



LABORATORY
ANATOMIC PATHOLOGY (AP)
ELECTRONIC SIGNATURE
INSTALLATION GUIDE

PATCH LR*5.2*259

Version 5.2

May 2004

Preface

The Veterans Health Information Systems and Architecture (VistA) Laboratory Anatomic Pathology (AP) Electronic Signature Patch LR*5.2*259 Installation Guide Version 5.2, provides detailed instructions required for installing and implementing the **new** AP Electronic Signature Patch LR*5.2*259 software application.

Recommended Users:

The following staff is recommended for installing, implementing, and supporting the VistA Laboratory AP Electronic Signature Patch LR*5.2*259:

- Information Resources Management (IRM) staff (installation)
- Automated Data Processing Application Coordinator (ADPAC) (implementation, setup, and support)
- Laboratory Information Manager (LIM) (implementation, setup, and support)

NOTE: IRM and ADPAC/LIM staff **must** coordinate the implementation of the setup tasks after the patch is installed.

VistA Blood Bank Software Version 5.2

VistA Laboratory Package patch LR*5.2*259 contains changes to software controlled by VHA DIRECTIVE 99-053, titled VistA BLOOD BANK SOFTWARE. Changes include:

Changes to the name formatting subroutine in ^LRUA

Changes to the Electron Microscopy sub-file (#63.02) in the LAB DATA file (#63)

Changes to the Surgical Pathology sub-file (#63.08) in the LAB DATA file (#63)

Changes to the Cytopathology sub-file (#63.09) in the LAB DATA file (#63)

The addition of the AP ESIG ON field (#619) to the LABORATORY SITE file (#69.9)

All of the above changes have been reviewed by the VistA Blood Bank Developer and found to have no impact on the VistA BLOOD BANK SOFTWARE control functions.

RISK ANALYSIS: Changes made by patch LR*5.2*259 have no effect on Blood Bank software functionality, therefore RISK is none.

EFFECT ON BLOOD BANK FUNCTIONAL REQUIREMENTS: Patch LR*5.2*259 does not alter or modify any software design safeguards or safety critical elements functions.

POTENTIAL IMPACT ON SITES: This patch contains changes to one routine and two files identified in Veterans Health Administration (VHA) Directive 99-053, group B listing. The changes have no effect on Blood Bank functionality or medical device control functions. There is no adverse potential to sites.

VALIDATION REQUIREMENTS BY OPTION: Because of the nature of the changes made, no specific validation requirements exist as a result of installation of this patch.

Orientation

VistA Laboratory AP Electronic Signature Patch LR*5.2*259 Installation Guide contains the following section and information:

Introduction: This section includes an overview of the major functions, purposes, and how the software application accomplishes the objectives.

Security Information: This section contains information regarding the mail group, alert, file security, and electronic signature associated with the Anatomic Pathology Electronic Signature software:

Pre-installation Information: This section provides information needed prior to installing AP Electronic Signature Patch LR*5.2*259.

Installation Instructions: This section contains instructions and examples of AP Electronic Signature Patch LR*5.2*259 installation process.

Post Implementation Instructions: This section provides directions for implementing the new Laboratory AP Electronic Signature Patch LR*5.2*259 enhancements to interact with the existing Laboratory AP software.

AP Electronic Signature Patch LR*5.2*259 Software and Documentation Retrieval Information

NOTE: All sites are encouraged to use the File Transfer Protocol (FTP) capability. Use the FTP address “download.vista.med.va.gov” (without the quotes) to connect to the first available FTP server where the files are located.

Anonymous Software Directory

The VistA Laboratory Anatomic Pathology Electronic Signature Patch LR*5.2*259 Installation Guide (i.e., LAB_52_259__IG.PDF), and User Manual (i.e., LAB_52_259__UM.PDF) files are available on the Office of Information Field Offices (OIFOs) ANONYMOUS SOFTWARE directory at the following FTP addresses:

OIFOs	FTP ADDRESS	DIRECTORY
Albany	ftp.fo-albany.med.va.gov	[ANONYMOUS.SOFTWARE]
Hines	ftp.fo-hines.med.va.gov	[ANONYMOUS.SOFTWARE]
Salt Lake City	ftp.fo-slc.med.va.gov	[ANONYMOUS.SOFTWARE]

Software and Documentation Files Retrieval Format:

VistA Laboratory Anatomic Pathology Electronic Signature Patch LR*5.2*259 software and documentation files are exported in the following names and formats:

File Name	Contents	Retrieval Format
LAB_52_259.KID	LR*5.2*259 KIDS Build	ASCII
LAB_52_259_IG.PDF	LR*5.2*259 Lab AP Electronic Signature Installation Guide	Binary
LAB_52_259_UM.PDF	LR*5.2*259 Lab AP Electronic Signature User Manual	Binary

Documentation Website Locations

VistA Laboratory AP Electronic Signature Patch LR*5.2*259 User Manual and Installation Guide are available in MS Word (DOC) Format and the Portable Document Format (PDF) at the following *VistA* website locations:

VistA Laboratory Home Page

<http://vista.med.va.gov/ClinicalSpecialties/lab/>

VistA Documentation Library

<http://www.va.gov/vdl/>

Screen Dialogue

The information list symbols and examples used to indicate terminal dialogues and user responses through out this installation guide:

Screen Captures - The computer dialogue appears in Courier New font, no larger than 10 points. **Example:** Courier New font 10 points

User Response - User entry response appears in boldface type Courier New font, no larger than 10 points. **Example:** **Boldface type**

Return Symbol - User response to computer dialogue is followed by the <RET> symbol that appears in Courier New font, no larger than 10 points, and bolded. **Example:** <RET>

Tab Symbol - User response to computer dialogue is followed by the symbol that appears in Courier New font, no larger than 10 points, and bolded. **Example:** <Tab>

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Introduction

VistA Laboratory Anatomic Pathology Electronic Signature (Patch LR*5.2*259) software release implements the **new** electronic signature functionality within the Autopsy, Cytology, Electron Microscopy, and Surgical Pathology sections for the Autopsy protocol, Standard Form 515 (SF 515), and supplementary reports. This **new** electronic signature functionality can be activated or deactivated at the discretion of the site by turning on the **new** Turn Electronic Signature On/Off [LRAP ESIG SWITCH] option. The application of the electronic signature occurs during the verification/release process of the Autopsy and Anatomic Pathology released reports.

This patch enhances the process of signing and releasing Anatomic Pathology reports. Previously, the verification/release process for pathology reports involved a yes or no question that date-time stamped the file to indicate the report had been verified or released. A paper copy was then printed and signed by the pathologist by hand. This patch replaces the manual signature process with an electronic signature. The authorized signer is now prompted to electronically sign the report. He or she can view the report in the VA FileMan browser prior to electronically signing. The electronically signed report is stored in TIU (Text Integration Utility) and includes a signature name title, and date-time stamp in the text near the bottom of the last page.

NOTE: With the release of VHA Handbook 1106.1, PATHOLOGY AND LABORATORY MEDICINE SERVICE PROCEDURES, in June 2003, **cytotechnologists** have been given authority to sign out negative GYN reports, which qualifies them to be an **AUTHORIZED SIGNER**. A cytotechnologist, who is properly set up to sign out anatomic pathology reports, will be able to sign out and release SF515 reports for CY sections only.

Only AUTHORIZED SIGNERS are allowed to electronically sign and edit released Autopsy protocol, SF515, and supplementary released reports. AUTHORIZED SIGNERS may now view and electronically sign these reports rather than printing a paper copy used for viewing and signing.

NOTE: It is very important to remember that when an AUTHORIZED SIGNER signs out an anatomic pathology report, it is their electronic signature that goes on the report and that the AUTHORIZED SIGNER is legally responsible for the content of the report. ONLY pathologists, cytotechnologists, or other qualified physicians should be given the authority to become an AUTHORIZED SIGNER.

To be authorized, a signer must be defined in the system (as detailed below) or an error message is generated when the unauthorized signer attempts to sign out and release a report.

1. Possess the LRVERIFY key to access the option.
2. Possess the PROVIDER key.
3. Enter an ELECTRONIC SIGNATURE CODE field (#20.4) in the signer's NEW PERSON file (#200).
4. The PROVIDER CLASS (#53.5) field in the signer's NEW PERSON file (#200) must include either "physician" or "cytotechnologist."

a) The PROVIDER CLASS field includes "physician," the PERSON CLASS multiple field (#8932.1) of the NEW PERSON file (#200) must point to one of the following entries in the PERSON CLASS file (#8932.1):

- | | |
|----|------------------------------------------------------------------------------------------------|
| 77 | Physicians (M.D. and D.O.)
Physician/Osteopath
Pathology, Anatomic & Clinical |
| 78 | Physicians (M.D. and D.O.)
Physician/Osteopath
Pathology, Anatomic |
| 79 | Physicians (M.D. and D.O.)
Physician/Osteopath
Pathology, Anatomic & Laboratory Medicine |
| 81 | Physicians (M.D. and D.O.)
Physician/Osteopath
Pathology, Chemical |
| 82 | Physicians (M.D. and D.O.)
Physician/Osteopath
Pathology, Clinical |
| 84 | Physicians (M.D. and D.O.)
Physician/Osteopath |

- 86 Dermatopathology
- Physicians (M.D. and D.O.)
- Physician/Osteopath
- Hematology: Pathology
- 89 Physicians (M.D. and D.O.)
- Physician/Osteopath
- Neuropathology

b) If the PROVIDER CLASS field includes “cytotechnologist,” the PERSON CLASS multiple field (#8932.1) of the NEW PERSON file (#200) must point to the following entry in the PERSON CLASS file (#8932.1):

- 430 Technologists, Technicians and Other Technical Service
- Specialist/Technologist, Pathology
- Cytotechnology

Editing electronically signed Autopsy protocol, SF515, and supplementary released reports will generate the following changes:

- Unreleased electronically signed Autopsy protocol, SF515, and supplementary released reports.
- A new electronic signature is required for all edited Autopsy protocol, SF515, and supplementary reports.
- Creates another version of the edited electronically signed report in the TIU DOCUMENT file (#8925).

Enhancements

VistA Laboratory Anatomic Pathology Electronic Signature software release contains the following enhancements for the Surgical Pathology, Cytology, Electron Microscopy, and Autopsy sections.

1. Turn Electronic Signature On/Off [LRAP ESIG SWITCH] option

This **new** option allows the electronic signature functionality to be activated or deactivated at any time for the Surgical Pathology, Cytology, Electron Microscopy, and Autopsy sections. This new option is located on the Anatomic pathology [LRAP] menu, Supervisor, anat path [LRAPSUPER] menu and requires the LRLIASON security key.

NOTE: Whenever the electronic signature functionality is deactivated the Verify/release reports, anat path [LRAPR] and Supplementary report release; anat path [LRAPRS] options are still available using the existing 'YES/NO' prompt. However, when these options are used the released Autopsy protocol, SF515, and Supplementary reports will not be stored in the TIU DOCUMENTS file (#8925) and a signed hard copy will be required.

2. Modify released pathology report [LRAPMRL] option

This **new** option allows editing of electronically and manually signed Autopsy Protocol, SF515, and supplementary reports for Surgical Pathology, Cytology, Electron Microscopy, and Autopsy sections. All electronically and manually signed reports that have been modified and released will display a "MODIFIED" banner when the reports are either displayed or printed. When the electronically and manually signed report diagnosis field is edited a "MODIFIED DIAGNOSIS" banner is displayed. This **new** Modify released pathology report [LRAPMRL] option requires the **new** LRAPMOD security key to be assigned.

3. Autopsy Protocol and Supplementary Reports:

The new electronic signature functionality is available for the Autopsy protocol and supplementary reports when activated. The new functionality prompts for an electronic signature rather than prompting for the 'YES/NO' response. **Note:** The Electronic signature, date, and time is NOT displayed in the text of the supplementary reports.

4. AP SF515 and Supplementary Reports

The **new** electronic signature functionality is available in the Surgical Pathology, Cytology, and Electron Microscopy sections for SF515 and supplementary reports. The release process is enhanced to prompt for an electronic signature rather than prompting for a 'YES/NO' response.

NOTE: Electronically signed supplementary reports will NOT display the electronic signature and date/time stamp in the text of the supplementary report.

5. New Alert:

The **new** electronic signature alert is available when the electronic signature functionality is activated. The new alert prompt will appear in the Verify/release reports, anat path [LRAPR] option immediately after the authorized signer enters an electronic signature. This alert proceeds as follows:

Example: New Electronic Signature Alert

a.) A yes/no alert prompt will appear.
b.) If answered yes, the alert will be sent by default to both the physician on file for the accession and the patient's primary care provider (if one is on file.)
c.) The signer will then be prompted to optionally include any additional names or mail groups as receivers of the alert.
 A name is entered as LAST,FIRST and a mail group as
 G.MAILGROUP.

The text of the alert is as follows:

Pathology report signed for SP 02 1 - DOE, JOHN

NOTE: The **new** electronic signature alert is designed to operate ONLY within the **VistA** Laboratory software application; however, with the implementation of CPRS GUI version 1.0.22.12, the alerts can be viewed, in a modified format, in the CPRS GUI application's Notifications section of the Patient Selection screen.

Modifications:

The VistA Laboratory Anatomic Pathology Electronic Signature software release consists of the following modifications for the Autopsy, Surgical Pathology, Cytology, and Electron Microscopy sections:

Autopsy Section Changes:

1. The following options were modified to REMOVE EDITING of the Autopsy protocol and supplementary reports:

- Provisional anatomic diagnoses [LRAPAUPAD] option
- Autopsy protocol [LRAPAUDAP] option
- Autopsy protocol & SNOMED coding [LRAPAUDAB] option
- Autopsy protocol & ICD9CM coding [LRAPAUDAA] option
- Final autopsy diagnoses date [LRAPAUFD] option
- Autopsy supplementary report [LRAPAUSR] option
- Special studies, autopsy [LRAPAUDAS] option

2. The following autopsy options are modified to ADD CPT coding for the unreleased or released Autopsy protocol report:

- Provisional anatomic diagnoses [LRAPAUPAD]
- Autopsy protocol [LRAPAUDAP] option
- Autopsy protocol & SNOMED coding [LRAPAUDAB] option
- Autopsy protocol & ICD9CM coding [LRAPAUDAA] option

3. Autopsy protocol and supplementary report header and footer formats were **modified** for uniformity.

4. Autopsy protocol and supplementary report headers (i.e., OTHER LIMITATIONS) has been modified to eliminate missing digits from the accession number.

5. Print routines are modified to extract Autopsy protocol and supplementary report data stored in TIU DOCUMENT file (#8925).

Surgical Pathology, Cytology, and Electron Microscopy Sections Changes:

1. The 'DATE REPORT COMPLETED' prompt is REMOVED from released SF515 reports.
2. SF515 and supplementary report headers and footers format were **modified** for uniformity across the Surgical Pathology, Cytology, and Electron Microscopy sections.
3. SF515 and supplementary single and multiple report functionality were **modified** to display via the VA FileMan browser.
4. The Physician Name field located on the SF515 and supplementary reports is **modified** to conform to the Kernel's Application Program Interface (API) format design.
5. SF515 and supplementary reports are **modified** to eliminate printing of blank pages at the beginning and ending of the reports.
6. Released AP SF515 and supplementary report for inpatients were **modified** to eliminate truncation of the footers.
7. Print routines are **modified** to extract data stored in TIU DOCUMENT file (#8925) from released SF515 and supplementary reports.
8. The following AP options are **modified** to REMOVE EDITING of the released SF515 and supplementary reports:
 - Clinical Hx/Gross Description/FS [LRAPDGD] option
 - FS/Gross/Micro/Dx [LRAPDGM] option
 - FS/Gross/Micro/Dx/SNOMED Coding [LRAPDGS] option
 - FS/Gross/Micro/Dx/ICD9CM Coding [LRAPDGI] option
 - Supplementary Report, Anat Path [LRAPDSR] option
 - Spec Studies-EM;Immuno;Consult;Pic, Anat Path [LRAPDSS] option

9. The following AP options are **modified** to ADD CPT coding for unreleased or released SF515 and supplementary reports:

- FS/Gross/Micro/Dx [LRAPDGM] option
- FS/Gross/Micro/Dx/SNOMED Coding [LRAPDGS] option
- FS/Gross/Micro/Dx/ICD9CM Coding [LRAPDGI] option
- Verify/release reports, anat path [LRAPR] option

10. The accession functionality for released supplementary reports has been **modified** to provide one of three possible responses when an authorized user attempts to release a supplementary report:

- 1) No supplementary reports exist for the accession
- 2) All supplementary reports for the accession have been released
- 3) Will default to the first unreleased supplementary report found for the accession.

11. The released SF515 report functionality is **modified** to NO longer display SNOMED codes. This prevents misinterpretation of the diagnosis from viewers outside of the Lab Medicine section. SNOMED codes can be displayed and printed using the following options:

- Verify/release reports, anat path [LRAPR] option.
- Print all reports on queue [LRAP PRINT ALL ON QUEUE] option.
- Print single report only [LRAP PRINT SINGLE] option.
- Print final path reports by accession # [LRAPFICH] option.

NOTE: SNOMED code may be entered regardless of the unreleased or released SF515 report status using the FS/Gross/Micro/Dx/SNOMED Coding [LRAPDGS] or SNOMED coding, anat path [LRAPX] options.

12. The released SF515 report functionality was modified to NO longer display ICD9 diagnosis codes on the reports. The FS/Gross/Micro/Dx/ICD9CM Coding [LRAPDGI] option is used for ICD9 coding for unreleased or released SF515 reports. When this option is used ICD9 codes are not stored in the TIU DOCUMENT file (#8925) and will not be displayed on the final office copy report.

13. The released SF515 report functionality was **modified** to display the PRIMARY CARE PROVIDER in place of the SURGEON/PHYSICIAN in the footer of the released SF515 report. The released SF515 report displays the following names:

- 1) SUBMITTING PHYSICIAN
- 2) SURGEON/PHYSICIAN
- 3) PRIMARY CARE PROVIDER (newly added to the footer)
- 4) RESPONSIBLE PATHOLOGIST or CYTOTECHNOLOGIST.

14. The released SF515 report functionality is **modified** to check for missing pathologist or cytotechnologist names and reports completion dates. Whenever data is missing from reports, the electronic signer is notified that the release process is terminated. The release process verifies that the SF515 report pertinent data is entered before the reports are released.

15. The supplementary report functionality is **modified** to NO longer allow deletion of a supplementary report. Upon editing of a supplementary report the caption is changed from: “MODIFIED” to ***SUPPLEMENTARY REPORT HAS BEEN ADDED/MODIFIED*** (Added/last modified: AUG 31, 2001 @ 14:54 typed by DOE,JOHN). The part of the caption within parenthesis will display the date/time, name of the person who modified the supplementary report and the words “typed by”. When the supplementary report is released, the caption within parenthesis will display the date/time, name of the person who released the supplementary report, and the words “signed by”.

NOTE: Supplementary reports can no longer be deleted, but the text of the report can be deleted. The date/time stamp function of the report remains as a security enhancement of the software.

16. The **VistA** Laboratory software was **modified** to correct the released reports added/modified report date/time stamp audit trail information displayed via the **VistA** Computer Patient Record System (CPRS) software application.

Security Information

Security Management:

According to VA Directive 6214, the existing Laboratory software meets the requirements for VA IT Security Certification and Accreditation Program. The electronic signature enhancement software does not constitute a major change that requires new risk assessment and re-accreditation of the Laboratory system. New or changed security measures brought about as a result of the electronic signature enhancement software are identified in the Security Keys and Electronic Signature sections listed below.

Security Features:

Mail groups and alerts

No mail groups have been created, and there are no existing mail groups required for the AP electronic signature software. However, when the AP electronic signature functionality is activated an alert prompt appears immediately after an electronic signature is entered. This alert proceeds as follows:

Example:

A yes/no alert prompt will appear.

If answered yes, the alert is sent to both the physician on file for the accession and the patient's primary care provider (i.e., if one is on file).

The electronic signer is prompted to *optionally* include any additional names or mail groups as receivers of the alert. A name is entered as LAST,FIRST and a mail group is entered as G.MAILGROUP.

Remote System

There is no transmission of data to/from a remote system or facility database included as part of the Laboratory AP Electronic Signature enhancement software.

Archiving/Purging

No archiving/purging is required to utilize the **VistA** Laboratory AP Electronic Signature enhancement software in reference to VHA Directive 10-95-094 (“Data Archiving and Purging”).

Contingency Planning:

Each VAMC using the **VistA** Laboratory Anatomic Pathology Electronic Signature software **must** develop a local contingency plan to be used in the event of application problems in a live environment. The facility contingency plan **must** identify procedures used for maintaining the functionality provided by the software in the event of a system outage.

Interfacing:

There are no specialized products embedded within or required for the Electronic Signature enhancement software.

Electronic Signature:

A combination of menu access, User Classes, and Electronic Signature codes are used to maintain security and responsibility. Users of the system who have authority to approve actions, at whatever level, have an electronic signature code. Like the access and verify codes used when gaining access to the system, the electronic signature code is not visible on the screen. These codes are also encrypted so that they are unreadable to other users, even when viewed in the user file by those with the highest levels of access. The Text Integration Utility (TIU) System requires electronic signature codes for every action that currently requires an electronic signature.

Because an electronic signature has the same validity as a written signature on the report, a checksum verification process at print-time will ensure that the report has or has not changed since it was first released and signed out. If the checksum verification process determines that the report has been “improperly updated”, the electronic signature will appear scrambled on the report signifying its content has changed since it was originally electronically signed.

File Security:

VistA Laboratory Anatomic Pathology Electronic Signature software enhancements and modifications did not change any existing file security schemes. The VA FileMan security access L1 code is recommended if file security is deemed necessary by the facilities.

Menus:

There are no **VistA** Laboratory AP Electronic Signature menu options requiring the Information Security Officers (ISOs) approval for this release.

Security Keys:

The following 7 security-keys may be assigned to AUTHORIZED USERS requiring access to the new AP electronic signature functionality:

1. **LRLAB security key:** This security key allows access the main Laboratory DHCP [LRMENU] menu.
2. **LRANAT security key:** This security key allows access the main Anatomic pathology [LRAP] menu where the new Turn Electronic Signature On/Off [LRAP ESIG SWITCH] and Modify released pathology report [LRAPMRL] options resides
3. **LRAPSUPER security key:** This security key provides AUTHORIZED USER access the Supervisor, anat path [LRAPSUPER] submenu where the new Turn Electronic Signature On/Off [LRAP ESIG SWITCH] option is placed.
4. **LRLIASON security key:** This security key allows AUTHORIZED USER access to the new Turn Electronic Signature On/Off [LRAP ESIG SWITCH] option.
5. **LRAPMOD security key (NEW):** This **new** security key allows AUTHORIZED USER access to the new Modify released pathology report [LRAPMRL] option.
6. **LRVERIFY security key:** This security key provides AUTHORIZED USER access to anatomic pathology setup tasks and authorization to electronically sign Autopsy protocol, SF515, and supplementary released reports.
7. **PROVIDER security key:** This security key provides AUTHORIZED USER access to anatomic pathology setup tasks and authorization to electronically sign Autopsy protocol, SF515, and supplementary released reports. It also enables the AUTHORIZED SIGNER to be listed as the Provider pathologist of the pathology case in the TIU report document.

NOTE: Without the **PROVIDER** security key the AUTHORIZED SIGNER will NOT be allowed to sign or release a report.

Official Policies:

There are no known policies at this time regarding the modification and distribution of the Electronic Signature enhancement software.

References:

The following information list the VHA manuals relate to this product:

- **VistA** Laboratory Anatomic Pathology Electronic Signature User Manual V. 5.2
- **VistA** CPRS Text Integration Utility V. 1
- **VistA** CPRS Authorization/Subscription V. 1
- Kernel Systems Manual V. 8.0
- Kernel Toolkit V. 7.3
- VA FileMan V. 21.0
- VA MailMan V. 7.1

Pre-Installation Information

The following information contain recommendations and requirements that should be acknowledged prior to installing the Laboratory AP Electronic Signature Patch LR*5.2*259.

Recommended Users:

Information Resources Management (IRM) Staff

IRM staff is recommended for installing, implementing, and supporting the AP Electronic Signature Patch LR*5.2*259.

Laboratory Information Manager/Automated Data Processing Application Coordinator (LIM/ADPAC)

IRM and LIM/ADPAC staff must coordinate the implementation of the setup tasks after the patch is installed.

VistA Operating System

VistA Laboratory AP package currently runs on the standard hardware platforms used by the Department of Veterans Affairs Health Care System facilities. These hardware platforms consist of standard or upgraded Alpha AXP clusters, and run either VMS or New Technology (NT) with Open M, or VMS with Digital Standard Mumps (DSM). All current 486 sites are being converted to Alpha 1000A AXP Cluster, NT with Open M platforms.

VistA Operating System Performance Capacity

There are no significant changes in the performance capacity of the **VistA** operating system once the **VistA** Laboratory AP Electronic Signature Patch LR*5.2*259 has been installed. The software application should not create any appreciable global growth or network transmission problems. There are no memory constraints.

Central Processing Unit (CPU) Requirements

VistA Laboratory AP Electronic Signature Patch LR*5.2*259 software application for Windows 2000 or NT Operating System CPU requirement is a minimum of 133 MHz.

Test Accounts

It is highly recommended that VistA Laboratory AP Electronic Signature Patch LR*5.2*259 is initially installed and tested in a test account prior to installation into production accounts.

Test Sites

VistA Laboratory Anatomic Pathology Electronic Signature Patch LR*5.2*259 has been thoroughly tested prior to being release at the following VAMCs using various types of systems:

Test Sites	Type of Systems
Albany/Bath/Buffalo/Canandaigua/Syracuse VAMCs (Integrated Sites)	V7.2-1 – DSM V7.2.1 – Dec 01, 2000
Bay Pines VAMC	V7.3 – DSM V7.2.1 – Jun 20, 2003
Boston/Brockton Healthcare System (Integrated Sites) (ALPHA)	V7.3-1 – DSM V7.2.1 – Jun 14, 2003
Durham VAMC	V7.2-1 – DSM V7.2.1 – Mar 29, 2003
Eastern Colorado HCS at Denver (Integrated site)	V7.3 – DSM V7.2.1 – Jun 22, 2003
Eastern Colorado HCS at Fort Lyons	VMS/DSM
Grand Junction VAMC	Cache-NT – Sep 26, 2003
VA Heartland East HCS at St Louis	V7.3-1 - DSM V7.2.1 - Jun 21, 2003
Indianapolis VAMC	V7.3 - DSM V7.2.1 - Jun 21, 2003
Jackson VAMC	V7.3 - DSM V7.2.1 - Jul 05, 2003
VA Heartland East HCS at Poplar Bluff	DSM V7.2.1 - Jun 22, 2003
Long Beach Healthcare System (ALPHA)	V7.3 - DSM V7.2.1 - Jul 05, 2003
VA Heartland East HCS at Marion	V7.3-1 - DSM V7.2.1 - Jun 29, 2003
Milwaukee VAMC	V7.3 - DSM V7.2.1 - Jul 06, 2003
Muskogee VAMC	Cache – VMS – May 16, 2003
North Chicago VAMC (ALPHA)	V7.2-1 - DSM V7.2.1 - Jul 08, 2003
North Florida/South Georgia Healthcare System (Integrated sites)	VMS/DSM
San Francisco VAMC (ALPHA)	V7.3 - DSM V7.2.1 - May 24, 2003

Installation Time

VistA Laboratory AP Electronic Signature Patch LR*5.2*259 installation time is less than 10 minutes during off peak hours.

Users on the System

Users may remain on the system; however, the VistA Laboratory AP Electronic Signature Patch LR*5.2*259 installation should be done during off peak hours.

VA FileMan Browser

In order for user to be able to view reports using the features of the VA FileMan Browser, the Browser should be defined in the DEVICE file (#3.5) according to instructions in the Kernel Systems Manual V. 8.0 and VA FileMan V. 21.0 manuals. In addition, users should have their terminal type set to C-VT320 or greater.

Backup Routines

It is highly recommended that a backup of the transport global be performed before installing the VistA Laboratory AP Electronic Signature Patch LR*5.2*259.

Kernel Installation and Distribution System (KIDS)

VistA Laboratory AP Electronic Signature Patch LR*5.2*259 distribution is using KIDS. For further instructions on using KIDS, please refer to the Kernel Systems Manual V. 8.0.

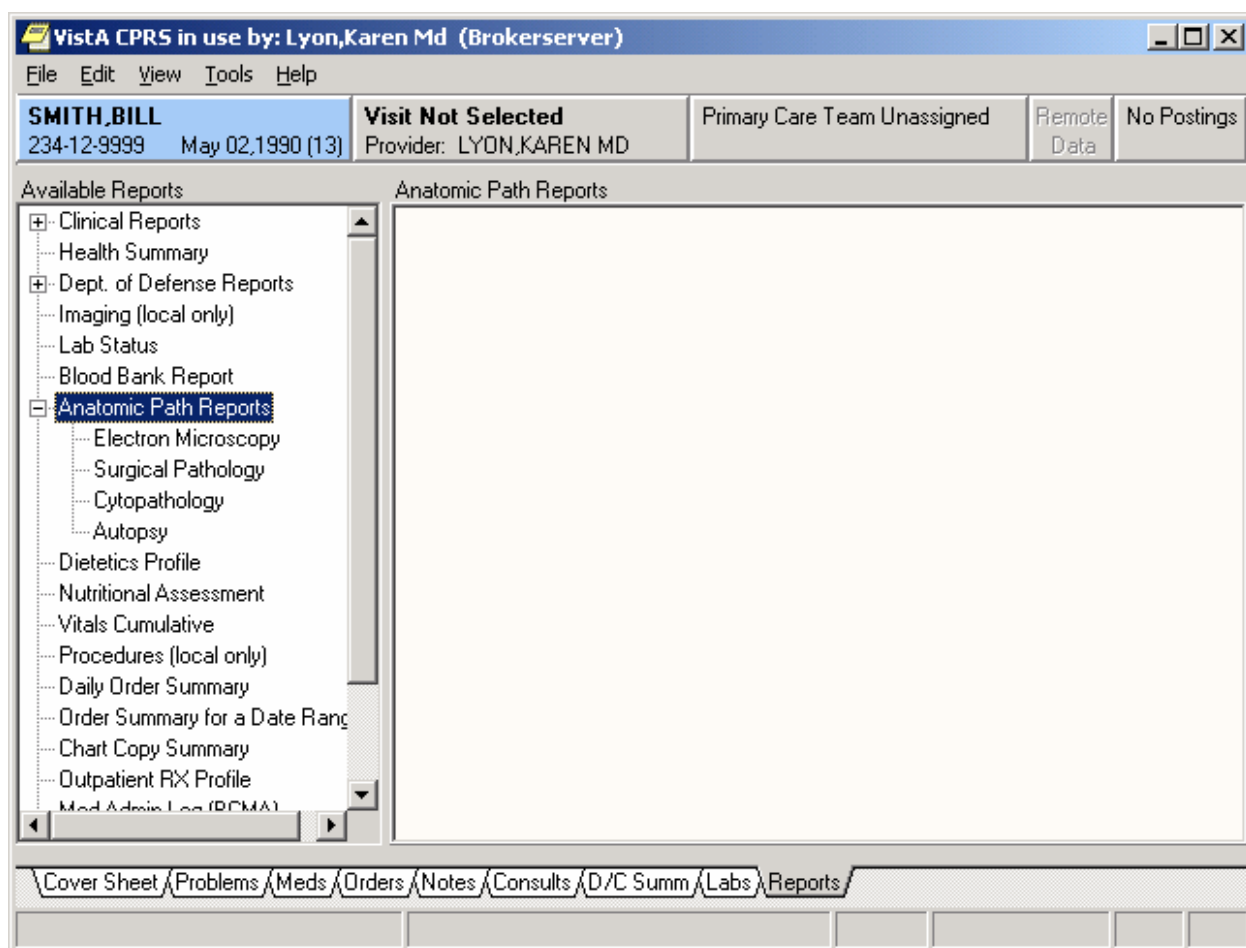
Namespace

VistA Laboratory AP Electronic Signature Patch LR*5.2*259 namespace is LR.

Viewing AP Reports in CPRS

Electronically signed AP reports are viewable in VistA CPRS, REPORT tab, under the AVAILABLE REPORTS menu, sub-heading, “Anatomic Path Reports” as shown in the following screen capture:

Example:



VistA Software Application Requirements

Prior to installing VistA Laboratory AP Electronic Signature Patch LR*5.2*259 the following required software applications **must** be installed:

Software Applications	Versions
Kernel	8.0
VistA Laboratory	5.2
VA FileMan	22.0
VA Mailman	7.1 or greater
RPC Broker	1.1
Kernel Toolkit	7.3
Text Integration Utility	1.0
Authorization/Subscription	1.0

Required Patches

Prior to installing VistA Laboratory AP Electronic Signature Patch LR*5.2*259 the following patches **must** be installed:

Software Applications	Patches
VistA Laboratory V. 5.2	LR*5.2*114
	LR*5.2*115
	LR*5.2*213
	LR*5.2*231
	LR*5.2*248
	LR*5.2*256
	LR*5.2*274
Text Integration Utility V. 1.0	TIU*1*137
Authorization/Subscription V. 1.0	USR*1*23

Data Dictionary Changes

The following data dictionary changes were created in support of the new AP electronic signature functionality:

LAB DATA file (#63) Changes

Autopsy:

```

32.4    AUTOPSY SUPPLEMENTARY REPORT (Multiple-63.324), [84;0]
        .02  RELEASE SUPPLEMENTARY REPORT (S), [0;2]
        2    SUPPLEMENTARY REPORT MODIFIED (Multiple-63.3242), [2;0]
            .03  PERSON RELEASING THE SUPP. RPT (P200'), [0;3]
            .04  SUPP REPORT RELEASE DATE/TIME (D), [0;4]
101     TIU REFERENCE DATE/TIME - AU (Multiple-63.101), [101;0]
        .01  TIU REFERENCE DATE/TIME - AU (D), [0;1]
        1    TIU ENTRY POINTER - AU (P8925'), [0;2]
        2    TIU CHECKSUM - AU (F), [0;3]
102     DATE REPORT MODIFIED - AU (D), [102;1]
102.1   PERSON MODIFYING TEXT (P200'), [102;2]
102.2   DIAGNOSIS MODIFIED (S), [102;3]

```

Cytopathology:

```

9       CYTOPATHOLOGY (Multiple-63.09), [CY;0]
        .02  PATHOLOGIST/CYTOTECHNOLOGIST [2P:200]
            HELP-PROMPT: Enter the pathologist or cytotechnologist
                        performing the examination. NOTE: A cytotechnologist
                        can sign out negative GYN cases only.
        .16  TIU REFERENCE DATE/TIME - CY (Multiple-63.47), [.05;0]
            .01  TIU REFERENCE DATE/TIME - CY (D), [0;1]
            1    TIU ENTRY POINTER - CY (P8925'), [0;2]
            2    TIU CHECKSUM - CY (F), [0;3]
        .17  DATE REPORT MODIFIED - CY (D), [.07;1]
        .171 PERSON MODIFYING TEXT (P200'), [.07;2]
        .172 DIAGNOSIS MODIFIED (S), [.07;3]
1.2     SUPPLEMENTARY REPORT (Multiple-63.907), [1.2;0]
        2    SUPPLEMENTARY REPORT MODIFIED (Multiple-63.9072), [2;0]
            .03  PERSON RELEASING THE SUPP. RPT (P200'), [0;3]
            .04  SUPP REPORT RELEASE DATE/TIME (D), [0;4]

```


Electron Microscopy:

```

2      EM (Multiple-63.02), [EM;0]
.16   TIU REFERENCE DATE/TIME - EM (Multiple-63.49), [.05;0]
      .01   TIU REFERENCE DATE/TIME - EM (D), [0;1]
      1     TIU ENTRY POINTER - EM (P8925'), [0;2]
      2     TIU CHECKSUM - EM (F), [0;3]
.17   DATE REPORT MODIFIED - EM (D), [.07;1]
.171  PERSON MODIFYING TEXT (P200'), [.07;2]
.172  DIAGNOSIS MODIFIED (S), [.07;3]
1.2   SUPPLEMENTARY REPORT (Multiple-63.207), [1.2;0]
      2     SUPPLEMENTARY REPORT MODIFIED (Multiple-63.2072), [2;0]
      .03   PERSON RELEASING THE SUPP. RPT (P200'), [0;3]
      .04   SUPP REPORT RELEASE DATE/TIME (D), [0;4]

```

Surgical Pathology:

```

8      SURGICAL PATHOLOGY (Multiple-63.08), [SP;0]
.16   TIU REFERENCE DATE/TIME - SP (Multiple-63.19), [.05;0]
      .01   TIU REFERENCE DATE/TIME - SP (D), [0;1]
      1     TIU ENTRY POINTER - SP (P8925'), [0;2]
      2     TIU CHECKSUM - SP (F), [0;3]
.17   DATE REPORT MODIFIED - SP (D), [.07;1]
.171  PERSON MODIFYING TEXT (P200'), [.07;2]
.172  DIAGNOSIS MODIFIED (S), [.07;3]
1.2   SUPPLEMENTARY REPORT (Multiple-63.817), [1.2;0]
      2     SUPPLEMENTARY REPORT MODIFIED (Multiple-63.8172), [2;0]
      .03   PERSON RELEASING THE SUPP. RPT (P200'), [0;3]
      .04   SUPP REPORT RELEASE DATE/TIME (D), [0;4]

```

LAB DATA file (#63), Delete Nodes

Autopsy, Cytopathology, Electron Microscopy, and Surgical Pathology supplementary reports fields Delete Node(s) has been modified to prevent deletion of supplementary reports.

Autopsy:

```
32.4      AUTOPSY SUPPLEMENTARY REPORT (Multiple-63.324), [84;0]
          .01 SUPPLEMENTARY REPORT DATE (D), [0;1]
DELETE NODE(S):   If $T is set to 1, no deleting.
          Node: 1      I 1 D EN^DDIOL("Deletion is not permitted","", "!!")
```

Cytopathology:

```
9          CYTOPATHOLOGY (Multiple-63.09), [CY;0]
          1.2 SUPPLEMENTARY REPORT (Multiple-63.907), [1.2;0]
              .01 SUPPLEMENTARY REPORT DATE/TIME (D), [0;1]
DELETE NODE(S):   If $T is set to 1, no deleting.
          Node: 1      I 1 D EN^DDIOL("Deletion is not permitted","", "!!")
```

Electron Microscopy:

```
2          EM (Multiple-63.02), [EM;0]
          1.2 SUPPLEMENTARY REPORT (Multiple-63.207), [1.2;0]
              .01 SUPPLEMENTARY REPORT DATE/TIME (MD), [0;1]
DELETE NODE(S):   If $T is set to 1, no deleting.
          Node: 1      I 1 D EN^DDIOL("Deletion is not permitted","", "!!")
```

Surgical Pathology:

```
          1.2 SUPPLEMENTARY REPORT (Multiple-63.817), [1.2;0]
              .01 SUPPLEMENTARY REPORT DATE/TIME (D), [0;1]
DELETE NODE(S):   If $T is set to 1, no deleting.
          Node: 1      I 1 D EN^DDIOL("Deletion is not permitted","", "!!")
```

LABORATORY SITE file (#69.9), New Field

The LABORATORY SITE file (#69.9) was **modified** to add the **new** AP ESIG ON (S) field (#619). This **new** field was added to store the “On/Off” status of the electronic signature functionality switch.

NOTE: The **new** AP ESIG ON (S) field (#619) is exported as ‘NULL’ and each site is responsible for turning it “ON” after installation of the software.

NOTE: The following entries do not refer to changes made to the Data Dictionary. However, they are included because the fields mentioned below play an important role in authorizing the release/sign-out of the report, and in storing and viewing the electronically signed documents in TIU.

NEW PERSON file (#200)

The electronic signature authorization code is stored in the NEW PERSON file (#200), ELECTRONIC SIGNATURE CODE field (#20.4).

TIU DOCUMENT file (#8925)

The TIU DOCUMENT file (#8925) stores the original and edited electronically signed Anatomic Pathology Autopsy protocol, Standard Form 515 (SF 515), and supplementary reports textual information (i.e., AP electronic signature AUTHORIZED SIGNERS names, and reports dates/times). All original electronically signed AP reports remains unchanged in this file preserving the integrity of the electronically signed released report.

TIU DOCUMENT DEFINITION file (#8925.1)

In support of the **new** AP electronic signature functionality the TIU DOCUMENT DEFINITION file (#8925.1) stores the LR Laboratory Reports Class new entries. The following 6 **new** entries are used to identify and define the behavior for the AP electronic signature documents stored in TIU DOCUMENT file (#8925):

1. LR LABORATORY REPORTS (new class)
2. LR ANATOMIC PATHOLOGY (new document class)
3. LR AUTOPSY REPORT (new title)
4. LR CYTOPATHOLOGY REPORT (new title)
5. LR ELECTRON MICROSCOPY REPORT (new title)
6. LR SURGICAL PATHOLOGY REPORT (new title)

USR CLASS file (#8930)

The new LR ANATOMIC PATH EMPTY CLASS entry has been added to this file in support of the **new** AP electronic signature functionality. The purpose of this empty class is to prevent updates to the Anatomic Pathology documents from Text Integration Utility (TIU) options.

NOTE: This class is empty and MUST remain empty. Members must NOT be added to this class.

USR AUTHORIZATION/SUBSCRIPTION file (#8930.1)

Laboratory Anatomic Pathology Electronic Signature software utilizes this file to prevent changes to the Anatomic Pathology documents from the TIU options. This ensures that the AP documents are managed solely from the Anatomic pathology [LRAP] menu.

NOTE: The following 9 **new** business rules were created to prevent such changes and **MUST NOT** be locally edited or deleted.

1. A COMPLETED (DOCUMENT CLASS) LR ANATOMIC PATHOLOGY may BE DELETED by a LR ANATOMIC PATH EMPTY CLASS
2. A COMPLETED (DOCUMENT CLASS) LR ANATOMIC PATHOLOGY may BE AMENDED by a LR ANATOMIC PATH EMPTY CLASS
3. A COMPLETED (DOCUMENT CLASS) LR ANATOMIC PATHOLOGY may BE ADDENDED by a LR ANATOMIC PATH EMPTY CLASS
4. A COMPLETED (DOCUMENT CLASS) LR ANATOMIC PATHOLOGY may BE REASSIGNED by a LR ANATOMIC PATH EMPTY CLASS
5. A COMPLETED (DOCUMENT CLASS) LR ANATOMIC PATHOLOGY may BE COPIED by a LR ANATOMIC PATH EMPTY CLASS
6. A COMPLETED (DOCUMENT CLASS) LR ANATOMIC PATHOLOGY may HAVE ITS TITLE CHANGED by a LR ANATOMIC PATH EMPTY CLASS
7. A COMPLETED (DOCUMENT CLASS) LR ANATOMIC PATHOLOGY may BE PRINTED by a LR ANATOMIC PATH EMPTY CLASS
8. An UNTRANSCRIBED (DOCUMENT CLASS) LR ANATOMIC PATHOLOGY may BE ENTERED by a LR ANATOMIC PATH EMPTY CLASS
9. A COMPLETED (DOCUMENT CLASS) LR ANATOMIC PATHOLOGY may HAVE SIGNERS IDENTIFIED by a LR ANATOMIC PATH EMPTY CLASS

Deleted Anatomic Pathology Options

The following two options are automatically deleted during the installation process of patch (LR*5.2*259):

1. Modify anat path gross/micro/dx/frozen section [LRAPM] option

This option has been deleted to prevent editing of gross, microscopic descriptions, diagnosis, and frozen fields of released Supplementary and SF 515 reports.

2. Modify Move anatomic path accession [LRAPMV] option

This option was deleted to secure the integrity of the electronically signed Anatomic Pathology Supplementary, SF 515, and Autopsy Protocol reports stored in Lab and TIU globals for Surgical Pathology, Cytology, Electron Microscopy, and Autopsy sections.

New LR and LRAP Routines

The following new routines were created for the release of the AP Electronic Signature functionality:

New Routines	Descriptions
LR7OSAP3	<i>Extracts existing and stores new report information in the TIU globals.</i>
LRAPBR	<i>Displays AP reports using the Browser, main control routine.</i>
LRAPBR1	<i>Browser display for non-Autopsy accessions.</i>
LRAPBR2	<i>Additional Browser display edits for non-Autopsy accessions.</i>
LRAPBR3	<i>Additional Browser display edits for all accessions</i>
LRAPBR4	<i>Browser display for Autopsy accessions</i>
LRAPBR5	<i>Browser display and storage of the released report in TIU.</i>
LRAPBRPW	<i>POW patient Browser display and print.</i>
LRAPBS1	<i>Block/Slide Data Entry</i>
LRAPCUM	<i>AP Patient Cumulative Reporting</i>
LRAPESON	<i>Activates the electronic signature flag for AP</i>
LRAPMRL	<i>Modification of released reports, main routine.</i>
LRAPMRL1	<i>Additional edits for modification of released reports.</i>
LRAPRES	<i>AP electronic signature released report, main routine</i>
LRAPRES1	<i>AP electronic signature released report edits</i>
LRAPSNMD	<i>Display/print SNOMED codes</i>
LRAPTIUP	<i>Extracts AP released report information stored in TIU and prints it.</i>
LRAPUTL	<i>Utility routine that provides lookups and edits.</i>

Routine Summary

Routine Name	Before Patch	After Patch	Patch List
LR259	n/a	3570617	**259**
LR7OSAP	16454798	16576063	**121,187,230,256,259**
LR7OSAP1	6662010	8012437	**121,227,230,259**
LR7OSAP2	17729340	17315095	**230,256,259**
LR7OSAP3	n/a	3581758	**259**
LRAP	6775842	6227615	**72,248,259**
LRAPAUPT	334176	296301	**72,248,259**
LRAPAUSR	7330790	7980343	**1,173,248,259**
LRAPBR	n/a	2195032	**259**
LRAPBR1	n/a	8346961	**259**
LRAPBR2	n/a	4890391	**259**
LRAPBR3	n/a	4110669	**259**
LRAPBR4	n/a	5636439	**259**
LRAPBR5	n/a	8235355	**259**
LRAPBRPW	n/a	3700173	**259**
LRAPBS1	10703315	8101674	**121,259**
LRAPCUM	11172316	11114626	**34,72,173,248,259**
LRAPD	2910677	885252	**72,91,259**
LRAPD1	10636533	5673315	**41,91,248,259**
LRAPDA	8740574	11913004	**72,73,91,121,248,259**
LRAPDSR	3990550	4774961	**248,259**
LRAPED	12289587	5328577	**1,31,72,115,259**
LRAPEDC	4945400	2394106	**72,259**
LRAPESON	n/a	1184905	**259**
LRAPF	1475553	1392406	**173,201,248,259**
LRAPFICH	3308525	3533087	**72,173,248,259**
LRAPLG	7247511	6197229	**72,201,259**
LRAPMOD	1033623	4068289	**72,248,259**
LRAPMRL	n/a	8250683	**259**
LRAPMRL1	n/a	4140484	**259**
LRAPMV	9227122	9315413	**72,231,259**
LRAPP	4573436	1900466	**72,259**
LRAPPF1	11550418	5288921	**72,173,201,259**
LRAPPOW	4217313	3013758	**72,114,259**
LRAPR	8948563	12791716	**72,248,259**
LRAPRES	n/a	10786227	**259**
LRAPRES1	n/a	7668063	**259**
LRAPS1	8818795	8842505	**72,173,201,259**
LRAPSNMD	n/a	4831999	**259**
LRAPT1	1761328	1044267	**72,173,259**
LRAPT2	7303166	5927379	**1,248,259**
LRAPT3	3605448	1408941	**1,259**
LRAPTIUP	n/a	5043565	**259**
LRAPUTL	n/a	9752029	**259**
LRAPV	6874057	3996189	**72,201,259**
LRAPX	5722104	2175656	**72,259**
LRAUDA	2236387	1249636	**72,248,259**
LRAURPT	9211437	9163229	**1,72,173,248,259**
LRCAPES	12983418	12983266	**274,259**
LRSPRPT	12472946	12082607	**1,72,248,259**
LRSPRPT1	9140587	3346358	**1,259**
LRSPRPT2	12401510	4478821	**72,259**
LRSPPT	5396521	4853995	**1,72,248,259**
LRUA	7255016	5401663	**72,173,201,213,259**
LRUPS	4571479	4568582	**72,248,259**

Installation Instructions

VistA Laboratory AP Electronic Signature Patch LR*5.2*259 uses the Kernel Installation and Distribution System (KIDS). For further instructions on using KIDS, please refer to the Kernel Systems Manual V. 8.0.

NOTES:

All Kernel, VA MailMan, and HL patches must be current on the target system to avoid problems loading and/or installing this patch.

Patch installation needs to be coordinated with the Laboratory Information Manager (LIM/ADPAC).

The LIM/ADPAC needs to perform the Electronic Signature setup as explained in the AP User Manual if applicable.

This patch can be installed with users on the system. However, it is recommended that installation occur when there is no Anatomic Pathology activity or activity is at a minimum. This will prevent 'Cannot return to source routine' errors. The *Anatomic pathology [LRAP] menu option* will be disabled and then enabled automatically by this patch during installation.

Example:

```
1.  DISABLE ROUTINE MAPPING      (DSM for Open VMS sites only)
-----
Disable routine mapping on all systems for the routines listed
in the Routine Summary above.

NOTE:  If the routines included in this patch are not currently
in your mapped routine set, please skip this step.

2.  START KIDS
-----
Start up the Kernel Installation and Distribution System Menu
[XPD MAIN]:

    Edits and Distribution ...
    Utilities ...
    Installation ...
```

Select Kernel Installation & Distribution System Option: **IN**stallation

Load a Distribution
 Print Transport Global
 Compare Transport Global to Current System
 Verify Checksums in Transport Global
 Install Package(s)
 Restart Install of Package(s)
 Unload a Distribution
 Backup a Transport Global

Select Installation Option: Load a Distribution and enter LAB_52_259.KID as the host file.

3. Select Installation Option

 NOTE: The following are OPTIONAL:

Compare Transport Global to Current System - This option will allow you to view all changes that will be made when this patch is installed. It compares all components of this patch (routines, DD's, templates, etc.).

Verify Checksums in Transport Global - This option will allow you to ensure the integrity of the routines that are in the transport global.

Backup a Transport Global - This option will create a backup message of any routines exported with this patch. It will not backup any other changes such as DD's or templates.

4. Select Installation Option: Install Package(s)

 **This is the step to start the installation of this KIDS patch:

a. Choose the Install Package(s) option to start the patch install. When prompted for the INSTALL NAME, enter LR*5.2*259.

When prompted 'Want KIDS to Rebuild Menu Trees Upon completion of Install? YES//' answer YES

b. When prompted 'Want KIDS to INHIBIT LOGONs during the install? YES//' answer NO

c. Option Anatomic Pathology [LRAP] will be disabled by PRE^LR259 before the install begins. POST^LR259 will enable the option after installation is complete.

5. REBUILD MAPPED ROUTINE(S) (DSM for Open VMS sites only)

 Optional - Include the routines distributed with this patch in the mapped routine set.

NOTE: This step is only necessary if you performed step 2 or if you wish to include the routines in your mapped set.

Installation Examples:

Obtain patch kids build from the anonymous software directory listed on page iii at the beginning of the AP Electronic Signature Installation Guide:

```

XPD MAIN          Kernel Installation & Distribution System

<TEST ACCOUNT>  Edits and Distribution ...
<TEST ACCOUNT>  Utilities ...
<TEST ACCOUNT>  Installation ...

<TEST ACCOUNT> Select Kernel Installation & Distribution System Option:
INStallation

<TEST ACCOUNT> 1 Load a Distribution
<TEST ACCOUNT> 2 Verify Checksums in Transport Global
<TEST ACCOUNT> 3 Print Transport Global
<TEST ACCOUNT> 4 Compare Transport Global to Current System
<TEST ACCOUNT> 5 Backup a Transport Global
<TEST ACCOUNT> 6 Install Package(s)
<TEST ACCOUNT> Restart Install of Package(s)
<TEST ACCOUNT> Unload a Distribution

Select Installation Option: 1 Load a Distribution<RET>
Enter a Host File: T:\ANONYMOUS\LR_52_259_1015.KID<RET>

KIDS Distribution saved on Oct 15, 2003@16:28:35
Comment: PATCH LR*5.2*259

This Distribution contains Transport Globals for the following Package(s):
LR*5.2*259

Distribution OK!

Want to Continue with Load? YES//<RET>
Loading Distribution...

Build LR*5.2*259 has an Environmental Check Routine

Want to RUN the Environment Check Routine? YES//<RET>
  LR*5.2*259

Will first run the Environment Check Routine, LR259

  Sending transport global loaded alert to mail group G.LMI

```

Use INSTALL NAME: LR*5.2*259 to install this Distribution.

- 1 Load a Distribution
- 2 Verify Checksums in Transport Global
- 3 Print Transport Global
- 4 Compare Transport Global to Current System
- 5 Backup a Transport Global
- 6 Install Package(s)
Restart Install of Package(s)
Unload a Distribution

Select Installation Option: **2** Verify Checksums in Transport Global

Select INSTALL NAME: LR*5.2*259

Loaded from Distribution 10/15/03@16:33:45

=> PATCH LR*5.2*259 ;Created on Oct 15, 2003@16:28:35

This Distribution was loaded on Oct 15, 2003@16:33:45 with header of

PATCH LR*5.2*259 ;Created on Oct 15, 2003@16:28:35

It consisted of the following Install(s): LR*5.2*259

DEVICE: HOME// IP network

54 Routine checked, 0 failed.

- 1 Load a Distribution
- 2 Verify Checksums in Transport Global
- 3 Print Transport Global
- 4 Compare Transport Global to Current System
- 5 Backup a Transport Global
- 6 Install Package(s)
Restart Install of Package(s)
Unload a Distribution

Select Installation Option: **4** Compare Transport Global to Current System

Select INSTALL NAME: LR*5.2*259 Loaded from Distribution 10/15/03@16:33:45

=> PATCH LR*5.2*259 ;Created on Oct 15, 2003@16:28:35

This Distribution was loaded on Oct 15, 2003@16:33:45 with header of

PATCH LR*5.2*259 ;Created on Oct 15, [2003@16:28:35](#)

It consisted of the following Install(s): LR*5.2*259

Select one of the following:

- 1 Full Comparison
- 2 Second line of Routines only
- 3 Routines only

Type of Compare: 2 Second line of Routines only
 DEVICE: HOME// IP network

Compare LR*5.2*259 to current site
 2nd Line of Routines Only

Routine: LR259
 <TG> ;;5.2;LAB SERVICE;**259**;Sep 27, 1994
 <SYS> ;;5.2;LAB SERVICE;**259**;Sep 27, 1994

Routine: LR7OSAP
 <TG> ;;5.2;LAB SERVICE;**121,187,230,256,259**;Sep 27, 1994
 <SYS> ;;5.2;LAB SERVICE;**121,187,230,256**;Sep 27, 1994

Routine: LR7OSAP1
 <TG> ;;5.2;LAB SERVICE;**121,227,230,259**;Sep 27, 1994
 <SYS> ;;5.2;LAB SERVICE;**121,227,230**;Sep 27, 1994

Routine: LR7OSAP2
 <TG> ;;5.2;LAB SERVICE;**230,256,259**;Sep 27, 1994
 <SYS> ;;5.2;LAB SERVICE;**230,256**;Sep 27, 1994

ADD Routine: LR7OSAP3

Routine: LRAP
 <TG> ;;5.2;LAB SERVICE;**72,248,259**;Sep 27, 1994
 <SYS> ;;5.2;LAB SERVICE;**72,248**;Sep 27, 1994

Routine: LRAPAUT
 <TG> ;;5.2;LAB SERVICE;**72,248,259**;Sep 27, 1994
 <SYS> ;;5.2;LAB SERVICE;**72,248**;Sep 27, 1994

Routine: LRAPAUSR
 <TG> ;;5.2;LAB SERVICE;**1,173,248,259**;Sep 27, 1994
 <SYS> ;;5.2;LAB SERVICE;**1,173,248**;Sep 27, 1994

ADD Routine: LRAPBR

ADD Routine: LRAPBR1

ADD Routine: LRAPBR2

ADD Routine: LRAPBR3

ADD Routine: LRAPBR4

ADD Routine: LRAPBR5

ADD Routine: LRAPBRPW

```

Routine: LRAPBS1
<TG> ;;5.2;LAB SERVICE;**121,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**121**;Sep 27, 1994

Routine: LRAPCUM
<TG> ;;5.2;LAB SERVICE;**34,72,173,248,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**34,72,173,248**;Sep 27, 1994

Routine: LRAPD
<TG> ;;5.2;LAB SERVICE;**72,91,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72,91**;Sep 27, 1994

Routine: LRAPD1
<TG> ;;5.2;LAB SERVICE;**41,91,248,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**41,91,248**;Sep 27, 1994
Routine: LRAPDA
<TG> ;;5.2;LAB SERVICE;**72,73,91,121,248,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72,73,91,121,248**;Sep 27, 1994

Routine: LRAPDSR
<TG> ;;5.2;LAB SERVICE;**248,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**248**;Sep 27, 1994

Routine: LRAPED
<TG> ;;5.2;LAB SERVICE;**1,31,72,115,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**1,31,72,115**;Sep 27, 1994

Routine: LRAPEDC
<TG> ;;5.2;LAB SERVICE;**72,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72**;Sep 27, 1994

ADD Routine: LRAPESON

Routine: LRAPF
<TG> ;;5.2;LAB SERVICE;**173,201,248,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**173,201,248**;Sep 27, 1994

Routine: LRAPFICH
<TG> ;;5.2;LAB SERVICE;**72,173,248,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72,173,248**;Sep 27, 1994

Routine: LRAPLG
<TG> ;;5.2;LAB SERVICE;**72,201,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72,201**;Sep 27, 1994

Routine: LRAPMOD
<TG> ;;5.2;LAB SERVICE;**72,248,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72,248**;Sep 27, 1994

ADD Routine: LRAPMRL

ADD Routine: LRAPMRL1

```

```

Routine: LRAPMV
<TG> ;;5.2;LAB SERVICE;**72,231,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72,231**;Sep 27, 1994

Routine: LRAPP
<TG> ;;5.2;LAB SERVICE;**72,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72**;Sep 27, 1994

Routine: LRAPPF1
<TG> ;;5.2;LAB SERVICE;**72,173,201,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72,173,201**;Sep 27, 1994

Routine: LRAPPOW
<TG> ;;5.2;LAB SERVICE;**72,114,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72,114**;Sep 27, 1994

Routine: LRAPR
<TG> ;;5.2;LAB SERVICE;**72,248,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72,248**;Sep 27, 1994

ADD Routine: LRAPRES

ADD Routine: LRAPRES1

Routine: LRAPS1
<TG> ;;5.2;LAB SERVICE;**72,173,201,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72,173,201**;Sep 27, 1994

ADD Routine: LRAPSNMD

Routine: LRAPT1
<TG> ;;5.2;LAB SERVICE;**72,173,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72,173**;Sep 27, 1994

Routine: LRAPT2
<TG> ;;5.2;LAB SERVICE;**1,248,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**1,248**;Sep 27, 1994

Routine: LRAPT3
<TG> ;;5.2;LAB SERVICE;**1,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**1**;Sep 27, 1994

ADD Routine: LRAPTIUP

ADD Routine: LRAPUTL

Routine: LRAPV
<TG> ;;5.2;LAB SERVICE;**72,201,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72,201**;Sep 27, 1994

```

```

Routine: LRAPX
<TG> ;;5.2;LAB SERVICE;**72,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72**;Sep 27, 1994

Routine: LRAUDA
<TG> ;;5.2;LAB SERVICE;**72,248,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72,248**;Sep 27, 1994

Routine: LRAURPT
<TG> ;;5.2;LAB SERVICE;**1,72,173,248,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**1,72,173,248**;Sep 27, 1994

Routine: LRSPRPT
<TG> ;;5.2;LAB SERVICE;**1,72,248,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**1,72,248**;Sep 27, 1994

Routine: LRSPRPT1
<TG> ;;5.2;LAB SERVICE;**1,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**1**;Sep 27, 1994

Routine: LRSPRPT2
<TG> ;;5.2;LAB SERVICE;**72,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72**;Sep 27, 1994

Routine: LRSPT
<TG> ;;5.2;LAB SERVICE;**1,72,248,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**1,72,248**;Sep 27, 1994

Routine: LRUA
<TG> ;;5.2;LAB SERVICE;**72,173,201,213,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72,173,201,213**;Sep 27, 1994

Routine: LRUPS
<TG> ;;5.2;LAB SERVICE;**72,248,259**;Sep 27, 1994
<SYS> ;;5.2;LAB SERVICE;**72,248**;Sep 27, 1994

1      Load a Distribution
2      Verify Checksums in Transport Global
3      Print Transport Global
4      Compare Transport Global to Current System
5      Backup a Transport Global
6      Install Package(s)
       Restart Install of Package(s)
       Unload a Distribution

Select Installation Option: 5  Backup a Transport Global

Select INSTALL NAME: LR*5.2*259  Loaded from Distribution  10/15/03@16:33:45
=> PATCH LR*5.2*259  ;Created on Oct 15, 2003@16:28:35

This Distribution was loaded on Oct 15, 2003@16:33:45 with header of
PATCH LR*5.2*259  ;Created on Oct 15, 2003@16:28:35
It consisted of the following Install(s):  LR*5.2*259

```


Subject: Backup of LR*5.2*259 install on Oct 15, 2003
Replace

Loading Routines for LR*5.2*259....
 Routine LR7OSAP3 is not on the disk.....
 Routine LRAPBR is not on the disk..
 Routine LRAPBR1 is not on the disk..
 Routine LRAPBR2 is not on the disk..
 Routine LRAPBR3 is not on the disk..
 Routine LRAPBR4 is not on the disk..
 Routine LRAPBR5 is not on the disk..
 Routine LRAPBRPW is not on the disk.....
 Routine LRAPESON is not on the disk.....
 Routine LRAPMRL is not on the disk..
 Routine LRAPMRL1 is not on the disk.....
 Routine LRAPRES is not on the disk..
 Routine LRAPRES1 is not on the disk...
 Routine LRAPSNMD is not on the disk.....
 Routine LRAPTIUP is not on the disk..
 Routine LRAPUTL is not on the disk.....

Send mail to: LATHAM,KAREN L// LATHAM,KAREN L
 Select basket to send to: IN// LR PATCHES & LAB PKG
 And Send to:

- 1 Load a Distribution
- 2 Verify Checksums in Transport Global
- 3 Print Transport Global
- 4 Compare Transport Global to Current System
- 5 Backup a Transport Global
- 6 Install Package(s)
 Restart Install of Package(s)
 Unload a Distribution

Select Installation Option: 6 Install Package(s)

Select INSTALL NAME: LR*5.2*259 Loaded from Distribution 10/15/03@16:33:45
 => PATCH LR*5.2*259 ;Created on Oct 15, 2003@16:28:35

This Distribution was loaded on Oct 15, 2003@16:33:45 with header of
 PATCH LR*5.2*259 ;Created on Oct 15, [2003@16:28:35](#)

It consisted of the following Install(s): LR*5.2*259

Checking Install for Package LR*5.2*259
 Will first run the Environment Check Routine, LR259

--- Environment Check is Ok ---

Installation Instructions

Install Questions for LR*5.2*259

Incoming Files:

63 LAB DATA

Note: You already have the 'LAB DATA' File.

69.9 LABORATORY SITE (Partial Definition)

Note: You already have the 'LABORATORY SITE' File.

Want KIDS to Rebuild Menu Trees Upon Completion of Install? YES// NO

Want KIDS to INHIBIT LOGONs during the install? YES// NO

Enter the Device you want to print the Install messages.

You can queue the install by enter a 'Q' at the device prompt.

Enter a '^' to abort the install.

DEVICE: HOME// IP network

LR*5.2*259

Running Post-Install Routine: POST^LR259

*** Post install started ***

Enabling Anatomic Pathology [LRAP] option

*** Post install completed ***

Sending install completion alert to mail group G.LMI

Updating Routine file...

Updating KIDS files...

LR*5.2*259 Installed.

Oct 15, 2003@16:34:42

Install Message sent #7117858

100%

25

50

75

Complete

Install Completed

Post Implementation Instructions

The VistA Laboratory Anatomic Pathology Electronic Signature Patch LR*5.2*259 post implementation instructions should be coordinate between the IRM and LIM staff. All instructions **must** be adhered to for a successfully activation the **new** AP electronic signature functionality.

New Anatomic Pathology [LRAP] Menu Options

As part of the Anatomic Pathology Electronic Signature installation process the following two **new** options were automatically added to the Anatomic pathology [LRAP] menu.

Modify released pathology reports [LRAPMRL] option

This **new** option is assigned to the Anatomic pathology [LRAP] menu; Edit/modify data, anat path [LRAPE] submenu. **Note:** This option is LOCKED with the ** LRAPMOD security key**

Example: *Edit/modify data, anat path [LRAPE] option*

```
Select Edit/modify data, anat path Option: [LRAPE]

LI Edit log-in & clinical hx, anat path [LRAPED]
MM Modify released pathology report [LRAPMRL]
SC Edit anat path comments [LRAPEDC]
```

New Turn Electronic Signature On/Off [LRAP ESIG SWITCH] option

This **new** option is assigned to the Supervisor, anat path [LRAPSUPER] menu. **Note:** This option is LOCKED with the **LRLIASON security key**

Example: *Electronic Signature On/Off [LRAP ESIG SWITCH] option*

```
Select Supervisor, anat path Option:

DD Delete anat path descriptions by date [LRAPDAR]
ED Enter/edit lab description file [LRAPDES]
ER Edit pathology parameters [LRAPHDR]
ES Enter/edit items in a SNOMED field ... [LRAPSNOMEDIT]
IR Incomplete reports, anat path [LRAPINC]
MR Print path modifications [LRAPMOD]
TC Anatomic pathology topography counts [LRAPC]
DS Delete free text specimen entries [LRAPDFS]
QA AP quality assurance ... [LRAPQA]
AF AFIP registries ... [LRAPAFIP]
SW Turn Electronic Signature On/Off [LRAP ESIG SWITCH]
   Edit referral patient file [LRUV]
```

Laboratory Information Manager (LIM)/Automated Data Processing Application Coordinator (ADPAC)

To implement the new AP electronic signature functionality the following information **must** be provided to the IRM Service:

1. LIM/ADPAC: Submit a list of AUTHORIZED USERS (i.e., LIM/Lab ADPAC) requiring access the new Turn Electronic Signature On/Off [LRAP ESIG SWITCH] option to the IRM Service. This **new** option activates and deactivates the new AP Electronic Signature functionality used to electronically sign the Autopsy protocol, SF515, and supplementary released reports. The LIM/Lab ADPAC requiring access to this new option must be assigned the LRANAT, LRLIASON, LRAPSUPER, and LRLAB security keys to access the Laboratory DHCP [LRMENU] menu and the Anatomic pathology [LRAP] menu where this new option resides.

NOTE: The new AP Electronic Signature functionality should be restricted to a limited few (i.e., LIM/Lab ADPAC). Once this functionality is activated it should be turned off **ONLY** in emergency situations. This new functionality it is **NOT** intended to be turned on and off randomly.

2. LIM/Lab ADPAC: Submit a list of all AUTHORIZED USERS requiring user access to the new Modify released pathology report [LRAPMRL] option to the IRM Service. This new option is used to edit all Autopsy protocol, SF515, and supplementary released reports. All AUTHORIZED USERS of this **new** option must be assigned the new LRAPMOD security key and the LRANAT security key for access to the *Anatomic pathology [LRAP] menu* where this new option resides.

3. LIM/Lab ADPAC: Submit a list of all AUTHORIZED USERS (i.e., Pathologists) requiring the LRVERIFY security key. This security key provides access to the anatomic pathology setup tasks and authorization to electronically sign Autopsy protocol, SF515, and supplementary released reports. Without this key the pathologist will not be allowed to sign or release a report.

4. LIM/Lab ADPAC:: Submit a list of all AUTHORIZED SIGNERS requiring the PROVIDER security key, the appropriate Provider Class, and Person class. This security key, provider class, and person class provides access to anatomic pathology setup tasks and authorization to electronically sign Autopsy protocol, SF515, and supplementary released reports. It also enables the AUTHORIZED SIGNERS to be listed as the Provider pathologist of the pathology case in the released report. Without this key the pathologist/cytotechnologist will not be allowed to sign or release a report.

Information Resources Management (IRM)

To implement the **new** AP electronic signature functionality the following security keys, appropriate PROVIDER and PERSON CLASS **must** be assigned to all AUTHORIZED USERS (i.e., LIM/Lab ADPAC and AUTHORIZED SIGNERS) as requested by the LIM/Lab ADPAC:

1. IRM: Assign all AUTHORIZED USERS requiring access to the **new** Turn Electronic Signature On/Off [LRAP ESIG SWITCH] option the following four security keys:

- LRANAT security key
- LRAPSUPER security key
- LRLAB security key
- LRLIASON security key (this key should only be assigned to the LIM/Lab ADPAC)

2. IRM: Assign all AUTHORIZED USERS requiring access to the **new** Modify released pathology report [LRAPMRL] option the following two security keys:

- LRAPMOD security key (**NEW**)
- LRANAT security key

3. IRM: Assign all AUTHORIZED SIGNERS the following security key:

- LRVERIFY security key

4. IRM: Assign all AUTHORIZED SIGNERS the following security key:

- PROVIDER security key

5. IRM: Assign all AUTHORIZED SIGNERS the appropriate PROVIDER CLASS. Pathologists should have a Provider class of PHYSICIAN and Cytotechnologists should have a Provider class of CYTOTECHNOLOGIST. The CYTOTECHNOLOGIST Provider class will need to be added locally to the Provider class file.

6. IRM: Assign all AUTHORIZED SIGNERS the appropriate PERSON CLASS.

a) For those users assigned the PROVIDER CLASS containing PHYSICIAN, the PERSON CLASS can be one of the following examples:

Example:

- 77 Physicians (M.D. and D.O.)
 Physician/Osteopath
 Pathology, Anatomic & Clinical
- 78 Physicians (M.D. and D.O.)
 Physician/Osteopath
 Pathology, Anatomic
- 79 Physicians (M.D. and D.O.)
 Physician/Osteopath
 Pathology, Anatomic & Laboratory Medicine
- 81 Physicians (M.D. and D.O.)
 Physician/Osteopath
 Pathology, Chemical
- 82 Physicians (M.D. and D.O.)
 Physician/Osteopath
 Pathology, Clinical
- 84 Physicians (M.D. and D.O.)
 Physician/Osteopath
 Dermatopathology
- 86 Physicians (M.D. and D.O.)
 Physician/Osteopath
 Hematology: Pathology
- 89 Physicians (M.D. and D.O.)
 Physician/Osteopath
 Neuropathology

b) For those users assigned PROVIDER CLASS equal to CYTOTECHNOLOGIST, the PERSON CLASS must equal:

Example:

430 Technologists, Technicians and Other Technical Service
 Specialist/Technologist, Pathology
 Cytotechnology

NOTE: With the release of VHA Handbook 1106.1, PATHOLOGY AND LABORATORY MEDICINE SERVICE PROCEDURES, in June 2003, cytotechnologists have been given authority to sign out negative GYN Cytology reports, which qualifies them to be an AUTHORIZED SIGNER. A cytotechnologist, who is properly set up to sign out anatomic pathology reports, will be able to sign out and release SF515 reports for CY sections only.