Consult/Request Tracking User Manual



April 2019

Version 3.0

Department of Veterans Affairs (VA)

Office of Information & Technology (OIT)

Revision History

Date	Patch	Description	Authors
4/2019	GMRC*3.0*124	Added reference to changes in Package Operation Workflow for users of Care Coordination (CC) Decision Support Tool (DST). See Page 12	F. Perez; B. Lord
3/2019	GMRC*3.0*119	Added Help Text that displays when entering ??? at the "Select Consult Tracking Reports Option:" prompt. See Page 159 Added the Administratively Released Consults by Group Local Report example. The report was changed to include in the counts those services that were made in a consult name including -DS or -ADMIN but then forwarded to a different service. See Page 162.	G. Scorca; M. Needham
2/2019	GMRC*3.0*113	Added the Cancelled to Discontinued Consults section. Added the option GMRC CX TO DC PARAMETER EDIT, where user is able to update parameters that drive the overnight job GMRC CHANGE STATUS X TO DC. Page 161 – 162.	G. Scorca; M. Needham
1/2019	GMRC*3*110	When a user clicks on the Consults tab, then highlights a Consult, the details of the consult appear in the right-hand panel. This display was changed to display the Unique Consult ID (UCID) at the top. See Page 161.	G. Scorca; M. Needham
12/2018	GMRC*3.0*107	Added details for new GMRC Reports to support the ADMIN KEY consults for consults that are Administratively released by Policy. See pages <u>158</u> – <u>161</u> .	K. Marchant, P. Jacobson G. Scorca
08/2018	XU*8.0*679	Added note regarding electronic Signature Block restrictions. See Page 19.	E. Weaver R. Beltran-West
03/3018	GMRC*3*91	Added information about additional recipients receiving an alert. See Page 140 and Page 151.	B. Sanders C. Hinton
03/2018	GMRC*3*92	Update the VistA last name criteria. Applied up-to-date 508 standards and VA compliance to title page, Revision History table, headings, and footers.	N. Grimes K. Watson
03/2018	GMRC*3*89	Modified SF 513 images (<u>Image 1</u> and <u>Image 2</u>) to reflect addition of Age and Cell Phone fields. Added info re: set up of a secondary printer for SF 513. <u>Added info on new Consult Closure Tool.</u>	T. Turowski R. Beltran-West
02/2016	GRMC*3*81	Changed the Earliest Appropriate Date to Clinically Indicated Date. Pages: 16, 22, 33, 64	T. Robinson K. Condie
08/2014	GMRC*3*75	Modified description to CONSULT/REQUEST <u>UPDATED</u> ; added description of <u>HCPS</u> and <u>RAS</u> to Glossary.	J. Pappas P. Yeager

Date	Patch	Description	Authors
01/2015	GMRC*3*82	Modified SF 513 Images to reflect SSN format change.	D Burger P Behuniak
02/2014	GMRC*3*73	ICD-10 Remediation	J. Green C. Hinton
02/2014	GMRC*3*73	Added info to description for CONSULT/REQUEST UPDATED and Consult/Request Has an Added Comment.	J. Green
08/2011	GMRC*3*71	Modified description for CONSULT/REQUEST UPDATED	G. Werner
02/2011		Earliest Appropriate Date Patch 66	C. Arceneau K. Condie
08/2009		Combat Veteran (CV) status added to SF 513	C. Arceneaux K. Condie
04/2006		Updates/corrections to patient and provider names to comply with SOP 192-352	J. Green P. Landy
12/2004		SOP 192-352 applied (scrubbed)	C Arceneaux P. Landy
06/2002		Include Patch 25	
04/2002		Include Patch 22 & 25	
11/2001		Include Patch 17	
06/2001		Include Patch 21	
02/2001		Include Patch 15, 19, & 20	
10/2000		Include Patches 13, 14, 16, & 18	
07/2000		Add Patches 6 thru 8, 11, & 12	
09/1998		Include Patches 1 thru 5	
12/1997		Initail Release	

Table of Contents

Consult/Request Tracking	i
User Manual	i
Introduction	
Overview	2
Purpose	2
Relationship to Other Packages	
Enhancements since Version 2.5	
Relations with other VistA Components	6
Related Manuals and Other References	8
Package Management	9
Service Update and Tracking Security	
Consult Service Tracking	9
Package Operation	11
Workflow	12
1. The Clinician Orders a Consult	13
2. The Consult Service Gets a Written Copy	
3. If Accepted, an Appointment is Held	
4. Results are Entered and Signed	
5. The Originating Clinician Receives an Alert that the Consult is Complete6. The SF 513 Report Becomes Part of the Patient's Medical Record	
Quick Orders	35
Using the Consults Package with TIU	37
Direct TIU Input	
Correcting Misdirected Results	41
Using the Consults Package with Medicine	53
Using the Consults Package with Clinical Procedures	56
Windows Quick Start	57
Introduction 59	57
Introduction	
Windows Flow of Information	
Other Windows Topics	
Changes made by Patch 73 for ICD-10 Remediation	
Package Reference	95
General Service User Menu	
Consult Service Tracking Option	
Completion Time Statistics	
Consult Status	
Actions	
Brief Action Descriptions	

Add Comment (CM) Action	111
Cancel (or Deny) Consult	112
Change View (CV) Action	114
Complete Request (CT) Action	116
Deny Request (DY) Action	117
Detailed Order Display (DD) Action	118
Discontinue Order (DC) Action	122
Edit/Resubmit (ER) Action	124
Forward Request (FR) Action	
Make Addendum (MA) Action	126
Print Form (PF) Action	
Print Screen Contents (PS) Action	128
Quit (Q) Action	129
Receive Request (RC) Action	130
Remove Medicine Results (RM)	132
Results Display (RT) Action	133
Schedule (SC) Action	134
Select New Patient (SP) Action	136
Significant Findings (SF) Action	138
Notifications about Consults and Requests	140
Enabling Notifications	
New Service Consult/Request	
Consult/Request Resolution	
Consult/Request Updated	
Consult/Request Cancel/Hold	
Consult/Request Has an Added Comment	
Order(s) Require Electronic Signature	
Significant Findings for a Consult	
ADMIN KEY Reports	158
UCID Display	
Cancelled to Discontinued Consults	
Glossary	
In day	167

Introduction

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

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

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

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

Overview

Purpose

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

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

Relationship to Other Packages

The Consults package works with the following packages:

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

Relationship of Consults to CPRS

From CPRS Actions to Consults:

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

From Consults actions to CPRS:

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

Relationship of Consults to TIU

From TIU Actions to Consults:

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

• Extract notes for SF 513 and displays

From Consult Actions to TIU:

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

Enhancements since Version 2.5

GMRC*3*73

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

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

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

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

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

General Overview of Consults/Request Tracking

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

Alert Actions

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

Reporting

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

Communications

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

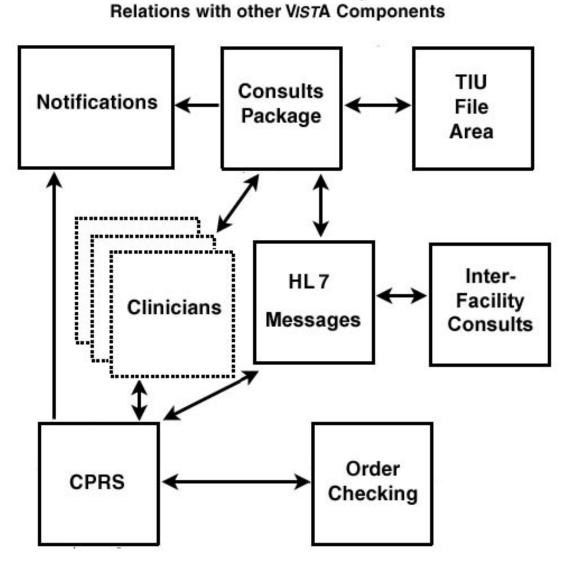
Setup

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

Relations with other VistA Components

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

Consults Package



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

Introduction

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

Related Manuals and Other References

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

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

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

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

See our web pages at:

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

Package Management

Service Update and Tracking Security

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

Consult Service Tracking

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

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

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

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

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

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

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

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

In summary, update user capabilities vary depending on

The option(s) that you are assigned.

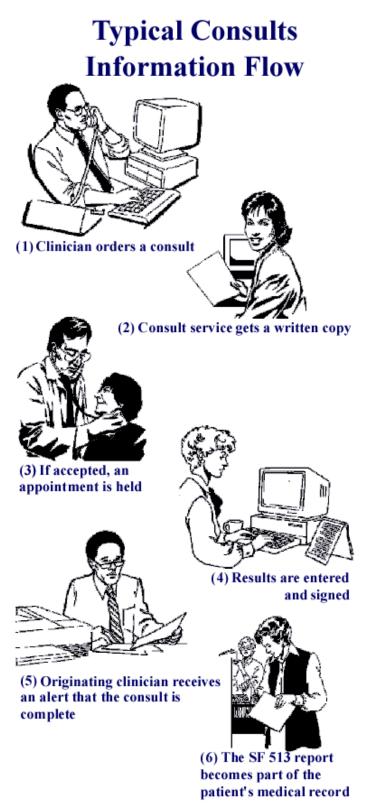
Privileges granted in the Consults Service User Management option.

Package Operation

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

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

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



Workflow

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

*NOTE: Under the Care Coordination (CC) Decision Support Tool (DST) project, the release of Patch GMRC*3.0*124 modifies the above workflow. The workflow changes effective with the installation of this patch will only impact users of DST. For further information regarding the workflow process for DST users, please refer to the DST User Guide, which can be found in the VA Software Document Library (VDL) under CPRS: Consult/Request Tracking.

1. The Clinician Orders a Consult

Consult orders can be entered:

From the CPRS medical record screen, Consults tab CPRS GUI interface program, Consults tab

Ordering Within the CPRS Package

Primarily, Consult orders should be placed through the CPRS Add New Orders action. In this manual we provide a step-by-step display of the process for ordering consult or procedures requests through the CPRS package. We first go through a brief list of steps, then we discuss each step in detail.

To Order a Consult:

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

To go over in detail how to order a consult:

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

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

```
Select Clinician Menu Option: ?

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

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

Select Clinician Menu Option: OE
```

The screen now looks like this:

```
Patient Selection Apr 07, 1999 14:51:30 Page: 1 of 1
Current patient: ** No patient selected **

Patient Name ID DOB Room-Bed No patients found.

Enter the number of the patient chart to be opened >>>

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

Select Patient: Change View //
```

B. Select the Patient

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

```
Select Patient: Change View // C2342

1 C2342 CPRSPATIENT, TWO 03-04-32 666902342 MILITARY RETIREE

2 C2342 CPRSPATIENT, TWELVE 02-03-23 666242342 MILITARY RETIREE
CHOOSE 1-2: 2 CPRSPATIENT, TWELVE 02-03-23 666242342 MILITARY RETIREE
Searching for the patient's chart ...
```

(Continued on the next page.)

The screen now looks something like this:

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

C. Select Chart Contents then Consults

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

CC;CON

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

D. Select Order New Consult

Type NW and press the <Enter> key.

Answer Questions on the Particulars of the Request

```
Select: Chart Contents// NW
                            Order New Consult
    Consult
                            Procedure
Order new: C Consult
Delay release of these orders? NO// <Enter>
Consult to Service/Specialty: POD FOOT CLINIC FOOT CLINIC
Reason for Request:
 1>PERSISTENT SMALL FISSURES AND SCALING ON BOTH FEET.
 2>
EDIT Option:
Category: INPATIENT// <Enter>
Urgency: ROUTINE// ??
Select from:
 1 STAT
 2 ROUTINE
 3 WITHIN 48 HOURS
 4 WITHIN 72 HOURS
 5 EMERGENCY
Select the urgency indicating how quickly results from this consult are needed.
Urgency: ROUTINE// <Enter>
Clinically indicated date:TODAY// <Enter>
Place of Consultation: Bedside// ?
Select from:
                                                               If the request is for a future
 1 Bedside
                                                               service, such as an EKG in
 2 Consultant's Choice
                                                               6 months, then enter the
Select the preferred place to see the patient for this consult.
                                                               future date here.
Place of Consultation: Bedside// <Enter>
Attention: CPRSPROVIDER, THREE CT
                                               PHYSICIAN
Provisional Diagnosis: TINEA PEDIS
Consult to Service/Specialty: Podiatry
        Reason for Request: PERSISTENT SMALL FISSURES AND SCALING ON ...
                  Category: INPATIENT
                   Urgency: ROUTINE
      Place of Consultation: Bedside
                 Attention: CPRSPROVIDER, THREE
      Provisional Diagnosis: TINEA PEDIS
______
(P) lace, (E) dit, or (C) ancel this order? PLACE// <Enter>
        ... order placed.
Add another Consult order? NO//
```

(Continued on the next page.)

The screen now looks something like this:

```
All Consults Feb 13, 1998 12:58:32 Page: 1 of 1
CPRSPATIENT, TWELVE 666-24-2342 1A/B-1 FEB 3,1923 (74) <CA>
PrimCare: CPRSProvider, Three PCTeam: GOLD

Consult/Procedure Requested Status
1 CARDIOLOGY Consult | 02/25/97 11:02 complete

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

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

Select: Chart Contents//
```

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

Sign the Consult

```
+ Next Screen $ Sign All Orders
- Previous Screen Q Close
Select: Sign All Orders// $ Sign All Orders
Enter your Current Signature Code: SIGNATURE VERIFIED

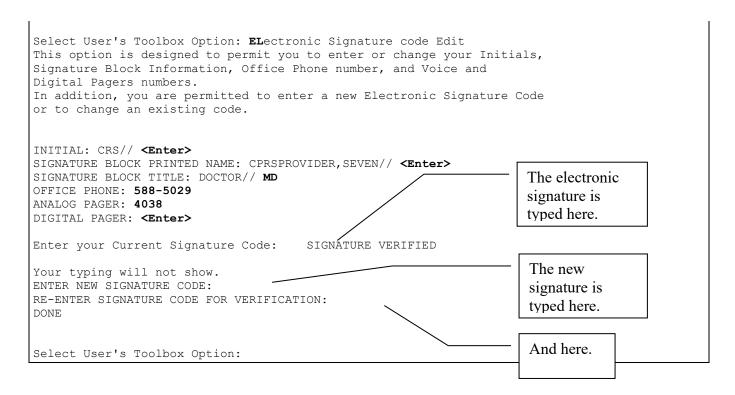
Processing orders ...
```

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

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

In this example we change a title and electronic signature:

```
Select Consult Service Tracking Option: ??
   CS
         Consult Service Tracking [GMRC SERVICE TRACKING]
  PC.
         Service Consults Pending Resolution [GMRC RPT PENDING CONSULTS]
        Completion Time Statistics [GMRC COMPLETION STATISTICS]
Or a Common Option:
         Patient Warning (CWAD) Display [GMRPNCW]
         MailMan Menu ... [XMUSER]
  TBOX User's Toolbox ... [XUSERTOOLS]
         View Alerts [XQALERT]
         Continue [XUCONTINUE]
            **> Reverse lock ZZLUKE
         Halt [XUHALT]
         Restart Session [XURELOG]
         Time [XUTIME]
         Where am I? [XUSERWHERE]
You have PENDING ALERTS
         Enter "VA VIEW ALERTS to review alerts
Select Consult Service Tracking Option: TBOX User's Toolbox
Select User's Toolbox Option: ?
         Display User Characteristics
         Edit User Characteristics
         Electronic Signature code Edit
         Menu Templates ...
         Spooler Menu ...
         Switch UCI
         TaskMan User
         User Help
Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.
```



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

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

* **NOTE:** If the SIGNATURE BLOCK PRINTED NAME and SIGNATURE BLOCK TITLE fields are disabled at your site, contact your supervisor to request entry of your name and title.

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



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

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

Unsigned Orders Feb 13, 1998 13:02 CPRSPATIENT, TWELVE 666-24-2342 1. PrimCare: CPRSProvider, Three	:58	
Item Ordered	Requestor Start Stop	p Sts \square
1 CT ABDOMEN W&W/O CONT *UNSIGNED* 2 Discontinue CBC BLOOD WC LB# 269	CPRSPROVIDER, THREE CPRSPROVIDER, TEN	unr unr
UNSIGNED Change SODIUM SERUM SERUM WC to GLUCOSE	 -	pend
SERUM SERUM SP LB# 242 *UNSIGNED*		pena
4 Change GLUCOSE SERUM SERUM SP to POTASSIUM SERUM SERUM SP LB# 242 *UNSIGNED*	 	pend
<u> </u>	to act on. Sign Detailed Display	>>>
	pedarioa propra,	
Select action: S Sign		
CT ABDOMEN W&W/O	CONT	
Enter your Current Signature Code: SIGNATU	RE VERIFIED	
CT ABDOMEN W&W/O CONT signed. Print CHART COPY for the orders: YES// <enter <enter="" device:="" lta35=""> C-ITOH 300 LINE PRING DO YOU WANT YOUR OUTPUT QUEUED? NO// <enter></enter></enter>	TER	The electronic signature is typed here.
Unsigned Orders Feb 13, 1998 13:03 CPRSPATIENT,TWELVE 666-24-2342 1. PrimCare: CPRSProvider, Three	:58 Page: 1 of A/B-1 FEB 3,1923 PCTeam: GOLD	1 (74) <ca></ca>
Item Ordered	-	tart Stop Sts
	CPRSPROVIDER, ONE CPRSPROVIDER, TWO	unr unr
UNSIGNED 3 Change SODIUM SERUM SERUM WC to GLUCOSE	 	pend
SERUM SERUM SP LB# 242 *UNSIGNED* Change GLUCOSE SERUM SERUM SP to POTASSIUM SERUM SERUM SP LB# 242 *UNSIGNED*	 	pend
Enter the numbers of the items you wish + Next Screen - Previous Screen Select:Quit// <enter> Quit</enter>		>>>

2. The Consult Service Gets a Written Copy

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

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

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

MEDICAL RECORD	CONSULTATION	SHEET
CPRSPATIENT, NINETY XXX-XX-9200 02/03/1904 (Ag	re 113) NSC VETERAN CV ELIGIBLE Cell: (202) 555-1919	
Consult Request: Consult		No.: 10943
To: CARDIOLOGY From: 2B MED	Request	ed: 08/24/2009 11:00 am
Requesting Facility: BOISE	ATTENTION: 0	CPRSPROVIDER, SEVEN
seems to be somewhat stable. L Chest X-Ray and we need an asse increasing Digitalis dosages. PROVISIONAL DIAG: Cardiomyopath	ssment of cardiac function	
REQUESTED BY: CPRSPROVIDER, TEN PHYSICIAN (Pager:)	PLACE: Bedside SERVICE RENDERED AS: Inpatient	URGENCY: Routine Clinically Indicated Jan 31, 2011
	ING COPY on Results available.	
AUTHOR & TITLE:	 DA	
ID #: ORGANIZATION:	BOISE REG #:	LOC: 2B MED

Package Reference			

Standard Form 513 (Rev 9-77)

3. If Accepted, an Appointment is Held

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

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

```
Select OPTION NAME: ORMGR OE/RR Manager Menu menu

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

Select OE/RR Manager Menu Option: VA View Alerts

1.I CPRSPATIE (C3779): Critical High Lab: LITHIUM 5 02/06 10:51
2. ARTPATIEN (A9600): New Consult/Request (Today)
Select from 1 to 12
or enter ?, A I, F, P, M, R, or ^ to exit: 2
```

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

```
Enter ?? for more actions
RC Receive
                                                 DD Detailed Display
                        CM Add Comment
FR Forward
                       CT Complete/Update
                                              RT Results Display
CX Cancel (Deny) MA Make Addendum
                                                PF Print Form 513
DC Discontinue
                        SC Schedule
Select Action: Quit// FR Forward Consult
Forward Request To Another Service For Action.
Select the service to send the consult to.
Forward Consult to which Service/Specialty: PSYCHIATRY
Who is responsible for Forwarding the Consult: CPRSPROVIDER, SEVEN CS HYN
Actual Date/Time of Activity: NOW// (Feb 13, 1999@14:24)
Urgency: Today// <Enter> Today
Enter COMMENT:
 1> List of symptoms indicates Psychiatry would give better work up.
  2> <Enter>
EDIT Option: <Enter>
```

(Continued on the next page.)

Package Reference

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

Enter ?? for more actions

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

DC Discontinue SC Schedule

Select Action: Quit//

Receive the Consult

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

From a consult tracking screen.

From a notification alert of a new consult. See page 130 for an example of this method. In the following example, we receive a consult from a consult tracking screen:

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

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

4. Results are Entered and Signed

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

```
Select Consult Service Tracking Option: CS Consult Service Tracking
Select Patient: CPRSPATIENT, TWELVE 05-05-55 666553779 YES SC
VETERAN

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

```
Oct 05, 2000 09:22:45 Page: 1 C2
70 1A/B-1 FEB 3,1923 (74) <CA>
Wt.(lb): 180
CONSULT TRACKING
CPRSPATIENT, TWELVE 666-24-3779
                                                                    Wt.(lb): 180
  Requested St No. Consult/Procedure Request 09/04/97 p 319 PULMONARY Cons
           Enter ?? for more actions
                                         CT Complete/Update RT Results Display
SP Select Patient FR Forward
CV Change View ... CX Cancel (Deny) MA Make Addendum PF Print Form 513 RC Receive DC Discontinue SF Sig Findings RM Remove Med Rslt SC Schedule CM Add Comment DD Detailed Display ER Edit/Resubmit
Select: Quit// CT Complete
CHOOSE No. 1-2: 1
Creating new progress note...
          Patient Location: 2B
    Date/time of Admission: 10/05/00 09:22
         Date/time of Note: NOW
            Author of Note: CPRSPROVIDER, SEVEN
   ...OK? YES// <Enter>
Calling text editor, please wait...
==[ WRAP ]==[ INSERT ]===< Patient: CPRSPATIENT, TWELVE >===[ <PF1>H=Help ]===
Mr. CPRSPatient's regimen is lacking in inhaled corticosteroids. Recognizing
that asthma is an inflammatory process, inhaled steroids are important
in controlling the inflammatory response. My practice for severely
out-of-control asthmatics is to use high-dose inhaled steroids,
typically vanceril, 16 puffs gid, with a spacing device such as the
Aerochamber. I would institute such a regimen while he is here.
Mr. CPRSPatient has an in-house pet dog and an outside pet cat. I have
told him that the cat should go, even if it is outdoors. Cat saliva
contains a glycoprotein that leaves residue on their coats and flakes
into the air; it is problematic for many asthmatics.
The purulent phlegm asthmatics have during exacerbations is usually
due to the eosinophils, not from infection. Antibiotics are usually
not necessary.
```

(Continued on next page.)

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

```
Saving MEDICINE CONSULT with changes...

Your electronic signature is typed here.

Enter your Current Signature Code: SIGNATURE VERIFIED..

Print this note? No// Y YES

Do you want WORK copies or CHART copies? CHART// <Enter>
DEVICE: HOME// WORK OTC

DO YOU WANT YOUR OUTPUT QUEUED? NO// Y (YES)

Requested Start Time: NOW// <Enter> (Oct 05, 2000 09:23:05)

Request Queued!
```



Note:

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

29

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

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

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

Select Consult Service Tracking Option:
```

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

```
Select Consult Service Tracking Option: VA View Alerts

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

Processing alert: TIUPATIEN (T8829): Completed Consult PLM
```

```
Enter ?? for more actions

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

(Continued on next page.)

Here we select the Results Display (RT) action:

Results Display Feb 26, 1999 14:59:10 Page: 1 of TIUPATIENT, TWELVE 666-24-2342 1A/B-1 FEB 3,1923 (74) <CA>

Consult No.: 1337 Wt.(lb): No Entry

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

Pt should stay away from Oyster Crackers.

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

Source Information

Document Status: COMPLETED

Author: CPRSPROVIDER, S

Entry Date: FEB 12, 1999@11:32

Expected Signer: CPRSPROVIDER, SEVEN

Expected Cosigner: None Entered By: CRS TIU Document #: 5365

Urgency: None

Enter ?? for more actions

Select Action: Quit//

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

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

```
Feb 13, 1998 13:20:44
CONSULT TRACKING
                                                                       Page:
                                                                                1 of
CPRSPATIENT, TWELVE 666-24-3779
                                                  1A/B-1
                                                               FEB 3,1923 (74) <CA>
                                                                            Wt.(lb): 178
    Requested St
                               Consult/Procedure Request
                        No.
                         675 PULMONARY Consult
    10/28/97
                          506 <MEDICINE EAST> Consult
                а
   07/21/97 c
                          285 PULMONARY Pulmonary Function Test
           Enter ?? for more actions
SP Select Patient FR Forward CV Change View ... CX Cancel (Deny)
                                             CT Complete/Update RT Results Display
                                             MA Make Addendum PF Print Form 513 SF Sig Findings RM Remove Med Rslt
CV Change VIC..

RC Receive DC Disconcin...

CM Add Comment
                     DC Discontinue
                                             DD Detailed Display ER Edit/Resubmit
Select: Quit// PT Print Form
```

```
Chart Copy (Y/N) Y// <Enter>
DEVICE: HOME// ;;9999 HOME
```

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

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

Quick Orders

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

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

```
Add New Orders
                                     Feb 13, 1998 13:21:08
                                                                            Page: 1 of
CPRSPATIENT, TWELVE 666-24-3779
                                                     1A/B-1
                                                                    FEB 3,1923 (74)
                                                                                           <CA>
O ORDER SETS... 30 PATIENT CARE... 70 LABORATORY...

1 Patient Movement 31 Condom Catheter 71 Chem 7

2 Diagnosis 32 Guaiac Stools 72 T&S

3 Condition 33 Incentive Spirometer 73 Glucose

4 Allergies 34 Dressing Change 74 CBC w/Diff

75 PT
14 Call HO on
                              50 IV FLUIDS... 81 Culture & Suscers 51 OUTPATIENT MEDS... 90 OTHER ORDERS... 91 EKG: Portable
                                                              81 Culture & Suscept
20 ACTIVITY...
21 Ad Lib
23 Bed Rest / BRP
24 Ambulate TID
                              60 IMAGING ...
25 Up in Chair TID 61 Chest 2 views PA&LAT 99 Text Only Order
        Enter the number of each item you wish to order.
    Next Screen
                               TD Set Delay ...
                                                                Q Done
Select Item(s): Done//
```

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

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

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

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

Using the Consults Package with TIU Direct TIU Input

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

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

1. From TIU, choose Integrated Document Management.

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

```
Select Progress Notes/Discharge Summary [TIU] Option: ?

1    Progress Notes User Menu ...
2    Discharge Summary User Menu ...
3    Integrated Document Management ...
4    Personal Preferences ...

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

Select Progress Notes/Discharge Summary [TIU] Option: 3   Integrated Document Management

--- Clinician's Menu ---

Select Integrated Document Management Option:
```

2. Select Enter/edit Document.

Example:

3. Enter the patient's name.

Follow the usual VISTA conventions for selecting a patient.

Example:

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

4. Select a document title.

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

Example:

```
Select TITLE: ?
Answer with TIU DOCUMENT DEFINITION NAME, or ABBREVIATION, or
    PRINT NAME
Do you want the entire TIU DOCUMENT DEFINITION List? Y (Yes)
Choose from:
  ADVANCE DIRECTIVE TITLE
  ADVERSE REACTION/ALLERGY TITLE
  ASI-ADDICTION SEVERITY INDEX TITLE
  BP TEST NOTE TITLE
  CLINICAL WARNING TITLE
  CRISIS NOTE TITLE
  DISCHARGE SUMMARY TITLE
  MEDICINE CONSULT
                      TITLE
Select TITLE: MEDICINE CONSULT
                                   TITLE
Creating new progress note...
        Patient Location: 2B
   Date/time of Admission: 05/10/96 10:17
       Date/time of Note: NOW
         Author of Note: CPRSPROVIDER, SEVEN
  ...OK? YES//
You must link your Result to a Consult Request...
The following CONSULT REQUEST is available:
  1. JUL 16, 1997@06:08 278 PULMONARY
CHOOSE 1-1:
```

5. Choose the consult to enter findings.

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

```
The following CONSULT REQUEST is available:

1. JUL 16, 1997@06:08 278 PULMONARY
CHOOSE 1-1: 1 278

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

6. Enter and edit findings.

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

Example:

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

1> No significant findings. Suggest respiratory therapy.

2>
EDIT Option:

Saving MEDICINE CONSULT with changes...

Enter your Current Signature Code:
```

7. Sign the findings.

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

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

8. Repeat for other patients.

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

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

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

Select PATIENT NAME:
```



Note:

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

Correcting Misdirected Results

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

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

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

Examples:

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

```
--- Clinician's Menu ---

1    Progress Notes User Menu ...
2    Discharge Summary User Menu ...
3    Integrated Document Management ...
4    Personal Preferences ...

Select Progress Notes/Discharge Summary [TIU] Option: VA View Alerts

1.    CPRSPATIE (C0167P): PULMONARY CONSULT available for signature.
2.    ARTPATIEN (A1414): New order(s) placed.
3.    ARTPATIEN (A1414): New consult PLM (Routine)
4.    CPRSPATIE (C2432): New consult CAR (Routine)
        Select from 1 to 4
        or enter ?, A I, F, P, M, R, or ^ to exit: 1

Opening PULMONARY CONSULT record for review...
```

Browse Document Jan 26, 1998 16:49:32 Page: 1 of 1

PULMONARY CONSULT

CPRSPATIENT, T 666-01-0167P PULMONARY CLINIC Visit Date: 01/26/98@16:37

DATE OF NOTE: JAN 26, 1998@16:37:34 ENTRY DATE: JAN 26, 1998@16:37:34

AUTHOR: TIUPROVIDER, THREE EXP COSIGNER:

URGENCY: STATUS: UNSIGNED

DEMOGRAPHICS: CPRSPATIENT, TWO

666-01-0167P

3.1

JAN 1,1967

His disposition is good.

+ Next Screen - Prev Screen ?? More actions >>>

Find Make Addendum Identify Signers
Print Sign/Cosign Delete
Edit Copy Link ...
Quit

Select Action: Quit// ${\bf L}$ Link ...

Problem(s) Patient/Visit Link with Request

Specify Linkage: L Link with Request

You must link your Result to a Consult Request... The following CONSULT REQUEST(S) are available:
1> JAN 23, 1998@11:14 759 PULMONARY

2> JAN 23, 1998@11:14 760 PULMONARY

CHOOSE 1-2: 2 760

Opening PULMONARY CONSULT record for review...

Browse Document Jan 26, 1998 16:49:32 Page: 1 of 1

PULMONARY CONSULT

CPRSPATIENT,T 666-01-0167P PULMONARY CLINIC Visit Date: 01/26/98@16:37

DATE OF NOTE: JAN 26, 1998@16:37:34 ENTRY DATE: JAN 26, 1998@16:37:34

AUTHOR: TIUPROVIDER, THREE EXP COSIGNER:

URGENCY: STATUS: UNSIGNED

DEMOGRAPHICS: CPRSPATIENT, TWO

666-01-0167P

31

JAN 1,1967

His disposition is good.

+ Next Screen - Prev Screen ?? More actions >

Find Make Addendum Identify Signers
Print Sign/Cosign Delete

Edit Copy Link ... Quit

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

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

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

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

Browse Document Jan 26, 1998 16:49:32 Page: 1 of 1

PULMONARY CONSULT

CPRSPATIENT, T 666-01-0167P PULMONARY CLINIC Visit Date: 01/26/98@16:37

DATE OF NOTE: JAN 26, 1998@16:37:34 ENTRY DATE: JAN 26, 1998@16:37:34

AUTHOR: TIUPROVIDER, THREE EXP COSIGNER:

URGENCY: STATUS: UNSIGNED

DEMOGRAPHICS: CPRSPATIENT, TWO

666-01-0167P

31

JAN 1,1967

His disposition is good.

+ Next Screen - Prev Screen ?? More actions >>

Find Make Addendum Identify Signers
Print Sign/Cosign Delete
Edit Copy Link ...
Quit

Select Action: Quit// ${\bf L}$ Link ...

Problem(s) Patient/Visit Link with Request

Specify Linkage: L Link with Request

You must link your Result to a Consult Request... The following CONSULT REQUEST(S) are available:

1> JAN 23, 1998@11:14 759 PULMONARY 2> JAN 23, 1998@11:14 760 PULMONARY

CHOOSE 1-2: 2 760

Opening PULMONARY CONSULT record for review...

Browse Document Jan 26, 1998 16:49:32 Page: 1 of 1

PULMONARY CONSULT

CPRSPATIENT, T 666-01-0167P PULMONARY CLINIC Visit Date: 01/26/98@16:37

DATE OF NOTE: JAN 26, 1998@16:37:34 ENTRY DATE: JAN 26, 1998@16:37:34

AUTHOR: TIUPROVIDER, THREE EXP COSIGNER:

URGENCY: STATUS: UNSIGNED

DEMOGRAPHICS: CPRSPATIENT, THREE

666-01-0167P

31

JAN 1,1967

His disposition is good.

+ Next Screen - Prev Screen ?? More actions >>>

Find Make Addendum Identify Signers
Print Sign/Cosign Delete
Edit Copy Link ...
Quit

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

Select PATIENT NAME: <Enter>

Nothing selected.

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

```
1 Individual Patient Document
2 All MY UNSIGNED Documents
3 Multiple Patient Documents
4 Enter/edit Document

Select Integrated Document Management Option: All MY UNSIGNED Documents

Searching for the documents....
```

```
Page:
MY UNSIGNED Documents
                                                                                                               Jan 26, 1998 16:51:18
                                                                                                                                                                                                                                                                 1 of
                                       by AUTHOR (TIUPROVIDER, THREE) or EXPECTED COSIGNER 40 documents
              CPRSPATIENT, T (C0167) PULMONARY CONSULT
ARTPATIENT, TW (A4321) Adverse React/Allergy
CPRSPATIENT, O (C8796) Reparatory Therapy Note
CPRSPATIENT, F (R1350) Reparatory Therapy Note
CPRSPATIENT, T (C9999) Reparatory Therapy Note
CPRSPATIENT, T (C1350) Reparatory Therapy Note
CPRSPATIENT, T (C1350) Reparatory Therapy Note
CPRSPATIENT, T (C1350) Reparatory Therapy Note
CPRSPATIENT, T (C1563) Reparatory Therapy Note
CPRSPATIENT, FIV (P1350) Reparatory Therapy Note
DSPATIENT, FIV (P1350) Reparatory Therapy Note
CPRSPATIENT, ONE (H2591) Reparatory Therapy Note
TIUPATIENT, EI (T1239) Reparatory Therapy Note
                                                                                                                                                                                       Ref Date Status
                                                              Document
                  Patient
5
8
10
11
12
13
14
                                     + Next Screen - Prev Screen ?? More Actions
                  Find
                                                                                                                     Sign/Cosign
                                                                                                                                                                                                                       Change View
                  Add Document
                                                                                                                     Detailed Display
                                                                                                                                                                                                                       Сору
                  Edit
                                                                                                                     Browse
                                                                                                                                                                                                                       Delete Document
                  Make Addendum
                                                                                                                    Print
                                                                                                                                                                                                                       Quit
                  Link ...
                                                                                                                    Identify Signers
Select Action: Next Screen// L Link ...
```

```
Problems

Patient/Visit

Link with Request

Specify Linkage: L Link with Request

Select Document(s): (1-14): 1

You must link your Result to a Consult Request...

The following CONSULT REQUEST(S) are available:

1> JAN 23, 1998@11:14 759 PULMONARY

2> JAN 23, 1998@11:14 760 PULMONARY

CHOOSE 1-2: 2 760
```

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

```
--- Clinician's Menu ---

1 Individual Patient Document
2 All MY UNSIGNED Documents
3 Multiple Patient Documents
4 Enter/edit Document

Select Integrated Document Management Option:
```

Clinic PULMONARY CLINIC

Current patient: ** No patient selected **

Select Patient: Change View// WINCHESTER, CHARLES EMERSON III

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

Jan 27, 1998 15:20:32

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

Page:

1 of

```
Enter the number of the patient chart to be opened

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

107010167P	ACTIVE DUTY A: Known allergies	
Searching the pati	ent's chart	

(Continued on the next page.)

01-01-67

```
Jan 27, 1998 15:20:40
Cover Sheet
                                                     Page: 1 of
                             666-01-0167P1A
CPRSPATIENT, TWO
                                                    JAN 1,1967 (31)
                                                                      <A>
    Item
                                            Entered
    Allergies/Adverse Reactions
    DUST
                                           | 10/07/97
    Patient Postings
    <None>
    Recent Vitals
    No data available
    Immunizations
    No immunizations found.
    Eligibility
    Not Service Connected
        Enter the numbers of the items you wish to act on.
NW Enter New Allergy/ADR CV (Change View ...) SP Select New Patient
                     CC Chart Contents ... Q Close Patient Chart
AD Add New Orders
Select: Chart Contents// CC;N Chart Contents ...
```

Searching the patient's chart \dots

_	d Notes		Jan 27, 1998 15:20:46 Page: 1 of 1	
CPRSPA	ATIENT, TWO		666-01-0167P1A JAN 1,1967 (31) <a>	
		Curr	ently viewing 17 notes	
	Fitle		Written Author SigSt	
	PULMONARY CONSULT		01/26 16:37 RUSSELL,J compl	
	Respiratory Therapy	Note	12/11 16:59 RUSSELL,J uncos	
3 (General Note		$\mid 10/16 \mid 91 \text{NO,D} \text{compl}$	
	General Note		06/17 /91 BUECHLER,M compl	
5 (General Note		06/13 /91 MCCLENAH,M compl	
			f the items you wish to act on.	
	rite New Note		Change View SP Select New Patient	
AD A	dd New Orders	CC	Chart Contents Q Close Patient Chart	
Select	t: Chart Contents//	CV	Change View	
(Continued on the next next)				

(Continued on the next page.)

49

Signed Notes	Jan 27, 1998 15:2	20:46 F	age: 1 of	f 1
CPRSPATIENT, TWO	666-01-0167P1A	JAN 1	, 1967 (31)	<a>
	Currently viewing 17	notes		
Title		Written	Author	SigSt□
1 PULMONARY CONSULT		01/26 16:37	RUSSELL,J	compl
2 Joel's Test Note		12/11 16:59	RUSSELL,J	uncos
3 General Note		10/16 /91	NO, D	compl
4 General Note		06/17 /91	BUECHLER, M	compl
5 General Note		06/13 /91	MCCLENAH, M	compl
Enter the number	ers of the items you wa	ish to act on.		>>>
1 all signed	4 signed/author		e as Prefer	red View
2 my unsigned	5 signed/dates	Rem	ove Preferre	ed View
3 my uncosigned	<u> </u>			
Select context: 2 my un	nsigned			

Searching the patient's chart ...

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

Currently viewing all unsigned notes

Title Written Author SigSt 1 PULMONARY CONSULT | 01/26 16:37 RUSSELL,J unsig

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

Edit Detailed Display Identify signers

Make Addendum Browse Copy Sign Print Delete Select Action: **BR** Browse

Browse Document Jan 26, 1998 16:49:32 Page: 1 of 1

PULMONARY CONSULT

CPRSPATIENT,T 666-01-0167P PULMONARY CLINIC Visit Date: 01/26/98@16:37

DATE OF NOTE: JAN 26, 1998@16:37:34 ENTRY DATE: JAN 26, 1998@16:37:34

AUTHOR: TIUPROVIDER, THREE EXP COSIGNER: URGENCY: STATUS: UNSIGNED

DEMOGRAPHICS: CPRSPATIENT, TWO

666-01-0167P

31

JAN 1,1967

His disposition is good.

+ Next Screen - Prev Screen ?? More actions >>>

Find Make Addendum Identify Signers
Print Sign/Cosign Delete

Edit Copy Link ...
Quit

Select Action: Quit// L Link ...

Problem(s) Patient/Visit Link with Request

Specify Linkage: L Link with Request

You must link your Result to a Consult Request...
The following CONSULT REQUEST(S) are available:
1> JAN 23, 1998@11:14 759 PULMONARY
2> JAN 23, 1998@11:14 760 PULMONARY

CHOOSE 1-2: **2** 760

Opening PULMONARY CONSULT record for review...

Browse Document Jan 26, 1998 16:49:32 Page:

PULMONARY CONSULT

CPRSPATIENT, T 666-01-0167P PULMONARY CLINIC Visit Date: 01/26/98@16:37

DATE OF NOTE: JAN 26, 1998@16:37:34 ENTRY DATE: JAN 26, 1998@16:37:34

AUTHOR: TIUPROVIDER, THREE EXP COSIGNER:

STATUS: UNSIGNED URGENCY:

DEMOGRAPHICS: CPRSPATIENT, TWO

666-01-0167P

31

JAN 1,1967

His disposition is good.

+ Next Screen Prev Screen ?? More actions

Find Make Addendum Identify Signers Print Sign/Cosign Delete Edit Link ... Сору Quit

Select Action: Quit// <Enter> Ouit

Jan 27, 1998 15:20:55 Unsigned Notes Page: 1 of CPRSPATIENT, TWO

666-01-0167P1A JAN 1,1967 (31) $\langle A \rangle$

Currently viewing all unsigned notes

Title Written Author 1 PULMONARY CONSULT | 01/27 15:19 RUSSELL, J unsig

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

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

Select: Chart Contents// Q Close Patient Chart

Using the Consults Package with Medicine

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

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

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

```
CHOOSE No. 1-32: 1

Attach Medicine Results? Y// <Enter> ES
```

```
1 \square
Procedure/Medicine Resulting
                             Jun 21, 2000 14:29:50
                                                            Page:
                                                                     1 of
CPRSPATIENT, FOUR 666-43-8796
                                                          DEC 4,1949 (50)
                                                                            <CAD>
                                        2B M
                          Available Medicine Results
                          Procedure Date Summary
    Type of Proc.
    ELECTROCARDIOGRAM
                            AUG 13,1997
                                                ABNORMAL
                           JUL 31,1995@08:04 NORMAL
    ELECTROCARDIOGRAM
```

```
Select action or item number

AR Associate Result DR Display selected medicine result

Select action: Quit//
```

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

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

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

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

```
Procedure/Medicine Resulting Jun 21, 2000 14:29:50 Page: 1 of 1 CPRSPATIENT, FOUR 666-43-8796 2B M DEC 4,1949 (50) CAD>

Available Medicine Results

Type of Proc. Procedure Date Summary

1 ELECTROCARDIOGRAM AUG 13,1997 ABNORMAL
2 ELECTROCARDIOGRAM JUL 31,1995@08:04 NORMAL

Select action or item number

AR Associate Result DR Display selected medicine result

Select action: Quit// AR Associate Result
```

```
Select item: (1-2): 1

ELECTROCARDIOGRAM AUG 13,1997 ABNORMAL

Are you sure you want to associate this result? NO// Y YES
```

```
Procedure/Medicine Resulting Jun 21, 2000 14:41:16 Page: 1 of 1
CPRSPATIENT, FOUR 666-43-8796 2B M DEC 4,1949 (50) <CAD>

Available Medicine Results

Type of Proc. Procedure Date Summary

1 ELECTROCARDIOGRAM JUL 31,1995@08:04 NORMAL

Select action or item number

AR Associate Result DR Display selected medicine result

Select action: Quit// <Enter> QUIT
```

```
Continue with Note Entry? Y// N NO
```

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

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

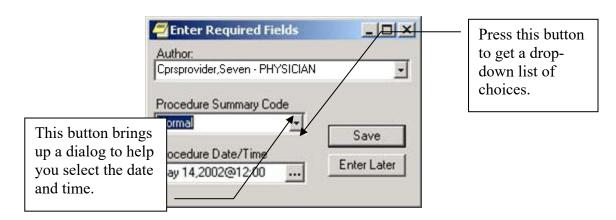
Using the Consults Package with Clinical Procedures

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

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

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

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

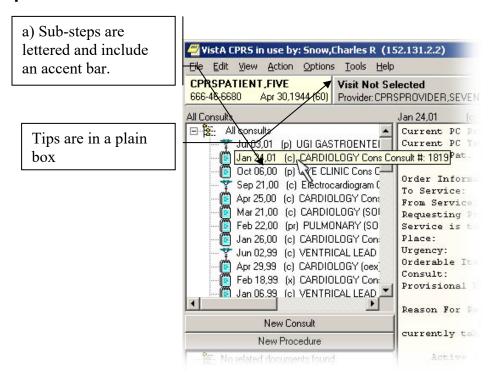


Windows Quick Start

Introduction 59 Windows Flow of Information 60 Starting Consults in Windows 60 Order New Consult 63 Print Form 65 Forward Request 66 Receive Request 67 Comment 68 Complete a Consult (From the Consults Tab) 70 Complete a Consult (From the Notes Tab) 72 Complete a Consult (From Medicine Results) 74 **Other Windows Topics 76 Cancel Request 76 Detailed Display 78 Discontinue Order 77** Make Addendum 84 **New Date Range 86 Results Display 89** Select Consult 90 **Select New Patient 91 Select Service 92** View by Status 93

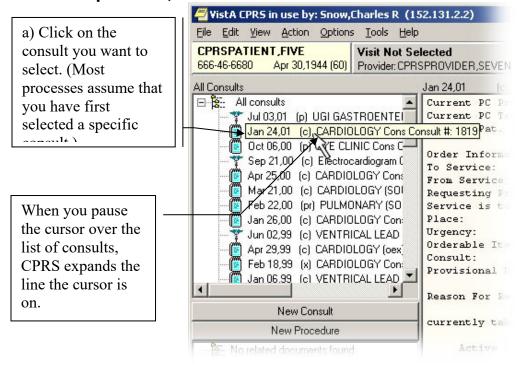
Key

1. Steps are numbered and bolded:



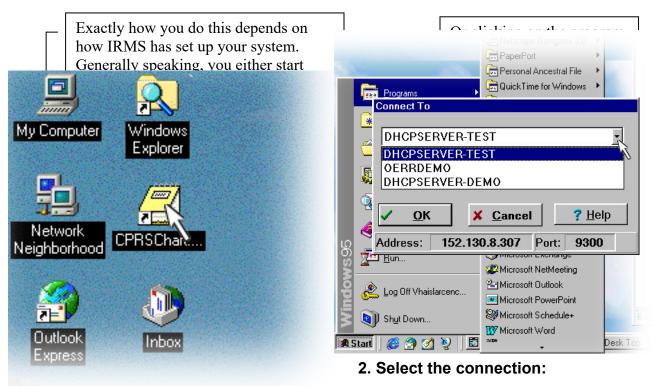
Introduction

1. Before each process, select the consult:



Windows Flow of Information Starting Consults in Windows

1. Start CPRS for Windows:

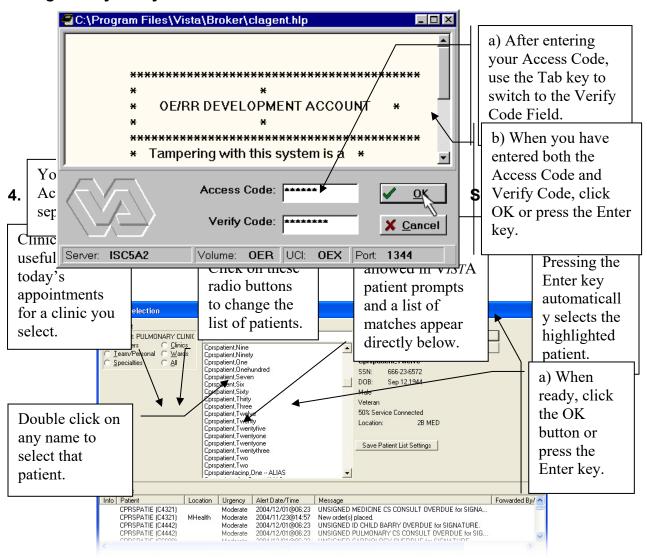


Note: Depending on the way CPRS

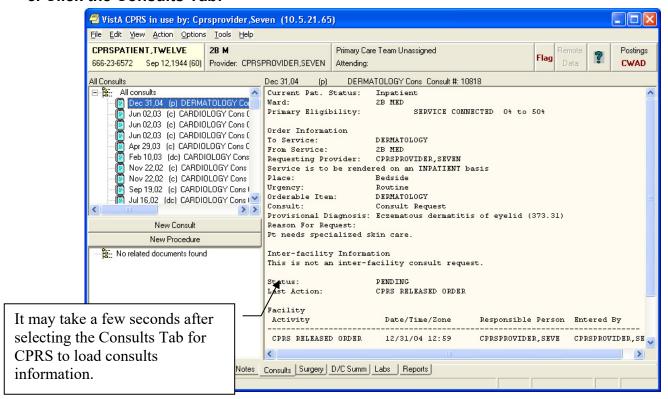
is installed on your machine, you may not see this step

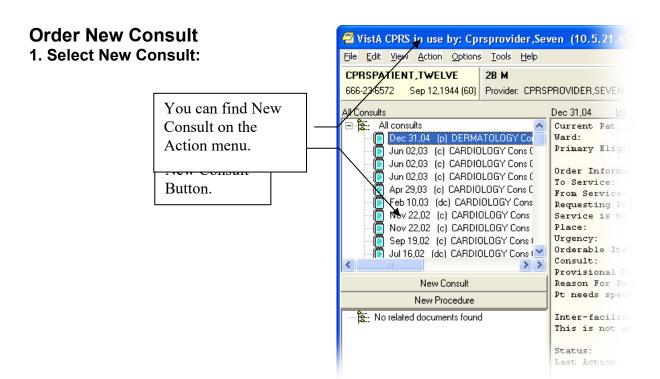
Click on the drop-down button Select the appropriate connection. (See your Clinical Application Coordinator for information on which is the correct one.) Click OK.

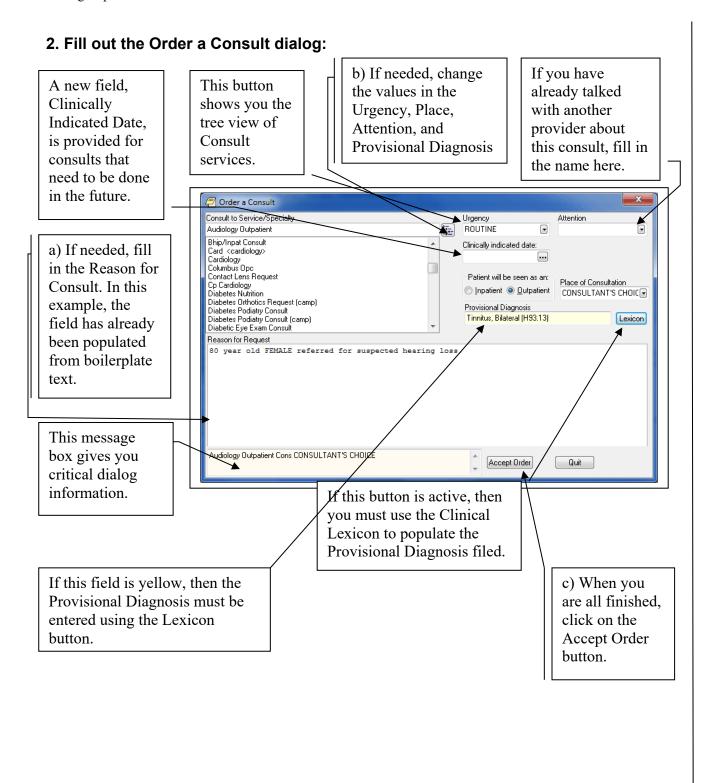
3. Log-on to your system:



5. Click the Consults Tab:

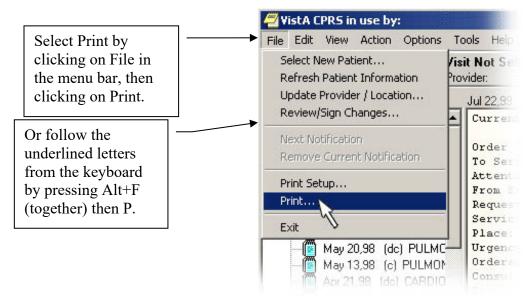




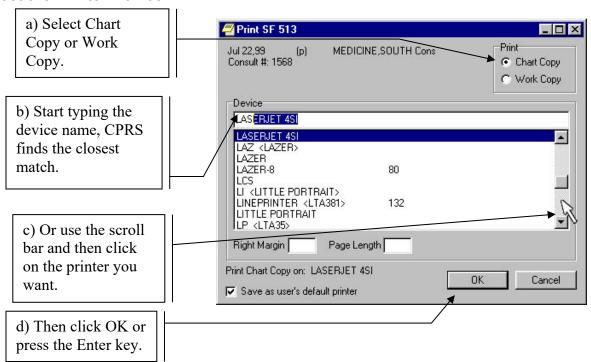


Print Form 513

1. Select Print from the File Menu:

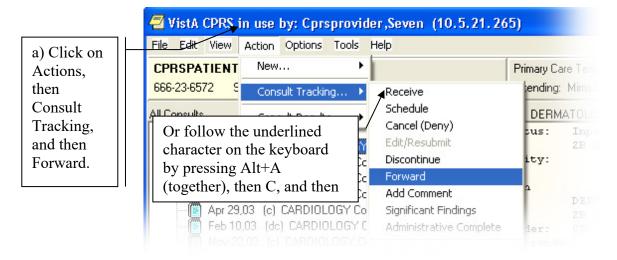


2. Select the Printer Device:

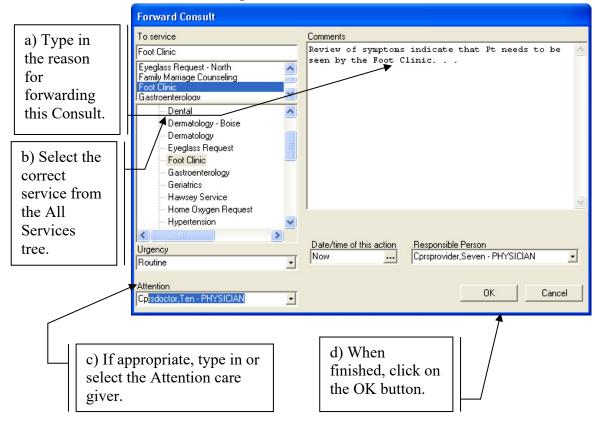


Forward Request

1. Select Forward:

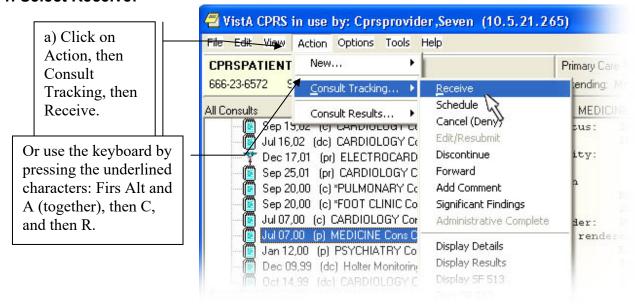


2. Fill in the Forward Consult dialog:

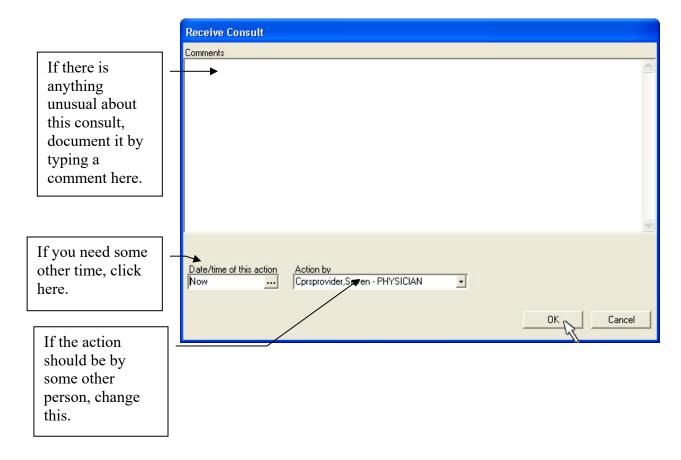


Receive Request

1. Select Receive:



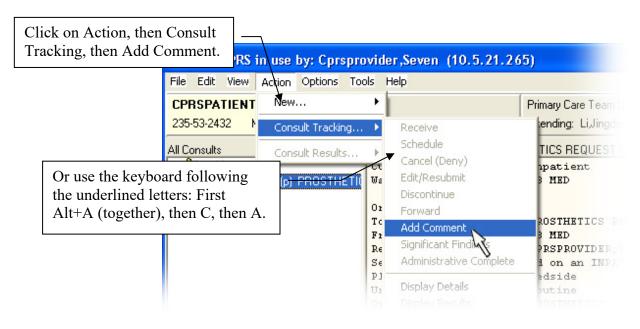
2. Click OK.



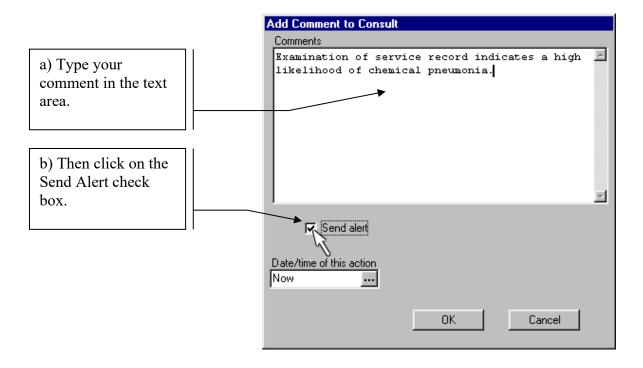
67

Comment

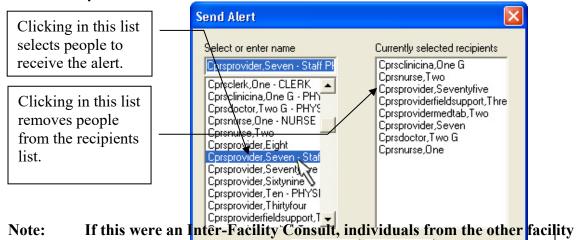
1. Select Add Comment:



2. Fill in the Add Comment to Consult Dialog:



3. Select the People to Receive the Alert:



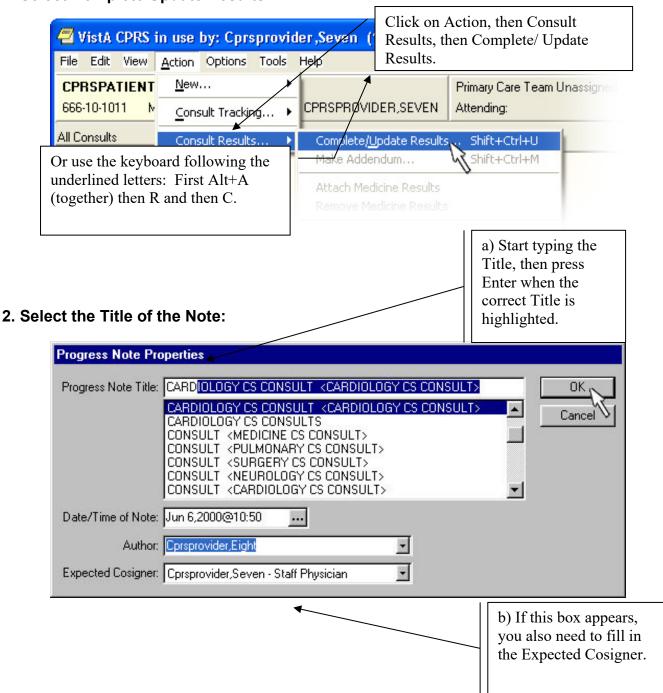
involved would not be on this list. It this case, the Notification System decides who to notify at the other facility by referring to Consults files.

4. Select OK:



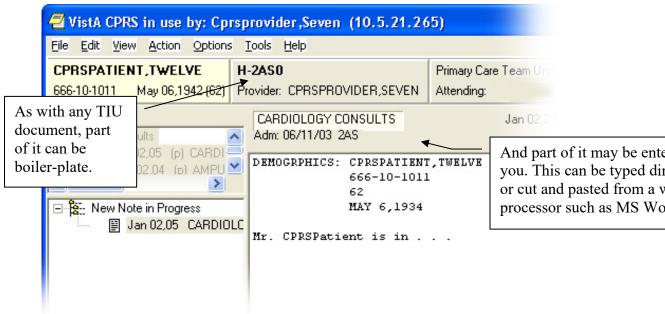
Complete a Consult (From the Consults Tab)

1. Select Complete/Update Results:

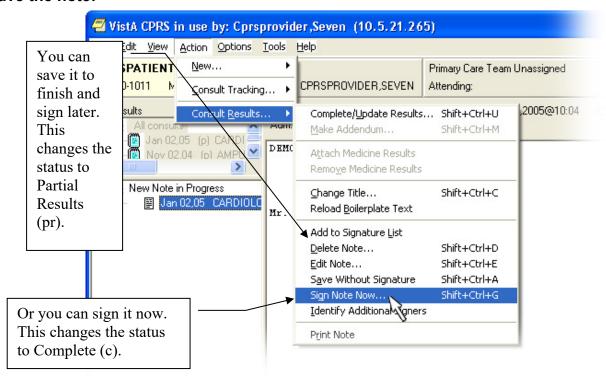


April 2019

3. Type in the text of the results:



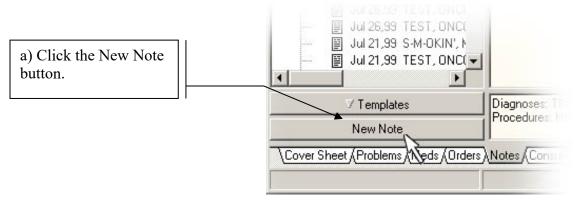
4. Save the note:



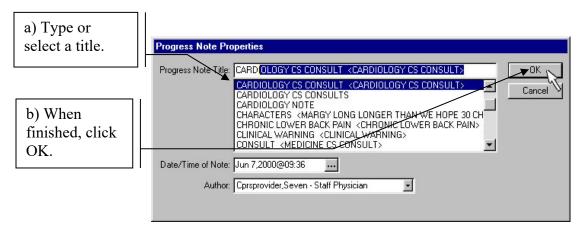
Complete a Consults (From the Notes Tab)

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

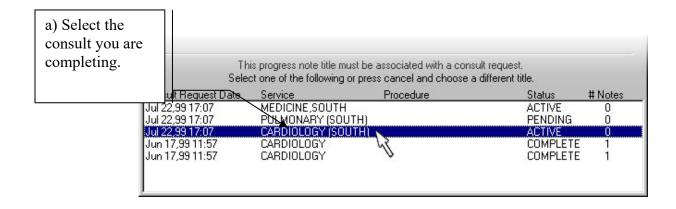
1. Click New Note:



2. Select the Title of the Note:

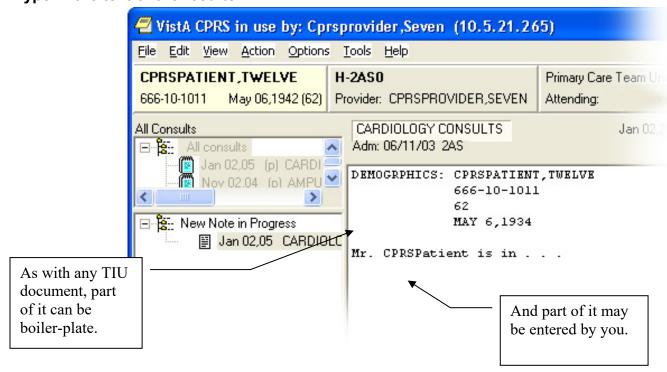


3. Select the consult:

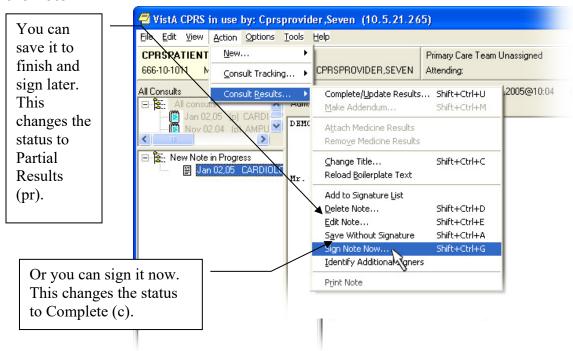


72

4. Type in the text of the results:

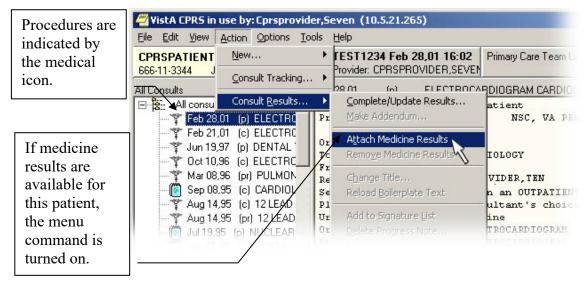


5. Save the note:

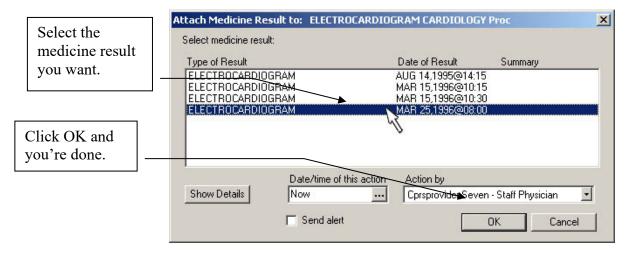


Complete a Consult (From the Medicine Results)

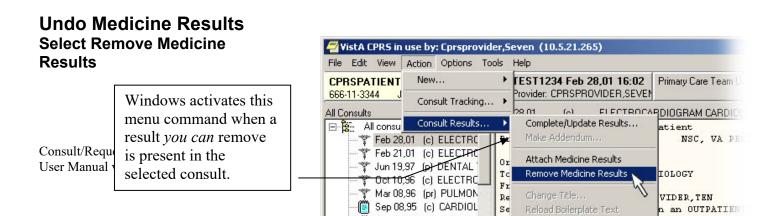
1. Select Attach Medicine Results:



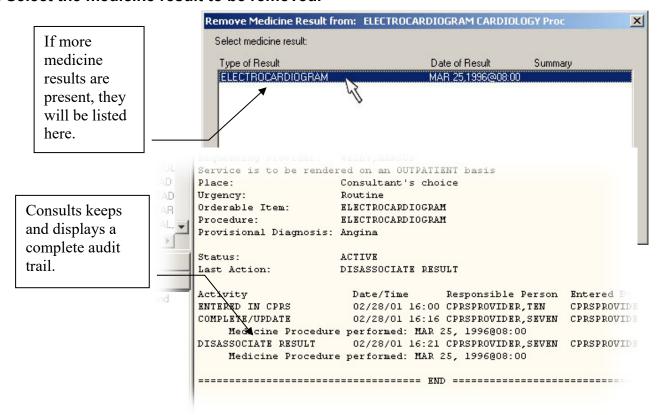
2. Select the medicine result.



3. No signature is necessary at this time.



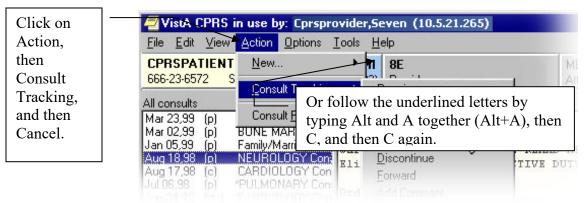
2. Select the medicine result to be removed.



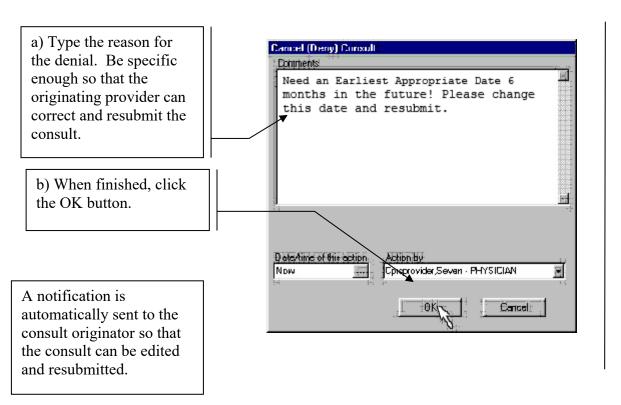
Other Windows Topics Cancel (Deny) Request

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

1. Select Cancel:



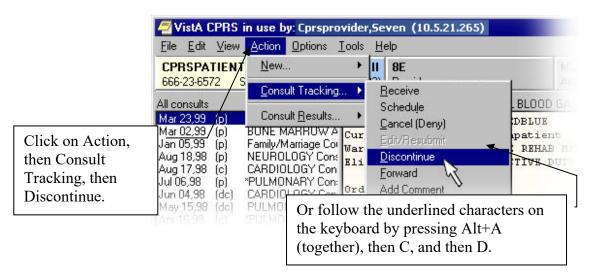
2. Consult dialog:



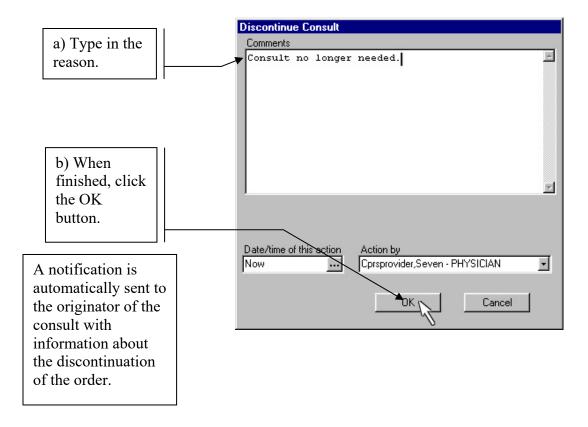
Discontinue Order

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

1. Select Discontinue:

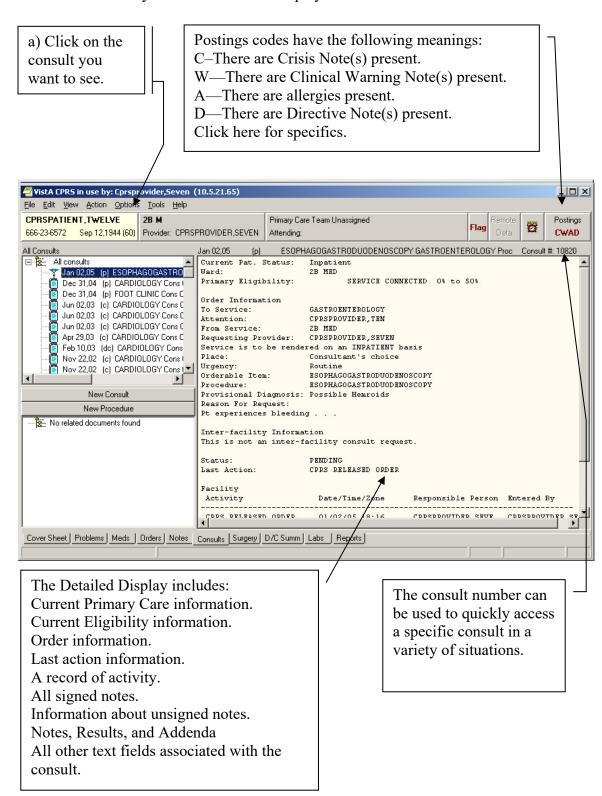


2. Fill out the Discontinue Consult dialog:



Detailed Display

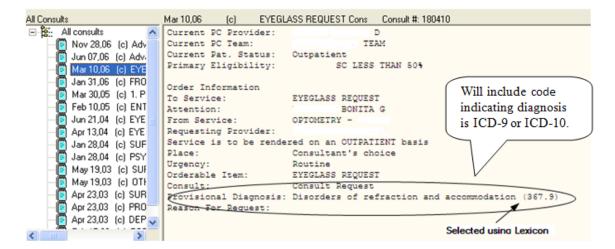
Consults in Windows always show the detailed display of whatever consult is selected.



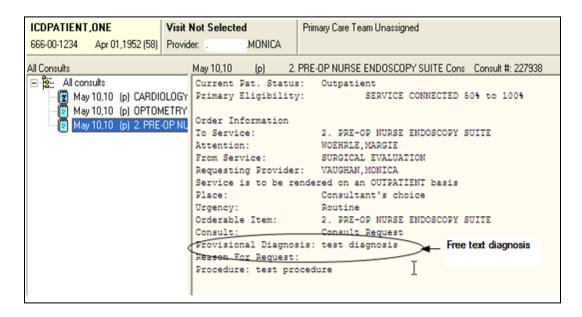
Changes made by Patch 73 for ICD-10 Remediation

ICD Diagnosis Code Display

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

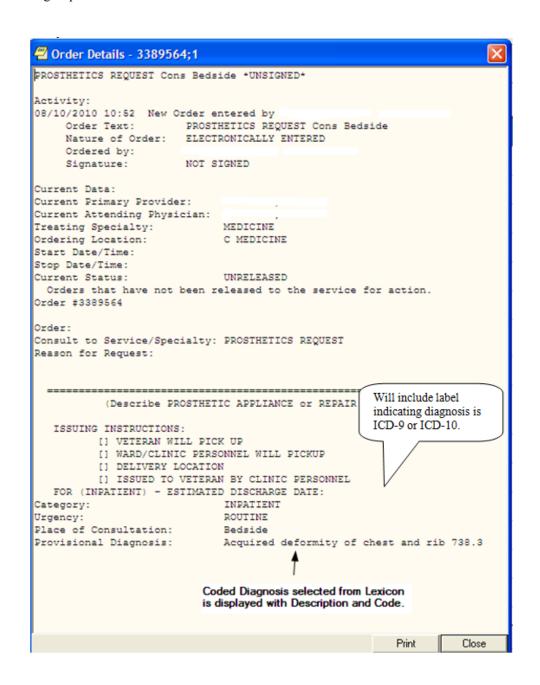


If the user selects an existing consult to display or uses the action Display Details and the Provisional Diagnosis was entered using free text data entry, the CRT package will not designate the diagnosis as ICD-9 or ICD-10.



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

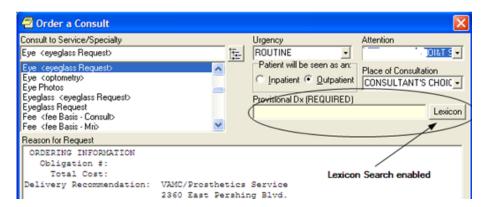
- If the user selects an order to display details and the Provisional Diagnosis was entered as an ICD-9 diagnosis using the Lexicon, the ICD-9 diagnosis code and description/definition will be displayed.
- If the user selects an order to display details and the Provisional Diagnosis was entered as an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



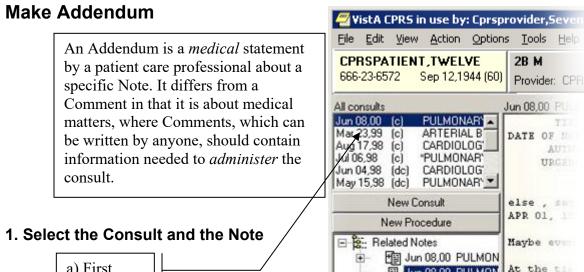
- ICD Diagnosis on the Display SF 513 action will be displayed for a particular Consults or Procedure.
 - If the user performs the action Display SF 513 for a consult or procedure for which ICD-10 diagnosis was entered, Consults will display the ICD-10-CM diagnosis code and full description/definition.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

ICD Diagnosis Search

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

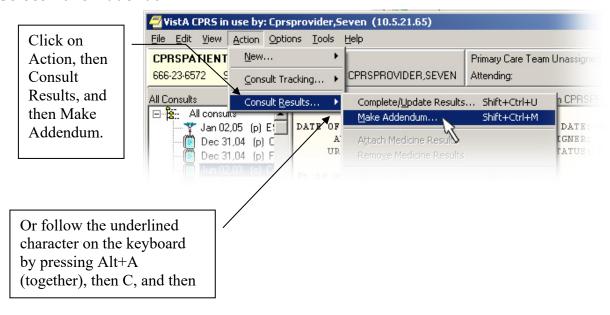


- Consults will display ICD Diagnosis on the Display SF 513 action for a particular Consults or Procedure.
 - If the user performs the action Display SF 513 for a consult or procedure for which ICD-10 diagnosis was entered, Consults will display the ICD-10-CM diagnosis code and full description/definition.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



- a) First click on the consult.
- b) Then, select the note by clicking on it.

2. Select Make Addendum



Jun 08,00 PULMON

spastic ...

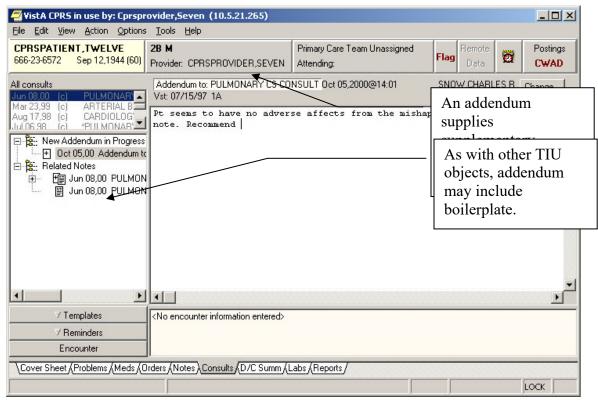
deliver

poor. I

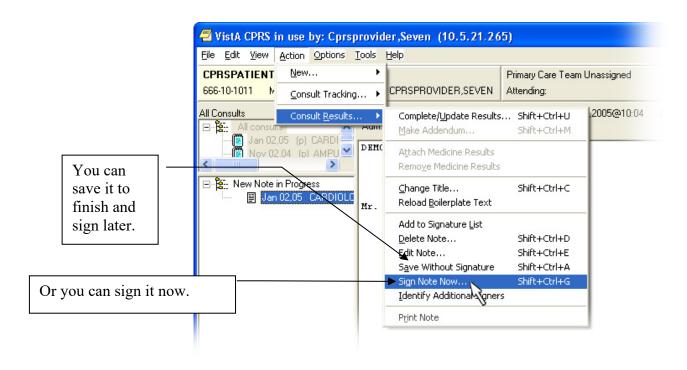
which he

84

3. Type the addendum:

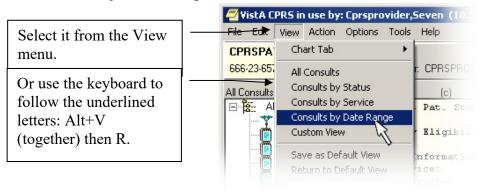


4. Save the note:

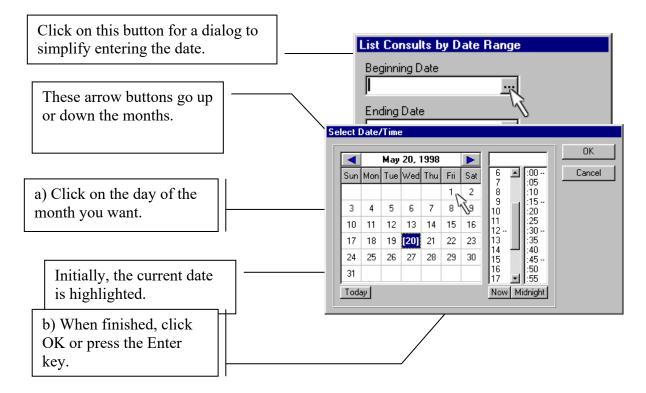


New Date Range

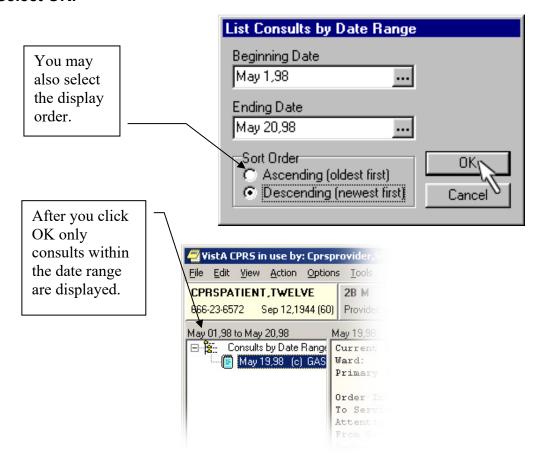
1. Select Consults by Date Range:



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

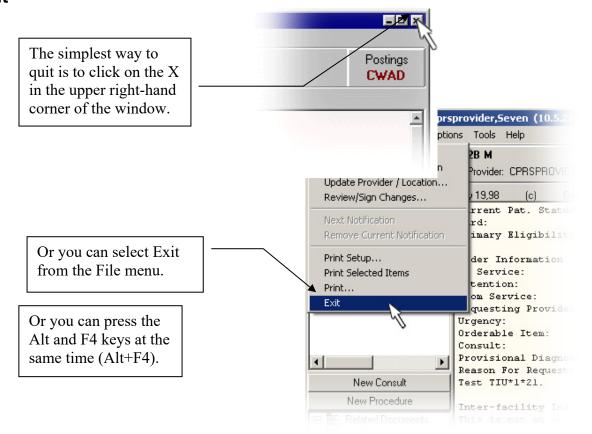


3. Select OK:

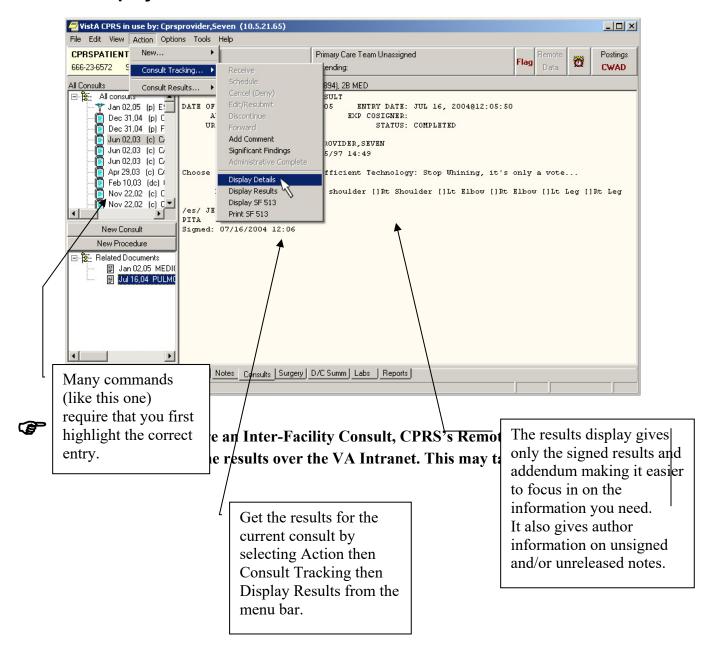


April 2019

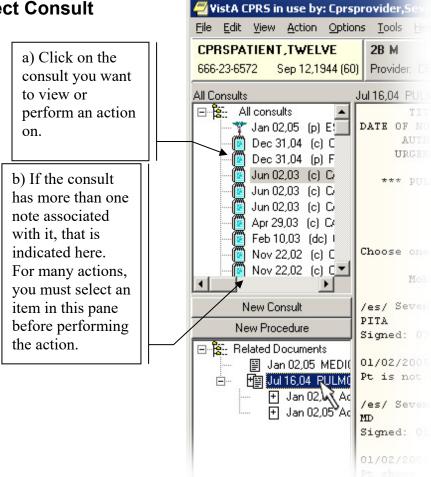
Quit



Results Display



Select Consult

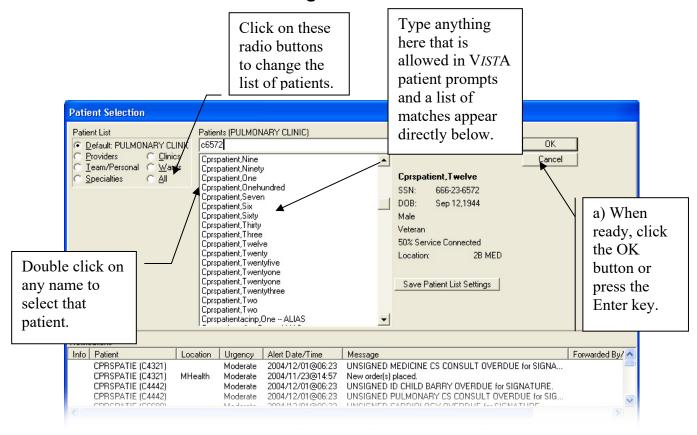


Select New Patient

1. Choose Select New Patient from the File Menu:

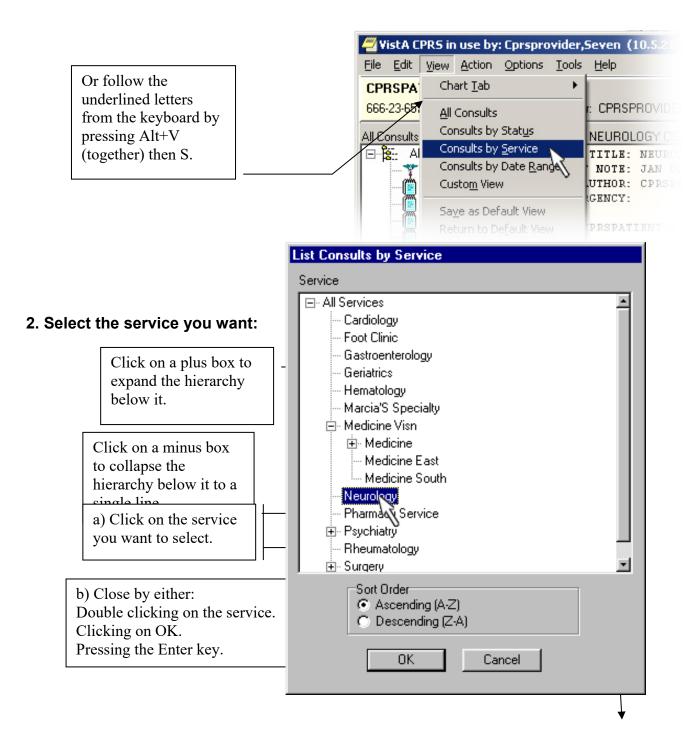


2. Use the Patient Selection Dialog:



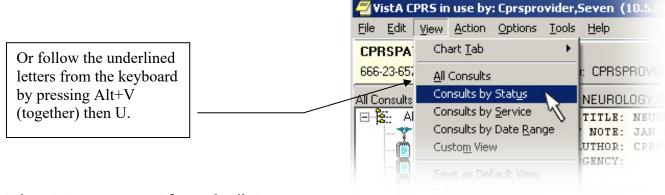
Select Service

1. Select Consults by Service from the View Menu:

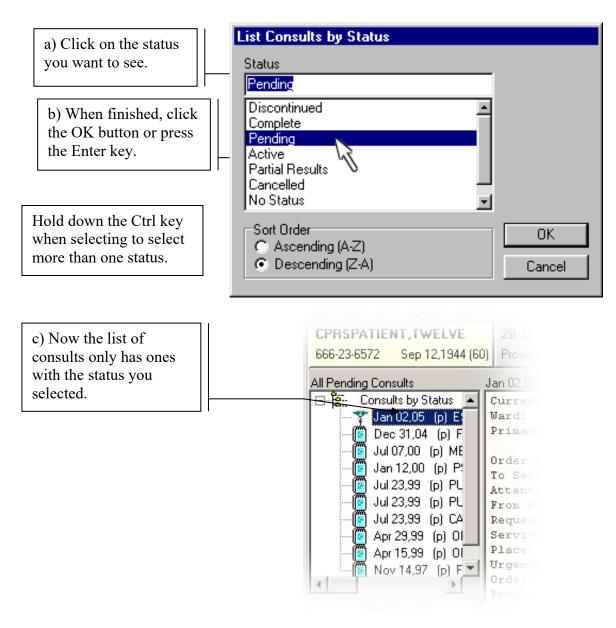


View by Status

1. Select Consults by Status from the View Menu:

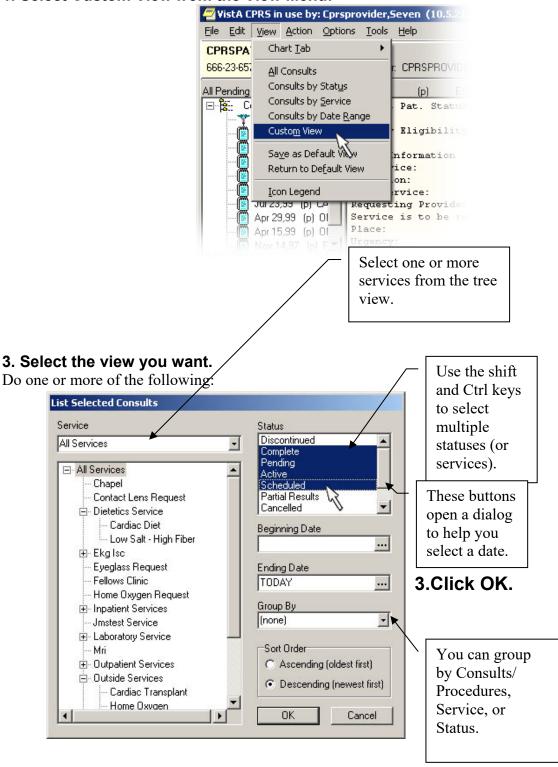


2. Select the status you want from the list:



Custom List

1. Select Custom View from the View Menu:



Package Reference

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

General Service User Menu

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

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

```
Select Consult Service Tracking Option: ?

CS Consult Service Tracking
PC Service Consults Pending Resolution
ST Completion Time Statistics

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

Select Consult Service Tracking Option:
```

Consult Service Tracking Option

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

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

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

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

Review Only and Update Actions

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

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

Update Only Actions

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

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

Before you use this option, you need to know:

• The patient's name or identification.

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

• The service or specialty.

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

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

```
Select Consult Service Tracking Option: ?

CS Consult Service Tracking
PC Service Consults Pending Resolution
ST Completion Time Statistics

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

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

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

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

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

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

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

Enter ?? for more actions

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

Review Only Actions

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

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

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

Status key:

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

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

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

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

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

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

Update Select Actions

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

```
CONSULT TRACKING
                                                             Oct 06, 2000 08:26:04
                                                                                                                     Page:
                                                                                                                                              1 of
                                                                                                                                                              2
                                                                    8E/3E101-1 MAR 3,1960 (40) <AD>
CPRSPATIENT, FOUR 666-44-2222
                                                                                                                                      Wt.(lb): 184
        Requested St No. Consult/Procedure Request
Requested St No. Consult/Procedure Request

1 11/17/98 x 1211 BRONCHOSCOPY PULMONARY Proc

2 07/13/98 c 1112 *PULMONARY Cons

3 06/18/98 c 1062 *PULMONARY Cons

4 06/12/98 c 1050 PULMONARY Cons

5 06/08/98 c 1028 PULMONARY Cons

6 06/04/98 dc 1022 PULMONARY Cons

7 05/27/98 dc 940 PULMONARY Cons

8 05/20/98 dc 919 PULMONARY Cons

9 05/13/98 c 898 *PULMONARY Cons

10 05/01/98 c 898 *PULMONARY Cons

11 04/15/98 c 843 PULMONARY Cons

12 03/16/98 c 827 PULMONARY CONS
                                              827 PULMONARY Cons
       03/16/98
                  Enter ?? for more actions
SP Select Patient FR Forward
                                                                                CT Complete/Update RT Results Display
CV Change View ... CX Cancel (Deny) MA Make Addendum PF Print Form 513
RC Receive DC Discontinue SF Sig Findings RM Remove Med Rslt
SC Schedule CM Add Comment DD Detailed Display ER Edit/Resubmit Select: Next
Screen//
```

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

Completion Time Statistics

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

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

```
Select Consult Service Tracking Option: ?

CS Consult Service Tracking
PC Service Consults Pending Resolution
ST Completion Time Statistics

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

Select Consult Service Tracking Option: ST Completion Time Statistics

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

```
DAYS TO COMPLETE CONSULT STATSOct 06, 2000 08:28:22
                                                                    1 of
                                                                             1
                                                            Page:
Number Of Days To Complete A Consult For Services Statistics.
FROM: ALL TO: OCT 6,2000
                  Consult/Request Completion Time Statistics
                         FROM: ALL TO: OCT 6,2000
SERVICE: PULMONARY
Total Number Of Consults Completed: 200
Mean Days To Complete: 46.8
                                                 Standard Deviation: 104.7
Total INPATIENT Consults: 32
                                                 Standard Deviation: 125.1
Mean Days To Complete: 60.7
Total OUTPATIENT Consults: 30
                                                 Standard Deviation: 155.5
Mean Days To Complete: 93.4
Total Unclassified Consults: 138
Mean Days To Complete: 33.4
                                                 Standard Deviation: 81.0
         Enter ?? for more actions
SS Select Service
```

```
SS Select Service PR Print Completion Statistics To A Printer. Select Item(s): Quit//
```

Service Consults Pending Resolution

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

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

```
Select Consult Service Tracking Option: ?

CS Consult Service Tracking
PC Service Consults Pending Resolution
ST Completion Time Statistics

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

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

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



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

Consult Status

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

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

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

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

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

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

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

Consult Action/Status Overview (Continued)

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

107

Actions Brief Action Descriptions Review Only Actions

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

108

Q The *Quit* action exits all Consults options. **Update Actions**

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



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

two ways:

Select the action. Select the order.

Or

Select the order. Select the action.

The actions that are affected by this are:

DD Detailed Order Display

CM Comment Order

CT Complete Request

DC Discontinue Order

CY Deny Request

FR Forward Request

RC Received Request

SC Schedule

ER Edit/Resubmit

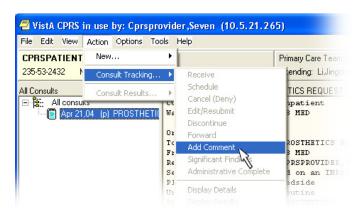
Add Comment (CM) Action

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

The Add Comment action can be performed by any user.

To use the Comment Order action from Windows:

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





Note:

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

Cancel (or Deny) Consult

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

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

Example:

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

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

```
CONSULT TRACKING

Jun 19, 1997 04:21:18

Page: 1 of 1

CPRSPATIENT, FOUR 666-43-8796

2B M

DEC 4,1949 (50) CAD>

Wt.(1b): 184

Requested St No. Consult/Procedure Request

1 02/03/97 a 999 PULMONARY Consult

2 02/03/97 c 929 *PULMONARY Consult

4 02/03/97 c 929 *PULMONARY Consult

5 01/09/97 c 872 PULMONARY COSULT

5 01/09/97 c 872 PULMONARY UGI

6 09/06/96 dc 500 PULMONARY ECHO

7 03/05/92 dc 444 PULMONARY Electrocardiogram

Enter ?? for more actions

SP Select Patient FR Forward CT Complete/Update RT Results Display

CV Change View ... CX Cancel (Deny) MA Make Addendum PF Print Form 513

RC Receive DC Discontinue SF Sig Findings RM Remove Med Rslt

SC Schedule CM Add Comment DD Detailed Display ER Edit/Resubmit

Select: Quit// CX Cancel (Deny)
```

```
CHOOSE No. 1-2: 2

Responsible Clinician: CPRSPROVIDER, TWO CRS PHYSICIAN

Date/Time of Actual Activity: NOW// <Enter> (JUN 19, 1997@04:21)

Enter COMMENT:

1>Duplicate Consult

2> <Enter>
EDIT Option: <Enter>
```

(Continued on next page.)

```
CONSULT TRACKING

CPRSPATIENT, FOUR 666-43-8796

ZB M

DEC 4,1949 (50) <CAD>
Wt.(1b): 184

Requested St No. Consult/Procedure Request

1 02/03/97 x 999 PULMONARY Consult

2 02/03/97 a 989 PULMONARY Consult

3 02/03/97 c 929 *PULMONARY Consult

4 02/03/97 c 873 *PULMONARY Consult

5 01/09/97 c 872 PULMONARY UGI

6 09/06/96 dc 500 PULMONARY ECHO

7 03/05/92 dc 444 PULMONARY Electrocardiogram

Enter ?? for more actions

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

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

Change View (CV) Action

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

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

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

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

With this action you can selectively display consults on the Consult Tracking screen base on the

consult's status. In the following example, the display is changed to view only consults with a status of Pending or Discontinued. For a list of consult statuses and their meanings, see page 104.

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

(Continued on the next page.)

April 2019

Enter ?? for more actions

SP Select Patient RT Results Display ER Edit/Resubmit

CV Change View ... PF Print Form 513
DD Detailed Display CM Add Comment

Select Consult: Quit//

Complete Request (CT) Action

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

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

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

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

Deny Request (DY) Action

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

Detailed Order Display (DD) Action

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

Example:

CONSULT TRACKING

CPRSPATIENT, FOUR 666-43-8796

```
Select Consult Management Option: CS Consult Service Tracking
Select Patient: CPRSPATIENT, FOUR CPRSPATIENT, FOUR 12-04-49 666438796 SC
VETERAN

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

Nov 01, 1997 13:55:32 Page: 1 of

DEC 4,1949 (50) <CAD>

Wt.(lb): 184

```
Requested St No. Consult/Procedure Request

1 11/01/97 c 675 PULMONARY Consult

2 10/06/00 p 566 EYE CLINIC Cons

3 09/21/00 p 464 Electrocardiogram CARDIOLOGY Proc

Enter ?? for more actions

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

```
Select Consult Number: 1
```

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

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

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

(Continued on next page.)

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

Select Action:Next Screen// <Enter>

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

Select Action:Next Screen// <Enter>

(Continued on the next page.)

120

CONSULTS DETAILED DISPLAY

CONSULT DETAILED DISPLAY

CONSULT DETAILED DISPLAY

CONSULT No.: 675

CPRSPATIENT, TWO 666-67-1996

DOB: MAR 5,1949 (48) Wt. (1b): No Entry + due to the eosinophils, not from infection. Antibiotics are usually not necessary.

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

Enter ?? for more actions

Select Action:Quit//

Discontinue Order (DC) Action

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

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

```
Select OPTION NAME: GMRC MGR Consult Management menu

Select Consult Management Option: cs Consult Service Tracking
Select Patient: CPRSPATIENT, FOUR CPRSPATIENT, FOUR 12-04-49 666438796 SC

VETERAN

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

```
CONSULT TRACKING
                                                                             Jun 19, 1997 09:31:19 Page:
                                                                                                                                                                                    1 of
CPRSPATIENT, FOUR 666-43-8796
                                                                                                   2B M
                                                                                                                                                  DEC 4,1949 (50)
                                                                                                                                                                                                <CAD>
                                                                                                                                                                        Wt.(lb): 184
          Requested St No. Consult/Procedure Request

        Requested
        St
        No.
        Consult/Procedure Request

        10/06/00
        p
        1766
        EYE CLINIC Cons

        09/21/00
        p
        1764
        Electrocardiogram CARDIOLOGY Proc

        04/25/00
        c
        1713
        CARDIOLOGY Cons

        03/21/00
        c
        1701
        CARDIOLOGY (SOUTH) Cons

        02/22/00
        pr
        1687
        PULMONARY (SOUTH) Cons

        01/26/00
        c
        1665
        CARDIOLOGY Cons

        06/02/99
        c
        1483
        VENTRICAL LEAD IMPLANT CARDIOLOGY Proc

        04/29/99
        c
        1455
        CARDIOLOGY (oex) CARDIOLOGY Cons

        02/18/99
        x
        1395
        CARDIOLOGY Cons

        01/06/99
        c
        1322
        MARCIA'S SPECIALTY SEA-MARCIA'S SPECIAL

        01/05/99
        c
        1310
        *GASTROENTEROLOGY CARDIOLOGY Cons

        01/04/99
        c
        1287
        CARDIOLOGY Cons

2
3
6
8
9
10
                                                         1322 MARCIA'S SPECIALTY SEA-MARCIA'S SPECIALTY Cons
11
          01/04/99
                                                         1287
                                                                        CARDIOLOGY Cons
                         Enter ?? for more actions
SP Select Patient FR Forward
                                                                                                         CT Complete/Update RT Results Display
CV Change View ... CX Cancel (Deny)
                                                                                                       MA Make Addendum PF Print Form 513
RC Receive DC Discontinue SF Sig Findings RM Remove Med Rs. SC Schedule CM Add Comment DD Detailed Display ER Edit/Resubmit
                                                                                                                                                        RM Remove Med Rslt
Select Consult: Quit// DC Discontinue
```

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

(Continued on next page.)

CON	ISULT TRACKI	NC		.Tun 19 1	997 09	• 31 • 5.8	D	age:	1 of	1	
	RSPATIENT, FO					.31.30 D:		_			
CII	OIAIIBNI, FO	010 00	10 43 0730	2	יו ע.	D.	шС ч,		lb): 1		
	Requested	St	No	Consult/Pro	cedure	Remiest		WC. (10).	104	
1	10/06/00			EYE CLINIC		requese					
2	09/21/00					CARDIOLOGY	Droc				
3	04/25/00	_		CARDIOLOGY		CANDIOLOGI	FIOC				
4				CARDIOLOGY		Cons					
5				PULMONARY (-						
6		C		CARDIOLOGY		COIIS					
7		С				PLANT CARDIO	TOCY :	Proc			
8	04/29/99					CARDIOLOGY C		1100			
9				CARDIOLOGY		CANDIOLOGI C	OIIS				
10						Y SEA-MARCIA	' C CD	CT NT TV	Cons		
11						CARDIOLOGY C		LCIALII	COIIS		
12		С				CANDIOLOGI C	OIIS				
12			for more		COIIS						
Q D	Select Pati				CT CO	mplete/Update	ο PT	P00111+	e Die	21211	
	Change View					ke Addendum			-	-	
	_					g Findings					
	Schedule					g rindings tailed Displ					
	ect Consult			JOHNIETTE	שם שם	carred Dispr	ay Er	EUIC/R	es abili.	L C	
261	lect consult	. Qui	. レ / /								

Edit/Resubmit (ER) Action

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

Forward Request (FR) Action

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

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

Make Addendum (MA) Action

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

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

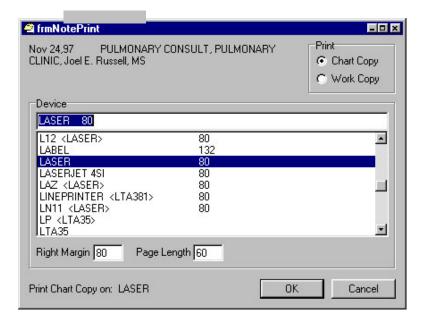
Print Form (PF) Action

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

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

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

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



Print Screen Contents (PS) Action

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

Example:

```
CONSULTS DETAILED DISPLAY
                            Jun 20, 1997 10:40:56
                                                       Page:
                                                                1 of
CONSULT DETAILED DISPLAY
                                                Consult No.: 208
CPRSPATIENT, FOUR 666-43-8796
                                  2B M
                                                   DEC 4,1949 (50)
                                                                     <CAD>
Current Inpatient/Outpatient: Inpatient
              1A
Ward:
                    SC VETERAN
Eligibility:
                    PULMONARY
To Service:
From Service:
Provisional Diagnosis: Broken interface with CPRS.
Reason For Request: Checking action of DY (denying) a consult as to
         DC (discontinuing) a consult.
Status:
                   DISCONTINUED
                   SWITCH BED
Urgency:
                                  Ordering Clinician Entered By
Request Activity
                   Date/Time
ENTERED IN OE/RR
                    03/05/97 16:09 CPRSPROVIDER, TWO CPRSPROVIDER, TWO
                    //
Forwarded From MEDICINE
         Enter ?? for more actions
Select Action:Next Screen// ps
```

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

Quit (Q) Action

Receive Request (RC) Action

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

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

```
You have PENDING ALERTS
           Enter "VA
                        VIEW ALERTS
                                           to review alerts
Select OE/RR Manager Menu Option: VA View Alerts
 1. CPRSPATIENT, FOUR (C8796): New Consult/Request ()
 2. CPRSPATIENT, TWO (C9600): New Consult/Request (Today)
 4. CPRSPATIENT, ONE (C3456): Consult/Request DENIED Consult
           Select from 1 to 6
           or enter ?, A I, F, P, M, R, or ^ to exit: 1
Consult/Request Alerts Feb 13, 1998 13:34:56
                                                            Page: 1 of 1
                                  2B M
                                                            DEC 4,1949 (50) <CAD>
CPRSPATIENT, FOUR 666-43-8796
                                                                      Wt.(lb): 184
                                                                                          Number
                          Procedure
          Stat Service
           02/14/97 p NEUROLOGY
                                              Consult
 187
         Enter ?? for more actions
SP Select Patient FR Forward CT Complete/Update RI Results 2-1.
CV Change View ... CX Cancel (Deny) MA Make Addendum PF Print Form 513
DC Discontinue SF Sig Findings RM Remove Med Rslt
RC Receive DC Discontinue SF Sig Findings RM Remove Med Rs: SC Schedule CM Add Comment DD Detailed Display ER Edit/Resubmit
Select: Quit// RC Receive Request
Who received it?: CPRSPROVIDER, ONE
                                               OC
Date/Time Actually Received: NOW// (FEB 13, 1998@13:36)
(Continued on the next page.)
```

Consult/Request Alerts Feb 13, 1998 13:36:52 Page: 1 of 1
CPRSPATIENT, FOUR 666-43-8796 2B M DEC 4,1949 (50) <CAD>
Wt (1b): 184

Wt.(lb): 184

Number Date Stat Service Procedure 187 02/14/97 a NEUROLOGY Consult

Enter ?? for more actions

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

Remove Medicine Results (RM)

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

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

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

```
CONSULT TRACKING
                               Mar 02, 2001@13:53:35 Page: 1 of
CPRSPATIENT, FOUR 666-43-8796
                                                        2B M
                                                                                   DEC 4,1949 (50) <CAD>
                                                                                                 Wt.(lb): 184
  Requested St No. Consult/Procedure Request
03/02/01 p 599 ELECTROCARDIOGRAM CARDIOLOGY Proc
02/21/01 c 597 ELECTROCARDIOGRAM CARDIOLOGY Proc
    10/10/96 a 242 ELECTROCARDIOGRAM CARDIOLOGY Proc
09/08/95 c 187 CARDIOLOGY CLINIC Cons
08/14/95 pr 183 12 LEAD STAT EKG CARDIOLOGY Proc
08/14/95 c 184 12 LEAD STAT EKG CARDIAC TRANSPLANT Proc
04/29/94 pr 53 ECHO CARDIOLOGY Proc
04/29/94 pr 54 ECHO CARDIOLOGY Proc
04/29/94 p 55 ECHO CARDIOLOGY Proc
3
6
8
              Enter ?? for more actions
SP Select Patient FR Forward
                                                           CT Complete/Update RT Results Display
CV Change View ... CX Cancel (Deny) MA Make Addendum PF Print Form 513
RC Receive DC Discontinue
SC Schedule CM Add Comment
                                                        SF Sig Findings
                                                                                      RM Remove Med Rslt
                           CM Add Comment
                                                         DD Detailed Display ER Edit/Resubmit
Select: Quit//RM
```

CHOOSE No. 1-9: 1

```
Procedure/Medicine Resulting Mar 02, 2001@11:34:48 Page: 1 of 1
CPRSPATIENT, FOUR 666-43-8796 2B M DEC 4,1949 (50) <CAD>
Consult No.: 242 Associated Medicine Results

1 ELECTROCARDIOGRAM OCT 2,1995@10:00 ABNORMAL

Select action or item number

DM Disassociate result DR Display Result
Select Action:Quit// DM
```

```
Select item: (1-1): 1
ELECTROCARDIOGRAM OCT 2,1995@10:00 ABNORMAL

Are you sure you want to disassociate this result? NO// Y YES
```

Results Display (RT) Action

Press return to continue or "^" to escape **<Enter>**

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

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

Schedule (SC) Action

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

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

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

```
CONSULT TRACKING
                                                               Jun 08, 2000 21:14:16
                                                                                                                                                   1 of
                                                                                                                                                                    1□
                                                                                                                                Page:
CPRSPATIENT, FOUR 666-43-8796
                                                                                                                      DEC 4,1949 (50) <CAD>
                                                                                2B M
                                                                                                                                            Wt.(lb): 184
                                       No. Consult/Procedure Request
        Requested St
    07/22/99 p 1561 EXERCISE TOLERANCE TEST CARDIOLOGY 05/20/99 p 1470 CARDIOLOGY (oex) CARDIOLOGY Cons 04/13/99 c 1437 CARDIOLOGY (oex) CARDIOLOGY Cons 04/01/99 c 1429 CARDIOLOGY (oex) CARDIOLOGY Cons 02/26/99 c 1406 CARDIOLOGY Cons 01/05/99 c 1312 CARDIOLOGY Cons 01/04/99 c 1290 *CARDIOLOGY Cons 12/18/98 c 1252 CARDIOLOGY Cons 12/14/98 c 1234 CARDIOLOGY Cons
                                            1561 EXERCISE TOLERANCE TEST CARDIOLOGY Proc
3
8
                    Enter ?? for more actions
SP Select Patient FR Forward CT Complete/Update RT Results Display CV Change View ... CX Cancel (Deny) MA Make Addendum PF Print Form 513 RC Receive DC Discontinue SF Sig Findings RM Remove Med Rslt SC Schedule CM Add Comment DD Detailed Display ER Edit/Resubmit
Select: Quit//SC Schedule
```

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

(Continued on the next page.)

CON	SULT TRACKI	NIC		.Tun 08	2000 2	1:16:45		Page:	1 of	= 1	
	SPATIENT, FO		-12-0704	•	2B M		DEC	_			
CFK	SPALLENI, FO	000 000)-43-0796		2D M		DEC	4,1343	. ,		
		Q .		a 1./5	,	-			Wt.(lb)	: 200	
	Requested	St		Consult/Pr		-					
1	07/22/99	p				CE TEST CARI			С		
2	05/20/99	S	1470	CARDIOLOGY	(oex)	CARDIOLOGY	Cons				
3	04/13/99	С	1437	CARDIOLOGY	(oex)	CARDIOLOGY	Cons				
4	04/01/99	С	1429	CARDIOLOGY	(oex)	CARDIOLOGY	Cons				
5	02/26/99	С	1406	CARDIOLOGY	Cons						
6	01/05/99	С	1312	CARDIOLOGY	Cons						
7	01/04/99	С	1290 '	*CARDIOLOGY	Cons						
8	12/18/98	С	1252	CARDIOLOGY	Cons						
9	12/14/98	C		CARDIOLOGY	Cons						
	,,	•									
	Ento	r 22 f	for more	actions							
SD	Select Pati				СТС	omplete/Upda	a + o	RT Ros	ults Dis	enlaw	
						ake Addendur			nt Form		
	Change View										
	Receive			ontinue		ig Findings			ove Med		
	Schedule		CM Add (Jomment	ם ממ	etailed Disp	этау	ER Edi	t/Resubm	nıt	
Sel	ect: Quit//										

Select New Patient (SP) Action

This option allows you to change patients at any time.

Example:

```
Select Patient: CPRSPATIENT, THREE 01-01-51 666123456 YES SC VETERAN

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

(Continued on the next page.)

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

Enter ?? for more actions

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

Significant Findings (SF) Action

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

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

```
May 01, 1998 14:51:35
 CONSULT TRACKING
                                                                                                                             1 of
CPRSPATIENT, THREE
                                                       666-12-3456
                                                                                                            MAR 3,1960 (40)
                                                                               2B
                                                                                                                                                <AD>
                                                                                                                      Wt.(lb): 184
   Requested St No. Consult/Procedure Request 09/21/00 p 1764 Electrocardiogram CARDIOLOGY Proc 04/25/00 c 1713 CARDIOLOGY Cons
2 04/25/00 c 1/13 CARDIOLOGY Cons

3 01/26/00 c 1665 CARDIOLOGY Cons

4 06/02/99 c 1483 VENTRICAL LEAD IMPLANT CARDIOLOGY Proc

5 04/29/99 c 1455 CARDIOLOGY (oex) CARDIOLOGY Cons

6 02/18/99 x 1395 CARDIOLOGY Cons

7 01/05/99 c 1310 *GASTROENTEROLOGY CARDIOLOGY Cons

8 01/04/99 c 1287 CARDIOLOGY Cons

9 12/18/98 c 1249 CARDIOLOGY Cons

10 10/09/98 c 1184 CARDIOLOGY Cons

11 08/24/98 dc 1144 CARDIOLOGY Cons

12 07/13/98 c 1113 *CARDIOLOGY Cons
                                        1113 *CARDIOLOGY Cons
       07/13/98
12
                Enter ?? for more actions
SP Select Patient FR Forward
                                                                        CT Complete/Update RT Results Display
CV Change View ... CX Cancel (Deny) MA Make Addendum PF Print Form 513
RC Receive DC Discontinue SF Sig Findings RM Remove Med Rslt SC Schedule CM Add Comment DD Detailed Display ER Edit/Resubmit
Select: Next Screen// SF Sig Findings
```

```
CHOOSE No. 1-17: 1

Current Significant Findings = not entered yet

Are there significant findings? (Y/N/U): unknown// yes
Enter COMMENT:
  1>Pt experiencing 60% loss of breathing efficiency.
  2>
EDIT Option:
Alert will be sent to Requesting Provider: CPRSPROVIDER, TWO
Send Alert to: CPRSPROVIDER, TWO added to the list.
And Send Alert to: CPRSPROVDER, THREE already in the list.
And Send Alert to:
Processing Alerts...
```

(Continued on the next page.)

CON	SULT TRACKI	NG	May 01, 1998 14:52:28 Page: 1 of 2	
CPR	SPATIENT, TH	REE	666-12-3456 2B MAR 3,1960 (40) <ad></ad>	
			Wt.(lb): 184	
	Requested	St	No. Consult/Procedure Request	
1	09/21/00	p	1764 *Electrocardiogram CARDIOLOGY Proc	
2	04/25/00	С	1713 CARDIOLOGY Cons	
3	01/26/00	С	1665 CARDIOLOGY Cons	
4	06/02/99	С	1483 VENTRICAL LEAD IMPLANT CARDIOLOGY Proc	
5	04/29/99	С	1455 CARDIOLOGY (oex) CARDIOLOGY Cons	
6	,,	X	1395 CARDIOLOGY Cons	
7	01/05/99	С	1310 *GASTROENTEROLOGY CARDIOLOGY Cons	
8	01/04/99	С	1287 CARDIOLOGY Cons	
9	12/18/98		1249 CARDIOLOGY Cons	
10	10/09/98	С	1184 CARDIOLOGY Cons	
11	08/24/98		1144 CARDIOLOGY Cons	
12	07/13/98	С	1113 *CARDIOLOGY Cons	
+			for more actions	
			FR Forward CT Complete/Update RT Results Display	
	_		CX Cancel (Deny) MA Make Addendum PF Print Form 513	
			DC Discontinue SF Sig Findings RM Remove Med Rslt	
			CM Add Comment DD Detailed Display ER Edit/Resubmit	
Sel	ect: Next S	creen	1//	ļ

Notifications about Consults and Requests

During your session, you may notice:

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

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

There are five notifications relating to consults:

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

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

*NOTE:

- When a comment is added by an UPDATE USER, the alert will only go to the ordering provider (unless additional alert recipients are added).
- When a comment is added by a SERVICE TEAM member, the alert will only go to the ordering provider (unless additional alert recipients are added).
- Any additional recipients added during the Add Comment Action will receive the alert, even if a selected recipient has the alert Disabled.

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

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

Select CPRS Manager Menu Option: VA View Alerts

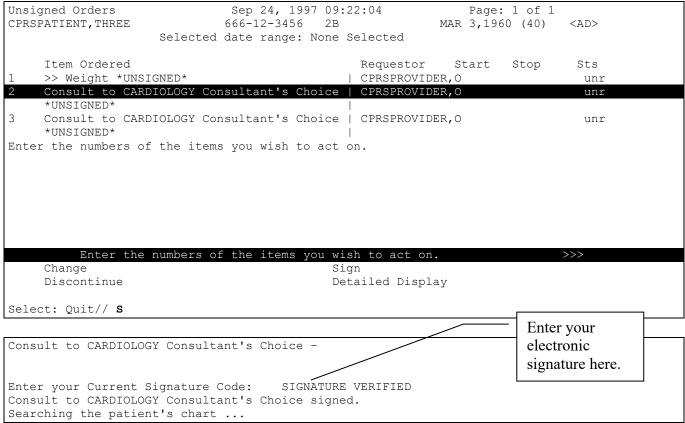
1. CPRSPATIENT, ONE (C4723): New order(s) placed.
2. CPRSPATIENT, THREE (C3456): Consult/Request DENIED To Service: PODIATRY
3. CPRSPATIENT, ONE (C4723): Order requires electronic signature.

Select from 1 to 3

or enter ?, A I, F, P, M, R, or ^ to exit
or RETURN to continue: 3

Processing alert: CPRSPATIENT, ONE (C4723): Order requires electronic signature.
Searching the patient's chart ...
```

```
Sep 24, 1997 09:22:04
                                                                Page: 1 of 1
Unsigned Orders
                              666-12-3456
CPRSPATIENT, THREE
                                           2B
                                                            MAR 3,1960 (40)
                                                                              <AD>
                     Selected date range: None Selected
    Item Ordered
                                                 Requestor
                                                              Start
                                                                       Stop
                                                                                t.s
    >> Weight *UNSIGNED*
                                               | CPRSPROVIDER,O
                                                                                unr
    Consult to CARDIOLOGY Consultant's Choice | CPRSPROVIDER, O
                                                                                unr
    *UNSIGNED*
3
    Consult to CARDIOLOGY Consultant's Choice | CPRSPROVIDER, O
                                                                                unr
    *UNSIGNED*
Enter the numbers of the items you wish to act on.
         Enter the numbers of the items you wish to act on.
   Next Screen
                               - Previous Screen
                                                             Q Quit
Select: Quit// 2
                               Sep 24, 1997 09:22:04
                                                                Page: 1 of 1
Unsigned Orders
CPRSPATIENT, THREE
                              666-12-3456 2B
                                                            MAR 3,1960 (40)
                                                                              <AD>
                     Selected date range: None Selected
```



(Continued on the next page.)

Select: Quit//

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

Enabling Notifications

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

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

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

ABNORMAL IMAGING RESULTS	ON				Mandatory	
ABNORMAL LAB RESULT (INFO)	ON				Mandatory	
ABNORMAL LAB RESULTS (ACTION)	OFF				Disabled	
ADMISSION	ON				Enabled	
CONSULT/REQUEST CANCEL/HOLD	ON				Mandatory	
CONSULT/REQUEST RESOLUTION	ON				Mandatory	
CONSULT/REQUEST UPDATED	OFF				Disabled	
CRITICAL LAB RESULT (INFO)	ON				Mandatory	
CRITICAL LAB RESULTS (ACTION)	ON				Mandatory	
DC ORDER	OFF	OERR	value	is	Disabled	
DECEASED PATIENT	ON	OERR	value	is	Enabled	
DISCHARGE	OFF	OERR	value	is	Disabled	
DNR EXPIRING	OFF	OERR	value	is	Disabled	
ERROR MESSAGE	OFF	OERR	value	is	Disabled	
FLAG ORDER FOR CLARIFICATION	ON	OERR	value	is	Enabled	
FLAGGED OI EXPIRING - INPT	OFF	OERR	value	is	Disabled	
FLAGGED OI EXPIRING - OUTPT	OFF	OERR	value	is	Disabled	
FLAGGED OI ORDER - INPT	OFF	OERR	value	is	Disabled	
FLAGGED OI ORDER - OUTPT	ON	Syste	em val	ue :	is Enabled	
FLAGGED OI RESULTS - INPT	OFF	OERR	value	is	Disabled	
FLAGGED OI RESULTS - OUTPT	OFF	OERR	value	is	Disabled	
FOOD/DRUG INTERACTION	OFF	OERR	value	is	Disabled	
FREE TEXT	OFF				Disabled	
IMAGING PATIENT EXAMINED	OFF				Disabled	
IMAGING REQUEST CANCEL/HELD	ON				Enabled	
IMAGING RESULTS	OFF				Disabled	
IMAGING RESULTS AMENDED	OFF			_	Disabled	
LAB ORDER CANCELED	OFF			_	Disabled	
LAB RESULTS	OFF			_	Disabled	
MEDICATIONS EXPIRING	OFF			_	Disabled	
NEW ORDER	OFF			_	Disabled	
NEW SERVICE CONSULT/REQUEST	ON				Mandatory	
NPO DIET MORE THAN 72 HRS	OFF				Disabled	
ORDER CHECK	OFF			_	Disabled	
ORDER REQUIRES CHART SIGNATURE	ON				Mandatory	
ORDER REQUIRES CO-SIGNATURE	OFF				Disabled	
ORDER REQUIRES CO-SIGNATURE					Mandatory	
ORDERER-FLAGGED RESULTS	ON				4	
	OFF				Disabled	
SERVICE ORDER REQ CHART SIGN	ON				Mandatory	
STAT IMAGING REQUEST	OFF			_	Disabled	
STAT ORDER	OFF				Disabled	
STAT RESULTS	OFF			_	Disabled	
TRANSFER FROM PSYCHIATRY	OFF				Disabled	
UNSCHEDULED VISIT	ON			_	Enabled	
UNVERIFIED MEDICATION ORDER	OFF				Disabled	
UNVERIFIED ORDER	OFF			_	Disabled	
URGENT IMAGING REQUEST	OFF	OERR	value	is	Disabled	
- End of Report -						

```
Select Notification Mgmt Menu Option: 1 Enable/Disable My Notifications
                      Enable/Disable My Notifications
----- Setting for User: CPRSPROVIDER, ONE ------
Select Notification: cons
   1 CONSULT/REQUEST CANCEL/HOLD
    2 CONSULT/REQUEST RESOLUTION
    3 CONSULT/REQUEST UPDATED
CHOOSE 1-3: 3 CONSULT/REQUEST UPDATED
Are you adding CONSULT/REQUEST UPDATED as a new Notification? Yes// <Enter> YES
Notification: CONSULT/REQUEST UPDATED// <Enter> CONSULT/REQUEST UPDATED CONSULT/REQUEST
UPDATED
Value: ?
Code indicating processing flag for the entity and notification.
    Select one of the following:
                 Mandatory
         E
                 Enabled
         D
                 Disabled
Value: Enabled
Select Notification: <Enter>
Select Notification Mgmt Menu Option:
```

New Service Consult/Request

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

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

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

Select Systems Manager Menu Option:
```

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

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

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

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

```
Compiling Report...
```

```
CONSULTS DETAILED DISPLAY Dec 19, 1997 08:12:04 Page: 1 of 5 Consult No.: 731

TRAT, JACK 234-24-2342 DOB: (74) Wt. (1b): No Entry
```

Current Inpatient/Outpatient: Inpatient

Ward: 1A

To Service: CARDIOLOGY

From Service: 1A

Consult Type: EKG Portable Provisional Diagnosis: Cardiomyopathy

Reason For Request: Rule out alternate diagnosis

Status: PENDING

Service is to be rendered on an INPATIENT basis

ATTENTION: CPRSPROVIDER, SEVEN

Place: Bedside Urgency: Stat

Request Activity Date/Time Ordering Clinician Entered By

CPRS RELEASED ORDER 12/16/97 15:52 CPRSPROVIDER, SEVEN CPRSPROVIDER, SEVEN

Enter ?? for more actions

Select Action: Next Screen// Q Q

Wt.(lb): 184 Number

Enter ?? for more actions

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

Select Action: Quit// RC Receive

Who received it?: CPRSPROVIDER, SEVEN SC

Date/Time Actually Received: NOW// (DEC 19, 1997 @ 08:12)

(Continued on the next page.)

Consult/Request Alerts Dec 19, 1997 08:13:01 1 of Page: 666-24-2342 CPRSPATIENT, NINE MAR 3,1960 (40) <AD> 1A

Wt.(lb): 184 Number

Procedure Date St Service

1 12/16/97 a CARDIOLOGY EKG Portable

Enter ?? for more actions

SP Select Patient FR Forward CT Complete/Update RT Results Display MA Make Addendum PF Print Form 513 SF Sig Findings ER Edit/Resubmit CV Change View ... CX Cancel (Deny) RC Receive DC Discontinue

SC Schedule CM Add Comment DD Detailed Display

Select Action: Quit// <Enter> QUIT

Continue Processing ALERTS ? Y//

Consult/Request Resolution

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

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

```
CPRSPATIE (C3456): Completed Consult CAR HOLTER

CPRSPATIE (C1996): *Completed Consult CAR

CPRSPATIE (C8910): Completed Consult PSURG

Enter "VA VIEW ALERTS to review alerts

Select Systems Manager Menu Option:
```

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

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

Consult/Request Updated

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

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

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

- When a comment is added by an UPDATE USER, the alert will only go to the ordering provider (unless additional alert recipients are added).
- When a comment is added by a SERVICE TEAM member, the alert will only go to the ordering provider (unless additional alert recipients are added).
- Any additional recipients added during the Add Comment action will receive the alert, even if a selected recipient has the alert Disabled.

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

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

Consult/Request Cancel/Hold

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

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

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

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

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

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

Select Consult Service Tracking Option: VA View Alerts

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

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

(Continued on next page.)

April 2019

```
Feb 26, 1999 15:58:08
Edit Consult Order
                                             Page: 1 of
Edit Consult for Patient CPRSPATIENT, EIGHT Consult Number: 1336
Sending Provider: CPRSPROVIDER, SEVEN
 Field Name
                       Current Field Contents
 CURRENT STATUS: (Not Editable): CANCELLED
 CANCELLED BY (Not Editable): CPRSPROVIDER, SEVEN
 CANCELLED COMMENT (Not Editable):
Testing edit.
______
 CANCELLED BY (Not Editable): CPRSPROVIDER, SEVEN
 CANCELLED COMMENT (Not Editable):
Testing edit/resubmit.
______
SENDING PROVIDER (Not Editable): CPRSPROVIDER, SEVEN
REQUEST TYPE (Not Editable): Consult
______
1 TO SERVICE: PULMONARY
 PROCEDURE:
3 Performed as INPT OR OUTPT: Outpatient
   Enter ?? for more actions
ED Edit A Field
                  RS ReSubmit Consult
Select Action: Next Screen// <Enter>
```

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

(Continued on the next page.)

Feb 02, 1999 10:44:38 Edit Consult Order Page: 2 of 2 Edit Consult for Patient CPRSPATIENT, NINE Consult Number: 1366 Sending Provider: CPRSPROVIDER, SEVEN + Field Name Current Field Contents 8 REASON FOR REQUEST: Pt is having chest pains. 9 COMMENT(S): (Add Only) Enter ?? for more actions ED Edit A Field RS ReSubmit Consult Select Item/Action:Quit// ED Edit A Field

Select the fields to edit: 7
Provisional Diagnosis: Angina

Edit Consult Order Feb 26, 1999 16:06:16 2 2 of Page: Edit Consult for Patient CPRSPATIENT, EIGHT Consult Number: 1336 Sending Provider: CPRSPROVIDER, SEVEN + Field Name Current Field Contents 4 URGENCY: Routine 5 PLACE OF CONSULTATION: 6 ATTENTION (CONSULTANT): 7 PROVISIONAL DIAGNOSIS: Angina 8 REASON FOR REQUEST: Pt has trouble breathing. 9 COMMENT(S): (Add Only) ADDED COMMENT (Not Editable) Entered: Jan 11, 1999 BY: CPRSPROVIDER, TWO Testing, more testing. Enter ?? for more actions ED Edit A Field RS ReSubmit Consult Select Action: Quit// <Enter> QUIT

(Continued on the next page.)

Special Considerations for Discontinued Orders

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

Consult/Request Has an Added Comment

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

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

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

Select Consult Management Option:
```

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

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

Order(s) Require Electronic Signature

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

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

```
CPRSPATIE (C3456): Order requires electronic signature.

CPRSPATIE (C4723): Order requires electronic signature.

CPRSPATIE (C3234): Order requires electronic signature.

Enter "VA VIEW ALERTS to review alerts

Select Systems Manager Menu Option:
```

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

Significant Findings for a Consult

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

This alert may be delayed, at the user's option, until the consult is complete. In the example that follows, three significant findings notifications are present. One for a completed consult, one for a pending consult, and one for the Significant Findings Flag being turned off on a completed consult:

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

Select Systems Manager Menu Option:
```

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

ADMIN KEY Reports

A new GRMC Patch for "Admin Key Reporting" has been created to generate 3 new GRMC Reports.

- GMRC RPT ADMIN RELEASE CONSULT
- GMRC RPT ADMIN REL CONS USER
- GMRC RPT ADMIN REL CONS GROUPR

These reports allow local GMRC users to generate reports that will show the overall usage of the "Administratively Released by Policy" consults.

The user steps required to access and to display these reports are:

```
VISTAS1:VISTA>D ^XUP
Select OPTION NAME: GMRC MGR
                                            Consult Management
   RPT Consult Tracking Reports ...
          Set up Consult Services
   SS
          Service User Management
   SU
          Consult Service Tracking
          Pharmacy TPN Consults
   GU Group update of consult/procedure requests
UA Determine users' update authority
UN Determine if user is notification recipient
NR Determine notification recipients for a service
   TD
          Test Default Reason for Request
          List Consult Service Hierarchy
   LH
   PR Setup procedures
CP Copy Prosthetics
           Copy Prosthetics services
   CCT Menu for Closure Tools ...
```

```
DS Duplicate Sub-Service
FS Define Fee Services
IFC IFC Management Menu ...
TP Print Test Page
```

```
Select Consult Management <TEST ACCOUNT> Option: RPT Consult Tracking Reports
         Administratively Released Consults by Title
   ΤТ
   GR
         Administratively Released Consults by Group
         Administratively Released Consults by User
   US
         Completion Time Statistics
  РC
         Service Consults Pending Resolution
         Service Consults Schedule-Management Report
  SH
  CC
         Service Consults Completed
  CP
         Service Consults Completed or Pending Resolution
  IFC IFC Requests
  ΙP
        IFC Requests By Patient
         IFC Requests by Remote Ordering Provider
         Consults Local Completion Rate
  NU
         Service Consults with Consults Numbers
         Print IFC Requests
  PΙ
  PL
         Print Consults by Provider, Location, or Procedure
  PM
         Consult Performance Monitor Report
   PR
         Print Service Consults by Status
         Service Consults By Status
  TS
         Print Completion Time Statistics Report
Select Consult Tracking Reports <TEST ACCOUNT> Option: ???
'Administratively Released Consults by Title'
                                                 Option name: GMRC RPT ADMIN RE
LEASE CONSULT
                 Synonym: TI
    The ADMINISTRATIVELY RELEASED CONSULTS BY TITLE report displays counts of
    the number of consults created by the OR ADMIN RBP TO CC security key
    (ADMIN key) and ADMINISTRATIVELY RELEASED BY POLICY. The user will enter
    a date range, and the report will be sorted by Consult Title (Request
    Service name).
'Administratively Released Consults by Group'
                                                 Option name: GMRC RPT ADMIN RE
L CONS GROUPR
                 Synonym: GR
    The ADMINISTRATIVELY RELEASED CONSULTS BY GROUP report displays counts of
    the number of consults created by the OR ADMIN RBP TO CC security key
     (ADMIN key) and ADMINISTRATIVELY RELEASED BY POLICY. The user will enter
    a date range, and the report will be sorted by Consult Group (DS or
    ADMIN).
'Administratively Released Consults by User' Option name: GMRC RPT ADMIN REL
             Synonym: US
    The ADMINISTRATIVELY RELEASED CONSULTS BY USER report displays counts of
    the number of consults created by the OR ADMIN RBP TO CC security key
     (ADMIN key) and ADMINISTRATIVELY RELEASED BY POLICY. The user will enter
    a date range, and the report will be sorted by User.
```

```
Select Consult Management <TEST ACCOUNT> Option: RPT Consult Tracking Reports
         Administratively Released Consults by Title
         Administratively Released Consults by Group
   GR
   US
         Administratively Released Consults by User
         Completion Time Statistics
   PC
         Service Consults Pending Resolution
   SH
         Service Consults Schedule-Management Report
  CC
         Service Consults Completed
  CP
         Service Consults Completed or Pending Resolution
         IFC Requests
  TFC
   ΙP
         IFC Requests By Patient
         IFC Requests by Remote Ordering Provider
   IR
         Consults Local Completion Rate
   LCR
         Service Consults with Consults Numbers
   PΙ
         Print IFC Requests
         Print Consults by Provider, Location, or Procedure
   PL
         Consult Performance Monitor Report
         Print Service Consults by Status
         Service Consults By Status
         Print Completion Time Statistics Report
Select Consult Tracking Reports <TEST ACCOUNT> Option: TI Administratively Rele
ased Consults by Title
Enter Consult Released Starting Date: T-90
Enter Consult Released Ending Date: T
```

```
Admin Released Consults-Title Oct 12, 2018@08:17:12
                                                            Page:
                                                                     1 of
VAMC: FACILITY VAMC
From: Jul 14, 2018
                    To: Oct 12, 2018
Releasing Person
                                                        Number
COMMUNITY CARE-ADMIN-CARDIAC
                                                        58
                                                        48
   CPRSADMINUSER, ONE
                                                        10
   CPRSPROVIDER, ONE
COMMUNITY CARE-DS-CARDIAC
                                                        42
   CPRSADMINUSER, ONE
                                                        34
                                                        8
   CPRSPROVIDER, ONE
GRAND TOTAL 100
          Enter ?? for more actions
Select Action:Quit//
   TΙ
          Administratively Released Consults by Title
          Administratively Released Consults by Group
   US
          Administratively Released Consults by User
          Completion Time Statistics
   PC
          Service Consults Pending Resolution
         Service Consults Schedule-Management Report
   SH
  CC
         Service Consults Completed
         Service Consults Completed or Pending Resolution
  CP
  IFC
         IFC Requests
         IFC Requests By Patient
         IFC Requests by Remote Ordering Provider
  LCR
         Consults Local Completion Rate
  NU
         Service Consults with Consults Numbers
   PΤ
         Print IFC Requests
          Print Consults by Provider, Location, or Procedure
```

```
PM Consult Performance Monitor Report
PR Print Service Consults by Status
SC Service Consults By Status
TS Print Completion Time Statistics Report

Select Consult Tracking Reports <TEST ACCOUNT> Option: GR Administratively Rele ased Consults by Group
Enter Consult Released Starting Date: T-90
Enter Consult Released Ending Date: T
```

Admin Released Consults-User Oct 12, 2018@	08:15:21 Page: 1 of 1				
VAMC: FACILITY VAMC	00:10:21 1 dge: 1 d1 1				
From: Jul 14, 2018 To: Oct 12, 2018					
Admin & DS	Number				
ADMIN	58				
COMMUNITY CARE-ADMIN-CARDIAC	58				
CPRSADMINUSER, ONE	48				
CPRSPROVIDER, ONE	10				
·					
DS	42				
COMMUNITY CARE-DS-CARDIAC	42				
CPRSADMINUSER, ONE	34				
CPRSPROVIDER, ONE	8				
GRAND TOTAL 100					
Enter ?? for more actions					
Callest Bathan Codt //					
Select Action:Quit//					
TT Administratively Delegand Consult	a lass middle				
TI Administratively Released Consult GR Administratively Released Consult					
	2 2				
US Administratively Released Consult ST Completion Time Statistics	s by user				
PC Service Consults Pending Resoluti	on				
SH Service Consults Schedule-Managem					
CC Service Consults Completed	lenc Keporc				
CP Service Consults Completed or Pen	ding Resolution				
IFC IFC Requests	aring Resolution				
IP IFC Requests By Patient					
IR IFC Requests by Remote Ordering F	Provider				
LCR Consults Local Completion Rate					
NU Service Consults with Consults Nu	mbers				
PI Print IFC Requests					
±	±				
PM Consult Performance Monitor Report					
PR Print Service Consults by Status					
SC Service Consults By Status					
TS Print Completion Time Statistics	Report				
1 11 1 12 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	±				
Select Consult Tracking Reports <test account=""> Option: US Administratively Rele</test>					
ased Consults by User					
Enter Consult Released Starting Date: T-90					
Enter Consult Released Ending Date: T					
3					

On the GR report above, it is possible that a consult was originally made with the Admin Key, but then forwarded to a consult service that is neither -DS or -ADMIN. In this event the consult should still show and be counted under the DS or ADMIN group heading wherever it was first created. The screen shot below is an example of that:

```
Admin Released Consults-Group Feb 01, 2019@09:56:59
                                                              Page:
                                                                       1 of
VAMC: CHEYENNE VAMC
From: Feb 01, 2019 To: Feb 01, 2019
Admin & DS
                                                       Number
ADMIN
   CARDIOLOGY DENVER
      CPRSADMINUSER, ONE
                                                        1
   COMMUNITY CARE-ADMIN-CARDIAC
                                                       1
      CPRSADMINUSER, ONE
                                                        1
GRAND TOTAL 2
          Enter ?? for more actions
Select Action:Quit//
```

Nation Political Community William Oak 10, 2010000 15 201	D			
Admin Released Consults-User Oct 12, 2018@08:15:21 VAMC: FACILITY VAMC	Page: 1 of 1			
From: Jul 14, 2018 To: Oct 12, 2018				
110 041 11, 2010 10. 000 12, 2010				
Orderable Item	Number			
CPRSADMINUSER, ONE	82			
COMMUNITY CARE-ADMIN-CARDIAC	48			
COMMUNITY CARE-DS-CARDIAC	34			
CPRSPROVIDER, ONE	18			
COMMUNITY CARE-ADMIN-CARDIAC	10			
COMMUNITY CARE-DS-CARDIAC	8			
GRAND TOTAL 100				
Enter ?? for more actions				
Enter :: for more accions				
Select Action:Quit//				
001000 11001011. <u>x</u> 0110//				

UCID Display

In patch 96 a new field was created to track Community Care Consults. The field is #80 (UNIQUE CONSULT ID aka UCID) in file #123 (REQUEST/CONSULTATION). Patch 110 displays the UCID in the Consult Details at the top:

```
Current Pat. Status: Outpatient
UCID: 442_883875

Primary Eligibility: SERVICE CONNECTED 50% to 100%(VERIFIED)
Patient Type: SC VETERAN
OEF/OIF: NO
```

Cancelled to Discontinued Consults

After the installation of the GMRC*3.0*113 patch, the CSLT CANCELLED TO DISCONTINUED parameter will be set as follows:

```
Is the overnight cancel to discontinue job active? = NO
How many days back to start with? = 31
How many days back to end with? = 365
```

This parameter steers the overnight job, GMRC CHANGE STATUS X TO DC, by the date range specified in fields 2 and 3 of the multi-valued parameter. By default, upon installation, the **Is the overnight cancel to discontinue job active?** field is set to **NO** which means that it is disabled. The site is responsible for deciding if the overnight job should run, and setting it to "YES" to enable it.

The overnight job then looks for consults that have been cancelled during this period, and discontinues them by calling the \$\$DC^GMRCGUIA API. It is possible for specific users on a VistA site to change the date range prescribed by these parameters by adjusting the "How many days back to start with?" and the "How many days back to end with?" parameters with the following. However, if the Is the overnight cancelled to discontinued job active? parameter is set to NO the other two questions will not be asked.

```
Select OPTION NAME: GMRC CX TO DC PARAMETER EDIT GMRC CX TO DC PARAMETER EDIT

GMRC CX TO DC PARAMETER EDIT

Is the overnight cancelled to discontinued job active? YES//
How many days back to start with: (0-99999): 31// 15 09/12/2018
How many days back to end with: (15-999999): 365// 420 08/03/2017

New contents of parameter:

Is the overnight cancelled to discontinued job active? = Y
How many days back to start with? = 15 09/12/2018
How many days back to end with? = 420 08/03/2017
```

Glossary

Action An action in Consults can be selected throughout

processing to 1) control screen movement, 2) add new

consult orders, or 3) process existing orders.

Consult Referral of a patient by the primary care physician to

another hospital service/ specialty, to obtain a medical opinion based on patient evaluation and completion of any procedures, modalities, or treatments the consulting specialist deems necessary to render a medical opinion.

In the case of Inter-Facility Consults (IFC, see below) the

Consulting Site In the case of Inter-Facility Consults (IFC, see below) the

VA facility that originates the consult.

Discontinued Orders Orders that are discontinued or cancelled.

HCPS The Healthcare Claims Processing System is a centralized,

automated system that will support the management of

purchased care referrals/authorizations.

IFC Inter-Facility Consults permits the transmitting of consults

and related information between Department of Veterans Affairs facilities. Consult requests are made to remote facilities because the needed service is not locally available or for patient convenience. Although the Consult Package is utilized in the hospital settings, Consult requests between

facilities have been done manually in the past.

Order A request for a consult (service/sub-specialty evaluation) or

procedure (Electrocardiogram) to be completed for a

patient.

Order Cancellation A request to stop performance of a consult/procedure

request; the order may be edited and reactivated

Order Discontinuation A request to stop (discontinue) performance of a

consult/procedure request.

Procedure Request Any procedure (EKG, Stress Test, etc.) which may be

ordered from another service/ specialty without first

requiring formal consultation.

RAS Referral and Authorization System; see HCPS.

Request See Procedure Request.

Requestor This is the health care provider (e. g., the

physician/clinician) who requests the order to be done.

Result A consequence of an order. Refers to evaluation or status

results. When you use the Complete Request (CT) action on a consult or request, you are transferred to TIU to enter

the results.

Resulting Site In the case of Inter-Facility Consults (IFC, see above) the

remote site that performs the consult and enters the results.

Screen Context This term refers to the particular selection of orders

displayed on the screen (e. g., Medicine consults for the

patient Ralph Jones).

Service A clinical or administrative specialty (or department)

within a Medical Center.

Status Result A result that indicates the processing state of an order; for

example, a Pharmacy TPN Consult order may be

discontinued (dc) or completed (c).

Status Symbols Codes used in order entry and Consults displays to

designate the status of the order.

Index

Action, 165	Custom List, 95
Action Descriptions, 108	Deny, 112
Actions	Deny Request (DY), 117
Change View (CV), 114	Detailed Display (DD), 78, 108
Comment (CM), 111	Detailed Order Display (DD), 118
Complete Request (CT), 116	DISCONTINUE, 104
Deny Request (DY), 117	Discontinue Order (DC), 77, 109, 122, 152
Detailed Order Display (DD), 118	Discontinued Orders, 104, 114, 156, 165
Discontinue Order (DC), 122	Edit/Resubmit (ER), 124
Edit/Resubmit (ER), 124	electronic signature, 18, 19, 40, 142, 157
Forward Request (FR), 125	Enabling Notifications, 144
Order of, 110	Enhancements Since Version 2.5, 4
Print Form (PF), 127	FilaMan Alerts, 30
Print Screen Contents (PS), 128	Forward Request (FR), 24, 66, 109, 125
Quit (Q), 129	General Service User Menu, 96
Receive Request (RC), 130	Glossary, 165
Remove Medicine Results (RM), 132	Healthcare Claims Processing System, 151, 165
Results Display (RT), 133	HL7, 2, 5, 6
Review Only, 108	IFC, 6, 165
Schedule (SC), 134	IFC Requests by Remote Ordering Provider, 158
Select New Patient (SP), 136	Integrated Document Management, 37
Significant Findings (SF), 138	Inter-Facility Consults, 6
Update/Tracking, 108	Introduction, 1
View by Status (ST), 114, 115	Make Addendum (MA), 84, 126
ACTIVE, 104, 130	Management, 9
Add New Orders, 13	Manuals, 8
Add Original Consult, 63	Medical Records Committee, 22
Alert Actions, 5	Medicine Package, 53, 57
All My Unsigned Documents, 46	Medicine Results), 74
asterisk, 138	New Date Range, 86
Brief Action Descriptions, 108	New Service Consult/Request, 147
Cancel (CX), 112	Notifications, 140
Cancel Request (CX), 76	Notifications Management Menu, 144
CANCELLED, 104	Operation, 11
Change Date Range (DT), 114	Order, 2, 165
change signature, 18	Order Cancellation, 122, 165
Change View (CV), 114	Order Checking, 6
Clinical Procedures, 56	Order Discontinuation, 165
Clinically Indicated Date, 16, 22, 33, 64, 76	Order New Consult, 13, 63
Comment (CM), 68, 111	Order of Actions, 110
COMPLETE, 104	Order(s) Require Electronic Signature, 157
Complete a Consult (From the Consults Tab), 70	Package Management, 9
Complete a Consults (From the Notes Tab), 72	Package Operation, 11
Complete Request (CT), 70, 116	Package Reference, 96
Completion Time Statistics, 102	PARTIAL RESULTS, 104
Consult, 165	PENDING, 104, 130, 134
Consult Service Tracking Option, 97	Print Form (PF) Action, 65, 127
Consult Status, 104	Print Screen Contents (PS), 128
Consult/Request Cancel/Hold, 152	Procedure Request, 2, 97, 108, 122, 166
Consult/Request Has An Added Comment, 157	prompt, 40, 98, 100, 108, 128, 129, 140, 141, 147
Consult/Request Resolution, 150	150, 152
Consult/Request Tracking Technical Manual, 8, 22, 29	Purpose, 2
Consult/Request Updated, 151	Quick Orders, 35
Consultation Form (SF 513), 22	Quit (Q) Action, 88, 129
Consulting Site, 165	RAS, 151, 166
Correcting Misdirected Results, 41	Receive Request (RC) Action, 67, 130
CPRS Clinical Coordinator & User Manual, 8	Relations with other VISTA Components, 6
CPRS Installation Guide, 8	Relationship to Other Packages, 2
CPRS Technical Manual, 35	Remote Ordering Provider, 158

Remove Medicine Results, 74 Remove Medicine Results (RM), 132

Request, 166 Requestor, 166 Requests, 1, 2

Requests by Remote Ordering Provider, 158

Result, 41, 166 **Resulting Site**, 166 Results, 37, 108, 116

Results Display (RT), 89, 108, 133 Review Only Actions, 97, 100, 108

Schedule (SC), 134 SCHEDULED, 104, 134 Screen Context, 166 Security, 9, 10 Select Consult, 90

Select New Patient (SP), 91, 136 Select Service (SS), 92, 114 service, 2, 10, 22, 166

Service Consults Pending Resolution, 103 Service Update and Tracking Security, 9

Set up Consult Services, 156

Setup, 5

signature, 18, 19, 40, 142, 157

Significant Findings (SF), 138 Significant Findings for a Consult, 158

Starting Consults in Windows, 60

status, 10, 26, 116, 130 Status after Action, 104 Status Result, 166 Status Symbols, 104, 166

Text Integration Utility (TIU), 8, 27, 37, 109, 116 TIU Clinical Coordinator & User Manual, 8, 37, 40

TIU Correcting Misdirected Results, 41

TIU Direct Input, 37 Tracking Option, 97 Undo Medicine Results, 74 Update/Tracking, 108 Update/Tracking Actions, 98 Update/Tracking Select Actions, 101 User Menu, 96

Using the Consults Package with TIU, 37 View by Status (ST), 93, 95, 114, 115

web pages, 8 Windows, 60

Windows Quick Start, 57

Work Flow, 12