

Consult/Request Tracking

User Manual



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Version 3.0

Department of Veterans Affairs (VA)

Office of Information & Technology (OIT)

Revision History

| Date | Patch | Description | Authors |
|---------|---------------------------|--|--------------------------------|
| 03/2018 | GMRC*3*92 | Update the VistA last name criteria. Applied up-to-date 508 standards and VA compliance to title page, Revision History table, headings, and footers. | N. Grimes K. Watson |
| 03/2018 | GMRC*3*89 | Modified SF 513 images (Image 1 and Image 2) to reflect addition of Age and Cell Phone fields. Added info re: set up of a secondary printer for SF 513. Added info on new Consult Closure Tool. | T. Turowski R. Beltran-West |
| 02/2016 | GRMC*3*81 | Changed the Earliest Appropriate Date to Clinically Indicated Date. Pages: 16, 22, 33, 64 | T. Robinson K. Condie |
| 08/2014 | GMRC*3*75 | Modified description to CONSULT/REQUEST UPDATED ; added description of HCPS and RAS to Glossary. | J. Pappas P. Yeager |
| 01/2015 | GMRC*3*82 | Modified SF 513 Images to reflect SSN format change. | D Burger P Behuniak |
| 02/2014 | GMRC*3*73 | ICD-10 Remediation | J. Green C. Hinton |
| 02/2014 | GMRC*3*73 | Added info to description for CONSULT/REQUEST UPDATED and Consult/Request Has an Added Comment . | J. Green |
| 08/2011 | GMRC*3*71 | Modified description for CONSULT/REQUEST UPDATED | G. Werner |
| 02/2011 | | Earliest Appropriate Date Patch 66 | C. Arceneau K. Condie |
| 08/2009 | | Combat Veteran (CV) status added to SF 513 | C. Arceneaux K. Condie |
| 04/2006 | | Updates/corrections to patient and provider names to comply with SOP 192-352 | J. Green P. Landy |
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| 06/2002 | | Include Patch 25 | |
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| 11/2001 | | Include Patch 17 | |
| 06/2001 | | Include Patch 21 | |
| 02/2001 | | Include Patch 15, 19, & 20 | |
| 10/2000 | | Include Patches 13, 14, 16, & 18 | |
| 07/2000 | | Add Patches 6 thru 8, 11, & 12 | |
| 09/1998 | | Include Patches 1 thru 5 | |
| 12/1997 | | Initial Release | |

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Introduction

The *Consult/Request Tracking User Manual* provides descriptions of Consults' options and other information required to effectively use the Consult/Request Tracking package (or Consults).

This manual is for people who use the Consults package in the course of their hospital duties, including:

- Care providers: doctors, nurses, pharmacists, and therapists who make or service requests for consultations on patients.
- Clerical staff, who assist the above-mentioned people.
- Quality Assurance and management, who have an interest in seeing that VA patients receive the best possible care.
- Consults functionality is available from a Windows interface (GUI—Graphical User Interface) on a PC workstation or from a roll-and-scroll List Manager (LM) interface on a traditional CRT (Cathode Ray Tube) terminal or terminal emulation software on a PC workstation.

You can pull out parts of this manual, such as the **User Introduction to GUI** section or the **Package Operation** section, to use for unit training or reference. General parts of this manual, such as the **Package Orientation** section, have been written with examples from Consults to make the general information more meaningful to this application.

Overview

Purpose

Consult/Request Tracking package V. 3.0 improves the quality of patient care by:

- Interfacing with CPRS to provide an efficient mechanism for clinicians to order consults and procedure requests.
- Providing consulting services with the ability to update and track the progress of a consult/procedure request from the point of receipt through its final resolution.
- Providing results reporting that includes doctor's notes and comments entered during the tracking process.

Relationship to Other Packages

The Consults package works with the following packages:

- Computerized Patient Record System (CPRS)
- Text Integration Utilities (TIU)

Relationship of Consults to CPRS

From CPRS Actions to Consults:

- Ordering
- Order checking
- Order updates via HL7 messages
- Inter-Facility Consults via HL7 messages
- Tracking Consults activity
- Resulting TIU and Consults
- Notifications

From Consults actions to CPRS:

- Consult status changes update the CPRS order
- Forwarded and edit/resubmitted consults get a new service/correction order from CPRS
- Sends alerts based on consult activity

Relationship of Consults to TIU

From TIU Actions to Consults:

- Select a consult to associate with a note
- One consult link per consult note
- Sends TIU updates to consult package for:
- New consult note entered
 - Consult note completed
 - New addendum completed

Introduction

- Disassociate a note
- Extract notes for SF 513 and displays

From Consult Actions to TIU:

- A consult may have multiple notes associated with it.
- Lists the notes associated with a consult.
- Uses TIU to act on a note.
- Updates consult status and activity log from TIU updates.

Enhancements since Version 2.5

GMRC*3*73

This patch is part of the Computerized Patient Records System CPRSv30 project. This project will modify the Computerized Patient Record System, Text Integration Utilities, Consults, Health Summary, Problem List, Clinical Reminders, and Order Entry/Results Reporting to meet the requirements proposed by the Dept. of Health and Human Services to adopt ICD-10 code set standards Clinic Orders.

On January 16, 2009, the Centers for Medicare & Medicaid Services (CMS) released a final rule for replacing the 30-year-old ICD-9-CM code set with International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) and International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS) with dates of service, or date of discharge for inpatients, that occur on or after

October 1, 2015. The classification system consists of more than 68,000 codes, compared to approximately 13,000 ICD-9-CM codes. There are nearly 87,000 ICD-10-PCS codes, while ICD-9-CM has nearly 3,800 procedure codes. Both systems also expand the number of characters allotted from five and four respectively to seven alpha-numeric characters. This value does not include the decimal point, which follows the third character for the ICD-10-CM code set. There is no decimal point in the ICD-10-PCS code set. These code sets have the potential to reveal more about quality of care, so that data can be used in a more meaningful way to better understand complications, better design clinically robust algorithms, and better track the outcomes of care. ICD-10-CM also incorporates greater specificity and clinical detail to provide information for clinical decision-making and outcomes research.

This patch installs the necessary routine updates to make the GMRC package compliant with the mandate to use ICD-10 codes. The installation also contains one post-install routine that will populate the new PROVISIONAL DIAGNOSIS DATE (30.2) and PROVISIONAL DIAGNOSIS SYSTEM (30.3) fields for existing entries in the REQUEST/CONSULTATION (#123) file. The PROVISIONAL DIAGNOSIS DATE will be populated using the value pulled from FILE ENTRY DATE (.01) field. The PROVISIONAL DIAGNOSIS SYSTEM field will be populated with "ICD" to indicate these diagnoses are from the ICD-9-CM coding system. These fields are only populated for existing entries where the provisional diagnosis contains an ICD code. Consult records with a free-text diagnosis will not have these fields populated.

See page 76 for examples of new displays as a result of GMPL*2*73.

General Overview of Consults/Request Tracking

- Consults can be accessed through Windows NT, Windows 95, or a later Microsoft Windows version with the CPRS GUI Interface or through the List Manager (LM) interface.
- Consult ordering is managed by CPRS Order Entry from within the CPRS Order tab. This includes Quick Orders.
- Consult resulting is based on TIU Consult Notes, Medicine package results, and provider comments.
- Services must be defined within the ALL SERVICES hierarchy in order to access their consults and requests.
- Tracking services are not orderable unless the user is an update user for the service or its parent service.
- The ordering provider may edit and resubmit a consult after it has been canceled.

Alert Actions

- Users can process consult service update actions from the alert.
- The recipient of an alert for a cancelled request can edit and resubmit the request from the alert .

Reporting

- The Standard Form 513 is based on a hard-coded consults routine instead of the OE/RR Print Formats. This facilitates results printing when the consult reaches final resolution.
- A report with completion time statistics has been added.
- A report with pending consults has been added.
- Lists of consults can be viewed by order status, service, and/or date range.

Communications

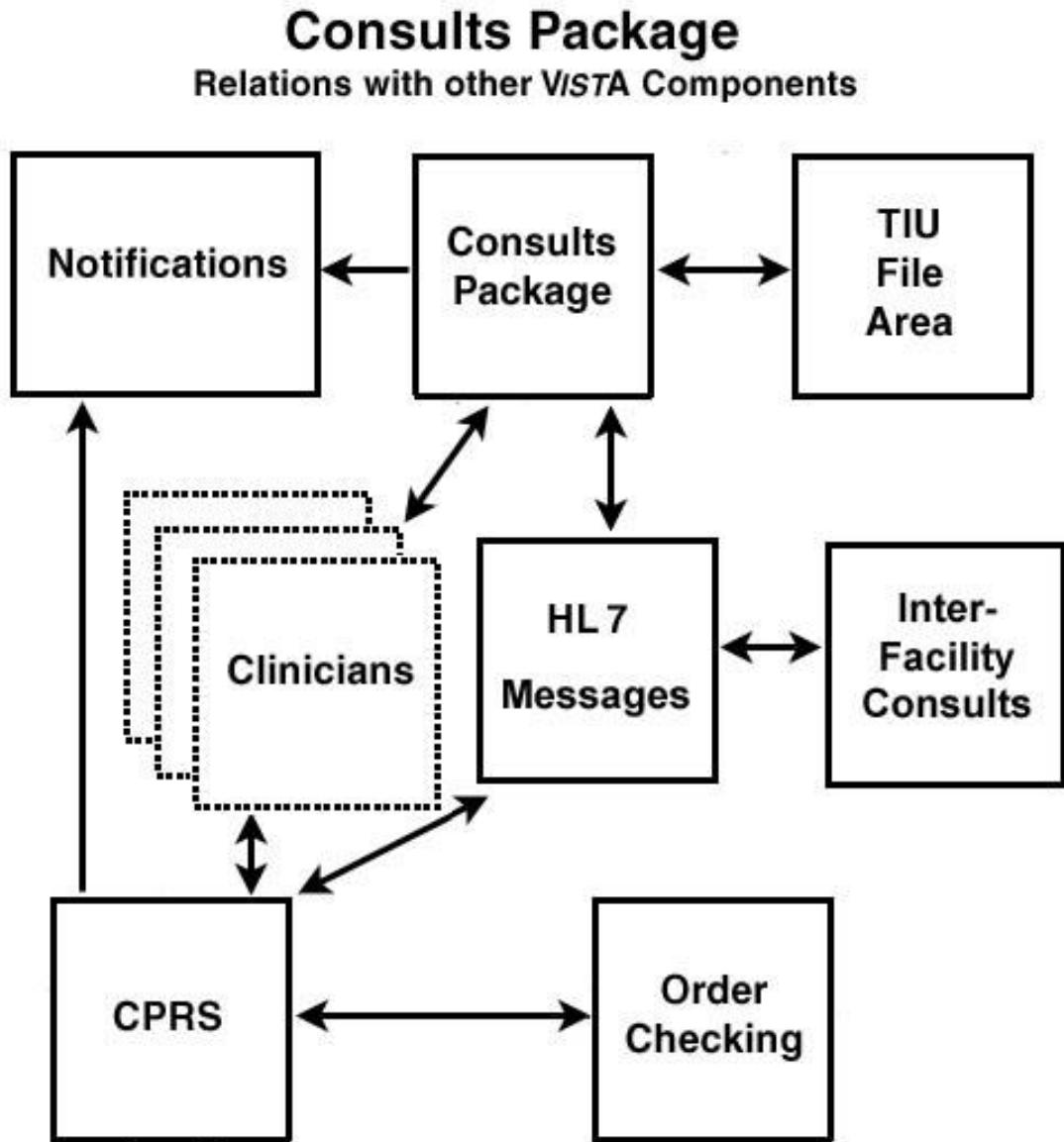
- HL7 messages and protocols are the communications medium between CPRS and Consults.

Setup

Consult services have a related entry in the CPRS Orderable Items file (#101.43). Management of procedures and services must be done through Consult options.

Relations with other VistA Components

The Consults package communicates with CPRS through HL7 messages. Order Checking receives information from the Consults package through CPRS. Notifications is the only major package that Consults communicates with directly. When the requesting clinician signs the order, Consults sends a notification to the consulting physician and when the consulting physician signs the final report, Consults sends a notification to the requesting physician.



Inter-Facility Consults (IFC) are requested, acted upon, and viewed the same way as regular Consults. Typically consults that are handled at a different facility have the remote facility indicated in their title, such as “Eye Exam—Salt Lake.” The software uses HL7 messaging in the background to communicate inter-facility consults and actions between cooperating facilities. Results are filed at the resulting facility, but since CPRS uses Remote Data Views in the

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background to access the results, users do not need to treat Inter-Facility Consults any differently.

Related Manuals and Other References

If you are an ADPAC or IRM personnel, the *Consult/Request Tracking Technical Manual* would probably aid in your understanding of Consults setup and operation.

Consults is installed with CPRS, so the *CPRS Installation Guide* is the appropriate manual to refer to on installation issues that aren't covered in the *Consult/Request Tracking Technical Manual*.

TIU provides boilerplate text and other text-oriented services. The *TIU Clinical Coordinator & User Manual* would assist you in using these features.

Consults package is highly integrated with CPRS. As such, any Consults package user should be familiar with the *CPRS Clinician's Getting Started Guide* and the *CPRS Clinical Coordinator & User Manual*.

See our web pages at:

vista.med.va.gov/consults
and
vista.med.va.gov/cprs

Package Management

Service Update and Tracking Security

Your ADPAC can use the Consult Service User Management option, in conjunction with availability to various menus and options, to control access to Consults functionality. The menus that can be provided to you are:

Consult Service Tracking

The Consult Service Tracking menu provides access to basic consult tracking functions and reports, but can also provide complete update capabilities if you have been granted update privileges by your ADPAC.

Individual options in the Consults package that may be useful to you, and what access they provide, are detailed in the following table:

| Option | Services |
|-------------------------------------|---|
| Consult Service Tracking | Tracking and/or update functionality depending upon your individual privileges. |
| Completion Time Statistics | Reporting. |
| Service Consults Pending Resolution | Reporting. |

With the GMRC Service User Management option, your ADPAC can set you up to be an update user for one or more services at your hospital. In addition, the ADPAC can grant the ability to receive consult notifications according to criteria outlined in the following table:

| Category | Notifications Received |
|---|--|
| UPDATE USERS W/O NOTIFICATIONS | Unless otherwise set up, will not receive notifications. |
| UPDATE TEAMS W/O NOTIFICATIONS | Unless otherwise set up, will not receive notifications. |
| UPDATE USER CLASS W/O NOTIFS | Unless otherwise set up, will not receive notifications. |
| SERVICE INDIVIDUAL TO NOTIFY | Receive consult notifications for your service. |
| SERVICE TEAM TO NOTIFY | Receive consult notifications for patients assigned to your team.* |
| NOTIFICATION BY PT LOCATION INDIVIDUAL TO NOTIFY | Receive all consult notifications for your service for patients in a specified ward. |
| NOTIFICATION BY PT LOCATION TEAM TO NOTIFY | Receive consult notifications for patients assigned to your team and in a specified ward |
| SPECIAL UPDATES INDIVIDUAL | An individual who has privileges to perform group status updates. |

These categories are not mutually exclusive, meaning you may receive notifications based on being present on one or more of the lists detailed in the foregoing table.

* NOTE: The service team does not receive the CONSULT/REQUEST UPDATED notification if another member of that team or an update user is the user adding the comment

| Privilege | Granted |
|-------------------------|-------------------------------|
| Originate a consult | Anyone with access to CPRS |
| Sign a consult | Anyone who can sign an order |
| Change a consult status | Anyone with update privileges |
| View or print a consult | Anyone with access to CPRS |

In summary, update user capabilities vary depending on

The option(s) that you are assigned.

Privileges granted in the Consults Service User Management option.

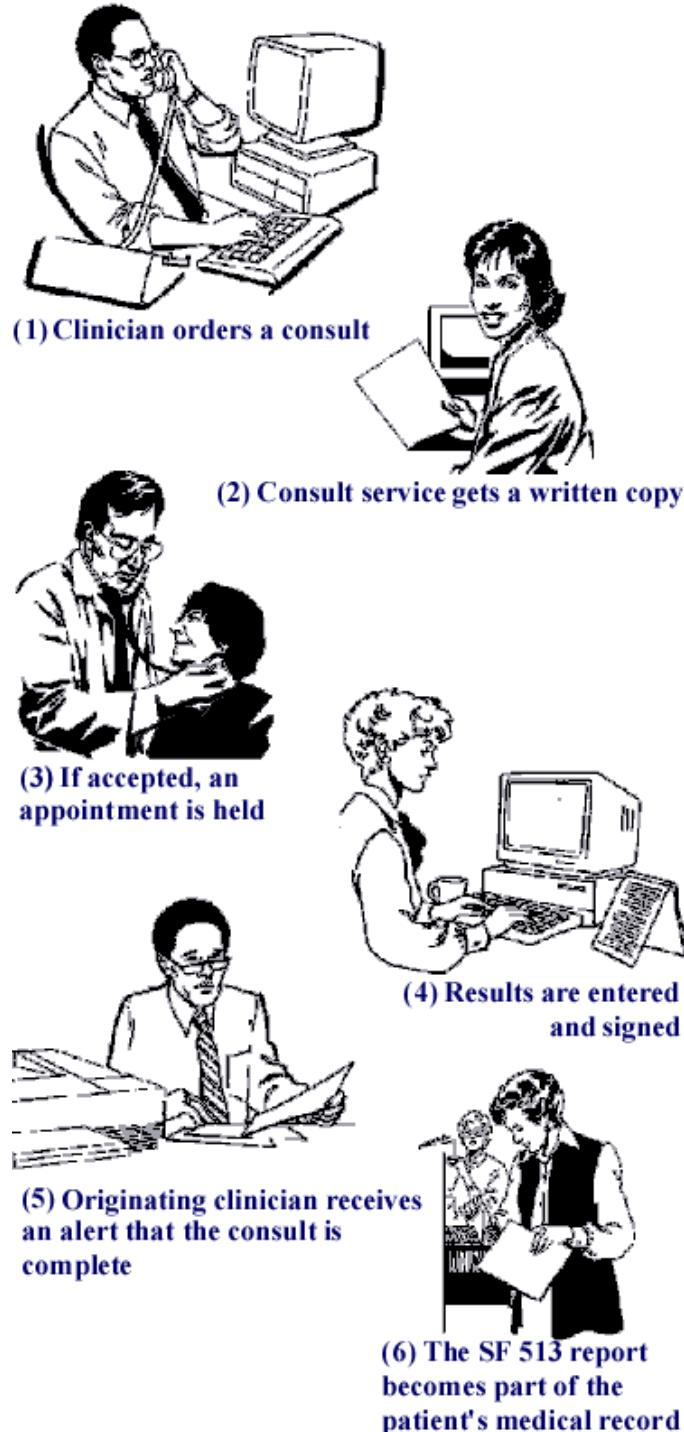
Package Operation

The operation of the Consults package involves multiple people, at various skill levels, in various parts of the hospital. A consult request may be entered by a clinician or a clerk under a clinician's direction. This request acts as a depository of information about itself. It collects notes and keeps records on everything that happens to it. When complete it becomes part of the patient's medical record.

In the pages that follow, we present this flow of information, and show the actions that must be taken at each step in the process. Many of these actions must be taken by persons other than those originating the consult.

Also, Consults uses CPRS during the initiation process and TIU during the completion process. In this section, we give some information about each of these packages that may help you in using Consults.

Typical Consults Information Flow



Workflow

1. **The clinician orders a consult.** While in a patient's CPRS medical record, a clinician enters an order for a consultation or procedure.
2. **The consult service gets a written copy.** An alert and a hard-copy of the SF 513 are sent to the consult service.
3. **If accepted, an appointment is held.** To accept the consult, the service uses the **receive** action. The service can also **discontinue** or **cancel** the consult. Cancelled consults can be edited and re-submitted by the ordering clinician.
4. **Results are entered and signed.** The consult service enters results and comments. Resulting is primarily done using TIU.
5. **The originating clinician receives an alert that the consult is complete.** The results can now be examined and further action taken on behalf of the patient.
6. **The SF 513 report becomes part of the patient's medical record.** A hard copy can be filed and the electronic copy is on line for paperless access.

1. The Clinician Orders a Consult

Consult orders can be entered:

From the CPRS medical record screen, Consults tab

CPRS GUI interface program, Consults tab

Ordering Within the CPRS Package

Primarily, Consult orders should be placed through the CPRS Add New Orders action.

In this manual we provide a step-by-step display of the process for ordering consult or procedures requests through the CPRS package. We first go through a brief list of steps, then we discuss each step in detail.

To Order a Consult:

- A. Select CPRS Clinician Menu (OE) from the Clinician Menu.
- B. Select the patient.
- C. Select Chart Contents then Consults.
- D. Select Order New Consult.
- E. Answer questions on the particulars of the request.

To go over in detail how to order a consult:

A. Select CPRS Clinician Menu (OE) from the Clinician Menu

Exactly how you do this option depends on how IRM or your ADPAC set up your menu. This example shows one way of performing step A.

```
Select Clinician Menu Option: ?
```

| | |
|----|--------------------------|
| OE | CPRS Clinician Menu |
| RR | Results Reporting Menu |
| AD | Add New Orders |
| RO | Act On Existing Orders |
| PP | Personal Preferences ... |

```
Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.
```

```
Select Clinician Menu Option: OE
```

The screen now looks like this:

| | | |
|--|----------------------------|-----------------|
| Patient Selection | Apr 07, 1999 14:51:30 | Page: 1 of 1 |
| Current patient: ** No patient selected ** | | |
| Patient Name | ID | DOB |
| No patients found. | | |
| Enter the number of the patient chart to be opened >>> | | |
| + Next Screen | CV Change View ... | FD Find Patient |
| - Previous Screen | SV (Save as Default List)Q | Close |
| Select Patient: Change View // | | |

B. Select the Patient

Select the patient as you would in any other package. Type a patient ID such as the patient's name, social security number, or the patient's last initial followed by the last 4 digits of the social security number. If more than one patient matches the key you entered, select the patient from the list presented on the screen.

| | | | | |
|--|--|--|--|--|
| Select Patient: Change View // C2342 | | | | |
| 1 C2342 CPRSPATIENT,TWO 03-04-32 666902342 MILITARY RETIREE | | | | |
| 2 C2342 CPRSPATIENT,TWELVE 02-03-23 666242342 MILITARY RETIREE | | | | |
| CHOOSE 1-2: 2 CPRSPATIENT,TWELVE 02-03-23 666242342 MILITARY RETIREE | | | | |
| Searching for the patient's chart ... | | | | |

(Continued on the next page.)

The screen now looks something like this:

| | | |
|--|-----------------------|-----------------------|
| Cover Sheet | Feb 13, 1999 12:53:14 | Page: 1 of 2 |
| CPRSPATIENT, TWELVE 666-24-2342 | 1A/B-1 | FEB 3,1923 (74) <CA> |
| PrimCare: CPRSProvider, Three | PCTeam: GOLD | |
| | | |
| Item | Entered | |
| Allergies/Adverse Reactions | | |
| 1 BEESWAX (hives, itching, watering eyes, anxiety) | 03/28/97 | |
| | | |
| Patient Postings | | |
| 2 CRISIS NOTE | 02/25/97 12:18 | |
| | | |
| Recent Vitals | | |
| No data available | | |
| | | |
| Immunizations | | |
| No immunizations found. | | |
| | | |
| Eligibility | | |
| Not Service Connected | | |
| + Enter the numbers of the items you wish to act on. >>> | | |
| NW Enter New Allergy/ADR CV (Change View ...) | SP Select New Patient | |
| AD Add New Orders | CC Chart Contents ... | Q Close Patient Chart |
| Select: Next Screen// | | |

C. Select Chart Contents then Consults

To get to the menu containing Order New Consults, you must go through the Chart Contents menu, then select the Consults screen. This can be done in one step by typing:

CC;CON

| | | |
|--|-----------------------|-----------------------|
| All Consults | Feb 13, 1998 12:56:32 | Page: 1 of 1 |
| CPRSPATIENT, TWELVE 666-24-2342 | 1A/B-1 | FEB 3,1923 (74) <CA> |
| PrimCare: CPRSProvider, Three | PCTeam: GOLD | |
| | | |
| Consult/Procedure | Requested | Status |
| 1 CARDIOLOGY Consult | 02/25/97 11:02 | complete |
| | | |
| Enter the numbers of the items you wish to act on. >>> | | |
| NW Enter New Allergy/ADR CV (Change View ...) | SP Select New Patient | |
| AD Add New Orders | CC Chart Contents ... | Q Close Patient Chart |
| Select: Chart Contents// | | |

D. Select Order New Consult

Type NW and press the <Enter> key.

Answer Questions on the Particulars of the Request

```
Select: Chart Contents// NW Order New Consult

Consult          Procedure

Order new: C Consult
Delay release of these orders? NO// <Enter>
Consult to Service/Specialty: POD FOOT CLINIC FOOT CLINIC
Reason for Request:
 1>PERSISTENT SMALL FISSURES AND SCALING ON BOTH FEET.
 2>
EDIT Option:
Category: INPATIENT// <Enter>
Urgency: ROUTINE// ???
Select from:
 1 STAT
 2 ROUTINE
 3 WITHIN 48 HOURS
 4 WITHIN 72 HOURS
 5 EMERGENCY
Select the urgency indicating how quickly results from this consult are needed.

Urgency: ROUTINE// <Enter>
Clinically indicated date:TODAY// <Enter>◀
Place of Consultation: Bedside// ?  

Select from:
 1 Bedside
 2 Consultant's Choice
Select the preferred place to see the patient for this consult.

Place of Consultation: Bedside// <Enter>
Attention: CPRS PROVIDER, THREE CT PHYSICIAN
Provisional Diagnosis: TINEA PEDIS

-----
Consult to Service/Specialty: Podiatry
  Reason for Request: PERSISTENT SMALL FISSURES AND SCALING ON ...
  Category: INPATIENT
  Urgency: ROUTINE
  Place of Consultation: Bedside
    Attention: CPRSPROVIDER, THREE
    Provisional Diagnosis: TINEA PEDIS
-----

(P)lace, (E)dit, or (C)ancel this order? PLACE// <Enter>
... order placed.

Add another Consult order? NO//
```

(Continued on the next page.)

If the request is for a future service, such as an EKG in 6 months, then enter the future date here.

Package Reference

The screen now looks something like this:

| | | |
|--|------------------------|-----------------------|
| All Consults | Feb 13, 1998 12:58:32 | Page: 1 of 1 |
| CPRSPATIENT, TWELVE 666-24-2342 | 1A/B-1 FEB 3,1923 (74) | <CA> |
| PrimCare: CPRSPProvider, Three | PCTeam: GOLD | |
| 1 Consult/Procedure | Requested | Status |
| 1 CARDIOLOGY Consult | 02/25/97 11:02 | complete |
| Enter the numbers of the items you wish to act on. >>> | | |
| NW Enter New Allergy/ADR CV | (Change View ...) | SP Select New Patient |
| AD Add New Orders | CC Chart Contents ... | Q Close Patient Chart |
| Select: Chart Contents// | | |

Notice that the consult just entered is not yet displayed. It is not displayed until after you have signed the order.

Sign the Consult

```
+ Next Screen           $ Sign All Orders
- Previous Screen       Q Close
Select: Sign All Orders// $ Sign All Orders

Enter your Current Signature Code: SIGNATURE VERIFIED

Processing orders ...
```

Enter your
electronic signature
here.

When applied to an approved medical record, an electronic signature has the same legal weight as a signature made with a pen on paper. For this reason electronic signatures are part of the overall security system maintained by IRMS.

When the computer prints a document that has been signed and/or cosigned, an electronic signature block is included. What appears in this block is user configurable through the User's Toolbox option.

In this example we change a title and electronic signature:

```
Select Consult Service Tracking Option: ???

CS      Consult Service Tracking [GMRC SERVICE TRACKING]
PC      Service Consults Pending Resolution [GMRC RPT PENDING CONSULTS]
ST      Completion Time Statistics [GMRC COMPLETION STATISTICS]

Or a Common Option:

CWA      Patient Warning (CWAD) Display [GMRPNCW]
MA       MailMan Menu ... [XMUSER]
TBOX     User's Toolbox ... [XUSERTOOLS]
VA       View Alerts [XQALERT]
        Continue [XUCONTINUE]
        **> Reverse lock ZZLUKE
        Halt [XUHALT]
        Restart Session [XURELOG]
        Time [XUTIME]
        Where am I? [XUSERWHERE]

You have PENDING ALERTS
        Enter "VA VIEW ALERTS" to review alerts

Select Consult Service Tracking Option: TBOX User's Toolbox

Select User's Toolbox Option: ?

        Display User Characteristics
        Edit User Characteristics
        Electronic Signature code Edit
        Menu Templates ...
        Spooler Menu ...
        Switch UCI
        TaskMan User
        User Help

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.
```

Select User's Toolbox Option: **E**lectronic Signature code Edit
This option is designed to permit you to enter or change your Initials,
Signature Block Information, Office Phone number, and Voice and
Digital Pagers numbers.
In addition, you are permitted to enter a new Electronic Signature Code
or to change an existing code.

INITIAL: CRS// <Enter>
SIGNATURE BLOCK PRINTED NAME: CPRSPROVIDER, SEVEN// <Enter>
SIGNATURE BLOCK TITLE: DOCTOR// **MD**
OFFICE PHONE: **588-5029**
ANALOG PAGER: **4038**
DIGITAL PAGER: <Enter>

Enter your Current Signature Code: SIGNATURE VERIFIED

Your typing will not show.
ENTER NEW SIGNATURE CODE:
RE-ENTER SIGNATURE CODE FOR VERIFICATION:
DONE

Select User's Toolbox Option:

The electronic
signature is
typed here.

The new
signature is
typed here.

And here.

*NOTE: CONCERNING SPACES IN LAST NAMES OF PROVIDERS SIGNING CONSULTS

Providers with last names in VistA containing spaces who sign Consults – especially Inter-Facility Consults – should have spaces removed from their VistA last name. In certain situations, spaces in the provider's VistA last name may cause IFC Consults to fail to complete. Removing spaces from the VistA last will prevent this problem. Space removal can be accomplished two ways: by combining the parts of the last name or including a hyphen. For example, the name "DE LUCA" should be changed to "DELUCA". Another example: the unhyphenated last name "JONES SMITH" should be changed to "JONES-SMITH". Please contact your facility system access coordinator with your request to edit your VistA last name. Space removal is also recommended as part of VA name standardization; more details are described by Kernel patches XU*8*134 and XU*8*343.

The signature block, as changed in the example above, looks like this:

```
/es/CPRSPROVIDER, SEVEN  
MD
```

The /es/ annotation indicates that the medical document was electronically signed. If for some reason you do not sign an order at the time you write it, then the system enters the order into your list of alerts. Signing the order is then simply a matter of responding to the alert as in the following example:

```
You have PENDING ALERTS  
Enter "VA VIEW ALERTS to review alerts  
  
Select OE/RR Manager Menu Option: VA View Alerts  
  
1. CPRSPATIE (C0999): Order requires electronic signature.  
2. TIUPATIEN (T3456): New Consult/Request (Stat)  
  
Select from 1 to 2  
or enter ?, A I, F, P, M, R, or ^ to exit: 1  
Searching for the patient's chart ...  
  
Unsigned Orders Feb 13, 1999 13:01:58 Page: 1 of 1  
CPRSPATIENT, TWELVE 666-24-3456 1A/B-1 FEB 3, 1923 (74) <CA>  
PrimCare: CPRSProvider, Three PCTeam: GOLD  
  
Item Ordered Requestor Start Stop Sts  
1 CT ABDOMEN W&W/O CONT *UNSIGNED* | CPRSPROVIDER, THREE unr  
2 Discontinue CBC BLOOD WC LB# 269 | CPRSPROVIDER, TEN unr  
*UNSIGNED* |  
3 Change SODIUM SERUM SERUM WC to GLUCOSE | pend  
SERUM SERUM SP LB# 242 *UNSIGNED* |  
4 Change GLUCOSE SERUM SERUM SP to | pend  
POTASSIUM SERUM SERUM SP LB# 242 |  
*UNSIGNED* |  
  
Enter the numbers of the items you wish to act on. >>>  
+ Next Screen - Previous Screen Q Quit  
Select:Quit// 1
```

Package Reference

| Unsigned Orders CPRSPATIENT, TWELVE 666-24-2342 PrimCare: CPRSPProvider, Three | Feb 13, 1998 13:02:58 1A/B-1 PCTeam: GOLD | Page: 1 of 1 FEB 3, 1923 (74) <CA> | | | | | | | | | | | | | | | | | | | | |
|--|---|---------------------------------------|--------------|-----------|------------|-----|------------------------------------|---------------------|--|-----|--|-------------------|--|-----|--|--|--|------|--|--|--|------|
| <table border="1"> <thead> <tr> <th>Item Ordered</th> <th>Requestor</th> <th>Start Stop</th> <th>Sts</th> </tr> </thead> <tbody> <tr> <td>1 CT ABDOMEN W&W/O CONT *UNSIGNED*</td> <td>CPRSProvider, THREE</td> <td></td> <td>unr</td> </tr> <tr> <td>2 Discontinue CBC BLOOD WC LB# 269 *UNSIGNED*</td> <td>CPRSProvider, TEN</td> <td></td> <td>unr</td> </tr> <tr> <td>3 Change SODIUM SERUM SERUM WC to GLUCOSE SERUM SERUM SP LB# 242 *UNSIGNED*</td> <td></td> <td></td> <td>pend</td> </tr> <tr> <td>4 Change GLUCOSE SERUM SERUM SP to POTASSIUM SERUM SERUM SP LB# 242 *UNSIGNED*</td> <td></td> <td></td> <td>pend</td> </tr> </tbody> </table> | | | Item Ordered | Requestor | Start Stop | Sts | 1 CT ABDOMEN W&W/O CONT *UNSIGNED* | CPRSProvider, THREE | | unr | 2 Discontinue CBC BLOOD WC LB# 269 *UNSIGNED* | CPRSProvider, TEN | | unr | 3 Change SODIUM SERUM SERUM WC to GLUCOSE SERUM SERUM SP LB# 242 *UNSIGNED* | | | pend | 4 Change GLUCOSE SERUM SERUM SP to POTASSIUM SERUM SERUM SP LB# 242 *UNSIGNED* | | | pend |
| Item Ordered | Requestor | Start Stop | Sts | | | | | | | | | | | | | | | | | | | |
| 1 CT ABDOMEN W&W/O CONT *UNSIGNED* | CPRSProvider, THREE | | unr | | | | | | | | | | | | | | | | | | | |
| 2 Discontinue CBC BLOOD WC LB# 269 *UNSIGNED* | CPRSProvider, TEN | | unr | | | | | | | | | | | | | | | | | | | |
| 3 Change SODIUM SERUM SERUM WC to GLUCOSE SERUM SERUM SP LB# 242 *UNSIGNED* | | | pend | | | | | | | | | | | | | | | | | | | |
| 4 Change GLUCOSE SERUM SERUM SP to POTASSIUM SERUM SERUM SP LB# 242 *UNSIGNED* | | | pend | | | | | | | | | | | | | | | | | | | |
| Enter the numbers of the items you wish to act on. >>> | | | | | | | | | | | | | | | | | | | | | | |
| Change Sign Discontinue Detailed Display | | | | | | | | | | | | | | | | | | | | | | |
| Select action: S Sign | | | | | | | | | | | | | | | | | | | | | | |
| -- CT ABDOMEN W&W/O CONT -- | | | | | | | | | | | | | | | | | | | | | | |
| Enter your Current Signature Code: SIGNATURE VERIFIED | | | | | | | | | | | | | | | | | | | | | | |
| CT ABDOMEN W&W/O CONT signed. Print CHART COPY for the orders: YES// <Enter> YES DEVICE: LTA35// <Enter> C-ITOH 300 LINE PRINTER DO YOU WANT YOUR OUTPUT QUEUED? NO// <Enter> (NO) | | | | | | | | | | | | | | | | | | | | | | |
| <div style="border: 1px solid black; padding: 5px;"> The electronic signature is typed here. </div> | | | | | | | | | | | | | | | | | | | | | | |
| Unsigned Orders CPRSPATIENT, TWELVE 666-24-2342 PrimCare: CPRSPProvider, Three | Feb 13, 1998 13:03:58 1A/B-1 PCTeam: GOLD | Page: 1 of 1 FEB 3, 1923 (74) <CA> | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th>Item Ordered</th> <th>Requestor</th> <th>Start Stop</th> <th>Sts</th> </tr> </thead> <tbody> <tr> <td>1 CT ABDOMEN W&W/O CONT *UNSIGNED*</td> <td>CPRSProvider, ONE</td> <td></td> <td>unr</td> </tr> <tr> <td>2 Discontinue CBC BLOOD WC LB# 269 *UNSIGNED*</td> <td>CPRSProvider, TWO</td> <td></td> <td>unr</td> </tr> <tr> <td>3 Change SODIUM SERUM SERUM WC to GLUCOSE SERUM SERUM SP LB# 242 *UNSIGNED*</td> <td></td> <td></td> <td>pend</td> </tr> <tr> <td>4 Change GLUCOSE SERUM SERUM SP to POTASSIUM SERUM SERUM SP LB# 242 *UNSIGNED*</td> <td></td> <td></td> <td>pend</td> </tr> </tbody> </table> | | | Item Ordered | Requestor | Start Stop | Sts | 1 CT ABDOMEN W&W/O CONT *UNSIGNED* | CPRSProvider, ONE | | unr | 2 Discontinue CBC BLOOD WC LB# 269 *UNSIGNED* | CPRSProvider, TWO | | unr | 3 Change SODIUM SERUM SERUM WC to GLUCOSE SERUM SERUM SP LB# 242 *UNSIGNED* | | | pend | 4 Change GLUCOSE SERUM SERUM SP to POTASSIUM SERUM SERUM SP LB# 242 *UNSIGNED* | | | pend |
| Item Ordered | Requestor | Start Stop | Sts | | | | | | | | | | | | | | | | | | | |
| 1 CT ABDOMEN W&W/O CONT *UNSIGNED* | CPRSProvider, ONE | | unr | | | | | | | | | | | | | | | | | | | |
| 2 Discontinue CBC BLOOD WC LB# 269 *UNSIGNED* | CPRSProvider, TWO | | unr | | | | | | | | | | | | | | | | | | | |
| 3 Change SODIUM SERUM SERUM WC to GLUCOSE SERUM SERUM SP LB# 242 *UNSIGNED* | | | pend | | | | | | | | | | | | | | | | | | | |
| 4 Change GLUCOSE SERUM SERUM SP to POTASSIUM SERUM SERUM SP LB# 242 *UNSIGNED* | | | pend | | | | | | | | | | | | | | | | | | | |
| Enter the numbers of the items you wish to act on. >>> | | | | | | | | | | | | | | | | | | | | | | |
| + Next Screen - Previous Screen Q Quit | | | | | | | | | | | | | | | | | | | | | | |
| Select:Quit// <Enter> Quit | | | | | | | | | | | | | | | | | | | | | | |

2. The Consult Service Gets a Written Copy

The consult service receives an alert and a printed SF 513. The Consultation Form is automatically generated in the receiving clinic when the requesting physician signs the order. (In the case of Inter-Facility Consults, the request is routed to the resulting facility and printed there.) A Secondary Printer can be configured in VistA (see the *Consult/Request Tracking Technical Manual* for instructions). When configured, this automatically prints the SF 513 to both services whenever printing is requested.

Caution: The Consultation Form (SF 513) generated by this package for use by the receiving services is highly confidential and should be treated with the same security precautions as other patient medical record documents.

The computerized consultation form created and printed by this package may only be placed in a patient's medical record, as a valid medical form, if it has been authorized for medical record use by the Medical Records Committee at your facility.

| MEDICAL RECORD | CONSULTATION SHEET | |
|---|---|--|
| CPRSPATIENT, NINETY XXX-XX-9200 02/03/1904 (Age 113) | | |
| | NSC VETERAN CV ELIGIBLE Cell: (202) 555-1919 | |
| Consult Request: Consult | Consult No.: 10943 | |
| To: CARDIOLOGY From: 2B MED | Requested: 08/24/2009 11:00 am | |
| Requesting Facility: BOISE | ATTENTION: CPRSPROVIDER, SEVEN | |
| ===== | | |
| REASON FOR REQUEST: (Complaints and findings) Patient has a Hx of hypertrophic cardiomyopathy Dx'ed 3 years ago and seems to be somewhat stable. Lung fields appear slightly edematous on Chest X-Ray and we need an assessment of cardiac function prior to increasing Digitalis dosages. | | |
| ===== | | |
| PROVISIONAL DIAG: Cardiomyopathy, Hypertrophic (425.1) | | |
| ===== | | |
| REQUESTED BY: CPRSPROVIDER, TEN PHYSICIAN (Pager:) date: (Phone:) | PLACE: Bedside SERVICE RENDERED AS: Inpatient | URGENCY: Routine Clinically Indicated Jan 31, 2011 |
| ===== | | |
| W O R K I N G C O P Y | | |
| No Consultation Results available. | | |
| ===== | | |
| AUTHOR & TITLE: | DATE: | |
| ===== | | |
| ID #: _____ ORGANIZATION: | BOISE | REG #: _____ LOC: 2B MED |

Standard Form 513 (Rev 9-77)

3. If Accepted, an Appointment is Held

It is fairly common for a consult to be sent to the wrong clinic. For this reason it is very easy to forward a consult to another clinic. Simply use the FR (Forward Request) action to specify the new receiving clinic.

In this example, a Neurology consult is forwarded to Psychiatry at the discretion of the consulting physician:

```
Select OPTION NAME: ORMGR          OE/RR Manager Menu      menu
You have PENDING ALERTS
      Enter "VA  VIEW ALERTS"      to review alerts
Select OE/RR Manager Menu Option: VA  View Alerts
1.I CPRSPATIE (C3779): Critical High Lab: LITHIUM 5 02/06 10:51
2. ARTPATIEN (A9600): New Consult/Request (Today)
      Select from 1 to 12
      or enter ?, A I, F, P, M, R, or ^ to exit: 2
```

```
Consult/Request Alerts      Feb 13, 1999 13:06      Page: 1 of 1
CPRSPATIENT, TWELVE 666-24-3779      1A/B-1      FEB 3, 1923 (74) <CA>
Ward: 2B MED
      Requested St      No.      Consult/Procedure Request
185 02/12/97 p      1636 NEUROLOGY Consult

Enter ?? for more actions
RC Receive      CM Add Comment      DD Detailed Display
FR Forward      CT Complete/Update      RT Results Display
CX Cancel (Deny)      MA Make Addendum      PF Print Form 513
DC Discontinue      SC Schedule
Select Action: Quit// FR  Forward Consult

Forward Request To Another Service For Action.
Select the service to send the consult to.

Forward Consult to which Service/Specialty: PSYCHIATRY
Who is responsible for Forwarding the Consult: CPRSProvider, SEVEN      CS      HYN
Actual Date/Time of Activity: NOW// (Feb 13, 1999@14:24)
Urgency: Today// <Enter> Today
Enter COMMENT:
  1> List of symptoms indicates Psychiatry would give better work up.
  2> <Enter>
EDIT Option: <Enter>
```

(Continued on the next page.)

Package Reference

| | | |
|---------------------------------|--------------------|-----------------------|
| Consult/Request Alerts | Feb 13, 1998 13:07 | Page: 1 of 1 |
| CPRSPATIENT, TWELVE 666-24-3779 | 1A/B-1 | FEB 3, 1923 (74) <CA> |
| Number Date Stat Service | Procedure | |
| 185 02/12/97 p PSYCHIATRY | Consult | |

Enter ?? for more actions

| | | |
|------------------|--------------------|---------------------|
| RC Receive | CM Add Comment | DD Detailed Display |
| FR Forward | CT Complete/Update | RT Results Display |
| CX Cancel (Deny) | MA Make Addendum | PF Print Form 513 |
| DC Discontinue | SC Schedule | |

Select Action: Quit//

Receive the Consult

Performing the Receive action on a consult changes its status from Pending to Active. This puts your clinic on record as accepting responsibility for completing the consult.

There are two ways to receive a consult:

From a consult tracking screen.

From a notification alert of a new consult. See page 130 for an example of this method.

In the following example, we receive a consult from a consult tracking screen:

| | | |
|---------------------------------|-----------------------|---------------------------|
| CONSULT TRACKING | Oct 05, 2000 09:18:22 | Page: 1 of 1 |
| CPRSPATIENT, TWELVE 666-24-3779 | 1A/B-1 | FEB 3, 1923 (74) <CA> |
| | | Wt.(lb): No Entry |
| Requested St | No. | Consult/Procedure Request |
| 1 05/06/97 p | 226 | PSYCHIATRY Cons |
| Enter ?? for more actions | | |
| SP Select Patient | FR Forward | CT Complete/Update |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum |
| RC Receive | DC Discontinue | SF Sig Findings |
| SC Schedule | CM Add Comment | DD Detailed Display |
| Select: Quit// RC | Receive Request | RT Results Display |
| MA Remove Med Rslt | ER Edit/Resubmit | |

| | |
|--|----------------------|
| Who received it?: CPRSProvider, SEVEN | CS |
| Date/Time Actually Received: NOW// <Enter> | (NOV 01, 1997@09:05) |
| Enter COMMENT... | |
| 1>Pt will be seen ASAP | |
| 2> <Enter> | |
| EDIT Option: <Enter> | |

Package Reference

| | | |
|--|---------------------------------|--|
| CONSULT TRACKING CPRSPATIENT, TWELVE 666-24-3779 | Oct 05, 2000 09:18:22 1A/B-1 | Page: 1 of 1 FEB 3, 1923 (74) <CA> Wt.(lb): No Entry |
| Requested St No. Consult/Procedure Request 1 05/06/97 a 226 PSYCHIATRY Cons | | |
| Enter ?? for more actions | | |
| SP Select Patient | FR Forward | CT Complete/Update RT Results Display |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum PF Print Form 513 |
| RC Receive | DC Discontinue | SF Sig Findings RM Remove Med Rslt |
| SC Schedule | CM Add Comment | DD Detailed Display ER Edit/Resubmit |
| Select: Quit// | | |

4. Results are Entered and Signed

The consult service enters results and comments. When you request the Complete (CT) action from the Consults service tracking or CPRS Consults screen, VISTA shifts you into TIU. In the following example, we complete a consult and enter findings through Consult's link to TIU:

| |
|--|
| Select Consult Service Tracking Option: CS Consult Service Tracking |
| Select Patient: CPRSPATIENT, TWELVE 05-05-55 666553779 YES SC |
| VETERAN |
| Select Service/Specialty: ALL SERVICES// PULMONARY |
| List From Starting Date: ALL DATES // <Enter> ALL DATES |

Package Reference

| | | |
|---|---------------------------------|--|
| CONSULT TRACKING CPRSPATIENT, TWELVE 666-24-3779 | Oct 05, 2000 09:22:45 1A/B-1 | Page: 1 of 1 FEB 3, 1923 (74) <CA> Wt. (lb): 180 |
| Requested St No. Consult/Procedure Request 1 09/04/97 p 319 PULMONARY Cons | | |
| Enter ?? for more actions | | |
| SP Select Patient | FR Forward | CT Complete/Update |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum |
| RC Receive | DC Discontinue | SF Sig Findings |
| SC Schedule | CM Add Comment | DD Detailed Display |
| Select: Quit// CT | Complete | RT Results Display |
| PF Print Form 513 | RM Remove Med Rslt | ER Edit/Resubmit |

CHOOSE No. 1-2: **1**

Creating new progress note...
Patient Location: 2B
Date/time of Admission: 10/05/00 09:22
Date/time of Note: NOW
Author of Note: CPRSPROVIDER, SEVEN
...OK? YES// <Enter>

Calling text editor, please wait...

==[WRAP]===[INSERT]===< Patient: CPRSPATIENT, TWELVE >===[<PF1>H=Help]===
Mr. CPRSPatient's regimen is lacking in inhaled corticosteroids. Recognizing
that asthma is an inflammatory process, inhaled steroids are important
in controlling the inflammatory response. My practice for severely
out-of-control asthmatics is to use high-dose inhaled steroids,
typically vanceril, 16 puffs qid, with a spacing device such as the
Aerochamber. I would institute such a regimen while he is here.

Mr. CPRSPatient has an in-house pet dog and an outside pet cat. I have
told him that the cat should go, even if it is outdoors. Cat saliva
contains a glycoprotein that leaves residue on their coats and flakes
into the air; it is problematic for many asthmatics.

The purulent phlegm asthmatics have during exacerbations is usually
due to the eosinophils, not from infection. Antibiotics are usually
not necessary.

If you like, you may refer Mr. CPRSPatient to my clinic after discharge.

<=====T=====T=====T=====T=====T=====T=====T=====T=====T=====T=>=====T

(Continued on next page.)

Package Reference

| Saving MEDICINE CONSULT with changes... | Your electronic signature is typed here. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|---------------------|---------------------------|-----|---------------------------|---|----------|---|--------------------|-------------------|------------|--------------------|--------------------|--------------------|------------------|------------------|-------------------|------------|----------------|-----------------|--------------------|-------------|----------------|---------------------|------------------|----------------|--|--|--|
| Enter your Current Signature Code: SIGNATURE VERIFIED.. Print this note? No// Y YES Do you want WORK copies or CHART copies? CHART// <Enter> DEVICE: HOME// WORK OTC DO YOU WANT YOUR OUTPUT QUEUED? NO// Y (YES) Requested Start Time: NOW// <Enter> (Oct 05, 2000 09:23:05) Request Queued! | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>CONSULT TRACKING Oct 05, 2000 09:23:45 Page: 1 of 1 CPRSPATIENT, TWELVE 666-24-3779 1A/B-1 FEB 3, 1923 (74) <CA> Wt. (lb): 180</p> <table><thead><tr><th>Requested</th><th>St</th><th>No.</th><th>Consult/Procedure Request</th></tr></thead><tbody><tr><td>1</td><td>09/04/97</td><td>c</td><td>319 PULMONARY Cons</td></tr></tbody></table> <p>Enter ?? for more actions</p> <table><tbody><tr><td>SP Select Patient</td><td>FR Forward</td><td>CT Complete/Update</td><td>RT Results Display</td></tr><tr><td>CV Change View ...</td><td>CX Cancel (Deny)</td><td>MA Make Addendum</td><td>PF Print Form 513</td></tr><tr><td>RC Receive</td><td>DC Discontinue</td><td>SF Sig Findings</td><td>RM Remove Med Rslt</td></tr><tr><td>SC Schedule</td><td>CM Add Comment</td><td>DD Detailed Display</td><td>ER Edit/Resubmit</td></tr><tr><td colspan="4">Select: Quit//</td></tr></tbody></table> | | Requested | St | No. | Consult/Procedure Request | 1 | 09/04/97 | c | 319 PULMONARY Cons | SP Select Patient | FR Forward | CT Complete/Update | RT Results Display | CV Change View ... | CX Cancel (Deny) | MA Make Addendum | PF Print Form 513 | RC Receive | DC Discontinue | SF Sig Findings | RM Remove Med Rslt | SC Schedule | CM Add Comment | DD Detailed Display | ER Edit/Resubmit | Select: Quit// | | | |
| Requested | St | No. | Consult/Procedure Request | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | 09/04/97 | c | 319 PULMONARY Cons | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SP Select Patient | FR Forward | CT Complete/Update | RT Results Display | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum | PF Print Form 513 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RC Receive | DC Discontinue | SF Sig Findings | RM Remove Med Rslt | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SC Schedule | CM Add Comment | DD Detailed Display | ER Edit/Resubmit | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Select: Quit// | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |



Note: The Consult Closure Tool in VistA can be used to generate a team list of consults with a pending status that potentially need to be closed. The tool can be configured to search for consults by Clinic, Procedure, Service, and Order Item. The resulting list can be reviewed in CPRS, and consults can be closed using the tool within VistA. The *Consult/Request Tracking Technical Manual* provides instructions on using the tool.

5. The Originating Clinician Receives an Alert that the Consult is Complete

After the consult is complete, Notifications sends an alert (via FileMan Alerts) of the completion. This is done while you are in the menu terminal mode, as such:

```
CPRSPATIE (C8829) : Completed Consult CAR
TIUPATIEN (T2342) : Cancelled consult PLM
ARTPATIEN (A9898) : Completed Consult GASTROENTEROLOGY
CPRSPATIE (C8831) : Completed Consult PLM with Sig Findings
Enter "VA VIEW ALERTS to review alerts
```

Select Consult Service Tracking Option:

To receive an on-screen report of the results, respond as in the following example:

```
Select Consult Service Tracking Option: VA View Alerts
1. CPRSPATIE (C8829) : Completed Consult CAR
2. TIUPATIEN (T2342) : Cancelled consult PLM
3. ARTPATIEN (A9898) : Completed Consult GASTROENTEROLOGY
4. CPRSPATIE (C8831) : Completed Consult PLM with Sig Findings
Select from 1 to 4
or enter ?, A I, F, P, M, R, or ^ to exit
or RETURN to continue: 3
```

Processing alert: TIUPATIEN (T8829) : Completed Consult PLM

```
Consult/Request Alerts      Feb 26, 1999 14:56:57      Page: 1 of 1
TIUPATIENT, TWELVE 666-24-2342          1A/B-1      FEB 3, 1923 (74) <CA>
                                                Wt.(lb): No Entry
```

Requested St No. Consult/Procedure Request
1 01/08/99 c 1337 PULMONARY Cons

```
Enter ?? for more actions
SP Select Patient   FR Forward   CT Complete/Update   RT Results Display
CV Change View ... CX Cancel (Deny) MA Make Addendum PF Print Form 513
RC Receive          DC Discontinue SF Sig Findings RM Remove Med Rslt
SC Schedule         CM Add Comment  DD Detailed Display ER Edit/Resubmit
Compiling Result Display...
```

(Continued on next page.)

Package Reference

Here we select the Results Display (RT) action:

| | | |
|--------------------------------|-----------------------|-----------------------|
| Results Display | Feb 26, 1999 14:59:10 | Page: 1 of 1 |
| TIUPATIENT, TWELVE 666-24-2342 | 1A/B-1 | FEB 3, 1923 (74) <CA> |
| Consult No.: 1337 | | Wt. (lb): No Entry |

-----MEDICINE CS CONSULT-----

Pt should stay away from Oyster Crackers.

Signature: /es/CPRSPROVIDER,SEVEN Date: FEB 12, 1999@11:35:14

Source Information

| | |
|--------------------------------------|-------------------------|
| Document Status: COMPLETED | Author: CPRSPROVIDER, S |
| Entry Date: FEB 12, 1999@11:32 | Expected Cosigner: None |
| Expected Signer: CPRSPROVIDER, SEVEN | TIU Document #: 5365 |
| Entered By: CRS | |
| Urgency: None | |

===== Enter ?? for more actions =====

Select Action: Quit//

6. The SF 513 Report Becomes Part of the Patient's Medical Record

After the consult is complete, Consults sends an alert to the requesting physician. The requesting physician can use the Print Report action to obtain a copy of the final Consults report. In the following example, the consult we want to print has already been selected:

| CONSULT TRACKING | | Feb 13, 1998 13:20:44 | Page: 1 of 1 |
|--|----|-----------------------|-----------------------------------|
| CPRSPATIENT, TWELVE 666-24-3779 | | 1A/B-1 | FEB 3, 1923 (74) <CA> |
| | | | Wt. (lb): 178 |
| Requested | St | No. | Consult/Procedure Request |
| 1 11/01/97 | c | 675 | PULMONARY Consult |
| 2 10/28/97 | a | 506 | <MEDICINE EAST> Consult |
| 3 07/21/97 | c | 285 | PULMONARY Pulmonary Function Test |
| Enter ?? for more actions SP Select Patient FR Forward CT Complete/Update RT Results Display CV Change View ... CX Cancel (Deny) MA Make Addendum PF Print Form 513 RC Receive DC Discontinue SF Sig Findings RM Remove Med Rslt SC Schedule CM Add Comment DD Detailed Display ER Edit/Resubmit Select: Quit// PT Print Form | | | |
| Chart Copy (Y/N) Y// <Enter> DEVICE: HOME// ;;9999 HOME | | | |

(Continued on next page)

Package Reference

| MEDICAL RECORD | CONSULTATION SHEET | |
|--|---|--|
| CPRSPATIENT, FOUR XXX-XX-4442 03/03/1960 Age: 57 123 SESAME ST. APT. 4 SALT LAKE CITY UTAH 84101 Phone: 801-555-1289 Cell: 801-555-1010 | SERVICE CONNECTED 50% to 100% SC VETERAN | |
| Consult Request: Consult | Consult No.: 675 | |
| To: PULMONARY From: NOT 2B | Requested: 11/01/1997 10:13 am | |
| Requesting Facility: ELY | ATTENTION: CPRSPROVIDER, TWO | |
| Current Primary Care Provider: CPRSPROVIDER, SEVEN Current Primary Care Team: GOLD TEAM | | |
| REASON FOR REQUEST: (Complaints and findings) Pt experiences shortness of breath when out of bed. | | |
| PROVISIONAL DIAG: CHEESE HANDLER'S LUNG | | |
| REQUESTED BY: CPRSPROVIDER, SEVEN Chief of Surgery (Pager: 9999) (Phone: 1234) | PLACE: Bedside SERVICE RENDERED AS: Inpatient | URGENCY: Routine |
| W O R K I N G C O P Y CONSULTATION NOTE #2330 | | |
| TITLE: PULMONARY CS CONSULT DATE OF NOTE: NOV 01, 1997@10:15:35 ENTRY DATE: NOV 01, 1997@10:15:35 AUTHOR: CPRSPROVIDER, SEVEN EXP COSIGNER: URGENCY: STATUS: COMPLETED | | |
| At the time I went to examine the pt, he was acutely broncho-spastic and in moderately severe respiratory distress. I had him deliver a puff of albuterol with an Aerochamber; his technique was poor. I then instructed him and delivered an additional four puffs, which he did with good technique. He was improved and with a clear lung exam within a few seconds (though wheezes were still present on forced expiration). | | |
| The pt regimen is lacking in inhaled corticosteroids. Recognizing that asthma is an inflammatory process, inhaled steroids are important in controlling the inflammatory response. My practice for severely out-of-control asthmatics is to use high-dose inhaled steroids, typically vanceril, 16 puffs qid, with a spacing device such as the Aerochamber. I would institute such a regimen while he is here. | | |
| /es/ CPRSPROVIDER, SEVEN Signed: 11/01/1997 10:17 | | |
| PROVISIONAL DIAG: Arrhythmia (427.9) | | |
| REQUESTED BY: CASEY, BEN CHIEF OF SURGERY (Pager:) (Phone:) | PLACE: Bedside SERVICE RENDERED AS: Inpatient | URGENCY: Routine CLINICALLY INDICATED DATE: Jan 31, 2011 |

See page 127 for details on the Print Report (PR) action.

Quick Orders

Quick Orders are a feature of CPRS that allow certain prompts to be automatically filled in by the computer. Your ADPAC can set them up (a subject that is discussed in the *CPRS Setup Guide*.)

CPRS is shipped with a number of quick orders. Number 91, EKG, Portable on the screen pictured below is one of them. These quick orders do not have any of the fields filled in. They are only provided as place-holders and limited examples of what is possible.

| | | |
|--|-------------------------|------------------------|
| Add New Orders | Feb 13, 1998 13:21:08 | Page: 1 of 1 |
| CPRSPATIENT, TWELVE 666-24-3779 | 1A/B-1 | FEB 3, 1923 (74) <CA> |
| 0 ORDER SETS... | 30 PATIENT CARE... | 70 LABORATORY... |
| 1 Patient Movement | 31 Condom Catheter | 71 Chem 7 |
| 2 Diagnosis | 32 Guaiac Stools | 72 T&S |
| 3 Condition | 33 Incentive Spirometer | 73 Glucose |
| 4 Allergies | 34 Dressing Change | 74 CBC w/Diff 75 PT |
| 10 PARAMETERS... | 40 DIETETICS... | 76 PTT |
| 11 TPR B/P | 41 Regular Diet | 77 CPK |
| 12 Weight | 42 TubeFeeding | 78 CPK |
| 13 I & O | 43 NPO at Midnight | 79 LDH |
| 14 Call HO on | 50 IV FLUIDS... | 80 Urinalysis |
| 20 ACTIVITY... | 51 OUTPATIENT MEDS... | 81 Culture & Suscept |
| 21 Ad Lib | 55 INPATIENT MEDS... | 90 OTHER ORDERS... |
| 23 Bed Rest / BRP | | 91 EKG: Portable |
| 24 Ambulate TID | 60 IMAGING ... | |
| 25 Up in Chair TID | 61 Chest 2 views PA&LAT | 99 Text Only Order |
| Enter the number of each item you wish to order. | | >>> |
| + Next Screen | TD Set Delay ... | Q Done |
| Select Item(s): Done// | | |

Basically, quick orders supply stock answers to some of the prompts required to make an order. For example, if we filled in the values for the placeholder EKG, Portable, we might answer the following questions in the quick order template:

| |
|---|
| Consult to Service/Specialty: Cardiology |
| Category: Inpatient |
| Place of Consult: Bedside |

These three prompts are then excluded when you select EKG from the orders screen—relieving you of the necessity of filling in answering several prompts.

The other four prompts, Reason for the Request, Urgency, Attention, and Provisional Diagnosis, are all left blank in the quick order template. The answer to these questions change every time we place an order for a portable EKG. These four questions are the only ones asked when you place an order for “EKG, Portable.”

Using the Consults Package with TIU Direct TIU Input

On page 27 are the directions for entering results from the Consult/ Result Tracking screen. You can also enter results directly from TIU. This may be preferable if you are doing large volumes of consults or it fits your office work flow.

The basic steps to entering findings through TIU given here are. The interested user should look at the *TIU Clinical Coordinator & User Manual* for further information.

1. From TIU, choose Integrated Document Management.

As with almost everything in VISTA, exactly how you do this depends on how your system is set up. If you cannot find this option on your menu, consult your ADPAC.

Example:

```
Select Progress Notes/Discharge Summary [TIU] Option: ?  
1 Progress Notes User Menu ...  
2 Discharge Summary User Menu ...  
3 Integrated Document Management ...  
4 Personal Preferences ...  
  
Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.  
  
Select Progress Notes/Discharge Summary [TIU] Option: 3 Integrated Document  
Management  
--- Clinician's Menu ---  
  
Select Integrated Document Management Option:
```

2. Select Enter/edit Document.

Example:

```
Select Integrated Document Management Option: ?  
1      Individual Patient Document  
2      All MY UNSIGNED Documents  
3      Multiple Patient Documents  
4      Enter/edit Document  
  
Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.  
Select Integrated Document Management Option: Enter/edit Document
```

3. Enter the patient's name.

Follow the usual VISTA conventions for selecting a patient.

Example:

```
Select PATIENT NAME: CPRSPATIENT,FIV          03-05-33      666332432      YES      SC VETERAN  
A: Known allergies  
Select TITLE:
```

4. Select a document title.

Using the standard help functions (?) or (??), you can see a list of titles that are available to you. Consult your supervisor or ADPAC about which one is appropriate to your situation.

Example:

```
Select TITLE: ?
Answer with TIU DOCUMENT DEFINITION NAME, or ABBREVIATION, or
      PRINT NAME
Do you want the entire TIU DOCUMENT DEFINITION List? Y (Yes)
Choose from:
ADVANCE DIRECTIVE      TITLE
ADVERSE REACTION/ALLERGY      TITLE
ASI-ADDICTION SEVERITY INDEX      TITLE
BP TEST NOTE      TITLE
CLINICAL WARNING      TITLE
CRISIS NOTE      TITLE
DISCHARGE SUMMARY      TITLE
MEDICINE CONSULT      TITLE

Select TITLE: MEDICINE CONSULT      TITLE

Creating new progress note...
    Patient Location: 2B
    Date/time of Admission: 05/10/96 10:17
    Date/time of Note: NOW
    Author of Note: CPRSPROVIDER,SEVEN
...OK? YES//  
You must link your Result to a Consult Request...

The following CONSULT REQUEST is available:
  1. JUL 16, 1997@06:08 278      PULMONARY
CHOOSE 1-1:
```

5. Choose the consult to enter findings.

TIU lists one or more active consults for the patient. Select the one you have findings for.
Example:

```
The following CONSULT REQUEST is available:
  1. JUL 16, 1997@06:08 278      PULMONARY
CHOOSE 1-1: 1  278

Calling text editor, please wait...
 1>
```

6. Enter and edit findings.

TIU enters the editor specified in your *VISTA* personal preferences. There are a number of alternate ways to enter findings in TIU. Consult the *TIU Clinical Coordinator & User Manual* for details.

Example:

```
Calling text editor, please wait...
1> No significant findings. Suggest respiratory therapy.
2>
EDIT Option:

Saving MEDICINE CONSULT with changes...

Enter your Current Signature Code:
```

7. Sign the findings.

At the prompt, enter your signature code. If you do not sign the document at this time, *VISTA* generates an alert to remind you to sign it at a later time.

There is a detailed discussion of electronic signatures under step 2, *Sign the Consult*.

8. Repeat for other patients.

After TIU accepts your signature, it prompts you for another patient name.

Example:

```
Enter your Current Signature Code: SIGNATURE VERIFIED..
```

Enter your electronic signature

```
You may enter another CLINICAL DOCUMENT. Press RETURN to exit.
```

Select PATIENT NAME:



Note: If your site supports the dictation and transcription of Consult results, you may also use the batch upload facility of TIU to support single-point transfer of Consult results in mixed batches (with Discharge Summaries, Progress Notes, etc.) for either in-house or contract transcription services.

Correcting Misdirected Results

Occasionally a consult result is linked to the wrong consult. If this is detected prior to signature, it is possible for the author of a consult result to re-direct the record to a different consult request by any of several methods, as illustrated in the examples below:

- Through the Link to Request action, when processing the alert for the unsigned consult result:
- Through the Individual Patient Document option (which is identical to the Browse action, accessible by a number of familiar paths from TIU Clinician's options, or through the CPRS LM Chart).
- You may choose the Link action from the All My Unsigned Documents Option.
- From the CPRS Chart.

Following signature, such corrections can only be made by those persons who are granted permission to do so under the Authorization/ Subscription Utility (ASU). Information on how to make this kind of correction is contained in the Consult/Request Tracking Technical Manual.

Examples:

You may redirect a consult result through the Link to Request action, when processing the alert for the unsigned consult result:

```
--- Clinician's Menu ---  
1 Progress Notes User Menu ...  
2 Discharge Summary User Menu ...  
3 Integrated Document Management ...  
4 Personal Preferences ...  
  
Select Progress Notes/Discharge Summary [TIU] Option: VA View Alerts  
1. CPRSPATIE (C0167P): PULMONARY CONSULT available for signature.  
2. ARTPATIEN (A1414): New order(s) placed.  
3. ARTPATIEN (A1414): New consult PLM (Routine)  
4. CPRSPATIE (C2432): New consult CAR (Routine)  
    Select from 1 to 4  
    or enter ?, A I, F, P, M, R, or ^ to exit: 1  
  
Opening PULMONARY CONSULT record for review...
```

(Continued on the next page.)

Package Reference

| | | |
|--|-----------------------|-----------------------------------|
| Browse Document | Jan 26, 1998 16:49:32 | Page: 1 of 1 |
| PULMONARY CONSULT | | |
| CPRSPATIENT, T 666-01-0167P PULMONARY CLINIC | | Visit Date: 01/26/98@16:37 |
| DATE OF NOTE: JAN 26, 1998@16:37:34 | | ENTRY DATE: JAN 26, 1998@16:37:34 |
| AUTHOR: TIUPROVIDER, THREE | | EXP COSIGNER: |
| URGENCY: | STATUS: UNSIGNED | |
| DEMOGRAPHICS: CPRSPATIENT, TWO 666-01-0167P 31 JAN 1, 1967 | | |
| His disposition is good. | | |
| <input type="button" value="+ Next Screen"/> <input type="button" value="- Prev Screen"/> <input type="button" value="?? More actions"/> <input type="button" value=""/> >>> | | |
| Find | Make Addendum | Identify Signers |
| Print | Sign/Cosign | Delete |
| Edit | Copy | Link ... |
| Select Action: Quit// L Link ... | | |

| | | |
|--|---------------|-------------------|
| Problem(s) | Patient/Visit | Link with Request |
| Specify Linkage: L Link with Request | | |
| You must link your Result to a Consult Request... The following CONSULT REQUEST(S) are available: | | |
| 1> JAN 23, 1998@11:14 759 PULMONARY 2> JAN 23, 1998@11:14 760 PULMONARY CHOOSE 1-2: 2 760 | | |
| Opening PULMONARY CONSULT record for review... | | |

| | | |
|--|-----------------------|-----------------------------------|
| Browse Document | Jan 26, 1998 16:49:32 | Page: 1 of 1 |
| PULMONARY CONSULT | | |
| CPRSPATIENT, T 666-01-0167P PULMONARY CLINIC | | Visit Date: 01/26/98@16:37 |
| DATE OF NOTE: JAN 26, 1998@16:37:34 | | ENTRY DATE: JAN 26, 1998@16:37:34 |
| AUTHOR: TIUPROVIDER, THREE | | EXP COSIGNER: |
| URGENCY: | STATUS: UNSIGNED | |
| DEMOGRAPHICS: CPRSPATIENT, TWO 666-01-0167P 31 JAN 1, 1967 | | |
| His disposition is good. | | |
| <input type="button" value="+ Next Screen"/> <input type="button" value="- Prev Screen"/> <input type="button" value="?? More actions"/> <input type="button" value=""/> >>> | | |
| Find | Make Addendum | Identify Signers |
| Print | Sign/Cosign | Delete |
| Edit | Copy | Link ... |
| Select Action: Quit// <Enter> Quit | | |

(Continued on the next page.)

Package Reference

```
1. CPRSPATIE (C2342): New order(s) placed.  
2. TIUPATIEN (T0167P): PULMONARY CONSULT available for signature.  
3. ARTPATIEN (A1414): New order(s) placed.  
4. ARTPATIEN (A1414): New consult PLM (Routine)  
5. CPRSPATIE (C2432): New consult CAR (Routine)  
    Select from 1 to 5  
    or enter ?, A I, F, P, M, R, or ^ to exit: <Enter>
```

2. Through the Individual Patient Document option as shown here (which is identical to the Browse action, accessible by a number of familiar paths from TIU Clinician's options, or through the CPRS LM Chart):

```
--- Clinician's Menu ---  
1 Progress Notes User Menu ...  
2 Discharge Summary User Menu ...  
3 Integrated Document Management ...  
4 Personal Preferences ...  
  
Select Progress Notes/Discharge Summary [TIU] Option: INtegrated Document Management  
  
--- Clinician's Menu ---  
1 Individual Patient Document  
2 All MY UNSIGNED Documents  
3 Multiple Patient Documents  
4 Enter/edit Document  
  
Select Integrated Document Management Option: INdividual Patient Document  
Select PATIENT NAME: CPRSPATIENT,TWO 01-01-67 666010167P ACTIVE DUTY  
A: Known allergies  
  
Available documents: 06/13/91 thru 01/26/98 (7)  
  
Please specify a date range from which to select documents:  
List documents Beginning: 06/13/91// T-1 (JAN 25, 1998)  
Thru: 01/26/98// <Enter> (JAN 26, 1998)  
  
1 01/26/98 16:37 PULMONARY CONSULT CPRSPROVIDER,TWO  
Visit: 01/26/98  
  
One document found within date range...  
  
Opening PULMONARY CONSULT record for review...
```

(Continued on the next page.)

Package Reference

| | | |
|---|-----------------------------------|----------------------------|
| Browse Document | Jan 26, 1998 16:49:32 | Page: 1 of 1 |
| PULMONARY CONSULT | | |
| CPRSPATIENT, T 666-01-0167P | PULMONARY CLINIC | Visit Date: 01/26/98@16:37 |
| DATE OF NOTE: JAN 26, 1998@16:37:34 | ENTRY DATE: JAN 26, 1998@16:37:34 | |
| AUTHOR: TIUPROVIDER, THREE | EXP COSIGNER: | |
| URGENCY: | STATUS: UNSIGNED | |
| DEMOGRAPHICS: CPRSPATIENT, TWO 666-01-0167P 31 JAN 1, 1967 | | |
| His disposition is good. | | |
| + Next Screen - Prev Screen ?? More actions >>> | | |
| Find | Make Addendum | Identify Signers |
| Print | Sign/Cosign | Delete |
| Edit | Copy | Link ... |
| Select Action: Quit// L Link ... | | |

| | | |
|--|---------------|-------------------|
| Problem(s) | Patient/Visit | Link with Request |
| Specify Linkage: L Link with Request | | |
| You must link your Result to a Consult Request... The following CONSULT REQUEST(S) are available: | | |
| 1> JAN 23, 1998@11:14 759 PULMONARY 2> JAN 23, 1998@11:14 760 PULMONARY | | |
| CHOOSE 1-2: 2 760 | | |
| Opening PULMONARY CONSULT record for review... | | |

(Continued on the next page.)

Package Reference

| | | |
|---|-----------------------|-----------------------------------|
| Browse Document | Jan 26, 1998 16:49:32 | Page: 1 of 1 |
| PULMONARY CONSULT | | |
| CPRSPATIENT, T 666-01-0167P PULMONARY CLINIC | | Visit Date: 01/26/98@16:37 |
| DATE OF NOTE: JAN 26, 1998@16:37:34 | | ENTRY DATE: JAN 26, 1998@16:37:34 |
| AUTHOR: TIUPROVIDER, THREE | EXP COSIGNER: | |
| URGENCY: | STATUS: UNSIGNED | |
| DEMOGRAPHICS: CPRSPATIENT, THREE 666-01-0167P 31 JAN 1, 1967 | | |
| His disposition is good. | | |
| + Next Screen - Prev Screen ?? More actions | | >>> |
| Find | Make Addendum | Identify Signers |
| Print | Sign/Cosign | Delete |
| Edit | Copy | Link ... |
| Select Action: Quit// <Enter> Quit | | |

Select PATIENT NAME: <Enter>

Nothing selected.

Package Reference

3. You may choose the Link action from the All My Unsigned Documents Option, as shown below:

```
--- Clinician's Menu ---  
1 Individual Patient Document  
2 All MY UNSIGNED Documents  
3 Multiple Patient Documents  
4 Enter/edit Document  
  
Select Integrated Document Management Option: All MY UNSIGNED Documents  
  
Searching for the documents.....
```

| MY UNSIGNED Documents | | Jan 26, 1998 16:51:18 | Page: | 1 of 3 |
|---|------------------------|---|--------------|------------|
| | | by AUTHOR (TIUPROVIDER, THREE) or EXPECTED COSIGNER | 40 documents | |
| 1 | PATIENT | Document | Ref Date | Status |
| 1 | CPRSPATIENT, T (C0167) | PULMONARY CONSULT | 01/26/98 | unsigned |
| 2 | ARTPATIENT, TW (A4321) | Adverse React/Allergy | 01/22/98 | unsigned |
| 3 | CPRSPATIENT, O (C8796) | Reparatory Therapy Note | 01/20/98 | uncosigned |
| 4 | CPRSPATIENT, F (R1350) | Reparatory Therapy Note | 01/16/98 | uncosigned |
| 5 | CPRSPATIENT, T (C9999) | Reparatory Therapy Note | 01/16/98 | uncosigned |
| 6 | CPRSPATIENT, T (C1350) | Reparatory Therapy Note | 01/15/98 | uncosigned |
| 7 | TIUPATIENT, EI (T1239) | Reparatory Therapy Note | 01/15/98 | uncosigned |
| 8 | CPRSPATIENT, T (C1563) | Reparatory Therapy Note | 01/14/98 | uncosigned |
| 9 | CPRSPATIENT, T (C1563) | Reparatory Therapy Note | 01/14/98 | uncosigned |
| 10 | PNPATIENT, FIV (P1350) | Reparatory Therapy Note | 01/14/98 | uncosigned |
| 11 | DSPATIENT, TEN (D6572) | Reparatory Therapy Note | 01/14/98 | uncosigned |
| 12 | HSPATIENT, ONE (H2591) | Reparatory Therapy Note | 01/14/98 | uncosigned |
| 13 | TIUPATIENT, EI (T1239) | Reparatory Therapy Note | 01/14/98 | uncosigned |
| 14 | TIUPATIENT, EI (T1239) | Reparatory Therapy Note | 01/14/98 | uncosigned |
| + Next Screen - Prev Screen ?? More Actions | | >>> | | |
| Find | Sign/Cosign | Change View | | |
| Add Document | Detailed Display | Copy | | |
| Edit | Browse | Delete Document | | |
| Make Addendum | Print | Quit | | |
| Link ... | Identify Signers | | | |

Select Action: Next Screen// L Link ...

| Problems | Patient/Visit | Link with Request |
|---|---------------|-------------------|
| Specify Linkage: L Link with Request | | |
| Select Document(s): (1-14): 1 | | |
| You must link your Result to a Consult Request... | | |
| The following CONSULT REQUEST(S) are available: | | |
| 1> JAN 23, 1998@11:14 759 PULMONARY | | |
| 2> JAN 23, 1998@11:14 760 PULMONARY | | |
| CHOOSE 1-2: 2 760 | | |

(Continued on next page.)

Package Reference

| MY UNSIGNED Documents | | Jan 26, 1998 16:51:32 | Page: | 1 of 3 |
|-------------------------------------|--|---|-----------------|--------|
| | | by AUTHOR (TIUPATIENT,THREE) or EXPECTED COSIGNER | 40 documents | |
| Patient | Document | Ref Date | Status | |
| 1 | CPRSPATIENT, T (C0167) PULMONARY CONSULT | 01/26/98 | unsigned | |
| 2 | ARTPATIENT, TW (A4321) Adverse React/Allergy | 01/22/98 | unsigned | |
| 3 | CPRSPATIENT, O (C8796) Reparatory Therapy Note | 01/20/98 | uncosigned | |
| 4 | CPRSPATIENT, F (R1350) Reparatory Therapy Note | 01/16/98 | uncosigned | |
| 5 | CPRSPATIENT, T (C9999) Reparatory Therapy Note | 01/16/98 | uncosigned | |
| 6 | CPRSPATIENT, T (C1350) Reparatory Therapy Note | 01/15/98 | uncosigned | |
| 7 | TIUPATIENT, EI (T1239) Reparatory Therapy Note | 01/15/98 | uncosigned | |
| 8 | CPRSPATIENT, T (C1563) Reparatory Therapy Note | 01/14/98 | uncosigned | |
| 9 | CPRSPATIENT, T (C1563) Reparatory Therapy Note | 01/14/98 | uncosigned | |
| 10 | PNPATIENT, FIV (P1350) Reparatory Therapy Note | 01/14/98 | uncosigned | |
| 11 | DSPATIENT, TEN (D6572) Reparatory Therapy Note | 01/14/98 | uncosigned | |
| 12 | HSPATIENT, ONE (H2591) Reparatory Therapy Note | 01/14/98 | uncosigned | |
| 13 | TIUPATIENT, EI (T1239) Reparatory Therapy Note | 01/14/98 | uncosigned | |
| 14 | TIUPATIENT, EI (T1239) Reparatory Therapy Note | 01/14/98 | uncosigned | |
| + ** Item 1 Reassigned. ** | | | | >>> |
| | Find | Sign/Cosign | Change View | |
| | Add Document | Detailed Display | Copy | |
| | Edit | Browse | Delete Document | |
| | Make Addendum | Print | Quit | |
| | Link ... | Identify Signers | | |
| Select Action: Next Screen// Q Quit | | | | |

| --- Clinician's Menu --- | |
|---|-----------------------------|
| 1 | Individual Patient Document |
| 2 | All MY UNSIGNED Documents |
| 3 | Multiple Patient Documents |
| 4 | Enter/edit Document |
| Select Integrated Document Management Option: | |

Package Reference

4. From the CPRS Chart, the dialog looks like this (NOTE: If CONSULTS is defined as a CLASS under CLINICAL DOCUMENTS, this approach is not yet available):

OE CPRS Clinician Menu
RR Results Reporting Menu
AD Add New Orders
RO Act On Existing Orders
PP Personal Preferences ...

Select Clinician Menu Option: **OE** CPRS Clinician Menu

Clinic PULMONARY CLINIC Jan 27, 1998 15:20:32 Page: 1 of 1
Current patient: ** No patient selected **

| Patient Name | ID | DOB | Appointment Date |
|--------------------|----|-----|------------------|
| No patients found. | | | |

Enter the number of the patient chart to be opened

+ Next Screen CV Change View ... FD Find Patient
- Previous Screen SV Save as Default List Q Close

Select Patient: Change View// **WINCHESTER, CHARLES EMERSON III** 01-01-67

107010167P ACTIVE DUTY
A: Known allergies

Searching the patient's chart ...

(Continued on the next page.)

Package Reference

Cover Sheet Jan 27, 1998 15:20:40 Page: 1 of 1
CPRSPATIENT, TWO 666-01-0167P1A JAN 1, 1967 (31) <A>

| | | |
|---|-----------------------------|----------|
| | Item | Entered |
| 1 | Allergies/Adverse Reactions | |
| | DUST | 10/07/97 |
| | Patient Postings | |
| | <None> | |
| | Recent Vitals | |
| | No data available | |
| | Immunizations | |
| | No immunizations found. | |
| | Eligibility | |
| | Not Service Connected | |

Enter the numbers of the items you wish to act on. >>>

NW Enter New Allergy/ADR CV (Change View ...) SP Select New Patient
AD Add New Orders CC Chart Contents ... Q Close Patient Chart

Select: Chart Contents// **CC;N** Chart Contents ...

Searching the patient's chart ...

| Signed Notes CPRSPATIENT, TWO | Jan 27, 1998 15:20:46 666-01-0167P1A | Page: 1 of 1 JAN 1, 1967 (31) <A> | | |
|----------------------------------|---|--------------------------------------|------------|-------|
| Currently viewing 17 notes | | | | |
| | Title | Written | Author | SigSt |
| 1 | PULMONARY CONSULT | 01/26 16:37 | RUSSELL,J | compl |
| 2 | Respiratory Therapy Note | 12/11 16:59 | RUSSELL,J | uncos |
| 3 | General Note | 10/16 /91 | NO,D | compl |
| 4 | General Note | 06/17 /91 | BUECHLER,M | compl |
| 5 | General Note | 06/13 /91 | MCCLENAH,M | compl |

Enter the numbers of the items you wish to act on. >>>

| | | |
|-------------------|-----------------------|-----------------------|
| NW Write New Note | CV Change View ... | SP Select New Patient |
| AD Add New Orders | CC Chart Contents ... | Q Close Patient Chart |

Select: Chart Contents// **CV** Change View ...

(Continued on the next page.)

Package Reference

| | | | |
|--|-----------------------|------------------------|--------------------------------|
| Signed Notes | Jan 27, 1998 15:20:46 | Page: | 1 of 1 |
| CPRSPATIENT, TWO | 666-01-0167P1A | JAN 1, 1967 (31) | <A> |
| Currently viewing 17 notes | | | |
| Title | Written | Author | SigSt <input type="checkbox"/> |
| 1 PULMONARY CONSULT | 01/26 16:37 | RUSSELL, J | compl |
| 2 Joel's Test Note | 12/11 16:59 | RUSSELL, J | uncos |
| 3 General Note | 10/16 /91 | NO, D | compl |
| 4 General Note | 06/17 /91 | BUECHLER, M | compl |
| 5 General Note | 06/13 /91 | MCCLENAH, M | compl |
| Enter the numbers of the items you wish to act on. >>> | | | |
| 1 all signed | 4 signed/author | Save as Preferred View | |
| 2 my unsigned | 5 signed/dates | Remove Preferred View | |
| 3 my uncosigned | | | |
| Select context: 2 my unsigned | | | |

Searching the patient's chart ...

| | | | |
|--|-----------------------|-----------------------|--------------------------------|
| Unsigned Notes | Jan 27, 1998 15:20:55 | Page: | 1 of 1 |
| CPRSPATIENT, TWO | 666-01-0167P1A | JAN 1, 1967 (31) | <A> |
| Currently viewing all unsigned notes | | | |
| Title | Written | Author | SigSt <input type="checkbox"/> |
| 1 PULMONARY CONSULT | 01/27 15:19 | RUSSELL, J | unsig |
| Enter the numbers of the items you wish to act on. >>> | | | |
| NW Write New Note | CV Change View ... | SP Select New Patient | |
| AD Add New Orders | CC Chart Contents ... | Q Close Patient Chart | |
| Select: Chart Contents// 1 | | | |

(Continued on the next page.)

Package Reference

| | | | | | | | | | | | |
|---|---|---|------|------------------|------------------|---------------|--------|------|------|-------|--------|
| Unsigned Notes CPRSPATIENT, TWO | Jan 27, 1998 15:20:55 666-01-0167P1A | Page: 1 of 1 JAN 1, 1967 (31) <A> | | | | | | | | | |
| Currently viewing all unsigned notes | | | | | | | | | | | |
| Title 1 PULMONARY CONSULT | Written 01/26 16:37 | Author SigSt <input type="checkbox"/> RUSSELL, J unsig | | | | | | | | | |
| <p>Enter the numbers of the items you wish to act on. >>></p> <table><tr><td>Edit</td><td>Detailed Display</td><td>Identify signers</td></tr><tr><td>Make Addendum</td><td>Browse</td><td>Copy</td></tr><tr><td>Sign</td><td>Print</td><td>Delete</td></tr></table> <p>Select Action: BR Browse</p> | | | Edit | Detailed Display | Identify signers | Make Addendum | Browse | Copy | Sign | Print | Delete |
| Edit | Detailed Display | Identify signers | | | | | | | | | |
| Make Addendum | Browse | Copy | | | | | | | | | |
| Sign | Print | Delete | | | | | | | | | |

| | | |
|---|-----------------------------------|----------------------------|
| Browse Document | Jan 26, 1998 16:49:32 | Page: 1 of 1 |
| PULMONARY CONSULT | | |
| CPRSPATIENT, T 666-01-0167P | PULMONARY CLINIC | Visit Date: 01/26/98@16:37 |
| DATE OF NOTE: JAN 26, 1998@16:37:34 | ENTRY DATE: JAN 26, 1998@16:37:34 | |
| AUTHOR: TIUPROVIDER, THREE | EXP COSIGNER: | |
| URGENCY: | STATUS: UNSIGNED | |
| DEMOGRAPHICS: CPRSPATIENT, TWO 666-01-0167P 31 JAN 1, 1967 | | |
| His disposition is good. | | |
| + Next Screen - Prev Screen ?? More actions | | >>> |
| Find | Make Addendum | Identify Signers |
| Print | Sign/Cosign | Delete |
| Edit | Copy | Link ... |
| Select Action: Quit// L Link ... | | |

| | | |
|--|---------------|-------------------|
| Problem(s) | Patient/Visit | Link with Request |
| Specify Linkage: L Link with Request | | |
| You must link your Result to a Consult Request... The following CONSULT REQUEST(S) are available: | | |
| 1> JAN 23, 1998@11:14 759 PULMONARY 2> JAN 23, 1998@11:14 760 PULMONARY | | |
| CHOOSE 1-2: 2 760 | | |
| Opening PULMONARY CONSULT record for review... | | |

(Continued on next page.)

Package Reference

```
Browse Document          Jan 26, 1998 16:49:32      Page: 1 of 1
                                PULMONARY CONSULT
CPRSPATIENT, T 666-01-0167P  PULMONARY CLINIC      Visit Date: 01/26/98@16:37
DATE OF NOTE: JAN 26, 1998@16:37:34  ENTRY DATE: JAN 26, 1998@16:37:34
    AUTHOR: TIUPROVIDER, THREE  EXP COSIGNER:
    URGENCY:                  STATUS: UNSIGNED

DEMOGRAPHICS: CPRSPATIENT, TWO
                666-01-0167P
                31
                JAN 1, 1967

His disposition is good.

+ Next Screen - Prev Screen ?? More actions      >>>
Find           Make Addendum      Identify Signers
Print          Sign/Cosign       Delete
Edit           Copy             Link ...
                                         Quit

Select Action: Quit// <Enter>      Quit
```

```
Unsigned Notes          Jan 27, 1998 15:20:55      Page: 1 of 1
CPRSPATIENT, TWO          666-01-0167P1A      JAN 1, 1967 (31)  <A>
Currently viewing all unsigned notes
Title           Written        Author        SigSt
1   PULMONARY CONSULT      | 01/27 15:19  RUSSELL,J  unsig

Enter the numbers of the items you wish to act on.      >>>
NW  Write New Note      CV  Change View ...      SP  Select New Patient
AD  Add New Orders      CC  Chart Contents ...  Q   Close Patient Chart
Select: Chart Contents// Q   Close Patient Chart
```

Using the Consults Package with Medicine

If your site is set up for attaching Medicine results to consults, and there are results available, then Consults prompts you to attach relevant results during the Complete/Update action.

In this example, we attach medicine results to a consult we are completing:

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-----------------------|-----------------------|---|--------------------------|-----|---------------------------|--------------------------|---|----------|---|--|--|---|----------|---|--|--|---|----------|---|--|--|---|----------|---|---|--|---|----------|---|--|--|---|----------|----|----------------------|--|---|----------|---|----------------------|--|---|----------|----|---------------------|--|---|----------|---|-------------------------|--|----|----------|---|--------------------------------------|--|----|----------|---|--------------------------------------|--|----|----------|---|---------------------------------------|--|
| CONSULT TRACKING | Jun 21, 2000 14:23:01 | Page: 1 of 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CPRSPATIENT, FOUR 666-43-8796 | 2B M | DEC 4,1949 (50) <CAD> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Wt.(lb): No Entry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="0"> <tr> <td>Requested</td> <td>St</td> <td>No.</td> <td>Consult/Procedure Request</td> <td><input type="checkbox"/></td> </tr> <tr> <td>1</td> <td>05/16/00</td> <td>a</td> <td>1719 ELECTROCARDIOGRAM CARDIOLOGY Proc</td> <td></td> </tr> <tr> <td>2</td> <td>05/15/00</td> <td>c</td> <td>1718 ELECTROCARDIOGRAM CARDIOLOGY Proc</td> <td></td> </tr> <tr> <td>3</td> <td>02/09/00</td> <td>p</td> <td>1679 Holter Monitoring CARDIOLOGY Cons</td> <td></td> </tr> <tr> <td>4</td> <td>06/18/99</td> <td>a</td> <td>1538 PACEMAKER SURVEILLANCE CARDIOLOGY Proc</td> <td></td> </tr> <tr> <td>5</td> <td>04/07/99</td> <td>c</td> <td>1433 Holter Monitoring CARDIOLOGY Cons</td> <td></td> </tr> <tr> <td>6</td> <td>06/11/98</td> <td>pr</td> <td>1047 CARDIOLOGY Cons</td> <td></td> </tr> <tr> <td>7</td> <td>09/24/97</td> <td>c</td> <td>341 *CARDIOLOGY Cons</td> <td></td> </tr> <tr> <td>8</td> <td>02/03/97</td> <td>dc</td> <td>209 CARDIOLOGY Cons</td> <td></td> </tr> <tr> <td>9</td> <td>07/28/95</td> <td>c</td> <td>94 ECHO CARDIOLOGY Proc</td> <td></td> </tr> <tr> <td>10</td> <td>07/20/95</td> <td>c</td> <td>88 ELECTROCARDIOGRAM CARDIOLOGY Proc</td> <td></td> </tr> <tr> <td>11</td> <td>07/20/95</td> <td>c</td> <td>87 ELECTROCARDIOGRAM CARDIOLOGY Proc</td> <td></td> </tr> <tr> <td>12</td> <td>04/23/92</td> <td>c</td> <td>64 *ELECTROCARDIOGRAM CARDIOLOGY Proc</td> <td></td> </tr> </table> | | | Requested | St | No. | Consult/Procedure Request | <input type="checkbox"/> | 1 | 05/16/00 | a | 1719 ELECTROCARDIOGRAM CARDIOLOGY Proc | | 2 | 05/15/00 | c | 1718 ELECTROCARDIOGRAM CARDIOLOGY Proc | | 3 | 02/09/00 | p | 1679 Holter Monitoring CARDIOLOGY Cons | | 4 | 06/18/99 | a | 1538 PACEMAKER SURVEILLANCE CARDIOLOGY Proc | | 5 | 04/07/99 | c | 1433 Holter Monitoring CARDIOLOGY Cons | | 6 | 06/11/98 | pr | 1047 CARDIOLOGY Cons | | 7 | 09/24/97 | c | 341 *CARDIOLOGY Cons | | 8 | 02/03/97 | dc | 209 CARDIOLOGY Cons | | 9 | 07/28/95 | c | 94 ECHO CARDIOLOGY Proc | | 10 | 07/20/95 | c | 88 ELECTROCARDIOGRAM CARDIOLOGY Proc | | 11 | 07/20/95 | c | 87 ELECTROCARDIOGRAM CARDIOLOGY Proc | | 12 | 04/23/92 | c | 64 *ELECTROCARDIOGRAM CARDIOLOGY Proc | |
| Requested | St | No. | Consult/Procedure Request | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | 05/16/00 | a | 1719 ELECTROCARDIOGRAM CARDIOLOGY Proc | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 | 05/15/00 | c | 1718 ELECTROCARDIOGRAM CARDIOLOGY Proc | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 | 02/09/00 | p | 1679 Holter Monitoring CARDIOLOGY Cons | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 | 06/18/99 | a | 1538 PACEMAKER SURVEILLANCE CARDIOLOGY Proc | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 | 04/07/99 | c | 1433 Holter Monitoring CARDIOLOGY Cons | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 | 06/11/98 | pr | 1047 CARDIOLOGY Cons | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 | 09/24/97 | c | 341 *CARDIOLOGY Cons | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8 | 02/03/97 | dc | 209 CARDIOLOGY Cons | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9 | 07/28/95 | c | 94 ECHO CARDIOLOGY Proc | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10 | 07/20/95 | c | 88 ELECTROCARDIOGRAM CARDIOLOGY Proc | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11 | 07/20/95 | c | 87 ELECTROCARDIOGRAM CARDIOLOGY Proc | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12 | 04/23/92 | c | 64 *ELECTROCARDIOGRAM CARDIOLOGY Proc | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| + Enter ?? for more actions | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SP Select Patient | FR Forward | CT Complete/Update | RT Results Display | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum | PF Print Form 513 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RC Receive | DC Discontinue | SF Sig Findings | RM Remove Med Rslt | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SC Schedule | CM Add Comment | DD Detailed Display | ER Edit/Resubmit | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Select: Next Screen// CT Complete/Update | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

CHOOSE No. 1-32: 1

Attach Medicine Results? Y// <Enter> ES

| | | |
|-------------------------------|-------------------------------------|---------------------------------------|
| Procedure/Medicine Resulting | Jun 21, 2000 14:29:50 | Page: 1 of 1 <input type="checkbox"/> |
| CPRSPATIENT, FOUR 666-43-8796 | 2B M | DEC 4,1949 (50) <CAD> |
| Available Medicine Results | | |
| Type of Proc. | Procedure Date | Summary <input type="checkbox"/> |
| 1 ELECTROCARDIOGRAM | AUG 13, 1997 | ABNORMAL |
| 2 ELECTROCARDIOGRAM | JUL 31, 1995@08:04 | NORMAL |
| Select action or item number | | |
| AR Associate Result | DR Display selected medicine result | |
| Select action: Quit// | | |

Notice that when we tried to complete a consult with available Medicine results, Consults prompted us, "Attach Medicine Results?" By responding affirmatively we are presented a screen with a list of the qualifying Medicine results and the ability to both explore these results and attach one or more of them to the consult.

For this to happen, two things must have taken place:

1. Your CAC or IRM must have defined certain procedures as qualifying to provide results to your service.
2. Those procedures must have been performed on your patient and the results entered into VistA.

In the following example, a medicine result is associated with the current consult and the complete action is finished:

| | | |
|--|-------------------------------------|-----------------------|
| Procedure/Medicine Resulting | Jun 21, 2000 14:29:50 | Page: 1 of 1 |
| CPRSPATIENT, FOUR 666-43-8796 | 2B M | DEC 4,1949 (50) <CAD> |
| Available Medicine Results | | |
| Type of Proc. | Procedure Date | Summary |
| 1 ELECTROCARDIOGRAM | AUG 13,1997 | ABNORMAL |
| 2 ELECTROCARDIOGRAM | JUL 31,1995@08:04 | NORMAL |
| Select action or item number | | |
| AR Associate Result | DR Display selected medicine result | |
| Select action: Quit// AR Associate Result | | |

| |
|---|
| Select item: (1-2): 1 |
| ELECTROCARDIOGRAM AUG 13,1997 ABNORMAL |
| Are you sure you want to associate this result? NO// Y YES |

Package Reference

| | | |
|---|--------------------------------------|--|
| Procedure/Medicine Resulting CPRSPATIENT, FOUR 666-43-8796 | Jun 21, 2000 14:41:16 2B M | Page: 1 of 1 DEC 4, 1949 (50) <CAD> |
| Available Medicine Results | | |
| Type of Proc. 1 ELECTROCARDIOGRAM | Procedure Date JUL 31, 1995@08:04 | Summary NORMAL |
| Select action or item number | | |
| AR Associate Result | DR Display selected medicine result | |
| Select action: Quit// <Enter> QUIT | | |

Continue with Note Entry? Y// N NO

| | | |
|---|-------------------------------|---|
| CONSULT TRACKING CPRSPATIENT, FOUR 666-43-8796 | Jun 21, 2000 14:41:35 2B M | Page: 1 of 3 DEC 4, 1949 (50) <CAD> Wt.(lb): No Entry |
| Requested St | No. | Consult/Procedure Request |
| 1 05/16/00 c | 1719 | ELECTROCARDIOGRAM CARDIOLOGY Proc |
| 2 05/15/00 c | 1718 | ELECTROCARDIOGRAM CARDIOLOGY Proc |
| 3 02/09/00 p | 1679 | Holter Monitoring CARDIOLOGY Cons |
| 4 06/18/99 a | 1538 | PACEMAKER SURVEILLANCE CARDIOLOGY Proc |
| 5 04/07/99 c | 1433 | Holter Monitoring CARDIOLOGY Cons |
| 6 06/11/98 pr | 1047 | CARDIOLOGY Cons |
| 7 09/24/97 c | 341 | *CARDIOLOGY Cons |
| 8 02/03/97 dc | 209 | CARDIOLOGY Cons |
| 9 07/28/95 c | 94 | ECHO CARDIOLOGY Proc |
| 10 07/20/95 c | 88 | ELECTROCARDIOGRAM CARDIOLOGY Proc |
| 11 07/20/95 c | 87 | ELECTROCARDIOGRAM CARDIOLOGY Proc |
| 12 04/23/92 c | 64 | *ELECTROCARDIOGRAM CARDIOLOGY Proc |
| + Enter ?? for more actions | | |
| SP Select Patient | FR Forward | CT Complete/Update RT Results Display |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum PF Print Form 513 |
| RC Receive | DC Discontinue | SF Sig Findings RM Remove Med Rslt |
| SC Schedule | CM Add Comment | DD Detailed Display ER Edit/Resubmit |
| Select: Next Screen// | | |

Notice that after we exited the Procedure/Medicine Resulting screen, we were prompted about entering a note. If we had responded with a Yes, we would have been able to attach a TIU note to the consult we were closing in addition to the Medicine results.

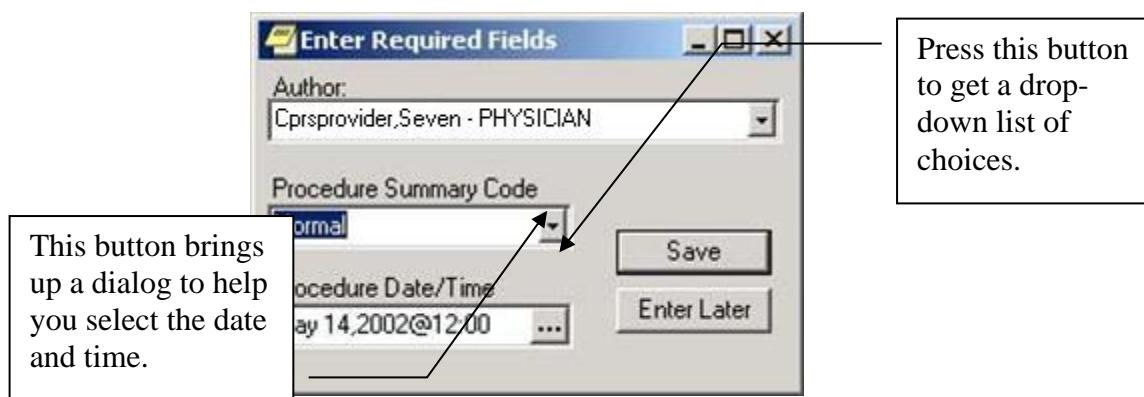
Using the Consults Package with Clinical Procedures

Individual consult types can be designated to be resulted with the Clinical Procedures package. If this is the case, then Consults expects clinical procedures results to be attached to the consult. This attachment is usually accomplished with the CPUser program.

If the instrument in question has not yet been connected to Clinical Procedures, then the consult may be completed in the usual way by an authorized provider. (Authorized providers being clinicians whom the CAC has set up as an interpreter for the appropriate service.) In this case Consults will filter the note titles available and only allow you to use Clinical Procedures titles.

When the clinical procedure results are present, Consults changes the status to PR (partial results). This means that, at least, a stub of a TIU document has been attached to the consult. It could also mean that one or more images and/or instrument reports created by a clinical device are also attached to the consult. Additionally, the interpretation of the clinical device image(s) or text may have been uploaded and is ready for signature.

The minimum required by the consults package to complete a clinical procedures consult is the interpretation of the clinical device output. If this is not supplied via upload, then it must be entered by the consulting clinician. When this interpretation is entered, the following fields are required and are prompted for (if not already present):



Windows Quick Start

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Select Consult 90

Select New Patient 91

Select Service 92

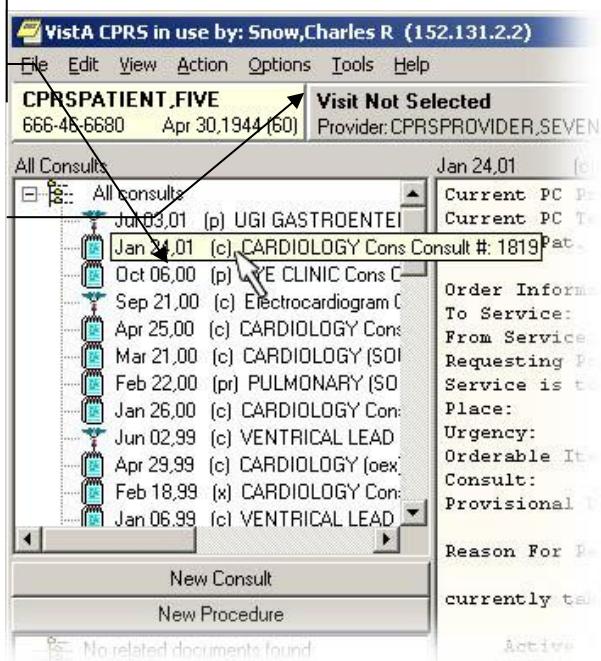
View by Status 93

Key

1. Steps are numbered and bolded:

a) Sub-steps are lettered and include an accent bar.

Tips are in a plain box

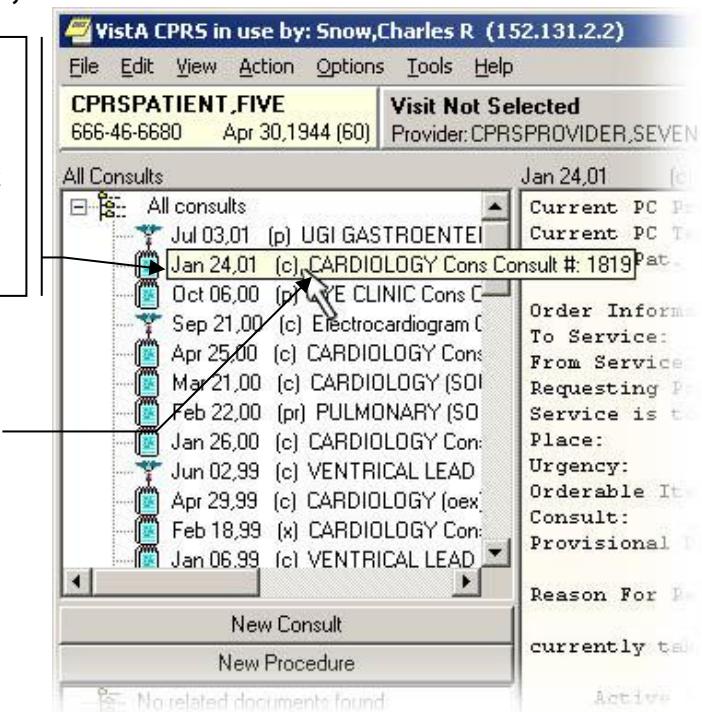


Introduction

1. Before each process, select the consult:

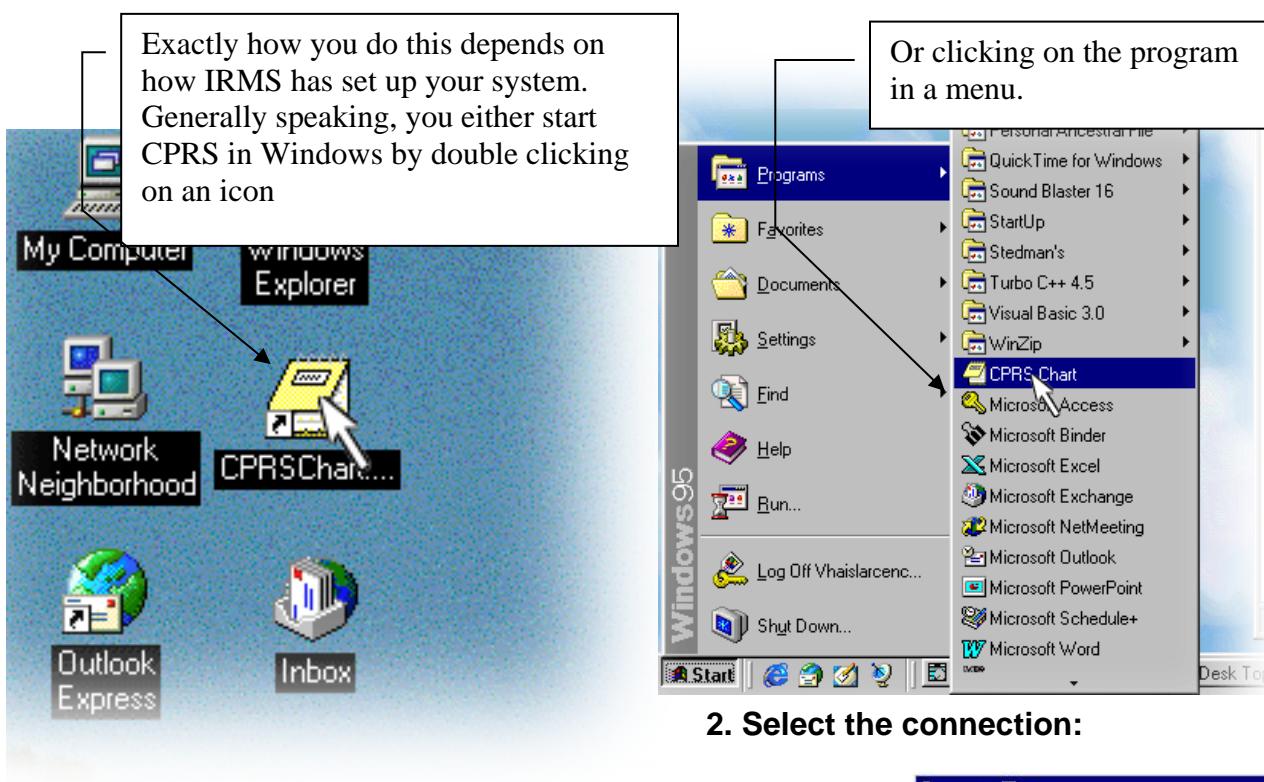
a) Click on the consult you want to select. (Most processes assume that you have first selected a specific consult.)

When you pause the cursor over the list of consults, CPRS expands the line the cursor is on.



Windows Flow of Information Starting Consults in Windows

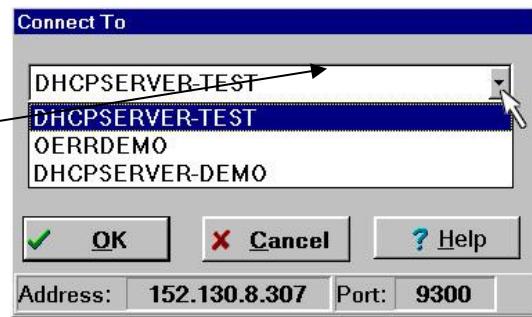
1. Start CPRS for Windows:



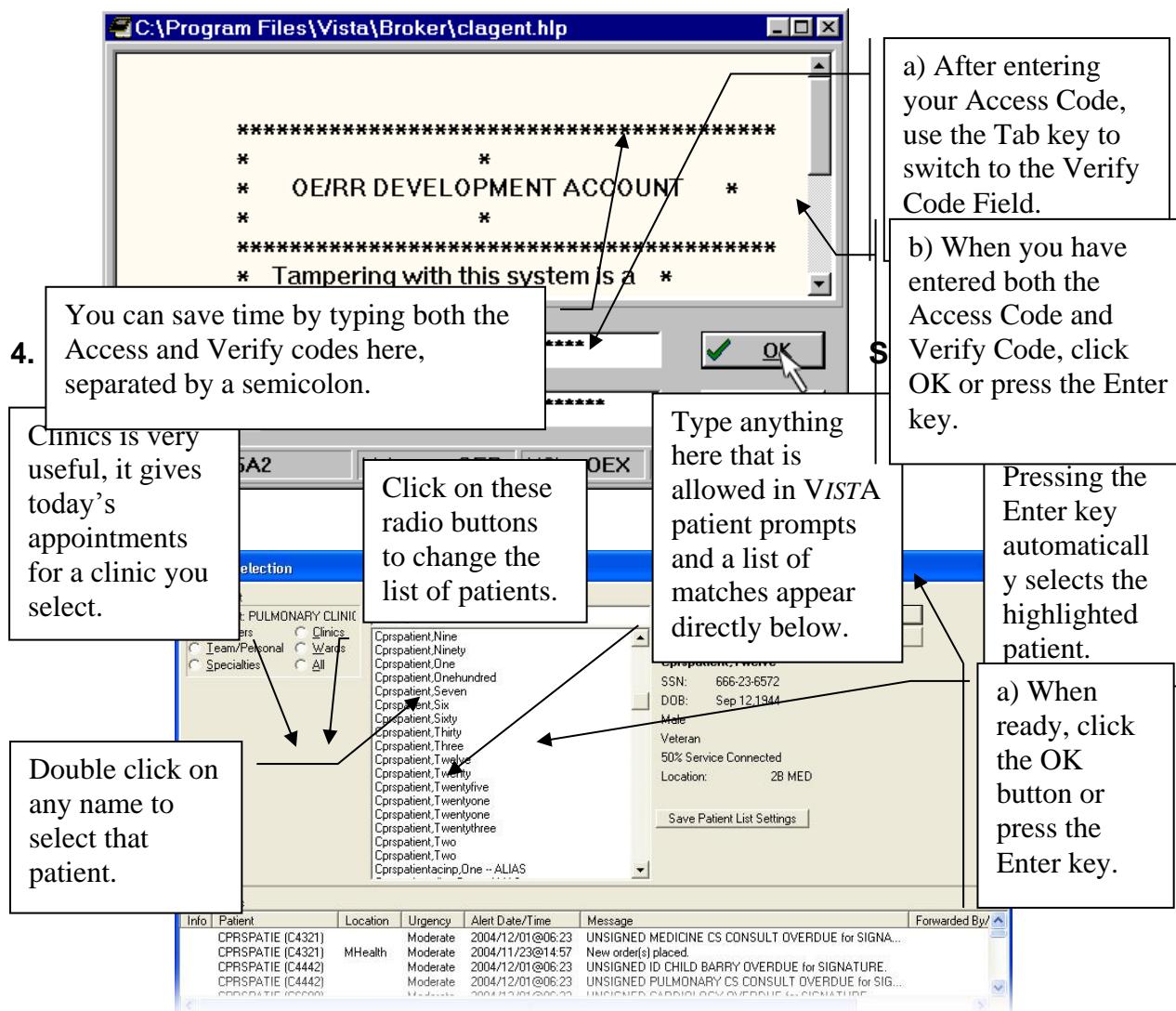
2. Select the connection:

 Note: Depending on the way CPRS is installed on your machine, you may not see this step

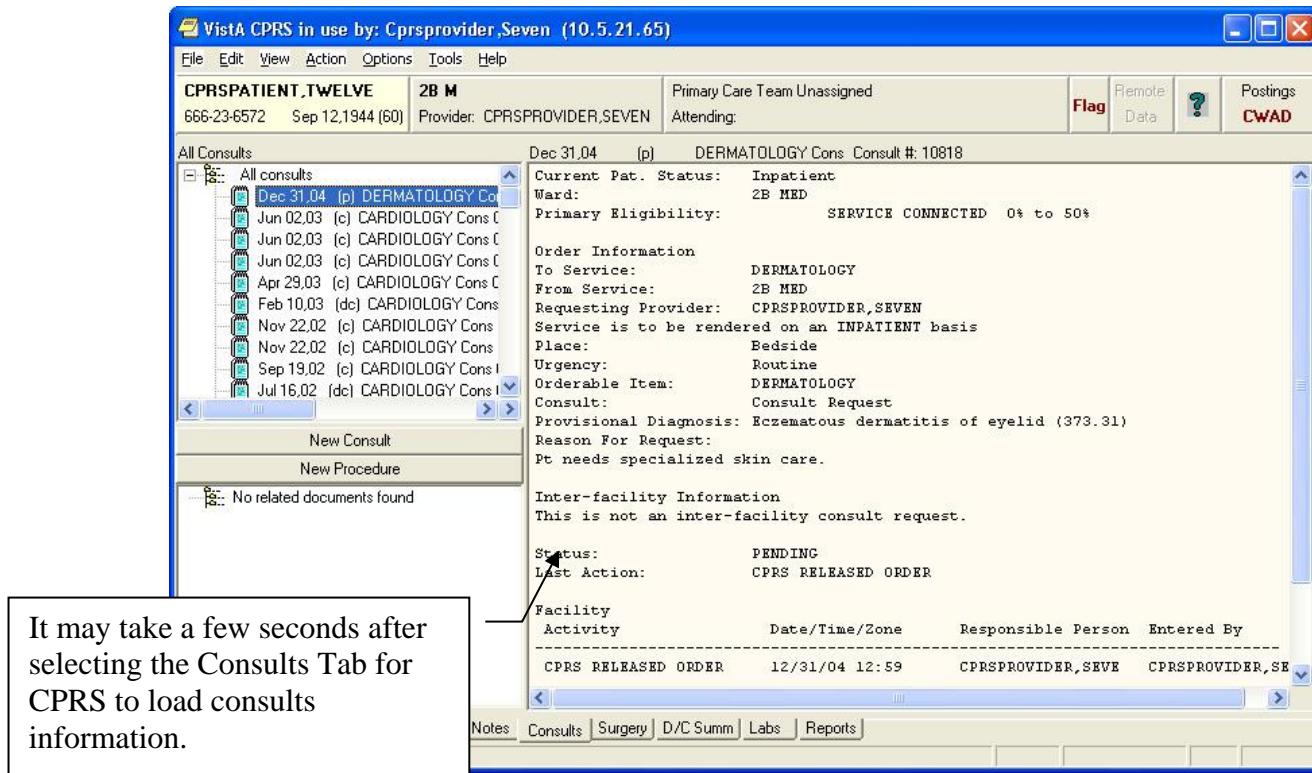
Click on the drop-down button
Select the appropriate connection. (See your Clinical Application Coordinator for information on which is the correct one.)
Click OK.



3. Log-on to your system:



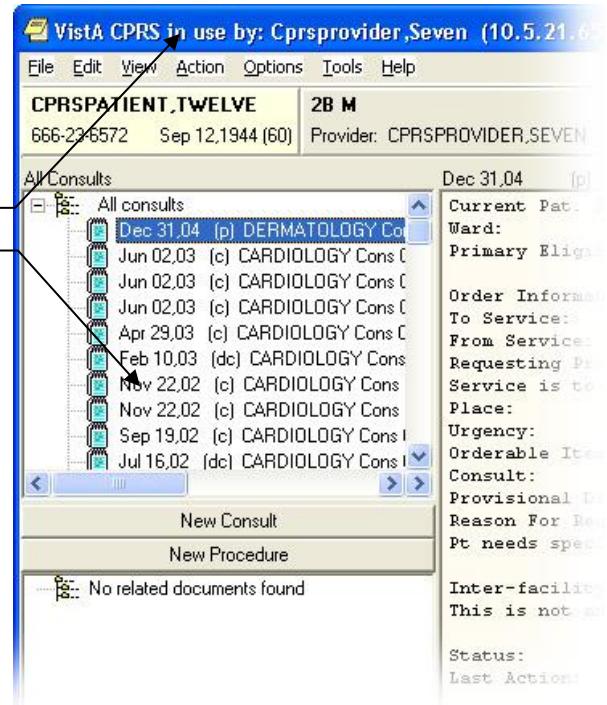
5. Click the Consults Tab:



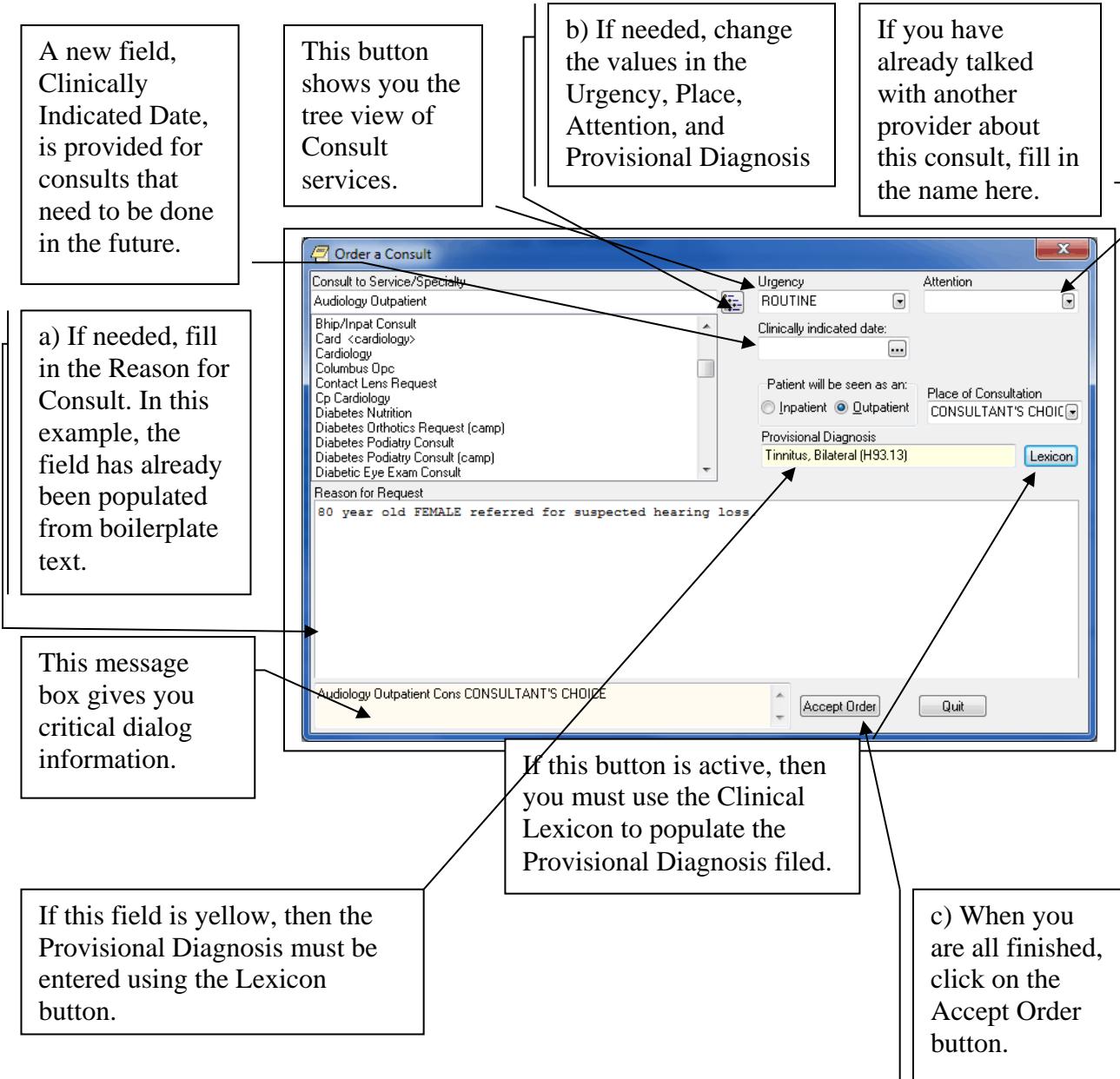
Order New Consult

1. Select New Consult:

You can find New Consult on the Action menu.
New Consult
Button.

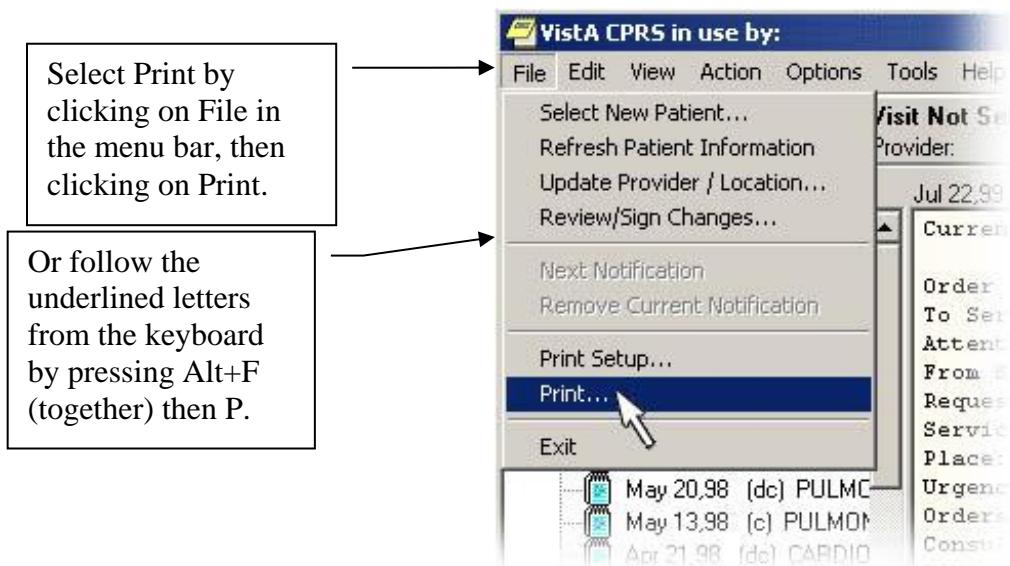


2. Fill out the Order a Consult dialog:

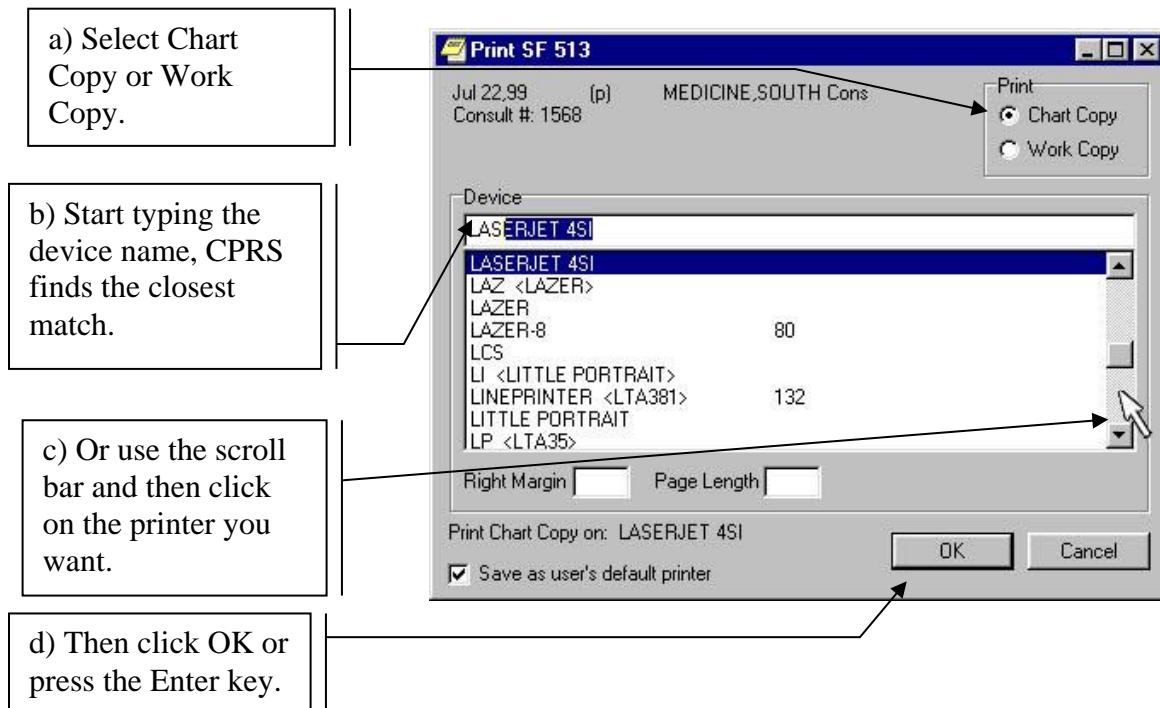


Print Form 513

1. Select Print from the File Menu:

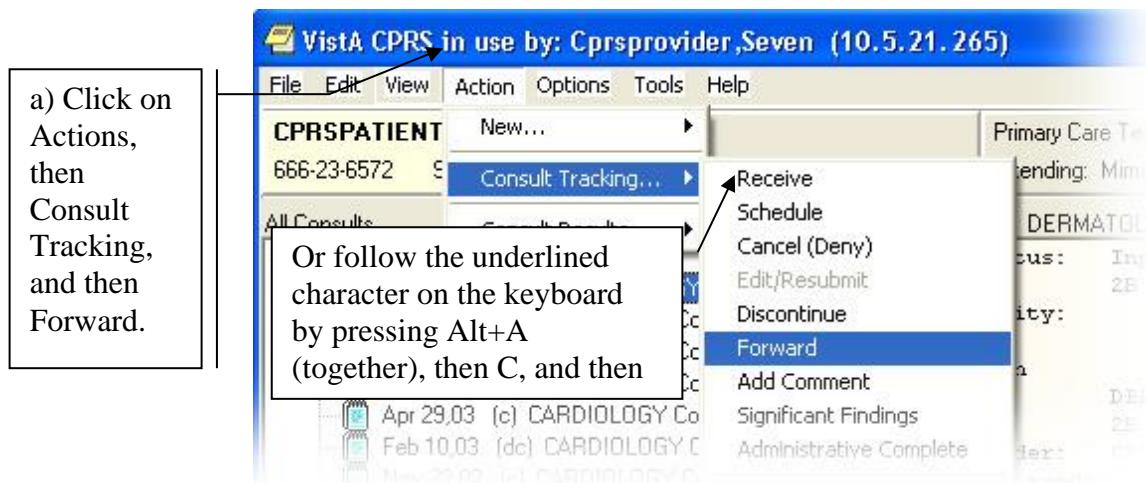


2. Select the Printer Device:

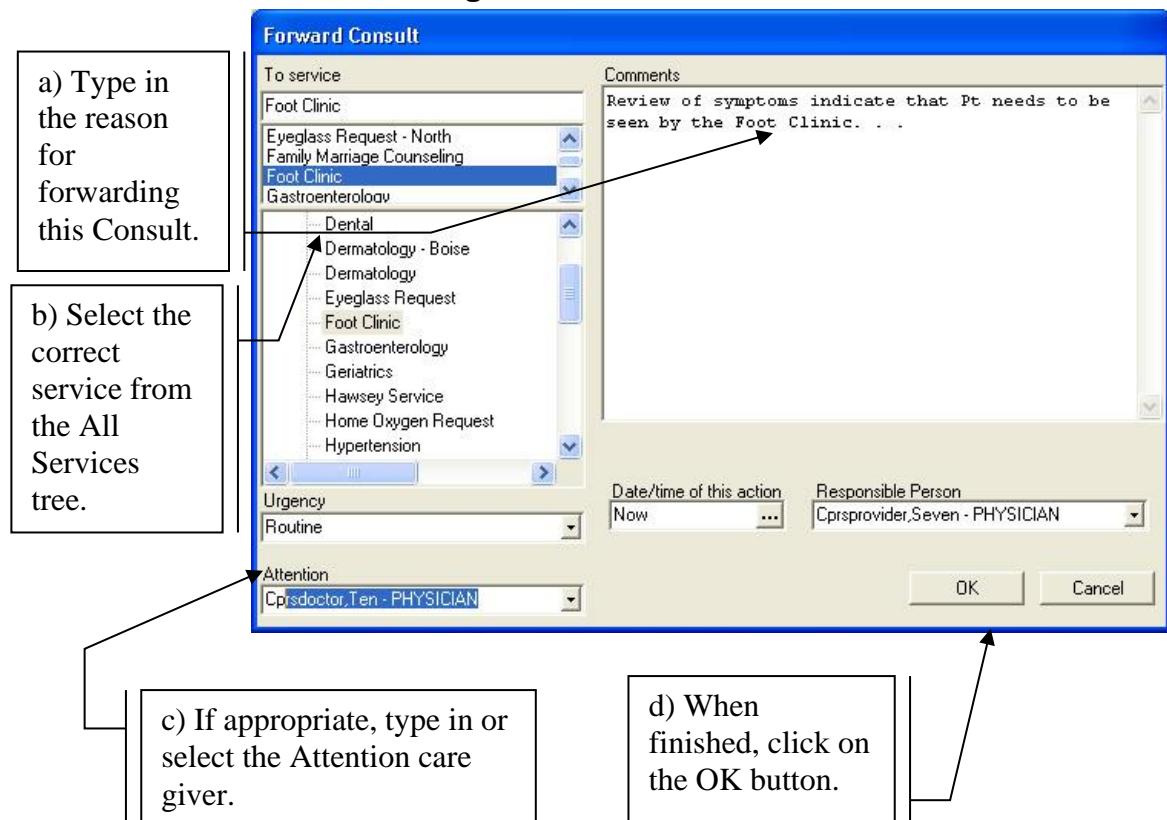


Forward Request

1. Select Forward:



2. Fill in the Forward Consult dialog:

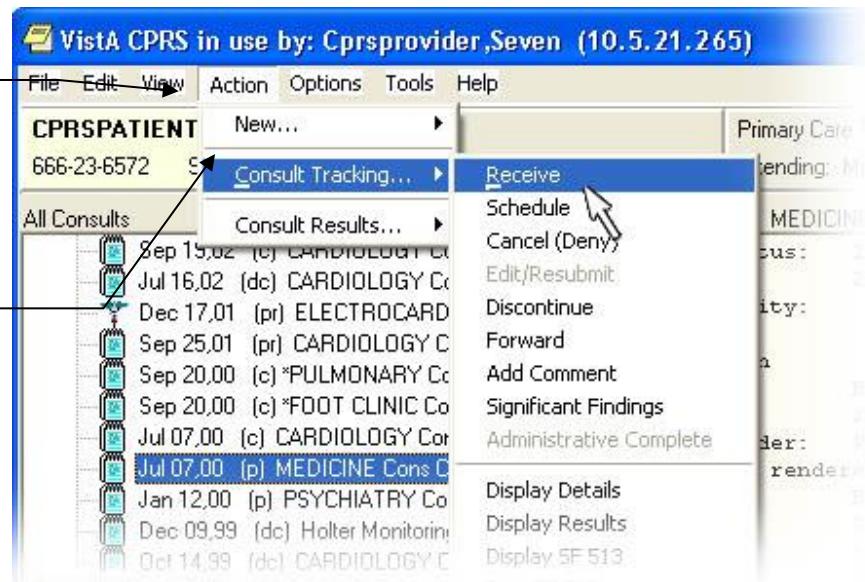


Receive Request

1. Select Receive:

a) Click on Action, then Consult Tracking, then Receive.

Or use the keyboard by pressing the underlined characters: Firs Alt and A (together), then C, and then R.

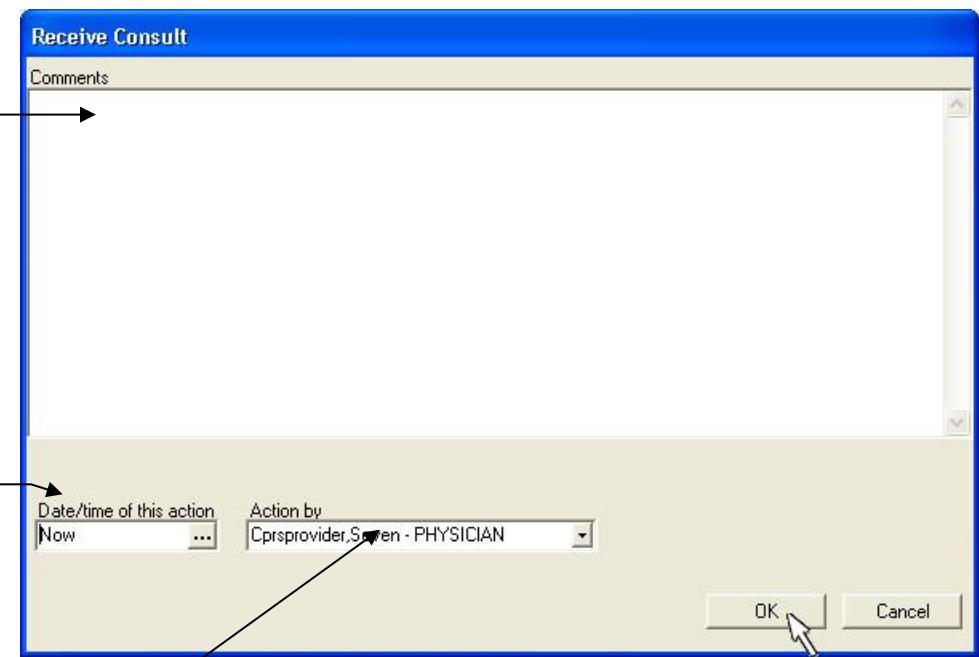


2. Click OK.

If there is anything unusual about this consult, document it by typing a comment here.

If you need some other time, click here.

If the action should be by some other person, change this.

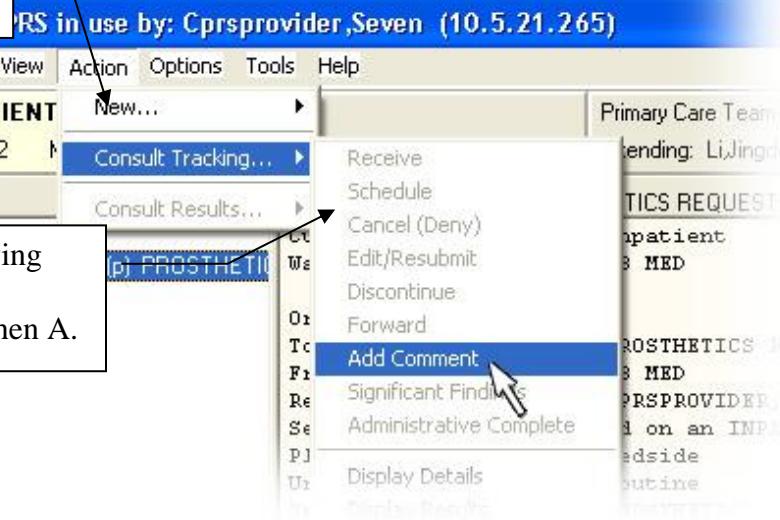


Comment

1. Select Add Comment:

Click on Action, then Consult Tracking, then Add Comment.

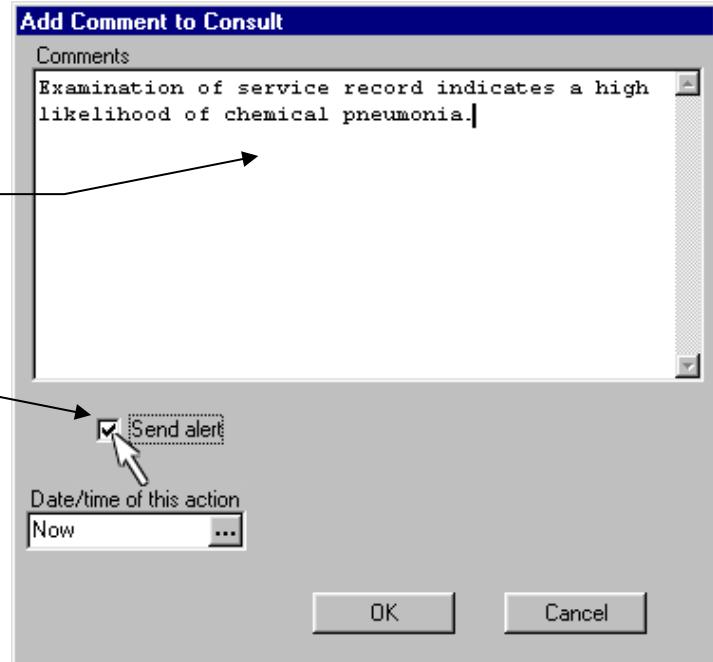
Or use the keyboard following the underlined letters: First Alt+A (together), then C, then A.



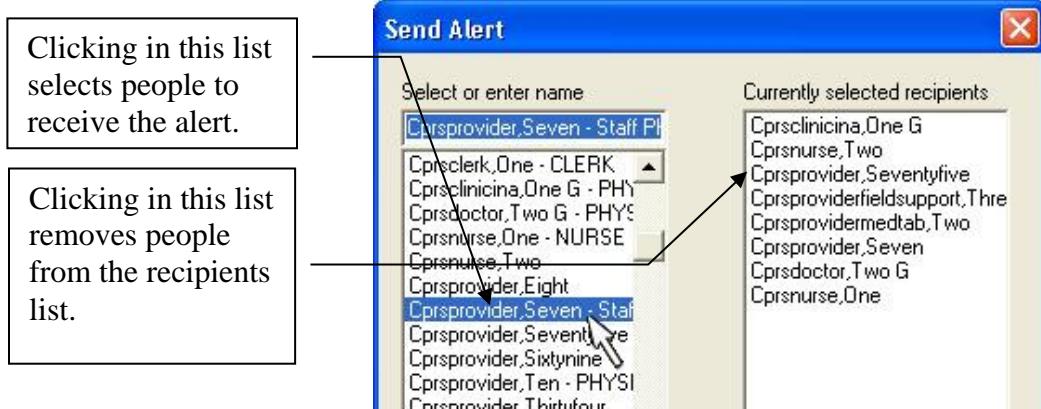
2. Fill in the Add Comment to Consult Dialog:

a) Type your comment in the text area.

b) Then click on the Send Alert check box.



3. Select the People to Receive the Alert:



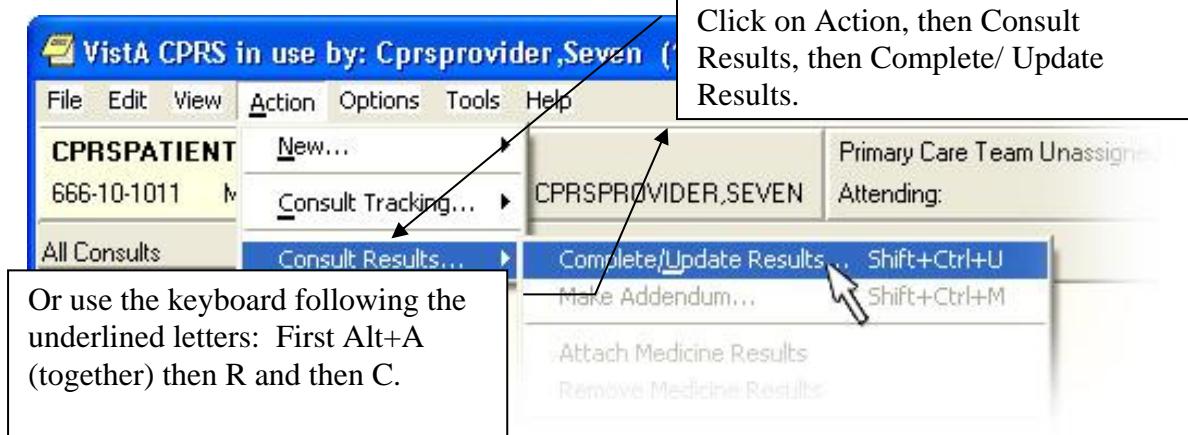
Note: If this were an Inter-Facility Consult, individuals from the other facility involved would not be on this list. In this case, the Notification System decides who to notify at the other facility by referring to Consults files.

4. Select OK:

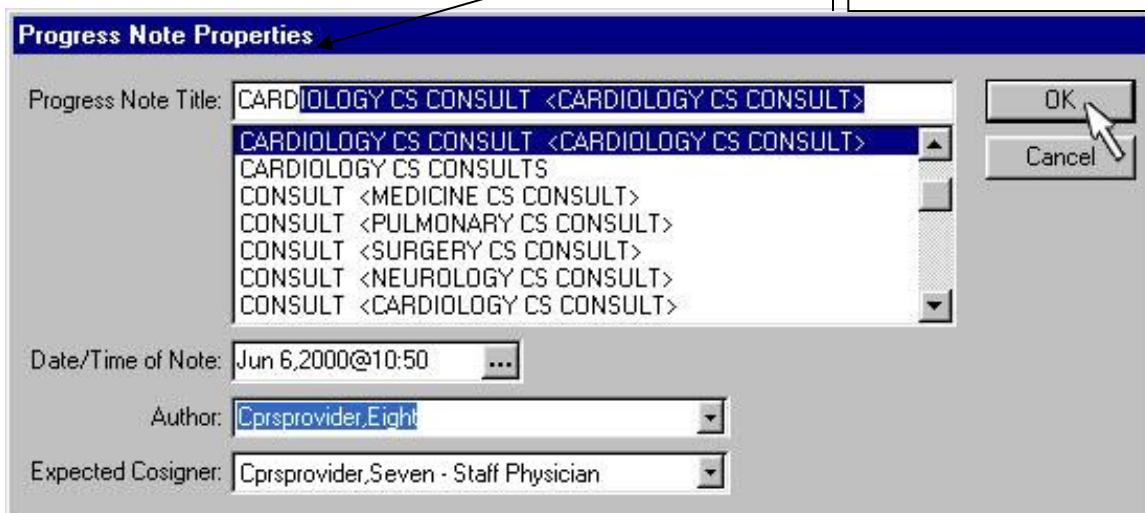


Complete a Consult (From the Consults Tab)

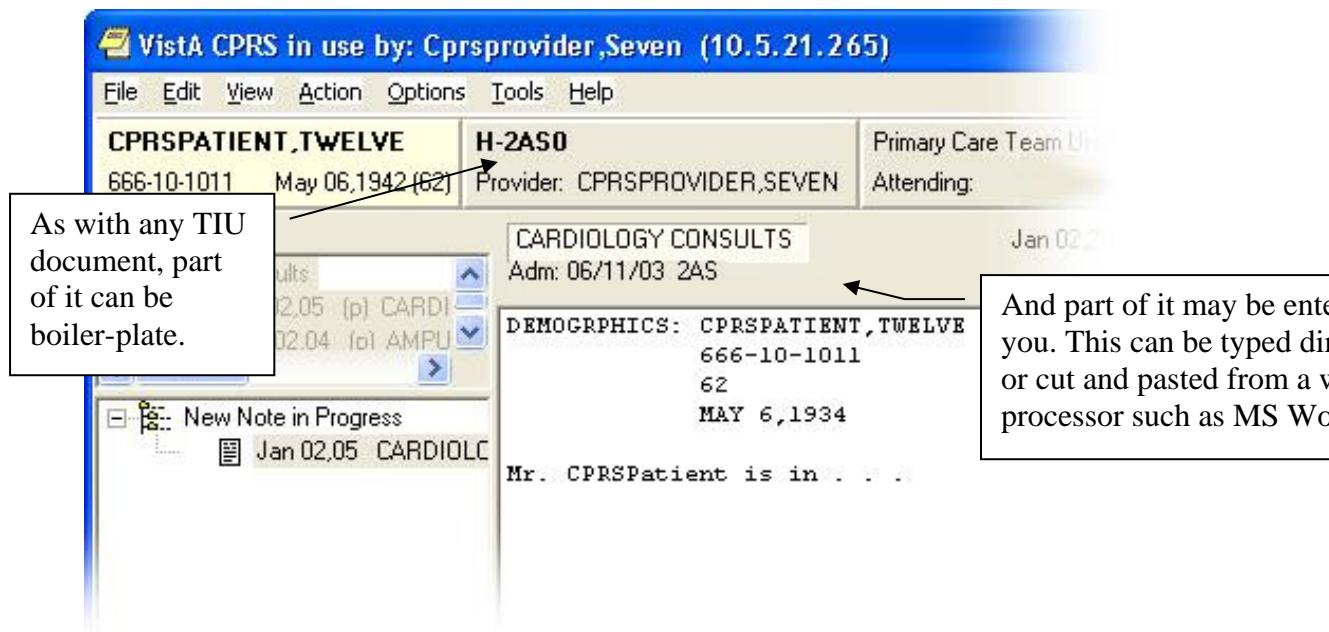
1. Select Complete/Update Results:



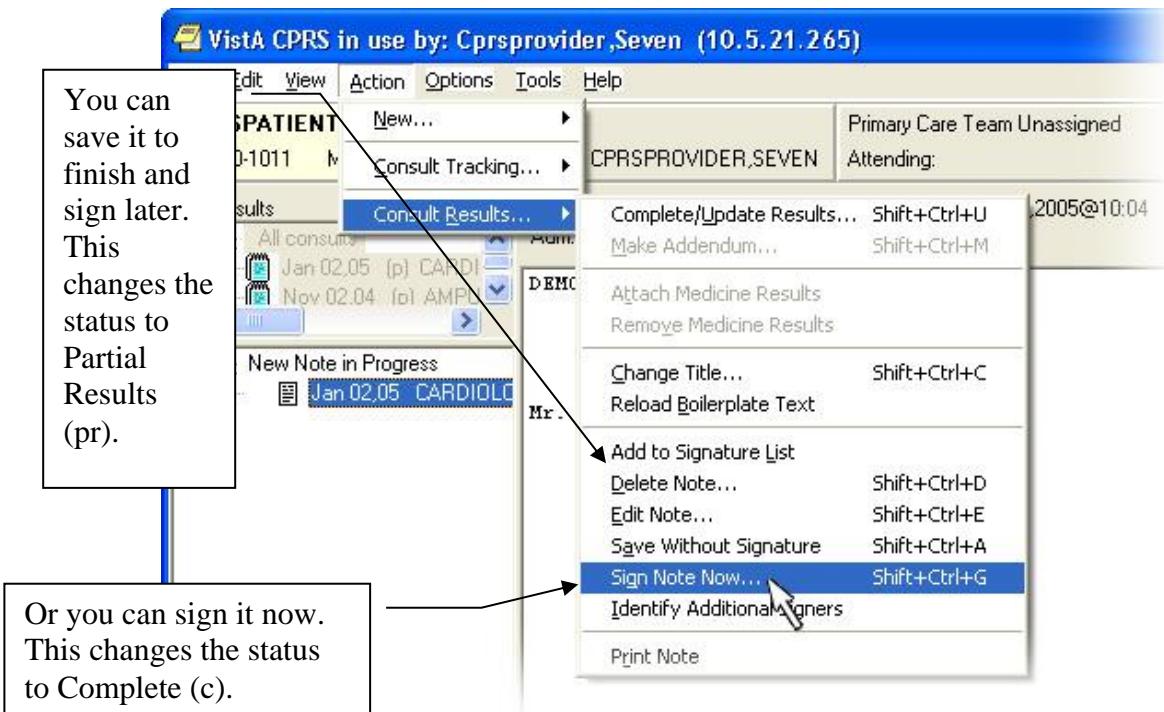
2. Select the Title of the Note:



3. Type in the text of the results:



4. Save the note:

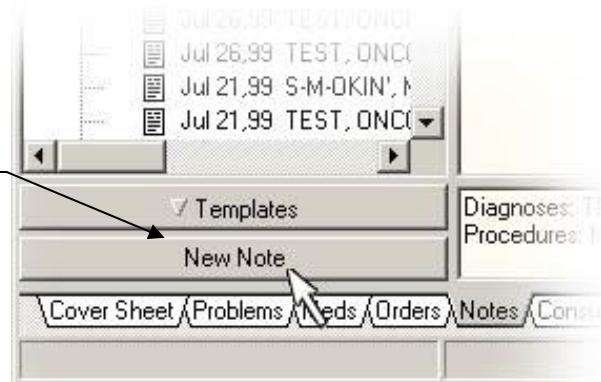


Complete a Consults (From the Notes Tab)

Before starting, from the CPRS Windows program, select the correct patient and click the Notes tab.

1. Click New Note:

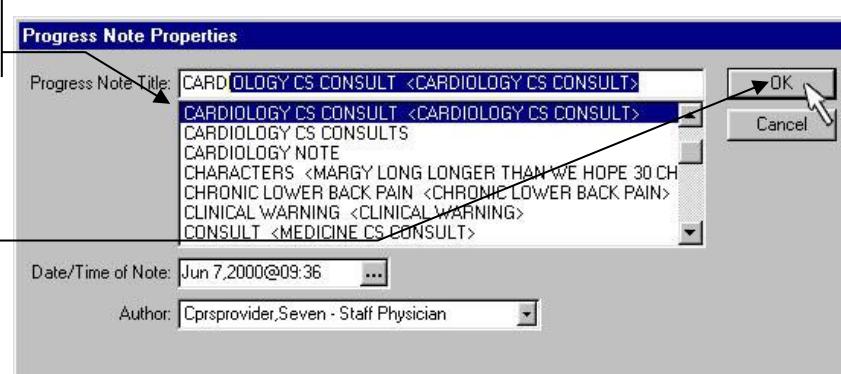
- a) Click the New Note button.



2. Select the Title of the Note:

- a) Type or select a title.

- b) When finished, click OK.

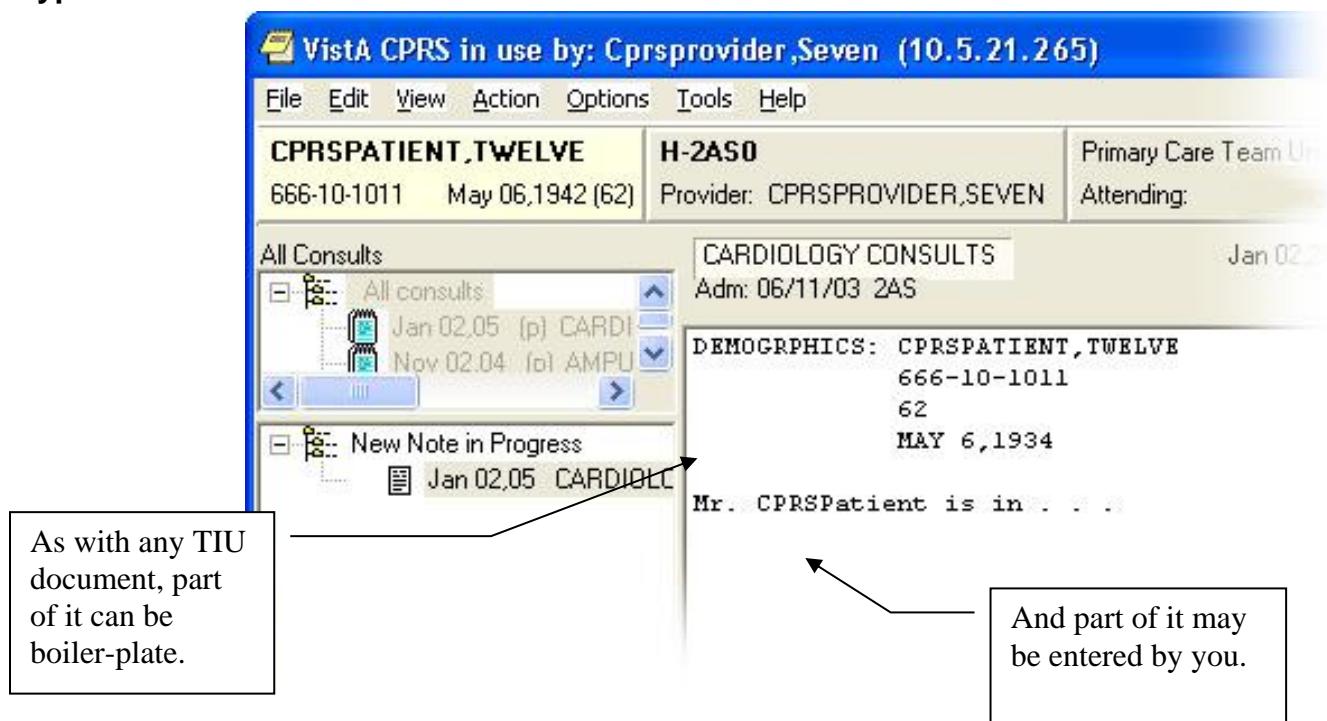


3. Select the consult:

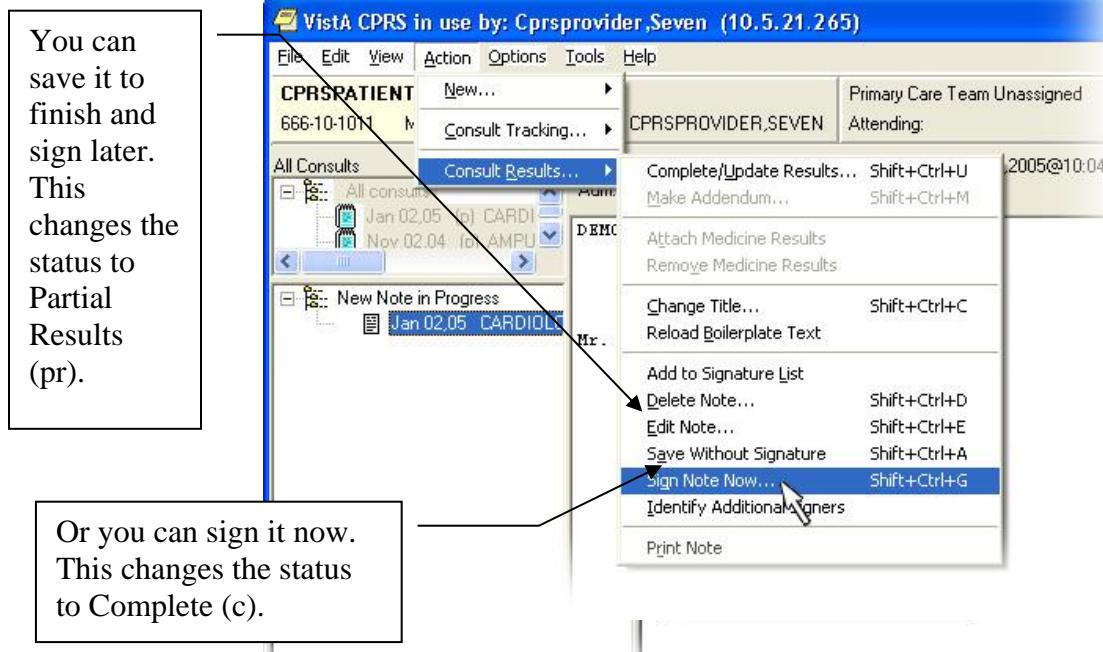
- a) Select the consult you are completing.

| Consult Request Date | Service | Procedure | Status | # Notes |
|----------------------|--------------------|-----------|----------|---------|
| Jul 22,99 17:07 | MEDICINE,SOUTH | | ACTIVE | 0 |
| Jul 22,99 17:07 | PULMONARY (SOUTH) | | PENDING | 0 |
| Jul 22,99 17:07 | CARDIOLOGY (SOUTH) | | ACTIVE | 0 |
| Jun 17,99 11:57 | CARDIOLOGY | | COMPLETE | 1 |
| Jun 17,99 11:57 | CARDIOLOGY | | COMPLETE | 1 |

4. Type in the text of the results:

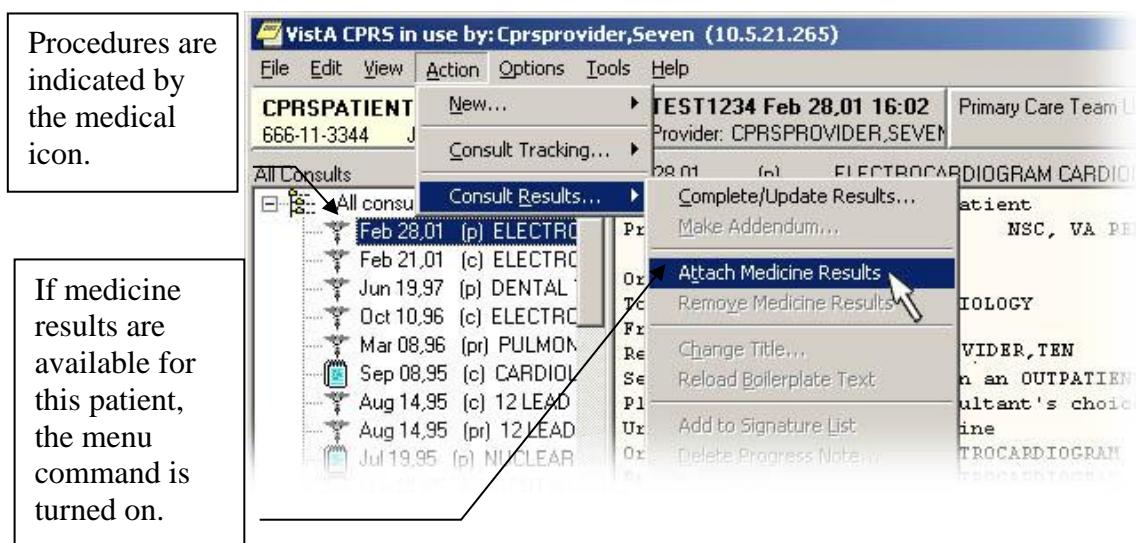


5. Save the note:

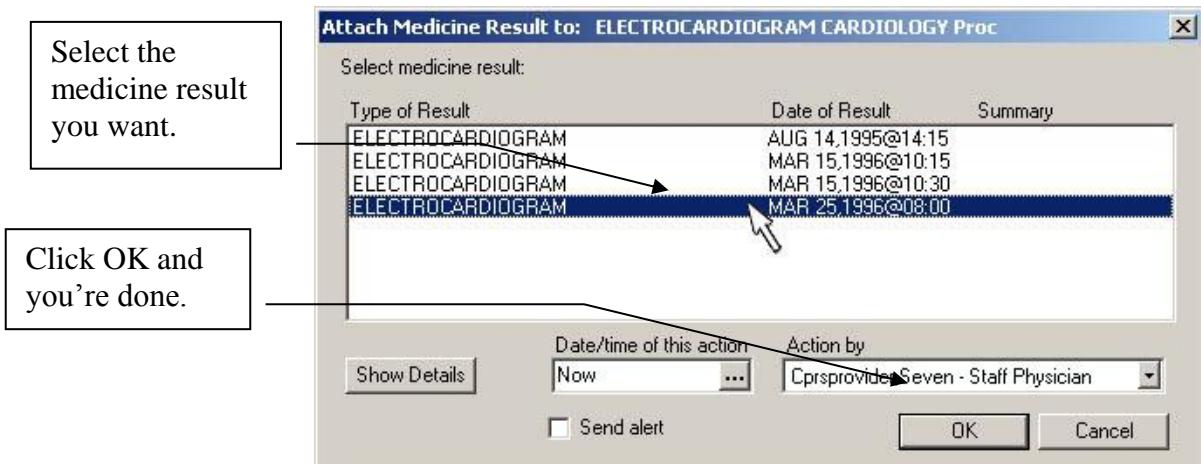


Complete a Consult (From the Medicine Results)

1. Select Attach Medicine Results:



2. Select the medicine result.

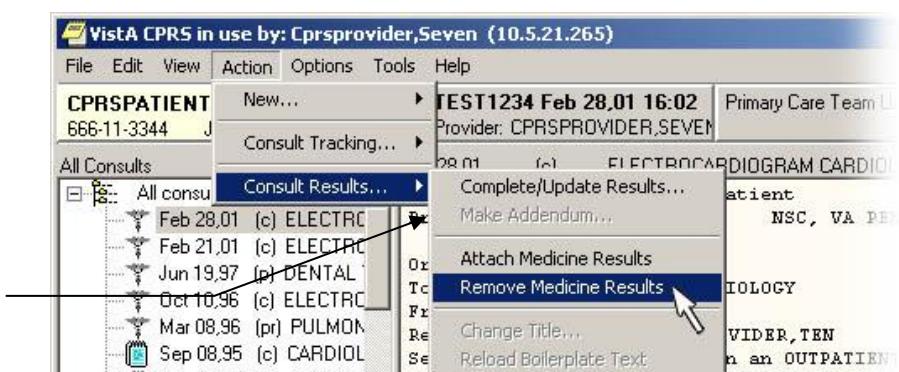


3. No signature is necessary at this time.

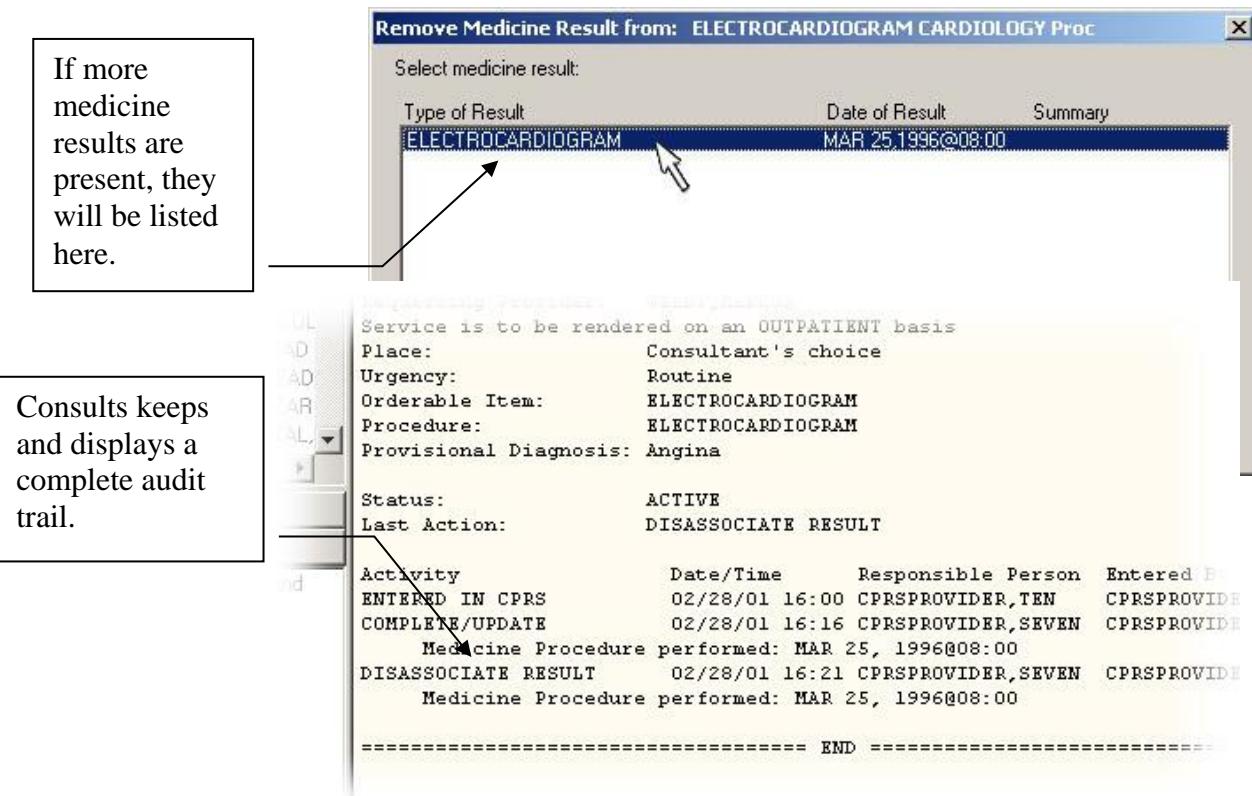
Undo Medicine Results

Select Remove Medicine Results

Windows activates this menu command when a result *you can remove* is present in the selected consult.



2. Select the medicine result to be removed.

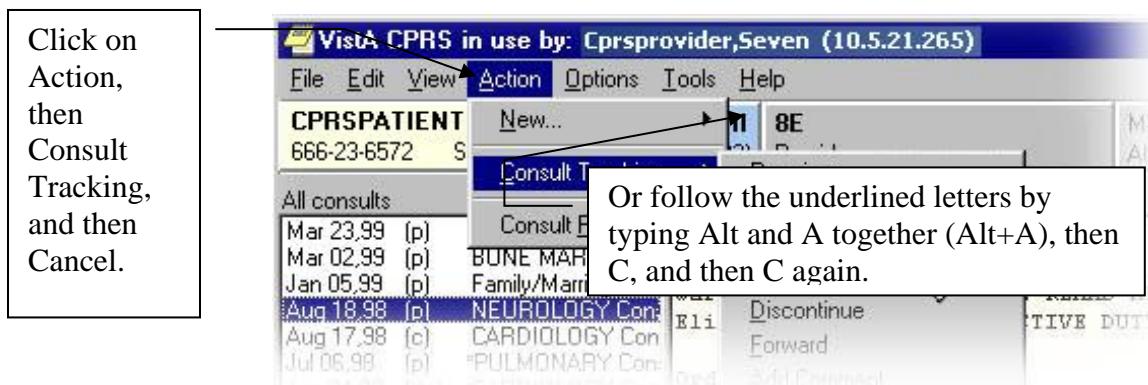


Other Windows Topics

Cancel (Deny) Request

This is a consult receiver's action. If you are the consult originator, use the Discontinue Order action.

1. Select Cancel:

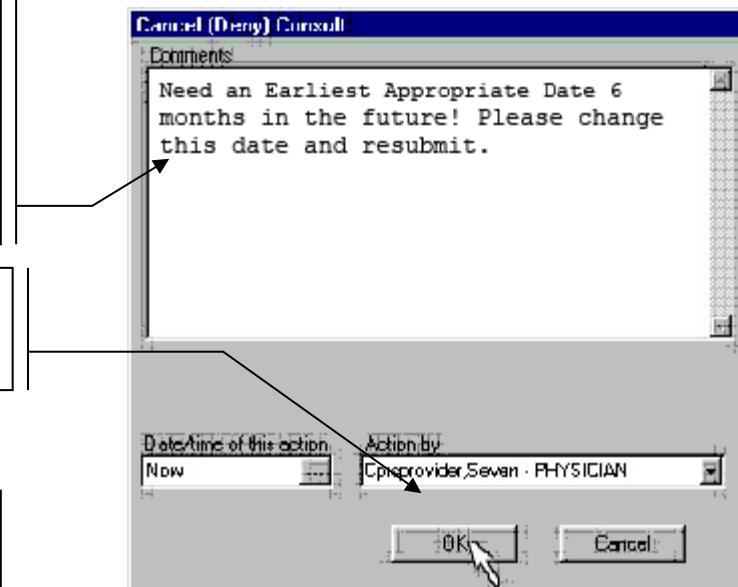


2. Consult dialog:

a) Type the reason for the denial. Be specific enough so that the originating provider can correct and resubmit the consult.

b) When finished, click the OK button.

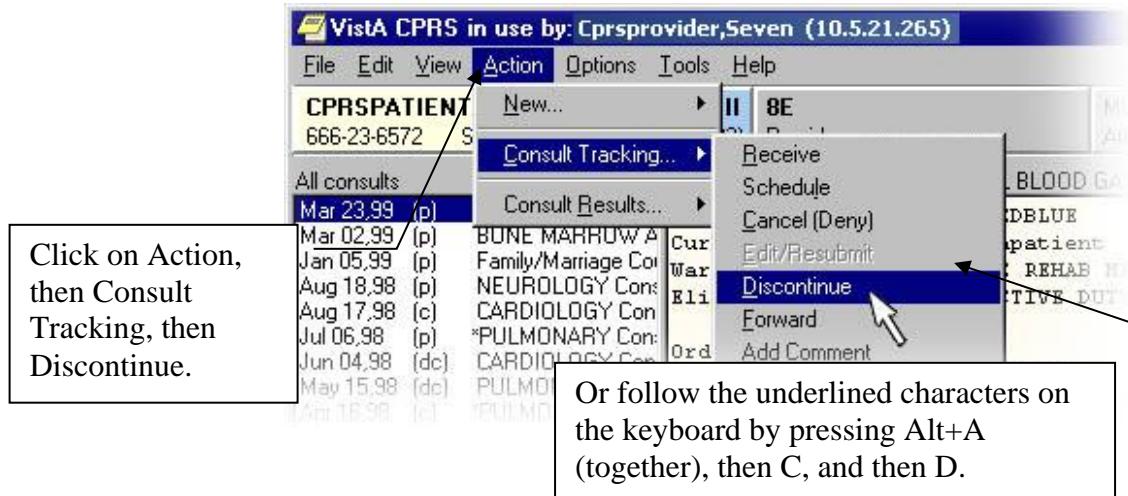
A notification is automatically sent to the consult originator so that the consult can be edited and resubmitted.



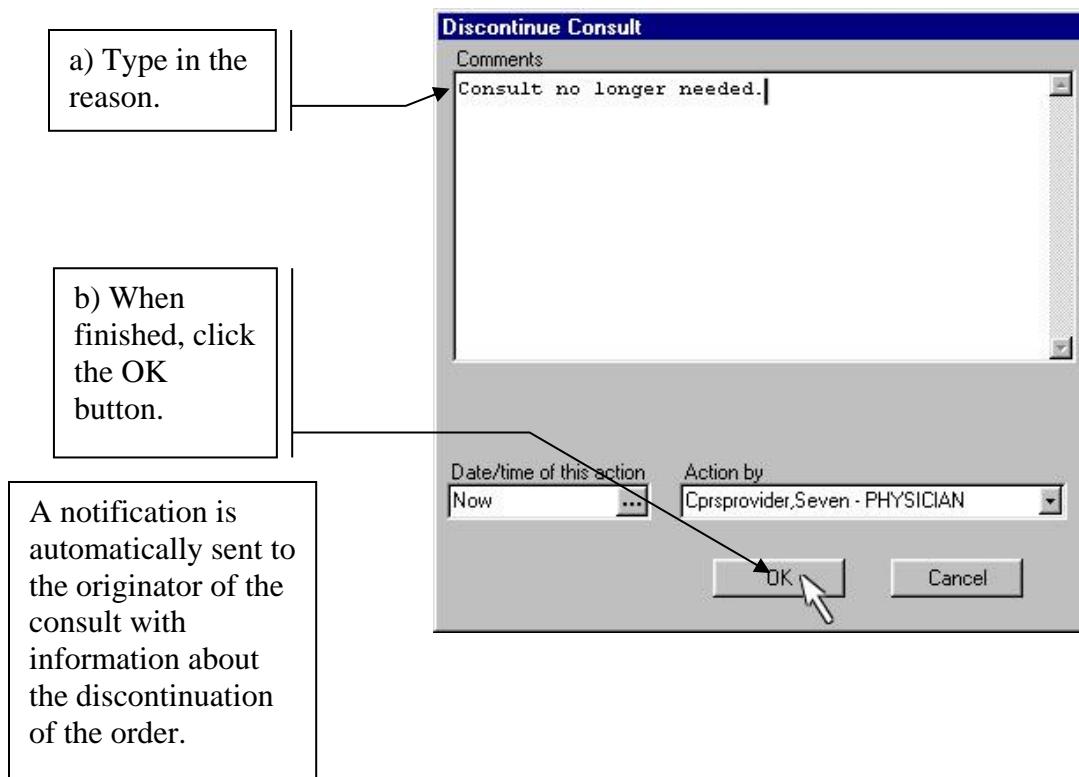
Discontinue Order

This is a consult originator's action. If you are the consult receiver, use the Cancel (Deny) action.

1. Select Discontinue:



2. Fill out the Discontinue Consult dialog:

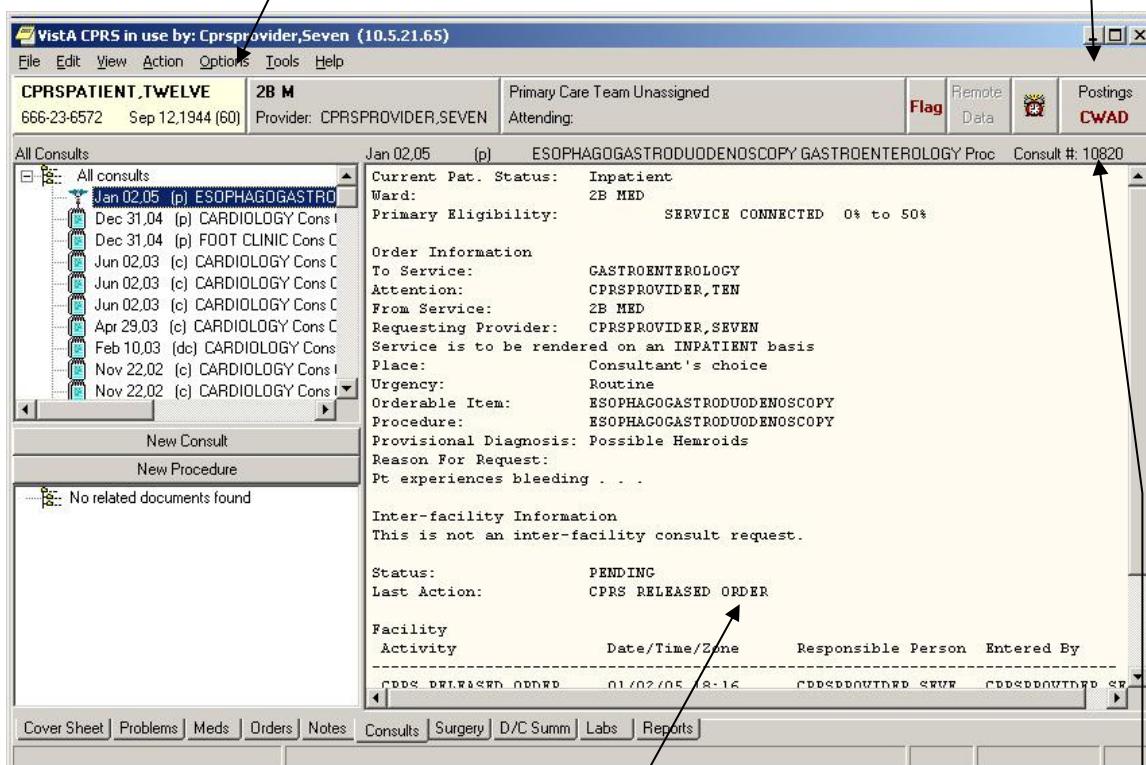


Detailed Display

Consults in Windows always show the detailed display of whatever consult is selected.

a) Click on the consult you want to see.

Postings codes have the following meanings:
C—There are Crisis Note(s) present.
W—There are Clinical Warning Note(s) present.
A—There are allergies present.
D—There are Directive Note(s) present.
[Click here for specifics.](#)



The Detailed Display includes:
Current Primary Care information.
Current Eligibility information.
Order information.
Last action information.
A record of activity.
All signed notes.
Information about unsigned notes.
Notes, Results, and Addenda
All other text fields associated with the consult.

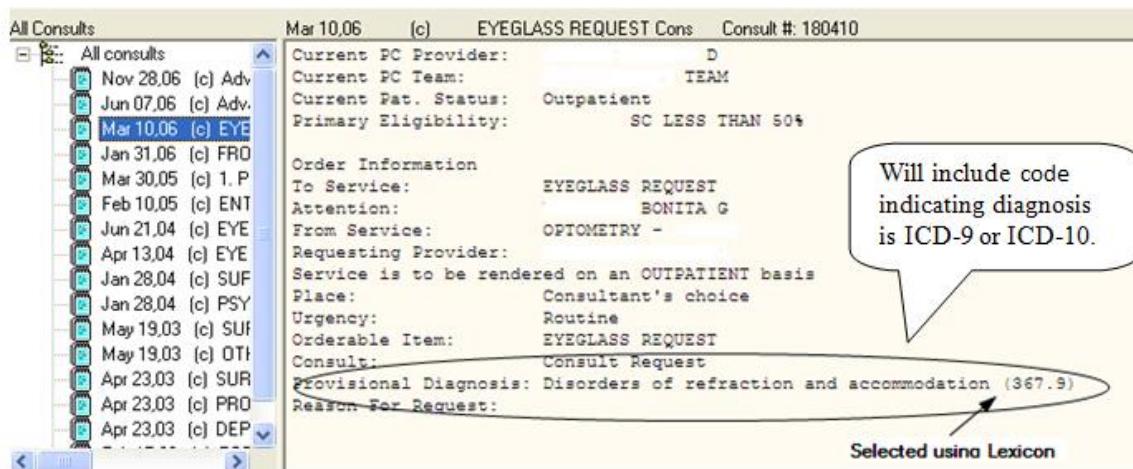
The consult number can be used to quickly access a specific consult in a variety of situations.

Changes made by Patch 73 for ICD-10 Remediation

ICD Diagnosis Code Display

ICD Diagnoses will be displayed on the user-selected Consults or Procedures.

If an existing consult (for which ICD-10 diagnosis was entered) is selected for display or the action Display Details is used, the ICD-10-CM diagnosis code and full description/definition will be displayed.



Package Operation

If the user selects an existing consult to display or uses the action Display Details and the Provisional Diagnosis was entered using free text data entry, the CRT package will not designate the diagnosis as ICD-9 or ICD-10.

| | | | | | | |
|---|---------------------------|------------------------------|--|--|---|---|
| ICDPATIENT.ONE | Visit Not Selected | Primary Care Team Unassigned | | | | |
| 666-00-1234 Apr 01,1952 (58) | Provider: . MONICA | | | | | |
| All Consults <table border="1"> <tr> <td>May 10,10 (p) 2. PRE-OP NURSE ENDOSCOPY SUITE Cons Consult #: 227938</td> </tr> <tr> <td> <input checked="" type="checkbox"/> All consults <ul style="list-style-type: none"> <input checked="" type="checkbox"/> May 10,10 (p) CARDIOLOGY <input checked="" type="checkbox"/> May 10,10 (p) OPTOMETRY <input checked="" type="checkbox"/> May 10,10 (p) 2. PRE-OP NU </td> </tr> <tr> <td> Current Pat. Status: Outpatient Primary Eligibility: SERVICE CONNECTED 50% to 100% </td> </tr> <tr> <td> Order Information To Service: 2. PRE-OP NURSE ENDOSCOPY SUITE Attention: WOEHRL, MARGIE From Service: SURGICAL EVALUATION Requesting Provider: VAUGHAN, MONICA Service is to be rendered on an OUTPATIENT basis Place: Consultant's choice Urgency: Routine Orderable Item: 2. PRE-OP NURSE ENDOSCOPY SUITE Consult: Consult Request <u>Provisional Diagnosis: test diagnosis</u> ← Free text diagnosis <u>Reason For Request:</u> Procedure: test procedure </td> </tr> </table> | | | May 10,10 (p) 2. PRE-OP NURSE ENDOSCOPY SUITE Cons Consult #: 227938 | <input checked="" type="checkbox"/> All consults <ul style="list-style-type: none"> <input checked="" type="checkbox"/> May 10,10 (p) CARDIOLOGY <input checked="" type="checkbox"/> May 10,10 (p) OPTOMETRY <input checked="" type="checkbox"/> May 10,10 (p) 2. PRE-OP NU | Current Pat. Status: Outpatient Primary Eligibility: SERVICE CONNECTED 50% to 100% | Order Information To Service: 2. PRE-OP NURSE ENDOSCOPY SUITE Attention: WOEHRL, MARGIE From Service: SURGICAL EVALUATION Requesting Provider: VAUGHAN, MONICA Service is to be rendered on an OUTPATIENT basis Place: Consultant's choice Urgency: Routine Orderable Item: 2. PRE-OP NURSE ENDOSCOPY SUITE Consult: Consult Request <u>Provisional Diagnosis: test diagnosis</u> ← Free text diagnosis <u>Reason For Request:</u> Procedure: test procedure |
| May 10,10 (p) 2. PRE-OP NURSE ENDOSCOPY SUITE Cons Consult #: 227938 | | | | | | |
| <input checked="" type="checkbox"/> All consults <ul style="list-style-type: none"> <input checked="" type="checkbox"/> May 10,10 (p) CARDIOLOGY <input checked="" type="checkbox"/> May 10,10 (p) OPTOMETRY <input checked="" type="checkbox"/> May 10,10 (p) 2. PRE-OP NU | | | | | | |
| Current Pat. Status: Outpatient Primary Eligibility: SERVICE CONNECTED 50% to 100% | | | | | | |
| Order Information To Service: 2. PRE-OP NURSE ENDOSCOPY SUITE Attention: WOEHRL, MARGIE From Service: SURGICAL EVALUATION Requesting Provider: VAUGHAN, MONICA Service is to be rendered on an OUTPATIENT basis Place: Consultant's choice Urgency: Routine Orderable Item: 2. PRE-OP NURSE ENDOSCOPY SUITE Consult: Consult Request <u>Provisional Diagnosis: test diagnosis</u> ← Free text diagnosis <u>Reason For Request:</u> Procedure: test procedure | | | | | | |

The CRT package will display ICD Diagnosis on the display details of Consults/Procedures orders.

- If the user selects an order to display details and the Provisional Diagnosis was entered as an ICD-9 diagnosis using the Lexicon, the ICD-9 diagnosis code and description/definition will be displayed.
- If the user selects an order to display details and the Provisional Diagnosis was entered as an ICD-10 diagnosis using the Lexicon, the ICD-10-CM diagnosis code and full description/definition will be displayed.
- If the user selects an order to display and the Provisional Diagnosis was entered using free text data entry, then Consults will not designate the diagnosis as ICD-9 or ICD-10.
- If the user selects an existing consult to display and the Provisional Diagnosis was entered using the Lexicon then Consults will designate the particular diagnosis as ICD-9 or ICD-10.

Order Details - 3389564;1

PROSTHETICS REQUEST Cons Bedside *UNSIGNED*

Activity:
08/10/2010 10:52 New Order entered by
Order Text: PROSTHETICS REQUEST Cons Bedside
Nature of Order: ELECTRONICALLY ENTERED
Ordered by:
Signature: NOT SIGNED

Current Data:
Current Primary Provider:
Current Attending Physician:
Treating Specialty: MEDICINE
Ordering Location: C MEDICINE
Start Date/Time:
Stop Date/Time:
Current Status: UNRELEASED
Orders that have not been released to the service for action.
Order #3389564

Order:
Consult to Service/Specialty: PROSTHETICS REQUEST
Reason for Request:

=====

(Describe PROSTHETIC APPLIANCE or REPAIR)

ISSUING INSTRUCTIONS:
 VETERAN WILL PICK UP
 WARD/CLINIC PERSONNEL WILL PICKUP
 DELIVERY LOCATION
 ISSUED TO VETERAN BY CLINIC PERSONNEL
FOR (INPATIENT) - ESTIMATED DISCHARGE DATE:

Category: INPATIENT
Urgency: ROUTINE
Place of Consultation: Bedside
Provisional Diagnosis: Acquired deformity of chest and rib 738.3

Will include label indicating diagnosis is ICD-9 or ICD-10.

Coded Diagnosis selected from Lexicon is displayed with Description and Code.

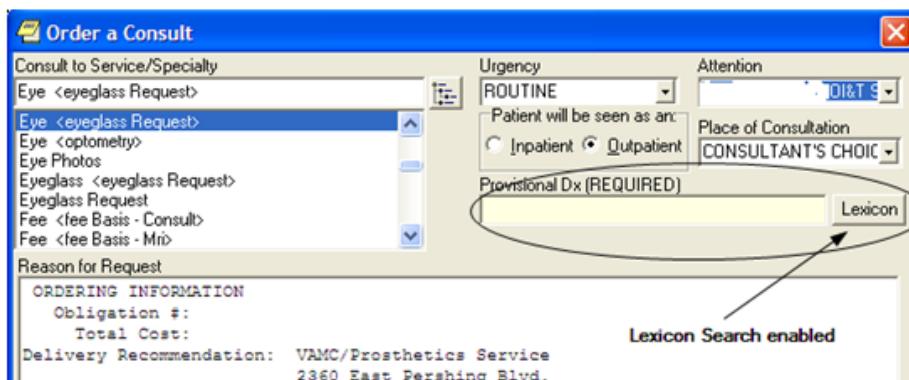
Print Close

Package Operation

- ICD Diagnosis on the Display SF 513 action will be displayed for a particular Consults or Procedure.
 - If the user performs the action Display SF 513 for a consult or procedure for which ICD-10 diagnosis was entered, Consults will display the ICD-10-CM diagnosis code and full description/definition.
 - If the user performs the action Display SF 513 for a consult or procedure and the Provisional Diagnosis was entered using free text data entry, then Consults will not designate the diagnosis as ICD-9 or ICD-10.
 - If the user performs the action Display SF 513 for a consult or procedure and the Provisional Diagnosis was entered using the Lexicon, then Consults will designate the particular diagnosis as ICD-9 or ICD-10.

ICD Diagnosis Search

Consults will provide the ability to search on ICD-10-CM diagnosis full (expanded) text descriptions and codes.



Package Operation

- Consults will display ICD Diagnosis on the Display SF 513 action for a particular Consults or Procedure.
 - If the user performs the action Display SF 513 for a consult or procedure for which ICD-10 diagnosis was entered, Consults will display the ICD-10-CM diagnosis code and full description/definition.
 - If the user performs the action Display SF 513 for a consult or procedure and the Provisional Diagnosis was entered using free text data entry, Consults will not designate the diagnosis as ICD-9 or ICD-10.
 - If the user performs the action Display SF 513 for a consult or procedure and the Provisional Diagnosis was entered using the Lexicon, then Consults will designate the particular diagnosis as ICD-9 or ICD-10.

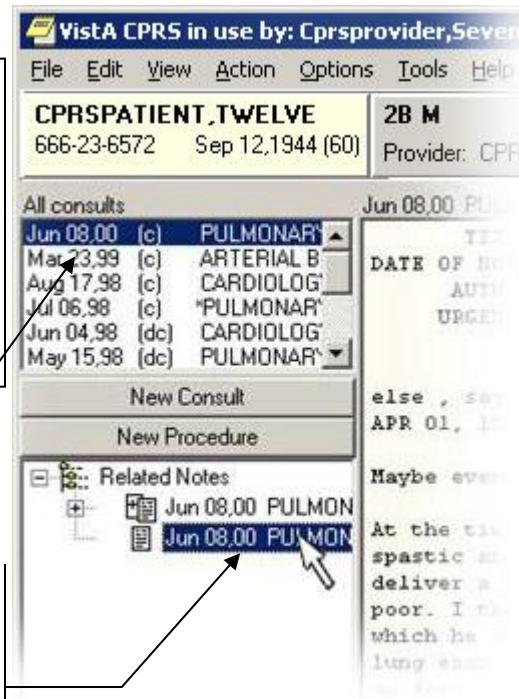
Make Addendum

An Addendum is a *medical* statement by a patient care professional about a specific Note. It differs from a Comment in that it is about medical matters, where Comments, which can be written by anyone, should contain information needed to *administer* the consult.

1. Select the Consult and the Note

a) First click on the consult.

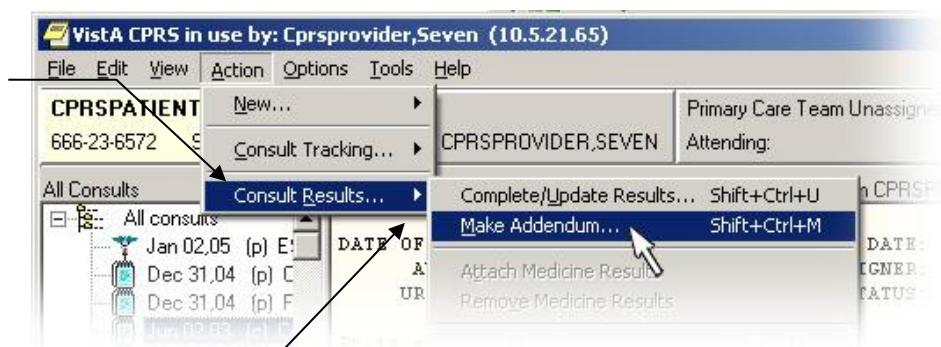
b) Then, select the note by clicking on it.



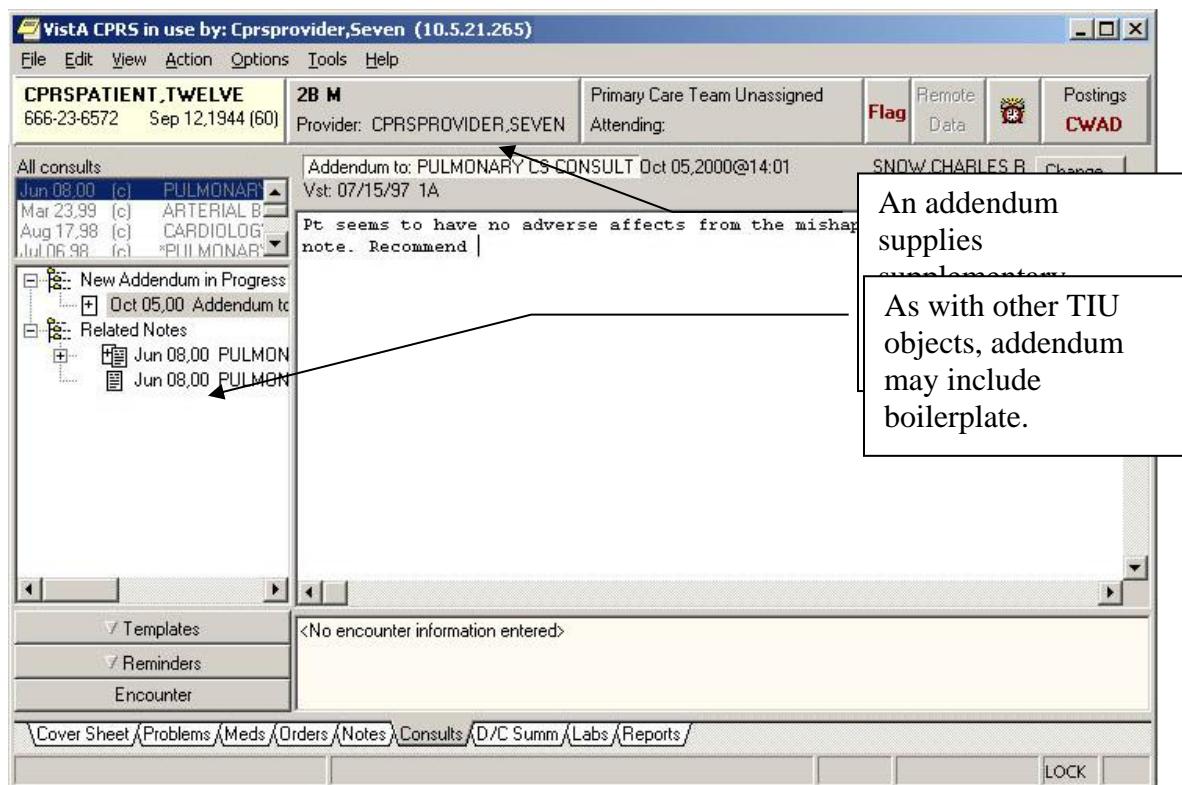
2. Select Make Addendum

Click on Action, then Consult Results, and then Make Addendum.

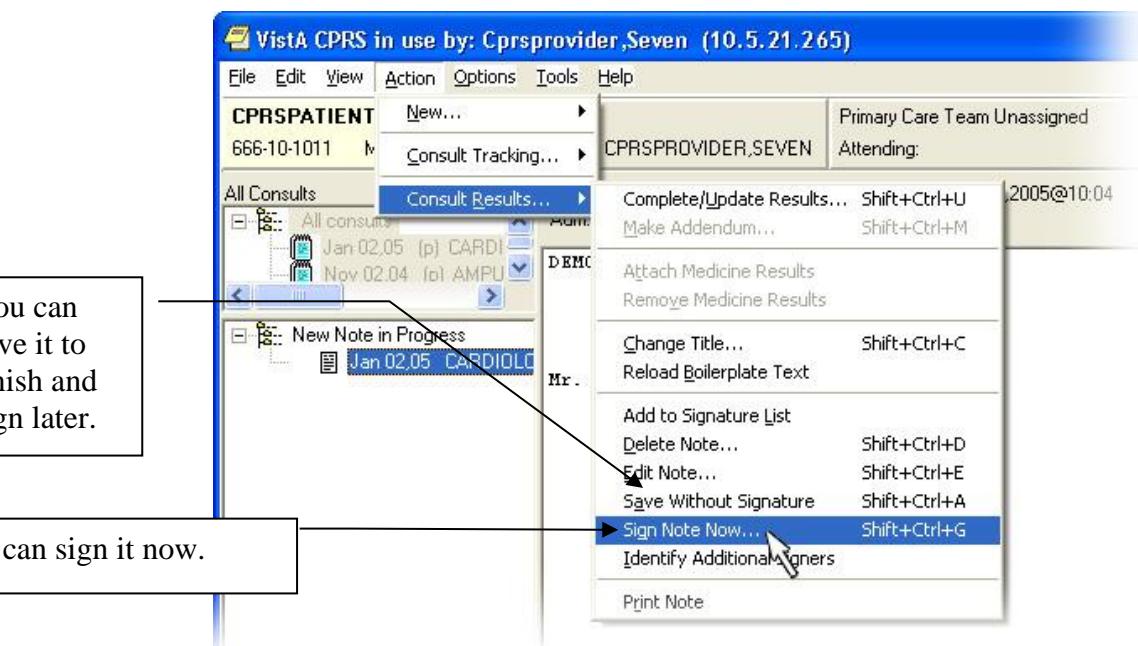
Or follow the underlined character on the keyboard by pressing Alt+A (together), then C, and then



3. Type the addendum:

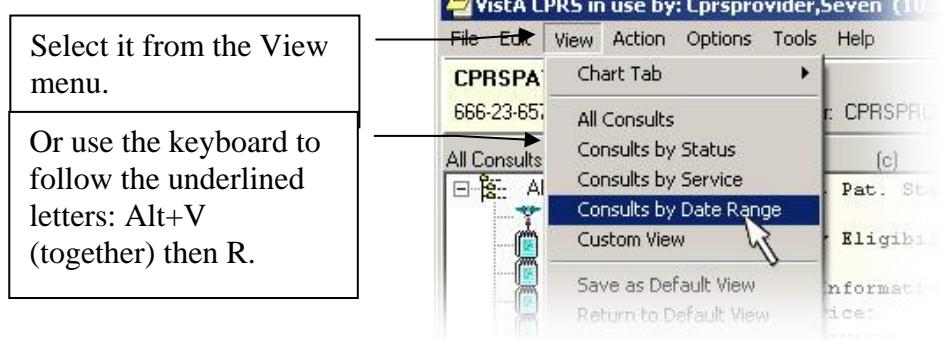


4. Save the note:

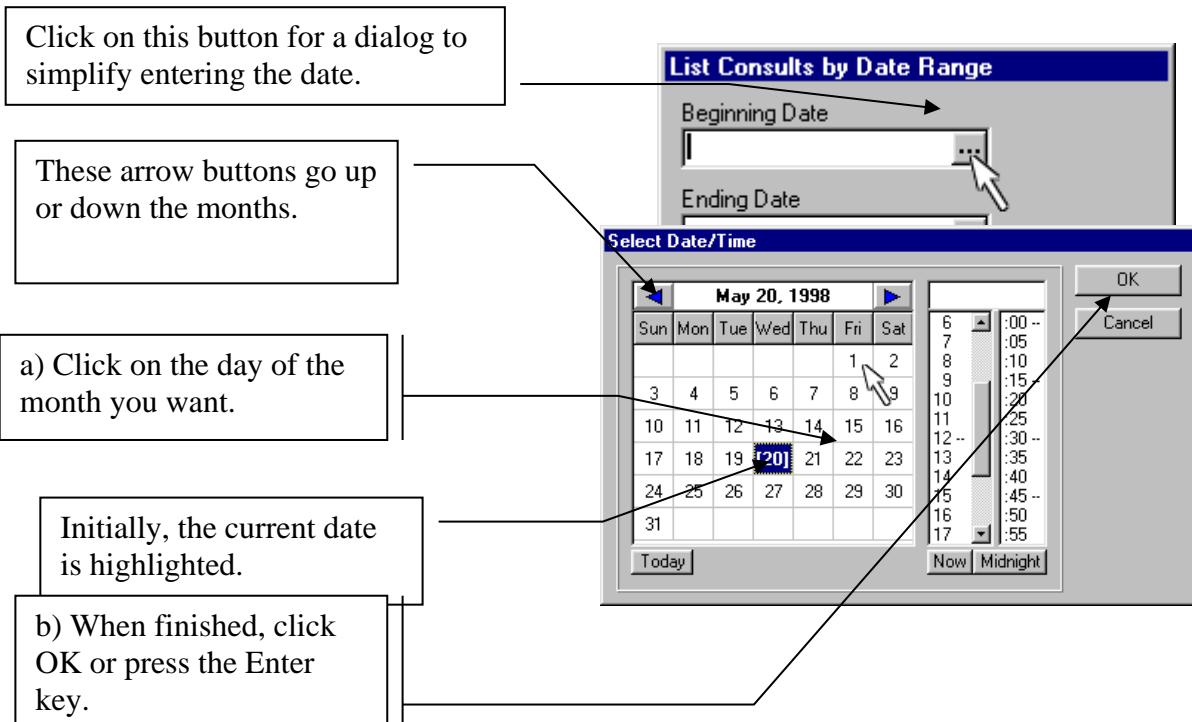


New Date Range

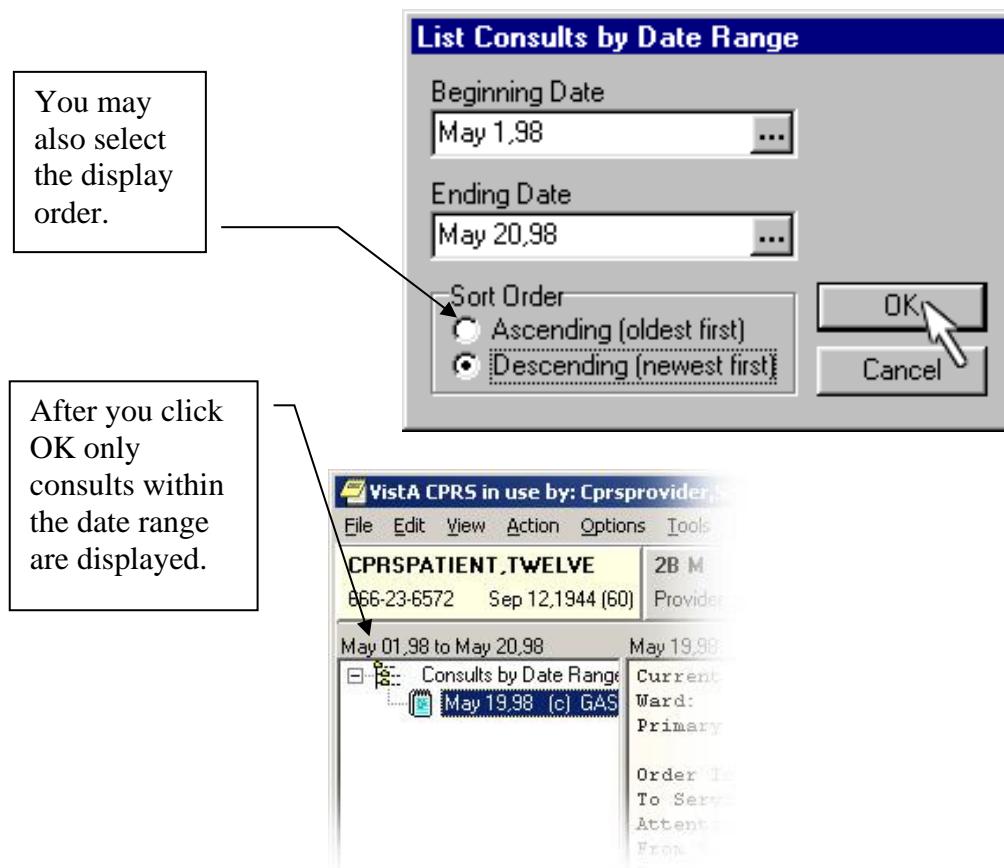
1. Select Consults by Date Range:



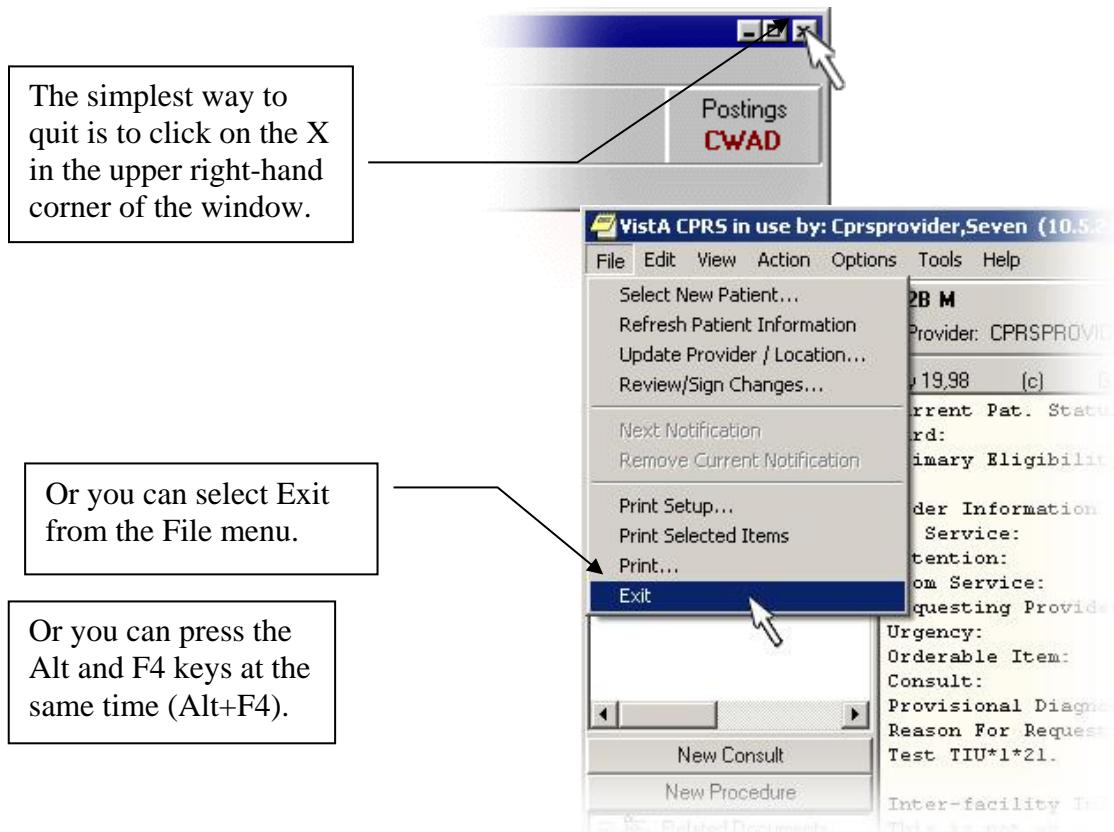
2. Fill in the List Consults by Date Range Dialog:



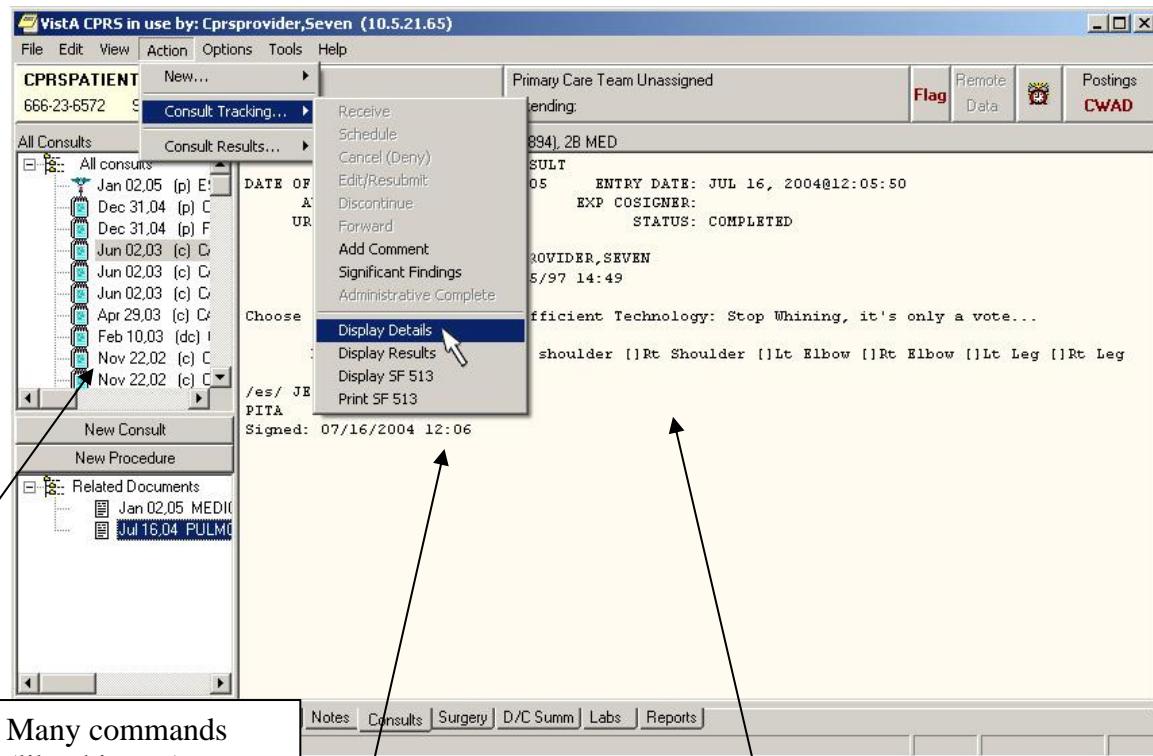
3. Select OK:



Quit



Results Display



Many commands (like this one) require that you first highlight the correct entry.

mean Inter-Facility Consult, CPRS's Remote results over the VA Intranet. This may take

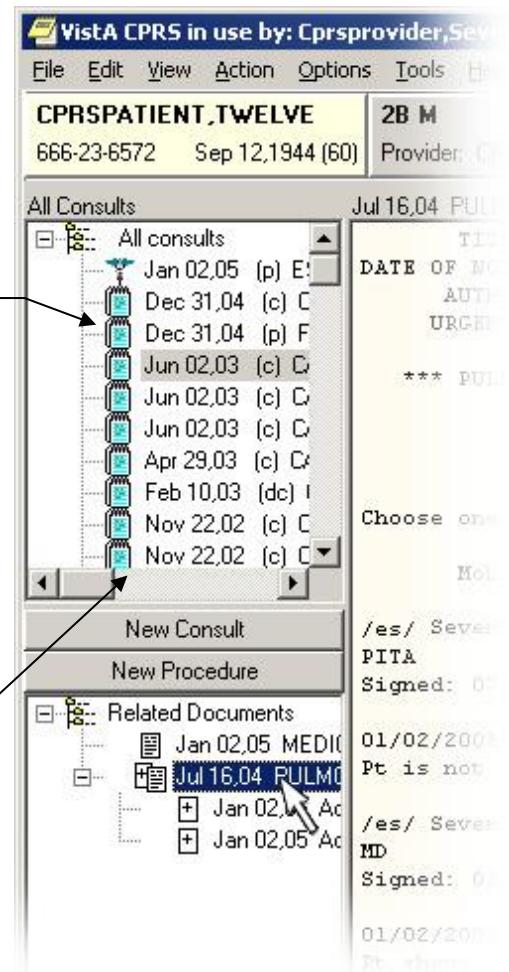
Get the results for the current consult by selecting Action then Consult Tracking then Display Results from the menu bar.

The results display gives only the signed results and addendum making it easier to focus in on the information you need. It also gives author information on unsigned and/or unreleased notes.

Select Consult

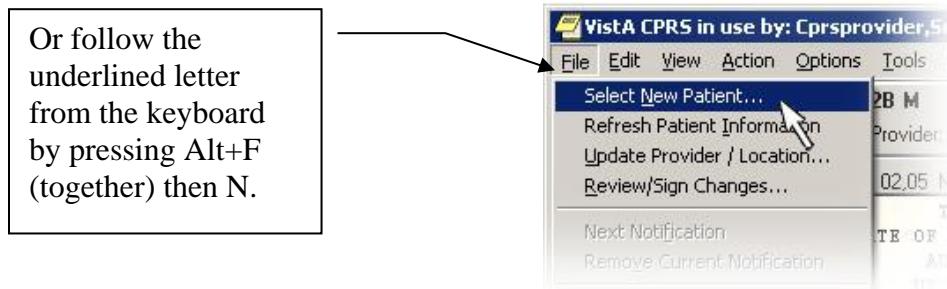
a) Click on the consult you want to view or perform an action on.

b) If the consult has more than one note associated with it, that is indicated here. For many actions, you must select an item in this pane before performing the action.

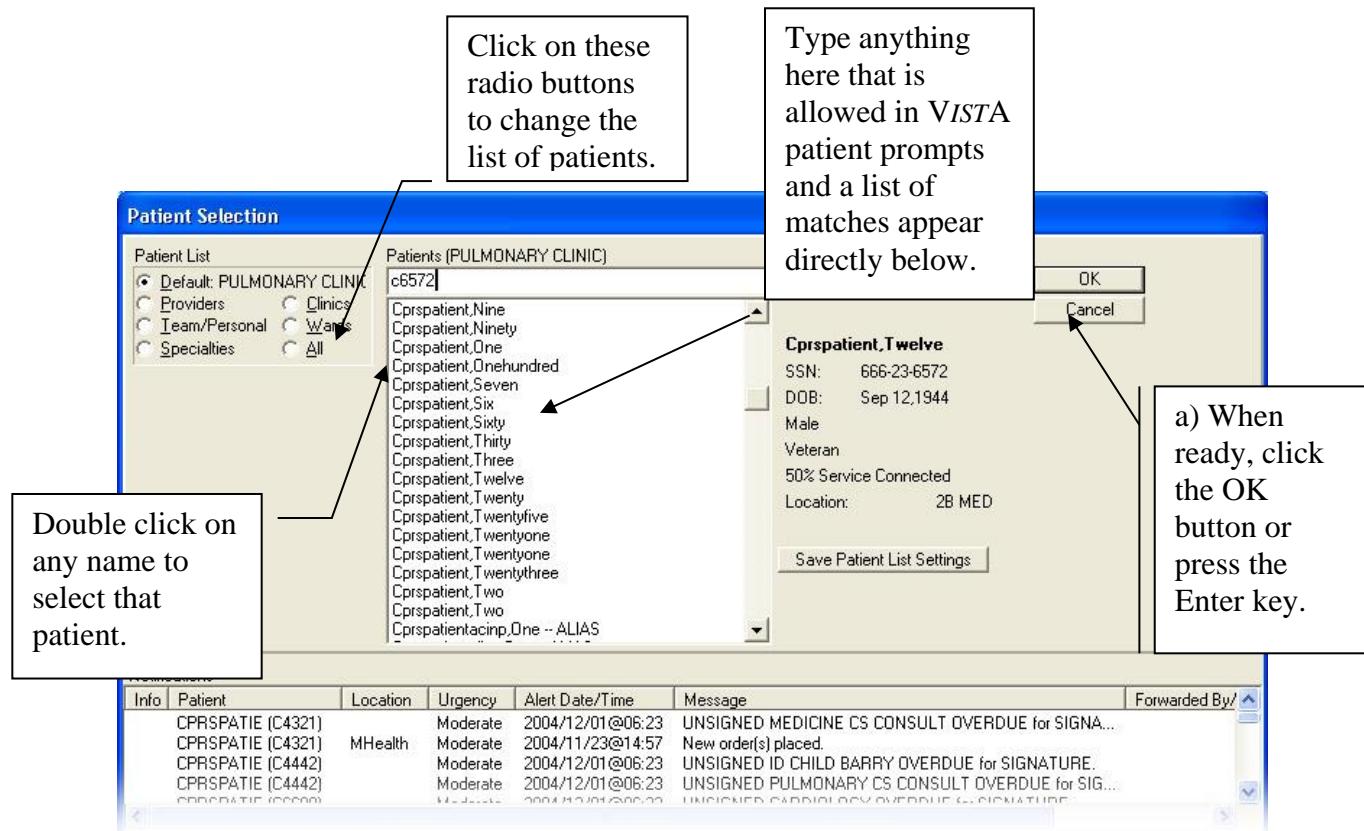


Select New Patient

1. Choose Select New Patient from the File Menu:

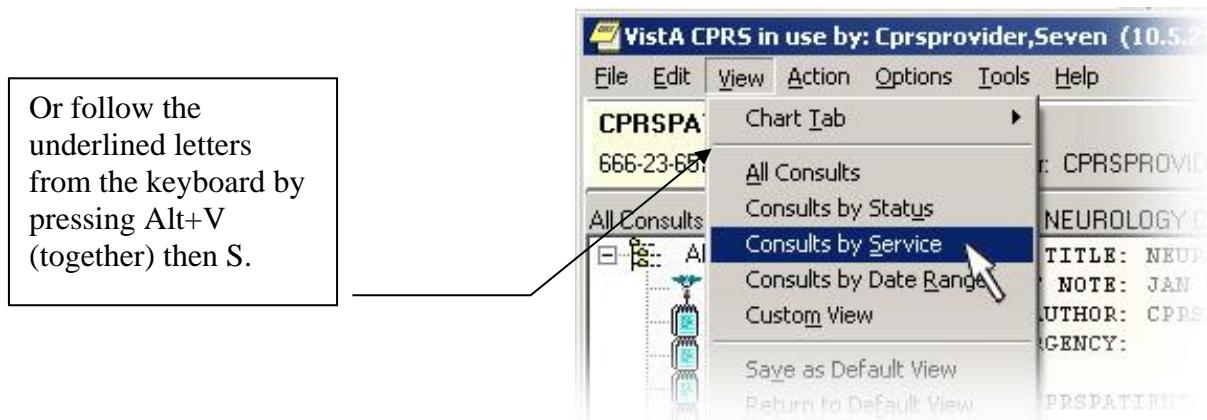


2. Use the Patient Selection Dialog:

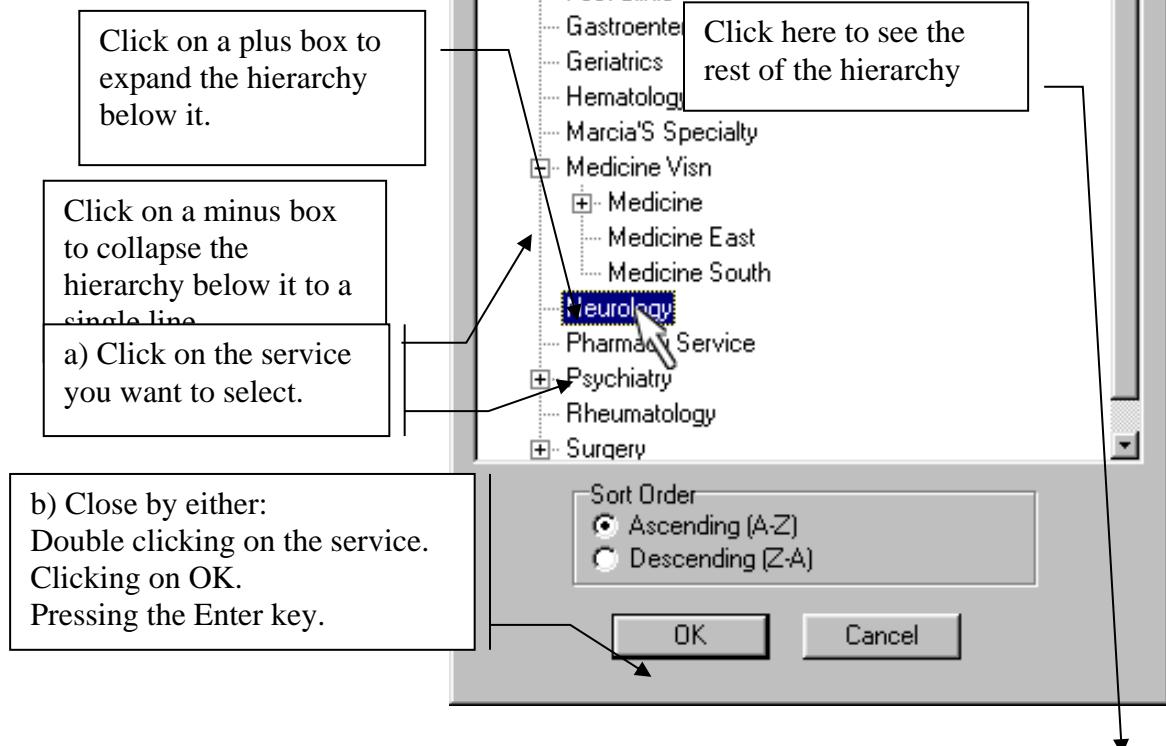


Select Service

1. Select Consults by Service from the View Menu:



2. Select the service you want:



View by Status

1. Select Consults by Status from the View Menu:

Or follow the underlined letters from the keyboard by pressing Alt+V (together) then U.

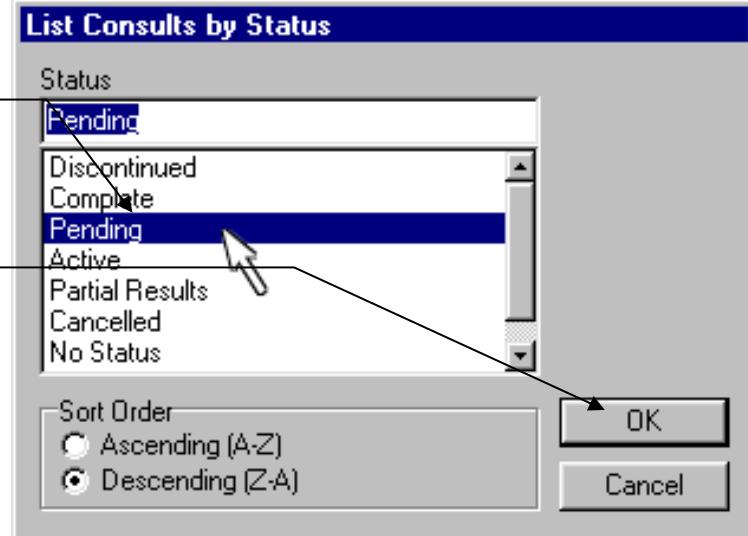


2. Select the status you want from the list:

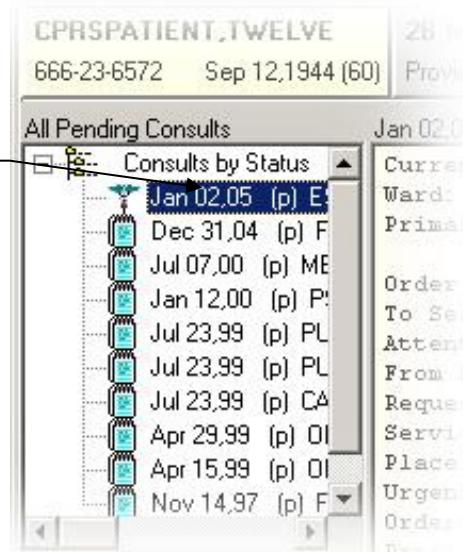
a) Click on the status you want to see.

b) When finished, click the OK button or press the Enter key.

Hold down the Ctrl key when selecting to select more than one status.

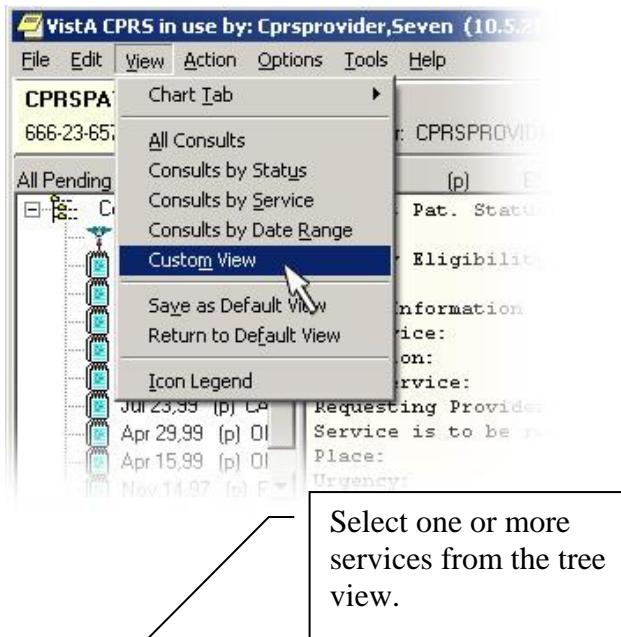


c) Now the list of consults only has ones with the status you selected.



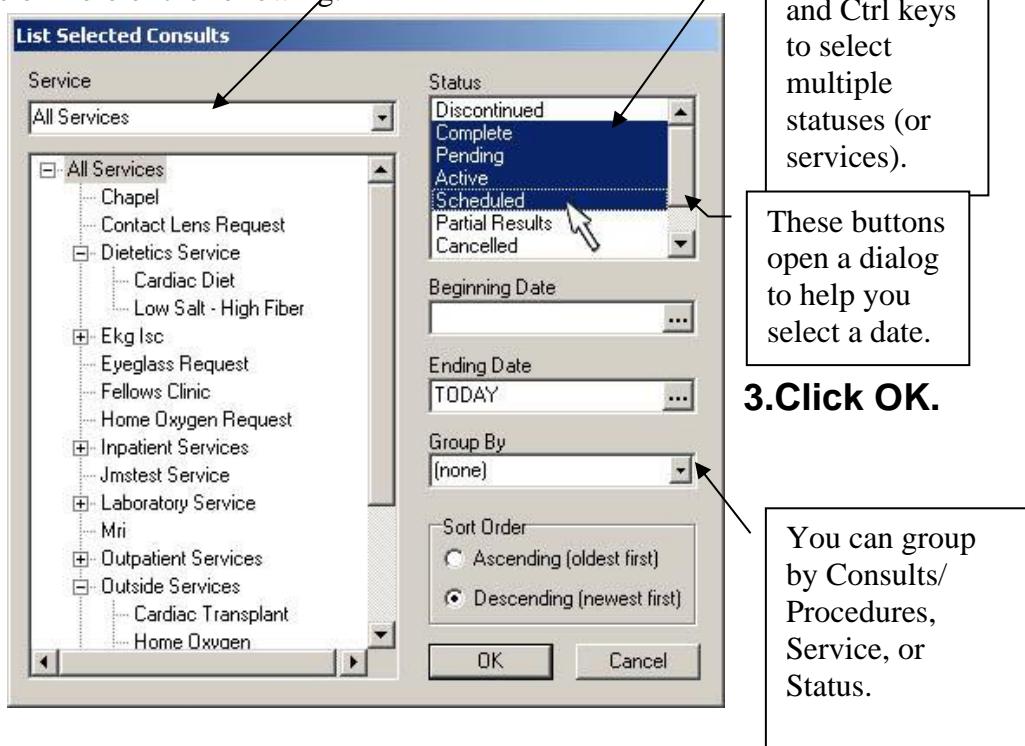
Custom List

1. Select Custom View from the View Menu:



3. Select the view you want.

Do one or more of the following:



Package Reference

There are three menus, six notifications, and 18 actions that make up the package that is Consults. In the preceding section, **Package Operation**, we discussed a number of these in order to explain how the Consult/Request Tracking package works. In this section, we give each of a description of each of these in turn to provide reference information for you.

General Service User Menu

If you are a Consults user from a service other than Medicine or Pharmacy services, you probably have the GMRC General Service User menu. This menu gives you access to all the basic functionality you need to track Consults for your service.

As a General Service User, you have access to three basic options as shown in this example:

```
Select Consult Service Tracking Option: ?  
CS      Consult Service Tracking  
PC      Service Consults Pending Resolution  
ST      Completion Time Statistics  
  
Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.  
Select Consult Service Tracking Option:
```

Consult Service Tracking Option

The Consult/Request Service Tracking option may be used to:

Review the latest activity related to a patient's consult/procedure request orders.

Update or track activities related to a patient's consults.

The menu of actions available to you depends on whether you are a Review Only user or an Update user. The names and the synonyms for each menu action is listed below:

Review Only and Update Actions

| ACTION NAME | SYNONYM | GUI Menu Action |
|-------------------|---------|--|
| Next Screen | + | |
| Previous Screen | - | |
| Add Comment | CM | Action Consult Tracking Add Comment |
| Change Date Range | CV;DT | View Consults by Date Range |
| Detailed Display | DD | Action Consult Tracking Detailed Display |
| Edit/Resubmit | ER | Action Consult Tracking Edit Resubmit* |
| Redisplay Screen | RD | |
| Select Patient | SP | File Select New Patient |
| Select Service | CV;SS | View Consults by Service |
| Print Form 513 | PF | File Print |
| Quit | Q | File Exit |
| Results Display | RT | Action Consult Tracking Display Results |
| View By Status | CV;ST | View Consults by Status |

* ER (Edit/Resubmit) may be used only by the originating provider or an update user. It is available on this menu in case the originating provider is not an update user.

Update Only Actions

| ACTION NAME | SYNO NYM | GUI Menu Command |
|----------------------|----------|--|
| Complete (Update) | CT | Action Consult Results Complete/Update Results |
| Cancel (Deny) | DY | Action Consult Tracking Deny |
| Discontinue | DC | Action Consult Tracking Discontinue |
| Forward | FR | Action Consult Tracking Forward |
| Receive | RC | Action Consult Tracking Receive |
| Remove Med Rslt | RM | Action Consult Tracking Remove Medicine Results |
| Schedule | SC | Action Consult Tracking Schedule |
| Significant Findings | SF | Action Consult Tracking Significant Findings |
| Make Addendum | MA | Action Consult Results Make Addendum |

Each review screen displayed has a prompt at the bottom of the display screen. This prompt varies according to what Consults thinks you are going to do next. Thus it is either “Select Consult:” or “Select Action:” depending on various system variables. If the prompt is “Select Consult:” you may either select a consult or an action. If the prompt is “Select Action:” you may only select an action. In either case a ? at this prompt provides you with a menu of actions.

Before you use this option, you need to know:

- The patient's name or identification.

You may identify a patient by entering information other than the patient's name. Some possibilities are: Social Security Number (SSN), Ward Location, or Room-Bed, at the Select Patient prompt.

- The service or specialty.

The default answer at the Select Service/Specialty Tracking prompt is always ALL SERVICES//. The response you make at the prompt determines what action you are able to select. If you accept the ALL SERVICES default, the Review Only actions are the only ones available. Alternatively, a service/specialty could be specified to restrict the number of consults to review. If you are an Update user for the service/specialty you selected, then you have all actions available to you at the action prompt.

An example of the Consult/Request Service Tracking option and default Review Only actions available for use with the option are shown in the following sample dialogue. User responses are in bold.

```
Select Consult Service Tracking Option: ?  
CS      Consult Service Tracking  
PC      Service Consults Pending Resolution  
ST      Completion Time Statistics  
  
Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.  
  
Select Consult Service Tracking Option: CS  Consult/Request Service Tracking  
Select Patient: CPRSPATIENT,FOUR          01-01-51    666123456    YES    SC VET  
ERAN  
  
Select Service/Specialty: ALL SERVICES// <Enter> ALL SERVICES  
List From Starting Date: ALL DATES// <Enter> ALL
```

Select the Consult/Request Service Tracking option from your menu and enter the name of the patient whose consults/requests you want to review.

Package Reference

At the Select Service/Specialty prompt enter the name of the Service or hierarchy of services the consult was referred to. If consults are available in the service or hierarchy for the patient specified, they are listed as shown in the following display.

```
CONSULT TRACKING          Oct 06, 2000 08:24:24      Page: 1 of 10
CPRSPATIENT, FOUR    666-44-2222    8E/3E101-1      MAR 3,1960 (40) <AD>
                                         Wt.(lb): 184

Requested St      No.   Consult/Procedure Request
1   10/06/00   p     1766   EYE CLINIC Cons

Enter ?? for more actions
SP Select Patient      RT Results Display      ER Edit/Resubmit
CV Change View ...      PF Print Form 513
DD Detailed Display     CM Add Comment
Select: Quit//
```

Review Only Actions

Enter ?? at the Select Item(s) prompt to see the complete list of options available to you.

```
Select Consult: Quit// ??

Enter the display number of the item you wish to act on, or select an action.

If you'd like another view of the consults, enter CV.

Status key:
  'a' - active           'c' - complete         'dc' - discontinued
  'p' - pending          'x' - cancelled        'pr' - partial results
  's' - scheduled        'e' - expired

Enter ?? to see a list of actions available for navigating the list.

Press <return> to continue ...
The following actions are also available:
+   Next Screen          RD   Redisplay Screen
-   Previous Screen       UP   Up a Line           CWAD Display CWAD Info
FS  First Screen         DN   Down a Line
LS  Last Screen          PS   Print Screen
GO  Go to Page           PT   Print List          SL   Search List
                                         EX   Exit

Enter RETURN to continue or '^' to exit:
```

If you are an update user, the menu of actions includes additional actions such as received, completed, and discontinued.

The help display also includes a key to abbreviations used in consult screens, including the Consult Tracking screen currently under discussion.

Update Select Actions

If you are an Update user, then the Consult Tracking display looks like this:

| | | |
|-----------------------------|------------------------|----------------------------------|
| CONSULT TRACKING | Oct 06, 2000 08:26:04 | Page: 1 of 2 |
| CPRSPATIENT, FOUR | 666-44-2222 8E/3E101-1 | MAR 3, 1960 (40) <AD> |
| | | Wt. (lb): 184 |
| Requested | St | No. Consult/Procedure Request |
| 1 11/17/98 | x | 1211 BRONCHOSCOPY PULMONARY Proc |
| 2 07/13/98 | c | 1112 *PULMONARY Cons |
| 3 06/18/98 | c | 1062 *PULMONARY Cons |
| 4 06/12/98 | c | 1050 PULMONARY Cons |
| 5 06/08/98 | c | 1028 PULMONARY Cons |
| 6 06/04/98 | dc | 1022 PULMONARY Cons |
| 7 05/27/98 | dc | 940 PULMONARY Cons |
| 8 05/20/98 | dc | 919 PULMONARY Cons |
| 9 05/13/98 | c | 898 *PULMONARY Cons |
| 10 05/01/98 | c | 881 PULMONARY Cons |
| 11 04/15/98 | c | 843 PULMONARY Cons |
| 12 03/16/98 | c | 827 PULMONARY Cons |
| + Enter ?? for more actions | | |
| SP Select Patient | FR Forward | CT Complete/Update |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum |
| RC Receive | DC Discontinue | SF Sig Findings |
| SC Schedule | CM Add Comment | DD Detailed Display |
| Screen// | | RT Results Display |
| | | PF Print Form 513 |
| | | RM Remove Med Rslt |
| | | ER Edit/Resubmit |
| | | Select: Next |

Each action is described in detail in the **Actions** section of **Package** Reference starting on page 108.

Completion Time Statistics

This report is intended to help hospitals track overall quality of service. High numbers on this report can indicate the presence of bottlenecks in the organization that might need management attention.

In the following example, a report on completion times is printed for Pulmonary Service:

```
Select Consult Service Tracking Option: ?
CS      Consult Service Tracking
PC      Service Consults Pending Resolution
ST      Completion Time Statistics

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select Consult Service Tracking Option: ST  Completion Time Statistics

Select Service/Specialty: ALL SERVICES// PULMONARY
List From Starting Date: ALL DATES//
...HMMM, LET ME THINK ABOUT THAT A MOMENT .....
```

```
DAYS TO COMPLETE CONSULT STATOct 06, 2000 08:28:22          Page: 1 of 1
Number Of Days To Complete A Consult For Services Statistics.
FROM: ALL TO: OCT 6,2000

          Consult/Request Completion Time Statistics
          FROM: ALL TO: OCT 6,2000

SERVICE: PULMONARY
Total Number Of Consults Completed: 200
Mean Days To Complete: 46.8                                Standard Deviation: 104.7
Total INPATIENT Consults: 32
Mean Days To Complete: 60.7                                Standard Deviation: 125.1
Total OUTPATIENT Consults: 30
Mean Days To Complete: 93.4                                Standard Deviation: 155.5
Total Unclassified Consults: 138
Mean Days To Complete: 33.4                                Standard Deviation: 81.0

Enter ?? for more actions
SS  Select Service      PR  Print Completion Statistics To A Printer.
Select Item(s): Quit//
```

Service Consults Pending Resolution

The purpose of the Service Consults Pending Resolution option is to list the pending and active consults. Use it to stay informed about the overall status of consults for your service.

In the following example, the option is used to view pending and active Pulmonary consults:

```
Select Consult Service Tracking Option: ?
CS      Consult Service Tracking
PC      Service Consults Pending Resolution
ST      Completion Time Statistics

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select Consult Service Tracking Option: PC  Service Consults Pending Resolution
Select Service/Specialty: PULMONARY
List From Starting Date: ALL DATES// <Enter>
...EXCUSE ME, LET ME THINK ABOUT THAT A MOMENT...
```

| Service Consults by Status | | Oct 06, 2000 08:31:39 | Page: 1 of 5 |
|---------------------------------|------------------------------|--|--------------------------|
| To Service: PULMONARY | | | <input type="checkbox"/> |
| From: ALL To: OCT 6,2000 | | | <input type="checkbox"/> |
| Status | Last Action | Request Date Patient Name Consult/Request By Status | Pt Location |
| | | FROM: ALL TO: OCT 6,2000 | <input type="checkbox"/> |
| SERVICE: PULMONARY | | | |
| Pending | CPRS RELEASED ORDER 09/20/00 | CPRSRPATIENT,FOU (6572) | 2B MED |
| Pending | CPRS RELEASED ORDER 09/19/00 | CPRSRPATIENT,ONE (5678) | 2B MED |
| Pending | CPRS RELEASED ORDER 09/19/00 | CPRSRPATIENT,FIV (1111) | 2B MED |
| Pending | CPRS RELEASED ORDER 07/20/00 | CPRSRPATIENT,TWO (3241) | 2B MED |
| Pending | PRINTED TO 06/29/99 | CPRSRPATIENT,SIX (8829) | GENERAL MEDICINE |
| Pending | PRINTED TO 06/28/99 | CPRSRPATIENT,FOU (3779) | 1A |
| Pending | PRINTED TO 06/15/99 | CPRSRPATIENT,SEV (8828) | 13A PSYCH |
| Pending | PRINTED TO 06/08/99 | CPRSRPATIENT,FIF (4111) | 1A |
| Pending | PRINTED TO 06/03/99 | CPRSRPATIENT,EIG (2345) | ONCOLOGY |
| Pending | PRINTED TO 06/03/99 | CPRSRPATIENT,SIX (9235) | 1A |
| Pending | PRINTED TO 06/03/99 | CPRSRPATIENT,NIN (3242) | ONCOLOGY |
| Pending | PRINTED TO 06/03/99 | CPRSRPATIENT,TEN (5525) | ONCOLOGY |
| + Enter ?? for more actions >>> | | | |
| Service | Status | Number on/off | Print List |
| Select Item(s): Next Screen// | | | |



Note: Someone in your clinic or service should review this list daily to make sure that all consults are being attended to.

Consult Status

The following table gives the statuses that Consults uses, along with their abbreviation, name, and description:

| Abbreviation | Name | Description |
|--------------|-----------------|---|
| a | ACTIVE | Orders that are active or have been accepted by the service for processing. |
| c | COMPLETE | Orders that require no further action by the ancillary service. |
| dc | DISCONTINUED | Orders that have been stopped prior to expiration or completion. |
| p | PENDING | Orders that have been placed but not yet accepted by the service filling the order. |
| pr | PARTIAL RESULTS | All or part of a consult completion report has been entered, but has not yet been signed. |
| s | SCHEDULED | The receiving clinic has scheduled an appointment for the patient. |
| x | CANCELLED | Orders that have been rejected by the ancillary service without being acted on. |

The following table gives the actions that Consults uses along with the status after the action is performed:

| Consult Actions | Status after Action |
|---------------------|---------------------|
| CPRS Released Order | PENDING |
| Discontinued | DISCONTINUED |
| Incomplete Report | PARTIAL RESULTS |
| Completed | COMPLETE |
| Edited/Resubmit | PENDING |
| Schedule | SCHEDULED |
| Forwarded | PENDING |
| Canceled | CANCELLED |
| Added Comment | No change in status |
| Received | ACTIVE |
| Printed | No change in status |

This table shows actions that are tracked in Consults V. 3.0. Actions that are new with 3.0 are indicated as well as which Consults menu (update or review) initiates the action. If an order status change can result from the action, the new status is shown.

| TRACKED ACTION TYPE | New V.3.0 | Update Actions | Review Actions | RELATED OE/RR STATUS | Comment |
|---------------------|--------------|----------------|----------------|-----------------------------|--|
| Added Comment | | X | X | | Review users can add a comment. |
| Addendum Added To | X | X | | | Based on adding a signed and released addendum to a completed note via the Complete/Update or Make Addendum action or through TIU actions. |
| Cancelled | X | X | | CANCELLED | This is used in 3.0 replacing the 2.5 Deny action. |
| Complete/Update | | X | | COMPLETE or PARTIAL RESULTS | Changed title to imply Complete can be chosen multiple times by clinicians entering results. TIU actions can also cause this tracking action. Includes the one-time Administrative Complete. |
| Disassociate Result | X | | | | Currently done through TIU actions. In the future will be used to remove an incorrectly associated note. |
| Discontinued | | X | | DISCONTINUED | No longer includes Denied. |
| Edit Before Release | Obs o- lette | | | UNRELEASED | Moved unreleased consults to Order Entry in CPRS conversion. |
| Edit/Resubmitted | X | | | PENDING | The originating provider can edit and resubmit a consult from either an alert or the Consult Tracking screen. An update user may also use this action. |
| CPRS Released Order | | | | PENDING | Used in 3.0 to represent a signed/released Consult order from CPRS. |
| Forwarded From | | X | | PENDING | |

Package Reference

| | | | | | |
|----------------|---|--|--|--------------------------|---|
| Incomplete RPT | | | | PARTIAL RESULTS | Status name has changed from Incomplete RPT. Based on Complete/Update action, and/or TIU actions, if the first consult note is not completed. |
| New Note Added | X | | | PARTIAL RESULTS/COMPLETE | Based on Complete/Update action and/or TIU actions. |

Consult Action/Status Overview (Continued)

| TRACKED ACTION TYPE | New V.3.0 | Update Actions | Review Actions | RELATED OE/RR STATUS | Comment |
|----------------------------|------------------|-----------------------|-----------------------|-----------------------------|---|
| Printed to | | | | | Based on the original order being signed and released, forwarded, and edit/resubmitted. The SF 513 printed at the Service is accomplished with the Consult package hard-coded format. (OE/RR print templates cannot include results.) |
| Received | | | | ACTIVE | |
| Schedule | X | X | | ACTIVE | The Schedule action does not actually schedule an appointment or link to the scheduling package. It does allow a convenient way to annotate a consult after an appointment has been scheduled by some other means. |
| Service Entered | | | | ACTIVE | Currently unavailable. |
| Sig Finding Update | X | X | | | May be used independently from Administrative Complete action from 2.5. |
| Status Change | X | | | ACTIVE | Used by TIU when a note is disassociated from a consult and there are no other results associated with the it. |
| Unknown Action | X | | | NO STATUS | Used in displays if action is unknown. |

Actions

Brief Action Descriptions

Review Only Actions

- DD** The **Detailed Order Display** action displays specific order activities and details, audit/tracking trails and results.
- CT** The **New Date Range** allows you to change date range while in the Consult Tracking screen. This date range change does not change the patient or require you to select a new patient. It is a subordinate action to Change View (CV).
- CV** The **Change View** action gives you the capability to view consults by Service, Status, or Date Range. This is done by adding the modifying action to CV as such: CV;SS for Select Service. CV;ST for View by Status. CV;DT for New Date Range.
- PF** The **Print Form** action produces a copy of SF 513.
- RT** The **Results Display** action displays the results of the consult or procedure request order.
- SP** The **Select New Patient** action allows you to select a new patient's name at any time, while using this option, rather than having to log out of the option and log back in.
- SS** The **Select Service** action allows you to select a different service/specialty in which to review orders. It is a subordinate action to Change View (CV).
- ST** The **View by Status** action allows you to select one or more statuses to display on the screen. It is a subordinate action to Change View (CV).
- CM** This action synonym may be entered at the Select prompt if the Service/Specialty wishes to add a **Comment** to an existing consult order. An example is a comment indicating that the requesting clinician wants a HOLD put on an order that has already been Received and is active in a Service/Specialty.
- ER** Although the **Edit/Resubmit** action shows up on the Review Only menu, it can only be executed by the originating provider or an update user. When a consult is cancelled or denied for clerical reasons (such as insufficient data), then the information on the consult can be edited and resubmitted it with this action. Alternatively, the originating provider may perform this function from the alert.
- Q** The **Quit** action exits all Consults options.

Update Actions

- CT** The ***Complete Request*** action updates the CPRS status of a consult from Active to Completed. When the patient's consult review screen is displayed again, both the consult's current status and the Last Activity field will be updated to indicate that the consult's new current status is Completed.
- Complete Request also links you to TIU so that you can enter findings.
- CX** The ***Cancel (or Deny) Request*** action may be used by Service personnel to deny a request for completion of a consult/procedure received by their Service. A comment concerning the reason for denial must be added when using this action.
- DC** The ***Discontinue Order*** action allows Service/Specialty personnel to change an order's current status and Last Activity field to Discontinued. In addition, a comment may be added concerning the reason for discontinuance.
- FR** Entering the ***Forward Request*** allows you to forward a consult or request to any other Service/Specialty, provided that Service/ Specialty has been set up by IRM personnel to receive consults on line. As an example, this action could be used when Cardiology Service has mistakenly received a consult that should have been sent to Hematology Service.
- MA** The ***Make Addendum*** action allows one or more people to add their comments to the results of a consult. Contrast this to Add Comment, which adds a note to the consult.
- RC** The ***Received Request*** action is used by a Service/Specialty to acknowledge receipt of a new consult/request in the Service and to update the current CPRS status of the consult/request to Active rather than Pending. The Last Activity field on the patient's review screen will also be updated to indicate that the consult was Received.
- RM** The ***Remove Medicine Results*** action is used when a medicine result has been attached to a consult in error. Its use is restricted, but generally speaking, it can be done by anyone who can attach medicine results.
- SC** The ***Schedule*** action can be used by a Service/Specialty to annotate a consult that an appointment has been scheduled for the patient. (It does not schedule an appointment or link to the Scheduling Package.)
- SF** The ***Significant Findings*** action is used by a Service/ Specialty to mark a consult as having significant findings. When the Sig Findings flag is set to "Y" an asterisk is placed next to the consult in the review display.



Note: Actions that require you to select an existing order can be done in one of two ways:

Select the action.

Select the order.

Or

Select the order.

Select the action.

The actions that are affected by this are:

| | |
|----|------------------------|
| DD | Detailed Order Display |
| CM | Comment Order |
| CT | Complete Request |
| DC | Discontinue Order |
| CY | Deny Request |
| FR | Forward Request |
| RC | Received Request |
| SC | Schedule |
| ER | Edit/Resubmit |

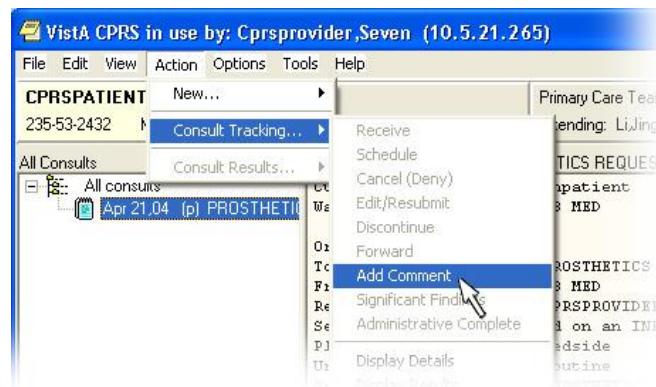
Add Comment (CM) Action

The Add Comment action allows you to append a comment to a consult order when important information about the consult needs to be added to the original order or when a caregiver needs to furnish information before the consult is ready to be closed out.

The Add Comment action can be performed by any user.

To use the Comment Order action from Windows:

- From the Consults tab, highlight the consult you want to add a comment to.
- Select Action|Consult Request|Add Comment.



Note: If this were an Inter-Facility Consult, individuals from the other facility involved would not be on this list. In this case, the Notification System decides who to notify at the other facility by referring to Consults files.

Cancel (or Deny) Consult

The Cancel action is one of several options the receiving clinic or service uses to process a request (see **Forward the Consult** under **Work Flow** page 24).

The originating clinician is automatically sent an alert that the request has been canceled. This action is provided for all update options in the Consults package.

Example:

```
Select Consult Management Option: CS Consult Service Tracking
Select Patient: CPRSPATIENT, FOUR 01-01-51 666123456 YES SC VET
ERAN

Select Service/Specialty: ALL SERVICES// PULMONARY
List From Starting Date: ALL DATES // <Enter> ALL DATES
```

| | | |
|--------------------------------------|-----------------------|-----------------------|
| CONSULT TRACKING | Jun 19, 1997 04:21:18 | Page: 1 of 1 |
| CPRSPATIENT, FOUR 666-43-8796 | 2B M | DEC 4,1949 (50) <CAD> |
| | | Wt.(lb): 184 |

| | | | |
|-----------|----------|-----|---------------------------------|
| Requested | St | No. | Consult/Procedure Request |
| 1 | 02/03/97 | a | 999 PULMONARY Consult |
| 2 | 02/03/97 | a | 989 PULMONARY Consult |
| 3 | 02/03/97 | c | 929 *PULMONARY Consult |
| 4 | 02/03/97 | c | 873 *PULMONARY Consult |
| 5 | 01/09/97 | c | 872 PULMONARY UGI |
| 6 | 09/06/96 | dc | 500 PULMONARY ECHO |
| 7 | 03/05/92 | dc | 444 PULMONARY Electrocardiogram |

| | | | | |
|---------------------------|------------------|---------------------|--------------------|--|
| Enter ?? for more actions | | | | |
| SP Select Patient | FR Forward | CT Complete/Update | RT Results Display | |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum | PF Print Form 513 | |
| RC Receive | DC Discontinue | SF Sig Findings | RM Remove Med Rslt | |
| SC Schedule | CM Add Comment | DD Detailed Display | ER Edit/Resubmit | |
| Select: Quit// CX | Cancel (Deny) | | | |

```
CHOOSE No. 1-2: 2
Responsible Clinician: CPRSPROVIDER, TWO CRS PHYSICIAN
Date/Time of Actual Activity: NOW// <Enter> (JUN 19, 1997@04:21)
Enter COMMENT:
 1>Duplicate Consult
 2> <Enter>
EDIT Option: <Enter>
```

(Continued on next page.)

Package Reference

| | | |
|---|-----------------------|------------------------|
| CONSULT TRACKING CPRSPATIENT, FOUR 666-43-8796 | Jun 19, 1997 04:22:02 | Page: 1 of 1 |
| | 2B M | DEC 4, 1949 (50) <CAD> |
| | | Wt. (lb): 184 |
| Requested St No. Consult/Procedure Request | | |
| 1 02/03/97 x 999 PULMONARY Consult | | |
| 2 02/03/97 a 989 PULMONARY Consult | | |
| 3 02/03/97 c 929 *PULMONARY Consult | | |
| 4 02/03/97 c 873 *PULMONARY Consult | | |
| 5 01/09/97 c 872 PULMONARY UGI | | |
| 6 09/06/96 dc 500 PULMONARY ECHO | | |
| 7 03/05/92 dc 444 PULMONARY Electrocardiogram | | |
| Enter ?? for more actions | | |
| SP Select Patient | FR Forward | CT Complete/Update |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum |
| RC Receive | DC Discontinue | SF Sig Findings |
| SC Schedule | CM Add Comment | DD Detailed Display |
| Select: Quit// | | RT Results Display |
| | | PF Print Form 513 |
| | | RM Remove Med Rslt |
| | | ER Edit/Resubmit |

The originating clinician has then has the option of editing and resubmitting the request. This is done either from the view alerts function, or from the consult tracking screen with the Edit/Resubmit (ER) action. An update user for the subject service may also edit and resubmit a canceled consult.

Change View (CV) Action

The Change View action is really three different actions packaged into one. They are:

- View by Status (ST)
- Change Date Range (DT)
- Select Service (SS)

Enter the CV action followed by one of these three options. You can do this as two different entries, or you can put both commands on the same line separated by a semicolon, like this:
CV;DT

In the following example we use the CV action to display selected statuses:

With this action you can selectively display consults on the Consult Tracking screen base on the consult's status. In the following example, the display is changed to view only consults with a status of Pending or Discontinued. For a list of consult statuses and their meanings, see page 104.

| | | | |
|---|--------------------|-----------------------|---|
| CONSULT TRACKING | | Jul 30, 1997 09:21:02 | Page: 1 of 2 |
| CPRSPATIENT, FOUR 666-43-8796 | | 2B M | DEC 4,1949 (50) <CAD> |
| | | | Wt. (lb): 184 |
| Requested | St | No. | Consult/Procedure Request |
| 1 | 10/06/00 | p | 1766 EYE CLINIC Cons |
| 2 | 09/21/00 | p | 1764 Electrocardiogram CARDIOLOGY Proc |
| 3 | 04/25/00 | s | 1713 CARDIOLOGY Cons |
| 4 | 03/21/00 | c | 1701 CARDIOLOGY (SOUTH) Cons |
| 5 | 02/22/00 | pr | 1687 PULMONARY (SOUTH) Cons |
| 6 | 01/26/00 | c | 1665 CARDIOLOGY Cons |
| 7 | 06/02/99 | c | 1483 VENTRICAL LEAD IMPLANT CARDIOLOGY Proc |
| 8 | 04/29/99 | a | 1455 CARDIOLOGY (oex) CARDIOLOGY Cons |
| 9 | 02/18/99 | x | 1395 CARDIOLOGY Cons |
| 10 | 01/06/99 | c | 1322 M'S SPECIALTY SEA-M'S SPECIALTY Cons |
| 11 | 01/05/99 | c | 1310 *GASTROENTEROLOGY CARDIOLOGY Cons |
| 12 | 01/04/99 | c | 1287 CARDIOLOGY Cons |
| + Enter ?? for more actions | | | |
| SP Select Patient | RT Results Display | ER Edit/Resubmit | |
| CV Change View ... | PF Print Form 513 | | |
| DD Detailed Display | CM Add Comment | | |
| Select Consult: Next Screen// CV Change View ... | | | |

| |
|---|
| DT Date Range |
| ST Status |
| SS Service |
| Only Display Consults With Status of: All Status's// p Pending |
| Another Status to display: s Scheduled |
| Another Status to display: a Active |
| Another Status to display: <Enter> |

(Continued on the next page.)

Package Reference

| | | |
|---|--|---|
| CONSULT TRACKING CPRSPATIENT, FOUR 666-43-8796 | Jul 30, 1997 09:21:10 2B M | Page: 1 of 1 DEC 4, 1949 (50) <CAD> Wt. (lb): 184 |
| Requested St No. Consult/Procedure Request | | |
| 1 10/06/00 p | 1766 EYE CLINIC Cons | <input type="checkbox"/> |
| 2 09/21/00 p | 1764 Electrocardiogram CARDIOLOGY Proc | |
| 3 04/25/00 s | 1713 CARDIOLOGY Cons | |
| 8 04/29/99 a | 1455 CARDIOLOGY (oex) CARDIOLOGY Cons | |

Enter ?? for more actions

| | | |
|------------------------|--------------------|------------------|
| SP Select Patient | RT Results Display | ER Edit/Resubmit |
| CV Change View ... | PF Print Form 513 | |
| DD Detailed Display | CM Add Comment | |
| Select Consult: Quit// | | |

Complete Request (CT) Action

The Complete Request action which updates a consult order's CPRS status to completed (c).

Using the CT action informs the system that you are completely finished with a consult or procedure. An alert is sent to the originating provider and marks the record of the consult as complete.

Finally, the Complete action links you to TIU so that you can enter results. See page 27 for an example of this feature.

If a user is set up as either an Administrative User or on an Administrative User Team, the option exists to perform an Administrative Complete. In the GUI (Windows) interface, this is a separate command under Action | Consult Tracking. In List Manager, if the user has Administrative privileges, then the program asks if an Administrative Complete should be performed. (An Administrative complete does not have results attached to it.)

Deny Request (DY) Action

The Deny Request action has been subsumed by the Cancel action. See Cancel (CX) Action on page 112.

Detailed Order Display (DD) Action

The Detailed Order Display action provides a list of all consult information contained in the computer file.

Example:

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-----------------------------------|---|--------------------|---|-------------------------------|---|--|--|--|------------------|-------------------|--|------------------|-----------------|--|------------------|-----------------------------------|--|---------------------------|--|--|--|-------------------|------------|--------------------|--------------------|--------------------|------------------|------------------|-------------------|------------|----------------|-----------------|--------------------|-------------|----------------|---------------------|------------------|-------------------------|----------------|--|--|
| Select Consult Management Option: CS Consult Service Tracking Select Patient: CPRSPATIENT, FOUR CPRSPATIENT, FOUR VETERAN | 12-04-49 | 666438796 | SC | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Select Service/Specialty: ALL SERVICES// PULMONARY List From Starting Date: ALL DATES // <Enter> ALL DATES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"><tr><td>CONSULT TRACKING CPRSPATIENT, FOUR 666-43-8796</td><td>Nov 01, 1997 13:55:32 2B M</td><td>Page: 1 of 1 DEC 4, 1949 (50) <CAD> Wt. (lb): 184</td></tr><tr><td colspan="3">Requested St No. Consult/Procedure Request</td></tr><tr><td>1 11/01/97 c 675</td><td colspan="2">PULMONARY Consult</td></tr><tr><td>2 10/06/00 p 566</td><td colspan="2">EYE CLINIC Cons</td></tr><tr><td>3 09/21/00 p 464</td><td colspan="2">Electrocardiogram CARDIOLOGY Proc</td></tr><tr><td colspan="4">Enter ?? for more actions</td></tr><tr><td>SP Select Patient</td><td>FR Forward</td><td>CT Complete/Update</td><td>RT Results Display</td></tr><tr><td>CV Change View ...</td><td>CX Cancel (Deny)</td><td>MA Make Addendum</td><td>PF Print Form 513</td></tr><tr><td>RC Receive</td><td>DC Discontinue</td><td>SF Sig Findings</td><td>RM Remove Med Rslt</td></tr><tr><td>SC Schedule</td><td>CM Add Comment</td><td>DD Detailed Display</td><td>ER Edit/Resubmit</td></tr><tr><td>Select:Quit// DD</td><td>Detail Display</td><td colspan="2"></td></tr></table> | | | | CONSULT TRACKING CPRSPATIENT, FOUR 666-43-8796 | Nov 01, 1997 13:55:32 2B M | Page: 1 of 1 DEC 4, 1949 (50) <CAD> Wt. (lb): 184 | Requested St No. Consult/Procedure Request | | | 1 11/01/97 c 675 | PULMONARY Consult | | 2 10/06/00 p 566 | EYE CLINIC Cons | | 3 09/21/00 p 464 | Electrocardiogram CARDIOLOGY Proc | | Enter ?? for more actions | | | | SP Select Patient | FR Forward | CT Complete/Update | RT Results Display | CV Change View ... | CX Cancel (Deny) | MA Make Addendum | PF Print Form 513 | RC Receive | DC Discontinue | SF Sig Findings | RM Remove Med Rslt | SC Schedule | CM Add Comment | DD Detailed Display | ER Edit/Resubmit | Select:Quit// DD | Detail Display | | |
| CONSULT TRACKING CPRSPATIENT, FOUR 666-43-8796 | Nov 01, 1997 13:55:32 2B M | Page: 1 of 1 DEC 4, 1949 (50) <CAD> Wt. (lb): 184 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Requested St No. Consult/Procedure Request | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 11/01/97 c 675 | PULMONARY Consult | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 10/06/00 p 566 | EYE CLINIC Cons | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 09/21/00 p 464 | Electrocardiogram CARDIOLOGY Proc | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Enter ?? for more actions | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SP Select Patient | FR Forward | CT Complete/Update | RT Results Display | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum | PF Print Form 513 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RC Receive | DC Discontinue | SF Sig Findings | RM Remove Med Rslt | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SC Schedule | CM Add Comment | DD Detailed Display | ER Edit/Resubmit | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Select:Quit// DD | Detail Display | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Select Consult Number: 1

You can do just the opposite of the example above; i.e., you can select a consult first then type the action DD. The result is the same.

(Continued on next page.)

Package Reference

| | | |
|---|---|--|
| CONSULTS DETAILED DISPLAY | Nov 01, 1997 13:55:42 | Page: 1 of 5 |
| CONSULT DETAILED DISPLAY | | Consult No.: 675 |
| CPRSPATIENT, TWO | 666-67-1996 | DOB: MAR 5, 1949 (48) Wt. (lb): No Entry |
| Current Inpatient/Outpatient: Inpatient | | |
| Ward: | 2B | |
| Eligibility: | SC VETERAN | |
| To Service: | PULMONARY | |
| From Service: | MEDICINE | |
| Reason For Request: | Pt experiences shortness of breath when out of bed. | |
| Status: | COMPLETE | |
| ATTENTION: | CPRSPROVIDER, TWO | |
| Place: | Bedside | |
| Urgency: | Routine | |
| Request Activity | Date/Time | Ordering Clinician Entered By |
| | 11/01/97 10:13 | CPRSPROVIDE, ONE CPRSPROVIDE, ONE |
| RECEIVED | 11/01/97 10:15 | CPRSPROVIDER, ONE CPRSPROVIDER, ONE |
| + Enter ?? for more actions | | |
| Select Action:Next Screen// <Enter> | | |

| | | |
|-------------------------------------|-----------------------|--|
| CONSULTS DETAILED DISPLAY | Nov 01, 1997 14:00:20 | Page: 2 of 5 |
| CONSULT DETAILED DISPLAY | | Consult No.: 675 |
| CPRSPATIENT, TWO | 666-67-1996 | DOB: MAR 5, 1949 (48) Wt. (lb): No Entry |
| + COMPLETED | 11/01/97 10:17 | CPRSPROVIDER, ONE CPRSPROVIDER, ONE |
| ----- TIU CONSULT REPORT ----- | | |
| Source Information | | |
| Reference Date: | NOV 01, 1997@10:15:35 | Author: CPRSPROVIDER, ONE |
| Entry Date: | NOV 01, 1997@10:15:35 | Entered By: CA |
| Expected Signer: | CPRSPROVIDER, ONE | Expected Cosigner: None |
| Urgency: | None | Document Status: COMPLETED |
| Line Count: | 21 | TIU Document #: 2330 |
| Subject: | None | |
| Associated Problems | No linked problems. | |
| Edit Information | | |
| Edit Date: | NOV 01, 1997@10:17:23 | Edited By: CPRSPROVIDER, ONE |
| + Enter ?? for more actions | | |
| Select Action:Next Screen// <Enter> | | |

(Continued on next page.)

Package Reference

| | | |
|---|-----------------------|---|
| CONSULTS DETAILED DISPLAY | Nov 01, 1997 14:02:13 | Page: 3 of 5 |
| CONSULT DETAILED DISPLAY | | Consult No.: 675 |
| CPRSPATIENT, TWO | 666-67-1996 | DOB: MAR 5,1949 (48) Wt. (lb): No Entry |
| + | | |
| Reassignment History Document Never Reassigned. | | |
| Signature Information | | |
| Signed Date: | NOV 01, 1997@10:17:35 | Signed By: CPRSPROVIDER, ONE |
| | | Signature Mode: ELECTRONIC |
| Cosigned Date: | None | Cosigned By: None |
| | | Cosignature Mode: None |
| Document Body | | |
| At the time I went to examine the pt, he was acutely broncho-spastic and in moderately severe respiratory distress. I had him deliver a puff of albuterol with an Aerochamber; his technique was poor. I then instructed him and delivered an additional four puffs, which he did with good technique. He was improved and with a clear lung exam within a few seconds (though wheezes were still present | | |
| + Enter ?? for more actions | | |
| Select Action:Next Screen// <Enter> | | |

| | | |
|---|-----------------------|---|
| CONSULTS DETAILED DISPLAY | Nov 01, 1997 14:03:47 | Page: 4 of 5 |
| CONSULT DETAILED DISPLAY | | Consult No.: 675 |
| CPRSPATIENT, TWO | 666-67-1996 | DOB: MAR 5,1949 (48) Wt. (lb): No Entry |
| + | | |
| on forced expiration). | | |
| The pt regimen is lacking in inhaled corticosteroids. Recognizing that asthma is an inflammatory process, inhaled steroids are important in controlling the inflammatory response. My practice for severely out-of-control asthmatics is to use high-dose inhaled steroids, typically vanceril, 16 puffs qid, with a spacing device such as the Aerochamber. I would institute such a regimen while he is here. | | |
| The pt has an in-house pet dog and an outside pet cat. I have told him that the cat should go, even if it is outdoors. Cat saliva contains a glycoprotein that leaves residue on their coats and flakes into the air; it is problematic for many asthmatics. | | |
| The purulent phlegm asthmatics have during exacerbations is usually | | |
| + Enter ?? for more actions | | |
| Select Action:Next Screen// <Enter> | | |

(Continued on the next page.)

Package Reference

```
CONSULTS DETAILED DISPLAY      Nov 01, 1997 14:07:36      Page: 5 of 5
CONSULT DETAILED DISPLAY                                         Consult No.: 675
CPRSPATIENT,TWO      666-67-1996      DOB: MAR 5,1949 (48) Wt. (lb): No Entry
+
due to the eosinophils, not from infection. Antibiotics are usually
not necessary.

If you like, you may refer Mr. Bud to my clinic after discharge.
===== END =====

Enter ?? for more actions
```

Select Action:Quit//

Discontinue Order (DC) Action

The Discontinue Order (DC) action is used by clinical personnel to stop a consult/procedure request after it has been signed. This differs from the cancel action in that there is not Edit/Resubmit action available on a discontinued order.

In the example below, the Discontinue Order action is used to cancel a duplicate order:

```
Select OPTION NAME: GMRC MGR           Consult Management      menu
Select Consult Management Option: cs   Consult Service Tracking
Select Patient: CPRSPATIENT,FOUR CPRSPATIENT,FOUR      12-04-49      666438796      SC
VETERAN

Select Service/Specialty: ALL SERVICES// PULMONARY
List From Starting Date: ALL DATES // <Enter> ALL DATES
```

| | | |
|--|---|-----------------------|
| CONSULT TRACKING | Jun 19, 1997 09:31:19 | Page: 1 of 1 |
| CPRSPATIENT, FOUR 666-43-8796 | 2B M | DEC 4,1949 (50) <CAD> |
| | | Wt.(lb): 184 |
| Requested St No. Consult/Procedure Request | | |
| 1 10/06/00 p 1766 | EYE CLINIC Cons | |
| 2 09/21/00 p 1764 | Electrocardiogram CARDIOLOGY Proc | |
| 3 04/25/00 c 1713 | CARDIOLOGY Cons | |
| 4 03/21/00 c 1701 | CARDIOLOGY (SOUTH) Cons | |
| 5 02/22/00 pr 1687 | PULMONARY (SOUTH) Cons | |
| 6 01/26/00 c 1665 | CARDIOLOGY Cons | |
| 7 06/02/99 c 1483 | VENTRICAL LEAD IMPLANT CARDIOLOGY Proc | |
| 8 04/29/99 c 1455 | CARDIOLOGY (oex) CARDIOLOGY Cons | |
| 9 02/18/99 x 1395 | CARDIOLOGY Cons | |
| 10 01/06/99 c 1322 | MARCIA'S SPECIALTY SEA-MARCIAS SPECIALTY Cons | |
| 11 01/05/99 c 1310 | *GASTROENTEROLOGY CARDIOLOGY Cons | |
| 12 01/04/99 c 1287 | CARDIOLOGY Cons | |
| Enter ?? for more actions | | |
| SP Select Patient | FR Forward | CT Complete/Update |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum |
| RC Receive | DC Discontinue | SF Sig Findings |
| SC Schedule | CM Add Comment | RM Remove Med Rslt |
| DD Detailed Display ER Edit/Resubmit | | |
| Select Consult: Quit// DC Discontinue | | |

| | | |
|---|----------------------|-----------|
| CHOOSE No. 1-7: 3 | | |
| Responsible Clinician: CPRSPROVIDER,TWO | CRS | PHYSICIAN |
| Date/Time of Actual Activity: NOW// <Enter> | (JUN 19, 1997@09:31) | |
| Enter COMMENT: | | |
| 1>Duplicate | | |
| 2> <Enter> | | |
| EDIT Option: <Enter> | | |

(Continued on next page.)

Package Reference

| | | |
|-------------------------------|-----------------------|---|
| CONSULT TRACKING | Jun 19, 1997 09:31:58 | Page: 1 of 1 |
| CPRSPATIENT, FOUR 666-43-8796 | 2B M | DEC 4,1949 (50) <CAD> |
| | | Wt.(lb): 184 |
| Requested | St | No. Consult/Procedure Request |
| 1 10/06/00 | p | 1766 EYE CLINIC Cons |
| 2 09/21/00 | p | 1764 Electrocardiogram CARDIOLOGY Proc |
| 3 04/25/00 | dc | 1713 CARDIOLOGY Cons |
| 4 03/21/00 | c | 1701 CARDIOLOGY (SOUTH) Cons |
| 5 02/22/00 | pr | 1687 PULMONARY (SOUTH) Cons |
| 6 01/26/00 | c | 1665 CARDIOLOGY Cons |
| 7 06/02/99 | c | 1483 VENTRICAL LEAD IMPLANT CARDIOLOGY Proc |
| 8 04/29/99 | c | 1455 CARDIOLOGY (oex) CARDIOLOGY Cons |
| 9 02/18/99 | x | 1395 CARDIOLOGY Cons |
| 10 01/06/99 | c | 1322 MARCIA'S SPECIALTY SEA-MARCIA'S SPECIALTY Cons |
| 11 01/05/99 | c | 1310 *GASTROENTEROLOGY CARDIOLOGY Cons |
| 12 01/04/99 | c | 1287 CARDIOLOGY Cons |
| Enter ?? for more actions | | |
| SP Select Patient | FR Forward | CT Complete/Update RT Results Display |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum PF Print Form 513 |
| RC Receive | DC Discontinue | SF Sig Findings RM Remove Med Rslt |
| SC Schedule | CM Add Comment | DD Detailed Display ER Edit/Resubmit |
| Select Consult: Quit// | | |

Edit/Resubmit (ER) Action

In the case where a consult is cancelled (or denied) for clerical reasons (e.g., test results that indicate that the consult is needed), then the original submitter or an update user for the relevant service has a chance to edit the consult to include the missing information, and resubmit it. This may be done from either the alert screen, or from the consult tracking screen. In either case, the procedure is the same. See **Consult/Request Cancel/Hold** on page 151 for an example.

Forward Request (FR) Action

Entering the Forward Request allows you to forward a consult or request to any other Service/Specialty, provided that Service/Specialty has been set up by IRM personnel to receive consults online. Thus the decision by the referring clinician regarding who should receive the consult can be modified by the receiving Service/Specialty. This action is available from both the CPRS screen and the Consult/Request Alerts screen.

If a request needs to be forwarded to a clinic that is not a sub-service of your clinic, the FR (Forward Request) action should be used. This action is discussed in the **Forward the Consult** section under **Work Flow** on page **24**.

Make Addendum (MA) Action

The Make Addendum action allows one or more people to add their comments to the results of a consult. Contrast this to Add Comment, which adds a note to the consult before it is resulted.

There is an example of Make Addendum in the Windows section on page 84.

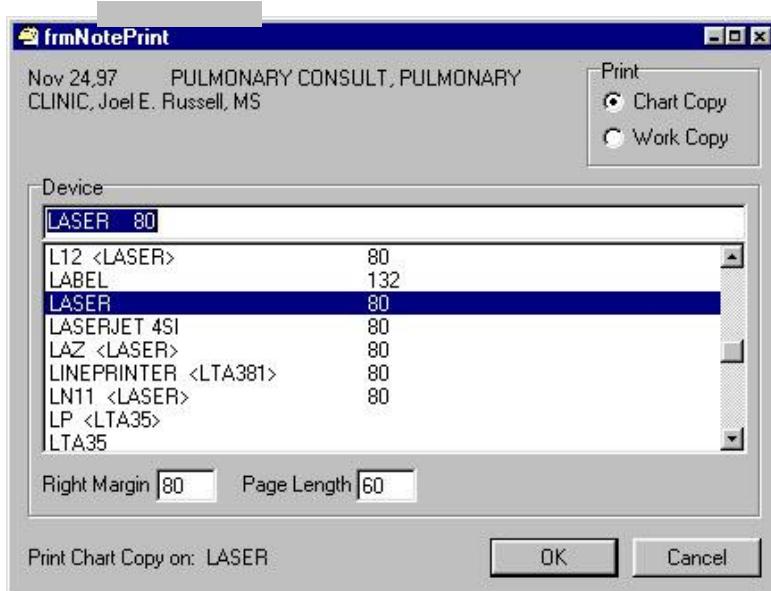
Print Form (PF) Action

With the Print Form Action, you can print either a chart or working copy of the consult form. To use this action from the Windows interface, follow these steps:

From the Consults tab, select the consult you want to print.

- Select File | Print Form.
- Select the printer you want the form to come out on.
- Choose Chart Copy or Work Copy.
- Choose OK.

For an example of the Print Form option as used from the List Manager interface, see page 30.



Print Screen Contents (PS) Action

This option prints the information that is on the screen. The output is not exactly a screen image, as it does not include the prompt area at the bottom of the screen. To print the entire contents of a consult request, use the Print Form (PF) action.

Example:

```
CONSULTS DETAILED DISPLAY      Jun 20, 1997 10:40:56      Page: 1 of 2
CONSULT DETAILED DISPLAY
CPRSPATIENT,FOUR 666-43-8796          2B M      Consult No.: 208
                                         DEC 4,1949 (50) <CAD>

Current Inpatient/Outpatient: Inpatient
Ward:                      1A
Eligibility:                SC VETERAN
To Service:                 PULMONARY
From Service:
Provisional Diagnosis: Broken interface with CPRS.
Reason For Request: Checking action of DY (denying) a consult as to
                     DC (discontinuing) a consult.
Status:                    DISCONTINUED

Urgency:                   SWITCH BED

Request Activity           Date/Time      Ordering Clinician   Entered By
ENTERED IN OE/RR          03/05/97 16:09  CPRSPROVIDER,TWO  CPRSPROVIDER,TWO
                           //
Forwarded From MEDICINE
+           Enter ?? for more actions

Select Action:Next Screen// ps    PS
```

```
DEVICE: HOME// laser  PRINTER ROOM LN11 12 PITCH
DO YOU WANT YOUR OUTPUT QUEUED? NO// (NO)
```

Quit (Q) Action

Enter the Quit (Q) action at the last Select prompt to quit using your Consults option. Users may enter Q to Quit or ^ to Exit the option at anytime.

Receive Request (RC) Action

Performing the Receive action on a consult changes its status from Pending to Active. This puts your clinic on record as accepting responsibility for completing the consult.

On page 26 we give an example of receiving a consult from a consult tracking screen. This is an example of receiving a consult from a notification alert:

```
You have PENDING ALERTS
      Enter "VA  VIEW ALERTS      to review alerts

Select OE/RR Manager Menu Option: VA  View Alerts

1. CPRSPATIENT,FOUR (C8796): New Consult/Request ()
2. CPRSPATIENT,TWO (C9600): New Consult/Request (Today)
4. CPRSPATIENT,ONE (C3456): Consult/Request DENIED Consult
   Select from 1 to 6
   or enter ?, A I, F, P, M, R, or ^ to exit: 1

Consult/Request Alerts      Feb 13, 1998 13:34:56      Page:  1 of  1
CPRSPATIENT,FOUR 666-43-8796          2B M      DEC 4,1949 (50) <CAD>
                                         Wt.(lb): 184      Number

Date      Stat    Service           Procedure
187      02/14/97 p    NEUROLOGY        Consult

Enter ?? for more actions
SP Select Patient  FR Forward      CT Complete/Update  RT Results Display
CV Change View ... CX Cancel (Deny)  MA Make Addendum  PF Print Form 513
RC Receive        DC Discontinue   SF Sig Findings    RM Remove Med Rslt
SC Schedule       CM Add Comment   DD Detailed Display ER Edit/Resubmit
Select: Quit// RC Receive Request

Who received it?: CPRSProvider,ONE          OC
Date/Time Actually Received: NOW//          (FEB 13, 1998@13:36)
(Continued on the next page.)
```

Package Reference

| | | | |
|---|-------------------------------|--|---------------------------------|
| Consult/Request Alerts CPRSPATIENT, FOUR 666-43-8796 | Feb 13, 1998 13:36:52 2B M | Page: 1 of 1 DEC 4, 1949 (50) <CAD> Wt.(lb): 184 | |
| Number 187 | Date 02/14/97 a | Stat NEUROLOGY | Service Procedure Consult |
| Enter ?? for more actions | | | |
| SP Select Patient | FR Forward | CT Complete/Update | RT Results Display |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum | PF Print Form 513 |
| RC Receive | DC Discontinue | SF Sig Findings | RM Remove Med Rslt |
| SC Schedule | CM Add Comment | DD Detailed Display | ER Edit/Resubmit |
| Select: Quit// | | | |

Remove Medicine Results (RM)

This action is used when a medicine result has been attached to a consult in error. It's use is restricted, but generally speaking, it can be done by anyone who can attach medicine results.

Attaching medicine results is done in conjunction with the Complete (CT) action in List Manager. See the section on medicine resulting on page 53 for details. In Windows, attaching and detaching medicine results are accomplished thru their own menu commands that are activated whenever medicine results are available. Fore an example of medicine results in Windows, refer to the Windows Quick Start section on page 74.

In this example, we use List Manager to remove an incorrect medicine results:

| | | |
|-------------------------------|-----------------------|--|
| CONSULT TRACKING | Mar 02, 2001@13:53:35 | Page: 1 of 1 |
| CPRSPATIENT, FOUR 666-43-8796 | 2B M | DEC 4,1949 (50) <CAD> |
| | | Wt.(lb): 184 |
| Requested St | No. | Consult/Procedure Request |
| 1 03/02/01 p | 599 | ELECTROCARDIOGRAM CARDIOLOGY Proc |
| 2 02/21/01 c | 597 | ELECTROCARDIOGRAM CARDIOLOGY Proc |
| 3 10/10/96 a | 242 | ELECTROCARDIOGRAM CARDIOLOGY Proc |
| 4 09/08/95 c | 187 | CARDIOLOGY CLINIC Cons |
| 5 08/14/95 pr | 183 | 12 LEAD STAT EKG CARDIOLOGY Proc |
| 6 08/14/95 c | 184 | 12 LEAD STAT EKG CARDIAC TRANSPLANT Proc |
| 7 04/29/94 pr | 53 | ECHO CARDIOLOGY Proc |
| 8 04/29/94 pr | 54 | ECHO CARDIOLOGY Proc |
| 9 04/29/94 p | 55 | ECHO CARDIOLOGY Proc |
| Enter ?? for more actions | | |
| SP Select Patient | FR Forward | CT Complete/Update |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum |
| RC Receive | DC Discontinue | SF Sig Findings |
| SC Schedule | CM Add Comment | RM Remove Med Rslt |
| Select: Quit// RM | DD Detailed Display | ER Edit/Resubmit |

CHOOSE No. 1-9: **1**

| | | |
|--------------------------------|-----------------------------|-----------------------|
| Procedure/Medicine Resulting | Mar 02, 2001@11:34:48 | Page: 1 of 1 |
| CPRSPATIENT, FOUR 666-43-8796 | 2B M | DEC 4,1949 (50) <CAD> |
| Consult No.: 242 | Associated Medicine Results | |
| 1 ELECTROCARDIOGRAM | OCT 2,1995@10:00 | ABNORMAL |
| Select action or item number | | |
| DM Disassociate result | DR Display Result | |
| Select Action:Quit// DM | | |

| | | | |
|--|-------------------|------------------|----------|
| Select item: (1-1): 1 | ELECTROCARDIOGRAM | OCT 2,1995@10:00 | ABNORMAL |
| Are you sure you want to disassociate this result? NO// Y YES | | | |

Results Display (RT) Action

The Results Display (RT) action allows you to review results of any consult/request for a patient.

The following is an example of the report displayed when you select the RT action:

| | | |
|--|--|------------------------|
| C S L T | R E S U L T S | D I S P L A Y |
| CPRSPATIENT, FOUR 666-43-8796 | 2B M | DEC 4, 1949 (50) <CAD> |
| ----- ELECTROCARDIOGRAM SUMMARY REPORT ----- | | |
| DIAGNOSIS | | |
| Interpretation Code (rhythm): SINUS TACHYCARDIA | | |
| Interpretation Code (config): ABNORMAL ECG | | |
| INDICATIONS | | |
| Type OF EKG: | STAT RETRIEVAL | |
| SUMMARY | | |
| Summary: | ABNORMAL | |
| Summary procedure: | Sinus rhythm has replaced atrial flutter | |
| Press return to continue or "^^" to escape <Enter> | | |

Schedule (SC) Action

The Schedule action is similar to the Receive (RC) action in that it changes the status of a consult. There is no interface with the Scheduling Package at this time. This action is intended only for annotational purposes.

Unlike the Receive action, this action sends an alert. You can use this alert to inform the requestor of the date and time of the appointment.

In the following example we change the status of a consult from “p” pending to “s” scheduled:

| | | |
|-------------------------------|-----------------------|--|
| CONSULT TRACKING | Jun 08, 2000 21:14:16 | Page: 1 of 1 |
| CPRSPATIENT, FOUR 666-43-8796 | 2B M | DEC 4, 1949 (50) <CAD> |
| | | Wt.(lb): 184 |
| Requested | St | No. Consult/Procedure Request |
| 1 | 07/22/99 | p 1561 EXERCISE TOLERANCE TEST CARDIOLOGY Proc |
| 2 | 05/20/99 | p 1470 CARDIOLOGY (oex) CARDIOLOGY Cons |
| 3 | 04/13/99 | c 1437 CARDIOLOGY (oex) CARDIOLOGY Cons |
| 4 | 04/01/99 | c 1429 CARDIOLOGY (oex) CARDIOLOGY Cons |
| 5 | 02/26/99 | c 1406 CARDIOLOGY Cons |
| 6 | 01/05/99 | c 1312 CARDIOLOGY Cons |
| 7 | 01/04/99 | c 1290 *CARDIOLOGY Cons |
| 8 | 12/18/98 | c 1252 CARDIOLOGY Cons |
| 9 | 12/14/98 | c 1234 CARDIOLOGY Cons |
| Enter ?? for more actions | | |
| SP Select Patient | FR Forward | CT Complete/Update |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum |
| RC Receive | DC Discontinue | SF Sig Findings |
| SC Schedule | CM Add Comment | RM Remove Med Rslt |
| Select: Quit//SC | Schedule | DD Detailed Display ER Edit/Resubmit |

```

CHOOSE No. 1-9: 2
Who scheduled it?: CPRSPROVIDER,ONE  CPRSPROVIDER,ONE  OC          PHYSICIAN
Enter COMMENT...
1>9:30 pm Jun 23 in Bldg 4
2> <Enter>
EDIT Option: <Enter>
Do You Wish To Send An Alert With This Comment? N// Y  YES
Send Alert To Requesting Provider CPRSPROVIDER,THREE? N// Y  YES
Send Alert to: <Enter>
Processing Alerts...

```

(Continued on the next page.)

Package Reference

| | | |
|-------------------------------|-----------------------|--|
| CONSULT TRACKING | Jun 08, 2000 21:16:45 | Page: 1 of 1 |
| CPRSPATIENT, FOUR 666-43-8796 | 2B M | DEC 4, 1949 (50) <CAD> |
| | | Wt. (lb): 200 |
| Requested | St | No. Consult/Procedure Request |
| 1 07/22/99 | p | 1561 EXERCISE TOLERANCE TEST CARDIOLOGY Proc |
| 2 05/20/99 | s | 1470 CARDIOLOGY (oex) CARDIOLOGY Cons |
| 3 04/13/99 | c | 1437 CARDIOLOGY (oex) CARDIOLOGY Cons |
| 4 04/01/99 | c | 1429 CARDIOLOGY (oex) CARDIOLOGY Cons |
| 5 02/26/99 | c | 1406 CARDIOLOGY Cons |
| 6 01/05/99 | c | 1312 CARDIOLOGY Cons |
| 7 01/04/99 | c | 1290 *CARDIOLOGY Cons |
| 8 12/18/98 | c | 1252 CARDIOLOGY Cons |
| 9 12/14/98 | c | 1234 CARDIOLOGY Cons |
| Enter ?? for more actions | | |
| SP Select Patient | FR Forward | CT Complete/Update |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum |
| RC Receive | DC Discontinue | SF Sig Findings |
| SC Schedule | CM Add Comment | DD Detailed Display |
| Select: Quit// | | RT Results Display |
| | | PF Print Form 513 |
| | | RM Remove Med Rslt |
| | | ER Edit/Resubmit |

Select New Patient (SP) Action

This option allows you to change patients at any time.

Example:

```
CONSULT TRACKING          Jun 20, 1997 14:44:26      Page: 1 of 1
CPRSPATIENT, FOUR 666-43-8796      2B M           DEC 4,1949 (50) <CAD>
                                         Wt.(lb): 184

    Requested   St     No.   Consult/Procedure Request
1  08/18/99    a     1586  PULMONARY Cons
2  08/18/99    a     1585  PULMONARY Cons
3  06/23/99    c     1545  PULMONARY Cons

Enter ?? for more actions
SP Select Patient  FR Forward      CT Complete/Update  RT Results Display
CV Change View ... CX Cancel (Deny)  MA Make Addendum  PF Print Form 513
RC Receive        DC Discontinue   SF Sig Findings   RM Remove Med Rslt
SC Schedule       CM Add Comment   DD Detailed Display ER Edit/Resubmit
Select: Quit// SP  New Patient
```

```
Select Patient: CPRSPATIENT, THREE 01-01-51      666123456      YES      SC VETERAN
Select Service/Specialty: ALL SERVICES// PULMONARY
List From Starting Date: ALL DATES // <Enter> ALL DATES
```

(Continued on the next page.)

Package Reference

| | | |
|--|---|---|
| CONSULT TRACKING CPRSPATIENT, THREE | Jun 20, 1997 14:44:38 666-12-3456 2B | Page: 1 of 1 MAR 3, 1960 (40) <AD> Wt.(lb): 184 |
| Requested St | No. | Consult/Procedure Request |
| 1 09/14/98 c | 1163 | PULMONARY Cons |
| 2 09/09/98 dc | 1162 | PULMONARY Cons |
| 3 07/14/98 dc | 1116 | PULMONARY Cons |
| 4 07/14/98 c | 1114 | *CARDIOLOGY PULMONARY Cons |

Enter ?? for more actions

| | | | |
|--------------------|------------------|---------------------|--------------------|
| SP Select Patient | FR Forward | CT Complete/Update | RT Results Display |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum | PF Print Form 513 |
| RC Receive | DC Discontinue | SF Sig Findings | RM Remove Med Rslt |
| SC Schedule | CM Add Comment | DD Detailed Display | ER Edit/Resubmit |
| Select: Quit// | | | |

Significant Findings (SF) Action

The Significant Findings action allows a clinic or service to append a significant findings flag onto a consult (whether completed or not). The action prompts you to enter a comment and sends an alert either at the time the SF action is taken or when the consult is complete. An asterisk is placed next to the consults that have a Significant Findings value of Y.

In this example we add a significant finding to an already completed consult:

| | | |
|--|---|---|
| CONSULT TRACKING CPRSPATIENT, THREE | May 01, 1998 14:51:35 666-12-3456 2B | Page: 1 of 2 MAR 3, 1960 (40) <AD> Wt.(lb): 184 |
| Requested St | No. | Consult/Procedure Request |
| 1 09/21/00 p | 1764 | Electrocardiogram CARDIOLOGY Proc |
| 2 04/25/00 c | 1713 | CARDIOLOGY Cons |
| 3 01/26/00 c | 1665 | CARDIOLOGY Cons |
| 4 06/02/99 c | 1483 | VENTRICAL LEAD IMPLANT CARDIOLOGY Proc |
| 5 04/29/99 c | 1455 | CARDIOLOGY (oex) CARDIOLOGY Cons |
| 6 02/18/99 x | 1395 | CARDIOLOGY Cons |
| 7 01/05/99 c | 1310 | *GASTROENTEROLOGY CARDIOLOGY Cons |
| 8 01/04/99 c | 1287 | CARDIOLOGY Cons |
| 9 12/18/98 c | 1249 | CARDIOLOGY Cons |
| 10 10/09/98 c | 1184 | CARDIOLOGY Cons |
| 11 08/24/98 dc | 1144 | CARDIOLOGY Cons |
| 12 07/13/98 c | 1113 | *CARDIOLOGY Cons |
| + Enter ?? for more actions | | |
| SP Select Patient | FR Forward | CT Complete/Update RT Results Display |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum PF Print Form 513 |
| RC Receive | DC Discontinue | SF Sig Findings RM Remove Med Rslt |
| SC Schedule | CM Add Comment | DD Detailed Display ER Edit/Resubmit |
| Select: Next Screen// SF Sig Findings | | |

| |
|--|
| CHOOSE No. 1-17: 1 |
| Current Significant Findings = not entered yet |
| Are there significant findings? (Y/N/U): unknown// yes |
| Enter COMMENT: |
| 1>Pt experiencing 60% loss of breathing efficiency. |
| 2> |
| EDIT Option: |
| Alert will be sent to Requesting Provider: CPRSPROVIDER, TWO |
| Send Alert to: CPRSPROVIDER, TWO added to the list. |
| And Send Alert to: CPRSPROVDER, THREE already in the list. |
| And Send Alert to: |
| Processing Alerts... |

(Continued on the next page.)

Package Reference

| | | |
|--|---|---|
| CONSULT TRACKING CPRSPATIENT, THREE | May 01, 1998 14:52:28 666-12-3456 2B | Page: 1 of 2 MAR 3, 1960 (40) <AD> Wt.(lb): 184 |
| Requested St No. Consult/Procedure Request | | |
| 1 09/21/00 p 1764 *Electrocardiogram CARDIOLOGY Proc | | |
| 2 04/25/00 c 1713 CARDIOLOGY Cons | | |
| 3 01/26/00 c 1665 CARDIOLOGY Cons | | |
| 4 06/02/99 c 1483 VENTRICAL LEAD IMPLANT CARDIOLOGY Proc | | |
| 5 04/29/99 c 1455 CARDIOLOGY (oex) CARDIOLOGY Cons | | |
| 6 02/18/99 x 1395 CARDIOLOGY Cons | | |
| 7 01/05/99 c 1310 *GASTROENTEROLOGY CARDIOLOGY Cons | | |
| 8 01/04/99 c 1287 CARDIOLOGY Cons | | |
| 9 12/18/98 c 1249 CARDIOLOGY Cons | | |
| 10 10/09/98 c 1184 CARDIOLOGY Cons | | |
| 11 08/24/98 dc 1144 CARDIOLOGY Cons | | |
| 12 07/13/98 c 1113 *CARDIOLOGY Cons | | |
| + Enter ?? for more actions | | |
| SP Select Patient | FR Forward | CT Complete/Update RT Results Display |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum PF Print Form 513 |
| RC Receive | DC Discontinue | SF Sig Findings RM Remove Med Rslt |
| SC Schedule | CM Add Comment | DD Detailed Display ER Edit/Resubmit |
| Select: Next Screen// | | |

Notifications about Consults and Requests

During your session, you may notice:

| |
|---|
| You have PENDING ALERTS Enter "VA VIEW ALERTS to review alerts |
| Select Clinician Menu Option: |

This appears on the screen before each prompt. You may enter VA at any menu prompt in which this message appears to view patient information related to pending notifications.

There are five notifications relating to consults:

| OE/RR Notifications | Notification Number | Recipients |
|---------------------------------------|---------------------|--|
| New Service Consult/Request | 27 | Service Users plus Attention |
| Consult/Request Resolution | 23 | Ordering Provider on Complete |
| Consult/Request Cancel/Hold | 30 | Ordering Provider and others as determined by who is taking the action. The NOTIFY ON DC field in file 123.5 affects who gets the alert on DC. |
| Consult/Request Update | 63 | Determined by the individual taking the associated action.* |
| Order(s) Require Electronic Signature | 5 | Determined by CPRS |

The purpose of these notifications is to allow you to take appropriate follow-up action. This might involve merely reading new information, or it might involve several actions on your part such as scheduling an appointment, signing a consult, resubmission, etc.

*NOTE:

- When a comment is added by an UPDATE USER, the alert will only go to the ordering provider (unless additional alert recipients are added).
- When a comment is added by a SERVICE TEAM member, the alert will only go to the ordering provider (unless additional alert recipients are added).

To initiate the follow-up action, enter VA at the prompt after the view alerts message. In the following example, a user follows up a notification by signing an order:

```
You have PENDING ALERTS
      Enter "VA VIEW ALERTS to review alerts

Select CPRS Manager Menu Option: VA View Alerts

1. CPRSPATIENT,ONE (C4723): New order(s) placed.
2. CPRSPATIENT,THREE (C3456): Consult/Request DENIED To Service: PODIATRY
3. CPRSPATIENT,ONE (C4723): Order requires electronic signature.
Select from 1 to 3

      or enter ?, A I, F, P, M, R, or ^ to exit
      or RETURN to continue: 3
Processing alert: CPRSPATIENT,ONE (C4723): Order requires electronic signature.
Searching the patient's chart ...
```

Package Reference

| | | | | |
|--|---|---------------------------------------|------|-----|
| Unsigned Orders CPRSPATIENT, THREE | Sep 24, 1997 09:22:04 666-12-3456 2B | Page: 1 of 1 MAR 3, 1960 (40) <AD> | | |
| Selected date range: None Selected | | | | |
| Item Ordered | Requestor | Start | Stop | ts |
| 1 >> Weight *UNSIGNED* | CPRSPROVIDER,O | | | unr |
| 2 Consult to CARDIOLOGY Consultant's Choice | CPRSPROVIDER,O | | | unr |
| *UNSIGNED* | | | | |
| 3 Consult to CARDIOLOGY Consultant's Choice | CPRSPROVIDER,O | | | unr |
| *UNSIGNED* | | | | |
| Enter the numbers of the items you wish to act on. | | | | |
| >>> | | | | |
| + Next Screen | - Previous Screen | Q Quit | | |
| Select: Quit// 2 | | | | |

| | | | | |
|--|---|---------------------------------------|------|-----|
| Unsigned Orders CPRSPATIENT, THREE | Sep 24, 1997 09:22:04 666-12-3456 2B | Page: 1 of 1 MAR 3, 1960 (40) <AD> | | |
| Selected date range: None Selected | | | | |
| Item Ordered | Requestor | Start | Stop | sts |
| 1 >> Weight *UNSIGNED* | CPRSPROVIDER,O | | | unr |
| 2 Consult to CARDIOLOGY Consultant's Choice | CPRSPROVIDER,O | | | unr |
| *UNSIGNED* | | | | |
| 3 Consult to CARDIOLOGY Consultant's Choice | CPRSPROVIDER,O | | | unr |
| *UNSIGNED* | | | | |
| Enter the numbers of the items you wish to act on. | | | | |
| >>> | | | | |
| Change | Sign | | | |
| Discontinue | Detailed Display | | | |
| Select: Quit// s | | | | |

Consult to CARDIOLOGY Consultant's Choice -

Enter your Current Signature Code: SIGNATURE VERIFIED
 Consult to CARDIOLOGY Consultant's Choice signed.
 Searching the patient's chart ...

Enter your
electronic
signature here.

(Continued on the next page.)

Package Reference

| | | | |
|--|---|---------------------------------------|-----|
| Unsigned Orders CPRSPATIENT, THREE | Sep 24, 1997 09:22:04 666-12-3456 2B | Page: 1 of 1 MAR 3, 1960 (40) <AD> | |
| Selected date range: None Selected | | | |
| Item Ordered | Requestor | Start Stop | ts |
| 1 >> Weight *UNSIGNED* | CPRSPROVIDER,O | | unr |
| 3 Consult to CARDIOLOGY Consultant's Choice *UNSIGNED* | CPRSPROVIDER,O | | unr |
| Enter the numbers of the items you wish to act on. | | | |
| >>> | | | |
| + Next Screen | - Previous Screen | Q Quit | |
| Select: Quit// | | | |

Enabling Notifications

In many cases Notifications will not come to you automatically. To find out what Notifications you should be getting, you can run the Show Me the Notifications I Can Receive option from the Notifications Management Menu. If this report shows any notifications you want to receive that are disabled, you may enable them with the Enable/Disable My Notifications option.

In this example we run the Show Me the Notifications I Can Receive report and then enable Consult/Request Cancel/Hold, Consult/Request Resolution, and New Service Consult/Request (Notice that Order(s) Require Electronic Signature is already on):

```
Select Notification Mgmt Menu Option: ?  
1      Enable/Disable My Notifications  
2      Erase All of My Notifications  
3      Set Notification Display Sort Method (GUI)  
4      Send me a MailMan bulletin for Flagged Orders  
5      Show Me the Notifications I Can Receive  
6      Set Surrogate to Receive My Notifications  
  
Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.  
  
Select Notification Mgmt Menu Option: 5  Show Me the Notifications I Can Receive  
  
Would you like help understanding the list of notifications? No// Y  (Yes)  
DEVICE: HOME// <Enter> VAX  
  
          Notification List Help Message           Page: 1  
  
The delivery of notifications as alerts is determined from values set for:  
Users, OE/RR Teams, Service/Sections, Inpatient Locations,  
Hospital Divisions, Computer System and Order Entry/Results Reporting.  
Possible values include 'Enabled', 'Disabled' and 'Mandatory'. These values  
indicate a User's, OE/RR Team's, Service's, Location's, Division's, System's  
and OERR's desire for the notification to be 'Enabled' (sent under most  
conditions), 'Disabled' (not sent), or 'Mandatory' (almost always sent.)  
  
All values, except the OERR (Order Entry) value, can be set by IRM  
or Clinical Coordinators. Individual users can set 'Enabled/Disabled/Mandatory'  
values for each specific notification via the 'Enable/Disable My Notifications'  
option under the Personal Preferences and Notification Mgmt Menu option menus.  
'ON' indicates the user will receive the notification under normal conditions.  
'OFF' indicates the user normally will not receive the notification.  
Notification recipient determination can also be influenced by patient  
location (inpatients only.) This list does not consider patient location  
when calculating the ON/OFF value for a notification.  
  
          - End of Report -  
  
Press RETURN to continue: <Enter>  
  
This will take a moment or two, please stand by.....  
.....  
DEVICE: HOME// <Enter> VAX  
  
          Notification List for CPRSPROVIDER,ONE           Page: 1  
  
Notification          ON/OFF For This User and Why  
-----
```

Package Reference

| | | |
|--------------------------------|-----|-------------------------|
| ABNORMAL IMAGING RESULTS | ON | OERR value is Mandatory |
| ABNORMAL LAB RESULT (INFO) | ON | User value is Mandatory |
| ABNORMAL LAB RESULTS (ACTION) | OFF | OERR value is Disabled |
| ADMISSION | ON | OERR value is Enabled |
| CONSULT/REQUEST CANCEL/HOLD | ON | User value is Mandatory |
| CONSULT/REQUEST RESOLUTION | ON | User value is Mandatory |
| CONSULT/REQUEST UPDATED | OFF | OERR value is Disabled |
| CRITICAL LAB RESULT (INFO) | ON | OERR value is Mandatory |
| CRITICAL LAB RESULTS (ACTION) | ON | OERR value is Mandatory |
| DC ORDER | OFF | OERR value is Disabled |
| DECEASED PATIENT | ON | OERR value is Enabled |
| DISCHARGE | OFF | OERR value is Disabled |
| DNR EXPIRING | OFF | OERR value is Disabled |
| ERROR MESSAGE | OFF | OERR value is Disabled |
| FLAG ORDER FOR CLARIFICATION | ON | OERR value is Enabled |
| FLAGGED OI EXPIRING - INPT | OFF | OERR value is Disabled |
| FLAGGED OI EXPIRING - OUTPT | OFF | OERR value is Disabled |
| FLAGGED OI ORDER - INPT | OFF | OERR value is Disabled |
| FLAGGED OI ORDER - OUTPT | ON | System value is Enabled |
| FLAGGED OI RESULTS - INPT | OFF | OERR value is Disabled |
| FLAGGED OI RESULTS - OUTPT | OFF | OERR value is Disabled |
| FOOD/DRUG INTERACTION | OFF | OERR value is Disabled |
| FREE TEXT | OFF | OERR value is Disabled |
| IMAGING PATIENT EXAMINED | OFF | User value is Disabled |
| IMAGING REQUEST CANCEL/HELD | ON | OERR value is Enabled |
| IMAGING RESULTS | OFF | User value is Disabled |
| IMAGING RESULTS AMENDED | OFF | OERR value is Disabled |
| LAB ORDER CANCELED | OFF | OERR value is Disabled |
| LAB RESULTS | OFF | OERR value is Disabled |
| MEDICATIONS EXPIRING | OFF | OERR value is Disabled |
| NEW ORDER | OFF | OERR value is Disabled |
| NEW SERVICE CONSULT/REQUEST | ON | User value is Mandatory |
| NPO DIET MORE THAN 72 HRS | OFF | OERR value is Disabled |
| ORDER CHECK | OFF | OERR value is Disabled |
| ORDER REQUIRES CHART SIGNATURE | ON | OERR value is Mandatory |
| ORDER REQUIRES CO-SIGNATURE | OFF | OERR value is Disabled |
| ORDER REQUIRES ELEC SIGNATURE | ON | OERR value is Mandatory |
| ORDERER-FLAGGED RESULTS | OFF | OERR value is Disabled |
| SERVICE ORDER REQ CHART SIGN | ON | OERR value is Mandatory |
| STAT IMAGING REQUEST | OFF | OERR value is Disabled |
| STAT ORDER | OFF | OERR value is Disabled |
| STAT RESULTS | OFF | OERR value is Disabled |
| TRANSFER FROM PSYCHIATRY | OFF | OERR value is Disabled |
| UNSCHEDULED VISIT | ON | OERR value is Enabled |
| UNVERIFIED MEDICATION ORDER | OFF | OERR value is Disabled |
| UNVERIFIED ORDER | OFF | OERR value is Disabled |
| URGENT IMAGING REQUEST | OFF | OERR value is Disabled |

- End of Report -

Package Reference

```
Select Notification Mgmt Menu Option: 1 Enable/Disable My Notifications
                                         Enable/Disable My Notifications
-----
----- Setting for User: CPRSPROVIDER,ONE -----
Select Notification: cons
  1 CONSULT/REQUEST CANCEL/HOLD
  2 CONSULT/REQUEST RESOLUTION
  3 CONSULT/REQUEST UPDATED
CHOOSE 1-3: 3 CONSULT/REQUEST UPDATED
Are you adding CONSULT/REQUEST UPDATED as a new Notification? Yes// <Enter> YES
Notification: CONSULT/REQUEST UPDATED// <Enter> CONSULT/REQUEST UPDATED   CONSULT/REQUEST
UPDATED
Value: ?

Code indicating processing flag for the entity and notification.

Select one of the following:

  M      Mandatory
  E      Enabled
  D      Disabled

Value: Enabled
Select Notification: <Enter>

Select Notification Mgmt Menu Option:
```

New Service Consult/Request

This notification is triggered by the Consults package when a new consult has been requested by a user.

In the following example, the system displays three notifications for new Consults:

```
CPRSPATIE (C5377): New consult Neuro (Stat)
CPRSPATIE (C3456): New consult CAR (Routine)
CPRSPATIE (C6572): New consult PLM (Routine)
Enter "VA VIEW ALERTS to review alerts
```

Select Systems Manager Menu Option:

As a follow-up action, the system displays the consult in a Consult/Tracking screen so that the recipient can take appropriate action. To initiate the follow-up action, enter VA at the prompt and select the notification you want to follow-up on. After selecting this notification from the View Alerts menu, the system deletes the notification.

In the following example, a new consult is first examined and then a receive action is performed:

```
1. CPRSPATIE (C2342): NEW consult CAR (Routine)
2. CPRSPATIE (C2432): Consult COMPLETED: CAR
   Select from 1 to 3
   or enter ?, A I, F, P, M, R, or ^ to exit
   or RETURN to continue: A
```

Processing alert: CPRSPATIENT,NINE (C2342): NEW consult (Routine)

```
Consult/Request Alerts      Feb 13, 1998 13:43:55      Page: 1 of 1
CPRSPATIENT,NINE          666-24-2342  1A              MAR 3,1960 (40) <AD>
                                         Wt.(lb): 184
```

| | | | | |
|--------|----------|----|------------|--------------|
| Number | Date | St | Service | Procedure |
| 1 | 12/16/97 | p | CARDIOLOGY | EKG Portable |

```
Enter ?? for more actions
SP Select Patient  FR Forward      CT Complete/Update  RT Results Display
CV Change View ... CX Cancel (Deny)  MA Make Addendum  PF Print Form 513
RC Receive        DC Discontinue    SF Sig Findings   RM Remove Med Rslt
SC Schedule       CM Add Comment    DD Detailed Display ER Edit/Resubmit
Select Action: Quit// DD  Detailed Display
```

Compiling Report...

```
CONSULTS DETAILED DISPLAY      Dec 19, 1997 08:12:04      Page: 1 of 5
CONSULT DETAILED DISPLAY
TRAT, JACK      234-24-2342      DOB: (74)  Wt. (lb): No Entry
                                         Consult No.: 731
```

Package Reference

| |
|--|
| Current Inpatient/Outpatient: Inpatient |
| Ward: 1A |
| To Service: CARDIOLOGY |
| From Service: 1A |
| Consult Type: EKG Portable |
| Provisional Diagnosis: Cardiomyopathy |
| Reason For Request: Rule out alternate diagnosis |
| Status: PENDING |
| Service is to be rendered on an INPATIENT basis |
| ATTENTION: CPRSPROVIDER, SEVEN |
| Place: Bedside |
| Urgency: Stat |
| Request Activity Date/Time Ordering Clinician Entered By |
| CPRS RELEASED ORDER 12/16/97 15:52 CPRSPROVIDER, SEVEN CPRSPROVIDER, SEVEN |
| + Enter ?? for more actions |
| Select Action: Next Screen// Q Q |

| | | | |
|---|--------------------------------------|------------------------------------|---------------------|
| Consult/Request Alerts CPRSPATIENT,NINE | Feb 13, 1998 13:44:53 666-24-2342 1A | Page: 1 of 10 MAR 3,1960 (40) <AD> | Wt.(lb): 184 Number |
| Date St Service | Procedure | □ | |
| 1 12/16/97 p CARDIOLOGY | EKG Portable | | |
| Enter ?? for more actions | | | |
| SP Select Patient | FR Forward | CT Complete/Update | RT Results Display |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum | PF Print Form 513 |
| RC Receive | DC Discontinue | SF Sig Findings | RM Remove Med Rslt |
| SC Schedule | CM Add Comment | DD Detailed Display | ER Edit/Resubmit |
| Select Action: Quit// RC | Receive | | |

| | |
|---------------------------------------|------------------------|
| Who received it?: CPRSPROVIDER, SEVEN | SC |
| Date/Time Actually Received: NOW// | (DEC 19, 1997 @ 08:12) |
| (Continued on the next page.) | |

Package Reference

| Consult/Request Alerts CPRSPATIENT,NINE | Dec 19, 1997 08:13:01 666-24-2342 1A | Page: 1 of 1 MAR 3,1960 (40) <AD> Wt.(lb): 184 Number |
|--|---|---|
| Date | St Service | Procedure |
| 1 | 12/16/97 a | CARDIOLOGY EKG Portable |

Enter ?? for more actions

| | | | |
|------------------------------------|------------------|---------------------|--------------------|
| SP Select Patient | FR Forward | CT Complete/Update | RT Results Display |
| CV Change View ... | CX Cancel (Deny) | MA Make Addendum | PF Print Form 513 |
| RC Receive | DC Discontinue | SF Sig Findings | ER Edit/Resubmit |
| SC Schedule | CM Add Comment | DD Detailed Display | |
| Select Action: Quit// <Enter> QUIT | | | |

Continue Processing ALERTS ? Y//

Consult/Request Resolution

This notification is triggered by the Consults package when it determines that a consult is complete.

In the following example, the originating provider receives notifications that consults are complete:

```
CPRSPATIE (C3456) : Completed Consult CAR HOLTER
CPRSPATIE (C1996) : *Completed Consult CAR
CPRSPATIE (C8910) : Completed Consult PSURG
                     Enter "VA      VIEW ALERTS      to review alerts

Select Systems Manager Menu Option:
```

As a follow-up action, the system displays the Consult/Request and results/report. To initiate the follow-up action, enter VA at the prompt and select the notification you want to follow-up on. After viewing, the system deletes the notification.

Notice the asterisk on the second notification. This means that there are significant findings for that consult.

Consult/Request Updated

This alert is triggered when a comment is added to consult or the consult is scheduled. Comments may be added either with the Add Comment (CM) action or the Schedule (SC) action. The text of the alert is altered depending on which one of these actions initiated the alert as follows:

Adding a Comment #63 "Comment Added to Consult: . . ."

Scheduling #63 "Scheduled Consult: . . ."

As a follow-up action, the system displays the consult with comments. If appropriate, the clinician may write an additional comment or take other actions as needed.

- When a comment is added by an UPDATE USER, the alert will only go to the ordering provider (unless additional alert recipients are added).
- When a comment is added by a SERVICE TEAM member, the alert will only go to the ordering provider (unless additional alert recipients are added).

This alert is also used by the Healthcare Claims Processing System (HCPS) to notify VA providers the status of a patient who has been referred to a Non-VA Care provider or facility. When an HCPS user enters a comment in RAS, CPRS is updated. The HCPS user might not be a user in VistA; a proxy user will display for ‘Responsible Person’ and ‘Entered By’ in the CPRS, as shown below:

| Facility Activity | Date/Time/Zone | Responsible Person | Entered By |
|----------------------------|----------------------------------|--------------------|-------------------|
| ADDED COMMENT (entered) | 08/08/14 22:31 08/08/14 22:40 | HCPS, APPLICATION | HCPS, APPLICATION |
| Author: DOE, JOHN | | | |

Consult/Request Cancel/Hold

This notification is triggered from the Consults package when a Consult request is cancelled, discontinued, or put on hold.

In the following example, a user receives notification of a discontinued and a denied consult:

```
CPRSPATIE (C2342): Cancelled consult CAR
CPRSPATIE (C9876): Discontinued Consult MEDICINE
CPRSPATIE (C3456): Cancelled consult POD
Enter "VA  VIEW ALERTS      to review alerts
```

Select Systems Manager Menu Option:

As a follow-up action, the system displays consult with comments. If appropriate, the submitter may resubmit the consult based on this new information. To initiate the follow-up action, enter VA at the prompt and select the notification you want to follow-up on. After viewing, the notification is deleted by the system.

In the following example, a cancelled order is edited and resubmitted:

```
You have PENDING ALERTS
Enter "VA  VIEW ALERTS      to review alerts

Select Consult Service Tracking Option: VA  View Alerts

1. CPRSPATIE (C2342): Cancelled consult to PLM
2. CPRSPATIE (C3456): Discontinued consult to CAR
3. CPRSPATIE (C2432): Completed Consult CAR
Select from 1 to 3
or enter ?, A I, F, P, M, R, or ^ to exit
or RETURN to continue: 1

Processing alert: BAXTER, NA (B8840): Cancelled consult PLM
```

(Continued on next page.)

Package Reference

Edit Consult Order Feb 26, 1999 15:58:08 Page: 1 of 2
Edit Consult for Patient CPRSPATIENT,EIGHT Consult Number: 1336
Sending Provider: CPRSPROVIDER,SEVEN
Field Name Current Field Contents
CURRENT STATUS: (Not Editable): CANCELLED
CANCELLED BY (Not Editable): CPRSPROVIDER,SEVEN
CANCELLED COMMENT (Not Editable):
Testing edit.

CANCELLED BY (Not Editable): CPRSPROVIDER,SEVEN
CANCELLED COMMENT (Not Editable):
Testing edit/resubmit.

SENDING PROVIDER (Not Editable): CPRSPROVIDER,SEVEN
REQUEST TYPE (Not Editable): Consult

1 TO SERVICE: PULMONARY
2 PROCEDURE:
3 Performed as INPT OR OUTPT: Outpatient
+ Enter ?? for more actions
ED Edit A Field RS ReSubmit Consult
Select Action: Next Screen// <Enter>

Edit Consult Order Feb 26, 1999 16:01:18 Page: 2 of 2
Edit Consult for Patient CPRSPATIENT,EIGHT Consult Number: 1336
Sending Provider: CPRSPROVIDER,SEVEN
+ Field Name Current Field Contents
4 URGENCY: Routine
5 PLACE OF CONSULTATION:
6 ATTENTION (CONSULTANT):
7 PROVISIONAL DIAGNOSIS:
8 REASON FOR REQUEST:
Pt has trouble breathing.
9 COMMENT(S): (Add Only)
ADDED COMMENT (Not Editable) Entered: Jan 11, 1999 BY: CPRSPROVIDER,SEVEN
Testing, more testing.

Enter ?? for more actions
ED Edit A Field RS ReSubmit Consult
Select Item/Action:Quit// 7

(Continued on the next page.)

Package Reference

| | | | |
|---|------------------------|-----------------|--------|
| Edit Consult Order | Feb 02, 1999 10:44:38 | Page: | 2 of 2 |
| Edit Consult for Patient CPRSPATIENT,NINE | | Consult Number: | 1366 |
| Sending Provider: CPRSPROVIDER,SEVEN | | | |
| + Field Name | Current Field Contents | | |
| 8 REASON FOR REQUEST: | | | |
| Pt is having chest pains. | | | |
| 9 COMMENT(S): (Add Only) | | | |

Enter ?? for more actions
ED Edit A Field RS ReSubmit Consult
Select Item/Action:Quit// ED Edit A Field

Select the fields to edit: 7
Provisional Diagnosis: **Angina**

| | | | |
|--|------------------------|-----------------|--------|
| Edit Consult Order | Feb 26, 1999 16:06:16 | Page: | 2 of 2 |
| Edit Consult for Patient CPRSPATIENT,EIGHT | | Consult Number: | 1336 |
| Sending Provider: CPRSPROVIDER,SEVEN | | | |
| + Field Name | Current Field Contents | | |
| 4 URGENCY: Routine | | | |
| 5 PLACE OF CONSULTATION: | | | |
| 6 ATTENTION (CONSULTANT): | | | |
| 7 PROVISIONAL DIAGNOSIS: Angina | | | |
| 8 REASON FOR REQUEST: | | | |
| Pt has trouble breathing. | | | |
| 9 COMMENT(S): (Add Only) | | | |

ADDED COMMENT (Not Editable) Entered: Jan 11, 1999 BY: CPRSPROVIDER,TWO
Testing, more testing.

Enter ?? for more actions
ED Edit A Field RS ReSubmit Consult
Select Action: Quit// <Enter> QUIT

(Continued on the next page.)

Package Reference

```
This Consult Has Not Been Resubmitted!!  
Resubmit Or All Edits Will Be Lost!!
```

```
Do you wish to resubmit now? ? YES// Y YES  
Resubmitting Consult ... One moment please ...  
Filing Tracking Data...
```

1. CPRSPATIE (C3456): Discontinued consult to CAR
 2. CPRSPATIE (C2432): Completed Consult CAR
- Select from 1 to 2
or enter ?, A I, F, P, M, R, or ^ to exit
or RETURN to continue:

Special Considerations for Discontinued Orders

When an order is Discontinued, who gets the notification depends on the source of the discontinuation. This is dependent on the NOTIFY ON DC field in file 123.5 for the service to which the consult was directed. This field is set by the Set up Consult Services (SS) command of the Consult Management Option.

Consult/Request Has an Added Comment

If a comment is added to a consult by someone in the receiving service, that person is prompted to send notification to the originator of the consult and to any other persons. Other recipients of this notification are controlled as a New Service Consult.

In the following example, a clinician in the Surgery service has added a comment:

```
SIMPSON,H (S9999) : Comment Added to Consult CARDIOLOGY  
Enter "VA VIEW ALERTS" to review alerts
```

Select Consult Management Option:

The follow-up action is to display the orders containing the comments so that you can read them.

- When a comment is added by an UPDATE USER, the alert will only go to the ordering provider (unless additional alert recipients are added).
- When a comment is added by a SERVICE TEAM member, the alert will only go to the ordering provider (unless additional alert recipients are added).

Order(s) Require Electronic Signature

If you do not sign a consult at the time you initiate it, the CPRS triggers a notification reminding you of the need for an electronic signature.

In the following example, three notifications are presented for Consults that need an electronic signature:

```
CPRSPATIE (C3456) : Order requires electronic signature.  
CPRSPATIE (C4723) : Order requires electronic signature.  
CPRSPATIE (C3234) : Order requires electronic signature.  
Enter "VA VIEW ALERTS" to review alerts
```

Select Systems Manager Menu Option:

The follow-up action is to display the orders requiring electronic signature in a CPRS screen so that you can use the Sign action. The system deletes the notification after you have signed the order.

Significant Findings for a Consult

If the status of the Significant Findings Flag is changed in any way, an alert is sent by the Consults package. As far as the recipients and delivery, this notification is treated like a Consult/Request Resolution.

This alert may be delayed, at the user's option, until the consult is complete.

In the example that follows, three significant findings notifications are present. One for a completed consult, one for a pending consult, and one for the Significant Findings Flag being turned off on a completed consult:

```
CPRSPATIE (C3456) : Sig Findings for consult CAR  
CPRSPATIE (C6572) : Sig Findings for consult CAR  
CPRSPATIE (C1432) : No Sig Findings for consult PLM  
Enter "VA VIEW ALERTS to review alerts
```

Select Systems Manager Menu Option:

The follow-up action is to display the orders that have had a change in the Significant Findings Flag in the CPRS screen so that you can examine them.

Glossary

| | |
|------------------------------|--|
| Action | An action in Consults can be selected throughout processing to 1) control screen movement, 2) add new consult orders, or 3) process existing orders. |
| Consult | Referral of a patient by the primary care physician to another hospital service/ specialty, to obtain a medical opinion based on patient evaluation and completion of any procedures, modalities, or treatments the consulting specialist deems necessary to render a medical opinion. In the case of Inter-Facility Consults (IFC, see below) the VA facility that originates the consult. |
| Consulting Site | In the case of Inter-Facility Consults (IFC, see below) the VA facility that originates the consult. |
| Discontinued Orders | Orders that are discontinued or cancelled. |
| HCPS | The Healthcare Claims Processing System is a centralized, automated system that will support the management of purchased care referrals/authorizations. |
| IFC | Inter-Facility Consults permits the transmitting of consults and related information between Department of Veterans Affairs facilities. Consult requests are made to remote facilities because the needed service is not locally available or for patient convenience. Although the Consult Package is utilized in the hospital settings, Consult requests between facilities have been done manually in the past. |
| Order | A request for a consult (service/sub-specialty evaluation) or procedure (Electrocardiogram) to be completed for a patient. |
| Order Cancellation | A request to stop performance of a consult/procedure request; the order may be edited and reactivated |
| Order Discontinuation | A request to stop (discontinue) performance of a consult/procedure request. |

| | |
|--------------------------|--|
| Procedure Request | Any procedure (EKG, Stress Test, etc.) which may be ordered from another service/ specialty without first requiring formal consultation. |
| RAS | Referral and Authorization System; see HCPS. |
| Request | See Procedure Request. |
| Requestor | This is the health care provider (e. g., the physician/clinician) who requests the order to be done. |
| Result | A consequence of an order. Refers to evaluation or status results. When you use the Complete Request (CT) action on a consult or request, you are transferred to TIU to enter the results. |
| Resulting Site | In the case of Inter-Facility Consults (IFC, see above) the remote site that performs the consult and enters the results. |
| Screen Context | This term refers to the particular selection of orders displayed on the screen (e. g., Medicine consults for the patient Ralph Jones). |
| Service | A clinical or administrative specialty (or department) within a Medical Center. |
| Status Result | A result that indicates the processing state of an order; for example, a Pharmacy TPN Consult order may be discontinued (dc) or completed (c). |
| Status Symbols | Codes used in order entry and Consults displays to designate the status of the order. |

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