

# ADVERSE REACTION TRACKING TECHNICAL MANUAL

Version 4.0 GMRA\*4\*46 GMRA\*4\*48

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Product Development Office of Information Technology Department of Veterans Affairs

# **Preface**

This manual was developed to assist the Information Resource Management (IRM) Support personnel and Enterprise VistA Support (EVS) personnel in understanding the component structures of the Adverse Reaction Tracking (ART) package. In addition, materials relating to security, resource requirements, and relationships to other VistA packages are included. Familiarity with the M programming language and VistA is assumed.

## **Revision History**

<b>Revision Date</b>	Page or Chapter	Description	Project Manager/ Technical Writer
April 2016	Page 2	Updated description of the GMRA*4*48 - Assessment Clean Up Utility patch.	Rishan Chandarana Blair Sanders
	Pages 33 and 33	Revised the Assessment Clean Up Utility section. This included describing the process of accessing the GMRA ASSESSMENT UTILITY for the first time.	
April 2016	<u>i thru 85</u>	Made grammatical and formatting changes throughout the document. Updated footer to reflect April 2016 date.	Heidi Cross Blair Sanders
	<u>iv</u>	Updated Revision History.	
	2	Reference to GMRA*4*46.	
	2, 47	Added patch summary for GMRA*4*46. Added step 1 to 1. Enter/Edit Site Configurable File menu option.	
	52, 52, 54, 55, 56, 57, 58, and 59	Added information on Patch GMRA*4*46 to clarify Version 1 and 2 for callable routine GMRADPT.	
April 2016	2, 33, 33, 35, and 36	Added summary description of GMRA*4*48 – Assessment Clean Up Utility. Also, added description of Assessment Cleanup Utility distributed in	Rishan Chandarana Blair Sanders
		up Utility distributed in GMRA*4.0*48	Leon Wisell JoAnn Green
	33, 58, 67, and 68	Added note, rephrased sentence defining a record in Patient Allergies file. Changed definition of Historical, Observed, and True Allergy in Glossary.	Rishan Chandarana Blair Sanders

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	45	Added protocols used by GMRA Assessment Utility	
	<u>47</u>	Added Assessment Clean Up Utility to Menu Options	
October 2013	21	Updates to Allergy Clean-up	Kenny Condie/JoAnn
		Option	Green
	45	Updates to protocol list	
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	manual.	including removal of Marked on	Green
		Chart prompts.	
November 2004	Pages 1 & 39	NKA deletion enhancement	Al Ebert/JoAnn
		added	Green
October/Novemb	Throughout	Patient name and SSN and	Al Ebert/JoAnn
er 2004	manual.	provider name updates to comply	Green
		with Patient privacy SOP.	
October 2004		CPRS GUI 25 Release Notes for	Al Ebert/JoAnn
		ART added and updated.	Green
January 2004		Patch 17 (GMRA*4*17) Free	Al Ebert/JoAnn
		Text Allergy Clean Up Utility	Green
		info added.	

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## Introduction

The objective of ART is to track and report patient allergy and adverse reaction data. This is accomplished through two interfaces:

- 1. CPRS GUI
- 2. ART menus and options within legacy VISTA.

Use of ART within CPRS is primarily described in CPRS documentation, but some examples are provided in the ART manuals.

#### **ART and Data Standardization**

ART has been modified in order to standardize the data stored in the allergy package. Standardized data is necessary for inclusion in the Health Data Repository (HDR).

Two new cross-references and a new Application Programmer Interface (API) were created that will allow changes to existing reactant terms to propagate through existing allergy entries in the PATIENT ALLERGIES file (120.8).

The GMR ALLERGIES file (120.82) and the SIGNS/SYMPTOMS file (120.83) are being standardized. As a result of standardization, sites will no longer be allowed to add or edit entries in either of these files. In addition, users will no longer be able to add "free text" signs /symptoms.

Changes have been made to ART through recent OR patches (OR\*3.0\*195, OR\*3.0\*216), and the following ART patches:

GMRA*4*17 GMRA*4*18 GMRA*4*19 GMRA*4*2 GMRA*4*20 GMRA*4*21 GMRA*4*22 GMRA*4*23 GMRA*4*25 GMRA*4*25 GMRA*4*25 GMRA*4*26 GMRA*4*27 GMRA*4*30 GMRA*4*31 GMRA*4*33 GMRA*4*33	Free text utility HDR/VistA Data Extraction Framework (VDEF) update Notifications from CPRS when allergies are added Deleting Soundex x-ref & misc Allergy data Removal of allergies as orders HDR Application Installation HDR/DS Changes Update HDR trigger code Blank sign/symptom problem Remote Data Interoperability (RDI) update ALLERGY ORDER CHECK DOES NOT FIRE FOR CONTRAST MEDIA Automated clean up of free text allergies PREVENT DECEASED PATIENTS FROM APPEARING ON REPORT Check for compiled cross-references in file 120.8 PREVENT TEST PATIENTS FROM APPEARING ON LIVE REPORT Update to HL7 messages
GMRA*4*36	Remove ability to delete allergy records
GMRA*4*37	Add remote data to contrast media order checks

GMR <b>A</b> * <b>4</b> * 3 <b>8</b>	Add allergy related progress note to CPRS signature
GMRA*4*40	Updating ANGIOTEN related allergies
GMRA*4*41	Pharmacy Encapsulation Changes
GMRA*4*42	PROGRESS NOTES AND HISTORICAL ALLERGY ENTRIES
GMRA*4*44	RDI VHIM COMPLIANCE UPDATES
GMRA*4*45	ORDER CHECK API UPDATE
GMRA*4*46	ALLERGY ORDER CHECK SIGNS/SYMPTOMS

#### GMRA\*4\*48 - Assessment Clean Up Utility

GMRA\*4\*48 ASSESSMENT CLEAN UP UTILITY

GMRA\*4\*48 installs the Assessment Clean Up Utility, allowing sites to identify and correct any discrepancies between the ADVERSE REACTION ASSESSMENT file (#120.86) and the PATIENT ALLERGIES file (#120.8).

A data discrepancy issue was discovered between the ADVERSE REACTION ASSESSMENT file (#120.86) and the PATIENT ALLERGIES file (#120.8). Specifically, a patient had a value of NO for the assessment and yet they had active reactions. The discrepancy could generate a hard error when attempting to process an Outpatient prescription.

When the patch is installed, the 'B' cross-reference for the ADVERSE REACTION ASSESSMENT file (#120.86) is re-indexed. The installer will be notified when the reindexing is complete.

After the re-indexing is complete, the site should run the GMRA ASSESSMENT UTILITY option. See Page 33 for further information.

#### GMRA\*4\*46 Allergy Order Check Signs/Symptoms

This patch will enable the Adverse Reaction Tracking package to return additional data within the medication order check message to the Computerized Patient Record System (CPRS) and Pharmacy. This data includes the signs and symptoms of the reaction, the reaction's severity and the item (ingredient or drug class) that was matched.

#### GMRA\*4\*42 - Progress Notes and Historical Allergy Entries

In the allergy package, a progress note is created whenever an observed drug allergy is entered for a patient. That note is then added to the list of items to be signed when changing the patient or refreshing the patient's data.

Historical allergies, regardless of whether they are drug related or not, do not create progress notes.

During internal testing of another issue, it was discovered that a note can be associated, or appear to be associated, to an historical allergy entry.

At this point, any addition historical entries will appear to have a note associated with it. In fact, what is happening is the same note is appearing on the "to be signed" list even

though it may already be signed. No new notes are created and the note stays associated with the correct patient and correct allergy.

After the installation of this patch, the system will correctly handle the creation of the progress note for observed entries and will no longer associate a progress note with an historical entry.

While testing this patch, it was discovered that the zero node of the XTMP global entry that stores data from the HDR isn't correctly set at the time the data is retrieved. As a result, the daily clean-up process that clears out the XTMP global will not clear this data, which may cause an unnecessary build up of data in XTMP. The zero node will now be set correctly.

Related to the HDR work, the code that indicates when new allergy data should be sent to the HDR would sometimes stop processing due to a task manager issue. The code has been modified to add a fail-safe so that if the data isn't sent to the HDR as a result of a task related error, a new task will be created to send the data. Previously, manual intervention was required.

#### **GMRA\*4\*41 - Pharmacy Encapsulation Changes**

This patch converts GMRA routines to the new Pharmacy Encapsulation Cycle II APIs (Application Programmer Interfaces). GMRA routines no longer read data directly from Pharmacy files 50.605, 50.416, 50.6.

#### **GMRA\*4\*40 - Updating ANGIOTEN-Related Allergies**

In patch GMRA\*4\*29, existing free text entries were updated in one of three ways. The entry was either updated to a standardized term, marked as entered in error, or left as free text with the phrase (FREE TEXT) appended to the term.

A group of terms that were included in the updated matrix that had the text ANGIOTEN in common were identified as needing to be updated to ACE INHIBITORS. Of the 19 terms that fell into this group, 6 were correctly identified as needing to be updated to ACE INHIBITORS. The other 13 terms should have been updated to either ANGIOTENSIN II INHIBITORS or should have been updated to free text if the existing term didn't provide enough information to accurately update it to a standardized term.

Prior to standardization, we were aware that there were about 50 allergies on file at all sites for the 19 "ANGIOTEN" based terms. In addition, the ACE INHIBITORS and ANGIOTENSIN II INHIBITORS are in related classes (CV800 and CV805 respectively) which will cause drug class related order checks to fire when an allergy to either class is on file and an item from either class is ordered.

This patch will find any ANGIOTEN based allergies that were updated by patch 29 and update them to the correct term if need be.

In addition, the post-install will delete and rebuild the "B" cross-reference of the PATIENT ALLERGIES file (#120.8). During installation of patch 29, a few sites reported problems with the post-install not completing. It was discovered that a "B" cross-reference existed for an entry that was no longer in the file. The "B" cross-reference will be deleted and rebuilt to ensure accuracy.

#### GMRA\*4\*38 - Add Allergy-Related Progress Note to CPRS Signature

Currently, when a new observed allergy is entered or an existing allergy is marked as entered in error a progress note is created. When these actions are taken from within CPRS GUI the note is not added to the items requiring signature. As a result, when the user is finished working with that patient the progress note is not displayed for signature as is expected.

The progress note is created outside of the context of CPRS and CPRS is therefore unaware of the fact that the progress note needs to be signed.

Beginning with CPRS v27 and the installation of this patch, CPRS will be made aware of the creation of the progress note and it will be added to the list of items to be signed when the patient record is exited or if the sign items action is taken.

Patch 38 also includes a post-install that will identify any allergy entries in the PATIENT ALLERGIES file (#120.8) that have an incorrect pointer value in the GMR ALLERGY field and convert it to a free text entry. The installer will receive an email listing any entries that were updated. The site will need to use the 'allergy clean up utility' to fix those entries.

#### GMRA\*4\*37 - Add Remote Data to Contrast Media Order Checks

Patch GMRA\*4\*26 introduced remote data interoperability (RDI) functionality so that remotely entered allergy data would be considered when determining if an order check should be produced.

Patch 26 only included functionality for pharmacy allergy order checking. This patch will expand the RDI functionality to include remotely entered data when determining if there is a contrast media allergy when ordering radiological procedures.

Upon entering a radiological request that uses contrast, either from within the radiology package or within CPRS, an order check will be displayed if there is contrast media allergy data on file either locally or remotely.

Patch OR\*3\*267 includes updates to enhance the order check display and should be installed at the same time as this patch. However, these patches can be installed independently of each other without any adverse effect.

#### GMRA\*4\*35 - Possible Problem with List by Location Unassessed

Add notation to code for option - List by Location of Undocumented

This report will show patients as not having received an assessment if the assessment was entered after the end date of the range. For this reason, it is recommended to end the range

#### **GMRA\*4\*36 - Remove Ability to Delete Allergy Records**

Clear Quest/Remedy/PSIs

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CQ 6683 - ID BAND marked question asked multiple times. This question is now asked only one time per allergy entered.

CQ 8690 - ALLERGY TYPE (3.1) field in PATIENT ALLERGIES (120.8) file is not updated when the associated entry in the GMR ALLERGIES (120.82) file is changed. Code has been modified so that when the ALLERGY TYPE (1) field in the GMR ALLERGIES (120.82) file is updated so is the same field in the PATIENT ALLERGIES (120.8) file. In addition, the post-install routine GMRAY36 will make sure all GMR ALLERGIES (120.82) file entries are in synch.

CQ 12731 - An allergy assessment message is sent to the HDR when a user enters an uparrow or blank return when prompted with the "does this patient have any allergies" prompt in the roll and scroll environment. The system currently creates an entry in the ADVERSE REACTION ASSESSMENT file (120.86) before the user enters their response to the question. If the user enters an up-arrow or hits return then the entry is deleted, which causes the HL7 message to be sent to the HDR. The entry will now only be created after the user answers the question.

#### Files Updated

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120.82 - GMR ALLERGIES, updated to have a new cross-reference so changes to the ALLERGY TYPE (1) field propagate through all allergy entries. Also, the DRUG INGREDIENTS (4) multiple is modified so only primary ingredients can be chosen.

#### GMRA\*4\*34 - Update to HL7 Messages

In patch GMRA\*4\*23, routines were distributed to send HL7 messages containing allergy data to the Health Data Repository (HDR). This patch adds a check for HL7 control characters that are embedded in text type data elements in the HL7 message and converts these control characters to the correct HL7 Escape Sequence.

\*\*NOTE\*\* You must suspend the VDEF Request Queue before installing this patch and then re-enable it after installation of the patch. The steps for doing that are outlined in the installation instructions.

#### GMRA\*4\*33 - Prevent Test Patients From Appearing on Live Report

This patch will update the Adverse Reaction Tracking reports that display the patient name and/or SSN, and reports that produce counts of reaction data so that they all exclude test patients.

#### GMRA\*4\*31 - Check for Compiled Cross-References in File 120.8

In preparation for the installation of the data standardization related patches, sites needed to check to see if file 120.8 had compiled cross-references.

Patch GMRA\*4\*23, which installed the necessary data dictionary updates in support of the allergies data standardization, added some new cross-references to file 120.8.

In some cases, sites may have compiled the cross-references on file120.8. If that is the case, then the cross-references that will be added by patch GMRA\*4\*23 won't be executed as a result of the compilation of the existing cross-references.

In general, the only sites that will have this problem are integrated sites. In some cases, during the integration of the site's database, the cross-references for file 120.8 may have been compiled. In order to ensure that file 120.8 does not have compiled cross-references this informational patch was provided to give directions on how to identify and fix this issue if it existed on a local system.

#### GMRA\*4\*30 - Prevent Deceased Patients From Appearing on Report

This patch addresses Remedy ticket HD67463, where deceased patients are appearing on the Patient Not Asked Report [GMRA PRINT-PATIENTS NOT ASKED]. The sites use this report to identify patients who have not had an allergy/adverse reaction assessment. The sites then follow up with the patients on the list to get the allergy information.

By preventing deceased patients from appearing on this list, the sites will not be attempting to contact the family of a deceased individual for this assessment.

#### **GMRA\*4\*29 - Automated Clean Up of Free Text Allergies**

This patch will find all active free text allergies in the PATIENT ALLERGIES (120.8) file and will update the entry in one of three ways based on data in the conversion matrix.

#### GMRA\*4\*27 – Allergy Order Check Does Not Fire For Contrast Media

PSI-05-054 documents a patient safety issue due to allergy bulletin not being fired if the contrast media has a VA DRUG CLASS of DX109. Ticket is HD99674. This patch corrects the problem.

#### GMRA\*4.0\*26 - Remote Data Interoperability (RDI) Update

GMRA\*4.0\*26 provides RDI the ability to use remote allergy data when determining drug-allergy order checks.

The remote data will come from the Health Data Repository (HDR) and that data will be used to determine if an order check should be given on the local system for the drug being ordered.

ART retrieves active allergies from HDR-Hx and HDR-IMS via a CPRS API call to CDS and includes those in the drug allergy-drug order checks performed on the local system for the drug being ordered.

#### **GMRA\*4.0\*25 - Blank Sign/Symptom Problem**

Patient Safety Issue - PSI-05-049 identifies a problem where an allergy may be stored without the corresponding drug classes or drug ingredients. As a result, order checking may not occur as expected.

In version 25 of the GUI, a change was made to the way allergies are entered. When the list of signs/symptoms is displayed on the form the site's top ten entries are listed first and then there's a space and a dashed line and another space. It's possible for the user to accidentally select the dashed line or the space as a sign/symptom. When this happens the system fails when attempting to store the allergy data.

With this update, the allergy package will no longer attempt to store non-existent signs/symptoms.

This patch also contains a post-installation routine that will attempt to identify any allergies that may not have been saved correctly. Upon completion of the post-install, a report will be generated listing any patients and their associated allergies that need to be reviewed. In general, the best course of action is to mark the existing allergy as entered in error and then re-enter the allergy information to make sure all required data is accounted for.

#### **GMRA\*4\*24 - Update HDR Trigger Code**

The logic used to determine when messages should be sent to the HDR is updated in this patch. If the patient is a test patient or if a patient merge is occurring at the site, the allergy data will no longer be sent to the HDR.

#### GMRA\*4.0\*23 - HDR/DS Changes

This patch introduces the changes necessary to standardize the data stored in the allergy package. Standardized data is necessary for inclusion in the Health Data Repository (HDR).

In addition, this patch introduces two new cross-references and a new Application Programmer Interface (API) that will allow changes to existing reactant terms to propagate through existing allergy entries in the PATIENT ALLERGIES file (120.8).

The GMR ALLERGIES file (120.82) and the SIGNS/SYMPTOMS file (120.83) are being standardized. As a result of standardization, sites will no longer be allowed to add

or edit entries in either of these files. In addition, users will no longer be able to add "free text" signs /symptoms.

#### **Data Dictionary Changes:**

- Updated the reactant field to include all of the files that are searched (file 50 was missing)
- Removed the text related to free-text entries
- Changed the description for the OTHER REACTIONS field of the REACTIONS (S/S) multiple in anticipation of standardizing that file. Once standardization is completed on file 120.83 (SIGNS/SYMPTOMS), then the OTHER REACTIONS field will no longer store "user entered text."
- Changed the help text for the REACTIONS field of the REACTIONS multiple so that it doesn't say to contact the nursing ADP coordinator to add new signs/symptoms. It now says to contact the allergy coordinator to have the new term added (NTRT).

#### **Mailman Changes:**

• Changed email message that is sent when a user attempts to add a free-text term indicating that the NTRT (new term rapid turnaround) process should be used.

#### **GMRA Package (\* Affects GUI Functionality)**

- Updated cross-reference that allows for auto-updating of existing allergies when definitions related to the allergen are changed
- Updated file structures to support DS (field for VUID)
- Updated code to allow filtering of terms for DS (active/inactive) \*
- Removal of the ability to add free text reactions \*
- Updated code so that new local entries can no longer be added to the GMR ALLERGIES and SIGNS/SYMPTOMS files
- Changed routine so test patient data is not sent to the HDR (5 leading zeros)
- Incorporated messaging team changes to the HL7 messaging of data to the HDR
- The post-installation routine that converts existing free-text data to standardized terms if appropriate (#120.82 clean-up)
- Prohibit selecting a reactant from #50 \*

#### **GMRA\*4.0\*22 - HDR Application Installation**

GMRA\*4.0\*22 was the second patch in support of the VistA Data Extraction Framework (VDEF) effort, allowing changes to the PATIENT ALLERGIES (#120.8), ADVERSE REACTION REPORTING (#120.85) and ADVERSE REACTION ASSESSMENT (#120.86) files to be transmitted to the HDR (Health Data Repository).

This patch added the infrastructure needed to create and send the HL7 messages to the HDR.

#### **GMRA\*4\*21 - Removal of Allergies as Orders**

**NOTE:** The following functionality is available only to sites that have installed patches OR\*3.0\*195, OR\*3.0\*216, and GMRA\*4.0\*21. Sites that have not installed these patches will continue to receive the ART functionality that exists in CPRS GUI 24.

At sites that have installed the patches listed above, users can no longer enter allergies and adverse reactions as orders that are placed in the *ORDERS* file. Patch OR\*3.0\*216 exports a modified order-dialog entry—*GMRAOR ALLERGY*—in the *ORDER DIALOG* file. This entry enables CPRS to interact directly with the Adverse Reaction Tracking (ART) package (i.e., CPRS adds new allergies and adverse reactions directly into the ART package as users submit them.)

With supporting patches OR\*3.0\*216 and GMRA\*4.0\*21, CPRS GUI 25 does not display allergy information on the **Orders** tab. It displays allergy information only on the **Cover Sheet** tab. Nevertheless, users can still enter allergy information from the **Orders** tab by selecting **Allergies** in the **Write Orders** pane. (i.e., users can still go to a familiar place to enter allergies.)

In addition, users can no longer select **OTHER ALLERGY/ADVERSE REACTION** as a type of causative agent, nor can they select **OTHER REACTION** as a type of sign/symptom. Changes to the ART package have eliminated these items as choices. These changes mark a continuing effort to end free-text and unspecific entries. If type of causative agent' references the field ALLERGY TYPE, the GUI interface does not allow the user to enter this information. It is determined internally by the selection made during the Reactant lookup process.

Also, CPRS now requires users to enter information about the nature of the reaction that they are documenting (**Allergy**, **Pharmacological**, or **Unknown**).

Finally, CPRS GUI 24 introduced a dialog through which users can request that a causative agent be added to their site's *ALLERGIES* file. Users access this dialog via a warning that pops up when they attempt to enter a free-text causative agent. The warning dialog asks users to indicate—by clicking either its **YES** or **NO** button—if they want to send a causative-agent inclusion request. In CPRS GUI 24, the default button was **YES**. In CPRS GUI 25, the default button is **NO**. Furthermore, when users click the system **X** button (located in the top right-hand corner of each screen) to exit any of the screens that comprise the inclusion-request dialog, CPRS now cancels the request action.

#### **GMRA\*4\*20 - Allergy Data Updates**

This patch updates the free text utility that was distributed in patch GMRA\*4\*17 so that it can now be used to identify ingredient file based and drug class file based allergies.

#### GMRA\*4\*19 - Notifications from CPRS When Allergies are Added

This patch addressed a couple of issues related to the utility that was released in patch GMRA\*4\*17. In addition, the sending of bulletins related to new allergy entry, need for

verification, and need for marking chart/ID bands will now be done when entering an allergy from CPRS GUI. Due to the change that will cause bulletins to be sent, sites should review all GMRA related mail groups to be sure they are correctly populated.

This patch also changes the order in which files that contain matching reactants appear to the user. With patch GMRA\*4\*17, the names of the files that contained matching selections were displayed before the list of matches. Although this helps identify the file from which you're choosing, users will still often pick the first match that they see. Selections from the ingredient and drug class file, while legitimate, only supply partial information that is required for order checking to work. As a result, the ingredient and drug class files were moved to the bottom of the selection list to encourage selection from one of the drug related files or the GMR ALELRGIES file (#120.82), which will provide complete information.

Changes in the order in which files appear in the tree view and the prohibition of free text entries for CPRS GUI will be released in v24 (patch OR\*3.0\*190). Once v24 is installed, the entry of allergies will be consistent between the ART package and CPRS GUI.

This patch also includes a post-install that will review the VERIFIED field (#19) of the PATIENT ALLERGIES file (#120.8) for null entries. A previous patch fixed a problem with the VERIFIED field being incorrectly set to null but did not update entries affected by this problem. The post-install will compare the allergy against the site's autoverification settings and either mark the allergy as verified or mark it as not verified. For those entries marked as not verified, the sites can use standard allergy options to verify the remaining allergy entries. Each entry that is updated by this process will have a comment indicating that the entry was auto-updated by the patch 19 post-install. In addition, a mail message will be sent to the installer when the post-install finishes to let them know how many entries were reviewed and how many were updated.

#### GMRA\*4.0\*18 - HDR/VistA Data Extraction Framework (VDEF) Updates

This patch installed the necessary "triggers" to identify when data should be sent to the HDR.

#### GMRA\*4.0\*17 - Free Text Allergy Clean Up Utility

Patch GMRA\*4.0\*17 provided a utility to help sites identify and fix allergy entries that have free-text reactants. With this patch, free-text entries are no longer allowed from within the Allergy Tracking package. A subsequent patch to CPRS prevents free-text entries from within CPRS as well.

Lower-case entries are also no longer allowed. Previously, lower-case entries could be added to the GMR ALLERGIES file (120.82). A post-installation routine will identify any local entries and update the entries to upper-case. Synonyms will also be checked and converted to upper-case, if required.

A new mail group, GMRA REQUEST NEW REACTANT, is added with this patch. Sites should populate this mail group with the people responsible for addressing requests

to add new reactants. If users attempt to enter a reactant that is not found during the look-up process, they are asked if they would like to send an email requesting the addition of the new reactant. The request can then be reviewed for accuracy and new local entries can be added, if appropriate. Previously, users were asked if they wanted to add the new entry and it was immediately available in the patient's record. Under the new system, the new reactant must be reviewed before it is added to the patient's record.

#### **Overview of Adverse Reaction Tracking Functionality**

The four major components of the package are:

- 1. Data Entry Options Adverse Reaction Tracking has two options where a user can enter data.
  - a. Enter/Edit Patient Reaction Data This option allows the clinical users (i.e., doctors, nurses, other clinicians and clerks) to enter data into ART.
  - b. Verify Patient Reaction Data This option allows the verifiers designated by ART to verify the correctness of data entered by the clinical users into ART. This option does NOT perform evaluation of suspected Advanced Drug Reactions (ADR) as described in Section 5.a.(2).(d) of Directive 10-92-070.
- 2. Reporting options These options report the patient causative agent data to the user via a print option. Also, this data is made available to other software applications via a data extract utility.
- 3. Enter/Edit Site Configurable Files This menu allows the various site configurable files to be modified to allow ART to better meet the needs of an individual site.
- 4. Adverse Drug Reaction (ADR) options These options support implementation of Directive 10-92-070. It allows for the evaluation of a suspected ADR by a qualified individual (e.g., clinical pharmacist, clinical pharmacologist) other than the attending physician, as specified in Section 5.a.(2).(d) of Directive 10-92-070. This component also generates the reports needed by the FDA.

There are four major users of the software:

1. Clinical Users - These are the doctors, nurses, other clinicians, and clerks entering the data into ART. They are required to enter data pertinent for a particular allergy/adverse reaction. If the allergy/adverse reaction was observed at the site, data pertaining to any possible legal action could be tracked. This data is then available to users of any service through the Reporting options, thus avoiding any errors in care. Two other data elements that are tracked are the date/time that the patient chart was marked and the date/time that the patient ID band was marked, indicating the patient's reaction to the particular causative agent. Automated mail bulletins are sent to the appropriate users when the date/time patient chart marked

- data field has not been recorded.
- 2. Verifiers These are users designated by the site to verify the correctness of the data in ART. The verifiers are designated when the Information Resources Management Service (IRM) allocates the GMRA-ALLERGY VERIFY security key to a user and assigns the ART Verifier Menu. The verifiers may be clinical pharmacists, dietitians, or other clinical personnel. Automated mail bulletins are sent to the ART verifiers when an allergy/adverse reaction has been entered and signed (completed) by a user. Verification may be important in observed instances of adverse drug reactions where a Quality Assurance (QA) investigation may be conducted. In general, it is a good principle to have someone verify all of the data entered into ART.
- 3. Pharmacy and Therapeutics (P&T) Committee users These users are the members of the hospital's P&T Committee and are assigned the P&T Committee Menu option. They use the information in ART to review Adverse Drug Reactions (ADRs) in the hospital, classify them as significant reactions and determine whether they are related to particular drugs, and depending on the severity of the ADRs, may report them further to the FDA. A printed copy of the form used to report to the Food and Drug Administration (FDA) can be generated by ART. Automated mail bulletins are sent to the P&T Committee users when an observed drug reaction is entered into the system.
- 4. Software developers These users use the data extract utility (GMRADPT routine) to gather ART data for display within their specific **VISTA** application.

# Implementation and Maintenance

There are several important considerations for the Application Coordinator (ADPAC) or IRM support person to consider following installation of this software. They include editing site parameters, assigning menus to users, and assigning security keys.

#### **Site Parameters**

The Enter/Edit Site Configurable Files menu [GMRA SITE FILE MENU] has six options that the site can use to customize and maintain their use of the software:

- 1 Edit Allergy File
- 2 Enter/Edit Signs/Symptoms Data
- 3 Enter/Edit Site Parameters
- 4 Sign/Symptoms List
- 5 Allergies File List
- 6 Allergies Clean Up Utility

#### **Edit Allergy File**

[GMRA ALLERGY FILE EDIT]

#### **Enter/Edit Signs/Symptoms Data**

[GMRA REACTION FILE EDIT]

The GMR ALLERGIES file (#120.82) and the SIGNS/SYMPTOMS file (#120.83) are being standardized. As a result of standardization, sites will no longer be allowed to add or edit entries in either of these files. In addition, users will no longer be able to add "free text" signs/symptoms.

# Enter/Edit Site Parameters [GMRA SITE FILE]

The Enter/Edit Site Parameters option allows site configuration for multiple divisions at the site. The software provides a generic site configuration entry called HOSPITAL. The site can customize this entry to fit its needs. These parameters are stored in the GMR Allergy Site Parameters file (#120.84).

The site can configure the following:

- 1. The list of the ten most common signs/symptoms the user will see.
- 2. The autoverification of data. Autoverification is the process by which the software automatically changes the status of the data to verified when the user who entered the data signs off (completes) on it. The site can determine which of the types of reactions are to be auto-verified and which are to follow the normal verification procedure.

Three parameters are used to auto-verify data:

- Auto-verify Food/Drug/Other
- Auto-verify Observed/Historical
- Auto-verify Logical Operator

The verification of data is important. Minimally, all drug reactions will need verification. Depending on the site, food and other allergies may also need to be verified. The users who will verify the data must have the GMRA-ALLERGY VERIFY security key.

- 3. Whether the originator of the data should provide comments.
- 4. Whether the site documents the marking of a patient's ID band or chart to indicate the presence of an allergy/adverse reaction. There are four parameters with regards to this documentation; Mark ID Band, Flag Method of

Notification, Alert ID Band/Chart Mark, and Send Chart Mark Bulletin for New Admissions.

- 5. FDA reporting data. The site can choose to require the user to enter FDA data at the time a reaction is entered. Also, the site may edit the reporter information that will appear on the FDA Adverse Reaction reports.
- 6. Whether to allow comments to be added to the reaction data that is entered in error. This allows the user to indicate why the data is incorrect.

#### **Example:**

```
Select Enter/Edit Site Configurable Files Option: 3 Enter/Edit Site Parameters
Select GMR ALLERGY SITE PARAMETERS NAME: ??
   HOSPITAL
        You may enter a new GMR ALLERGY SITE PARAMETERS, if you wish
        This field is the name of this set of parameters. The name of the base
        set that is sent out is "HOSPITAL". The code will work more efficiently
        if the name of the base set of parameters is not changed from "HOSPITAL"
Select GMR ALLERGY SITE PARAMETERS NAME: HOSPITAL
NAME: HOSPITAL// (No editing)
Select DIVISION: SALT LAKE CITY OIFO// ?
   Answer with DIVISION
   Choose from:
  HINES ISC
  ELY
  SALT LAKE CITY OIFO
        You may enter a new DIVISION, if you wish
Answer with INSTITUTION NAME, or STATUS, or STATION NUMBER, or
    OFFICIAL VA NAME, or CURRENT LOCATION, or CODING SYSTEM/ID PAIR, or
    NAME (CHANGED FROM), or CODING SYSTEM
Do you want the entire INSTITUTION List? N
Select DIVISION: SALT LAKE CITY OIFO// <Enter>
The following are the ten most common signs/symptoms:
1. CHILLS
2. ITCHING, WATERING EYES
3. HYPOTENSION
6. DIARRHEA
7. HIVES
3. HYPOTENSION
4. DROWSINESS
5. NAUSEA, VOMITING
                                  8. DRY MOUTH
                                    9. DRY NOSE
                                  10. RASH
Enter the number of the sign/symptom that you would like to edit: ??
   ENTER THE CORRECT NUMBER (1-10) OF THE SIGN/SYMPTOM TO BE EDITED
Enter the number of the sign/symptom that you would like to edit: 6
REACTION: DIARRHEA// ??
        One of the ten most commonly selected reactions.
   Choose from:
                  NATIONAL SIGN/SYMPTOM
   AGITATION
   AGRANULOCYTOSIS
                         NATIONAL SIGN/SYMPTOM
  ALOPECIA NATIONAL SIGN/SYMPTOM
ANAPHYLAXIS NATIONAL SIGN/SYMP
                    NATIONAL SIGN/SYMPTOM
  ANEMIA NATIONAL SIGN/SYMPTOM
  ANOREXIA
                 NATIONAL SIGN/SYMPTOM
               NATIONAL SIGN/SYMPTOM
   ANXIETY
```

```
NATIONAL SIGN/SYMPTOM
   APPETITE, INCREASED
                           NATIONAL SIGN/SYMPTOM
   ARRHYTHMIA NATIONAL SIGN/SYMPTOM
  ASTHENIA NATIONAL SIGN/SYMPTOM
NATIONAL SIGN/SYMPTOM
                  NATIONAL SIGN/SYMPTOM
  ATAXTA
               NATIONAL SIGN/SYMPTOM
  ATHETOSIS
                 NATIONAL SIGN/SYMPTOM
  BRACHYCARDIA
                    NATIONAL SIGN/SYMPTOM
  BREAST ENGORGEMENT
                           NATIONAL SIGN/SYMPTOM
  BRONCHOSPASM NATIONAL SIGN/SYMPTOM
  CARDIAC ARREST
                      NATIONAL SIGN/SYMPTOM
  CHEST PAIN
                    NATIONAL SIGN/SYMPTOM
REACTION: DIARRHEA// AGITATION
                                    NATIONAL SIGN/SYMPTOM
The following are the ten most common signs/symptoms:
1. CHILLS
                                 6. AGITATION
2. ITCHING, WATERING EYES
                                  7. HIVES
3. HYPOTENSION
                                  8. DRY MOUTH
4. DROWSINESS
                                  9. DRY NOSE
5. NAUSEA, VOMITING
                                  10. RASH
Enter the number of the sign/symptom that you would like to edit: <Enter>
AUTOVERIFY FOOD/DRUG/OTHER: NO AUTOVERIFY// ??
       This field determines which types of allergies a site wants autoverified
       at the user sign off.
    Choose from:
             NO AUTOVERIFY
      0
              AUTOVERIFY DRUG ONLY
      2
               AUTOVERIFY FOOD ONLY
      3
               AUTOVERIFY DRUG/FOOD
               AUTOVERIFY OTHER ONLY
               AUTOVERIFY DRUG/OTHER
      5
      6
               AUTOVERIFY FOOD/OTHER
               AUTOVERIFY ALL
AUTOVERIFY FOOD/DRUG/OTHER: NO AUTOVERIFY// <Enter>
AUTOVERIFY OBSERVED/HISTORICAL: NO AUTOVERIFY// ??
       This field is configurable by the site to allow autoverification of
       observed or historical allergies.
    Choose from:
      0
              NO AUTOVERIFY
               AUTOVERIFY HISTORICAL ONLY
      1
               AUTOVERIFY OBSERVED ONLY
      2
               AUTOVERIFY BOTH
AUTOVERIFY OBSERVED/HISTORICAL: NO AUTOVERIFY//
AUTOVERIFY LOGICAL OPERATOR: OR// ??
        This field will determine how the Autoverify Food/Drug/Other and
        Autoverify Observed/Historical parameters relate to each other. OR means
        that the reaction will be autoverified if it meets the criteria of one of
        the two parameters, while AND means the reaction will be autoverified only
        if it meets the criteria of both parameters. If this field is left null,
        the OR condition will be used.
       For example, if you want to verify only observed drug reactions, you would
        set the Autoverify Food/Drug/Other parameter to AUTOVERIFY FOOD/OTHER
        and the Autoverify Observed/Historical to AUTOVERIFY HISTORICAL ONLY
        Autoverify Logical Operator to OR. This means that a reaction that has
        a type of Food/Other OR is Historical will be autoverified, thus leaving
        observed drug reactions to be verified.
       Another example would be if you wanted to verify all observed reactions
       and all drug reactions whether observed or historical. The parameters
        should be set accordingly: Autoverify Food/Drug/Other to AUTOVERIFY
       FOOD/OTHER, Autoverify Observed/Historical to AUTOVERIFY HISTORICAL ONLY and
```

Autoverify Logical Operator to AND. In this case to be autoverifed, a

```
reaction has to have a type of Food/Other AND it must be Historical, all
        other reactions will need to be verified.
     Choose from:
       !
               AND
      S.
AUTOVERIFY LOGICAL OPERATOR: OR// <Enter>
REQUIRE ORIGINATOR COMMENTS: NO// ??
        This field indicates whether the originator will be required to enter
        comments for an OBSERVED reaction.
    Choose from:
      0
               NO
      1
               YES
REQUIRE ORIGINATOR COMMENTS: NO// <Enter>
MARK ID BAND FLAG: YES// ??
       This field is an indicator to denote whether the site wants
        to document if the patient ID band should be marked for
        a certain allergy.
        The system will assume the site wants to document the marking of inpatient
        ID bands. If this field is answered NO, the site does not want to
        document the marking of inpatient ID bands.
     Choose from:
      Ω
               NΩ
               YES
MARK ID BAND FLAG: YES// <Enter>
METHOD OF NOTIFICATION: BULLETIN// ??
        This field tells ART if or how the users should be notified for chart
        or ID band markings. There are three methods. The first method is the
       use of BULLETINs, which is the current way ART works. The
        second method is the use of {\tt OE/RR} Teams. If this method is used, then
       you will need to set up different teams for each ward and also assign
       printers to these teams. The third method is to turn off the function.
    Choose from:
      0
               BULLETIN
      1
               OE/RR TEAMS
               NO NOTIFICATION
      2
METHOD OF NOTIFICATION: BULLETIN// <Enter>
ALERT ID BAND/CHART MARK: YES// ??
        This field is to let the system know if you want to issue alerts
        if the fields have not been answered in the Enter/Edit Patient Reaction
       Data portion of the system. If the field is answered yes(1) or is null
        then, the system will continue to issue the alerts. If this field is
       no(0), then the system will not issue alerts for this record.
     Choose from:
      1
               YES
               NO
ALERT ID BAND/CHART MARK: YES// <Enter>
SEND CHART MARK BULLETIN FOR NEW ADMISSIONS: YES// ??
        This is to indicate if the site wants to send chart mark bulletin
        for a new admission.
     Choose from:
      1
               YES
      0
               NO
SEND CHART MARK BULLETIN FOR NEW ADMISSIONS: YES// <Enter>
FDA DATA REQUIRED: YES// ??
       This field will indicate whether the entry of FDA Data should be required
        during the Enter/Edit Patient Reaction Data. If this field is answered "YES",
        then the user must enter the FDA Data at the time of entering a reaction.
        If this field is left null or answered "NO", then the FDA Data entry will
        not be required during the Enter/Edit Patient Reaction Data option.
     Choose from:
```

```
YES
               NO
FDA DATA REQUIRED: YES// <Enter>
ENABLE COMMENTS FIELD FOR REACTIONS THAT ARE ENTERED IN ERROR: NO
       Permit users to indicate why a reaction was Entered in Error.
    Choose from:
      1
               YES
      Ω
ENABLE COMMENTS FIELD FOR REACTIONS THAT ARE ENTERED IN ERROR: NO
        // <Enter>
REPORTER NAME:
     ADDRESS:
        CITY:
       STATE:
         ZIP:
       PHONE:
  OCCUPATION:
Do you want to edit Reporter Information shown above? No// <Enter> (No)
        Edit Allergy File
         Enter/Edit Signs/Symptoms Data
         Enter/Edit Site Parameters
         Sign/Symptoms List
         Allergies File List
         Allergy clean up utility
You have PENDING ALERTS
         Enter "VA to jump to VIEW ALERTS option
Select Enter/Edit Site Configurable Files Option:
```

Reporter information will appear on FDA reports generated by the software. This information may be left blank. The user will be prompted for the reporter information when creating an FDA report.

## Sign/Symptoms List

## [GMRA PRINT SIGN/SYMPTOMS LIST]

The Sign/Symptoms List option prints a listing of all or selected signs/symptoms, with the national or local classification and synonym (when there is one) of each sign/symptom. This option can be a useful tool for the ADPAC to maintain the Sign/Symptoms file (#120.83).

## Example:

	and in the second secon
	onfigurable Files Option: 4 Sign/Symptoms List
START WITH NAME: FIRST//	
_	name for a hard copy or <ret> to bring the</ret>
output to your screen)	
GTGN / GYMDHOMG T TGH	TIDI 0 0004 00.02 DAGE 1
SIGN/SYMPTOMS LIST	JUN 8,2004 09:23 PAGE 1
NAME	Nat'l/Local SYNONYM
AGITATION	National
AGRANULOCYTOSIS	National
ALOPECIA	National
ANAPHYLAXIS	National
ANEMIA	National
ANOREXIA	National
ANXIETY	National ANX
APNEA	National
APPETITE, INCREASED	National
ARRHYTHMIA	National
ASTHENIA	National
ASTHMA	National
ATAXIA	National
ATHETOSIS	National
BRACHYCARDIA	National
BREAST ENGORGEMENT	National
BRONCHOSPASM	National
CARDIAC ARREST	National
CHEST PAIN	National
CHILLS	National
COMA	National
CONFUSION	National
CONGESTION, NASAL	National
CONJUNCTIVAL CONGESTION	National
CONSTIPATION	National
COUGHING	National
DEAFNESS	National
DELERIUM	National
DELUSION	National
DEPRESSION	National
DEPRESSION, MENTAL	National
DEPRESSION, POSTICTAL	National
• • •	

## Allergies File List [GMRA PRINT ALLERGIES LIST]

This option prints a captioned list of all entries in the GMR Allergies file (#120.82). The list is sorted alphabetically by NAME. The user may list all entries by accepting the default answer "FIRST" to the "START WITH NAME" prompt or may select a subset to print. The list contains the allergy name, type, whether it is a nationally distributed entry, synonyms if any, VA Drug Class if applicable, and drug ingredients if applicable. This option is meant to be a helpful tool for maintaining the GMR Allergies file.

#### Example

Select Enter/Edit Site Configurable Files Option: 5 Allergies File List

START WITH NAME: FIRST// <ret>

DEVICE: (Enter a printer name for a hard copy or <ret> to bring the output to

your screen)

GMR ALLERGIES LIST JUN 8,2004 09:20 PAGE 1

NAME: ADHESIVE TAPE ALLERGY TYPE: OTHER

NATIONAL ALLERGY: NATIONAL ALLERGY

NAME: ALCOHOL ALLERGY TYPE: DRUG, FOOD

NATIONAL ALLERGY: NATIONAL ALLERGY

DRUG INGREDIENT: ALCOHOL

NAME: ANIMAL HAIR ALLERGY TYPE: OTHER

NATIONAL ALLERGY: NATIONAL ALLERGY

NAME: ANISE OIL ALLERGY TYPE: DRUG, FOOD

NATIONAL ALLERGY: NATIONAL ALLERGY

DRUG INGREDIENT: ANISE OIL

NAME: ANTIRABIES SERUM ALLERGY TYPE: DRUG, FOOD

NATIONAL ALLERGY: NATIONAL ALLERGY

VA DRUG CLASSES: IM400

DRUG INGREDIENT: ANTIRABIES SERUM

NAME: ASCORBIC ACID ALLERGY TYPE: DRUG, FOOD

NATIONAL ALLERGY: NATIONAL ALLERGY

VA DRUG CLASSES: VT400

DRUG INGREDIENT: ASCORBIC ACID

NAME: ASPARTAME ALLERGY TYPE: DRUG, FOOD

NATIONAL ALLERGY: NATIONAL ALLERGY

SYNONYM: NUTRA SWEET

DRUG INGREDIENT: ASPARTAME

NAME: ASPIRIN ALLERGY TYPE: DRUG, FOOD

NATIONAL ALLERGY: NATIONAL ALLERGY

```
VA DRUG CLASSES: MS101
DRUG INGREDIENT: ASPIRIN
...
```

#### **Allergy Clean-up Utility**

This utility will identify either free text reactants, ingredient-based reactants or drug class based reactants. The user will then be allowed to either update the reactant to a more appropriate choice or they can mark it as entered in error.

```
Select Enter/Edit Site Configurable Files <TEST ACCOUNT> Option: 6 Allergy clean up utility

Select one of the following:

1 Free Text
2 Ingredient
3 Drug Class

Select the list you wish to work with:
```

### Free Text Allergy Clean Up Utility

Patch GMRA\*4.0\*17 provided a utility to help sites identify and fix allergy entries that have free-text reactants.

With this patch, free-text entries are no longer allowed from within the Allergy Tracking package. A subsequent patch to CPRS prevents free-text entries from within CPRS as well.

Lower-case entries are also no longer allowed. Previously, lower-case entries could be added to the GMR ALLERGIES file (#120.82). A post-installation routine will identify any local entries and update the entries to upper-case. Synonyms will also be checked and converted to upper-case, if required.

A new mail group, GMRA REQUEST NEW REACTANT, is added with this patch. Sites should populate this mail group with the people responsible for addressing requests to add new reactants. If users attempt to enter a reactant that is not found during the look-up process, they are asked if they would like to send an email requesting the addition of the new reactant. The request can then be reviewed for accuracy and new local entries can be added, if appropriate. Previously, users were asked if they wanted to add the new entry and it was immediately available in the patient's record. Under the new system, the new reactant must be reviewed before it is added to the patient's record.

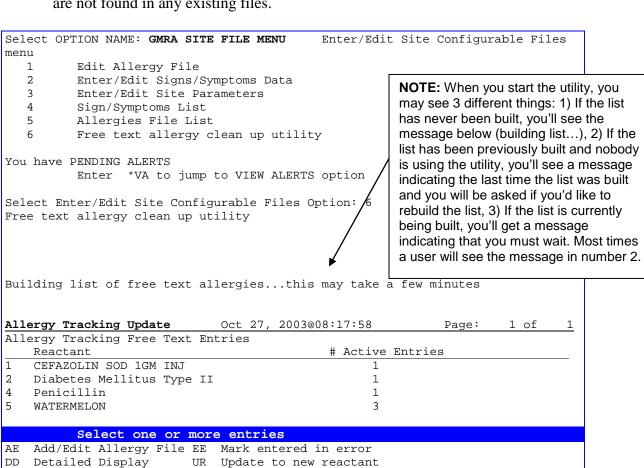
When you start the utility, a list of currently existing free-text entries is displayed in alphabetical order. This list may take a few minutes to generate, as all existing entries need to be evaluated to determine which ones are "free text." The list shows the name of the reactant and the number of entries for that reactant. In most cases, they will be

unique, but there will be some that have many entries (such as an entry for NO KNOWN ALLERGIES).

When entering the utility, any users who are currently working in the utility will be listed. If users are listed as working with the utility, you will not be allowed to update the list. You can only update the list when nobody else is working in the utility.

Once the list is displayed, you can do three things:

- 1. Mark the entry as entered in error
- 2. Update it so that it points to an existing reactant (hopefully, the one that it should have been pointed to originally).
- 3. Add new reactants to the GMR ALLERGIES file (120.82) as local entries, if they are not found in any existing files.



Select Item(s): Quit// ??

Use AE to add local allergies to the GMR ALLERGY file. This should only be done if you're sure no existing reactant matches your needs.

Use EE to mark all entries within the selected group as entered in error. You may select multiple groups if you like.

Use DD to get a detailed display. It's highly recommended that you use the detailed display menu to make all changes.

Use UR to update the reactant. Extreme caution should be used when doing

mass updates. It would be better to do the updates from within the detailed display menu.

Press enter to continue:

#### **Detailed Display**

The detailed display window shows the patient name and the list of currently active allergies, separated by a tilde (~). This way, you can quickly look and see if the patient already has an active allergy that is the same as the free-text entry. In this case, you would mark it as entered in error.

The "free text detailed display" action lets you see a Fileman inquiry-style listing of the free text entry for selected patient(s). You'll now be able to see the comments, reactions, and other associated information for the free text entry that you're fixing.

When doing a group update or selecting multiple patients for updating from the detailed display listing, the reactant you select for the first patient in the list will become the default for the remaining patients. The exception to that would be if you decide to not accept the default while updating one of the patients. In that case, the last chosen reactant will become the default for the next patient. The default only holds while working with a particular group. Once you select a new reactant group or a new group of patients, you must re-select the reactant. This should cut down on the amount of time needed in selecting the reactant for each patient.

- 1. Select the Free text allergy clean up utility [GMRA FREE TEXT UTILITY] from the GMRA SITE FILE MENU.
- **2.** Select the number of a reactant first, and then select DD to see details about the reactant. (Alternatively, you can select the action, DD, and then select the number of the reactant.)

**NOTE:** For detailed display, you can only select one group at a time.

```
Enter/Edit Site Configurable Files menu
GMRA SITE FILE MENU
         Edit Allergy File
   2
         Enter/Edit Signs/Symptoms Data
         Enter/Edit Site Parameters
         Sign/Symptoms List
   5
         Allergies File List
         Free text allergy clean up utility
You have PENDING ALERTS
         Enter "VA to jump to VIEW ALERTS option
Select Enter/Edit Site Configurable Files Option: 6 Free text allergy clean up
utility
Building list of free text allergies...this may take a few minutes
Allergy Tracking Update
                             Oct 24, 2003@15:09:28
                                                            Page:
                                                                     1 of
Allergy Tracking Free Text Entries
   Reactant
                                            # Active Entries
   COCA COLA SYRUP 80Z
```

2	Diabetes Mellitus Type II	1	
3	NO ALLERGIES	1	
4	NO KNOWN ALLERGIES	1	
5	Penicillin	1	
6	PIZZA	1	
7	POLLEN ANTIGEN MIX	1	
+	Select one or mo	ore entries	
AE	Add/Edit Allergy File EE	Mark entered in error	
DD	Detailed Display UR	Update to new reactant	
Sel	ect Item(s): Next Screen/	/ 3	

All	ergy Tracking Update	Oct 24, 2003@15:09:28	Page:	1 of	1
All	ergy Tracking Free Text E	ntries			
	Reactant	# Active Entries			
1	COCA COLA SYRUP 80Z	1			
2	Diabetes Mellitus Type II	1			
3	NO ALLERGIES	1			
4	NO KNOWN ALLERGIES	1			
5	Penicillin	1			
6	PIZZA	1			
7	POLLEN ANTIGEN MIX	1			
+	Select one or mo	ore entries			
ΑE	Add/Edit Allergy File EE	Mark entered in error			
DD	Detailed Display UR	Update to new reactant			
Sel	ect Item(s): Next Screen/	/ <b>DD</b> Detailed Display			

Reactant Detailed Display	Oct 24,	2003@15:09:28	Page:	1 of	1
Patient listing for reactant	CEFAZOLI	N SOD 1GM INJ			
Patient Name	La	st 4			
1 BABBIT, VERONA	8	831			
Allergies: PENICILLIN VK ORA: STRAWBERRIES~CHICKEN~CHOCO BILBERRY EXTRACT~POLLEN~PO ANTIHEMOPHILIC FACTOR, HUM. RANITIDINE	OLATE~PHE OLLEN ALL	NOL~HAYFEBROL SF~AS ERGENIC EXTRACT~	SA~BILE SALTS		JST~
Select a patient					
EE Entered in Error		PR Add/Edit Pat			
UR Update to new reactant		DD Free Text De	etalled Dispi	ay	
AE Add/Edit Allergy File Select Item(s): Quit// DD	Free Tevt	Detailed Display			
Select Entries from list: 1	rice icae	Decaried Display			
201000 2001102 11000 1120					
PATIENT: BABBIT, VERONA		REACTANT: CEFAZO	OLIN SOD 1GM	INJ	
GMR ALLERGY: OTHER ALLERGY	/ADVERSE	REACTION			
ORIGINATION DATE/TIME: OCT	02, 2003	@14:02			
ORIGINATOR: NABER, DAVID A		OBSERVED/HISTOR	ICAL: HISTORI	CAL	
ORIGINATOR SIGN OFF: YES		NATURE OF REACT	ION: UNKNOWN		
VERIFIED: NO		ALLERGY TYPE: DE	RUG		

#### Mark Entered in Error

You can mark an entire group as entered in error from this opening screen. Upon marking the reaction as entered in error, a check is made to see if there are still active reactions for the patient. If there are not any, then you are prompted to enter an updated assessment for the patient.

- **1.** Select the Free text allergy clean up utility [GMRA FREE TEXT UTILITY] from the GMRA SITE FILE MENU.
- 2. Select the number of the reactant(s) you wish to mark as entered in error. (Alternatively, you can select the action, Mark Entered in Error, and then select the number of the reactant(s).)

```
Select Enter/Edit Site Configurable Files Option: 6 Free text allergy clean up
utility
Building list of free text allergies...this may take a few minutes
Allergy Tracking Update Sep 19, 2003@11:18:04
                                                        Page:
                                                                 1 of
Allergy Tracking Free Text Entries
   Reactant
                                           # Active Entries
  COCA COLA SYRUP 80Z
                                                1
2 COLD AIR
                                                1
3 Diabetes Mellitus Type II
                                                1
  DOG HAIR
4
                                                1
5
   DONUTS
6
   DOUGH
7
   DR P'S SNAKE OIL ELIXIR
                                                1
  DRUGS
8
                                                1
9
   EIEIO
                                                1
10 ENCAINIDE 25MG
                                                1
          Select one or more entries
AE Add/Edit Allergy File EE Mark entered in error
DD Detailed Display UR Update to new reactant
```

Select Item(s): Quit// 5

**3.** Type EE for Mark entered in error, and then answer Yes to confirm that you want to mark ALL allergies as entered in error.

```
Select Item(s): Next Screen// EE Mark entered in error

You are about to mark ALL allergies with the selected reactant as entered in error.

ARE YOU SURE? NO// Yes
```

#### **Update to New Reactant**

You may select and update groups of entries from the opening menu; however, it is recommended that you use the detailed display option to review entries in a group before doing a mass update. *Changes cannot be undone!* When the entry is updated, a comment is stored in the PATIENT ALLERGY file indicating who made the change, date/time of change, and a comment that indicates what the previous value was and what the new value is. In addition, the new reactant is compared against current orders and order checking information is returned, if appropriate. When a new reactant is selected, checks are made for duplicate entries and previously entered-in-error information.

NOTE: Due to the way the order checking software works, you may get "false positives." In other words, if the patient currently has an allergy order check for some other order not related to this new reactant, you may still see the order check.

Finally, the drug ingredient/drug class information is updated, if appropriate.

- 1. Select the Free text allergy clean up utility [GMRA FREE TEXT UTILITY] from the GMRA SITE FILE MENU.
- 2. Select a reactant number and then select the action DD.

Select Enter/Edit Site Configurable Files Oputility	ption: 6 Free text allergy clean up
Building list of free text allergiesthis	may take a few minutes
Allergy Tracking Update Oct 27, 2003@0	08:35:56 Page: 1 of 1
Allergy Tracking Free Text Entries	
Reactant	# Active Entries
1 CEFAZOLIN SOD 1GM INJ	1
2 Diabetes Mellitus Type II	1
3 NO ALLERGIES	1
4 NO KNOWN ALLERGIES	1
5 Penicillin	1
6 WATERMELON	3
Select one or more entries	
AE Add/Edit Allergy File EE Mark entered :	in error
DD Detailed Display UR Update to new	reactant
Select Item(s): Quit// 6	

A11	ergy Tracking Update	Oct 27, 2003@08:36:38	Page:	1 of	1
	ergy Tracking Free Text E				
	Reactant	# Active	Entries		
1	CEFAZOLIN SOD 1GM INJ	1			
2	Diabetes Mellitus Type I	1			
3	NO ALLERGIES	1			
4	NO KNOWN ALLERGIES	1			
5	Penicillin	1			
6	WATERMELON	3			
+	Select one or more	entries			
1	Add/Edit Allergy File EE				
	Detailed Display UR				
Sel	.ect Item(s): $Quit//$ <b>dd</b>	Detailed Display			
	ctant Detailed Display		Page:	1 of	<u>1</u>
Pat	tient listing for reactant				
	Patient Name	Last 4			
	BENOIT, JEAN	8847			
	ergies: WATERMELON				
2	ARMSTRONG, BJ	8989			
	ergies: WATERMELON				
3	BAXTER, NATHAN	8840			
All	ergies: ASPIRIN~WATERMELO	N			
+	Select one or more				
	Entered in Error		Patient Reaction		
IJR	Update to new reactant	DD Free Text	Detailed Displa	7.7	
	-	22 1100 10110		· Y	
AE	Add/Edit Allergy File .ect Item(s): Ouit// 1	22 1100 10110		· <i>Y</i>	

**3.** Select an item # in the Detailed Display, then select UR for Update to New Reactant.

Reactant Detailed Display	•	08:40:29	Page:	1 of	1
Patient listing for reactant	WATERMELON				
Patient Name	Last 4				
1 BENOIT, JEAN	8847				
Allergies: WATERMELON					
2 ARMSTRONG,BJ	8989				
Allergies: WATERMELON					
3 BAXTER, NATHAN	8840				
Allergies: ASPIRIN~WATERMELON					
Select a patient					>>>
EE Entered in Error		Add/Edit Pati			
UR Update to new reactant	DD	Free Text Det	ailed Displa	ay	
AE Add/Edit Allergy File					
Select Item(s): Quit// <b>ur</b>	Update to new r	reactant			
War and about to make the male that make make make					
You are about to update the selected patient's WATERMELON allergy to a new reactant.					
watermeton allergy to a new	reactant.				
ARE YOU SURE? NO// YES					
For patient BENOIT, JEAN					
FOI PACIENC BENOII, UEAN					
Enter Causative Agent: <b>ONION</b>	T				
micer causactive Agenc. Onto	•				
Checking GMR ALLERGIES (#120.82) file for matches					
Now checking INGREDIENT (#50.416) file for matches					
	,				

EXTRACT ...OK? Yes//**<ENTER>** (Yes) You selected ONION EXTRACT Is this correct? Y// <ENTER> ES Performing order checking...No problems found Press enter to continue: <ENTER> Reactant Detailed Display Oct 27, 2003@08:44:13 Page: 1 of Patient listing for reactant WATERMELON Patient Name Last 4 8989 ARMSTRONG, BJ Allergies: WATERMELON 8840 2 BAXTER, NATHAN Allergies: ASPIRIN~WATERMELON Select a patient >>> EE Entered in Error PR Add/Edit Patient Reaction UR Update to new reactant DD Free Text Detailed Display AE Add/Edit Allergy File

Select Item(s): Quit//

#### Add/Edit Patient Reaction

This action allows you to add/edit patient reactions. This allows reviewers using the utility to add a new reaction if you receive a free-text reaction such as MORPHINE, PENICILLIN. When you correct this type of entry, you can only make it be one or the other.

Reactant Detailed Display	Sep 19,	2003@13:05:28	Page:	1 of	1
Patient listing for reactant	DIABETES	MELLITUS TYPE II			
Patient Name	La	st 4			
1 DOE, WILLIAM C	6	572			
Allergies: AMOXICILLIN~ASPIR Diabetes Mellitus Type II			FAR INDECTIO	ZV.	

Select a patient

EE Entered in Error UR Update to new reactant AE Add/Edit Allergy File PR Add/Edit Patient Reaction DD Free Text Detailed Display

Select Item(s): Quit// PR Add/Edit Patient Reaction

You should use this option to add NEW reactions only. If you mark existing free text entries as entered in error from within this option it will not update the utility's display until the list is rebuilt upon re-entry of this option. This could cause confusion as the list will no longer be accurate.

Press enter to continue: <Enter>

Select PATIENT NAME: ABC, PATIENT 2-22-42 222324321 YES

ACTIVE DUTY

Enrollment Priority: Category: IN PROCESS End Date:

			OBS/	
REACTANT	VER.	MECH.	HIST	TYPE
ALUMINUM ACETATE	AUTO	UNKNOWN	HIST	DRUG
Reactions: CHILLS				
AMOXICILLIN	NO	UNKNOWN	HIST	DRUG
AMPICILLIN	NO	UNKNOWN	HIST	DRUG
CARAMEL	YES	ALLERGY	HIST	DRUG
Reactions: HIVES, ITCHING, WATERING EYES				
CN900	YES	ALLERGY	HIST	DRUG
(AMITRIPTYLINE, PERPHENAZINE)				
Reactions: ITCHING, WATERING EYES, ANXIETY,				
DRY MOUTH				
HAYFEBROL SF	NO	UNKNOWN	HIST	DRUG
(CALCIUM PHOSPHATE, CELLULOSE, CHLORPHENIRAMINE,				
MAGNESIUM STEARATE, POVIDONE, PSEUDOEPHEDRINE,				
SODIUM STARCH GLYCOLATE)				
Reactions: ITCHING, WATERING EYES				
LOMEFLOXACIN	YES	UNKNOWN	OBS	DRUG
Reactions: ITCHING, WATERING EYES				

PENICILLINS	NO	UNKNOWN	HIST	DRUG
Press RETURN to continue or '^' to stop listing:				
		MEGH	OBS/	<b></b>
REACTANT	VER.	MECH.	HIST	TYPE
PENTAMIDINE	YES	ALLERGY	HIST	DRUG
PENTAZOCINE	YES	ALLERGY		
RANITIDINE (CITRIC ACID, SODIUM CHLORIDE, SODIUM PHOSPHATE)	AUTO	UNKNOWN	OBS	DRUG
Reactions: CHILLS				
TAPE	NO	UNKNOWN	HIST	DRUG
TAVIST	NO	UNKNOWN	HIST	DRUG
(CLEMASTINE) TAVIST	NO	UNKNOWN	HIST	DRUG
(CLEMASTINE)	-10			
CHOCOLATE	YES	UNKNOWN	HIST	DRUG
(CHOCOLATE FLAVORING) FISH	NO	UNKNOWN		FOOD DRUG
(FISH LIVER OIL)	NO	OMMINOWIN		FOOD
FLUPHENAZINE DECANOATE	NO	UNKNOWN	HIST	
DEANUE OIL	MO	TINTENTONI	ODC	FOOD
PEANUT OIL Reactions: ITCHING, WATERING EYES, ANXIETY	NO	UNKNOWN	OBS	DRUG FOOD
, i				
Press RETURN to continue or '^' to stop listing:				
			OBS/	
REACTANT	VER.	MECH.		
NUTS Reactions: HIVES	YES	ALLERGY	HIST	FOOD
STRAWBERRIES	YES	UNKNOWN	HIST	FOOD
DUST	YES	UNKNOWN	HIST	OTHER
Enter Causative Agent:				

### Add/Edit Allergy File

The final thing that you can do with the utility is to add a new local allergy, if no good choices exist. This is the last resort and should only be used if no other possibility exists. However, due to regional variances, etc., there might be a need to add a local allergy. Once entered, this allergy will then be available for assignment to currently existing free-text entries

- 1. Select the Free text allergy clean up utility, to start the ART Clean-up Utility.
- 2. Select AE, Add/Edit Allergy File.

```
Select Enter/Edit Site Configurable Files Option: 6 Free text allergy clean up
utility
Building list of free text allergies...this may take a few minutes
Allergy Tracking Update
                             Sep 19, 2003@13:05:28
                                                           Page:
                                                                    1 of
Allergy Tracking Free Text Entries
    Reactant
                                            # Active Entries
    COCA COLA SYRUP 80Z
2
   COLD AIR
                                                  1
3
   Diabetes Mellitus Type II
                                                  1
4
   DOG HAIR
                                                  1
5
   DONUTS
6
   DOUGH
7
   DR P'S SNAKE OIL ELIXIR
                                                  1
8
   DRUGS
                                                  1
   EIEIO
10 ENCAINIDE 25MG
        Enter ?? for more actions
AE Add/Edit Allergy File EE Mark entered in error
DD Detailed Display UR Update to new reactant
Select Item(s): Next Screen// AE Add/Edit Allergy File
Select a LOCAL ALLERGY/ADVERSE REACTION: DANDER
  Are you adding 'DANDER' as a new GMR ALLERGIES (the 112TH)? No// Y (Yes)
   GMR ALLERGIES ALLERGY TYPE: ?
    Answer with type(s) of this reaction. E.g., FOOD or DRUG, FOOD or F or
   GMR ALLERGIES ALLERGY TYPE: ???
       This field contains the type(s) for this allergy/adverse reaction . The
       user can enter the type(s) separated by commas, or the following codes:
       D=Drug, F=Food, O=Other. If codes are used, do not use commas to
       separate multiple codes. Examples of valid entries are: DRUG or DRUG,
       FOOD or D or DF or OTHER.
   GMR ALLERGIES ALLERGY TYPE: O
NAME: DANDER// <Enter>
Select SYNONYM:
     Drug
  2
     Food
     Other
Select Classification(s) of Causative Agent: 3// <Enter>
Select DRUG INGREDIENT: ??
     You may enter a new DRUG INGREDIENTS, if you wish
```

```
This is one of the drug ingredients that make up this causative agent.
  Choose from:
  1,1,1 TRICHLOROETHANE
  2-AMINO-2-METHYL-1-PROPANOL
  2-PHENYLBENZIMIDAZOLE-5-SULFONIC ACID
  4-DILAURATE
  ABACAVIR SULFATE
  ABCIXIMAB
  ABSORPTION BASE
  ACACIA
  ACACIA POWDER
  ACARBOSE
  ACEBUTOLOL
  ACEBUTOLOL HYDROCHLORIDE
  ACEMANNAN
  ACETAMIDE MEA
  ACETAMINOPHEN
  ACETANILIDE
  ACETATE
  ACETAZOLAMIDE
  ACETAZOLAMIDE SODIUM
Select DRUG INGREDIENT: <Enter>
Select VA DRUG CLASSES: ?
       You may enter a new VA DRUG CLASSES, if you wish
Answer with VA DRUG CLASS CODE, or CLASSIFICATION
Do you want the entire 573-Entry VA DRUG CLASS List? {\bf N} (No)
Select VA DRUG CLASSES: <Enter>
```

# **Assessment Clean Up Utility**

The first time GMRA ASSESSMENT UTILITY is accessed, a search will process through the ADVERSE REACTION ASSESSMENT file (#120.86) and the PATIENT ALLERGIES file (#120.8), looking for any possible discrepancies. Here is an example of running the utility the first time after installation:

```
Select OPTION NAME: GMRA ASSESSMENT UTILITY Assessment clean up utility

Assessment clean up utility

I will create a task to build the list of assessments that need review and send you an email when the list is built.

Shall I notify anyone else when the list is built? NO//
Do you want to include deceased patients in the list? NO//

Enter the date and time below when the assessment list builder should start.

Requested Start Time: NOW// (APR 27, 2016@16:53:53)

Successfully queued the assessment list builder; task #1645492.
```

When the search is completed, the person who started the task, as well as any additional recipients will receive a MailMan message entitled GMRA ASSESSMENT FIX LIST BUILD STATUS.

At this time, the user can go back into the GMRA ASSESSMENT UTILITY option and see a list of patients (if any) who have discrepancies that need to be reviewed and corrected.

**NOTE**: After the initial search is completed, accessing the option again will show the original list of patients and the status of the discrepancy for each patient.

**NOTE**: Installation of this patch does not by itself prevent the undefined error from occurring. Sites must use the tool to correct any problems that it identifies in order to prevent the error from occurring.

**NOTE**: Once the allergies are displayed for the selected patient, the user should review the list for accuracy and mark any that need to be as entered in error. The review should be done **BEFORE** modifying the assessment.

#### Example

```
Select Systems Manager Menu <TEST ACCOUNT> Option: ART Adverse Reaction
Tracking

1    Enter/Edit Site Configurable Files ...
2    Adverse Reaction Tracking User Menu ...
3    Adverse Reaction Tracking Clinician Menu ...
4    Adverse Reaction Tracking Verifier Menu ...
```

5 P&T Committee Menu ...

Select Adverse Reaction Tracking <TEST ACCOUNT> Option: 1 Enter/Edit Site Configurable Files

- 1 Edit Allergy File
- 2 Enter/Edit Signs/Symptoms Data
- 3 Enter/Edit Site Parameters
- 4 Sign/Symptoms List
- 5 Allergies File List
- 6 Allergy clean up utility
- 7 Assessment clean up utility

Select Enter/Edit Site Configurable Files <TEST ACCOUNT> Option: 7 Assessment clean up utility

Asses	sment Corrector	Apr 11,	2013@11:33:	33	Page:	1 of	1
Aller	gy Tracking Assessment	Corrector					
Line	Patient Name		Assessment	# of Aller	gies :	Status	
1.	FIFTYONE, INPATIENT		No	2			
2.	FIFTYTWO, INPATIENT		Yes	0			
3.	FIFTYFIVE, INPATIENT		No Assess.	3			

#### Enter ?? for more actions

SP Select Patient

Select Action: Quit// SP Select Patient

Enter a number (1-3): 1

Patient Detailed Display Apr 11, 2013@11:33:45 Page: 1 of 1

Patient: FIFTYONE, INPATIENT (0851)

Inpatient

Assessment: No known reactions

<u>Line Reactant</u> <u>Entered in Error</u>

1. DUST NO 2. QUINOLONES NO

## Enter ?? for more actions

MA Modify Assessment EE Change all to 'Entered in Error'

RR Review Reaction

Select Action: Quit// RR Review Reaction

Enter a number (1-2): 1

NUMBER: 968 PATIENT: FIFTYONE, INPATIENT

REACTANT: DUST GMR ALLERGY: DUST

ORIGINATION DATE/TIME: APR 11, 2013@07:37

ORIGINATOR: PROVIDER, ONE OBSERVED/HISTORICAL: HISTORICAL

ORIGINATOR SIGN OFF: YES MECHANISM: ALLERGY

VERIFIED: YES

VERIFICATION DATE/TIME: APR 11, 2013@07:39:43

ALLERGY TYPE: OTHER

REACTION: ITCHING, WATERING EYES ENTERED BY: PROVIDER, ONE

DATE ENTERED: APR 1990

REACTION: SNEEZING ENTERED BY: PROVIDER, ONE

DATE ENTERED: APR 1990

DATE/TIME: APR 11, 2013@07:39:43 USER ENTERING: PROVIDER, ONE

Would you like to mark this allergy as 'Entered in Error'? NO//  ${\tt YES}$ 

Patient Detailed Display Apr 11, 2013@11:34:48 Page: 1 of 1

Patient: FIFTYONE, INPATIENT (0851)

Inpatient

Assessment: No known reactions

Line Reactant Entered in Error

DUST
 QUINOLONES
 YES
 NO

## Enter ?? for more actions

MA Modify Assessment EE Change all to 'Entered in Error'

RR Review Reaction

Select Action: Quit// MA Modify Assessment

Does this patient have any known allergies or adverse reactions? : No// Yes

Patient Detailed Display Apr 11, 2013@11:35:52 Page: 1 of 1

Patient: FIFTYONE, INPATIENT (0851)

Inpatient

Assessment: Has known reactions

Line Reactant Entered in Error

DUST
 QUINOLONES
 YES
 NO

#### Enter ?? for more actions

MA Modify Assessment EE Change all to 'Entered in Error'

RR Review Reaction

Select Action: Quit// <Enter>

Asses	sment Corrector	Apr 11,	2013@11:36:	32	Page:	1 of	1
Aller	gy Tracking Assessment	Corrector					
Line	Patient Name		Assessment	# of Aller	gies	Status	
1.	FIFTYONE, INPATIENT		Yes	1		**FIXED**	
2.	FIFTYTWO, INPATIENT		Yes	0			
3.	FIFTYFIVE, INPATIENT		No Assess.	3			

### Enter ?? for more actions

SP Select Patient

Select Action: Quit// SP Select Patient

Enter a number (1-3): 3

Patie	ent Detailed Display	Apr 11,	2013@11:37:12	Page:	1 of	1
Patie	ent: FIFTYFIVE, INPATIENT	(0855)				
Inpat	tient					
Asses	ssment: None on file					
Line	e Reactant		Entered in Error			
1.	CONTRAST MEDIA		NO			
2.	STRAWBERRIES		NO			

3. POLLEN NO

#### Enter ?? for more actions

MA Modify Assessment EE Change all to 'Entered in Error'

RR Review Reaction

Select Action: Quit// EE Change all to 'Entered in Error'

You are about to mark all of this patient's allergies as 'Entered in Error'. Do you want to continue? NO// YES

Marking CONTRAST MEDIA as 'Entered in Error'...

Marking STRAWBERRIES as 'Entered in Error'...

Marking POLLEN as 'Entered in Error'...

\*\*NOTE: By marking this reaction as entered in error, FIFTYFIVE, INPATIENT no longer has an assessment on file. You may reassess this patient now by answering the following prompt or hit return to do it later.

Does this patient have any known allergies or adverse reactions? : NO

Patient Detailed Display Apr 11, 2013@11:38:29 Page: 1 of 1

Patient: FIFTYFIVE,INPATIENT (0855)

Inpatient

Assessment: No known reactions

Line	Reactant	Entered	ın	Error
1.	CONTRAST MEDIA	YES		
2.	STRAWBERRIES	YES		
3.	POLLEN	YES		

#### Enter ?? for more actions

MA Modify Assessment EE Change all to 'Entered in Error'

RR Review Reaction

Select Action: Quit// <Enter>

Assessment Corrector	Apr 11,	2013@11:40:	21	Page:	1 of	1
Allergy Tracking Assessment	Corrector					
Line Patient Name		Assessment	# of Alle	rgies	Status	
1. FIFTYONE INPATIENT		Yes	1		**FIXED**	

<b>- •</b>	1 11 1 10112 / 11111111111	100	_	1 11111
2.	FIFTYTWO, INPATIENT	Yes	0	
3.	FIFTYFIVE, INPATIENT	No	0	**FIXED**

## Enter ?? for more actions

SP Select Patient

Select Action: Quit//

# **Signing off on Allergies**

Before patch 17, the allergy tracking package allowed users to leave entries in a "not signed off" state. Although not complete, the allergy became part of the patient's record, even though the user was told that it would not be. Depending on how the entry was made, an alert might not be sent indicating that the entry needed to be signed off. Ultimately, an unfinished entry might never be finished, but still appear in the patient's record.

A change has been made so that no new entry can be left in a "not signed off" state. Upon entering a new allergy, if the user enters an "^" at any point during the data gathering process, the entry will be deleted. Upon completing the new entry, the user will be asked if the entry is okay. If the user enters no, then they'll be given the opportunity to edit or delete the entry. The entry must then be deleted or accepted before exiting this process. As a result, no new entries will be allowed to be in an unsigned state.

**NOTE**: Sites should run the "Patient Allergies Not Signed Off" option to identify all existing entries that have not yet been completed. Each entry should be reviewed and marked as entered-in-error or completed by entering the required information. Once these entries are cleaned up, then no unsigned entries should appear in the patient's chart. You are not required to update these entries as data may not be available but you should review them and take action if possible. The post-installation routine will also list any allergies that are observed, have been signed off, but are missing either an observed date or a sign/symptom. These entries should also be reviewed and updated if possible.

```
GMRA CLINICIAN MENU
                       Adverse Reaction Tracking Clinician Menu
         Enter/Edit Patient Reaction Data
   2
         FDA Enter/Edit Menu ...
         Reports Menu ...
   3
   4
         Edit Chart and ID Band
         Online Reference Card
You have PENDING ALERTS
         Enter "VA to jump to VIEW ALERTS option
Select Adverse Reaction Tracking Clinician Menu Option: 3 Reports Menu
         Active Listing of Patient Reactions
   2
         Print Patient Reaction Data
   3
         Print an FDA Report for a Patient
         List by Location of Unmarked ID Bands/Charts
   5
         Patient Allergies Not Signed Off
         List by Location of Undocumented Allergies
  7
         List by Location Not Verified Reactions
   8
         List by Location and Date All Signed Reactions
         List FDA Data by Report Date
You have PENDING ALERTS
         Enter "VA to jump to VIEW ALERTS option
```

```
Select Reports Menu Option: 5 Patient Allergies Not Signed Off

DEVICE: HOME// ANYWHERE

ALLERGY/ADVERSE REACTIONS TO BE SIGNED OFF
Run Date/Time: 9/30/03 12:12:09 pm

ORIGINATOR PATIENT ALLERGY ORIGINATION DATE/TIME

NO DATA FOR THIS REPORT
Enter RETURN to continue or '^' to exit:
```

# **Q&A Tips:**

# What do you do with an entry like number 1?

This entry actually has multiple reactants listed and you need to make sure you account for each of the reactants that are listed. We recommend that you go to the detailed display for the entry in question and then use the add/edit patient reaction option to add the extra reactants and then to update the entry to the first reactant listed.

## We have a problem with No Known Allergies type entries; why don't they appear on the list?

If you're one of the sites that added NKA as a local allergy, it won't appear in this list. If you haven't already done so, you need to check your GMR Allergies file to see if there is an entry for NKA or something similar. If there is, then you'll need to enter a NOIS and we'll help you get rid of that entry.

## Do I need to fix every entry that's listed?

That would be the goal but the truth is, if you can't figure out what it should be linked to, or if the entry as it exists in the patient allergy file has all of the drug class and drug ingredient information, you can leave it alone. It's better to have information available that you may not be sure is correct and be wrong than to get rid of the information and have it be correct.

# **Menu Assignment**

Assign menus to the users. See the Option Delegation portion of the Security chapter in this manual to determine how the package's menus should be assigned.

# **Security Key Assignment**

Assign security keys when necessary. See the Security Keys portion of the Security chapter of this manual to determine how the package's keys should be assigned.

# Mail Group Membership

The software installation process checks for the existence of the necessary package mail groups. If they do not exist, they are created at the time of software installation. The site should review the mail group membership and update it if necessary. The mail group names are as follows:

- 1. GMRA MARK CHART
- 2. GMRA P&T COMMITTEE FDA
- 3. GMRA VERIFY DRUG ALLERGY
- 4. GMRA VERIFY FOOD ALLERGY
- 5. GMRA VERIFY OTHER ALLERGY
- 6. GMRA REQUEST NEW REACTANT

#### **Bulletins List**

The following bulletins are created:

- 1. GMRA ENTERED IN ERROR
- 2. GMRA MARK CHART
- 3. GMRA P&T COMMITTEE FDA
- 4. GMRA SIGNS/SYMPTOMS UPDATE
- 5. GMRA VERIFY ALLERGY

There are no Forms, Help Frames, or Window Objects exported with this version.

# **Security**

# **Security Keys**

GMRA-ALLERGY VERIFY: This key should be given to personnel (e.g., clinical pharmacists) who verify allergy/adverse reactions.

GMRA-SUPERVISOR: This key should be given to personnel (e.g., ART package ADPAC) who may need to override the package security in order to edit the data.

# **File Security**

				A	ccess		
File / Field #	File/Field Name	DD	RD	WR	DEL	LAYGO	AUDIT
120.8	Patient Allergies	@		@	@	@	@
120.82	GMR Allergies	@		@	@		@
2	National Allergy			٨	^		
120.83	Sign/Symptoms	@		@	@		@
1	National Sign/Symptoms			٨	^		
120.84	GMR Allergy Site Parameters	@	@	@	@	@	@
120.85	Adverse Reaction Reporting	@		@	@	@	@
120.86	Adverse Reaction Assessment	@	@	@	@	@	@
120.87	GMRA Document	@		@	@	@	@

# **Option Delegation**

Security is partially controlled by the delegation of one of six menus:

- GMRAMGR
- GMRA SITE FILE MENU
- GMRA USER MENU
- GMRA CLINICIAN MENU
- GMRA VERIFIER MENU
- GMRA P&T MENU

IRM personnel and the ART Application Coordinator and their designees should be given the GMRAMGR MENU option. Clinical users (e.g., nurses) of ART should be given the GMRA CLINICIAN MENU option. Clerks should be given the GMRA USER MENU option.

Verifiers (e.g. clinical pharmacists) should be given the GMRA VERIFIER MENU option, and P&T Committee Members should be given the GMRA P&T MENU option.

# **Privacy Act Statement**

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# **Electronic Signature**

The software does not prompt for or store a user's electronic signature. However, the software does have a programming interface with the Progress Notes package and that package does prompt for an electronic signature when a progress note is generated.

## **GMRA UPDATE RESOURCE**

ADI (Allergy Domain Implementation/Data Standardization) uses a resource device to control the updating of existing patient allergies. When changes are made to existing allergy definitions in file #120.82, all associated patient allergies in file #120.8 are updated to match the new definition of the entry from #120.82. The resource device controls the updating process. Because of the way the updates are implemented, the resource device needs to manage the updates one at a time. As a result, the resource slots field is set to one and should not be changed.

# **Routines**

Namespace: GMRA

XUPRROU (List Routines) prints a list of any or all of the GMRA routines. This option is found on the XUPR-ROUTINE-TOOLS menu on the XUPROG (Programmer Options) menu, which is a sub-menu of the EVE (Systems Manager Menu) option. See the list of checksums in the Install Guide.

```
Select Systems Manager Menu Option: programmer Options

Select Programmer Options Option: routine Tools

Select Routine Tools Option: list Routines
Routine Print
Want to start each routine on a new page: No// [ENTER]

routine(s) ? >GMRA*
```

The first line of each routine contains a brief description of the general function of the routine. Use the Kernel option XU FIRST LINE PRINT (First Line Routine Print) to print a list of just the first line of each GMRA subset routine.

```
Select Systems Manager Menu Option: programmer Options

Select Programmer Options Option: routine Tools

Select Routine Tools Option: First Line Routine Print

PRINTS FIRST LINES

routine(s) ? >GMRA*
```

# File List

NUMBER	NAME	GLOBAL NAME	DESCRIPTION
120.8	PATIENT ALLERGIES	^GMR(120.8,	Contains patient allergy/adverse reaction information. No data exported with this file.
120.82	GMR ALLERGIES	^GMRD(120.82,	Contains a listing of allergies from which user can select.  Per VHA directive 2005-044, this file has been "locked down" by Data Standardization (DS).  The file definition (i.e. data dictionary) shall not be modified. All additions, changes and deletions to entries in the file shall be done by Enterprise Reference Terminology (ERT) using the Master File Server (MFS), provided by Common Services (CS). Creating and/or editing locally defined fields in the file are not permitted. Use of locally defined fields that were created prior to VHA Directive 2005-044 shall not be supported.
120.83	SIGN/SYMPTOMS	^GMRD(120.83,	A listing of possible allergic reactions. Per VHA directive 2005-044, this file has been "locked down" by Data Standardization (DS). The file definition (i.e. data dictionary) shall not be modified. All additions, changes and deletions to entries in the file shall be done by Enterprise Reference Terminology (ERT) using the Master File Server (MFS), provided by Common Services (CS). Creating and/or editing locally defined fields in the file are not permitted. Use of locally defined fields that were created prior to VHA Directive 2005-044 shall not be supported.
120.84	GMR ALLERGY SITE PARAMETERS	^GMRD(120.84 ,	Site configurable features for the package. Data comes with the file, but will be added only if no data exists in the file.
120.85	ADVERSE REACTION REPORTING	^GMR(120.85,	This file contains all the data for an Observed Drug reaction.  No data exported with this file.
120.86	ADVERSE REACTION ASSESSMENT	^GMR(120.86,	This file is a listing of all the patients who have been asked about allergies/ adverse reactions (ADRs). It contains a pointer to File 2 (PATIENT) and a flag to indicate if the patient has or does not have an Allergy/ADR. No data exported with this file.
120.87	GMRA DOCUMENT	^GMRD(120.87,	This file contains the name and text of documents that can be displayed to the user.

# **Templates**

TYPE	NAME	FILE#	DESCRIPTION
Input None	Print GMRA PRINT	120.8	This print template is used to print out
	AUTOVERIFIED		autoverified reactions over a date range. It is
			run from the List Autoverified Reaction Data
			[GMRA PRINT AUTOVERIFIED DATA]
			option.
	GMRA PRT AUTO	120.8	This print template is used to add the header
	HDR		for the GMRA PRINT AUTOVERIFIED
			print template.
Sort	GMRA PRINT FILE	120.83	This print template prints a list of
			signs/symptoms in the Sign/Symptoms file
			(#120.83). It is called from the
			Sign/Symptoms List [GMRA PRINT SIGN
			/SYMPTOMS LIST] option.
	GMRA SORT	120.8	This sort template sorts the data to be printed
	AUTOVERIFIED		by the GMRA PRINT AUTOVERIFIED
			print template.

# **Protocols**

Name	Description
GMRA ASSESS DET ALL EIE New	These protocols are used by the GMRA
	ASSESSMENT UTILITY
GMRA ASSESS DET ASSESSMENT New	
GMRA ASSESS DET MENU New	
GMRA ASSESS DET REVIEW New	
GMRA ASSESS MENU New	
GMRA ASSESS SELECT PATIENT New	
GMRA ENTERED IN ERROR	This protocol will be invoked whenever a
	reaction is Entered in Error.
GMRA FIX DETAIL MENU	
GMRA FIX ADD/EDIT ALLERGY FILE	Add/Edit Allergy File
GMRA FIX ADD/EDIT ALLERGY FILE IN	Add/Edit Allergy File
DETAIL	
GMRA FIX DETAIL IN DETAIL	Allergy Detailed Display
GMRA FIX DETAIL LIST	Detailed Display
GMRA FIX ENTERED IN ERROR	Mark entered in error
GMRA FIX ENTERED IN ERROR IN DETAIL	Mark entered in error
GMRA FIX FREE TEXT LIST	Free text entries
GMRA FIX PATIENT A/AR EDIT IN DETAIL	Add/Edit Patient Reaction
GMRA FIX UPDATE REACTANT	Update to new reactant
GMRA FIX UPDATE REACTANT IN DETAIL	Update to new reactant
GMRA MEDWATCH DATA COMPLETE	This protocol will be activated whenever a
	reaction has a MEDWatch form entered.

GMRA RECEIVE	This protocol is invoked when a Health Level Seven (HL7) message is received from the OE/RR package.
GMRA SIGN-OFF ON DATA	This protocol will be activated whenever a reaction is Signed (completed).
GMRA VDEF ORU R01 ADV ASSESS HR	
GMRA VDEF ORU R01 ADV ASSESS VS	
GMRA VDEF ORU R01 ADV REACT HR	
GMRA VDEF ORU R01 ADV REACT VS	
GMRA VDEF ORU R01 ALLERGY HR	
GMRA VDEF ORU R01 ALLERGY VS	
GMRA VERIFY DATA	This protocol will be activated whenever a reaction is Verified.
GMRADGPM MARK CHART	This protocol will hang off of the DGPM MOVEMENT EVENTS protocol and for a new admission will send a bulletin to mark that patient's chart for all active allergies.
GMRAOR ALLERGY ENTER/EDIT	This protocol will allow the user to enter/edit patient allergy/adverse reaction data.

# **Exported Options**

# **Options Not on a Menu**

List by Location Not Verified Reaction (Task) [GMRA TASK A/AR NV] is an option meant to be tasked for a daily run.

# **Menu Options**

Adverse Reaction Tracking menu [GMRAMGR]

- 1 Enter/Edit Site Configurable Files ... [GMRA SITE FILE MENU]
- 2 Adverse Reaction Tracking User Menu ... [GMRA USER MENU]
- 3 Adverse Reaction Tracking Clinician Menu ... [GMRA CLINICIAN MENU]
- 4 Adverse Reaction Tracking Verifier Menu ... [GMRA VERIFIER MENU]
- 5 P&T Committee Menu ... [GMRA P&T MENU]
- 1. Enter/Edit Site Configurable Files
  - 1. Edit Allergy File
  - 2. Enter/Edit Signs/Symptoms Data
  - 3. Enter/Edit Site Parameters
  - 4. Sign/Symptoms List
  - 5. Allergies File List
  - 6. Allergy clean up utility
  - 7. Assessment Clean Up Utility
- 2. Adverse Reaction Tracking User Menu
  - 1. Enter/Edit Patient Reaction Data
  - 2. Active Listing of Patient Reactions
  - 3. Edit Chart and ID Band
  - 4. List by Location of Unmarked ID Bands/Charts
  - 5. Patient Allergies Not Signed Off
  - 6. List by Location of Undocumented Allergies
  - 7. Print Patient Reaction Data
  - 8. Online Reference Card
- 3. Adverse Reaction Tracking Clinician Menu
  - 1. Enter/Edit Patient Reaction Data
  - 2. FDA Enter/Edit Menu...
  - 3. Reports Menu...
  - 4. Edit Chart and ID Band
  - 5. Online Reference Card
- 4. Adverse Reaction Tracking Verifier Menu
  - 1. Enter/Edit Patient Reaction Data

- 2. Verify Patient Reaction Data
- 3. Reports Menu...
- 4. Edit Chart and ID Band
- 5. FDA Enter/Edit Menu...
- 6. Online Reference Card

#### 5. P&T Committee Menu

- 1. Enter/Edit P&T Committee Data
- 2. Enter/Edit FDA Report Data
- 3. Reports Menu...
  - 1. Print an FDA report for a Patient
  - 2. Print all FDA events within D/T range
  - 3. Print Patient FDA Exception Data
  - 4. Print all FDA Exceptions within a D/T range
  - 5. Patient Allergies Not Signed Off
  - 6. Print Patient Reaction Data
  - 7. Active Listing of Patient Reactions
  - 8. List by Location of Undocumented Allergies
  - 9. List Autoverified Reaction Data
  - 10. List by Location Not Verified Reactions
  - 11. List by Location and Date all Sign Reactions
  - 12. List FDA Data by Report Date
  - 13. List of Fatal Reaction Over a Date Range
  - 14. Print Summary of Outcomes
  - 15. Frequency Distribution of Causative Agents
  - 16. Frequency Distribution of Drug Classes
  - 17. Total Reported Reactions Over a Date Range
  - 18. P&T Committee ADR Outcome Report
  - 19. P&T Committee ADR Report

# **Cross References**

Patch 23 (GMRA\*4.0\*23) introduces two new cross-references to support data standardization for the Health Data Repository (HDR): AVUID and AMASTERVUID.

120.82^AVUID

```
AMASTERVUID (#493) RECORD REGULAR IR SORTING ONLY

Short Descr: Identifies Master entry for a VUID

Description: If multiple entries have the same VUID in the file, this cross-reference can be used to identify the Master entry for a VUID associated with a Term/Concept.

Set Logic: S ^GMRD(120.82, "AMASTERVUID", $E(X(1),1,30),X(2),DA)=""

Kill Logic: K ^GMRD(120.82, "AMASTERVUID", $E(X(1),1,30),X(2),DA)

Whole Kill: K ^GMRD(120.82, "AMASTERVUID")

X(1): VUID (120.82,99.99) (Subscr 1) (Len 30) (forwards)

X(2): MASTER ENTRY FOR VUID (120.82,99.98) (Subscr 2)

(forwards)
```

The AHDR cross-reference sends data to HDR upon entry.

```
AHDR (#443) RECORD MUMPS ACTION
Short Descr: Sends data to HDR upon entry
Description: This cross reference will send the HDR allergy data upon entry or editing of allergy related data
```

# Archiving and Purging

Archiving only needs to be done to the Patient Allergies (#120.8) file. Because of the importance of this data, it should be retained as long as the corresponding Patient (#2) file record exists. Software to perform archiving of this data will be made available in a later release.

No purging capabilities are provided with this version.

# **Resource Requirements**

The disk requirements are estimated as follows:

Globals	Type of Data	Size
GMRD(120.82		
GMRD(120.83	Static data for ART	40K
GMRD(120.84		
GMRD(120.87		
GMR(120.8	Patient data for ART	0.4K per Allergy entry
GMR(120.85	Observed, FDA	0.4K per Reaction
GMR(120.86	Patient NKA data	0.01K per Patient

# **Callable Routines**

#### **GMRADPT**

GMRADPT extracts data from the Patient Allergies (120.8) file for a specified patient based on the criteria specified in the GMRA input parameter. The data will be returned in a local array.

#### Version 1

Patch GMRA\*4\*46 introduced significant changes to the input and output of this routine. Existing calls to this routine will invoke the Version 1 implementation of this routine (Pre-patch GMRA\*4\*46 changes). To take advantage of the changes introduced in Patch GMRA\*4\*46, see Version 2 section below.

### Input:

DFN The internal entry number in the Patient file for the patient whose allergy data needs to be extracted.

GMRA This is an optional three-piece variable that will determine which kinds of allergy data will be returned by the extract. The default values which will be used are shown in the discussion of each piece. Consider the variable GMRA with the format P1^P2^P3^P4 where

P1 can have the value 0, 1, or 2 where

- 0 means extract all allergies and adverse reactions
- 1 means extract allergies only
- 2 means extract adverse reactions only

A record stored in the Patient Allergies file is an adverse reaction. Every true allergy is an adverse reaction, but not every adverse reaction is an allergy. This determination is made by the verifier of the allergy data. The default value for this piece is 0.

- P2 can have the value 0, 1, or 2 where
- 0 means extract all verified and non-verified records
- 1 means extract verified records only
- 2 means extract non-verified records only

A record can either be verified by some allergy verifier, or it has not yet been verified. In the case that the site is using autoverification, the record is automatically verified at the time the originator of the record signs off (completes) on it. No record can be extracted before

it has been signed off (completed) by the originator, as it is not part of the medical record. The default value for this piece is 0.

- P3 is a three-character string, where each character can have a value of 0 or 1. Consider P3 represented as XYZ where X, Y, and Z are the three different characters. Then the following is what each of these characters represent:
- X determines whether to extract records with the type of Other. If X=0 then records with the type Other will not be extracted, and if X=1 then they will be extracted.
- Y determines whether to extract records with the type of Food. If Y=0 then records with the type Food will not be extracted, and if Y=1 then they will be extracted.
- Z determines whether to extract records with the type of Drug. If Z=0 then records with the type Drug will not be extracted, and if Z=1 then they will be extracted.

A record has a type associated with it. The three types are Food, Drug and Other. This variable will help to determine which of these types of records will be extracted, and which types will not be extracted. The default value for this piece is 111.

- P4 can have the value 0 or 1 where
- 0 means return reactions documented locally
- 1 means return reactions documented locally and remote reactions stored in the Health Data Repository (HDR)

## Output:

**GMRAL** 

This variable is an array of the patient's data extracted by this utility based on the criteria specified in the optional GMRA variable. The format of this variable is:

GMRAL=(1,0,NULL) GMRAL(DA)=A^B^C^D^E^F^G^H^I^J^K GMRAL(DA,"S",COUNT)=SIGN GMRAL("REMOTE",RCOUNT)= A^B^C^D^E^F^G^H^I^J^K GMRAL("REMOTE",RCOUNT, "S",COUNT)=SIGN GMRAL("REMOTE",RCOUNT, "SITE")=SITE Where

GMRAL is 1 if patient has Adverse Reaction. is 0 if patient has no known Adverse Reaction. null if patient has not been asked about Adverse Reaction.

DA is the internal entry number of the record in the Patient Allergies (120.8) file.

A is the patient's DFN (from input variables).

B is the name of the allergen.

\*C is the type of the allergen where D=Drug, F=Food, and O=Other.

D is a flag denoting if the allergy has been verified where

1=verified and 0=non-verified.

E is a flag denoting whether the allergy is a true allergy, or if it is an adverse reaction where 1=adverse reaction and 0=true allergy.

\*\*F is both the external and internal representation of the allergy Mechanism. It is stored in the format External";"Internal.

### Mechanism

External	Internal
Allergy	0
Pharmacologic	2
Unknown	U

G is the type of the reaction in the form of "F", "D", or "0" or a combination of the three types.

## **Types**

Internal	External format
D	is a drug reaction.
$\operatorname{DF}$	is a drug/food reaction

DFO	is a drug/food/other reaction
DO	is a drug/other reaction
$\mathbf{F}$	is a food reaction
FO	is a food/other reaction
ΟI	s a other reaction

H is both the external and internal representation of the Adverse Reaction Mechanism. It is stored in the format External";"Internal.

## Mechanism

Internal
A
P
U

I is a variable pointer to the allergen

J is the observed/historical of the reaction. It is stored in the format External";"Internal

External	Internal
OBSERVED	0
HISTORICAL	h

K is the severity of the reaction. It is stored in the format External";"Internal

Internal
1
2
3

SIGN is the sign/symptom of the reaction. It is stored in the format External";"Internal where Internal is the pointer to the SIGN/SYMPTOMS file (#120.83).

SITE is the institution that documented the reaction. It is stored in the format INSTITUTION file (#4) pointer"^"Station name"^"Station number

#### Version 2

Patch GMRA\*4\*46 introduced significant changes to the input and output of this routine. The primary changes are returning remote records and returning additional data for each reaction. To take advantage of the changes introduced in Patch GMRA\*4\*46, use the EN2 line-tag instead of directly calling the routine.

## Input:

DFN The internal entry number in the Patient file for the patient whose allergy data needs to be extracted.

GMRA This is an optional four-piece variable that will determine which kinds of allergy data will be returned by the extract. The default values which will be used are shown in the discussion of each piece. Consider the variable GMRA with the format P1^P2^P3^P4 where

P1 can have the value 0, 1, or 2 where

- 0 means extract all allergies and adverse reactions
- 1 means extract allergies only
- 2 means extract adverse reactions only

A record stored in the Patient Allergies file is an adverse reaction. **Every true** allergy is an adverse reaction, but not every adverse reaction is an allergy. This determination is made by the verifier of the allergy data. The default value for this piece is 0.

- P2 can have the value 0, 1, or 2 where
  - 0 means extract all verified and non-verified records
  - 1 means extract verified records only
  - 2 means extract non-verified records only

A record can either be verified by some allergy verifier, or it has not yet been verified. In the case that the site is using autoverification, the record is automatically verified at the time the originator of the record signs off (completes) on it. No record can be extracted before it has been signed off (completed) by the originator, as it is not part of the medical record. The default value for this piece is 0.

P3 is a three-character string, where each character can have the value of 0 or 1. Consider P3 represented as XYZ where X, Y and Z are the three different characters. Then the following is what each of these characters represents:

- X determines whether to extract records with the type of Other. If X=0 then records with the type Other will not be extracted, and if X=1 then they will be extracted.
- Y determines whether to extract records with the type of Food. If Y=0 then records with the type Food will not be extracted, and if Y=1 then they will be extracted.
- Z determines whether to extract records with the type of Drug. If Z=0 then records with the type Drug will not be extracted, and if Z=1 then they will be extracted.

A record has a type associated with it. The three types are Food, Drug and Other. This variable will help to determine which of these types of records will be extracted, and which types will not be extracted. The default value for this piece is 111.

#### P4 can have the value 0 or 1 where

- 0 means only return records documented at the local site
- means return records documented at both the local and all 1 remote sites

### Output:

**GMRAL** 

This variable is an array of the patient's data extracted by this utility based on the criteria specified in the optional GMRA variable. The format of this variable is:

GMRAL=(1,0,NULL)  $GMRAL(DA)=A^B^C^D^E^F^G^H$ ^I^J GMRAL(DA,"S",COUNT)=K GMRAL(DA, "O", COUNT)=L GMRAL(DA, "SITE")=M

Where

**GMRAL** is 1 if patient has Adverse Reaction.

> is 0 if patient has no known Adverse Reaction. null if patient has not been asked about Adverse Reaction.

DA for locally documented records, the internal entry number of the record in the Patient Allergies (120.8) file and for remotely documented records, the letter "R" followed by the reaction's number in the ^XTMP("ORRDI","ART",DFN) global (DFN is the patient's internal entry number in the PATIENT file).

is the patient's DFN (from input variables). Α

- B is the name of the allergen.
- C is null; use G.
- D is a flag denoting if the allergy has been verified where 1=verified and 0=non-verified.
- E is a flag denoting whether the allergy is a true allergy, or if it is an adverse reaction where 1=adverse reaction and 0=true allergy.
- F is null; use H.
- G is the type of the reaction in the form of "F", "D", or "0" or a combination of the three types.

Types	
Internal	External format
D	is a drug reaction.
DF	is a drug/food reaction
DFO	is a drug/food/other reaction
DO	is a drug/other reaction
F	is a food reaction
FO	is a food/other reaction
O	is a other reaction

H is both the external and internal representation of the Adverse Reaction Mechanism. It is stored in the format External";"Internal. Mechanism

External	Internal
Allergy	A
Pharmacologic	P
Unknown	U

- I is a pointer to the reaction in variable pointer format; refer to the data dictionary for the GMR ALLERGY field for details.
- J is both the external and internal representation of the OBSERVED/HISTORICAL field. It is stored in the format External";"Internal.
- K is both the external and internal representation of the allergy Signs/Symptoms and the date/time it was entered. Each of the Signs/Symptoms will be stored on it's own "S" node in the following format.

External"; "Internal pointer to Signs/Symptoms file (120.83)"^"External"; "Internal date entered. If the pointer equals the "OTHER REACTION" then the free text stored in the patient file will be stored in the external representation.

COUNT is the order which the Signs/Symptoms are stored in the GMRAL(DA,"S",COUNT) Array. Count is a positive whole number.

L is both the external and internal representation of the reaction's severity and date/time of the event. Each severity is stored on it's own "O" node in the following format:

External"; "Internal severity" "External"; "Internal date/time of event.

COUNT is the order which the observations are stored in the GMRAL(DA,"O",COUNT) Array. Count is a positive whole number.

M is the site that documented the reaction. Only reactions documented remotely will have a "SITE" node defined. It has the following format:

External"^"Internal pointer to Institution file (#4)"^"Station number

# **External Relations**

ART v4.0, patch 23 requires installation of the following packages before its installation:

Health Data & Informatics (HDI) 1.0 Master File Server (MFS) patch XU\*8.0\*299 Kernel V. 8.0+ VA FileMan V. 21+ MAS V. 5.3+ National Drug File V. 3+

# **Database Integration Agreements**

The Database Administrator (DBA) maintains a list of Integration Agreements (IAs) or mutual agreements between software developers allowing the use of internal entry points or other software-specific features that are not available to the general programming public.

To obtain the current list of IAs, to which ART is a custodian, do the following:

```
Select Integration Agreements Menu Option: 8 <Enter> Custodial Package Menu
1 ACTIVE by Custodial Package
2 Print ALL by Custodial Package
3 Supported References Print All
Select Custodial Package Menu Option: 1 <Enter> ACTIVE by Custodial Package
Select PACKAGE NAME: GMRA
DEVICE: HOME// <Enter> UCX DEVICE Right Margin: 80// <Enter>
```

A new application programming interface (API) was added in patch 23 to allow updates to definitions of reactants to be propagated through existing allergies in the PATIENT ALLERGIES file (120.8).

```
UPDATE^GMRAUTL2(ENTRY,ING,CLASS)

ENTRY is IEN;FILE REFERENCE^TEXT OF FILE ENTRY - For example 23;GMRD(120.82,^STRAWBERRIES

ING - Array of ingredients in the format of ING("A",IEN in file 50.416) for ingredients being added and ING("D",IEN in file 50.416) for ingredients being deleted.

CLASS - Array of drug classes in the format of CLASS("A",IEN in file 50.605) for classes being added and CLASS("D",IEN in file 50.605) for those classes being deleted.
```

See DBIA #4667 for complete details regarding this API.

# **SACC Exemptions**

The SACC has granted the following exemptions:

- 1. Routines may exceed the 5K limit.
- 2. Use of the \$GET command with two arguments is permitted.
- 3. Use of reverse \$ORDER looping is permitted.
- 4. Use of the MERGE command is permitted.
- 5. Passing null values in a parameter list is permitted.
- 6. Use of \$TEXT on a line that does not contain a double semicolon (i.e., ;;) is permitted.

# **Internal Relations**

All options can be independently invoked.

# **Package-wide Variables**

There are no package-wide variables.

# **How to Generate On-line Documentation**

This section describes various methods by which users may generate ART technical documentation.

#### **Question Marks**

Entering question marks at the "Select ... Option:" prompt provide users with valuable technical information. For example, a single question mark (?) lists all options which can be accessed from the current option. Entering two question marks (??) lists all options accessible from the current one, showing the formal name and lock (if applicable) for each. Three question marks (???) display a brief description for each option in a menu while an option name preceded by a question mark (?OPTION) shows extended help, if available, for the option.

#### **XINDEX**

This utility analyzes routines to determine if they adhere to **VISTA** Programming Standards. The %INDEX output may include the following components: Compiled list of Errors and Warnings, Routine Listing, Local Variables, Global Variables, Naked Global References, Label References and External References. To run the XINDEX utility (DO ^XINDEX) for the ART package, specify the namespace **GMRA\*** when prompted for routine names.

### **Inquire to File Entries**

This VA FileMan option provides the following information about a specified option: option name, menu text, option description, type of option. All fields that have a value will be displayed (e.g., Entry Action). To secure information about the ART options, the user must specify the name of the options desired (File #19). The options exported with this package begin with the letters GMRA.

## **Print Options File**

Use this VA FileMan option to generate ad hoc reports about options from the Option file (#19). The user may choose one, many or all ART options. The options exported with this package begin with the letters GMRA.

#### **List File Attributes**

This VA FileMan option allows the user to generate documentation pertaining to files and file structure. The ART file numbers 120.8-120.87. See the File List section of this manual for a specific listing. Select the 'Standard' format to get the following data dictionary information for a specified file: file name and description, identifiers, cross-references, files pointed to by the file specified, files which point to the file specified, input templates, print templates and sort templates. In addition, the following applicable data is supplied for each field in the file: field name, number, title, global location, description, help prompt, cross-references, input transform, and date last edited. Select the 'Global Map' format to generate an output which lists all cross-references for the file selected, global location of each field in the file, input templates, print templates and sort

templates. For a more exhaustive option listing and further information about other utilities which supply on-line technical information, please consult the **V***ISTA* Kernel Systems Manual.

### Glossary

Adverse Reaction Any condition precipitated by a drug that requires patient

treatment, admission or transfer; prompts a specialty consultation; or causes injury or death. Every allergy is an adverse reaction, but every adverse reaction is not an

allergy.

**Adverse Reaction Only** Something that is an adverse reaction but not an allergy.

Adverse Reaction Tracking The software package that stores and reports the patient

allergy or adverse reaction data.

Allergy A state of hypersensitivity induced by exposure to a

certain agent

**Application** A system of computer programs and files that have been

specifically developed to meet the requirements of a user or group of users. Examples of **VISTA** applications are

the MAS and Nursing modules

**Application Coordinator** The person responsible for implementing a set of

computer programs (application package) developed to support a specific functional area such as Nursing, MAS,

etc.

**ART** See Adverse Reaction Tracking.

Causative Agent The name of the item which caused the patient to have a

reaction (e.g., penicillin).

**Data Standardization (DS)**The Data Standardization Program is the cornerstone of the

VHA's plan to share health information across the entire VHA system. Data standardization establishes a consistent way of defining data that enables all sites in the VA health system to speak the same language and will ensure that data not only crosses from system to system, but retains the same meaning.

**Date/Time Chart Marked** In ART, this field indicates when the patient's chart has

been marked to indicate this allergy or adverse reaction.

**Date/Time ID Band Marked** In ART, this field indicates when the patient ID band or

bracelet has been marked to indicate this allergy or

adverse reaction

**Date/Time MD Notified** A field in ART that indicates when the primary physician

has been alerted about a patient allergy or adverse

reaction.

**Dechallenge** Discontinuation/removal of allergen.

**GMR Allergies File** A file of allergies/adverse reactions that are used by

ART. The file number is 120.82.

**GMRA MARK CHART bulletin** Warning that is generated when Date/Time Chart

Marked field is left blank. This warning indicates that someone has to record this allergy or adverse reaction in

the patient's chart.

GMRA MARK CHART mail

group

This is the group of people who are charged with the responsibility to see that all data entered into ART gets recorded in the patient's chart.

GMRA VERIFY ALLERGY

bulletin

Warning that an allergy or adverse reaction has been signed off (completed) by the originator and that it is ready for the verification process.

GMRA-VERIFY ALLERGY

security key

Should be given to all verifiers in ART. Allows a verifier access to the verification process

**Historical** An allergy or adverse reaction that has been stated by

some source versus one that has actually been witnessed by some personnel at this facility before initiation of new

therapy.

**Ingredient file** A file (#50.416) which contains generic drugs which are

components of various drug products.

**Likelihood** A measure of the probability that an allergy or adverse

reaction was the cause of the patient problems indicated by the signs/symptoms. This field is calculated via an

FDA algorithm

**Local Drug File** The list of medications used at a particular VA facility.

This file is also sent out by the **VISTA** Pharmacy

developers. The file number is 50.

**Mechanism** In the context of ART, this is an indicator of whether the

data for a patient is an adverse reaction only, or an

allergy.

National Drug File This file is a list of drug products available which

includes specific information for each product. Information included for the products are trade name, NDC number, manufacturer, VA Drug Class code,

dosage form, route of administration, strength and units, ingredients, ingredient strength and units, package code, package size, package type, VA product name and VA

generic name.

**Observed** An allergy or adverse reaction that has actually been

witnessed by some personnel at this facility or reported by the patient, or his or her caregiver after initiation of a

new therapy.

**Patient Allergies File** The file where the patient allergy/adverse reaction data is

stored in ART. The file number of this file is 120.8.

**Rechallenge** Reintroduction of allergen after dechallenge.

**Severity** This is an index of how the allergy/adverse reaction

affected the patient.

**Sign/Symptom** Something that could be subjectively or objectively

measured that indicates an allergy or adverse reaction.

**Sign/Symptoms File** A list of signs/symptoms that can be selected for a

patient allergy or adverse reaction. The file number is

120.83.

**Top Ten Signs/Symptoms** A site-configurable set of indicators of an allergy or

adverse reaction that is used to expedite data entry of

these indicators.

**Treatment** This is some lab test or drug intervention that was

performed as a result of an allergy or adverse reaction.

**True Allergy** A reaction triggered by the immune system; however,

there are a vast number of symptoms or conditions caused by sensitivities that may or may not involve the immune system. A 'true allergy' COULD require patient treatment, admission or transfer, prompt a specialty

realment, admission or transfer, prompt a specialty

consultation, or cause injury or death.

**VA Drug Classification System** 

file

A file (#50.605) which contains the VA Drug

Classification codes and their descriptions. Each drug product in the National Drug file is assigned a primary code which is part of the information stored for each

drug product in the National Drug file.

**Verification** The process of reviewing and approving the data entered

by some clinical user. This process is done by a verifier.

**Verifier** A person who has the GMRA-VERIFY ALLERGY

security key. This person can perform verification of

patient data in ART.

VHA Unique Identifier (VUID) A unique meaningless integer assigned to reference

terms VHA-wide for data standardization.

## **Appendix 1: CPRS (25 and 26) Release Notes Related to ART**

#### **PATCH OR\*3\*233**

**Support for Allergy Synonyms** –Allergy synonyms, if present, are now included in the SIGNS/SYMPTOMS selection box. This is included in patch OR\*3\*233, which will be distributed with GMRA patch 23.

#### **GUI 26**

- The "Bulletin has been sent" message that CPRS displays after the user requests the addition of a new causative agent now includes the same warning included in the bulletin about that reactant not being added to the patient's record.
- Marking Allergies as Entered in Error Now Controlled by Parameter In CPRS v25, any user could enter new allergies, mark a patient as NKA (no known allergies), and mark allergies entered in error from the cover sheet and the detailed display window. In v.26, the Entered in Error option requires the new parameter OR ALLERGY ENTERED IN ERROR to be enabled for the user. The other options remain open to all users as before.
- Free-Text Signs and Symptoms No Longer Allowed To support of data standardization efforts, developers removed the ability to enter free-text signs/symptoms. Users must now select items from the list of available signs/symptoms.
- Inconsistent Sending of Bulletin for Marked on Chart CPRS always sent the "Marked on Chart" bulletin if the user entered an allergy from the Orders tab. CPRS never sent the bulletin if the user entered the allergy from the Cover Sheet. This inconsistency has been corrected, and CPRS will never send the bulletin when the user enters a new allergy.

#### **GUI 25**

The following functionality is available only to sites that have installed OR\*3.0\*195, OR\*3.0\*216, and GMRA\*4.0\*21. Sites that have not installed these patches will continue to receive the ART functionality that exists in CPRS GUI 24.

• Allergies No Longer Entered as Orders (NOIS: SHR-0603-71103) – At sites that have installed the patches listed above, users can no longer enter allergies and adverse reactions as orders that are placed in the *ORDERS* file. Patch OR\*3.0\*216 exports a modified order-dialog entry—*GMRAOR ALLERGY*—in the *ORDER DIALOG* file. This entry enables CPRS to interact directly with the Adverse Reaction Tracking (ART) package (i.e., CPRS adds new allergies and adverse reactions directly into the ART package as users submit them).

With supporting patches OR\*3.0\*216 and GMRA\*4.0\*21, CPRS GUI 25 does not display allergy information on the **Orders** tab. It displays allergy information only on the **Cover Sheet** tab. Nevertheless, users can still enter allergy information from the **Orders** tab by selecting **Allergies** in the **Write Orders** pane. (i.e., users can still go to a familiar place to enter allergies.)

In addition, users can no longer select **OTHER ALLERGY/ADVERSE REACTION** as causative agent, nor can they select **OTHER REACTION** as a sign/symptom. Changes to the ART package have eliminated these items as choices. These changes mark a continuing effort to end free-text and unspecific entries.

If 'type of causative agent' references the field ALLERGY TYPE, the GUI interface doesn't allow the user to enter this information. It is determined internally by the selection made during the Reactant lookup process.

Also, CPRS now requires users to enter information about the nature of the reaction that they are documenting (**Allergy**, **Pharmacological**, or **Unknown**).

Finally, CPRS GUI 24 introduced a dialog through which users can request that a causative agent be added to their site's *ALLERGIES* file. Users access this dialog via a warning that pops up when they attempt to enter a free-text causative agent. The warning dialog asks users to indicate—by clicking either its **YES** or **NO** button—if they want to send a causative-agent inclusion request. In CPRS GUI 24, the default button was **YES**. In CPRS GUI 25, the default button is **NO**. Furthermore, when users click the system **X** button (located in the top right-hand corner of each screen) to exit any of the screens that comprise the inclusion-request dialog, CPRS now cancels the request action.

- Allergy Changes on the Cover Sheet CPRS now enables users to perform several ART-related actions from the Cover Sheet tab—including the following:
  - Enter new allergy
  - Mark selected allergy as entered in error
  - Mark patient as having "No Known Allergies" (NKA)

When users right-click within the **Allergies/Adverse Reactions** pane, CPRS displays a menu offering the three selections listed in the previous paragraph (or a sub-set, depending on the current Allergy information recorded for the patient). When users left click to select one of the allergies listed within the **Allergies/Adverse Reactions** pane, CPRS opens a window that displays details about this allergy-as it always has. However, this window now includes two additional buttons: **Add New** and **Entered in Error**. As the names of these buttons suggest, clicking them enables users to add new allergies and designate the selected allergy as entered in error, respectively. When users mark allergy entries as entered in error, the ART package notifies (via MailMan bulletins) sites' GMRA MARK CHART mail group.

Depending on how sites have configured their *GMR ALLERGIES SITE PARAMETERS* files, the ART package could also send bulletins to one or more of the following mail groups: GMRA VERIFY DRUG ALLERGY, GMRA VERIFY FOOD ALLERGY, and GMRA VERIFY OTHER ALLERGY. In addition, marking an allergy entry as entered in error triggers the Text Integration Utility (TIU) package to generate an Allergy/Adverse Reaction progress note that is sent to the originator to document the erroneous entry. Whether users enter new allergies via the **Cover Sheet** or **Orders** tab, CPRS displays an **Enter Allergy or Adverse Reaction** dialog, through which users enter adverse reactions and allergies directly into the ART package. This dialog includes several changes, including the following changes:

- CPRS no longer allows users to enter future origination dates or future dates for observed allergies; if users attempt to enter future dates for these items, CPRS prevents them from doing so when they click OK to submit their allergy entries
- A new button containing a question mark is associated with the Severity dialog; when users select this button, CPRS displays a text box defining severity selections
- CPRS displays a hover hint when users mouse over the Observed and Historical option buttons; a user group (as opposed to OI staff) specified the text of the hover-hint
- When the amount of text in the Comments dialog exceeds its viewing area, CPRS adds a scroll bar to the dialog
- Developers altered the tabbing sequence to more closely match users' expectations
- When an allergy is marked as "Entered in Error," Drug allergy, this action generates a Progress Note for the user who marked it as "entered in error" to sign. Once the user who marked the allergy as entered in error or an administrative user signs the note, all CPRS users can view the note to know that an allergy has been removed from the list.
- When an allergy is entered as an "Observed, Drug allergy," this action generates a Progress Note for the user who entered the Allergy/Adverse reaction to sign. Once the user who made the entry or an administrative user signs the note, all CPRS users can view the note.

The **Enter Allergy or Adverse Reaction** dialog also contains a new check box: **ID Band Marked**. If the patients are inpatients and the sites have set the MARK ID BAND parameter in the *GMR ALLERGY SITE PARAMETERS* file to **1** (**YES**), users can select this check box to indicate whether they have marked allergies and adverse reactions on the patient's identification (ID) bands. If users submit an allergy entry without selecting activated **ID Band Marked** check box, the ART package automatically notifies sites' GMRA MARK CHART mail group via a MailMan bulletin. *GMR ALLERGY SITE PARAMETER* file settings also determine to which verification mail groups (GMRA VERIFY DRUG ALLERGY, GMRA VERIFY FOOD ALLERGY, or GMRA VERIFY

OTHER ALLERGY) the ART package sends MailMan bulletins when users enter specific combinations of allergy information.

#### Deleting an assessment of NKA

From within the ART package, it is now possible to delete an assessment of NKA.

When you select a patient for entering/editing allergies and that patient doesn't have any active allergies on file, the "Does this patient have any known allergies or adverse reactions?" prompt is presented to you. If the patient has no assessment, there is no default answer. If the patient has been assessed as NKA, the default is NO.

In the case where the default answer is NO (meaning, the patient is NKA), you may enter an @ sign to indicate that the assessment should be deleted and the patient should be returned to the 'not assessed' state. This would be used in those rare cases where an assessment is erroneously assigned to the wrong patient.

#### Examples:

1) Patient who is currently not assessed:

```
Select PATIENT NAME: ARTPATIENT,ONE 1-20-57 456334567
YES MILITARY RETIREE THIS IS A TEST
Does this patient have any known allergies or adverse reactions? :
```

2) Patient who has been assessed as NKA:

```
Select PATIENT NAME: ARTPATIENT,ONE 1-20-57 456334567
YES MILITARY RETIREE THIS IS A TEST
Does this patient have any known allergies or adverse reactions? : No//
```

At this point, if I enter a ?, I see what my choices are:

```
Choose from:
1 Yes
0 No
```

You may also enter @ to delete a previous NKA assessment and return the patient to a 'not assessed' state. Use this if the NKA assessment was previously incorrectly entered.

Does this patient have any known allergies or adverse reactions? : No//

The information regarding the use of the @ will only show if the patient is currently NKA. If they are not, then it doesn't show.

3) Finally, here's what it looks like when you delete the assessment:

Select PATIENT NAME: **ARTPATIENT,ONE** 1-20-57 456334567 YES MILITARY RETIREE THIS IS A TEST Does this patient have any known allergies or adverse reactions? : No// @

Assessment deleted.

### **Appendix 2: ART Data Standardization FAQ**

#### ART Data Standardization FAQ

1. Is there a checklist of everything sites need to do to standardize the Allergy/Outpatient Pharmacy domains?

The release notes for the GMRA\*4\*23 patch provide a list of patches in the order that they need to be installed in. <u>To view the release notes, please click this link</u>. This list of patches and other activities that need to be completed are also available in the PowerPoint slides that were sent to the sites. <u>To view these slides please click this link</u>.

2. Can sites continue to enter local allergies after standardization is complete?

No. The files have been locked down and local additions for allergies are not permitted. The ability to enter free-text additions to the GMR Allergies file 120.82 was taken away from sites two years ago. Removing the ability to enter free-text additions to the Sign/Symptoms file 120.83 was included in the standardization process. Sites can request additions to the GMR Allergies file 120.82 and to the Sign/Symptoms file 120.83 through the New Term Rapid Turnaround (NTRT) process. Please see the <a href="NTRT process">NTRT process</a> section of this document for more information.

3. What will happen if different sites have different attributes, such as drug ingredients, designated to the same inactive term for entries in GMR Allergies file 120.82? Will the attributes stay the same after standardization at each site?

The attributes will stay the same, including drug classes and drug ingredients, for inactive terms after standardization is complete.

4. What happens to local allergies in GMR Allergy file 120.82 that are currently on file when standardization occurs?

If a local allergy on file is in the standard, then the term will remain active, but all of the term attributes (e.g. synonyms, drug classes and drug ingredients) will be overwritten by the standardized file. This standardized term will be available for recording new allergies in the future.

If a local allergy on file is *not* in the standard, then the term will become inactive, and all term attributes (e.g. synonyms, drug classes and drug ingredients) will remain the same, and the data, if applicable, will be available for order checks. However, this term will not be available for selection when recording new allergies.

### 5. Is there a Sign/Symptom term called "other" in the new standard for file 120.83 Sign/Symptoms?

No. "Other" does not exist in the list of standardized terms for Sign/Symptoms file 120.83. If there is a term that is not available in the Sign/Symptoms list and it needs to be added, please enter an NTRT request. See the <a href="NTRT process">NTRT process</a> section of this document for more information.

# 6. What does the allergy "contrast media" look like in the new standard for GMR Allergies file 120.82? Will the new standard also contain the many drug classes associated with this allergy?

The contrast media allergy is in the standard GMR Allergies file 120.82. In the standard, this allergy also includes the many drug classes that are associated with this entry. We encourage sites to review and ensure that the standard is comprehensive. Compare the drug ingredients and drug classes that have been recorded in your site's file with what is in the standard.

If differences exist between what is in the standard and what is in your file, your site data will be overwritten. Submit an NTRT request if you believe that drug classes, drug ingredients, or synonyms should be included in the standards that are not included. Please see the <a href="NTRT process">NTRT process</a> section of this document for more information.

### 7. Should a local allergy of "Bufferin" be changed to Aspirin in the GMR Allergies file 120.82?

No. Sites are not being asked to change local allergies in the GMR Allergies file 120.82.

## 8. Will non-standard (inactivated) terms continue to be used for order checking? How?

Yes. Although inactivated terms are not available for new documentation, those that have been stored in patients' records will continue to be used for order checking. The internal entry numbers (IENs) of the inactivated terms have been preserved, and it is the IENs that are needed for order checking.

## 9. When will sites receive the standard for GMR Allergies file 120.82 and Sign/Symptoms file 120.83, so they can start comparing it against their local files?

These files were sent to the sites by the HDR Implementation managers. If you have not received them, please contact your HDR Implementation manager.

### 10. What is the work-around for a site, if the item that the patient is allergic to is not found in the standard GMR Allergies file 120.82 and the terms needs to

be entered as an NTRT request? How does the end user document that a patient is allergic to an item that is not in the standard?

The ability to enter free-text allergies in GMR Allergies file 120.82 was taken away from sites two years ago. Please continue to use your site-developed processes to handle this documentation.

11. Currently, there is a message or pop-up box telling an end user in CPRS that the allergy term they are searching for was not found, but that they can request that it be added (Figure 1). However, this message box is not available if a Sign/Symptom is not available. What is the desired workaround for a site to request that a Sign/Symptom term be added, since they will not have the instructions from this pop-up box?



Figure 1. Causative Agent Not On File Dialog

Sites may wish to handle these additions in the same manner as when requesting a new reactant, or they may wish to handle it differently. We recommend that sites communicate to the end users their desired work-around for handling these requests for additions of Sign/Symptoms.

End users are encouraged to update the patient record with the Sign/Symptom term when it becomes available in the standard. End users can enter free text Sign/Symptoms until CPRS GUI v26 is installed. However, these additions of free text Sign/Symptoms prior to CPRS GUI v26 release are highly discouraged.

12. What are sites being asked to do regarding the Top 10 List for Sign/Symptoms?

After standardization, the Top 10 List for Sign/Symptoms file #120.83 may have inactive terms. The GMRA REQUEST NEW REACTANT mail group will be notified of inactive Top 10 terms at your site after the VETS push has occurred. Sites are being asked to replace inactivated terms with standard terms as soon as possible, to prevent end users from viewing empty space in the GUI. If the inactivated terms are not replaced by active terms in the standard, the end user

will need to click on the scrollbar for the Sign/Symptoms. This will cause the empty space to be auto-adjusted and the gap will no longer display in the GUI. CPRS GUI v26 will fix this so that there is no blank space.

It is possible to receive an email indicating that there are terms on the top ten list that need to be updated, but those terms do not appear when using the option to edit the terms. Some sites actually have more than 10 terms stored in the top 10 list but only the first 10 show to the user. If one of the additional terms is now inactivated, it will be included in the update message although you won't actually see it in the list.

If the e-mail update message contains terms that do not appear to be on your Top 10 list, you may ignore those terms. This problem will be fixed in a future patch.

To change inactive entries:

- 1. Use the Menu Option GMRA SITE FILE. The parameter is HOSPITAL.
- 2. Enter the number of the Sign/Symptoms that you need to change.

## 13. Why are sites getting e-mail messages about order checks to the GMRA mail group as the patch is being loaded and post routines are being run from this GMRA\*4\*23 patch?

Receipt of these messages is a result of the updates that are occurring to the Patient Allergy file 120.8 when GMR Allergies file 120.82 is standardized. Any time a file 120.82 entry has a change of drug classes or drug ingredients, and a patient has a previous allergy recorded to this entry, then the new drug classes or drug ingredients will be propagated to the Patient Allergy file 120.8. The purpose of the message is to inform the Allergy Clinical Application Coordinator of the possibility of a missed order check based on the updated allergy information. Order checks only occur when the order is placed, which means that updated allergy information is not compared against existing orders. During the update, the new allergy information is compared against the patient's active orders to determine if there are any possible drug-allergy conflicts based on the new information. There is a slight possibility of a false-positive report but each entry should be reviewed for a possible drug-allergy interaction.

### 14. What is the name of the mail group that will receive the e-mail notifications regarding order checks, as mentioned in the previous question?

The GMRA Request New Reactant mail group will receive these order check notifications through e-mail.

# 15. How can we record that a patient has No Known Allergies (NKA), when this term is not included in the standard for GMR Allergies file 120.82 and will be inactivated for future selection?

Enter no-known-allergies (NKA) assessments for patients who have no active allergies by taking the following steps in the CPRS GUI from the Coversheet:

- 1. Right-click within the Allergies/Adverse Reactions pane.
- 2. From this menu, select "Mark patient as having No Known Allergies (NKA)." CPRS displays the No Known Allergies dialog.

<u>Note</u>: CPRS will allow you to record a patient as having No Known Allergies (NKA) only for patients who have no active allergies. When patients have active allergies, CPRS deactivates this menu selection.

3. Click OK.

### 16. Can we continue to record allergies and No Known Allergies (NKA) from the Write Orders menu in the CPRS GUI?

Yes. You can continue to record new patient allergies or NKA from the Write Orders menu, or on other site-configured menus on the Orders tab in the CPRS GUI.

## 17. How do we record that the patient has an "unknown reaction," since this term is not included in the Sign/Symptoms file 120.83 for selection when recording a patient allergy reaction?

In CPRS GUI v25 you can still enter free-text Sign/Symptoms. This option has been disabled in List Manager. In the GUI, you must press <Enter> after you type the free-text Sign/Symptom. It is also possible to leave the Sign/Symptoms field blank, and make a note in the Comment field that the Sign/Symptom is unknown. Typing free-text Sign/Symptoms will not be possible with CPRS GUI v26. This FAQ will be updated when more information is available.

### 18. Will sites need to continue to update the Top 10 list of Sign/Symptoms when each NTRT push occurs?

Yes. If the new NTRT push inactivates entries on the Top 10 list of Sign/Symptoms, then an e-mail message will be sent to the "GMRA Request New Reactant" mail group. The message will list which terms have been inactivated and remind sites to use the menu option GMRA SITE FILE to correct these entries.

Details of what was contained in the NTRT push can be learned from the Automated Notification Report (ANR) message that will be sent, or from the NTRT Web site at <a href="http://vista.med.va.gov/ntrt/">http://vista.med.va.gov/ntrt/</a> (under "NTRT Deployment Log"). The content list for a push will give you an idea about alternative terms that would be appropriate replacements for inactivated terms. If you are not currently receiving the ANR messages, please log a Remedy ticket to be added to the distribution of these messages.

If the e-mail update message contains terms that do not appear to be on your Top 10 list, you may ignore those terms. A problem has been identified where some sites have more than ten entries in their Top 10 list. This problem will be fixed in a future patch.

### 19. What is an example of a Top 10 List term that may need to be replaced due to an NTRT push?

The Enterprise Reference Terminologists are currently going through the standard for file 120.83 Sign/Symptoms and changing the primary terms to more user- or clinician-friendly terms. For example, in the most current update, some terms such as "Aptyalism," "Face Goes Red," and "Cutaneous Eruption" are being made inactive as primary terms, but are being added as synonyms to other primary terms. See question six in the NTRT section of this document for additional information.

In the Top 10 list, you may need to update the Top 10 list to display the updated active terms.

#### **Example:**

INACTIVATE as Primary term ACTIVATE as Primary term

(Added as Synonym)

Aptyalism Dry Mouth
Face Goes Red Flushing
Cutaneous Eruption Rash

To learn more about Data Standardization, please click this link.

### VA Enterprise Terminology Services (VETS) Push and Deployment Questions

1. How long will it take for a large integrated site to complete the crossreferencing of all the files after the initial VETS push or deployment has occurred, for the Allergy/Outpatient Pharmacy domain?

It is estimated to take three hours. This is approximately the amount of time it took a large integrated test site to complete this process.

2. What happens to an end user who is entering an allergy on a patient when the VETS push or deployment occurs?

There are not any effects visible to the end user who is entering in allergies while a VETS push or deployment is occurring.

## 3. Has this software been tested in production and the impact assessed for the use of Bar Coding Medication Administration (BCMA) and passing medications during the VETS push or deployment?

Yes. The three test sites reported that there were no reports of any adverse impacts to BCMA. Also, the software quality assurance testing included BCMA testing by the pharmacy team.

#### 4. When will the VETS pushes or deployments occur?

The VETS pushes or deployments will be scheduled with the sites, most likely on a regular schedule to be determined. The deployments or pushes will be coordinated with the site, the HDR Implementation Manager, and the ERT team. The site will be notified prior to a VETS push.

### 5. Do sites need to have staff on site when the VETS push or deployment occurs?

No. Site Staff do not need to be present when the VETS deployment or push occurs.

#### 6. Is the VETS push or deployment equivalent to a patch load?

No, a push is not the same as a patch load. The VETS push or deployment is the final step in the standardization of the files after patches are loaded. These pushes or deployments will also continue as new terms are requested from the field. The pushes are HL7 messages that are sent through the interface engine to VistA.

#### 7. Is the VETS push or deployment a site-initiated process?

No, it is not. However, the site will be contacted prior to the VETS push or deployment.

<u>To learn more about Enterprise Reference Terminology (ERT)/ Enterprise Terminology Services (ETS)/ or VA Enterprise Terminology Services, click this link.</u>

#### **New Term Rapid Turnaround (NTRT) Process Questions**

### 8. How fast will the NTRT request be granted? Are weekends taken into consideration?

At this time, NTRT requests will be deployed nationally every Thursday. The cutoff date for inclusion of a term in the Thursday deployment is COB the Friday before the scheduled deployment. Over the next 7 months, this timeframe may be adjusted. Any changes to the frequency of NTRT deployments will be communicated to sites and support personnel.

### 9. If there are a large number of New Term Rapid Turnaround (NTRT) requests at a site, is it necessary to enter each request separately?

If sites have a large number of NTRT requests that need to be submitted, your HDR Implementation Manager can help you get these entries to the ERT team without having to enter all of the requests into the NTRT website.

### 10. If there is a local term that is a synonym of a national standard term, then is an NTRT request needed for that local term?

No. The local term will not need to be added to the standard. If there is a compelling case for why it should be added, then that can be forwarded on as an NTRT request.

Consider the following example:

Local Term	New Standard Term		Add to standard?
Garbanzo beans	Chickpeas		No. Synonyms are
	Synonym	Garbanzo	available for searching
	beans		terms in CPRS.

### 11. If a new drug ingredient is needed, do we go through the NTRT process or will these still be handled through National Drug File (NDF) updates?

New drug ingredients will need to be added through the NDF process.

### 12. How has the issue related to Sulfa allergy documentation and order checking in VistA been resolved?

A generic Sulfa entry in the GMR Allergy file (120.82) will be deployed nationally. Standardization identified the need for consistent screening for Sulfacontaining drugs. The Data Standardization and Enterprise Reference Terminology teams have worked with the National Drug File manager to determine which drugs need to be linked to the new generic sulfa entry in the GMR Allergy file 120.82. Once deployed, order check screening for Sulfa allergies will work consistently and completely on all VistA systems.

## 13. Concerns have been raised about user-friendly terms and equivalents in the Sign/Symptoms file 120.83 from some sites. What is being done to resolve these concerns?

A review of the Sign/Symptoms file 120.83 is underway. The group reviewing this file is comprised of clinicians from the field, as well as terminologists and other key stakeholders.

Concerns have been raised from sites regarding clinical terms that are not user-friendly. For example, "cutaneous eruption" is the primary term in the standard

and "Rash" is a synonym. Primary terms are stored in the patient record and on the patient arm band. Clinicians would like to see Rash become the primary term and cutaneous eruption the synonym. A complete review of the standard is being conducted to identify other terms that may also benefit from a similar change.

Concerns have been raised that some terms in the standard are not equivalent and should not remain as synonyms to the primary term. For example, "Congestion of the Throat" is not the same as "Swelling of the Throat" and should be fixed in the standard. Other non-equivalent synonyms are being identified and will be associated with two separate terms when applicable.

Another area of need is documenting the business rules that apply to the standard, and only modifying the standard in a way that is consistent with those rules. This issue is being addressed and documentation is pending.

### 14. How are sites being notified that NTRT additions are being made to the standardized files for Allergies?

An Automated Notification Report (ANR) is being sent out through the National Help Desk by e-mail messages that alert sites about the changes that are being made to the Sign/Symptom file 120.83 and the GMR Allergies file 120.82. If you are not currently receiving these ANR messages and would like to in the future, please submit a Remedy ticket and you can be added to the distribution list for future information.

The information about the changes being made by NTRT can also be viewed on the NTRT Web site, under "NTRT Deployment Log." Those interested can also join the NTRT listserv which provides the same information as the ANR messages, along with the potential for supplementary information. Join by going to <a href="http://vista.med.va.gov/ntrt/">http://vista.med.va.gov/ntrt/</a> and clicking the link in the middle of the screen called "NTRT Notification Listsery."

### 15. Is it true that sites are not to update or change the resource slots associated with the GMRA UPDATE Resource device?

Yes. The slot is set to one and needs to stay at one. It is very important that sites not change the number of slots for this resource device. If the resource device does not stay at one, then NTRT pushes may be processed inaccurately and may potentially corrupt Allergy files. If sites have changed this, they need to set it back to one. Then sites will need to work with the ERT team for a redeployment of the push. ERT is looking at ways to control the order in which updates are done in the future. However, in the meantime sites need to be aware of this potential issue and to monitor the GMRA UPDATE Resource device to ensure it stays set at one slot.

To learn more about Enterprise Reference Terminology (ERT)/ Enterprise Terminology Services (ETS)/ or VA Enterprise Terminology Services please click this link.

#### **Site Clean-up Questions**

#### 16. After allergy standardization, what is the impact to a site that has many freetext patient allergies that need to be cleaned up?

Sites will be able to continue cleaning up the free-text patient allergy entries after Allergy/Outpatient Pharmacy standardization is complete. The patches will not affect this clean-up effort. After standardization, there will be a more comprehensive list of allergies for your site to use for cleaning up free-text patient allergy entries.

New terms should not be added to GMR Allergies file 120.82 prior to standardization in order to map a free text patient allergy. The GMRA\*4\*23 patch locked down this file so sites can no longer add terms through the roll-and-scroll interface. Sites should clean up the patient allergy file 120.8 prior to standardization with what is currently available. Once standardization is complete, more terms will be available in the GMR Allergies file 120.82 to correct the remaining free text patient allergies.

An automated clean-up patch is being written to help sites in the free-text patient allergy clean-up effort. This patch will be released some time after the standardization patches. The content required for this patch is currently being reviewed. Sites have been asked to clean up free-text entries that have a low number of occurrences. Free-text patient allergies that occur one or two times in the clean-up utility should be cleaned up first. Also, free-text patient allergies that have multiple allergies on one line (e.g. "Aspirin, Penicillin, chocolate") should be cleaned up by recording each allergy separately for that patient.

The automated clean-up patch will help sites clean up free-text patient allergy entries, but not all data can be cleaned up in an automated fashion. Patient allergy data that has clinical relevance will be left as free text and will need to be cleaned up by the site.

### 17. What is the impact of Outpatient Pharmacy standardization to sites if they have not finished linking local drugs to the National Drug File (NDF)?

Sites can continue to clean-up the local drug file or file 50 mapping to the National Drug File (NDF) after standardization. The data in the local drug file needs to be mapped so that order checks work optimally.

#### **Health Data Repository (HDR) Questions**

## 18. What happens in the Health Data Repository (HDR) when one site has entered an allergy for Penicillin and another site has entered Penicillin as "entered in error"?

Allergies that are entered in error at one site will not overwrite the allergies recorded at another site. The HDR will err on the side of safety. The HDR will store both pieces of information: the patient allergy record and the "entered in error" record.

### 19. In regards to the question above, will one site be notified that another site has entered an allergy in error?

At this time, there is not a mechanism to do this. Site-to-site notification will not be done until a national process is put in place that determines when a site's allergy record can be overruled. The clinician should get the information via Remote Data Views (RDV) and work with the patient to make sure the record is correct.

### 20. Where do we go for technical information about turning on the VDEF triggers? Is that something HDR Implementation Managers will help with?

Yes. The HDR Implementation Mangers will be in contact with sites when it is time to turn on the VDEF triggers. They will communicate the necessary technical steps at that time.

## 21. In the CPRS GUI, the end user now sees that a light is blue on the HDR section of Remote Data Views (RDVs). Why is this there?

HDR data can now be seen in RDV. Vitals data has been standardized and it is being sent to the HDR. This blue text means that the patient has vital sign data stored in the HDR. With the release of CPRS GUI v. 26, end users will be able to view data from the HDR.

This may be confusing to some end users, because some patients will only have vital sign data available at the local site and the light will not be blue.

To learn more about the HDR, please click this link.

To learn more about HDR Implementation, click this link.