



RESOURCE AND PATIENT MANAGEMENT SYSTEM

Laboratory Reference COVID-19 ID NOW

(LR)

User Manual

Version 5.2 Patch 1045 April 2020

Office of Information Technology Division of Information Technology

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Revision History

Version	Date	Author	Section	Page #	Summary of Change
5.2, P1045	April 2020	Karen Romancito	All Sections	All pages	New publication

Preface

Due to the recent COVID-19 pandemic, the Indian Health Service (IHS) Office of Information Technology (OIT) is providing an *urgent*, rapid patch release for the LR namespace, the RPMS Laboratory Information System: LR*5.2*1045.

This software release is required due to the recent availability of a standardized testing platform and test method. The standardized testing is the Abbott ID NOW and the ID NOW COVID-19. The test platform and kits are being provided to 250 Indian Health Service sites to expedite testing capabilities for rural healthcare facilities and improve testing turnaround times for COVID-19.

LR*5.2*1045 includes two atomic test entries and a cosmic test panel in the RPMS VA FileMan test library, File 60 LABORATORY TEST. These are specifically intended for the Abbott ID NOW COVID-19 test system. LR*5.2*1045 also includes an entry in the IHS LAB CPT CODE file for the new COVID-19 test panel with the correct CPT/HCPCS codes.

There are a few easy activation steps for both the atomic and cosmic files. Please read through this guide and review the LR*5.2*1045 Patch Release and KIDS notes, if available. The new COVID-19 test will not work until activated.

Note: As with other RPMS laboratory test file additions, local testing should be completed and documented prior to making available for local test ordering and resulting.

1.0 IHS Lab Version & Patch Report

The Lab Version & Patch Report Option was added to the **IHS Lab Main Support Menu (BLRMENU)**. The report allows the Laboratorian to display the site's Lab Version number and latest patch.

1.1 LVP IHS Lab Version & Patch Report

The LVP option is available on the BLRMENU as shown in Figure 1-1.

IHS Lab Main Support Menu LS Link Transaction Processor Status	
LS Link Transaction Processor Status	
LS Link Transaction Processor Status	
7421 Will restart the 7421 label routine if turned off.	
INQ Inquire into the IHS LAB Transaction Log	
FLD Search Transactions for PCC LINK DISABLE Error	
RSN Requeue by Sequence Number	
RST Requeue Transaction by Sort Template	
CPT Enter/edit IHS Lab CPT File	
FAL Find ALL PCC Link Errors from Lab	
STP Stop/restart Lab to PCC Transaction Processor	
MSTR Enter/edit BLR MASTER CONTROL FILE	
POV Purpose of Visit Compliance Report	
6249 Display File 62.49 HL7 Segments	
BZY IHS TaskMan Busy Device Rpt	
CCCD Create Creatinine Clearance Delta Check	
CDVC Edit BLR COLL DT PCC VISIT CREATION Parameter	
CGFR Create CKD-EPI Equation Delta Check	
CLR Clear BLR errors from error log	
CUM IHS CUMULATIVE MENU	
DADD Add Completed Date to Accession Tests	
EAPE Edit BLR EMERGENCY ALERT Parameter	
EDCC BLR CC DATA Parameter Edit	
Press 'RETURN' to continue, '^' to stop:	
EMGP Edit LAB HIGH URGENCY NOTIFICATION Mail Group	
ERRI Error Trap Reporting	
ETP LA7 Message Queue Error Messages to Purgeable	
IHSM IHS Lab Microbiology Report	
ILUM IHS LOINC/UCUM MENU	
LABT Determine if Required RPMS Lab Options Tasked	
LOI IHS Lab Package LOINC Percentage Report	
LRAS Accession IHS Lab Microbiology Report	
LROS Order/test status by Order Number	
LTRR Laboratory Test (#60) File's Reference Ranges	
LVP IHS Lab Version & Patch Report	
MACC Mark Multiple Accessions as Not Performed	
MILO Micro Interim Report by Location	
MMR Lab Description Abbreviation Report	
NLO Lab Tests Without LOINC Entries Report	
ORDO 'Open Lab Orders' Reports	
ORPH Remove Orphans from # 68	
ORPR BROWSER REPORT ON ORPHANS FROM # 68	
PAMG Edit IHS Lab Parameters and/or Mail Groups	
PDOC Patient Reminder Document	
POCA Edit BLR AGE DETAIL Parameter	

IHS Lab Version & Patch Report

PURA	Purge VA Alerts
	Press 'RETURN' to continue, '^' to stop:
RBE	Clear ALL BLR Errors from Error Log
REFL	Reference Lab Main Menu
REPL	Replace Lab Order/Test Status
SF60	IHS Search File 60
SHDR	State Health Dept Report
TCCR	Test Creatinine Clearance Logic
TGFR	Test CKD-EPI Equation Logic
	Count Accessioned Tests Using Lab Data File
	IHS Lab Ask-At-Order

Figure 1-1: Full display of BLR MENU and LVP Option

1.2 IHS Lab Version & Patch Report for LR*5.2*1045

When the LVP option is selected, the report will look similar to Figure 1-2.

Date:04/13/20	DEMO HOSPITAL IHS LAB Package Current VERSION & PATCH Report	Time:10:15 AM
	IHS Lab Version 5.2	
	Latest IHS Lab Patch: LR*5.2*1045	
Latest 1	IHS Lab Patch Install Date/Time: APR 09,	2020 6:39 PM

Figure 1-2: Example of the IHS Lab Version & Patch Report

2.0 LS Link Transaction Processor Status

The Link Transaction Processor Status option was added to the IHS Lab Main Support Menu (BLRMENU). This option allows the user to determine whether the processor that passes data from the Transaction Log to PCC is currently running and whether there are any delays in the transmission of data.

2.1 LS Option Link Transaction Processor Status

The LS option is available on the BLRMENU as shown in Figure 2-1.

```
LR Laboratory DHCP Menu ...
IHS Lab Main Support Menu
LS Link Transaction Processor Status
7421 Will restart the 7421 label routine if turned off.
INQ Inquire into the IHS LAB Transaction Log
CPT Enter/edit IHS Lab CPT File
STP Stop/restart Lab to PCC Transaction Processor
PAMG Edit IHS Lab Parameters and/or Mail Groups ...
LVP IHS Lab Version & Patch Report
```

Figure 2-1: Shorten BLR Menu – LS option for PCC LINKER

2.2 Monitoring the Link Transaction Processor Status

Installation of laboratory patches often requires the processor to be turned off. To assure the PCC Linker was turned on, post installation of the patch, Laboratorians should check the PCC Linker using the LS Link Transaction Processor Status option.

The Currently processing day should match the current date.

The LS option is available on the BLRMENU as shown in Figure 2-2.

DEMO HOSPITAL Processor Status APR 13, 2020@10:40:05					
Curre	ntly pro	cessing day	APR 13, 2020		
	Event	Entry # in Queue	==== IHS Lab Transact: Sequence # Date	ion ==== Time	
Last Entry Assigned	28	193	79,770 04/13/2020	10:03	
Last Entry Processed	28	193	79,770 04/13/2020	10:03	

Figure 2-2: Processor Status example

2.3 Link Transaction Processor Status – HALTED

Installation of Laboratory patches often requires the processor to be turned off. Occasionally the PCC Linker will not be turned back to on after the patch is installed.

The Processor Status displays **Halted by user** when the PCC Linker is not restarted. Figure 2-3 provides an example of the Processor Status showing the Halted by user; notice the **Currently processing day** does not match the current date.

	DE Proc APR 13	MO HOSPITAI cessor Stat , 2020@12:1	us 18:30		
Currently processing day	APR 09, 2	2020			
	Event	Entry # in Queue	==== IHS La Sequence	b Transac # Date	tion ==== Time
Last Entry Assigned 23:02	10	1	2,358	04/09/2	020
Last Entry Processed	10	1	2,358 04/09	9/2020	23:02

Figure 2-3: Example of HALTED Lab processor

2.4 Restart Lab to PCC Transaction Processor

Laboratories are able to restart the PCC Linker using the **STP Stop/restart Lab to PCC Transaction Processor** option.

To restart the PCC Linker, select the **STP** option, type your institution name at the "BLR MASTER CONTROL SITE" prompt, and type **NO** at the "STOP PROCESSOR" prompt.

Figure 2-4 displays an example of restarting the PCC Linker.

Important: It is recommended to check, again, the status of the Link Transaction Processor Status after restarting the PCC Linker.

```
LR
      Laboratory DHCP Menu ...
      IHS Lab Main Support Menu
         Link Transaction Processor Status
   LS
   7421 Will restart the 7421 label routine if turned off.
   INQ
         Inquire into the IHS LAB Transaction Log
        Enter/edit IHS Lab CPT File
   CPT
   STP
         Stop/restart Lab to PCC Transaction Processor
   PAMG Edit IHS Lab Parameters and/or Mail Groups ...
   LVP
         IHS Lab Version & Patch Report
         Edit BLR AGE DETAIL Parameter
   POCA
```

Select IHS Lab Main Support Menu Option: STP Stop/restart Lab to PCC Transaction Processor Select BLR MASTER CONTROL SITE: DEMO HOSPITAL STOP PROCESSOR: YES// NO

Figure 2-4: Shorten BLR Menu – Restart PCC Linker

3.0 Laboratory Test for COVID-19 (Abbott ID NOW)

With the installation of LR*5.2*1045, the pre-built COVID-19 atomic tests and the COVID-19 test panel for immediate test ordering and reporting will be available. Test files should only be used for the Abbott ID NOW COVID-19 test method.

The Lab atomic tests include appropriate LOINC entry and the IHS LAB CPT CODE file definition for CPT/HCPCS pointers.

Important: To complete the setup of the test after the installation is complete, the following steps *must* be performed in RPMS VA FileMan, File 60.

See Figure 3-1 for an example of adding both the appropriate **Institution** and **Accession Area** fields.

```
Access FileMan
     Enter or Edit File Entries
     Search File Entries
     Inquire to File Entries
INPUT TO WHAT FILE: LABORATORY TEST
EDIT WHICH FIELD: ACCESSION AREA
EDIT WHICH ACCESSION AREA SUB-FIELD: ALL//
THEN EDIT FIELD:
Select LABORATORY TEST NAME: COVID-19 (Abbott ID NOW)
Select INSTITUTION:
 ACCESSION AREA:
Select LABORATORY TEST NAME: PROCEDURAL CONTROL
Select INSTITUTION:
 ACCESSION AREA:
Select LABORATORY TEST NAME: COVID-19 (Abbott ID NOW)
Select INSTITUTION:
 ACCESSION AREA:
```

Figure 3-1: RPMS VA FileMan, File 60

Note: Test the new COVID-19 test panel in RPMS/EHR for quality assurance *prior* to making available for computer provider order entry or point-of-care utilization.

If RPMS/EHR is a multi-divisional configuration, the same fields will need to be defined as applicable.

3.1 INQUIRE to File 60: COVID-19 Lab Tests

Figure 3-2 displays a Laboratory Test inquiry.

```
VA FileMan Version 22.0
           Enter or Edit File Entries
           Print File Entries
           Search File Entries
           Modify File Attributes
           Inquire to File Entries
Select VA FileMan Option: INquire to File Entries
OUTPUT FROM WHAT FILE: LABORATORY TEST//
Select LABORATORY TEST NAME: COVID-19 (Abbott ID NOW)
ANOTHER ONE: _COVID-19(Abbott ID NOW)
ANOTHER ONE: _PROCEDURAL CONTROL
ANOTHER ONE:
STANDARD CAPTIONED OUTPUT? Yes//
                                      (Yes)
Include COMPUTED fields: (N/Y/R/B): NO// BOTH Computed Fields and Record
Number
 (IEN)
DISPLAY AUDIT TRAIL? No// NO
LABTEST IEN: 2001553
                                            NAME: COVID-19 (Abbott ID NOW)
  TYPE: BOTH
  SUBSCRIPT: CHEM, HEM, TOX, SER, RIA, ETC.
 UNIQUE ACCESSION #: YESLAB COLLECTION SAMPLE: SWAB-COVID19HIGHEST URGENCY ALLOWED: ASAPREQUIRED TEST: YES
 FORCED URGENCY: ASAP
                                           REQUIRED COMMENT: ORDER COMMENT
 COMBINE TEST DURING ORDER: NO PRINT NAME: ABBOTT ID NOW
                                            LAB TEST: _COVID-19(Abbott ID NOW)
LAB TEST: _PROCEDURAL CONTROL
NUMBER: 1
NUMBER: 2
COLLECTION SAMPLE: SWAB-COVID19
  CONTAINER (c): SWAB
SYNONYM: CORONAVIRUS
SYNONYM: ABBOTT ID NOW
SYNONYM: COVID19
INSTITUTION:
SITE NOTES DATE: APR 08, 2020
 NOTE: LAB TEST CREATED IN LAB PATCH 1045, APRIL 2020
LABTEST IEN: 2001554
                                            NAME: COVID-19 (Abbott ID NOW)
 TYPE: OUTPUT (CAN BE DISPLAYED)
  SUBSCRIPT: CHEM, HEM, TOX, SER, RIA, ETC.
Enter RETURN to continue or '^' to exit:
LOCATION (DATA NAME): CH;12570001;1FIELD: DD(63.04,12570001,HIGHEST URGENCY ALLOWED: ASAPREQUIRED TEST: YESPRINT NAME: COVID RESULTDATA NAME: COVID19ASITE/SPECIMEN: NASOPHARYNGEAL MUCUSREFERENCE LOW: "Negative"
 INTERPRETATION: A Negative Result does not rule out co-infections with
other
 pathogens.
  LOINC CODE: 94534-5
QUALITATIVE VALUES: P
QUALITATIVE VALUES: p
QUALITATIVE VALUES: POSITIVE
QUALITATIVE VALUES: positive
COLLECTION SAMPLE: SWAB-COVID19
```

CONTAINER (c): SWAB ACCESSION AREA: INSTITUTION: SITE NOTES DATE: APR 08, 2020 NOTE: LAB TEST CREATED IN LAB PATCH 1045, APRIL 2020 INPUT TRANSFORM (c): P:COVID-19 POSITIVE;N:COVID-19 Negative; DATA TYPE (c): SET LABTEST IEN: 2001555 NAME: PROCEDURAL CONTROL TYPE: OUTPUT (CAN BE DISPLAYED) SUBSCRIPT: CHEM, HEM, TOX, SER, RIA, ETC. LOCATION (DATA NAME): CH;12570002;1 FIELD: DD(63.04,12570002, Enter RETURN to continue or '^' to exit: HIGHEST URGENCY ALLOWED: ASAPREQUIRED TEST: YESPRINT NAME: Procedural QCDATA NAME: PROCCONT SITE/SPECIMEN: NASOPHARYNGEAL MUCUS COLLECTION SAMPLE: SWAB-COVID19 CONTAINER (c): SWAB INSTITUTION: ACCESSION AREA: SITE NOTES DATE: APR 08, 2020 NOTE: LAB TEST CREATED IN LAB PATCH 1045, APRIL 2020 INPUT TRANSFORM (c): V:Valid; DATA TYPE (c): SET Select LABORATORY TEST NAME:

Figure 3-2: Laboratory Test inquiry

3.2 Review the ACCESSION File

Determine which Accession area entry will be used for the COVID-19 Lab Tests. Access VA FileMan and review the Accession entries before adding to the new COVID-19 Lab Tests as shown in Figure 3-3.

```
VA FileMan Version 22.0
         Enter or Edit File Entries
         Print File Entries
          Search File Entries
         Modify File Attributes
         Inquire to File Entries
Select VA FileMan Option: ENTER or Edit File Entries
INPUT TO WHAT FILE: LABORATORY TEST// ACCESSION
    1 ACCESSION
    1 ACCESSION
2 ACCESSION TEST GROUP
                                        (56 entries)
                                        (1 entry)
CHOOSE 1-2: 1 ACCESSION
                                        (56 entries)
EDIT WHICH FIELD: ALL//
Select ACCESSION AREA: ?
Answer with ACCESSION AREA, or UID, or HOST UID
 Do you want the entire 56-Entry ACCESSION List? Y (Yes)
   Choose from:
  BLOOD BANK
   CHEMISTRY
  COAGULATION
  HEMATOLOGY
  MANUAL TESTING
  MICROBIOLOGY
   PHARM POCT
```

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```
POINT OF CARE
SENDOUTS
STATE LAB ODH
URINALYSIS
ZZAZ STATELAB
ZZCH MANUAL TESTING
^
You may enter a new ACCESSION, if you wish
ANSWER MUST BE 2-20 CHARACTERS IN LENGTH
Select ACCESSION AREA:
```



3.3 Add INSTITUTION and ACCESSION to COVID-19 Tests

Figure 3-4 displays how to add Institution and Accession to lab tests.

```
VA FileMan Version 22.0
         Enter or Edit File Entries
         Print File Entries
          Search File Entries
         Modify File Attributes
         Inquire to File Entries
Select VA FileMan <TEST ACCOUNT> Option: ENTer or Edit File Entries
INPUT TO WHAT FILE: ACCESSION// 60 LABORATORY TEST (3438 entries)
EDIT WHICH FIELD: ALL// ACCESSION
     1 ACCESSION AREA
                          (multiple)
        ACCESSION WKLD CODE
     2
                               (multiple)
CHOOSE 1-2: 1 ACCESSION AREA (multiple)
   EDIT WHICH ACCESSION AREA SUB-FIELD: ALL//
THEN EDIT FIELD:
Select LABORATORY TEST NAME: COVID-19 (Abbott ID NOW)
Select INSTITUTION: DEMO HOSPITAL
 INSTITUTION: DEMO HOSPITAL//
 ACCESSION AREA: ?
    You can not select an accession area designated Work Area only.
 Answer with ACCESSION AREA, or UID, or HOST UID
 Do you want the entire ACCESSION List? Y (Yes)
  Choose from:
  BLOOD BANK
   CHEMISTRY
   COAGULATION
   HEMATOLOGY
   MANUAL TESTING
   MICROBIOLOGY
   PHARM POCT
   POINT OF CARE
   SENDOUTS
   STATE LAB ODH
   URINALYSIS
   ZZAZ STATELAB
   ZZCH MANUAL TESTING
  ACCESSION AREA: CHEMISTRY
```

Select LABORATORY TEST NAME: _COVID-19(Abbott ID NOW)
Select INSTITUTION: DEMO HOSPITAL
INSTITUTION: DEMO HOSPITAL//
ACCESSION AREA: CHEMISTRY
Select LABORATORY TEST NAME: _PROCEDURAL CONTROL
Select INSTITUTION: DEMO HOSPITAL
INSTITUTION: DEMO HOSPITAL//
ACCESSION AREA: CHEMISTRY
Select LABORATORY TEST NAME:

Figure 3-4: Adding Institution and Accession to lab tests

3.4 INQUIRE to File 60: Ready for Use – COVID-19 Tests

Figure 3-5 displays how to review the added Institution and Accession.

```
VA FileMan Version 22.0
           Enter or Edit File Entries
           Print File Entries
           Search File Entries
           Modify File Attributes
           Inquire to File Entries
Select VA FileMan Option: INquire to File Entries
OUTPUT FROM WHAT FILE: LABORATORY TEST//
Select LABORATORY TEST NAME: COVID-19 (Abbott ID NOW)
ANOTHER ONE: _COVID-19(Abbott ID NOW)
ANOTHER ONE: _PROCEDURAL CONTROL
ANOTHER ONE:
STANDARD CAPTIONED OUTPUT? Yes//
                                       (Yes)
Include COMPUTED fields: (N/Y/R/B): NO// BOTH Computed Fields and Record
Number
(IEN)
DISPLAY AUDIT TRAIL? No//
                               NO
LABTEST IEN: 2001553
                                              NAME: COVID-19 (Abbott ID NOW)
 TYPE: BOTH
  SUBSCRIPT: CHEM, HEM, TOX, SER, RIA, ETC.
 UNIQUE ACCESSION #: YES
HIGHEST URGENCY ALLOWED: ASAP
FORCED URGENCY: ASAP
LAB COLLECTION SAMPLE: SWAB-COVID19
REQUIRED TEST: YES
REQUIRED COMMENT: ORDER COMMENT
                                      PRINT NAME: ABBOTT ID NON
LAB TEST: _COVID-19(Abbott ID NOW)
LAB TEST: PROCEDURAL CONTROL
  COMBINE TEST DURING ORDER: NO
NUMBER: 1
NUMBER: 2
COLLECTION SAMPLE: SWAB-COVID19
 CONTAINER (c): SWAB
SYNONYM: CORONAVIRUS
SYNONYM: ABBOTT ID NOW
SYNONYM: COVID19
INSTITUTION: DEMO HOSPITAL
SITE NOTES DATE: APR 08, 2020
NOTE: LAB TEST CREATED IN LAB PATCH 1045, APRIL 2020
```

LABTEST IEN: 2001554 NAME: COVID-19 (Abbott ID NOW) TYPE: OUTPUT (CAN BE DISPLAYED) SUBSCRIPT: CHEM, HEM, TOX, SER, RIA, ETC. Enter RETURN to continue or '^' to exit: LOCATION (DATA NAME): CH;12570001;1 FIELD: DD(63.04,12570001, HIGHEST URGENCY ALLOWED: ASAPREQUIRED TEST: YESPRINT NAME: COVID RESULTDATA NAME: COVID19ASITE/SPECIMEN: NASOPHARYNGEAL MUCUSREFERENCE LOW: "Negative" INTERPRETATION: A Negative Result does not rule out co-infections with other pathogens. LOINC CODE: 94534-5 QUALITATIVE VALUES: P QUALITATIVE VALUES: p QUALITATIVE VALUES: POSITIVE QUALITATIVE VALUES: positive COLLECTION SAMPLE: SWAB-COVID19 CONTAINER (c): SWAB INSTITUTION: DEMO HOSPITAL ACCESSION AREA: CHEMISTRY SITE NOTES DATE: APR 08, 2020 NOTE: LAB TEST CREATED IN LAB PATCH 1045, APRIL 2020 INPUT TRANSFORM (c): P:COVID-19 POSITIVE;N:COVID-19 Negative; DATA TYPE (c): SET LABTEST IEN: 2001555 NAME: PROCEDURAL CONTROL TYPE: OUTPUT (CAN BE DISPLAYED) SUBSCRIPT: CHEM, HEM, TOX, SER, RIA, ETC. LOCATION (DATA NAME): CH;12570002;1 FIELD: DD(63.04,12570002, Enter RETURN to continue or '^' to exit: HIGHEST URGENCY ALLOWED: ASAPREQUIRED TEST: YESPRINT NAME: Procedural QCDATA NAME: PROCCON DATA NAME: PROCCONT SITE/SPECIMEN: NASOPHARYNGEAL MUCUS COLLECTION SAMPLE: SWAB-COVID19 CONTAINER (c): SWAB INSTITUTION: DEMO HOSPITAL ACCESSION AREA: CHEMISTRY SITE NOTES DATE: APR 08, 2020 NOTE: LAB TEST CREATED IN LAB PATCH 1045, APRIL 2020 INPUT TRANSFORM (c): V:Valid; DATA TYPE (c): SET Select LABORATORY TEST NAME:

Figure 3-5: Review the added Institution and Accession

4.0 Data Names for COVID-19 Lab Tests

Each individual test (atomic) in the **LABORATORY TEST** file requires a Data Name entry in file #60. Each test that will have results associated with it must have a data name created. The **LAB DATA** file is where results are stored in the Laboratory package for report retrieval.

With the installation of LR*5.2*1045, two new Data Names for the COVID-19 lab tests will be added post-installation of the patch. The new Data Names are **COVID19 ABBOTT ID NOW** and **PROCEDURAL CONTROL**.

4.1 Data Names Included in Lab Patch – Review by MODify

Figure 4-1 displays data names as new entries.

```
LR
     Laboratory DHCP Menu ...
     Supervisor menu ...
     Lab liaison menu ...
         Add a new internal name for an antibiotic
  ANT
  BCF Lab Bar Code Label Formatter
  BCZ Lab Zebra Label Utility
  DATA Add a new data name
  HDR Recover/Transmit Lab HDR Result Messages
  MOD Modify an existing data name
  SMGR Lab Shipping Management Menu ...
Select Supervisor menu Option: MOD Modify an existing data name
This option allows modifying an existing data name.
Select CHEM, HEM, TOX, RIA, SER, etc. SUB-FIELD: COVID19 ABBOTT ID NOW
Data Name: COVID19 ABBOTT ID NOW Subfield #: 2907703 Type: SET OF
CODES
P - COVID-19 POSITIVE
N - COVID-19 Negative
  Do you wish to modify this data name? No//
 This option will add a new data name to the lab package.
AND
Select Lab liaison menu Option: MOD Modify an existing data name
This option allows modifying an existing data name.
Select CHEM, HEM, TOX, RIA, SER, etc. SUB-FIELD: PROCEDURAL CONTROL
Data Name: PROCEDURAL CONTROL Subfield #: 2907704 Type: SET OF CODES
V - Valid
  Do you wish to modify this data name? No//
                                              (NO)
 This option will add a new data name to the lab package.
```

5.0 Collection Sample for COVID-19 Lab Test

The COLLECTION SAMPLE file (#62) contains all information specific for the collection sample requirements for a particular laboratory. Each collection sample entry is defined in this file, and the site-specific information contained includes the default type of specimen and type of collection, and tube top color.

With the installation of LR*5.2*1045, a new entry to the **COLLECTION SAMPLE** file named **SWAB-COVID19** will be added to the file and to the COVID-19 Laboratory Tests.

5.1 Collection Sample Named SWAB-COVID19

Figure 5-1 displays a collection sample named SWAB-COVID19.

```
VA FileMan Version 22.0
         Enter or Edit File Entries
         Print File Entries
         Search File Entries
         Modify File Attributes
         Inquire to File Entries
Select VA FileMan Option: INquire to File Entries
OUTPUT FROM WHAT FILE: V LAB// COLLECTION SAMPLE (167 entries)
Select COLLECTION SAMPLE NAME: SWAB-COVID19 NASOPHARYNGEAL MUCUS
SWAB
ANOTHER ONE:
STANDARD CAPTIONED OUTPUT? Yes// (Yes)
Include COMPUTED fields: (N/Y/R/B): NO// BOTH Computed Fields and Record
Number
 (IEN)
NUMBER: 214
                                      NAME: SWAB-COVID19
 DEFAULT SPECIMEN: NASOPHARYNGEAL MUCUS
 TUBE TOP COLOR: SWAB
Select COLLECTION SAMPLE NAME:
```

Figure 5-1: Collection Sample named SWAB-COVID19

6.0 IHS LAB CPT CODE for COVID-19 Lab Test

To capture the CPT DATA to pass from the Laboratory Package to the Patient Care Component (PCC), an entry must exist in the **IHS LAB CPT CODE** file for each billable lab test associated with the lab order. The entry must identify the associated panel or test.

With the installation of LR*5.2*1045, a new entry to **the IHS LAB CPT CODE** file, will be added for the orderable Lab Test named **COVID-19** (Abbott ID NOW).

6.1 CPT CODES Added for COVID-19 (Abbott ID NOW)

Figure 6-1 displays the IHS LAB CPT CODE file as an added entry.

```
VA FileMan Version 22.0
         Enter or Edit File Entries
         Print File Entries
         Search File Entries
         Modify File Attributes
          Inquire to File Entries
Select VA FileMan <TEST ACCOUNT> Option: INquire to File Entries
OUTPUT FROM WHAT FILE: COLLECTION SAMPLE// IHS LAB CPT CODE
Select IHS LAB CPT CODE NAME: COVID-19 (ABBOTT ID NOW)
ANOTHER ONE:
STANDARD CAPTIONED OUTPUT? Yes//
                                 (Yes)
Include COMPUTED fields: (N/Y/R/B): NO// BOTH Computed Fields and Record
Number
 (IEN)
NUMBER: 1397
                                        NAME: COVID-19 (ABBOTT ID NOW)
 LAB SECTION: COVID
                                        CREATE DATE: APR 07, 2020@09:06:29
  DATE/TIME ACTIVE: APR 07, 2020@09:06:31
 PANEL/TEST: COVID-19 (Abbott ID NOW)
CPT CODE: 87635
CPT CODE: U0002
Select IHS LAB CPT CODE NAME:
```

Figure 6-1: IHS LAB CPT CODE file added entry

7.0 Testing the New Lab Test

To confirm that all results posted on EHR correctly with all information relating to units, reference ranges, or abnormal flags, the best practice is to test the new Lab Test by ordering and resulting before adding to the Electronic Health Record (EHR) Lab Menu. The information below provides the outline of how to order, accession, and result within the RPMS Lab Package.

RPMS Lab Package: ORDER & ACCESSION Using Multipurpose Accessioning

LABORATORY DHCP MENU

Accessioning menu

- 1. Select LABORATORY TEST NAME.
- 2. Select **PATIENT NAME**.
- 3. Select PATIENT LOCATION.
- 4. Select **PROVIDER**.
- 5. Select NATURE OF ORDER/CHANGE.
- 6. Add COLLECTION DATE/TIME: NOW.
- 7. Select SNOMED CODE or Add CLINICAL INDICATION.
- 8. Capture/write down accession number to be resulted.

RPMS Lab Package: RESULT/ VERIFY Using Enter/Verify/Modify Data (Manual)

LABORATORY DHCP MENU

Process data in lab menu

- 1. EM Enter/verify/modify data (manual).
- 2. Verify by: 1// Accession Number.
- 3. Select ACCESSION _____ (type Accession number).
- 4. ENTER RESULTS.
- 5. Approve for release by entering your initials: **.

RPMS Lab Package: REVIEW RESULTS Using INTERIM REPORT and EHR LAB TAB

LABORATORY DHCP MENU

Results menu

- 1. INTERIM REPORT
- 2. Select PATIENT NAME
- 3. DATE TO START WITH: Today
- 4. DATE TO END: T-7
- 5. PRINT or DISPLAY results

ELECTRONIC HEALTH RECORD

- 1. PATIENT NAME
- 2. LAB TAB review results

7.1 RPMS Lab Package: ORDER & ACCESSION

Multipurpose accessioning is a menu under the Laboratory Menu that can be used to order and accession a test within the RPMS Laboratory Package. Figure 7-1 displays a typical script for a **Multipurpose accessioning** session.

```
Laboratory DHCP Menu
   1
         Phlebotomy menu ...
   2
         Accessioning menu ...
   3
         Process data in lab menu ...
   4
         Quality control menu ...
        Results menu ...
   5
   6
        Information-help menu ...

    Microbiology menu ...
    Supervisor menu ...

   BLR IHS Lab Main Support Menu ...
Select Laboratory DHCP Menu Option: 2 Accessioning menu
   RSM
         Reprint Shipping Manifest
          Accessioning tests ordered by provider order entry
          Accessioning, standard (Microbiology)
          Add tests to a given accession.
          Bypass normal data entry
          Delete entire order or individual tests
          Delete test from an accession
          Fast lab test order (IMMEDIATE COLLECT)
          Fast lab test order (ROUTINE)
          Fast lab test order (SEND PATIENT)
          Inquiry to LAB TEST file
          Lab add test(s) to an existing order
```

Lab orders by collection type Lookup accession Manually accession QC, Environmental, etc. Merge Accessions Multipurpose accessioning Order/test status Select Accessioning menu Option: MULtipurpose accessioning WANT TO ENTER COLLECTION TIMES? YES// Select ACCESSION TEST GROUP: Select one or more tests from which you will be generating your entries. Select LABORATORY TEST NAME: COVID-19 (Abbott ID NOW) Is SWAB-COVID19 SWAB the correct sample to collect? Y// Same specimen/source for the rest of the order? No// (No) Select LABORATORY TEST NAME: Select Patient Name: DEMO, ALISTER LANE DEMO,ALISTER LANE <A> M 05-20-1980 XXX-XX-4693 TST 124625 Select one of the following: LC LAB COLLECT (INPATIENTS-MORN. DRAW) SP SEND PATIENT WARD/CLINIC COLLECT WC Immed COLLECT Т Specimen collected how ? : SP// SEND PATIENT PATIENT LOCATION: LAB PROVIDER: DEMO, PROVIDER LAB Order number: 554 For COVID-19 (Abbott ID NOW) Other tests? $\rm N//$ Nature of Order/Change: POLICY// You have just selected the following tests for DEMO,ALISTER LANE 124625 entry no. Test Sample 1 COVID-19 (Abbott ID NOW) SWAB-COVID19 NASOPHARYNGEAL MUCUS All satisfactory? Yes// (Yes) LAB Order number: 554 Collection Date @Time: NOW (APR 14, 2020@13:01:49) ~For Test: COVID-19 (Abbott ID NOW) SWAB-COVID19 NASOPHARYNGEAL MUCUS Enter Order Comment: TESTING MULTPURPOSE ACCESSIONING (~TESTING MULTPURPOSE ACC ESSIONING) OK? Yes// (Yes) BLR SNOMED SELECT Apr 14, 2020 13:02:08 Page: 1 of 1 Select an appropriate SNOMED code from the Patient's 16 Problems. SNOMED DESCRIPTION SNOMED ICD 1) 418928016 Well woman health examination ZZZ.999 2) 418926017 Well man health examination ZZZ.999 3) 2472274014 Well child visit ZZZ.999 4) 674991000124Stress fracture of right radius ZZZ.999 5) 642100011911Compression fracture of thoracic vertebra, nontrau ZZZ.999 6) 650100011911Compression fracture of lumbosacral vertebra, nont ZZZ.999 7) 318474013 Closed compression fracture sacrum ZZZ.999

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8)	420087013	Burst fracture of thoracic vertebra	ZZZ.999
9)	420098014	Burst fracture of lumbar vertebra	ZZZ.999
10)	301485011	Asthma	J45.909
11)	406636013	Anemia	D64.9
12)	208625010	Mammographic breast mass	R92.8
13)	41990019	Headache	ZZZ.999
14)	197761014	Type 2 diabetes mellitus	E11.9
15)	95910010	Joint pain	M25.50
16)	398001015	Sore throat symptom	J02.9
S S	elect SNOMED	Number or Other Action	
Sele	ct Action: NI	EXT SCREEN// S Select SNOMED Number or Other Activ	on
ACCE	SSION: CH 0-	414 7 <1001050007>	
COVI	D-19 (Abbott	ID NOW) SWAB-COVID19 NASOPHARYNGEAL MUCUS	
Sele	ct Patient Na	ame:	

Figure 7-1: Example of Multipurpose Accessioning

7.2 RPMS Lab Package: RESULT/VERIFY

Verifying the laboratory accession is Resulting the laboratory accession. The following script (Figure 7-2) provides steps to VERIFY a lab test within the RPMS Laboratory Package.

```
Laboratory DHCP Menu
        Phlebotomy menu ...
   1
   2
        Accessioning menu ...
   3
        Process data in lab menu ...
   4
        Quality control menu ...

5 Results menu ...
6 Information-help menu ...
10 Microbiology menu ...
11 Supervisor menu

         Supervisor menu ...
   11
   BLR IHS Lab Main Support Menu ...
Select Laboratory DHCP Menu Option: 3 Process data in lab menu
   ΕA
         Enter/verify data (auto instrument)
        Enter/verify data (Load list)
   ET.
   EM Enter/verify/modify data (manual)
   EW Enter/verify data (Work list)
   GA
        Group verify (EA, EL, EW)
        Misc. Processing Menu ...
   MP
          Fast Bypass Data Entry/Verify
          Lookup accession
          Order/test status
          Print a load/work list
          Std/QC/Reps Manual Workload count
          Unload Load/Work List
Select Process data in lab menu Option: EM Enter/verify/modify data
(manual)
Do you want to review the data before and after you edit? YES//
Do you wish to see all previously verified results? NO//
     Select one of the following:
```

Testing the New Lab Test

Accession Number 1 2 Unique Identifier (UID) Verify by: 1// Accession Number Select Accession: CH 7 CHEMISTRY (APR 14, 2020) 3 Select Referring Laboratory: DEMO HOSPITAL// DEMO, ALISTER LANE 124625 LOC:GENERAL Sample: SWAB-COVID19 Specimen: NASOPHARYNGEAL MUCUS 1 COVID-19 (Abbott ID NOW) Test ordered ASAP LOC: GENERAL DEMO, ALISTER LANE HRCN: 124625 Pat Info: Sex: MALE Age: 39yr as of Apr 14, 2020 Provider: DEMO, PROVIDER Voice pager: Phone: Digital pager: ACCESSION: CH 0414 7 04/14 1301d Test ordered ASAP COMMENTS: ~For Test: COVID-19 (Abbott ID NOW) COMMENTS: ~TESTING MULTPURPOSE ACCESSIONING COVID-19(Abbott ID NOW) //P COVID-19 POSITIVE CRITICAL !! PROCEDURAL CONTROL //V Valid Select COMMENT: ~TESTING MULTPURPOSE ACCESSIONING // COMMENT: ~TESTING MULTPURPOSE ACCESSIONING Replace Select COMMENT: DEMO,ALISTER LANE HRCN: 124625 LOC: GENERAL Pat Info: Sex: MALE Age: 39yr as of Apr 14, 2020 Provider: DEMO, PROVIDER Voice pager: Digital pager: Phone: ACCESSION: CH 0414 3 04/14 1301d Test ordered ASAP COVID-19(Abbott ID NOW) COVID-19 POSITIVE A* CRITICAL !! PROCEDURAL CONTROL Valid COMMENTS: ~For Test: COVID-19 (Abbott ID NOW) COMMENTS: ~TESTING MULTPURPOSE ACCESSIONING SELECT ('E' to Edit, 'C' for Comments, 'W' Workload): Approve for release by entering your initials: ** LAST IN WORK LIST

Figure 7-2: Example of verifying laboratory results

7.3 RPMS Lab Package: INTERIM REPORT – Results

After verifying/resulting the lab tests, the laboratory results will be available on the INTERIM REPORT and the Electronic Health Record Lab Tab. Review the results.

Figure 7-3 displays an example of Interim Report lab results.

```
Laboratory DHCP Menu
        Phlebotomy menu ...
  1
  2
       Accessioning menu ...
       Process data in lab menu ...
  3
      Quality control menu ...
Results menu ...
Information-help menu ...
   4
   5
   6
  10Microbiology menu11Supervisor menu
  BLR IHS Lab Main Support Menu ...
Select Laboratory DHCP Menu Option: 5 Results menu
         Interim report
         Interim report by provider
         Interim report for chosen tests
         Interim report for selected tests as ordered
         Interim reports by location (manual queue)
         Interim reports for 1 location (manual queue)
         Interim reports for 1 provider (manual queue)
         Order/test status
         Print a full patient summary
         Review by order number
Select Results menu Option: INTERIM
  1 Interim report
       Interim report by provider
   2
   3 Interim report for chosen tests
CHOOSE 1-7: 1 Interim report
Select Patient Name:
 DEMO, ALISTER LANE
                                   <a> M 05-20-1980 XXX-XX-4693 TST
124625
Date to START with: TODAY// (APR 14, 2020)
Date to END with: T-7// (APR 07, 2020)
DEVICE: HOME// Virtual
Printed at:
                                                                   page 1
                         DR SMITH LABORATORY DIRECTOR
                     90001 1ST AVE WASHINGTON, NM 87000
DEMO, ALISTER LANE
                                           Date/Time Printed:
04/14/20@15:59
    HRCN:124625 SEX:M DOB:May 20, 19XX
                                                             LOC:LAB
Accession [UID]: CH 0414 7 [1001050007]
   Provider: DEMO, PROVIDER
                                      Lab Arrival
Date/Time:04/14/20@15:55
    Specimen:NASOPHARYNGEAL MUCUS Spec Collect
Date/Time:04/14/20@15:55
Test nameResult Flg unitsRef. rangeSiteResult Dt/TimeCOVID RESULTCOVID-19POSITIVE A*Ref: Negative[2906]
04/14/20@15:58
     Eval: A Negative Result does not rule out co-infections with other
     Eval: pathogens.
Procedural QC Valid
                                                    [2906] 04/14/20@15:58
```

Testing the New Lab Test

KEY: A=AbnormalL=Abnormal LowH=Abnormal High*=CriticalTR=Therapeutic[2906]2013 DEMO HOSPITAL (CMBA)90001 1ST AVEWASHINGTON, DC 20000

Figure 7-3: Example of INTERIM REPORT Lab Results

7.4 Electronic Health Record: LAB Tab – Results

Figure 7-4 displays an example of Electronic Health Record Lab Results.

Electronic · Health · Rec	ord·Laborate	ory∙Results¶	
Most Recent			Most Report Lab Results
Oldest Previous Next Newest 📻			Calented
« < > » 🖽 😈			Apr 14, 2020 15:55
Test Result	Flag	Units	Ref Range
CDVID-19 (Abbott ID NOW) CDVID-19 POSITIVE	A*		Ref: Negative
Specimen: NASOPHARYNGEAL MUCUS; Accession: CH 0414 7; Provider: Lab Arrival Date/Time: 04/14/2020 3:55 PM Report Released Date/Time: 04/14/2020 3:58 PM COVID RESULT Eval: A Negative Result does not rule out co-infections with COVID RESULT Eval: A negative Result does not rule out co-infections with	other		
Comment: ~For Test: COVID-19 (Abbott ID NOW) -TESTING MULTIPURPOSE ACCESSIONING Performing Lab: 2019 DEMO HOSPITAL (INST) 90001 1ST AVE WASHINGTON, NM 6	17000		

Figure 7-4: Example of Electronic Health Record Lab results

8.0 Review DATA for LOINC and CPT CODES

Confirming all laboratory data passes to Patient Care Component (PCC), Laboratorians should review the data using the INQ Inquire into the **IHS LAB Transaction Log** option.

For the PCC to accept **CPT DATA** that is passed from the Laboratory Package, an entry must exist in the **IHS LAB CPT CODE** file for each billable lab test associated with the lab order. The entry must identify the associated panel or test.

For the PCC to accept **LOINC DATA** that is passed from the Laboratory Package, an entry must exist in the Site/Specimen for the result-able laboratory test that contains the result.

Other entries in the IHS LAB TRANSACTION LOG LIST to review are PANEL/TEST POINTER, STATUS FLAG as RESULTED, and RESULT fields.

Follow the steps below to review laboratory data using INQ:

LR Laboratory DHCP Menu.

IHS Lab Main Support Menu

- 1. INQ Inquire into the IHS LAB Transaction Log.
 - 2. Select IHS LAB TRANSACTION LOG SEQUENCE NUMBER:

CH 0414 7

- 1 CH 0414 7 211 (*This is the Panel Test*)
- 2 CH 0414 7 212 (This is the First Atomic Test in the Panel)
- 3 CH 0414 7 213 (This is the Second Atomic Test in the Pane)

8.1 INQ Inquire Into the IHS LAB Transaction Log

The INQ option (Figure 8-1) is available on the BLRMENU.

LR	Labo IHS	oratory DHCP Menu Lab Main Support Menu
	LS 7421 INQ CPT STP PAMG LVP	Link Transaction Processor Status Will restart the 7421 label routine if turned off. Inquire into the IHS LAB Transaction Log Enter/edit IHS Lab CPT File Stop/restart Lab to PCC Transaction Processor Edit IHS Lab Parameters and/or Mail Groups IHS Lab Version & Patch Report

Figure 8-1: Shorten BLR Menu – INQ option review lab data

8.2 Reviewing Laboratory Data Using INQ

Figure 8-2 displays how to review laboratory data using the INQ option.

```
LR
     Laboratory DHCP Menu ...
     IHS Lab Main Support Menu
     INQ Inquire into the IHS LAB Transaction Log
Select IHS Lab Main Support Menu <TEST ACCOUNT> Option: INQ Inquire into
the IH
S LAB Transaction Log
Select IHS LAB TRANSACTION LOG SEQUENCE NUMBER: CH 0414 7
    1 CH 0414 7 211
    2 CH 0414 7 212
    3 CH 0414 7 213
CHOOSE 1-3: 1 211
DEVICE: Virtual
IHS LAB TRANSACTION LOG LIST
                                          APR 14,2020 19:49 PAGE 1
 _____
SEQUENCE NUMBER: 211
                                    LRFILE: 2
 PATIENT POINTER VALUE: 11189
 PANEL/TEST POINTER: COVID-19 (Abbott ID NOW)
 I/O CATEGORY: IN PATIENT STATUS FLAG
ENTRY DATE (MILLON)
                                    STATUS FLAG: RESULTED
 ENTRY DATE/TIME: APR 14, 2020@15:55:42
 ASSOCIATED V FILE: V LAB
                                    IEN OF V FILE ENTRY: 4294095
 CLINIC STOP CODE POINTER: LABORATORY SERVICES
 CPT LAB CODE POINTER: COVID-19 (ABBOTT ID NOW)
 BILLING CPT STRING: 87635|||||;U0002|||||
 CLINICAL INDICATOR: 301485011 ORDER DATE: APR 14, 2020@15:55:21
ORDER SEQUENCE NUMBER: 1 ORDER NUMBER: 668
 ORDERING PROVIDER POINTER: DEMO, PROVIDER
 ORDERING LOCATION POINTER: LAB OIT (HOSP)
 COLLECTION DATE/TIME: APR 14, 2020@15:55:21
 ACCESSION NUMBER: CH 0414 7
                                   COLLECTION SAMPLE POINTER: SWAB-
COVID19
 COMPLETE DATE: APR 14, 2020@15:58:09 PROVIDER NARRATIVE: Asthma
 SNOMED: 301485011
                                    ICD: J45.909
 SITE/SPECIMEN POINTER: NASOPHARYNGEAL MUCUS
Select IHS LAB TRANSACTION LOG SEQUENCE NUMBER: CH 0414 7
    1 CH 0414 7 211
      CH 0414 7 212
CH 0414 7 213
    2
    3
CHOOSE 1-3: 2 212
DEVICE: Virtual
IHS LAB TRANSACTION LOG LIST
                                          APR 14,2020 19:49 PAGE 1
_____
                                            SEQUENCE NUMBER: 212
                                    LRFILE: 2
 PATIENT POINTER VALUE: 11189
 PANEL/TEST POINTER: _COVID-19 (Abbott ID NOW)
 LAB MODULE: GENERAL
                             DUZ(2): 2906
I/O CATEGORY: IN PATIENT
                                    PARENT POINTER: 211
```

STATUS FLAG: RESULTED ENTRY DATE/TIME: APR 14, 2020@15:55:42 ASSOCIATED V FILE: V LAB IEN OF V FILE ENTRY: 4294096 CLINIC STOP CODE POINTER: LABORATORY SERVICES ORDER DATE: APR 14, 2020@15:55:21 ORDER SEQUENCE NUMBER: 1 ORDER NUMBER: 668 ORDERING PROVIDER POINTER: DEMO, PROVIDER ORDERING LOCATION POINTER: LAB OIT (HOSP) COLLECTION DATE/TIME: APR 14, 2020@15:55:21 ACCESSION NUMBER: CH 0414 7 COLLECTION SAMPLE POINTER: SWAB-COVID19 COMPLETE DATE: APR 14, 2020@15:58:09 LOINC CODE: 94534 RESULT: P RESULT N/A FLAG: A* SITE/SPECIMEN POINTER: NASOPHARYNGEAL MUCUS VERIFIER POINTER: DEMO, PROVIDER REFERENCE LOW: Negative COMMENTS: ~For Test: COVID-19 (Abbott ID NOW) COMMENTS: ~TESTING MULTIPURPOSE ACCESSIONING Select IHS LAB TRANSACTION LOG SEQUENCE NUMBER: CH 0414 7 1 CH 0414 7 211 212 CH 0414 7 2 CH 0414 7 213 3 CHOOSE 1-3: 3 213 DEVICE: Virtual IHS LAB TRANSACTION LOG LIST APR 14,2020 19:49 PAGE 1 EQUENCE NUMBER: 213LRFILE: 2PATIENT POINTER VALUE: 11189PANEL/TEST POINTER: PROCEDURAL CONTROLLAB MODULE: GENERALDUZ (2): 2906I/O CATEGORY: IN PATIENTPARENT POINTER: 211STATUS FLAG: RESULTEDENTRY DATE/TIME: APR 14, 2020@15:55:42ASSOCIATED V FILE: V LABIEN OF V FILE ENTRY: 4294097 _____ SEQUENCE NUMBER: 213 CLINIC STOP CODE POINTER: LABORATORY SERVICES ORDER DATE: APR 14, 2020@15:55:21 ORDER SEQUENCE NUMBER: 1 ORDER NUMBER: 668 ORDERING PROVIDER POINTER: DEMO, PROVIDER ORDERING LOCATION POINTER: LAB OIT (HOSP) COLLECTION DATE/TIME: APR 14, 2020@15:55:21 ACCESSION NUMBER: CH 0414 7 COLLECTION SAMPLE POINTER: SWAB-COVID19 COMPLETE DATE: APR 14, 2020@15:58:09 RESULT: V SITE/SPECIMEN POINTER: NASOPHARYNGEAL MUCUS VERIFIER POINTER: DEMO, PROVIDER COMMENTS: ~For Test: COVID-19 (Abbott ID NOW) COMMENTS: ~TESTING MULTIPURPOSE ACCESSIONING Select IHS LAB TRANSACTION LOG SEQUENCE NUMBER:



9.0 EHR Lab Menu: Quick Order and Order Menu

To make the Laboratory Test(s) available for Order, create the Lab Quick Order and add the Lab Quick Order to the EHR lab menu.

Note: Not all users will have access to the EHR Order Management menu. Work with your local CAC if additional assistance is needed for access issues, order menu names, and conventions.

9.1 Create Lab Quick Order

Figure 9-1 is an example of creating a Lab Quick Order.

```
Order Menu Management
   OT
         Manage orderable items ...
   ΡМ
         Enter/edit prompts
   GO
         Enter/edit generic orders
        Enter/edit quick orders
   QO
        Edit personal quick orders by user
   QU
        Enter/edit order sets
  ST
  AC
        Enter/edit actions
  MN
        Enter/edit order menus
  AO Assign Primary Order Menu
   CP Convert protocols
  SR Search/replace components
  LM List Primary Order Menus
   DS Disable/Enable order dialogs
      Review Quick Orders for Inactive ICD9 Codes
   CS
   MR
      Medication Quick Order Report
Convert IV Inpatient QO to Infusion QO
   CV
Select Order Menu Management Option: QO Enter/edit quick orders
Select QUICK ORDER NAME: LRZ COVID-19 ABBOTT ID NOW
 Are you adding 'LRZ COVID-19 ABBOTT ID NOW' as
   a new ORDER DIALOG? No// Y (Yes)
TYPE OF QUICK ORDER: LAB LABORATORY
NAME: LRZ COVID-19 ABBOTT ID NOW Replace
DISPLAY TEXT: COVID19 (Abbott ID NOW)
VERIFY ORDER: Y YES
DESCRIPTION:
 No existing text
 Edit? NO//
ENTRY ACTION:
Lab Test: COVID-19 (ABBOTT ID NOW)
                                       COVID-19 (Abbott ID NOW)
SEND TO LAB - Means the patient is ambulatory and will be sent to the
Laboratory draw room to have blood drawn.
WARD COLLECT - Means that either the physician or a nurse will be
collecting
the sample on the ward.
LAB BLOOD TEAM - Means the phlebotomist from Lab will draw the blood on the
ward. This method is limited to laboratory defined collection times.
```

```
IMMEDIATE COLLECT BY BLOOD TEAM - Means the phlebotomist from Lab is on
call to draw blood on the ward. This method is available during times
defined by Laboratory.
    SP
              Send patient to lab
    WC
              Ward collect & deliver
             Lab blood team
    LC
              Immediate collect by blood team
    Ι
Collected By: WC Ward collect & deliver
Collection Sample: SWAB-COVID19//
Collection Date/Time: NOW (APR 14, 2020@19:51)
Urgency:
Enter Order Comment:
How often:
Indication://
                      _____
                   Lab Test: COVID-19 (Abbott ID NOW)
              Collected By: Ward collect & deliver
          Collection Sample: SWAB-COVID19
                  Specimen: NASOPHARYNGEAL MUCUS
       Collection Date/Time: NOW
                  Indication:
           SNOMED Concept ID:
(P)lace, (E)dit, or (C)ancel this quick order? PLACE//
Auto-accept this order? NO//
Select QUICK ORDER NAME:
```

Figure 9-1: Example of creating a Lab Quick Order

9.2 Review Lab Quick Order

Figure 9-2 displays an example of an Electronic Health Record Lab QUICK ORDER.

Available Lab Tests		COVID-19 (Abbott ID N	10W)		
COVID.19 (Abboit ID NOW) COVID.19 (Abboit ID NOW) COVID.19 (FREE TEXT DATA N COVID.19 (INM) [94502-2] COVID.19 (REFL) COVID.19 (REFL) COVID.19 <covid.19 (nm)="" [9450<br="">COVID19 <covid.19 (inm)="" [9450<br="">COVID14 <covid.19 (inm)="" [9450<br="">COVID14 & COVID.19 (INM) [9450 COVID14 & COVID.19 (INM) [94</covid.19></covid.19></covid.19></covid.19></covid.19></covid.19></covid.19></covid.19></covid.19></covid.19>	IAME) (7 DATA N NOW)> EGION (P1 DIES ((CK) 1015> ATINE KIN	Collect Sample Specimen Urgency	SWAB-COVID19 (SWAE)	Enter order comment:	
Collection Type	Co	ollection Date/Time	How Often?	How Lor	19?
Ward Collect		10W	ONCE		

Figure 9-2: Example of Electronic Health Record Lab QUICK ORDER

9.3 Naming Lab Quick Orders – Best Practice

Figure 9-3 displays an example of Lab QUICK ORDER naming.

```
Order Menu Management

OI Manage orderable items ...

PM Enter/edit prompts

GO Enter/edit generic orders

QU Edit personal quick orders by user

ST Enter/edit order sets

AC Enter/edit actions

MN Enter/edit order menus

AO Assign Primary Order Menu

CP Convert protocols

SR Search/replace components

LM List Primary Order Menus

DS Disable/Enable order dialogs

CS Review Quick Orders for Inactive ICD9 Codes

MR Medication Quick Order Report

CV Convert IV Inpatient QO to Infusion QO

Select Order Menu Management Option: QO Enter/edit quick orders

Select QUICK ORDER NAME: LRZ COVID

1 LRZ COVID19 ABBOTT ID NOW

2 LRZ COVID19 STATE LAB

CHOOSE 1-3:
```

Select QUICK ORDER NAME:

Figure 9-3: Example of Lab QUICK ORDER naming

9.4 Add Lab Quick Order to ORDER Menu

Important: When adding the Lab Quick Order to the EHR Lab Menu, the lab test is ready for active order.

Figure 9-4 displays an example of adding the Lab Quick Order to the EHR Lab Menu.

Order Menu Management OI Manage orderable items ... PM Enter/edit prompts GO Enter/edit generic orders QU Enter/edit quick orders QU Edit personal quick orders by user ST Enter/edit order sets AC Enter/edit actions Enter/edit order menus Assign Primary Order Menu MN AO CP Convert protocols SR Search/replace components LM List Primary Order Menus DS Disable/Enable order dialogs CS Review Quick Orders for Inactive ICD9 Codes MR Medication Quick Order Report Convert IV Inpatient QO to Infusion QO CV Select Order Menu Management Option: MN Enter/edit order menus Select ORDER MENU: LRZM 1 LRZM CMBA Lab Orders LRZM CQM LABS 2 LRZM ER DEPART 3 LRZM LAB INPT 4 5 LRZM LAB MENU Press <RETURN> to see more, '^' to exit this list, OR Menu Editor Apr 14, 2020 19:51:28 Page: 1 of 3 Menu: LRZM CMBA Lab Orders Column Width: 44 2 1 INPATIENT WARD Glucose RAPID BMP NEW STD Order Set (R) GLUCOSE (R) Diabetes/Lipid Order Set (R) + CBC W/AUTO DIFF HGB A1c(R) RPR with Reflex(R) AEROBIC CULTURE OIT HCG (R) Ammonia Glucose (Ser.Plas.bLD) 1 BMP (R) CMP (R) CRP Other Laboratory Tests...

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Lipase LIPID PANEL (R) Ferritin General Sendout + PKU State Lab PSA SERUM (R) + Next Screen - Prev Screen ?? More Actions + Add ... Edit ... Assign to User(s) Select New Menu Remove ... Toggle Display Order Dialogs ... Select Action: Next Screen// ADD Add ... Menu Items Text or Header Row Add: M Menu Items ITEM: LRZ COVID 1 LRZ COVID-19 ABBOTT ID NOW 2 LRZ COVID19 OUEST 3 LRZ COVID19 STATE LAB CHOOSE 1-4: 1 LRZ COVID-19 ABBOTT ID NOW ROW: 2 COLUMN: 2 DISPLAY TEXT: MNEMONIC: ITEM: Apr 14, 2020 19:51:54 Page: 1 of 3 Menu Editor Column Width: 44 Menu: LRZM CMBA Lab Orders 2 1 INPATIENT WARD Glucose RAPID BMP NEW COVID19 (Abbott ID NOW) STD Order Set (R) GLUCOSE (R) Diabetes/Lipid Order Set (R) +CBC W/AUTO DIFF T HGB A1c(R) RPR with Reflex(R) AEROBIC CULTURE OIT HCG (R) Ammonia 1 Glucose (Ser.Plas.bLD) BMP (R) CMP (R) CRP Other Laboratory Tests... Lipase LIPID PANEL (R) General Sendout + Ferritin PKU State Lab PSA SERUM (R) + Next Screen - Prev Screen ?? More Actions Add ...Edit ...Assign to User(s)Select New MenuRemove ...Toggle DisplayOrder Dialogs ... Select Action: Next Screen// TOG Toggle Display Menu Editor Apr 14, 2020 19:52:01 Page: 1 of 3 Menu: LRZM CMBA Lab Orders Column Width: 44 1 2 LRZ COVID-19 ABBOTT ID NOW + LRZ CMBA GLUCOSE(R) ORZ CMBA DM LIPID LRZ CMBA CBC (R) LRZ CMBA HGB A1c (R) LRZ CMBA RPR w/rfx (R) LRZ AEROBIC CULTURE (INHOUSE) LRZ CMBA HCG (GIS) LRZ CMBA AMMONIA LRZ GLUCOSE (SER, PLAS, BLD) 1

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	LRZ CMBA BMP	(R)		
	LRZ CMBA CMP	(R)		
	LRZ CMBA CRP		LR OTHER LAB	TESTS
	LRZ CMBA LIPA	ASE		
+	LRZ CMBA LIPI	ID PANEL (R)	LRZ GENERAL S	ENDOUT
	LRZ CMBA FERI	RITIN	LRZ CMBA PKU	SENDOUT
	LRZ CMBA PSA,	, SERUM (R)		
+	+ Next So	creen - Prev Screen	?? More Actions	
	Add	Edit	Assign to User(s)	Select New Menu
	Remove	Toggle Display	Order Dialogs	

Figure 9-4: Example of adding the Lab Quick Order to EHR Lab Menu

9.5 Review Lab Test Added to ORDER Menu

Figure 9-5 displays an example of an Electronic Health Record Lab MENU.

Electronic·Health·Record·Laboratory·MENU¶					
	CMBA Lab Orders	Done			
INPATIENT WARD BMP KAREN NEW CMBA Reference Lab (R)	Glucose RAPID COVID19 (Abbott ID NOW) STD Order Set (R)	^			
GLUCOSE (R) CBC W/AUTO DIFF HGB A1d(R)	Diabetes/Lipid Order Set (R)				
BPB with Beflex(B) HCG (B)	AEROBIC CULTURE OIT				
Ammonia BMP (R) CMP (R)	Glucose (Ser.Plas.bLD)				
CRP Lipase	Other Laboratory Tests				
LIPID PANEL (R) Ferritin PSA SERUM (R) Prolactin HIV 1/2 (R)	General Sendout PKU State Lab				
Hepatitis C AB Iron Iron & TIBC	CBC W/Diff ASAP Urinalysis Dipstick				
PAP w/ADE (R) GC/CT NAA (R)	HA1c W/EAG				

Figure 9-5: Example of Electronic Health Record Lab menu

10.0 EHR POINT OF CARE Lab Entry Button

To allow the **POINT OF CARE** lab test(s) available for the **EHR POC Lab Entry** button, the POINT OF CARE lab test(s) is required to be added to the **BLR BEHO POC CONTROL** file within VA FILEMAN.

The **BLR BEHO POC CONTROL NAME** is the **INSTITUTION** name for your facility. When adding the **POINT OF CARE** lab test to the **EHR POC Lab Entry** button for multiple divisions, select the appropriate **BLR BEHO POC CONTROL NAME** (**INSTUTITION**) and add the **POINT OF CARE** lab test as needed.

After adding the **POINT OF CARE** lab test(s) to the **BLR BEHO POC CONTROL NAME**, process the order on the **EHR POC Lab Entry** Button on the GUI. Then save and review the Laboratory Results on the **EHR LAB** tab.

Important: When adding the POINT OF CARE Lab Test(s) to the **EHR POC Lab Entry** button, the Point of Care Test is ready for active ordering and resulting.

10.1 Adding to BLR BEHO POC CONTROL File

Figure 10-1 displays a multi-division example of how to add to the **BLR BEHO POC CONTROL** file.

```
VA FileMan Version 22.0
         Enter or Edit File Entries
          Print File Entries
          Search File Entries
         Modify File Attributes
          Inquire to File Entries
INPUT TO WHAT FILE: V LAB// BLR BEHO POC CONTROL (5 entries)
EDIT WHICH FIELD: ALL//
Select BLR BEHO POC CONTROL NAME: ?
   Answer with BLR BEHO POC CONTROL NAME
   Choose from:
  DEMO HOSPITAL
  DEMO CLINIC ONE
   DEMO CLINIC TWO
   DEMO CLINIC THREE
    You may enter a new BLR BEHO POC CONTROL, if you wish
Answer with LOCATION NAME
 Do you want the entire 8742-Entry LOCATION List?
     You may enter a new LOCATION, if you wish
NAME: DEMO HOSPITAL
ENFORCE RESTRICT TO LOCATION: NO//
ENFORCE RESTRICT TO USER: NO//
```

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```
Select LAB TEST: COVID-19 (Abbott ID NOW) Are you adding 'COVID-19
(Abbott ID NOW)' as a new LAB TEST (the 23RD for this BLR BEHO POC
CONTROL)? No// Y (Yes)
 Select RESTRICT TO LOCATION:
 Select RESTRICT TO USER:
Select LAB TEST:
Select AVAILABLE LAB DESCRIPTIONS: PNAR//
Select BLR BEHO POC CONTROL NAME: DEMO CLINIC ONE
ENFORCE RESTRICT TO LOCATION: NO//
ENFORCE RESTRICT TO USER: NO//
Select LAB TEST: COVID-19 (Abbott ID NOW) Are you adding 'COVID-19
(Abbott ID NOW)' as a new LAB TEST (the 23RD for this BLR BEHO POC
CONTROL)? No// Y (Yes)
 Select RESTRICT TO LOCATION:
 Select RESTRICT TO USER:
Select LAB TEST:
Select AVAILABLE LAB DESCRIPTIONS: PNAR//
Select BLR BEHO POC CONTROL NAME: DEMO CLINIC TWO
ENFORCE RESTRICT TO LOCATION: NO//
ENFORCE RESTRICT TO USER: NO//
Select LAB TEST: COVID-19 (Abbott ID NOW) Are you adding 'COVID-19
(Abbott ID NOW)' as a new LAB TEST (the 23RD for this BLR BEHO POC
CONTROL)? No// Y (Yes)
 Select RESTRICT TO LOCATION:
 Select RESTRICT TO USER:
Select LAB TEST:
Select AVAILABLE LAB DESCRIPTIONS: PNAR//
```

Figure 10-1: Adding to BLR BEHO POC CONTROL file - multi-division example

10.2 Using the EHR POC Lab Entry Button

Figure 10-2 displays an example of an Electronic Health Record **POC Lab Entry** button.

	Electronic·Health·Record·POC·Lab·Entry·Button¶							
D	emo,Benjamin A SR 93856 20-Mar-1980 (40) M	LAI	3 OIT (HOSP)					
	Image: Solution of the second state of the second		Problem List Advs Needs Rvw Need	React Medi- s Rvw Neec				
	Lab Point of Care Data Entry Form		-					
	Patient: DEMO, BENJAMIN A SR	Hospital Location:	LAB OIT (HOSP)					
	Ordering Provider	Nature of Order/Cl	nange	~				
	Test v	Sample Type						
f	Collection Date and Time 04/14/2020 09:09 PN 🗸	Sign or Symptom		~				
0	Comment/Lab Description:							
Ì				Add Canned Comment				
۲	TEST	RESULTS						
	Test Name Re	suit	Result Range	Units				
2								
			Save	Cancel				

Figure 10-2: Example of Electronic Health Record POC Lab Entry button

10.3 Resulting the Point of Care Lab Test

Figure 10-3 displays as example of RESULTING the POINT OF CARE.

Electronic·Health·Record·POC·Lab·Entry·Button									
🕘 Lab Po	oint of Care Data Entry For	m					-		\times
Patient:	DEMO, BENJAMIN A	SR		Hospital Location:	LAB OIT (HOSP)			
Orderin	g Provider		~	Nature of Order/Cl	nange	POLICY			~
Test	COVID-19 (Abbott ID N	VOV)	~	Sample Type	SWAB	-COVID19			
Collecti	ion Date and Time	04/14/2020 09:09 PM	~	Sign or Symptom	Pulmo	onary hyperten	sion L	27.20	~
Commer	Comment/Lab Description: Add Canned Comment								
		TES	ST F	RESULTS					
Test Name Ret				suit Result		nge	U	nits	
_COVID-19 (Abbott ID NOW) COV				VID-19 POSITIVE A Negative					
▶ _5	PROCEDURAL CONTROL		Valid		N/A				
					S	ave	C	Cance	I

Figure 10-3: Example of RESULTING the POINT OF CARE

10.4 Review the Point of Care Lab Results

Figure 10-4 displays an example of EHR POINT OF CARE results.

	Electronic·Health·Record·POC·Lab·results									
Most Rece	ent									
0444	Deview	Mart	Manual	-	-					Most Recent Lab Results
Oldest	<	>	»	Ed	0					Collected Apr 14, 2020 21:09
Test					Result			Flag	Units	Ref Bange
_C0VID-15	9 (Abbott ID NOW)				COVID-19 PO	SITIME		A*		Ref: Negative
_PROCED	URAL CONTROL				Valid					
Specimer	n: NASOPHARYN	GEAL M	UCUS;	Access	ion: CH 0414 (; Provider:	:			
Lab Arrival Date/Time: 04/14/2020 10:15 FM Report Released Date/Time: 04/14/2020 10:15 FM										
COVID RE	SULT Eval: A SULT Eval: p	Negati	ive Resu ns.	ilt does	not rule out	co-infections	with other			
Perform	ing Lab: 2019	DEMO 2	HOSPITAL	(INST)	90001 1ST AV	WASHINGTON,	NM 87000			

Figure 10-4: Example of EHR POINT OF CARE results

11.0 Qualitative Critical Alert Flag – Optional

The **Qualitative Critical Alert** flag was included in Lab Patch LR*5.2*1041. Turning on the Qualitative Critical Alert parameter must be a local decision and be included in local policy pertaining to CRITCAL LABORATORY RESULTS reporting.

11.1 File 60 – Site/Specimen Field

To accommodate qualitative values, the free-text **QUALITATIVE VALUES** field was created under the **Site/Specimen** field in File 60. The field is a multiple, which means it can hold many values.

```
Note: The logic of the routine that determines a qualitative flag
requires the result must match, exactly, what is entered into
the QUALITATIVE VALUES field. For example, the
laboratory test named _COVID-19 (Abbott ID NOW) has
the following entries for the QUALITATIVE VALUES
field: P, p, POSITIVE, positive.
```

Figure 11-1 displays the Qualitative Value entries for **_COVID-19** (Abbott ID NOW).

```
Select SITE/SPECIMEN:
                        NASOPHARYNGEAL MUCUS
 SITE/SPECIMEN: NASOPHARYNGEAL MUCUS//
  REFERENCE LOW: "Negative"//
 REFERENCE HIGH:
  CRITICAL LOW:
  CRITICAL HIGH:
  INTERPRETATION:
A Negative Result does not rule out co-infections with other pathogens.
   Edit? NO//
 UNITS:
 TYPE OF DELTA CHECK:
 LOINC CODE: 94534-5//
 Select SPECIMEN CPT:
  Select QUALITATIVE VALUES: positive// ?
   Answer with QUALITATIVE VALUES
  Choose from:
  Ρ
  POSITIVE
  р
  positive
        You may enter a new QUALITATIVE VALUES, if you wish
        Answer must be 1-40 characters in length.
 Select QUALITATIVE VALUES: positive//
Select SITE/SPECIMEN:
```

Figure 11-1: Qualitative Values entries display

11.2 Qualitative Critical Alert Flag Display

Figure 11-2 displays an example of the **Qualitative Critical Alert** flag when the parameter is turned on.

Note: The A* flag indicates CRITICAL!					
Verifying •the•accession•wit	h·COVID-19·POSITIVE·that·triggers·the·Alert·Flag9				
DEMO,ASHLEY HRCN: 114649 Pat Info: Provider: Phone:	LOC: LAB Sex: FEMALE Age: 20yr as of Apr 08, 2020 Voice pager: Digital pager:				
ACCESSION:	CHCL 20 4 04/08 1355d				
Test ordered As	SAP				
_COVID-19 (Abbott ID NOW) _PROCEDURAL CONTROL SELECT ('E' to Edit, 'C' for C Approve for release by enterin LAST IN WORK LIST	COVID-19 POSITIVE A* CRITICAL !! Valid Comments, 'W' Workload): ng your initials: **				

Figure 11-2: Example of Qualitative Critical Alert Flag

11.3 EHR Lab Results – Critical Qualitative Result Flag

Figure 11-3 displays an example of the results of COVID-19 POSITIVE result showing a **Qualitative Critical Alert** flag when the parameter is turned on.

Note:	A* flag indicates a Qualitative Critical Alert.	

Elect J	ronic	Heal	th∙Re	cord	•Laborat	ory•Resul	ts¶		
Most Rec Oldest	ent Previous	Next	Newest	Ed	0				Most Recent Lab Results Collected Apr 07, 2020 08:16
Test COVID-1	9 (Abbott ID NO	w1			Result	IVE	Flag	Units	Ref Range Ref: Negative
Specimen: NASOPHARYNGEAL MUCUS; Accession: CH 0407 10; Provider: Lab Arrival Date/Time: 04/07/2020 8:16 AM Report Released Date/Time: 04/07/2020 8:16 AM COVID RESULT Eval: A Negative Result does not rule out co-infections with other									
COVID R	ing Lab: 20)19 DEMO	ns. Hospital	(INST)	90001 1ST AVE	WASHINGTON, NM	87000		

Figure 11-3: Example of Electronic Health Record Lab results

11.4 BLR QUALITATIVE ALERT Parameter Set-up

The **BLR QUALITATIVE ALERT** parameter menu option was added to the **IHS Lab Main Support Menu (BLRMENU)**. To access the **BLR QUALITATIVE ALERT** parameter, the following menu options must be selected:

- LR Laboratory DHCP Menu
- IHS Lab Main Support Menu
- PAMG Edit IHS Lab Parameters and/or Mail Groups
- Edit RPMS Lab Parameters
- Edit BLR QUALITATIVE ALERT parameter

Turning on the Qualitative Critical Alert parameter (Figure 11-4) is as follows:

```
LR
      Laboratory DHCP Menu ...
      IHS Lab Main Support Menu
   LS
        Link Transaction Processor Status
   7421 Will restart the 7421 label routine if turned off.
   INQ Inquire into the IHS LAB Transaction Log
  CPT Enter/edit IHS Lab CPT File
STP Stop/restart Lab to PCC Tran
  PAMG Edit IHS Lab Parameters and/or Mail Groups ...
LVP IHS Lab Version & Patch Porent
   POCA Edit BLR AGE DETAIL Parameter
Select IHS Lab Main Support Menu Option:
PAMG Edit IHS Lab Parameters and/or Mail Groups ...
DEMO HOSPITAL
Date:04/13/20 RPMS Lab
Parameters/Mail Groups
                                                              Time:1:59 PM
                                                               BLRPAMGE
      Edit RPMS Lab Parameters ...
   1
      RPMS Lab Parameter's Description ...
    2
    3
        Edit RPMS Lab Mail Groups ...
      Mail Group's Description ...
    4
Select: (1-4): 1
DEMO HOSPITAL
                                 RPMS Lab
Date:04/13/20
                                                               Time:1:59 PM
 Parameters
                                                                 BLRPAMGE
                        _____
   1 Edit BLR CC DATA parameter
    2 Edit BLR AGE DETAIL parameter
    3 Edit BLR EMERGENCY ALERT parameter
    4 Edit BLR COLL DT PCC VISIT CREATION parameter
       Edit BLR DOB ONLY parameter
    5
      Edit BLR LAB RESULTS CHANGED NOTIFY parameter
Edit BLR QUALITATIVE ALERT parameter
    6
    7
    8 Edit BLR DAYS TO ACCESSION parameter
   9 Edit BLR PT CONFIRM parameter
```

Qualitative Critical Alert Flag - Optional

Select: (1-9): 7				
DEMO HOSPITAL Date:04/13/20	IHS Laboratory BLR QUALITATIVE ALERT Parameter	Time:2:38 PM BLREMERA		
Modify Value				
BLR QUALITATIVE ALERT	(YES/NO)? NO// YES LERT Parameter is currently YES			
Press RETURN	Key:			

Figure 11-4: Shorten BLR Menu – Turning on the Qualitative Alert Parameter

12.0 Critical Value Flagged Patient Special Report

The reports for CRITICAL VALUE FLAGGED TESTS can be generated for the "positive" lab tests for the COVID-19 (Abbott ID NOW) when the Qualitative Alert parameter is turned on.

Note: The Critical Value Flagged Tests report can be used for other critical lab results as well.

12.1 Generate Critical Value Flagged Special Report

The menu selection for the **SPECIAL REPORT** for **SEARCHING FOR CRITICAL FLAGS** is available on the **Supervisor** menu. The following menu options must be selected to generate the special report.

- LR Laboratory DHCP Menu
- Supervisor menu
- Supervisor reports
- Search for critical value flagged tests

Figure 12-1 displays how to generate reports for Critical value flagged tests.

```
LR
     Laboratory DHCP Menu ...
      Supervisor menu ...
   PURR PURGE OLD ORDERS & ACCESSIONS Reports ...
          Add/edit QC name &/or edit test means
          Inquiry to LAB TEST file
          Lab interface menu ...
         Lab liaison menu ...
         Lab statistics menu ...
          Purge old orders & accessions
          Supervisor reports ...
Select Supervisor menu Option: SUPERvisor reports
         Audit of deleted/edited comments
         Changes in verified lab data
          Count accessioned tests
          Search for abnormal and critical flagged tests
          Search for critical value flagged tests
          Search for high/low values of a test
          Summary list (extended supervisors')
          Summary list (supervisors')
         Supervisor's report
Select Supervisor reports Option: SEARCH
   1 Search for abnormal and critical flagged tests
    2 Search for critical value flagged tests
   3 Search for high/low values of a test
CHOOSE 1-3: 2 Search for critical value flagged tests
Date to START with: TODAY// (APR 09, 2020)
Date to END with: T-1//-1 (APR 08, 2020)
```

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Select one of the following: Y YES N NO Do you want to select accession areas (YES or NO) : NO// Select one of the following: P PATIENT L LOCATION Sort by PATIENT or by LOCATION: P// ATIENT Select PATIENT NAME: All// Select LOCATION: All// DEVICE: HOME// print to a printer

Figure 12-1: Search for critical value flagged tests display

12.2 Special Report for Critical Flagged Values

An example of the Special report example for **Critical value flagged tests** is as follows:

```
DR. DEMO PROVIDER, LABORATORY DIRECTOR
                5600 Fishers Ln, Rockville MD 20857
       SPECIAL REPORT: SEARCHING FOR CRITICAL FLAGS
                                                    Pg 1
              For date range: 04/08/2020 to 04/09/2020
                       Print Date: 04/09/20
DEMO, ALISTER LANE
                                                04/08/2020 13:49
                    124625 GEN
                                      CH 20 1
NASOPHARYNGEAL MUCUS
                   A* Ref. Range: "Negative"-none Critical: none-none
 COVID RES
            Р
COMMENT(S): ~For Test: COVID-19 (Abbott ID NOW)
         ~TEST
             ?? LABD
                                      POCT 20 2 04/09/2020 13:31
DEMO,DEBBIE
NASOPHARYNGEAL MUCUS
 COVID RES P A* Ref. Range: "Negative"-none Critical: none-none
COMMENT(S):
CONTINUED NEXT PAGE
DR. DEMO PROVIDER, LABORATORY DIRECTOR
5600 Fishers Ln, Rockville MD 20857
            SPECIAL REPORT: SEARCHING FOR CRITICAL FLAGS
                                                           Pg 2
For date range: 04/08/2020 to 04/09/2020
Print Date: 04/09/20
DEMO, DEBBIE
                   ?? LABD
                                      POCT 20 2 04/09/2020 13:31
COMMENT(S): ~For Test: COVID-19 (Abbott ID NOW)
          ~TEST #1
         FOR 2013 DEMO CLINIC MULTI-DIVISIONAL
DEMO, HANNA
                   133671 DC1
                                      CH 20 5
                                                 04/08/2020 17:00
NASOPHARYNGEAL MUCUS
 COVID RES P
                   A* Ref. Range: "Negative"-none Critical: none-none
```

Critical Value Flagged Patient Special Report

COMMENT(S): ~For Test: COVID-19 (Abbott ID NOW) CONTINUED NEXT PAGE DR. DEMO PROVIDER, LABORATORY DIRECTOR 5600 Fishers Ln, Rockville MD 20857 SPECIAL REPORT: SEARCHING FOR CRITICAL FLAGS Pg 3 For date range: 04/08/2020 to 04/09/2020 Print Date: 04/09/20 CH 20 5 DEMO, HANNA 133671 DC1 04/08/2020 17:00 COMMENT(S): ~TEST #4 138425 DC1 CH 20 2 04/08/2020 15:49 DEMO,LOUIS NASOPHARYNGEAL MUCUS COVID RES P A* Ref. Range: "Negative"-none Critical: none-none COMMENT(S): ~For Test: COVID-19 (Abbott ID NOW) ~TEST #1 END OF SPECIAL REPORT

Figure 12-2: Special report for Critical value flagged tests example

Appendix A: Laboratory Test Check List

Step	Description	Complete
1. Know your Institution name. Accession Review	Consider the satellite clinics for the Multi-division facilities See Section 3.2	
2. Add Institution and Accession to all lab tests	Add INSTITUTION Add ACCESSION	
	Multi-division, add appropriate Institution and accession See Section 3.3	
3. LOINC Codes	Review INQ Inquire into the IHS LAB Transaction Log. See Section 8.2	
4. CPT Codes	Review INQ Inquire into the IHS LAB Transaction Log. See Section 8.2	
5. Test	Order/Accession/Result and Review lab results See Section 7.0	
6. Document	Per local policy, document with laboratory director/medical staff approval deemed ready to go <i>live</i>	
7. EHR Lab menu	Create Quick Order Add Quick Order to EHR lab menu See Sections 9.1 and 9.4	
8. EHR POC button	OPTIONAL: Add Point of Care lab test to the BLR BEHO POC CONTROL file See Section 10.1	

The following is a laboratory test check list:

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 prior to being granted access to a RPMS system, in accordance IHS policy.

- For a listing of general ROB for all users, see the most recent edition of *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 Web site: <u>https://home.ihs.gov/security/index.cfm</u>.

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 the documentation of that application (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 employer before providing any type of information system access, sensitive information, or nonpublic agency information.
- Be aware that personal use of information resources is authorized on a limited basis within the provisions *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 authority to access the information.
- 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, or portable devices or media, if access to the PC or files cannot be physically or technically limited.
- Exceed their authorized access limits in RPMS by changing information or searching databases beyond the responsibilities of their 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 type of user, access shall be restricted 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 specifically granted access through an RPMS application based on their menus (job roles), keys, and FileMan access codes. Some users may be afforded additional privileges based on the functions they perform, such as system administrator or application administrator.
- Acquire a written preauthorization in accordance with IHS policies and procedures prior to interconnection to or transferring data from RPMS.

B.1.3 Accountability

RPMS users shall

- Behave in an ethical, technically proficient, informed, and trustworthy manner.
- 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 one person has sole access to or control over important resources.
- Protect all sensitive data entrusted to them as part of their government employment.

• Abide by all Department and Agency policies and 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 prior to reusing or disposing of the media.
- Protect all RPMS terminals from public viewing at all times.
- 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 who is not authorized to that data is in the vicinity.
- 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, and/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 time period (e.g., one hour).

B.1.7 Passwords

RPMS users shall

- Change passwords a minimum of every 90 days.
- Create passwords with a minimum of eight characters.
- If the system allows, use a combination of alpha-numeric characters for passwords, with at least one uppercase letter, one lower case letter, and one number. It is recommended, if possible, that a special character also be used in the password.
- Change vendor-supplied passwords immediately.
- Protect passwords by committing them to memory or store them in a safe place (do not store passwords in login scripts or batch files).
- Change passwords immediately if 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 the use of 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 an obvious place, such as under keyboards, in desk drawers, or in any other location where it might be disclosed.

• Give a password out over the phone.

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 5 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 system equipment.

B.1.12 Awareness

RPMS users shall

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

B.1.13 Remote Access

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

- Are in writing.
- Provide authentication of the remote user through the use of ID and password or other acceptable technical means.
- Outline the work requirements and the security safeguards and procedures the employee is expected to follow.
- Ensure adequate storage of files, removal, and 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 and/or stored at alternate work locations.

Remote RPMS users shall

• Remotely access RPMS through a virtual private network (VPN) whenever possible. Use of direct dial in access must be justified and approved in writing and its use secured in accordance with industry best practices or government procedures.

Remote RPMS users shall not

• Disable any encryption established 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 for which they have been assigned as part of their duties.
- Remember that all RPMS code is the property of the U.S. Government, not the developer.
- 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.
- Observe separation of duties policies and procedures to the fullest extent possible.
- Document or comment all changes to any RPMS software at the time the change or update is made. Documentation shall include the programmer's initials, date of change, and reason for the change.
- Use checksums or other integrity mechanism when releasing their certified applications to assure the integrity of the routines within their RPMS applications.
- Follow industry best standards for systems they are assigned to develop or 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 who have significant access to processes and data in RPMS, such as, system security administrators, systems administrators, and database administrators, have added responsibilities to ensure the secure operation of RPMS.

Privileged RPMS users shall

- Verify that any user requesting access to any RPMS system has completed the appropriate access request forms.
- Ensure that government personnel and contractor personnel understand and comply with license requirements. End users, supervisors, and functional managers are ultimately responsible for this compliance.
- Advise the system owner on matters concerning information technology security.
- Assist the system owner in developing security plans, risk assessments, and supporting documentation for the certification and accreditation process.
- Ensure that any changes to RPMS that affect contingency and disaster recovery plans are conveyed to the person responsible for maintaining continuity of operations plans.
- Ensure that adequate physical and administrative safeguards are operational within their areas of responsibility and that access to information and data is restricted to authorized personnel on a need-to-know basis.
- Verify that users have received appropriate security training before allowing access to RPMS.
- Implement applicable security access procedures and mechanisms, incorporate appropriate levels of system auditing, and review audit logs.
- Document and investigate known or suspected security incidents or violations and report them to the ISSO, Chief Information Security Officer (CISO), and systems owner.
- Protect the supervisor, superuser, or system administrator passwords.
- Avoid instances where the same individual has responsibility for several functions (i.e., transaction entry and transaction approval).
- Watch for unscheduled, unusual, and unauthorized programs.
- Help train system users on the appropriate use and security of the system.
- Establish protective controls to ensure the accountability, integrity, confidentiality, and availability of the system.
- Replace passwords when a compromise is suspected. Delete user accounts as quickly as possible from the time that the user is no longer authorized system. Passwords forgotten by their owner should be replaced, not reissued.
- Terminate user accounts when a user transfers or has been terminated. If the user has authority to grant authorizations to others, review these other authorizations. Retrieve any devices used to gain access to the system or equipment. Cancel logon IDs and passwords and delete or reassign related active and 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 either in person or having the user answer a question that can be compared to one in the administrator's database.
- Shall follow industry best standards for systems they are assigned to, and abide by all Department and Agency policies and procedures.

Privileged RPMS users shall not

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

Acronym List

Acronym	Term Meaning
CAC	Clinical Application Coordinator
CISO	Chief Information Security Officer
СРТ	Current Procedural Terminology
EHR	Electronic Health Record
GUI	Graphical User Interface
HCPCS	Healthcare Common Procedure Coding System
HIPAA	Health Insurance Portability and Accountability Act
IHS	Indian Health Service
ISSO	Information System Security Officer
PCC	Patient Care Component
POC	Point of Care
ROB	Rules of Behavior
RPMS	Resource and Patient Management System
VPN	Virtual Private Network

Contact Information

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

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