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DRAFT AHLTA 3.3 User's Manual

for the

AHLTA Program Office

and the

**MHS Clinical Information Technology
Program Office**

Delivered for: Test Readiness Review 2 (TRR2)
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GLOBAL INFORMATION
for QUALITY CARE

SECRET



1.0 GETTING STARTED

1.1 AHLTA Overview

As the target healthcare system of the Department of Defense (DoD), AHLTA provides a structured framework for accessing and integrating medical information for patients. AHLTA is the Military Health System (MHS) Computer-based Patient Record (CPR). It provides the DoD with an enterprise-wide system, governed by universal standards integrating data from multiple sources and displaying the data at the point of care. Appropriate portions are easily accessible to authorized users when and where needed. The CPR facilitates the worldwide delivery of healthcare, assists clinicians in making healthcare decisions, and supports leaders in making operational and resource allocation decisions.

AHLTA provides the essential capabilities, as identified by the functional community, to support the creation of a CPR. AHLTA integrates the best of Government and commercial off-the shelf (GOTS/COTS) products by interfacing the existing MHS Automated Information Systems with new functionality.

1.2 Security Overview

AHLTA is installed in Military Treatment Facilities (MTFs) and clinics throughout the world. As the security of patient data is of paramount importance in the military's healthcare community, an elaborate and effective security methodology has been built into AHLTA. The system administrator strictly controls access to all parts of AHLTA.

An integral part of AHLTA security is the assignment of roles. Each user is assigned an AHLTA role. This role is determined by the user's job skill set. These roles are cumulative, allowing greater access to patient information as roles are added. Similar in concept to the Composite Health Care System (CHCS) user level, an individual's role determines what information can be accessed or changed.

AHLTA is developed to provide an interface to data contained in the military health care systems. The AHLTA product provides the DoD clinical team members with a single sign-on capability to retrieve patient data from multiple sources and locations without the need to manually access each information repository. With the single sign-on feature, AHLTA account users are able to retrieve site information stored in the Clinical Data Repository (CDR) at the Defense Information Systems Agency (DISA) and to access their local CHCS application. The AHLTA account resides on the Enterprise Master Security Server (EMSS) at DISA with local control at each Host MTF.

The local access to the Enterprise system is granted, managed, and inactivated at the local sites using the local security object, similar to the CHCS account creation, granting access to the local CHCS. The management of the local access to AHLTA is designed to meet MHS and DoD account management guidelines, while the Enterprise account remains intact for successful transfer to other AHLTA MTFs and access to global user account information. Local sites do have the capability to delete the Enterprise accounts in the event of a security violation. User accounts can and will be

suspended after 45 days and disabled/inactivated after 120 days of non-activity or when a user leaves the MTF.

The AHLTA Enterprise account enables users to transfer from one AHLTA MTF to another AHLTA MTF, for reassignment or Temporary Duty (TDY), and continue to access their AHLTA account settings, such as personal templates, and gain access to the new AHLTA MTF clinical information. This process is referred to as Transferring an AHLTA account.

1.3 Account Creation Process

AHLTA user account creation is an automated process. This process is initiated with the creation of the CHCS user account. Upon creating and flagging the CHCS user account with the settings "Active AHLTA user," the user account information is sent to the CDR and to SnareWorks to create the user account on the EMSS. Once the EMSS receives the request for the account, the system sends an email to the Security Administrator(s) at the local site, notifying the site that the account is ready for activation. The site system administrator then assigns the appropriate roles and privileges and provides local access to the CDR and CHCS.

Upon AHLTA account accreditation, the Security Administrator, through a local process, notifies the user that his/her account has been accredited and he/she can proceed to log into AHLTA. The user logs into AHLTA using the CHCS Access/Verify code and is prompted to change his/her password and to enter a new User ID. This updates the CHCS Verify code (password) and provides the user with a username for entering AHLTA and CHCS (single sign-on), but does not change the CHCS Access code.

Note: According to the MHS Security Guidelines, the AHLTA password must meet the following criteria.

- Minimum of 8 and maximum of 20 characters
 - Minimum of 2 numeric character
 - Contain at least 1 of the following non-alphanumeric characters: !, @, #, %, &, [], _ (or)
 - Mixture of case
 - It should not be a previously used CHCS Verify code
 - Passwords should not consist of words found in the dictionary
 - Should not be names, dates, etc., that are easy to guess
-

21.0 LABORATORY

21.1 Laboratory Overview

The Labs module displays the results of laboratory tests. Results are viewed, not ordered from this module. Lab results are uploaded from CHCS to AHLTA and an alert is triggered when new results are received. Additionally, AHLTA exchanges patient lab results data between the CDR and the VA HDR in order to provide services in a seamless fashion to both TRICARE and HealtheVet beneficiaries who are actively being treated at both VA and DoD facilities. These patients are referred to as ADCs.

Origin	Type	Date Collected	Date Ordered	Date Resulted	Report	Ordering Provider	MTF/Facility	Site/Specimen
DoD	Standard Lab	28 Feb 2006 1552	28 Feb 2006 1549	28 Feb 2006 1553	Hemoglobin	FBTESTER, A	HMC Portsmouth	WHOLE BLOC

Test / Result Name	Site/Specimen	Collection Date / Result Values
Site/Specimen	Site/Specimen	31 Oct 2006 1416
WBC	WHOLE BLOOD, NOS	27.0 (H)
RBC	WHOLE BLOOD, NOS	31.00 (H)
Hemoglobin	WHOLE BLOOD, NOS	19.0 (H)
Hematocrit	WHOLE BLOOD, NOS	44.0
HCV	WHOLE BLOOD, NOS	55 (L)
HCH	WHOLE BLOOD, NOS	44.0 (H)
HCHC	WHOLE BLOOD, NOS	34.0
RDW	WHOLE BLOOD, NOS	12.0
Platelets	WHOLE BLOOD, NOS	80 (L)
MPV	WHOLE BLOOD, NOS	9.0
Neutrophils	WHOLE BLOOD, NOS	4.00 (L)
Lymphocytes	WHOLE BLOOD, NOS	7.00 (L)
Monocytes	WHOLE BLOOD, NOS	8.00

Figure 21-1: Military Clinical Desktop—Laboratory Module

21.1.1 In More Depth

During site activation or when an appointment is first made in AHLTA for a particular patient, 36 months' worth of patient lab results are pulled from CHCS and stored in the CDR. When the patient is first identified and flagged as an ADC patient, an initial data synchronization process between the VA and DoD systems occurs. Subsequent to that initial synchronization, data synchrony between the two agencies is maintained by real-time updates transmitted between the two systems whenever an update is made in either system to the patient laboratory data. The origin of the laboratory data is clearly identified in the Origin column of the Allergy module (DoD or VA), and the entire entry for VA originated laboratory information is highlighted in a distinctive color.

Unit	Type	Date Collected	Date Ordered	Date Recv'd	Reps	Ordering Provider	MTF Facility	Specimen	Sample	Priority	Status
VA	Standard Lab	17 Jun 2005	17 Jun 2005	17 Jun 2005	Diem 7	Travis Kelly	Potomouth P&B	Serum	Urine	Routine	Test

Figure 21-2: AHLTA Labs Module—VA Lab Data

21.2 Creating a Search Filter in the Lab Module

The results listed in the Lab module can be filtered. You can create a filter to sort lab results for which you are interested.

Follow the steps below to create a filter for viewing lab results:

1. Click **Options** on the Lab module. The Lab Results Properties window opens.
2. Click the Filter tab.

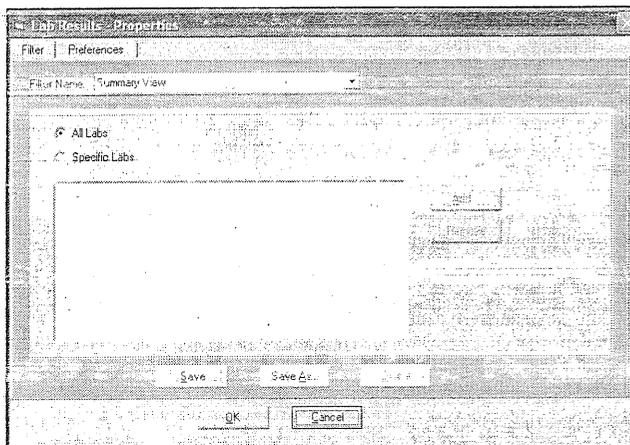


Figure 21-3: Lab Results—Properties Window—Filter Tab

3. Select the applicable radio button for the lab results you want to view.
 - If **All Labs** is selected, all of the listed lab results are displayed.
 - If **Specific Labs** is selected, click **Add** to open the Add Lab Type window to add specific lab results.
4. Click **Save As**. If this is a change to a pre-existing filter, click **Save**.

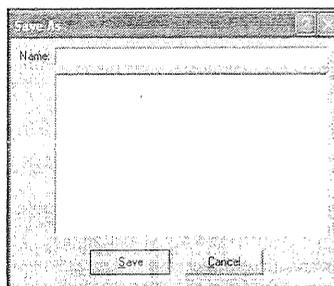


Figure 21-4: Save As Window

5. Enter the name for the filter.

6. Click **Save**.

Note: To delete a personal filter, select the filter from the list and click **Delete**. At the confirm deletion prompt, click **Yes**.

7. Click **OK**.

21.3 Setting Laboratory Module Preferences

The Preferences tab allows you to set default times and viewing options. Each time you open the Lab module, the listed results match these defaults. The Lab module is defaulted to display ten lab results. The default value can be changed, but this may impact your wait time and system performance.

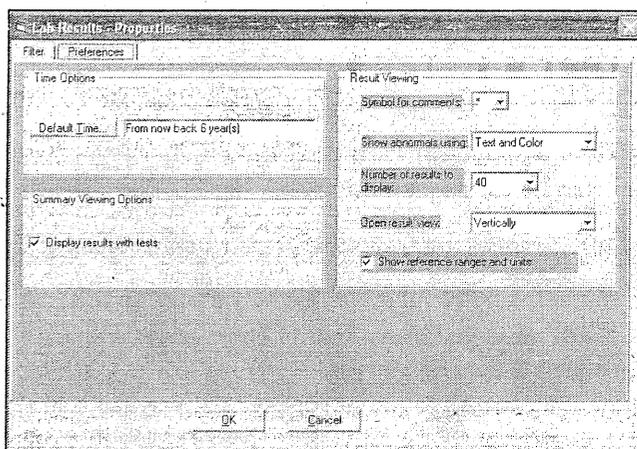


Figure 21-5: Lab Results—Properties Window—Preferences Tab

Follow the steps below to set Lab module preferences:

1. Click **Options** on the Action Bar. The Lab Results Properties window opens.
2. Click the **Preferences** tab.
3. Click **Default Time**. The Lab Results warning dialog box displays.
4. Click **OK**. The Time Search window opens.

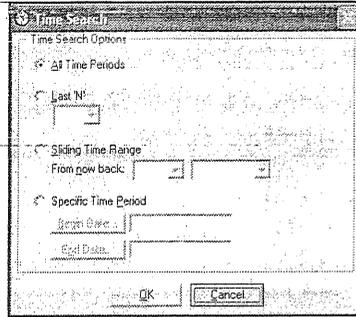


Figure 21–6: Time Search Window

5. Select the radio button for the applicable Time Search Option and click **OK**.

Note: The items in the Summary Viewing Options area have no bearing on the default display.

6. In the Result Viewing area, complete the following fields:
 - **Symbol for comments:** This field has no bearing on the Lab module.
 - **Show abnormal using:** This field has no bearing on the Lab module.
 - **Number of results to display:** Select the number of results to be displayed in the Lab module.
 - **Open result view:** Select the desired view for the results. Options include vertically and horizontally.
7. Click **Show Reference Ranges and Units** to display units upon opening the Lab module.
8. Click **OK**.

21.4 Viewing Lab Results

Once the search criteria have been defined, the lab test results are displayed.

Origin	Type	Date Collected	Date Ordered	Date Resulted	Report	Ordering Provider	MTF/Facility	Site/Specimen
DoD	Standard Lab	28 Feb 2006 1352	28 Feb 2006 1549	28 Feb 2006 1553	Hemoglobin	FBTESTER, A	NMC Portsmouth	WHOLE BLOC

Test / Result Name	Site/Specimen	Collection Date / Result Values
	Site/Specimen	31 Oct 2006 1416
WBC	WHOLE BLOOD,NOS	27.0 (H)
RBC	WHOLE BLOOD,NOS	31.00 (H)
Hemoglobin	WHOLE BLOOD,NOS	19.0 (H)
Hematocrit	WHOLE BLOOD,NOS	44.0
MCV	WHOLE BLOOD,NOS	55 (L)
MCH	WHOLE BLOOD,NOS	44.0 (H)
MCHC	WHOLE BLOOD,NOS	34.0
RDW	WHOLE BLOOD,NOS	12.0
Platelets	WHOLE BLOOD,NOS	80 (L)
MPV	WHOLE BLOOD,NOS	9.0
Neutrophils	WHOLE BLOOD,NOS	4.00 (L)
Lymphocytes	WHOLE BLOOD,NOS	7.00 (L)
Monocytes	WHOLE BLOOD,NOS	8.00

Figure 21-7: Lab Test Results

Select the desired test data to be viewed by selecting the test name. The data is displayed in the bottom of the Lab module. The Lab Result Profile area can be changed according to individual preference.

- **Display All Test Results:** Click **Select All Results** to view all test result data in the test viewing area simultaneously.
- **Ref Range/Units:** Select the check box to view the AHLTA normal range and unit for each test.
- **Change Viewing Format:** The layout of the results can either be seen vertically or horizontally. Select the appropriate radio button.
- **Legend:** Click **Legend** to view the codes used in the test results.

Tip:

To view any comments associated with the result, double-click on a cell with <o>, <i>, <r>, or <a> to view the order comments, interpretations, results comments, and amendments.

Note: Lab results cannot be printed directly from the Lab module. In order to print lab results, you must first copy the lab result to a note and then print it as part of a current encounter, or print the lab results from the Flowsheets module.

21.5 Viewing Sensitive Lab Results

If you are not the ordering provider and you wish to view the details of a sensitive lab result, you must consent to being audited before the results are displayed.

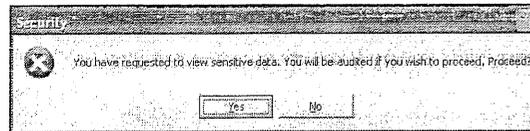


Figure 21-8: Security Warning

Double-click on the Results in the lower pane to view available additional information on the results.

If you decline to be audited, or you are otherwise not authorized to view all of the result information, the sensitive lab results are masked with asterisks.

21.6 Copying Lab Results to a Note

Details of a lab result can be copied to the clipboard or copied and placed directly into the S/O portion of the current patient encounter summary.

Follow the steps below to copy lab results to a note:

1. Select the desired result so the details are in the bottom of the Lab module.
2. Select the result(s) you want to copy.

Tip:

To select the results, click inside the top, left box. Continue holding down the mouse button and drag the mouse to the lower-right corner.

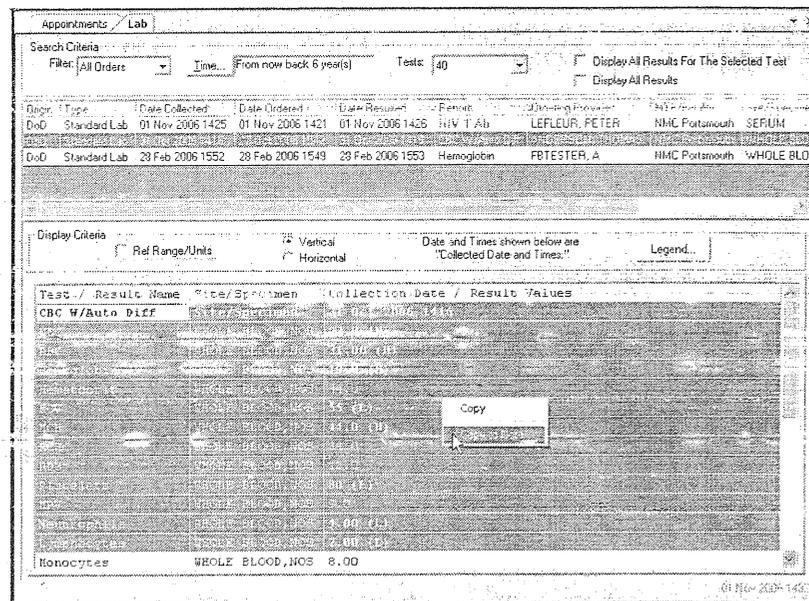


Figure 21-9: Lab Results Window (Copy Lab Results)

3. Right-click in the lab results pane, then select one of the following:
 - **Copy:** Copies the selection on the clipboard so it can be used in another location.

— **Copy to Note:** Copies the details directly into the S/O portion of the current patient encounter summary.

Note: You must open an encounter to use the Copy to Note function. The result is pasted directly into the patient encounter. Once copied, the results cannot be deleted from the note, so ensure that you only select the **Copy to Note** option once to avoid duplication.

4. After you copy lab results into a note, you can print the lab results as part of an encounter by printing the electronic SF600.

21.7 Printing Lab Results

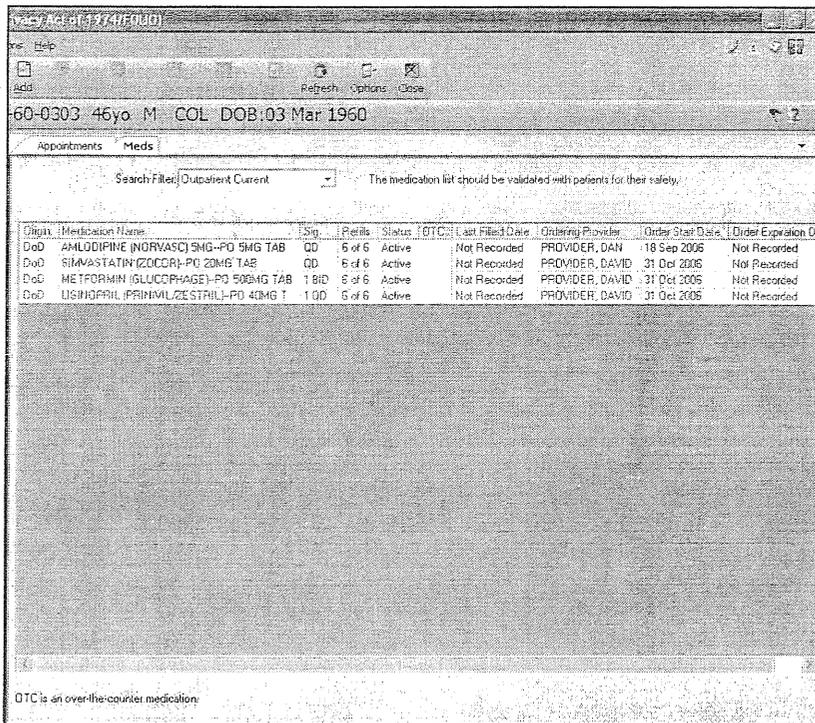
Lab results cannot be printed directly from the Lab module. Lab results can only be printed from the electronic SF600 as part of a current encounter after you copy the lab results to a note, or lab results can be printed from the Flowsheets module.

23.0 MEDICATIONS

23.1 Medications Overview

The Medications module lists the patient's past and present medications. The list includes OTC, outside, and AHLTA ordered medications. Additionally, AHLTA exchanges patient medications data (including Pharmacy Data Transaction Service [PDTS] medications data) between the CDR and the VA HDR in order to provide services in a seamless fashion to both TRICARE and HealthVet beneficiaries who are actively being treated at both VA and DoD facilities. These patients are referred to as ADCs (Active Dual Consumers).

Note: PDTS data in the CDR is day forward and there will be no historical pull of PDTS data for patients.



The screenshot shows a software window titled "Vadyn Act of 1974 (EQUO)". The patient information at the top is "60-0303 46yo M COL DOB:03 Mar 1960". The "Meds" tab is active, with a search filter set to "Outpatient Current". A warning message states: "The medication list should be validated with patients for their safety." Below this is a table of medications:

Orig	Medication Name	Dose	Refills	Status	OTC	Last Filled Date	Ordering Provider	Order Start Date	Order Expiration Date
DoD	AMLODIPINE (NORVASC) 5MG--PO 5MG TAB	QD	6 of 6	Active		Not Recorded	PROVIDER, DAN	18 Sep 2006	Not Recorded
DoD	SIMVASTATIN (ZOCOR)--PO 20MG TAB	QD	6 of 6	Active		Not Recorded	PROVIDER, DAVID	31 Oct 2006	Not Recorded
DoD	METFORMIN (GLUCOPHAGE)--PO 500MG TAB	1 BID	6 of 6	Active		Not Recorded	PROVIDER, DAVID	31 Oct 2006	Not Recorded
DoD	LISINPAPIL (PRINIVLIZE) 10MG--PO 40MG T	1 QD	6 of 6	Active		Not Recorded	PROVIDER, DAVID	31 Oct 2006	Not Recorded

At the bottom left of the window, a note states: "OTC is an over-the-counter medication."

Figure 23-1: Military Clinical Desktop—Medication Module

23.1.1 In More Depth

Typically, a medication is ordered through the A/P module and is sent to CHCS for processing. Once the prescription has been filled in the pharmacy, the medication is displayed in the Medication module in AHLTA. Information available for each entry

includes the Origin of the order, SIG, quantity, refills, days supply, dispensing location, clinic, status of the prescription, order information, and ordering end user.

The default list of medications includes outpatient current medications for patients with an appointment classification of Outpatient. When the Medications module is opened for a patient whose classification is Inpatient, the default filter is Inpatient Current.

In the list of medications, active medications appear in regular text and inactive medications appear in bold text. Those medications that were added as an OTC/Outside medication will have a check in the OTC column.

VA medication profile information for ADC patients is sent to the PDTS by AHLTA. PDTS is the mechanism that is currently used for medication-medication interaction checking by the DoD. This interface will allow VA pharmacy data to be included in that interaction checking. AHLTA also accepts retail and mail order pharmacy data from PDTS for ADC patients. PDTS will send the data for all patients, but AHLTA will accept and store the data only for patients whose ADC status is set to "Active."

When the patient is first identified and flagged as an ADC patient, an initial data synchronization process between the VA and DoD systems occurs. Subsequent to that initial synchronization, data synchrony between the two agencies is maintained by real-time updates transmitted between the two systems whenever an update is made in either system to the patient medication data. The origin of the medication data is clearly identified in the Origin column of the Medication module (DoD, VA, and Other PDTS), and the entire entry for VA and Other originated medication information is highlighted in a distinctive color. Medications originated in either the VA or PDTS cannot be modified in AHLTA.

Origin	Medication Name	Dose	Route	Status	OTC	Last Filed Date	Ordering Provider	Order Site
VA	ESTRADIOL 2MG/100MC	1	PO	Active			PROVIDER, DAVID	110 Aug 22
DoD	USUNDFIL (PRINIVL ZE STIRIL) PO 20MG T	1	PO	Active			PROVIDER, DAVID	110 Aug 22
DoD	4 HOUR ZINC PICOSSILUM CHLORIDE PO 2MG Q 4	1	PO	Active			PROVIDER, DAVID	110 Aug 22
DoD	USUNDFIL (PRINIVL ZE STIRIL) PO 20MG T	1	PO	Active			PROVIDER, DAVID	110 Aug 22

figure 23-2: Medications List

23.2 Setting the Filter of the Medications Module

The default filter, either Outpatient Current or Inpatient Current, can be changed. The Properties window in the Medications module contains the Default Filter drop-down list. The Default Filter is used to set the default Search Filter in the Medications module.

Follow the steps below to change the filter:

1. Click **Options** on the Action Bar. The Properties window opens.

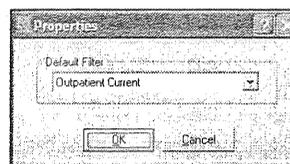


Figure 23-3: Properties Window

2. Select the desired filter from the Default Filter drop-down list.

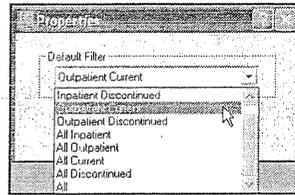


Figure 23-4: Default Filter Drop-Down List

3. Click **OK**. The list of medications is refreshed based on the selected filter.

23.3 Ordering a New Medication

Medications can be ordered directly from the Medications module if an encounter is open and the filter is set to **Outpatient Current**.

Follow the steps below to order a new medication:

1. Open the appropriate encounter.
2. In the Medications module, click **Add** on the Action bar. The Select Type of New Medication window opens.

Tip:
To add a new medication, you must set the filter to **Outpatient Current**.

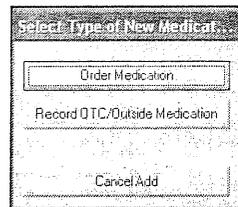


Figure 23-5: Select Type of New Medication Window

3. Click **Order Medication**. The New Order window displays at the bottom of the workspace.

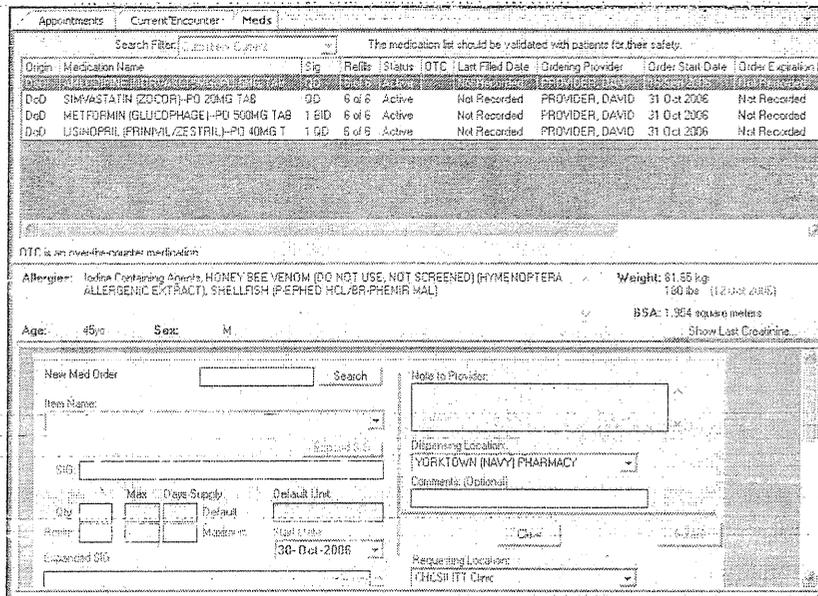


Figure 23-6: Order Entry Medications Window

4. Enter the name of the medication in the Search field and click **Search**.
5. Select the medication from the results displayed in the Item Name field.
6. Complete the following fields:
 - SIG

Note: If a CHCS sig exists for the selected medication, it auto-populates this field. The SIG can be edited.

- Quantity
- Refills
- Start Date
- Child Resistant Cap
- Comment
- Expanded SIG
- Requesting Location
- Dispensing Location
- Ordering Provider

7. When all the necessary information has been added, click **Submit**. The ordered medication displays on the medication list once it has been filled by the pharmacy.

Note: CHCS pre-verifies the order against patient and medication records and displays any resulting messages or warnings, as well as any SIG code(s) and standard order/refill quantities associated with the medication. Warnings include duplicate orders and drug-drug and drug-allergy interactions. To override a warning in the Warnings window, enter a reason for the override and click **Accept Override**. To ignore the warning override, click **Cancel Order**.

23.4 Documenting an OTC/Outside Medication

An OTC/Outside medication can be documented in the Medications module. Medications added as an OTC/Outside medication are not considered during the pre-verify process that occurs when a medication is ordered. There are no drug-drug, drug-allergy, or duplicate order warnings based on these documented medications.

Follow the steps below to document an OTC/Outside medication:

1. Click **Add** on the Action bar. The Select Type of New Medication window opens.

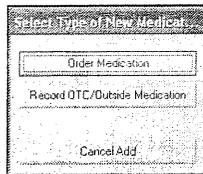


Figure 23-7: Select Type of New Medication Window

2. Click **Record OTC/Outside Medication**. The New OTC/Outside Medication pane opens at the bottom of the workspace.

Figure 23–8: New OTC/Outside Medications Window

3. Click **Medications** to search for and locate the medication. The HDD Search window opens.
4. Enter the name of the medication and click **Search**.
5. Select the correct medication and click **OK**. The HDD Search window closes and the medication populates the field.
6. On the New OTC/Outside Medication window, complete the following fields:
 - **Sig:** Enter the dosage and frequency of use.
 - **Ordering Provider:** Enter the name of the provider who issued the medication. This is not a required field.
 - **Order Start Date:** Click **Order Start Date** to enter the correct date using the calendar or enter the date directly in the Start Date field.
 - **Comment:** Free text field.
7. Click **OK**. The OTC is added to the patient's medication list.

23.5 Reviewing a Medication

Follow the steps below to review a medication:

1. Select the medication you want to review.
2. Click **Details** on the Action bar. The Details window opens and is read-only.

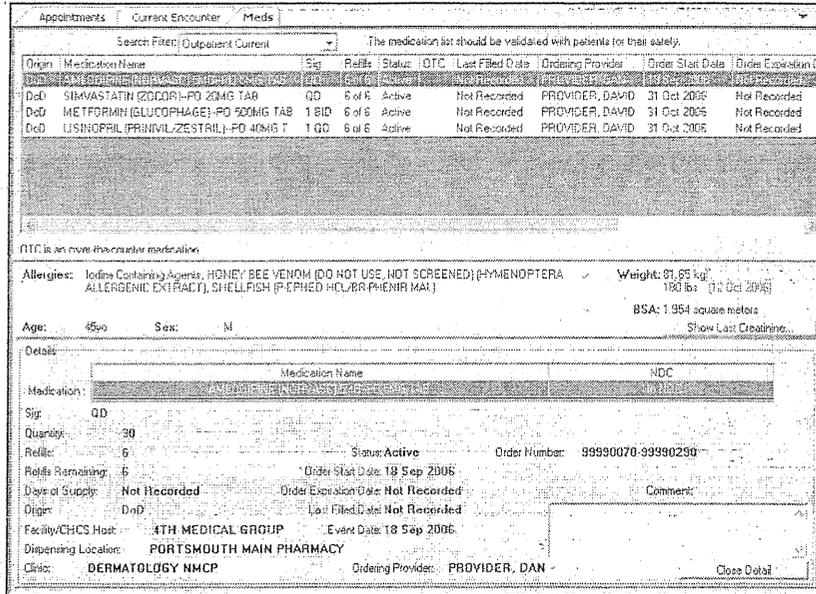


Figure 23-9: Details Window

3. Click Close Detail.

23.6 Discontinuing a Medication

Both ordered and recorded OTC/Outside medications can be discontinued from the Medications module at the ordering Host site. A recorded OTC/Outside medication can be discontinued directly from the Medications module with or without an encounter being open. An encounter must be open to discontinue an ordered medication.

Additionally, a provider at a CHCS Host site other than the one where the medication was originally ordered can discontinue a medication. This action does not require that an encounter be open. When such an action is attempted, a dialog box displays.

If the provider elects to continue with the discontinuing action, by clicking **OK**, the medication is discontinued and the status is changed to **Discontinued in AHLTA**.

When the cursor hovers over the discontinued medication, a tool tip displays the name, location and date of when the Rx was discontinued in AHLTA.

As there is no connectivity between the discontinuing CHCS Host site and the original ordering CHCS Host site, the discontinuing action will not be written back to the original ordering CHCS Host site. Subsequently, if the original ordering CHCS Host site, either discontinues, or renews the medication, the status of **Discontinued in AHLTA** will be overwritten with either **Discontinued** or **Active** as appropriate. Orders from non-CHCS Host sites can not be discontinued using this functionality.

Follow the steps below to discontinue a medication:

1. Select the medication to be discontinued.

Tip:
You can still view information for a discontinued medication by setting up a filter that displays discontinued medications.

2. Click **Discontinue** on the Action bar.

Note: There is no confirmation message when discontinuing an ordered medication.

3. At the Inactive Medications confirmation prompt, for an OTC/Outside medication, click **OK**.
4. Change the Search Filter to **All Discontinued** or **All** to view the discontinued medication(s).

Origin	Medication Name	Sig	Refills	Status	DTC	Last Filled Date	Ordering Provider	Order Start Date
DoD	METOPROLOL (LOPRESSOR)-PO 100MG-TAB	QD	6 or 6	(Out) Discontinued by AHLTA		Not Recorded	PROVIDER, DAVID	06 Jun 2005
DoD	SIMVASTATIN (ZOCOR)-PO 20MG-TAB	QD	6 or 6	(Out) Discontinued		Not Recorded	PROVIDER, DAVID	19 Jul 2005

Figure 23-10: Discontinued Medications

23.7 Renewing a Medication

When the renew action is taken from the Medication module, the system automatically brings up the Order Entry Medication window. This function is only available for prescriptions that were originally ordered through the pharmacy and if an encounter is open.

Follow the steps below to renew a medication:

1. Select the medication to be renewed.
2. Click **Renew** on the Action bar. The Order Entry Medication window opens.

Medication Name (Dispensed Only)	Profile	Status	OTC
SODIUM CHLORIDE 0.225% SOLN	1119 PO BID RFD	NR	Expired
ASPIRIN/CAFF/BUTALBITAL (FIORINAL)-PO TAB	AS NEEDED #50 RFD	NR	Expired
GUAIFENESIN/CODEINE (ROBI AC EQ. I)-PO SYRP	AS DIRECTED #120 RFD	NR	Expired

0 in OTC column indicates an outside medication

Allergies: SALT PETER (POTASSIUM NITRATE)

Weight: 185 lbs - 20 Nov 2001 15:45
BSA: 2.061 square meters
20 Nov 2001 15:45

Age: 40yo Sex: M

New Med Order Search

Item Name: _____

SIG: _____

Max: _____ Days Supply: _____ Default Unit: _____

Qty: _____ Refills: _____ Expanded SIG: _____

Note to Provider: _____

Child Resistant Cap

Component (Optional): _____

Requesting Location: _____

Dispensing Location: _____

Buttons: Clear, Close, Submit

Figure 23-11: Order Entry Medication Window

3. Change the SIG, Quantity, or Refills, as appropriate.
4. Click **Submit**.

23.8 Copying Medication Information to the Current Encounter

As with the Lab and Radiology modules, a patient's medications history can be copied to a note. An encounter must be open in order to use the Copy to Note function in the Meds module. This function differs from AutoCiting medications in that not only can the user pick and choose which medications to add to the note, but medications, regardless of status (i.e., inpatient, discontinued, etc.), can be added to the note at the user's discretion. If working in Failover mode, the Medications listed will be limited to what is in the Local Cache database.

To copy medication information to the current encounter:

1. Open the encounter that the medication(s) will be written to.
2. Click the **Meds** module from the Folder List. The Meds module opens.
3. Select the appropriate filter to display the medications you want to add to the note.
4. Select or multi-select the medication(s).
5. Right-click the mouse and select **Copy to Note**. The note is copied to the S/O portion of the encounter note.

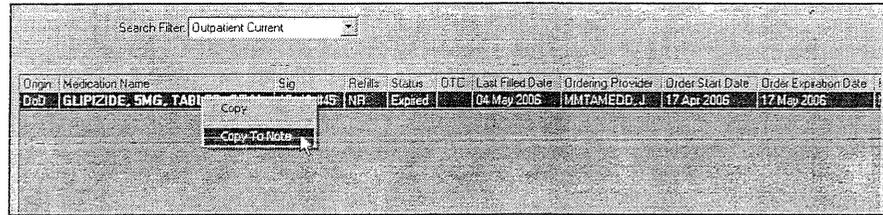


Figure 23-12: Copy to Note

Note: If an encounter is not open, a warning dialog box displays stating that the medication could not be copied to the note.

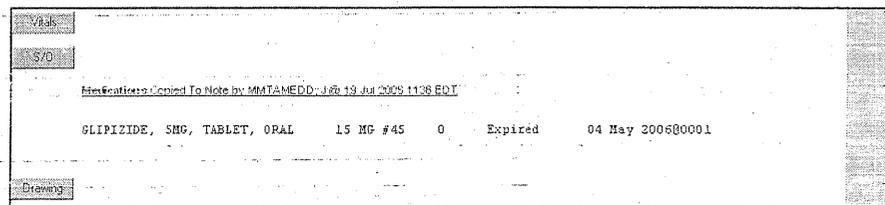


Figure 23-13: Med Copied to Note

To copy medication information to the clipboard to be pasted later:

1. Select or multi-select the medications from the Medications module.
2. Right-click the mouse and select **Copy**. The medication information is saved to the clipboard and can be pasted later.

45.0 SIGN ORDERS

45.1 Sign Orders Overview

The Sign Orders module allows you to validate orders submitted by non-providers. When a non-provider submits a consult, lab order, radiology procedure, or medication for a patient encounter in the A/P module, the assigned provider receives notification that an order was entered on your behalf by the non-provider. The order's status is pending until you sign the order.

The screenshot shows a software window titled "Sign Orders" for patient "0-0303 46yo M COL DOB:03 Mar 1960". The window contains a table of orders with columns for Patient, Description, Type, Entered By, and Date/Time. The table lists several orders, including chest X-rays, liver panels, lipid panels, glucose and protein urine tests, hemoglobin A1C tests, urine protein tests, liver function tests, and lipoprotein profiles. The orders are entered by "NPDE, NURSE" on various dates in 2002 and 2004. At the bottom of the window, there are buttons for "Refresh", "Expand/Collapse", "Cancel Selected Orders", "Sign Selected Orders", and "Sign All Shown Orders".

Patient	Description	Type	Entered By	Date/Time
WILLIAMS, CLAYTON	CHEST, PA AND LATERAL on 25 Oct 2002:11:51:20	RAD	NPDE, NURSE ...	10/25/2002 ...
SUAREZ, EDUARDO	LIVER PANEL on 09 Aug 2004:12:30:42	LAB	NPDE, NURSE ...	8/9/2004 12:...
SUAREZ, EDUARDO	LIPID PANEL COMPLETE on 09 Aug 2004:12:30:35	LAB	NPDE, NURSE ...	8/9/2004 12:...
SUAREZ, EDUARDO	GLUCOSE AND PROTEIN, URINE on 09 Aug 2004:...	LAB	NPDE, NURSE ...	8/9/2004 12:...
SUAREZ, EDUARDO	HEMOGLOBIN A1C on 09 Aug 2004:12:20:52	LAB	NPDE, NURSE ...	8/9/2004 12:...
SUAREZ, EDUARDO	URINE PROTEIN on 25 Oct 2002:11:59:54	LAB	NPDE, NURSE ...	10/25/2002 ...
SUAREZ, EDUARDO	HEMOGLOBIN A1C on 25 Oct 2002:11:59:17	LAB	NPDE, NURSE ...	10/25/2002 ...
SUAREZ, EDUARDO	BCC LIVER on 25 Oct 2002:11:57:11	LAB	NPDE, NURSE ...	10/25/2002 ...
SUAREZ, EDUARDO	LIPID PROFILE on 25 Oct 2002:11:56:55	LAB	NPDE, NURSE ...	10/25/2002 ...
WILLIAMS, CLAYTON	CHEM 7 PANEL on 25 Oct 2002:11:52:07	LAB	NPDE, NURSE ...	10/25/2002 ...
SUAREZ, MIGUEL	THROAT CULTURE R/O GP A STREP on 25 Oct 2...	LAB	NPDE, NURSE ...	10/25/2002 ...
SUAREZ, MIGUEL	RAPID STREP GROUP A(NAVY LABS) on 25 Oct 2...	LAB	NPDE, NURSE ...	10/25/2002 ...

Figure 45-1: Military Clinical Desktop—Sign Orders

45.2 Cancelling a Non-Provider Order

The Sign Orders module lets you cancel orders entered by non-providers in the A/P module.

Follow the steps below to cancel a non-provider order:

1. On the Sign Orders module, select the order(s) you want to cancel.
2. Click **Cancel Selected Orders**. A confirmation window appears.

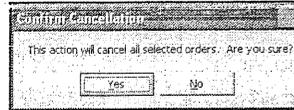


Figure 45-2: Sign Orders Cancellation Dialog Box

3. Click **Yes**. The order(s) is removed from the Sign Orders module.

45.3 Signing Non-Provider Orders

The Sign Orders module allows you to validate orders entered by non-providers in the A/P module. You do not need to have the patient's encounter open to sign the order(s). The Sign Orders icon displays in the patient ID line when you have orders that need to be signed.

Follow the steps below to sign non-provider orders:

1. On the Sign Orders module, select the checkboxes for the order(s) you want to sign.
2. Click **Sign Selected Orders**. The order(s) is removed from the Sign Orders module.

Note: If you want to sign all orders listed, click **Sign All Orders**. If you want to view detailed information about the order, expand the order by clicking the small plus sign "+" next to the order. If you want to expand all orders in the workspace, click **Expand All**.

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Military Health System Help Desk

Monday, March 17, 2008



Services and Programs

- CHCS Ad Hoc
- MHS Programs
- Software Duplication

Service Requests Forms

- MHS HelpNow Registration
- CHCS Ad Hoc - New
- CHCS Ad Hoc - Existing
- GOTS MHS Software
- EIDS Tools Password Reset
- ManageNow CBTs Download Request
- ManageNow CBTs Shipment Request
- ManageNow ID

MHS Help Desk Tools

- Available Tools
- Phone Tree Mapping
- MHS ManageNow
- MHS HelpNow
- ManageNow Users Guide

Related Sites

- TIMPO Home Page

Contact Us

- Access Numbers
- Contact Information

System: CHCS

Description

Composite Health Care System

The CHCS provides world-wide automated medical information system support to all MTFs in providing comprehensive, high quality health care to uniformed service personnel, retirees and dependents.

The Composite Health Care System (CHCS) is one of the largest medical systems in the world and the primary automated medical information system for the Department of Defense (DoD).

CHCS provides essential, automated information support to Military Health System (MHS) providers, enabling improved quality of care for 8.9 million MHS beneficiaries at more than 700 DoD hospitals and clinics worldwide.

For patients, CHCS facilitates improvements in the delivery of health care that reduce wait time, increase access to medical and professional resources, and expedite diagnostic testing. For providers, CHCS promotes increased communication and supports near real-time access to patient information.

CHCS employs the following functionalities to help providers deliver the best possible health care to MHS beneficiaries:

- Patient Administration
- Patient Appointments and Scheduling
- Managed Care Program
- Clinical
- Laboratory
- Radiology
- Pharmacy
- Dietetics
- Quality Assurance
- Workload Accounting Menu
- Medical Services Accounting
- Ambulatory Data Menu
- Medical Records Tracking

CHCS interfaces with 40 plus external clinical and administrative systems.

Program : CITPO
Office :
Source : Military Health System Health Affairs Website
Last validated : 04/11/2007

Military Health System Help Desk

Monday, March 17, 2008



Services and Programs

- CHCS Ad Hoc
- MHS Programs
- Software Duplication

Service Requests Forms

- MHS HelpNow Registration
- CHCS Ad Hoc - New
- CHCS Ad Hoc - Existing
- GOTS MHS Software
- EIDS Tools Password Reset
- ManageNow CBTs
Download Request
- ManageNow CBTs
Shipment Request
- ManageNow ID

MHS Help Desk Tools

- Available Tools
- Phone Tree Mapping
- MHS ManageNow
- MHS HelpNow
- ManageNow Users Guide

Related Sites

- TIMPO Home Page

Contact Us

- Access Numbers
- Contact Information

System: AHLTA

AHLTA

formerly known as Composite Health Care System II (CHCS II)

AHLTA is the medical and dental clinical information system that will generate and maintain a comprehensive, life-long, computer-based patient record (CPR) of all preventive care rendered to, and all illnesses and injuries treated for, each Military Health System (MHS) beneficiary.

AHLTA was designed to meet the challenge of making medical and dental records immediately available to providers caring for a highly mobile population that includes 1.4 million active duty Armed Service members around the world. The system provides authorized users with secure electronic access to a Department of Defense (DoD) beneficiary's comprehensive health record, which includes data on preventative care, illnesses, injuries, and exposures treated at any military treatment facility (MTF). All AHLTA users will have access to any eligible beneficiary's medical/dental record within seconds from any MTF in the world.

AHLTA CAPABILITIES

- Encounter Documentation and Coding
- Problem List Generation
- Order Entry
- Results Retrieval
- Consult Tracking
- Allergies Warning
- Medical Alerts
- Immunization Documentation
- Wellness Reminders
- Self Reporting Tools.

AHLTA CHARACTERISTICS

- Creates a life-long health record for TRICARE beneficiaries
- Offers an intuitive, graphical user interface designed by military providers to support clinical workflow
- Leverages structured documentation to maintain integrity of patient data and optimize data standardization
- Enables symptom-based medical surveillance
- Uses templates to simplify workflow
- Provides 24 hour, 7 day a week access to beneficiary EHR

- Eliminates health record legibility issues
- Enables population health and wellness reporting
- Provides clinical functionality used in support of deployed service members, ensuring a "train as we fight" approach
- Ensures costly tests, labs and scans aren't lost and needlessly duplicated
- Interoperability ensures records can be accessed at any MTF world-wide
- Prevents unauthorized access and protects from loss due to natural or man-made disasters

Program
Office : CITPO

Source : Military Health System Health Affairs
Website

Last validated : 04/11/2007

Composite Health Care System

From Wikipedia, the free encyclopedia

The **Composite Health Care System** (CHCS) is a VMS-based relational database designed by Science Applications International Corporation and used by all United States and OCONUS military health care centers.

CHCS is module based: RAD (radiology), LAB (Laboratory), PHR (Pharmacy), PAS (Patient Appointing & Scheduling), MCP (Managed Care Program; used to support TRICARE enrollees by enrolling them to Primary Care Managers), PAD (Patient Administration): MRT (Medical Records Tracking), MSA (Medical Service Accounting) medical billing, WAM (Workload Assignment Module), DTS (Dietetics), CLN (CLinical: Nursing, Physician, and Allied Health), DAA (Database Administration), ADM (Ambulatory Data Module) Medical Coding of outpatient visits and TOOLS (FileMan).

Currently all appointments are booked in CHCS, except for Walk-Ins and Telephone Consults, which can now be booked in AHLTA. CHCS is a text based BBS/ANSI like display accessed via DEC VT320 terminal emulation.

CHCS shares its original codebase with the VA's VistA system. Since its inception it has been customized for supporting the Military and their family members.

Security in CHCS works by concept of least privilege. You are assigned the minimum needed for your work duties. This limits your access to sensitive data both protected by the Privacy Act 1974 and PHI protected under HIPAA.

AdHoc reports can be written using the FileMan tools and can be quite powerful, if the files are designed with that in mind. Many CHCS files are now more easily accessed with MUMPS routines that can make more efficient use of the internal datastructures.

CITPO began the implementation of AHLTA, the DoD's electronic health record (EHR), in January 2004. It is a "next generation" system that links the 481 Military Treatment Facilities (MTF) world-wide as well as service members deployed abroad to the EHR, ultimately supporting 9.2 million MHS beneficiaries. The introduction of AHLTA, previously known as the Composite Health Care System-II, marks a significant new era in health care for the MHS and the nation. AHLTA is a powerful, potentially life-saving tool that provides around the clock access to a single data repository of all treatment. It provides MHS providers with efficient, secure access to health-sustaining information. AHLTA is the most expansive EHR system in the nation, yet it can also be scaled to the health information requirements of tracking a single sick or injured service member in the field environment. AHLTA is being deployed in phases, or "blocks" of increasing functionality that allows the MHS to build a system that is easily adapted to meet evolving requirements and to incorporate the latest available technology. Block 1 provides the foundation of system performance through a graphical user interface for real-time ambulatory encounter documentation. It enables retrieval of a beneficiary's health record at the point of care.

Block 2 will integrate robust dental documentation and optometry orders management capabilities.

Subsequent blocks will modernize legacy system ancillary services (laboratory, pharmacy, and radiology), order entry and results retrieval, inpatient documentation, and interface exchange with other MHS information support systems. Unique to AHLTA is the entry of more than 2 years of historical health information for each beneficiary upon the creation of their EHR. This information, transferred from legacy systems, facilitates continuity of care. As of December 2006, AHLTA Block 1 has been fully deployed and is in use by more than 55,000 MHS care providers in 481 Army, Navy and Air Force treatment facilities worldwide, including Combat Support Hospitals and Battalion Aid Stations in the combat zones.

AHLTA CHARACTERISTICS Creates a life-long health record for TRICARE beneficiaries Offers an intuitive, graphical user interface designed by military providers to support clinical workflow Leverages structured documentation to maintain integrity of patient data and optimize data standardization Enables symptom-based medical surveillance Uses templates to simplify workflow Provides 24 hour, 7 day a week access to beneficiary EHR Eliminates health record legibility issues Enables population health and wellness reporting Provides clinical functionality used in support of deployed service members, ensuring a "train as we fight" approach Ensures costly tests, labs and scans aren't lost and needlessly duplicated Interoperability ensures records can be accessed at any MTF world-wide Prevents unauthorized access and protects from loss due to natural or man-made disasters

AHLTA Capabilities Encounter Documentation and Coding Problem List Generation Order Entry Results Retrieval Consult Tracking Allergies Warning Medical Alerts Immunization Documentation Wellness Reminders Self Reporting Tools I use CHCS. It's the greatest.

Retrieved from "http://en.wikipedia.org/wiki/Composite_Health_Care_System"
Hidden categories: Cleanup from February 2007 | All pages needing cleanup

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Laboratory Interface Phase 3

Miscellaneous Features –
Mockups

14 Dec 2006

Miscellaneous Requirements

Screen Mock-ups

- Mock-ups are included for:
 - Laboratory Order Entry
 - Collection Priority moved
 - Order Required Data now displays
 - Order Entry
 - Lab Results
 - Laboratory ID
 - Display with Lab Results
 - Disclosure
 - Display with Lab Results
 - Lab Result Print Option

Laboratory Order Entry

- Moved collection priority out of detail to main screen.
- Put collection priority before processing priority since that is the order in which CHCS collects the data.

Order Lab - Laboratory Order Entry Screen: - Re-location of collection priority

Collection Priority displays on less detail and more detail - above processing priority

Collection Priority - now precedes Processing Priority.

The screenshot displays a software interface for entering laboratory orders. At the top, there are window controls and a title bar. Below this, a navigation menu includes options like 'Reminders', 'Order Consults', 'Order Lab', 'Order Rad', 'Order Med', and 'Other Therapies'. The main area contains several input fields and controls:

- Order Entry Section:** Includes 'Lab Section' (with a dropdown menu), 'Lab Test Name', 'Collection Priority' (with radio buttons for Routine, ASAP, STAT, Preop), and 'Processing Priority' (with radio buttons for Routine, ASAP, Notify, Preop).
- Specimen Section:** Includes 'Specimen' (with a dropdown menu), 'Notes to Provider', and 'Comments: (Optional)'.
- Buttons:** 'More Detail...', 'Clear', 'Save to Duplicate', and 'Submit'.
- Footer:** Includes 'Order System Ready', 'Show Orders', and a taskbar with system icons and a clock showing 12:42 PM on 4/22.

Order Required Data- Order Entry

- Order Required Data entered for existing open orders will display on the existing Order Detail display popup window.
 - Order detail display window is accessed, based on existing functionality, by double-clicking the order in the list at the bottom of the screen.
 - Can be multiple sets of order required data per order.
 - Displays “before text”, response, “after text”
 - Before and after text are configured with the order required data set in CHCS.
 - Some order required data sets may not have before and/or after text, in which case, only the response will display.

Lab Order Entry - Order Required Data Display

Folder List

- Health History
- Problems
- Meds
- Allergy
- Wellness
- Vital Signs Re
- PKC Couplers
- Readiness

Priority 1

Lab Test Name CHFM 10 - SEND PATIENT TO LAB BLOOD, RED SEP/SEL on 18 Jan 2006 01321

Collection Priority Routine

Process Priority Routine

Specimen BLOOD

Order Required Data Patient is Diabetic
Patient is on Insulin

Line Item 1

Admin Time 1321

Frequency

Spec Coll Date

Order Comment

Entered By BATTE, RAMELLE IV

Time 18 Jan 2006 13:20

Order Provider BATTE, RAMELLE IV

Signature HCP: BATTE, RAMELLE IV 18 Jan 2006 13:20

Orders & Procedures

- BLOOD CULTURE
- URINE CULTURE
- ALLERGY FT LEE
- INTERNAL MEDICINE NMC

Other Therapies

Other Medications

Medication

Signature

Order ID

- 06010...
- 06010...
- 06010...
- 06011...

Buttons: New, Discontinue, Renew + Modify, Modify, Hold, Show Detail

Sending Order Detail Request

Reminders

1 Hour Glucose Tolerance Test

System Tray: Start, 58 Mi., 6 Mar., 15 Mi., 4 Mic, Temp, Oracle, unttled, BATTE, 6:45 PM

Laboratory Detail window, accessed by double-clicking order from outstanding order list - Displays Order Required Data. Multiple instances possible, so scrolling is possible.

Order Required Data

Lab Results

- Order Required Data entered at the time the order was placed will display for Micro Results – as well as for other Laboratory Results.
 - “Before” and “After” text (as defined) will display, in addition to the response to ordered required data.
 - Includes ability to display multiple sets of ordered required data per result.
- A new box will be added to the Interpretations/Amendments window for Order Required Data.
- All 3 windows will have independent re-sizing capability.

Order Required Data --

New indicator (<m>) denotes existence of Order Required Data for the result.

Alert Review
 Appointments
 Telephone Consult
 Search
 Patient List
 Consult Log
 Co-signs
 New Results
 Reports
 Tools
 Sign Orders
 CHCS-I
 Immunizations Adm

File
 Folder
 ?

Display Canceled Orders

Select All Results

Ordering Provider: Test User
 Order Comment: chest wound

Accessioned	Report	Site/Specimen	Status	Ordering Provider	Order Comment
11 Jan 2006	Microalbumin, urine	Urine	Pending	Test User	
26 Dec 2005	Urinalysis	Urine	AMENDED	Test User	
26 Dec 2005	Hemoglobin A1c	Whole Blood, NOS	AMENDED	Test User	
26 Dec 2005	Urinalysis	Urine	Canceled	Test User	
	Ordered (Unaccessioned)				
	Date Ordered	Site/Specimen	Status	Ordering Provider	Order Comment
	Lipid Panel Complete	Serum	Ordered	Test User	
	Chem 17	Serum	Discontinued	Test User	

Display Criteria
 Ref Range/Units

Display All Results For The Selected Test
 Date and Times shown below are "Collected Date and Times" Legend...

Order: Non-apt
 chest wound

01 Sep 2005 1629
 EXUDATE, INTRAVASCULAR DEVICE
 Intravascular Device

-A- <A> <M>
 AMENDED

22 Nov 2005 2114
 several bacteria found

GRAM STAIN:
 6+ gram negative rods

Organism:
 (1) Staphylococcus aureus
 (2) Bacillus cereus

Quantity: moderate
 Quantity: minimal

Wound Culture:
 Status:
 Date Revisited:
 BACTERIOLOGY RESULT:
 GRAM STAIN:
 Organism:
 Quantity:

<m> denotes Order Required Data exists.

Filter: All Orders

Time: All time periods

Tests: All

Select All Results

Display Cancelled Orders

Accessioned	Collection Date	Report	Ordering Provider	Order Comment
	11 Jan 2006	Interpretations, Comments, Amendments, Disclosure, Order Required Data		
	12 Sep 2015	Interpretation:		
	26 Dec 2005			
	26 Dec 2005			
	26 Dec 2005			
	Ordered (Una	Comments/Amendments:		
	Date Ordered			

*** (FINAL) RESULTS (CERTIFIED) ON 12 Nov 2005@2114 BY GRANGER, HERMIENE ***

Bacteriology Result:

One micro-organism found

Organism: STAPHYLOCOCCUS AUREUS (Quantity: minimal)

SENSITIVITY DATA

Drug Name	Result	Interpretation
CEFZOLIN	<=14	R
CLINDAMYCIN	>=21	S
GENTAMICIN	S	S

Disclosure

This is the disclosure for this specimen with the result.

Order Required Data

location of injury: hand wound

format: <before text> < response> < after text>

Close

r red OW size.

Laboratory ID

- Addition of Lab ID to Lab Results
- Examples:
 - Lab at another site within same MTF/HOST:
 - MTF = Portsmouth, Lab ID = McDonald ACH –Fort Eustis
 - Satellite Lab:
 - MTF = Lackland, Lab ID = 311th Medical Sqd-Brooks
 - External Lab, such as Quest Labs:
 - MTF = Lackland, Lab ID = Quest Laboratory, Dallas, TX
 - Lab within the same MTF:
 - MTF= Seymour Johnson, Lab ID = 4th Medical Group Seymour Johnson

It - Lab ID

Time... All time periods

Tests: All

Select All Results Display Cancelled Orders

Upon highlighting a result, the user can the Show Detail button to display additional information for the order.

Laboratory Show Detail

Lab Test Name: CBC/W/UT DIFF SINO PATIENT TO LAB BLOOD
 LAVENDI F W on 16 Feb 2001 1000

Ordered Date: 16 Feb 2001 1000 Status: ACTIVE

Collection Priority: Routine Process Priority: Routine

Specimen: BLOOD

Order Required Data:

Origin DoD: Order ID: 060304-00001

Sample Type: STANDARD LAB

Start Date: 03-Mar-2007 1549 Stop Date: 03-Mar-2007 1549

Unexpanded Time: Admin Time: 1549

Duration (Days): Frequency:

Collection Method: Send Patient to: Spec Coll Date: 16 Feb 2001 1205

Order Comment:

Entered By: TWTES ER BECKYE Time: 16 Feb 2001 1000

Ordering Provider: TWTES ER BECKYE

MTF Facility: Lab Id: Ft. Eustis

Signatures: HCP: TWTES ER BECKYE E 16 Feb 2001 1000

OK

Information that has been removed from the Summary Window will be included in Detail window.

below are times." Legend...

Date Collected	Report
11 Jan 2006	Mic
11 Jan 2006	Mic
26 Dec 2005	Her
26 Dec 2005	Urin
26 Dec 2005	Her
16 Feb 2007	DBI

Ordered (Uncollected)	Lipid	Che
26 Dec 2005		
14 Nov 2005		

Display Criteria Ref Range/Units

Disclosure

- Disclosure is information entered by the performing laboratory with the results.
- Will display in a new pane on the Amendments/Interpretations/Comments Lab Results pop-up window.

Disclosure

Tests: All Select All Results Display Cancelled Orders

Accessioned Collection Date Report Site/Specimen Status Ordering Provider Order Comment
11 Jan 2008 Interpretations, Comments, Amendments, Disclosure, Order Required Data

Interpretation
26 Dec 2008
26 Dec 2008
26 Dec 2008
Ordered (Un) Date Order

Comments/Amendments

*** (FINAL) RESULTS CERTIFIED ON 22 Nov 2005@2114 BY GRANGER, HERMIENE ***
Bacteriology Result:
One micro-organism found
Organism: STAPHYLOCOCCUS AUREUS Quantity: minimal

SENSITIVITY DATA:

Drug Name	Result	Interpretation
CEFZOLIN	<=14	R
CLINDAMYCIN	>=21	S
GENTAMICIN	.5	S

Disclosure

This is the disclosure information associated with the result.

Order Required Data

location of injury: hand wound
format: <before text> < response> <after text>

Organism:
Close

Lab Result Print & Print Preview

Functionality

- Capability to print and print preview laboratory results
 - Single result, multiple results, or ALL results in summary window.
 - Selected results will print/preview.
 - Ability to use “Select All” checkbox in conjunction with print/print preview features.
- Result data printed/previewed will include (as available):
 - Result details as displayed in Detailed result window
 - Amended results
 - Result comments
 - Order required data
 - Disclosure

Print/Print Preview Laboratory Results Format

- Data:
 - Includes all tests selected from the summary window, ie, the same tests that displayed in the display pop-up.
 - Includes capability to display Ordered, pending, cancelled, resulted tests, as selected.
- Header:
 - Patient name.
 - Requesting Provider
 - Includes parameters chosen
 - Including "Select All results" setting (yes/no).
 - Date/time printed
- Result Detail:
 - Format matches that in the lab result module, display pop-up.
 - Gridlines and color coding will NOT be included in the printed format.
 - Chemistry test results appear first.
 - Micro and A/P results display last.
 - Amended results display directly after current results for each test.
- Footer: (prints on each page of report)
 - Patient Identification Data
 - Page number (n of n format)

Laboratory Results Print Preview/Print

Laboratory Results Inquiry

Print

Cancel

HEALTH RECORD

PATIENT LABORATORY RESULTS INQUIRY

Report requested by: BAITE, RAMELLE IV IRTF: NMC PORTSMOUTH 17 FEB 2006@1513
Criteria: Filter: UNIQUE ORDERS Time: FROM NOW BACK 26 DAY(S) Tests: 20 Select All Results: NO
Patient: TESTEATIENT, JOHN

Glucose, CSF 09 Feb 2006 1151 Units Ref Ring
Site/Specimen CEREBROSPINAL FLUID
Glucose 23 (L*) mg/dL (40-75)

Interpretation: This is the interpretation.
Disclosures: This is the disclosure.
Order Required Data: This is the order required data.

Hematocrit 07 Feb 2006 1151 Units Ref Ring
Site/Specimen WHOLE BLOOD, NDS
Hematocrit 44.0 % (37.0-49.0)

Interpretation: This is the interpretation.
Disclosures: This is the disclosure.
Order Required Data: This is the order required data.

Result Comment:
comment added with amend.

Result 12:0 L* reported on 13 Mar 2006@1611; (#66932) has been amended.

Glucose Tolerance Test
Proofing Environment C...

21 Dec 2005 14

BAITE, RAMELLE IV in Pain Manag NMCP at NMC Portsmouth

Laboratory Results -
Printed Results inquiry

Name: TESTPATIENT, JOHN

FMPSSN: 03/999-99-9999

DOB: 02 Jun 1995

PCat: N41 DRN FAMIMBR AD

MC Status: TRICARE PRIME (CHAMPUS)

Insurance: Yes

Sex: M

TAH: 070-729-9809

Tel W:

CS:

SWS:

Spencer/SSN: /691.6900.03

Rank

Unit:

Output Rec. Rm:

FCM:

Tel. PCM:

ATHEY, JALME

998.180.5348

CHRONOLOGICAL RECORD OF MEDICAL CARE

THIS INFORMATION IS PROTECTED BY THE PRIVACY ACT OF 1974 (PL-93-579). UNAUTHORIZED ACCESS
TO THIS INFORMATION IS A VIOLATION OF FEDERAL LAW. VIOLATORS WILL BE PROSECUTED.

Additional Proposed Enhancements

- Add Capability to resize columns in summary window of Lab Results module.
 - Ability to re-sequence and sort by column already exists.
- Ability to retain Provider Defaults for:
 - Lab Result Summary window Column Sequence/Order.
 - Lab Result Summary window Column Width.
 - Lab Result Summary window Result/test Sort order.
- Ellipsis or some other icon to click to view amended results/Interpretation/Order Required Data.
 - Rather than just clicking the line item in the detail window to display the pop-up window.
 - Ellipsis will be clickable if amended results, interpretations, result comments, or other required data is available for the lab test.

Amend- Ellipsis to click

Search Criteria
 Filter: All Orders Time: All time periods Tests: All Select All Results Display Cancelled Orders

Accessioned	Collection Date	Report	Site/Specimen	Status	Ordering Provider	Order Comment
	11 Jan 2006	Microalbumin, urine	Urine	Pending	Test User	
	26 Sep 2006	Urine Culture	Urine	AMENDED	Test User	
	26 Dec 2005	Urimalysis	Urine	AMENDED	Test User	
	26 Dec 2005	Hemoglobin A1c	Whole/Blood, NOS	AMENDED	Test User	
	26 Dec 2005	Urimalysis	Urine	Canceled	Test User	
		Ordered (Unaccessioned)				
	Date Ordered	Report	Site/Specimen	Status	Ordering Provider	Order Comment
		Lipid Panel Complete	Serum	Ordered	Test User	
		Chem 17	Serum	Discontinued	Test User	

Display Criteria
 Ref Range/Units Vertical Horizontal

Order: Comment chest wound

Date Collected: 08-Sep-2005
 Collection Sample: EXUDATE, SWIRL
 Specimen: Intravascular

Found Culture
 Status: -A- <R> <R>
 Date Resulted: AMENDED
 22 Nov 2005

BACTERIOLOGY RESULT:
 several bact

GRAM STAIN:
 6+ gram nega

Organism:
 (1) Staphylococcus aureus Quantity: N
 (2) Bacillus Cereus Quantity: minimal

Clicking Ellipsis will display Amendment/Interpretation/Order required data window. Ellipsis will be selectable only if there is data to display. If there are no amended results, interpretations, comments, or order required data to display, ellipsis will be grayed out.

