STAR 2000™

STAR PATIENT CARE REFERENCE GUIDE
Chart Management Module

Preface

This document explains how the STAR Patient Care Chart Management Module works. It is divided into three parts: Chart Tracking, Chart Deficiency, and Bar-Code Application. Information in this book is arranged according to the order the various functions display in the system.

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Documentation Conventions

Documentation for McKesson's STAR 2000™ line of products follows these conventions:

Revisions
Text revisions are indicated by a change bar in the left margin. Paragraphs that contain grammatical changes that do not affect content are not marked.

Canadian Documentation
This volume may include documentation for Canadian users of this product. Complete sections of Canadian text are identified by "CN" and "CN Only."

Key Names
Named keys, such as ENTER, SHIFT, CTRL, and ALT, appear in this document in uppercase (capital) letters. Symbol keys display according to the key name, followed by the symbol on the key in parentheses, such as hyphen (-) and asterisk (*).

Key Chords
Key chords are key entries that require you to hold down one or more keys (typically, CTRL, ALT, or SHIFT) before pressing another key. In this document, key chords display as the names of each key in the chord with a hyphen (-) between each (for example, CTRL-ALT-DEL). You should press the keys in the order indicated.

ENTER
ENTER is a key on a computer keyboard used to complete an entry on the STAR system. (This key may also be referred to as NEW LINE or NL in the STAR system.)

Data Entries
Letters or words you enter in response to the system display in **boldface** letters in this document. For example: Enter **Y** for Yes or **N** for No.

Selecting an Entry
This document often instructs you to "select an entry." The method you use to select an entry depends on whether you are using STAR from a terminal or IBM-compatible personal computer. Entry methods include:

- Entering the option number
- Using your arrow keys to highlight the option and pressing ENTER
- Clicking on the option using a mouse or other pointing device (PC only)

For more information about these options, see the *General Information Volume.*

Prompts
System prompts display at the bottom of many STAR screens when the system requests an entry or displays a message. Prompts display in this document italicized and indented from the rest of the text. For example:

Enter patient name--

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Field Characteristics

STAR product documentation provides field explanation codes, in addition to a narrative description for each field on a screen. These codes display the maximum length of your entry in the field, the type of entry you make in the field, and whether the field is required. This information displays in the following format:

- DISPLAY ONLY for a field you cannot edit.

- For X-YY-Z field types, where:

  - X is the maximum number of characters permitted in the field:

    - P for a field length determined by a Parameter

    - T for a field length determined by a Table

    - U for a field having an Undefined length

  - YY is the type of entry technique permitted in the field:

    - A for Letters only

    - N for Numerals only

    - C for Characters (including punctuation)

    - AC for Letters and Punctuation only (no numbers)

    - NC for Numerals and Punctuation only (no letters)

    - AN for Letters and Numerals only (no punctuation)

  - Z is the requirement indicator of the field:

    - R if an entry is required to complete the function

      NOTE: Facilities can designate that certain fields be required. STAR product documentation does not display R for fields designated as required by a facility.

    - O if an entry is Optional to complete the function

    - C if an entry is Conditionally required or optional

  - For YY-Z field types, where YY is:

    - TABLE LOOKUP for a field that enables you to select from a displayed table. See the *General Information Volume* for more information regarding this entry technique.

    - SPECIAL FORMAT for a field having data entry requirements not conforming to standard format. The field definition contains the specific data entry requirements for the field.

    - DATE for a field subject to the date entry conventions described in the *General Information Volume*.

    - TIME for a field subject to the time entry conventions described in the *General Information Volume*.

    NOTE: For use of the Z position in this format, refer to the explanations for Z under X-YY-Z.

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Introduction

The purpose of the Chart Management Module is to provide the Medical Record Department management tools for Chart Tracking and Chart Deficiency. These two major functions within the department are considered highly labor intensive and require a great deal of repetitive work. These functions also affect several important aspects of the hospital's operations, such as cash flow and physician relations. By automating these two areas, McKesson provides a solution to procedural issues and concerns in the Medical Record Department.

The Chart Tracking function of the module encompasses the processes associated with chart movement, such as check-in, check-out, transfer, request, history of chart activity, and other functions. The following are significant areas that can be improved by using an online tracking system:

- A centralized chart location file that provides for fast update and retrieval of current data

- Independent tracking of multivolume charts or single episodes

- Tracking of pending chart requests

- Immediate access to historical checkout data for chart tracking activities

- Reduction in errors in filling checkout requests

- Monitoring the length of time charts are held by users

- Reports on checked out charts by location, borrower, or date due

- Automation of overdue notices to borrowers who have not returned a chart on time

- Automation of chart routing slips and outguides

- Support of bar coding

The Chart Deficiency function of the Chart Management Module encompasses the processes associated with chart analysis, deficiency tracking, physician incomplete file, physician suspension program, and related reporting. The following list is a sampling of the significant areas that can be improved by using an online deficiency system:

- Automated chart analysis function that can be performed concurrently or retrospectively

- Link with the chart tracking system to monitor "out days" of a record and unavailability of charts to the physician

- Immediate access to current and historical deficiency data

- Monitoring the length of time for chart completion

- Immediate availability of reports for file management

- Automation of physician letters and notices

- Daily logs and reports to provide for system backup, as well as a file audit tool

- Determination of record status based on deficiency or overall status

- Automation of deficiency slips to replace manual completion

GENERAL INFORMATION

Throughout Chart Tracking and Chart Deficiency, reference is made to the MPI patient search screen (sometimes referred to as the MPI lookup screen) and entering of dates and times. For information on these items, refer to the following:

Topic	Reference
MPI Patient Search screen	*STAR Patient Care Reference Guide, Patient Processing Module* Chapter 1: Admission
Date Entry	*STAR Patient Care Reference Guide, General Information Volume* Information Entry Techniques chapter
Time Entry	*STAR Patient Care Reference Guide, General Information Volume* Information Entry Techniques chapter

This book contains the following chapters:

Chapter 1: Chart Tracking Functions

This chapter describes all functions related to chart tracking, including chart check in and check out, chart history, requests, transfers, and print and folder functions. Information on borrower maintenance, parameter maintenance, and bar-code maintenance is also included.

Chapter 2: Chart Deficiency Functions

This chapter describes how to add and edit chart deficiencies and view deficiency histories and work lists. It also includes information on chart deficiency reports, physician letter maintenance, the physician activity tracker, transcription discrepancy notices, and batch processing.

Chapter 3: Bar-Code Application

This chapter provides information on bar-coding devices, printing materials, symbology, formats, scanning, and labels.

Chapter 1 - CHART TRACKING FUNCTIONS

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Illustrations

CHART TRACKING FUNCTIONS

Chart Tracking Functions can be accessed through the Medical Records menu. The following is a sample Medical Records menu:

```
                  General Hospital MR1 Station ID Processor
                                          Thu May 08, 2003 02:02 pm
MR1 Station ID Input Options

           Option No.  Option
           ----------------------------------------
               1       MPI Inquiry
               2       MPI Cross-Facility Visit Inquiry
               3       MPI Print Functions
               4       MPI Maintenance Functions
               5       Active Patient Inquiry
               6       Physicians
               7       Census
               8       Send Message
               9       Reports
              10       Abstracting & DRG Assignment Functions
              11       Chart Tracking Functions
              12       Chart Deficiency Functions
              13       Utilization Management Functions
              14       Medical Records & UM Table Maintenance


Enter option number--
```

After you select Chart Tracking Functions from the previous menu, the following screen is displayed:

```
               General Hospital Chart Tracking Functions Processor
                                          Thu May 08, 2003 02:03 pm
Chart Tracking Functions Input Options

           Option No.  Option
           ----------------------------------------
               1       Check In
               2       Check Out
               3       Revise Check Out
               4       History
               5       Inquiry
               6       Request
               7       Cancel Request
               8       Transfer
               9       Print Functions
              10       Folder Functions
              11       Letter Close and Signature Block
              12       Overdue Notice Maintenance
              13       Borrower Maintenance
              14       Parameter Maintenance
              15       Bar Code Maintenance

Enter option number--
```

The Chart Tracking Functions listed on the screen above are described in detail in this chapter.

NOTE: If your facility is using the GUI version of Chart Management, you will not be able to access the following character-based functions:

- Check In

- Check Out

- Revise Check Out

- Transfer

- Folder Functions

CHECK IN

The Check In function enables you to log the return of a patient's chart into a designated location. You can check in a chart by first selecting either the borrower or the chart.   The default is **C** for chart.

To determine which method to use depends on the number of charts that need to be checked in and if there are multiple charts for the same borrower. For example, if you have 20 charts to check in and they were all checked out to the same borrower, executing check in by borrower would be a more efficient method. If you have several charts being returned from different borrowers, check in by chart may be more efficient.

After you select the Check In option, this prompt displays:

By Borrower(B) or Chart(C)? [C]--

Check In by Borrower

When you enter **B**, this prompt displays:

Enter borrower code, partial name '-', '-' for list--

Select one of the following entry options:

• Enter the borrower's code if you know it.

• Enter one or more letters of the borrower's name followed by a hyphen (-) to display the borrower names that begin with those letters. For example, entering AB- displays all borrower names beginning with these letters.

• Press hyphen (**-**) and ENTER to display the entire Borrower table for selection.

If the selected borrower does not have any charts checked out, this message displays:

No charts on loan!

The message displays briefly, then returns you to the prompt to select another borrower. After you select a borrower with charts on loan, the following screen displays.

```
                    General Hospital Chart Check In Processor
                                          Fri Oct 27, 1989 02:28 pm

 Page:01                   Charts on loan to ADAMS,HAROLD R     ##=Current Choices
     Patient Name          Unit Number Vol Epi Acct Number  Typ Adm Date Dis Date
 ( 1) LAMB,LORI            001042977     1    1 1465243535   I/P 08/02/89 08/03/89
 ( 2) MANUAL,MARIE         000103699     Entire Chart
 ( 3) MANUAL,MAXWELL       000103697     1    1 8906000003   I/P 08/01/89
 ( 4) NELSON,CAROLE        000103712     1 All




 Enter choices (eg. 1,3,5-9), `-`choices to remove or all(A)--
```

This screen displays a listing of all charts this borrower has checked out.

You are prompted to enter the option number of the chart(s) to be checked in. Once the option(s) are selected, press ENTER and this prompt displays prompting you to enter the location where the chart is to be returned.

Enter Check-in Location code or '-' to search [MR]--

Select one of the following options:

• Enter the check in location code if you know it.

• Press hyphen (**-**) and ENTER to display the Chart Location Code table for selection.

• Press ENTER to accept the default location, which is the location that was entered in the Chart Management System Parameters.

After you enter the location code, this prompt displays:

Enter Check-in Date [T] --

There are several formats you can use to enter the check in date. Press ENTER to accept the default of today (current date) or enter a different date. The date can be in the past or future. After you enter the check in date, a check in message displays for each chart selected. You are returned to this prompt:

Enter borrower code, partial name '-', or '-' for list--

Select another borrower for whom charts are to be checked in, or press ENTER to return to this prompt:

By Borrower(B) or Chart(C)? [C]--

Check In by Chart

Enter **C** or press ENTER to check in by chart.The next prompt that displays is the MPI patient lookup screen prompting you to select the patient whose chart you are checking in.

If you select a patient whose chart is not checked out, this message displays:

Error: Not Checked Out!

The message is displayed briefly, and then you are returned to the MPI patient lookup screen for selection of another patient.

Once a patient with checkedout charts is selected, this prompt displays prompting you to enter the location where the chart is to be returned.

Enter Check-in Location code or '-' to search [MR]--

Select one of the following options:

•   Enter the check in location code if you know it

•   Press hyphen (**-**) and ENTER to display the Chart Location Code table for selection.

•   Press ENTER to accept the default location, which is the location that was entered in the Chart Management System Parameters.

After you enter the location code, this prompt displays:

Enter Check-in Date [T] --

There are several formats you can use to enter the check in date. Press ENTER to accept the default of today (current date) or enter a different date. The date can be in the past or future.

After you enter the check in date, this screen displays:

```
                General Hospital Chart Check In Processor
                                          Thu Mar 30, 1989 02:35 pm
Unit Number     Name                      Sex   Birthdate      Corporate Number Exp
000103622       SIMONS,GARY ANDREW         M    10/16/50       00002765
                                          Check-In Location   Check-In Date
                                           BO                      03/30/89
Page:01                                                    ##=Current Choices
    Vol Epi Acct Number     Dis Date  Borrower                  Location
( 1)  1   2 8907900023      08/31/89  ADAMS,HAROLD R            MED STAFF
( 2)  1   1 8904600001                ADAIR,FRANK C            MED STAFF




Enter choices (e.g. 1,3,5-9), `-`choices to remove or all(A)--
                         end selection(NL)

```

This screen displays the unit number, name, sex, birthdate and corporate number of
the patient on the first line. The expired indicator field (Exp) contains a Y if the patient
is expired or is blank if the patient is not expired. The check in location and date are
displayed on the second line. The next line displays the chart volume, episode, and
account number, the discharge date (if the patient has been discharged), the name of
the borrower, and the location of the check out.

NOTE: If a complete volume or entire chart was checked out, the individual account
number and discharge date do not display.

Enter the option number of the chart(s) you want to check in. Once the selection(s) is
made, press ENTER. A check in message displays for each chart being checked in.
You are returned to the MPI patient lookup screen to select another patient. Press
ENTER to return to this prompt:

  By Borrower(B) or Chart(C)? [C]--

Press period (.) and ENTER to return to the Chart Tracking Functions menu.

CHECK OUT

The chart Check Out option enables you to check a chart out from its home location. The home location refers to the place where a chart is located when it is not in use. A home location might be the permanent file area, basement, warehouse, storage, etc. The home location is usually the default chart location in the Chart Management System Parameters.

The chart check out option gives you the choice of checking out charts by borrower or by chart. Determining which method you choose usually depends on the number of charts you need to check out. For example, if you have only one or two charts to check out, you may want to check out by chart. If you are checking out multiple charts for one borrower, check out by borrower would be a better method.

After you select the Check Out option from the Chart Tracking Functions menu, this prompt displays:

By Borrower(B) or Chart(C)? [C]--

Check Out by Borrower

Enter **B** to check out charts by borrower and this prompt displays:

Enter borrower code, partial name '-', '-' for list--

Select one of the following entry options:

• Enter the borrower's code if you know it.

• Enter one or more letters of the borrower's name followed by a hyphen (-) to display the borrower names that begin with those letters. For example, entering AB- displays all borrower names beginning with these letters.

• Press hyphen (-) and ENTER to display the entire Borrower table for selection.

If you select a borrower that has reached the borrowing maximum, this prompt is displayed:

Borrowing limit at maximum! Continue? (Y/N)--

If you select a borrower that has exceeded the borrowing maximum, the following prompt is displayed:

Borrowing limit exceeded! Continue? (Y/N)--

The borrowing limit is set for each borrower through the Borrower Maintenance function of Chart Tracking. The Borrower Maintenance screen contains a field titled Limit, and the number entered here defines the total number of charts a borrower may

have checked out at any given time. You can continue to check out charts to borrowers that have reached their limit by entering **Y** followed by ENTER.

If you select a borrower that is inactive, this prompt displays:

Borrower not active! Continue? (Y/N)--

The status (active or inactive) of a borrower is set for each borrower through the Borrower Maintenance function of Chart Tracking. The Borrower Maintenance screen contains a field titled Borrowing Status, and the status entered here defines whether this borrower is active or inactive. You can continue to check out charts to borrowers that are inactive by entering **Y** followed by ENTER.

If you select a borrower that has been filed as deleted, the following prompt is displayed:

Borrower code XXX filed as deleted, Continue (Y/N)-- |

where XXX is the code for the borrower you selected.

If you do not want to continue this check out because the borrower has reached the borrowing limit, is inactive, or has been filed as deleted, press **N** for No and the ENTER key to return to the transaction to select another borrower.

If you select a borrower that is currently being accessed by another user in the Chart Tracking system, STAR Patient Care displays the following message:

Borrower in use! Retry? (Y/N)--

Enter **Y** to try to access the borrower again. Enter **N** to select another borrower.

If you continue with this check out, this screen displays:

```
                  General Hospital Chart Check Out Processor
                                            Fri Jun 18, 1999 01:35 pm
 Unit Number     Name                       Sex    Birthdate  Corp Number  Exp
 0000104584      DOE,JOHN Q                   M     06/06/56   00002765
  1 Requestor                        2 Location                     3 Initials
    ADAMS,HAROLD R                     MED STAFF                       ABC
  4 Check Out Reason                  5 Comment
    PRO REVIEW
  6 Due Date
    06/27/99




 Accept this screen? (Y/N) [Y]--
```

NOTE: Since you are checking out charts by borrower rather than by chart, any
changes made to the borrower information screen apply to ALL charts
selected for check out to this borrower.

Field Explanations

1. REQUESTOR (DISPLAY ONLY)
This field displays the name of the borrower that was selected for this check out. You
cannot change the borrower via this screen. To change the borrower, enter a period
(.) and press ENTER until you return to the prompt for borrower selection.

2. LOCATION (4-AN-R)
This field indicates where the checked out chart(s) will be located and displays the
default location entered for this borrower via the Borrower Maintenance function. To
update the location for this check out, enter the field number followed by ENTER.
Enter the location code if you know it, or press hyphen (-) followed by ENTER to display
the Chart Location code table for selection. If you do not enter a new location, the one
that is there remains (you cannot use ENTER to delete the field). A default location
always displays since this information is required in Borrower Maintenance.

3. INITIALS (3-A-R)
This field displays the initials of the person who logged onto the work station where the
check out is being performed. To edit the initials for this check out, enter the field
number followed by ENTER. Enter up to three initials. If you do not enter new initials,
the initials there will remain (you cannot use ENTER to delete the field).

4. CHECK OUT REASON (33-A-O)
This field is used to indicate the reason the chart is needed or why it is being checked out. The default check out reason entered for this borrower via the Borrower Maintenance function displays in this field.

To edit the reason for this check out, enter the field number and press ENTER. You can enter the Chart Request Reason code if you know it, press hyphen (-) followed by ENTER to display the Chart Request Reason code table for selection, or enter a free-form response by entering a hyphen (-) and a reason that can be up to 33 characters in length.

If you do not enter a new reason, the previously displayed reason remains (you cannot use the ENTER key to delete the field). If a default reason has not been entered via the Borrower Maintenance function, this field is blank, and you can either leave it blank or enter a reason using a method described above.

5. COMMENT (33-AN-O)
This is an optional free-form comment field that is specific to this chart check out. You can enter a comment that is up to 33 characters in length. This optional comment is generally used to provide additional instructions or information regarding this check out. This comment displays when additional information is requested in the Chart Tracking History function.

6. DUE DATE (6-N-R)
This field indicates the date the chart is to be returned to the appropriate area. The due date that displays is calculated from the Days Due Back information that is entered for this borrower via the Borrower Maintenance function. For example, if the Days Due Back for the selected borrower was 10, then the chart is due 10 days from the date of check out. To edit the due date for this check out, enter the field number and press ENTER.

If you do not enter a new due date, the one that is there remains (you cannot use the ENTER key to delete the field). If a default Days Due Back had not been entered via the Borrower Maintenance option, the due date automatically defaults to the current date.

If the selected borrower has pending requests that have not been filled, this screen
displays:

```
                   General Hospital Chart Check Out Processor
                                              Fri Oct 27, 1989 02:46 pm
    Borrower: ADAMS,HAROLD R

    Page:01                         Pending Requests          ##=Current Choices
         Patient Name            Unit Number    Volume Episode  Requested For   Out
    ( 1) ELDIN,KELLEY L          001042977      Entire Chart    08/29/89 300P
    ( 2) BRONSON,TRACY A         001042852         1      1     08/30/89 700A
    ( 3) BENNETT,BARBARA LUXE    001042886         1      1     08/30/89 700A
    ( 4) BENNETT,BARBARA LUXE    001042886      Entire Chart    09/02/89 700A
    ( 5) RADSMITH,JOE R          001043025      Entire Chart    09/02/89 700A
    ( 6) EDWARDS,DON             001044965      Entire Chart    09/02/89 700A      *
    ( 7) MARKS,ANDREW JONATHA    001045012      Entire Chart    09/12/89 500P




    Enter choices (eg. 1,3,5-9) or `-`choices to remove--
                                end selection(NL)
```

You can select chart(s) for check out from the list of Pending Requests. If you select
one entry that is already checked out, a message displays. Enter a hyphen (-) and an
entry number followed by ENTER to remove the selection.

If the selected entry is available for check out, the chart(s) are automatically checked
out, and a check out message displays for each checked out chart. Since all borrower
information is completed at the time the request is filed, the check out process is very
quick when done from a pending request. When a chart is checked out via the list of
Pending Requests, the system marks the chart request as filled.

If any of the requested charts are already checked out and thus unavailable, an
asterisk (*) displays to the right of the chart on the screen. If you select an unavailable
chart, a message displays as in the following example:

   000000957 Entire chart already checked out!

This message is displayed briefly, and then you are returned to the list of pending
requests.

NOTE: The borrower information filed at the time of the request is the information
            associated with the check out.

If the selected borrower does not have any Pending Requests, or if you press ENTER
to bypass the Pending Requests screen, the next screen to display is the MPI patient
lookup from which you can select a patient whose chart(s) you are checking out.

After you select a patient, this screen displays:

```
               General Hospital Chart Check Out Processor
                                           Fri Sep 22, 1989 01:35 pm
Unit Number     Name                    Sex   Birthdate  Corp Number  Exp
0000104584      DOE,JOHN Q               M    06/06/56   00002765
Page:01                                              ##=Current Choices
     Vol Epi Acct Number    Dis Date Borrower           Loc Due Back
( 1)   1   1 8926500001
( 2)   1   2 8989898989     07/01/89
( 3)   1   3 7878787878     05/01/89
( 4)   1   4 6767676767     03/01/89
( 5)   1   5 5656565656     01/10/89
( 6)   2   1 4545454545     12/14/88
( 7)   2   2 3434343434     10/12/88
( 8)   2   3 2323232323     08/12/88
( 9)   2   4 1212121212     06/10/88
(10)   2   5 9999999999     04/15/88
(11)   3   1 8888888888     02/12/88
(12)   3   2 7777777777     12/01/87
(13)   3   3 6666666666     11/01/87
(14)   3   4 5555555555     09/12/87
(15)   3   5 4444444444     07/15/87


Enter choices (e.g. 1,3,5-9), `-`choices to remove, all(A) or volume(V)--
                   end selection(NL)  next page(/)
```

If you did not enter the account number to access the patient, the screen displays a listing of all volumes and episodes associated with the selected patient. If portions of the record are already checked out, the name of the borrower displays under the appropriate heading.

If the entire chart is checked out, the following screen displays:

```
               General Hospital Chart Check Out Processor
                                           Mon Mar 9, 1992 03:13 pm
Unit Number     Name                    Sex   Birthdate  Corp Number  Exp
0000104584      DOE,JOHN Q               M    06/06/56   00002765
     Vol Epi Acct Number    Dis Date Borrower           Loc Due Back
( 1) Entire chart checked out!         LEES,JACK R         MR  03/14/92

















Press NL--
```

Press ENTER to return to the MPI search screen and select another patient.

If the entire chart is not checked out, you can check out all or part of the record utilizing one of the following entry options:

• Enter the numbers of the entries to be checked out

• Enter **V** to check out a volume

• Enter **A** to check out the entire chart (if any portion of the chart is checked out, this entry option does not display)

• Enter a hyphen (-) and the entry number to cancel your selection

To select specific portions of the record for check out, enter the option number corresponding to those portions followed by ENTER. Once all the entries have been selected, press ENTER, and a check out message displays for each selected entry.

To check out a specific volume, enter **V** followed by ENTER, and the following screen displays listing those volumes available for check out. If one or more episodes in a volume have been checked out, the volume does not display on this screen as being available for check out.

```
                  General Hospital Chart Check Out Processor
                                           Fri Sep 22, 1989 01:35 pm
 Unit Number    Name                      Sex   Birthdate  Corp Number  Exp
 0000104584     DOE,JOHN Q                  M    06/06/56   00002765
                       Volumes Available for Check Out
 Page:01Volume    Location          Episode-Acct Number List    ##=Current Choices
 ( 1)      1     MR                   1-8926500001   2-8989898989   3-7878787878
                     4-6767676767   5-5656565656

 ( 2)      2     MR                   1-4545454545   2-3434343434   3-2323232323
                     4-1212121212   5-9999999999

 ( 3)      3     MR                   1-8888888888   2-7777777777   3-6666666666
                     4-5555555555   5-4444444444




 Enter choices (e.g. 1,7,5-9) or '-'choices to remove--
                     NL = end selection  / = next page
```

To proceed with the check out process, enter the option number(s) corresponding to the volume(s) you wish to check out and press ENTER.   A message displays indicating that the volume(s) has been checked out.

To check out the entire record, enter **A** and press ENTER. A message displays indicating the entire chart has been checked out. If any portion of a record is unavailable for check out, the system does not allow you to check out the entire chart.

If you select an entry or entries that have been checked out (a borrower's name displays on the screen), a message displays stating the episode is already checked

out. Enter a hyphen (-) and the entry number and press ENTER to cancel your selection.

Regardless of which entry option you use, if the Chart Deficiency and Chart Tracking functions have been linked (refer to the section on Chart Management System Parameters for additional information on linking), and the portion of the record being checked out contains a billing delay deficiency (refer to the Chart Deficiencies code table for additional information on billing delay), the system displays the following prompt:

> *00012345 chart contains billing delay deficiency. Continue? (Y/N)--*

If you are checking out portions of a chart by selecting one or more episodes, and any of the episodes contains a billing delay deficiency, the system displays a prompt for each episode that contains the deficiency. The prompt includes the volume number, episode number, and account number corresponding to the deficiency, as in the following example:

> *00012345 chart contains billing delay deficiency. Continue? (Y/N)--*
> *Volume 1 Episode 2 Account A9530300004*

If the chart being checked out does not contain a billing delay deficiency, but does contain one or more other deficiencies, this prompt displays:

> *00012345 chart is currently incomplete. Continue? (Y/N)--*

If you are checking out portions of a chart by selecting one or more episodes, and any of the episodes is incomplete, the system displays a prompt for each episode that is incomplete. The prompt includes the volume number, episode number, and account number, as in the following example:

> *00012345 chart is currently incomplete. Continue? (Y/N)--*
> *Volume 1 Episode 2 Account A9530300004-*

NOTE: If an episode is both incomplete and has a billing delay deficiency, only the billing delay deficiency prompt is displayed.

To continue with the check out, enter **Y**. A message verifying that the chart or episode has been checked out is displayed. If you do not want to continue with the check out, enter **N**. When you have responded to the last prompt (if there is a series for multiple episodes), the system returns you to the MPI patient search screen for selection of another patient.

Whether the chart is checked out or not, you are returned to the MPI patient search screen for selection of another patient. If you do not want to continue checking out charts for the current borrower, press ENTER, and this prompt displays for selection of another borrower.

Enter borrower code, partial name '-', '-' for list--

If you do not want to select another borrower, press ENTER to return to this   prompt:

By Borrower(B) or Chart(C)? [C]--

Check Out by Chart

Enter **C** to check out by chart, and the MPI lookup screen displays, prompting you to select the patient whose chart(s) you are checking out.

If you select a patient who does not have a chart in Chart Tracking, this message displays:

Error: No chart for this patient!

The system displays the message briefly, then returns you to the MPI patient lookup screen for selection of another patient. For information regarding establishing a chart in Chart Tracking, refer to the Folder Functions and Patient Type Parameters sections in this volume of the Reference Guide.

If you select a patient whose chart(s) has a pending request on file, the following screen displays:

```
                  General Hospital Chart Check Out Processor
                                              Mon May 05, 1997 08:41 am
Unit Number     Name                      Sex   Birthdate  Corp Number  Exp
000000745       KING,ALEXANDRA             F    05/09/96   00000891
Page:01                         Pending Requestors            ##=Current Choices
      Borrower                    Volume    Episode  Requested For
( 1)  SCOTT,EDWARD D                1        All     04/03/97 0700
( 2)  SCOTT,EDWARD D              Entire Chart       04/03/97 0700





Enter choices (eg. 1,3,5-9) or `-`choices to remove--
                          end selection(NL)

```

This screen displays a list of borrowers who have filed a chart request for this patient's record. The request(s) may have been filed via the request option on the Chart Tracking menu, or as a result of an appointment made via the STAR Patient Care Patient Scheduling Module (if this module is installed in your facility). The listing sorts by borrower name, by volume, by episode, then in order by date and time requested.

If the request is for a portion of the patient's record that is checked out, the pending request does not display here. For example, if Volume 1 is currently checked out, and there is a pending request for the entire chart, the request will not display on the screen listing the Pending Requestors since Volume 1 is not available.

You can check out the chart by selecting the appropriate request(s), or press ENTER to bypass the pending requestors and proceed with the chart check out process. If you select a request(s) from the list of Pending Requestors, the chart is automatically checked out, and the system displays a check out message verifying each request checked out. Since all borrower information is completed when the request is filed, the check out process is very quick when done from a pending request. When a chart is checked out via the list of Pending Requestors, the system marks the chart request as filled, and this request no longer prints on the Chart Pending Request List.

If you select a chart to check out that is currently being accessed by another user, in the Chart Tracking system, STAR Patient Care displays the following message:

Chart in use! Retry? (Y/N)--

Enter **Y** to try to access the chart again. Enter **N** to select another chart.

If the patient selected does not have any Pending Requestors, or if you press ENTER while on the previous screen to bypass the request and proceed with the chart check out process, this screen displays:

```
                   General Hospital Chart Check Out Processor
                                              Fri Sep 22, 1989 01:35 pm
Unit Number     Name                    Sex   Birthdate  Corp Number   Exp
0000104584      DOE,JOHN Q               M    06/06/56   00002765
Page:01                                                  ##=Current Choices
        Vol Epi Acct Number    Dis Date Borrower            Loc Due Back
( 1)    1    1 8926500001
( 2)    1    2 8989898989      07/01/89
( 3)    1    3 7878787878      05/01/89
( 4)    1    4 6767676767      03/01/89
( 5)    1    5 5656565656      01/10/89
( 6)    2    1 4545454545      12/14/88
( 7)    2    2 3434343434      10/12/88
( 8)    2    3 2323232323      08/12/88
( 9)    2    4 1212121212      06/10/88
(10)    2    5 9999999999      04/15/88
(11)    3    1 8888888888      02/12/88
(12)    3    2 7777777777      12/01/87
(13)    3    3 6666666666      11/01/87
(14)    3    4 5555555555      09/12/87
(15)    3    5 4444444444      07/15/87

Enter choices (e.g. 1,3,5-9), `-`choices to remove, all(A) or volume(V)--
                    end selection(NL)  next page(/)
```

If you did not enter the account number to access the patient, the screen displays a listing of all volumes and episodes associated with the selected patient. If portions of the record are already checked out, the name of the borrower displays under the appropriate heading.

You are prompted to select one of the following entry options, unless the entire chart is already checked out:

• Enter the numbers corresponding to the entries to be checked out

• Enter **V** to check out a volume

• Enter **A** to check out the entire chart (if any portion of the chart is checked out, this entry option does not display)

• Enter a hyphen (**-**) and the entry number to cancel your selection

To select specific portions of the record for check out, enter the option number corresponding to those portions and press ENTER. Once all the entries have been selected, press ENTER, and a check out message displays for each entry selected.

To check out a specific volume, enter **V** and press ENTER and this screen displays. This screen is a listing of those volumes available for check out. If one or more episodes in a volume have been checked out, the volume does not display as being available for check out.

```
                 General Hospital Chart Check Out Processor
                                               Fri Sep 22, 1989 01:35 pm
Unit Number      Name                      Sex    Birthdate   Corp Number   Exp
0000104584       DOE,JOHN Q                 M     06/06/56    00002765
                        Volumes Available for Check Out
Page:01Volume    Location         Episode-Acct Number List    ##=Current Choices
( 1)      1      MR                    1-8926500001   2-8989898989   3-7878787878
                      4-6767676767    5-5656565656

( 2)      2      MR                    1-4545454545   2-3434343434   3-2323232323
                      4-1212121212    5-9999999999

( 3)      3      MR                    1-8888888888   2-7777777777   3-6666666666
                      4-5555555555    5-4444444444




 Enter choices (e.g. 1,7,5-9) or '-'choices to remove--
                    NL = end selection  / = next page
```

To proceed with the check out process, enter the option number(s) corresponding to the volume(s) you wish to check out followed by ENTER. A message displays verifying that the volume(s) has been checked out.

To check out the entire record, press **A** followed by ENTER. A message displays indicating that the entire chart has been checked out. If any portion of a record is unavailable for check out, the system does not allow you to check out the entire chart.

If you select an entry or entries that have been checked out (a borrower's name displays on the screen), you receive a message stating the episode is already checked

out. Enter a hyphen (-) and the entry number and press ENTER to cancel your selection.

Once you have selected the portion(s) of the record to be checked out, this prompt displays requesting you to select the borrower who is to receive the checked out chart(s).

Enter borrower code, partial name '-', '-' for list--

Select one of the following entry options:

- Enter the borrower's code if you know it.

- Enter one or more letters of the borrower's name followed by a hyphen (-) to display the borrower names that begin with those letters. For example, entering AB- displays all borrower names beginning with these letters.

- Press hyphen (-) followed by ENTER to display the entire borrower table for selection.

If you select a borrower that has reached the borrowing maximum, this prompt displays:

Borrowing limit at maximum Continue? (Y/N)--

The borrowing limit is set for each borrower through the Borrower Maintenance function of Chart Tracking. The Borrower Maintenance screen contains a field titled Limit, and the number entered here defines the total number of charts a borrower may have checked out at any given time. You can continue to check out charts to borrowers that have reached their limit by entering **Y** followed by ENTER.

If you select a borrower that is inactive, this prompt displays:

Borrower not active! Continue? (Y/N)--

The status (active or inactive) of a borrower is set for each borrower through the Borrower Maintenance function of Chart Tracking. The Borrower Maintenance screen contains a field titled Borrowing Status, and the status entered here defines whether this borrower is active or inactive. You can continue to check out charts to a borrower that is inactive by entering **Y** and pressing ENTER.

If you do not want to continue this check out because the borrower has reached the borrowing limit or is inactive, then enter **N** for No and press ENTER to return to the transaction to select another borrower.

If you continue with this check out, this screen displays:

```
                General Hospital Chart Check Out Processor
                                            Fri Sep 22, 1989 01:35 pm
 Unit Number     Name                     Sex   Birthdate  Corp Number  Exp
 0000104584      DOE,JOHN Q                M    06/06/56   00002765
  1 Requestor                      2 Location                    3 Initials
    ADAMS,HAROLD R                   MED STAFF                      ABC
  4 Check Out Reason                5 Comment
    PRO REVIEW
  6 Due Date
    09/27/89




 Accept this screen? (Y/N) [Y]--
```

This is the same borrower information screen discussed earlier in this chapter under
Check Out By Borrower. Complete and accept the borrower information screen as
previously described.

All fields on this screen (with the exception of the optional Comment field) default from
the Borrower file, which is entered through the Borrower Maintenance option.

To accept the screen, press ENTER for the default response (Y for Yes). To edit any
of the default borrower information, or enter an optional comment, press **N** and
ENTER, and this prompt displays:

   Enter field number of '/' starting field number--

You can edit all fields with the exception of the Requestor.

If the Chart Deficiency and Chart Tracking functions have been linked (refer to the
section on Chart Management System Parameters for additional information on
linking) and the portion of the record being checked out contains a billing delay
deficiency (refer to the Chart Deficiencies code table for additional information on
billing delay), the system displays a prompt that identifies the deficiency. The prompt
includes the volume number, episode number, and account number corresponding to
the deficiency, as in the following example:

   000104584 chart contains billing delay deficiency. Continue? (Y/N)--
          Volume 1 Episode 3 Account A9606700010

If you are checking out portions of a chart by selecting one or more episodes, and any
of the episodes contains a billing delay deficiency, the system displays a prompt for

each episode that contains the deficiency. The prompt includes the volume number, episode number, and account number corresponding to the deficiency, as in the following example:

> *00012345 chart contains billing delay deficiency. Continue? (Y/N)--*
> *Volume 1 Episode 2 Account A9530300004*

If the chart being checked out does not contain a billing delay deficiency, but does contain one or more other deficiencies, the system displays a prompt that identifies the deficiency. The prompt includes the volume number, episode number, and account number corresponding to the deficiency, as in the following example:

> *00012345 chart is currently incomplete. Continue? (Y/N)--*
> *Volume 1 Episode 3 Account A9606700010*

If you are checking out portions of a chart by selecting one or more episodes, and any of the episodes is incomplete, the system displays a prompt for each episode that is incomplete. The prompt includes the volume number, episode number, and account number, as in the following example:

> *00012345 chart is currently incomplete. Continue? (Y/N)--*
> *Volume 1 Episode 2 Account A9530300004-*

NOTE: If an episode is both incomplete and has a billing delay deficiency, only the billing delay deficiency prompt is displayed.

To continue with the check out, enter **Y**. The system displays a message verifying that the chart or episode has been checked out. If you do not want to continue with the check out, enter **N**. When you have responded to the last prompt (if there is a series for multiple episodes), the system returns you to the MPI patient search screen for selection of another patient.

Once the borrower information screen is accepted, a check out message displays for each episode, volume, or chart that is checked out. You are then returned to the MPI patient search screen where you can select another patient for chart check out. Press ENTER while on the MPI patient search screen, and the following prompt displays:

> *By Borrower(B) or Chart(C)? [C]--*

If you do not want to continue checking out charts, press period (.) followed by ENTER to return to the Chart Tracking Functions menu.

REVISE CHECK OUT

The Revise Check Out option enables you to update or change various items pertaining to the borrower information of a specific chart that has been checked out. The updated information is reflected in the Inquiry and History functions and in Checked Out Chart reports.

After you select the Revise Check Out function, the MPI patient lookup screen displays for chart selection.

After you select a patient, this screen displays:

NOTE: If you select a patient who does not have checked out charts, this screen does not display, and a message displays stating this chart was not checked out.

```
                  General Hospital Revise Check Out Processor
                                            Tue Oct 24, 1989 01:06 pm
Unit Number    Name                     Sex   Birthdate  Corp Number  Exp
0000104584     DOE,JOHN Q                M    06/06/56   00002765
    Vol   Ep  Acct Number   Dis Date  Borrower              Location   Page:01
( 1)  1B  All  All                     LEES,JACK R           MR
( 2)   1  All  All                     ADAMS,HAROLD R        MSO








    Enter choice--
```

If you did not enter the account number to access the patient, the screen is a listing of all portions of the patient's chart that is checked out.

To revise any of the entries, enter the option number corresponding to the check out and press ENTER, and the following borrower information screen displays:

```
                    General Hospital Revise Check Out Processor
                                            Sat Oct 14, 1989 10:09 am
 Unit Number    Name                      Sex   Birthdate  Corp Number  Exp
 0000104584     DOE,JOHN Q                 M    06/06/56   00002765
  1 Requestor                        2 Volume   3 Episode    4 Date Due
    ADAIR,FRANK C                         1          1           10/28/89
  5 Location                         6 Comment
    QA                              ->
  7 Check Out Reason
    QA REVIEW




 Enter optional comment--
```

Field Explanations

1. REQUESTOR (DISPLAY ONLY)
This field displays the name of the borrower, and cannot be edited.

2. VOLUME (DISPLAY ONLY)
This field displays the volume of the chart that is checked out. This field cannot be edited.

3. EPISODE (DISPLAY ONLY)
This field displays the episode of the chart that is checked out. This field cannot be edited.

4. DATE DUE (11-NC-R)
This field contains the date the chart is due to be returned. You can maintain the date that displays or enter a new date. This field cannot be blank.

5. LOCATION (2-N-R)
This field contains the current check out location of the chart. You can enter a new location by entering the Chart Location code if you know it, or press hyphen (-) and ENTER to display the entries in the Chart Location code table for selection. If you do not enter a new location, the current location remains.

6. COMMENT (33-AN-O)
This is a free-form field. Enter any comment that is associated with this revised check out. If you access this field and press ENTER, any comment previously associated with this check out is deleted.

7. CHECK OUT REASON (33-AN-R)
This field contains the reason the chart was checked out. You can enter a new reason by entering the Check Out Reason code if you know it, press hyphen (-) and ENTER to display the entries in the Check Out Reason Code table for selection, or enter a hyphen (-) and a free-form response up to 33 characters. If you do not enter a new check out reason, you can press ENTER to delete the Check Out Reason.

When you have completed editing this screen, a prompt prompts you to accept the screen. Once the screen is accepted, a message displays indicating that the edit is complete. You are returned to the MPI patient lookup screen for selection of another patient. Select another patient, or press ENTER to return to the Chart Tracking Functions menu.

HISTORY

The History option enables you to view every transaction that has taken place for a selected chart. This option displays the history of chart movement; for example, all the chart check ins and check outs. Historical information is retained for the length of time you established in the Chart Management System Parameter, Tracking Purge Days. For example, if you set this parameter to 15 days, then once the chart remains checked in for 15 days, the historical information is purged. Refer to the System Parameters section in this volume for more information.

After you select the History option, the MPI patient lookup screen displays for patient selection.

Once a patient is selected, this screen displays the chart history. The information on this screen is display only and cannot be edited.

```
                    General Hospital Chart History Processor
                                            Fri Nov 19, 1999 01:44 pm
Unit Number    Name                     Sex   Birthdate  Corp Number  Exp
0000104584     DOE,JOHN Q                M     06/06/56   00002765
    Volume Episode Borrower             Checked Out  Returned/(Due)
          Acct Number   Adm Date  Dis Date   Location              Page:01
( 1)    1    1    ADAMS,HAROLD R             09/22/99    (09/27/99)
         4444444444    07/07/99  07/09/99    MED STAFF
( 2)    2    All  ADAMS,HAROLD R             09/22/99     09/22/99
                                             MED STAFF








    Enter choice--
```

NOTE: If you select a patient who has no information in History, a message displays indicating no entries defined, and you are returned to the MPI patient search screen for selection of another patient.

The above screen displays the patient's unit number, name, sex, birthdate and corporate number in the header. The expired indicator field (Exp) contains a Y if the patient is expired or is blank if the patient is not expired. The charts are listed by volume and episode, also showing the borrower, the date the chart was checked out, the date the chart was returned, the account number, the admission date, the discharge date, and the location of the chart. This information is displayed in reverse chronological order so the most recent activity displays first.

To display additional information about a particular activity, enter the option number corresponding to the activity, and press ENTER. This screen then displays:

```
                    General Hospital Chart History Processor
                                         Fri Nov 19, 1999 01:44 pm
 Unit Number     Name                      Sex   Birthdate  Corp Number  Exp
 0000104584      DOE,JOHN Q                 M    06/06/56   00002765
  1 Volume                 2 Episode                3 Initials
    1                        All                      HAW
  4 Borrower                            5 Location
    ADAMS,HAROLD R                        MED STAFF
  6 Check Out Reason                     7 Comment
    PRO REVIEW
  8 Check Out Date         9 Check In Date         10 Due Date
    09/22/99                                          09/27/99
 11 Transferred to




  Press NL--
```

This screen, whose fields cannot be edited, provides additional information such as check out reason, check in date, who the chart was last transferred to (if applicable), and any comments associated with the check out. The initials that display are those of the person who signed onto the CRT to check out the chart initially.

If the check out has been revised, it is the revised information (such as location, reason, comment, and due date) that displays on this screen.

Press ENTER to return to the screen listing the chart activity. Press ENTER again to return to the MPI patient lookup screen. Select another patient on which to view tracking history, or press ENTER to return to the Chart Tracking Functions menu.

INQUIRY

The Inquiry function enables you to view the current location of a patient's chart (whether the chart is checked out or not). Unlike the History option, Inquiry does not display ALL chart activity, but only where all portions of a chart is currently located.

After you select the Inquiry function, the MPI patient lookup screen displays, prompting you to select the patient on whom you would like to inquire. Once a patient is selected, this screen displays:

```
                  General Hospital Chart Inquiry Processor
                                            Fri Jun 18, 1999 01:44 pm
Unit Number     Name                        Sex   Birthdate  Corp Number  Exp
0000104584      DOE,JOHN Q                    M    06/06/56   00002765
      Vol Epi Acct Number     Dis Date Borrower               Loc Due Back
                              Comment                                 Page:01
( 1)   1 All All                    ADAMS,HAROLD R             MSO 09/27/99

( 2)   2  1 4545454545    12/14/98

( 3)   2  2 3434343434    10/12/98

( 4)   2  3 2323232323    08/12/98

( 5)   2  4 1212121212    06/10/98

( 6)   2  5 9999999999    04/15/98

( 7)   3  1 8888888888    02/12/98                            MR

( 8)   3  2 7777777777    12/01/97                            MR

Enter choice--
                              / = next page
```

This screen shows the location of the various portions of the chart for the selected patient. If the chart is currently checked out, the borrower and due back date also display. The comment that displays is the comment that was entered through Episode Maintenance. If a location does not display, it could indicate that a default location code was not set up in the Chart Management System Parameters in the field titled Default Chart Location. (For additional information on Default Chart Location, refer to the section on Chart Management System Parameters). If there are no episodes attached to a volume, the information will not display.

NOTE: If the entire chart is checked out, this message displays:

> *Entire Chart checked out! View Borrower information? (Y/N) [Y]--*

At this point, you have the option of either viewing additional borrower information for a particular check out, or returning to the MPI patient lookup screen to select another patient. To select another patient, press ENTER to return to the MPI patient lookup screen.

If the chart is checked out, and you want to view additional information about the borrower, enter the option number corresponding to the check out and press ENTER, and this screen displays:

```
                    General Hospital Chart Inquiry Processor
                                         Fri Jun 18, 1999 01:44 pm
 Unit Number    Name                      Sex   Birthdate  Corp Number  Exp
 0000104584     DOE,JOHN Q                 M    06/06/56   00002765
  1 Code    2 Name
    1         ADAMS,HAROLD R
  3 Office Address 1        4 Office Address 2         5 Office Phone
    301 PERIMETER CENTER N     SUITE 500                 (404)123-4567
  6 City             7 State              8 Zip Code
    ATLANTA            GA                   30309
  9 Person Responsible     10 Chart Location       11 Limit
    Harold Adams             MED STAFF               25
 12 Borrowing Status   13 Check Out Reason          14 Days Due Back
    Active             PRO REVIEW                     5




 Press NL--
```

This screen is the borrower information screen that was completed via the Borrower Maintenance function. It is possible that some information on the Borrower screen will not match what appears on the Inquiry screen (such as Chart Location or Days Due Back). This could be a result of information being revised at the time of check out, or through the Revise Check Out option (which does not change the original default information in Borrower Maintenance).

The main purpose of this screen is to provide you with additional information such as address, phone number, and person responsible, in case you should need to contact the borrower regarding the check out.

To return to the listing of the chart's current location, press ENTER. Press ENTER again to return to the MPI patient search screen to select another patient for inquiry. Select another patient, or press ENTER to return to the Chart Tracking Functions menu.

REQUEST

The Request function enables the following two transactions to take place:

- Enables a borrower to request a chart from the Medical Record department.

- Enables the Medical Record department to mark a request as filled.

A chart request can be generated from either the Request function, or as a result of a patient appointment made through the STAR Patient Scheduling Module (if this module is installed in your facility). The first portion of this section addresses requests generated from the Chart Tracking Request function.

Adding a Chart Request

After you select the Request function, this prompt displays:

Enter add(A) or fill(F) a request [A]--

To add a request, press ENTER to accept the default of **A**, and this prompt displays:

Enter borrower code,partial name '-', '-' for list--

Use one of the following entry methods:

- Enter the borrower's code if you know it.

- Enter one or more letters of the borrower's name followed by a hyphen (-) to display the names that contain those letters (for example, A- displays all the borrower's names that begin with A).

- Press hyphen (-) and ENTER to display the entire borrower table for selection.

If you select a borrower who has reached the borrowing maximum, this prompt displays:

Borrowing limit at maximum Continue? (Y/N)--

The borrowing limit is set for each borrower through the Borrower Maintenance function of Chart Tracking. The Borrower Maintenance screen contains a field called Limit, and the number entered here defines the total number of charts a borrower can have checked out at any given time. You can continue to file chart requests on a borrower that has reached their chart limit by entering **Y** and pressing ENTER.

If you select a borrower who is inactive, this message displays:

Borrower not active!   Continue? (Y/N)--

Each borrower's status is set through the Borrower Maintenance function of Chart Tracking. The Borrower Maintenance screen contains the field Borrower Status which defines whether a borrower is active or inactive. You can continue to check out charts to borrowers who are inactive by entering **Y** and pressing ENTER.

In either case, if you want to stop this request, enter **N** for No and press ENTER. You can then select another borrower.

If you continue with this request, the MPI lookup screen displays prompting you to select the patient whose chart(s) is being requested.

If you select a patient who does not have a chart in tracking, this message displays:

   Error: No Chart exists for HENLEY,SCOTT HUBERT

The message displays briefly, then returns to the MPI lookup screen for selection of another patient. For information regarding establishing a chart in ChartTracking, refer to "FOLDER FUNCTIONS" on page 1-72 and "Patient Type Parameters" on page 1-110.

If you select a patient that already has pending requests on file, this screen displays:

```
              General Hospital Chart Request Processor
                                      Tue Oct 24, 1989 01:07 pm
Unit Number     Name                      Sex   Birthdate  Corp Number  Exp
0000104584      DOE,JOHN Q                 M    06/06/56   00002765
Page:01                          Pending Requests
     Borrower                    Volume  Episode  Acct Number   Requested For
( 1) ADAMS,HAROLD R                1      All    All           10/19/89 700A
( 2) ADAMS,HAROLD R                1       1     8609800012    10/21/89 700A
( 3) ADAMS,HAROLD R                1B     All    All           10/19/89 700A
( 4) COLEMAN,MICHAEL G         Entire Chart                    10/19/89 700A
( 5) WOODBURN,ROBERT LOUIS     Entire Chart                    10/19/89 700A
( 6) TONGEN,LYLE A             Entire Chart                    10/19/89 1154A




 Press NL--
```

The information on this screen cannot be edited and lists any outstanding pending requests for this patient. The listing sorts by borrower name, by volume, by episode, then in order by date and time requested.

The purpose of this screen is to inform you of any requests for this patient's chart that have not been filled. This information can be useful to the borrower making the request since it may indicate when the chart will be available. Press ENTER to continue with the request.

If there are no pending requests, this message is displayed:

No Pending Request!

The message is displayed briefly, and then this screen is displayed:

```
              General Hospital Chart Request Processor
                                       Sat Oct 14, 1989 10:42 am
Unit Number     Name                       Sex   Birthdate  Corp Number   Exp
0000104584      DOE,JOHN Q                  M    06/06/56   00002765
Page:01                                                  ##=Current Choices
       Volume   Episode   Acct Number    Adm Date  Dis Date  Type
( 1)     1         1      8609800012     02/02/86  02/20/86  I/P
( 2)     1         2      8610022210     04/04/86  04/12/86  I/P
( 3)     1         3      8612300010     06/06/86  06/20/86  I/P
( 4)     1         4      4105206301     08/08/86  08/20/86  I/P
( 5)     1         5      3210321032     10/10/86  10/20/86  I/P
( 6)    1B         1      1010101010     12/12/86  12/25/86  I/P
( 7)    1B         2      1111111111     01/01/87  01/05/87  I/P
( 8)    1B         3      2222222222     03/03/87  03/08/87  I/P
( 9)    1B         4      3333333333     05/05/87  05/10/87  I/P
(10)     2         1      4444444444     07/07/87  07/15/87  I/P
(11)     2         2      5555555555     09/09/87  09/12/87  I/P
(12)     2         3      6666666666     11/01/87  11/01/87   ER
(13)     2         4      7777777777     12/01/87  12/01/87   ER
(14)     2         5      8888888888     02/02/88  02/12/88  I/P
(15)     2         6      9999999999     04/04/88  04/15/88  I/P


Enter choices (eg. 1,3,5-9), `-`choices to remove, all(A) or volume(V)--
                  end selection(NL)  next page(/)
```

This screen displays a list of all volumes and episodes associated with the selected patient.

Select one of the following options:

• Enter the number(s) of the entry(s) being requested

• Enter **V** to request a volume(s)

• Enter **A** to request the entire chart

• Enter a hyphen (-) and the entry number to cancel your selection

To select one or more portions of the record for this request, enter the option number(s) corresponding to those portions, and press ENTER. After you have selected all your entries, press ENTER and the borrower information screen displays.

To request a specific volume, press **V** followed by ENTER, and this screen displays, listing the volumes that are available for request:

```
                   General Hospital Chart Request Processor
                                       Sat Oct 14, 1989 10:42 am
 Unit Number     Name                       Sex   Birthdate  Corp Number   Exp
 0000104584      DOE,JOHN Q                   M    06/06/56   00002765
 Page:01Volume   Location          Episode-Acct Number List    ##=Current Choices
 ( 1)      1     MED REC           1-8609800012   2-8610022210   3-8612300010
                        4-4105206301   5-3210321032

 ( 2)      1B    MED REC           1-1010101010   2-1111111111   3-2222222222
                        4-3333333333

 ( 3)      2     MED REC           1-4444444444   2-5555555555   3-6666666666
                        4-7777777777   5-8888888888   6-9999999999   7-1212121212




 Enter choices (e.g. 1,7,5-9) or '-'choices to remove--
                          NL = end selection
```

To proceed with the request, enter the option number(s) corresponding to the volume(s) and press ENTER. After you have selected your entries, the borrower information screen displays.

To request the entire chart, press **A** followed by ENTER, and the borrower information screen displays.

Regardless of the entry option you use, once you define what is being requested, the borrower information screen displays (for the borrower that was selected for this request):

```
                   General Hospital Chart Request Processor
                                        Mon Apr 03, 1989 01:57 pm
 Unit Number     Name                       Sex   Birthdate  Exp
 000103622       SIMONS,GARY ANDREW          M    10/16/50
  1 Requestor                      2 Location
    ADAMS,HAROLD R                   MSO
  3 Reason for Request             4 Comment
    PRO REVIEW                     ->
  5 Date Needed     6 Time Needed     7 Person Responsible









 Enter optional comment--
```

Field Explanations

1. REQUESTOR (DISPLAY ONLY)

This field displays the name of the borrower that was selected for this request. You cannot change the borrower via this screen. To change the borrower, press period (.) and ENTER continuously until you return to the prompt for borrower selection.

2. LOCATION (4-AN-R)

This field indicates where the requested chart(s) will be located once they are checked out (via the chart check out option). The location displayed here is the default location entered for this borrower via the Borrower Maintenance function. To edit the location for this request, enter the field number and press ENTER. Enter the chart location code if you know it, or press hyphen (-) followed by ENTER to display the Chart Location code table for selection. If you do not enter a new location, the location that is there remains. You cannot press ENTER to delete the location. A default location always displays since this information is required in the Borrower Maintenance function.

3. REASON FOR REQUEST (33-AN-R)

This field indicates the reason the chart(s) is needed or why it is being requested. The reason for request that displays in this field defaults from the Check Out Reason field, located in the Borrower Maintenance file for this borrower. To edit the reason for this request, enter the reason code if you know it, press hyphen (-) followed by ENTER to display the Chart Request Reason code table for selection, or enter a hyphen (-) followed by a free-form reason up to 33 characters long. If you do not update the reason, the reason that is there remains. You cannot press ENTER to delete the reason. If a default reason has not been entered via the Borrower Maintenance option, then this field is blank, and you can either leave it blank or enter a reason using one of the methods described above.

4. COMMENT (33-AN-O)

This is an optional free-form field specific to this chart request (and the eventual chart check out). You can enter a comment up to 33 characters in length. This optional comment is generally used to provide some additional information or instructions regarding this request.

5. DATE NEEDED (6-N-R)

This field is used to indicate the date the chart(s) is needed. The prompt corresponding to this field contains a default of Tomorrow, but you can enter a different date. The date that is entered here prints on the Chart Pending Request List and Outguides to indicate the date the chart(s) is needed.

If the date entered here is the current date, a STAT Chart Request (also known as a STAT Chart Pull Notice) is generated automatically by the system.

NOTE: When you are adding several requests for a borrower by patient account number, once you have entered a value in the Date Needed field, it carries

over as the default to the next account requested. When you select a new
borrower, the Date Needed field will be blank for you to make a new entry.

6. TIME NEEDED (4-N-O)

This field is used to indicate the time the chart(s) is needed. The prompt corresponding
to this field contains a default of 7:00am, but you can enter a different time. The time
that is entered here prints on the Chart Pending Request List and Outguides to indicate
the time the chart(s) is needed.

NOTE: When you are adding several requests for a borrower by patient account
number, once you have entered a value in the Time Needed field, it carries
over as the default to the next account requested. When you select a new
borrower, the Time Needed field will be blank for you to make a new entry.

7. PERSON RESPONSIBLE (20-AN-R)

This field is used to indicate the person responsible for the chart(s) once it is checked
out. The prompt corresponding to this field contains a default that is set up in the
Borrower Maintenance file. To accept this default press ENTER. To enter a different
responsible person, enter a name up to 20 characters in length and press ENTER. The
Person Responsible field located in the Borrower Maintenance file is a required field,
therefore, this field will never be blank.

After the Borrower Information screen is accepted, the request is filed. You are
returned to the MPI patient lookup screen to select another patient on which to file a
chart request for the same borrower. If you do not want to select another patient, press
ENTER and you are prompted to select another borrower. Press ENTER again to
return to this prompt:

Enter add(A) or fill(F) a request [A]--

If you do not want to fill or add a request, enter a period (.) and press ENTER to return
to the Chart Tracking Functions menu.

Impact

After the request is filed, the following occurs:

- This request now prints on the Pending Request List and Outguides when it is
requested for the time frame applicable to this request. (For additional information
regarding Pending Request List and Outguides, refer to "Print Pending Request
List and Outguides" on page 1-53.)

- This chart can now be checked out (via the Chart Check-out option) utilizing this
request.

- If a chart request is entered and the Date Needed is the current date, a STAT Chart
Request Notice prints.

- This request remains in the system until filled or cancelled. The Tracking Purge Days parameter does not purge this data.

Adding a Request Using the Patient Scheduling Module

If your facility utilizes the Patient Scheduling Module, a chart request can be automatically generated in Chart Tracking when an appointment is made via the Patient Scheduling Module.

Several changes have been made to the Patient Scheduling Module to integrate it with the Chart Management Module. The result is that within Chart Management, the chart request functionality uses the current Resource Department code table and the Resource Master table. To obtain additional information on the changes made to scheduling, refer to the *STAR Patient Care Reference Guide, Patient Scheduling Module*.

When a patient appointment is scheduled, the following takes place:

- A chart request is filed in Chart Tracking.

- The chart request from scheduling is for the entire chart.

- An appointment scheduled the same day of the appointment generates a STAT request (outguide) that prints at the designated printer in the Medical Record department.

The system automatically creates a chart and Volume 1 if the following conditions exist:

- A scheduling request is placed for a chart that does not yet exist in Chart Tracking (i.e., has not been automatically or manually set up in Folder Functions)

- The patient has a unit number assigned.

This enables the entire chart to be checked out; however, there will not be any episodes defined. Episodes can be added utilizing the Folder Functions option. For additional information regarding Folder Functions, refer to the Folder Functions section in this volume of the Reference Guide.

NOTE: If the appointment scheduled is on a patient that does not have a unit number, because the patient has not been admitted or registered, a chart request from Scheduling will not be filed in Chart Tracking.

Requests generated from Scheduling display as a pending request for check out as does a request generated in Chart Tracking.

The scheduling request prints on the Chart Pending Request List and Outguides. For those requests made via a scheduled appointment, the Comment field on the outguide,

Revise Check Out function, and History function will contain information regarding the resource ID code of the borrower. This distinguishes a scheduling request from a tracking request.

STAT Chart Request

An example of a STAT Chart Request (also known as a STAT Chart Pull Notice) is provided below. This notice prints automatically when a request is entered and needs to be filled on the same day. This can happen when a borrower requests a chart for the current day or when an appointment is scheduled for the current day.

Figure 1.1 STAT Chart Request (KSCX)

```
Pulled: 07/01/02          Inits: LTK

Unit #: 000-00-2308           Vol:  1 Acct#:
Patient: TANNER,CHARLES        Birthdate: 12/17/87 14Y

Borrower/Resource: PHYSICAL THERAPY (ALL)---
Phone: (404)123-4222       Date & Time Needed: 07/01/02 03:30P

Comment:
Due Date:

    **** STAT REQUEST ****
```

The information on this notice includes:

- Print date and initials

- Patient's unit number

- Volume requested

- Account number requested (if the request was not for the entire chart or an entire volume)

    NOTE: Requests generated from Scheduling are for the entire chart; you cannot request only a volume or an account.

- Patient's name

- Patient's birthdate and age

- Borrower/resource name and telephone number

- Date and time the chart is needed (patient's appointment time for automatic requests generated when an appointment is scheduled)

- Comments (if entered when the request was entered)

> **NOTE:** Comments cannot be entered from the Scheduling module.

- Date chart is due back

Filling a Chart Request

You can fill a chart request in one of two ways:

- Automatically fill by the system when you check out a chart from a pending request

- Manually fill using the fill option within the Request function

It is important for requests to be filled in some manner so they are not outstanding. If a request is outstanding, it continues to display in the Check Out option and on the Pending Request List.

NOTE: You can also cancel a chart request. Refer to "CANCEL REQUEST" on page 1-42 for additional information.

You should manually fill a request if a chart is checked out to a borrower who had a request on file for that chart, but was not checked out using the pending request. Once a request is automatically or manually filled, it is removed as a pending request and does not display as pending requests on the Check Out function or on the Pending Request List.

To manually fill a chart request, select the Request function from the Chart Tracking menu and the following prompt displays:

Enter add(A) or fill(F) a request [A]--

Enter **F** and the following prompt displays:

By Borrower(B) or Chart(C)? [C]--

If you enter **B** for borrower, the following prompt displays:

Enter borrower code, partial name '-', '-' for list--

Select one of the following options:

- Enter the borrower code if you know it.

- Enter one or more letters of the borrower name followed by a hyphen (-) to display the borrowers with requests on file whose names begin with the selected letters.

- Press hyphen (-) followed by ENTER to display a listing of all borrowers with outstanding pending requests.

After you select a borrower, the following screen displays:

```
              General Hospital Chart Request Processor
                                         Mon Aug 23, 2004 12:58 pm
 Borrower: FAMILY MEDICINE CLINIC (ALL)-------X

 Page:01                                          ##=Current Choices
     Patient Name          Unit Number   Vol Account Number  Requested For
 ( 1) ALTON,ONEIDA          000002176    Entire Chart       04/21/04 900A
 ( 2) KEIRCHOFF,ROBIN       000002236    Entire Chart       04/21/04 1230P
 ( 3) OPP,BECKY             000002886    Entire Chart       06/09/04 200P










 Enter choices (e.g. 1,7,5-9) or '-'choices to remove--
                              end select(NL)
```

This screen displays a list of all pending requests for this borrower. These are charts
currently on file as requested that have not been checked out, filled, or cancelled. The
listing sorts by borrower name, by volume, by episode, then in order by date and time
requested.

Select one of the following options:

*   Enter the number(s) of the entry(s) to be filled

*   Enter a hyphen (-) and the option number to cancel your selection

To select the entry(s) to be filled, enter the option number(s) and press ENTER. Press
ENTER after you enter all selections. You can select approximately 60 entries from
the table. The system marks each request as filled and displays the following
message:

   Request(s) filled

The message displays briefly, then you are returned to the screen to select additional
requests to fill. If you do not want to make additional selections, press ENTER to return
to the prompt to select another borrower.

Select another borrower, or press ENTER to return to the following prompt:

   By Borrower (B) or Chart(C)? [C]--

If you press ENTER to accept the default of **C** for chart, the MPI lookup prompt displays for selection of a patient. If you select a patient without requests on file, the following message displays:

> *No entries defined*

This message displays briefly, then you are returned to the MPI lookup for selection of another patient. After you select a patient with pending requests, the following screen displays:

```
                                       Wed Apr 29, 1992 11:22 am
  Unit Number      Name                   Sex   Birthdate  Corp Number  Exp
  0000900045       VELLETTI,THEREA         F    08/23/60   00000115
  Page:01                          Pending Requests          ##=Current Choices
     Borrower                      Volume  Episode  Acct Number  Requested For
  ( 1) LEES,JACK R                    1       1     9209800001   04/23/92 0855
  ( 2) ADAIR,FRANK C                  1       1     9209800001   04/10/92 0700
  ( 3) PSYCHOLOGY COUNSELING          1       1     9209800001   04/21/92 1700




  Enter choices (e.g. 1,7,5-9) or '-'choices to remove--
                            end selection(NL)
```

This screen lists all pending requestors for this chart. You are prompted to select one of these options:

- Enter the number(s) of the entry(s) to be filled

- Enter a hyphen (-) and the entry number to cancel your selection

To select the entry(s) to be filled, enter the option number(s) and press ENTER. After all entries are selected, press ENTER again. The system marks each request as filled and displays the following message:

> *Request(s) filled*

The message displays briefly, then you are returned to the MPI lookup for selection of another patient. If you do not want to select another patient, press ENTER and you are returned to the following prompt:

> *By Borrower(B) or Chart(C)? [C] --*

Press period (.) and ENTER to return to the following prompt:

Enter add(A) or fill(F) a request [A]--

If you do not want to add or fill another request, press period (.) followed by ENTER to exit the transaction and return to the Chart Tracking Functions menu.

Impact

After you fill a request, the following takes place:

• The request is filled *and* is no longer available for check out by the pending request.

• The filled request no longer prints on the Pending Request List and Outguides.

CANCEL REQUEST

The Cancel Request function enables you to cancel a chart request. After you select the Cancel Request function, this screen displays:

```
            General Hospital Cancel Chart Request Processor
                                      Mon Aug 23, 2004 03:11 pm

Page:01                          Requestors
( 1) ADAIR,FRANK C
( 2) JONES,DIANE E
( 3) LEES,JACK R
( 4) SMITH,JOHN C






                    




    Enter choice--

```

This screen displays a listing of chart requestors with requests on file. To select a requestor, enter the number corresponding to the desired requestor and press ENTER. The following screen then displays:

```
            General Hospital Cancel Chart Request Processor
                                      Mon Aug 23, 2004 03:11 pm
 Borrower: PHYSICAL THERAPY (ALL)

Page:02                                           ##=Current Choices
      Patient Name         Unit Number    Vol    Account    Requested For
( 1) SMITH,SARAH           000000921    Entire Chart    04/12/04 200P
( 2) JENKINS,RANDY         000000916    Entire Chart    04/18/04 800A
( 3) HOOKS,TIM             000000917    Entire Chart    04/29/04 900A
( 4) JENKINS,MICHAEL       000000912    Entire Chart    05/01/04 1000A
( 5) JENKINS,MICHAEL       000000912    Entire Chart    05/02/04 100P
( 6) ALT,CARY              000000920    Entire Chart    05/04/04 900A
( 7) ANDERSON,CLARA        000000896    Entire Chart    05/05/04 800A
( 8) ALT,CARY              000000920    Entire Chart    05/05/04 830A
( 9) BORST,JOHN            000000924    Entire Chart    05/05/04 830A
(10) STAMPS,TOMMY          000000926    Entire Chart    05/05/04 930A
(11) JONES,SUSAN           000000922    Entire Chart    05/05/04 1000A
(12) BORST,JOHN            000000924    Entire Chart    05/05/04 1000A


 Enter choices (eg. 1,3,5-9) or `-` choices to remove--
                    end selection(NL)  previous page(/P)

```

This screen displays a list of charts currently on file as being requested by the selected borrower. The list sorts by date and time requested, by unit number, by volume, and by episode. Select one of the following entry options:

- Enter the number(s) of the entry(s) to be cancelled

- Enter a hyphen (-) and the entry number(s) to cancel your selection

To select the entry(s) to be cancelled, enter the number(s) of the desired request(s) and press ENTER. After you select all entry(ies), press ENTER again. You can select approximately 60 entries from the table. The system cancels each request selected and displays this message:

  Cancellation(s) Complete

The message displays briefly, then the previous screen redisplays, enabling you to select another requestor.

Select another requestor, or press ENTER to return to the Chart Tracking Functions menu.

TRANSFER

The Transfer function enables you to transfer a chart from one borrower to another, rather than checking the chart back in and out again.

After you select the Transfer function, this prompt displays:

Transfer by Borrower(B) or Chart(C)? [C]--

Transfer by Borrower

If you enter **B** to transfer by borrower, the following prompt displays:

Enter borrower code, partial name '-', '-' for list--

This prompt is used to select the borrower from whom the charts are to be transferred.

Select one of the following entry options:

• Enter the borrower code if you know it. If you enter the code of a borrower who currently does not have charts on loan, the following error message displays:

> *Error: No Charts On Loan!*

The message displays briefly, then returns you to the prompt for selection of another borrower.

• Enter one or more letters of the borrower's name followed by a hyphen (-) to display the borrowers with charts on loan whose names begin with those letters. For example, entering AB- displays all borrowers' names beginning with these letters that have charts on loan.

• Press hyphen (-) followed by ENTER to display all borrowers with charts on loan.

If you select a borrower that is currently being accessed by another user in the Chart Tracking system, the following message displays:

Borrower in use! Retry? (Y/N)--

Enter **Y** to try to access the borrower again. Enter **N** to select another borrower.

After you select a borrower, the following screen displays:

```
                General Hospital Chart Transfer Processor
                                        Mon May 05, 1997 08:21 am
  Borrower: SCOTT,EDWARD D

  Page:04                                         ##=Current Choices
        Patient Name        Unit Number    Vol  Epi    Acct Number   Dis Date
  ( 1) WATSON,BEN           A000000621      1    1    9529800008    02/15/96
  ( 2) WATSON,INGRID        A000000622      1    1    9529800010    11/01/96
  ( 3) KING,BRENDA          A000000631      1    1    9515600003    10/23/95
  ( 4) KING,BRENDA          A000000631      2    1    9515600002    10/10/95
  ( 5) JONES,SUSAN          A000000645      2    2    9524300001    10/10/95




  Enter choices (e.g. 1,7,5-9) or '-'choices to remove--
                    end selection(NL)  previous page(/P)
```

This screen displays all charts currently on loan to this borrower. This listing sorts by Unit number, then by volume.

You can select as many of the entries as necessary for transfer. After you make all your selections, press ENTER and the prompt for selection of a borrower redisplays. You must now select the borrower *to* whom the charts are to be transferred.

NOTE: If you try to transfer a chart *from* the same borrower *to* the same borrower, the system displays the following error message:

     Error: Same Borrower!

The message displays briefly, then returns you to the prompt to select another borrower.

After you select a borrower, the following prompt displays:

   Transfer to XXXXXXX,XXXXXXX X? (Y/N) [Y]--

where XXXXXXX,XXXXXXX is the selected borrower.

If you do not want to transfer to this borrower, enter **N** for No and press ENTER, and you are returned to the prompt to select another borrower. After you accept the borrower to which you are transferring, the system displays the borrower information screen. For detailed field explanations, refer to the Check Out option described earlier in this chapter. After you accept this screen, the transfer(s) is complete and the following message displays:

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Transfer Complete!

Transfer by Chart

If you press ENTER to accept the default of **C** for Chart, the system displays the MPI lookup option enabling you to select a patient. If you select a patient whose chart is currently not on loan, the following error message displays:

Error: Chart Not On Loan!

The message displays briefly, then you are returned to the MPI lookup prompt for selection of another patient.

If you select an account number for an episode that is not currently checked out, but the patient has other episodes that are checked out (therefore able to be transferred), the system displays the following error message:

Error: Account XXXXXXX Not Checked Out!

where XXXXXXX is the account number.

You can select another patient, or another episode, and follow the steps outlined above, or press ENTER to return to the prompt to transfer by chart or by borrower.

If you select a chart to check out that is currently being accessed by another user, in the Chart Tracking system, STAR Patient Care displays the following message:

Chart in use! Retry? (Y/N)--

Enter **Y** to try to access the chart again. Enter **N** to select another chart.

After you make a valid selection, the following screen displays:

```
                                          Tue Apr 14, 1992 04:01 pm
 Unit Number     Name                Sex   Birthdate  Corp Number Exp
 0000000003      ANDERSON,CHRIS       M    01/01/01   00000173


 Page:01                                            ##=Current Choices
      Vol Epi Acct Number    Dis Date  Borrower          Location
 ( 1)   1   1 9205800001     03/15/92  MCCREARY,MIRIAM K     QUALITY AN








 Enter choices (eg. 1,3,5-9), `-`choices to remove or all(A)--
                      end selection(NL)
```

If you did not enter the account number to access the patient, the screen contains a listing of all portions of the selected chart that are currently on loan. Select the portions to be transferred or enter **A** for All.

If you did enter an account number, but it was *not* checked out, this screen displays only episodes that are currently check out, and that can be transferred.

After you make your selection(s), press ENTER and the following prompt displays:

Enter borrower code, partial name '-', '-' for list--

Select the borrower to whom the chart is to be transferred. Select one of the following options:

• Enter the borrower code if you know it.

• Enter one or more letters of the borrower's name followed by a hyphen (-) to display the borrower names that begin with those letters. For example, entering AB- displays all borrower names beginning with these letters.

• Press hyphen (-) followed by ENTER to display the entire borrower table for selection.

If you select a borrower that is currently being accessed by another user in the Chart Tracking system, STAR Patient Care displays the following message:

Borrower in use! Retry? (Y/N)--

Enter **Y** to try to access the borrower again. Enter **N** to select another borrower.

After you select a borrower, the following prompt displays:

   Transfer to XXXXXXX,XXXXXXX X? (Y/N) [Y]--

where XXXXXXX,XXXXXXX is the selected borrower.

After you select a borrower, the system displays the borrower information screen. For detailed field explanations, refer to the Check Out option described earlier in this chapter. After you accept this screen, the transfer is complete and the following message displays:

   Transfer Complete!

The message displays briefly, then you are returned to the MPI lookup prompt for selection of another patient. You can select another patient and repeat these steps, or you can press ENTER to return to the transfer by chart or by borrower prompt.

PRINT FUNCTIONS

When you select the Print Functions option from the Chart Tracking Functions menu, this screen displays:

```
          General Hospital Chart Tracking Print Functions Processor
                                          Fri Mar 06, 1998 01:52 pm
 Chart Tracking Print Functions Input Options

          Option No.  Option
          ----------------------------------------
              1       Charts Out Report
              2       Print Pending Request List & Outguides
              3       Print Individual Outguides
              4       Overdue Notice Print
              5       Overdue Chart Report
              6       Current Discharges Report

              7       Print Unit Number Bar Code Label
              8       Print Account Number Bar Code Label




 Enter option number--
```

The options on this submenu enable you to print various reports to monitor checked out charts, print pull lists and outguides, and print two formats of bar-code labels.

The first six reports on this submenu are spooled reports and can be reprinted if the hold days for the reports (in Report Maintenance) are set to at least one day. Consult your McKesson representative for setting hold days for reports. You can view any spooled report online via the Spooled Reports function.

NOTE: The reports and explanations in this section apply to both the GUI and character-based versions of Chart Tracking.

Charts Out Report

The Charts Out Report provides you with a printed or on-screen report of charts that are currently checked out. You can limit the report by including only those that are overdue and/or by selecting specific borrowers.

This report was previously named the Checked-Out Charts Report.

NOTE: In the GUI version of Chart Management, the only charts that display on this report are those not in a home location. Therefore, even if a chart is in the possession of a borrower, if that borrower has an associated location that is defined as a home location, those charts do not display on this report.

When you select the Charts Out Report option, the following screen is displayed:

```
                    General Hospital Charts Out Report Processor
                                              Mon Sep 03, 2001 06:55 pm

( 1)Overdue or All     :
( 2)Borrowers          :
( 3)Sort               :
( 4)Display/Print      :













Print overdue(O), or all(A)?[A]--  |
```

Field Explanations

1. OVERDUE OR ALL
This field indicates whether all charts or just those that are overdue should display. When you access this field, the following prompt displays:

> *Print overdue charts(O) or all(A)? [A]--*

Use one of these entry options:

• Enter **O** for a report containing only those charts that are overdue (i.e., the return date has past).

• Enter **A** for All to receive a report displaying all charts that are out.

> **NOTE:** On either listing, OD displays next to the Due Back date indicating those charts that are overdue.

If you do not make an entry and press ENTER, the system uses the default response of All.

2. BORROWERS
This field indicates whether this report should display charts that are out for a specific borrower or for all borrowers. When you access this field, the following prompt displays:

> *Enter borrower codes separated by `,`, partial name `-` , `-` for list, or (A)ll [A]--*

Use one of these entry options:

- Enter the borrower code(s), separated by commas.

- Enter **A** to indicate the report should include all borrowers with charts on loan.

- Enter a hyphen (-) to display all borrowers with charts on loan. You can select multiple entries from this list.

- Enter part of a borrowers name, followed by a hyphen (for example, AD-). Borrowers who have charts out and whose last name begins with these letters are displayed for selection.

If you do not make an entry and press ENTER, the system uses the default response of All and includes all borrowers.

3. SORT OPTION
This field enables you to indicate the sort option for the report. When this field is entered, these options display for selection:

(1) Borrower
(2) Due Date
(3) Location
(4) Patient Name
(5) Terminal Digit
(6) Unit Number

Select sort option [Unit Number]--

Enter the number to the left of the desired option to make a selection. If you do not make an entry and press ENTER, the system automatically sorts the report by Unit Number.

4. DISPLAY/PRINT
Enter **D** or press ENTER to display the report on your screen. Enter **P** to print the report to the default printer.

Figure 1.2 Charts Out Report

```
Mon Sep 03, 2001 07:02 pm                                              Page 1

                              Model Hospital A
                              Charts Out Report
                              Categories: All
                              Borrowers: All
                              Sort: Unit Number

Unit Number      Patient Name
 Vol Acct Number  D/C Date        P/T
Borrower          Location              Date Moved   Due Back
---------------------------------------------------------------------------
100004026        MORASKA,CHRIS M
   1 01092-00021   04/02/01        ER
ADAIR,FRANK         MED STAFF            06/05/01     06/10/01 OD
   1 01102-00007   04/12/01        PAI
ADAIR,FRANK         MED STAFF            06/05/01     06/10/01 OD

100004056        VERB,CHRIS
   1 01096-00002   04/06/01        BOB
ADAMS,HAROLD        INCOMPLETE           07/12/01     08/27/01 OD

100004066        VELVET,TRACEY
   1 01093-00002   04/04/01        I/P
ADAMS,HAROLD        INCOMPLETE           07/05/01     07/31/01 OD
   1 01129-00001   05/14/01        I/P
ADAIR,FRANK         MED STAFF            07/05/01     07/10/01 OD
   1 01094-00008   04/10/01        I/P
ADAIR,FRANK         MED STAFF            08/09/01     08/14/01 OD
   1 01101-00002   04/24/01        I/P
NUTRITIONIST,A      NURSING              08/13/01     08/13/01 OD
   1 01115-00002   04/26/01        I/P
ADAIR,FRANK         MED STAFF            08/13/01     08/18/01 OD
   2 ALL
ADAIR,FRANK         MED STAFF            08/13/01     08/18/01 OD
   3 01093-00002   04/04/01        I/P
CODING/ANALYSIS (ALL) CODING             07/05/01     07/08/01 OD
   3 01094-00008   04/10/01        I/P
CLINICOM,PHYSICIAN    EMER ROOM          08/13/01     08/23/01 OD

100004067        VELVA,TONY
   1 ALL
CODING/ANALYSIS (ALL) CODING             07/05/01     07/08/01 OD

100004131        ENGLISH,ED
   1 01113-00005   04/23/01        ER
ADAIR,FRANK         MED STAFF            04/26/01     05/01/01 OD

100004132        VERB,CARLY
   1 01180-00001   06/30/01        NII
ADAMS,HAROLD        INCOMPLETE           08/16/01     09/11/01
   1 01115-00006   04/25/01        FPC
BAGE,DENISE L       CODING               08/16/01     08/18/01 OD
   1 01162-00004   06/12/01        IPB
ADAMS,HAROLD        INCOMPLETE           08/16/01     09/11/01
   1 01227-00001   08/16/01        IPB
```

Field Explanations

UNIT NUMBER
This is the unit number of the medical record that is checked out.

PATIENT NAME
This is the name of the patient whose chart is checked out.

VOL
This is the volume number of the chart that is checked out. If all volumes of a record are checked out, *All* prints.

ACCT NUMBER
This is the account number of the episode that is checked out. If all accounts of a volume are checked out, *All* prints.

NOTE: If an entire chart is checked out, Entire Chart prints under the headers for Vol and Acct Number.

D/C DATE
This is the discharge date of the account, if a specific account was moved. If all visits were moved, this column is blank.

P/T
This is the patient type associated with this visit, if a specific account was moved. If all visits were moved, this column is blank.

BORROWER
This is the borrower/resource currently in possession of this chart.

LOCATION
This column displays the current location of the chart.

DATE MOVED
This is the date the chart was moved to this borrower.

DUE BACK
This is the date the chart is due back from this borrower to the Medical Record department. If the chart is overdue, the letters OD print next to the due back date.

Print Pending Request List and Outguides

The Pending Request List contains charts that have a request on file, either via the Chart Tracking Request option or as a result of an appointment made in the STAR Patient Care Patient Scheduling Module (if this module is installed in your facility). Once a request is completed, filled, or cancelled, the request no longer displays on the Pending Request List.

The outguides that print with the list correspond to the charts on this list. The outguides only print if the Print Outguide flag in the Chart Management Patient Type Parameters is set to Yes for any portion of the requested chart.

NOTE: Generating the Pending Request List and Outguides does **not** move the chart. This report assists with the process of locating the charts that need to

PRINT FUNCTIONS

be moved; however, you must use the Chart Tracking functions to complete
the process of moving the chart. The system marks a request as filled once
the chart is moved using the pending request.

To print the Pending Request List and Outguides, select the Print Pending Request List
and Outguides option from the Chart Tracking Print Functions menu. The following
screen is displayed:

```
           General Hospital Print Pending Request List & Outguides Processor
                                                  Wed Jul 04, 2001 12:29 pm

 ( 1)Starting date      :
 ( 2)Starting time      :
 ( 3)Ending date        :
 ( 4)Ending time        :
 ( 5)Print Outguides    :
 ( 6)Borrowers          :
 ( 7)Primary Sort Option  :
 ( 8)Secondary Sort Option:




 Enter starting date [Today]--
```

Field Explanations

1. STARTING DATE (DATE-R)
This field indicates the starting date to be used for this report. The starting date
corresponds to the Date Needed associated with the requests to be included on this
list. Enter a date or press ENTER for the default entry of today's date.

For example, enter tomorrow's date to include all charts with a date needed for
tomorrow.

2. STARTING TIME (TIME-R)
This field indicates the starting time to be used for this report. The starting time entered
here corresponds to the Time Needed associated with the requests to be included on
this list. Enter a time or press ENTER for the default entry of the current time.

For example, enter 7:00am to include all charts with a time needed of 7:00am.

3. ENDING DATE (DATE-R)
This field indicates the ending date to be used for this report. The ending date
corresponds to the Date Needed associated with the requests to be included on this
list. Enter a date or press ENTER for the default entry of tomorrow's date.

For example, enter the date of the Starting Date plus two days to pull all charts that
were requested for the next two days.

4. ENDING TIME (TIME-R)
This field indicates the ending time to be used for this report. The ending time entered here corresponds to the time needed of the requests to be included on this list. Enter a time or press ENTER for the default entry of 7:00am.

For example, enter 5:00pm to pull all charts ending with a request time prior to 5:00pm.

5. PRINT OUTGUIDES (1-A-R)
This field indicates whether an outguide should print for each request on the Pending Request List. Even if you enter Yes in this field, an outguide only prints for charts with an account where the Print Outguide field in the Chart Management Patient Type Parameters is set to Yes. If you do not make an entry and press ENTER, the system uses the default response of Yes and prints outguides.

6. BORROWER (TABLE LOOKUP-R)
This field identifies specific borrowers to be included on the report. When you access this field, the following prompt displays:

Enter borrower codes separated by ',', 'A' for all, '-' for list [A]--

Use one of these entry options:

•   Enter the borrower code(s) separated by commas.

•   Enter **A** to indicate the report should include all borrowers with pending requests.

•   Enter a hyphen (**-**) to display a listing of all borrowers with pending requests. You can select multiple entries from this listing.

If you do not make an entry and press ENTER, the system uses the default response of All and includes all borrowers with pending requests in the list.

7. PRIMARY SORT OPTION (TABLE LOOKUP-R)
This field indicates the primary sort option for the report. The number of accounts per primary sort is provided on the report.

When you access this field, the following options are displayed for selection:

   (1) Borrower
   (2) Current Location
   (3) Patient Name
   (4) Priority
   (5) Terminal Digit
   (6) Unit Number

Enter the number to the left of the desired option to select it. There is no default.

NOTE: When you select the sort option of Borrower, there is a page break after each listing for that borrower.

8. SECONDARY SORT OPTION (TABLE LOOKUP-R)
This field indicates the secondary sort option for the report and works in conjunction with the primary sort option. When you access this field, the following options are displayed for selection:

When you access this field, the following options are displayed for selection:

> *(1) Patient Name*
> *(2) Priority*
> *(3) Terminal Digit*
> *(4) Unit Number*

Enter the number to the left of the desired option to select it. There is no default.

Figure 1.3 Pending Request List (KBRX)

```
Wed Jul 04, 2001 05:08 pm                                          Page 1

                    Pending Request List for Model Hospital A
                             Primary Sort: Borrower
                             Secondary Sort: Unit Number

Unit Number    Patient Name            Birthdate
Vol  Acct Number   D/C Date  Borrower/Resource        Date/Time Needed
Location           Person Responsible   Request Date    Reason          Prt
Comments
Loc Info--Vol  Acct Number     Borrower              Location     Due Dat
-------------------------------------------------------------------------

000-00-1804    TANT,KAREN              02/02/23
  1  A0036200020   12/27/00  RESPIRATORY THERAPY      07/04/01 0700
ABST            KATE KING             07/04/01 0700
Kate asked this be delivered to Marilyn Rosen instead of to her.
          1  0036200020       FAMILY MEDICINE CLIN EMER ROOM     07/06/01
          1  0106400002       FAMILY MEDICINE CLIN EMER ROOM     07/06/01
          2  0111300003       FAMILY MEDICINE CLIN EMER ROOM     07/06/01

000-00-2008    TATE,MILES              02/02/32
All  All                      RESPIRATORY THERAPY      07/04/01 0700
ABST            KATE KING             07/04/01 0700
     All       All                                              07/04/01

000-00-2309    WOOD,CHUCK              03/25/54
  1  All                      RESPIRATORY THERAPY      07/04/01 0700
ABST            KATE KING             07/04/01 0700

                                  Total for Borrower RESPIRATORY THERAPY: 3




                             End of Report
```

Field Explanations

UNIT NUMBER
This is the unit number of the medical record to be pulled.

PATIENT NAME
This is the name of the patient whose record is to be pulled.

BIRTHDATE
This is the birthdate of the patient.

VOL
This is the volume number of the chart to be pulled. If a specific volume was indicated, the volume number prints. If all volumes were requested, All prints.

ACCT NUMBER
This is the account number of the episode that was requested. If a specific episode was requested, the account number prints. If all episodes were requested, All prints.

D/C DATE
This is the discharge date of the requested account if you requested a specific account. If you have requested by volume or entire chart, this column is blank.

BORROWER/RESOURCE
This is the name of the physician, department or resource who has requested this chart.

DATE/TIME NEEDED
This is the date and time for which the chart was requested.

LOCATION
This is the location code associated with this request indicating where the chart should be sent.

PERSON RESPONSIBLE
This is the person responsible for the chart once it has been delivered. The person responsible may or may not be the same as the borrower/resource.

REQUEST DATE
This is the date on which the chart was originally requested.

REASON
This is the reason the borrower/resource needs this chart, as entered at the time of the request.

PRTY
This is the priority of this request, as indicated by an **H** for High, **M** for Medium, or **L** for Low. The priority is assigned based on the request reason. If the request reason does not have a priority associated with it, this column is blank.

COMMENTS
This column includes any comments associated with the request at the time it was entered. If the request was generated from the Chart Tracking Request function, this field contains the information entered in the optional comment field of the chart request. If the request was generated as a result of an appointment in scheduling, this field contains information regarding the resource ID code.

LOC INFO
The data in this header line pertains to current location and borrower information corresponding to the requested chart.

- Vol - This is the volume number of the patient's record that is currently checked out.

- Acct Number - This is the account number corresponding to the episode that is currently checked out. If the chart was moved by volume or entire chart, this column is blank.

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- Borrower - This is the borrower that currently has the indicated portions of the requested chart. The borrower's name is displayed in the Last,First Middle format.

- Location - This is the current location of the requested chart. This field displays up to 10 letters of the location description. This location may or may not match the location that displays with the check out information if any portion of the chart is currently checked out. This is due to the difference in which portion of the chart has been requested and what is checked out.

- Due Date - This is the date the checked out chart is due back. The date displays in mm/dd/yy format.

TOTAL
The total number of accounts per primary sort is provided. In the example, the primary sort was borrower, and the total shows 3 accounts for the borrower.

Figure 1.4 Outguide (KGBX)

```
Moved: 07/17/01            By: LTR
Unit #: 000000760
Patient: COPPERFIELD,DAVID NEWTON    Birthdate/Age: 01/20/00 17M
Vol:   1 Acct#: All  Discharge Date:
Borrower/Resource: RYANOFSKI,GEORGETTE S
Person Responsible: Carlotta Cahill
Location: ER
Phone: (404)393-6000
Date & Time Needed: 07/18/01 0700
Date Requested: 07/17/01 1019
Reason: Chart Review
Comment: Carlotta said to deliver charts directly to Dr. R.
Due Date: 07/22/01
```

Field Explanations

MOVED
This is the date the list was generated. The assumption is that outguides are used because the chart was actually pulled the same day the list and outguides were generated.

BY
This is the initials of the person who generated the list. The assumption is that the person generating the list and outguide is the one pulling the chart. Since there is no way to update this information in the system, any changes should be made directly on the outguide.

UNIT NUMBER
This is the unit number of the medical record to be pulled.

PATIENT
This is the name of the patient whose chart is to be pulled.

BIRTHDATE/AGE
This is the birthdate and age of this patient.

VOL
This is the volume number that has been moved. If all volumes were requested, All displays.

NOTE: If only some of the volumes were actually moved, you should manually make a note on the outguide. The system tracks what was actually moved when the move process is performed.

ACCT NUMBER
This is the account number that has been moved, if the specific visit was requested. If all visits were requested, All displays.

NOTE: If only some of the visits were moved, you should manually make a note on the outguide. The system tracks what was actually moved when the move process is performed.

D/C DATE
This is the discharge date of the requested account, if a specific account was requested. If all visits were requested, this column is blank.

BORROWER/RESOURCE
This is the name of the physician/resource who requested the record.

PERSON RESPONSIBLE
This is the person responsible for the chart once it has been delivered. The person responsible may or may not be the same as the borrower/resource.

LOCATION
This is the location where the chart was moved, as entered at the time of the request. If the location is different, you should manually update the outguide.

PHONE
This is the phone number or extension of the borrower as entered in the Borrower File. If the phone number is different than what is in the Borrower File, you should manually update the outguide.

DATE/TIME NEEDED
This is the date and time the chart is needed by the Borrower/Resource. An outguide prints for every different date and time needed for one patient.

DATE REQUESTED
This is the date when the chart was originally requested.

REASON
This is the reason the borrower/resource needs this chart, as entered at the time of the request.

COMMENT
This column includes any comments associated with the request at the time it was entered. If this request was generated from Chart Tracking, this field contains information that was entered in the Comment field of the chart request. If this request was generated as a result of an appointment in scheduling, this field contains information regarding the resource ID code.

DUE DATE
This is the date the chart is due back.

Print Individual Outguides

This function enables you to print an outguide for an individual chart request. You cannot print an outguide for a chart that does not have an active chart request. As long as there is a request on file and the chart has not already been checked out, an outguide can be printed using this function.

To print the outguide, select the function from the Chart Tracking Print Functions menu. The MPI patient lookup screen displays for selection of the patient for whom the outguide is to be printed.

Once the patient is selected, this screen displays:

```
            General Hospital Print Individual Outguides Processor
                                          Fri Sep 22, 1989 01:55 pm
Unit Number    Name                    Sex   Birthdate  Corp Number  Exp
0000104584     DOE,JOHN Q               M    06/06/56   00002765
Page:01                    Pending Requestors           ##=Current Choices
     Borrower                 Volume   Episode  Requested For
( 1) ADAIR,FRANK C              1                09/23/89 700A













 Enter choices (eg. 1,3,5-9) or `-`choices to remove--
                          end selection(NL)

```

This screen displays a list of pending requestor(s) for this patent. Select the request(s) for which an outguide is to be printed, and press ENTER. Once all selections are made, press ENTER, and this message displays:

Printing!

The message displays briefly, then returns to the MPI patient lookup screen to select another patient. Select another patient, or press ENTER to return to the Chart Tracking Print Functions menu. The outguide is the same as the sample previously displayed for Print Pending Request List and Outguides.

Overdue Notices

The Overdue Notices option enables you to generate notices for those borrowers who have overdue charts. Each notice includes the body of the letter, the listing of overdue charts, and a letter close and signature line. The content of the notice is maintained through the Overdue Notice Maintenance function on the Chart Tracking menu, and the letter close and signature block is maintained through the Letter Close and Signature Block function through Chart Tracking.

When you select the Overdue Notice Print function from the Chart Tracking Print Functions menu, a screen displays enabling you to define the information to be included on the notice and for whom the notices are printed. The following is an example of this screen:

```
                     General Hospital Overdue Notices Processor
                                             Thu Jul 17, 1997 12:29 pm

( 1)Borrowers          :
( 2)Primary Sort Option  :
( 3)Secondary Sort Option:













 Enter borrower codes separated by ',',"A" for all,'-' for list [A]--
```

Field Explanations

1. BORROWERS
This field indicates which borrowers for whom a notice should be generated.

Use one of these entry options:

• Enter the borrower code(s) separated by commas.

• Enter **A** to indicate the report should include all borrowers with overdue charts.

- Enter a hyphen (-) to display all borrowers with overdue charts. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the system uses the default response of All and includes all borrowers with overdue charts on the report.

2. PRIMARY SORT OPTION
This field indicates the primary sort option of the charts that display within the body of the notice. When you access this field, the following options display for selection:

(1) Patient Name
(2) Terminal Digit
(3) Unit Number
(4) Due Date
(5) Location

Select primary sort option [Due Date]--

Enter the number to the left of the desired option. If you do not make and entry and press ENTER, the system sorts the listing of charts on the notice by Due Date.

3. SECONDARY SORT OPTION
This field indicates the secondary sort option of the charts that display within the body of the notice. When you access this field, the following options display for selection:

(1) Patient Name
(2) Terminal Digit
(3) Unit Number

Select secondary sort option [Unit Number]--

Enter the number to the left of the desired option. If you do not make an entry and press ENTER, the system sorts the listing of charts on the notice by unit number.

Figure 1.5 Overdue Notice

```
July 18, 1997

PHYSICAL THERAPY


Dear Borrower,

A recent review of our files reveals that you have medical records checked out
that are due back.

It is most important that these records are returned immediately to facilitate
their availability to others who may need the chart for patient care purposes.

Unit Number            Patient Name
 Vol Account Number    Date Out          Due Back    Location
--------------------------------------------------------------------------------
000002488              JOHANNSON,THOMAS E.
   1 9714100006          05/21/97          05/26/97    THERAPY UNIT

000000567              KALE,KENNETH
   1 9621300004          06/18/97          06/23/97    THERAPY UNIT
   2 9711100003          06/18/97          06/23/97    THERAPY UNIT
   3 9716900002          06/18/97          06/23/97    THERAPY UNIT

000002255              LINDERMAN,HORATIO
   1 9630500044          06/18/97          06/23/97    THERAPY UNIT
   1 9710400001          06/18/97          06/23/97    THERAPY UNIT
   1 9716200004          06/18/97          06/23/97    THERAPY UNIT
   1 9715400127          06/18/97          06/23/97    THERAPY UNIT
   1 9716400001          06/18/97          06/23/97    THERAPY UNIT

000000509              SMITH,ANNA MARIE
   1                     06/25/97          06/30/97    THERAPY UNIT
   1                     06/25/97          06/30/97    THERAPY UNIT

000002516              TARLINGTON,VICTOR
   2 9630400003          06/25/97          06/30/97
   2 9630400007          06/25/97          06/30/97

Thank your for your cooperation.

Sincerely,

Sue Anderson
Director, Health Information Services
```

The date at the top of the notice is the date the notice was printed. The address of the borrower is pulled from the Borrower Maintenance File. The text of the letter is pulled from the Overdue Notice Maintenance, and the letter close and signature block is pulled from the Letter Close & Signature Block Maintenance. The following field explanations pertain to the chart listing in the report.

Field Explanations

UNIT NUMBER
This is the unit number of the medical record that is checked out.

PATIENT NAME
This is the name of the patient whose chart is checked out.

VOL
This is the volume number of the chart that is checked out. If all volumes of a record are checked out, *All* prints.

ACCT NUMBER
This is the account number of the episode that is checked out. If a specific account is checked out, the account number prints. If all accounts of a volume are checked out, All prints. If the entire chart is checked out, *Entire Chart* prints under the headers for Vol and Acct Number.

DATE OUT
This is the date the chart was checked out.

DUE BACK
This is the date the chart is due back to the appropriate location.

LOCATION
This is the current location of the chart.

Overdue Chart Report

The Overdue Chart Report is a listing of all charts that are overdue, and provides you with the option of either a printed report or online display of overdue charts.

To obtain this listing, select the function from the Chart Tracking Print Functions menu and this prompt displays:

Sort by borrower(B), patient name(P), or unit number(U)? [U]--

Select one of the following sort options:

- Enter **B** to sort by the borrower's last name. If you select this option, the following prompt displays:

    Enter borrower code, partial name'-', '-' for list or (A)ll --

Select one of the following entry options:

- Enter the borrower code if you know it.

- Enter one or more letters of the borrower's name followed by a hyphen (-) to display the names that contain those letters. The borrowers that display are those whose names begin with the letters you selected and who have charts on loan.

- Press hyphen (-) followed by ENTER to display a listing of all borrowers with charts on loan. If you use this entry option, the screen listing that displays enables you to select multiple borrowers.

- Enter **A** for All.

• Enter **P** to sort by the patient's last name.

• Press ENTER to accept the default of **U** to sort in numerical order by the unit number.

Select the sort option by entering the appropriate letter followed by ENTER, or press ENTER to sort by unit number. Once a sort selection is entered, this prompt displays:

Display or Print? (D/P) [D]--

To obtain a printed listing of this report, press **P** followed by ENTER. To view this report on the screen, press ENTER to accept the default of **D**. If you choose to display the report on the screen, you do not have the option of printing the report after you view it (you have to select the option again and repeat the process and select **P** instead of **D**).

If you choose to print the report, once you enter **P**, a message similar to the one below displays:

Overdue Chart Report printing at XXX
(where XXX is the default printer for this workstation)

The message displays briefly, then returns to the Chart Tracking Print Functions menu.

This is a sample of an Overdue Chart Report as it displays on the screen. The report that prints appears the same as the report that displays on the screen.

```
Tue Oct 24, 1989 01:22 pm                                          Page 1
                          GENERAL HOSPITAL A
                          Overdue Chart Report
                           Sort: Unit Number

Unit Number   Patient Name
  Vol    Acct Number  Pat Type  Checked Out      Exp Ret   Borrower
--------------------------------------------------------------------------
A0000104584   DOE,JOHN Q
   1                            10/18/89 13:51  10/23/89  ADAMS,HAROLD R

A0000104587   DAVIS,DAVID
   1                            10/11/89 10:07  10/16/89  ADAMS,HAROLD R

A0000104589   DRUMM,BARRY
  ALL                           10/19/89 17:07  10/21/89  MARTIN,DWIGHT L

A001042886    BENNETT,BARBARA LUTHER
  ALL                           10/17/89 16:23  10/22/89  PHYSICAL THERAPY

Press NL--
```

After you view all screens of the report, you are returned to the Chart Tracking Print Functions Input Options menu.

Field Explanations

UNIT NUMBER
This is the unit number of the medical record that is checked out.

PATIENT NAME
This is the name of the patient whose chart is checked out.

VOL
This is the volume number of the chart that is checked out. If a specific volume is checked out, the volume number prints. If all volumes of a record are checked out, *All* prints.

ACCT NUMBER
This is the account number of the episode that is checked out. If a specific account is checked out, the account number prints. If all accounts of a volume are checked out, All prints. If the entire chart is checked out, *Entire Chart* prints under the headers for Vol and Acct Number.

PAT TYPE
This is the patient type of the episode that is checked out. If all episodes of a volume or entire chart are checked out, a specific patient type does not display.

CHECKED OUT
This is the date the chart was checked out.

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EXP RET
This is the date the chart is expected to be returned to the Medical Record Department.

BORROWER
This is the name of the borrower to whom the chart was checked out.

Current Discharges Report

This report is a listing of all patients who have been discharged since the last midnight processing took place. The purpose of the report is to enable the Medical Record Department to determine what charts may be available from the nursing units.

To print this report, select the option from the Chart Tracking Print Functions menu, and this prompt displays:

Print Current Discharges Report? (Y/N)--

Enter **Y** for Yes to print the report. Once **Y** is entered, this message displays:

Generating Report XXX
(where XXX is the default printer for this workstation)

The message displays briefly, then returns to the Chart Tracking Print Functions Input Options menu.

If you do not want to print the report, enter **N** for No and you are returned to the Chart Tracking Print Functions menu.

The following is a sample of the Current Discharges Report:

Figure 1.6 Current Discharges Report

```
Wed May 16, 2001 03:29 pm      General Hospital A                    Page 1
                        Current Discharges Report

Unit Number   Acct Number   Patient Name            Sex  Birthdate
   Station              Admit Date   Admitting Physician               P/T
-----------------------------------------------------------------------------

000-00-2189   0113400008    CHANG,GEORGIA           F    10/31/80
                       05/14/01    DOCTOR,ADMITTING ONE                 LIC
000-00-2192   0113500001    DANIELS,PETE            M    12/28/73
                       05/15/01    DOCTOR,ADMITTING ONE                 LOR
000-00-2190   0113400009    NELSON,NINA             F    12/09/84
                       05/14/01    DOCTOR,ADMITTING ONE                 OBC


End of Report
```

Field Explanations

UNIT NUMBER
This is the unit number of the patient that was discharged.

ACCT NUMBER
This is the account number of the patient that was discharged.

PATIENT NAME
This is the name of the patient who was discharged.

SEX
This is the sex of the patient (M for male, F for female).

BIRTHDATE
This is the birthdate of the patient.

STATION
This is the last nursing station on which the patient was located.

ADMIT DATE
This is the admission date of this episode.

ADMITTING PHYSICIAN
This is the name of the admitting physician.

P/T
This is the patient's patient type.

Print Unit Number Bar Code Label

This print option is available to hospitals using bar coding. This option enables you to print a unit number bar-code label for a particular patient. For more information regarding bar coding and bar-code labels, refer to "BAR CODE MAINTENANCE" on page 1-131.

To print the label, select this function from the Chart Tracking Print Functions menu. Once the function is selected, the MPI patient lookup screen displays for selection of a patient. Once the patient is selected, this prompt displays:

> *Print Unit Number Bar Code label? (Y/N)--*

To print a unit number bar-code label, enter **Y** for Yes and press ENTER, and this message displays:

> *Printing Unit Number label!*

The message displays briefly, then returns to the MPI patient lookup screen for selection of another patient. Select another patient, or press ENTER to return to the Chart Tracking Print Functions menu.

If you do not want to print a unit number bar-code label, press **N** for No followed by ENTER. You are returned to the MPI patient lookup screen for selection of another patient. Select another patient, or press ENTER to return to the Chart Tracking Print Functions menu.

For information on the appearance and format of the Unit Number Bar-Code label, refer to Chapter 3 - BAR-CODE APPLICATION.

Print Account Number Bar Code Label

This option is applicable in those facilities using bar coding. This function enables you to print an account number bar-code label for a particular episode. The label prints to the Chart Barcode Printer defined for the CRT you are using. If a printer is not defined in the CRT table, the label prints to the default bar-code printer, ABCPf. For more information regarding bar coding and bar-code labels, refer to Chapter 3 - BAR-CODE APPLICATION.

To print the label, select this option from the Chart Tracking Print Functions menu. Once you select this function, the MPI patient lookup screen displays for selection of a patient. After you select the patient, this screen displays:

```
         General Hospital Print Account Number Bar Code Label Processor
                                         Tue Oct 24, 1989 01:25 pm
 Unit Number     Name                    Sex    Birthdate  Corp Number
 0000104584      DOE,JOHN Q               M     06/06/56   00002765

 No Pt Acct Nmbr     Adm Date Dsch Date Typ Attending Dr.   Service FC  Dsch Status
  1 A89898-98989     07/01/89 07/01/89  ER  LEES,JACK R      MED        HOME OR SELF
  2 A78787-87878     05/01/89 05/01/89  O/P ADAMS,HAROLD R   MED        HOME OR SELF
  3 A67676-76767     03/01/89 03/01/89  ER  COLEMAN,MICHAEL  MED        HOME OR SELF
  4 A56565-65656     01/10/89 01/10/89  ER  LAGERGREN,WILLI  MED        HOME OR SELF
  5 A45454-54545     12/12/88 12/14/88  I/P WOODBURN,ROBERT  MED        HOME OR SELF
  6 A34343-43434     10/10/88 10/12/88  O/P LEES,JACK R      MED        HOME OR SELF
  7 A23232-32323     08/08/88 08/12/88  ER  ADAMS,HAROLD R   MED        HOME OR SELF
  8 A12121-21212     06/06/88 06/10/88  O/P ZELLER,HECTOR C  MED        HOME OR SELF
  9 A99999-99999     04/04/88 04/15/88  I/P WOODBURN,ROBERT  MED        HOME OR SELF
 10 A88888-88888     02/02/88 02/12/88  I/P LEES,JACK R      MED        HOME OR SELF
 11 A77777-77777     12/01/87 12/01/87  ER  LEES,JACK R      MED        HOME OR SELF
 12 A66666-66666     11/01/87 11/01/87  ER  COLEMAN,MICHAEL  MED        HOME OR SELF
 13 A55555-55555     09/09/87 09/12/87  I/P ADAMS,HAROLD R   MED        HOME OR SELF
 14 A44444-44444     07/07/87 07/15/87  I/P WOODBURN,ROBERT  MED        HOME OR SELF
 15 A33333-33333     05/05/87 05/10/87  I/P COLEMAN,MICHAEL  MED        HOME OR SELF

 Select visit or [next page]--
```

If you did not enter the account number to access the patient, the screen displays a listing of all accounts for this patient. Select the account for which a bar-code label is to print by pressing the option number that corresponds to the account and ENTER. After you select the account, this prompt displays:

Print Account Number Bar Code label? (Y/N)--

To print an account number bar-code label, press **Y** for Yes and ENTER, and this message displays:

Printing Account Number label!

The message displays briefly, then returns to the screen that displays the account numbers for selection. Select another account, or press period (.) and ENTER to return to the MPI patient lookup screen for selection of another patient. Select another patient, or press ENTER to return to the Chart Tracking Print Functions menu.

If you do not want to print an account number bar-code label, press **N** for No and ENTER on the above prompt. You are returned to the screen that displays the list of account numbers for selection. Select another account, or press period (.) and ENTER to return to the MPI patient lookup screen for selection of another patient. Select another patient, or press ENTER to return to the Chart Tracking Print Functions menu.

For more information regarding the appearance and format of the Account Number Bar-Code label, refer to Chapter 3 - BAR-CODE APPLICATION.

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FOLDER FUNCTIONS

The Folder Functions are a series of options that enable a record to be set up and maintained in Chart Tracking. The *Chart Management Module* has been integrated with the admission process of the STAR Patient Care system so that a patient's record is automatically set up in Chart Tracking.

For each patient admitted or registered at a facility, the system checks a parameter located in the Chart Management System Type Parameters to determine whether that patient type is set up to be included in the Chart Tracking function. For additional information regarding setting the system parameters, refer to the Parameter Maintenance section in this volume of the Reference Guide.

There are three levels to creating a record in the Chart Tracking function. The first level is the chart, the second is the volume, and the third is the episode. Collectively, these make up the Folder Functions of Chart Tracking. The purpose of each of these levels is discussed below.

The first level, *Chart Maintenance*, is used to add or edit a record in Chart Tracking. The following are examples of when you may need to manually add a chart to Chart Tracking:

1. The parameter for the patient type was not set to be included in Chart Tracking, and a chart was not created.

2. The record was in the STAR Patient Care System prior to the installation of Chart Tracking, thus a tracking record was not automatically created.

The Chart Maintenance option is used to add or edit a chart in Chart Tracking. However, creating the chart on the first level is not sufficient to perform tracking transactions such as check out, requests, transfer, etc. In order to further define the record, you must also create the second level, the Volume.

The second level, *Volume Maintenance*, is used to add or edit a volume of a chart. The following are examples of when you may need to manually add a volume to Chart Tracking:

1. The medical record department has created an additional volume for a patient whose record has outgrown the current folder and now must do the same in Chart Tracking so that the tracking record coincides with the physical record.

2. The patient was in the STAR Patient Care System prior to Chart Tracking being installed, thus a portion of the record is not in Chart Tracking and additional volumes need to be added.

The Volume Maintenance option is used to add or edit a volume of a chart in Chart Tracking. However, creating a chart and volume is not sufficient to perform tracking

transactions such as Check Out, Request, or Transfer. In order to further define the record, you must also create the third level, the Episode.

The third level, *Episode Maintenance*, is used to add or edit an episode to a volume of a chart. The following are examples of when you may need to manually add an episode to Chart Tracking:

1. The parameter for the patient type was not set to be included in Chart Tracking, thus the episode was not created.

2. The patient was in the STAR Patient Care system prior to the installation of Chart Tracking, thus an episode(s) needs to be manually added.

How these levels are set up at the time of the admission process and how they are affected by MPI maintenance functions is discussed below. Collectively, these are the points of integration between the admission functions and Chart Tracking.

New Patient

A new patient is considered one who has never been admitted to the facility. The patient does not have a unit number in the system, so a new one is assigned. When the admitting staff completes the admission process, the system verifies that this new unit number does not have a chart in Chart Tracking, and creates one. The system then verifies that this chart does not have a volume, and it creates one, beginning with Volume 1 if the patient type is set up for Chart Tracking. The system verifies that Volume 1 does not have an episode, and creates one, beginning with episode 1. The system associates the account number for this admission to episode 1.

NOTE: The system does not automatically add a patient to Chart Tracking when that patient is added to the MPI via the Revise MPI function.

Readmission

A readmission is considered to be a patient who has been previously treated at the facility (as an inpatient or outpatient), and who has a unit number on file in the system. When the admitting staff completes the admitting process, the system verifies that this is not a new unit number, and checks to see whether this patient has a chart in Chart Tracking.

If the patient does not have a chart in tracking and the patient type parameter is set up for Chart Tracking, the system creates one as explained in the section above on New Patient. If the system determines that there is a chart in tracking for this unit number, the system verifies whether a volume exists. If a volume exists, the system maintains the current volume number and checks to see if an episode exists. If an episode exists, the system increments the episode number by one, and associates the account number for this admission to the new episode number.

Cancelled Admission

When an admission is cancelled, the episode information associated with that admission is purged from Chart Tracking Folder Functions during the nightly batch process. If the admission information was for a new patient, the patient is retained in the MPI and the chart and volume are maintained in tracking. The episode number (*not* the account number) can be reissued should the patient return at a later date.

Transfer Visits

The Medical Record Department has the ability to transfer visit information from one patient to another. If you perform this function, and the patient from whom the visit was transferred has tracking activity in Chart Tracking, the *Chart Management Module* purges the episode information associated with that account number from the chart of the patient from whom the visit is being transferred.

The Chart Tracking function does not automatically transfer the episode information associated with the transferred account number to the other Patient. For example, if Patient A had a visit transferred to Patient B, and Patient A had that episode checked out to a physician, the checked out information is purged, and does not appear on the Check Out or Inquiry screens of Chart Tracking. The transferred episode is also purged from the Folder Functions. It is therefore suggested that the Medical Record Department verify tracking information prior to transferring visits from one patient to another.

Merge Unit Numbers

When the Medical Record Department merges the unit numbers of two patients, the *Chart Management Module* merges the volume and episode information if one or both patients have information existing in the tracking system, even if the chart is checked out. For example, Patient 1 has tracking information up to and including Volume 1, Episode 3. Patient 2 has tracking information up to and including Volume 1, Episode 5. Once the two numbers are merged, the tracking system moves the episodes from the old number to the new number, and begins with the volume after the last. Thus in this example, if the unit number for patient 2 is maintained, the tracking information is updated to include Volume 1, episodes 1,2,3,4,5 and Volume 2, episodes 1,2,3.

After you select the Folder Functions option, the following submenu displays:

```
              General Hospital Folder Functions Processor
                                        Fri May 05, 1989 09:53 am
Folder Functions Input Options

          Option No.  Option
          ---------------------------------------
              1       Chart Maintenance
              2       Volume Maintenance
              3       Episode Maintenance
              4       Purge Chart









Enter option number--
```

Descriptions of the functions listed on the previous screen follow in this section.

Chart Maintenance

ADDING A NEW CHART TO CHART TRACKING

To create a new chart in Chart Tracking, select the Chart Maintenance function. After you select this option, you are prompted by the MPI patient lookup screen to select a patient. If you select a patient that does not currently have a chart in Chart Tracking, the system takes you through the following series of screens and prompts, which result in the creation of a chart, volume(s), and episode(s).

```
                    General Hospital Chart Maintenance Processor
                                              Tue Oct 24, 1989 01:26 pm
      Unit Number     Name                   Sex    Birthdate  Corp Number  Exp
      0000104584      DOE,JOHN Q              M      06/06/56   00002765
       1 Location              2 Current Volume
         MED REC










      Enter beginning Volume Number [1]--

```

This screen is for the creation of the record on the first level.

Field Explanations

1. LOCATION (4-AN-O)
This is the location where the chart is usually filed when it is not checked out. The location that displays in this field is the Default Chart Location set up in the Chart Management System Parameters. Leave the default location that displays or enter a new location by entering a chart location code if you know it, or press hyphen (-) and ENTER to display the Chart Location Code table for selection. If you do not want to enter a location code, enter the field number and press ENTER. This leaves the field blank.

The location that is displayed in this field for the chart in turn becomes the default location for the volume. If you change the location code here, it is changed for the volume as well.

2. CURRENT VOLUME (2-AN-R)
This is the current volume number of the chart. The following prompt displays for this field:

Enter beginning Volume Number [1]--

To enter Volume 1 as the beginning volume, press ENTER to accept the default. If you need to enter another volume number, enter the number and press ENTER (you can use alpha characters in volumes, such as 1A, 2B, etc., but the alpha character cannot be in the first position, as in A1 or B2). The volume number that is entered here is used by the system as the current volume to add episodes to when the patient is readmitted.

After you accept this screen, the following prompt displays:

Create chart for DOE,JOHN Q? (Y/N) [Y]--

If you do not accept the default of **Y** for Yes, and you press **N** for No and ENTER, the chart is not created and you are returned to the MPI patient lookup screen for selection of another patient.

If you accept the default of **Y** for Yes, the chart is created and this message displays:

Chart created!

The message displays briefly, then this prompt displays:

Start Volume #1 for DOE,JOHN Q? (Y/N) [Y]--

If you do not accept the default of **Y** for Yes, and you press **N** for No followed by ENTER, the volume is not created and you are returned to the MPI patient lookup screen for selection of another patient. Since you had accepted the screen to create the chart, the first level (the chart) has been created in tracking. If you wish to add a volume and/or episodes later, you will have to utilize those particular maintenance functions which are discussed later. Since the chart has only been created on the first level, tracking transactions could not be completed.

If you accept the default of **Y** for Yes, this screen displays:

```
                General Hospital Chart Maintenance Processor
                                           Tue Oct 24, 1989 01:28 pm
   Unit Number     Name                      Sex   Birthdate   Corp Number   Exp
   001045343       DOE,JANE Q                 F    03/03/03    00002715
    1 Location           2 Current Episode
      MED REC           ->









   Enter beginning Episode Number [1] --

```

Field Explanations

1. LOCATION (4-AN-O)

This is the location where the volume is usually filed when it is not checked out. The location that displays in this field is the Default Chart Location set up in the Chart Management System Parameters, or if you had changed the default location when creating the chart, the location you entered there displays for volume. (It is assumed that the volume is located in the same place as the chart; however, if necessary these can be different locations). You can leave the default location that displays, or enter a new location by entering the code if you know it, or press hyphen (-) followed by ENTER to display the Chart Location Code table for selection. If you do not want to enter a location code, enter the field number and press ENTER. This leaves the field blank.

NOTE: If you change the default location, the system does not change the location at the Chart level; thus, a different location appears on the Chart level then appears on the Volume level.

The location that is displayed in this field for the volume in turn becomes the default location for the episode. If you change the location code here, it is changed for the associated episode(s) as well.

2. CURRENT EPISODE (3-N-R)

This is the current episode number of the current volume. The following prompt displays for this field:

> *Enter beginning Episode Number [1]--*

To enter episode 1 as the beginning episode, press ENTER to accept the default. If you need to enter a different episode number, enter the number and press ENTER.

The episode number that is entered here is used by the system as the current episode to add episodes to when the patient is readmitted. For example, if the current volume number is 1 and the current episode number is 1, then when the patient is readmitted, the system maintains the same volume number (1), but increments the episode number to 2.

After you accept this screen, the following prompt displays:

> *Volume 1 for DOE,JOHN Q created!*

After this message displays briefly, the following prompt displays:

> *Print Unit Number Bar Code label? (Y/N) [N]--*

This applies to the printing of bar-code labels, and is pertinent to those facilities utilizing bar coding in Chart Tracking. If you do not use bar coding at your facility, press ENTER to accept the default of **N** for No, and proceed with creating the episode.

If your facility is utilizing bar coding, and you enter **Y** for Yes (followed by ENTER), a Unit Number Bar-Code label prints at the INTERMEC printer. For additional information regarding bar coding, see Chapter 3 - BAR-CODE APPLICATION.

Whether you print or do not print a Unit Number Bar-Code label, once you respond to the previous prompt, this prompt displays:

Create episode 1? (Y/N) [Y]--

If you do not accept the default of Y for Yes and enter **N** for No, followed by pressing ENTER, the episode is not created and you are returned to the MPI patient lookup screen for selection of another patient.   Since you had accepted the screen to create the chart and the volume, the first level (the chart) and second level (the volume) have been created in tracking. If you later wish to add an episode(s), you will have to edit the episode utilizing the Episode Maintenance option which is discussed later. Since the chart has only been created on the first two levels, tracking transactions could not be completed.

If you accept the default of **Y** for Yes to create an episode, this screen displays:

```
                General Hospital Volume Maintenance Processor
                                        Tue Oct 24, 1989 01:36 pm
 Unit Number     Name                     Sex    Birthdate  Corp Number   Exp
 0000104584      DOE,JOHN Q               M      06/06/56   00002765
  1 Volume   2 Episode    3 Account Number   4 Comments
     3        1           ->
  5 Patient Type                            6 Adm/Reg Date    7 Discharge Date

  8 Location
    MED REC
 No Pt Acct Nmbr    Adm Date Dsch Date Typ Attending Dr.   Service FC  Dsch Status
  1 A89898-98989    07/01/89 07/01/89  ER  LEES,JACK R      MED        HOME OR SELF
  2 A78787-87878    05/01/89 05/01/89  O/P ADAMS,HAROLD R   MED        HOME OR SELF
  3 A67676-76767    03/01/89 03/01/89  ER  COLEMAN,MICHAEL  MED        HOME OR SELF
  4 A56565-65656    01/10/89 01/10/89  ER  LAGERGREN,WILLI  MED        HOME OR SELF
  5 A45454-54545    12/12/88 12/14/88  I/P WOODBURN,ROBERT  MED        HOME OR SELF
  6 A34343-43434    10/10/88 10/12/88  O/P LEES,JACK R      MED        HOME OR SELF
  7 A23232-32323    08/08/88 08/12/88  ER  ADAMS,HAROLD R   MED        HOME OR SELF
  8 A12121-21212    06/06/88 06/10/88  O/P ZELLER,HECTOR C  MED        HOME OR SELF
  9 A99999-99999    04/04/88 04/15/88  I/P WOODBURN,ROBERT  MED        HOME OR SELF
 10 A88888-88888    02/02/88 02/12/88  I/P LEES,JACK R      MED        HOME OR SELF

 Select visit or [next page]--
```

This screen is used to create an episode utilizing the account numbers (i.e., visits) found in the MPI. The upper portion of the screen contains data that identifies the episode. The lower portion of the screen is a display of all visits found in the MPI for this patient. It is from this list of visits that you associate an episode with an account number. If you do not associate an episode with an account number, there is no way to identify the episode, as there is no account number or admission and discharge dates attached to it.

Field Explanations

1. VOLUME (DISPLAY ONLY)
This field displays the current volume number for this chart. The volume number cannot be edited on this screen.

2. EPISODE (DISPLAY ONLY)
This field displays the current episode number for this volume for this chart. This episode number cannot be edited on this screen.

3. ACCOUNT NUMBER (2-N-R)
To enter an account number, select one of the visits found in the MPI that is windowed into the lower portion of this screen. If you need to add an account number that is not listed, you need to first add the account to the MPI via the Revise MPI function (i.e., you cannot add an account number free-form, it must be selected from the list). If you select an account number that has already been assigned to an episode, this message displays:

> *Error: Account already assigned!*

You can then select another account number.

4. COMMENTS (30-AN-O)
This is a free-form optional comment field that is associated with this visit. You can enter up to 30 characters for the comment. The episode comment entered here displays on the Inquiry screen for Chart Tracking.

5. PATIENT TYPE (DISPLAY ONLY)
This field displays the patient type associated with the account number that was selected. The system completes this field when the account is selected. This field cannot be edited.

6. ADM/REG DATE (DISPLAY ONLY)
This field displays the admission or registration date associated with the account number that was selected. The system completes this field when the account is selected. This field cannot be edited.

7. DISCHARGE DATE (DISPLAY ONLY)
This field displays the discharge date associated with the account number that was selected. If a discharge date has not yet been entered for this account, this field will be blank until such time that the patient has been discharged. Once the discharge occurs, the discharge date will appear here and throughout the Chart Tracking functions. The system completes this field when the account is selected. This field cannot be edited.

8. LOCATION (4-AN-O)
This is the location where the episode is usually filed when it is not checked out. The location that displays in this field is the Default Chart Location set up in the Chart Management System Parameters, or if you had changed the default location when

creating the volume, the location you entered there displays for the episode. (It is assumed that the episode is located in the same place as the volume; however, if necessary these can be different). You can leave the default location that displays or enter a new location by entering the chart location code if you know it, or press hyphen (-) followed by ENTER to display the Chart Location Code table for selection. If you do not want to enter a location code, enter the field number and press ENTER. This leaves the field blank.

NOTE: If you change the default location on the Episode level, the system does not go back and change the location at the Volume level; thus, you have different locations on the Volume level than on the Episode level.

After you accept the screen, this message displays:

Episode created!

This message displays briefly, then this prompt displays:

Print Account Number Bar Code label? (Y/N) [N]--

This prompt applies to the printing of account number bar-code labels, and is pertinent to those facilities utilizing bar coding in Chart Tracking. If you do not use bar coding at your facility, press ENTER to accept the default of **N** for No, and you can proceed with adding episodes.

If your facility is utilizing bar coding, and you enter **Y** for Yes and press ENTER, an Account Number Bar-Code label prints at the INTERMEC printer. For additional information regarding Bar Coding, see Chapter 3 - BAR-CODE APPLICATION.

Whether you print or do not print an Account Number Bar-Code label, once you respond to the previous prompt, this prompt displays:

Another? (Y/N) [N]--

If you enter **Y** for Yes, you are indicating that **y**ou want to add another episode to this volume. To add another episode, enter **Y** and press ENTER, and the Episode Maintenance screen redisplays. Follow the instructions described above for completing this screen.

If you do not want to add another episode to this volume for this patient, press ENTER to accept the default of **N** for No, and you are returned to the MPI patient lookup screen for selection of another patient.

If you press ENTER while on the MPI patient lookup screen, you are returned to the Folder Functions menu.

EDITING A CHART IN CHART TRACKING

If you need to edit a chart that already exists in Chart Tracking, first determine what it is that needs to be edited, as this indicates which option you should select. The following guide is to assist you in determining which option should be used for what purposes:

- To add or delete a volume, use the Volume Maintenance option. However, you must first delete any episodes associated with the volume utilizing the Episode Maintenance option.

- To add or delete an episode, use the Episode Maintenance option

- To update the location of a volume, use the Volume Maintenance option

- To update the location of an episode, use the Episode Maintenance option

- To update the location of a chart, use the Chart Maintenance option

- To move an episode from one volume to another, first use the Episode Maintenance option to delete the episode from one volume, then use Episode Maintenance to add the episode to the other volume. If the other volume does not yet exist, create it using the Volume Maintenance option, then add the episode to it.

If you select the Chart Maintenance option to edit a chart, you have the ability to edit the location of the chart and the current volume number. After you select this option, you are prompted to select a patient via the MPI patient lookup screen. After you select a patient, this screen is displayed:

```
                  General Hospital Chart Maintenance Processor
                                         Tue Oct 24, 1989 01:29 pm
   Unit Number    Name                      Sex   Birthdate   Corp Number   Exp
   0000104584     DOE,JOHN Q                 M    06/06/56    00002765
    1 Location              2 Current Volume
      MED REC              2






 







   Enter field number or '/' starting field number--

```

For field explanations on this screen, refer to the previous discussion on adding a chart. If you make any changes to this screen, and accept these changes, this message displays:

Chart Updated!

NOTE: Updating the location on the chart level does not update the location on the volume and episode level.

The message displays briefly, then you are returned to the MPI patient lookup screen for selection of another patient. If you do not wish to select another patient for Chart Maintenance, press ENTER to return to the Folder Functions menu.

Volume Maintenance

When you select the Volume Maintenance option, you have the ability to edit the location and current episode number of a volume, add a volume or delete a volume. After you select this option, you are prompted to select a patient via the MPI patient lookup screen. After you select a patient, this screen is displayed:

```
             General Hospital Volume Maintenance Processor
                                       Tue Oct 24, 1989 01:29 pm
Unit Number       Name                    Sex   Birthdate  Corp Number  Exp
0000104584        DOE,JOHN Q               M    06/06/56   00002765

       Volume    Location         Episode-Acct Number List         Page:01
( 1)      1      MED STAFF         1-8609800012   2-8610022210   3-8612300010
                 4-4105206301   5-3210321032

( 2)     1B      MED REC           1-1010101010   2-1111111111   3-2222222222
                 4-3333333333

( 3)      2                        1-4444444444   2-5555555555   3-6666666666
                 4-7777777777   5-8888888888   6-9999999999   7-1212121212




Enter choice or add(A)--

```

This screen displays the volume number, the volume location, the episode number and account number associated with the episode. You can select a vdume number to edit or enter an A to add a volume.

NOTE: Only three lines of accounts are displayed for each volume. To view all accounts associated with a volume, use the Episode Maintenance option.

EDITING/DELETING A VOLUME

To edit a volume, enter the option number corresponding to the volume to be edited, and press ENTER. This screen displays:

```
              General Hospital Volume Maintenance Processor
                                      Tue Oct 24, 1989 01:29 pm
 Unit Number    Name                    Sex   Birthdate  Corp Number  Exp
 0000104584     DOE,JOHN Q              M     06/06/56   00002765
  1 Location            2 Current Episode
    MED STAFF                5













 Enter field number or '/' starting field number--
```

For field explanations on this screen, refer to the previous discussion on volume when adding a chart. If you make any changes to this screen, and accept these changes, this message displays:

Volume Updated!

NOTE: Updating the location on the volume does not update the location for the episodes in the volume.

The message displays briefly, then you are returned to the MPI patient lookup screen for selection of another patient. If you do not want to select another patient for Volume Maintenance, press ENTER to return to the Folder Functions menu.

If you do not make changes to this screen and press ENTER, the following prompt is displayed, allowing you the option of deleting this volume:

Delete? (N)--

If you do not want to delete this volume, press ENTER or enter **N** for No and press ENTER, and you are returned to the MPI patient lookup screen for selection of another patient. If you do not want to select another patient for Volume Maintenance, press ENTER to return to the Folder Functions menu.

To delete this volume, enter **Y** for Yes and press ENTER. If the volume selected for deletion has account numbers attached, this error message displays:

Error: Account numbers attached! Cannot delete.

In order to delete this volume, first delete the episode(s) via the Episode Maintenance option, then delete the volume via the Volume Maintenance option.

If the volume selected for deletion does not have any account number attached, the volume is deleted, and this message displays:

Deletion complete!

The message displays briefly, then you are returned to the MPI patient lookup screen for selection of another patient. If you do not want to select another patient for Volume Maintenance, press ENTER to return to the Folder Functions menu.

ADDING A VOLUME

To add a volume to a chart, select the Volume Maintenance option. Once the option is selected, you are prompted to select a patient via the MPI patient lookup screen. Once the patient is selected, this screen displays:

```
              General Hospital Volume Maintenance Processor
                                        Tue Oct 24, 1989 01:35 pm
Unit Number     Name                   Sex    Birthdate  Corp Number   Exp
0000104584      DOE,JOHN Q              M      06/06/56   00002765

         Volume   Location            Episode-Acct Number List         Page:01
  ( 1)      1     MED STAFF             1-8609800012   2-8610022210   3-8612300010
                  4-4105206301   5-3210321032

  ( 2)      1B    MED REC               1-1010101010   2-1111111111   3-2222222222
                  4-3333333333

  ( 3)      2                           1-4444444444   2-5555555555   3-6666666666
                  4-7777777777   5-8888888888   6-9999999999   7-1212121212




Enter choice or add(A)--
```

Enter A to add a volume, and this prompt displays:

Enter Volume to add [2]--

To accept the default number volume as the next volume, press ENTER. If you need to enter a different volume number, enter the number and press ENTER (you can use alpha characters in volumes, such as 1A, 2B, etc., but the alpha character cannot be in the first position, as in A1 or B2). The volume number that is entered here is used by the system as the current volume to add episodes to when the patient is readmitted.

After you enter the volume number, this prompt displays:

Start Volume #2 for DOE,JOHN Q? (Y/N) [Y]--

If you do not accept the default of Y for Yes, and enter **N** for No and press ENTER, the volume is not created and you are returned to the MPI patient lookup for selection of another patient.

If you accept the default of **Y** for Yes, the volume is created and this screen is displayed:

```
                    General Hospital Volume Maintenance Processor
                                              Tue Oct 24, 1989 01:35 pm
    Unit Number    Name                       Sex    Birthdate   Corp Number   Exp
    0000104584     DOE,JOHN Q                  M     06/06/56    00002765
     1 Location           2 Current Episode
       MED STAFF












    Enter beginning Episode Number [1]--
```

Field Explanations

1. LOCATION (4-AN-O)
This is the location where the volume is usually filed when it is not checked out. The location that displays in this field is the Default Chart Location set up in the Chart Management System Parameters, or if you had changed the default location when creating the chart, the location you entered there displays for volume. (It is assumed that the volume is located the same place as the chart; however, if necessary, these can be different). You can leave the default location that displays or enter a new location by entering the code if you know it, or press hyphen (-) followed by ENTER to display the Chart Location Code table for selection. If you do not want to enter a location code, enter the field number and press ENTER. This leaves the field blank.

NOTE: If you change the default location for the volume, the system does not change the location at the Chart level; thus, you have a different location appear on the Chart level then appears on the Volume level.

The location that is displayed in this field for the volume in turn becomes the default location for the episode(s). If you change the location code here, it is changed for the episode(s) that are added.

2. CURRENT EPISODE (3-N-R)
This is the current episode number of this volume. The following prompt displays for this field:

Enter beginning Episode Number [1]--

To enter episode 1 as the beginning episode, press ENTER to accept the default. If you need to enter another episode number, enter the number and press ENTER.

The episode number that is entered here is used by the system as the current episode to add episodes to when the patient is readmitted. For example, if the current volume number is 1 and the current episode number is 1, then when the patient is readmitted the system assigns the same volume number (1), but increments the episode number to 2.

After you accept the previous screen, this prompt displays:

Volume 2 for DOE,JOHN Q created!

The above message displays briefly, then this prompt displays:

Print Unit Number Bar Code label? (Y/N) [N]--

This prompt applies to the printing of bar-code labels, and is pertinent to those facilities utilizing bar coding in Chart Tracking. If you do not use bar coding at your facility, press ENTER to accept the default of **N** for No, and you proceed to creating the episode.

If your facility is utilizing bar coding, and you enter **Y** for Yes and press ENTER, a Unit Number Bar-Code label prints at the INTERMEC printer. For additional information on Bar Coding, see Chapter 3 - BAR-CODE APPLICATION.

Whether you print or do not print a Unit Number Bar-Code label, once you respond to the prompt, this prompt displays:

Create episode 1? (Y/N) [Y]--

If you do not accept the default of Y for Yes, and enter **N** for No and press ENTER, the episode is not created and you are returned to the MPI patient lookup screen for selection of another patient. Since you had accepted the screen to create the volume, this volume now exists in tracking whether you add episodes or not. If you later want to add an episode(s), do so utilizing the Episode Maintenance option discussed later in this section.

If you accept the default of **Y** for Yes to create an episode, this screen displays:

```
                General Hospital Volume Maintenance Processor
                                              Tue Oct 24, 1989 01:36 pm
 Unit Number     Name                        Sex   Birthdate  Corp Number  Exp
 0000104584      DOE,JOHN Q                    M    06/06/56   00002765
  1 Volume   2 Episode   3 Account Number   4 Comments
     3          1          ->
  5 Patient Type                              6 Adm/Reg Date    7 Discharge Date

  8 Location
    MED REC
 No Pt Acct Nmbr    Adm Date Dsch Date Typ Attending Dr.   Service FC  Dsch Status
  1 A89898-98989    07/01/89 07/01/89  ER  LEES,JACK R      MED        HOME OR SELF
  2 A78787-87878    05/01/89 05/01/89  O/P ADAMS,HAROLD R   MED        HOME OR SELF
  3 A67676-76767    03/01/89 03/01/89  ER  COLEMAN,MICHAEL  MED        HOME OR SELF
  4 A56565-65656    01/10/89 01/10/89  ER  LAGERGREN,WILLI  MED        HOME OR SELF
  5 A45454-54545    12/12/88 12/14/88  I/P WOODBURN,ROBERT  MED        HOME OR SELF
  6 A34343-43434    10/10/88 10/12/88  O/P LEES,JACK R      MED        HOME OR SELF
  7 A23232-32323    08/08/88 08/12/88  ER  ADAMS,HAROLD R   MED        HOME OR SELF
  8 A12121-21212    06/06/88 06/10/88  O/P ZELLER,HECTOR C  MED        HOME OR SELF
  9 A99999-99999    04/04/88 04/15/88  I/P WOODBURN,ROBERT  MED        HOME OR SELF
 10 A88888-88888    02/02/88 02/12/88  I/P LEES,JACK R      MED        HOME OR SELF

 Select visit or [next page]--
```

This screen is used to create an episode utilizing the account numbers (i.e., visits) found in the MPI. The upper portion of the screen contains data that identifies the episode. The lower portion of the screen is a window of all visits found in the MPI for this patient. It is from this list of visits that you associate an episode with an account number. If you do not associate an episode with an account number, there is no way to identify the episode, as there is no account number or admission and discharge dates attached to it.

Field Explanations

1. VOLUME (DISPLAY ONLY)
This field displays the current volume number for this chart. The volume number cannot be edited on this screen.

2. EPISODE (DISPLAY ONLY)
This field displays the current episode number for this volume for this chart. This episode number cannot be edited on this screen.

3. ACCOUNT NUMBER (2-N-R)
To enter an account number, select one of the visits found in the MPI that is windowed into the lower portion of this screen. If you need to add an account number that is not listed, you need to add the account to the MPI via the Revise MPI function (i.e., you cannot add an account number free-form, it must be selected from the list). If you select an account number that has already been assigned to an episode, this message displays:

Error: Account already assigned!

You can then select another account number.

4. COMMENTS (30-AN-O)
This is a free-form optional comment field that is associated with this visit. You can enter up to 30 characters for the comment. The episode comment entered here appears on the Inquiry screen for Chart Tracking.

5. PATIENT TYPE (DISPLAY ONLY)
This field displays the patient type associated with the account number that was selected. The system completes this field when the account is selected. This field cannot be edited.

6. ADM/REG DATE (DISPLAY ONLY)
This field displays the admission or registration date associated with the account number that was selected. The system completes this field when the account is selected. This field cannot be edited.

7. DISCHARGE DATE (DISPLAY ONLY)
This field displays the discharge date associated with the account number that was selected. If a discharge date has not yet been entered for this account, this field is blank until such time that thepatient has been discharged. Once the discharge occurs, the discharge date appears here and throughout the Chart Tracking functions. The system completes this field when the account is selected. This field cannot be edited.

8. LOCATION (4-AN-O)
This is the location where the episode is usually filed when it is not checked out. The location that displays in this field is the Default Chart Location set up in the Chart Management System Parameters, or if you had changed the default location when creating the volume, the location you entered there displays for episode. (It is assumed that the episode is located in the same place as the volume; however, if necessary these locations can be different). You can leave the default location that displays or enter a new location by entering the code if you know it, or press hyphen (-) followed by ENTER to display the Chart Location Code table for selection. If you do not want to enter a location code, enter the field and press ENTER. This leaves the field blank.

NOTE: If you change the default location on the Episode level, the system does not go back and change the location at the Volume level; thus, you have a different location appear on the Volume level than appears on the Episode level.

After you accept the screen, this message is displayed briefly:

Episode created!

Then this prompt is displayed:

Print Account Number Bar Code label? (Y/N) [N]--

This prompt applies to the printing of an account number bar-code label, and is pertinent to those facilities utilizing bar coding in Chart Tracking. If you do not use bar coding at your facility, press ENTER to accept the default of **N** for No, and you can proceed with adding episodes.

If your facility is utilizing bar coding, and you press **Y** for Yes followed by ENTER, an Account Number Bar-Code label prints at the INTERMEC printer. For additional information regarding Bar Coding, see Chapter 3 - BAR-CODE APPLICATION.

Whether you print or do not print an Account Number Bar-Code label, once you respond to the previous prompt, this prompt displays:

Another? (Y/N) [N]--

If you enter **Y** for Yes, you are indicating that you want to add another episode to this volume. To add another episode, press **Y** followed by ENTER, and the Episode Maintenance screen redisplays. Follow the instructions described above for completing this screen.

If you do not want to add another episode to this volume, press ENTER to accept the default of **N** for No, and you have the option of adding another volume. If you do not want to add another volume, enter a period (.) and press ENTER to return to the MPI patient lookup screen for selection of another patient. If you want to add another volume, press ENTER to accept the default volume number (or enter another number and press ENTER), and continue the process as previously described.

Episode Maintenance

EDITING/DELETING AN EPISODE

When you select the Episode Maintenance option, you have the ability to edit the location and optional comment fields of an episode, add an episode or delete an episode. After you select this option, you are prompted to select a patient via the MPI patient lookup screen. After you select a patient, this screen displays:

```
              General Hospital Episode Maintenance Processor
                                        Tue Oct 24, 1989 01:37 pm
Unit Number       Name                        Sex   Birthdate  Corp Number  Exp
0000104584        DOE,JOHN Q                    M    06/06/56   00002765
        Volume   Episode    Acct Number    Location                    Page:01
( 1)      1        1        8609800012      MR
( 2)      1        2        8610022210      MR
( 3)      1        3        8612300010      MR
( 4)      1        4        4105206301      MR
( 5)      1        5        3210321032      MR
( 6)     1B        1        1010101010      MR
( 7)     1B        2        1111111111      MR
( 8)     1B        3        2222222222      MR
( 9)     1B        4        3333333333      MR
(10)      2        1        4444444444      MR
(11)      2        2        5555555555      MR
(12)      2        3        6666666666      MR
(13)      2        4        7777777777      MR
(14)      2        5        8888888888      MR
(15)      2        6        9999999999      MR
(16)      2        7        1212121212      MR

Enter choice or add(A)--
                                  next page(/)
```

This screen displays the volume number, the episode number, account number
associated with the episode, and the location of the episode. You can select an
episode number to edit or enter **A** to add an episode.

To edit an episode, enter the option number corresponding to the episode to be edited,
and press ENTER. This screen displays:

```
              General Hospital Episode Maintenance Processor
                                        Tue Oct 24, 1989 01:38 pm
Unit Number       Name                        Sex   Birthdate  Corp Number  Exp
0000104584        DOE,JOHN Q                    M    06/06/56   00002765
 1 Volume    2 Episode    3 Account Number    4 Comments
   1            1            86098-00012         VOL 1, EPISODE 1
 5 Patient Type                              6 Adm/Reg Date    7 Discharge Date
   I/P (Regular Admission)                      02/02/86          02/20/86
 8 Location
->




Enter chart location code or `-` to list--
```

This screen is the same as the one discussed earlier in Volume Maintenance. For field
explanations, please review that portion of this section.

You can edit the fields for optional comment and/or location; all other fields are for display only. If you edit these fields and accept the screen, this message displays:

Episode Updated!

You are then returned to the MPI patient lookup screen to select another patient.

DELETING AN EPISODE

If you do not want to edit the episode and press ENTER, this prompt displays enabling you to delete the episode:

Delete? (N)--

You can delete the episode from the volume by entering **Y** for Yes and pressing ENTER. If, however, the entire chart, volume, or episode is checked out, you cannot delete the episode, and this error message displays:

Error: Episode checked out. Cannot delete.

If the episode is not checked out, but contains deficiencies, the following prompt displays:

Chart contains deficiencies, Continue? (Y/N) [N]--

The default is **N** for No. If you enter **Y** and press ENTER, the following message displays:

Delete Completed!

This message displays briefly, then you are returned to the MPI patient look-up for selection of another patient.

If the episode (or volume the episode is in) is not checked out, or does not contain deficiencies, the episode can be deleted by pressing **Y** for Yes followed by ENTER. When the episode has been deleted, this message displays:

Delete completed!

The episode number and the account number of the deleted episode can be reassigned. If the episode deleted was the only episode in the volume, the volume still exists but does not have any episodes attached to it. You can leave the volume as is, or you can use the Volume Maintenance option to delete the volume.

If you do not want to delete the episode, press ENTER or press **N** for No followed by ENTER, and the episode is not deleted. You are then returned to the MPI patient lookup screen to select another patient.

ADDING AN EPISODE

After you select the Episode Maintenance option and select a patient from the MPI patient lookup screen, this screen displays:

```
              General Hospital Episode Maintenance Processor
                                           Tue Oct 24, 1989 01:39 pm
Unit Number      Name                  Sex    Birthdate  Corp Number  Exp
0000104584       DOE,JOHN Q             M     06/06/56   00002765
       Volume   Episode    Acct Number  Location                      Page:01
( 1)     1         1       8609800012
( 2)     1         2       8610022210
( 3)     1         3       8612300010
( 4)     1         4       4105206301
( 5)     1         5       3210321032
( 6)    1B         1       1010101010
( 7)    1B         2       1111111111
( 8)    1B         3       2222222222
( 9)    1B         4       3333333333
(10)     2         1       4444444444
(11)     2         2       5555555555
(12)     2         3       6666666666
(13)     2         4       7777777777
(14)     2         5       8888888888
(15)     2         6       9999999999
(16)     2         7       1212121212

Enter choice or add(A)--
```

You can add an episode by pressing **A** for add followed by ENTER, and this screen displays:

```
              General Hospital Episode Maintenance Processor
                                           Tue Oct 24, 1989 01:39 pm
Unit Number      Name                  Sex    Birthdate  Corp Number  Exp
0000104584       DOE,JOHN Q             M     06/06/56   00002765
Page:01Volume    Location         Episode-Acct Number List
( 1)     1       MED STAFF          1-8609800012   2-8610022210   3-8612300010
                                    4-4105206301   5-3210321032

( 2)    1B       MED REC            1-1010101010   2-1111111111   3-2222222222
                                    4-3333333333

( 3)     2                          1-4444444444   2-5555555555   3-6666666666
                                    4-7777777777   5-8888888888   6-9999999999   7-1212121212




Enter choice--
```

This screen displays the volume number, the volume location, the episode number and account number associated with the episode. Select the volume number to which an episode is to be added by entering the option number corresponding to the volume and pressing ENTER, and this prompt displays:

Enter Episode [2]--

To accept the default episode number, press ENTER. To enter a different episode number, enter the number and press ENTER. You can enter up to 999 episodes per volume.

Once the episode number is entered, this screen displays:

```
              General Hospital Episode Maintenance Processor
                                        Tue Oct 24, 1989 01:39 pm
 Unit Number     Name                      Sex   Birthdate  Corp Number   Exp
 0000104584      DOE,JOHN Q                 M     06/06/56   00002765
  1 Volume   2 Episode    3 Account Number    4 Comments
     3           2           ->
  5 Patient Type                           6 Adm/Reg Date    7 Discharge Date

  8 Location
    MED REC
 No Pt Acct Nmbr    Adm Date Dsch Date Typ Attending Dr.   Service FC  Dsch Status
  1 A89898-98989    07/01/89 07/01/89  ER  LEES,JACK R       MED        HOME OR SELF
  2 A78787-87878    05/01/89 05/01/89  O/P ADAMS,HAROLD R    MED        HOME OR SELF
  3 A67676-76767    03/01/89 03/01/89  ER  COLEMAN,MICHAEL   MED        HOME OR SELF
  4 A56565-65656    01/10/89 01/10/89  ER  LAGERGREN,WILLI   MED        HOME OR SELF
  5 A45454-54545    12/12/88 12/14/88  I/P WOODBURN,ROBERT   MED        HOME OR SELF
  6 A34343-43434    10/10/88 10/12/88  O/P LEES,JACK R       MED        HOME OR SELF
  7 A23232-32323    08/08/88 08/12/88  ER  ADAMS,HAROLD R    MED        HOME OR SELF
  8 A12121-21212    06/06/88 06/10/88  O/P ZELLER,HECTOR C   MED        HOME OR SELF
  9 A99999-99999    04/04/88 04/15/88  I/P WOODBURN,ROBERT   MED        HOME OR SELF
 10 A88888-88888    02/02/88 02/12/88  I/P LEES,JACK R       MED        HOME OR SELF

 Select visit or [next page]--
```

This screen is used to create an episode utilizing the account numbers (i.e., visits) found in the MPI. The upper portion of the screen contains data that identifies the episode. The lower portion of the screen is a window of all visits found in the MPI for this patient. It is from this list of visits that you associate an episode with an account number. If you do not associate an episode with an account number, there is no way to identify the episode, as there is no account number or admission and discharge dates attached to it.

Field Explanations

1. VOLUME (DISPLAY ONLY)
This field displays the current volume number for this chart. The volume number cannot be edited on this screen.

2. EPISODE (DISPLAY ONLY)
This field displays the current episode number for this volume for this chart. This episode number cannot be edited on this screen.

3. ACCOUNT NUMBER (2-N-R)
To enter an account number, select one of the visits found in the MPI that is windowed into the lower portion of this screen. If you need to add an account number that is not listed, you need to add the account to the MPI via the Revise MPI function (i.e., you cannot add an account number free-form, it must be selected from the list). If you

select an account number that has already been assigned, the following message is displayed:

Error: Account already assigned!

You can then select another account number.

4. COMMENTS (30-AN-O)
This is a free-form optional comment field that is associated with this visit. You can enter up to 30 characters for the comment. The episode comment entered here appears on the Inquiry screen for Chart Tracking.

5. PATIENT TYPE (DISPLAY ONLY)
This field displays the patient type associated with the account number that was selected. The system completes this field when the account is selected. This field cannot be edited.

6. ADM/REG DATE (DISPLAY ONLY)
This field displays the admission date associated with the account number that was selected. The system completes this field when the account is selected. This field cannot be edited.

7. DISCHARGE DATE (DISPLAY ONLY)
This field displays the discharge date associated with the account number that was selected. If a discharge date has not yet been entered for this account, this field is blank until such time that thepatient has been discharged. Once the discharge occurs, the discharge date appears here and throughout the Chart Tracking functions. The system completes this field when the account is selected. This field cannot be edited.

8. LOCATION (4-AN-O)
This is the location where the episode is usually filed when it is not checked out. The location that displays in this field when adding an episode to an existing volume is the location that was entered for the volume. (It is assumed that the episode is located the same place as the volume; however, if necessary these locations can be different). You can leave the location that displays or enter a new location by entering the code if you know it, or press hyphen (-) followed by ENTER to display the Chart Location Code table for selection. If you do not want to enter a location code, enter the field and press ENTER. This leaves the field blank.

NOTE: If you change the default location on the Episode level, the system does not go back and change the location at the Volume level; thus, a different location appears on the Volume level than appears on the Episode level.

After you accept the screen, this message displays:

Episode created!

The message displays briefly, then this prompt displays:

Print Account Number Bar Code label? (Y/N) [N]--

This applies to the printing of an account number bar-code label, and is pertinent to those facilities utilizing bar coding in Chart Tracking. If you do not use bar coding at your facility, press ENTER to accept the default of **N** for No, and you can proceed with adding episodes.

If your facility is utilizing bar coding, and you press **Y** for Yes followed by ENTER, an Account Number Bar-Code label prints at the bar-code printer. For additional information regarding bar coding, see Chapter 3 - BAR-CODE APPLICATION.

Whether you print or do not print an Account Number Bar-Code label, once you respond to the prompt, this prompt displays:

Another? (Y/N) [N]--

If you enter **Y** for Yes, you are indicating that you want to add another episode to this volume. To add another episode, press **Y** followed by ENTER, and the Episode Maintenance screen redisplays. Follow the instructions described above for completing this screen.

If you do not want to add another episode to this volume, press ENTER to accept the default of **N** for No, and you are returned to the MPI patient lookup screen for selection of another patient.

If you press ENTER while on the MPI patient lookup screen, you are returned to the Folder Functions menu.

Purge Chart

When you select the Purge Chart option, you have the ability to purge a chart from Chart Tracking. This does not purge the chart from the MPI. This function is used to completely remove a chart from Chart Tracking, including all associated volumes and episodes. A chart can be added back to tracking by using the Chart Maintenance option.

To purge a chart from tracking, select the Purge Chart option. The MPI patient lookup screen is displayed, allowing selection of the patient whose chart is to be purged.

If the patient has checked out charts, the chart cannot be purged, and this message displays:

Error: Cannot purge, chart(s) checked out!

The message displays briefly, then returns to the MPI patient lookup screen for selection of another patient. If you do not select another patient and press ENTER, you are returned to the Folder Functions menu.

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If the selected patient has deficiencies, and Chart Tracking and Chart Deficiency are linked (in the Chart Management System Parameters), the chart cannot be purged and this message displays:

Error: Chart has deficiencies - Cannot purge!

The message displays briefly, then returns to the MPI patient lookup screen for selection of another patient. If you do not select another patient and press ENTER, you are returned to the Folder Functions menu.

If the selected patient's chart is not checked out or does not have deficiencies, this message displays:

Are you sure you want to purge DOE,JOHN Q's entire chart? (Y/N) [N]--

If you do not want to purge the chart, press ENTER to accept the default of **N** for No. You are returned to the MPI patient lookup screen for selection of another patient. If you do not want to select another patient, press ENTER to return to the Folder Functions menu.

To purge the chart, press **Y** for Yes followed by ENTER. The chart will be purged and this message displays:

Purge Complete!

The message displays briefly, then returns to the MPI patient lookup screen for selection of another patient. Select another patient, or press ENTER to return to the Folder Functions menu.

LETTER CLOSE AND SIGNATURE BLOCK

This option displays on the Chart Tracking menu. The Letter Close and Signature Block is used for the Overdue Notice.

You can enter up to six lines of text, 40 characters each for the close and signature.

To create or edit the close and signature, select the option from the Chart Tracking menu. This screen displays:

```
         General Hospital Letter Close and Signature Block Processor


            1         2         3         4
   12345678901234567890123456789012345678901234567890
01|We look forward to seeing you.         |
02|                                       |
03|                                       |
04|                                       |
05|Dale Johnson, RRA                      |
06|Chief, Medical Information Services    |




   F1          F2          F3      F4     F5          F6          F7     F10
   Delete Line Insert Line Center  Exit   Store Line  Restore Line Pack   Help
```

Complete the text of the close and signature block utilizing the assigned function keys as instructed on the bottom of the screen. When you have completed the text, press F4 and this prompt displays:

Accept? (Y/N)--

To accept the text, enter **Y** for Yes (do not press ENTER), and the update is filed. You are then returned to the menu from which this option was selected.

If you do not want to accept the updates, enter **N** for No (do not press ENTER). You are then returned to the screen to make additional changes. Enter **Y** to accept the screen and return to the menu from which this option was selected.

OVERDUE NOTICE MAINTENANCE

The Overdue Notice is sent to borrowers reminding them of overdue charts that have not been returned. This function is used to create or edit the textual content of the overdue notice letter.

Select this option from the Chart Tracking menu, and this screen displays:

```
              General Hospital Overdue Notice Maintenance Processor


          1         2         3         4         5         6         7
    12345678901234567890123456789012345678901234567890123456789012345
 01|The following charts were checked out to you, for which you are responsible|
 02|for returning by the designated due back date. Please return these to the |
 03|Medical Record Department as soon as possible.  Your cooperation in this   |
 04|matter is most appreciated.                                               |
 05|                                                                          |
 06|->                                                                        |
 07|                                                                          |
 08|                                                                          |
 09|                                                                          |
 10|                                                                          |
 11|                                                                          |
 12|                                                                          |
 13|                                                                          |
 14|                                                                          |
 15|                                                                          |
 16|                                                                          |
    F1          F2          F3      F4      F5          F6          F7    F10
    Delete Line  Insert Line  Center  Exit   Store Line  Restore Line  Pack  Help
```

Complete the text of the letter using the assigned function keys as instructed on the bottom of the screen. You can enter up to 16 lines of text, 75 characters per line. Do not include a letter and signature block as there is a separate option for this.

In order for the overdue notices to print with some space between the text of the letter and the listing of overdue charts, place an arrow (->) at the line where the chart listing should begin. If you use all 16 lines of text for the body of the letter, the listing of overdue charts will begin on line 17.

Once you have completed creating or editing the text, press F4 and this prompt displays:

   Accept? (Y/N)--

To accept the text, enter **Y** for Yes (do not press ENTER) and this message displays:

   Filed!

The message displays briefly, then you are returned to the Chart Tracking menu.

If you do not accept the screen and enter **N** for No (do not press ENTER) you are returned to the text to make additional changes, if necessary. Press F4again to accept the screen. You must accept the screen prior to returning to the Chart Tracking menu.

BORROWER MAINTENANCE

The Borrower Maintenance option is used to maintain the borrower file. Information found in the borrower file becomes the default information when completing such transactions as chart request, chart check out, or chart transfer. Borrowers can be physicians, department, equipment, areas, or a person.

To establish a physician in the borrower file, complete the following steps:

1. Set up the physician in the STAR Patient Care Physician table

2. Set up the physician in the Resource Master table

3. Set up the physician in Borrower Maintenance in Chart Tracking

To establish a department, room or other borrower in the borrower file (these are all referred to as departments), complete the following steps:

1. Set up the department in the Resource Department code table

2. Set up the department in Borrower Maintenance in Chart Tracking

It is necessary to set up a physician or department in the manner outlined above in order to eliminate future need for duplication and to enable the Chart Management and Patient Scheduling modules to be compatible. Even if your facility does not utilize the Patient Scheduling Module, the Resource Master table and the Department Resource table are included in the installation of Chart Management. For more information on the Resource Department table and Resource Master table, refer to the *STAR Patient Care Reference Guide, Tables Volume.*

By first setting up a physician in the STAR Patient Care Physician table, future duplication of work is eliminated because changes made to the information in the Physician table automatically updates both the Resource Master table and the Borrower file. This updated information includes the physician's name, address, and phone number.

If the physician is first set up in the Resource Master table, and then later set up in the STAR Patient Care Physician table, updates made to the Physician table do *not* automatically update the Resource Master table or the Borrower file. However, updates made to the Resource Master table do update the Borrower file.

If your facility uses the Patient Scheduling Module and there are physicians or resources who you do not want to add to the Physician table, you can set them up in the Resource Master table or the Resource Department table, then in the Borrower file (without having to first set them up in the Physician table). Any updates to the Resource Master table update the Borrower file.

Although it is not always necessary to add the physician resource to the Physician table, **it is necessary to add them to the Resource Master table or Resource Department table in order for the resource to be available in Borrower Maintenance**. To be added to the Borrower file, a resource must be entered in either the Resource Master table (physician resource) or the Resource Department table (department resource).

You have the option of determining which physicians and departments will be available for use in both the Chart Management and Patient Scheduling modules. A field has been added to both these tables to control whether the physician or department is used in Chart Management, Patient Scheduling, or both. For additional information refer to the Resource Master table and the Resource Department table in the *STAR Patient Care Reference Guide, Tables Volume.*

Due to the structure of the borrower file and its reliance on the Physician and Resource tables, **it is required that you delete a borrower in the opposite order that it is added**. To add a borrower in Chart Tracking, you must first add the borrower as a physician and/or resource. To delete a borrower in Chart Tracking, you must first delete the borrower, then delete the resource. If you delete the resource first, the name index is eliminated and the system cannot find the name in the borrower file to delete.

After you select the Borrower Maintenance option from the Chart Tracking Input Options menu, this message displays:

> *Enter borrower code, '-' for list or add (A)--*

Select one of the following options:

- Enter the borrower's code if you know it

- Press hyphen (**-**) followed by ENTER to display the Borrower table

- Press **A** followed by ENTER to add a borrower to the Borrower table

If you enter a code that does not currently exist in the Borrower table, this message displays:

> *Error: Borrower Code not on file!*

NOTE: Although the code you selected may be in the STAR Patient Care Physician table, the Resource Master table, or the Resource Department table, it must first be added to the Borrower file before it can be accessed.

If you enter a hyphen (-) followed by ENTER, the list of current borrowers (both physicians and departments) displays.

If you enter **A** to add a borrower, this message displays:

Do you wish to add borrower information? (Y/N) [Y]--

If you do not want to add borrower information or a borrower to the file, press **N** for No followed by ENTER, and you return to the previous prompt.

If you wish to add borrower information or a borrower, press ENTER to accept the default of **Y** for Yes, and this prompt is displayed:

Resource (R) or Department (D) information [R]--

If you press ENTER to accept the default of **R** for resource, the online list of resources set up in the Resource Master table (usually physicians) displays. If you want to add a department borrower, press **D** followed by ENTER to display the resources set up in the Resource Department table.

Regardless of which entry option you use, once a borrower is selected (either one that currently exists in the borrower file, or one that is added), this screen is displayed:

```
              General Hospital Borrower Maintenance Processor
                                          Wed Apr 08, 1998 05:11 pm

 1 Code     2 Name
   PSY       PSYCHIATRIC CLINIC (ALL)
 3 Office Address 1           4 Office Address 2         5 Office Phone
   890 HOSPITAL DRIVE-X         ADDRESS TWO                (404)567-8999
 6 City                       7 State        8 ZIP Code
   ATLANTA                       GA             11122-2000
 9 Person Responsible            10 Requester
   GEORGE STEPHENSON                Dolly Parker
11 Check Out Reason              12 Chart Location      13 Days Due Back
   ADM REVIEW                       ABSTRACT.X              10
14 Borrowing Status     15 Limit     16 Date Needed      17 Time Needed
   Active                   5           Req.DT+1 day        07:00am




 Enter field number or '/' starting field number--

```

This screen contains information specific to the selected borrower. Fields 1-8 are completed by the system using information entered in either the STAR Patient Care Physician table, the Resource Master table, or the Resource Department table. This information cannot be edited through the Borrower Maintenance option.

The remaining fields (9-17) contain information specific to Chart Tracking and are edited through the Borrower Maintenance option. The Chart Tracking fields (9-17) are not included in the STAR Patient Care Physician table, the Resource Master table, or the Resource Department table.

If you do not want to update any of the fields on this screen, but want to delete the borrower from the borrower file, press ENTER. The system displays the following prompt:

Delete? (N)--

For details, refer to the subsection Deleting a Borrower from the Borrower File.

Field Explanations

1. CODE (DISPLAY ONLY)
This field displays the borrower code as it was set up in the STAR Patient Care Physician table, the Resource Master table, or the Resource Department table. This field cannot be edited.

2. NAME (DISPLAY ONLY)
This field displays the borrower's name as it was set up in the STAR Patient Care Physician table, Resource Master table or the Resource Department table. This field cannot be edited.

NOTE: The name is always displayed, printed, and stored in uppercase.

3. OFFICE ADDRESS 1 (DISPLAY ONLY)
This field displays the first line of the borrower's address as it was set up in the STAR Patient Care Physician table, the Resource Master table or the Resource Department table. This field cannot be edited.

4. OFFICE ADDRESS 2 (DISPLAY ONLY)
This field displays the second line of the borrower's address as it was set up in the STAR Patient Care Physician table, the Resource Master table or the Resource Department table. This field cannot be edited.

5. OFFICE PHONE (DISPLAY ONLY)
This field displays the borrower's office phone number as it was set up in the STAR Patient Care Physician table, the Resource Master table or the Resource Department table. This field cannot be edited.

6. CITY (DISPLAY ONLY)
This field displays the city where the borrower's office is located as it was set up in the STAR Patient Care Physician table, the Resource Master table or the Resource Department table. This field cannot be edited.

7. STATE (DISPLAY ONLY)
This field displays the state where the borrower's office is located as it was set up in the STAR Patient Care Physician table, the Resource Master table or the Resource Department table. This field cannot be edited.

8. ZIP CODE (DISPLAY ONLY)
This field displays the ZIP code of the borrower's office as it was set up in the STAR Patient Care Physician table, the Resource Master table or the Resource Department table. This field cannot be edited.

9. PERSON RESPONSIBLE (28-AN-R)

This field is used to indicate the person who is responsible for charts that are borrowed. This person may or may not be the same as the borrower. For example, if the borrower is the Physical Therapy department, the person responsible may be Jane Doe, Secretary. The name that is entered here becomes the default person responsible for this borrower.

It is possible to edit this field via the Borrower Maintenance option, or on the borrower information screen as it appears in the various options in Chart Tracking. Edits made via the Borrower Maintenance option apply to all future chart activity. Edits made at the time of a transaction apply to that particular chart. To edit this information, enter up to 20 characters to indicate the person responsible.

10. REQUESTER (25-AN-O)

This field identifies the person making a request on behalf of a borrower, as the requester may differ from the borrower. To enter a requester, enter up to 25 characters to indicate the person responsible.

NOTE: This information does not display when adding a request in the character-based version of Chart Management.

11. CHECK OUT REASON (33-AN-O)

This field is used to indicate the reason this borrower is checking out or requesting charts. The check out reason entered here becomes the default reason for this borrower. It is possible to edit this field via the Borrower Maintenance option, or on the borrower information screen as it appears in the various options in Chart Tracking. Edits made via the Borrower Maintenance option apply to all future chart activity. Edits made at the time of a transaction apply to that transaction.

To edit this field, enter the check out reason code if you know it, or press hyphen (-) followed by ENTER to display the Chart Request Reason code table for selection, or enter a hyphen (-) and up to 33 characters followed by pressing ENTER to enter a free-form reason. This is not a required field.

NOTE: In GUI Chart Tracking, the reason associated with the borrower can affect the priority of requests.

12. CHART LOCATION (4-AN-R)

This field indicates the location to where this borrower is most likely to take checked out charts. The location that is entered here becomes the default location for this borrower. It is possible to edit this field via the Borrower Maintenance option, or on the borrower information screen as it appears in the various options in Chart Tracking. Edits made via the Borrower Maintenance option apply to all future chart activity. Edits made at the time of a transaction apply to that particular chart. To edit this field, enter the chart location code if you know it, or press hyphen (-) followed by ENTER to display the Chart Location code table for selection. This field is required.

NOTE: If you are using the GUI version of Chart Management and you associate a location defined as a home location, then charts moved to this borrower will not display on the Charts Out Report.

13. DAYS DUE BACK (4-N-O)

This field indicates the number of days from the date of check out or transfer that the chart is due back. The number of days entered here is used in calculating all due back dates for this borrower. For example, if this borrower has Days Due Back of 10, then for each chart checked out or transferred to this borrower, the chart is due back 10 days from the date of check out or transfer. If the chart is not returned within the specified days, the chart is considered overdue.

It is possible to edit this field via the Borrower Maintenance option, or the Due Date can be edited on an individual transaction. Edits made via the Borrower Maintenance option apply to all future chart activity. This is not a required field. However, if no days are entered here, the system sets the due date as the current date.

14. BORROWING STATUS (1-A-R)

This field indicates whether this borrower has an active or inactive borrowing status. If you try to check out or request charts for a borrower that is inactive, you receive a message as a reminder that the borrower is inactive. You can continue to check out, transfer or request charts on an inactive borrower, but you can only edit this field via the Borrower Maintenance option. To edit this field, accept the default **A** for Active by pressing ENTER, or press **I** for Inactive followed by ENTER.

15. LIMIT (6-N-O)

This field indicates the total number of records a borrower can have checked out at any given time. The number that is entered here becomes the default limit for this borrower. For example, if this borrower has a limit of five, then they can have only five charts at any given time. If you try to check out, transfer, or request a sixth chart, a message displays as a reminder that this borrower has reached the borrowing limit.

You can allow additional charts to be checked out. However, it is only possible to edit this field through the Borrower Maintenance option. To edit this field, enter up to six digits to indicate the borrowing limit for this borrower. If you do not enter a borrowing limit, the system assumes this borrower has a limit of zero.

16. DATE NEEDED (3-N-R)

This field is used in the Chart Request functions to calculate the date a chart is needed for this borrower. The date needed is calculated at the time a request is filed for this borrower, based on the request date plus the number of days in this field. You can update the Date Needed field whenever a request is filed or updated.

Enter a value between 0 and 999, or press ENTER to accept the default of one.

17. TIME NEEDED (TIME-R)

This field is used in the Chart Request functions to determine the time a chart is needed for this borrower. The time entered here is automatically entered in the Time

Needed field of the request, when a request is filed for this borrower. You can update the Date Needed field whenever a request is filed or updated.

Enter a valid time, or press ENTER to accept the default of 7:00am.

When you have completed all fields on this screen, the system displays this prompt:

Accept this screen? (Y/N/D) [Y]--

You have the following entry options:

- Enter **Y** for Yes to accept the screen. The system displays the following message:

    Information Filed

    This message displays briefly, then the original prompt to enter a code, enter a hyphen, or add a code is redisplayed.

- Enter **N** for No to return to the screen for further revisions.

- Enter **D** to delete the borrower from the borrower file. Refer to the following subsection for details.

Deleting a Borrower from the Borrower File

If you enter **Y** for Yes to delete the borrower (when you have made no changes to the screen), or **D** to delete the borrower (when you have made changes to the screen), the system displays the following prompt:

Enter delete(D) from file or file(F) as deleted [F]--

This prompt gives you two options:

- Enter **F** to file the borrower as deleted. The system displays the following message:

    Checking for chart activity, please wait!

    If there are no charts checked out to this borrower, the system displays this message next:

    Information Filed as Deleted

    The borrower is no longer displayed in any borrower table, but the borrower code can still be entered in the borrower selection prompt in any of the Chart Tracking functions. If, in one of these functions, you enter a code that is filed as deleted, the system displays this prompt:

Borrower code XX filed as deleted, Continue (Y/N)--

where XX is the borrower code.

-   Enter **Y** for Yes to continue processing.

-   Enter **N** for No. The system redisplays the prompt for you to enter another borrower code.

If there are charts checked out to the borrower, the system displays this message:

Warning borrower has charts on loan or request!

This message is displayed briefly, and then the following prompt is displayed:

File as deleted? (Y/N) [N]--

-   Enter **Y** for Yes to file the code as deleted.

-   Enter **N** for No. The system redisplays the prompt to enter a code, enter a hyphen to display the table, or add a code.

•   Enter **D** to delete the borrower from the borrower file altogether. The system displays the following message:

Checking for chart activity, please wait!

If there are no charts checked out to this borrower, the system displays the following message next:

Deleted!

The borrower cannot be accessed by any method, and the code can be reused for a new borrower entry.

If there are charts checked out to the borrower, the system displays this error message:

Cannot delete borrower with charts on loan or request!

This message is displayed briefly, then the following prompt is displayed

File as deleted? (Y/N) [N]--

You have two new options:

- Enter **Y** for Yes to file the code as deleted. This option prevents the borrower from being displayed in any borrower table, but the borrower code can still be entered in the borrower selection prompt in any of the Chart Tracking functions. If, in one of these functions, you enter a code that is filed as deleted, the system displays this prompt:

  Borrower code XX filed as deleted, Continue (Y/N)--

  where XX is the borrower code.

  - Enter **Y** for Yes to continue processing.

  - Enter **N** for No. The system redisplays the prompt for you to enter another borrower code.

- Enter **N** for No. The system redisplays the prompt to enter a code, enter a hyphen to display the table, or add a code.

Accepting the Borrower Information Screen

After you accept the borrower information screen, the default information is filed. Changes made to the borrower information screen affect future transactions, but do not change previous transactions. For example, if you change the default location for a borrower today, check outs done prior to today contain the previous location, and check outs done after the change contain the new default location. Remember, edits made to default information via the Borrower Maintenance option affect all Chart Tracking transactions, whereas edits made at the time of an individual transaction only affect that one.

At this point you can continuing adding or editing borrowers and information, or press ENTER to return to the Chart Tracking menu.

PARAMETER MAINTENANCE

The Chart Tracking and Chart Deficiency menus both contain the Parameter Maintenance function. This item is identical on both menus, and changes to the parameters made via Chart Tracking change the parameters accessed via Chart Deficiency and vice versa. When you select this function, the following screen is displayed:

```
                     General Hospital Parameter Maintenance Processor
                                            Sun Jul 24, 2005 01:46 pm
Parameter Maintenance Input Options


          Option No.  Option
          ---------------------------------------
              1       Patient Type Parameters
              2       Chart Management Parameters
              3       Medical Records Physician Parameters












    Enter option number--
```

Patient Type Parameters

The patient type parameters are used to set flags that control which patient types (already established in the STAR Patient Care Patient Type table) are automatically set up in Chart Tracking and/or Chart Deficiency.

If you select the Patient Type Parameters option, the following prompt displays:

Do you wish to revise patient type parameters? (Y/N) [N]--

To revise a patient type parameter, enter **Y** for Yes. This screen displays listing all patient types with established parameters on file.

```
                    General Hospital Patient Type Parameters Processor

 Page:01                    Patient Type Parameters on File     ##=Current Choices
 ( 1) ER  - Emergency Room
 ( 2) I/P - Regular Admission
 ( 3) O/P - Regular Outpatient
 ( 4) OB  - Obstetric Admission
 ( 5) OPO - Outpatient Observation
 ( 6) SDS - Same Day Surgery
 ( 7) SER - Series





 Enter choices (e.g. 1,7,5-9) or '-' choices to remove--
                            end selection(NL)

```

Enter your choice(s) of patient type(s) to revise, press ENTER and this screen displays:

```
             General Hospital Patient Type Parameters Processor
                                          Mon Jul 6, 1998 10:38 am

                                       Patient Type: I/P-Regular Inpatient Admi
 1 Tracking Indicator                  2 Deficiency Indicator
   Yes                                    Yes
 3 Charts Req Analysis Purge Days      4 Home Location (GUI)
   10                                     I/P HME LO
 5 Print Outguide
   No






 Enter field number or '/' starting field number--

```

Field Explanations

1. TRACKING INDICATOR (1-A-R)
This field is used to indicate whether the system should automatically set up this patient type in Chart Tracking. By setting up the patient type, the system creates a chart, volume and episode for patients with this patient type. If you do not want this patient type automatically added to Chart Tracking, enter **N** for No.

NOTE: Patient type changes do not update the creation of charts in Chart Tracking.

To set this patient type in Chart Tracking, enter **Y** for Yes. For additional information regarding creation of a chart in Chart Tracking, refer to the Folder Functions section in this volume of the Reference Guide.

2. DEFICIENCY INDICATOR (1-A-R)
This field is used to indicate whether the system should automatically set up this patient type in Chart Deficiency. By setting up the patient type, the system allows deficiencies to be added to this record. If you do not want this patient type automatically added to Chart Deficiency, enter **N** for No. To set up this patient type in Chart Deficiency, enter **Y** for Yes.

If you indicate you do not want to add deficiencies to this patient type, you still have the option to override this parameter when you access the Add/Edit Deficiency function. The override will apply only to the selected patient. All other patients with this indicator set to No will remain unchanged.

3. CHARTS REQ ANALYSIS PURGE DAYS
This parameter enables you to indicate, by patient type, when a patient should be automatically removed from the Charts Requiring Analysis Report. This prevents the report from becoming too large and unmanageable. The Charts Requiring Analysis report assists the Medical Record department in identifying charts that may have been overlooked in the analysis process. When you access this field, the following prompt displays:

> *Enter # of days after disch to purge from report, or (D)on't add [D]--*

Enter a number between 1 and 999 to indicate the number of days a patient will remain on the report before being automatically removed. Press ENTER to accept the default of Don't Add, in which case these patients will never display on the Charts Requiring Analysis Report.

NOTE: If a patient type has the Chart Deficiency flag set to No, those patients do not appear on the Charts Requiring Analysis Report at all.

4. HOME LOCATION (GUI)
This parameter only applies to the GUI version of Chart Management. It identifies the home location for this patient type. The system uses the defined home location to provide an initial location for this visit when a patient with this patient type is admitted. The account retains this home location until it is moved. When you access this field, the following prompt displays:

> *Enter home location code or `-` to list--*

Use one of the following entry methods:

• Enter the Chart Location code and press ENTER.

> **NOTE:** If you enter a location code that has not been defined as a home location, the system displays an error message.

• Enter a portion of the Chart Location description followed by a hyphen (-), and press ENTER. All matching location codes defined as home locations in the Chart Locations code table display. Select from the listing and press ENTER.

• Enter a hyphen (-) and press ENTER to display all location codes defined as home locations in the Chart Locations code table. Select from the listing and press ENTER.

5. PRINT OUTGUIDE

This parameter indicates whether an outguide should print when a chart containing an account with this patient type is moved out of a home location. Even is the chart is requested as a volume or entire chart, if the account is located in a volume, an outguide prints. When you access this field, the following prompt displays:

Print outguide for this patient type? (Y/N) [N]--

Enter **Y** for Yes to indicate that an outguide should print when an account, volume, or chart containing an account with this patient type is moved. Enter **N** for No to indicate that an outguide should not print when an account, volume, or chart containing an account with this patient type is moved.

If you do not revise any of the parameters for the selected patient type and press ENTER, the following prompt displays:

Delete? (N)--

If you do not want to delete this patient type from the parameters, press ENTER. To delete the patient type parameter, enter **Y** for Yes and this message displays:

Are you sure? (Y/N) [N]--

If you decide not to delete the parameters, press ENTER to accept the default of N for No. To delete the patient type parameters, enter **Y** for Yes. The parameters are deleted and this message displays confirming the deletion:

Parameters Deleted

The message displays briefly, then the system displays this message:

Do you wish to add patient type parameters? (Y/N) [N]--

To add patient type parameters, enter **Y** for Yes. This screen displays a listing of all available patient types (from the STAR Patient Care Patient Type table).

```
                General Hospital Patient Type Parameters Processor
                                              Fri Oct 27, 1995 02:21 pm

 Page:01                          Patient Types            ##=Current Choices
 ( 1) AAA-ABNORMAL ADD ABBY            (14) OPT-Outpatient Pre Admission Test
 ( 2) ADV-Advance Admission Inpatient  (15) ORX-Outpatient Pharmacy Test
 ( 3) BBB-barbs description            (16) PAT-Pre Admission Testing Inpatie
 ( 4) BLB-BLB CON TEST                 (17) PER-INPATIENT TYPE
 ( 5) CA-CA-TEST CONTRACT              (18) PKS-TEST TP TYPE
 ( 6) CON-Contract account             (19) PRA-Pre Admission Inpatient
 ( 7) CYT-Cytology Exam                (20) PRE-Internal Pre
 ( 8) DIA-Dialysis Series Outpatient   (21) PRR-Outpatient Pre Registration
 ( 9) FPC-Family Practice Outpatient   (22) REF-Reference Lab
 (10) LAB-Lab Downtime Patient Type    (23) SLC-TEST O/P TO I/P
 (11) LL-CONTRACT 1 PG WITH LAB        (24) SPC-Specimen
 (12) LPT-Laboratory Archive Patient Ty
 (13) ONC-Oncology Series Outpatient


 Enter choices (e.g. 1,7,5-9) or '-'choices to remove--
                            end selection(NL)
```

Enter the patient type(s) for which you want to add parameters, and the following screen displays:

```
                General Hospital Patient Type Parameters Processor
                                               Mon Jul 6, 1998 10:38 am

                                        Patient Type: I/P-Regular Inpatient Admi
  1 Tracking Indicator                  2 Deficiency Indicator
    Yes                                   Yes
  3 Charts Req Analysis Purge Days      4 Home Location (GUI)
    10                                    I/P HME LO
  5 Print Outguide
    No












 Enter field number or '/' starting field number--
```

To complete this screen, refer to the previous discussion for revising a patient type parameter. After the fields are completed, this message displays briefly:

   Parameters Filed

Then you are returned to the Parameters Maintenance submenu.

Chart Management Parameters

The Chart Management Parameters are used to set options that control portions of Chart Tracking and/or Chart Deficiency functions. These parameters include purge criteria, default location information, deficiency aging, and flags for printing bar-code labels.

When you select Chart Management Parameters, the following screen displays:

```
                General Hospital Chart Management Parameters Processor
                                          Sun Jul 24, 2005 04:16 pm
 1 Tracking Purge Days     2 Deficiency Purge Days   3 Tracking/Deficiency Link
   30                        30                         Yes
 4 Request Cancel Days     5 Unit # Barcode Ind      6 Episode Barcode Ind
   Do not Cancel             Yes                        None
 7 Due Date Calculation    8 Def Slip per Physician  9 Def Slip Print Options
   Assign date              No                         Defined
10 Display Comp Def (GUI) 11 Delete Deficiency (GUI)12 Volume Home Location
   No                        Yes                        PERMANENT
13 Chart Selection (GUI)  14 Unit Number Sort
   Account                   Defined
15 Current Disch Rpt Sort 16 Def Notice Print Opt
   Patient Type-Both         Defined
17 Chart Status Codes/Days18 Physician activity purge days
   Defined                   999
19 Chart Def Audit Retain 20 Email Subject
   999                       Chart Deficiencies
21 Email Confidentiality
   Yes



 Enter field number or '/' starting field number--
```

NOTE: When necessary, the following field explanations outline whether the parameter affects only the GUI version of Chart Management.

Field Explanations

1. TRACKING PURGE DAYS (3-N-O)
This field contains the number of days (up to 999) tracking information, including completed chart requests, remains in the system once a medical record has had no tracking activity. In the above example, the number of days for this parameter is set at 15. Therefore, when a medical record has remained checked in for 15 days, the tracking history is purged.

This parameter does not delete the record from Chart Tracking, as it only affects historical activity information. A record that has had historical information purged would still be available for future tracking activity. When adding or editing this parameter, enter the number of days and press ENTER. If this field is left blank, the system interprets this as 30 days.

2. DEFICIENCY PURGE DAYS (3-N-O)
This field functions in the same manner as Tracking Purge Days. A three-digit number can be entered, indicating how long deficiency information remains on the system once

all deficiencies on an account have been marked complete. In the above sample screen, the number of days set for this parameter is 15. Therefore, 15 days after the last deficiency has been marked complete, the deficiency information will be purged. The account with purged deficiency history would still be available for future deficiency activity.   When adding or editing this parameter, enter the number of days and press ENTER. If this field is left blank, the system interprets this as 30 days.

3. TRACKING/DEFICIENCY LINK (1-A-R)
The Tracking/Deficiency Link is used to indicate whether the two functions, Chart Tracking and Chart Deficiency, work together. If **N** for No is entered, then Chart Tracking activity does not affect deficiency aging for incomplete charts, and the presence of deficiencies on a chart does not affect Chart Tracking activity. If Y for Yes is entered, then activity and processing performed in Chart Tracking may affect the deficiency aging in Chart Deficiency.

4. REQUEST CANCEL DAYS (3-N-O)
This field indicates the number of days an unfilled request remains in the system before it is cancelled. If an unfilled request is not cancelled automatically, it can remain outstanding indefinitely if it is not deleted or the chart is not moved using a pending request.

To complete this field, enter a value between 1 and 999. The purge clock begins from the date entered in the Date Needed field when the request is entered. All automatic request cancellations create an entry in the Chart Tracking history audit for the patient.

5. UNIT # BARCODE IND (1-A-R)
This parameter is used to indicate whether a unit number bar-code label should automatically print on admission. This label automatically prints if the unit number assigned at the time of the admission/registration process is a new unit number. If the patient being admitted is already in the MPI with a unit number, then a unit number bar-code label is not generated.

NOTE: If necessary, you can print an individual unit number bar-code label using a print function in both Chart Tracking and Chart Deficiency.

The unit number bar-code label would most likely be placed on the outside folder of the medical record where the unit number is located. To automatically print a unit number bar-code label on admission, enter **Y** for Yes in this field. If **N** for No is entered, a unit number bar-code label does not automatically print. The bar-code label prints on the chart bar-code printer defined for the CRT you are using when admitting/discharging the patient. If a printer is not defined, it prints to the default bar-code printer, ABCPf.

For additional information regarding bar coding and labels, refer to Chapter 3 - BAR-CODE APPLICATION.

6. ACCT # BARCODE IND (1-A-R)
This parameter is used to indicate whether an account number bar-code label should print for each admission or registration. To complete this field, indicate whether the bar

code should print on admission, discharge, or not at all. This label would most likely be placed on the face sheet of the episode, unless separate folders are used for each account, in which case it could be placed on the outside of such folder.

Enter **N** for None to not print any account bar-code labels. Enter **A** for Admission to print the account number bar-code label at the time of admission. Enter **D** for Discharge to print an account number bar-code label at the time of discharge/dispositioning.

For additional information regarding bar coding and labels, refer to Chapter 3 - BAR-CODE APPLICATION.

7. DUE DATE CALCULATION (1-A-R)

Due Date Calculation is used to indicate whether the Chart Status (found on the Chart Deficiency processor screen and related reports) should be based on the most recent deficiency assignment date on a chart, on the earliest deficiency due date on a chart, or on the patient's discharge date plus additional days.

- If you enter **A**, the Chart Status and due date is based on the most recent deficiency assignment date on the account plus the number of days in the first status, and is calculated as follows:

     most recent assignment date + status days = Chart Due Date

     For example, if the most recent assignment date on an account is 06/20/02 and the number of days in the first status is 7, then the chart due date is 06/27/02. If you update the account by adding or editing a deficiency with a more recent assignment date, the status and due date are updated as well.

- If you enter **D**, the chart status and due date is based on the most recent deficiency due date on the account plus the number of days in the first status, and is calculated as follows:

     most recent due date + status days = Chart Due Date

     For example, if the most recent due date on an account is 6/15/02 and the days in the first status is 7, then the chart due date is 6/22/02. If you update the account by adding or editing the deficiency with a more recent due date, the chart status and due date are updated as well.

- If you enter **P** to calculate the chart due date based on the patient's discharge date, the following prompt displays:

     Enter number of days past discharge date [0]--

     This prompt enables you to indicate that the due date should be calculated based on the patient's discharge date plus additional days past discharge plus the number of days in the first status. Select one of the following options:

- Press ENTER to accept the default of zero. Accepting the default indicates that the due date should be calculated using the patient's discharge date (with no additional days added).

- Enter a number (up to three digits) to indicate the number of additional days past discharge to be used in the calculation of the chart due date.

  For example, if the patient's discharge date is 6/10/02 and you have indicated that the due date is calculated using the patient's discharge date plus 3 days, and the number of days in the first status is 7, then the chart due date is 6/20/02 and is calculated as follows:

      discharge date + 3 + status days = chart due date

NOTE: In either case, if the patient is not discharged, the system uses the current date as the discharge date when calculating the Chart Due Date based on the discharge date.

8. DEF SLIP PER PHYSICIAN (1-A-R)
This parameter is used to determine how a deficiency slip prints. If you enter N for No and print a deficiency slip for an incomplete chart, one deficiency slip prints with all deficiencies for all physicians or departments on a single slip. If you enter Y for Yes, one deficiency slip per physician or department prints for that account. For example, if you enter Y in this parameter and you print a deficiency slip for an account where five physicians have incomplete deficiencies, then five deficiency slips print; one for each physician and/or department.

9. DEF SLIP PRINT OPTIONS
This parameter identifies which of the pre-defined items print in the body of the Deficiency Slip. You can print Deficiency Slips from either the Add/Edit Deficiency function or Deficiency Slip print option. Deficiency Slips print to the printer associated with the workstation from which the print was generated.

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When you access this field, the following screen is displayed:

```
                        General Hospital System Processor
                                               Thu Jul 22, 1999 08:32 am

Deficiency Slip Print Options
( 1)Deficiency        : Yes
( 2)Deficiency Type   : Yes
( 3)Bill Delay Flag   : No
( 4)Deficiency Status : No
( 5)Assign Date       : Yes
( 6)Due Date          : Yes
( 7)Color             : No
( 8)Comments          : No




 Enter field number or '/' starting field number--
```

Deficiency Slip Print Options Field Explanations

1. DEFICIENCY
This is the deficiency assigned to a patient. Enter **Y** for Yes to include the Deficiency on the Deficiency Slip or **N** for No to exclude it. The default response is No.

2. DEFICIENCY TYPE
This is the type assigned to the deficiency. It indicates what is needed to complete the deficiency. Enter **Y** for Yes to include Deficiency Type on the Deficiency Slip or **N** for No to exclude it. The default response is No.

3. BILL DELAY FLAG
This flag indicates whether this deficiency is considered a billing delay. Determination of whether a deficiency is a billing delay is set up in the Chart Deficiencies code table. Enter **Y** for Yes to include the Bill Delay flag on the Deficiency Slip or **N** for No to exclude it. The default response is No.

4. DEFICIENCY STATUS
This is the status of the deficiency at the time the deficiency slip is printed. Enter **Y** for Yes to include the Deficiency Status on the Deficiency Slip or **N** for No to exclude it. The default response is No.

5. ASSIGN DATE
This is the date the deficiency was assigned. Enter **Y** for Yes to include the Deficiency Assign Date on the Deficiency Slip or **N** for No to exclude it. The default response is No.

6. DUE DATE
This is the date the deficiency is due to be completed. Enter **Y** for Yes to include the Deficiency Due Date on the Deficiency Slip or **N** for No to exclude it. The default response is No.

7. COLOR

This is the color assigned to the deficiency. It directs the physician/department to the same color coding in the record to assist them in locating their deficiencies. Enter **Y** for Yes to include the Deficiency Color on the Deficiency Slip or **N** for No to exclude it. The default response is No.

8. COMMENTS (GUI)

These are the comments associated with the deficiency. Comments can be entered only in GUI Chart Management. Enter **Y** for Yes to include the Comments or **N** for No to exclude them. The default response is No.

After you accept this screen, the system redisplays the Chart Management Parameters screen.

Chart Management Parameters Field Explanations continued

10. DISPLAY COMP DEF (GUI)

This parameter applies only to the GUI version of Chart Management. It indicates whether completed deficiencies should display on the Add/Edit Deficiency Summary form. When you access this field, the following prompt displays:

Display completed deficiencies on Add/Edit Deficiency Summary form? (Y/N) [N]--

Enter **N** for No or leave this field blank to indicate that completed deficiencies should not display. Enter **Y** for Yes to indicate that completed deficiencies should display.

NOTE: If you set this parameter to No, you cannot view history on completed deficiencies in the GUI version of Chart Management.

11. DELETE DEFICIENCY (GUI)

This parameter applies to only the GUI version of Chart Management. It indicates whether deficiencies can be deleted from an account. When you access this field, the following prompt displays:

Allow deficiencies to be deleted from an account? (Y/N) [N]--

Enter **Y** for yes if your facility allows deficiencies to be deleted. Enter **N** for No if deficiencies cannot be deleted.

NOTE: When a deficiency is deleted, there is no longer an audit trail available for viewing history.

12. VOLUME HOME LOCATION

This parameter defines the default home location for volumes, so that the system can automatically assign a home location when a volume is automatically or manually created. You can update the default home location can be updated, on a per volume basis, in the Folder Functions form. When you access this field, the following prompt displays:

Enter the default home location for all volumes--

Use one of these entry options:

• Enter the Chart Location code and press ENTER.

• Enter a portion of the Chart Location desciption, followed by a hyphen (-) to display all codes that match the partial entry and select from the list.

• Enter a hyphen (-) to display all Chart Location codes and select from the list.

13. CHART SELECTION (GUI)
This parameter applies to only the GUI version of Chart Management. It indicates the level at which charts are moved or requested. When the system processes a request, it checks this parameter to determine whether the request should be met by moving the entire chart, the volume, or specific accounts. After making this determination, the system displays the appropriate screen for the requester to enter the information necessary to complete the request. When you access this field, the following prompt displays:

Move/request chart by (C)hart, (V)olume, (A)ccount [C]--

Use one of these entry options to indicate which portions of a chart are selected for chart movement or requests:

• Enter **C** to indicate you want to move or request the entire chart.

• Enter **V** to indicate you want to move or request specific volumes of the chart. This option requires you to make additional selections for each patient.

• Enter **E** to indicate you want to move or request specific accounts. This option requires you to make additional selections for each patient if the account number is not provided.

NOTE: If you leave this field blank, you must select the portions of the charts to be moved/requested.

14. UNIT NUMBER SORT
This field determines how the unit number should be sorted when terminal digit is selected as the sort option for a report. Since each facility may have a different breakdown of the unit number, the system must determine the length of each sequence of the facility's unit number in order to complete the terminal digit sort.

When you access this field, an additional screen is displayed:

```
              General Hospital Chart Management Parameters Processor
                                        Tue Jul 06, 2004 01:19 pm
 Abstracting & Chart Management Unit Number Sort Option
 ( 1)Sort First   : 8
 ( 2)Sort Second  : 9
 ( 3)Sort Third   : 1
 ( 4)Sort Fourth  : 2
 ( 5)Sort Fifth   : 3
 ( 6)Sort Sixth   : 4
 ( 7)Sort Seventh : 5
 ( 8)Sort Eight   : 6
 ( 9)Sort Ninth   : 7
 (10)Sort Tenth   : 0




 Enter field number or '/' starting field number--

```

This screen enables you to indicate the breakdown of the unit number for the purpose of terminal digit sorting on reports. For each section of the unit number, you must indicate the terminal digit number.

For example, if the unit number is six digits, you may want to set the sorting sequence as follows:

First:	5
Second:	6
Third:	3
Fourth:	4
Fifth:	1
Sixth:	2
Seventh:	
Eighth:	
Ninth:	
Tenth:	

This number sequence results in the unit number 123456 being sorted as 56-34-12.

The Chart Management reports where terminal digit sorting is an option are as follows:

Charts Out Report (Chart Tracking)
Chart Pending Request List and Outguides (Chart Tracking)
Deficiency Work List (Chart Deficiency)
Deficiency Code Report (Chart Deficiency)
Chart Status Report (Chart Deficiency)
Incomplete Summary by Chart (Chart Deficiency)

Incomplete Aging Report (Chart Deficiency)
Charts Requiring Analysis Report (Chart Deficiency)

NOTE: This field can also be accessed on the Abstracting Facility Options screen, as terminal digit sorting is an option for several Abstracting core reports. For more information, see the *STAR Patient Care Reference Guide, Medical Record Abstracting Module.*

Chart Management Parameters Field Explanations continued

15. CURRENT DISCH RPT SORT
This parameter identifies the sort option for the Current Discharge Report. When you access this field, the following prompt displays:

Sort by (P)atient Type, (S)ervice, (N)urse Station [N]--

Enter **P** to sort by Patient Type, **S** to sort by Service, or **N** to sort by Nurse Station. After you select a sort option, another prompt displays:

Include (I)npatients Only, (O)utpatients only, (B)oth—

Enter **I** to include Inpatients only, **O** to include Outpatients only, or **B** to include both inpatients and outpatients.

This field displays both the selected sort option and the patients to be included.

16. DEF NOTICE PRINT OPT
This parameter identifies which of the pre-defined items print in the body of Deficiency Notices. When you access this field, the following screen displays:

```
                     General Hospital System Processor
                                          Thu Jul 10, 1997 08:32 am

 Def Notice Print Opt
 ( 1)Unit Number       : Yes
 ( 2)Patient Name      : Yes
 ( 3)Account Number    : Yes
 ( 4)Admission Date    : Yes
 ( 5)Discharge Date    : Yes
 ( 6)Patient Type      : Yes
 ( 7)Chart Location    : No
 ( 8)Borrower          : No
 ( 9)Total Charges     : No
 (10)Deficiency        : Yes
 (11)Deficiency Type   : Yes
 (12)Due Date          : Yes
 (13)Deficiency Status : Yes
 (14)Signature Only    : No
 (15)Bill Delay        : No

 Enter field number or '/' starting field number--
```

Deficiency Notice Print Options Field Explanations

1. UNIT NUMBER
This is the unit number corresponding to the visit that is incomplete. Enter **Y** to include the unit number on the Deficiency Notice or **N** to exclude it. The default response is No.

2. PATIENT NAME
This is the name of the patient's whose chart is incomplete. Enter **Y** to include the patient name on the Deficiency Notice or **N** to exclude it. The default response is No.

3. ACCOUNT NUMBER
This is the account number of the incomplete chart. Enter **Y** to include the account number on the Deficiency Notice or **N** to exclude it. The default response is No.

4. ADMISSION DATE
This is the admission date associated with the account number. Enter **Y** to include the admission date on the Deficiency Notice or **N** to exclude it. The default response is No.

5. DISCHARGE DATE
This is the discharge date associated with the account number. Enter **Y** to include the discharge date on the Deficiency Notice or **N** to exclude it. The default response is No.

6. PATIENT TYPE
This is the patient type associated with this visit. Enter **Y** to include the patient type on the Deficiency Notice or **N** to exclude it. The default response is No.

7. CHART LOCATION
This is the location of the chart at the time the notice is printed. If this field is set to Yes, but the Tracking/Deficiency Link in the Chart Management Parameters is set to No, the location will not print. Enter **Y** to include the chart location on the Deficiency Notice or **N** to exclude it. The default response is No.

8. BORROWER
This is the borrower of the chart at the time the notice is printed. If this field is set to Yes, but the Tracking/Deficiency Link in the Chart Management Parameters is set to No, the borrower will not print. Enter **Y** to include the borrower on the Deficiency Notice or **N** to exclude it. The default response is No.

9. TOTAL CHARGES
This is the total charges on this account at the time the notice is printed. Enter **Y** to include the total charges on the Deficiency Notice or **N** to exclude it. The default response is No.

10. DEFICIENCY
This is the deficiency assigned to a patient. Enter **Y** to include the deficiency on the Deficiency Notice or **N** to exclude it. The default response is No.

11. DEFICIENCY TYPE
This is the type assigned to the deficiency. It indicates what is needed to complete the deficiency. Enter **Y** to include the deficiency type on the Deficiency Notice or **N** to exclude it. The default response is No.

12. DUE DATE
This is the date the deficiency is due to be completed. Enter **Y** to include the deficiency due date on the Deficiency Notice or **N** to exclude it. The default response is No.

13. DEFICIENCY STATUS
This is the status of the deficiency at the time the Deficiency Notice is printed. Enter **Y** to include the deficiency status on the Deficiency Notice or **N** to exclude it. The default response is No.

14. SIGNATURE ONLY
This field indicates whether the deficiency is considered to be a signature-only delay. Determination of whether a deficiency is a signature only is set up in the Chart Deficiencies code table. Enter **Y** to include the signature only indicator on the Deficiency Notice or **N** to exclude it. The default response is No.

15. BILL DELAY
This field indicates whether this deficiency is considered a billing delay. Determination of whether a deficiency is a billing delay is set up in the Chart Deficiencies code table. Enter **Y** to include the bill delay indicator on the Deficiency Notice or **N** to exclude it. The default response is No.

After you accept this screen, the Chart Management Parameters screen displays.

Chart Management Parameters Field Explanations continued

17. CHART STATUS CODES/DAYS (1-AN-O)

NOTE: When this field is accessed a subscreen displays, enabling entry of status codes and days.

The status codes and descriptions used in this parameter are those have been set up in the Chart Deficiency Status Code table, which must be completed prior to completing the Chart Management Parameters. You can enter one or all of the established status codes in the parameter (maximum of nine). These should be entered in a hierarchical order. The statuses set up here are used in conjunction with the Calculate Due Date parameter.

NOTE: You do not need to define the status of 99 - Complete in this field. This status is automatically assigned by the system when the deficiency is completed.

The column for Days indicates the number of days this status is valid. If the days being entered corresponds to the first status code, the number of days the status is in effect is from day zero. If the number of days being entered corresponds to status codes

other than the first one, then the number of days the status is in effect is calculated from the end of the previous status.

The days are cumulative. For example, the first status is in effect for zero to seven days. The second status is in effect for 7 days after the first status ends. The third status is in effect for 7 days after the second ends. Thus, from the beginning of the first status to the end of the third status, 21 days have passed. The final status remains in effect until all deficiencies on the chart have been marked complete. The number of days assigned to the final status is a required entry but does not affect how long the status is in effect.

If you enter **A** to add a panel item, this prompt displays:

> *1 Status Code   2 Days*
> *Enter table code--*

Enter the table code that has been established in the Chart Deficiency Status Code table. Enter the table code if you know it, or enter a hyphen (-) and press ENTER and the Chart Deficiency Status code table displays for selection.

Once a code is entered, the cursor moves to the second field and this prompt displays:

> *Enter number of days--*

Enter the number of days this status is in effect. The number you enter can be from one to three digits in length.

If you enter a panel number to update, the same prompt redisplays. You can update either the status code and/or the number of days. If you press ENTER, this prompt displays:

> *Delete? (N)--*

If you press ENTER, the status code is not deleted and you return to the Chart Management Parameters screen. To delete the selected status code, description and days, press **Y** for Yes followed by ENTER. The selected item is deleted and you are returned to the Chart Management Parameters screen.

18. PHYSICIAN ACTIVITY PURGE DAYS
This field specifies the number of days physician activity information should remain in the system after the end of the activity has been reached. The system purges physician activity based on the end date of the activity. Enter a value between 0 and 999 to indicate the number of days.

For example, if an entered physician activity has an end date of 03/31/98 and the Physician Activity Purge Days parameter is set to 30, the information will be purged on 04/30/98 during midnight processing.

NOTE: On conversion, the number of purge days entered in this field mirrors the number that existed in the Deficiency Purge Days field. You can change this number by updating the field appropriately.

If the Physician table is not split but there are multiple facilities, the system utilizes the purge parameter for the first facility listed in the internal tilde for all facilities.

19. CHART DEF AUDIT RETAIN (3-N-O)
Enter the number of days to retain the data for the Deficiency Fax/Email Audit Report. You can enter any number from 0 to 999.

20. EMAIL SUBJECT (48-C-O)
Enter the text to display in the subject line when a Deficiency Notice is automatically emailed to a physician or non-staff caregiver. You can enter up to 48 characters.

21. EMAIL CONFIDENTIALITY (SPECIAL FORMAT-O)
Enter the text for the confidentiality statement to be included in Deficiency Notices that are automatically emailed to a physician or non-staff caregiver. When you access this field, the following screen is displayed:

```
                General Hospital Chart Management Parameters Processor
                                              Wed Jul 27, 2005 02:53 pm
Email Confidentiality Statement
                 1         2         3         4         5         6         7
     123456789012345678901234567890123456789012345678901234567890123456789012345
  01|                                                                           |
  02|                                                                           |
  03|                                                                           |
  04|                                                                           |
  05|                                                                           |
  06|                                                                           |
  07|                                                                           |
  08|                                                                           |
  09|                                                                           |
  10|                                                                           |
  11|                                                                           |
  12|                                                                           |
  13|                                                                           |
  14|                                                                           |
  15|                                                                           |
  16|                                                                           |
  17|                                                                           |
     F1            F2            F3       F4     F5           F6          F7    F10

     Delete Line   Insert Line   Center   Exit   Store Line   Restore Line  Pack  Help
```

You can enter up to 16 lines of text, 75 characters per line. Complete the text for the confidentiality statement using the assigned function keys as indicated on the bottom of the screen.

The text entered here is included at the bottom of the Chart Deficiency email following the signature block.

After you complete the text, press **F4** to display this prompt:

Accept? (Y/N)--

If you enter N for No, you are returned to the text until you enter Y for Yes.

After you accept the screen, the confidentiality text is saved, and the Email Confidentiality field displays *Yes*.

After you accept the Chart Management Parameters screen, the system briefly displays the message *Update complete!* if you made any updates and then returns you to the Parameter Maintenance screen.

Medical Records Physician Parameters

The Medical Records Physician Parameters screen allows you to indicate how a physician wants to receive Deficiency Notices (fax, email, or print out). You can also enter the preferred fax number and email address. When you select Medical Record Physician Parameters, the following prompt is displayed:

View Inactive Physician/NSCG Records?(Y/N) [N]--

Indicate if you want to select an inactive physician or non-staff caregiver. Enter **Y** for Yes or **N** for No. Another prompt is displayed:

Enter (S)taff physician, (N)SCG, or (B)oth? [S]--

Enter **S** to select a staff physician, **N** to select a non-staff caregiver, or **B** to include both in the display. An additional prompt is then displayed:

Enter first letter(s)`-` or physician/NSCG code--   *|*

To select a physician or non-staff caregiver, enter the first letters of his/her last name or the physician code. When you select a physician, the Medical Records Physician Parameters screen is displayed as follows:

```
              General Hospital Medical Records Physician Parameters Processor
                                            Sun Jul 24, 2005 02:36 pm
 Physician Name: 33347 - NEILSON,JOHN

 1 Chart Deficiency Method
   Fax
 2 Fax #
   8813285191
 3 Email Address
   JOHN.NEILSON@MCKESSON.COM
 4 Edit By                    5 Edit Date
   Taylor,Sara                  05/02/05 17:05




 Enter field number or '/' starting field number--
```

NOTE: This screen can also be accessed from the Physician/NSCG table by selecting the STAR Departmental Physician Parameters option.

Field Explanations

1. CHART DEFICIENCY METHOD (1-A-R)
Indicate how this physician wants to receive Chart Deficiency Notices. Enter **E** for email, **F** for fax, or **P** for printed notices.

NOTE: If this field is blank, the print option is used.

2. FAX # (12-NC-C)
If the Chart Deficiency Method field is set to F, this field is required. Enter a fax number to use to fax Chart Deficiency Notices. When you access this field, the following prompt is displayed:

Enter the preferred fax number [primary]--

You can enter a fax number, or press ENTER to default the fax number entered for the physician's primary office on the Office Information screen of the Physician/NSCG table.

NOTE: If the physician does not have a fax number entered on for his/her primary office, the [primary] option is not included in the prompt.

3. EMAIL ADDRESS (255-C-C)

If the Chart Deficiency Method field is set to E, this field is required. Enter an email address to use to email Chart Deficiency Notices. When you access this field, the following prompt is displayed:

> *Enter the preferred email address [primary]--*

You can enter an email address, or press ENTER to default the email address entered for the physician's primary office on the Office Information screen of the Physician/ NSCG table.

NOTE: If the physician does not have an email address entered on for his/her primary office, the [primary] option is not included in the prompt.

4. EDIT BY (DISPLAY ONLY)

The system displays the name of the person who last updated this table entry.

5. EDIT DATE (DISPLAY ONLY)

The system displays the date and time that the table entry was last updated.

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BAR CODE MAINTENANCE

The Chart Tracking and Chart Deficiency menus both contain the Bar Code Maintenance option. This item is identical on both menus.

The Bar Code Maintenance options are used for the purpose of maintaining the INTERMEC bar-code printer and label formats. If your facility does not use bar-code labels, these functions do not apply.

When you select the Bar Code Maintenance option, this submenu displays:

```
               General Hospital Bar Code Maintenance Processor
                                          Fri Sep 22, 1995 02:00 pm
 Bar Code Maintenance Input Options

          Option No.  Option
          ---------------------------------------
              1       Bar Code Printer Reset
              2       Bar Code Printer Load
              3       Bar Code Spooler Review
              4       Bar Code Spooler Options
              5       Bar Code Spooler Start/Stop




 Enter option number--
```

Bar Code Printer Reset

This option is used to align label stock in one or more bar-code printers. This option performs the same function as the RESET key on the front of the INTERMEC label printer, in that it orders the printer to measure the label and align stock accordingly. This is most useful in such events as a power failure.

When you select the Bar Code Printer Reset option from the Bar Code Maintenance menu, this prompt displays:

Reset bar code printer? (Y/N) [Y]--

To reset the bar-code printer, press ENTER to accept the default of **Y** for Yes. This message displays:

Printer reset!

This message indicates that the bar-code printer for this CRT has been reset. The message displays briefly, then returns to the Bar Code Maintenance menu.

If you do not want to reset the printer, press **N** for No followed by ENTER. You then return to the Bar Code Maintenance menu.

Bar Code Printer Load

The Bar Code Printer Load option is used to a load a new or changed format to your bar-code label printer. This ensures the bar-code labels print using the new format.

When your INTERMEC printer receives an order to print a label, it first looks at the type it has been told to print (account number bar-code label or unit number bar-code label). To print labels faster, the INTERMEC printer holds the last seven formats it printed, one for each label type. If the label format used by the new label is one of those stored, the printer uses the stored format. If the label format is different, the printer pulls a copy of the format and prints the label according to the new guidelines. If you change a label format, the system can not use your new label format for a while, unless you run the Load Formats processor.

There are two formats for Chart Management bar-code labels: account number and unit number. Once these formats are loaded into the printer, you probably will not need to change them.

To load a new format to a printer, select the Bar Code Printer Load option from the Bar Code Maintenance menu. This prompt displays:

> *Enter account number format(A) or unit number format(U)--*

If you do not want to download a format, press period (.) followed by ENTER to return to the Bar Code Maintenance menu. To download the account number format, enter **A** for account and press ENTER. To download the unit number format, enter **U** for unit and press ENTER. Once a format is selected, this message displays:

> *Downloading new format!*

The message displays until the downloading is complete. Once downloading is complete, this message displays:

> *Format ### loaded!*

where ### is the format type.

This message displays briefly, then returns to the Bar Code Maintenance menu.

Bar Code Spooler Review

The Bar Code Spooler Review is used to display the contents of the department's spooler. This option actually has two displays: one is a listing of all labels not printed but in the spooler, and the other is a screen displaying more information about an individual label.

When you select the Bar Code Spooler Review option, this screen displays:

```
              General Hospital Bar Code Spooler Review Processor
                                          Fri Sep 22, 1989 02:00 pm

 Page:01                        Spooled Label Records
      Date    Time      Type                      Format ID   Copies    Device
 ( 1) 09/01/89 0949   Account Number Label           ACT         1        76
 ( 2) 09/01/89 1227   Account Number Label           ACT         1        76
 ( 3) 09/02/89 1729   Unit Number Label              UNT         1        76
 ( 4) 09/02/89 1729   Account Number Label           ACT         1        76
 ( 5) 09/02/89 1741   Account Number Label           ACT         1        76
 ( 6) 09/05/89 0755   Account Number Label           ACT         1        76
 ( 7) 09/05/89 1136   Account Number Label           ACT         1        76
 ( 8) 09/05/89 1137   Account Number Label           ACT         1        76
 ( 9) 09/05/89 1141   Account Number Label           ACT         1        76
 (10) 09/05/89 1340   Account Number Label           ACT         1        76
 (11) 09/05/89 1341   Account Number Label           ACT         1        76
 (12) 09/05/89 1354   Account Number Label           ACT         1        76
 (13) 09/05/89 1431   Unit Number Label              UNT         1        76
 (14) 09/05/89 1431   Account Number Label           ACT         1        76
 (15) 09/05/89 1433   Unit Number Label              UNT         1        76
 (16) 09/05/89 1433   Account Number Label           ACT         1        76


 Enter choice--
                            next screen(/)
```

This screen contains a list of all unprinted bar-code labels in the spooler. If the spooler is empty, this message displays:

No entries defined!

Field Explanations

The listing displays the following information for each spooled bar-code label:

DATE
This is the date the label was sent to the spooler.

TIME
This is the time the label was sent to the spooler.

TYPE
This is the type of bar-code label (account number or unit number).

FORMAT ID
This is the format code for the label. ACT for account number label, and UNT for unit number label.

COPIES
This is the number of label copies set to print.

DEVICE
This is the port number of the printer where the label is to print.

To display additional information about a specific label in the spooler, enter the option number corresponding to the label, and this screen displays. If you donot want to view additional information regarding a specific label, press ENTER to return to the Bar Code Maintenance menu.

```
              General Hospital Bar Code Spooler Review Processor
                                            Fri Sep 22, 1989 02:00 pm

 Bar Code Spooler Record Display

  1 Record #        2 Label Type                   3 Format ID
    69                 2-Account Number Label         ACT

  4 # Copies        5 Printer                      6 Date/Time Spooled
    1                  R. BROOKS - 3rd Floor East     09/01/89 0949

  7 Contents
    89244-00001|RALEIGH,SARAH|08/24/61|BCAA8924400001|




 Press NL--
```

Field Explanations

1. RECORD # (DISPLAY ONLY)
This is the sequence number of the bar-code label, and is a discrete number used by the system to identify the bar-code label.

2. LABEL TYPE (DISPLAY ONLY)
This is the label type (account number or unit number) of the bar code, and is the same that appeared on the previous screen.

3. FORMAT ID (DISPLAY ONLY)
This is the format code for the label (ACT or UNT), and is the same that appeared on the previous screen.

4. # COPIES (DISPLAY ONLY)
This is the number of copies to print for this label, and is the same that appeared on the previous screen.

5. PRINTER (DISPLAY ONLY)
This is the name of the INTERMEC printer where the bar-code labels print.

6. DATE/TIME SPOOLED (DISPLAY ONLY)
This is the date and time the bar-code label was sent to the spooler, and is the same as the date and time that appeared on the previous screen.

7. CONTENTS (DISPLAY ONLY)
This is a display of the field contents of the bar-code label. Each field is separated by
a vertical bar. If two vertical bars appear next to one another, a field is missing and the
label does not print. The bar-code label format should be checked to locate the error.

Press ENTER to return to the screen listing all unprinted bar-code labels where you
can select another entry to view. If you do not want to select another entry, press
ENTER to return to the Bar Code Maintenance menu.

Bar Code Spooler Options

The Bar Code Spooler Options are used to set the operating mode of your
department's print spooler.

When you select the Bar Code Spooler Options from the Bar Code Maintenance menu,
this screen displays:

```
                General Hospital Bar Code Spooler Options Processor
                                                 Fri Sep 22, 1989 02:01 pm




 Current Spooler Status: Spooling/Printing







 Set bar code labels to spool/print(P), spool only(S) or neither(N) [P] --
```

You can set the spooler to one of the following options:

Spooling/Printing
This instructs the system to send all bar-code labels directly to the printer unless the
printer buffer is full. If the buffer is full, the system holds the labels in the spooler until
it becomes available. Labels go to the buffer in a first in first out priority. If this spooler
option has been selected, you can start and stop the spooler using the Bar Code
Spooler Start/Stop options listed on the Bar Code Maintenance menu.

Spooling
This instructs the system to hold all bar-code labels in the spooler. The system starts
sending labels to the printer again only when this option is reset to Spooling/Printing
and the Bar Code Spooler Start/Stop option is used to restart printing.

Not Spooling/Not Printing
If this option is set, bar-code labels are lost. When this spooler option is used, bar-code labels are not spooled or saved for later printing. This option should only be used for system testing. This option appears as NEITHER on the prompt.

The system displays the current setting of the spooler and prompts you as to which setting you want to use. To change the spooler setting to Spooling/Printing, press ENTER to accept the default of P for print. To change the setting to Spooling, press **S** followed by ENTER. The following message displays when either **P** or **S** is entered:

Bar Code Spooler Flags filed!

The message displays briefly before returning you to the Bar Code Maintenance menu.

To change the spooler option to NEITHER (not spooling/not printing), press **N** followed by ENTER, and this prompt displays:

Clear current spooler queue? [N]--

If you clear the current spooler, you erase all labels in the spooler; in effect, erasing all record of these labels. This option also resets the internal label counter, a system device used to identify individual bar-code labels. To retain the labels currently in the spooler and print them later, press ENTER to accept the default of **N** for No. To destroy these records, press **Y** for Yes followed by ENTER, and this message displays:

Spooler queue file cleared and counter reset!

After you respond to this prompt, you are returned to the Bar Code Maintenance menu.

Bar Code Spooler Start/Stop

The Bar Code Spooler Start/Stop option is used to halt or restart the printing of bar-code labels. When you stop the spooler, it no longer sends labels to the printer but accumulates them. When you start the spooler, labels resume going to the printer.

This option can only be used if the BarCode Spooler Option is set to Spooling/Printing. When you use the Start/Stop option to stop printing, the Current Spooler Status (as displayed by the Bar Code Spooler Options function) changes to Spooling.

When you select the Bar Code Spooler Start/Stop option from the Bar Code Maintenance menu, and the current status of the spooler is Inactive, this prompt displays:

Start spooler? (Y/N) [Y]--

To start the spooler, press ENTER to accept the default of **Y** for Yes. If the Bar Code Spooler Option is not set to Spooling/Printing, an error message displays. If the Bar

Code Spooler option is set correctly, this message displays indicating the spooler has been activated:

Spooler started!

The message displays briefly, then returns to the Bar Code Maintenance menu. If you do not want to start the spooler, press **N** for No followed by ENTER. You then return to the Bar Code Maintenance menu.

If the Current status of the spooler is Active, this prompt displays:

Stop spooler? (Y/N) [Y]--

To stop the spooler, press ENTER to accept the default of **Y** for Yes. This message confirms your choice:

Spooler stopped!

The message displays briefly, then returns to the Bar Code Maintenance menu. If you do not want to stop the spooler, press **N** for No followed by ENTER. You return to the Bar Code Maintenance menu.

Chapter 2 - CHART DEFICIENCY FUNCTIONS

STAR Patient Care Reference Guide - Chart Management Module
October 2011   *Release 17.0*   *2–1*
Proprietary to McKesson - Subject to Confidentiality Agreement

Illustrations

CHART DEFICIENCY FUNCTIONS

Chart Deficiency Functions can be accessed through the Medical Records menu. The following is a sample Medical Records menu:

```
                General Hospital MR1 Station ID Processor
                                        Mon Jun 04, 2001 11:11 am
MR1 Station ID Input Options

            Option No.  Option
            ----------------------------------------
                1       MPI Inquiry
                2       MPI Cross-Facility Visit Inquiry
                3       MPI Print Functions
                4       MPI Maintenance Functions
                5       Active Patient Inquiry
                6       Physicians
                7       Census
                8       Send Message
                9       Reports
               10       Abstracting & DRG Assignment Functions
               11       Chart Tracking Functions
               12       Chart Deficiency Functions
               13       Utilization Management Functions
               14       Medical Records & UM Table Maintenance


Enter option number--
```

After you select Chart Deficiency Functions from the previous menu, the following screen is displayed:

```
            General Hospital Chart Deficiency Functions Processor
                                        Fri Oct 27, 1995 05:14 pm
Chart Deficiency Functions Input Options

            Option No.  Option
            ----------------------------------------
                1       Add/Edit Deficiencies
                2       Deficiency History
                3       Deficiency Work List by Physician

                4       Chart Deficiency Reports

  MAINTENANCE   5       Physician Letter Maintenance
                6       Chart Physician Activity
                7       Parameter Maintenance
                8       Bar Code Maintenance


Enter option number--
```

The pages that follow contain detailed descriptions of the Chart Deficiency Functions listed on the screen above.

NOTE: If your facility is using the GUI version of Chart Management, you cannot access the Add/Edit Deficiencies character-based function.

ADD/EDIT DEFICIENCIES

This function is used to add, edit, update, delete or change a deficiency. Deficiencies can be added or accessed by either physician, patient or department. This is the primary function used in Chart Deficiency.

With the addition of the Medical Record Transcription Interface, the STAR Chart Deficiency module has been enhanced to enable automatic adding and/or updating of deficiency information when a report has been transcribed and/or electronically signed. The actual transcribed report is not transmitted to STAR. For additional information, please refer to the *STAR Medical Record Transcription Interface Reference Guide* regarding Chart Deficiency processing changes that occur when the transcription interface is active.

Add/Edit Deficiencies by Chart

To add, edit, complete, or delete deficiencies by chart, enter **C** (do not press ENTER) at the following prompt:

Add/Edit by Chart(C), Department(D), or Physician (P)--

After you enter **C**, the MPI patient lookup screen displays for selection of a patient.

If you select a patient whose visit type is not included in deficiency tracking, this message displays:

Error: Cannot add deficiencies for this patient type

This indicates that the patient type parameter flag in Parameter Maintenance is set to No for deficiency tracking for this patient type. You are returned to the MPI patient lookup screen for selection of another patient. You can update the parameter in order to add this patient to deficiency tracking.

After the account is selected, this screen displays listing all deficiencies for all physicians and/or departments on this account. Physicians with deficiencies are listed in alphabetical order by the physician's last name. If there are no deficiencies for the account, a different screen displays which allows deficiencies to be added. Adding deficiencies is discussed later in this chapter.

```
                General Hospital Add/Edit Deficiencies Processor
                                           Tue Oct 24, 1995 01:49 pm
Unit Number Acct Number Patient Name            Attending Physician
001043017   8922800005  PULLON,MICHAEL          ADAMS,HAROLD R
Chart Status   Location        Dis Date  Due Date Fin Class      Tot Charges
WARNING                        09/27/95  10/22/95 MEDICARE        $49172.60
Page:01                                           Assign    Due     Def
     Physician         Color  Deficiency  Type    Date      Date    Status
( 1) ADAMS,HAROLD R    BLUE   DOC ORDERS  SIGN    10/05/95 10/08/95 SUSPENDED
( 2) ADAMS,HAROLD R    BLUE   HIST & PHY  SIGN    10/05/95 10/07/95 SUSPENDED
( 3) ADAMS,HAROLD R    BLUE   OP NOTE     SIGN    10/05/95 10/20/95 DELINQUEN
( 4) ADAMS,HAROLD R    BLUE   ATTEST      SIGN    10/05/95 10/07/95 SUSPENDED
( 5) ADAMS,HAROLD R    BLUE   DIS SUMM    DICTATE 10/05/95 10/07/95 SUSPENDED
( 6) COLEMAN,MICHAEL   RED    DOC ORDERS  SIGN    10/05/95 10/08/95 SUSPENDED
( 7) COLEMAN,MICHAEL   RED    CONSULT     SIGN    10/05/95 10/08/95 SUSPENDED
( 8) COLEMAN,MICHAEL   RED    OP NOTE     SIGN    10/05/95 10/07/95 SUSPENDED
( 9) COLEMAN,MICHAEL   RED    PROG NOTES  WRITE   10/05/95 10/07/95 SUSPENDED
(10) LEES,JACK R       BLACK  CONSULT     SIGN    10/05/95 10/08/95 SUSPENDED
(11) WOODBURN,ROBERT   BROWN  DOC ORDERS  SIGN    10/05/95 10/09/95 SUSPENDED
(12) WOODBURN,ROBERT   BROWN  CONSULT     SIGN    10/05/95 10/09/95 SUSPENDED
(13) WOODBURN,ROBERT   BROWN  OP NOTE     SIGN    10/05/95 10/08/95 SUSPENDED


Enter choice, add(A), complete all(C) or print deficiency slip(P)--
```

To edit, delete, or complete a deficiency, enter the option number corresponding to the deficiency to be edited, and this screen displays:

```
                General Hospital Add/Edit Deficiencies Processor
                                           Fri Oct 27, 1995 05:43 pm
Unit Number Acct Number Patient Name            Attending Physician
001043017   8922800005  PULLON,MICHAEL          ADAMS,HAROLD R
Chart Status  Location       Dis Date  Due Date Fin Class      Tot Charges
Incomplete    Medical Records 03/03/95 03/10/95 Medicare       $100,000.10

1 Phys/Dept                    2 Color     3 Deficiency
  ADAMS,HAROLD R                 Blue        HP   Hist & Phys
4 Status          5 Assign Date 6 Due Date 7 Activity Date  8 Reviewer
  Transcribe        03/03/95      03/10/95                    LTR
9 Transcription Document Number






Enter edit (E) or complete (C)
```

To complete the deficiency, enter **C**. The deficiency is completed and this message is displayed:

   Completed!

The message displays briefly, then returns to the screen from which you selected the deficiency.

To edit the deficiency, enter **E** on the previous screen.

Via the editing capability, you can update several data items on the above screen with the exception of the Phys/Dept and Deficiency fields. You can update the Transcription Document Number field only if the transcription interface is not in use on your system.

To update any of the other data items, enter the field number at the following prompt:

> *Enter field number or '/' starting field number--*

If you do not update any information and press ENTER, the following prompt displays:

> *Delete? (N)--*

If you press ENTER, the deficiency is not deleted, and you are returned to the screen where the deficiency was initially selected. To delete the deficiency, press **Y** for Yes followed by ENTER. The deficiency is deleted, and this message displays:

> *Delete Completed!*

The message displays briefly, then returns to the screen where the deficiency was initially selected.

Whether you edit, delete, or complete the deficiency, you are returned to this screen:

```
              General Hospital Add/Edit Deficiencies Processor
                                         Tue Oct 24, 1995 01:49 pm
Unit Number Acct Number Patient Name             Attending Physician
001043017   8922800005  PULLON,MICHAEL             ADAMS,HAROLD R
Chart Status  Location        Dis Date  Due Date  Fin Class       Tot Charges
WARNING                       09/27/95  10/22/95  MEDICARE          $49172.60
Page:01                                           Assign  Due     Def
     Physician         Color  Deficiency  Type    Date    Date    Status
( 1) ADAMS,HAROLD R    BLUE   DOC ORDERS  SIGN    10/05/95 10/08/95 SUSPENDED
( 2) ADAMS,HAROLD R    BLUE   HIST & PHY  SIGN    10/05/95 10/07/95 SUSPENDED
( 3) ADAMS,HAROLD R    BLUE   OP NOTE     SIGN    10/05/95 10/20/95 DELINQUEN
( 4) ADAMS,HAROLD R    BLUE   ATTEST      SIGN    10/05/95 10/07/95 SUSPENDED
( 5) ADAMS,HAROLD R    BLUE   DIS SUMM    DICTATE 10/05/95 10/07/95 SUSPENDED
( 6) COLEMAN,MICHAEL   RED    DOC ORDERS  SIGN    10/05/95 10/08/95 SUSPENDED
( 7) COLEMAN,MICHAEL   RED    CONSULT     SIGN    10/05/95 10/08/95 SUSPENDED
( 8) COLEMAN,MICHAEL   RED    OP NOTE     SIGN    10/05/95 10/07/95 SUSPENDED
( 9) COLEMAN,MICHAEL   RED    PROG NOTES  WRITE   10/05/95 10/07/95 SUSPENDED
(10) LEES,JACK R       BLACK  CONSULT     SIGN    10/05/95 10/08/95 SUSPENDED
(11) WOODBURN,ROBERT   BROWN  DOC ORDERS  SIGN    10/05/95 10/09/95 SUSPENDED
(12) WOODBURN,ROBERT   BROWN  CONSULT     SIGN    10/05/95 10/09/95 SUSPENDED
(13) WOODBURN,ROBERT   BROWN  OP NOTE     SIGN    10/05/95 10/08/95 SUSPENDED


Enter choice, add(A), complete all(C) or print deficiency slip(P)--
```

To complete all deficiencies on this account, enter **C**. The system automatically completes all deficiencies, and this message displays:

Completed!

The message displays briefly, then returns to the previous screen. All deficiencies now display a status of Complete.

To add deficiencies, enter **A** and this screen displays:

```
          General Hospital Add/Edit Deficiencies Processor
                                      Fri 03/03/95 10:15 am
Unit Number  Acct Number   Patient Name         Attending Phys
1234567890   1234567890    Pullon,Michael       ADAMS,HAROLD R
Chart Status Location          Dis Date     Due Date  Fin Class  Tot Charges
Incomplete   Medical Records   03/03/95     03/10/95  Medicare   $100,000.00
1 Phys/Dept                    2 Color            3 Deficiency

4 Type    5 Assign Date     6 Due Date     7 Activity Date    8 Reviewer

9 Transcription Document Number




Enter current phys (=), department(D) or physician[P]--
```

Field Explanations

1. PHYS/DEPT (6-N-R)
This data item accesses the Physician or Department code table and displays the department or physician name. If you enter an equal sign (=) the first time you enter this field for this patient the name of the attending physician displays. If you enter the equal sign (=) anytime thereafter (for example, while you are still editing this patient's deficiency record), the name of the last physician entered for this account displays in this field.

To enter a physician or department, enter **D** for Department or press ENTER to accept the default of **P** for physician. If you enter **D**, the department code table displays for selection. If you enter **P**, you are prompted to enter a table code. Enter the physician code if you know it, press hyphen (-) followed by ENTER to display the physician code table for selection, or enter the beginning letters of the physician name followed by hyphen (-) and press ENTER to display only those physicians whose name begins with those letters. This narrows the search, and you can select the physician from this list.

If you enter a code for a physician with an inactive date on the Physician Table Home Address/ID Numbers screen, the following error message is displayed:

Error: Physician no longer active.

2. COLOR (2-N-O)
This field is used to assign a color to a deficiency. This color corresponds to color-coded clips or tags that are placed in the record to signal a physician or department that there is a deficiency for which they are responsible. This field is optional and is for the convenience of the Medical Record Department, enabling quick assignment of a color to a deficiency. Only one color code can be added to one physician per account.

This data item accesses the Chart Deficiency Color code table. To select a color, enter the table code if you know it, or press hyphen (-) followed by ENTER to display the Chart Deficiency Color code table for selection. The code description displays in this field. If you select a color that has already been assigned to another physician on this account, the following error message displays:

Error: Color already assigned on this account!

If the physician or department you select currrertly has deficiencies on this account, the color associated with that physician or department automatically displays in this field.

3. DEFICIENCY (4-AN-R)
This field is used to indicate the deficiency the physician or department is responsible for completing, and accesses the Chart Deficiencies code table. To select a deficiency, enter the table code if you know it, or press hyphen (-) followed by ENTER to display the Chart Deficiencies code table for selection. Your entry in this field must match the actual entry built in the table, as the field is case-sensitive. You can select multiple entries from the table display.   The short description displays in this field.

Based on a parameter in the Chart Deficiencies Code table, you may or may not be able to assign a deficiency code to the same physician more than once on an account. If you enter a deficiency code that has already been assigned to this physician and it is a deficiency that cannot be assigned to a physician more than once, the following message displays:

Error! Deficiency already assigned for physician.

The message displays briefly, then you are returned to the prompt to select another deficiency.

4. TYPE (4-AN-R)
This field is used to further define what is required by the responsible physician or department in order to complete the deficiency. This data item accesses the Chart Deficiency Types table, and displays the type name. To select a type, enter the table code if you know it, or press hyphen (-) followed by ENTER to display the code table for selection. If you selected multiple deficiencies in the Deficiency field, the cursor remains on this field prompting you to enter a type for each deficiency assigned.

NOTE: If you make a type change after the deficiency status was complete, the system automatically changes this deficiency status back to an incomplete status. If the overall chart status was complete, this status is also changed back to an incomplete status.

5. ASSIGN DATE (DATE-R)

This is the date the deficiency is assigned to the physician or department, and is automatically completed by the system based on the deficiency code that is entered, therefore, the cursor does not stop on this field. You can, however, update this information prior to final acceptance of the screen. To update the field, enter the field number and press ENTER, then enter a valid date. The date can be in the past or future.

6. DUE DATE (DATE-R)

This is the date the deficiency is due to be completed by the physician or department, and is automatically completed by the system based on the deficiency code entered, therefore, the cursor does not stop on this field. You can, however, update this information prior to acceptance of the screen. To update the field, enter the field number and press ENTER, then enter a valid date. The date can be past or future, but cannot precede the Assign Date.

7. ACTIVITY DATE (DATE-O)

This date indicates when the activity associated with the deficiency occurred, such as the performance of a procedure or consultation. If the deficiency entered in the Activity Date field has a flag in the Chart Deficiencies table set to Y, then the system enables you to enter a date in the field. When this field is accessed, the following prompt displays:

Enter activity date for this deficiency--

Enter the date of the procedure, consultation or other activity. Press ENTER to bypass date entry. Do not enter a date that is not the date the activity occurred. This field can be completed at a later date when the information becomes available. The Activity Date will be displayed in this screen and the Deficiency History Screen.

When the transcription interface is active, the date is used to match deficiency information with the report header transmitted from the transcription system. The entering of an incorrect date in this field can cause a mismatch between the two systems. The mismatch can cause the deficiency type update to occur on the incorrect deficiency, or another deficiency to be added.

NOTE: The date entered here *does not* display on the screen listing all deficiencies for the account.

8. REVIEWER (3-A-R)

The data in this field should be initials of the person adding this deficiency. This data item is automatically completed by the system based on the initials of the person who signed on to the workstation in use, therefore, the cursor does not stop on this field. If

the Medical Record Transcription Interface is active and this deficiency entry was created by the system, three asterisks (***) display in this field. You can update this information prior to accepting the screen. To update the field, enter the field number and then enter up to three initials.

9. TRANSCRIPTION DOCUMENT NUMBER (DISPLAY ONLY OR 30-C-O)
When the transcription interface is active, this field contains the Unique Document Number or Unique Document File Name that was transmitted from the transcription system and associated with this deficiency. A number is contained in this field when the report header information created and/or updated the deficiency. This field is display only and cannot be edited.

The information in this field is valuable when there are multiples of the same deficiency for a physician. If the physician manually signs a report, the document number on the report and the document number in this field can be compared. If they match, then it is clear which deficiency should be marked complete by the chart analyst. This in turn removes the report entry for the physician in STAR Clinical Browser.

If you are not using the transcription interface, you can enter up to 30 characters in this field.

After you complete the Type field, you are prompted to accept the screen, as follows:

Accept this screen? (Y/N) [Y]--

If you do not accept the screen and enter **N** for No, the following prompt displays:

Enter field number or '/' starting field number--

At this point, you can edit any field, with the exception of the Phys/Dept field.

After you add the deficiency and accept the screen, the deficiency information is filed, and you are returned to this screen:

```
                  General Hospital Add/Edit Deficiencies Processor
                                          Tue Oct 24, 1995 01:49 pm
Unit Number Acct Number Patient Name             Attending Physician
001043017   8922800005  PULLON,MICHAEL           ADAMS,HAROLD R
Chart Status  Location          Dis Date  Due Date Fin Class      Tot Charges
WARNING                         09/27/95  10/22/95  MEDICARE         $49172.60
Page:01                                           Assign   Due      Def
     Physician        Color  Deficiency  Type     Date     Date     Status
( 1) ADAMS,HAROLD R   BLUE   DOC ORDERS  SIGN     10/05/95 10/08/95 SUSPENDED
( 2) ADAMS,HAROLD R   BLUE   HIST & PHY  SIGN     10/05/95 10/07/95 SUSPENDED
( 3) ADAMS,HAROLD R   BLUE   OP NOTE     SIGN     10/05/95 10/20/95 DELINQUEN
( 4) ADAMS,HAROLD R   BLUE   ATTEST      SIGN     10/05/95 10/07/95 SUSPENDED
( 5) ADAMS,HAROLD R   BLUE   DIS SUMM    DICTATE  10/05/95 10/07/95 SUSPENDED
( 6) COLEMAN,MICHAEL  RED    DOC ORDERS  SIGN     10/05/95 10/08/95 SUSPENDED
( 7) COLEMAN,MICHAEL  RED    CONSULT     SIGN     10/05/95 10/08/95 SUSPENDED
( 8) COLEMAN,MICHAEL  RED    OP NOTE     SIGN     10/05/95 10/07/95 SUSPENDED
( 9) COLEMAN,MICHAEL  RED    PROG NOTES  WRITE    10/05/95 10/07/95 SUSPENDED
(10) LEES,JACK R      BLACK  CONSULT     SIGN     10/05/95 10/08/95 SUSPENDED
(11) WOODBURN,ROBERT  BROWN  DOC ORDERS  SIGN     10/05/95 10/09/95 SUSPENDED
(12) WOODBURN,ROBERT  BROWN  CONSULT     SIGN     10/05/95 10/09/95 SUSPENDED
(13) WOODBURN,ROBERT  BROWN  OP NOTE     SIGN     10/05/95 10/08/95 SUSPENDED

Enter choice, add(A), complete all(C) or print deficiency slip(P)--
```

To print a deficiency slip, enter **P** and this message displays:

Printing Deficiency Slip!

The message displays briefly, then returns to the above screen.

Press ENTER while on this screen to return to the MPI patient lookup screen. Press ENTER on the MPI patient lookup screen to return to this prompt:

Add/Edit by Chart(C), Department(D), or Physician (P)--

Press ENTER to return to the Chart Deficiency menu.

Add/Edit Deficiencies by Department

To add or edit deficiencies by department, enter **D** (do not press ENTER) at the following prompt:

Add/Edit by Chart(C), Department(D), or Physician (P)--

The sequence of screens and prompts function in the same manner as for physician (**P**), with the exception of looking up and displaying information for a department versus a physician.

Add/Edit Deficiencies by Physician

To add or edit deficiencies by physician, select the menu item Add/Edit Deficiencies, and this prompt is displayed:

Add/Edit by Chart(C), Department(D), or Physician (P)--

Enter **P** and you are prompted to select a physician:

Enter first letter(s) `-` or code --

Select one of the following entry options:

•   Enter the physician's code if you know it.

•   Enter one or more letters of the physician's name followed by a hyphen (-) to display the borrower names that begin with those letters. For example, entering **AB-**, followed by pressing ENTER, displays all borrower names beginning with the letters AB. You can select a borrower from this list.

•   Press hyphen (-) followed by ENTER to display the entire Borrower table for selection.

Once a physician is selected, the MPI patient lookup screen is displayed. Select the desired patient, and the following screen is displayed:

```
                General Hospital Add/Edit Deficiencies Processor
                                            Fri Oct 27, 1995 05:17 pm
Unit Number      Name                     Sex   Birthdate  Corp Number
001043017        PULLON,MICHAEL            M    11/14/18   00002583

         Account Number    Type  Admit Date  Discharge Date           Page:01
( 1)     8922800005        I/P   08/10/95       09/27/95




















 Enter choice or add(A)--

```

NOTE: If you select a patient whose visit type is not included in deficiency tracking, this message is displayed:

Error: Cannot add deficiencies for this patient type

This indicates that the patient type parameter flag in Parameter Maintenance is set to No for this patient type for deficiency tracking. You are returned to the MPI patient lookup screen for selection of another patient. You can update the parameter in order to add this patient to deficiency tracking. If the selected patient's visit currently contains deficiencies for the selected physician, this screen is displayed:

```
              General Hospital Add/Edit Deficiencies Processor
                                              Tue Oct 24, 1995 01:49 pm
 Unit Number Acct Number Patient Name              Attending Physician
 001043017   8922800005  PULLON,MICHAEL            ADAMS,HAROLD R
 Chart Status  Location         Dis Date  Due Date Fin Class      Tot Charges
 WARNING                        09/27/95  10/22/95 MEDICARE          $49172.60
 Page:01                                           Assign   Due      Def
      Physician        Color  Deficiency  Type     Date     Date     Status
 ( 1) ADAMS,HAROLD R   BLUE   DOC ORDERS  SIGN     10/05/95 10/08/95 SUSPENDED
 ( 2) ADAMS,HAROLD R   BLUE   HIST & PHY  SIGN     10/05/95 10/07/95 SUSPENDED
 ( 3) ADAMS,HAROLD R   BLUE   OP NOTE     SIGN     10/05/95 10/20/95 DELINQUEN
 ( 4) ADAMS,HAROLD R   BLUE   ATTEST      SIGN     10/05/95 10/07/95 SUSPENDED
 ( 5) ADAMS,HAROLD R   BLUE   DIS SUMM    DICTATE  10/05/95 10/07/95 SUSPENDED




 Enter choice, add(A), complete all(C) or print deficiency slip(P)--
```

Because the physician whose deficiencies are to be added or edited has already been selected, the only deficiencies to display are those that are the responsibility of this physician. If there are no deficiencies for the specified physician, the screen still displays with the header information and this message:

No entries defined!

The message displays briefly, then this prompt is displayed:

Add a deficiency? (Y/N)--

If you enter **N** for No, you are returned to the MPI patient lookup screen for selection of another patient. To add a deficiency, enter **Y** for Yes at this prompt or enter **A** for Add on the preceding screen, and the following screen is displayed, allowing you to add a deficiency for the selected physician:

```
                 General Hospital Add/Edit Deficiencies Processor
                                             Fri 03/03/95 10:15 am
Unit Number   Acct Number    Patient Name          Attending Phys
1234567890    1234567890     Pullon,Michael        ADAMS,HAROLD R
Chart Status  Location          Dis Date    Due Date  Fin Class   Tot Charges
Incomplete    Medical Records   03/03/95    03/10/95  Medicare    $100,000.00
1 Phys/Dept                  2 Color          3 Deficiency
  ADAMS,HAROLD R
4 Type       5 Assign Date     6 Due Date    7 Activity Date   8 Reviewer

9 Transcription Document Number








Enter deficiency color or '-' to list--
```

The cursor and prompt begin on the Color field since the Phys/Dept field is
automatically completed as a result of identifying the responsible physician earlier in
the process.

Field Explanations

1. PHYS/DEPT (DISPLAY ONLY)
The name of the selected physician or department displays in this field. The name is
truncated as space provides. The field cannot be edited at this time.

2. COLOR (2-N-O)
This field is used to assign a color to a deficiency. This color corresponds to color
coded clips or tags that are placed in the record to signal a physician there is a
deficiency in the record for which they are responsible for completing. This field is
optional and is for the convenience of the Medical Record Department, enabling quick
assignment of a color to a deficiency. Only one color code can be added to one
physician per account.

This data item accesses the Chart Deficiency Color code table. To select a color, enter
the table code if you know it, or press hyphen (-) followed by ENTER to display the
Chart Deficiency Color code table for selection. The code description displays in this
field. If you select a color that has already been assigned to another physician on this
account, the following error message displays:

Error: Color already assigned on this account!

If the physician or department you select currertly has deficiencies on this account, the color associated with that physician or department automatically displays in this field.

3. DEFICIENCY (4-AN-R)
This field is used to indicate the deficiency the physician is responsible for completing, and accesses the Chart Deficiendes code table. To select a deficiency, enter the table code if you know it, or press hyphen (-) followed by ENTER to display the Chart Deficiencies code table for selection. You can select multiple entries from the table display. The short description displays in this field.

Based on a parameter in the Chart Deficiencies code table, you may or may not be able to assign a deficiency code to the same physician more than once on an account. If you enter a deficiency code that has already been assigned to this physician and it is a deficiency that cannot be assigned to a physician more than once, the following message displays:

> *Error! Deficiency already assigned for physician.*

The message displays briefly, then you are returned to the prompt to select another deficiency.

4. TYPE (4-AN-R)
This field is used to further define what is required by the responsible physician in order to complete the deficiency. This data item accesses the Chart Deficiency Types table, and displays the type name. To select a type, enter the table code if you know it, or press hyphen (-) followed by ENTER to display the code table for selection. If you selected multiple deficiencies in the Deficiency field, the cursor remains on this field prompting you to enter a type for each deficiency assigned.

NOTE: If you make a type change after the deficiency status was complete, the system automatically changes this deficiency status back to incomplete. If the overall chart status was complete, this status is also changed back to incomplete.

5. ASSIGN DATE (DATE-R)
This is the date the deficiency is assigned to the physician. It is automatically completed by the system based on the deficiency code that is entered; therefore, the cursor does not stop on this field. You can, however, update this information prior to final acceptance of the screen. To update the field, enter the field number then enter a valid date. The date can be in the past or future.

6. DUE DATE (DATE-R)
This is the date the deficiency is due to be completed by the physician. It is automatically completed by the system based on the deficiency code entered; therefore, the cursor does not stop on this field. You can, however, update this information prior to acceptance of the screen. To update the field, enter the field number then enter a valid date. The date can be past or future, but cannot precede the Assign Date.

7. ACTIVITY DATE (DATE-O)
This date indicates when the activity associated with the deficiency occurred, such as the performance of a procedure or consultation. If the deficiency entered in the Activity Date field has a flag in the Chart Deficiencies table set to Y, then the system enables you to enter a date in the field. When this field is accessed, the following prompt displays:

Enter activity date for this deficiency--

Enter the date of the procedure, consultation or other activity. Press ENTER to bypass date entry. Do not enter a date that is not the date the activity occurred. This field can be completed at a later date when the information becomes available. The Activity Date will be displayed in this screen and the Deficiency History Screen.

When the transcription interface is active, the date is used to match deficiency information with the report header transmitted from the transcription system. The entering of an incorrect date in this field can cause a mismatch between the two systems. The mismatch can cause the deficiency type update to occur on the incorrect deficiency, or another deficiency to be added.

NOTE: The date entered here *does not* display on the screen listing all deficiencies for the account.

8. REVIEWER   (3-A-R)
The data in this field should be initials of the person adding this deficiency. This data item is automatically completed by the system based on the initials of the person who signed on to the workstation in use, therefore, the cursor does not stop on this field. If the Medical Record Transcription Interface is active and this deficiency entry was created by the system, three asterisks (***) display in this field. You can update this information prior to accepting the screen. To update the field, enter the field number then enter up to three initials.

9. TRANSCRIPTION DOCUMENT NUMBER (DISPLAY ONLY OR 30-C-O)
When the transcription interface is active, this field contains the Unique Document Number or Unique Document File Name that was transmitted from the transcription system and associated with this deficiency. A number is contained in this field when the report header information created and/or updated the deficiency. This field is display only and cannot be edited.

The information in this field is valuable when there are multiples of the same deficiency for a physician. If the physician manually signs a report, the document number on the report and the document number in this field can be compared. If they match, then it is clear which deficiency should be marked complete by the chart analyst. This in turn removes the report entry for the physician in STAR Clinical Browser.

If you are not using the transcription interface, you can enter up to 30 characters in this field.

After you complete the Type field, you are prompted to accept the screen, as follows:

Accept this screen? (Y/N) [Y]--

If you do not accept the screen and enter **N** for No, the following prompt displays:

Enter field number or '/' starting field number--

At this point, you can edit any field, with the exception of the Phys/Dept field.

After you accept the screen, the deficiency information is filed, and you are returned to this screen:

```
              General Hospital Add/Edit Deficiencies Processor
                                          Tue Oct 24, 1995 01:49 pm
Unit Number Acct Number Patient Name          Attending Physician
001043017   8922800005  PULLON,MICHAEL          ADAMS,HAROLD R
Chart Status  Location        Dis Date  Due Date  Fin Class      Tot Charges
WARNING                       09/27/95  10/22/95  MEDICARE           $49172.60
Page:01                                          Assign    Due      Def
      Physician        Color   Deficiency  Type   Date     Date     Status
( 1) ADAMS,HAROLD R   BLUE    DOC ORDERS  SIGN    10/05/95 10/08/95 SUSPENDED
( 2) ADAMS,HAROLD R   BLUE    HIST & PHY  SIGN    10/05/95 10/07/95 SUSPENDED
( 3) ADAMS,HAROLD R   BLUE    OP NOTE     SIGN    10/05/95 10/20/95 DELINQUEN
( 4) ADAMS,HAROLD R   BLUE    ATTEST      SIGN    10/05/95 10/07/95 SUSPENDED
( 5) ADAMS,HAROLD R   BLUE    DIS SUMM    DICTATE 10/05/95 10/07/95 SUSPENDED




Enter choice, add(A), complete all(C) or print deficiency slip(P)--
```

To edit, delete, or complete a deficiency, enter the option number corresponding to the deficiency, and this screen displays:

```
                    General Hospital Add/Edit Deficiencies Processor
                                             Fri Oct 27, 1995 05:43 pm
Unit Number Acct Number Patient Name                Attending Physician
001043017   8922800005  PULLON,MICHAEL              ADAMS,HAROLD R
Chart Status  Location          Dis Date  Due Date Fin Class       Tot Charges
Incomplete    Medical Records 03/03/95  03/10/95 Medicare        $100,000.10

1 Phys/Dept                      2 Color     3 Deficiency
  ADAMS,HAROLD R                   Blue         HP   Hist & Phys
4 Status          5 Assign Date  6 Due Date 7 Activity Dat    8 Reviewer
  Transcribe         03/03/95       03/10/95                      LTR
9 Transcription Document Number







Enter edit (E) or complete (C)--
```

To complete the deficiency, enter **C**. The deficiency is completed and this message displays:

   Completed!

The message displays briefly, then returns to the screen from which the deficiency was selected.

To edit the deficiency, enter **E** on the previous screen.

Via the editing capability, you can update several data items on the above screen with the exception of the Phys/Dept and Deficiency fields. You can edit the Transcription Document Number field only if the transcription interface is not in use on your system. For field explanations, refer to the previous discussion regarding adding deficiencies.

To update any of the data items, enter the field number as prompted.

If you do not update any information and press ENTER, the following prompt displays:

   Delete? (N)--

If you press ENTER the deficiency is not deleted, and you are returned to the screen where the deficiency was initially selected. To delete the deficiency, enter **Y** for Yes. The deficiency is deleted, and this message displays:

   Delete Completed!

The message displays briefly, then returns to the screen where the deficiency was initially selected.

Whether you edit, delete, or do not edit the deficiency, you are returned to this screen:

```
            General Hospital Add/Edit Deficiencies Processor
                                        Tue Oct 24, 1995 01:49 pm
Unit Number Acct Number Patient Name              Attending Physician
001043017   8922800005  PULLON,MICHAEL            ADAMS,HAROLD R
Chart Status  Location        Dis Date  Due Date  Fin Class       Tot Charges
WARNING                       09/27/95  10/22/95  MEDICARE            $49172.60
Page:01                                           Assign    Due      Def
    Physician          Color  Deficiency  Type    Date      Date     Status
( 1) ADAMS,HAROLD R    BLUE   DOC ORDERS  SIGN    10/05/95 10/08/95 SUSPENDED
( 2) ADAMS,HAROLD R    BLUE   HIST & PHY  SIGN    10/05/95 10/07/95 SUSPENDED
( 3) ADAMS,HAROLD R    BLUE   OP NOTE     SIGN    10/05/95 10/20/95 DELINQUEN
( 4) ADAMS,HAROLD R    BLUE   ATTEST      SIGN    10/05/95 10/07/95 SUSPENDED
( 5) ADAMS,HAROLD R    BLUE   DIS SUMM    DICTATE 10/05/95 10/07/95 SUSPENDED




 Enter choice, add(A), complete all(C) or print deficiency slip(P)--
```

To complete all deficiencies for this physician on this account, enter **C** for Complete. The system completes all the deficiencies and this message displays:

> *Completed!*

The message displays briefly, then returns to the previous screen. All deficiencies for the selected physician display a status of complete.

To add deficiencies, enter **A** and this screen displays:

```
              General Hospital Add/Edit Deficiencies Processor
                                         Fri Mar 03, 1995 10:15 am
Unit Number   Acct Number    Patient Name          Attending Phys
1234567890    1234567890     Pullon,Michael        ADAMS,HAROLD R
Chart Status Location           Dis Date   Due Date  Fin Class   Tot Charges
Incomplete   Medical Records    03/03/95   03/10/95  Medicare    $100,000.00
1 Phys/Dept                   2 Color           3 Deficiency
  ADAMS,HAROLD R
4 Type      5 Assign Date     6 Due Date    7 Activity Date    8 Reviewer

9 Transcription Document Number












 Enter deficiency color or '-' to list--
```

For field explanations and instructions on adding a deficiency, refer to the previous
discussion on adding a deficiency at the beginning of this chapter.

After you add a deficiency and accept the screen, the deficiency information is filed,
and you are returned to this screen:

```
              General Hospital Add/Edit Deficiencies Processor
                                       Tue Oct 24, 1995 01:49 pm
Unit Number Acct Number Patient Name            Attending Physician
001043017   8922800005  PULLON,MICHAEL          ADAMS,HAROLD R
Chart Status  Location          Dis Date  Due Date  Fin Class     Tot Charges
WARNING                         09/27/95  10/22/95  MEDICARE       $49172.60
Page:01                                            Assign   Due      Def
     Physician         Color  Deficiency  Type     Date     Date     Status
( 1) ADAMS,HAROLD R   BLUE    DOC ORDERS  SIGN     10/05/95 10/08/95 SUSPENDED
( 2) ADAMS,HAROLD R   BLUE    HIST & PHY  SIGN     10/05/95 10/07/95 SUSPENDED
( 3) ADAMS,HAROLD R   BLUE    OP NOTE     SIGN     10/05/95 10/20/95 DELINQUEN
( 4) ADAMS,HAROLD R   BLUE    ATTEST      SIGN     10/05/95 10/07/95 SUSPENDED
( 5) ADAMS,HAROLD R   BLUE    DIS SUMM    DICTATE  10/05/95 10/07/95 SUSPENDED







 Enter choice, add(A), complete all(C) or print deficiency slip(P)--
```

To print a deficiency slip, enter **P** and this message displays:

Printing Deficiency Slip!

The message displays briefly, then returns to the previous screen.

Press ENTER while on the above screen, and you are returned to the MPI patient lookup screen. Press ENTER while on the MPI patient lookup screen, and the prompt to select a physician redisplays and you can enter a new physician number for adding or editing deficiencies. Press ENTER while on the prompt to select a physician, and you are returned to the following prompt:

Add/Edit by Chart(C), Department(D), or Physician (P) --

Press ENTER to return to the Chart Deficiency menu.

DEFICIENCY HISTORY

The Deficiency History Processor screen contains information regarding changes made to the selected defciency on a selected account. The screen displays additional information and details regarding the deficiency. Deficiencies display in chronological order based on their entry date.

Select Deficiency History, and the MPI patient lookup screen displays. Once you select the desired patient and appropriate account, this screen displays:

```
              General Hospital Deficiency History Processor
                                        Tue Oct 24, 1995 01:50 pm
Unit Number Acct Number Patient Name          Attending Physician
001043017   8922800005  PULLON,MICHAEL         ADAMS,HAROLD R
Chart Status  Location        Dis Date  Due Date
WARNING                       09/27/95  10/22/95
Page:01                                         Assign    Due       Rev
      Physician         Color  Deficiency  Status  Date      Date      Init
( 1) ADAMS,HAROLD R   BLUE    DOC ORDERS  SUSPENDE 10/05/95  10/08/95  LTR
( 2) ADAMS,HAROLD R   BLUE    HIST & PHY  SUSPENDE 10/05/95  10/07/95  LTR
( 3) ADAMS,HAROLD R   BLUE    OP NOTE     DELINQUE 10/05/95  10/20/95  LTR
( 4) ADAMS,HAROLD R   BLUE    ATTEST      SUSPENDE 10/05/95  10/07/95  LTR
( 5) ADAMS,HAROLD R   BLUE    DIS SUMM    SUSPENDE 10/05/95  10/07/95  LTR
( 6) COLEMAN,MICHAEL  RED     DOC ORDERS  SUSPENDE 10/05/95  10/08/95  LTR
( 7) COLEMAN,MICHAEL  RED     CONSULT     SUSPENDE 10/05/95  10/08/95  LTR
( 8) COLEMAN,MICHAEL  RED     OP NOTE     SUSPENDE 10/05/95  10/07/95  LTR
( 9) COLEMAN,MICHAEL  RED     PROG NOTES  SUSPENDE 10/05/95  10/07/95  LTR
(10) LEES,JACK R      BLACK   CONSULT     SUSPENDE 10/05/95  10/08/95  LTR
(11) WOODBURN,ROBERT  BROWN   DOC ORDERS  SUSPENDE 10/05/95  10/09/95  LTR
(12) WOODBURN,ROBERT  BROWN   CONSULT     SUSPENDE 10/05/95  10/09/95  LTR
(13) WOODBURN,ROBERT  BROWN   OP NOTE     SUSPENDE 10/05/95  10/08/95  LTR

Enter choice--

```

This screen displays all deficiencies (complete and incomplete) for the selected patient. To view the history of a specific deficiency, enter the option number corresponding to the desired deficiency and press ENTER. The following screen displays:

```
              General Hospital Deficiency History Processor
                                             Tue Apr 18, 1995 03:42 pm
 Unit Number Acct Number Patient Name              Attending Physician
 000000204   9315500001  ROOTHONE,TESTONE          ADAMS,HAROLD R
 Chart Status  Location        Dis Date  Due Date
 SUSPENDED12345ADMINIST        10/15/93  07/28/93
  1 Phys/Dept.                   2 Color          3 Deficiency
    ADAMS,HAROLD R                 BROWN            DO DOC ORDERS
  4 Report Originator ID        5 Activity Date
    55696
  6 Deficiency Audit Detail




 Enter field number or '/' starting field number--
```

The information in Deficiency History is display only and cannot be edited.

Field Explanations

1. PHYS/DEPT
This is the name of the physician or department to whom this deficiency was assigned.

2. COLOR
This is the color flag for the deficiency, which should correspond to the color-coded tag on the medical record for this physician or department. This is an optional entry field; therefore, it may not always contain data.

3. DEFICIENCY
This is the deficiency (code and description) for which the physician or department is responsible.

4. REPORT ORIGINATOR ID
This field indicates the number and name of the person who originated (i.e., dictated) the deficiency. This field contains data only when the transcription interface is active and the report header information has been transmitted to STAR. The originator ID can differ from the entry in Phys/Dept field. This can happen when the person dictating the report is not the same as the person responsible for the deficiency.

5. ACTIVITY DATE
This date indicates when the activity associated with the deficiency was performed, such as, a procedure or consultation. The date that displays in the field can be entered in one of two ways: at the time the deficiency is created, or entered at a later date via the Add/Edit Deficiency Processor screen.

6. DEFICIENCY AUDIT DETAIL
This field tracks updates made to the deficiency type for the selected deficiency. For each entry or update made to the deficiency, STAR displays the following:

- The date and time the change was made.

- The initials of the person responsible for making the change. When STAR automatically makes a type change, three asterisks (***) are displayed.

- The from and to type associated with the deficiency to indicate the pre- and post change

- The from and to status of the deficiency at the time the change was made.

Entries that display in the field can be created by any one of the following:

- The deficiency type is manually updated via the Add/Edit Deficiency Processor screen.

- The deficiency type is automatically updated by STAR when the report header has been transmitted to STAR. This only occurs when the transcription interface is active.

- The deficiency status is marked complete or updated by a manual change to either the assign date or due date via the Add/Edit Deficiency Processor screen.

- The deficiency status is automatically updated by STAR when a report is electronically signed by the physician. This only occurs when the transcription interface is active.

NOTE: Entries *are not* created when a deficiency status changes due to the aging that occurs during Midnight Processing.

The audit information displays in chronological order, based on the date and time the change occurs. This is a scrolling screen, with no limit to the number of changes that can be stored and displayed. To view more entries in the field, use the slash (/) key to enter the field. When the field is entered, the screen displays the scrolling screen function keys used to view additional information.

Press ENTER to return to the screen listing all deficiencies for this patient. You can select another deficiency on which to view history by following the procedure as instructed above, or press ENTER to return to the MPI patient lookup to select another patient. Select another patient, or press ENTER to return to the Chart Deficiency menu.

DEFICIENCY WORK LIST BY PHYSICIAN

This function enables you to view, online, the charts (and associated deficiencies) for which a physician or department is responsible. You can view the deficiencies by chart or by deficiency, however, you cannot print via this option.

To view the deficiencies, select Deficiency Work List by Physician from the Chart Deficiency menu. You are prompted to select by department or physician, as follows:

Enter department(D) or physician[P]--

To select a department, enter **D**. To select a physician, press ENTER to accept the default of **P**. Whichever entry is selected, the following prompt displays asking you to enter the table code for the physician or department:

Enter first letter(s) '-' or code--

Select one of the following entry options:

• Enter the physician or department code if you know it.

• Enter one or more letters of the physician or department name followed by a hyphen (-) and ENTER to display the physician or department names that begin with those letters. (For example, **AB-** displays all physician (or department) names beginning with those letters).

• Press hyphen (-) followed by ENTER to display the entire physician or department table for selection.

After you select a physician or department, the following prompt displays asking if you want to sort the information by chart or by deficiency:

Display by deficiency(D) or chart(C)--

To display the listing by deficiency code, enter **D** and the following message is displayed:

Processing!

The message displays until the listing is completed, then the screen displays a listing of all deficiencies for the selected physician or department sorted by deficiency code.

To display the listing by chart, enter **C** and this message is displayed:

Processing!

The message displays until the listing is completed, then this screen displays, listing all deficiencies for the selected physician or department by chart:

```
           General Hospital Deficiency Work List by Physician Processor
                                    Tue Oct 24, 1995 01:51 pm
COLEMAN,MICHAEL G
Unit Number    Name            Sex  Birthdate Type Episode
    Deficiency          Assigned                                    Status
0000104609     COUSINS,SERINA F     05/05/56  SDS  10/05/95 - 10/05/95
    DOC ORDERS          10/05/95                                    SUSPEN
    HIST & PHY          10/05/95                                    SUSPEN
    FACE SHEET          10/05/95                                    SUSPEN
    OP NOTE             10/05/95                                    SUSPEN

001043017      PULLON,MICHAEL    M  11/14/18  I/P  08/10/95 - 09/27/95
    DOC ORDERS          10/05/95                                    SUSPEN
    CONSULT             10/05/95                                    SUSPEN
    OP NOTE             10/05/95                                    SUSPEN
    PROG NOTES          10/05/95                                    SUSPEN




    Press NL--
```

For either selection (deficiency or chart), press ENTER after you view the listing to return to the prompt. Press period (.) and ENTER at this prompt to return to the Chart Deficiency menu.

Field Explanations

UNIT NUMBER
This is the unit number of the episode that contains a deficiency.

NAME
This is the name of the patient whose record contains a deficiency.

SEX
This is the sex of the patient (M for Male, F for Female).

BIRTHDATE
This is the birthdate of the patient.

TYPE
This is the patient type for this episode.

EPISODE
This is the dates of admission and discharge for this episode. If a discharge date does not display, the patient has not yet been discharged.

DEFICIENCY
This is the short description of the deficiency as found in the Chart Deficiencies code table.

ASSIGNED
This is the date the deficiency was assigned to the physician or department.

STATUS
This is the status of the deficiency.

CHART DEFICIENCY REPORTS

When you select this function, this submenu is displayed:

```
                    General Hospital Chart Deficiency Reports Processor
                                              Sun Jul 24, 2005 06:07 pm
Chart Deficiency Reports Input Options

          Option No.  Option
          --------------------------------------
             1        Deficiency Slip
             2        Deficiency Work List Report
             3        Deficiency Notices
             4        Deficiency Code Report
             5        Billing Delay Report
             6        Status By Physician Report
             7        Chart Status Report
             8        Current Discharges Report
             9        Incomplete Summary by Physician
            10        Incomplete Summary by Chart
            11        Incomplete Aging Report
            12        Physician Activity Report
            13        Charts Requiring Analysis Report
            14        Deficiency Summary/Audit Reports
            15        Electronic Authentication Report
            16        Print Bar Code Labels
Enter option number--
```

Deficiency Slip

This option is used to print a deficiency slip for an individual patient account without going through the Add/Edit Deficiency option on the Chart Deficiency menu. The deficiency slip prints at the default printer for the CRT.

NOTE: You can use the STAR Audit Service to audit user requests for this report. The Audit Service collects and stores information such as report request date and time, the name of the user requesting the report, and the criteria selected for the report. For more information, see the *STAR Audit Service Reference Guide.*

Deficiency slips identify the items on an account that a physician/department is responsible for completing. The information that displays in the body of the deficiency slip at each facility depends on how the Def Slip Print Opt field in Chart Management Parameters is defined. When you select this option, the MPI patient lookup screen displays for patient selection. After you select the patient, this screen displays:

```
                General Hospital Deficiency Slip Processor
                                          Tue Jun 18, 2002 01:52 pm
Unit Number      Name                     Sex   Birthdate  Corp Number     Exp
001043017        PULLON,MICHAEL           M     11/14/18   00002583

        Account Number    Type  Admit Date  Discharge Date          Page:01
( 1)     8922800005       I/P   08/10/95      09/27/95

















Enter choice--
```

This screen lists all the accounts in Chart Deficiency for the selected patient. Select the account for which a deficiency slip should be printed by entering the option number corresponding to the desired account.

NOTE: Enter the account number on the MPI patient lookup screen to bypass the above screen.

After you select the account, this message displays:

Printing Deficiency Slip!

The message displays briefly, then returns to the MPI patient lookup screen for selection of another patient. If you do not want to select another patient, press ENTER to return to the Chart Deficiency Reports menu.

Figure 2.1 Deficiency Slip

```
Tue Jun 18, 2002 10:46 am       Model Hospital A                      Page 1
                             Chart Deficiency Slip

Patient:    TANNER,CHARLES                Acct #:    0216600001
Adm Date:   06/05/02                      Unit #:    000-00-2308
Dis Date:   06/06/02                      Fin Class: BLUE CROSS
Pat Type:   I/P                           Chart Status: INCOMPLETE


                          Bill   Deficiency  Assign    Due
Deficiency           Type  Delay   Status    Date      Date      Color
------------------------------------------------------------------------------

 Physician: ADAMS,HAROLD R           Phys #: 1

  HIST & PHY         SIGN    Yes    SUSPENDED  06/05/02  06/07/02  BLUE
  ATTEST             SIGN    Yes    SUSPENDED  06/05/02  06/07/02  BLUE
  DIS SUMM           DICTATE Yes    SUSPENDED  06/05/02  06/07/02  BLUE
  DOC ORDERS         SIGN    No     SUSPENDED  06/05/02  06/08/02  BLUE
  OP NOTE            SIGN    Yes    DELINQUENT 06/05/02  06/07/02  BLUE

 Physician: COLEMAN,MICHAEL G         Phys #: 10

  OP NOTE            SIGN    Yes    SUSPENDED  06/05/02  06/07/02  RED
  PROG NOTES         WRITE   No     SUSPENDED  06/05/02  06/07/02  RED
  DOC ORDERS         SIGN    No     SUSPENDED  06/05/02  06/08/02  RED
  CONSULT            SIGN    No     SUSPENDED  06/05/02  06/08/02  RED

 Physician: LEES,JACK R              Phys #: 2

  CONSULT            SIGN    No     SUSPENDED  06/05/02  06/08/02  BLACK

 Physician: WOODBURN,ROBERT LOUI     Phys #: 30

  OP NOTE            SIGN    Yes    SUSPENDED  06/05/02  06/08/02  BROWN
  DOC ORDERS         SIGN    No     SUSPENDED  06/05/02  06/09/02  BROWN
  CONSULT            SIGN    No     SUSPENDED  06/05/02  06/09/02  BROWN



                 Printed By/Date:FAYE,LENNY T 06/18/02
```

The header information on the deficiency slip includes the patient name, account number for this episode, admission date, unit number, discharge date, financial class, patient type, and chart status. If you set the system parameter to print one deficiency slip per physician, then the name of the responsible physician also displays in the header information. If you set the system parameter to print one deficiency slip per chart, the name of the responsible physician displays in the body of the deficiency slip (as shown in the example above). The footer of the report includes the name of the person who printed the deficiency slip and the date it was printed.

Field Explanations

DEFICIENCY
This field displays the short description of the deficiency code, and indicates what the physician or department is responsible for completing.

TYPE

This field displays the deficiency type description, and indicates what the physician or department must do in order to complete the deficiency.

BILL DELAY

This field displays Yes or No and indicates whether this deficiency is considered a billing delay. If Yes displays, then this deficiency is flagged as a billing delay. If No displays, then this deficiency is not flagged as a billing delay. The billing delay flag is set up in the Chart Deficiencies Code table.

DEFICIENCY STATUS

This field displays the current status of the deficiency based on the aging parameters set up in the Chart Deficiencies Code table.

ASSIGN DATE

This is the date the deficiency was assigned to the responsible physician or department.

DUE DATE

This is the date the deficiency is due to be completed.

COLOR

This is the color that corresponds to the color coded tags or clips placed on the medical record to assist the physician or department in locating the deficiencies for which they are responsible for completing.

NOTE: Any comments (comments can be entered only in GUI Chart Management) associated with the deficiency print after the deficiency information.

Deficiency Work List Report

This report is an up-to-date list of all deficiencies that a physician or department is responsible for completing. This report is used when physicians come to the department to have charts pulled for completion. This report can also be helpful as an auditing tool for the physician incomplete file and as a backup to the system when downtime occurs.

NOTE: You can use the STAR Audit Service to audit user requests for this report. The Audit Service collects and stores information such as report request date and time, the name of the user requesting the report, and the criteria selected for the report. For more information, see the *STAR Audit Service Reference Guide.*

When you select this report option, the following screen is displayed:

```
                General Hospital Deficiency Work List Report Processor
                                          Mon May 19, 2003 10:38 am

( 1)Physician/Dept          :
( 2)Deficiency              :
( 3)Deficiency Type         :
( 4)Deficiency Status       :
( 5)Patient Type            :
( 6)Page Break on Primary Srt:
( 7)Primary Sort Option     :
( 8)Primary Subtotals       :
( 9)Secondary Sort Option   :
(10)Secondary Subtotals     :
(11)Display or Print        :




Enter physician/department codes separated by `,`, `-` for table lookup, Partial
 Name`-`, or `=` for All [All]--
```

Field Explanations

1. PHYSICIAN/DEPT.   (TABLE LOOKUP-R)
This field is used to select the physicians/departments to include on the report. The default is All. When you access this field, the following prompt is displayed:

Enter physician/department codes separated by `,`, `-` for table lookup, Partial Name`-`, or `=` for All [All]--

Use one of the following entry methods:

•   Enter the physician or department code(s) separated by commas.

    NOTE: If you enter a code that is not in the Physician or Department table or a code for a physician/department that has no deficiencies, an error message is displayed.

•   Enter a hyphen (-) to display all physicians and departments with incomplete deficiencies. You can select multiple entries from this listing.

•   Enter the first letter or few letters of a physician or department name, followed by a hyphen (-) for a table lookup. You can select multiple entries from this listing.

•   Enter an equal sign (=) or press ENTER for All to indicate the report should include all physicians with incomplete deficiencies. When you enter =, you cannot choose from a list of physicians; all physicians are automatically included in the report.

2. DEFICIENCY (TABLE LOOKUP-R)
This field identifies the deficiencies to be included in the report and accesses the Chart Deficiencies code table. The default is All. When you access this field, the following prompt is displayed:

Enter chart deficiency code(s) separated by ',','=' for All, or '-' for list [All]--

Use one of the following entry methods:

• Enter the deficiency code(s), separated by commas.

• Press hyphen (-) to display the Chart Deficiencies code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency codes will be included on the report.

3. DEFICIENCY TYPE (TABLE LOOKUP-R)
This field identifies the deficiency types to be included in the report and accesses the Chart Deficiency Types code table. The default is All. When you access this field, the following prompt is displayed:

Enter deficiency type code(s) separated by ',','=' for All, or '-' for list [All]--

Use one of the following entry methods:

• Enter the deficiency type(s), separated by commas.

• Press hyphen (-) to display the Chart Deficiency Types code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency types will be included on the report.

4. DEFICIENCY STATUS (TABLE LOOKUP-R)
This field identifies the deficiency statuses to be included in the report and accesses the Chart Deficiency Status code table. The default is All. When you access this field, the following prompt is displayed:

Enter deficiency status code(s) separated by ',','=' for All, or '-' for list [All]--

Use one of the following entry methods:

• Enter the deficiency status(es), separated by commas.

• Press hyphen (-) to display the Chart Deficiency Status code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency statuses will be included on the report.

5. PATIENT TYPE (TABLE LOOKUP-R)
This field identifies the patient types to be included on the report. The default is All. When you access this field, the following prompt is displayed:

> *Enter patient type codes separated by `,`, `-` for table lookup, Partial Name`-`*
> *, or `=` for All [All]--*

Use one of the following entry methods:

• Enter the patient type code(s), separated by commas.

• Enter a hyphen (-) to display the Patient Type table. You can select multiple entries from this list.

• Enter the first few letters of the patient type followed by a hyphen (-). All patient types with descriptions that begin with the letters you entered are displayed for selection, along with their codes. For example, if you enter OUT-, the following might display: OPB - outpatient in bed, OPO - outpatient observation, OPT - outpatient preadmission testing, and OPS - outpatient surgery.

If you do not make an entry and press ENTER, the field displays *All*, indicating all patient types will be included on the report.

6. PAGE BREAK ON PRIMARY SRT (1-A-R)
Indicate if you want each primary sort item on a separate page. The default is Yes. For example, if your primary sort is physician, each physician is included on a separate page.

7. PRIMARY SORT OPTION   (TABLE LOOKUP-R)
This field indicates the primary sort option for the work list report. The default is physician.

The work list report has a primary and a secondary sort option. For example, you can sort the report by physician, then by deficiency status.

NOTE: Keep your selection options in mind when you select your sort options. If you are including only one physician on the report, then you may want to sort by physician so the work list report is not split over several pages. If you choose another primary sort, your report page breaks by that sort criteria.

When you access this field, these options display for selection:

> *(1) Account Number*
> *(2) Def Assign Date*
> *(3) Deficiency*

(4) Deficiency Status
(5) Deficiency Type
(6) Discharge Date
(7) Patient Name
(8) Patient Type
(9) Physician
(10) Terminal Digit
(11) Unit Number

Enter desired primary sort option [Physician] --

Enter the number to the left of the desired option to select a sort option. If you do not complete this field, an error message is displayed, indicating this is a required field.

8. PRIMARY SUBTOTALS (1-A-R)
This field indicates if subtotals for the primary sort should be included on the report. Enter **Y** or press ENTER for the default of Yes, and the subtotals are included. Enter **N**, and subtotals are not included.

9. SECONDARY SORT OPTION (TABLE LOOKUP-R)
This field indicates the second sort option for the work list, working in conjunction with the primary sort option entered in the previous field. The default is Unit Number.

Keep your selection options in mind when you select your sort options. For example, if you are including multiple physicians on the report and only one deficiency status, then a secondary sort of Deficiency Status is not necessary.

When you access this field, the following options display for selection (except the option you chose for primary sort is not included):

(1) Account Number
(2) Def Assign Date
(3) Deficiency
(4) Deficiency Status
(5) Deficiency Type
(6) Discharge Date
(7) Patient Name
(8) Patient Type
(9) Physician
(10) Terminal Digit
(11) Unit Number

Enter desired secondary sort option [Terminal Digit}--

Enter the number to the left of the desired option to select a sort option. If you do not select a sort option and press ENTER, the system uses the default secondary sort of Terminal Digit.

10. SECONDARY SUBTOTALS (1-A-R)
This field indicates if subtotals for the secondary sort should be included on the report. Enter **Y** or press ENTER for the default of Yes, and the subtotals are included. Enter **N**, and subtotals are not included.

11. DISPLAY OR PRINT (1-A-R)
Enter **D** to display the work list on your screen or **P** to print the work list to the designated printer. The default is D.

Figure 2.2 Deficiency Work List Report

```
Wed May 21, 2003 03:10 pm      Model Hospital A                    Page 1
                            Deficiency Work List
                            Primary Sort: Physician
                          Secondary Sort: Terminal Digit

Unit Number     Patient Name          P/T Sex   Birthdate   Corp No
 Account Number Account Dates         Cht Status Charges   Location/Borrower
  Deficiency Def Type      Physician/Dept  Assigned  Due Date  Def Status Sig
-------------------------------------------------------------------------------

*GREEN,KRIEL ETAL

000-00-2309    TATE,CHARLA            IPC F     03/25/64    00002656
 0311500020     04/25/03 -            SUSPENDED1 $18,613.02 QUAL ASSUR/REVIEW
  HIST & PHY   DICTATE      *GREEN,KRIEL E  04/25/03  04/27/03  SUSPENDED1 No

000-00-2554    KASSMEIER,CONRAD       CON M     01/01/11    00002985
 0135500001     12/21/02 - 12/21/02  INCOMPLETE      $.00
  ANST NOTE    DICTATE      *GREEN,KRIEL E  05/21/03  05/28/03  INCOMPLETE No


000-00-2974    ENGLISH,J              I/P M     02/17/94    00003467
 0212600024     05/06/02 -            INCOMPLETE $225,585.00 QA40/DONER,ANOTHER
  CHAR TEST    SIGN & DATE  *GREEN,KRIEL E  01/24/03  02/19/03  INCOMPLETE No

                    Total for Physician *GREEN,KRIEL ETAL: Defs: 3, Accts: 3
--------------------------------Page Break--------------------------------

*KELLY,WALSH ETAL

000-00-1755    PROFFITT,TAMI          I/P F     01/01/35    00002023
 0030100010     10/27/00 -            SUSPENDED1 $704,438.96 MED RECORD/
  CONSULT      SIGN & DATE  *KELLY,WALSH E  12/18/01  12/19/01  SUSPENDED1 No
  AUTOPSY      DICTATE      *KELLY,WALSH E  12/18/01  01/17/02  SUSPENDED1 No
  FACE SHEET   SIGN & DATE  *KELLY,WALSH E  12/18/01  12/20/01  SUSPENDED1 No
  DOC ORDERS   SIGNATURE    *KELLY,WALSH E  12/18/01  12/25/01  SUSPENDED1 No
  LD           SIGNATURE    *KELLY,WALSH E  10/27/00  10/28/00  DELINQUENT No

000-00-3351    FITCHETT,TERRY         ALL M     07/12/02    00003898
 0230100001     10/28/02 -            SUSPENDED1 $59,800.00
  ATTEST       DICTATE      *KELLY,WALSH E  11/17/02  11/21/02  SUSPENDED1 No

000-00-2594    KASSMEIER,ELI          O/P F     04/15/46    00003023
 0200300006     01/03/03 - 01/03/03  INCOMPLETE  $124.30  PERMANENT/
  AUTOPSY      SIGN/NOT FOR *KELLY,WALSH E  05/21/03  06/20/03  INCOMPLETE No

                    Total for Physician *KELLY,WALSH ETAL: Defs: 7, Accts: 3

Total Deficiencies:        10
Total Accounts:            6

End of Report
```

Field Explanations

UNIT NUMBER
This is the unit number of the episode that contains a deficiency.

PATIENT NAME
This is the name of the patient whose record contains a deficiency.

P/T
This is the patient type code associated with this patient for this visit.

SEX
This is the sex of the patient (M for male, F for female).

BIRTHDATE
This is the birthdate of the patient.

CORP NO
This is the corporate number of the patient.

ACCT NUMBER
This is the account number of the episode that contains the deficiency.

ACCOUNT DATES
This is the dates of admission and discharge for this episode. If a discharge date does not display, the patient has not yet been discharged.

CHT STATUS
This is the overall chart status for this account at the time the report is generated.

CHARGES
This is the total charges to date for this episode.

LOCATION/BORROWER
This is the current location and/or borrower (if applicable) of the chart. If the chart is not in the possession of a borrower, but in an identified location, that location code displays.

NOTE: The current chart location does not display if Chart Tracking and Chart Deficiency are not linked.

DEFICIENCY
This is the short description of the deficiency as found in the Chart Deficiencies code table.

DEF TYPE
This is the deficiency type for this deficiency.

PHYSICIAN/DEPT
This is the name of the physician or department who is responsible for completing this deficiency.

DEF STATUS
This is the current status of the deficiency.

DUE DATE
This is the date the deficiency is due to be completed by this physician or department.

SIG
This indicates whether this deficiency only requires a signature for completion.

The following grand totals are displayed at the bottom of the Deficiency Work List:

TOTAL DEFICIENCIES
This indicates the total number of individual deficiencies included in this work list.

TOTAL ACCOUNTS
This includes the total number of accounts included in this work list. Each account is counted only once, regardless of the number of times it is listed on the work list.

Deficiency Notices

Deficiency Notices are the letters sent to the physicians and departments as reminders that the charts listed in the notice are due for completion. Deficiency Notices can be linked to any one of the five physician letters. The letters are maintained in the Physician Letter Maintenance function.

Deficiency Notices can be faxed or emailed automatically to a physician once they are generated if your facility has the STAR Fax Module. To do so, information must be defined on the STAR Medical Records Physician Parameters screen. See "Medical Records Physician Parameters" on page 1-128 for information on defining fax or email information for a physician. The Deficiency Fax/Email Audit Report provides a record of Deficiency Notices that are faxed or emailed.

The information that displays on a Deficiency Notice is determined by what has been defined in the Def Notice Print Opt field in the Chart Management Parameters.

NOTE: You can use the STAR Audit Service to audit user requests for these notices. The Audit Service collects and stores information such as notice request date and time, the name of the user requesting the notice, and the criteria selected for the notice. For more information, see the *STAR Audit Service Reference Guide.*

When you select the Deficiency Notices option from the Deficiency Reports menu, the following screen is displayed:

```
                    General Hospital Deficiency Notices Processor
                                              Fri May 23, 2003 11:19 am

( 1)Physician Letter    :
( 2)Patient Type        :
( 3)Deficiency          :
( 4)Deficiency Type     :
( 5)Deficiency Status   :
( 6)Physician/Dept      :
( 7)Primary Sort Option :
( 8)Primary Subtotals   :
( 9)Secondary Sort Option:








 Enter physician letter (1,2,3,4,5)--
```

Field Explanations

1. PHYSICIAN LETTER (1-N-R)
This field indicates which one of the five physician letters should be used in this notice. Enter a 1, 2, 3, 4, or 5 to indicate the desired Physician Letter number. (Do not press ENTER after entering the number.)

2. PATIENT TYPE (TABLE LOOKUP-R)
This field indicates which patient types should be included on the Deficiency Notices. Use one of the following entry methods:

•   Enter the patient type code(s), separated by commas.

•   Enter a hyphen (-) to display the Patient Type table. You can select multiple entries from this list.

•   Enter the first few letters of the patient type followed by a hyphen (-). All patient types with descriptions that begin with the letters you entered are displayed for selection, along with their codes. For example, if you enter OUT-, the following might display: OPB - outpatient in bed, OPO - outpatient observation, OPT - outpatient preadmission testing, and OPS - outpatient surgery.

If you do not make an entry and press ENTER, the field displays *All*, indicating all patient types will be included on the report.

3. DEFICIENCY (TABLE LOOKUP-R)

This field identifies the deficiencies to be included in the notice and accesses the Chart Deficiencies code table. The default is All. When you access this field, the following prompt is displayed:

Enter chart deficiency code(s) separated by ',','=' for All, or '-' for list [All]--

Use one of the following entry methods:

*   Enter the deficiency code(s), separated by commas.

*   Press hyphen (-) to display the Chart Deficiencies code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency codes will be included on the report.

4. DEFICIENCY TYPE (TABLE LOOKUP-R)

This field identifies the deficiency types to be included in the notice and accesses the Chart Deficiency Types code table. The default is All. When you access this field, the following prompt is displayed:

Enter deficiency type code(s) separated by ',','=' for All, or '-' for list [All]--

Use one of the following entry methods:

*   Enter the deficiency type(s), separated by commas.

*   Press hyphen (-) to display the Chart Deficiency Types code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency types will be included on the report.

5. DEFICIENCY STATUS (TABLE LOOKUP-R

This field indicates which deficiencies should be included in this notice based on the deficiency status (for example, incomplete or delinquent). This field accesses the Chart Deficiency Status code table. When you access this field, the following prompt is displayed:

Enter deficiency status code(s) separated by ',','=' for All, or '-' for list [All]--

Use one of these techniques to enter the desired deficiency status codes:

*   Enter the deficiency status code(s), separated by commas.

*   Enter a hyphen (-) to display the Chart Deficiency Status code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency statuses will be included on the report.

6. PHYSICIAN/DEPT (TABLE LOOKUP-R)
This field is used to select the physicians/departments to include on the notice. The default is All. When you access this field, the following prompt is displayed:

Enter physician/department codes separated by `,`, `-` for table lookup, Partial Name`-`, or `=` for All [All]--

Use one of the following entry methods:

• Enter the physician or department code(s) separated by commas.

    NOTE: If you enter a code that is not in the Physician or Department table or a code for a physician/department that has no deficiencies, an error message is displayed.

• Enter a hyphen (-) to display all physicians and departments with incomplete deficiencies. You can select multiple entries from this listing.

• Enter the first letter or few letters of a physician or department name, followed by a hyphen (-) for a table lookup. You can select multiple entries from this listing.

• Enter an equal sign (=) or press ENTER for All to indicate the report should include all physicians with incomplete deficiencies. When you enter =, you cannot choose from a list of physicians; all physicians are automatically included in the report.

7. PRIMARY SORT OPTION (TABLE LOOKUP-R)
This field indicates the primary sort option for the information found in the body of the notice. When selecting a sort option, it is important to consider what information was included on the notices (as determined in the Def Notice Print Opt field on the Chart Management System Parameter). For example, if the option to print deficiency type is set to No, then deficiency type should not be selected as a sort option.

When you access this field, these options display for selection:

(1) Deficiency
(2) Deficiency Status
(3) Deficiency Type
(4) Oldest Due Date
(5) Patient Name
(6) Patient Type

Enter primary desired sort option [Patient Name]--

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Enter the number to the left of the desired option to select a sort option. If you do not select one of these options and press ENTER, the system automatically sorts the body of the notices in alphabetic order by the patient's last name.

8. PRIMARY SUBTOTALS (1-A-R)
This field indicates if subtotals for the primary sort should be included on the report. Enter **Y** or press ENTER for the default of Yes, and the subtotals are included. Enter **N**, and subtotals are not included.

9. SECONDARY SORT OPTION (TABLE LOOKUP-R)
This field indicates the secondary sort option for the information found in the body of the notice. When selecting a sort option, it is important to consider what information was included on the notices (as determined in the Def Notice Print Opt field on the Chart Management System Parameter). For example, if the option to print deficiency type is set to No, then deficiency type should not be selected as a sort option.

When you access this field, the following options display for selection (except the option you chose for primary sort is not included):

> *(1) Deficiency*
> *(2) Deficiency Status*
> *(3) Deficiency Type*
> *(4) Oldest Due Date*
> *(5) Patient Name*
> *(6) Patient Type*
>
> *Enter secondary desired sort option --*

Enter the number to the left of the desired option to select a secondary sort option.

After you complete this screen, the system prompts you to accept the screen. Once accepted, the system displays the message *Notices Generated!* briefly, and then returns you to the Chart Deficiency Reports menu. The letters generate at the designated printer, or if fax or email information is specified for a physician on the STAR Medical Records Physician Parameters screen, the notices are faxed or emailed as indicated.

See "Medical Records Physician Parameters" on page 1-128 for more information on defining fax or email information for a physician.

Figure 2.3 Deficiency Notices (ERDLX)

```
May 21, 2003


FRANK K ADAIR
301 PERIMETER
SUITE 2222
ATLANTA, GA 30130


A review of your file indicates that you have incomplete medical records.  We would
appreciate your efforts to complete these records prior to the Due Date identified,
in order to avoid suspension of privileges.

Recognizing that your time is very limited, we would be more than happy to pull your
records in advance of your visit to Medical Records so they will be available upon
your arrival in the department.  Please give us a call at ext.12345, and we will
prepare them for you.

Unit Number     Patient Name           Acct Number    Adm Date    Dis Date  P/T
  Chart Location            Borrower              Total Charges
Deficiency      Def Type        Due Date    Status       Sig Only   Bill Delay
-----------------------------------------------------------------------------
000000752       ALBRIGHT,MARIA CONTESS  9718200001    07/01/02    07/21/02 I/P
  MED RECORD                                $4200.00
CONSULT         DICTATE         07/24/00    INCOMPLETE    No         No

             Total for Patient Name Albright,Maria Contess: Defs: 1, Accts: 1

000000755       DICKERSON,DANIEL ROBER  9710400002    04/14/02    04/14/02 OP
                                          $1550.00
CONSULT         SIGNATURE       07/24/00    INCOMPLETE    Yes        No
PROG NOTE       SIGNATURE       07/24/00    INCOMPLETE    Yes        No

             Total for Patient Name Dickerson,Daniel Rober: Defs: 2, Accts: 1

000000760       FULLERTON,ROBERT AUSTI  9717000001    06/19/02    06/19/02 I/P
  MED RECORD                                $400.00
CONSULT         DICTATE         07/24/00    INCOMPLETE    No         No
OP REPORT       TRANSCRIBE      07/24/00    INCOMPLETE    No         Yes
PROG NOTE       SIGNATURE       07/24/00    INCOMPLETE    Yes        No

             Total for Patient Name Fullerton,Robert Austi: Defs: 3, Accts: 1

000000868       KINGSTON,ELIZABETH      9606700010    03/07/02    07/22/02 I/P
  MED RECORD                                $26196.88
CONSULT         DICTATE         07/22/00    INCOMPLETE    Yes        No

                 Total for Patient Name Kingston,Elizabeth: Defs: 1, Accts: 1



Total Deficiencies:        7
Total Accounts:            4

We look forward to seeing you soon.

Dolly Madison, RRA

Director, Medical Information Services
```

The date at the top left side of the notice is the date the notice is printed. The physician
or department name and address is pulled from the physician code table. The text of

the letter is pulled from the Physician Letter Maintenance function, and the letter close is pulled from the Letter Close & Signature Block maintenance within the Physician Letter Maintenance function.

The following field explanations pertain to the chart listing contained in the notice.

Field Explanations

UNIT NUMBER
This is the unit number of the episode that contains a deficiency.

PATIENT NAME
This is the name of the patient whose chart contains the deficiency.

ACCT NUMBER
This is the patient's account number.

ADM DATE
This is the date the patient was admitted to the facility.

DIS DATE
This is the date on which the patient was discharged from the facility.

P/T
This field indicates the patient's patient type.

CHART LOCATION
This is the current location of the chart.

NOTE: If the Deficiency Tracking Link in the Chart Management Parameters is set to No, this field will always be blank.

BORROWER
This field indicates the borrower that currently has this chart.

NOTE: If the Deficiency/Tracking Link in the Chart Management Parameters is set to No, this field is always blank.

TOTAL CHARGES
This field contains the total amount of charges the patient accumulated during their stay at the facility.

DEFICIENCY
This is the deficiency that this physician/department is responsible for completing on this account.

NOTE: If the deficiency type associated with the deficiency has Print on Def Notice in the Chart Deficiency Type code table set to No, it is possible for a physician

to have a deficiency that *should* be on the notice but is not included. A No entry in the Print on Def Notice field suppresses the printing of any deficiency with this deficiency type on the Deficiency Notice.

DEF TYPE
This indicates the necessary action that must be taken to complete this deficiency.

DUE DATE
This is the date the deficiency is due for completion.

STATUS
This is the status of the deficiency at the time the Deficiency Notice is generated.

SIG ONLY
This indicates whether this deficiency only requires a signature for completion, as determined in the Chart Deficiencies code table.

BILL DELAY
This indicates whether this deficiency is considered to be a billing delay, as determined in the Chart Deficiencies code table.

The following grand totals are displayed at the bottom of the Deficiency Notice:

TOTAL DEFICIENCIES
This indicates the total number of individual deficiencies included in this notice.

TOTAL ACCOUNTS
This includes the total number of accounts included in this notice. Each account is counted only once, regardless of the number of times it is listed on the notice.

Deficiency Code Report

This report is used to assist the Medical Record Department in determining the number of deficiencies by deficiency code. This is useful in reporting to hospital committees and the JCAHO and for intradepartment QA. This information can be valuable to specific areas of the Medical Record department, such as transcription.

NOTE: You can use the STAR Audit Service to audit user requests for this report. The Audit Service collects and stores information such as report request date and time, the name of the user requesting the report, and the criteria selected for the report. For more information, see the *STAR Audit Service Reference Guide*.

When you select the Deficiency Code Report option, the following screen is displayed:

```
                   General Hospital Deficiency Code Report Processor
                                              Tue Jul 03, 2001 10:36 pm


( 1)Deficiency    :
( 2)Deficiency Type:
( 3)Patient Type  :
( 4)Sort          :

















Enter chart deficiency code(s) separated by ',','=' for All, or '-' for list [Al
l]--
```

Field Explanations

1. DEFICIENCY (TABLE LOOKUP-R)
This field identifies the deficiencies to be included in the report and accesses the Chart
Deficiencies code table. When you access this field, the following prompt is displayed:

Enter chart deficiency code(s) separated by ',','=' for All, or '-' for list [All]--

Use one of the following entry methods:

•   Enter the deficiency code(s), separated by commas.

•   Press hyphen (-) to display the Chart Deficiencies code table. You may select
     multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all
deficiency codes are included on the report.

2. DEFICIENCY TYPE (TABLE LOOKUP-R)
This field identifies the deficiency types to be included in the report and accesses the
Chart Deficiency Types code table. The default is All. When you access this field, the
following prompt is displayed:

Enter deficiency type code(s) separated by ',','=' for All, or '-' for list [All]--

Use one of the following entry methods:

- Enter the deficiency type(s), separated by commas.

- Press hyphen (-) to display the Chart Deficiency Types code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency types will be included on the report.

3. PATIENT TYPE (TABLE LOOKUP-R)
This field indicates which patient types should be included on the Deficiency Notices. The following prompt is displayed:

> *Enter patient type codes separated by `,`, `-` for table lookup, Partial Name`-`*
> *, or `=` for All [All]--*

Use one of the following entry methods:

- Enter the patient type code(s), separated by commas.

- Enter a hyphen (-) to display the Patient Type table. You can select multiple entries from this list.

- Enter the first few letters of the patient type followed by a hyphen (-). All patient types with descriptions that begin with the letters you entered are displayed for selection, along with their codes. For example, if you enter OUT-, the following might display: OPB - outpatient in bed, OPO - outpatient observation, OPT - outpatient preadmission testing, and OPS - outpatient surgery.

If you do not make an entry and press ENTER, the field displays *All*, indicating all patient types will be included on the report.

4. SORT (TABLE LOOKUP-R)
This field indicates the secondary sort option for the report. The primary sort is the deficiency code. When you access this field, these options display for selection:

> *(1) Deficiency Status*
> *(2) Deficiency Type*
> *(3) Patient Name*
> *(4) Patient Type*
> *(5) Physician*
> *(6) Terminal Digit*
> *(7) Unit Number*
>
> *Enter primary desired sort option [Unit Number]--*

Enter the number to the left of the desired option to select a sort option. If you do not make an entry in this field and press ENTER, the system uses the default secondary sort option of Unit Number.

After you accept the screen, the system briefly displays the message *Generating Report (MR)!* before returning you to the Chart Deficiency Reports menu.

Figure 2.4 Deficiency Code Report

```
Tue Jul 03, 2001 11:01 pm      Model Hospital A                    Page 1
                         Deficiency Code Report
                            Sort: Unit Number

Unit Number    Acct Number Patient Name           Dis Date  Due Date  Status
    Deficiency Type   Physician            Charges            Type
------------------------------------------------------------------------------


Deficiency: ADMIT NOTE

000-00-1755   0030100010  MOFFITT,TESS                     11/14/00  SUSPENDED
    SIGN & DATE       BABB,GARY H          $117,385.35       I/P
000-00-1764   0031500028  PAGE,MARYANN           11/10/00  11/14/00  SUSPENDED
    SIGN & DATE       BABB,GARY H          $3,089.39         O/P

                                    Total Charts for Deficiency ADMIT NOTE: 2
                        Total Charges for Deficiency ADMIT NOTE:  $120,474.74
```

Field Explanations

UNIT NUMBER
This is the unit number of the episode that contains a deficiency.

ACCT NUMBER
This is the account number of the episode that contains the deficiency.

PATIENT NAME
This is the name of the patient whose record contains a deficiency.

DIS DATE
This is the date the patient was discharged for this episode.

DUE DATE
This is the date the deficiency is due for completion.

STATUS
This is the current status of the deficiency.

DEFICIENCY TYPE
This is the current type for the deficiency (or what has to be done to complete the deficiency).

PHYSICIAN
This is the name of the physician or department who is responsible for completing this deficiency.

CHARGES
This is the total charges to date for this episode.

TYPE
This is the patient type for this episode.

Billing Delay Report

The Billing Delay Report assists managers in the Medical Record department in determining which physicians are responsible for records that contain billing delay deficiencies. Remember that billing delay flags are set up by deficiency in the Chart Deficiencies Code table.

NOTE: You can use the STAR Audit Service to audit user requests for this report. The Audit Service collects and stores information such as report request date and time, the name of the user requesting the report, and the criteria selected for the report. For more information, see the *STAR Audit Service Reference Guide*.

To print this report, select the option from the Chart Deficiency Reports menu. The following screen is displayed:

```
                    General Hospital Billing Delay Report Processor
                                                    Wed Jul 04, 2001 10:52 am


  ( 1)Financial Class     :
  ( 2)Physician/Dept       :
  ( 3)Patient Type         :
  ( 4)Deficiency           :
  ( 5)Deficiency Type      :
  ( 6)Primary Sort Option  :
  ( 7)Secondary Sort Option:
  ( 8)Exclude if Final DRG :







  Enter financial class codes separated by `,`, `-` for table lookup, Partial Name
  `-`, or `=` for All [All]--
```

Field Explanations

1. FINANCIAL CLASS (TABLE LOOKUP-R)
Use this field to select the financial class(es) to include on the report. The default is All. When you access this field, the following prompt is displayed:

Enter financial class codes separated by `,`, `-` for table lookup, Partial Name `-`, or `=` for All [All]--

Use one of the following entry methods:

• Enter the financial class code(s) separated by commas.

   NOTE: If you enter a code that is not in the Financial Class table, an error message is displayed.

• Enter a hyphen (-) to display all financial classes. You can select multiple entries from this listing.

• Enter the first letter or few letters of a financial class, followed by a hyphen (-) for a table lookup. You can select multiple entries from this listing.

• Enter an equal sign (=) or press ENTER for All to indicate the report should include all financial classes. When you enter =, you cannot choose from a list of financial classes; all are automatically included in the report.

2. PHYSICIAN/DEPT. (TABLE LOOKUP-R)
Use this field to select the physicians/departments to include on the report. The default is All. When you access this field, the following prompt is displayed:

Enter physician/department codes separated by `,`, `-` for table lookup, Partial Name`-`, or `=` for All [All]--

Use one of the following entry methods:

• Enter the physician or department code(s) separated by commas.

   NOTE: If you enter a code that is not in the Physician or Department table or a code for a physician/department that has no deficiencies, an error message is displayed.

• Enter a hyphen (-) to display all physicians and departments with incomplete deficiencies. You can select multiple entries from this listing.

• Enter the first letter or few letters of a physician or department name, followed by a hyphen (-) for a table lookup. You can select multiple entries from this listing.

- Enter an equal sign (=) or press ENTER for All to indicate the report should include all physicians with incomplete deficiencies. When you enter **=**, you cannot choose from a list of physicians; all physicians are automatically included in the report.

3. PATIENT TYPE (TABLE LOOKUP-R)

Use this field to indicate which patient types should be included on the report. The following prompt is displayed:

> *Enter patient type codes separated by `,`, `-` for table lookup, Partial Name`-`*
> *, or `=` for All [All]--*

Use one of the following entry methods:

- Enter the patient type code(s), separated by commas.

- Enter a hyphen (-) to display the Patient Type table. You can select multiple entries from this list.

- Enter the first few letters of the patient type followed by a hyphen (-). All patient types with descriptions that begin with the letters you entered are displayed for selection, along with their codes. For example, if you enter OUT-, the following might display: OPB - outpatient in bed, OPO - outpatient observation, OPT - outpatient preadmission testing, and OPS - outpatient surgery.

If you do not make an entry and press ENTER, the field displays *All*, indicating all patient types will be included on the report.

4. DEFICIENCY (TABLE LOOKUP-R)

This field identifies the deficiencies to be included in the report and accesses the Chart Deficiencies code table. The default is All. When you access this field, the following prompt is displayed:

> *Enter chart deficiency code(s) separated by ',','=' for All, or '-' for list [All]--*

Use one of the following entry methods:

- Enter the deficiency code(s), separated by commas.

- Press hyphen (-) to display the Chart Deficiencies code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency codes will be included on the report.

5. DEFICIENCY TYPE (TABLE LOOKUP-R)

This field identifies the deficiency types to be included in the report and accesses the Chart Deficiency Types code table. The default is All. When you access this field, the following prompt is displayed:

Enter deficiency type code(s) separated by ',','=' for All, or '-' for list [All]--

Use one of the following entry methods:

- Enter the deficiency type(s), separated by commas.

- Press hyphen (-) to display the Chart Deficiency Types code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency types will be included on the report.

6. PRIMARY SORT OPTION (TABLE LOOKUP-R)
This field indicates the primary sort option for the report. When you access this field, these options display for selection:

(1) Discharge Date
(2) Financial Class
(3) Patient Name
(4) Physician
(5) Total Charges

Enter primary desired sort option --

Enter the number to the left of the desired option to select a sort option. There is no default.

7. SECONDARY SORT OPTION (TABLE LOOKUP-R)
This field indicates the secondary sort option for the report. When you access this field, the following options display for selection (except if you chose physician for primary sort, it is not included):

(1) Deficiency
(2) Deficiency Type
(3) Due Date
(4) Physician

Enter secondary desired sort option --

Enter the number to the left of the desired option to select a secondary sort option.

8. EXCLUDE IF FINAL DRG (1-A-R)
When you access this field, the following prompt is displayed:

Exclude accounts with a Final DRG? Y/N [Y]-- |

Enter **Y** or press ENTER to exclude accounts with a final DRG. Otherwise, enter **N**.

NOTE: If you do not have STAR M/R Abstracting, this field cannot be accessed.

When you accept the screen, the message *Generating Report (MR)!* is displayed, and you are returned to the Chart Deficiency Reports menu.

The following is a sample Billing Delay report:

Figure 2.5 Billing Delay Report

```
Wed Jul 04, 2001 12:15 pm       Model Hospital A                    Page 1
                           Billing Delay Report
                     Primary Sort Option: Discharge Date
                       Secondary Sort Option: Due Date

Unit Number  Acct Number   Patient Name           Dis Date    Type LOS
  Fin Class  Tot Charges   Deficiency Def Type     Due Date  Physician
--------------------------------------------------------------------------

000-00-1805  0036200038    TATE,KAREN               12/27/00    ER   1
   MEDICARE        $.00    ATTEST     SIGNATURE     06/29/01  COLEMAN,MICHAEL G
                           DISCH SUM  SIGNATURE     07/05/01  DOCTOR,ORDERINGXX

000-00-1804  0111300003    SMITH,LINDSEY            04/23/01    ER   1
   MEDICARE      $77.68    DISCH SUM  SIGNATURE     07/10/01  SILVER,RUSSELL

000-00-1948  0110700003    NICHOLSON,ALICE MARIE   04/25/01    ALL  8
   MEDICAID    $4485.85    ATTEST     SIGNATURE     05/05/01  GUESS,MANNIE
                           DEATH NOTE SIGNATURE     05/11/01  COLEMAN,MICHAEL G

Total Charges Outstanding:  $4,563.53

Total MEDICAID:   $4,485.85
Total MEDICARE:      $77.68



 End of Report
```

Field Explanations

UNIT NUMBER
This is the unit number of the episode that contains a deficiency.

ACCT NUMBER
This is the account number of the episode that contains the deficiency.

PATIENT NAME
This is the name of the patient whose record contains a deficiency.

DIS DATE
This is the date the patient was discharged for this episode. If the patient has not been discharged, this field is blank.

TYPE
This is the patient type for this episode.

LOS
This is the patient's length of stay for this episode.

FIN CLASS
This is the financial class of the patient for this episode.

TOT CHARGES
This is the total charges to date for this episode.

DEFICIENCY
This is the short description of the deficiency as found in the Chart Deficiencies code table.

DEF TYPE
This is the current type for the deficiency (or what has to be done to complete the deficiency).

DUE DATE
This is the date the deficiency is due for completion.

PHYSICIAN
This is the name of the physician or department who is responsible for completing this deficiency.

TOTAL CHARGES OUTSTANDING
This is the sum of the total charges for all patients listed on the report. This is followed by the sum of the total charges for patients broken out by financial class.

Status By Physician Report

This report assists the Medical Record department in determining which physicians have deficient accounts in the various status categories. The status categories are set up in the Chart Deficiency Status code table. The system checks the individual deficiency status to determine inclusion on the report and automatically sorts the report by Status, then by Physician within each status. The report includes a total after each physician listing, a total within each status, and a grand total at the end of the report.

When you select the Status by Physician option, the following screen is displayed:

```
                General Hospital Status By Physician Report Processor
                                                   Wed Jul 04, 2001 12:44 pm

( 1)Physician/Dept   :
( 2)Patient Type     :
( 3)Deficiency Status:
( 4)Deficiency Type  :
( 5)Deficiency       :

















Enter physician/department codes separated by `,`, `-` for table lookup, Partial
 Name`-`, or `=` for All [All]--
```

Field Explanations

1. PHYSICIAN/DEPT (TABLE LOOKUP-R)

Use this field to select the physicians/departments to include on the report. The default is All. When you access this field, the following prompt is displayed:

Enter physician/department codes separated by `,`, `-` for table lookup, Partial
 Name`-`, or `=` for All [All]--

Use one of the following entry methods:

- Enter the physician or department code(s) separated by commas.

  NOTE: If you enter a code that is not in the Physician or Department table or a code for a physician/department that has no deficiencies, an error message is displayed.

- Enter a hyphen (-) to display all physicians with incomplete deficiencies. You can select multiple entries from this listing.

- Enter the first letter or few letters of a physician name, followed by a hyphen (-) for a table lookup. You can select multiple entries from this listing.

- Enter an equal sign (=) or press ENTER for All to indicate the report should include all physicians with incomplete deficiencies. When you enter =, you cannot choose from a list of physicians; all physicians are automatically included in the report.

2. PATIENT TYPE (TABLE LOOKUP-R)
Use this field to indicate which patient types should be included on the report. The following prompt is displayed:

*Enter patient type codes separated by `,`, `-` for table lookup, Partial Name`-`
, or `=` for All [All]--*

Use one of the following entry methods:

•   Enter the patient type code(s), separated by commas.

•   Enter a hyphen (-) to display the Patient Type table. You can select multiple entries from this list.

•   Enter the first few letters of the patient type followed by a hyphen (-). All patient types with descriptions that begin with the letters you entered are displayed for selection, along with their codes. For example, if you enter OUT-, the following might display: OPB - outpatient in bed, OPO - outpatient observation, OPT - outpatient preadmission testing, and OPS - outpatient surgery.

If you do not make an entry and press ENTER, the field displays *All*, indicating all patient types will be included on the report.

3. DEFICIENCY STATUS (TABLE LOOKUP-R)
This field identifies the deficiency statuses to be included in the report and accesses the Chart Deficiency Status code table. When you access this field, the following prompt is displayed:

Enter deficiency status code(s) separated by ',','=' for All, or '-' for list [All]--

Use one of the following entry methods:

•   Enter the deficiency status(es) separated by commas.

•   Enter a hyphen (-) to display the Chart Deficiency Status code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency statuses are included on the report.

4. DEFICIENCY TYPE (TABLE LOOKUP-R)
This field identifies the deficiency types to be included in the report and accesses the Chart Deficiency Types code table. The default is All. When you access this field, the following prompt is displayed:

Enter deficiency type code(s) separated by ',','=' for All, or '-' for list [All]--

Use one of the following entry methods:

- Enter the deficiency type(s), separated by commas.

- Press hyphen (-) to display the Chart Deficiency Types code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency types will be included on the report.

5. DEFICIENCY (TABLE LOOKUP-R)
This field identifies the deficiencies to be included in the report and accesses the Chart Deficiencies code table. The default is All. When you access this field, the following prompt is displayed:

Enter chart deficiency code(s) separated by ',','=' for All, or '-' for list [All]--

Use one of the following entry methods:

- Enter the deficiency code(s), separated by commas.

- Press hyphen (-) to display the Chart Deficiencies code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency codes are included on the report.

When you accept the screen, the message *Generating Report MR* is displayed briefly, and you are returned to the Chart Deficiency Reports menu.

Following is a sample Status by Physician Report.

Figure 2.6 Status by Physician Report

```
Wed Jul 04, 2001 01:49 pm     Model Hospital A                    Page 1
                        Status By Physician Report
                              INCOMPLETE
Physician or Department
   Unit Number    Acct Number    Patient Name                   Dis Date P
                  Type        Deficiency            Assigned    Due
-------------------------------------------------------------------------

32 ADAIR,FRANK C
   000-00-2318    0116300003    CAMPBELL,ADDIE                          A
                  CHAR TES:  CHAR TEST              06/13/01 03/29/04

Accounts for ADAIR,FRANK C: 1

2040 SILVER,MATTHEW
   000-00-1804    0111300003     TEST,KAREN                    04/23/01 E
                  SIGNATUR:  DISCH SUM             07/02/01 07/10/01

Accounts for SILVER,MATTHEW: 1

Total accounts with INCOMPLETE Status: 2

---------------------------------Page Break----------------------------------
Wed Jul 04, 2001 01:49 pm     Model Hospital A                    Page 2
                        Status By Physician Report
                              DELINQUENT
Physician or Department
   Unit Number    Acct Number    Patient Name                   Dis Date P
                  Type        Deficiency            Assigned    Due
-------------------------------------------------------------------------

573 BASS,TEST
   000-00-2318    0116300003     CAMPBELL,ADDIE                         A
                  DICTATE:   DOC ORDERS            06/13/01 06/20/01

Accounts for BASS,TEST: 1

Total accounts with DELINQUENT Status: 1

---------------------------------Page Break----------------------------------
Wed Jul 04, 2001 01:49 pm     Model Hospital A                    Page 3
                        Status By Physician Report
                              SUSPENDED
Physician or Department
   Unit Number    Acct Number    Patient Name                   Dis Date P
                  Type        Deficiency            Assigned    Due
-------------------------------------------------------------------------

1 ADAMS,JAY M
   000-00-1948    0110000006     INTEGRATION,ACTIVE MERGEONE            I
                  SIGN/NOT:  CONSULT               04/20/01 04/21/01

Accounts for ADAMS,JAY M: 1

2234 AKER,TOM
   000-00-1948    0110000006     INTEGRATION,ACTIVE MERGEONE            I
                  SIGNATUR:  DISCH SUM             04/20/01 04/27/01

Accounts for AKER,TOM: 1

Total accounts with SUSPENDED Status: 2

End of Report
```

Field Explanations

PHYSICIAN/DEPARTMENT
This is the number and name of the physician or department who is responsible for completing this deficiency.

UNIT NUMBER
This is the unit number of the episode that contains a deficiency.

ACCT NUMBER
This is the account number of the episode that contains the deficiency.

PATIENT NAME
This is the name of the patient whose record contains a deficiency.

DIS DATE
This is the discharge date for this visit. If the patient has not been discharged, this column is blank.

P/T
This is the patient type code for this patient for this visit.

DEFICIENCY TYPE
This describes what has to be done to complete the deficiency.

ASSIGNED
This is the date the deficiency was assigned to this physician or department.

DUE
This is the date the deficiency is due to be completed.

Chart Status Report

The Chart Status Report assists the Medical Record department in determining which patient's charts are in each of the overall chart status categories. The report also totals the number of charts in each status. This information is useful in department statistical reporting, and in informing administration and the medical staff regarding the number of incomplete records. The report can also be used as an auditing tool for the physician incomplete file.

NOTE: You can use the STAR Audit Service to audit user requests for this report. The Audit Service collects and stores information such as report request date and time, the name of the user requesting the report, and the criteria selected for the report. For more information, see the *STAR Audit Service Reference Guide.*

The report has a primary sort of Status. The report includes a total after each status and a grand total at the end of the report.

NOTE: The overall chart status is not affected by individual deficiency aging.

When you select the Chart Status Report option, the following screen is displayed:

```
                    General Hospital Chart Status Report Processor
                                            Wed Jul 04, 2001 02:05 pm

( 1)Patient Type        :
( 2)Chart Status        :
( 3)Primary Sort Option  :
( 4)Secondary Sort Option:

















Enter patient type codes separated by `,`, `-` for table lookup, Partial Name`-`
, or `=` for All [All]--
```

Field Explanations

1. PATIENT TYPE (TABLE LOOKUP-R)
Use this field to indicate which patient types should be included on the report. The
following prompt is displayed:

Enter patient type codes separated by `,`, `-` for table lookup, Partial Name`-`
, or `=` for All [All]--

Use one of the following entry methods:

•   Enter the patient type code(s), separated by commas.

•   Enter a hyphen (-) to display the Patient Type table. You can select multiple entries
    from this list.

•   Enter the first few letters of the patient type followed by a hyphen (-). All patient
    types with descriptions that begin with the letters you entered are displayed for
    selection, along with their codes. For example, if you enter OUT-, the following
    might display: OPB - outpatient in bed, OPO - outpatient observation, OPT -
    outpatient preadmission testing, and OPS - outpatient surgery.

If you do not make an entry and press ENTER, the field displays *All*, indicating all
patient types will be included on the report.

2. CHART STATUS (TABLE LOOKUP-R)
This field identifies the deficiency statuses to be included in the report and accesses the Chart Deficiency Status code table. When you access this field, the following prompt is displayed:

Enter deficiency status code(s) separated by ',' ,'=' for All, '-' for list [All]--

Use one of the following entry methods:

• Enter the deficiency status(es) separated by commas.

• Enter a hyphen (-) to display the Chart Deficiency Status code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency statuses are included on the report.

3. PRIMARY SORT OPTION (TABLE LOOKUP-R)
Use this field to select a primary sort option for the report, within chart status. When you access this field, the following options are displayed for selection:

(1) Patient Name
(2) Terminal Digit
(3) Unit Number

Enter primary desired sort option [Unit Number]--

Enter the number to the left of the desired option to select a sort option. If you do not make an entry and press ENTER, the system automatically uses the default of unit number.

4. SECONDARY SORT OPTION (TABLE LOOKUP-R)
This field indicates a secondary sort option for the report, within chart status and the primary sort. When you access this field, the following options are displayed for selection:

(1) Account Number
(2) Discharge Date
(3) Due Date
(4) Patient Type

Enter secondary desired sort option --

Enter the number to the left of the desired option to select a sort option.

Figure 2.7 Chart Status Report

```
Wed Jul 04, 2001 02:22 pm      Model Hospital A                  Page 1
                               Chart Status Report
                             Primary Sort: Unit Number
                             Secondary Sort: Due Date

Unit Number   Acct Number P/T  Patient Name           Dis Date   Due Date
--------------------------------------------------------------------------

Status: 1 INCOMPLETE

000-00-1804   0111300003  ER   TATE,KAREN             04/23/01   07/09/01
000-00-1805   0036200038  ER   TANT,KELSEY            12/27/00   07/05/01

Total for Status 1: 2

Status: 4 SUSPENDED

000-00-1755   0030100010  I/P  PROFFITT,TEST                     11/19/00
000-00-1764   0031500028  O/P  ALICE,HCFASEVEN        11/10/00   11/19/00
000-00-1903   0109600001  I/P  TEST,TRACY             04/06/01   04/18/01
000-00-1948   0110000006  I/P  INTEGRATION,ACTIVE MER            04/27/01
000-00-1948   0110700003  ALL  INTEGRATION,ACTIVE MER 04/25/01   05/11/01
000-00-2310   0116200010  ER   TEST,MERGE             06/11/01   06/18/01
000-00-2318   0116300003  ALL  CAMPBELL,ADDIE                    06/20/01

Total for Status 4: 7


End of Report
```

Field Explanations

UNIT NUMBER
This is the unit number of the episode that is incomplete.

ACCT NUMBER
This is the account number of the episode that is incomplete.

P/T
This is the patient type code for this patient for this visit.

PATIENT NAME
This is the name of the patient whose record is incomplete.

DIS DATE
This is the date the patient was discharged for this episode. If the patient has not been discharged, this column is blank.

DUE DATE
This is the date the chart is due to be completed.

TOTAL FOR STATUS
This is a total that appears after the listing of patients in each status and represents the total number of accounts for that status.

Current Discharges Report

This report contains a list of all patients that have been discharged since the last midnight processing. The purpose of the report is to enable the Medical Record department to determine what charts may now be available for analysis. This report is the same as the Current Discharges Report in Chart Tracking. It is placed on both menus for your convenience.

NOTE: You can use the STAR Audit Service to audit user requests for this report. The Audit Service collects and stores information such as report request date and time, the name of the user requesting the report, and the criteria selected for the report. For more information, see the *STAR Audit Service Reference Guide.*

To print this report, select the option from the Chart Deficiency Reports menu, and this prompt displays:

Print Current Discharges Report? (Y/N)--

Enter **Y** to print the report. Once **Y** is entered, this message is displayed:

Generating Report MR!

The message is displayed briefly, and then you are returned to the Chart Deficiency Reports menu.

If you do want to print the report, enter **N** and you are returned to the Chart Deficiency Reports menu.

The following is a sample Current Discharges Report:

Figure 2.8 Current Discharges Report

```
Wed May 16, 2001 03:29 pm      General Hospital A                    Page 1
                         Current Discharges Report

Unit Number   Acct Number   Patient Name               Sex  Birthdate
    Station               Admit Date   Admitting Physician                P/T
------------------------------------------------------------------------------

000-00-2189   0113400008    CHANG,GEORGIA              F    10/31/80
                         05/14/01    DOCTOR,ADMITTING ONE                  LIC
000-00-2192   0113500001    DANIELS,PETE               M    12/28/73
                         05/15/01    DOCTOR,ADMITTING ONE                  LOR
000-00-2190   0113400009    NELSON,NINA                F    12/09/84
                         05/14/01    DOCTOR,ADMITTING ONE                  OBC


End of Report
```

Field Explanations

UNIT NUMBER
This is the unit number of the patient that was discharged.

ACCT NUMBER
This is the account number of the patient that was discharged.

PATIENT NAME
This is the name of the patient who was discharged.

SEX
This is the sex of the patient (M for male, F for female).

BIRTHDATE
This is the birthdate of the patient.

STATION
This is the last nursing station on which the patient was located.

ADMIT DATE
This is the admission date of this episode.

ADMITTING PHYSICIAN
This is the name of the admitting physician.

P/T
This is the patient's patient type.

Incomplete Summary By Physician

This report displays, by physician and department, the unit number, account number, patient name, and discharge date of every record for which the physician or department has incomplete deficiencies. At the break between physicians or departments is a total that indicates the total number of incomplete accounts for this physician or department. At the end of the report is a total for physicians, which indicates the total number of physicians with incomplete charts, as well as a total for departments.

This report does not include detailed deficiency information for each account, but is a good resource for determining the number of incomplete accounts for a physician or department.

NOTE: You can use the STAR Audit Service to audit user requests for this report. The Audit Service collects and stores information such as report request date and time, the name of the user requesting the report, and the criteria selected for the report. For more information, see the *STAR Audit Service Reference Guide*.

When you select the Incomplete Summary by Physician option, the following screen displays:

```
              General Hospital Incomplete Summary by Physician Processor
                                          Wed Jul 04, 2001 02:28 pm

( 1)Physician/Dept       :
( 2)Deficiency           :
( 3)Deficiency Type      :
( 4)Patient Type         :
( 5)Secondary Sort Option:














 Enter physician/department codes separated by `,`, `-` for table lookup, Partial
  Name`-`, or `=` for All [All]--
```

Field Explanations

1. PHYSICIAN/DEPT (TABLE LOOKUP-R)
Use this field to select the physicians/departments to include on the report. The default is All. When you access this field, the following prompt is displayed:

Enter physician/department codes separated by `,`, `-` for table lookup, Partial Name`-`, or `=` for All [All]--

Use one of the following entry methods:

• Enter the physician or department code(s) separated by commas.

  NOTE: If you enter a code that is not in the Physician or Department table or a code for a physician/department that has no deficiencies, an error message is displayed.

• Enter a hyphen (-) to display all physicians with incomplete deficiencies. You can select multiple entries from this listing.

• Enter the first letter or few letters of a physician name, followed by a hyphen (-) for a table lookup. You can select multiple entries from this listing.

• Enter an equal sign (=) or press ENTER for All to indicate the report should include all physicians with incomplete deficiencies. When you enter =, you cannot choose from a list of physicians; all physicians are automatically included in the report.

2. DEFICIENCY (TABLE LOOKUP-R)
This field identifies the deficiencies to be included in the report and accesses the Chart Deficiencies code table. The default is All. When you access this field, the following prompt is displayed:

Enter chart deficiency code(s) separated by ',','=' for All, or '-' for list [All]--

Use one of the following entry methods:

• Enter the deficiency code(s), separated by commas.

• Press hyphen (-) to display the Chart Deficiencies code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency codes are included on the report.

3. DEFICIENCY TYPE (TABLE LOOKUP-R)
This field identifies the deficiency types to be included in the report and accesses the Chart Deficiency Types code table. The default is All. When you access this field, the following prompt is displayed:

Enter deficiency type code(s) separated by ',','=' for All, or '-' for list [All]--

Use one of the following entry methods:

• Enter the deficiency type(s), separated by commas.

- Press hyphen (-) to display the Chart Deficiency Types code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency types will be included on the report.

4. PATIENT TYPE (TABLE LOOKUP-R)
Use this field to indicate which patient types should be included on the report. The following prompt is displayed:

> *Enter patient type codes separated by `,`, `-` for table lookup, Partial Name`-`*
> *, or `=` for All [All]--*

Use one of the following entry methods:

- Enter the patient type code(s), separated by commas.

- Enter a hyphen (-) to display the Patient Type table. You can select multiple entries from this list.

- Enter the first few letters of the patient type followed by a hyphen (-). All patient types with descriptions that begin with the letters you entered are displayed for selection, along with their codes. For example, if you enter OUT-, the following might display: OPB - outpatient in bed, OPO - outpatient observation, OPT - outpatient preadmission testing, and OPS - outpatient surgery.

If you do not make an entry and press ENTER, the field displays *All*, indicating all patient types will be included on the report.

5. SECONDARY SORT OPTION (TABLE LOOKUP-R)
This field indicates the secondary sort option for the report. The primary sort for the report is the physician. When you access this field, the following options display for selection:

> *(1) Chart Status*
> *(2) Deficiency Status*
> *(3) Discharge Date*
> *(4) Patient Name*
> *(5) Terminal Digit*
> *(6) Unit Number*

Enter the number to the left of the desired option to select a sort option. If you do not make an entry and press ENTER, the system automatically uses the default secondary sort of Unit Number.

When you accept the screen, the message *Generating Report (MR)* is displayed briefly before you are returned to the Chart Deficiency Reports menu.

Following is a sample Incomplete Summary by Physician Report.

Figure 2.9 Incomplete Summary by Physician Report

```
                        Incomplete Summary by Physician Report
                             Secondary Sort:Unit Number
                               Patient Type(s): All
                              Deficiency Code(s): All
                              Deficiency Type(s): All

Physician
     Patient Name          Acct Number   Dis Date  Unit Number  Chart Status
 ------------------------------------------------------------------------------
ADAIR,FRANK C
     CAMPBELL,ADDIE        0116300003               000-00-2318  SUSPENDED12345

Totals for ADAIR,FRANK C -                           Deficient Accounts: 1
                                                          Deficiencies: 1


ADAMS,JAY M
     INTEGRATION,ACTIVE M  0110000006               000-00-1948  SUSPENDED12345

Totals for ADAMS,JAY M -                             Deficient Accounts: 1
                                                          Deficiencies: 1


AKER,TOM
     INTEGRATION,ACTIVE M  0110000006               000-00-1948  SUSPENDED12345

Totals for AKER,TOM -                                Deficient Accounts: 1
                                                          Deficiencies: 1


COLEMAN,MICHAEL G
     TEST,KARENGUI         0036200038   12/27/00  000-00-1805  INCOMPLETE
     INTEGRATION,ACTIVE M  0110700003   04/25/01  000-00-1948  SUSPENDED12345

Totals for COLEMAN,MICHAEL G -                       Deficient Accounts: 2
                                                          Deficiencies: 2


DOCTOR,ORDERINGXXXX
     TEST,KARENGUI         0036200038   12/27/00  000-00-1805  INCOMPLETE

Totals for DOCTOR,ORDERINGXXXX -                     Deficient Accounts: 1
                                                          Deficiencies: 1


GARDNER,BRENDA
     TEST,MERGE            0116200010   06/11/01  000-00-2310  SUSPENDED12345

Totals for GARDNER,BRENDA -                          Deficient Accounts: 1
                                                          Deficiencies: 1


SILVER,RUSSELL
     TEST,KAREN            0111300003   04/23/01  000-00-1804  INCOMPLETE

Totals for SILVER,RUSSELL       -                    Deficient Accounts: 1
                                                          Deficiencies: 1


Total physicians with deficient accounts: 7
Total number of deficient accounts for physicians: 8

Total departments with deficient accounts: 0
Total number of deficient accounts for departments: 0

End of Report
```

Field Explanations

PHYSICIAN
This is the name of the physician or department responsible for completing deficiencies.

PATIENT NAME
This is the name of patient whose chart is incomplete.

ACCT NUMBER
This is the account number associated with the episode that contains deficiencies.

DIS DATE
This is the discharge date of the patient for this episode.

UNIT NUMBER
This is the unit number of the chart that is incomplete.

CHART STATUS
This is the overall chart status associated with this account.

Incomplete Summary By Chart

For each account in Chart Deficiency, this report displays all physicians or departments with incomplete deficiencies. For each entry, the following information is displayed: account number, patient name, unit number, discharge date, and responsible physician/department. At the end of the report is a total that represents the total number of incomplete charts.

This report is useful in determining the total number of charts in the incomplete file, as well as determining which physicians/departments are responsible for completing deficiencies on a chart. It can be used to audit the physician incomplete file.

NOTE: You can use the STAR Audit Service to audit user requests for this report. The Audit Service collects and stores information such as report request date and time, the name of the user requesting the report, and the criteria selected for the report. For more information, see the *STAR Audit Service Reference Guide*.

To print the Incomplete Summary by Chart report, select the option from the Chart Deficiency Reports menu, and the following screen is displayed:

```
                    General Hospital Incomplete Summary by Chart Processor
                                                 Wed Jul 04, 2001 03:43 pm


 ( 1)Patient Type       :
 ( 2)Primary Sort Option:














 Enter patient type codes separated by `,`, `-` for table lookup, Partial Name`-`
 , or `=` for All [All]--
```

Field Explanations

1. PATIENT TYPE (TABLE LOOKUP-R)

Use this field to indicate which patient types should be included on the report. The following prompt is displayed:

> *Enter patient type codes separated by `,`, `-` for table lookup, Partial Name`-`*
> *, or `=` for All [All]--*

Use one of the following entry methods:

•   Enter the patient type code(s), separated by commas.

•   Enter a hyphen (-) to display the Patient Type table. You can select multiple entries from this list.

•   Enter the first few letters of the patient type followed by a hyphen (-). All patient types with descriptions that begin with the letters you entered are displayed for selection, along with their codes. For example, if you enter OUT-, the following might display: OPB - outpatient in bed, OPO - outpatient observation, OPT - outpatient preadmission testing, and OPS - outpatient surgery.

If you do not make an entry and press ENTER, the field displays *All*, indicating all patient types will be included on the report.

2. PRIMARY SORT OPTION (TABLE LOOKUP-R)
Select one of the following sort entry options:

(1) Patient Name
(2) Terminal Digit
(3) Unit Number

Enter the number to the left of your choice to select that option. There is no default.

When you accept the screen, the message *Generating Report (MR)* is displayed briefly before you are returned to the Chart Deficiency Reports menu.

The following is a sample Incomplete Summary by Chart Report:

Figure 2.10 Incomplete Summary Report by Chart

```
Wed Jul 04, 2001 03:52 pm      Model Hospital A                    Page 1
                      Incomplete Summary Report by Chart
                          Primary Sort: Patient Name
                            Patient Type(s): All

Acct Number   Patient Name            Unit Number   Dis Date   Physician
-----------------------------------------------------------------------------

0031500028    ALLEN,BARBARA           000-00-1764   11/10/00   BABB,GARY H

0116300003    CAMPBELL,ADDIE          000-00-2318              ADAIR,FRANK C
                                                               BASS,TEST

0110000006    GRACEY,SAMANTA          000-00-1948              ADAMS,JAY M
                                                               AKER,TOM


0110700003    ISLEY,FRANKLIN          000-00-1948   04/25/01   COLEMAN,MICHAEL G
                                                               GHARIB,MAHNAZ

0030100010    PROFFITT,MARK           000-00-1755              BABB,GARY H

0036200038    TANT,KAREN              000-00-1805   12/27/00   BASS,UPIN
                                                               COLEMAN,MICHAEL G
                                                               DOCTOR,ORDERINGXX

0111300003    TATE,KELSEY             000-00-1804   04/23/01   SILVA,ABCDEFGHIJK

0116200010    TELL,LOUISE             000-00-2310   06/11/01   GARDNER,BRENDA

0109600001    TUCK,TRACY              000-00-1903   04/06/01   BASS,UPIN

Total Incomplete Accounts: 9


End of Report
```

Field Explanations

ACCT NUMBER
This is the account number associated with the episode that contains deficiencies.

PATIENT NAME
This is the name of patient whose chart is incomplete.

UNIT NUMBER
This is the unit number of the chart that is incomplete.

DIS DATE
This is the discharge date of the patient for this episode. If the patient has not been discharged, this field is blank.

PHYSICIAN
This is the name of the physician or department responsible for completing deficiencies.

TOTAL INCOMPLETE ACCOUNTS
This is the total number of incomplete accounts listed on the report.

Incomplete Aging Report

This report displays incomplete accounts (not individual deficiencies) that are older than the number of days entered in the selection criteria. Therefore, any account could display on this report if it contains an incomplete deficiency and the discharge date is greater than the entry in the Days Past Discharge selection criteria.

The Incomplete Aging Report can be used to assist the Medical Record Department in determining how long a physician's chart(s) has been incomplete. It also enables the Medical Record Department to know, at any given time, the total number of charts in an aging category.

NOTE: This report is helpful in determining compliance with the JCAHO standard that indicates all charts should be complete 30 days past discharge.

This report displays the unit number, account number, patient name, attending physician, discharge date, chart due date, the number of days overdue, and the current location of the chart. Totals are provided for the primary sort.

NOTE: You can use the STAR Audit Service to audit user requests for this report. The Audit Service collects and stores information such as report request date and time, the name of the user requesting the report, and the criteria selected for the report. For more information, see the *STAR Audit Service Reference Guide.*

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When you select the Incomplete Aging Report option from the Chart Deficiency Reports menu, the following screen displays:

```
                    General Hospital Incomplete Aging Report Processor
                                             Wed Jul 04, 2001 03:59 pm


( 1) Physician/Dept      :
( 2) Days Past Discharge :
( 3) Patient Type        :
( 4) Deficiency          :
( 5) Deficiency Type     :
( 6) Primary Sort Option :
( 7) Secondary Sort Option:









Enter physician/department codes separated by `,`, `-` for table lookup, Partial
 Name`-`, or `=` for All [All]--
```

Field Explanations

1. PHYSICIAN/DEPT (TABLE LOOKUP-R)
Use this field to select the physicians/departments to include on the report. The default is All. When you access this field, the following prompt is displayed:

> *Enter physician/department codes separated by `,`, `-` for table lookup, Partial Name`-`, or `=` for All [All]--*

Use one of the following entry methods:

- Enter the physician or department code(s) separated by commas.

    NOTE: If you enter a code that is not in the Physician or Department table or a code for a physician/department that has no deficiencies, an error message is displayed.

- Enter a hyphen (-) to display all physicians with incomplete deficiencies. You can select multiple entries from this listing.

- Enter the first letter or few letters of a physician name, followed by a hyphen (-) for a table lookup. You can select multiple entries from this listing.

- Enter an equal sign (=) or press ENTER for All to indicate the report should include all physicians with incomplete deficiencies. When you enter =, you cannot choose from a list of physicians; all physicians are automatically included in the report.

2. DAYS PAST DISCHARGE (3-N-R)
This field indicates the number of days past discharge a patient must be to be included on this report. For example, an entry of 30 indicates that you want the report to include all account numbers (with deficiencies) that are 30 days past discharge, based on the current date. If you ran the report on 12/31/00, it would include all accounts (with deficiencies) with a discharge date of 12/1/00 or prior.

When you access this field, the following prompt is displayed:

> *Enter number of days past discharge for inclusion on report [30]--*

If you do not enter a number and press ENTER, the system automatically enters the default value of 30 days.

3. PATIENT TYPE (TABLE LOOKUP-R)
Use this field to indicate which patient types should be included on the report. The following prompt is displayed:

> *Enter patient type codes separated by `,`, `-` for table lookup, Partial Name`-`*
> *, or `=` for All [All]--*

Use one of the following entry methods:

- Enter the patient type code(s), separated by commas.

- Enter a hyphen (-) to display the Patient Type table. You can select multiple entries from this list.

- Enter the first few letters of the patient type followed by a hyphen (-). All patient types with descriptions that begin with the letters you entered are displayed for selection, along with their codes. For example, if you enter OUT-, the following might display: OPB - outpatient in bed, OPO - outpatient observation, OPT - outpatient preadmission testing, and OPS - outpatient surgery.

If you do not make an entry and press ENTER, the field displays *All*, indicating all patient types will be included on the report.

4. DEFICIENCY (TABLE LOOKUP-R)
This field identifies the deficiencies to be included in the report and accesses the Chart Deficiencies code table. The default is All. When you access this field, the following prompt is displayed:

> *Enter chart deficiency code(s) separated by ',','=' for All, or '-' for list [All]--*

Use one of the following entry methods:

- Enter the deficiency code(s), separated by commas.

- Enter a hyphen (-) to display the Chart Deficiencies code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency codes are included on the report.

5. DEFICIENCY TYPE (TABLE LOOKUP-R)
This field identifies the deficiency types to be included in the report and accesses the Chart Deficiency Types code table. The default is All. When you access this field, the following prompt is displayed:

Enter deficiency type code(s) separated by ',',='for All, or '-' for list [All]--

Use one of the following entry methods:

- Enter the deficiency type(s), separated by commas.

- Enter a hyphen (-) to display the Chart Deficiency Types code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all deficiency types will be included on the report.

6. PRIMARY SORT OPTION (TABLE LOOKUP-R)
This field indicates the primary sort for the report, working in conjunction with the secondary sort option. For example, you can sort the report by physician, then by days overdue. After each sort, a total for that group displays.

NOTE: Keep in mind how the inclusion options may affect the sort option. For example, if you select only one physician for inclusion on the report, then a primary sort of Physician is not necessary.

When you access this field, these options display for selection:

(1) Discharge Date
(2) Physician
(3) Days Overdue

Select a primary sort option—

Enter the number to the left of the desired option to select a sort option. If you do not enter a sort option, an error message displays indicating that this is a required field.

7. SECONDARY SORT OPTION (TABLE LOOKUP-R)
This field indicates the secondary sort option for this report, working in conjunction with the primary sort option. For example, the report can be sorted by physician, then by days overdue. After each sort, a total for that group displays.

When you access this field, the following options are displayed for selection, except that your choice for primary sort is not included:

(1) Account Number
(2) Days Overdue
(3) Discharge Date
(4) Patient Name
(5) Terminal Digit
(6) Unit Number

Enter secondary desired sort option [Unit Number]--

Enter the number to the left of the desired option to select a sort option. If you do not make an entry in this field and press ENTER, the system uses the default secondary sort option of Unit Number.

When you accept the screen, the message *Generating Report (MR)* is displayed briefly, and you are returned to the Chart Deficiency Reports menu.

Following is a sample report.

Figure 2.11 Incomplete Aging Report

```
Wed Jul 04, 2001 04:25 pm      Model Hospital A                    Page 1
                          Incomplete Aging Report
                         Primary Sort:Discharge Date
                         Secondary Sort:Unit Number

Unit Number  Acct Number  Patient Name   Att Phys  Dis Date  Due Date  O/D Loc
-------------------------------------------------------------------------------

Discharge Date: 11/10/00
000-00-1764  0031500028  ALLEN,BARBARA  GABRIEL,J 11/10/00  11/19/00  227 PERM

Total for Discharge Date: 11/10/00: 1

Discharge Date: 12/27/00
000-00-1805  0036200038  TATE,KAREN     BABB,GARY 12/27/00  07/05/01   0  INCP

Total for Discharge Date: 12/27/00: 1

Discharge Date: 04/06/01
000-00-1903  0109600001  TANT,TRACY               04/06/01  04/18/01  77  MR

Total for Discharge Date: 04/06/01: 1

Discharge Date: 04/23/01
000-00-1804  0111300003  TATE,KAREN     SCOTT,EDW 04/23/01  07/09/01   0  ER

Total for Discharge Date: 04/23/01: 1

Discharge Date: 04/25/01
000-00-1948  0110700003  ISLEY,FRANKLIN ADAIR,FRA 04/25/01  05/11/01  54

Total for Discharge Date: 04/25/01: 1


End of Report
```

Field Explanations

UNIT NUMBER
This is the unit number of the chart that is incomplete.

ACCT NUMBER
This is the account number associated with the episode that contains deficiencies.

PATIENT NAME
This is the name of patient (first 15 characters) whose chart is incomplete.

ATT PHYS
This is the attending physician (first 9 characters) of the patient for this episode.

DIS DATE
This is the discharge date of the patient for this episode.

DUE DATE
This is the date the chart is due to be completed.

O/D
This is the number of days since the chart was due to be completed (days overdue). The overdue value is calculated by subtracting the chart due date from the current date.

LOCATION
This is the current location of the chart, if Chart Tracking and Chart Deficiency are linked in the Chart Management Parameters.

Physician Activity Report

The Physician Activity Report displays information regarding physician activity that could affect chart completion. This information is obtained from entries made in the Physician Activity Tracker function. This report assists in determining if a physician's admitting privileges should be suspended due to deficiencies and when reviewing a physician for reappointment.

NOTE: You can use the STAR Audit Service to audit user requests for this report. The Audit Service collects and stores information such as report request date and time, the name of the user requesting the report, and the criteria selected for the report. For more information, see the *STAR Audit Service Reference Guide.*

When you select the Physician Activity Report from the Chart Deficiency Reports menu, the following screen is displayed:

```
              General Hospital Physician Activity Report Processor
                                              Wed Jul 04, 2001 04:36 pm

( 1) Physician/Dept :
( 2) Beginning Date :
( 3) Ending Date    :
( 4) Activity Codes :
( 5) Comments       :
( 6) Sort Option    :






 Enter physician/department codes separated by `,`, `-` for table lookup, Partial
 Name`-`, or `=` for All [All]--
```

Field Explanations

1. PHYSICIAN/DEPT (TABLE LOOKUP-R)
Use this field to select the physicians/departments to include on the report. The default is All. When you access this field, the following prompt is displayed:

Enter physician/department codes separated by `,`, `-` for table lookup, Partial Name`-`, or `=` for All [All]--

Use one of the following entry methods:

• Enter the physician or department code(s) separated by commas.

   NOTE: If you enter a code that is not in the Physician or Department table, an error message is displayed. Also, if you enter the code for a physician or department that has no chart activity, an error message indicating such is displayed.

• Enter a hyphen (-) to display all physicians and departments. You can select multiple entries from this listing. If you select a physician or department that has no chart activity, an error message indicating such is displayed.

• Enter the first letter or few letters of a physician name, followed by a hyphen (-) for a table lookup. You can select multiple entries from this listing.

• Enter an equal sign (=) or press ENTER for All to indicate the report should include all physicians with incomplete deficiencies. When you enter =, you cannot choose from a list of physicians; all physicians are automatically included in the report.

2. BEGINNING DATE (DATE FORMAT-R)
This field indicates the begin date to be used for this report. The value in this field is used in conjunction with the Ending Date field. When you access this field, the following prompt displays:

   Enter beginning date [Today]-

Enter an appropriate date or press ENTER to accept the default date of the current date.

3. ENDING DATE (DATE FORMAT-R)
This field indicates the end date to be used for this report and corresponds to the Beginning Date field in the Activity Tracker. The value in this field is used in conjunction with the Beginning Date field. When you access this field, the following prompt is displayed:

   Enter ending date [Tomorrow]--

Enter an appropriate date or press ENTER to accept the default date of tomorrow.

4. ACTIVITY CODES (TABLE LOOKUP-R)
This field identifies the activity codes to be included in the report and accesses the Chart Physician Activity code table. When you access this field, the following prompt is displayed:

Enter activity codes separated by ',','=' for all, '-' to list [=]--

Use one of these entry options:

- Enter the activity code(s) separated by commas.

- Enter a hyphen (-) to display the Chart Physician Activity code table. You can select multiple entries from this list.

If you do not make an entry and press ENTER, the field displays *All*, indicating all activity codes are included on the report.

5. COMMENTS (1-A-R)
This field indicates if the free-form comments associated with the activity code should display on the report. When you access this field, the following prompt is displayed:

Include comments? (Y/N) [N]--

Enter **Y** for Yes to indicate comments are included on the report. Enter **N** for No to indicate comments are not included. If you do not make an entry and press ENTER, the system uses the default response of No and does not include comments on the report.

6. SORT (TABLE LOOKUP-R)
This field indicates the sort option for the report. When you access this field, the following options are displayed for selection:

(1) Activity
(2) Physician
(3) Specialty

Enter primary desired sort option [Physician]--

Enter the number to the left of the desired option. If you do not make an entry and press ENTER, the system automatically sorts the report by physician.

After you complete this screen, the message *Generating Report (MR)* is displayed.

Following is a sample report.

Figure 2.12 Physician Activity Report

```
Fri Aug 16, 2002 02:43 pm                                              Page 1
                              Model Hospital A
                          Physician Activity Report
                              Sort: Physician
                          Begin Date: 05/23/02
                            End Date: 08/01/02
                          Activity Codes: All
                              Comments: Yes

   Physician                             Specialty
Activity                   FAC Begin Date End Date Stop Age   Entered By
     Comments
--------------------------------------------------------------------------------

32-ADAIR,FRANK C                     Medical Division
3       SEMINAR          A  06/27/02  06/29/02     No       Powers,Karen
5       PERSONAL LEAVE   A  06/28/02  06/28/02     No       Powers,Karen
1       VACATION         B  07/26/02  08/01/02     No       Powers,Karen
     Can be reached at his vacation cottage in Maine.
*LET1  DEF NOTICE GEN    A  06/27/02  06/27/02     No       Powers,Karen
*LET2  DEF NOTICE GEN    A  06/27/02  06/27/02     No       Powers,Karen
*LIST  DEF WORK LIST GEN A  06/28/02  06/28/02     No       Pritchett,Lucy
*LIST  DEF WORK LIST GEN A  07/03/02  07/03/02     No       Walters,Amy
*LET1  DEF NOTICE GEN    A  07/03/02  07/03/02     No       Walters,Amy

     1-ADAMS,JAY M                   Medical Division
*LET1  DEF NOTICE GEN    A  06/27/02  06/27/02     No       Powers,Karen
*LET1  DEF NOTICE GEN    A  06/27/02  06/27/02     No       Powers,Karen
*LIST  DEF WORK LIST GEN A  06/28/02  06/28/02     No       Pritchett,Lucy
3       SEMINAR          A  07/03/02  07/03/02     No       ENGLISH,DANNIE
*LET1  DEF NOTICE GEN    A  07/03/02  07/03/02     No       Walters,Amy
1       VACATION         B  07/18/02  07/18/02     No       Powers,Karen
2       SICK             B  07/18/02  07/18/02     No       Powers,Karen

  2234-AKER,TOM                       NOT LISTED
2       SICK             B  06/26/02  06/26/02     No       Powers,Karen
     Comments after the fact
*LET1  DEF NOTICE GEN    A  06/27/02  06/27/02     No       Powers,Karen
*LET1  DEF NOTICE GEN    A  06/27/02  06/27/02     No       Powers,Karen
*LET2  DEF NOTICE GEN    A  06/27/02  06/27/02     No       Powers,Karen
*LIST  DEF WORK LIST GEN A  06/28/02  06/28/02     No       Pritchett,Lucy
*LET1  DEF NOTICE GEN    A  07/03/02  07/03/02     No       Walters,Amy

   432-BABB,GARY H                   Surgery Division
*LET1  DEF NOTICE GEN    A  06/27/02  06/27/02     No       Powers,Karen
*LIST  DEF WORK LIST GEN A  06/28/02  06/28/02     No       Pritchett,Lucy
*LIST  DEF WORK LIST GEN A  07/03/02  07/03/02     No       Walters,Amy
*LET1  DEF NOTICE GEN    A  07/03/02  07/03/02     No       Walters,Amy
1       VACATION         B  07/18/02  07/18/02     No       Powers,Karen
2       SICK             B  07/18/02  07/18/02     No       Powers,Karen

   573-BASS,TEST                      NOT LISTED
*LET1  DEF NOTICE GEN    A  06/27/02  06/27/02     No       Powers,Karen
*LET2  DEF NOTICE GEN    A  06/27/02  06/27/02     No       Powers,Karen
*LIST  DEF WORK LIST GEN A  06/28/02  06/28/02     No       Pritchett,Lucy
*LET1  DEF NOTICE GEN    A  07/03/02  07/03/02     No       Walters,Amy
```

NOTE: If this report is printed from the Physician Activity function in GUI Chart Management, the header does not include the Begin Date and End Date.

System-generated activities are listed only if the activity was generated by the facility requesting the report.

Field Explanations

PHYSICIAN
This is the physician number and name.

SPECIALTY
This is the description of the specialty associated with the physician. If the physician does not have an associated specialty defined in the Physician/NSCG code table, this column is blank.

ACTIVITY
This is the activity code and description.

FAC
This is the facility that entered the activity.

BEGIN DATE
This is the date the activity begins. The begin date is not necessarily the date the activity was entered.

END DATE
This is the date the activity ends.

STOP AGE
This indicates whether this activity stops aging, as determined by how this activity is set up in the Chart Physician Activity code table or if it was altered at the time the activity code was associated with the physician.

ENTERED BY
This is the name of the person who created this entry in the Physician Activity Tracker.

COMMENTS
This includes any comments entered at the time the activity code was entered. Comments display only if you enter Yes in the Comments field when creating this report.

Charts Requiring Analysis Report

The Charts Requiring Analysis Report is a listing of discharged patients whose accounts do not have associated deficiencies.

NOTE: You can use the STAR Audit Service to audit user requests for this report. The Audit Service collects and stores information such as report request date and time, the name of the user requesting the report, and the criteria selected for the report. For more information, see the *STAR Audit Service Reference Guide*.

Since it is possible that there are episodes for which no deficiencies will be added (for example, they are complete upon discharge), the Medical Record Department requires a mechanism to verify that charts have been analyzed.

Only those patients meeting both of the following criteria are included in the report:

• Patient type has Yes for Deficiency Indicator in the Chart Management Patient Type Parameters.

   NOTE: If the patient type does not have the Deficiency Indicator set to Yes, but this parameter is manually overridden, these patients are not included on the Chart Requiring Analysis Report. The assumption is that if they are being manually added, deficiencies are being added at the time.

• Account does not currently contain any deficiencies.

Patients are added to this report at midnight processing, but a Charts Requiring Analysis Report is not produced during midnight processing. This report is only generated on demand.

Patients can be automatically removed from the report based on the Charts Req Analysis Rpt parameter in the Chart Management Patient Type Parameters.

NOTE: You have the option to manually remove entries from this report from the online view.

When you select the Charts Requiring Analysis Report option, the following screen is displayed:

```
              General Hospital Charts Requiring Analysis Report Processor
                                          Mon May 14, 2001 03:50 pm


( 1)Beginning Discharge Date :
( 2)Ending Discharge Date    :
( 3)Patient Type             :
( 4)Financial Class          :
( 5)Primary Sort Option      :
( 6)Secondary Sort Option    :
( 7)Display/Print            :










Enter beginning discharge date[Today]--
```

Field Explanations

1. BEGINNING DISCHARGE DATE (DATE-R)
Enter the beginning discharge date to be included on the report. If you enter a beginning discharge date, you must enter an ending discharge date. It is important to note that the greater the date range, the longer the processing time. You cannot enter a date later than the current date. If you do not make a date entry and press ENTER, the system automatically uses the current date (today). The date displays in MM/DD/YY format.

2. ENDING DISCHARGE DATE (DATE-R)
Enter the ending discharge date to be included on the report. This field cannot be completed if the Beginning Discharge Date field is blank. The ending date cannot precede the date entered in the Beginning Discharge Date field. If you do not make a date entry and press ENTER, the system automatically uses the day after the current date (tomorrow). The date displays in MM/DD/YY format.

3. PATIENT TYPE (TABLE LOOKUP-R)
Enter the patient types to be included on the report using one of these entry techniques:

*   Enter the patient type code(s) separated by commas.

*   Enter an equal sign (=) to include all patient types whose Deficiency Indicator flag is set to Yes in the Chart Management Patient Type Parameters.

*   Enter the first few letters of the patient type followed by a hyphen (-). All patient types with descriptions that begin with the letters you entered are displayed for selection, along with their codes. For example, if you enter OUT-, the following might display: OPB - outpatient in bed, OPO - outpatient observation, OPT - outpatient preadmission testing, and OPS - outpatient surgery.

*   Enter a hyphen (-) to display all patient types whose Deficiency Indicator flag is set to Yes in the Chart Management Patient Type Parameters. You can select multiple entries from this listing.

If you do not make an entry and press ENTER, the default of *All* is displayed in this field, and all patient types are included on the report.

4. FINANCIAL CLASS (TABLE LOOKUP-R)
Enter the financial classes to be included on the report using one of the following entry techniques:

*   Enter the financial class code(s) separated by commas.

*   Enter an equal sign (=) to include all financial classes.

- Enter the first few letters of the financial class followed by a hyphen (-). All financial classes with descriptions that begin with the letters you entered are displayed for selection.

- Enter a hyphen (-) to display all financial classes. You can select multiple entries from this listing.

If you do not make an entry and press ENTER, the default of *All* is displayed in this field, and all financial classes are included on the report.

5. PRIMARY SORT OPTION (TABLE LOOKUP-R)

Use this field to select the primary sort for the report. You can choose discharge date, financial class, or physician. Totals are provided for the number of charts per primary sort. For example, if you sort by physician, a total number of each charts for each physician is included on the report. There is no default.

6. SECONDARY SORT OPTION (TABLE LOOKUP-R)

Use this field to select the secondary sort for the report. You can choose account number, patient name, terminal digit number, or unit number. There is no default.

7. DISPLAY/PRINT

This field indicates whether the report should display on the screen and/or print. Use one of these entry techniques to generate the desired report:

- Enter **D** to display the report to the screen.

- Enter **P** to route the report to the printer.

- Enter **B** to display and print the report.

If you do not make an entry and press ENTER, the system only prints the report.

If your selection criteria finds no patients, the following error message is displayed:

   No Charts Requiring Analysis

If your selection criteria are valid, the system displays the patients whose discharge date falls within the specified range.

Figure 2.13 Charts Requiring Analysis Report (ERDANX)

```
Mon May 14, 2001 10:41 am      Model Hospital A                       Page 1
                       Charts Requiring Analysis Report
                       Beginning Discharge Date:11/22/00
                        Ending Discharge Date:12/07/00
                        Primary Sort Option:Discharge Date

Unit Number          Acct Number     Type       Service      Patient Name
  Adm Date     Dis Date     FC      Attending Physician     Last Unit
------------------------------------------------------------------------------
A000001759          0032700015      OPS        MED          ROBERTSON,KRYSTAL
   11/22/00    11/22/00    JA      ADAIR,FRANK C

Total for Discharge Date 11/22/00: 1


A000001766          0033200015      I/P        MED          BARNES,DALE
   11/27/00    11/27/00    SP      DOCTOR,ADMITTING ONE     1 east

Total for Discharge Date 11/27/00: 1


A000001759          0033600016      I/P        PSY          BERTRAM,CHRISTINE
   12/01/00    12/04/00    B       ADAIR,FRANK C            1 east

A000001752          0033900010      O/P        MED          TEST,RADIOLOGY
   12/04/00    12/04/00    O       BABB,GARY H

Total for Discharge Date 12/04/00: 2


A000001767          0034100016      O/P        PSY          KENT,PATRICE
   12/06/00    12/06/00    PK      ADAIR,FRANK C

Total for Discharge Date 12/06/00: 1


A000001769          0034200014      O/P        MED          BING,BEULAH
   12/07/00    12/07/00    SP      DOCTOR,ATTENDING

A000001768          0034100024      I/P        PSY          KING,FATIMA
   12/06/00    12/07/00    SP      COLEMAN,MICHAEL G

A000001768          0034100032      I/P        PSY          KING,FRANCES
   12/06/00    12/07/00    SP      DOCTOR,CONSULTING

A000001772          0034200048      OPS        PSY          ROBERTSON,CONNIE
   12/07/00    12/07/00    JA      COLEMAN,MICHAEL G

A000001774          0034200063      I/P        PSY          ROBERTSON,NORMA
   12/07/00    12/07/00    SP      ADAIR,FRANK C            1 east

A000001773          0034200055      O/P        PSY          ROBERTSON,SELIG
   12/07/00    12/07/00    S       ADAIR,FRANK C

A000001770          0034200022      O/P        MED          TATE,PAT
   12/07/00    12/07/00    M       DOCTOR,ADMITTING ONE

Total for Discharge Date 12/07/00: 7
```

NOTE: The report includes totals for the primary sort (which is noted in the report header). The primary sort in the sample above is the discharge date, so the number of charts requiring analysis for each discharge date is provided.

Field Explanations

UNIT NUMBER
This is the patient's unit number for this facility.

ACCT NUMBER
This is the patient's account number for this episode of care.

TYPE
This is the patient type for this episode of care. The report displays the patient type code.

SERVICE
This is the patient's medical service for this episode of care.

PATIENT NAME
This is the patient's name displayed in Last,First Middle name format.

ADM DATE
This is the patient's admission date for this episode of care. The date displays in MM/DD/YY format.

DIS DATE
This is the patient's discharge date for this episode of care. The date displays in MM/DD/YY format.

FC
This is the patient's financial class for this episode of care.

ATTENDING PHY
This is the attending physician of record for this episode of care. The report displays the physician's name in Last,First Middle name format.

LAST UNIT
This is the last nursing unit on which the patient was located for this episode of care. The report displays the name of the nursing unit.

Figure 2.14 Charts Requiring Analysis Online Report

```
Page 01                    Charts Requiring Analysis Report
      Unit Number          Acct Number    P/T      Service       Patient Name
        Adm Date     Dis Date    FC      Attending Phy         Last Unit
( 1) A000001759           0032700015   OPS     MED          ROBERTSON,CAMERSON
      11/22/00    11/22/00    JA      ADAIR,FRANK C
( 2) A000001766           0033200015   I/P     MED          BEST,DALE
      11/27/00    11/27/00    SP      DOCTOR,ADMITTING ONE  1 east
( 3) A000001759           0033600016   I/P     PSY          ROBERTS,DORIS
      12/01/00    12/04/00    B       ADAIR,FRANK C         1 east
( 4) A000001752           0033900010   O/P     MED          TANT,RANDY
      12/04/00    12/04/00    O       BABB,GARY H
( 5) A000001767           0034100016   O/P     PSY          KENT,PATRICK
      12/06/00    12/06/00    PK      ADAIR,FRANK C
( 6) A000001769           0034200014   O/P     MED          FONG,BETSY
      12/07/00    12/07/00    SP      DOCTOR,ATTENDING
( 7) A000001768           0034100024   I/P     PSY          KING,AMY
      12/06/00    12/07/00    SP      COLEMAN,MICHAEL G
( 8) A000001768           0034100032   I/P     PSY          KING,FRANK
      12/06/00    12/07/00    SP      DOCTOR,CONSULTING

Enter choices(e.g. 1,3,5-7) to delete, '-'choice to cancel deletion
                          / = next screen
```

See the printed Charts Requiring Analysis Report (ERDANX) for Field Explanations.

To delete entries from the online report, select the line number to the left of the unit number and press ENTER. After you update all entries on all pages and press ENTER, the following prompt is displayed:

Accept Y/N? [N]--

If you do not want to delete the entries displayed, press **N** for No or ENTER to accept the No default. The system returns to the report with your selection(s) highlighted. You can change your selections, or press ENTER again to return to the prompt.

If you enter **Y** for Yes, the system processes your entries, and the next Charts Requiring Analysis Report created during midnight processing reflects your deletions.

After the report is processed, you are returned to the Chart Deficiency Reports submenu.

Deficiency Summary/Audit Reports

NOTE: You can use the STAR Audit Service to audit user requests for this report. The Audit Service collects and stores information such as report request date and time, the name of the user requesting the report, and the criteria selected for the report. For more information, see the *STAR Audit Service Reference Guide*.

After you select the Deficiency Summary/Audit Reports option, the following menu is displayed:

```
               General Hospital Deficiency Summary/Audit Reports Processor
                                           Sun Jul 24, 2005 06:23 pm
 Deficiency Summary/Audit Reports Input Options

              Option No.  Option
              ----------------------------------------
                  1       Deficiency Code Summary Report
                  2       Billing Delay Summary Report
                  3       Status By Physician Summary Report
                  4       Chart Status Summary Report
                  5       Deficiency Fax/Email Audit Report




 Enter option number--
```

The report options on this menu are similar to those of the same name on the previous menu. The difference is that the data is provided in summary format without specific details on each deficiency. Each report prints at the default printer assigned in the CRT table.

DEFICIENCY CODE SUMMARY REPORT

The Deficiency Code Summary Report displays each deficiency code and the number of deficiencies that are incomplete. Directly beneath each deficiency code is the chart deficiency type and the number of deficiencies in each type. The system counts all deficiencies regardless of the deficiency status except for those marked Complete. The report displays the deficiency code and description in alphabetical order. The last line of the report displays the total number of deficiencies.

The number of outstanding deficiencies may be greater than the total number of incomplete charts due to the fact that you can assign multiple deficiency codes to an account.

When you select the Deficiency Code Summary Report, the following prompt displays:

Print Deficiency Code Summary Report? (Y/N)--

Select one of the following entry options:

•   Enter **N** for No to indicate you do not want to print the report. You are returned to the Deficiency Summary/Audit Reports menu.

• Enter **Y** for Yes to indicate you want to print the report. The following message displays:

   Report Printing!

The message displays briefly, then you are returned to the Deficiency Summary/ Audit Reports menu.

The following is a sample Deficiency Code Summary Report.

Figure 2.15 Deficiency Code Summary Report

```
Tue Apr 14, 1995 02:23 pm        GENERAL HOSPITAL A          Page 1
                                 Deficiency Code Summary Report

Incomplete Deficiency Codes:

     ADM-ADMIT NOTE    12
        SIG-SIGN                 12

     ANS-ANSTH NOTE      5
        SIG-SIGN                  5

     ATTE-ATTEST        55
        SD-SIGN&DATE             55

     AUT-AUTOPSY                  3
        DIC-PHYS TO DICTATE     2
        SIG-SIGN                  1

     CON-CONSULT        65
        DIC-PHYS TO DICTATE     9
        SIG-SIGN                 41
        SD-SIGN&DATE              6
        TRA-TRANSCRIBE            9

     DS-DIS SUMM       122
        DIC-PHYS TO DICTATE    54
        SIG-SIGN                 41
        SD-SIGN&DATE              6
        TRA-TRANSCRIBE           12
        WRI-WRITE                 9

     DO-DOC ORDERS     533
        SIG-SIGN                488
        SD-SIGN&DATE             45

     FS-FACE SHEET      44
        SIG-SIGN                 32
        SD-SIGN&DATE             12

     HP-HIST & PHY      79
        DIC-PHYS TO DICTATE    24
        SIG-SIGN                 41
        SD-SIGN&DATE              2
        TRA-TRANSCRIBE           10
        WRI-WRITE                 2


Total deficiencies:    918

End of Report
```

BILLING DELAY SUMMARY REPORT

The Billing Delay Summary Report displays the total number of accounts with incomplete billing delay deficiencies. The last line of the report displays the grand total of accounts with outstanding billing delay deficiencies and the grand total charges of the accounts.

The two sort options available are Physician and Financial Class.

Within each of these options, the number of billing delays is based on account number. For example, a physician may have more than one billing delay deficiency on a single account, but it is counted once for this report.

After you select the Billing Delay Summary Report option, the following prompt displays:

Sort by financial class(F) or physician(P)--

Enter **F** for financial class if you want the report to display the total number of accounts with billing delay deficiencies grouped by financial class.

Enter **P** for physician if you want the report to display the total number of accounts with billing delay deficiencies for each physician. If you select this option, the report displays the physicians alphabetically by last name.

After you make a selection, the following prompt displays:

Print Billing Delay Summary Report? (Y/N)--

Enter **N** to indicate you do not want to print the report and you are returned to the initial sort prompt.

Enter **Y** to indicate you want to print the report. The following message displays:

Report Printing!

The message displays briefly before you are returned to the initial sort prompt.

The following is a sample Billing Delay Summary Report sorted by financial class:

Figure 2.16 Billing Delay Summary Report - Financial Class

```
Tue Apr 14, 1995 02:23 pm        GENERAL HOSPITAL A                      Page 1
       Billing Delay Summary Report
       Sort: Financial Class

    Fin Class            Accts              Tot Charges

    Medicare:             89                $81,012.60
    Champus:              16                $ 4,321.23
    Commercial:          120                $65,372.43
    Self-pay:             90                $23,389.38
    Other:                62                $15,203.39

  TOTAL:                 377                $189,299.03


End of Report
```

The following is a sample Billing Delay Summary Report sorted by physician:

Figure 2.17 Billing Delay Summary Report - Physician

```
Tue Apr 14, 1995 02:23 pm        GENERAL HOSPITAL A                      Page 1
         Billing Delay Summary Report
         Sort: Physician

  Physician                       Accts                 Tot Charges

   Adair,Franklin B:                2                       $ 2,589.40
   Adams,Harold R:                  7                       $61,288.66
   Andreas,Tom:                     1                       $   908.05
   Baab,Gary H:                     1                       $   323.60
   Dasinger,David A:                1                       $   323.60
   England,Rodney W:                1                       $   457.90
   Lees,Jack R:                     8                       $7,109,673.72

   TOTAL:                          21                       $7,175,564.93



End of Report
```

STATUS BY PHYSICIAN SUMMARY REPORT

The Status by Physician Summary Report displays the number of accounts for each physician in the selected chart deficiency status categories. It also totals the number of accounts for the status at the end of the report. The report displays the physicians in alphabetical order by last name.

NOTE: You can use the STAR Audit Service to audit user requests for this report. The Audit Service collects and stores information such as report request date and time, the name of the user requesting the report, and the criteria selected for the report. For more information, see the *STAR Audit Service Reference Guide.*

When you select this report option, the following screen displays:

```
            General Hospital Status By Physician Report Processor
                                             Thu Jul 09, 1995 09:32 am

 Page:01                       Deficiency Status           ##=Current Choices
 ( 1) INCOMPLETE
 ( 2) WARNING
 ( 3) DELINQUENT
 ( 4) SUSPENDED
 ( 5) COMPLETE






 Enter choices (e.g. 1,7,5-9) or '-'choices to remove--
                          end selection(NL)
```

This screen displays the Chart Deficiency Status Code table for selection. Select the status(es) to be included on the report. You can select as many of the statuses as necessary. The report contains a separate page for each of the selected statuses. After you make your selection, the following prompt displays:

Print Status by Physician Summary Report? (Y/N)--

Select one of the following entry options:

•   Enter **N** for No to indicate you do not want to print the report. You are returned to the Deficiency Summary/Audit Reports menu.

•   Enter **Y** for Yes to indicate you want to print the report, and the following message displays:

   Report Printing!

   The message displays briefly, and then the Chart Deficiency Status Code screen redisplays.

The following is a sample Status by Physician Summary Report.

Figure 2.18 Status by Physician Summary Report

```
Tue Apr 14, 1995 02:23 pm        GENERAL HOSPITAL A                    Page 1
                        Status by Physician Summary Report
                                  INCOMPLETE

          Adair,Franklin B:              56
          Adams,Harold R:               23
          Andreas,Tom:                   4
          Baab,Gary H:                  14
          Dasinger,David A:             10
          England,Rodney W:             28
          Lees,Jack R:                 112

Total Accounts for status INCOMPLETE: 247


End of Report
```

CHART STATUS SUMMARY REPORT

The Chart Status Summary Report displays the total number of accounts for each Chart Deficiency Status. The information on this report is based on the overall chart status of each account, not the deficiency status. After you select this report option, the following prompt displays:

Print Chart Status Summary Report? (Y/N)--

Select one of the following entry options:

•   Enter **N** for No to indicate you do not want to print the report. You are returned to the Deficiency Summary/Audit Reports menu.

•   Enter **Y** for Yes to indicate you want to print the report, and the following message displays:

Report Printing!

The message displays briefly, and then you are returned to the Deficiency Summary/ Audit Reports menu.

The following is a sample Chart Status Summary Report:

Figure 2.19 Chart Status Summary Report

```
Tue Apr 14, 1995 02:23 pm          GENERAL HOSPITAL A                      Page 1
                                   Chart Status Summary Report


          INCOMPLETE:        247
          WARNING:           112
          DELINQUENT:         78
          SUSPENDED:          97

          TOTAL:             534



End of Report
```

DEFICIENCY FAX/EMAIL AUDIT REPORT

The Deficiency Fax/Email Audit Report lists all deficiency letters faxed or emailed in order of the date and time they were sent.

NOTE: You can use the STAR Audit Service to audit user requests for this report. The Audit Service collects and stores information such as report request date and time, the name of the user requesting the report, and the criteria selected for the report. For more information, see the *STAR Audit Service Reference Guide.*

When you select Deficiency Fax/Email Audit Report (and a facility if applicable), the following screen is displayed:

```
                General Hospital Deficiency Fax/Email Audit Report Processor
                                              Wed Jul 27, 2005 10:11 am


( 1)Start Date              :
( 2)End Date                :
( 3)Fax/Email/Both          :
( 4)Display/Print           :













Enter the begin date for the report--
```

Field Explanations

1. START DATE (DATE FORMAT-R)
Enter the start date for the report (the date the fax or email was generated).

NOTE: The Chart Def Audit Retain parameter on Chart Management Parameters determines how long fax/email audit data is retained. For example, if the parameter is set to 365 days, the start date can be only 365 days ago or less.

2. END DATE (DATE FORMAT-R)
Enter the end date for the report. This field is required.

3. FAX/EMAIL/BOTH (1-A-R)
Indicate if the report should contain an audit of faxes, emails, or both. Enter **F** for faxes, **E** for emails, or **B** for both. The default is B.

4. DISPLAY/PRINT (1-A-R)
Indicate if you want to display the report on the screen or print it. Enter **D** for display or **P** for print. The default is D.

When you accept the screen, the system displays *Processing!* and either displays the report or returns you to the Deficiency Summary/Audit Reports menu.

The following is a sample Deficiency Fax/Email Audit Report:

Figure 2.20 Deficiency Fax/Email Audit Report

```
Sun Jul 24, 2005 07:17 pm      Model Hospital A                    Page:1
                    Deficiency Fax/Email Audit Report
Start Date: 04/15/05
End Date:   07/24/05

Date/Time       F/E Sent by        Letter Type Patient Name        Account #
 Receiving Physician             Fax/Email
--------------------------------------------------------------------------------
07/24/05 1758    F   Miller,Amy            1    TATE,IRMA           0501900001
 NEILSON,JOHN                  9013285191

07/24/05 1758    F   Miller,Amy            1    TATE,IRMA           0501900001
 FRIDAY,MD                     4045551212

07/24/05 1758    F   Miller,Amy            1    TATE,IRMA           0501900001
 ANESTHESIOLOGIST GROUP        901-328-5191

07/24/05 1758    E   Miller,Amy            1    TATE,IRMA           0501900001
 *CONROY,PULLON, ETAL          JOHN.NEILSON@MCKESSON.COM

07/24/05 1811    F   Miller,Amy            1    TATE,IRMA           0501900001
 NEILSON,JOHN                  9013285191
07/24/05 1811    F   Miller,Amy            1    TATE,IRMA           0501900001
 FRIDAY,MD                     4045551212

07/24/05 1811    F   Miller,Amy            1    TATE,IRMA           0501900001
 ANESTHESIOLOGIST GROUP        901-328-5191

07/24/05 1811    E   Miller,Amy            1    TATE,IRMA           0501900001
 *CONROY,PULLON, ETAL          JOHN.NEILSON@MCKESSON.COM


                    Total Faxes   6
                    Total Emails  2
                    Total Deficiencies Faxed/Emailed  8
```

NOTE: Only the first 48 characters of the email address are printed on the report.

Electronic Authentication Report

With the transcription interface, physicians have the ability to electronically
authenticate (i.e., sign) reports viaSTAR Clinical Browser. To accommodate the ability
to track when a report has been electronically authenticated, the Electronic
Authentication Report has been added to the Chart Deficiency Reports. The purpose
of this report is to alert the Medical Record Department to the fact that a document has
been electronically signed by the responsible care giver. This report displays all
reports, by physician, that physicians have electronically signed. The report only
displays those reports that have been electronically authenticated since the last time
the report was generated. Once the report is generated, the index from which the
Electronic Authentication Report is generated is purged and begins again.

NOTE: You can use the STAR Audit Service to audit user requests for this report.
            The Audit Service collects and stores information such as report request date
            and time, the name of the user requesting the report, and the criteria selected

for the report. For more information, see the *STAR Audit Service Reference Guide.*

The primary sort is always by physician, and prints in alphabetic order based on the physician's last name. You have two subsort options: terminal digit and unit number.

When you select Electronic Authentication Report, the following screen is displayed:

```
            General Hospital Electronic Authentication Report Processor
                                            Wed May 21, 2003 08:09 am

( 1) Physician/Dept    :
( 2) Sort Method       :










 Sort by terminal digit(T) or unit number(U)? [U]--
```

Field Explanations

1. PHYSICIAN/DEPT

The Physician/Dept field is used to indicate those physicians that should be included on the report. When this field is entered, this prompt displays:

> *Enter physician codes separated by ',' , 'A' for all, or partial name '-' --*
> *'-' for list*

You have the following entry options:

• Enter the physician code(s), separated by commas to select specific physicians.

• Enter **A** to indicate All physicians should be included on the report.

• Enter the first few letters of the physician's last name followed by a hyphen (-) to minimize the search. This allows selection of only one physician.

• Enter a hyphen (-) to display the Physician Code table from which multiple physicians can be selected for inclusion on this report.

2. SORT METHOD
This field is used to indicate the secondary sort for this report. Enter **T** to sort based on terminal digit or **U** to sort based on the unit number (straight numeric).

After you select a sort option, you are prompted to accept the screen. Once the screen is accepted, this message displays:

Electronic Authentication Report printing!

The message displays briefly, then you are returned to the menu from which this option was selected. The following is an example of an Electronic Authentication Report:

Figure 2.21 Electronic Authentication Report (ERDEAUX)

```
Tue May 14, 2002 12:54 pm      Model Hospital A                     Page 1
                      Electronic Authentication Report
                            Sort: Terminal Digit

Authenticating Physician: 1 - ADAMS, JAMES M

Unit Number    Patient Name            Acct Number   Adm Date   Dis Date
    Unique Document Number        Signed Date & Time
  Deficiency     Type                   Due Date   Activity Date
-----------------------------------------------------------------------------

000000637        DIMARCO,THOMAS        0206900011   03/10/02    05/10/02
      84736273                      05/30/02 14:31
   CONSULT        SIGN & DATE           04/06/02
```

Field Explanations

UNIT NUMBER
This is the unit number of the patient.

PATIENT NAME
This is the name of the patient on whom this report was electronically authenticated.

ACCT NUMBER
This is the account number of this patient's episode.

ADM DATE
This is the date the patient was admitted for this episode.

DIS DATE
This is the date the patient was discharged for this episode. If the patient has not been discharged, this field is blank.

UNIQUE DOCUMENT NUMBER
This is the document number transmitted by the transcription system associated with the document that was electronically authenticated.

SIGNED DATE & TIME
This is the date and time the document was electronically authenticated by the physician.

NOTE: The following fields are blank if STAR Chart Management is not implemented or if the report is signed using STAR Clinical Browser and the report does not have an associated deficiency.

DEFICIENCY
This is the deficiency that was associated with the report that was electronically authenticated.

TYPE
This is the deficiency type associated with the deficiency once the report is electronically authenticated. If the deficiency type is altered between the time the report is authenticated and the Electronic Authentication Report is generated, the altered type is not reflected in this report.

DUE DATE
This is the due date associated with the deficiency.

ACTIVITY DATE
This is the activity date associated with the deficiency.

Print Bar Code Labels

NOTE: You can use the STAR Audit Service to audit user requests for this function. The Audit Service collects and stores information such as report request date and time, the name of the user requesting the report, and the criteria selected for the report. For more information, see the *STAR Audit Service Reference Guide*.

When the option Print Bar Code Label is selected, this submenu displays:

```
            General Hospital Print Bar Code Label Processor
                                        Wed May 31, 1995 08:09 am

( 1) Print Unit Number Bar Code Label
( 2) Print Account Number Bar Code Label
```

PRINT UNIT NUMBER BAR CODE LABEL

This print option is applicable in those facilities where bar coding is used. This option enables you to print a unit number bar-code label for a particular patient. For more information on bar coding and bar-code labels, refer to "BAR-CODE APPLICATION" on page 3-1.

To print the label, select this option from the Chart Deficiency Reports menu. Once the function is selected, the MPI patient lookup screen displays for selection of a patient. After the patient is selected, this prompt displays:

Print Unit Number Bar Code label? (Y/N)--

Enter **Y** to print the unit number bar-code label, and this message displays:

Printing Unit Number label!

The message displays briefly, then returns to the MPI patient lookup screen for selection of another patient. If you do not want to select another patient, press ENTER to return to the Chart Deficiency Reports menu.

If you do not want to print a unit number bar-code label, enter **N** at the previous prompt. You are returned to the MPI patient lookup screen for selection of another patient. If you do not want to select another patient, press ENTER to return to the Chart Deficiency Reports menu.

For information on the appearance and format of the unit number bar-code label, refer to "BAR-CODE APPLICATION" on page 3-1.

PRINT ACCOUNT NUMBER BAR CODE LABEL

This print option is applicable in those facilities where bar coding is used. This option enables you to print an account number bar-code label for a particular patient. For more information on bar coding and bar-code labels, refer to "BAR-CODE APPLICATION" on page 3-1.

To print the label, select this option from the Chart Deficiency Reports menu. After you select the function, the MPI patient lookup screen displays for selection of a patient. After you select the patient, this screen displays:

```
        General Hospital Print Account Number Bar Code Label Processor
                                      Tue Oct 24, 1995 01:57 pm
Unit Number     Name                    Sex   Birthdate  Corp Number
0000104584      DOE,JOHN Q               M    06/06/56   00002765

No Pt Acct Nmbr    Adm Date Dsch Date Typ Attending Dr.  Service FC  Dsch Status
 1 A89898-98989    07/01/95 07/01/95  ER  LEES,JACK R     MED         HOME OR SELF
 2 A78787-87878    05/01/95 05/01/95  O/P ADAMS,HAROLD R  MED         HOME OR SELF
 3 A67676-76767    03/01/95 03/01/95  ER  COLEMAN,MICHAEL MED         HOME OR SELF
 4 A56565-65656    01/10/95 01/10/95  ER  LAGERGREN,WILLI MED         HOME OR SELF
 5 A45454-54545    12/12/88 12/14/88  I/P WOODBURN,ROBERT MED         HOME OR SELF
 6 A34343-43434    10/10/88 10/12/88  O/P LEES,JACK R     MED         HOME OR SELF
 7 A23232-32323    08/08/88 08/12/88  ER  ADAMS,HAROLD R  MED         HOME OR SELF
 8 A12121-21212    06/06/88 06/10/88  O/P ZELLER,HECTOR C MED         HOME OR SELF
 9 A99999-99999    04/04/88 04/15/88  I/P WOODBURN,ROBERT MED         HOME OR SELF
10 A88888-88888    02/02/88 02/12/88  I/P LEES,JACK R     MED         HOME OR SELF
11 A77777-77777    12/01/87 12/01/87  ER  LEES,JACK R     MED         HOME OR SELF
12 A66666-66666    11/01/87 11/01/87  ER  COLEMAN,MICHAEL MED         HOME OR SELF
13 A55555-55555    09/09/87 09/12/87  I/P ADAMS,HAROLD R  MED         HOME OR SELF
14 A44444-44444    07/07/87 07/15/87  I/P WOODBURN,ROBERT MED         HOME OR SELF
15 A33333-33333    05/05/87 05/10/87  I/P COLEMAN,MICHAEL MED         HOME OR SELF

Select visit or [next page]--
```

This screen is a listing of all accounts for this patient. Select the account for which a bar-code label is to be printed by entering the option number corresponding to the account and pressing ENTER. After you select an account, this prompt displays:

Print Account Number Bar Code label? (Y/N)--

To print an account number bar-code label, enter **Y** and this message displays:

Printing Account Number label!

The message displays briefly, then returns to the screen listing the account numbers for selection. Select another account, or press period (.) followed by ENTER to return to the MPI patient lookup screen for selection of another patient. Select another patient, or press ENTER to return to the Chart Deficiency Reports menu.

If you do not want to print an account number bar-code label, enter **N** for No at the previous prompt. Select another account, or press period (.) followed by ENTER to return to the MPI patient lookup screen for selection of another patient. Select another patient, or press ENTER to return to the Chart Deficiency Reports menu.

For information on the appearance and format of the account number bar-code label, refer to "BAR-CODE APPLICATION" on page 3-1.

PHYSICIAN LETTER MAINTENANCE

This option enables you to create and edit the text for five different letters and letter close and signature blocks which are used in the Deficiency Notices located in the Chart Deficiency reports submenu.

NOTE: You can use the STAR Audit Service to audit user requests for this function. The Audit Service collects and stores information such as report request date and time, the name of the user requesting the report, and the criteria selected for the report. For more information, see the *STAR Audit Service Reference Guide*.

After you select the Physician Letter Maintenance option, the following screen is displayed:

```
          General Hospital Physician Letter Maintenance Processor
                                       Mon Jul 21, 1997 12:24 pm
 Physician Letter Maintenance Input Options


          Option No.  Option
          ----------------------------------------
              1        Physician Letter 1
              2        Letter 1 Close and Signature Block

              3        Physician Letter 2
              4        Letter 2 Close and Signature Block

              5        Physician Letter 3
              6        Letter 3 Close and Signature Block

              7        Physician Letter 4
              8        Letter 4 Close and Signature Block

              9        Physician Letter 5
             10        Letter 5 Close and Signature Block

 Enter option number--
```

To create or edit the desired letter, select the appropriate Physician Letter option. An entry screen is displayed, as in the following example:

```
                     General Hospital Physician Letter 1 Processor
                                              Wed Jul 27, 2005 02:58 pm


              1         2         3         4         5         6         7
     12345678901234567890123456789012345678901234567890123456789012345
   01|A review of your file indicates that you have ___ incomplete medical    |
   02|records at Model Hospital, of which ___ are more than a week old and     |
   03|contain no major deficiencies.  I would appreciate your efforts to       |
   04|complete these records within the next week.                            |
   05|Recognizing that your time is very limited, we would be more than happy  |
   06|to pull your records in advance of your visit to Medical Records so they |
   07|will be available upon your arrival in the department.  Please give us    |
   08|a call at ext._____  and we will prepare them for you.                   |
   09|                                                                        |
   10|                                                                        |
   11|                                                                        |
   12|                                                                        |
   13|                                                                        |
   14|                                                                        |
   15|                                                                        |
   16|                                                                        |
      F1          F2          F3      F4    F5          F6          F7    F10
      Delete Line  Insert Line  Center  Exit  Store Line  Restore Line  Pack  Help
```

Each letter allows a maximum of 16 lines of 75 characters each. The text of the letter can refer to the various incomplete statuses you established in the Chart Deficiency Status code table.

Complete the text of the letter using the assigned function keys as instructed on the bottom of the screen. After you complete the letter maintenance, press **F4** to display this prompt:

Accept? (Y/N)--

If you enter **N** for No, you are returned to the text of the letter until you enter **Y** for Yes. After you accept the screen, the letter is filed.

Letter Close and Signature Block

This option enables you to create the letter close for the specified Physician Letter. There is a Letter Close and Signature Block for each of the five physician letters.

To create or edit the close and signature, select the appropriate Letter Close and Signature Block option and the following screen displays:

```
          General Hospital Letter Close and Signature Block Processor


          1         2         3         4
     1234567890123456789012345678901234567890
  01│We look forward to seeing you.          │
  02│                                        │
  03│                                        │
  04│                                        │
  05│Dolly Madison, RRA                      │
  06│Chief, Medical Information Services     │




     F1          F2          F3      F4      F5          F6          F7    F10
     Delete Line Insert Line Center  Exit    Store Line  Restore Line Pack  Help
```

You can enter up to six lines of text, 40 characters each for the close and signature. Complete the text of the close and signature block utilizing the assigned function keys as instructed on the bottom of the screen. When you have completed the text, press **F4** to display this prompt:

Accept? (Y/N)--

To accept the text, enter **Y** for Yes and the update is filed. You are returned to the menu from which this option was selected.

If you do not want to accept the updates, enter **N** for No. You are then returned to the screen to make additional changes. You must enter **Y** to accept the screen in order to return to the menu from which this option was selected.

PHYSICIAN ACTIVITY TRACKER

NOTE: This function is accessed by selecting Chart Physician Activity. It was formerly called Physician LOA Maintenance.

The Physician Activity Tracker is used to add, edit, or delete information regarding the absence or unavailability of a physician or department. This function enables the Medical Record Department to do the following:

- Record dates and reasons why a physician (or department) may be unavailable to complete the deficiencies for which they are responsible.

- Determine whether a physician's absence will affect the deficiency aging during the time of the absence.

Information is added to the tracker when a Chart Physician Activity code is entered. You can add codes manually, or the system can add specific codes automatically. Several actions cause the system to automatically add an activity code to a physician's activity tracker. These codes are not automatically built into the Chart Physician Activity code table; however, they display when the activity is created for a specific physician:

*LET1: This code is added when a deficiency notice is generated utilizing Letter 1
*LET2: This code is added when a deficiency notice is generated utilizing Letter 2
*LET3: This code is added when a deficiency notice is generated utilizing Letter 3
*LET4: This code is added when a deficiency notice is generated utilizing Letter 4
*LET5: This code is added when a deficiency notice is generated utilizing Letter 5
*LIST: This code is added when a Chart Deficiency Work List is generated for the physician.

The Chart Physician Activity code table should be set up to track when the physician is unavailable for an extended period of time, such as, vacation, conference, extended leave, etc. It is also a good way to track physician activity which may identify when the physician has worked on charts. Additionally, the tracker can be used to identify when a physician has actually been suspended. The system uses information from the Physician Activity Tracker in the following ways:

- Used by the batch processor to determine if the deficiency indicator should still hold the physician accountable for the records he/she is responsible for completing

- Maps in SQL enabling you to generate user-defined reports

- Retained in STAR based on the Physician Activity Purge Days parameter in the Chart Management Parameters

When you select Physician Activity Tracker, the following prompt displays:

Enter department(D) or physician(P) maintenance [P]--

To select a department, enter **D** for Department. To select a physician on which to view, edit, print, add, or delete activity codes, press ENTER to accept the default of **P** for Physician. The following prompt displays:

Enter first letter(s) '-' or code--

Use one of these entry options:

- Enter the department or physician code number directly.

- Enter a portion of the department name or the physician's last name, followed by a hyphen (-) to display selections matching the partial entry.

- Enter a hyphen (-) and press ENTER to display the entire Department or Physician table for selection.

After you select a department or a physician, the system displays any activity codes currently associated with the department or physician. The following is an example of this screen:

```
              General Hospital Chart Physician Activity Processor
                                              Tue Nov 18, 1997 10:16 am

Physician Name            Office Address              Phone
ADAMS,JOSEPH M            301 PERIMETER              (404)698-1563

     Activity          Beginning Date   Ending Date    Stop Aging Ind    Page:01
( 1) CONVENTION        11/18/97         11/23/97       Y
( 2) VACATION          11/25/97         11/30/97       Y





 Enter choice, 'A'dd,or 'P'rint--
```

The information displays in reverse chronological order based on the date the activity code is entered. If the selected department or physician does not have activity codes, this screen is blank. The prompt that displays at the bottom of the screen enables these entry options:

- Enter the option number to the left of the activity to view detailed information regarding the activity code or to edit the activity information.

- Enter **A** to add an activity code.

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- Enter **P** to print the Physician Activity information for this physician. The location of the printing is based on the printer associated with the workstation from where the report is printed. A sample of this report can be viewed in the reports section.

Adding/Editing Activity Codes

If you enter an option number to view or edit detailed information for an activity code or enter **A** to add an activity code, the following screen displays:

```
              General Hospital Chart Physician Activity Processor
                                              Tue Nov 18, 1997 10:06 am

Physician Name             Office Address             Phone
ADAMS,JOSEPH M             301 PERIMETER              (404)698-1563
 1 Activity Code  :
 2 Begin Date     :
 3 End Date       :
 4 Stop Aging Ind :
 5 Date Entered   :
 6 Entered by     :
 7 Comments       :




 Enter the Chart Physician Activity code or `-` to list--
```

Field Explanations

1. ACTIVITY CODE (4-AN-R)
This field indicates the type of physician activity and accesses the Chart Physician Activity code table. To enter an activity code, execute one of these entry options:

- Enter the activity code directly and press ENTER.

- Enter a portion of the activity description, followed by a hyphen (-) and press ENTER. All codes matching the partial entry display for selection.

- Enter a hyphen (-) and press ENTER to display all activity codes for selection.

NOTE: You cannot edit an activity code that has been automatically added by the system.

2. BEGIN DATE (DATE-R)
This field indicates the date this activity becomes effective. If this activity stops deficiency aging, the aging stops on the date entered in this field. Enter a date in one of the accepted entry formats.

NOTE: When editing an activity code that has been automatically added by the system, this field displays the date the code was added and cannot be edited.

3. END DATE (DATE-R)
This field indicates the date this activity ends.   If this activity stops deficiency aging, the aging begins again when this date is reached. Enter a date after the Begin Date in an accepted date format.

NOTE: When editing an activity code that has been automatically added by the system, the end date is always the same as the begin date and cannot be edited.

4. STOP DEFICIENCY AGING (1-A-R)
This field indicates whether this activity code will stop deficiency aging for all incomplete deficiencies currently assigned to this physician. This field is automatically completed with Yes or No based on the Stop Aging Ind field for this activity code in the Chart Physician Activity code table. You can override the table default by accessing the field and responding to the following prompt:

Stop deficiency aging at the begin date? (Y/N)—

Enter **Y** for Yes to indicate that deficiency aging should be stopped on all incomplete deficiencies for this physician from the begin date to the end date. Enter **N** for No to indicate that this activity does not affect aging of deficiencies. If any of the physician's deficiencies have exceeded the deficiency due date, the aging of those deficiencies will not be stopped.

NOTE: When editing an activity automatically added by the system, this field is always set to No and cannot be edited.

5. DATE ENTERED (DISPLAY ONLY)
This field indicates the date the activity code is entered. The system automatically enters the current date, and the field cannot be edited.

6. ENTERED BY (DISPLAY ONLY)
This field identifies the person who entered this activity code. The system automatically enters the name of the person signed on to this workstation, and the field cannot be edited.

When the selected activity code is one that was automatically added by the system (i.e., *LET1, *LET2, *LET3, *LET4, *LET5, *LIST), this field displays the name of the person who generated the deficiency list or letter.

7. COMMENTS
This field enables you to enter three lines, 72 characters each, of free-form comments regarding the entry of this activity code. This is the only field that can be edited on system-generated activity codes.

After you complete this screen, press ENTER. The system prompts you to accept the screen. Press ENTER to accept the default of **Y** to accept the information. Enter **N** if any of the information needs to be edited and resume editing.

After you accept the screen, the activity information is filed.

Deleting Activity Codes

The Physician Activity screen can hold an unlimited number of entries. However, you can delete old entries, if needed.

```
              General Hospital Chart Physician Activity Processor
                                          Tue Nov 18, 1997 10:16 am

Physician Name              Office Address            Phone
ADAMS,JOSEPH M              301 PERIMETER             (404)698-1563

     Activity          Beginning Date   Ending Date   Stop Aging Ind    Page:01
( 1) CONVENTION        11/18/97         11/23/97      Y
( 2) VACATION          11/25/97         11/30/97      Y








 Enter choice,'A'dd,or 'P'rint--
```

To delete an activity, enter the option number to the left of the entry to be deleted. The activity code detail information screen displays. Press ENTER until the following prompt displays:

>   *Delete? (N)--*

Enter **Y** to delete the activity. Enter **N** if the activity should not be deleted.

If you attempt to delete a system-generated activity code, the following message displays:

>   *Error: Cannot delete this activity!*

This message displays briefly, this returns you to the screen displaying the activity codes for this physician.

PARAMETER MAINTENANCE

The Chart Tracking and Chart Deficiency menus both contain the Parameter Maintenance function. This item is identical on both menus, and changes to the parameters made via Chart Tracking change the parameters accessed via Chart Deficiency and vice versa.

TRANSCRIPTION DISCREPANCY NOTICE

The Transcription Discrepancy Notice enables tracking of discrepancies between deficiency data and the transmitted report header information. This notice prints automatically when a report header is transmitted and one of the discrepancy criteria is met. The following incidents generate a Transcription Discrepancy Notice:

No Account Number Match

A patient is included on the Transcription Discrepancy Notice when a report header is transmitted, but the patient does not have an account number in STAR to match the report. The same message displays on the report if a report header is transmitted, but the patient type is one that does not permit entry of deficiency information as defined in the Patient Type Parameters of System Maintenance. This is the *only* notice that prints if Chart Management is not active.

Possible Duplicate Reports

A patient is included on the Transcription Discrepancy Notice when a report header is transmitted and two or more of the same deficiencies exists with the same responsible physician. These deficiencies each have a different Deficiency Type associated with them. This type of notice only prints if Chart Management is active.

System Set-up Suggestion:
The Transcription Discrepancy Notice should be set up to print at a location near the chart analysis, transcription, or incomplete file room area. These notices should be acted upon within a reasonable time. The Transcription Discrepancy Notice that prints when there is *No Account Number Match* contains the transmitted transcription header information. In the case of *No Account Number Match*, deficiency information is not included, since this account does not exist in Chart Deficiency. When this type of Discrepancy Notice is generated, it indicates 1) notification that STAR cannot automatically create the deficiency, as the account does not exist in STAR or 2) the report header applies to a patient whose patient type is set to **N** for Deficiency Tracking, and a deficiency cannot be added. In either case, STAR does not add a deficiency. This notice serves as a tool to alert the Medical Record Department staff to add the patient's account to Chart Deficiency.

The following is an example of a Transcription Discrepancy Notice that prints for the type of *No Account Number Match*:

Figure 2.22 Transcription Discrepancy Notice - No Account Number Match (ERDTDNX)

```
    Report Transmission Date:  05/05/94
    Report Transmission Time:  15:43
    Discrepancy Notice Type:  No Account Number Match
    Transmitted Transcription Information:
         Patient Name                Roothfour,Testfour
         Admission Date              05/05/94
         Unit Number                 96-26-36
         Account Number              94240-00032
         Date of Birth               06/24/12
         Report Type                 HP
         Procedure Date
         Primary Surgeon
         Dictation Date              05/05/94
         Transcription Date/Time     05/05/94  15:30
         Edit Date/Time
         Originator ID               32
         Provider #1                 32
         Provider #2
         Provider #3
         Transcriber ID              LTR
         Document Number             5643
         Document File Name
         Electronic Signature ID
         Electronic Signed Date/Time


     Deficiency Information:
         No Deficiency information exists for this patient.
```

The Transcription Discrepancy Notice that prints for a *Possible Duplicate Report* contains the transmitted transcription header information and the associated deficiency information found in Add/Edit Deficiencies for this report type. An entry is created for *Possible Duplicate Report* when the report type and deficiency code match, the procedure date and the activity date match, and the Provider number and the Responsible Physician number match. Note that the two deficiencies in question have different deficiency types and the deficiency is *not* complete. STAR updates the *first* of the duplicate deficiencies and creates the discrepancy notice to notify the Medical Record Department staff to verify and/or update the other deficiency information.

The following is an example of a Transcription Discrepancy Notice that prints for the type of *Possible Duplicate or Multiple Reports*:

Figure 2.23 Transcription Discrepancy Notice - Possible Duplicate or
Multiple Reports (ERDTDNX)

```
Report Transmission Date:  05/05/94
Report Transmission Time:  15:43
Discrepancy Notice Type:  Possible Duplicate Report
Transmitted Transcription Information:
     Patient Name              Roothfour,Testfour
     Admission Date                  05/05/94
     Unit Number                     96-26-36
     Account Number                  94240-00032
     Date of Birth                   06/24/12
     Report Type                     OP
     Procedure Date                  05/07/94
     Primary Surgeon                 100
     Dictation Date                  05/07/94
     Transcription Date/Time         05/09/94  12:30
     Edit Date/Time
     Originator ID                   100
     Provider #1                     32
     Provider #2
     Provider #3
     Transcriber ID                  LTR
     Document Number                 5643
     Document File Name
     Electronic Signature ID
     Electronic Signed Date/Time

  Deficiency Information:
     Physician                  32-Adair,Phillip P
     Color
     Deficiency                 Op Note
     Type                       Transcribe
     Activity Date              05/07/94
     Assign Date                05/07/94
     Due Date                   05/12/94
     Reviewer Initials          ABC
     Status                     Incomplete

  Deficiency Information:
     Physician                  32-Adair,Phillip P
     Color
     Deficiency                 Op Note
     Type                       Dictate
     Activity Date              05/07/94
     Assign Date                05/07/94
     Due Date                   05/12/94
     Reviewer Initials          DEF
     Status                     Incomplete
```

BAR CODE MAINTENANCE

The menu for both Chart Tracking and Chart Deficiency contain the Bar Code Maintenance option. This item is identical on both menus.

See BAR CODE MAINTENANCE on page 1-131 for information on this topic.

BATCH PROCESSING

Deficiency Aging

During the nightly batch processing, the system performs the deficiency aging process. The system checks three different items on a deficiency to determine if the aging of the deficiency should be halted. (The overall chart status and overall due date are not affected by this processing.)   These items are as follows:

- If there are any LOAs on file for the responsible physician or department on a deficiency and the LOAs contain the appropriate flag to halt the deficiency aging process.

- If the deficiency type associated with a deficiency is one that has a flag that halts the deficiency aging process (see Chart Deficiencies Type code table for additional information regarding this flag).

- If Chart Tracking and Chart Deficiency are linked in the System Parameters and the incomplete chart is checked out to a location that halts the deficiency aging process (see Chart Location code table for additional information regarding this flag).

If the deficiency does not meet one of the above criteria, the deficiency continues aging. If the deficiency meets one of the above criteria, a day is added to the due date so as not to change the status of the deficiency. However, if the deficiency has already reached the due date, an additional day is not added to the due date, but the deficiency will not continue aging into the next status.

Charts Requiring Analysis Report

There is only one batch report in Chart Deficiency, which is the Charts Requiring Analysis report. All other reports are online demand reports.

The Charts Requiring Analysis Report lists all discharged patients without deficiencies associated with their accounts, and the discharged patients' patient types must have a Yes entered in the Deficiency Indicator field in the Patient Type Parameters to be included on the report. This report is useful in assisting the Medical Record department in determining those accounts that may have been missed during the chart analysis process.

You can update this report by adding deficiencies to the patient's account or by manually removing an entry on the report via the Charts Requiring Analysis option within the Chart Deficiency Reports function. If the transcription interface is active, and deficiencies are automatically added prior to the patient's discharge, those patients do not display on the Charts Requiring Analysis Report.

Chapter 3 - BAR-CODE APPLICATION

INTRODUCTION

Bar coding is a fast, consistent method of entering information into a computer system. Instead of manually entering each character of a response a keystroke at a time, simply pass a wand or scanner over a bar-code symbol. The bar-code symbol is a visual representation of a sequence of characters consisting of lines and spaces of various widths and varying degrees of darkness. Each unique bar-code pattern has a specific response; moving a scanning device across the black and white lines (or bars) causes a distinctive reflection. In turn, this reflection is interpreted by a reader which recreates the original characters for the computer system.

Utilizing the bar-coding features of the Chart Management Module can eliminate keyboard entry of data on various patient selection prompts. Bar-coded entry is quicker and results in error-free patient identification. With the sweep of a wand you can enter data on standard patient selection prompts.

BAR-CODING DEVICES

The Chart Management Module uses mostly INTERMEC Corporation bar-coding input devices and printers.

Wand

The wand simplifies entering data such as the patient unit number, account number, or corporate number. The wand transmits the bar-code pattern to the reader. For on-line or stand-alone applications, the inexpensive bar-code wand is easy to use, and most people become proficient at bar-code wanding after a few minutes of practice.

Laser Scanner

Like the wand, the laser scanner translates the bar-code label for the reader. Laser scanners sweep the beam in a single line. Its coherent and intense laser beam enables you to casually place the bar-code symbol near the scanner. The rapid, repetitive sweep of the beam along its scan line provides many "looks" at each bar-code symbol thereby producing a high first-read rate.

In-Line Reader

The in-line reader translates the bar-code pattern from the wand into a message. This message is then transmitted to the Chart Management Module. This type of reader attaches to the CRT. Even though the reader is attached to the terminal, all terminal functions can be carried out without interruption. Each in-line reader requires additional power and is configured according to terminal and bar-code label requirements.

Thermal Printer

The thermal printer prints labels with the preformatted bar-code patterns read by the bar-code wands. Each of these printers requires a separate port and power outlet and must be loaded with the label formats prior to use.

PRINTING MATERIALS

The equipment that you are using can scan and decode the printed bar-code symbol within a matter of milliseconds. A newly generated bar-code symbol is crisp and precise, very legible to the reader. Over time, however, the clearness of the bar-code image is reduced by friction or the bending of the surface upon which it rests. Although readers can interpret a bar code of questionable clarity, the effectiveness of the intelligent scanning device is reduced. Consider the following information for alleviating the problem of illegible bar-code symbols:

Folder Label

The folder label, which attaches to the outside of the patient's medical record folder, has the highest degree of wear, since it is most exposed to friction and movement. Folder labels may require more frequent reprinting than other labels due to the constant wear on the chart folder.

Episode Label

The episode label, which is usually attached to the face sheet (or some other location on the episode), does not encounter as much friction or movement as the folder label.

SCANNING WITH WANDS

To enter data with a bar-code scanner, pass the scanner across the bar code in either direction. The scanner then interprets the bar code by the proximity of the bars and spaces and acts like a "middle man" between the entry and the computer system. If you use a wand to scan a bar code, the following rules apply:

- Start scanning the bar code before the first vertical bar of the bar-code symbol. This action provides the reader with the correct balance for determining what is a bar and what is a space.

- Scan beyond the last bar of the bar-code symbol. This action provides the reader with the correct balance for determining what is a bar and what is a space.

- Move the wand across the bar-code symbol. The speed of the scan, the angle at which you hold the wand, and the area of contact with the printed label should remain constant. The consistency of the scan determines the level of accuracy at which the reader can interpret the bar-code symbol.

- Scan the entire bar-code symbol from end to end. The reader cannot properly decode the symbol when the wand goes above or below the printed bar-code symbol.

  NOTE: You can also type in the number printed beneath the actual label (w/o asterisks) in the prompt instead of wanding if necessary.

SCANNING WITH A SCANNING READER

If you use a scanning reader for bar coding, a consistent rate of scan is achieved when the target line passes across the entire bar code (from end to end). The rapid, repetitive sweep of the laser beam from side to side creates this target line providing you with an aiming point.

BAR-CODE SYMBOLOGY

Bar-code symbology refers to the format of the data structure. There are several different symbologies in use today. Health Industry Bar Code (HIBC) standards recommend data structures be encoded in Code 39 or Code 128.

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BAR-CODE FORMATS

The information and how it is displayed on a bar-code label makes up the format, or label design. Two label formats have been designed for the Chart Management Module. One is the Unit Number label, which also contains the corporate number (folder label), and the other is the Account Number label (episode label). Both labels conform to the standards set forth in the HIBC standards.

Included in the standards are application flag characters and positioning of such characters that identify the application and data by two criteria:

1. Character position one indicates where the data structure is located (where it is or what it is on)

2. Character position two indicates the nature of the data structure (what it is)

The HIBC standards identify which letters are used in identifying both criteria. For the bar-code labels utilized in the Chart Management Module, the symbol located in the first position of the data is B to indicate that the information is located on a patient care record. The symbol located in the second position is C to indicate the information is a patient identifier.

The third position of the data structure contains a character that identifies what type of number is to follow. For purposes of the Chart Management Module, the character found in the third position of the encoded data would be either A for account number, C for corporate number, or U for unit number.

The next 12 positions of the bar code contain the actual number that is encoded When using Code 39 symbology, the final position of the data structure is the Modulus 43 check character. Further, when using Code 39 symbology, an asterisk (*) must encapsulate the entire structure so that the encoded information begins and ends with an asterisk.

The following is an example of an account number bar-code label:

The patient's name is located in the upper left hand side of the label. The patient's date of birth (DOB) is located in the upper right hand side of the label. To the left of bar code is an A to indicate that the encoded data structure contains an account number. Above the bar code is the literal account number. Below the bar code is the translation of the encoded data. The encoded data begins and ends with an asterisk (*). The first position contains a B to indicate that this information is found on a patient record. The second position contains a C to indicate that the data is a patient identification code.

The next two positions indicate that this is an account number (A) from facility A (A). The next ten positions contain the actual account number, and the last position is the Modulus 43 check character.

The following is an example of a unit number bar-code label:

KAYEONE, TESTONE
00001069

C

BCC0000106311
000000949

U

BCUA000000949+

SEX= M
DOB= 09/09/1964
SS#= 482-69-8701

The patient's name is located in the upper left hand side of the label. To the left of the first bar code is a C to indicate that the encoded data structure contains the patient's corporate number. Above the bar code for the corporate number is the literal corporate number, and below the bar code is the translation of the encoded data. The encoded data begins and ends with an asterisk (*). The first position contains a B to indicate that this information is found on a patient record. The second position contains a C to indicate that the data is a patient identification code.

The next position indicates that this is a corporate number (C). The next eight positions contain the actual corporate number, and the last position is the Modulus 43 check character.

The second bar code on the unit number label has a U to the left of the bar code to indicate that the encoded data structure contains the patient's unit number. Above the bar code for the unit number is the literal unit number, and below the bar code is the translation of the encoded data. The encoded data begins and ends with an asterisk. The first position contains a B to indicate that this information is found on a patient record. The second position contains a C to indicate that the data is a patient identification code. The next two positions indicate that this is a unit number (U) from facility A (A). The next nine positions contain the actual unit number, and the last position is the Modulus 43 check character.

On the lower left hand side of the label is the patient's sex (M for male or F for female), the patient's date of birth (DOB), and the patient's social security number (SS#).

NOTE: The social security number may be masked or partially masked, depending on your facility's settings.

Both formats print on 2.40" by 4.00" label stock.

GENERATING BAR-CODE LABELS

Bar-code labels can be generated in several ways in the Chart Management Module. Labels can be generated automatically as a result of an admission, manually requested when a volume or episode are created in the Folder Functions of Chart Tracking, or as a print request in either Chart Tracking or Chart Deficiency.

Automatic Printing of Bar-Code Labels

The menu for both Chart Tracking and Chart Deficiency contain an option called Parameters Maintenance. This option has a submenu with an option called System Parameters. There are two items on the System Parameters screen that control the automatic printing of the bar-code labels. One is the MR# Bar Code Ind, the other is the Episode Bar Code Ind.

A unit number bar-code label automatically generates upon completion of an admission/registration of a patient if the following conditions exist:

- The parameter for the MR# Bar Code Ind is set to Y for Yes

- The unit number issued to the patient is a new unit number

An account number bar-code label automatically generates upon completion of either the admission/registration process or at discharge (as determined by the facility), if the following condition exists:

- The parameter for the Episode Bar Code Ind is set to either A for admission or D for discharge

For more information regarding the System Parameters, refer to the section on PARAMETER MAINTENANCE in the Chart Tracking chapter of this volume.

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We value your suggestions for improving our documentation. Please use this form to evaluate the *Chart Management Module* of the *STAR Patient Care Reference Guide* for Release 17.0.

Topic	Poor	Fair	Good	Excellent
Organization of information	❏	❏	❏	❏
Accuracy of information	❏	❏	❏	❏
Completeness of information	❏	❏	❏	❏
Clarity of information	❏	❏	❏	❏
Amount of overview information	❏	❏	❏	❏
Explanation of processes	❏	❏	❏	❏

Are there parts of this manual that could be made more helpful to you? Please explain.

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STAR 2000 Documentation Team
McKesson
Mail Stop ATHQ-3302
5995 Windward Parkway
Alpharetta, GA 30005

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