button is pressed.

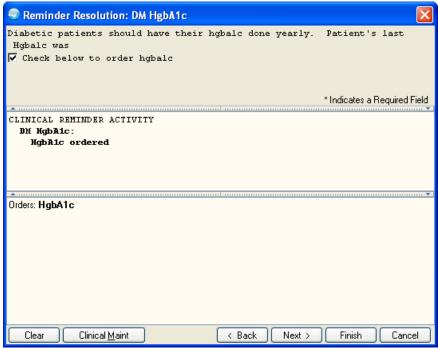


Figure 6-13: Sample Reminder Resolution for DM HgbA1c

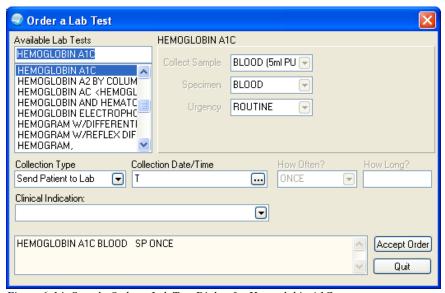


Figure 6-14: Sample Order a Lab Test Dialog for Hemoglobin A1C

6.10 Colon Cancer

This is an information-only dialog informs the user how to resolve this reminder.

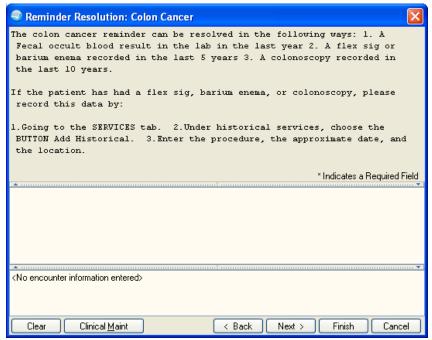


Figure 6-15: Sample Reminder Resolution for Colon Cancer

6.11 Mammogram

The mammogram dialog does contain a quick order to order the mammogram. If the site does not order mammograms in the computer, this element should be deleted or removed (shown below).

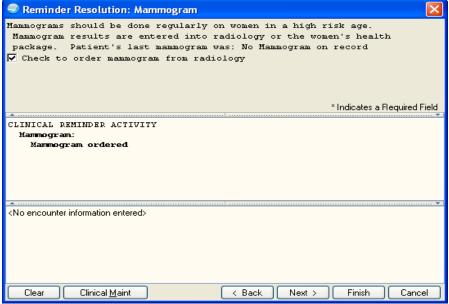


Figure 6-16: Sample Reminder Resolution for Mammogram

6.12 Pap Smear

The pap smear dialog is information only telling the user how to resolve the reminder.

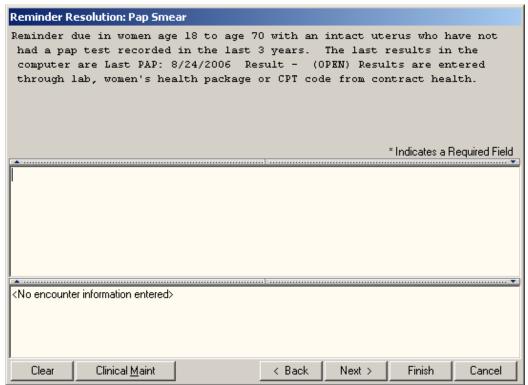


Figure 6-17: Sample Reminder Resolution for Pap Smear

6.13 PPD

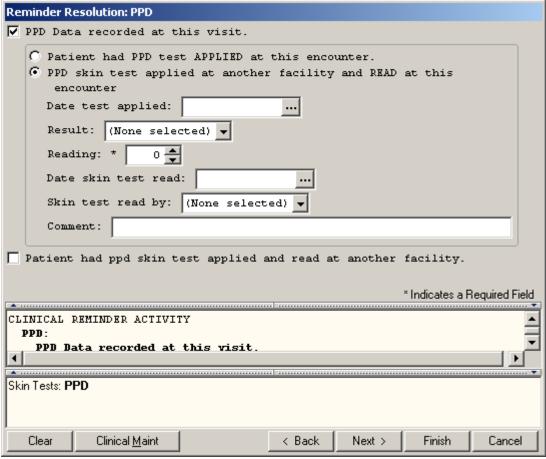


Figure 6-18: Sample Reminder Resolution for PPD

6.14 Tobacco Screen

The tobacco screen contains data about the patient, the environment, and education that was done about smoking cessation (shown below).



Figure 6-19: Sample Reminder Resolution Screen for Tobacco Screening

7.0 EHR Reminder Configuration

On the main menu, choose PAR – Reminder Parameters

```
Reminder Configuration
      Reminder Computed Finding Management ...
DEF
      Reminder Definition Management ...
      Reminder Dialog Management ...
DLG
      Reminder Exchange
EXC
      Reminder Information Only Menu ...
INF
      Reminder Parameters ...
PAR
      Reminder Reports ...
      Reminder Sponsor Management ...
TAX
      Reminder Taxonomy Management ...
TRM
      Reminder Term Management ...
TST
      Reminder Test
```

The Reminder Parameters options display.

```
Reminder Parameters
ACT
       Reminder GUI Resolution Active
CAT
      Add/Edit Reminder Categories
      Allow EHR Configuration in GUI
       EHR Cover Sheet Reminder List
_{
m LKP}
      EHR Lookup Categories
LOC
       Default Outside Location
NEW
      New Reminder Parameters
PNH
       Progress Note Headers
       Position Reminder Text at Cursor
```

7.1 Activate Reminders (ACT)

Use the **ACT** option (Reminder GUI Resolution Active). This can be set by the user, so set this parameter for the CAC to YES (shown below).

```
Reminders Active may be set for the following:
        User
                      USR
                              [choose from NEW PERSON]
     2
        Service
                      SRV
                              [choose from SERVICE/SECTION]
     3
        Division
                      DIV
                              [DEMO HOSPITAL]
        System
                      SYS
                              [DEMO.CIAINFORMATICS.COM]
Enter selection: 1 User NEW PERSON
Select NEW PERSON NAME: HAGER, MARY G
                                           MGH
                                                        CLINICAL COORDINATOR
```

7.2 Setup Who can Configure Reminders in the GUI

Under the Reminder Parameters menu is CFG (Allow EHR Configuration in GUI). This parameter determines who has access to the GUI setup.

7.3 Cover Sheet Reminders

Use the CVR option (EHR Cover Sheet Reminder List) to start up the reminders just made. Again, set them up for just the CAC or selected providers. Always make the IMMUNIZATION FORECASTER the first entry.

```
Select the Reminder Parameters Option: CVR EHR Cover Sheet Reminder List
                         EHR Cover Sheet Reminder List
Clinical Reminders for Search may be set for the following:
        User
                      USR
                             [choose from NEW PERSON]
       User
Location
                     LOC
                             [choose from HOSPITAL LOCATION]
                     SRV
       Service
Division
       Service
                             [choose from SERVICE/SECTION]
                     DIV
                             [DEMO HOSPITAL]
                     SYS
       System
                             [DEMO.CIAINFORMATICS.COM]
     6 Package
                     PKG [ORDER ENTRY/RESULTS REPORTING]
Enter selection: 1 User NEW PERSON
Select NEW PERSON NAME: HAGER, MARY
----- Setting Clinical Reminders for Search for User: HAGER, MARY G -----
Select Display Sequence: 1
Are you adding 1 as a new Display Sequence? Yes//
                                                   YES
Display Sequence: 1//
Clinical Reminder: IHS-IMMUNIZATION FORECAST
                                               <- Always first
Select Display Sequence: 2
Are you adding 2 as a new Display Sequence? Yes//
                                                  YES
Display Sequence: 2//
Clinical Reminder: TEST LIPID MALE
                                      LOCAL
Select Display Sequence: 3
Are you adding 3 as a new Display Sequence? Yes// YES
Display Sequence: 3//
Clinical Reminder: IHS-TOBACCO SCREEN
                                          LOCAL
```

NOTE: After testing, you can activate the reminders for the system level.

Below is a sample setup:

Display Sequence	Value
1	IHS-IMMUNIZATION FORECAST <- THIS MUST BE NUMBER 1
8	IHS-PED DTAP IMMUN
9	IHS-PED HEPA IMMUN
10	IHS-PED HEPB IMMUN
11	IHS-PED HIBTITER IMMUN
12	IHS-PED MMR IMMUN
13	IHS-PED PNEUMOVAX IMMUNIZATION
14	IHS-PED POLIO IMMUN
15	IHS-PED TD IMMUNIZATION
16	IHS-PED VARICELLA IMMUN
17	IHS-INFLUENZA IMMUNIZATION
18	IHS-PNEUMOVAX IMMUNIZATION
19	IHS-TD IMMUNIZATION
30	IHS-HEP A ADULT
31	IHS-HEP B ADULT

The alternate way is to use the GUI setup which you can do after you have setup at least one reminder as written above. Find a patient who has this reminder due.

Then the X will disappear from the reminders icon and you can click on the icon.

The Action menu at the top brings up a menu.

One choice is to edit the cover sheet reminders.

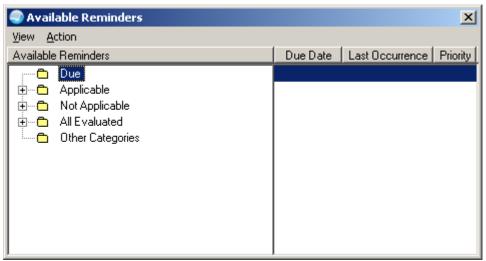


Figure 7-1: Sample Available Reminders Dialog

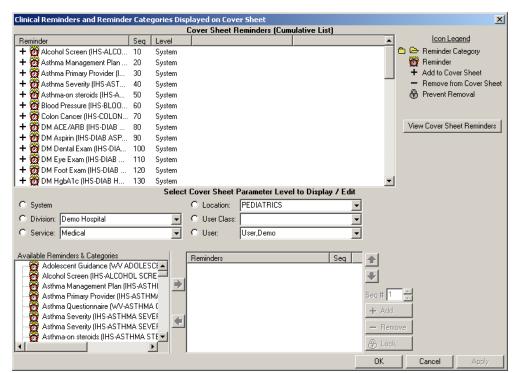


Figure 7-2: Sample Clinical Reminders and Reminder Categories Displayed on Cover Sheet Dialog

The bottom left group box (Available Reminders & Categories) is a list of available reminders.

Bottom right group box is what has been selected for the chosen selection. The chosen selection is in the radio buttons in the middle of the dialog. The upper section (Cover Sheet Reminders (Cumulative List) is which reminders would appear for the user logged in.

Reminders are added by using the arrows at the bottom. This parameter is cumulative and the user will see all reminders for the system+division+location+user, etc.

8.0 Reminder Test

A site can test the reminder by entering a patient and a reminder and looking at the output. Choose Reminder Test (TST).

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

Select the patient. Then select the Reminder to test.

The data stream that returns is not pretty but the data is valuable.

```
The elements of the FIEV array are:
FIEV(1)=1
FIEV(1, "DATE")=3050308.141159
FIEV(1, "FINDING")=19;AUTTHF(
FIEV(1,"LEVEL")=
FIEV(1, "SOURCE")=1101; AUPNVHF(
FIEV(1, "TERM") = ALCOHOL SCREEN
FIEV(1, "VALUE")=
FIEV(1, "VIEN")=1970963
FIEV("AGE",1)=1
FIEV("DFN")=102519
FIEV("PATIENT AGE")=25
The elements of the ^TMP(PXRMID,$J) array are:
^TMP(PXRMID,$J,68,"AGE11A")=1
^TMP(PXRMID,$J,68,"FINDING 1_FOUNDB")=Alcohol screen found in the computer within the
^TMP(PXRMID,$J,68,"HEALTH FACTOR CAGE 0/4")=03/08/2005 Health Factor: CAGE 0/4
^TMP(PXRMID,$J,68,"PATIENT COHORT LOGIC")=1^(SEX)&(AGE)^(1)&(1)
^TMP(PXRMID,$J,68,"REMINDER NAME")=Alcohol Screen
^TMP(PXRMID,$J,68,"RESOLUTION LOGIC")=1^(0)!FI(1)^(0)!1
^TMP(PXRMID,$J,68,"zFREQARNG")=Due every 1 year for ages 13Y to 110Y
The elements of the 'TMP("PXRHM", $J) array are:
^TMP("PXRHM",$J,68,"Alcohol Screen")=RESOLVED^3060308.141159^3050308.141159
^TMP("PXRHM",$J,68,"Alcohol Screen","TXT",1)=
^TMP("PXRHM",$J,68,"Alcohol Screen","TXT",2)=Applicable: Due every 1 year for ag
es 13Y to 110Y within cohort.
^TMP("PXRHM",$J,68,"Alcohol Screen","TXT",3)=
^TMP("PXRHM",$J,68,"Alcohol Screen","TXT",4)=Resolution: Last done 03/08/2005
^TMP("PXRHM",$J,68,"Alcohol Screen","TXT",5)=Reminder Term: ALCOHOL SCREEN
^TMP("PXRHM",$J,68,"Alcohol Screen","TXT",6)=03/08/2005 Health Factor: CAGE 0/4
^TMP("PXRHM",$J,68,"Alcohol Screen","TXT",7)=Alcohol screen found in the computer
within the past year
```

• The **bolded lines** are the most important. The number one (1) says that this patient is a candidate for this reminder.

• The second bolded line has a 1 if the reminder is not due and a 0 if it is due.

Another example is below. The patient has diabetes and therefore should have a lipid done yearly.

```
The elements of the ^TMP(PXRMID,$J) array are:
^TMP(PXRMID,$J,2,"FINDING 2_FOUNDB")=Patient is diabetic and should have lipid profile
done yearly
^TMP(PXRMID,$J,2,"ICD9VPOV 250.00","CODE")=250.00
^TMP(PXRMID,$J,2,"ICD9VPOV 250.00","DATE")=3050308.141159
^TMP(PXRMID,$J,2,"ICD9VPOV 250.00","DIAG")=DM UNCOMPL/T-II/NIDDM,NS UNCON
^TMP(PXRMID,$J,2,"ICD9VPOV 250.00","PN")=Diabetes Mellitus Type II or unspecified
^TMP(PXRMID,$J,2,"LAB LIP.PAN")=08/01/2003 Laboratory test: LIP.PAN; value - SEE
SEPARATEREPORT.
^TMP(PXRMID, $J, 2, "PATIENT COHORT LOGIC")=1^(SEX)&(AGE)!FI(2)^(1)&(1)!1
^TMP(PXRMID,$J,2,"REMINDER NAME")=P-Lipid Profile Female
^TMP(PXRMID,$J,2,"RESOLUTION LOGIC")=1^(0)!FI(1)^(0)!1
^TMP(PXRMID,$J,2,"zFREQARNG")=Due every 1 year for all ages
The elements of the 'TMP("PXRHM", $J) array are:
^TMP("PXRHM",$J,2,"P-Lipid Profile Female")=DUE NOW^3040801.09241^3030801.09241
^TMP("PXRHM",$J,2,"P-Lipid Profile Female","TXT",1)=
^TMP("PXRHM",$J,2,"P-Lipid Profile Female","TXT",2)=Applicable: Due every 1 year
for all ages within cohort.
^TMP("PXRHM",$J,2,"P-Lipid Profile Female","TXT",3)=03/08/2005 Encounter Diagnosis:
250.00 DM UNCOMPL/T-II/NIDDM, NS UNCON
^TMP("PXRHM",$J,2,"P-Lipid Profile Female","TXT",4)= Prov. Narr. - Diabetes Mellitus
Type II or unspecified
^TMP("PXRHM",$J,2,"P-Lipid Profile Female","TXT",5)=Patient is diabetic and should
have lipid profile done yearly
^TMP("PXRHM",$J,2,"P-Lipid Profile Female","TXT",6)=
^TMP("PXRHM",$J,2,"P-Lipid Profile Female","TXT",7)=Resolution: Last done 08/01/2003
^TMP("PXRHM",$J,2,"P-Lipid Profile Female","TXT",8)=Reminder Term: IHS-LIPID LAB TESTS
^TMP("PXRHM",$J,2,"P-Lipid Profile Female","TXT",9)=08/01/2003 Laboratory test:
LIP.PAN; value - SEESEPARATEREPORT.
```

9.0 Reminders Due

- 1. Log into the EHR. If you were already logged on, you will need to log off and then log back on again.
- 2. Pick a patient who would have one of the reminders due.

The reminder alarm clock should be RED in someone with a reminder due.

If you click on the alarm clock, you should see a list of reminders due.

Right-click on the reminder due and review any of the options in the drop-down menu

3. Be sure to check all the reminders before adding them to the system level.

9.1 Reminders on Cover Sheet

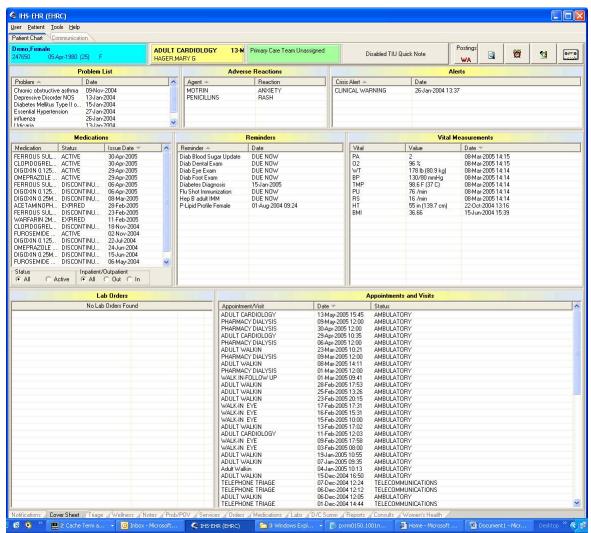
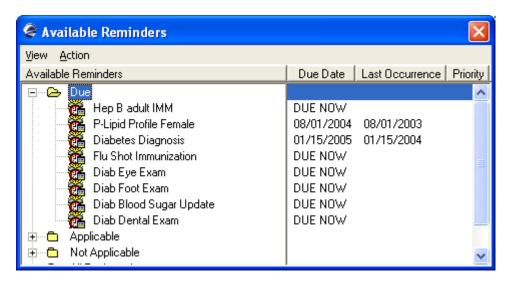


Figure 9-1: Sample Cover Sheet in GUI

9.2 Reminder Icon

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

Click on the reminder icon 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. This list is explained below.

9.2.1 Clinical Maintenance

The Clinical Maintenance dialog shows why the reminder is due.

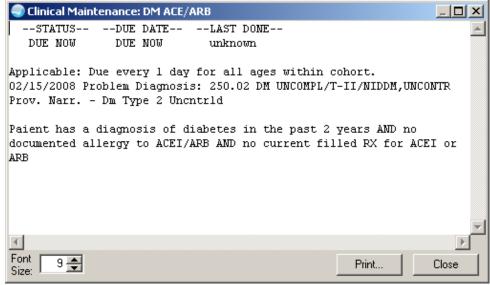


Figure 9-2: Sample Clinical Maintenance Dialog

9.2.2 Evaluate the Reminder Again

This is generally only done after something has been added to PCC and the user wishes to see if it resolved the reminder

9.2.3 Bring up Reference Material

A Website can be added to a reminder. Clicking on the reference material will link to the associated website

9.2.4 Do a Reminder Inquiry

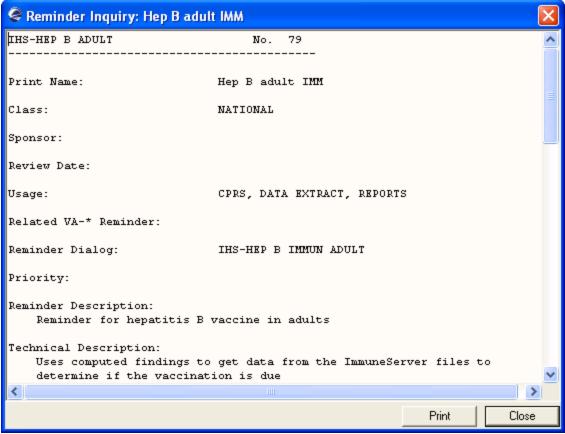


Figure 9-3: Sample Reminder Inquiry for Hep B adult IMM

9.2.5 Look at the Reminder Icons

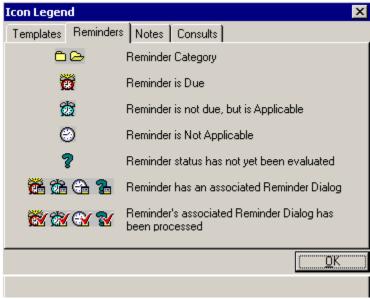


Figure 9-4: Reminders Tab on Icon Legend Dialog

9.3 Reminders in Health Summary

You can also view the Reminders in Health summary on the Reports tab.

Users can either create a VA Health Summary type for reminders as below, or the VA Health Summary components that already exist can be added to the Ad Hoc report.

Sites will need to have installed the HEALTH SUMMARY COMPONENTS (BHS) package before they can use VA Health Summary. Once created the summary type is added using the parameter ORWRP HEALTH SUMMARY LIST.

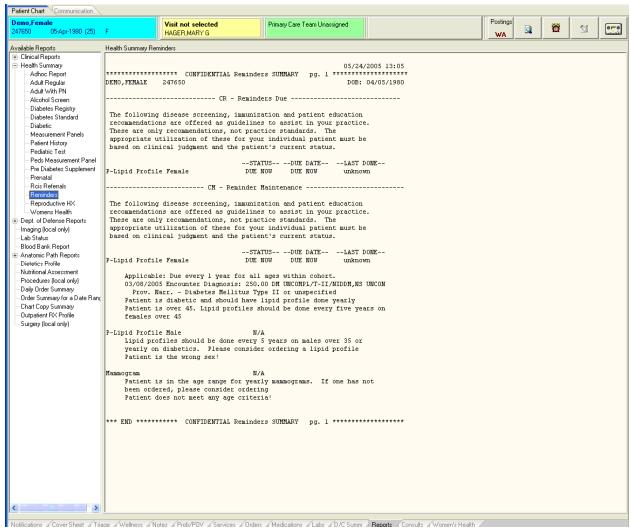


Figure 9-5: Sample Health Summary Reminders on Reports Tab

10.0 Reminder Resolution

Reminders can be resolved using a progress note.

The author starts the note in the usual way but if reminders are due there is a reminder drawer that can be opened. Reminders with dialogs have a little note icon next to the alarm clock.

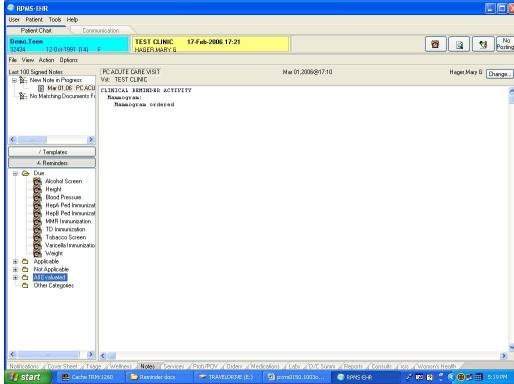
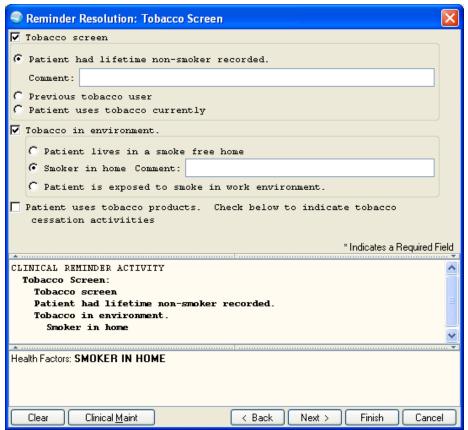


Figure 10-1: Sample Reminders Drawer on Notes Window

Click on the reminder to be resolved.

Notice that below the reminder dialog is a record of what is being entered into the progress note and what is going to PCC.



: Sample Reminder Resolution Dialog for Tobacco Screening

The Clinical Reminder Activity field shows the data going to progress note.

The Health Factors field is the data going to the PCC

Click finish to put data into the progress note and sign as usual. Most reminders resolve immediately but medications and POVs are cached and will not resolve for 24hrs. Allergies must be verified first.

11.0 Taxonomy Error Example

This section describes an error on install and how to fix the error.

11.1 Fixing the Error

This section describes how to create the taxonomy manually and how to install the reminder manually.

11.1.1 Create the Taxonomy Manually

1. Find the name of the taxonomy:

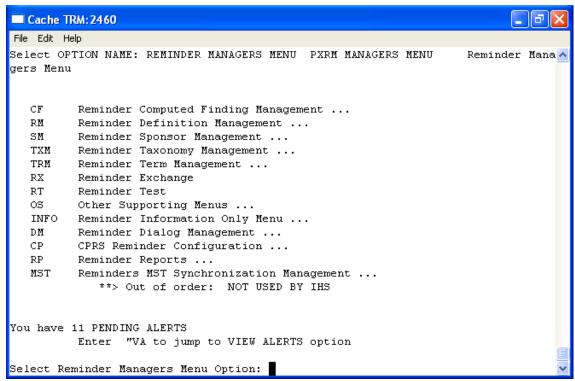


Figure 11-1: Options on the Reminder Manager Menu

Use the main Reminder Menu, and choose RX Reminder Exchange.

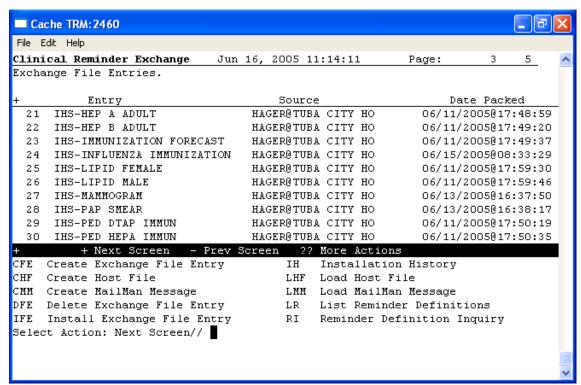


Figure 11-2: Sample Clinical Reminder Exchange Window

Search the list until you find the reminder that had the error. Then, choose IFE (Install Exchange File Entry). In the above error, it was the IHS influenza immunization.

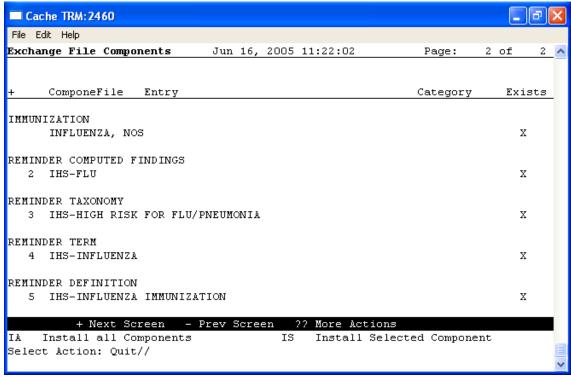


Figure 11-3: Sample Exchange File Components Screen in RPMS

You will see the name of the taxonomy. If it was not installed there will NOT be an X in the Exists column. The example above does have the taxonomy, but if it did not, use the taxonomy option to create the taxonomy.

- 2. Use the taxonomy option to create the taxonomy.
 - A. Return to the main menu and use TXM (Reminder Taxonomy Management). Choose TE (Edit Taxonomy Item).

```
TL List Taxonomy Definitions
TI Inquire about Taxonomy Item
TE Edit Taxonomy Item
TC Copy Taxonomy Item
```

B. Enter the name of the taxonomy you found from reminder exchange.

NOTE: Make sure the name is identical to the one in reminder exchange.

```
NAME: IHS-HIGH RISK FOR FLU/PNEUMONIA Replace
BRIEF DESCRIPTION: Flu/pneumonia risk codes Replace
CLASS: LOCAL//
SPONSOR:
REVIEW DATE:
PATIENT DATA SOURCE: EN,PL//
USE INACTIVE PROBLEMS:
INACTIVE FLAG:
ICDO Range of Coded Values
Select ICDO LOW CODED VALUE:
ICD9 Range of Coded Values
Select ICD9 LOW CODED VALUE: V08.//
 ICD9 LOW CODED VALUE: V08.//
  ICD9 HIGH CODED VALUE: V08.//
Select ICD9 LOW CODED VALUE:
CPT Range of Coded Values
Select CPT LOW CODED VALUE:
```

- C. Use the descriptions of the taxonomies found in the document entitled "Taxonomies" to enter all the grouping of ICD0, ICD9, and/or CPT codes that apply to this taxonomy.
- D. For a single entry, the low value and the high value are the same entry.
- D. For ranges, enter the lowest entry in the range and then the highest. The computer will all codes in that range.

11.1.2 Install the Reminder a Second Time

1. Return to Reminder Exchange.

Go back into reminder exchange and again find the reminder.

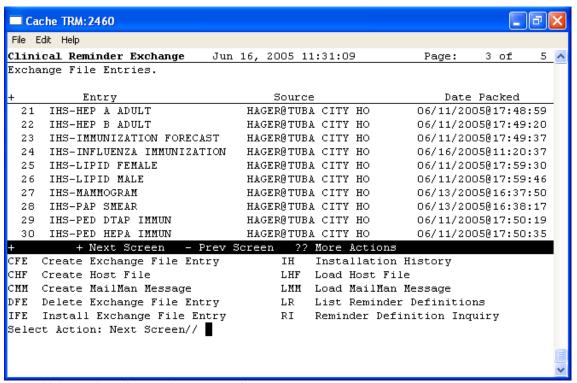


Figure 11-4: Sample Exchange File Entries Window in RPMS

2. Choose IFE to install the reminder.

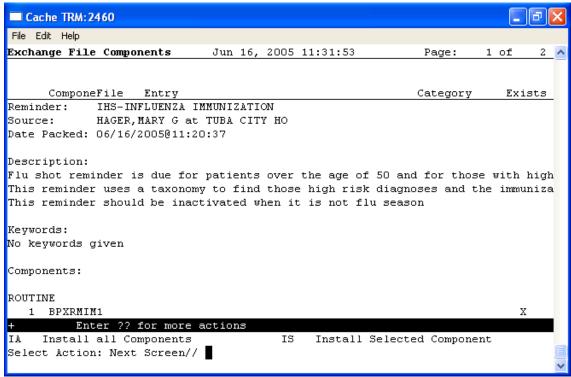


Figure 11-5: Sample Exchange File Components Window after Choosing IFE (Install the Reminder)

Choose IA (Install all Components).

- If the component already exists, the default will be to skip. If you created the taxonomy correctly and it has the same name as the one in the install file, it should now be set to SKIP
- If the component does not exist, the default will be to install.

TAKE ALL THE DEFAULTS.

```
Routine BPXRMIM1 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//
```

When finished, all of the items should have an X in the Exists column, including the reminder definition itself.

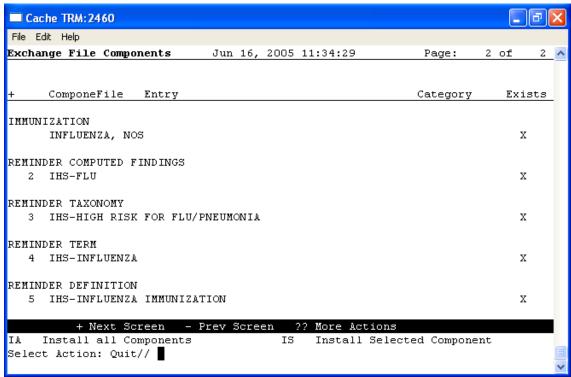


Figure 11-6: Sample Exchange File Components Window Showing X in Exists Column

12.0 Adding a Refusal or other Findings

Refusals can now be used to turn off a reminder for a period of time.

Refusals were added to the following reminders:

- Pap Smear
- Mammogram
- Depression Screening
- Intimate Partner Violence Screening

Refusals can be added to other reminders. This was not done nationally because sites might be using different immunizations, lab tests, or education topics defined in the reminder terms and it would be unknown at a national level which one to use for the refusal.

12.1 Copy the reminder to Keep Changes from Being Overwritten

Choose the DEF – Reminder Definition Menu on the Reminder Configuration menu.

```
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 ...
      Reminder Reports ...
SPO
      Reminder Sponsor Management ...
TAX
      Reminder Taxonomy Management ...
TRM
      Reminder Term Management ...
      Reminder Test
```

The Reminder Definition Management options display.

```
Reminder Definition Management

CPY Copy Reminder Definition

EDT Add/Edit Reminder Definition

INQ Inquire about Reminder Definition

LST List Reminder Definitions
```

Choose CPY (Copy Reminder Definition)

Select the reminder item to copy: IHS-INFLUENZA IMMUNIZATION NATIONAL

PLEASE ENTER A UNIQUE NAME: LOCAL INFLUENZA IMMUNIZATION

The original reminder IHS-INFLUENZA IMMUNIZATION has been copied into LOCAL INFLUENZA IMMUNIZATION.

Do you want to edit it now? Y

12.2 Edit the Reminder

```
Select one of the following:

A All reminder details
G General
B Baseline Frequency
F Findings
L Logic
D Reminder Dialog
W Web Addresses

Select section to edit: F (Finding)
```

- You can change the age ranges by editing the B (Baseline Frequency)
- You can edit the name by editing the G (General) findings
- Add finding by using F (Finding)
- Change the reminder dialog it points to by using D (Reminder Dialog)

12.3 Add a Finding (Refusal)

Enter a finding item in the format: Prefix.Name

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
RT.EntryName to select a REMINDER TERM
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
REF.EntryName to select a REFUSAL TYPE
```

To add a Refusal finding, in this case an immunization, enter the following:

REF.IMMUNIZATION

The types of refusal are:

```
EDUCATION TOPICS
EKG
EXAM
IMMUNIZATION
LAB
```

```
MAMMOGRAM
MEASUREMENTS
MEDICATION/DRUG
PAP SMEAR
RADIOLOGY EXAM
SKIN TEST
```

Select FINDING: REF.IMMUNIZATION

Searching for a REFUSAL TYPE, (pointed-to by FINDING ITEM)

Searching for a REFUSAL TYPE

IMMUNIZATION OK? Yes//

Are you adding 'IMMUNIZATION' as a new FINDINGS (the 3RD for this REMINDER DEFINITION)? No// Yes

```
FINDING ITEM: IMMUNIZATION//
MINIMUM AGE:
MAXIMUM AGE:
REMINDER FREQUENCY:
RANK FREQUENCY:
USE IN RESOLUTION LOGIC: OR <- Important
    1
        OR
    2 OR NOT
Choose 1-2: 1 OR
USE IN PATIENT COHORT LOGIC:
EFFECTIVE PERIOD: 1Y
EFFECTIVE DATE:
CONDITION: I V="INFLUENZA, NOS" <- Very Important
FOUND TEXT:
 No existing text
 Edit? NO//
NOT FOUND TEXT:
 No existing text
 Edit? NO//
```

Notice that this refusal is good for 1 year and that under the condition, you need to specify which immunization is being refused. If your site uses more than one type of flu immunization, you might need to enter more than one refusal or be sure that the staff all uses the same one when they document a refusal.

12.4 Dialog Link

When the reminder was copied, it will still link to the same dialog as the old reminder.

If you change or make a new dialog, use D to link to a different dialog.

```
Select one of the following:

A All reminder details
G General
B Baseline Frequency
F Findings
```

```
L Logic
D Reminder Dialog
W Web Addresses
Select section to edit: D Reminder Dialog
```

Note: Must be added here and in the dialog management, links go both ways.

13.0 Appendix A: Rules of Behavior

The information in this required section was written by the IHS. It does not contain any information about the functionality of the software.

13.1 All RPMS User

In addition to these rules, each application may include additional RoBs, which may be defined within the individual application's documentation (e.g., PCC, Dental, Pharmacy).

13.1.1 Access

RPMS Users shall:

- Only use data for which you have been granted authorization.
- Only give information to personnel who have access authority and have a need to know.
- Always verify a caller's identification and job purpose with your supervisor or the entity provided as employer *before* providing any type of information system access, sensitive information, or non-public agency information.
- Be aware that personal use of information resources is authorized on a limited basis within the provisions Indian Health Manual Chapter 6 OMS Limited Personal Use of Information Technology Resources TN 03-05," August 6, 2003.

Users Shall Not:

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

13.1.2 Logging On To The System

RPMS Users shall:

- Have a unique User Identification/Account name and password.
- Be granted access based on authenticating the account name and password entered.

• Be locked out of an account after 5 successive failed login attempts within a specified time period (e.g., one hour).

13.1.3 Information Accessibility

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

Users Shall

- Access only those documents they created and those other documents to which
 they have a valid need-to-know and to which they have specifically granted
 access through an RPMS application based on their menus (job roles), keys, and
 FileMan access codes. Some users may be afforded additional privileges based on
 the function they perform such as system administrator or application
 administrator.
- Acquire a written preauthorization in accordance with IHS polices and procedures prior to interconnection to or transferring data from RPMS.
- Behave in an ethical, technically proficient, informed, and trustworthy manner.
- Logout of the system whenever they leave the vicinity of their PC.
- Be alert to threats and vulnerabilities in the security of the system.
- Report all security incidents to their local Information System Security Officer (ISSO)
- Differentiate tasks and functions to ensure that no one person has sole access to or control over important resources.
- Protect all sensitive data entrusted to them as part of their government employment.
- Shall abide by all Department and Agency policies and procedures and guidelines related to ethics, conduct, behavior and IT information processes

13.1.4 Accountability

Users Shall:

- Behave in an ethical, technically proficient, informed, and trustworthy manner.
- Logout of the system whenever they leave the vicinity of their PC.
- Be alert to threats and vulnerabilities in the security of the system.
- Report all security incidents to their local Information System Security Officer (ISSO)

- Differentiate tasks and functions to ensure that no one person has sole access to or control over important resources.
- Protect all sensitive data entrusted to them as part of their government employment.
- Shall abide by all Department and Agency policies and procedures and guidelines related to ethics, conduct, behavior and IT information processes.

13.1.5 Confidentiality

Users Shall:

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

Users Shall Not:

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

13.1.6 Integrity

Users Shall:

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

Users Shall Not:

- Violate Federal copyright laws.
- Install or use unauthorized software within the system libraries or folders.

• Use freeware, shareware or public domain software on/with the system without your manager's written permission and without scanning it for viruses first

13.1.7 Passwords

Users Shall:

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

Users Shall Not:

- Use common words found in any dictionary as a password.
- Use obvious readable passwords or passwords that incorporate personal data elements (e.g., user's name, date of birth, address, telephone number, or social security number; names of children or spouses; favorite band, sports team, or automobile; or other personal attributes).
- Share passwords/IDs with anyone or accept the use of another's password/ID, even if offered.
- Reuse passwords. A new password must contain no more than five characters per 8 characters from the previous password.
- Post passwords.
- Keep a password list in an obvious place, such as under keyboards, in desk drawers, or in any other location where it might be disclosed.
- Give a password out over the phone.

13.1.8 Backups

Users Shall:

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

Users Shall Not:

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

13.1.9 Reporting

Users Shall:

- Contact and inform your ISSO that you have identified an IT security incident and you will begin the reporting process by providing an IT Incident Reporting Form regarding this incident.
- Report security incidents as detailed in IHS SOP 05-03, Incident Handling Guide Users Shall Not:
- Assume that someone else has already reported an incident. The risk of an
 incident going unreported far outweighs the possibility that an incident gets
 reported more than once.

13.1.10 Session Time Outs

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

Users Shall:

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

Users Shall Not:

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

13.1.11 Hardware

Users Shall:

- Avoid placing system equipment near obvious environmental hazards (e.g., water pipes).
- Keep an inventory of all system equipment.
- Keep records of maintenance/repairs performed on system equipment

Users Shall Not:

• Do not eat or drink near system equipment

13.1.12 Awareness

Users Shall:

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

13.1.13 Remote Access

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

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

Remote Users Shall:

• Remotely access RPMS through a virtual private network (VPN) when ever possible. Use of direct dial in access must be justified and approved in writing

and its use secured in accordance with industry best practices or government procedures

Remote Users Shall Not:

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

13.2 RPMS Developers

Developers Shall:

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

Developers Shall Not:

- Write any code that adversely impacts RPMS, such as backdoor access, "Easter eggs," time bombs, or any other malicious code or make inappropriate comments within the code, manuals, or help frames.
- Grant any user or system administrator access to RPMS unless proper documentation is provided.
- Not release any sensitive agency or patient information.

13.3 Privileged Users

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

Privileged Users Shall:

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

- Terminate user accounts when a user transfers or has been terminated. If the user has authority to grant authorizations to others, review these other authorizations. Retrieve any devices used to gain access to the system or equipment. Cancel logon IDs and passwords, and delete or reassign related active and back up files.
- Use a suspend program to prevent an unauthorized user from logging on with the current user's ID if the system is left on and unattended.
- Verify the identity of the user when resetting passwords. This can be done either in person or having the user answer a question that can be compared to one in the administrator's database.
- Shall follow industry best standards for systems they are assigned to; abide by all Department and Agency policies and procedures

Privileged Users Shall Not:

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

14.0 Contact Information

If you have any questions or comments regarding this distribution, please contact the OIT Help Desk by:

Phone: (505) 248-4371 or

(888) 830-7280

Fax: (505) 248-4199

Web: http://www.ihs.gov/GeneralWeb/HealthCenter/Helpdesk/index.cfm

Email: support@ihs.gov