



RESOURCE AND PATIENT MANAGEMENT SYSTEM

iCare Population Management GUI

(BQI)

Panel Definition User Manual

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Preface

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

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

For more information about iCare basic functionality, iCare usage, or training for iCare, consult these resources:

- iCare–IHS OIT available at <https://www.ihs.gov/icare/>
- iCare Training available at <https://www.ihs.gov/icare/training/>
- Join the iCare listserv by sending an email to icare@listserv.ihs.gov

1.0 Introduction

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

The information included in this panel definition manual covers panel definition functionality in iCare up to v2.9 p6. For more information about iCare basic functionality, iCare usage, or training for iCare, consult the resources listed above in the preface.

1.1 Background

Along with the rest of the healthcare industry, IHS has already developed a set of chronic condition management (or register) applications, including for diabetes, asthma, and HIV. This application allows healthcare providers to manage a specific group (register) of patients for a single disease state. Register management applications assist healthcare providers in identifying high-risk patients, proactively tracking care reminders and the health status of individuals or populations, providing more standardized and appropriate care by embedding evidence-based guidelines, and reporting outcomes.

Many patients, however, have more than one diagnosed disease. For instance, at the current time within the IHS, a diabetic asthmatic woman could be a member of four RPMS registers (diabetes, asthma, women's health, and immunizations). This siloed approach to patient care could potentially result in fragmented care. It could increase the risk of inadequate patient care management due to misidentification of the actual level of risk.

1.2 iCare GUI

The iCare GUI allows providers to see a more complete view of patients with multiple conditions while maintaining the integrity of the user-defined, disease-specific registers.

iCare can help IHS providers by:

- Proactively identifying and managing different groups (populations) of patients who share user-defined characteristics.

- Providing an integrated view of a patient's conditions to minimize "stove piped" care management.
- Providing an intuitive and integrated interface to the diverse patient data elements of the RPMS database.
- Facilitating providers, a review of clinical quality of care measures for their patients to improve healthcare delivery quality.
- Enabling views of traditional healthcare information from community, population, and public health perspectives.
- Providing the default tag selection as Proposed and Accepted. Change the tag selection for any record by selecting or de-selecting any checkbox.
- Clicking the **use AND?** checkbox when there are multiple tags selected. This option searches for patients who have *all* the user-defined tags.

1.3 Who Should Use iCare?

Providers needing to identify a group of patients for long-term management or create a temporary list should consider using iCare. Do you fit any of the following scenarios?

- I am a nurse at a facility that assigns a primary care provider to each patient. I want to list scheduled patients for two doctors in my clinic daily.
- I want to identify which of my patients are considered obese so I can recommend nutrition counseling.
- Because providers at our clinic have performance goals related to annual GPRA clinical measures, I want to identify which of my patients are missing critical clinical data.
- Our women's health clinic wants to focus on two clinical performance improvement initiatives this year. We want to identify performance problems for female patients between 18 and 50.

I am one of two part-time case managers for a group of children, and I want to create a patient list that we can use.

2.0 Panel Definition

The **Panel Definition** window can be used to create or modify a panel of patients. A patient panel is a group of patients that needs to be managed collectively. Some users will have only one patient panel, while others will have many.

A panel can be created and used for a day, a month, or permanently. iCare provides many pre-defined search options to populate boards, or patients can be added individually.

The key categories of a pre-defined population search include:

- My Patient definition, with additional filters such as visit date range, sex, age, community, and diagnosis
- Surrogate provider—a different provider
- By scheduled appointments, defined by date range or clinics
- From inpatient visits
- From ER visits
- From an existing QMan search template
- From an RPMS register
- From an EHR personal list
- By any combination of patient data, including age, sex, visit date range, primary visit provider, community, pre-defined diagnosis, etc.

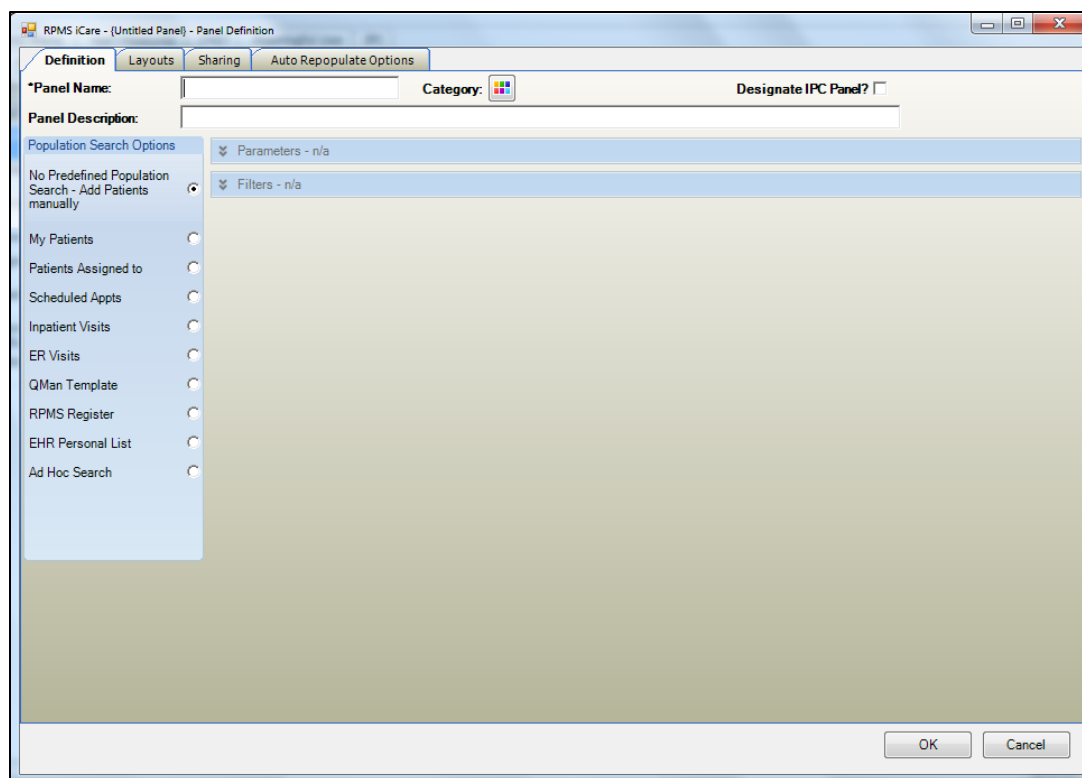


Figure 2-1: Initial Panel Definition window

Definition tab: Use to define or edit search criteria to populate the list of patient members for a patient panel.

Layouts tab: Customize user templates for defining the various layouts for the patient panel. In addition, the display can be reverted to the system's default layout.

Sharing tab: Use to share a panel with other RPMS users.

Auto Repopulate Options tab: Use to determine if the panel's contents should be dynamic, i.e., automatically refreshed.

3.0 Definition Tab

Use the **Panel Definition** window to create or modify a patient panel. A patient panel is a group of patients that needs to be managed collectively. Some users will have only one patient panel, while others will have many.

To create a new patient panel on the Panel List window, do any of the following:

- Click **New**.
- Select the **New** option on the context menu
- Select **File | Panel | New**

To modify a patient panel on the **Panel List** window, highlight the panel to be edited and then do any of the following:

- Click the **Modify** button
- Select the **Modify** option on the context menu
- Select **File | Panel | Modify**

In either case, the application displays the **Panel Definition** window focusing on the **Definition** tab.

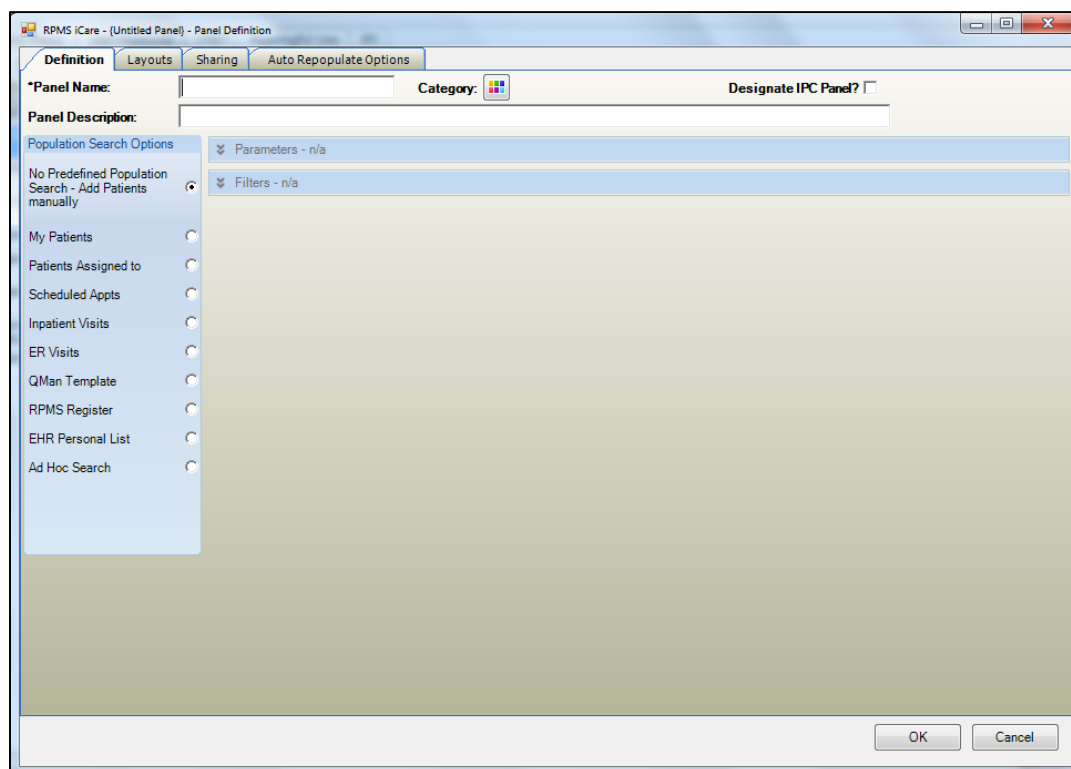


Figure 3-1: Definition tab

Follow these steps to complete the **Definition tab**:

1. Type the unique name of the panel in the required **Panel Name** field, which is limited to 120 characters.

If the user enters a duplicate panel name, iCare displays a warning: “It appears that you already have a panel by this name. Please change the panel name so that it is unique.” The name must be unique to save.

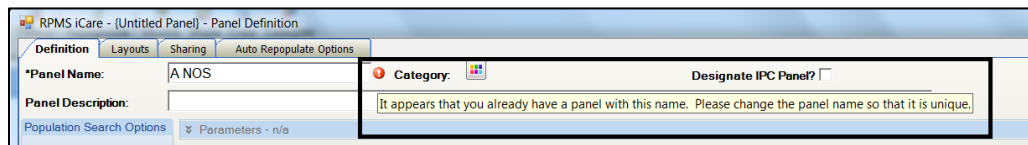


Figure 3-2: Sample Warning message

2. Use the **Category** option to group panels into a defined name and selectable color-coded category. After defining this option, the category name and selected color categories will be visible on the **Panel List** tab.
3. Click the **Category** button to display the **Category Picker** dialog (Figure 3-3).

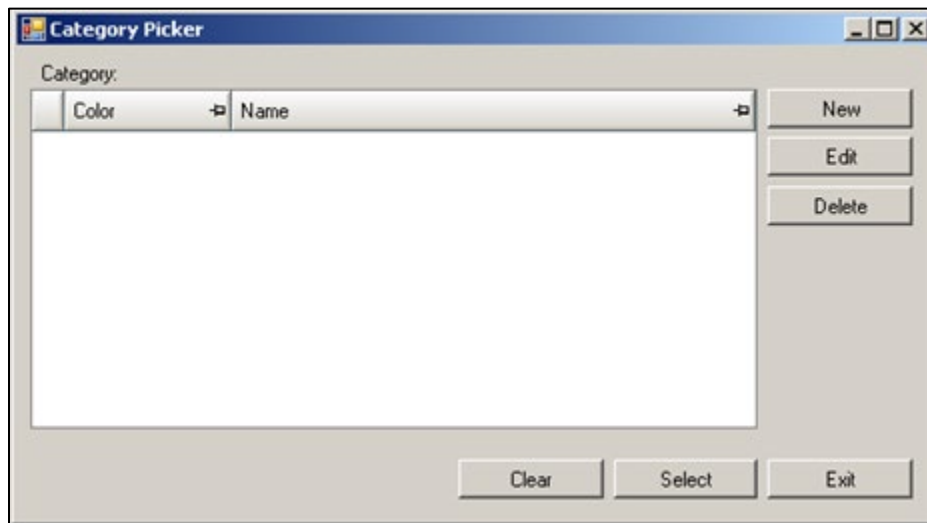


Figure 3-3: Category Picker dialog

Use the controls at the bottom as follows:

- Highlight a record in the grid and click **Clear** to remove that color from the **Category** field on the **Panel Definition** window.
- Highlight a record in the grid and click **Select** to display that color by the **Category** field on the **Panel Definition** window.
- Click **Exit** when the dialog is complete.

New

1. Click **New** to create a new category color and name. The application displays the **New Category** dialog.

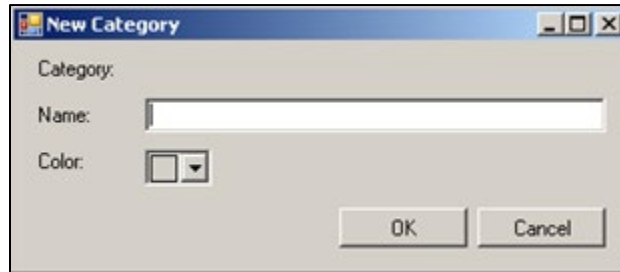


Figure 3-4: New Category dialog

2. Type the new category's name in the **Name** free text field.
3. Click the **Color** list and pick a color to represent the new category.
4. When the dialog is complete, click **OK**, and the new category will be displayed in the grid on the **Category Picker** dialog. (Otherwise, click **Cancel**.)

Edit

1. Select a record in the grid on the **Category Picker** dialog.
2. Click **Edit** to display the **Edit Category** dialog. See the **New** section above to edit either field.

Delete

1. Select a record in the grid on the **Category Picker** dialog.
2. Click **Delete** to remove the record from the **Category Picker** dialog (no confirmation).
3. Select the **Designated IPC Panel** checkbox to define a panel that will be displayed and can be selected on the IPC tab's main view.
4. Type a panel description (limited to 250 characters) in the **Panel Definition** free text field. This is not a required field but is strongly recommended. The Panel Description displays as a tooltip for the **Panel** group box on the **Cover Sheet** tab of the **Patient Record** window.
5. Select one of the **Population Search Options** option buttons.
 - No Predefined Population Search (Section 3.1): Create a blank panel and add patients individually. This panel will not have any associated search logic; therefore, all panel patient members must be added manually.

- My Patients (Section 3.2): The panel will be based on the “My Patients” definition set in User Preferences (Section 7.1).
 - Patients Assigned to (Section 3.3): The panel will be based on a definition for another provider or team of providers.
 - Scheduled Appointments (Section 3.4): The panel will be based on the RPMS Scheduling application. The available search criteria are an appointment date range and appointment locations.
 - Inpatient Visits (Section 3.5): Using several parameter types, the panel will be based on current or non-current inpatients.
 - ER Visits (Section 3.6): The panel will be based on parameters associated with ER visits.
 - QMan Template (Section 3.7): The panel will be based on any saved QMan template.
 - RPMS Register (Section 3.8): The panel will be based on any existing Register that was created with case management software, including the Diabetes Management System (BDM), the Case Management System (ACM), the Asthma Register System (BAT), the HIV Management System (BKM), the Immunization Package (BI) or Women’s Health (BW). This option searches for patients who are members of these various register applications on the RPMS server.
 - EHR Personal List (Section 3.9): The panel will be based on a selected personal list from the RPMS-EHR application.
 - Ad Hoc Search (Section 3.10): The panel will be based on one or more data items.
6. The panel is ready to save if the panel definition is complete. Skip to step 8 below. Otherwise, perform the following actions (steps 5 and 7) before the panel is saved.
 7. To change the screen layout of the panel, click the **Layouts** tab.
 8. To share the panel with others, click the **Sharing** tab.
 9. To have the panel repopulated automatically (add or delete patients based on your panel logic), click the **Auto Repopulate Options** tab.
 10. Click **OK** to save and close the panel or **Cancel** to discard the incomplete panel.

After completing all the tabs, click **OK** on the **Panel Definition** dialog. The new patient panel will be displayed in the **Panel List** window.

If you decide not to create a Patient Panel, click **Cancel** on the **Panel Definition** window. A warning message will display (Figure 3-5).

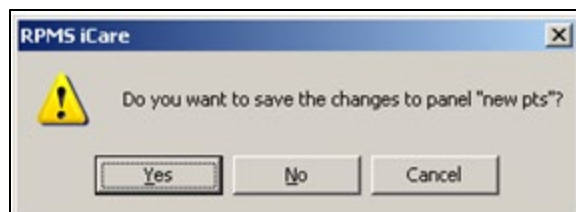


Figure 3-5: RPMS iCare warning message

- Click **Yes** to save the changes to the panel. Warnings will display about any missing information, if any.
- Click **No** to exit the **Panel Definition** window.
- Click **Cancel** to return to the current panel and make additional panel updates.

After saving the panel and modifying it, the top part of the Definition tab will display the **Properties** label (far right side).



Figure 3-6: Changing a patient panel with Properties on the Definition tab

Hover the mouse over the **Properties** label to display information about the search criteria, as shown in Figure 3-7.

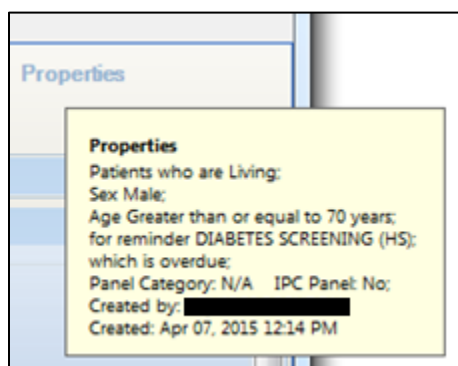


Figure 3-7: Sample Properties information

If any required information has been forgotten or incomplete, the following warning message will display: “Complete the required information in the highlighted field(s).”

Click **OK**, and the Background populates. Information messages will display. Click **OK** to populate the panel.

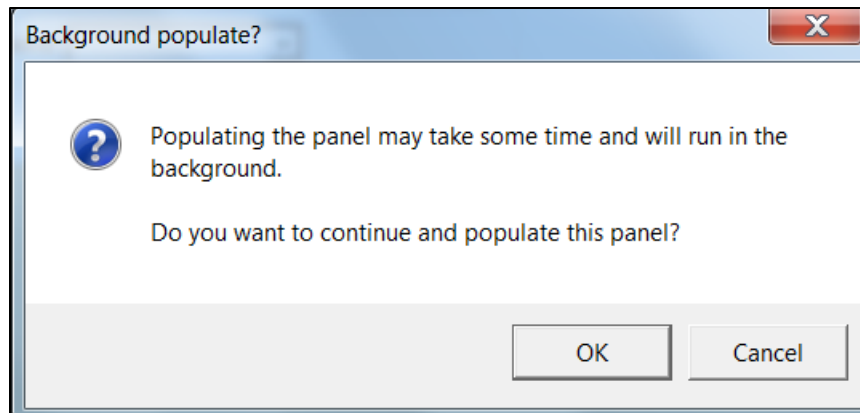


Figure 3-8: Background populate message

3.1 No Predefined Population Search

The default **No Predefined Population Search-Add Patients Manually** option creates an empty panel. Users can add patients to the panel using a search tool.

The application displays the **Select Patients** dialog:

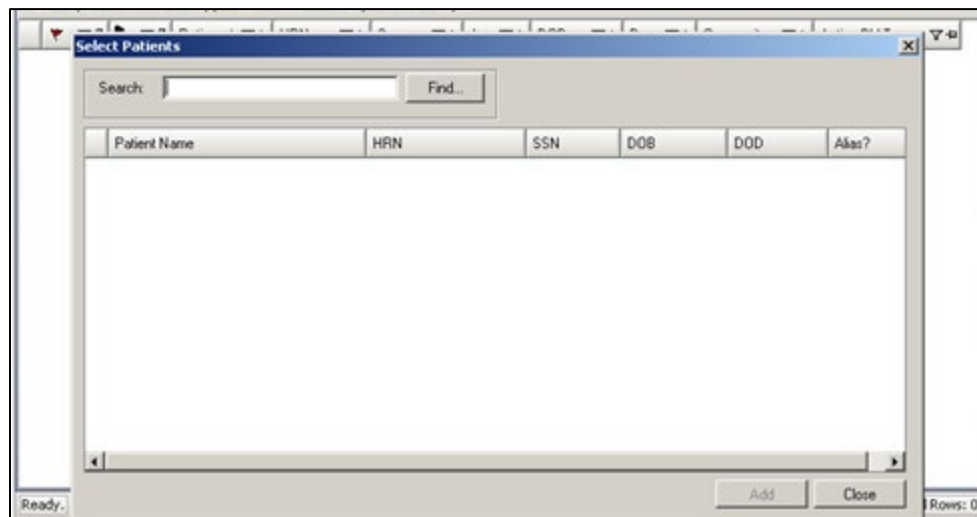


Figure 3-9: Empty New Panel with Select Patients dialog

Type the name, **Health Record Number (HRN)**, **Social Security number (SSN)**, or **date of birth (DOB)** of the individual patient to be added to the panel in the **Search** field. Then click **Find**. There are two possible conditions:

- One or more matches are found
- No matches are found

If one or more matches are found, they will display in the **Select Patients** dialog grid.

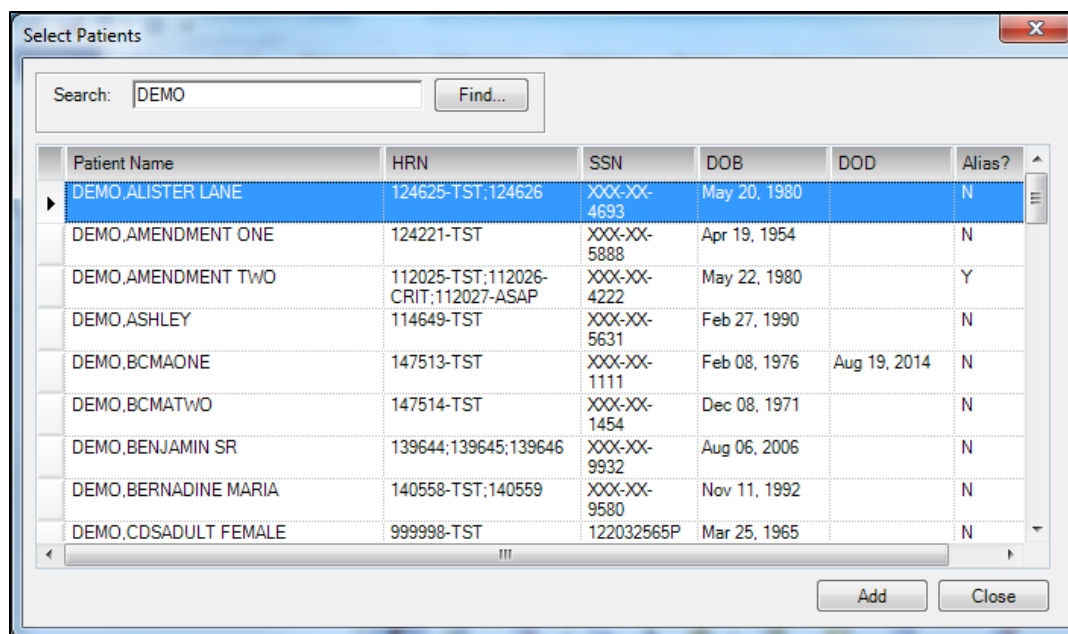


Figure 3-10: Sample populated **Select Patients** dialog

Highlight the patients and click **Add**. This adds the selected patients to the new panel. The **Search** field will be cleared of data.

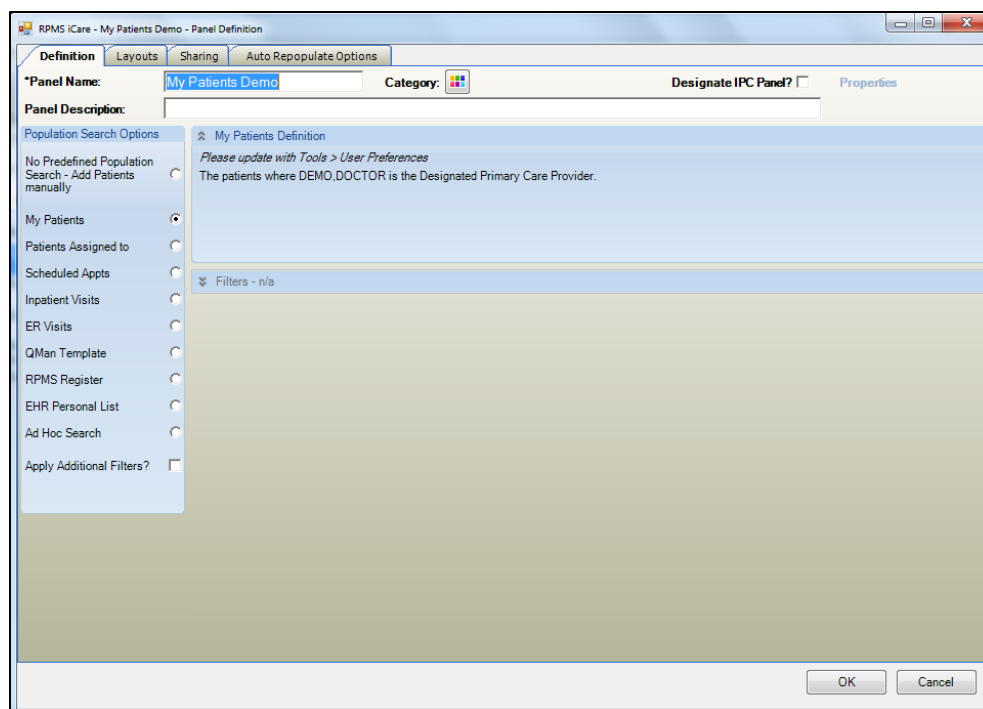
If no matches are found, the following warning message will display: “No matching patients were found.” Click **OK** to dismiss the notice. The program returns to the **Select Patients** dialog. Try other search criteria.

Search for additional patients by continuing to type the name, HRN, SSN, or DOB in the **Search** box. Continue to highlight and add patients.

Click **Add** when all patients have been selected and added. The **Select Patients** dialog will close, and the panel will display on the **Panel List** main window. (Otherwise, click **Close** to create a panel with no patients.)

3.2 My Patients

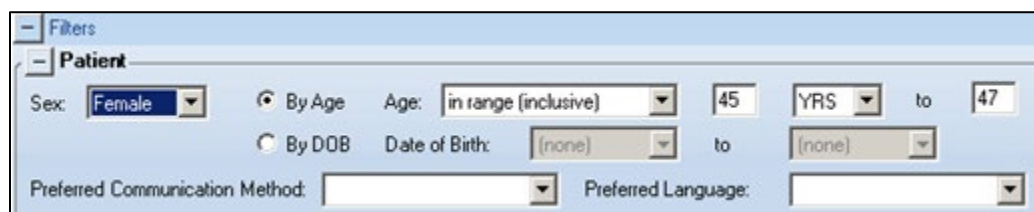
“My Patients” must be defined in the User Preferences tab (on the Define My Patients tab). This search logic applies to any panel created using the **My Patients** option.

Figure 3-11: **My Patients Demo - Panel Definition**

If “My Patients” is *not* defined, click **Cancel** to cancel the Panel Definition and go to **Tools | User Preferences** to set up a definition for “My Patients.” Select the **Additional Filters** checkbox to display additional data that can be used to refine the search. These are the same fields that display when the **Ad Hoc Search** option button is selected.

After the **Panel Definition** dialog is complete, click **OK** (otherwise, click **Cancel**). After clicking **OK**, the application displays the **Background populate** information message. Click **OK** to populate the panel.

Figure 3-12 shows an example of applying additional filters: The panel should contain female patients, ages 45–47 years, for whom a provider is either the Designated Primary Care Provider or the Primary Visit Provider for at least three years in the past two years.

Figure 3-12: Sample **Panel Definition** with Sex and Age Filters

In this example, here are the steps to follow:

1. Make sure the “My Patients” definition has the following selections: The DPCP type and Primary Visit Provider type with three visits in the past two years. This can be confirmed by holding the mouse over the **Current Definition**. If the “My Patient” definition needs to be modified, access it under **Tools | User Preferences**.
2. On the **Panel Definition** window, select **My Patients** and select the **Apply additional filters** checkbox.
3. For the **Sex** field, select **Female**.
4. Select the **Age** field's **in-range (inclusive)** option and enter the values **45** and **47**.

Note: This same search logic by using the **Patients Assigned To** search option and selecting the provider’s name and provider definition.

3.3 Patients Assigned To

The **Patients Assigned to** option is like the “My Patients” definition but does not become a permanent user preference. Select the provider’s name and one or more provider types that best define the provider. Refer to **the Define My Patients Tab** for a more detailed explanation of each provider name and timeframe option.

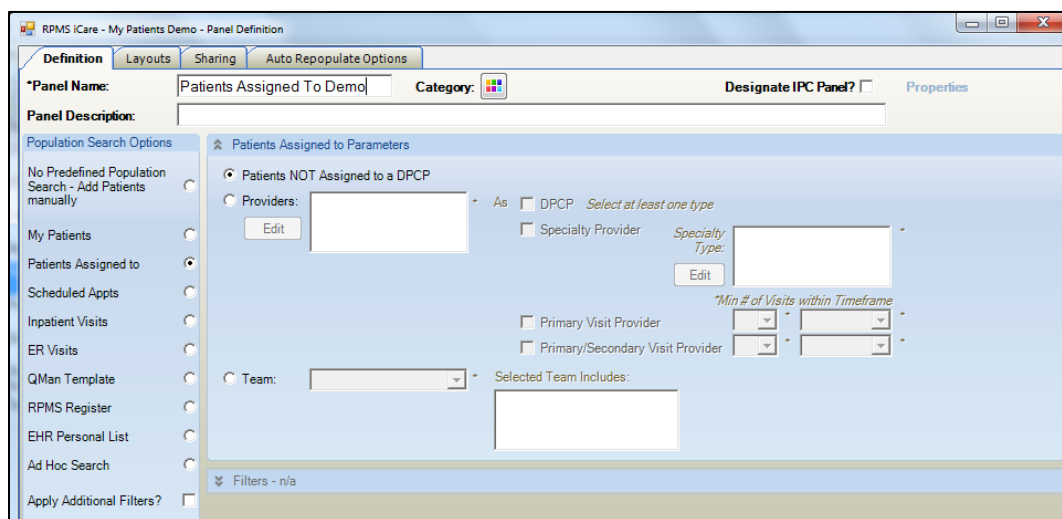


Figure 3-13: **Patients Assigned to Parameters** selected

This is an excellent option to use for multiple providers. For example, patients can be assigned a specific Designated Primary Care Provider (DPCP) only, or a DPCP and primary visit provider can be used.

This is also a good option for nurses or case managers who are responsible for working with two or three individual physicians. Individual panels for each physician based on the physician's specific role can be quickly created.

Patients NOT Assigned to a DPCP

Select the **Patient NOT Assigned to a DPCP** option button to help identify patients who have not yet been assigned a Primary Care Provider.

Note: Creating a panel based on this selection could yield many patients. It will include all patients unless additional filters are applied, such as only living patients or patients in a specific community.

Providers

Select the **Providers** option button to filter the patients by providers.

Click **Edit** to access the **Add/Remove Providers** dialog.

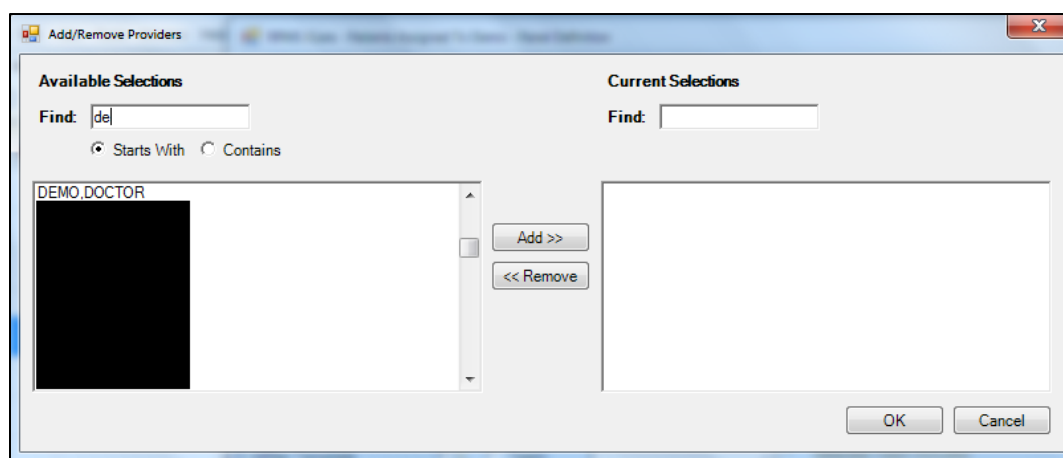


Figure 3-14: **Add/Remove Providers** dialog

When the Add/Remove dialog is complete, click **OK**, and the names displayed in the **Current Selections** field will populate the **Providers** field. (Otherwise, click **Cancel**.)

After the **Providers** field is populated, indicate the type for the selected provider.

Patients Assigned to Parameters

☐ Patients NOT Assigned to a DPCP

☒ Providers: DEMO DOCTOR As ☒ DPCP *Select at least one type*

☐ Specialty Provider *Specialty Type:*

☐ Primary Visit Provider **Min # of Visits within Timeframe*

☐ Primary/Secondary Visit Provider

☐ Team: *Selected Team Includes:*

Figure 3-15: Populating the **Providers** option

The choices for the type of provider are as follows (at least one is required):

DPCP (Designated Primary Care Provider)

Any patient who's documented DPCP is the selected provider/surrogate. Use this option if the selected provider uses the **Designated Specialty Provider Management (DSPM)** option in the RPMS application.

If the selected provider is *not* running DSPM, use the last two options: the **Primary Visit Provider** or the **Primary/Secondary Visit Provider**.

Specialty Provider

Users are assigned as Specialty Providers to patients as defined in the Designated Specialty Provider Management (BDP) application.

After selecting the **Specialty Provider** option button, specify the specialty provider type(s). Click the **Edit** button to access the **Add/Remove Specialty Provider Types** dialog.

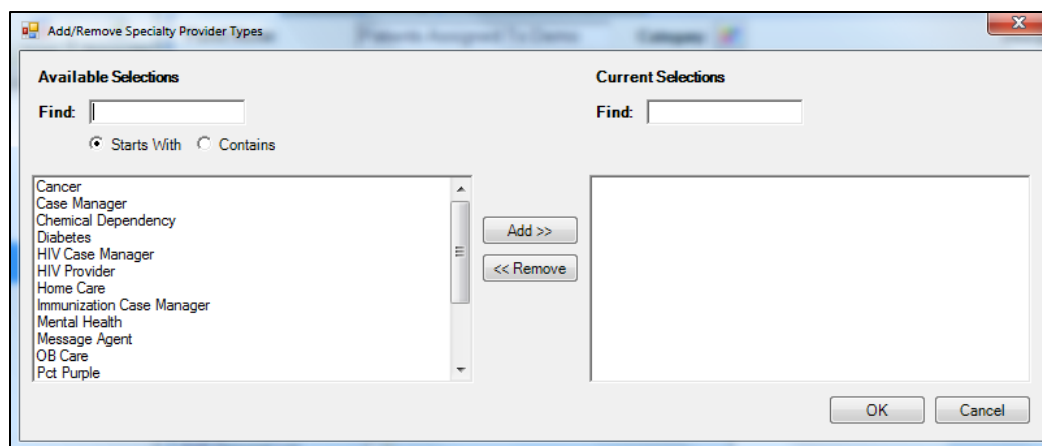


Figure 3-16: **Add/Remove Specialty Provider Types** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the provider types in the **Current Selections** group box of the dialog will populate the **Specialty Type** field. (Otherwise, click **Cancel**.)

Primary Visit Provider

Any patient whose Primary Visit Provider is the selected provider/surrogate for a user-defined number of visits within a user-defined timeframe, e.g., a patient where the selected provider/surrogate was the Primary Visit Provider at least two times in the past six months. The defaults for the user-defined values are two visits within the past year.

Primary/Secondary Visit Provider

Any patient whose Primary/Secondary Visit Provider is the selected provider/surrogate for a user-defined number of visits within a user-defined timeframe. The defaults for the user-defined values are two visits within the past year.

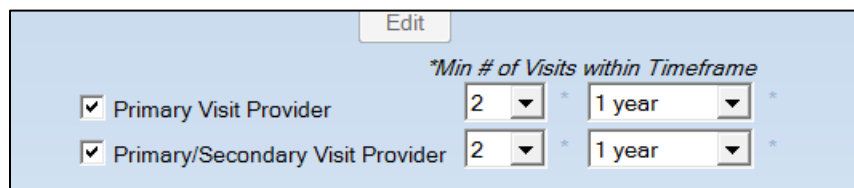
Minimum Visits

Select the minimum number of visits combined with a timeframe to define whether a patient “belongs” to a provider, e.g., two trips in the past year. Values are 1–9; select the value from the list. The **Minimum Visits** option only uses Primary Visit and Primary/Secondary Visit provider types.

Minimum Visit Timeframe

Select the timeframe with the minimum number of visits to define whether a patient “belongs” to a provider, e.g., two visits in the past year. The values are three months, six months, one year, 18 months, two years, or three years. Select the value from the list. The **Minimum Visit Timeframe** option is used only with Primary Visit Provider and Primary/Secondary Visit Provider types.

If either the Primary Visit Provider or Primary/Secondary Visit Provider is selected, specify both a minimum number of visits and a timeframe (required).

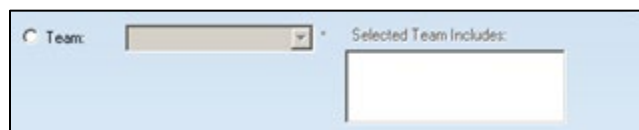


The screenshot shows a form with an 'Edit' button at the top right. Below it, the text '*Min # of Visits within Timeframe' is displayed. There are two rows of input fields. The first row has a checked checkbox for 'Primary Visit Provider', a dropdown menu with the value '2', and a dropdown menu with the value '1 year'. The second row has a checked checkbox for 'Primary/Secondary Visit Provider', a dropdown menu with the value '2', and a dropdown menu with the value '1 year'. Each dropdown menu has a small asterisk to its right.

Figure 3-17: **Primary** or **Primary/Secondary Visit Provider** options

Team

Use the Team parameter to filter the patients by a particular Team. The Team must contain at least one provider to whom patients are assigned.



The screenshot shows a form with a 'Team:' label and a dropdown menu. To the right of the dropdown menu is a label 'Selected Team Includes:' followed by a large empty text area.

Figure 3-18: **Team** group box

Select an option from the Team list. If there are pre-determined team members, their names will populate the **Selected Team Includes** field.

Select the **Apply additional filters** checkbox to display additional data that can be used to refine the search. These are the same fields that display when the **Ad Hoc Search** option button is selected.

3.4 Scheduled Appts

The **Scheduled Appointments** search option can be used to find the patients with scheduled appointments in a specified date range or timeframe for the panel (required).

This is an excellent option for pre-planning patient care for patients entering the facility for appointments.

Figure 3-19: **Scheduled Appointments** selection parameters

Appointment Range

Use the **Appointment Range** group box to set a date range or a timeframe. Select one of the option buttons.

Figure 3-20: **Appointment Range** group box

By Date

Select the **By Date** option button for a specific date range for the scheduled appointments. The beginning and end dates must be the same if the appointments are for only one day. The default is today's date.

By Timeframe

Select the **By Timeframe** option button to select the timeframe associated with the date range (it cannot be blank). Valid choices are displayed on the list.

After selecting the **By Timeframe** option on the **Appointment Range** and the specific timeframe value, click **OK**. The application displays the message: "This panel definition includes a time frame filter. It is recommended that this panel be set to Auto Populate. Do you agree?" Click Yes, **No**, or **Cancel**.

- Click **Yes** to set the panel to Auto Panel. The application displays the message: "Populating the panel may take some time and will run in the background. Do you want to continue and populate this panel?" Click **OK** to run in the background. (Otherwise, click **Cancel**).
- Click **No** to *not* set the panel to Auto Populate.

- Click **Cancel** to return focus to the **Appointment Range** group box.

Appointment Locations

Use the **Appointment Locations** group box to select the appointment locations by which to search. One of the option buttons (**By Scheduling Clinic** or **Visit Clinic**) must be specified.

Figure 3-21: **Appointment Locations** group box

By Scheduling Clinic

A Scheduling Clinic is a clinic that is defined at each facility and identifies clinics for appointment scheduling. The names are unique to each facility.

Select the **By Scheduling Clinic** option button and click **Edit** to access the **Add/Remove Scheduling Clinics** dialog.

Figure 3-22: **Add/Remove Scheduling Clinics** dialog

Active Only is the default selection. Only active clinics will be displayed in the Available Sections box.

Change to **All** to have the ability to add/remove inactive clinics as well. Inactive clinics will display at the end of the list of active clinics.

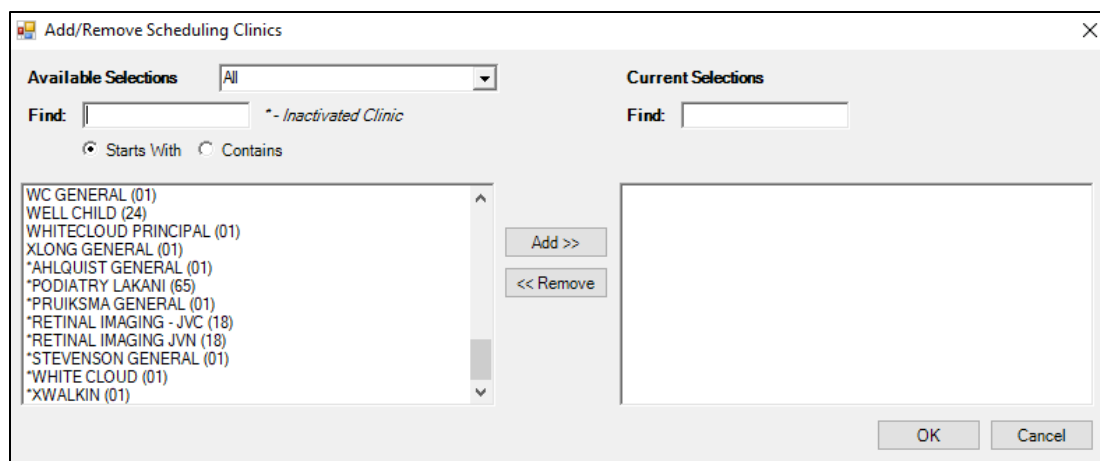


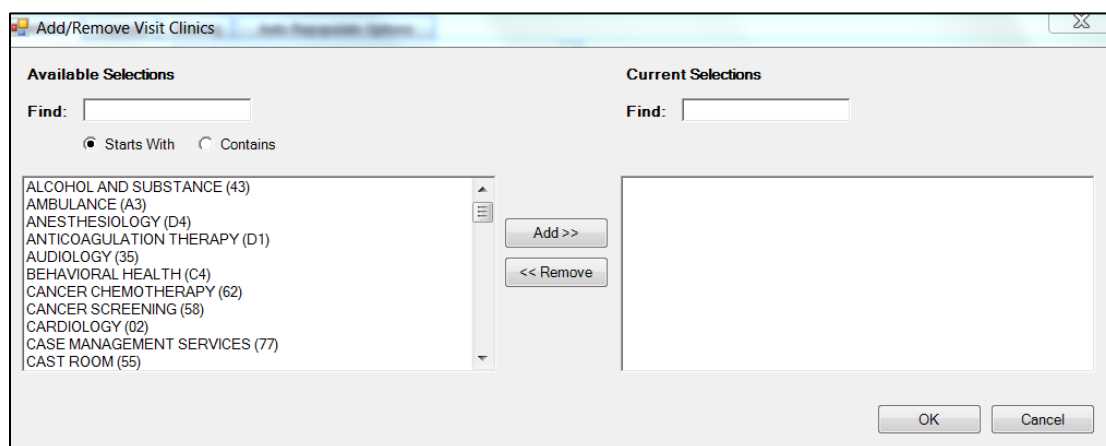
Figure 3-23: Inactive clinics displayed

When the **Add/Remove** dialog is complete, click **OK**, and the options in the **Current Selections** group box populate the **By Scheduled Clinic** field on the **Panel Definition** window. iCare searches for the patients in the clinics in the **By Scheduled Clinic** field. (Otherwise, click **Cancel**.)

By Visit Clinic

A Visit Clinic is how the Clinic Code can link Scheduling Clinics. A facility might have multiple scheduling clinics that happen to be defined as PEDIATRIC (20). Instead of selecting all Scheduling Clinics individually, select Visit Clinic of PEDIATRIC, and all Scheduling Clinics will be included.

Select the **By Visit Clinic** option button and click **Edit** to access the **Add/Remove Visit Clinic** dialog.

Figure 3-24: **Add/Remove Visit Clinics** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the visit clinics in the **Current Selections** group box will populate the **By Visit Clinic** field. iCare searches for the patients in the clinics displayed in the **By Scheduled Clinic** field. (Otherwise, click **Cancel**.)

Appointment Status

The **Appointment Status** field is populated by clicking the **Edit** button to access the **Add/Remove Appt Types** dialog. The function of this option is to define a panel once and have it auto-populated every day without manually changing the date range. If this option is used, the panel should be set to Auto Repopulate (refer to the **Auto Repopulate Options** tab for more information).

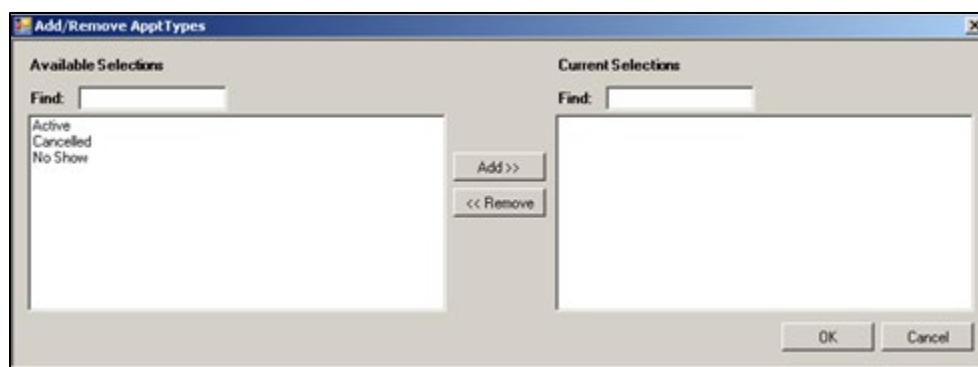


Figure 3-25: **Add/Remove Appt Types** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the appointment types in the **Current Selections** group box populate the **Appointment Status** field. (Otherwise, click **Cancel**.)

Select the **Apply additional filters** checkbox to display additional data that can be used to refine the search. These are the same fields that display when the **Ad Hoc Search** option button is selected.

3.5 Inpatient Visits

The Inpatient Visits search option can restrict the search to current or non-current inpatient visits where particular visit characteristics can be defined.

Figure 3-26: Inpatient Visits parameters

Current Inpatient?

Select the **Current Inpatient** checkbox to restrict the search to only current inpatients. This action causes the fields in the lower panel to become active and the fields in the **Discharge Range** to become inactive.

To search for inpatients in the past, do not select the **Current Inpatient?** checkbox. The search can then be defined to a specified admit date range and discharge date range.

Admit Range Group Box

Use the **Admit Range** group box to restrict searching for patients in a particular admit date range.

Figure 3-27: Admit Range group box

By Date

Select the **By Date** option button to enter the date range for the admit dates. The beginning and end dates must be the same if the range is for only one day.

By Timeframe

If **By Timeframe** is selected, the panel should be set to automatically Auto Repopulate (refer to **Auto Repopulate Options** Tab for more information).

Select the **By Timeframe** option button to select the timeframe for the admit date range (it cannot be blank). Valid choices are displayed on the list.

The various fields on the lower group box define the restrictions for the search for current inpatients by admit type, attending provider, specialty, and ward.

Discharge Range Group Box

Use the **Discharge Range** group box to restrict the search to patients in a specified discharge date range. The **By Date** and **By Timeframe** option buttons function like those for the **Admit Range** group box (above).

The lower group box is active when the **Discharge Range** checkbox is selected, and the **By Date** or **By Timeframe** option button is selected.

Figure 3-28: Lower section for **Inpatient Visits** parameters

The fields on the lower group box define the restrictions for the search for discharged inpatients by Admit Type, Attending Provider, Specialty, Ward, Nurse, and Disposition Type. They all operate in the same manner. See the following for information on how to use the **Admit Type** restriction.

Admit Type

Use **Admit Type** to restrict the search for inpatients to admit types. Click **Edit** to access the **Add/Remove Inpatient Admit Types** dialog.

Figure 3-29: **Add/Remove Inpatient Admit Types** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the items in the Current Selections group box populate the **Admit Type** field. (Otherwise, click **Cancel**.)

3.6 Emergency Room (ER) Visits

Use the **ER Visits** search option to restrict the search for patients with ER visits.

ER Visits Parameters

☐ Currently Admitted to ER?

*Admit Range - Does not include currently admitted patients

☒ By Date (none) to (none)

☐ By Timeframe

*Discharge Range

☒ By Date (none) to (none)

☐ By Timeframe

Visit Type: [] [Edit]

Discharge Type: [] [Edit]

Discharge Acuity: [] [Edit]

Figure 3-30: **ER Visits Parameters**

Populate the **Admit Range** or **Discharge Range** group box, and the fields in the lower group box become active.

The group boxes on the ER Visits work like those for **Inpatient Visits**.

3.7 QMan Template

Use the **QMan Template** option to populate a panel with the patients identified in a specified QMan search template.

This is an excellent option if time has already been spent creating QMan searches. For the expert user, QMan can produce complex searches.

Population Search Options

- No Predefined Population Search - Add Patients manually
- My Patients
- Patients Assigned to
- Scheduled Appts
- Reminders
- Inpatient Visits
- ER Visits
- QMan Template**
- RPMS Register
- EHR Personal List
- Ad Hoc Search
- Apply Additional Filters?

QMan Template Parameters

*Template Name: []

Filters - n/a

Template Name	Template Type	Created By	Completed Date
[CCL-BROWN NO DM]	P		
[DENTALVISIT46-2002]	P		
[DIABETICS]	P		
[DRT-BROWN DIABETES PATIENTS]	P		
[DRT-BROWN NON DM PATIENTS]	P		
[DRT-CDC GRANT STUFF]	P		
[kvt]	P		
[KVT-TRIBAL DIABETES]	P		

Figure 3-31: Sample **QMan Template** list

Search for a template by doing one of the following:

- Search for a template by typing a few characters in the **Template Name** field; the list will scroll to the first instance of the name containing those characters.

- Use the scroll bar to browse through the list.

Highlight the template name. Please note the following about the Template Type:

- The **P** in the **Template Type** column means it is a patient-centric QMan search.
- The **V** in the **Template Type** column means it is a visit-centric QMan search.

Select the **Apply additional filters** checkbox to display additional data that can be used to refine the search. These are the same fields that display when the **Ad Hoc Search** option button is selected.

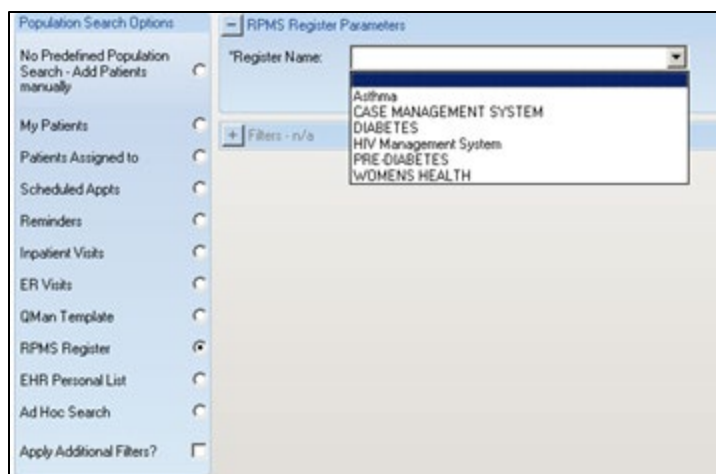
Note: Only one QMan template can be selected for each panel. To create a panel containing multiple templates, create one panel for each template and then copy all patients out of each panel into one combined panel. Duplicate patients will not be included.

Please note that if the QMan template is removed from the database and users attempt to modify that panel (using the template), the **Template Name** field will be empty. In this case, close the **Panel Definition** window. Create a new panel and copy the patients to the new panel.

3.8 RPMS Register

Use the **RPMS Register** option to populate a panel with patients already on a Register for any existing RPMS case-management system. Examples of case-management systems are the Diabetes Management System (BDM), Case Management (ACM), the Asthma Register System (BAT), the HIV Management System (BKM), Women's Health (BW), and Immunizations (BI). Currently, only the Case Management System has multiple Registers.

Note: Any Register created within the Diabetes Management System that is *not* the "official" IHS Diabetes Register can be located by selecting the **Case Management System** option and then scrolling to the named diabetes sub-registers.

Figure 3-32: Sample **RPMS Register Name** list

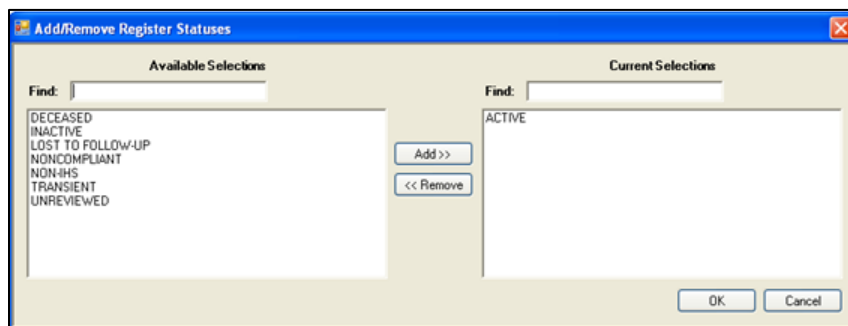
Type the name of the Register in the **Register Name** field, and the list will scroll to the first occurrence of the typed letters. Highlight the selection.

The Case Management System selection requires secondary data about a specific register.

Figure 3-33: Sample **Sub Register** options

A sub-register must be selected from the list.

The default Status is **ACTIVE** (for any of the Register options). To change the Status, click **Edit** to access the **Add/Remove Register Statuses** dialog.

Figure 3-34: **Add/Remove Register Statuses** dialog

The **Status** field displays for all Register Names except for Women's Health.

When the **Add/Remove** dialog is complete, click **OK**, and the options in the Current Selections group box populate the **Status** field in the RPMS Register Parameters area. (Otherwise, click **Cancel**.) If there are multiple statuses, the **Status** field on the **RPMS Register Parameters** group box will have a scroll bar.

Select the **Apply additional filters** checkbox to display additional data that can be used to refine the search. These are the same fields that display when the **Ad Hoc Search** option button is selected.

3.9 Electronic Health Record (EHR) Personal List

Use the **EHR Personal List** option to use an existing defined personal list from the RPMS-EHR application.

If this option is selected and there is no existing personal list, the application displays a message that reads: “There are no EHR Personal Lists for selection.” Click **OK** to dismiss the message.

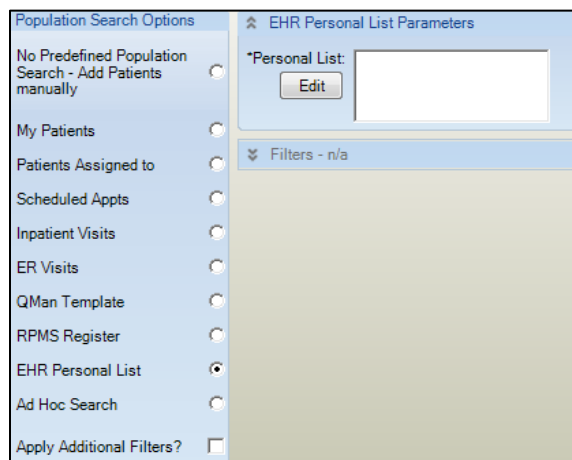


Figure 3-35: **EHR Personal List** selection

Click the **Edit** button associated with the **Personal List** field to access the **Add/Remove EHR Personal Lists** dialog. One or more EHR Personal Lists can be selected. When the **Add/Remove** dialog is complete, click **OK**, and the personal list names in the **Current Selections** group box populate the **Personal List** field. (Otherwise, click **Cancel**.)

Select the **Apply additional filters** checkbox to display additional data that can be used to refine the search. These are the same fields that display when the **Ad Hoc Search** option button is selected.

3.10 Ad Hoc Search

Use the **Ad Hoc Search** option to combine one or more common search criteria, such as age, gender, community, or visit date range, to define the wanted patient population.

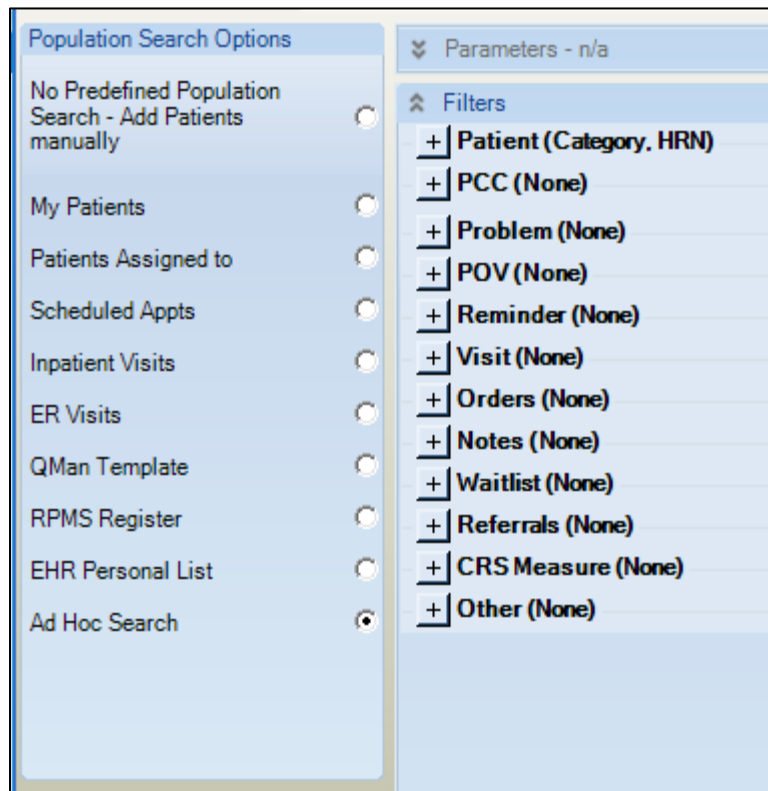


Figure 3-36: **Ad Hoc Search** filters

After completing the filter options, click **OK** to use the filter options to create a new patient panel. (Otherwise, click **Cancel**).

3.10.1 Patient (Category, Demo) Filter

Expand the **Patient (Category, Demo)** filter to display the criteria that you can select. Likewise, expand any filters by clicking on the plus (+) under the **Patient filter** to use them in the search.

Figure 3-37: **Patient Search** selections

- **Patient Group Box:** Filter the patients in the panel using the fields in the box.

Figure 3-38: Patient group box options

- **Sex:** Select the sex filter (male or female) from the list.
- **By Age:** Enter a filter by age using a criteria statement and age. Click to display the list for the first field and select the criteria.
 - Less than, e.g., a panel of children could be defined as ages less than 19.
 - Less than or equal to, e.g., the same panel of children in the previous example could be defined as ages less than or equal to 18.
 - This is equivalent to, e.g., creating a panel of patients aged 50 to identify those who should have a colorectal exam.
 - Greater than or equal to, e.g., a panel of adults could be defined as ages greater than or equal to age 19.
 - Greater than, e.g., the same panel of adults in the previous example could be defined as ages greater than 18.
 - In range (inclusive), e.g., create a panel of women ages 45 through 60 with this option.
 - Out of range (exclusive), e.g., 20–25, exclusive means ages 21, 22, 23, 24.

There will be an age range for Age if the following criteria statements were selected: (1) in range (inclusive) or (2) out of range (exclusive). For example, 20-25, inclusive, means 20, 21, 22, 23, 24, 25, whereas 20–25, exclusive, means 21, 22, 23, 24.

Type the age to be used in the search in the middle field (limited to three characters).

The list for the last field for the Age criteria defines the units of measure for the age: YRS (for years), MOS (for months), or DYS (for days).

- **By DOB:** Filter by DOB by specifying a date range using the **Date of Birth** and fields.
- **Preferred Communication Method:** Select a filter for the **Preferred Communication Method** field by selecting an option from the list.
- **Preferred Language:** Select a filter for the **Preferred Language** field by selecting an option from the list.

3.10.1.1 Category Filter

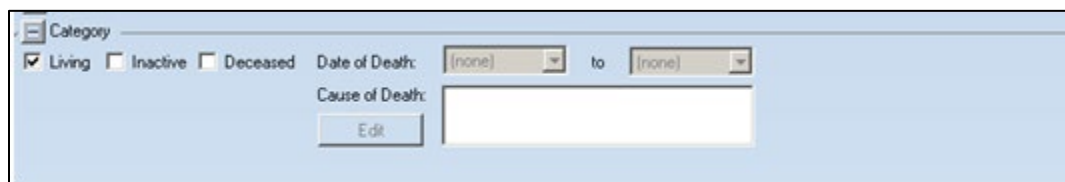


Figure 3-39: **Category** Filter options

Use the **Category** group box to restrict the search to any of the following:

- **Living:** Living patients are patients for whom at least one HRN (health record number) is active through registration.
- **Inactive:** Inactive patients are patients for whom all HRNs (health record numbers) have been inactivated through registration. The patient is not considered inactive if anyone's HRN is still active.
- **Deceased:** Select Deceased to specify a Date of Death date range. If no date of death date range is entered, the application will search for all deceased patients in the database
- **Causes of Death:** Use the Cause of Death to search for reasons (only active when Deceased is selected). Click **Edit** to access the **Add/Remove Causes of Death** dialog.

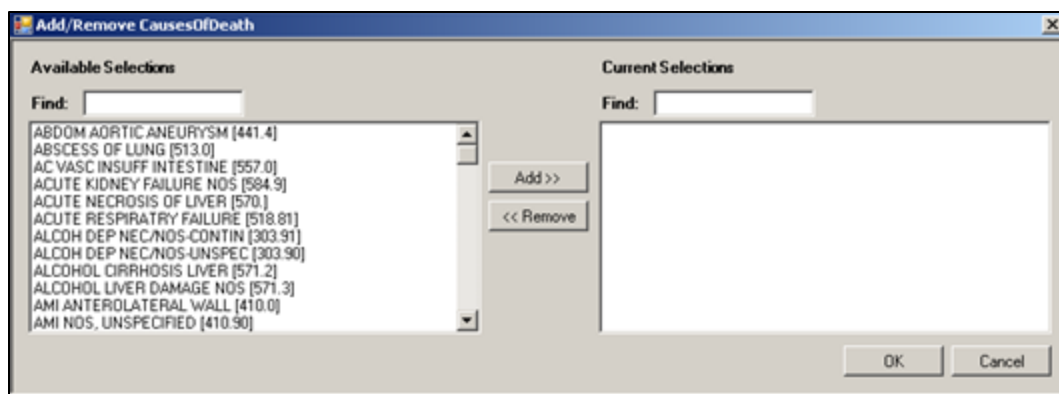


Figure 3-40: **Add/Remove Causes of Death** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the options in the **Current Selections** group box will populate the **Causes of Death** field. (Otherwise, click **Cancel**.)

3.10.1.2 HRN Filter

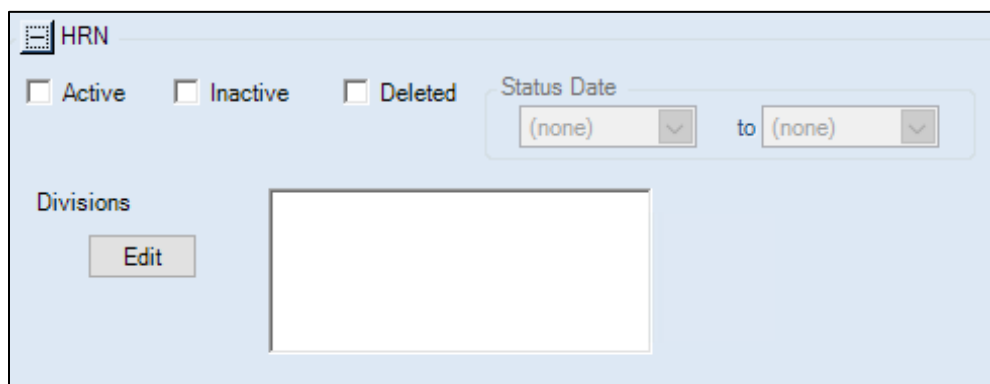
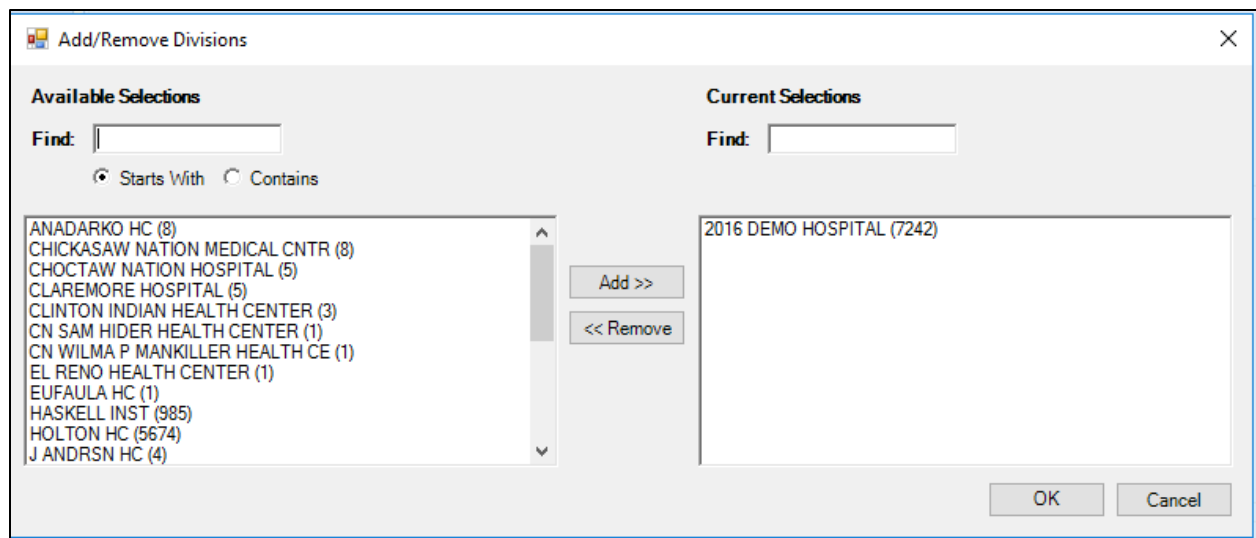


Figure 3-41: Health Record Number (HRN) filter options

Use the **HRN** group box to restrict the search to any of the following:

- **Active:** Patients whose HRN (health record number) is active through registration.
- **Inactive:** Patients whose HRN (health record number) has been inactivated through registration.
- **Deleted:** Patients whose HRN (health record number) has been marked deleted through registration.
- **Status Date:** The From and Thru Date range that patients have had their HRN (health record number) either inactivated OR deleted.
- **Divisions:** There is no longer a default division selected, however, additional divisions can be selected.

Figure 3-42: **Add/Remove Divisions** dialog

The default value is all active patients for the division with which the user signed on to iCare.

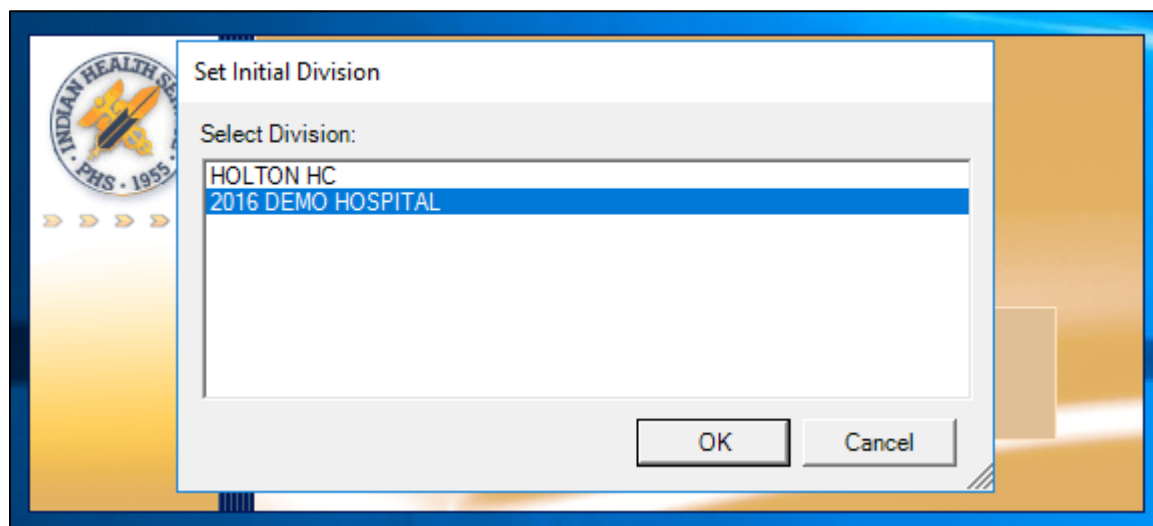
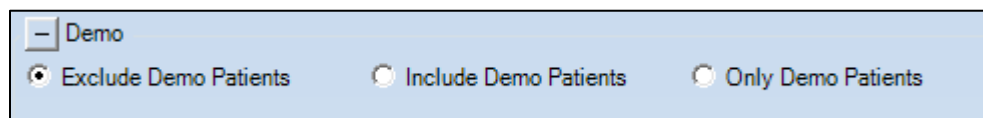


Figure 3-43: Initial Division selection

3.10.1.3 Demo Filter

Figure 3-44: **Demo** filter options

Demo patients can be found in a specific search template that can only be seen and used if the user holds the APCLZ UPDATE DEMO TEMPLATE security key. The menu option can be reached from **PCC Management Reports | Other PCC Management Reports/Options | Update the Demo/Test Patient Search Template**.

```

CREATE/UPDATE "DEMO" PATIENT LIST

This option is used to update a patient search template (list) that
contains the names of all of the "demo" or "test" patients in your
database. This template will exclude these patients from
all PCC Management reports.

Do you wish to continue? Y//

PCC DEMO PAT TEMPLATE          Jul 13, 2016 06:35:27          Page:    1 of  5
DEMO/TEST PATIENTS TO EXCLUDE FROM PCC MANAGEMENT REPORTS
* Patients currently included in the RPMS DEMO PATIENT NAMES list
  Patient Name                      HRN
1) DEMO,SAM                        103250
2) DEMO,FLOYD SR                   103940
3) DEMO,SABINA L                   104348
4) DEMO,FAIRIETTA DANNETTE        106596
5) DEMO,PERRY RAY                  108897
6) DEMO,AMENDMENT TWO             112025
7) DEMO,ASHLEY                    114649
8) DEMO,DEJON                     115569
9) DEMO,SEATTLE ANN               118176
10) DEMO,AMENDMENT ONE            124221
+      Enter ?? for more actions
AP  Add Patient to Template        Q    Quit
RP  Remove Patient from Template
Select Action:+//

```

Figure 3-45: Sample Demo patients from RPMS PCC

Any patient name or alias containing the text “DEMO, PATIENT” will also be included as a demo patient.

Use the **Demo** group box to restrict the panel search to any of the following:

Exclude Demo Patients

Exclude any patients in the panel identified as DEMO patients in PCC. Please note that this is the default value for this filter for all Ad Hoc Search panels or when applying additional filters to existing Panel Populations such as Scheduled Appointments.

Include Demo Patients

Include patients in the panel identified as DEMO patients in PCC.

Only Demo Patients

Include only patients in the panel identified as DEMO patients in PCC.

3.10.1.4 Community Filter

Use the **Community** group box to restrict the search to patients defined in a community by taxonomy or name. This option uses the Active patients in the database for each associated residence community.

Figure 3-46: **Community** group box

By Taxonomy

To define the community by taxonomy, select the **By Taxonomy** option button.

Click **Edit** to access the **Add/Remove Community Taxonomies** dialog.

Figure 3-47: Sample **Add/Remove Community Taxonomies** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the items in the **Current Selection** group box will populate the **Selected Taxonomy Includes** field. (Otherwise, click **Cancel**.)

By Name

To define the community by name, select the **By Name** option button. Select an option from the **By Name** field list; the selection determines the number of patients in the community (at least one or all); the **With At Least One Patient** option is the default.

Use the **Edit** button to determine which communities to use in the search. Click **Edit** to access the **Add/Remove Communities** dialog.

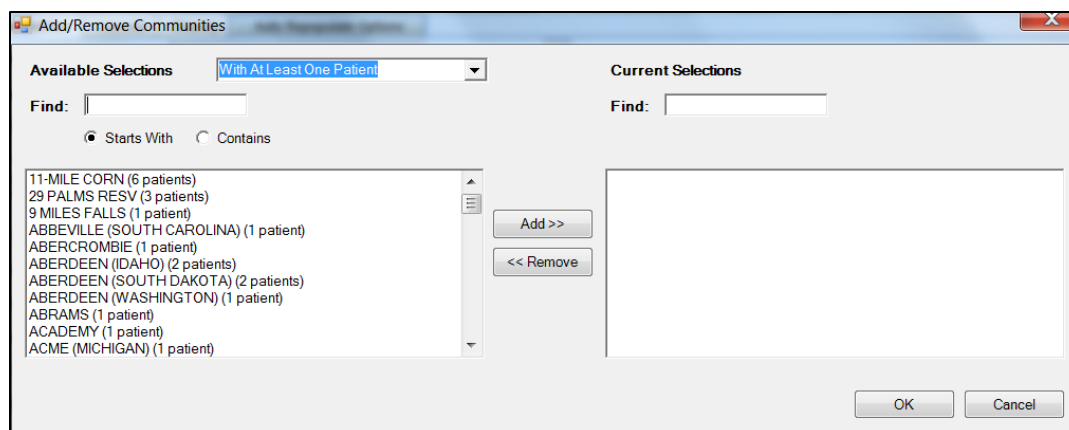


Figure 3-48: Sample **Add/Remove Communities** dialog

The list of available communities is controlled by selecting an option from the **Available Selections** field, with either the **With At Least One Patient** or **All** option. The number of patients in that community is in parentheses at the end of the community's name. For example, 11-MILE CORN has six patients.

When the **Add/Remove** dialog is complete, click **OK**, and the options in the Current Selections group box will populate the field with the **Edit** button. (Otherwise, click **Cancel**.)

Selecting more than one community will activate the **Create Taxonomy** button.

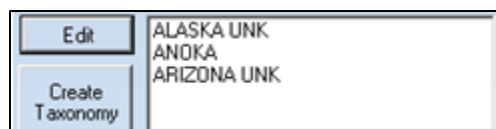


Figure 3-49: Example of more than one community selected

To use the **Create Taxonomy** button, the user must have the iCare Editor (BQIZCMED) or iCare Package Manager (BQIZMGR) security key.

Clicking the **Create Taxonomy** button saves the selected communities as a Community taxonomy. This action will change the panel definition from a list of communities to the new Community taxonomy name. Section 7.2 provides information about creating a Community taxonomy. Users can edit the Community Taxonomies that they make.

3.10.1.5 Diagnostic Tag Filter

Use this option to restrict the search to patients with one or more of the predefined diagnostic tags.

Figure 3-50: **Diagnostic Tag** group box

Click **Edit** to select the diagnostic tags.

The **Add/Remove Diagnostic Tags** dialog displays. Slide the scroll bar down to see all the diagnostic tags available for selection. The four CVD tags have been inactivated (marked with an asterisk [*]) but can still be used to search for patients who previously had that tag using **No Longer Valid**.

Figure 3-51: **Add/Remove Diagnostic Tags** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the options in the **Current Selections** group box will populate the **Diagnostic Tag** group box. (Otherwise, click **Cancel**.)

Tag	Accepted	Not Accepted	Proposed	No Longer Valid	Superseded
Asthma	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
COPD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Figure 3-52: **Diagnostic Tag** group box populated

The default tag status selection will be **Proposed** and **Accepted**. The tag status selection can be changed for any record by selecting or de-selecting any checkbox.

Select the **Use AND?** checkbox when multiple tags are selected. This option searches for patients who have *all* the user-defined tags. For example, not selecting **Use AND?** will return a list of all patients with Asthma *or* COPD. Selecting **Use AND?** will return a list of all patients with both Asthma *and* COPD.

3.10.1.6 High Risk\Immunocompromised Conditions Filter

Use this option to find patients with multiple high-risk, specific high-risk, or specific immunocompromised conditions.

Maximum # of High-Risk Conditions Value

This value is the maximum number of high-risk conditions that one or more patients have in the RPMS database.

Figure 3-53: **Maximum # of High-Risk Conditions**

High Risk Conditions

Finds patients who meet the selected criteria for the number of high-risk conditions.

Figure 3-54: # High-Risk Conditions drop-down selection

Click to display the list of the # of High-Risk Conditions and select the criteria statement.

- **Less than**, e.g., a panel of patients with less than the entered number of High-Risk Conditions, could be defined as a number less than the Maximum # of High-Risk Conditions (less than 8).
- **Less than or equal to**, e.g., the same panel of patients in the previous example could be defined as having high-risk conditions less than or equal to 8.
- **Equal to**, e.g., create a panel of patients with exactly 5 High Risk Conditions.
- **Greater than or equal to**, e.g., a panel of patients with three or more High-Risk Conditions.
- **Greater than**, e.g., the same panel of patients in the previous example with more than 3 High-Risk Conditions.
- **In range (inclusive)**, e.g., create a panel of patients with 3 through 5 High-Risk Conditions with this option.
- **Out of range (exclusive)**, e.g., 3–5, exclusive means patients with 1–2 and 6 or more (up to a maximum of 8) High-Risk Conditions.

By High-Risk Name: Finds patients who have the selected high-risk conditions.

Select the **Use AND?** checkbox when multiple high-risk conditions are selected. This option searches for patients who have *all* the selected high-risk needs.

Click **Edit** to access the **Add/Remove High Risk Conditions** dialog.

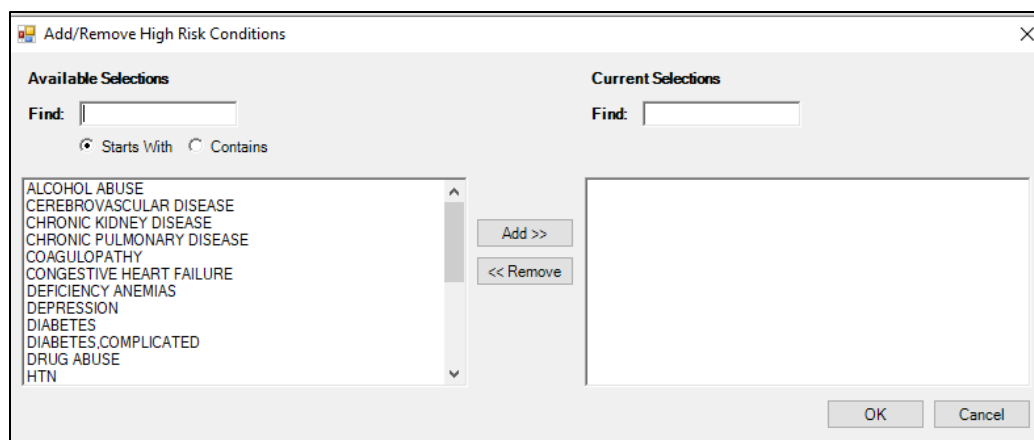


Figure 3-55: **Add/Remove High-Risk Conditions** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the items in the Current Selections group box will populate the field with the **Edit** button on the **High-Risk Name** group box. (Otherwise, click **Cancel**.)

By Immunocompromised Name: Finds patients who have the selected Immunocompromised conditions.

Click **Edit** to access the **Add/Remove High Risk\Immunocompromised** dialog.

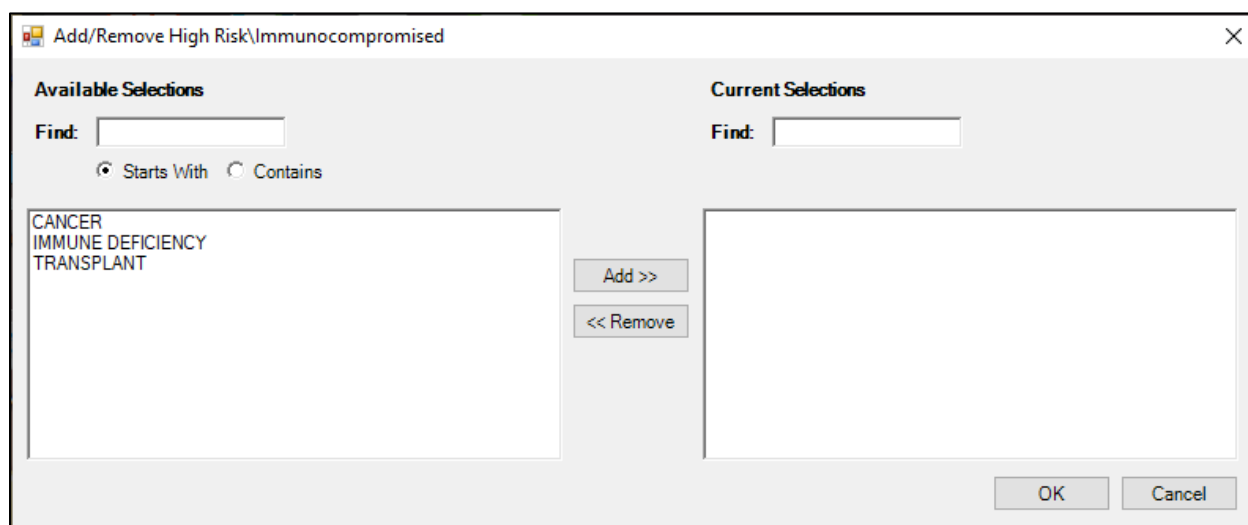


Figure 3-56: **Add/Remove High Risk\Immunocompromised** dialog

When the **Add/Remove** dialog is complete, click **OK**. The items in the Current Selections group box will populate the field with the **Edit** button on the **Immunocompromised Name** group box. (Otherwise, click **Cancel**.)

3.10.1.7 Allergies Filter

No Allergy Assessment

Select the **No Allergy Assessment** checkbox to restrict the search to patients without an allergy assessment. This action causes the **No Known Allergies** checkbox and the **Edit** button to become inactive.

No Known Allergies

Select the **No Known Allergies** checkbox to restrict the search to patients without an allergy assessment. This action causes the **No Allergy Assessment** checkbox and the **Edit** button to become inactive.

Use the **Allergies** group box to filter patients with one or more allergies.

The screenshot shows a light blue rectangular box titled "Allergies". Inside the box, there are two checkboxes: "No Allergy Assessment" and "No Known Allergies". Below these checkboxes is an "Edit" button. At the bottom left of the box, there is a "Use AND?" checkbox. To the right of the "Edit" button is a large, empty white rectangular area.

Figure 3-57: **Allergies** group box

Select the **Use AND?** checkbox when multiple allergies are selected. This option searches for patients who have *all* the selected allergies.

Click **Edit** to access the **Add/Remove Allergies** dialog.

The screenshot shows a dialog box titled "Add/Remove Allergies". It has two main sections: "Available Selections" on the left and "Current Selections" on the right. Both sections have a "Find:" text box above a list box. The "Available Selections" list box contains a scrollable list of drug names: ABILIFY, ABILIFY 10MG TAB, ABILIFY 5MG TAB, ACE INHIBITOR, ACE INHIBITORS, ACETAMINOPHEN, ACETAMINOPHEN & CODEINE= NO.3 TAB, ACETAMINOPHEN/ASPIRIN/CAFFEINE, ACETAMINOPHEN/CODEINE, ACETAMINOPHEN/DEXTROMETHORPHAN/PSEUDOEPHEDRI, ACETAMINOPHEN/HYDROCODONE, and ACETAMINOPHEN/OXYCODONE. Between the two list boxes are "Add >>" and "<< Remove" buttons. At the bottom right of the dialog are "OK" and "Cancel" buttons.

Figure 3-58: Sample **Add/Remove Allergies** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the items in the Current Selections group box will populate the field with the **Edit** button on the **Allergies** group box. (Otherwise, click **Cancel**.)

3.10.1.8 Ethnicity Filter

Use the **Ethnicity** group box to filter the patients by ethnicity.



Figure 3-59: **Ethnicity** group box

Click **Edit** to access the **Add/Remove Ethnicities** dialog.

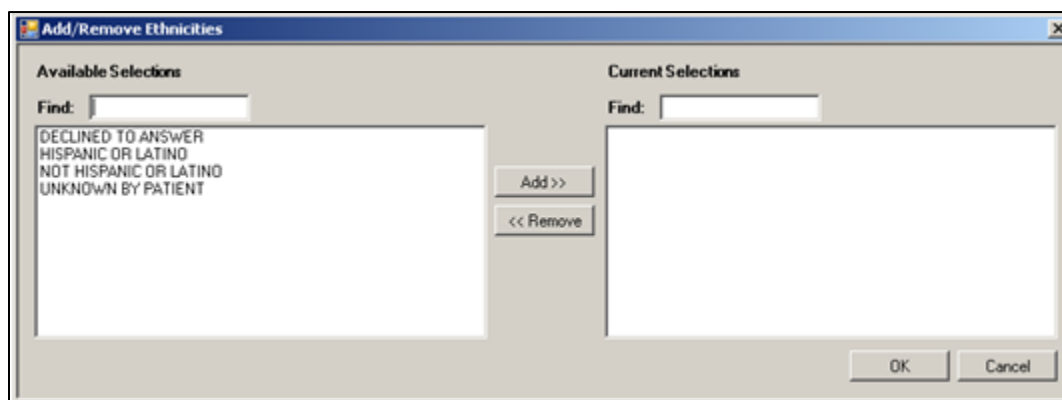


Figure 3-60: **Add/Remove Ethnicities** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the items in the Current Selections group box will populate the field with the Edit button on the Ethnicity group box. (Otherwise, click Cancel.)

3.10.1.9 Race Filter

Use the **Race** group box to filter patients by race.

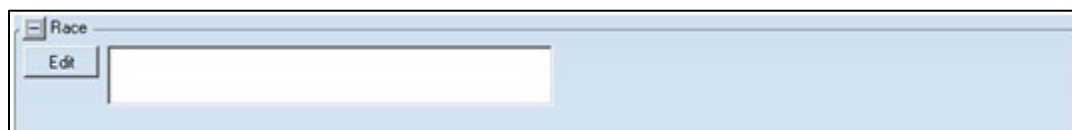
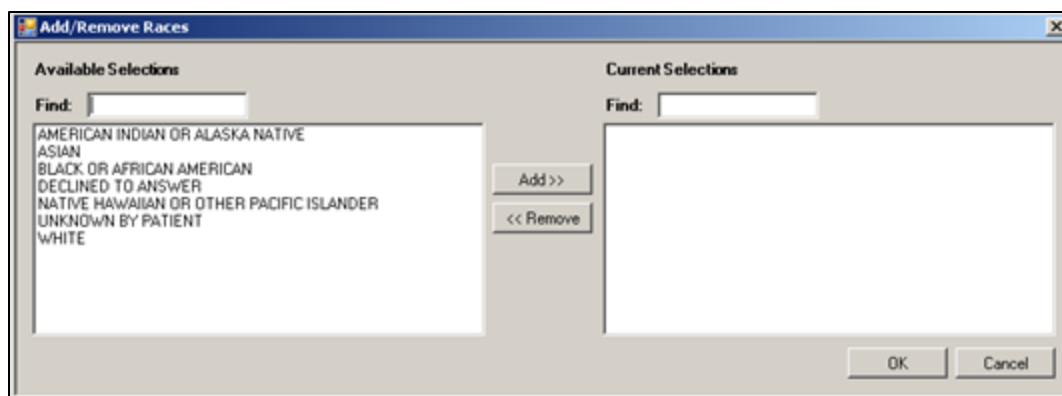


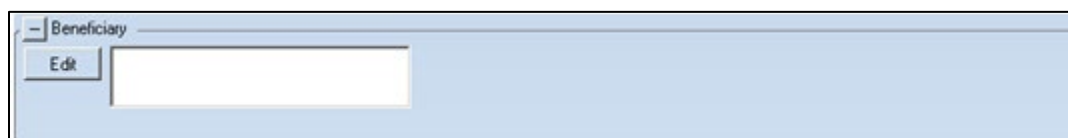
Figure 3-61: **Race** group box

Click **Edit** to access the **Add/Remove Race** dialog.

Figure 3-62: **Add/Remove Races** dialog

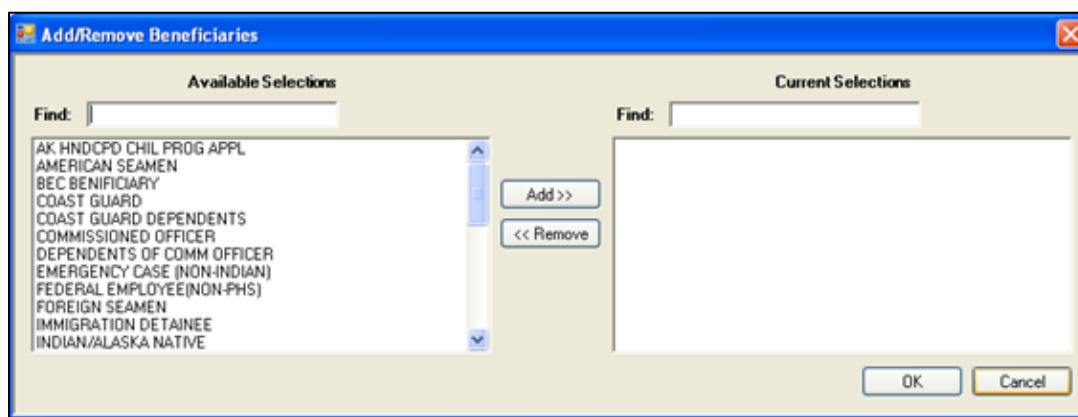
When the **Add/Remove** dialog is complete, click **OK**, and the items in the Current Selections group box will populate the field with the **Edit** button on the **Race** group box. (Otherwise, click **Cancel**.)

3.10.1.10 Beneficiary Filter

Figure 3-63: **Beneficiary** filter

Use the **Beneficiary** filter to search for either AI/AN or non-AI/AN Classification/Beneficiary patient categories. Users can select a patient population based on Patient Reg's Classification/Beneficiary categories like the CRS reports.

Click **Edit** to access the **Add/Remove Beneficiaries** dialog.

Figure 3-64: **Add/Remove Beneficiaries** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the options in the **Current Selections** group box will populate the **Beneficiary** field in the **Patient** group box. (Otherwise, click **Cancel**.)

3.10.1.11 Tribe Filter

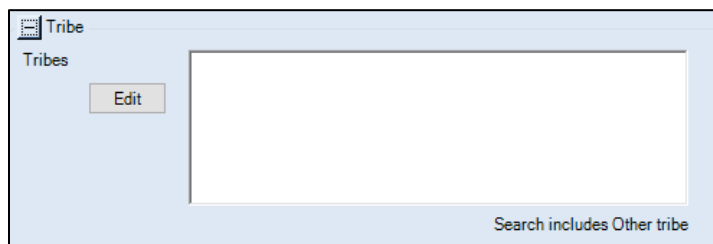


Figure 3-67: **Tribe** filter

Use the **Tribe** filter to search for Tribes. Users can select a patient population based on Patient Tribe classification as is designated in patient registration.

Click **Edit** to access the **Add/Remove Tribes** dialog.

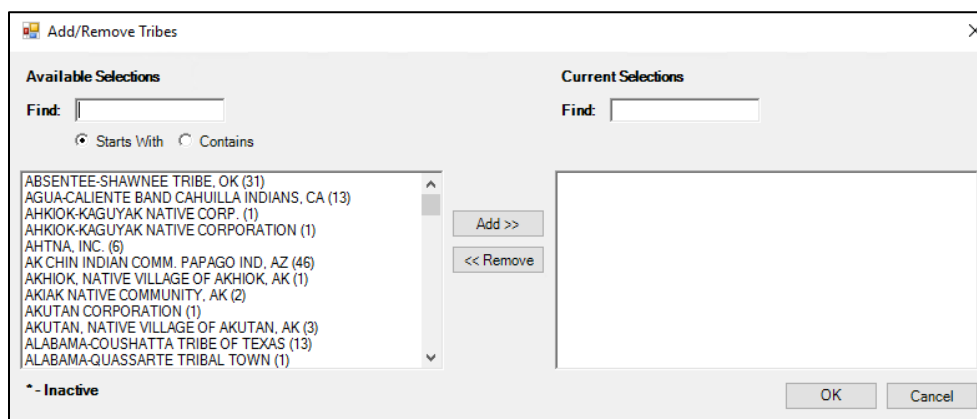


Figure 3-65: **Add/Remove Tribes** dialog

3.10.2 Patient Care Component (PCC)

Use the **PCC** filter to filter the patients by Current Procedural Terminology (CPT), Exams, Health Factors, Immunizations, Lab Tests, Measurements, Medications, and Patient Education.

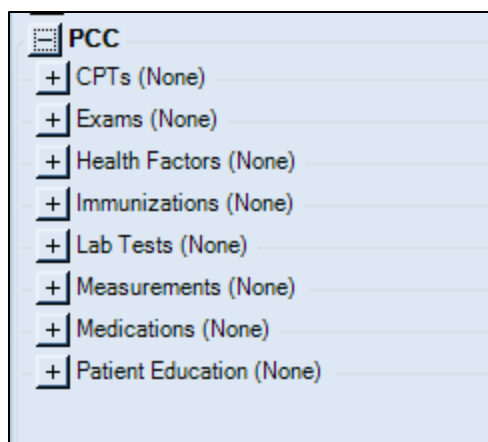


Figure 3-66: PCC Filter

3.10.2.1 CPTs Filter

Use the **CPT** group box to filter the population by CPTs. This can be done by date range or for patients who did not have CPTs during the selected range.

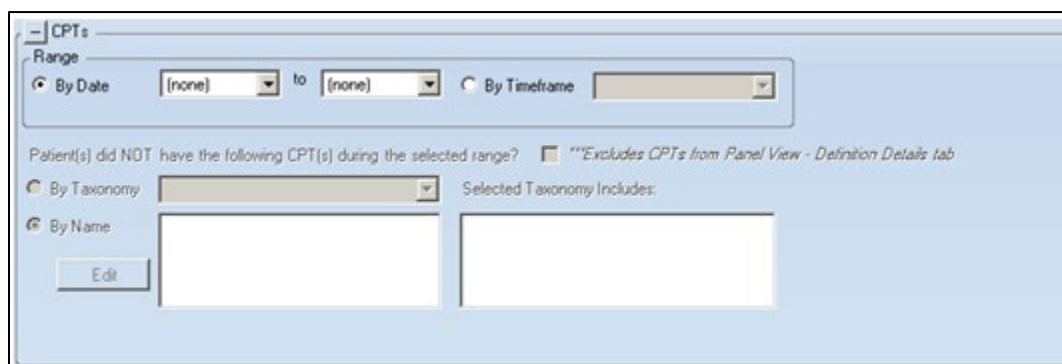


Figure 3-67: CPTs filter options

Range–By Date

Click the **By Date** option button to enter the date range for the lab tests. For one day only, both the beginning and end dates must be the same.

Range–By Timeframe

If **By Timeframe** is selected, the panel can automatically auto-repopulate. Section 6.0 provides information about this function.

Select the **Timeframe** option button to select the timeframe associated with the date range (it cannot be blank). Valid choices are on the list.

After populating the date range or the timeframe, the bottom part of the group box becomes active.

If the patients did not have certain CPTs during the selected range, check the **Patient(s) did NOT have the following CPT(s) during the selected range** checkbox.

Use either of the option buttons to define the CPTs by taxonomy or by name.

By Taxonomy

To define patients with CPTs by taxonomy, select the **By Taxonomy** option button and select an option from the **By Taxonomy** list. If the selected Taxonomy includes certain items, those items display in the field below the **Selected Taxonomy Includes** label.

By Name

To define the patients with CPTs by name, select the **By Name** option button and click the **Edit** button to access the **Add/Remove CPTs** dialog.

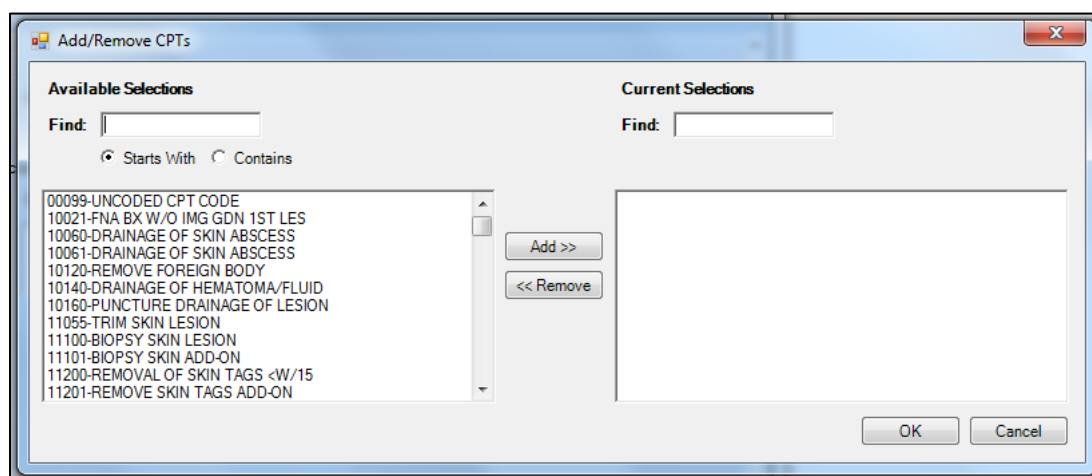


Figure 3-68: Sample **Add/Remove CPTs** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the items in the **Current Selection** field will populate the **By Name** field. (Otherwise, click **Cancel**.)

3.10.2.2 Exams Filter

Use the **Exams** group box to filter the population by Exams. This can be done by date range or for patients who did not have Exams during the selected range.

Figure 3-69: **Exams** filter options

The **Range** group box operates like the **Range** group box on CPTs. See the **CPTs Filter** section for more information.

After populating the date range or the timeframe fields, the bottom part of the group box becomes active.

If the patients did not have specific exams during the selected range, select the **Patient (s) did NOT have the following exam (s) during the selected range** checkbox.

Select the **Use AND?** checkbox when there are multiple exams. This option searches for patients who have *all* the exams.

If exams end in (S) for Set of Codes, the **Filter on Exam Values** checkbox becomes active.

Filter on Exam Values

Select the **Filter on Exam Values** checkbox to identify the exam values used in the filter.

☒ Filter on Exam Values

Exam Ranges

Exam	Range
DIABETIC FOOT EXAM, COMPLETE (S)	
DIABETIC EYE EXAM (S)	

Edit

Delete

Figure 3-70: Sample **Filter on Exam Values** selections

Edit

Select a name under the Exam column to edit and then click **Edit**. The application displays the **Exam Detail** dialog.

Exam Detail for DIABETIC FOOT EXAM, COMPLETE (S)

Please select the values:

- ABNORMAL
- NORMAL/NEGATIVE
- REFERRAL NEEDED

>>

<<

OK Cancel

Figure 3-71: Sample **Exam Detail** values dialog

Click the arrow (>> or <<) buttons to select the values on which to filter. After the dialog, click **OK**, and the Range value will populate on the **Exam Ranges** group box. (Otherwise, click **Cancel**.)

Delete

Use the **Delete** function to delete a selected row in the grid. Select the row to delete and then click **Delete** to access the Delete Row information message, “Choose Yes to delete the row or No to exit.” Click **Yes** to delete the row (otherwise, click **No**.)

3.10.2.3 Health Factors Filter

Use the **Health Factors** group box to filter the population by health factors. This can be by date range or for patients who did not have health factors during the selected range to filter by Taxonomy, Category, or Health Factor Name.

Figure 3-72: **Health Factors** filter options

Range–By Date

Click the **By Date** option button to enter the date range for the lab tests. For one day only, both the beginning and end dates must be the same.

Range–By Timeframe

If **By Timeframe** is selected, the panel could be set to auto-repopulate automatically. Section 6.0 provides information about this function.

Select the **Timeframe** option button to select the timeframe associated with the date range (it cannot be blank). Valid choices are on the list.

After populating the date range or the timeframe, the bottom part, where a selection of health factors by Taxonomy, Category, or Name, becomes active.

If the patients did not have the following immunizations during the selected range, select the **Patient(s) did NOT have the following health factor (s) during the selected range** checkbox. Use any one of the option buttons to define by taxonomy, by vaccine group, or by vaccine name.

By Taxonomy

To find patients with certain immunizations by taxonomy, select the **By Taxonomy** option button and select an option from the **By Taxonomy** list. Taxonomies for immunizations contain CVX codes. If the selected taxonomy includes certain items, those items display in the field below the **Taxonomy Selection Includes** label.

Figure 3-73: **By Taxonomy** selection

By Category

To find patients with specific health factors by category, select the **By Category** option button and click the **Edit** button to access the **Add/Remove Categories** dialog.

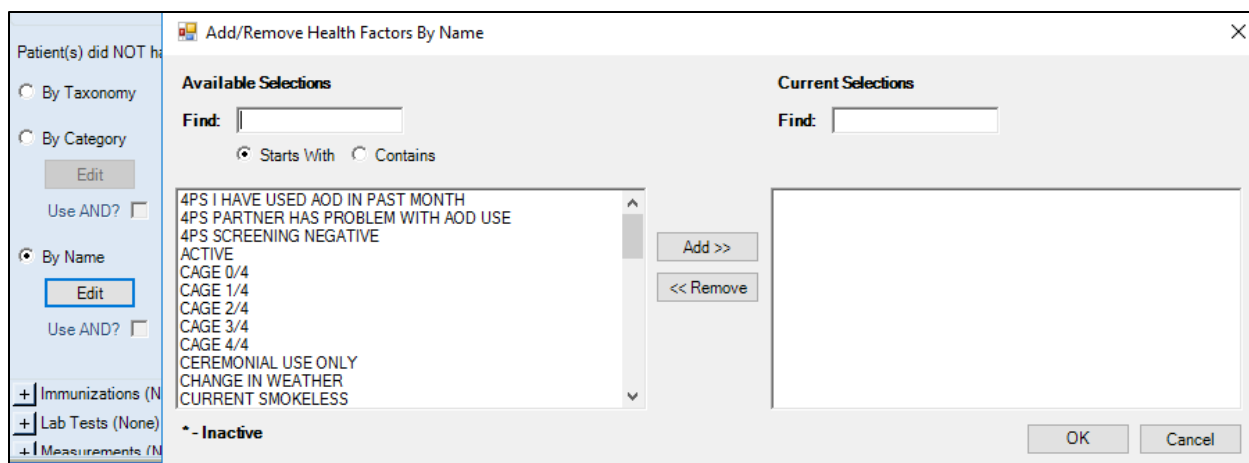
Figure 3-74: **Add/Remove Category** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the items in the **Current Selection** field will populate the **Category** field. (Otherwise, click **Cancel**.)

Select the **Use AND?** checkbox when there are multiple Categories. This option searches for patients with *all* the health factors in the selected category(s).

By Name

To define the patients with a specific Health Factor by name, select the **By Name** option button and click the **Edit** button to access the **Add/Remove Health Factors** dialog.

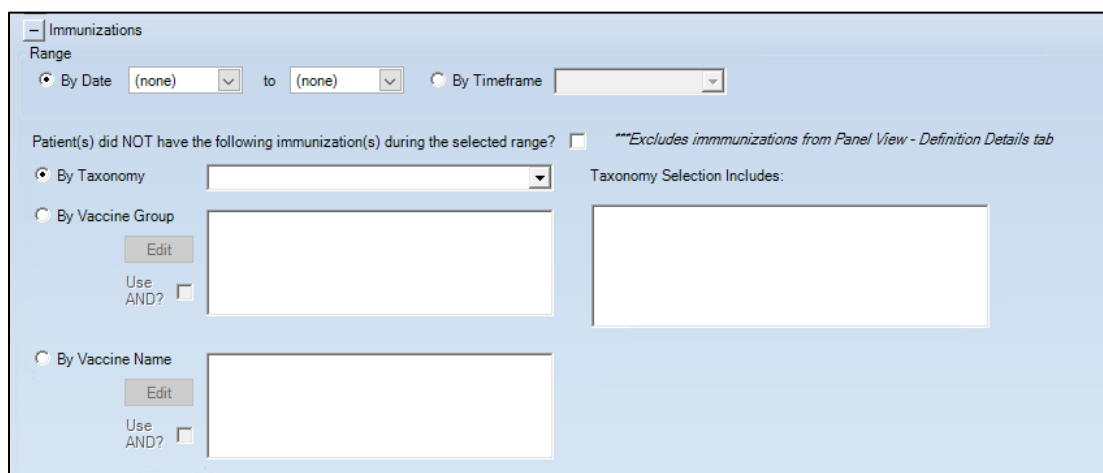
Figure 3-75: **Add/Remove Health Factors By Name** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the items in the **Current Selection** field will populate the **By Name** field. (Otherwise, click **Cancel**.)

Select the **Use AND?** checkbox when there are multiple Health Factors. This option searches for patients who have *all* the selected Health Factors.

3.10.2.4 Immunizations Filter

Use the **Immunizations** group box to filter the population by immunizations. This can be by date range or for patients who did not have immunizations during the selected content to filter by Taxonomy, Vaccine Group, or Vaccine Name. For example, patients with High-Risk Conditions have not had a COVID-19 immunization.

Figure 3-76: **Immunizations** filter options

Range–By Date

Click the **By Date** option button to enter the date range for the lab tests. For one day only, both the beginning and end dates must be the same.

Range–By Timeframe

If **By Timeframe** is selected, the panel could be set to auto-repopulate automatically. Section 6.0 provides information about this function.

Select the **Timeframe** option button to select the timeframe associated with the date range (it cannot be blank). Valid choices are on the list.

After populating the date range or timeframe, the bottom part is where a selection of immunizations by taxonomy, vaccine group, or vaccine name becomes active.

Patient(s) did NOT have the following immunization(s) during the selected range? ☐ ***Excludes immunizations from Panel View - Definition Details tab

☒ By Taxonomy Taxonomy Selection Includes:

☐ By Vaccine Group Edit Use AND? ☐

☐ By Vaccine Name Edit Use AND? ☐

Figure 3-77: Active immunizations By Taxonomy, By Vaccine Group, or By Vaccine Name

If the patients did not have the following immunizations during the selected range, select the **Patient(s) did NOT have the following immunization(s) during the selected range** checkbox. Use any one of the option buttons to define by taxonomy, vaccine group, or vaccine name.

By Taxonomy

To find patients with certain immunizations by taxonomy, select the **By Taxonomy** option button and select an option from the **By Taxonomy** list. Taxonomies for immunizations contain CVX codes. If the selected taxonomy includes certain items, those items display in the field below the **Taxonomy Selection Includes** label.

☒ By Taxonomy Taxonomy Selection Includes:

☐ By Vaccine Group Edit Use AND? ☐

BGP FLU IZ CVX CODES
BGP HPV CVX CODES
BGP IPC DTAP CVX CODES
BGP IPC HEPA CVX CODES
BGP IPC HEPB CVX CODES
BGP IPC HIB 3-DOSE CVX CODES
BGP IPC HIB 4-DOSE CVX CODES

Figure 3-78: By Taxonomy selection

By Vaccine Group

To find patients with certain immunizations by vaccine group, select the **By Vaccine Group** option button and click the **Edit** button to access the **Add/Remove Vaccine Group** dialog.

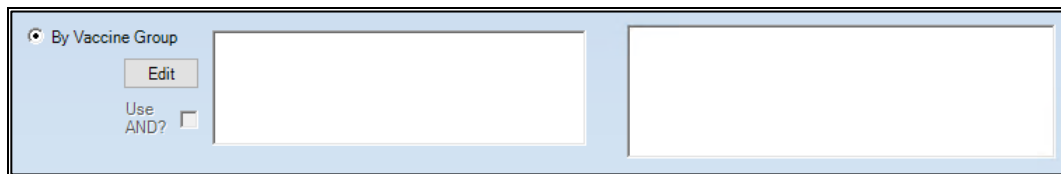


Figure 3-79: **Vaccine Group** selection

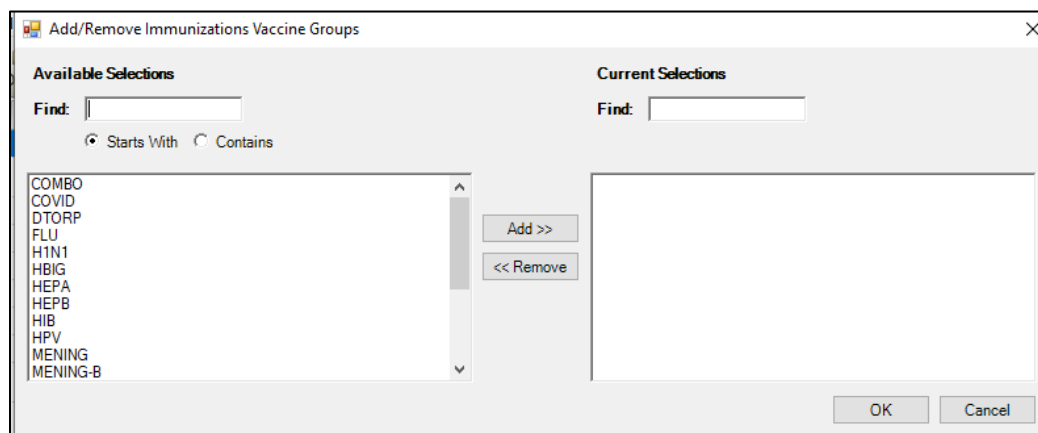


Figure 3-80: **Add/Remove Vaccine Group** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the items in the **Current Selection** field will populate the **Vaccine Group** field. (Otherwise, click **Cancel**.)

Select the **Use AND?** checkbox when there are multiple Immunizations. This option searches for patients with *all* the immunizations in the selected vaccine group(s).

By Vaccine Name

To define the patients without an immunization by name, select the **By Vaccine Name** option button and click the **Edit** button to access the Add/Remove Immunizations dialog.

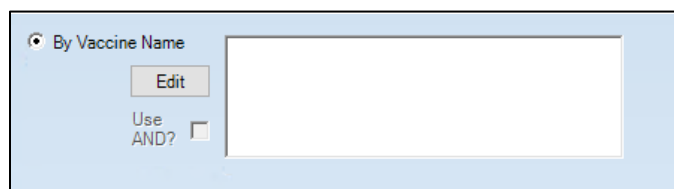


Figure 3-81: **By Vaccine Name** selection

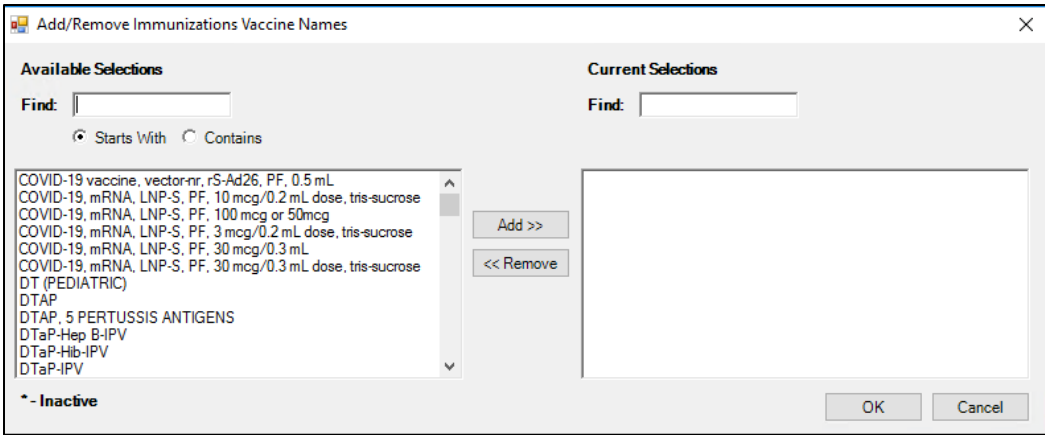


Figure 3-82: **Add/Remove Immunizations** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the items in the **Current Selection** field will populate the **By Name** field. (Otherwise, click **Cancel**.)

Select the **Use AND?** checkbox when there are multiple Immunizations. This option searches for patients who have *all* the selected immunizations.

3.10.2.5 **Lab Tests Filter**

Use the **Lab Test** group box to filter the population by lab tests. This can be by date range or for patients who did not have lab tests during the selected content to filter by Taxonomy or by Name. For example, patients with the pregnancy tag who have not had an HIV screening.

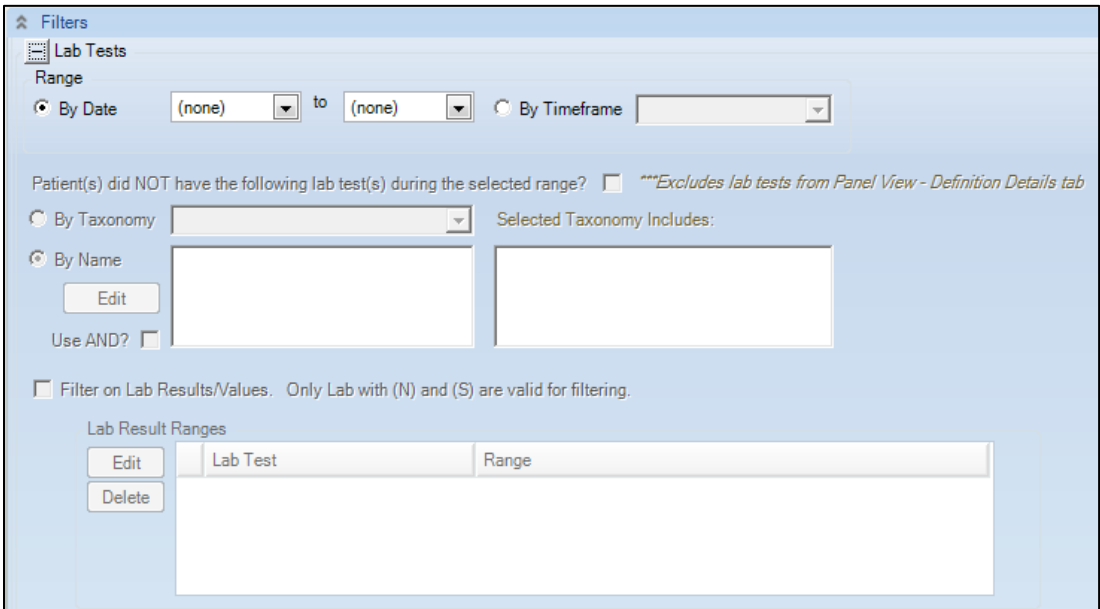


Figure 3-83: **Lab Tests** filter options

Range–By Date

Click the **By Date** option button to enter the date range for the lab tests. For one day only, both the beginning and end dates must be the same.

Range–By Timeframe

If **By Timeframe** is selected, the panel could be set to auto-repopulate automatically. Section 6.0 provides information about this function.

Select the **Timeframe** option button to select the timeframe associated with the date range (it cannot be blank). Valid choices are on the list.

After populating the date range or the timeframe, the bottom part of the group box becomes active.

Figure 3-84: Bottom part of **Lab Tests** group box

If the patients did not have the following lab tests during the selected range, select the **Patient(s) did NOT have the following lab test(s) during the selected range** checkbox. Use either option button to define by taxonomy or by name, for example, patients with an asthma tag who do not have a controller medication.

By Taxonomy

To define patients without lab tests by taxonomy, select the **By Taxonomy** option button and select an option from the **By Taxonomy** list. If the selected taxonomy includes certain items, those items display in the field below the **Selected Taxonomy Includes** label.

Selecting a taxonomy activates the **Filter on the Lab Results/Values** area.

By Name

To define the patients without lab tests by name, select the **By Name** option button and click the **Edit** button to access the **Add/Remove Lab Tests** dialog.

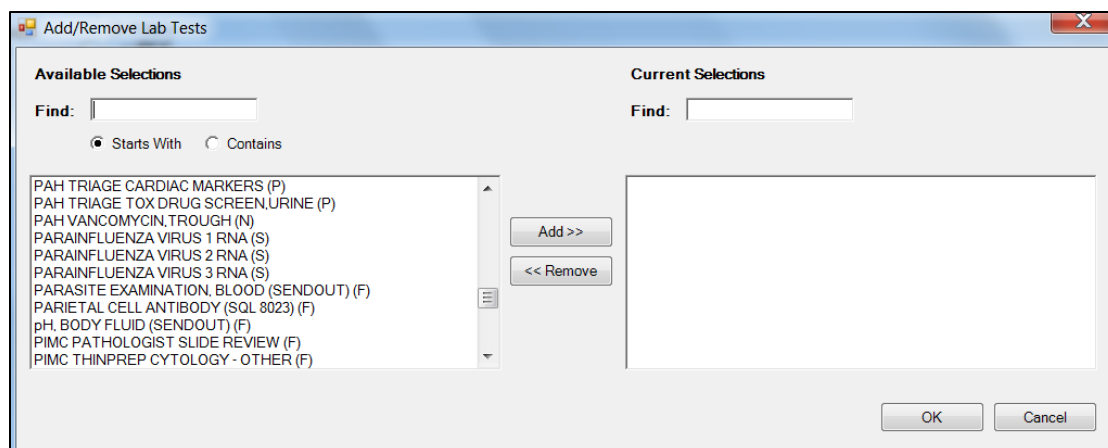


Figure 3-85: Sample **Add/Remove Lab Tests** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the items in the **Current Selection** field will populate the **By Name** field. (Otherwise, click **Cancel**.)

Select the **Use AND?** checkbox when there are multiple lab tests. This option searches for patients who have *all* the lab tests.

At the end of each lab test, the name is the definition of the result for that lab test in parentheses. **P** means it is defined as a panel of lab tests, and panels do not typically have results. **N** means numeric, and numeric results can be further filtered. **S** means a set of codes, and those types of results can also be further filtered. **F** means free text, and free text cannot be searched.

After selecting the **By Name** lab tests with a lab test of **(N)** or **(S)**, the Filter on Lab Results/Values becomes active.

Filter on Lab Results/Values

Select the **Filter on Results/Value** checkbox to identify the lab result ranges for the filter. The application populates the appropriate taxonomy name(s).

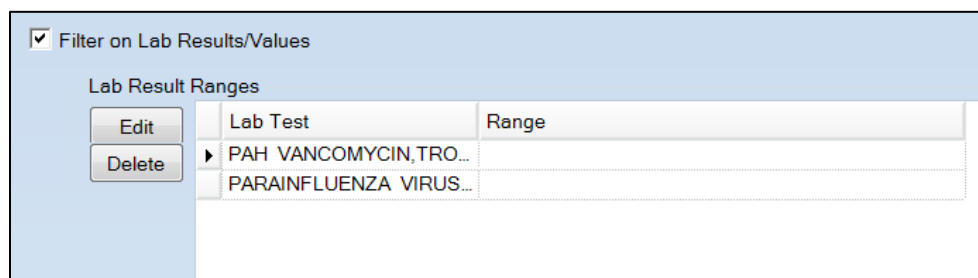


Figure 3-86: Sample **Filter on Lab Results/Values** selections

Edit

Select a name under the **Lab Test** column to edit and click **Edit**. The application displays the **Lab Result Detail** dialog.

Figure 3-87: Sample **Numeric Lab Result Detail** dialog

Select an option from the list and populate the second field with the result number. After the dialog, click **OK**, and the Range value will populate on the **Lab Result Ranges** group box. (Otherwise, click **Cancel**.)

Figure 3-88: Sample **Set of Codes Lab Result Detail** dialog

Delete

Use the **Delete** function to delete a selected row in the grid. Select the row to delete and click **Delete** to access the **Delete Row** information message, “Choose Yes to delete the row or No to exit.” Click **Yes** to delete the row (otherwise, click **No**.)

3.10.2.6 Measurements Filter

Use the **Measurements** group box to filter by measurement (vital signs).

Figure 3-89: Sample **Measurements** group box

Range–By Date

Click the **By Date** option button where the date range for the measurements is entered. The beginning and end dates must be the same if the range is only one day.

Range–By Timeframe

If this option is selected, the panel should be set to auto-repopulate automatically at first login. Section 6.0 provides information about this function.

Select the **Timeframe** option button to select the timeframe associated with the date range (it cannot be blank). Valid choices are on the list.

After populating the date range or the timeframe, the bottom part of the group box becomes active.

Figure 3-90: Bottom portion of the Measurements filter options

If the patients did not have the following measurements during the selected range, select the **Patient(s) did NOT have the following measurement(s) during the selected range** checkbox.

There are no taxonomies for Measurements, so the only selection is by individual measurement types. Click the **Edit** button for the list of measurements.

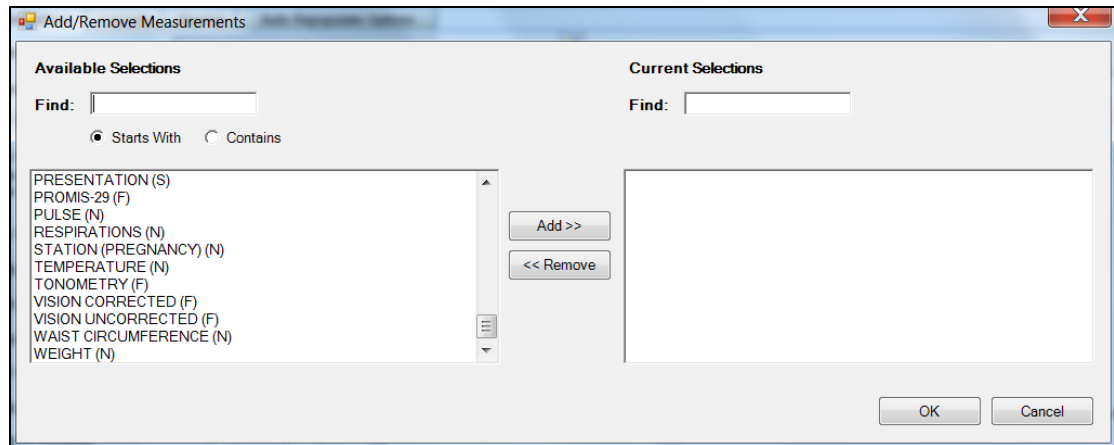


Figure 3-91: Sample **Add/Remove Measurements** dialog

At the end of each measurement, the name is the definition of the result for that measurement in parentheses. **N** means numeric, and numeric results can be further filtered. **S** means a set of codes, and these types of results can also be further filtered. **F** means free text, and free text cannot be searched.

After selecting any measurement with (N) or (S), the **Filter on Measurement Values** section becomes active.

Filter on Measurement Values

Select the **Filter on Measurements Value** checkbox to identify the measurements for the filter.

PRESENTATION (S)
 STATION (PREGNANCY) (N)

Use AND? ☐

☒ Filter on Measurement Values

Measurement Ranges

Measurement	Range
PRESENTATION (S)	
STATION (PREGNANCY) (N)	

Figure 3-92: Sample **Filter on Measurement Values** selections

Select the **Use AND?** checkbox when there are multiple measurements. This option searches for patients who have *all* the measurements. For example, not selecting **Use AND?** returns a result of all patients with Presentation *or* Station (Pregnancy). Checking **Use AND?** returns a result of all patients with a Presentation *and* a Station (Pregnancy) measurement.

Edit

Select a name under the Measurement column to edit and click **Edit**. The application displays the **Measurement Detail** dialog.

Measurement Detail for PRESENTATION (S)

Please select the values:

- VERTEX
- COMPLETE BREACH
- DOUBLE FOOTLING
- SINGLE FOOTLING
- FRANK BREACH
- FACE

>> <<

OK Cancel

Figure 3-93: **Measurement Detail** dialog for a set of codes values

Measurement Detail for STATION (PREGNANCY) (N)

Please enter the value range:

greater than or equal to -6

less than
less than or equal to
equal to
greater than or equal to
greater than
in range (inclusive)
out of range (exclusive)

OK Cancel

Figure 3-94: **Measurement Detail** dialog for numeric values

Delete

Use the Delete function to delete a selected row in the grid. Select the row to delete and then click **Delete** to access the **Delete Row** information message, “Choose Yes to delete the row or No to exit.” Click **Yes** to delete the row (otherwise, click **No**.)

3.10.2.7 Medications Filter

Use the **Medications** group box to filter by medications.

Medications

☐ No Documented Medications ☐ No Active Medications ☐ Medication List Not Reviewed in Last 365 Days

Range

☒ By Date (none) to (none) ☐ By Timeframe

Patient(s) did NOT have the following medication(s) during the selected range? ☐ ***Excludes medications from Panel View - Definition Details

☐ By Taxonomy Selected Taxonomy Includes:

☒ By Name

Edit

Use AND? ☐

Figure 3-95: Sample **Medications** filter options

Select any of the checkboxes at the top. This will cause all the remaining fields to become inactive.

No Documented Medications

Select this checkbox if the patient's medications were not documented. This action causes the **No Active Medications** checkbox to become inactive, but the **Medication List Not Reviewed** checkbox stays active.

No Active Medications

Select this checkbox if the patient has no active medications. This action causes the **No Documented Medications** checkbox to become inactive, but the **Medication List Not Reviewed** checkbox stays active.

Medication List Not Reviewed

Select this checkbox if the patient's medication list has not been reviewed.

The **Range** group box operates like the **CPT** group box. See the **CPTs Filter** section for more information.

After populating the date range or the timeframe, the bottom part of the group box becomes active.

If the patient did not have the medications during the selected range, select the **Patient(s) did NOT have the following medication(s) during the selected range** checkbox.

Use either of the option buttons to define the medications by taxonomy or by name. These operate like those in CPTs. See the **CPTs Filter** section for more information about these option buttons.

3.10.2.8 Patient Education Filter

Use the **Patient Education** group box to filter by patient education given to the patients.

Figure 3-96: **Patient Education** group box

The **Range** group box operates the **Range** group box for CPTs. Section **CPTs Filter** provides information about this group box.

After populating the date range or the timeframe, the bottom part of the group box becomes active.

If the patients did not attend patient education classes during the selected range, select the **Patient(s) did NOT participate in the following education classes during the selected range** checkbox.

Figure 3-97: Lower group box for **Patient Education** filter

By Name

To define patients not attending patient education classes by name, select the **By Name** option button.

Figure 3-98: **By Name** selections

Click **Edit** to access the Add/Remove PatEd dialog.

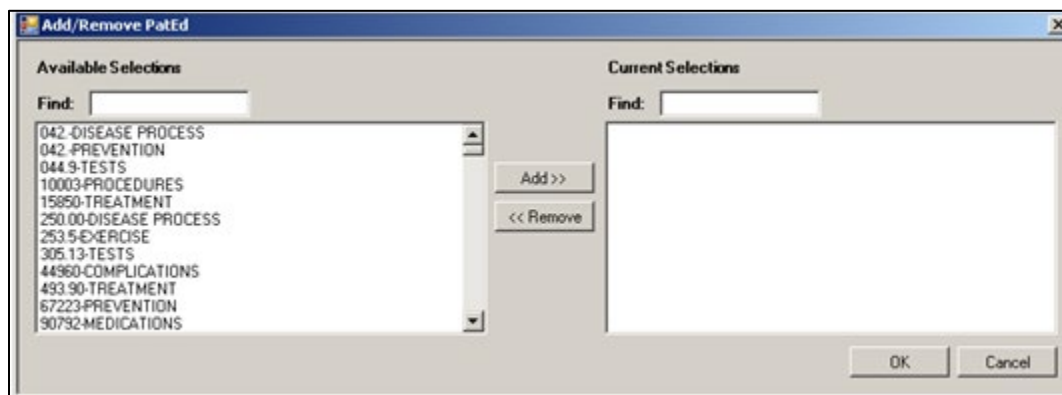


Figure 3-99: Sample **Add/Remove PatEd** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the items in the Current Selections group box will populate the **By Name** field with the **Edit** button. (Otherwise, click **Cancel**.)

Select the **Use AND?** checkbox when there are multiple patient education classes. This option searches for patients who have *all* the classes.

The **By EHR Pick List**, **By Topic**, and **By Taxonomy** option buttons operate similarly. See the example below using the EHR pick list.

By EHR Pick List

To define patients not attending patient education classes by EHR Pick List, select the By EHR Pick List option button.



Figure 3-100: **By EHR Pick List** option button

Select an option from the list. The selection populates the **Selection Includes** field.

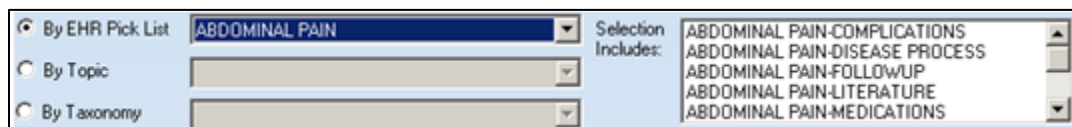


Figure 3-101: **Populated By EHR Pick List**

3.10.3 Problems Filter

Use the **Problem** group box to filter the population by patient problems.

Figure 3-102: **Problem** section

No Documented Problems

Select this checkbox if the patient's problem list is not documented. This action causes the **No Active Problems** checkbox to become inactive, but the **Problem List Not Reviewed** checkbox stays active.

No Active Problems

Select this checkbox if the patient has no active problems. This action causes the **No Documented Problems** checkbox to become inactive, but the **Problem List Not Reviewed** checkbox stays active.

Problem List Not Reviewed in Last 365 Days

Select this checkbox if the patient's problem list has not been reviewed in 365 days.

Range

The **Range** group box operates like the **CPTs (or other PCC)** group box. See the **CPTs Filter** section for information about the CPTs group box.

After populating the **By Date** or **By Timeframe** option, the bottom part of the group box becomes active.

☐ By Taxonomy

☒ By Name

☐ By SNOMED Subset

☐ By SNOMED

Edit

Use AND? ☐

Edit

Use AND? ☐

Status:

Edit

Selected Taxonomy Includes:

Subset Selection Includes:

Figure : Lower part of the **Problem** filter section

Use either of the option buttons to define the problems by taxonomy or by name OR by SNOMED Subset or By SNOMED. These operate like those in the **POVs** group box. The **POVs Filter** section provides information about these option buttons.

By Taxonomy

To define patients by taxonomy, select the **By Taxonomy** option button and select an option from the **By Taxonomy** list. If the selected taxonomy includes certain items, those items display in the field below the **Selected Taxonomy Includes** label. With a taxonomy selection, it is more difficult to determine how many patients might be found. Problem taxonomies are all diagnosis-defined taxonomies.

☒ By Taxonomy

☐ By Name

☐ By SNOMED Subset

☐ By SNOMED

BKM SYPHILIS DXS

Edit

Use AND? ☐

Edit

Use AND? ☐

Status:

CHRONIC
SUB-ACUTE
EPISODIC
SOCIAL

Edit

Selected Taxonomy Includes:

LATENT SYPHILIS NOS
SYPHILIS NOS
Primary genital syphilis
Primary anal syphilis
Primary syphilis of other sites

Subset Selection Includes:

Figure 3-103: **Add/Remove Problems by Taxonomy** dialog

By Name

To find the patients with a specific problem, select the **By Name** option button and click the **Edit** button to access the **Add/Remove Problems dialog**.

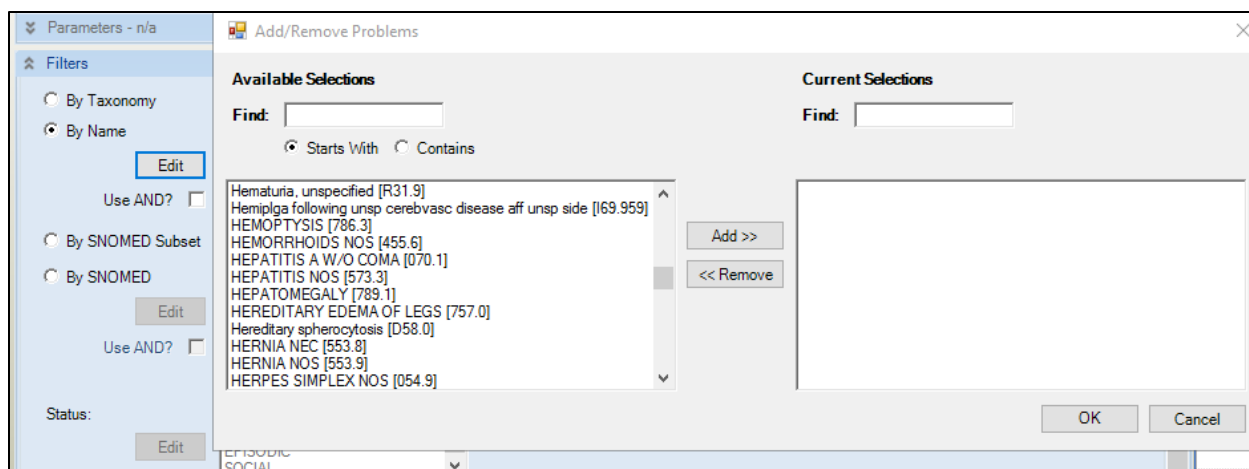


Figure 3-104: Add/Remove Problems by Name dialog

The By Name selection gives the actual ICD code in brackets, e.g., [427.31]. The difference between ICD-9 and ICD-10 is that the name of ICD-9 is usually in all capitals, and ICD-10 names are in upper and lower case.

By SNOMED Subset

Since implementing the Integrated Problem List (IPL), SNOMED codes have become a part of RPMS. New functionality to select the **By SNOMED Subset** and **By SNOMED** option buttons has been added to the Problem search.

SNOMED subsets are like taxonomies. Subsets contain a list of SNOMED IDs associated with a particular topic and can be used for searches in the same manner as taxonomies.

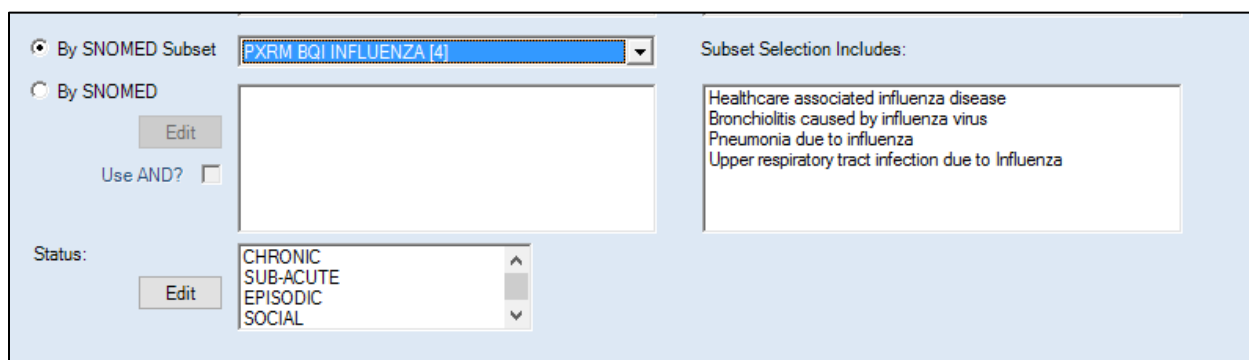
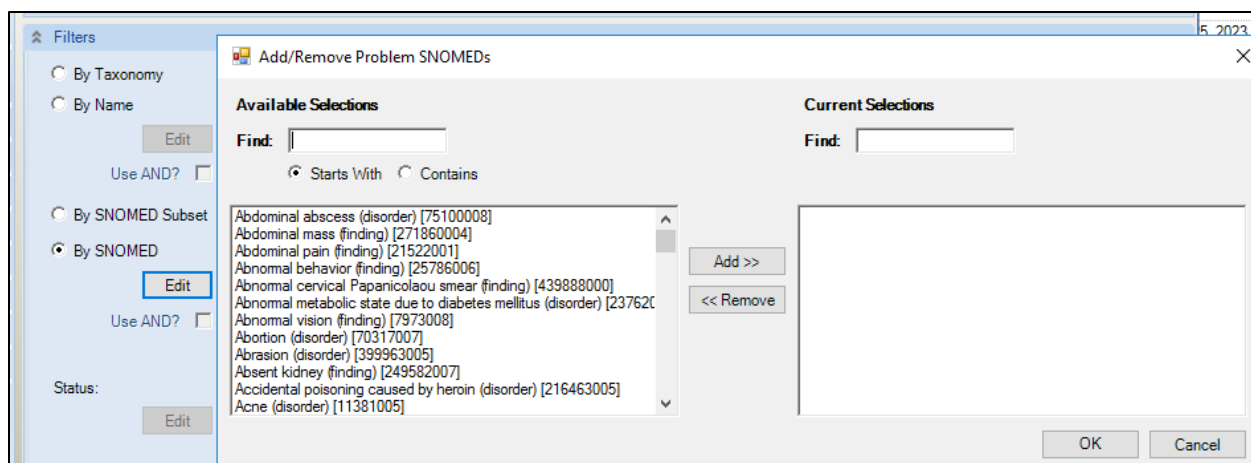


Figure 3-105: Add/Remove Problems by SNOMED Subset dialog

By SNOMED

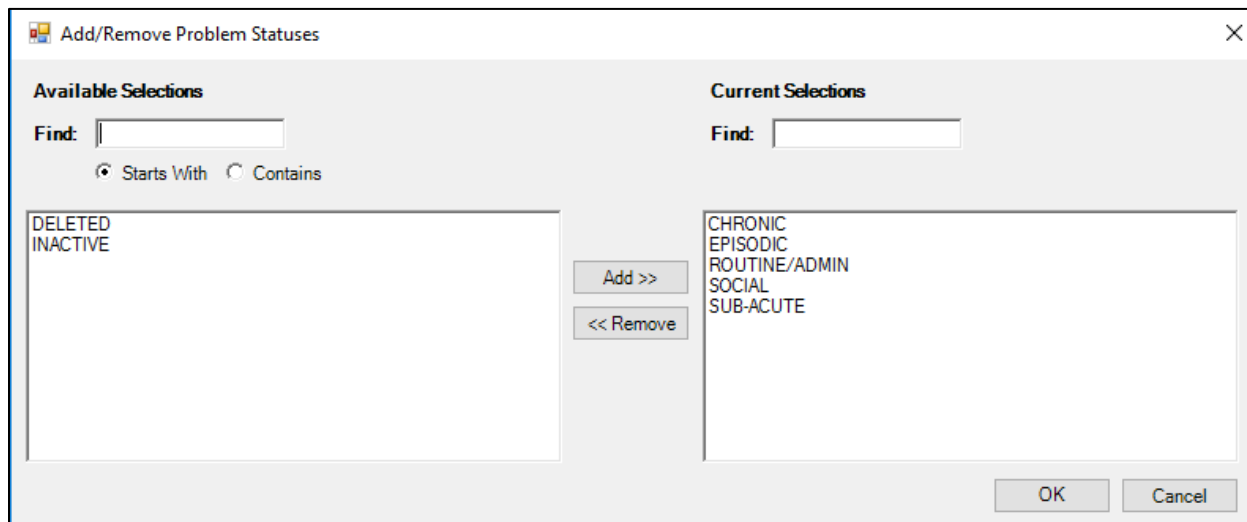
To find the patients with a specific Problem SNOMED, select the **By SNOMED** option button and click the **Edit** button to access the **Add/Remove POV SNOMEDs** dialog.

Figure 3-106: **Add/Remove Problems by SNOMED** dialog

Note: By Name and By SNOMED are specific entries to your facility based on what is entered into the IPL.

Status

The **Status** field becomes active after using either the **By Taxonomy**, **By Name**, **By SNOMED Subset**, or **By SNOMED** option button. This allows the user to filter the patient problems by status. Click **Edit** to access the **Add/Remove Problem Statuses** dialog.

Figure 3-107: **Add/Remove Problem Statuses** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the items in the Current Selections group box populate the **Status** field with the **Edit** button.

Select the **Use AND?** checkbox when looking for patients with a problem **AND** another problem. This option searches for patients who have *all* the issues selected.

3.10.4 Purpose of Visit (POV) Filter

Use the **POV** group box to filter the population by patient POV.

POV
Range

☒ By Date (none) to (none) ☐ By Timeframe

☐ By ICD Taxonomy Taxonomy Selection Includes:

☒ By ICD Edit Use AND? ☐

☐ By SNOMED Subset Subset Selection Includes:

☐ By SNOMED Edit Use AND? ☐

Figure 3-108: **POV** filter section

Range

The **Range** group box operates like the **CPT** group box. Section **CPTs Filter** provides information about the CPT group box.

After populating the **By Date** or **By Timeframe** option, the bottom part of the group box becomes active.

POV
Range

☐ By Date (none) to (none) ☒ By Timeframe Last Calendar Month

☐ By ICD Taxonomy Taxonomy Selection Includes:

☒ By ICD Edit Use AND? ☐

☐ By SNOMED Subset Subset Selection Includes:

☐ By SNOMED Edit Use AND? ☐

Figure 3-109: Lower part of the **POV** filter section

By ICD Taxonomy

To define patients by taxonomy, select the **By Taxonomy** option button and select an option from the **By Taxonomy** list. If the selected taxonomy includes certain items, those items display in the field below the Selected Taxonomy Includes label. With a taxonomy selection, it is more difficult to determine how many patients might be found.

Figure 3-110: ICD Taxonomy selection

By ICD

To find the patients with a specific POV, select the **By ICD** option button and click the **Edit** button to access the **Add/Remove POV ICDs** dialog.

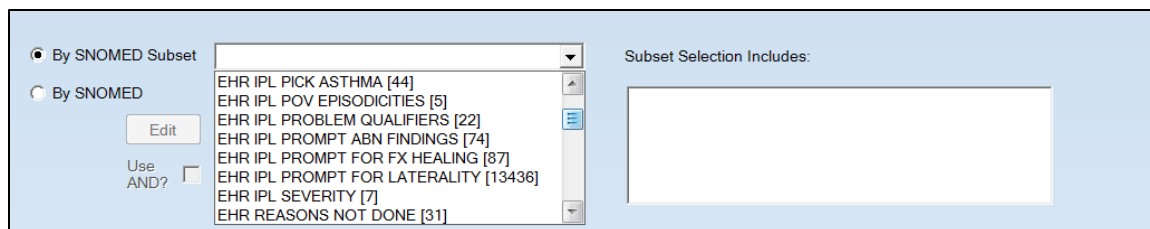
Figure 3-111: Sample **Add/Remove POV ICDs** dialog

The POV ICD selection gives the actual ICD code in brackets, e.g., [427.31], and a count of patients with that ICD in parentheses, e.g., (3900).

By SNOMED Subset

Since implementing the Integrated Problem List (IPL), SNOMED codes have become a part of RPMS. The POV search has added new functionality to select the **By SNOMED Subset** and **By SNOMED** option buttons.

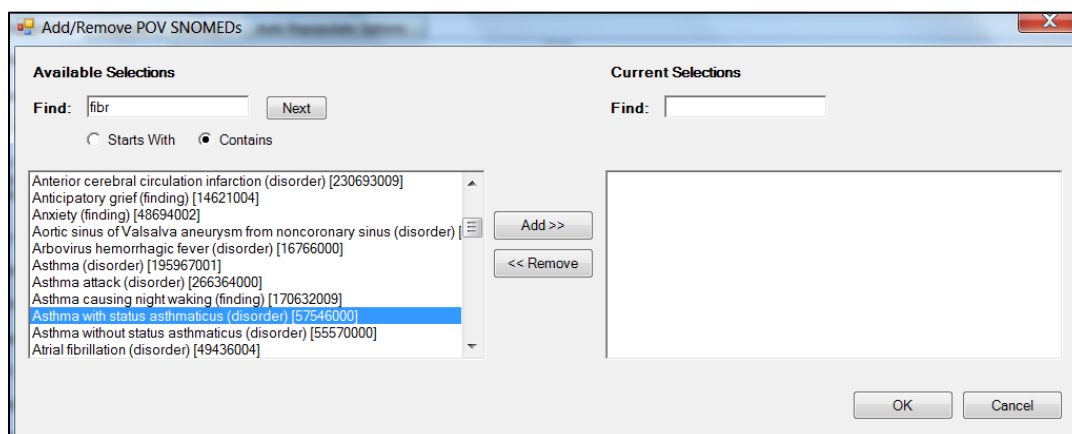
SNOMED subsets are like taxonomies. Subsets contain a list of SNOMED IDs associated with a particular topic and can be used for searches in the same manner as taxonomies.

Figure 3-112: **By SNOMED Subset** option button

Some subsets are exceptionally large and should be used sparingly. The number of SNOMED IDs in a subgroup can be found in the brackets after the subset name.

By SNOMED

To find the patients with a specific POV SNOMED, select the **By SNOMED** option button and click the **Edit** button to access the **Add/Remove POV SNOMEDs** dialog.

Figure 3-113: Sample **Add/Remove POV SNOMEDs** dialog

3.10.5 Reminders

Use the **Reminder** group box to filter the population by patient reminders.

Figure 3-114: **Reminders** options

Reminder

Select a reminder from the list to restrict the search to a particular reminder.

Figure 3-115: **Overdue/Due** option buttons and **Range** group box

Overdue/Due

Determine the reminder's status by selecting either the **Due** or **Overdue** option button. Selecting **Due** will activate the **Range** group box controls.

By Date

Select the **By Date** option button to enter the date range for the minimum number of visits with the provider. The beginning and ending dates must be the same if the range is only one day.

By Timeframe

If this option is selected, the panel should be set to automatically Auto Repopulate at first login (refer to Section 6.0, Auto Repopulate Options Tab, for more information).

Select the **By Timeframe** option button to select the timeframe associated with the date range (it cannot be blank). Valid choices are on the list.

3.10.6 Visit Filter

The **Visit** group box defines the visit filter by Visit Range and Visit Detail.

Visit

Visit Range

☒ By Date (none) to (none)

☐ By Timeframe

of Visits*: greater than or equal to 1

Warning: Additional filters can prevent user finding data

By Service Category

Edit

Provider Type\Name

By Provider Name

Edit

☐ DPCP

☐ Primary Visit Provider

☐ Secondary Visit Provider

By Location of Encounter

Edit

By Hospital Location

Edit

By Visit Clinic

Edit

Figure 3-116: **Visit** filter options

Visit Range

Use the **Visit Range** option to filter the patients to visits by date range or timeframe.

Visit

Visit Range

☒ By Date (none) to (none)

☐ By Timeframe

of Visits*: greater than or equal to 1

Figure 3-117: **Visit Range** group box

Enter a filter using the fields in the **Visit** group box for either **By Date** or **By Timeframe** (not both) and # of Visits.

By Date

Select the **By Date** option button to enter a specific date range for the visit filter. The beginning and end dates must be the same to select only one day.

By Timeframe

Use this feature to define a panel once and have it auto-populated daily without manually changing the date range. Select an option from the list after clicking the **By Timeframe** option button.

of Visits

Specify the additional filter for the number of visits within the date range. Populate this field by selecting an option from the list (required). The modifier options (in the first field) are the same as those of age (less than, less than or equal to, equal to, greater than, greater than or equal to, in range, out of range). The purpose of the second field is to allow the user to create panels of patients who have had so many visits within a user-defined timeframe. The default value is 1. Use any value 1–99.

Visit Detail Group Box

After populating either option button in the **Visit Range** group box, the bottom part of the Visit filter becomes active.

Warning: Additional filters can prevent user finding data

By Service Category

Provider Type\Name
By Provider Name ☐ DPCP
☐ Primary Visit Provider
☐ Secondary Visit Provider

By Location of Encounter By Hospital Location

By Visit Clinic

Figure 3-118: Sample **Visit Detail** selections

Use this group box to create a panel based on the selected date, number of visits, or specific filters.

By Service Category

Visits can have different service categories. Most normal outpatient visits are AMBULATORY.

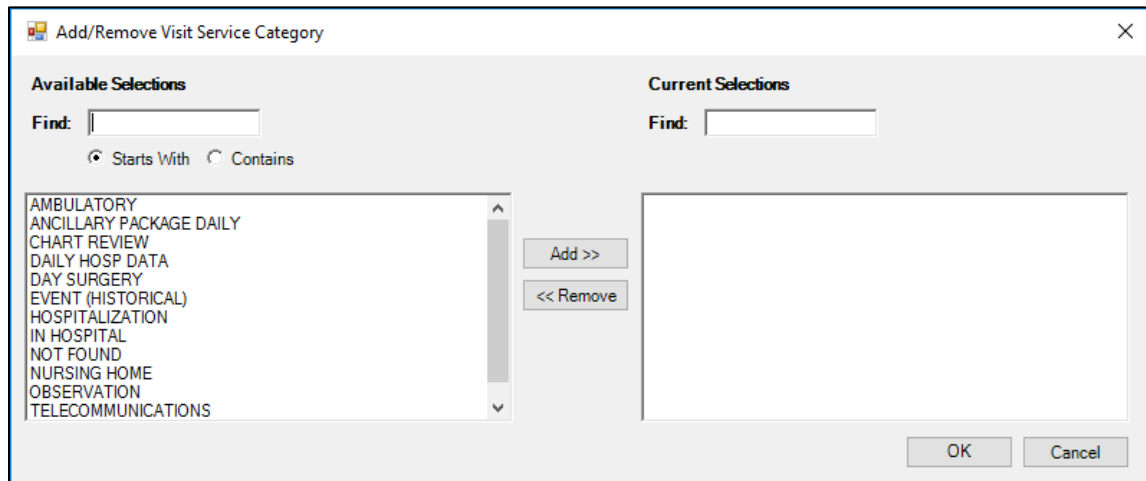


Figure 3-119: Sample **Service Category** selections

Provider Type/Name

Click the **Edit** button to select specific providers. This creates a panel based on the selected providers. Do not check the type if the type of provider does not matter. Check one or more types if the type of provider does matter.

By Location of Encounter

This selection may be more critical to those facilities that are multi-divisional or that record visits to other locations.

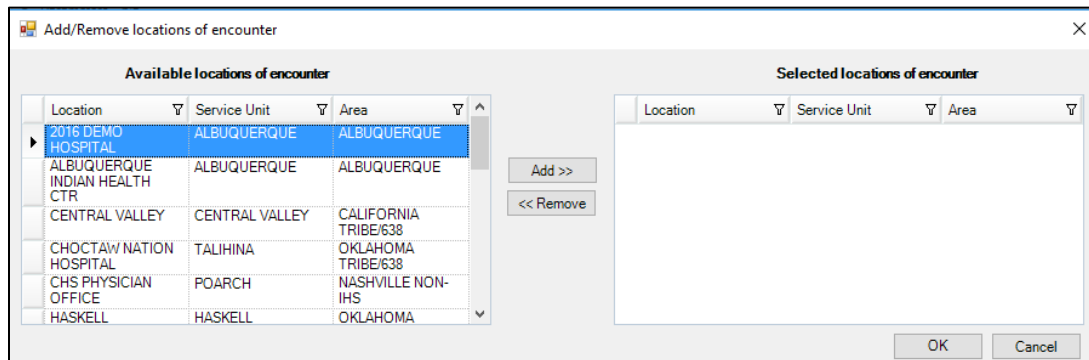


Figure 3-120: Sample **Location of Encounter** selections

Visit Clinic

A Visit Clinic is how the Clinic Code can link multiple Hospital Locations. A facility might have multiple hospital locations that happen to be defined as PEDIATRIC (20). Instead of selecting all Hospital Locations individually, select **Visit Clinic of PEDIATRIC**, and all Hospital Locations with the Clinic Code of 20 will be included.

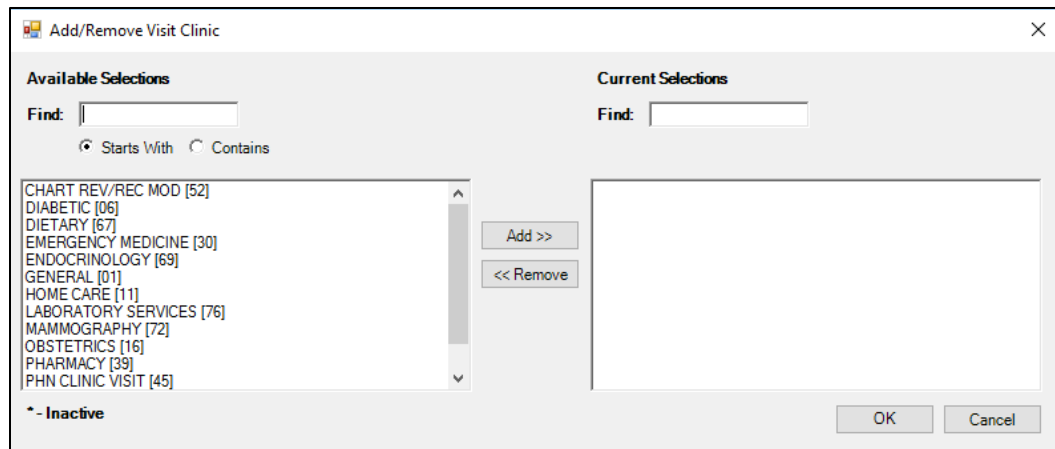


Figure 3-121: Sample **Visit Clinic** selections

Hospital Location

Hospital Locations can be either a Clinic or a Ward (if the facility provides inpatient care). These are unique single locations.

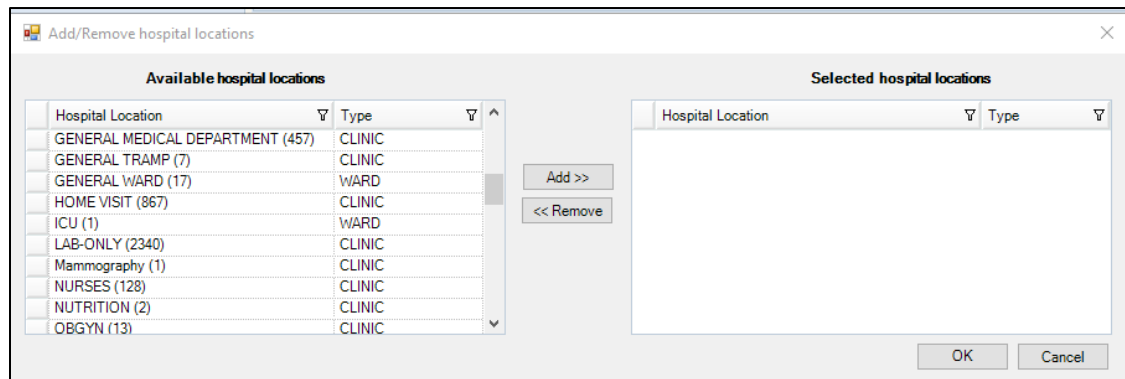


Figure 3-122: Sample **Hospital Location** selections

When the dialog is complete, click **OK**. Otherwise, click **Cancel**.

3.10.7 Orders

A panel can be created based on Orders.

The screenshot shows the 'Orders' dialog box with the following sections:

- Filters:**
 - ☒ **Date created**: (none) to (none)
 - ☐ **By Timeframe**: [dropdown]
 - ☐ **By Order Range (Future dates only)**:
 - Start from: (none) to (none)
 - (Optional) Stop from: (none) to (none)
- Class:**
 - ☒ **Outpatient**
 - ☐ **Inpatient**
 - ☐ **Both**
- Nature of Order:** [text area]
- Orderable Items:** [text area]
- Status:** [text area]
- Provider:** [text area]
- Location:**
 - ☐ **No Site Location**: [text area]
 - ☐ **No Hospital Location**: [text area]

Limited to 100 items

Figure 3-123: Sample **Order** selections

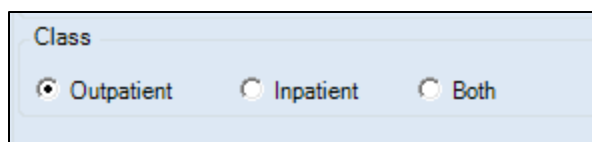
Range

The **Orders** dialog displays by Date or By Timeframe selections: **Date Created** and **Order Start/Stop**. **Date Created** uses a cross-reference with the date the order was created and the date the order was last modified. The **Order Start/Stop** dates are when an order should start or stop. This is usually a future date starting either today or tomorrow. Not all orders have an order start or stop date.

The filter selections become active after populating the **By Date** or **By Timeframe** option. **By Timeframe** only goes back to last year or last calendar year because some facilities may have millions of orders. The **By Date** range will need to be used to go back earlier than that.

Class

The default Class is Outpatient because not all facilities provide inpatient care.

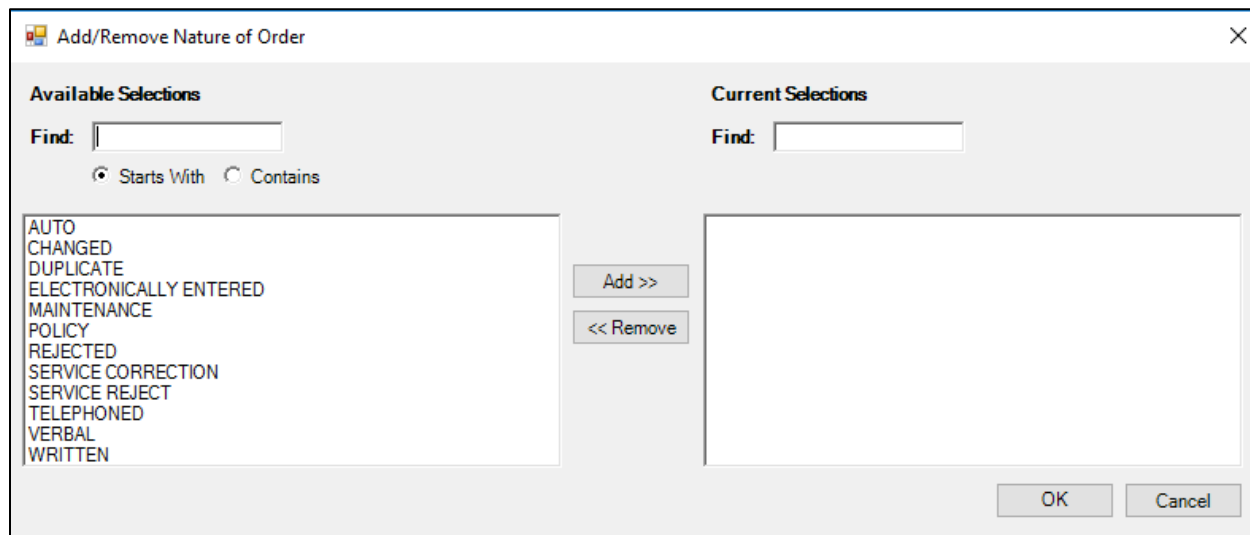


A dialog box titled "Class" with three radio button options: "Outpatient" (selected), "Inpatient", and "Both".

Figure 3-124: Sample Class selections

Nature of Order

Nature of Order are how the orders are being authenticated.



A dialog box titled "Add/Remove Nature of Order" with a close button (X) in the top right corner. It is divided into two main sections: "Available Selections" on the left and "Current Selections" on the right. Both sections have a "Find:" text box and radio buttons for "Starts With" (selected) and "Contains". The "Available Selections" list contains the following items: AUTO, CHANGED, DUPLICATE, ELECTRONICALLY ENTERED, MAINTENANCE, POLICY, REJECTED, SERVICE CORRECTION, SERVICE REJECT, TELEPHONED, VERBAL, and WRITTEN. Between the two lists are two buttons: "Add >>" and "<< Remove". At the bottom right are "OK" and "Cancel" buttons.

Figure 3-125: Sample **Nature of Order** selections

Orderable Items

Orderable items are those items that were ordered. This list is built during the initial installation and updated during the iCare nightly background job if new orderable items are entered and ordered.

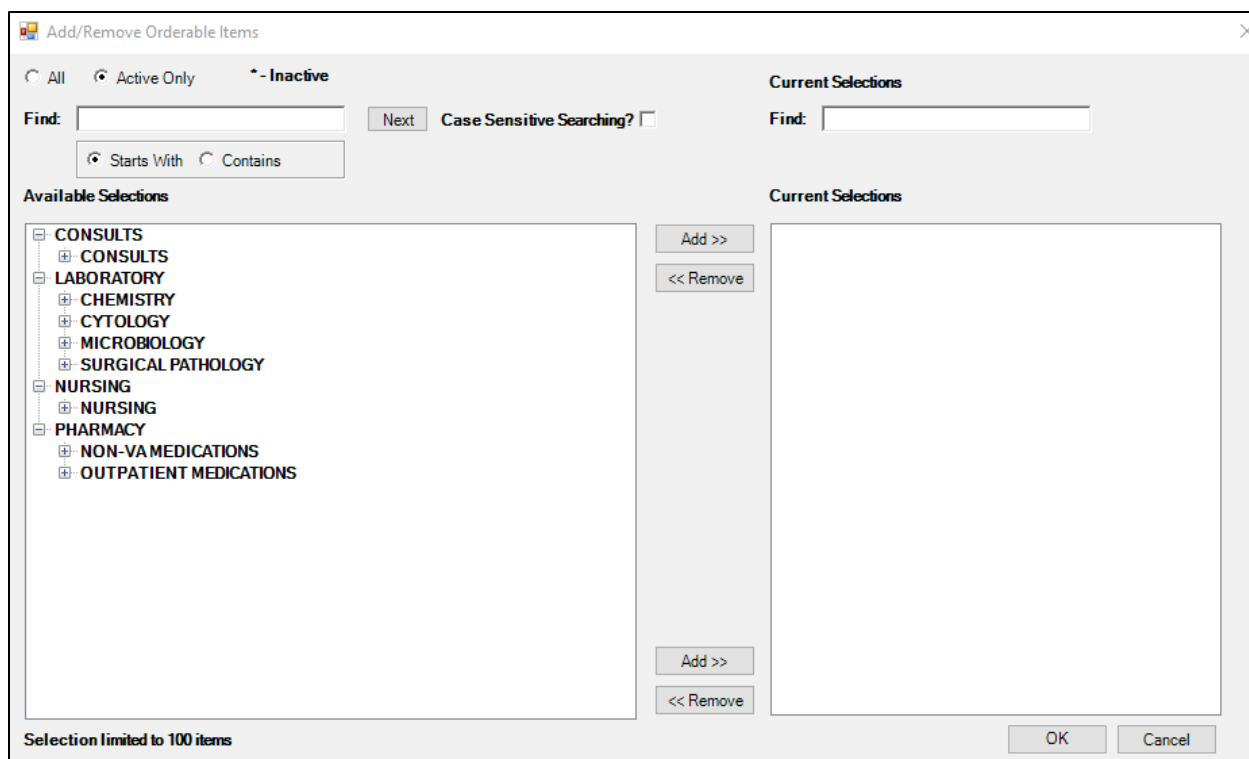
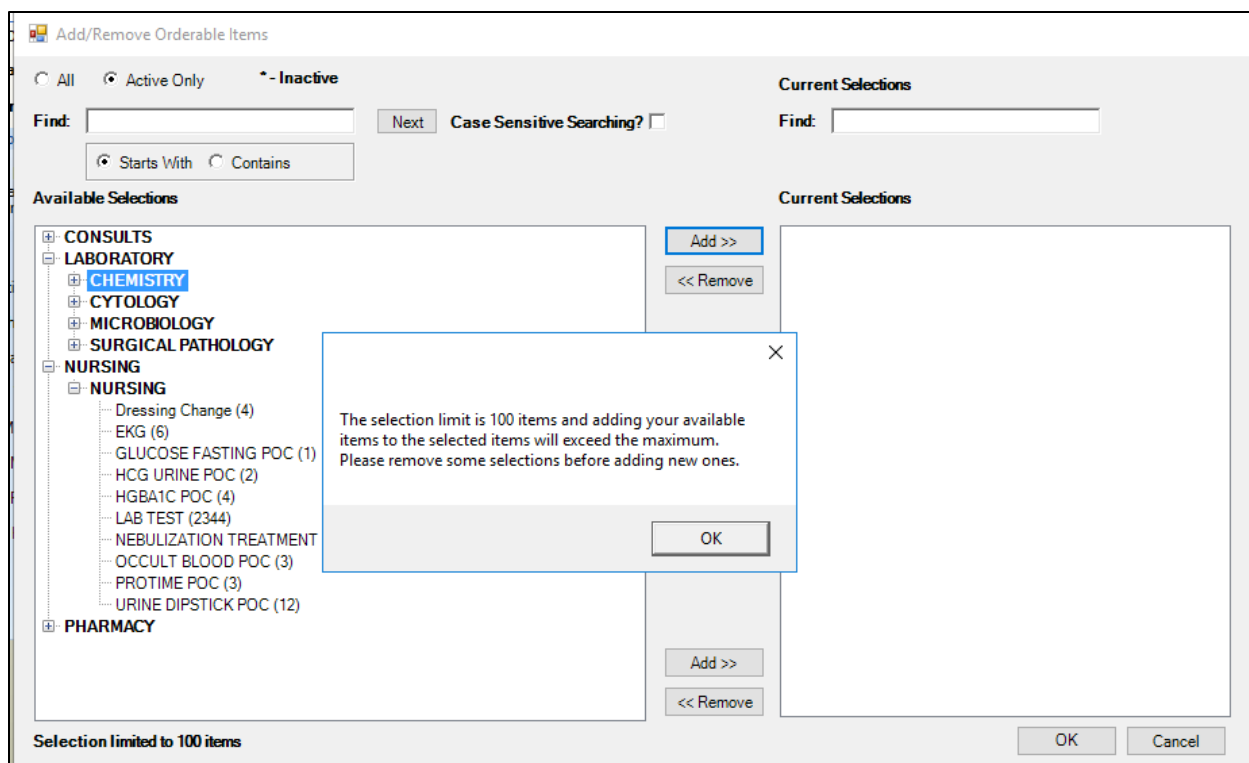


Figure 3-126: Sample **Orderable Items** selections

Some items can exist under different category types. For example, a drug-orderable item could be a non-VA or outpatient medication.

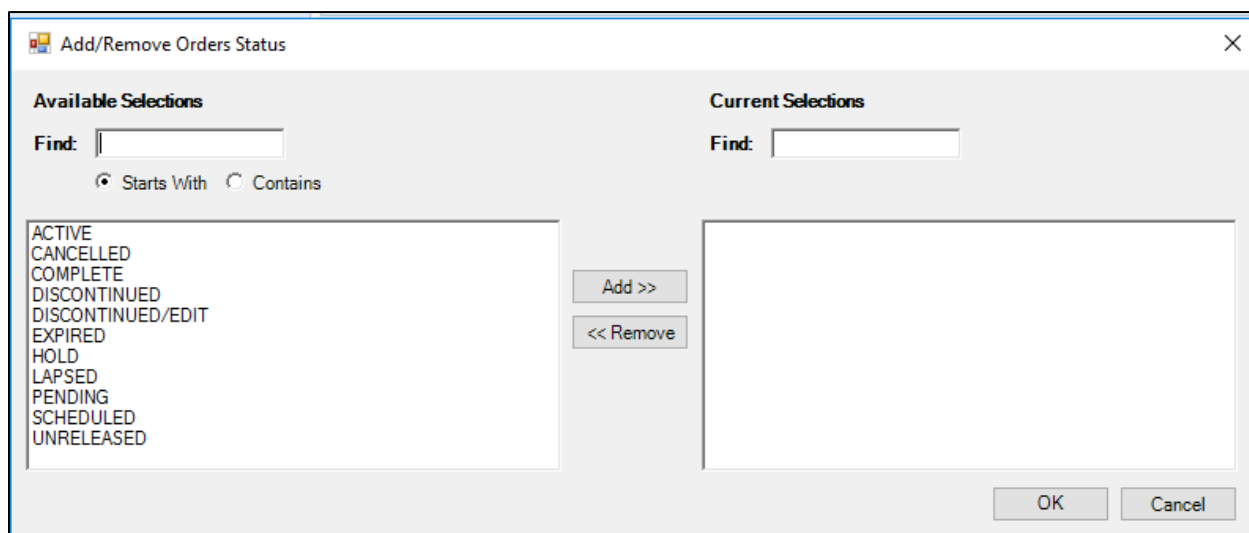
Click the plus (+) to open the list for more details. You can add all orderable items by highlighting the category and clicking **Add**. However, there is a limit of 100 items that can be selected.

A warning message will display if the category has more than 100 items.

Figure 3-127: Sample **Warning** Message

Status

The default Status is all statuses, but you can select one or more specific statuses as a filter.

Figure 3-128: Sample **Order Status Selections**

Provider

The ordering provider list is based on what has been entered in the Order file. At the end of the provider's name is an approximate count of orders for that provider in parentheses.

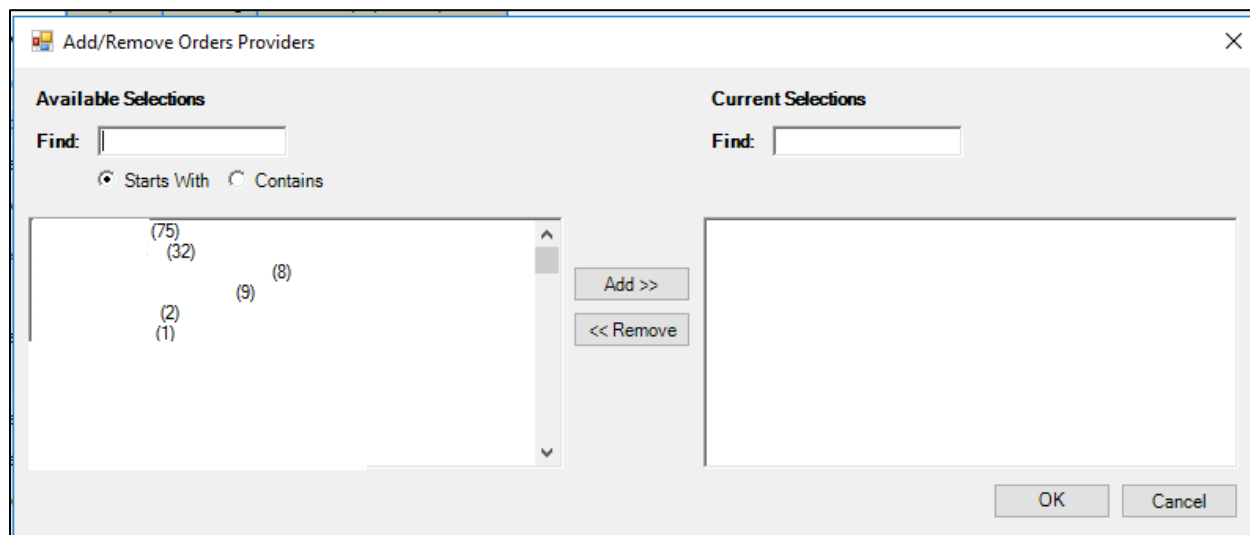


Figure 3-129: Sample **Providers** with their names removed

Site Location

Site Location is the facility, site, or division (it can have several different names throughout RPMS) of the hospital or outpatient clinic. For small facilities, this list will probably be small.

Figure 3-130: Sample **Site Locations** selections

Another selection is **No Site Location**. Some orders have been found not to have a specified site location. By selecting the **No Site Location** checkbox, you cannot select any site locations. **No Site Location** will find those orders that do not have a specified site location.

Hospital Location

The Hospital Location or clinic/ward is where a visit may occur. Each facility creates its unique locations used when creating a visit.

Figure 3-131: Sample **Hospital Location clinics** selection

Another selection is the **No Hospital Location** checkbox. Some orders have been found not to have a specified Hospital Location. By selecting **No Hospital Location**, you cannot select any hospital locations. **No Hospital Location** will find those orders that do not have a specified hospital location.

3.10.8 Notes

Note: The panel definition is based on how your clinical application coordinators (CACs) define documents with their class, document class, and title. This allows you to look for patients with specific note titles.

Notes

Range

☒ By Date (none) to (none) ☐ By Timeframe

Title:

Status:

Site Location:

Hospital Location:

Limited to 100 items

Author:

Expected CoSigner:

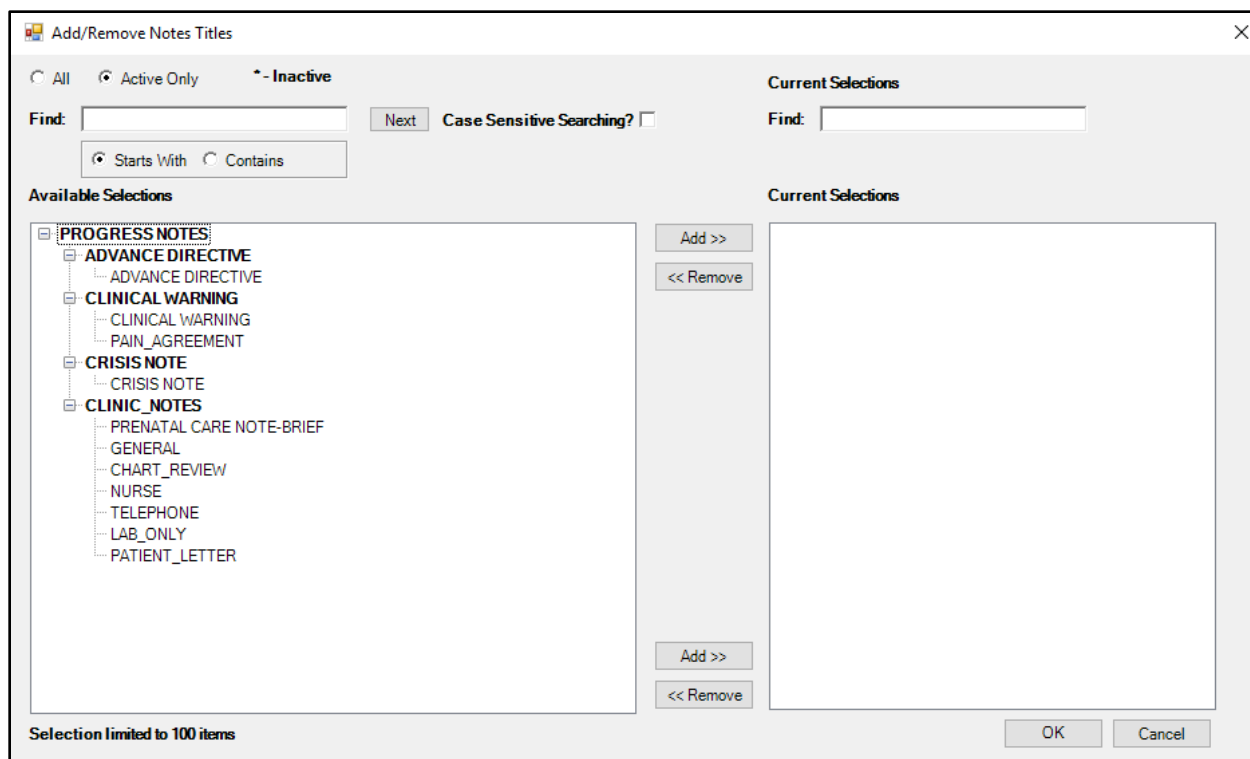
Figure 3-132: Sample **Notes** selections

Range

Notes have a **By Date** or **By Timeframe** selection. The filter selections become active after populating the **By Date** or **By Timeframe** option. The frame only returns to the last year or the last calendar year because some facilities may have millions of notes. The **By Date** range will need to be used to go back earlier than that.

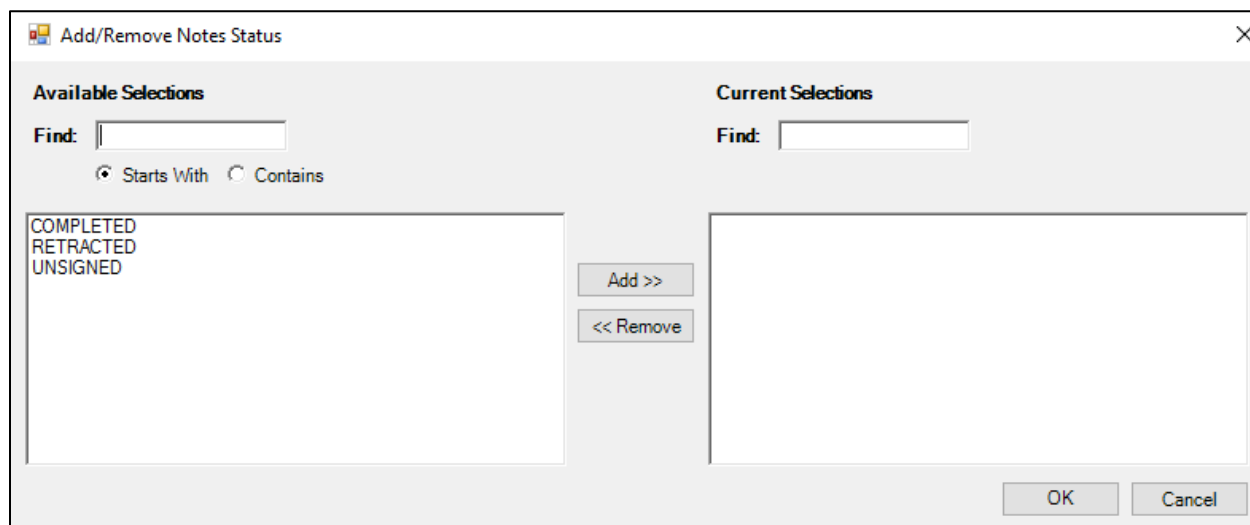
Title

The Title section shows the **Class**, **Document Class**, and **Note Title**. This list is based on what has been used at a facility. New titles will be added during the iCare Nightly Background job when they are created and used.

Figure 3-133: Sample **Note Titles** selections

Status

This list is based on the status of the current notes in the system.

Figure 3-134: Sample **Notes Status** selections

Site Location

Site Location is the facility, site, or division (it can have several different names throughout RPMS) of the hospital or outpatient clinic. For small facilities, this list will probably be small.

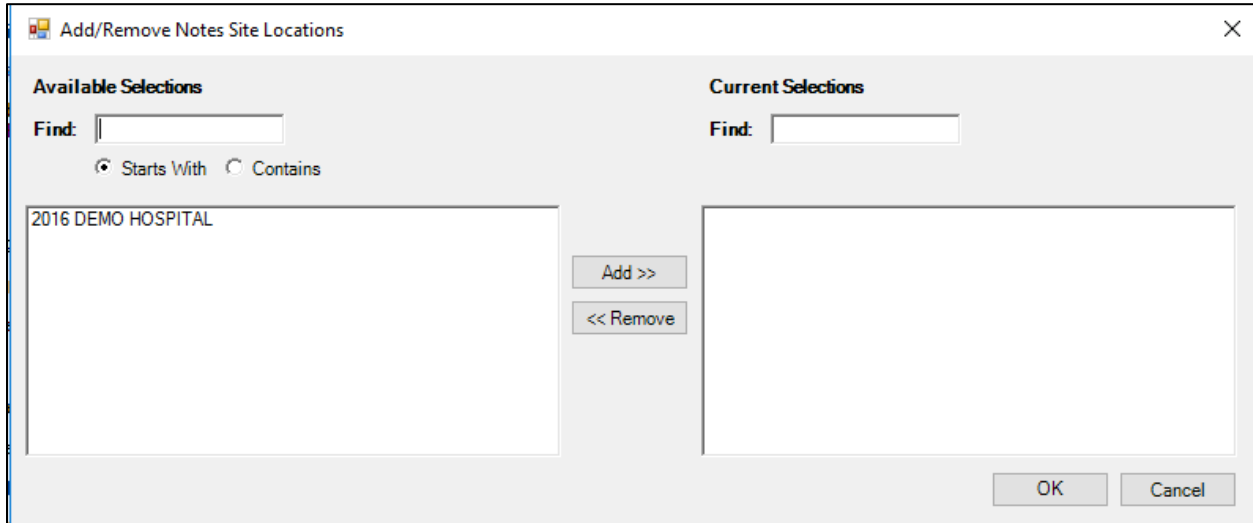


Figure 3-135: Sample **Site Locations** selections

Hospital Location

The Hospital Location or clinic/ward is where a visit may occur. Each facility creates its unique locations used when creating a visit.

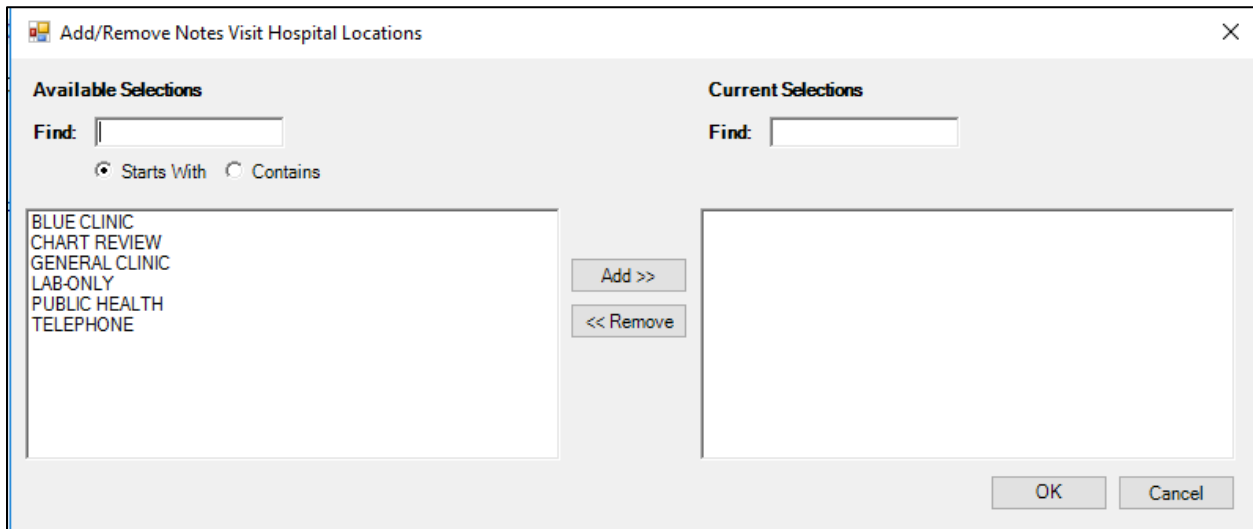


Figure 3-136: Sample **Hospital Location clinics** selection

Author

This is the user who created the document from the Note Title. The names have been blanked out even though this is a test system.

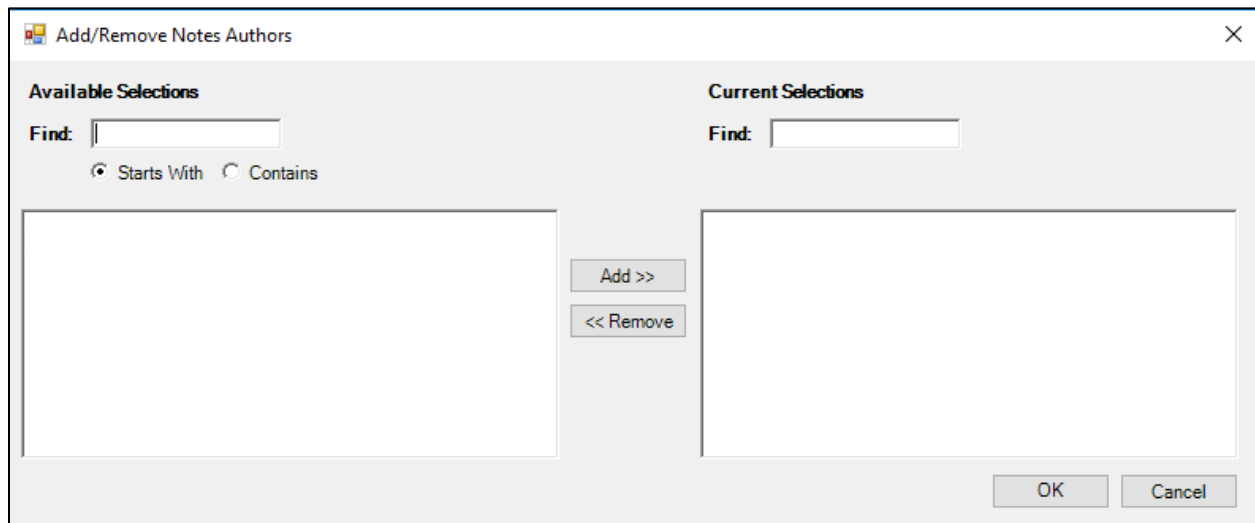


Figure 3-137: Sample **Authors** selection

Expected Co-Signer

You will either get a list of expected co-signers or a message that no expected co-signers are available for selection.

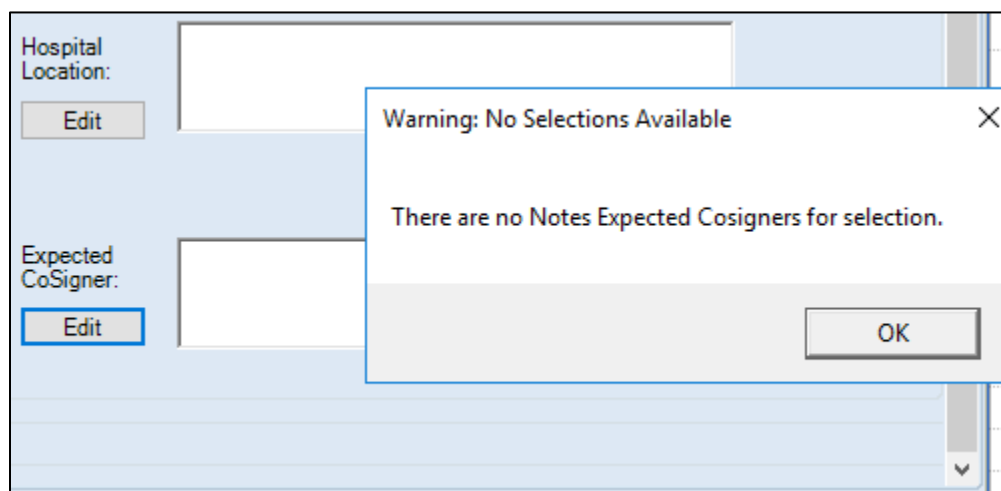


Figure 3-138: Sample **Expected Co-Signer** message

3.10.9 Waitlist

A panel can be created based on the patients placed on the waitlist for appointments.

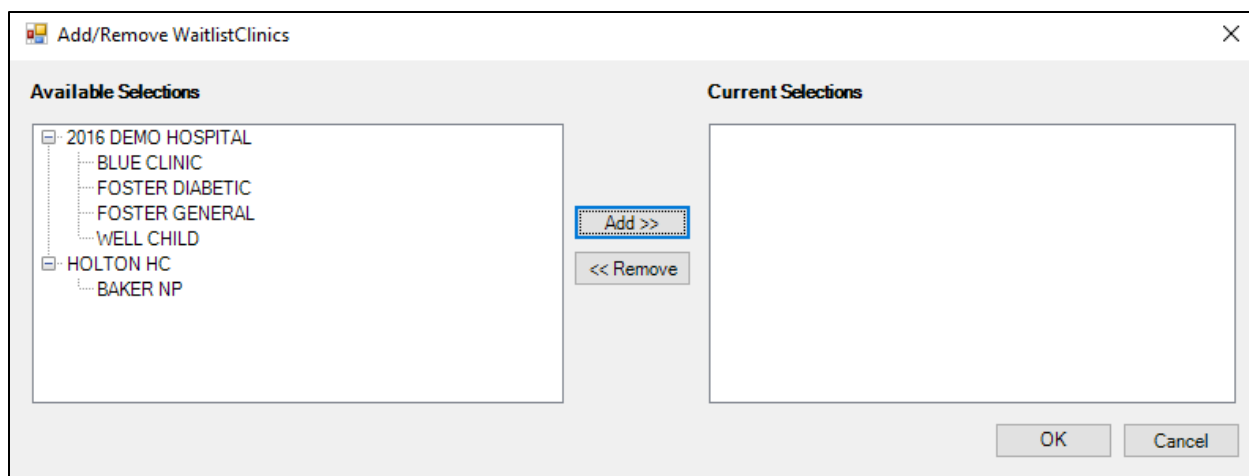
Figure 3-139: Sample **Waitlist** selections

Dates

Waitlist has three date searches: Date Added to List, Recall Date, and Date Removed from List. Each Date search has a **By Date** or **By Timeframe** selection. The filter selections become active after populating the **By Date** or **By Timeframe** option. Users can enter dates for all three date searches. For example, pull a panel for patients to add to the May waitlist and have a September recall date. Or it could be helpful to create a panel for patients that had their recall date in May and were also removed in May.

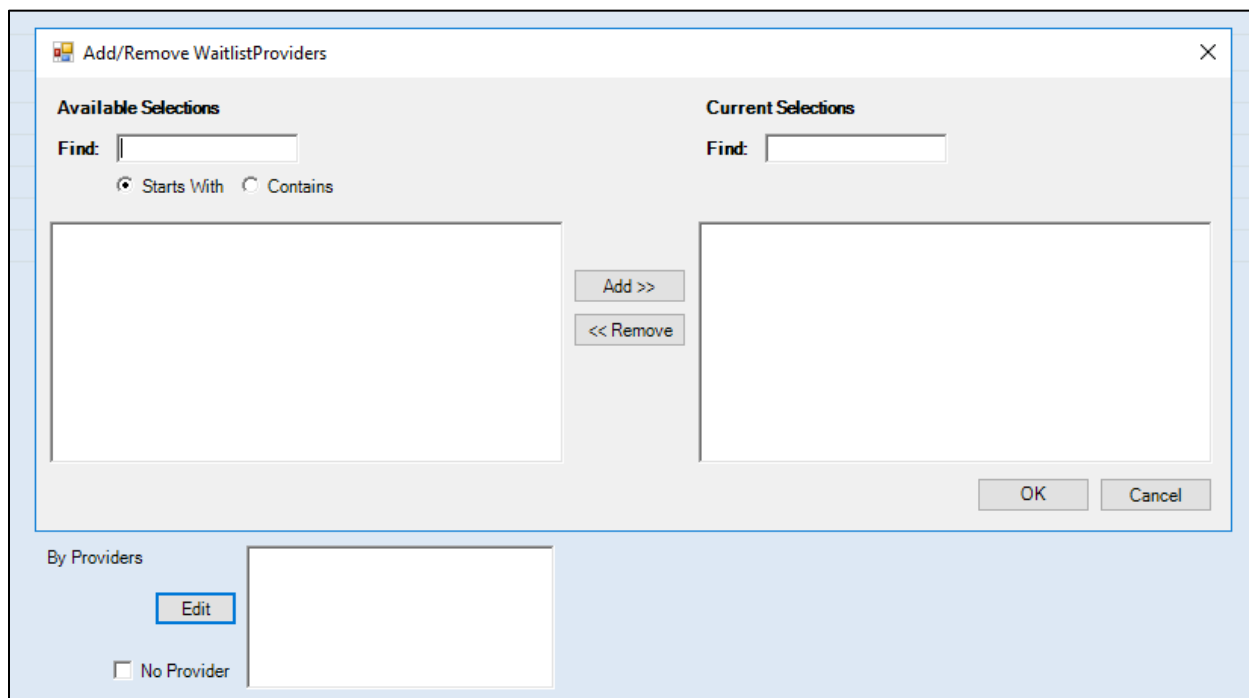
Waitlist Clinics

This is a list of all clinics defined for the waitlist. The list is defined by facility/site/division and may include inactive clinics.

Figure 3-140: Sample **Waitlist Clinics** selections

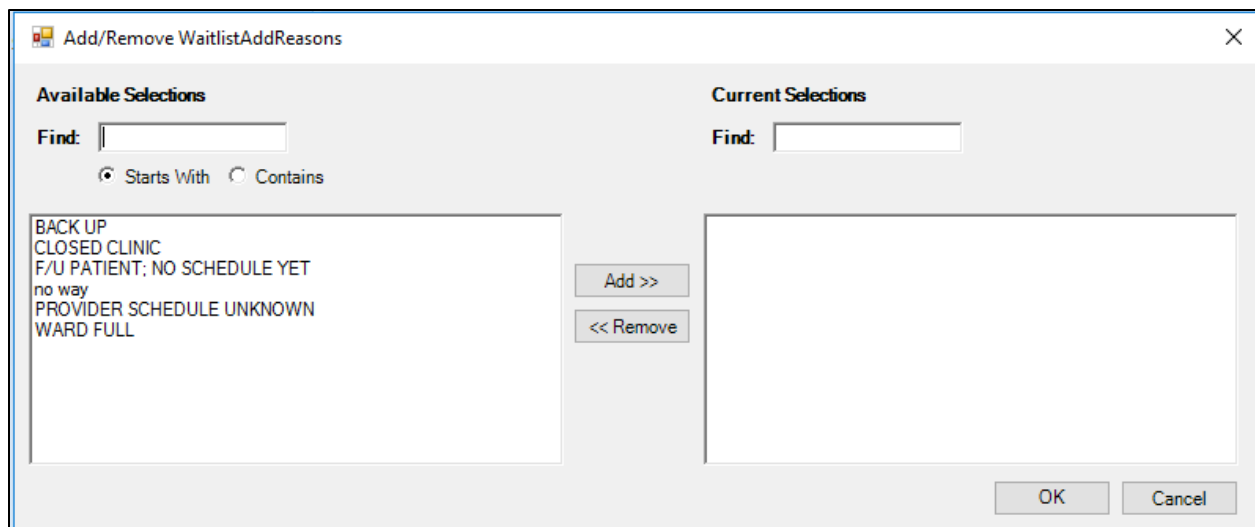
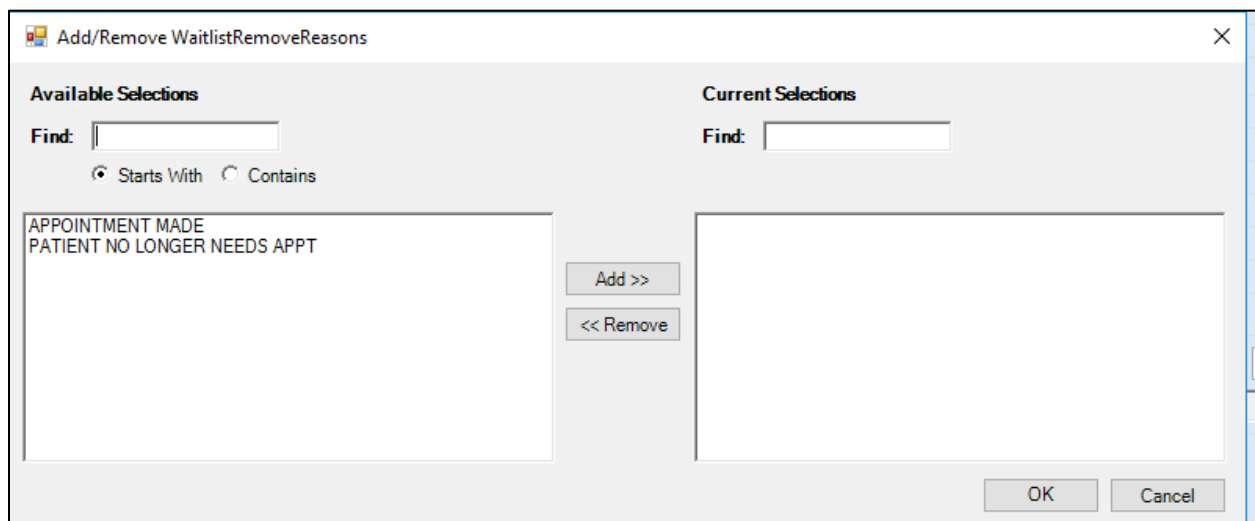
Providers

It is a list of providers if entered during the waitlist process. There is also a **No Provider** checkbox if you want only those Waitlist entries who did not have a provider. Leaving **By Providers** blank and not checking the **No Provider** checkbox gives all entries with or without a provider.

Figure 3-141: Sample **Providers'** selections

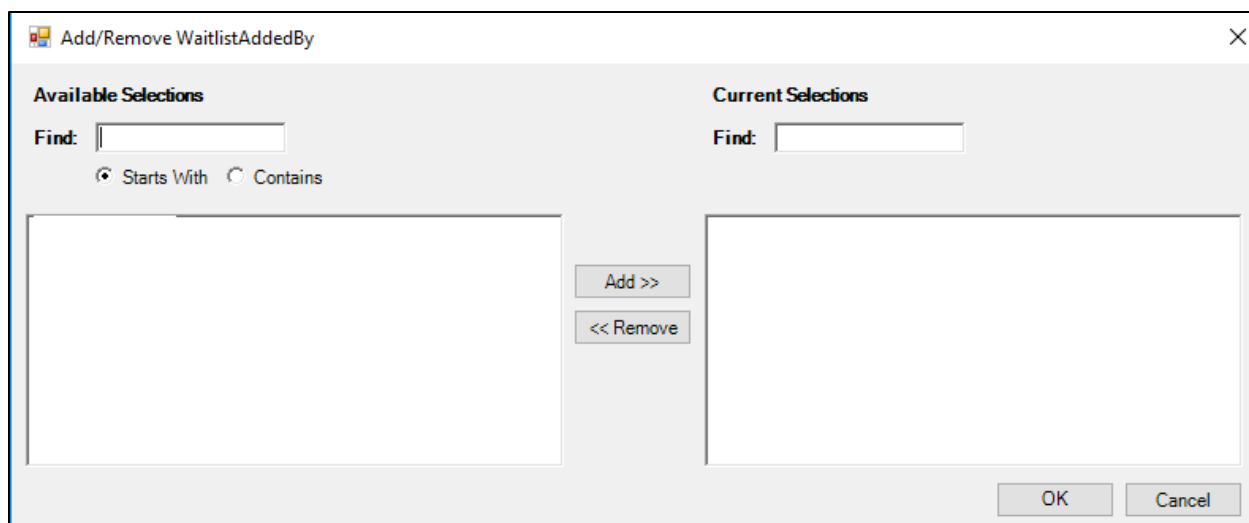
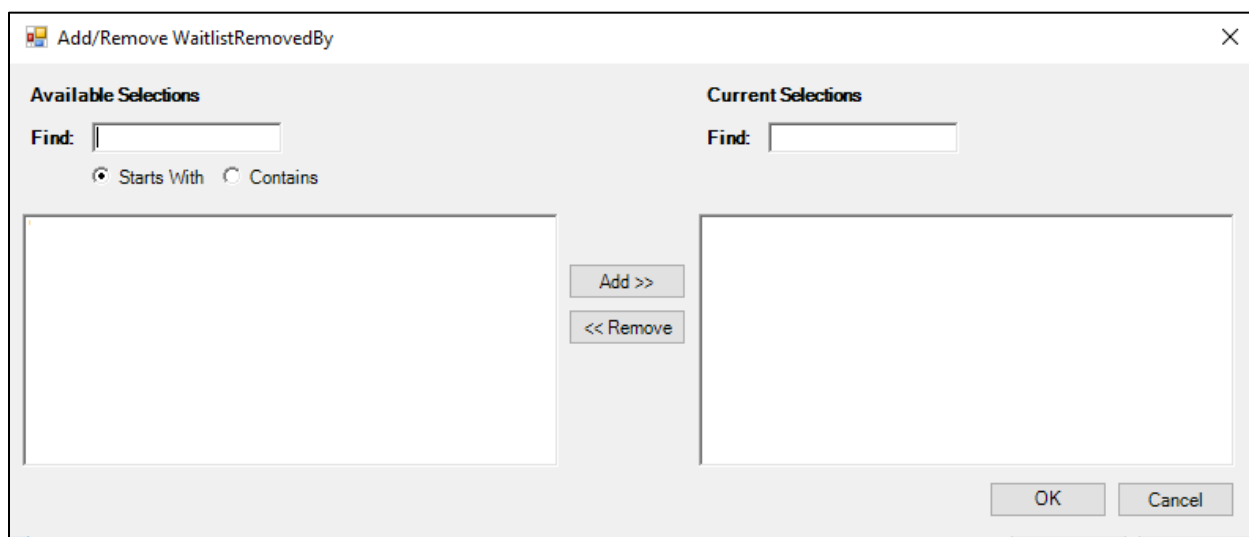
Waitlist Reasons

There are two selections for Waitlist Reasons: Add Reasons and Remove Reasons.

Figure 3-142: Sample **Add Reason** selectionsFigure 3-143: Sample **Remove Reasons** selections

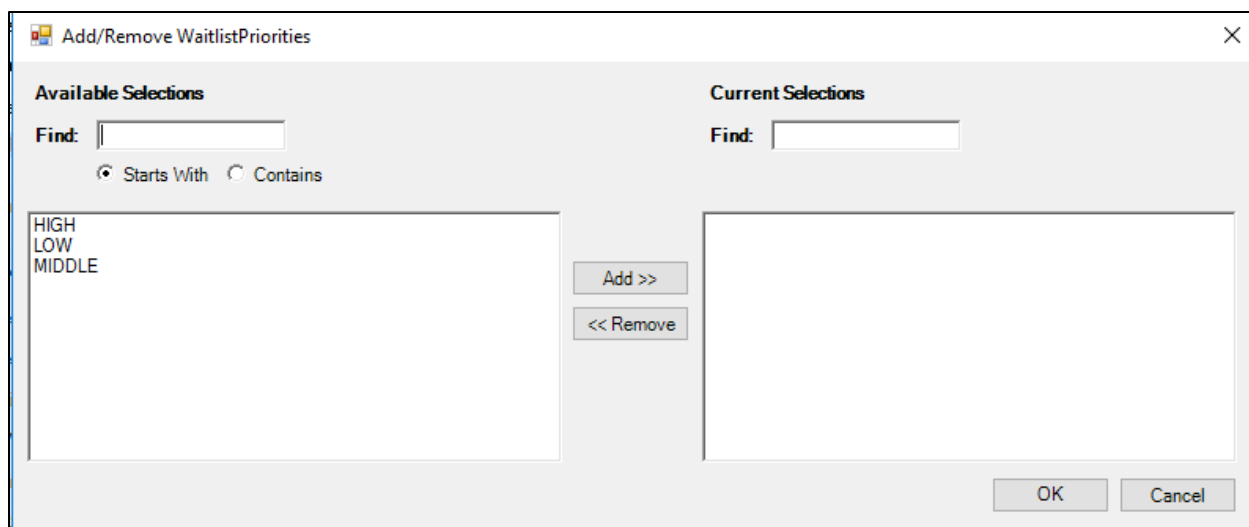
Waitlist Users

There are two selections for Waitlist Users: Added and Removed. This is a list of users who either added the patient to the waitlist or removed the patient from the waitlist.

Figure 3-144: Sample **Add By** selectionsFigure 3-145: Sample **Removed by Selections**

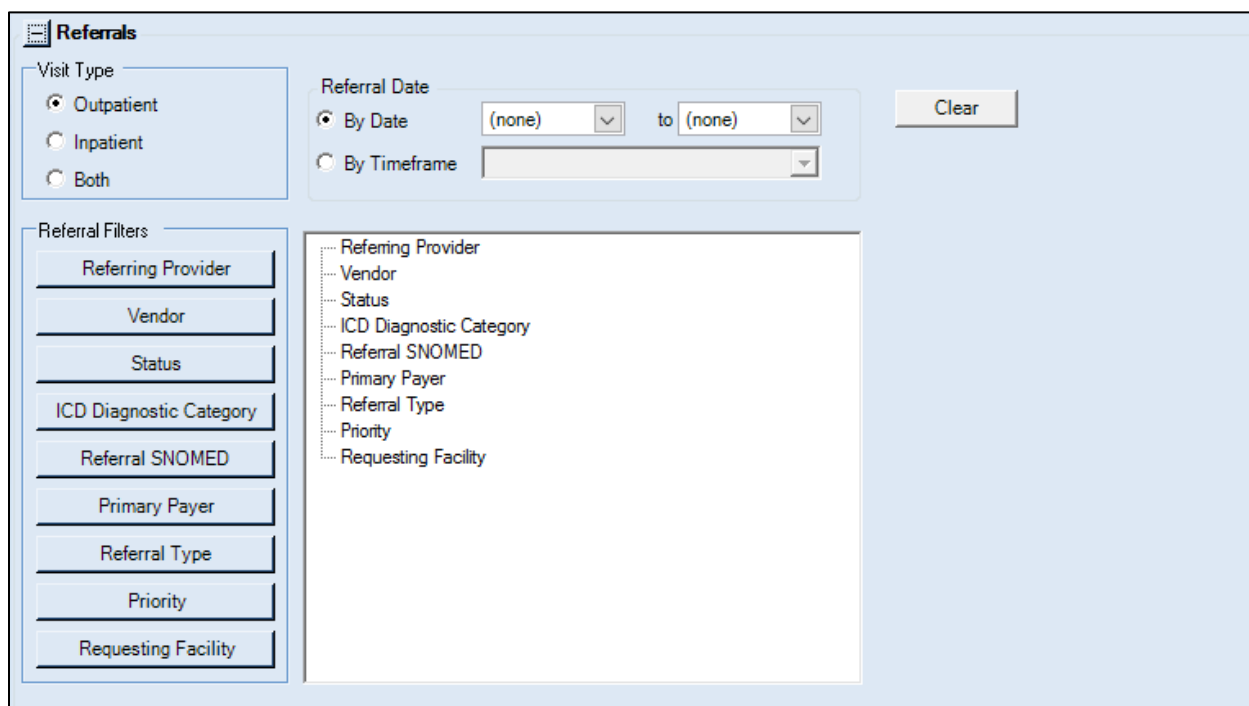
Priority

Search can also be done by the specified priority of the patient's waitlist request.

Figure 3-146: Sample **Priority** selections

3.10.10 Referrals

A panel can be created by referrals created.

Figure 3-147: Sample **Referral** selections

Visit Type

Search can be done by the specified visit type of the patient's referral. This can be an Outpatient referral, an Inpatient referral, or both types of referral.

Range

Referrals have a **By Date** or **By Timeframe** selection. The filter selections become active after populating the By Date or By Timeframe option.

Referring Provider

Search can also be done by the provider who created the referral request.

Vendor

Search can also be done by the vendor to whom the patient's referral was made.

Status

The patient's referral request status can also be searched.

ICD Diagnostic Category

A specific diagnostic category can also be searched.

Referral SNOMED

The search can also be done using the referral's SNOMED Concept ID.

Primary Payer

The primary payer can also search.

Referral Type

The referral type can also do a search

Priority

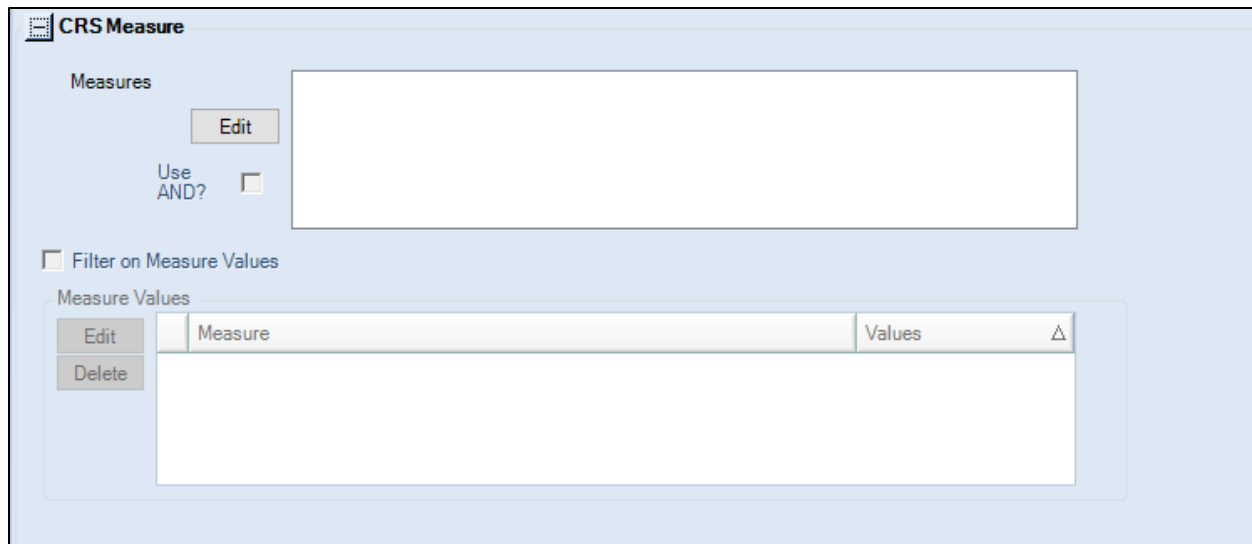
Search can also be done by the specified priority of the patient's referral request.

Requesting Facility

Search can also be done by the facility making the referral request. This is important for multi-facility RPMS systems.

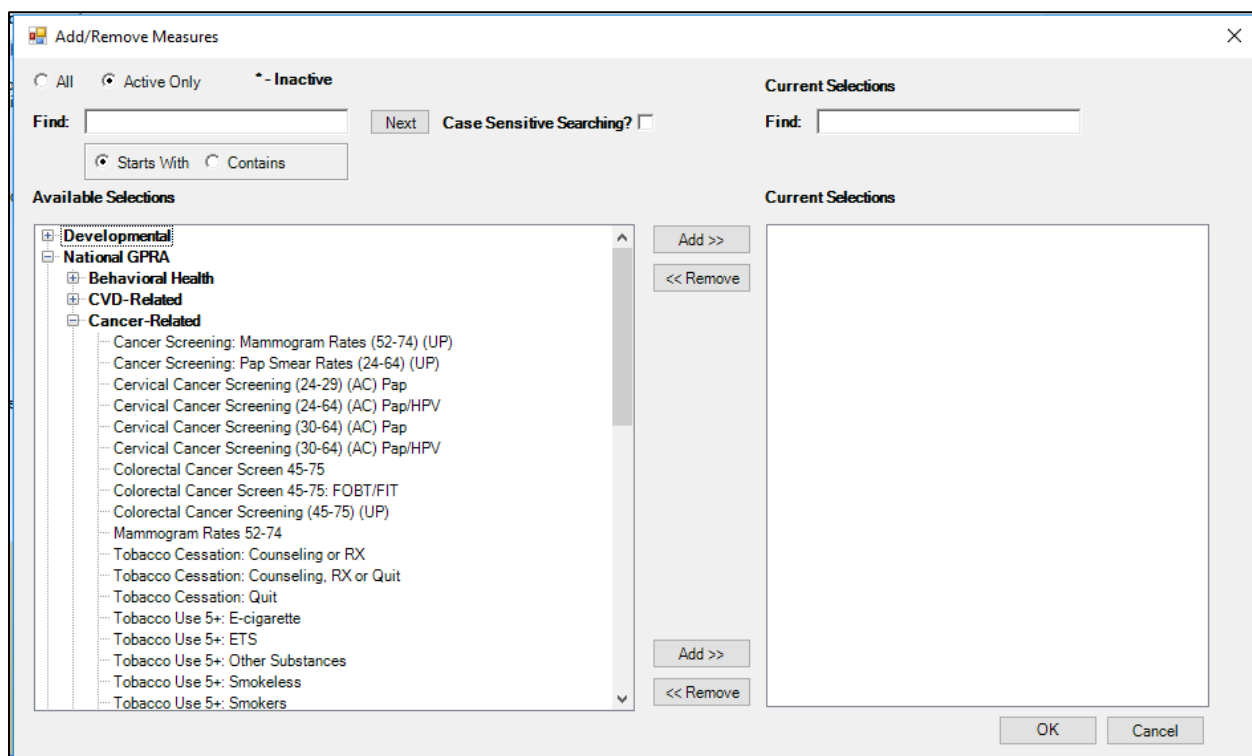
3.10.11 CRS Measure

A panel can be created by IHS Clinical Reporting (aka GPRA, aka National Measures) measures.

Figure 3-148: **CRS** measure selections

Measures

Select one or more measures to create the panel.

Figure 3-149: **Add/Remove Measure** selection

Filter on Measure Values

Search measures by Measure Value: **YES, NO, N/A, NDA.**

NO means that the patient has met the denominator criteria but not the numerator criteria.

YES means the patient has met both the denominator and numerator criteria.

N/A means that the patient does not meet the denominator criteria.

NDA means that the patient has not had a visit in more than three years and does not have data available to check the denominator criteria.

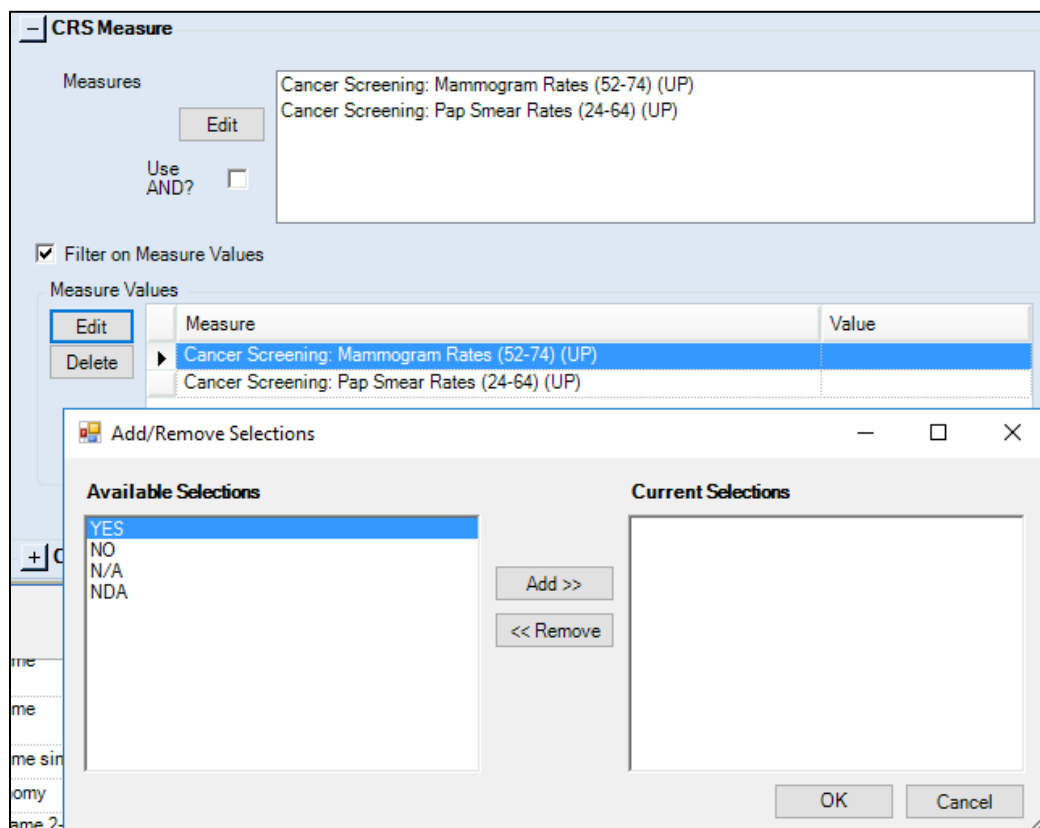


Figure 3-150: Filter values

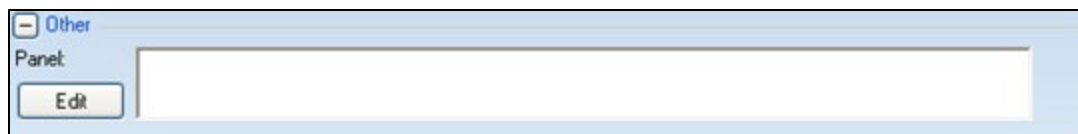
Use AND?

When **Use AND?** is *not* checked, the logic is OR logic. Patients have Measure 1 OR Measure 2.

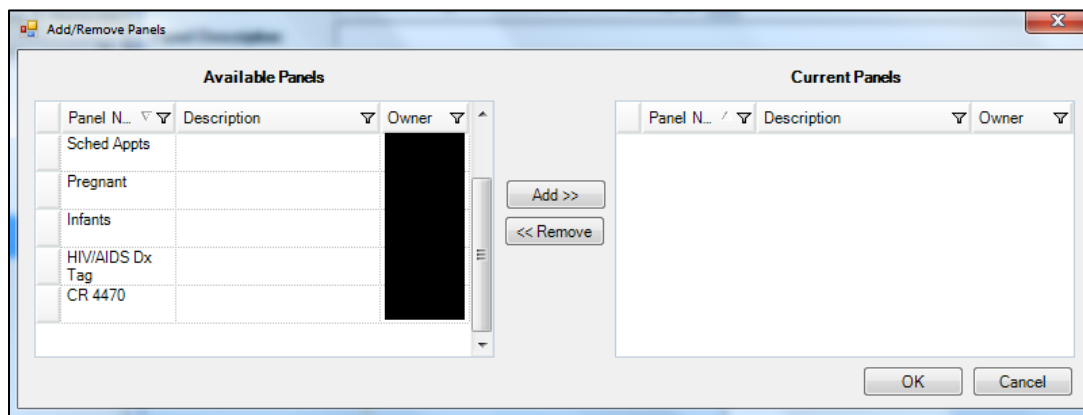
When **Use AND?** is checked, the logic is AND logic. Patients have Measure 1 AND Measure 2.

3.10.12 Other Filter

A panel can be created based on other panel definitions. This restricts the search to those patients who are panel members (one or more panels can be selected).

Figure 3-151: **Other** group box

Click **Edit** to access the **Add/Remove Panels** dialog to search by Panels.

Figure 3-152: **Add/Remove Panels** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the panels in the Current Panels area populate the **Panel** field in the **Other** group box. (Otherwise, click **Cancel**.)

4.0 Layouts Tab

Use the **Layouts** tab to customize a template for defining the Patient List, Reminders, Natl Measures, Asthma, HIV/AIDS, Events, Tracked Events, Follow-up Events, etc., layouts for patient panels. In addition, they can all be reverted to use the system default layout for any of them.

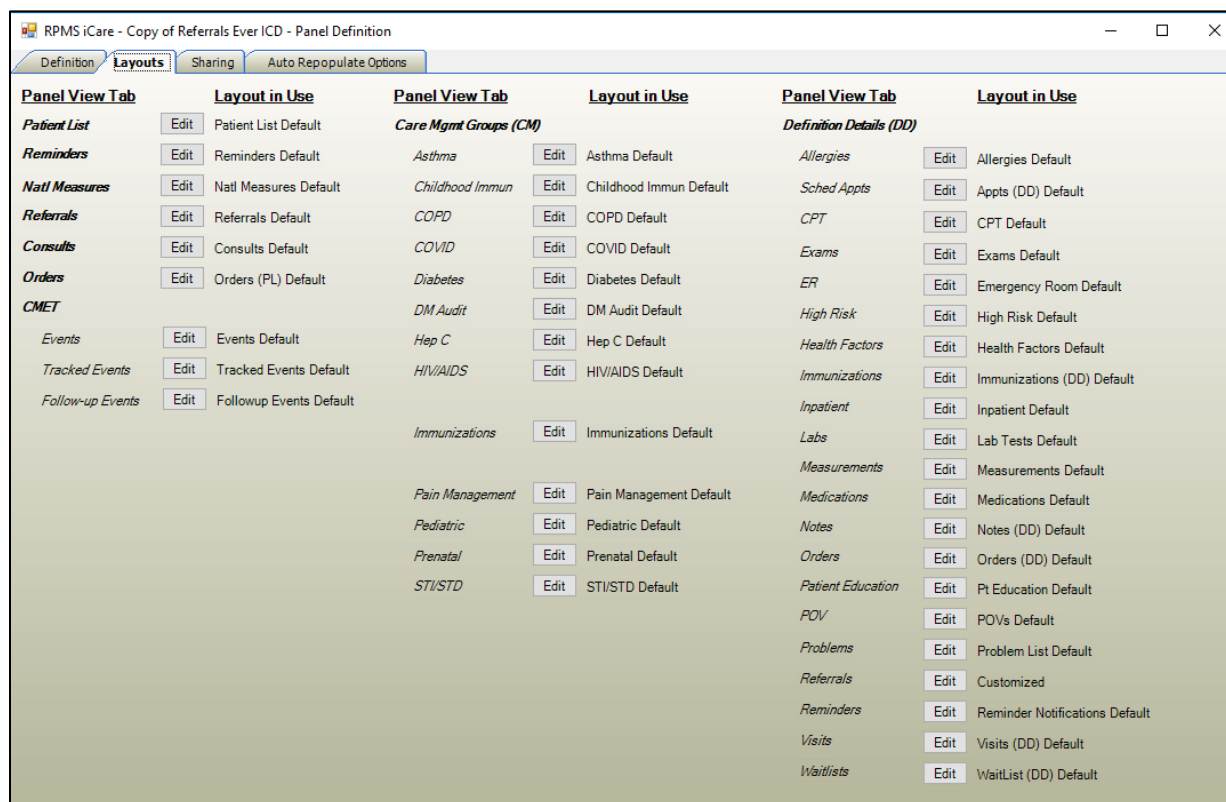


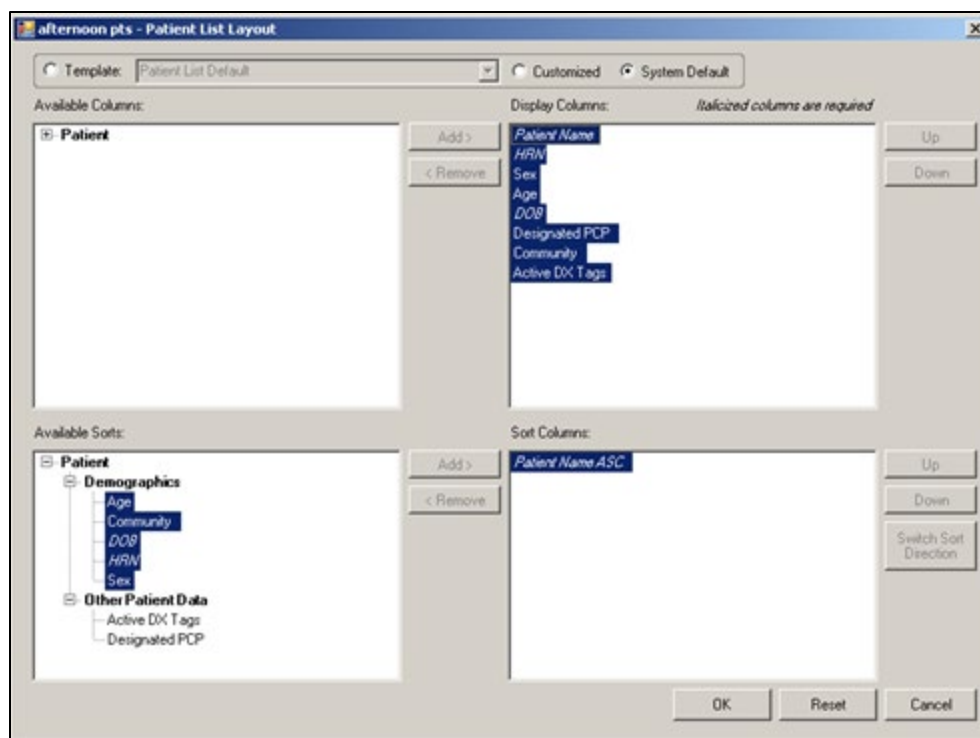
Figure 4-1: **Layouts** tab

Each button functions similarly. The Edit Patient List Layout will be used as an example.

Each layout determines the columns for the topic. These layouts will have the following areas: **Available Columns** (all column names will be listed), **Display Columns** (these are the columns to display), **Available Sorts** (the sorts that are available for the queue), and the **Sort Columns** (the columns to sort by).

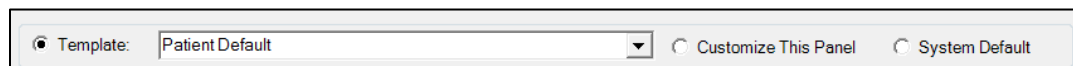
4.1 Panel Definition Layouts Functionality

Click the **Edit** button by the Patient List on the **Layouts** tab to display the **Patient List Layout dialog**. (This will be the example used in this section.)

Figure 4-2: **Patient List Layout** dialog

4.2 Template Group Box

The application displays the template for this panel.

Figure 4-3: **Template** group box for Panel Definition

- If the **System Default** option button is selected, the application reverts to the system default columns released with iCare. In this case, the **Add** and **Remove** buttons are inactive (e.g., data cannot be changed) on the **Patient List Layout** dialog. Change the column layout for the default template by using the **Layouts** tab on the **User Preferences** dialog.
- If the **Customized** option button is selected, the application allows changing the columns (the **Add** and **Remove** buttons become active, for example). Anything customized in the layout dialog can only be used for this panel.
- Additional templates can be updated in **Manage Templates**. Select the appropriate template from the name list.

4.3 Display and Available Columns

Use the **Display Columns** to determine what columns to display for the window or tab.

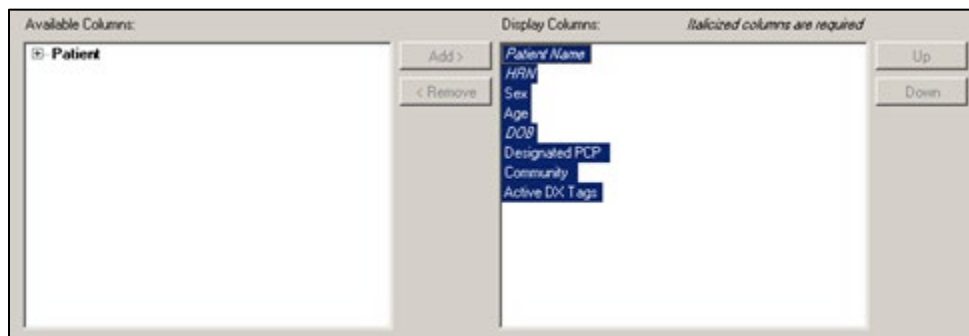


Figure 4-4: **Display** and **Available** columns

The listing in the Display Columns area shows the columns that will be displayed for the panel population. The column names in italics are required and cannot be removed.

To move a column name in the **Available Columns** area to the list in the **Display Columns** area, highlight the column name in the Available Columns area and click **Add**. This moves the column name from the left panel to the right panel.

Likewise, a column name can be removed by highlighting the column name (in the Display Columns area) and clicking Remove. This moves the column name from the right panel to the left panel.

Note: Column names in italics cannot be removed.

Determine the order in which the columns will be displayed in the **Display Columns** area using the **Up** and **Down** buttons. Highlight a column name and click the appropriate button. The button may need to be clicked more than once to move it to the desired location.

4.4 Columns to Sort

Sorting a column means the items are arranged in the column in alpha-numeric order.

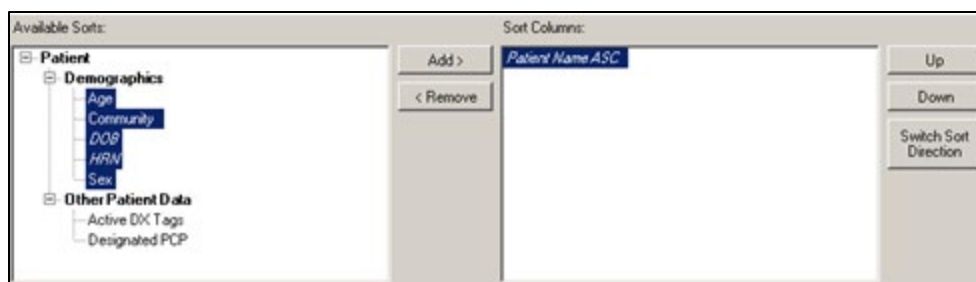


Figure 4-5: **Available Sorts** and **Sort Columns** area

Click **Add** to move a highlighted column name in the **Available Sorts** area to the list in the **Sort Columns** area. This pushes the column name from the left panel to the right panel.

Likewise, a highlighted column can be removed in the Sort Columns area and moved to the Available Sorts area by clicking **Remove**. This pushes the column name from the right panel to the left panel.

Note: Column names in italics cannot be removed.

4.4.1 Column Sort Order

Use the **Sort Columns** area to determine what columns will be sorted for the window or tab.

Determine which order the columns are sorted in the **Sort Columns** area using the **Up** and **Down** buttons. Highlight a column name and click the appropriate button. The button may need to be clicked more than once to move it to the desired location. For example, if columns Gender, Patient Name, and Diagnosis Tags are in the right column, the Gender sort is applied first, then the Patient Name, and then the Diagnosis Tags.

4.4.2 Switch Sort Direction

The names of columns in the Sort Columns area show **ASC** appended to the name, for example, **Patient Name ASC**. The sort order for a selected column can be switched by clicking the **Switch Sort Direction** button. In the example, the name changes to **Patient Name DESC**. Switching sort direction can be performed on more than one column.

5.0 Sharing Tab

A panel can be shared with other RPMS users. Select the **Sharing** tab on the **Panel Definition** window to perform this action. One or more users can be selected to share a panel. Different access rights can be assigned to each user.

When a panel is shared, the shared user will receive a notification about the shared panel.

The **Sharing** tab will not be available if the **Share** button is inactive on the Panel List view for the patient list.

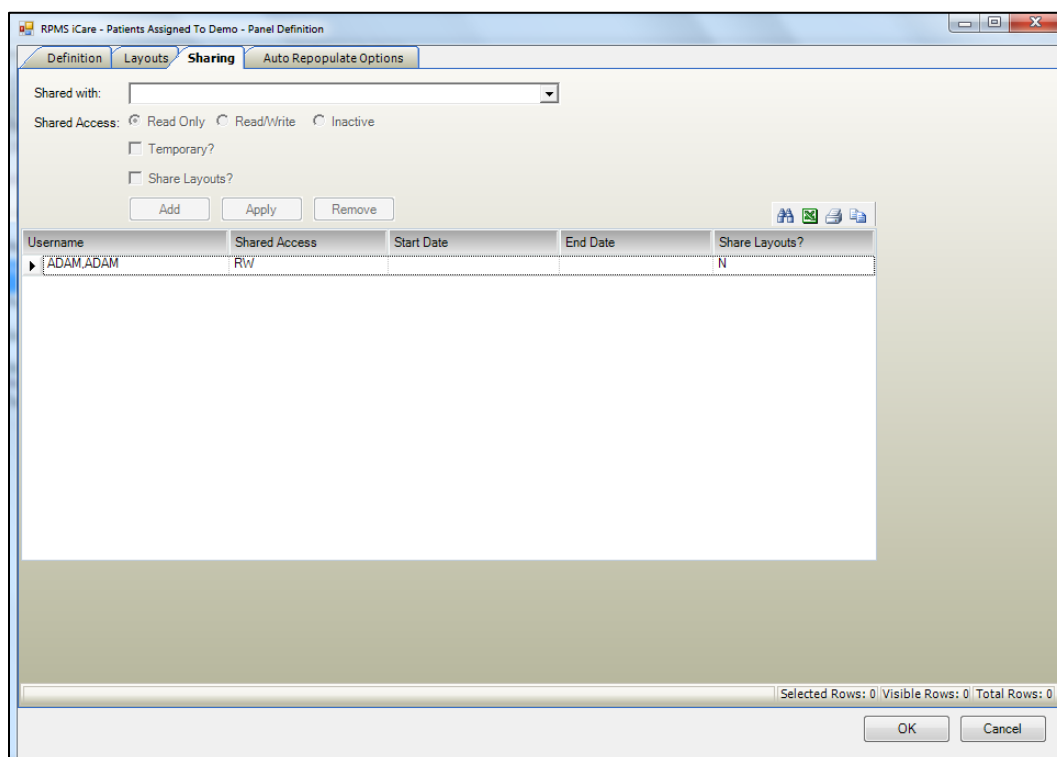


Figure 5-1: **Sharing** tab

5.1 Fields on the Sharing Tab

The following information describes the fields on the **Sharing** tab:

Shared with: The selection from the list is the person with whom this panel will be shared.

Shared Access: The option buttons become active after the Shared with the field is populated.

Figure 5-2: Shared with and **Shared Access** parameters

- **Read Only:** Use this option button to allow the person sharing this panel to only view this panel. The shared user can change the layout of a panel but nothing else.
- **Read/Write:** Use this option button to allow the person sharing this panel to view and change the panel (for example, add or delete patients).
- **Inactive:** Use this option button to assign the person sharing the panel inactive access rights.

Temporary: Select the **Temporary** checkbox to display a date range for the temporary status of the shared user. The access rights will only apply during the specified data range and will automatically expire once the selected date range has passed.

Figure 5-3: **Temporary** parameters

A date range must be selected when using the Temporary status.

Shared Layouts?: Select the **Shared Layouts?** checkbox if the layouts of this panel will be moved to the shared user. The shared user will see the same layout modifications made by the creator as customized views.

- This causes the **Shared Layouts** cell (in the grid) to contain **Y** (for yes).
- The shared user will continue to be able to make modifications to the layouts of that shared panel. These modifications will not affect the creator's configurations since they are the shared user's customized view.

5.2 Grid on the Sharing Tab

The grid shows a history of the users (that have not been removed/deleted) with whom this panel has been shared.

Username	Shared Access	Start Date	End Date	Share Layouts?
ADAM.ADM	RW			N

Figure 5-4: Shared user information in lower grid

Add: Click this button to add the information in the **Shared with**, **Shared Access**, **Temporary**, and **Shared Layouts** fields to the grid.

Apply: Click this button to change a selected user's **Shared Access** or **Temporary** status in the grid. For example, the shared access rights can be altered from **Read Only** to **Read/Write**.

Example: Highlight a user in the grid. The current access right (Read Only, Red/Write, Inactive) shows in the Shared Access area. Change the selected user's **Read Only** access right to **Read/Write**. Select the **Read/Write** option button. Then click the **Apply** button to reflect the changes in the grid.

Remove: Highlight one or more names in the grid and click this button to remove the name(s) from the grid. It might be more beneficial to inactivate the user instead of removing it. After clicking the **Remove** button, the **Delete Row** information message displays, asking if you want to delete the selected names. Click **Yes** to delete (otherwise, click **No**).

6.0 Auto Repopulate Options Tab

Use the **Auto Repopulate Options** to set the contents of your panel to be dynamic, i.e., automatically refreshed. This option works well if the panel is defined by age or visit dates; patients will be automatically added or deleted based on the search logic.

Note: Manually repopulate a panel at any time by selecting the panel from the Panel List and clicking the **Repopulate** button.

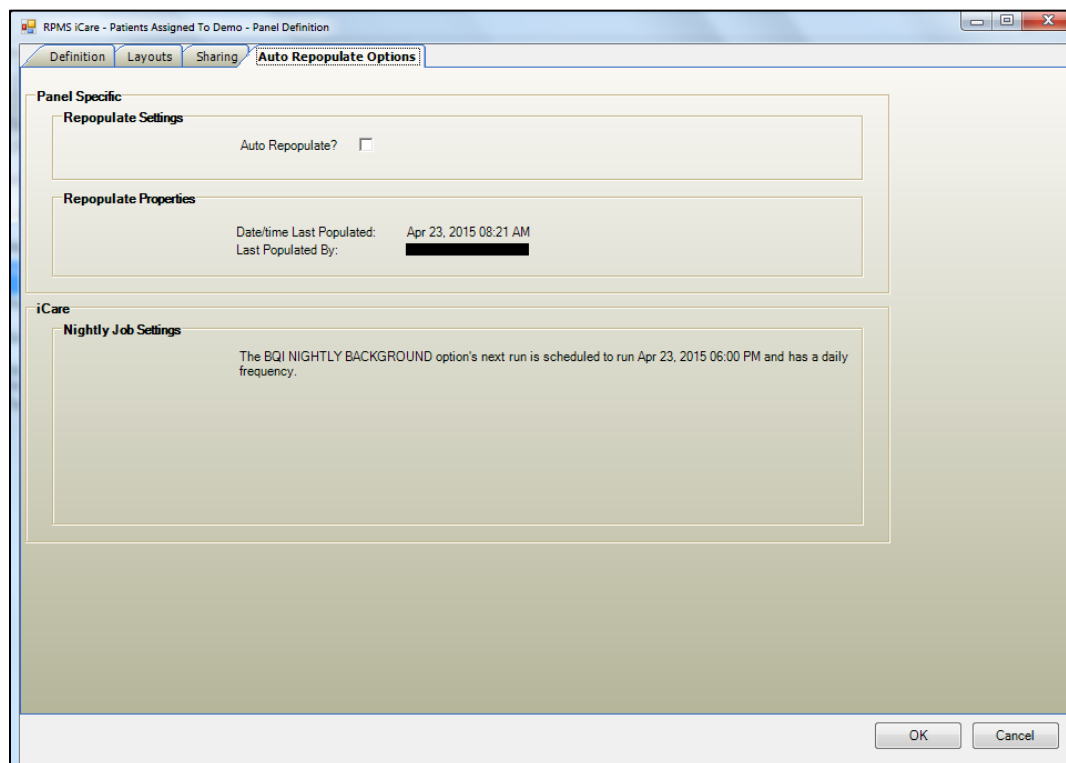


Figure 6-1: **Auto Repopulate Options** tab

The only group box that is active on this tab is Repopulate Settings. (This option is inactive if the panel definition was based on No Predefined Population Search.)

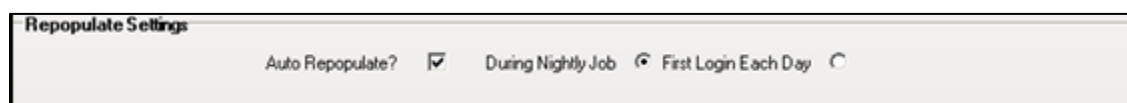


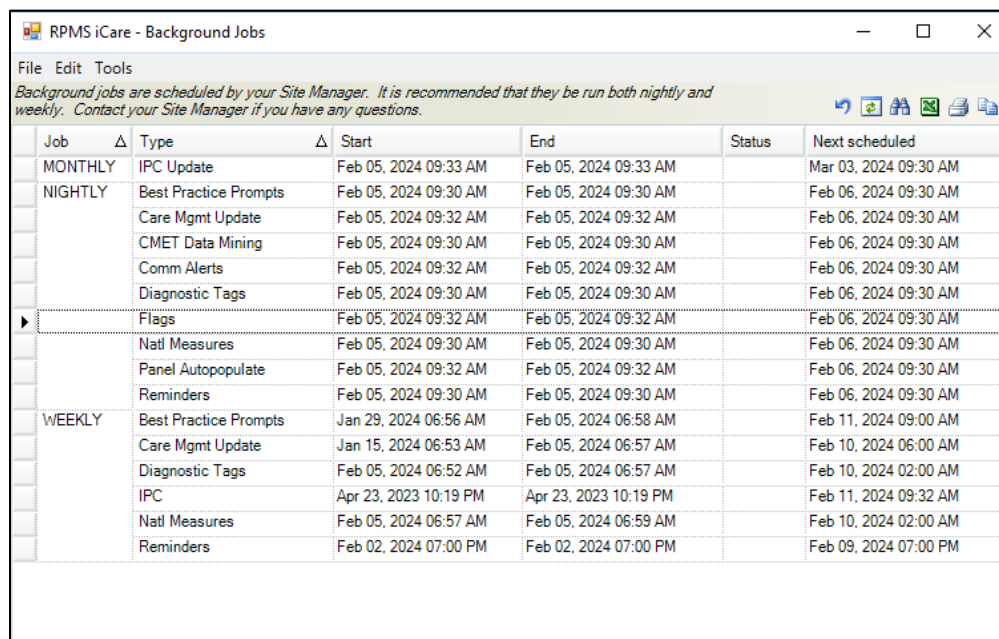
Figure 6-2: **Repopulate Settings** group box

Check the **Auto Repopulate** checkbox to set the panel to automatically refresh the patient list based on the panel's defined search criteria.

Select the option button for when the panel should re-populate: **During Nightly Job** or **First Login Each Day**.

Note: A large panel (over 1,000 records) might take much time to repopulate. You should select the **During Nightly Job** option for larger panels.

Also, check the Background jobs to ensure the nightly Panel Auto will not go over into the workday.



RPMS iCare - Background Jobs

File Edit Tools

Background jobs are scheduled by your Site Manager. It is recommended that they be run both nightly and weekly. Contact your Site Manager if you have any questions.

Job	Type	Start	End	Status	Next scheduled
MONTHLY	IPC Update	Feb 05, 2024 09:33 AM	Feb 05, 2024 09:33 AM		Mar 03, 2024 09:30 AM
NIGHTLY	Best Practice Prompts	Feb 05, 2024 09:30 AM	Feb 05, 2024 09:30 AM		Feb 06, 2024 09:30 AM
	Care Mgmt Update	Feb 05, 2024 09:32 AM	Feb 05, 2024 09:32 AM		Feb 06, 2024 09:30 AM
	CMET Data Mining	Feb 05, 2024 09:30 AM	Feb 05, 2024 09:30 AM		Feb 06, 2024 09:30 AM
	Comm Alerts	Feb 05, 2024 09:32 AM	Feb 05, 2024 09:32 AM		Feb 06, 2024 09:30 AM
	Diagnostic Tags	Feb 05, 2024 09:30 AM	Feb 05, 2024 09:30 AM		Feb 06, 2024 09:30 AM
	Flags	Feb 05, 2024 09:32 AM	Feb 05, 2024 09:32 AM		Feb 06, 2024 09:30 AM
	Natl Measures	Feb 05, 2024 09:30 AM	Feb 05, 2024 09:30 AM		Feb 06, 2024 09:30 AM
	Panel Autopopulate	Feb 05, 2024 09:32 AM	Feb 05, 2024 09:32 AM		Feb 06, 2024 09:30 AM
	Reminders	Feb 05, 2024 09:30 AM	Feb 05, 2024 09:30 AM		Feb 06, 2024 09:30 AM
WEEKLY	Best Practice Prompts	Jan 29, 2024 06:56 AM	Feb 05, 2024 06:58 AM		Feb 11, 2024 09:00 AM
	Care Mgmt Update	Jan 15, 2024 06:53 AM	Feb 05, 2024 06:57 AM		Feb 10, 2024 06:00 AM
	Diagnostic Tags	Feb 05, 2024 06:52 AM	Feb 05, 2024 06:57 AM		Feb 10, 2024 02:00 AM
	IPC	Apr 23, 2023 10:19 PM	Apr 23, 2023 10:19 PM		Feb 11, 2024 09:32 AM
	Natl Measures	Feb 05, 2024 06:57 AM	Feb 05, 2024 06:59 AM		Feb 10, 2024 02:00 AM
	Reminders	Feb 02, 2024 07:00 PM	Feb 02, 2024 07:00 PM		Feb 09, 2024 07:00 PM

Figure 6-3: **Background Jobs** view

7.0 iCare Features Used by Panel Definition

This section focuses on the iCare features that the Panel Definition uses. This focus is on those things that influence the functionality of the **Panel Definition** window.

7.1 User Preferences

The following provides information about the user-preference settings that affect the Panel Definition window.

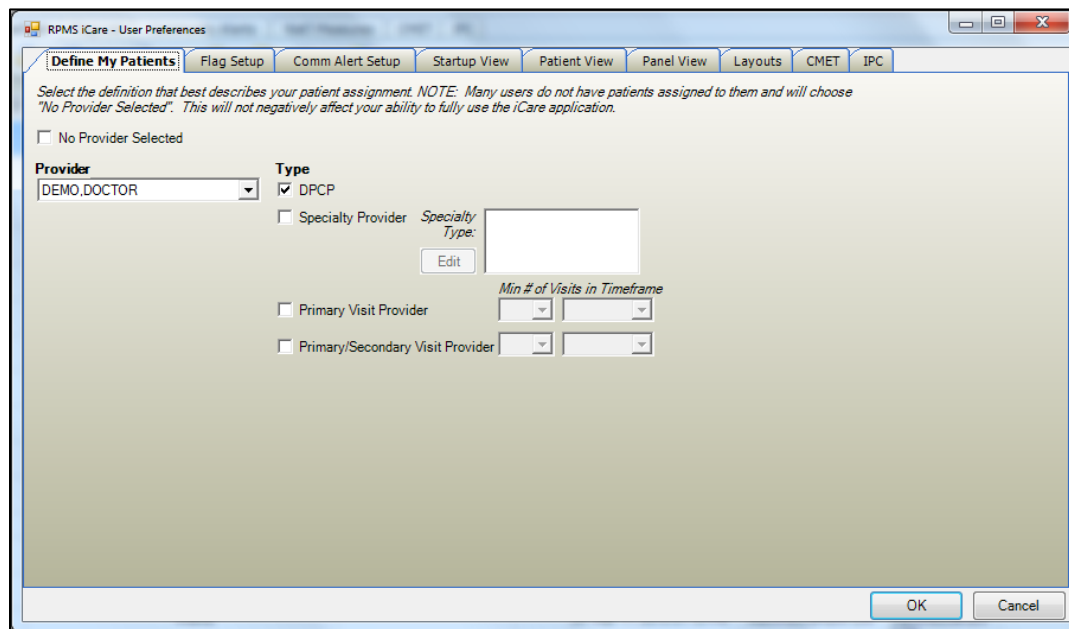


Figure 7-1: **User Preferences** window

After the User Preferences window is complete, click **OK**, and the user preferences will be in effect for the operation of the iCare application. (Otherwise, click **Cancel**.)

7.1.1 Define My Patients Tab

“My Patients” is a way to quickly identify a group of patients assigned to a person as a provider. Selecting a “My Patients” definition during panel definition will cause iCare to create a default My Patients panel.

Select the definition that best describes your patient assignment. NOTE: Many users do not have patients assigned to them and will choose "No Provider Selected". This will not negatively affect your ability to fully use the iCare application.

☐ No Provider Selected

Provider
 DEMO.DOCTOR

Type
☒ DPCP
☐ Specialty Provider Specialty/Type:
 Edit

☐ Primary Visit Provider Min # of Visits in Timeframe:

☐ Primary/Secondary Visit Provider

Figure 7-2: Define My Patients tab

Select the definition that best describes your patient assignment.

Note: Many users do not have patients assigned to them and will choose the **No Provider Selected** checkbox. This will not negatively affect your ability to use the iCare application fully.

You can select your name (the default) or set up a definition for another provider (surrogate) by choosing the other name.

For example, suppose your site impanels patients (assigns each patient to a specific primary care provider). In that case, you will use the **DPCP** (designated primary care provider) provider type checkbox to create a core list of patients assigned to you.

If your site does not use the DPCP designation, you might consider “your” patients to be anyone you saw as a primary provider at least twice in the past year.

No Provider Selected

Select the **No Provider Selected** checkbox if you do *not* want to define patients by selecting any provider. If this is the option you use, the default “My Patients” panel will *not* be created. In this case, the remaining fields will then be inactive. This means iCare will *not* make the default “My Patient” panel. You can later change the User Preferences to a provider and create panels based on the “My Patients” definition.

If you plan to define the “My Patient” panel, do the following:

Provider

Select a provider name from the Provider list. The default name displayed will be the user’s name. All RPMS providers are available on the list.

Type

Click the appropriate checkboxes to select one or more Provider Types from the list.

- **DPCP** (designated primary care provider): Sites can assign a primary care provider to an individual patient through the Patient file or the RPMS Designated Specialty Provider Management (DSPM) application. Selecting the **DPCP** option will provide a list of patients assigned to you, regardless of their last visits.
- **Specialty Provider**: Users are assigned as Specialty Providers to patients as defined in the Designated Specialty Provider Management (BDP) application. Selecting the **Specialty Provider** option activates the **Specialty Type** field. Click **Edit** to access the **Add/Remove Specialty Provider Types** dialog.

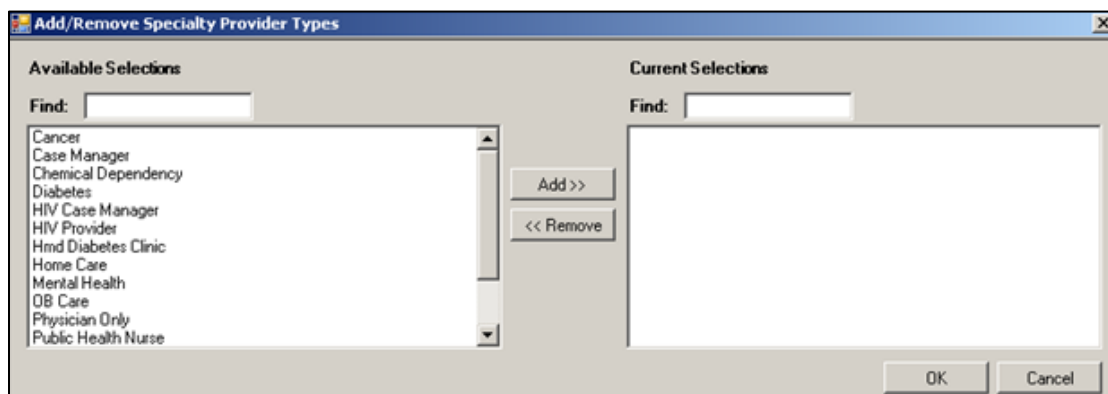


Figure 7-3: **Add/Remove Specialty Provider Types** dialog

When the **Add/Remove** dialog is complete, click **OK**, and the provider types shown in the **Current Selections** area will populate the **Specialty Type** field. (Otherwise, click **Cancel**.)

- **Primary Visit Provider**: The provider's name is documented as the primary provider for a specific patient visit. Selecting this Provider Type also requires you to indicate the number of visits and a timeframe. For example, you might consider "your" patients to be anyone you have seen as a primary provider at least three times in the past two years; you would select three visits and two years. The default value has been twice in the past year.
- **Primary/Secondary Visit Provider**: The provider's name is documented as either the primary or secondary provider for a specific patient visit. Selecting this Provider Type also requires you to indicate the number of visits and a timeframe. For example, you might consider "your" patients to be anyone you have seen at least three times in the past two years; you would select three visits and two years. The default value has been twice in the past year.

Below are descriptions of Minimum Visits and Timeframes:

Minimum Visits: You can select the minimum number of visits with a timeframe to define whether a patient “belongs” to a provider, e.g., two stays in the past year. Values are 1 through 9; the default value is 2. The **Minimum Visits** option only uses the Primary Visit and Primary/Secondary Visit provider types.

Minimum Visit Timeframe: A timeframe can be combined with the minimum number of visits to define whether a patient “belongs” to a provider, e.g., using the **Last three months** option as the timeframe. The **Minimum Visit Timeframe** option only uses the Primary Visit Provider and Primary/Secondary Visit Provider types. The values are Last three months, Last six months, Last year, or Last two years.

7.2 Creating a Community Taxonomy

The **Community Taxonomy** function can be accessed in the panel definition process under the Ad Hoc search.

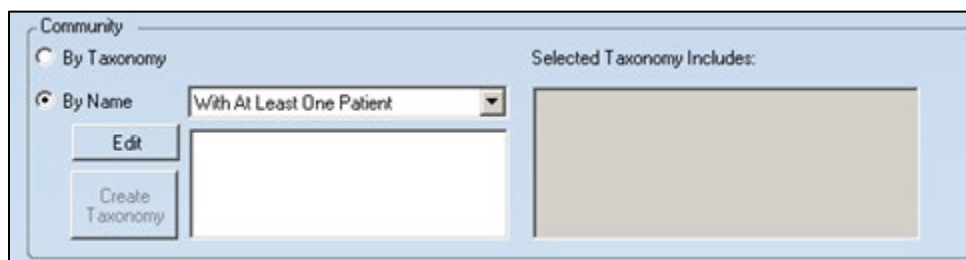


Figure 7-4: **Community** group box using By Name

A taxonomy can be created by selecting the **By Name** option button.

Click the **Edit** button to access the **Add/Remove Communities** dialog.

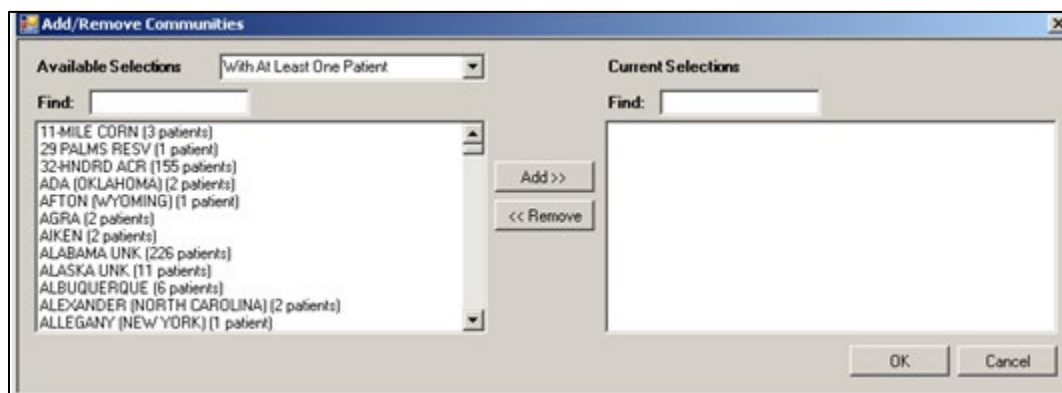


Figure 7-5: **Add/Remove Communities** dialog

Available Selections

Highlight a community or multiple communities and click **Add**.

After selecting the communities, click **OK** (Otherwise, click **Cancel**). The chosen communities will populate the **Community** group box.

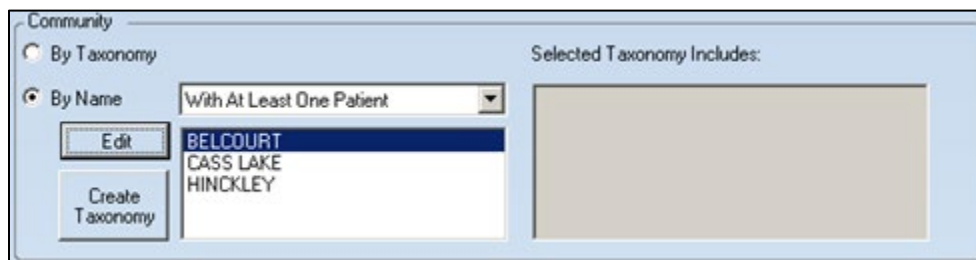


Figure 7-6: **Community** group box with **By Name** list box populated

If the By Name list box contains two or more names, the **Create Taxonomy** button becomes active.

Click the **Create Taxonomy** button to access the **Create/Update Community Taxonomy** dialog.



Figure 7-7: **Create/Update Community Taxonomy** dialog

Populate the fields on the dialog. The **Community Taxonomy Name** field is required. After the dialog is complete, click **OK** (otherwise, click **Cancel**).

After clicking **OK** and if the taxonomy name is a duplicate taxonomy name to a previous taxonomy created by you, iCare will provide a warning that the user might be overwriting the user's taxonomy. The user can overwrite (Yes), save as another name (No), or cancel (to return to the **Create/Update Community Taxonomy** dialog).

After clicking **OK** and if the name is unique, the application confirms saving the data to the RPMS server.

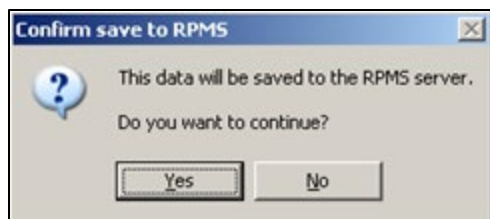


Figure 7-8: **Confirm save to RPMS** information message

Click **Yes** to save the data. (Otherwise, click **No**.)

If **Yes** is selected, the application displays the following message:



Figure 7-9: **Community Taxonomy Created** message

After clicking **OK**, the **Community** group box will change, showing the taxonomy name and what the taxonomy includes.

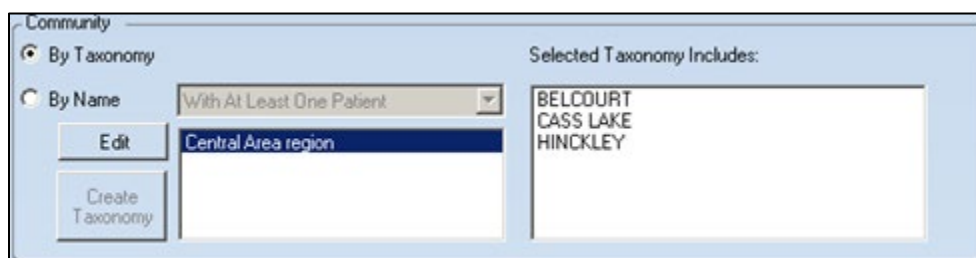


Figure 7-10: **Community** group box with By Taxonomy selected

The taxonomy-creating function is independent of the panel-save function; the taxonomy will be saved to the server once the user selects the Taxonomy Save function. The user has the potential to create multiple community taxonomies within the Panel Definition function and can create a community taxonomy without creating a panel.

The iCare application will observe the underlying business rules for taxonomy creation: a user can only edit the user's created taxonomy. iCare will not allow a duplicate taxonomy name if the user is not the owner of the original taxonomy.

7.3 Add/Remove Functionality

There are several **Add/Remove** dialogs used in iCare.

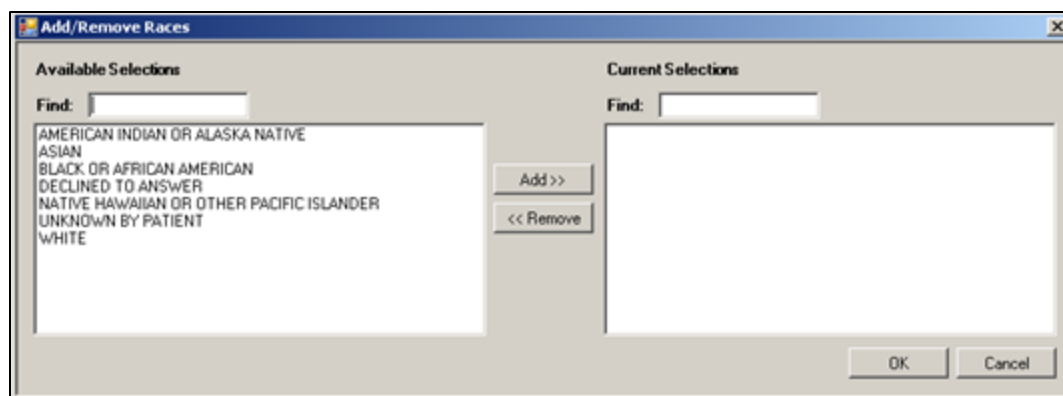


Figure 7-11: **Add/Remove Races** dialog

Use the **Add/Remove** dialog in the following manner:

- Type a few characters in the **Find** field to filter the list to those options containing those characters.
- Click **Add** to move a highlighted selection from the Available Selections area to the Current Selections area.
- Click **Remove** to move a highlighted selection from the Current Selections area to the Available Selections area.

When the dialog is complete, click **OK** to populate the appropriate field with the data in the Current Selections area. (Otherwise, click **Cancel**).

Appendix A Definition Details Layouts

Tables are listed below.

Table A-1: Allergies

Column Name	Type
Causative Agent	Default
Severity	Default
Signs/symptoms	Default
Origination Date	Default

Table A-2: Appointments (Scheduled Appts)

Column Name	Type
Appointment Date/Time	Default
Hosp Location	Default
Appt Status	Default
Appt Length	Optional
Appt Made	Optional
Check-In Entered	Optional
Checked In	Optional
Checked In By	Optional
Checked Out	Optional
Checked Out By	Optional
Checked Out Entered	Optional
Entered By	Optional

Table A-3: CPT

Column Name	Type
Date	Default
CPT	Default
Modifier 1	Default
Modifier 2	Default
Quantity	Default
Provider	Optional
Provider Narrative	Optional

Table A-4: Exams

Column Name	Type
Date	Default
Exam	Default
Result	Default
Date/Time Last Modified	Optional
Encounter Provider	Optional
Entered By	Optional
Modified By	Optional

Table A-5: ER

Column Name	Type
Admit Date	Default
Discharge Date	Default
Discharge Acuity	Default
Discharge Type	Default
Primary Diagnosis	Default
DX Narrative	Default
Admitting Provider	Optional
Discharge Nurse	Optional
Discharge Provider	Optional
Presenting Complaint	Optional
Transferred To	Optional
Transport Mode	Optional
Triage Nurse	Optional
Visit Type	Optional

Table A-6: High Risk Conditions

Column Name	Type
High Risk Condition	Default
Condition Code	Default
Onset Date	Default
Found In	Default

Table A-7: Health Factors

Column Name	Type
Visit Date	Default
Health Factor	Default
Health Factor Category	Default
Date/Time Last Modified	Optional
Encounter Provider	Optional
Entered By	Optional
Modified By	Optional

Table A-8: Immunizations

Column Name	Type
Visit Date	Default
Vaccination	Default
Vaccination Group	Default
Vaccine Short Name	Default
Admin Notes	Optional
Date Entered	Optional
Date/Time Last Modified	Optional
Encounter Provider	Optional
Event Date/Time	Optional
Injection Site	Optional
Last Modified By	Optional
Location	Optional
Lot #	Optional
Series	Optional
Service Category	Optional
Vaccine Eligibility	Optional
Who Entered	Optional

Table A-9: Inpatients

Column Name	Type
Admission Date	Default
Admit Type	Default
Attending Provider	Default
Ward	Default
Specialty	Default
Discharge Date	Default

Column Name	Type
Discharge Type	Default
Diagnosis	Optional
Nurse	Optional
Transfer Facility	Optional

Table A-10: Labs

Column Name	Type
Date	Default
Lab Test	Default
Lab Result	Default
Normal/Abnormal	Default
Ordering Physician	Default
Accession #	Optional
Collection Date/Time	Optional
Comment	Optional
Location	Optional
Result Date/Time	Optional
Status	Optional

Table A-11: Measurements

Column Name	Type
Date	Default
Measurement	Default
Result	Default
Date/Time Last Modified	Optional
Encounter Provider	Optional
Entered By	Optional
Modified By	Optional
Percentile	Optional
Qualifier(s)	Optional
Supplemental O2	Optional
VC/VU Numerator	Optional

Table A-12: Medications

Column Name	Type
Date	Default
Medication	Default
Instructions	Default
Days	Default
Quantity	Default
Ordering Physician	Default
# of Refills	Optional
Last Dispensed Date	Optional
Prescription Status	Optional

Table A-13: Notes

Column Name	Type
Date Entered	Default
Note Title	Default
Author/Dictator	Default
Expected CoSigner	Default
Hosp Location	Default
Site Location	Default
Status	Default
Additional Signers	Optional
Cosignature Date/Time	Optional
Cosigned By	Optional
Expected Signer	Optional
Signature Date/Time	Optional
Signed By	Optional
Subject	Optional
Visit Date	Optional
Visit Type	Optional

Table A-14: Orders

Column Name	Type
Order Date	Required
Order Number	Default
Provider	Default
Class	Default
Status	Default

Column Name	Type
Group	Default
Item	Default
Hosp Location	Default
Start Date	Default
Stop Date	Default
ICD Indicator	Optional
Indicator Text	Optional
Most Recent Action Date/Time	Optional
SNOMED Concept ID	Optional
Site Location	Optional
Who Entered	Optional

Table A-15: Patient Education

Column Name	Type
Date	Default
Topic	Default
Time Spent	Default
Level of Understanding	Default
Provider	Default
Comments	Default
Learning Readiness	Optional
Setting	Optional

Table A-16: POV

Column Name	Type
Date	Default
Purpose of Visit	Default
Primary/Secondary	Default
First/Revisit	Default
Encounter Provider	Default
SNOMED Description	Default
Provider Narrative	Default
SNOMED Concept ID	Default
Cause of DX	Optional
Date Entered	Optional
Entered By	Optional

Column Name	Type
External Cause	Optional
Last Modified	Optional
Laterality Qualifier	Optional
Modified By	Optional
Modifier	Optional
Place of Accident	Optional
Place of Occurrence	Optional
Present on Admission	Optional

Table A-17: Problems

Column Name	Type
Problem	Default
Date of Onset	Default
Status	Default
Provider Narrative	Default
Facility	Default
Date Last Modified	Optional
Problem ID	Optional
Problem Notes	Optional
SNOMED Concept	Optional
Severity	Optional
Used as Inpatient	Optional
Used as POV	Optional
User Last Modified	Optional

Table A-18: Referrals

Column Name	Type
Referral Date	Default
Referral #	Default
Referring Provider	Default
Status	Default
Facility Referred To	Default
Requesting Facility	Optional
Patient Type	Default
Referral Type	Default
Case Manager	Optional

Column Name	Type
Expected Begin Date	Default
Appointment Date	Default
Notes to Scheduler	Optional
Schedule within # days	Optional
Expected End Date	Optional
Actual End Date	Optional
Estimated LOS Hospital	Optional
Actual LOS Hospital	Optional
# Visits Under Referral	Optional
CHS Status	Optional
Priority	Optional
Diagnostic Category	Optional
Procedure Category	Optional
Payor	Optional
Purpose of Referral	Default
Consultation Rpt Status	Optional
Consultation Rpt Review Date	Optional
Consultation Rpt Reviewed By	Optional

Table A-19: Reminders

Column Name	Type
Reminder Due	Required
Notification Date	Default
Notification Method	Default
Completion Date	Optional
Creator	Optional
Eligible Provider	Optional

Table A-20: Visits

Column Name	Type
Visit Date/Time	Default
Location of Encounter	Default
Clinic	Default
Hosp Location	Default
Service Category	Default
Providers	Default

Column Name	Type
Created By	Optional
Date/Time Last Modified	Optional
Last Modified By	Optional
Outside Location	Optional
Outside Provider	Optional

Table A-21: Waitlist

Column Name	Type
Date/Time Added	Default
Priority	Default
Provider	Default
Clinic	Default
Recall Date	Default
Comments	Default
Add Reason	Optional
Date Removed	Optional
Last Appt with Clinic	Optional
Next Appt with Clinic	Optional
Resolution	Optional
Who Added	Optional
Who Removed	Optional

Appendix B Rules of Behavior

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

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

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

Both documents are available at this IHS website:

<https://home.ihs.gov/security/index.cfm>.

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

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

B.1 All RPMS Users

In addition to these rules, each application may include additional ROB that may be defined within that application's documentation (e.g., Dental, Pharmacy).

B.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 an employer before giving any information system access, sensitive or nonpublic agency information.
- Be aware that personal use of information resources is authorized on a limited basis within the provisions of *Indian Health Manual* Part 8, "Information Resources Management," Chapter 6, "Limited Personal Use of Information Technology Resources."

RPMS users shall not:

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

B.1.2 Information Accessibility

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

RPMS users shall:

- Access only those documents they created and those other documents to which they have a valid need-to-know and to which they have expressly 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 their functions, such as system administrator or application administrator.
- Acquire a written preauthorization by IHS policies and procedures before interconnection to or transferring data from RPMS.

B.1.3 Accountability

RPMS users shall:

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

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

B.1.4 Confidentiality

RPMS users shall:

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

RPMS users shall not:

- Allow confidential information to remain on the PC screen when someone has unauthorized access to that data nearby.
- Store sensitive files on a portable device or media without encrypting.

B.1.5 Integrity

RPMS users shall:

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

RPMS users shall not:

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

B.1.6 System Logon

RPMS users shall:

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

B.1.7 Passwords

RPMS users shall:

- Change passwords at least 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 lowercase letter, and one number. If possible, it is recommended that a unique character be used in the password.
- Change vendor-supplied passwords immediately.
- Protect passwords by committing them to memory or storing them safely (do not store passwords in login scripts or batch files).
- Change passwords immediately if a password has been seen, guessed, or otherwise compromised, and report the compromise or suspected compromise to their ISSO.
- Keep user identifications (IDs) and passwords confidential.

RPMS users shall not:

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

B.1.8 Backups

RPMS users shall:

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

B.1.9 Reporting

RPMS users shall:

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

RPMS users shall not:

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

B.1.10 Session Timeouts

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

RPMS users shall:

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

B.1.11 Hardware

RPMS users shall:

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

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

RPMS users shall not:

- Eat or drink near the system equipment.

B.1.12 Awareness

RPMS users shall:

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

B.1.13 Remote Access

Each subscriber organization establishes its 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 remote user authentication with ID and password or other acceptable technical means.
- Outline the work requirements, security safeguards, and procedures the employee must follow.
- Ensure adequate storage of files, removal, and nonrecovery of temporary files created in processing sensitive data, virus protection, and intrusion detection, and provide physical security for government equipment and sensitive data.
- Establish mechanisms to back up data created or stored at alternate work locations.

Remote RPMS users shall:

- Remotely access RPMS through a virtual private network (VPN) whenever possible. Direct dial-in access must be justified and approved in writing, and its use must be secured per industry best practices or government procedures.

Remote RPMS users shall not:

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

B.2 RPMS Developers

RPMS developers shall:

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

RPMS developers shall not:

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

B.3 Privileged Users

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

Privileged RPMS users shall:

- Verify that any user requesting access to any RPMS system has completed the appropriate access request forms.
- Ensure that government 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.
- Assisted the system owner in developing security plans, risk assessments, and supporting documentation for the certification and accreditation process.
- Ensure that any changes to RPMS that affect contingency and disaster recovery plans are conveyed to the person responsible for maintaining continuity of operations plans.
- Ensure that adequate physical and administrative safeguards are operational within their areas of responsibility and that access to information and data is restricted to authorized personnel on a need-to-know basis.
- Verify that users have received appropriate security training before allowing access to RPMS.
- Implement applicable security access procedures and mechanisms, incorporate appropriate levels of system auditing, and review audit logs.
- Document and investigate known or suspected security incidents or violations and report them to the ISSO, Chief Information Security Officer (CISO), and systems owner.
- Protect the supervisor, superuser, or system administrator passwords.
- Avoid instances where the same individual is responsible for several functions (i.e., transaction entry and 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 system's accountability, integrity, confidentiality, and availability.
- Replace passwords when a compromise is suspected. Delete user accounts as quickly as possible when the user is no longer authorized. 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 the authority to grant authorizations to others, review these other authorizations. Retrieve any devices used to gain access to the system or equipment. Cancel login IDs and passwords and delete or reassign related active and backup files.

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

Privileged RPMS users shall not:

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

Glossary

Context Menu

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

Designated Primary Care Provider

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

Free Text Field

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

iCare Package Manager

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

Panel Definition

The membership criteria were used to create a panel of patients.

Patient Panel

A list of patients defined in iCare by the user.

Providers

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

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

Taxonomy

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

Please see your CRS coordinator if an addition or a change is required for an existing taxonomy.

Tooltip

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

Acronym List

Acronym	Term Definitions
CAC	Clinical Application Coordinator
CISO	Chief Information Security Officer
CPT	Current Procedural Terminology
CRS	Clinical Reporting System
DOB	Date of Birth
DPCP	Designated Primary Care Provider
EHR	Electronic Health Record
ER	Emergency Room
GPRA	Government Performance and Results Act
GUI	Graphical User Interface
HHS	Health and Human Services
HRN	Health Record Number
ICD	International Classification of Diseases
IHS	Indian Health Service
IPC	Improving Patient Care
ISSO	Information System Security Officer
I/T/U	Indian Health Service, or Tribal or Urban Indian health programs
OIT	Office of Information Technology
PCC	Patient Care Component
POV	Purpose of Visit
RPMS	Resource and Patient Management System
SNOMED	Systematized Nomenclature of Medicine
SSN	Social Security Number

Contact Information

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

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