VistAWeb

Version 15.0
WEBV*1*24

User Manual

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Product Development

Revision History

Date	Patch	Page(s)	Change(s)	Project Manager	Technical Writer
Sept 2011	WEBV*1*24 VistAWeb 15	p. 12	Updated section on new features in Version 15	Muse	Green
Sept 2011	WEBV*1*24 VistAWeb 15	throughout	Combined V14 and V15 manuals	Muse	Green
August 2011	WEBV*1*24 VistAWeb 15	p. 12	Added section on what's new in Version 15	Muse	Green
Nov 2010	WEBV*1*20 VistAWeb 13.0	p. *62*	Added examples of NwHIN documents	Schram	Green
Sept 2010	WEBV*1*20 VistAWeb 13.0	preface	Added Preface	Schram	Green
May 2010	WEBV*1*18 VistAWeb 12.0	Throughout	Updated screen captures	Muse	Green
Jan 2010	WEBV*1*19 VistAWeb V11	p. 8, 62	Added information and screen captures about NwHIN	Ridley	Green

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Preface

VistAWeb Version 15 (WEBV*1*24) incorporates the needed enhancements to support NwHIN (Nationwide Health Information Network) Segment 1bii and adds the ability for users to view C62 clinical note data from the Department of Defense (DoD) in six domains. This will allow VistAWeb to query and report VA patient data from not only VA and DoD sites, but also private clinical providers outside of VA and DoD.

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Introduction to VistAWeb

Veterans Health Information Systems and Technology Architecture (VistA) VistAWeb is a read-only intranet web application. It delivers to the client a uniform, well-defined suite of objects from the medical domain, objects such as patient, provider, progress note, lab results, prescriptions, allergies, and imaging. Designated as the preferred method for VA clinicians to view both DoD and remote data from other VAMCs due to its ease of use, flexibility and reliability. VistAWeb is a key component of NwHIN, as it is the only application which supports the clinical use of the NwHIN.

It is used to review remote patient information found in VistA, Bidirectional Health Information Exchange (BHIE) system, the Health Data Repository II (HDR II) databases, the Nationwide Health Information Network (NwHIN), and all local VAMCs.

To a large extent, VistAWeb mirrors the reports behavior of the Computerized Patient Record System (CPRS) and Remote Data View (RDV). However, by permitting a more robust and timely retrieval of remote-site patient data, VistAWeb is also an enhancement to CPRS/RDV.

(For further information about NwHIN, go to the following link: http://healthit.hhs.gov/portal/server.pt?open=512&mode=2&cached=true&objID=1142).

There are three ways to access VistAWeb. VistAWeb can be made available by adding it to the CPRS Tools Menu, and it can be selected by choosing the VistaWeb button on the CPRS toolbar. These two methods are referred to as CPRS-spawned versions of VistAWeb. They are compliant with the Health Level 7 (HL7) Clinical Context Object Workgroup (CCOW) standards and therefore maintain context with the patient selected in CPRS. As a third option, VistAWeb can be accessed in a standalone mode by entering the uniform resource locator (URL) link (https://vistaweb.med.va.gov/) in the Internet Explorer address bar. These methods of accessing VistAWeb are discussed in more detail in later sections of this manual.

Note: *Some links found in this user manual go to sites or pages found on the VA intranet. These sites or pages are not accessible from outside the VA network.*

The standalone version of VistAWeb is connected to neither CPRS nor the clinical context management application. Standalone VistAWeb serves an important function for users who have been granted special access to multiple sites, such as for National Programs, Veterans Administration (VA) researchers, and others. VistAWeb was also made available more broadly, though temporarily, to assist clinical staff with the retrieval of patient information from the sites affected by damage caused by hurricane Katrina.

To fully appreciate the data that VistAWeb presents to the user, it is important to know something about the HDR as one of the sources of that data. Please read the following section to familiarize yourself with the purpose of the HDR and some of the terms and acronyms that describe it, as these will be used in subsequent sections of this manual.

Brief Overview of NwHIN

The Nationwide Health Information Network (NwHIN) is being developed to provide a secure, nationwide, interoperable health information infrastructure that will connect providers, consumers, and others involved in supporting health and healthcare. This critical part of the national health IT agenda will enable health information to follow the consumer, be available for clinical decision making, and support appropriate use of healthcare information beyond direct patient care so as to improve health. NwHIN, which is a network of networks, securely connects consumers, providers and others who use health-related data. With NwHIN, there is no national data store or centralized systems at the national level and no national patient identifier.

Expansion of NwHIN exchange in VistAWeb Versions 13, 14, and 15

VistAWeb version 11 integrated with NwHIN to display Allergies, Outpatient Medications and Conditions/Problems data from external entities (Kaiser Permanente (KP) and Department of Defense (DoD)). For VLER Phase 1bi of this project and VistAWeb version 13, the NwHIN exchange will expand to a new private partner, MedVirginia, and to an additional Veterans Affairs (VA) pilot site, VAMC Hampton Roads, VA. All partners will continue to exchange a C32-Summarization of Episode Note document with the initial clinical domains of Allergies, Conditions/Problems, and Outpatient Medications.

V13 exchanged data for Vitals and Lab Results - Chemistry and Hematology (Chem and Hem) domains. The four clinical domains of Allergies, Conditions/Problems, Medications (Outpatient) and Lab Results (Chem and Hem) comprise the minimum data set for VLER Segment 1bi.

V15 includes addition of Immunizations, Results Organizer Feature and Vitals to the NwHIN Health Summary documents (C32) display, addition of Procedures, Results Organizer Feature and Vitals to VistAWeb Aggregated Reports, the ability for users to view Clinical Note data (C62) from its NwHIN partners in six domains, and the ability for new NwHIN partners to transfer their C32 summary documents.

NOTE: a double dagger (‡) is displayed next to all document domains/reports that contain NwHIN data. **NwHIN data will only display if you are signed on to a VAMC that is participating with an NwHIN partner.** Otherwise, you will get a message saying "No NwHIN data found."

Brief Overview of the HDR

The purpose of the HDR project is to establish a clinical data repository. A clinical data repository is a collection of clinical information that resides on one or more independent platforms and is used by clinicians and other personnel to facilitate longitudinal patient-centric care. The data in the HDR will be retrieved from existing VistA files and organized in

a format that supports the delivery of care, regardless of the patient's current location or where the patient has been treated in the past. Additionally, the HDR serves several purposes:

- Serves as a primary source for the legal health record (LHR)
- Enables the generation of clinical reports based on the entire clinical holdings of Veterans Health Administration (VHA)
- Supports standardization between and among Department of Defense (DoD), Indian Health Services (IHS), and other government and private industry clinical databases through the creation of a standards-based database

For more information, see HDR documentation on the VistA Documentation Library (VDL).

Brief Overview of AWIV

Version 13 of VistAWeb enabled use of the AWIV. (See "VistAWeb V 12.0 Features/ Enhancements" for further details.) The Advanced Windows Imaging Viewer (AWIV) is an ActiveX component created by VistA Imaging for the purpose of displaying medical images from a variety of sources. The AWIV is created using the some components inside the VistA Imaging Clinical Display application, which is an FDA regulated medical device. It is distributed with Patch 105 (MAG*3.0*105).

VistAWeb provides information to the AWIV component to indicate what is to be displayed. The AWIV communicates with the Centralized VistA Imaging Exchange (CVIX) service for VA and DoD data.

AWIV is dependent on Patch 104 (MAG*3.0*104) for communication service to retrieve images from the web for display.

The AWIV supports displaying artifacts provided by the VA and in future will display artifacts provided by the DoD. In this context, an artifact is an image or image-like object stored by VistA Imaging or by DoD HAIMS. Artifacts include images of various types as well as scanned documents. Note that VistA Imaging EKG images are not accessible because they are stored on third-party servers.

When viewing reports and notes from VA sites, VistAWeb can determine if there are images associated using the same remote procedure calls (RPC) CPRS has already defined. When VistAWeb determines a note or report has images associated, VistAWeb should indicate to the user that images are available through an icon. VistAWeb will then display a page containing the AWIV component and then provides the AWIV component with the necessary parameters and the string identifier from CPRS.

Known Constraints

There are known constraints in the installation and use of VistAWeb:

1. VistAWeb is a CCOW-compliant application. If VistAWeb is launched from CPRS on a computer without the CCOW-compliant Vergence Desktop Components installed, a message will be displayed saying "VistAWeb is CCOW compliant and has been unsuccessful in locating a CCOW vault. Please contact your local IRM for assistance." VistAWeb will then exit.

Note: *Information Resources Management (IRM) staff should refer to the VistAWeb Informational Patch OR*3*230 for guidance on where to find information and who to talk to about installation and configuration of the CCOW Desktop Components. Additional CCOW information can be found at http://vista.med.va.gov/vistaweb/Desktop_Components.htm and http://vista.med.va.gov/CCOW/index.html.*

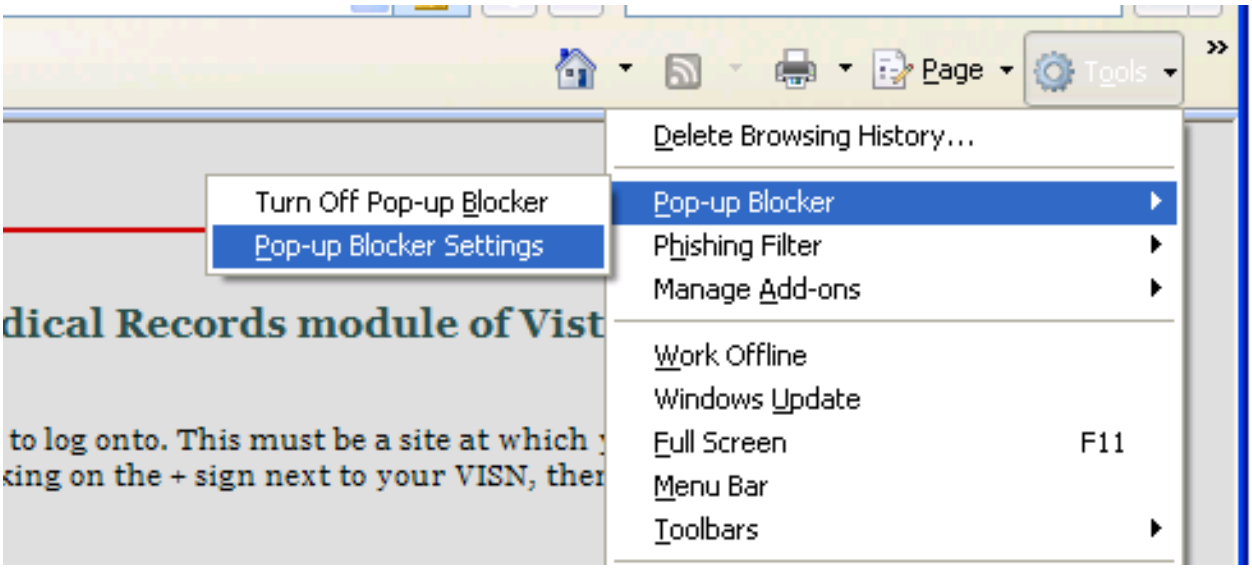
2. Access to VistAWeb in a test account should ***not*** be made available to general users. Access ***should*** be made available in a production account. Accessing VistAWeb in test accounts will require the user to enter the IP address and port number of the test system each time a patient selection is performed. Access to VistAWeb in a test account should be restricted to IRM staff for limited testing purposes only.

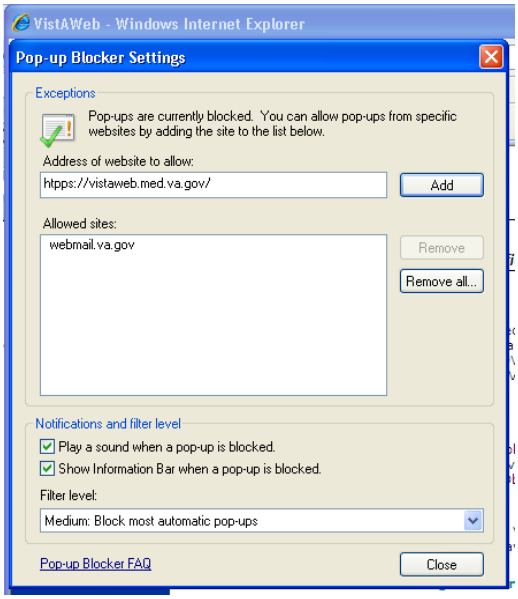
Note: *Using VistAWeb to look up "test patients" may produce confusing results. Normally, no two sites ever have the same test patients. Using a test patient in a production account may seem to work satisfactorily, but can cause VistAWeb to error out as it attempts to reconcile a test patient at multiple sites.*

3. VistAWeb uses pop-ups. Field facilities that have chosen to turn off pop-ups on desktops will need to allow them for VistAWeb. In *Internet Explorer* in the *Tools* menu pull-down, select *Pop-up Blocker>Pop-up Blocker Settings*, type the VistAWeb URL in the *Address of the Web site to allow:* box, and click the *Add* button (Figure 1).

4. VistaWeb is only supported with use of Internet Explorer version 7 or higher.

Figure 1: Setting Internet Explorer to Allow Pop-ups





Note: *Some links found in this user manual go to sites or pages found on the VA intranet. These sites or pages are not accessible from outside the VA network.*

What's New with VistAWeb Release 15?

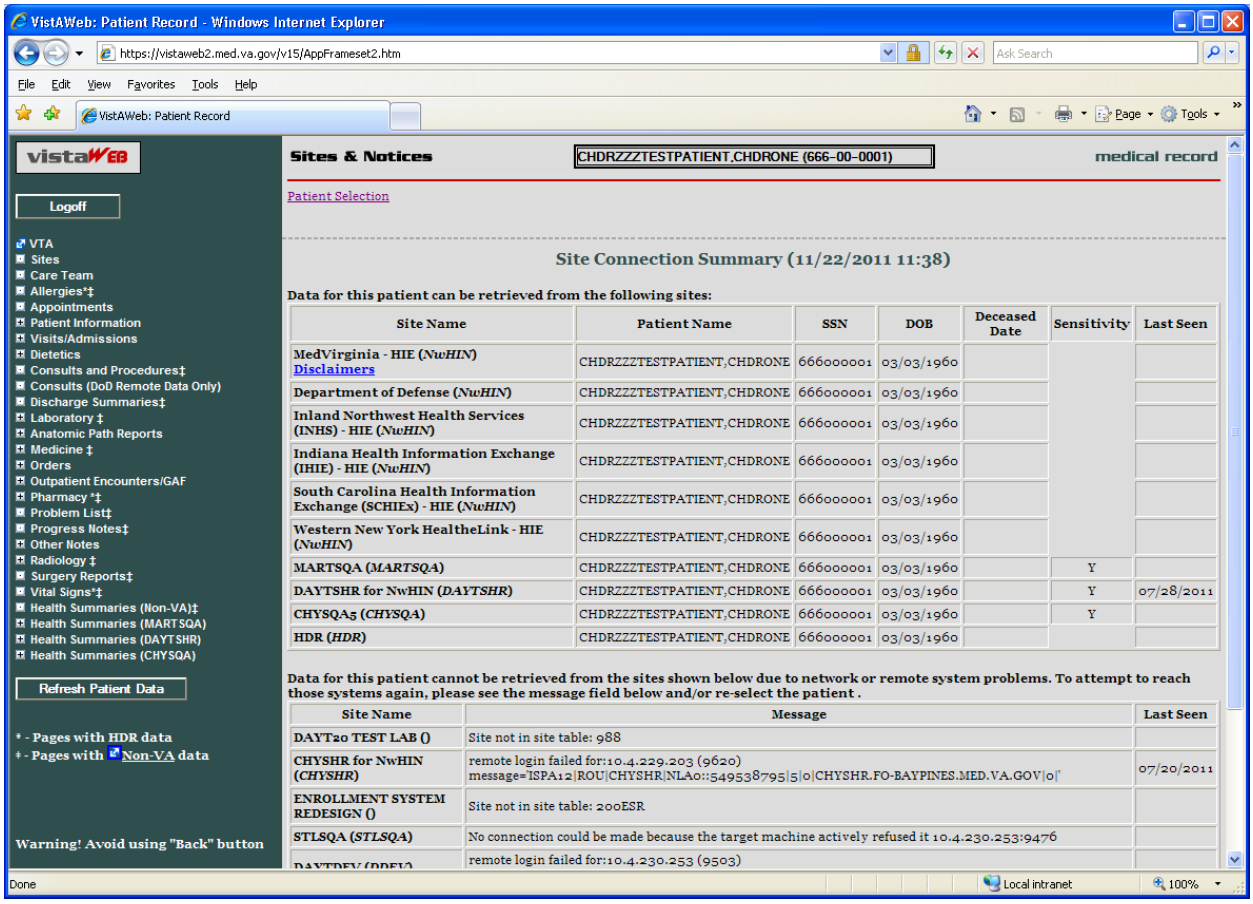
Several enhancements and fixes are included in VistAWeb in the 15.0 release. If you are already familiar with VistAWeb, read this section of the manual to find out what's new in this release. If you are not familiar with VistAWeb, you may want to start with Accessing VistAWeb and then come back to this section to find out what's new.

NOTE: Versions 14 and 15 have been combined into a single release, WEBV*1*24.

Following are the enhancements and fixes for this release:

1. "NwHIN" instead of "NHIN" is displayed throughout VistAWeb as well as in all VistAWeb documentation. NwHIN data is also referred to as Non-VA data.

Figure 2: Display of NwHIN.



2. Immunizations, the Results Organizer Feature (previously known as Lab Organizer Feature), and Vitals are added to the NwHIN Documents c32 Display.

Figure 3: Display of C32 Immunizations and Vitals Domains:

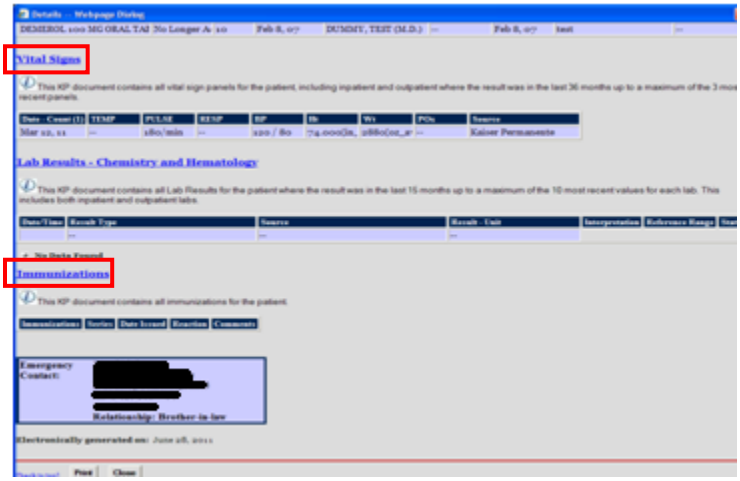
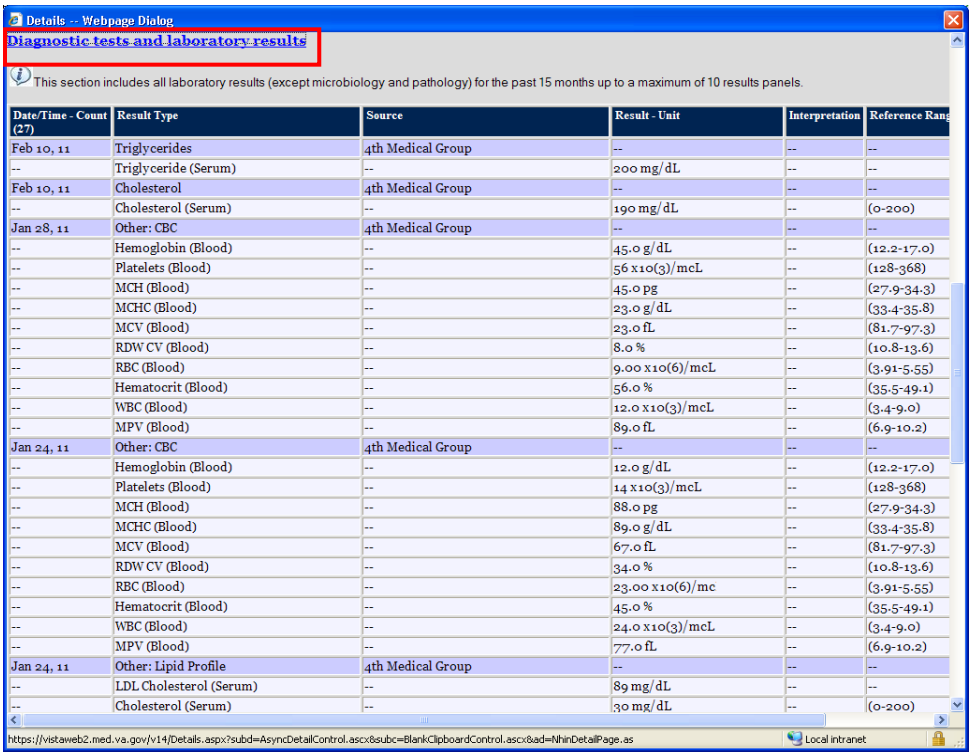


Figure 4: Display of C32 Results Organizer Feature (previously known as Lab Organizer Feature) Domain:



Details -- Webpage Dialog

Diagnostic tests and laboratory results

This section includes all laboratory results (except microbiology and pathology) for the past 15 months up to a maximum of 10 results panels.

Date/Time - Count (27)	Result Type	Source	Result - Unit	Interpretation	Reference Rang
Feb 10, 11	Triglycerides	4th Medical Group	--	--	--
--	Triglyceride (Serum)	--	200 mg/dL	--	--
Feb 10, 11	Cholesterol	4th Medical Group	--	--	--
--	Cholesterol (Serum)	--	190 mg/dL	--	(0-200)
Jan 28, 11	Other: CBC	4th Medical Group	--	--	--
--	Hemoglobin (Blood)	--	45.0 g/dL	--	(12.2-17.0)
--	Platelets (Blood)	--	56 x10(3)/mcL	--	(128-368)
--	MCH (Blood)	--	45.0 pg	--	(27.9-34.3)
--	MCHC (Blood)	--	23.0 g/dL	--	(33.4-35.8)
--	MCV (Blood)	--	23.0 fL	--	(81.7-97.3)
--	RDW CV (Blood)	--	8.0 %	--	(10.8-13.6)
--	RBC (Blood)	--	9.00 x10(6)/mcL	--	(3.91-5.55)
--	Hematocrit (Blood)	--	56.0 %	--	(35.5-49.1)
--	WBC (Blood)	--	12.0 x10(3)/mcL	--	(3.4-9.0)
--	MPV (Blood)	--	89.0 fL	--	(6.9-10.2)
Jan 24, 11	Other: CBC	4th Medical Group	--	--	--
--	Hemoglobin (Blood)	--	12.0 g/dL	--	(12.2-17.0)
--	Platelets (Blood)	--	14 x10(3)/mcL	--	(128-368)
--	MCH (Blood)	--	88.0 pg	--	(27.9-34.3)
--	MCHC (Blood)	--	89.0 g/dL	--	(33.4-35.8)
--	MCV (Blood)	--	67.0 fL	--	(81.7-97.3)
--	RDW CV (Blood)	--	34.0 %	--	(10.8-13.6)
--	RBC (Blood)	--	23.00 x10(6)/mc	--	(3.91-5.55)
--	Hematocrit (Blood)	--	45.0 %	--	(35.5-49.1)
--	WBC (Blood)	--	24.0 x10(3)/mcL	--	(3.4-9.0)
--	MPV (Blood)	--	77.0 fL	--	(6.9-10.2)
Jan 24, 11	Other: Lipid Profile	4th Medical Group	--	--	--
--	LDL Cholesterol (Serum)	--	89 mg/dL	--	--
--	Cholesterol (Serum)	--	30 mg/dL	--	(0-200)

https://vistaweb2.med.va.gov/v14/Details.aspx?subd=AsyncDetailControl.ascx&subc=BlankClipboardControl.ascx&ad=NhinDetailPage.as Local intranet

3. Procedures, Results Organizer Feature, and Vitals are added to the VistaWeb's Aggregated Reports. Encounters are not included to the VistAWeb Aggregated Report. See Figure 5 for an example of a display of the Aggregated Procedures Report and Figure 6 for an Aggregated Vitals Report.

Figure 5: Display of Aggregated Procedures Report:

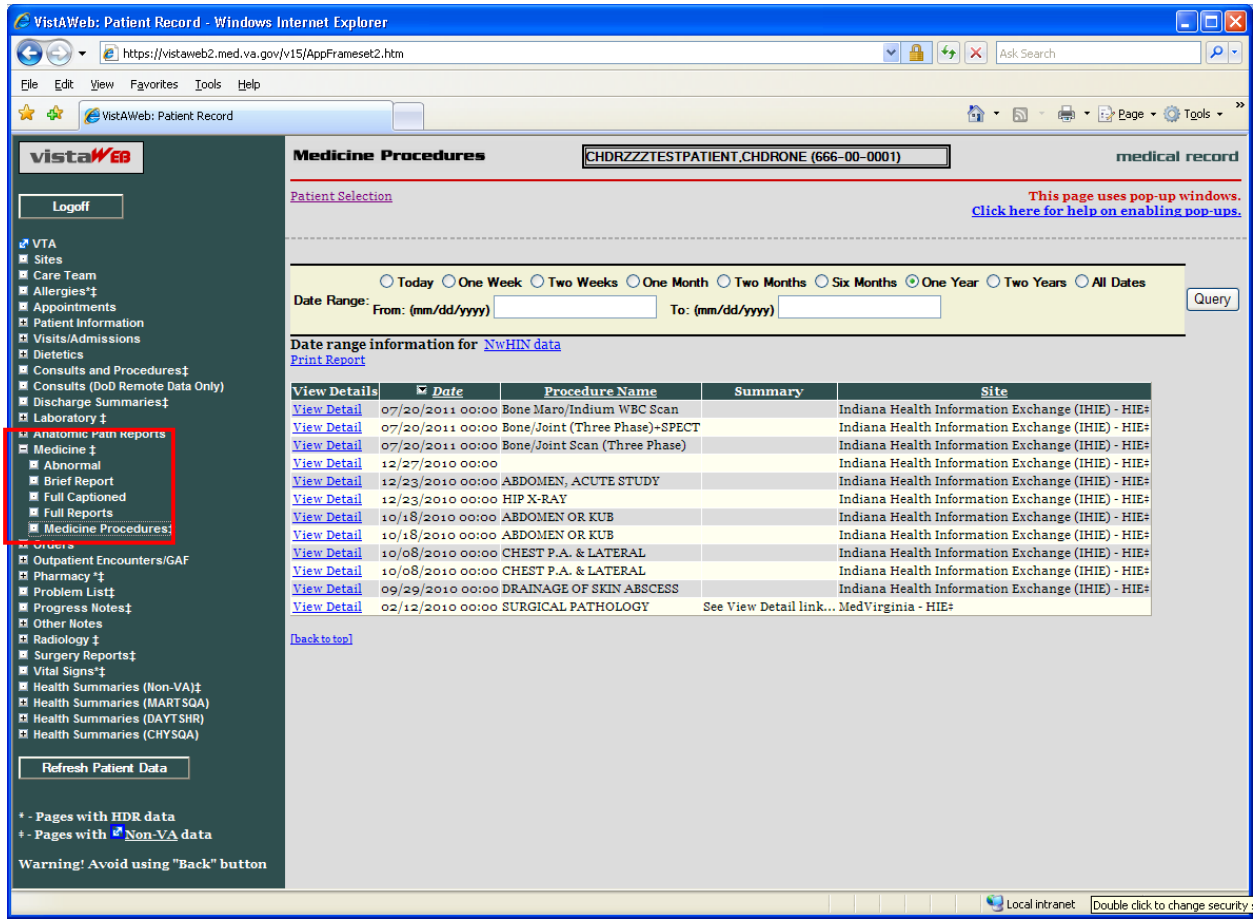
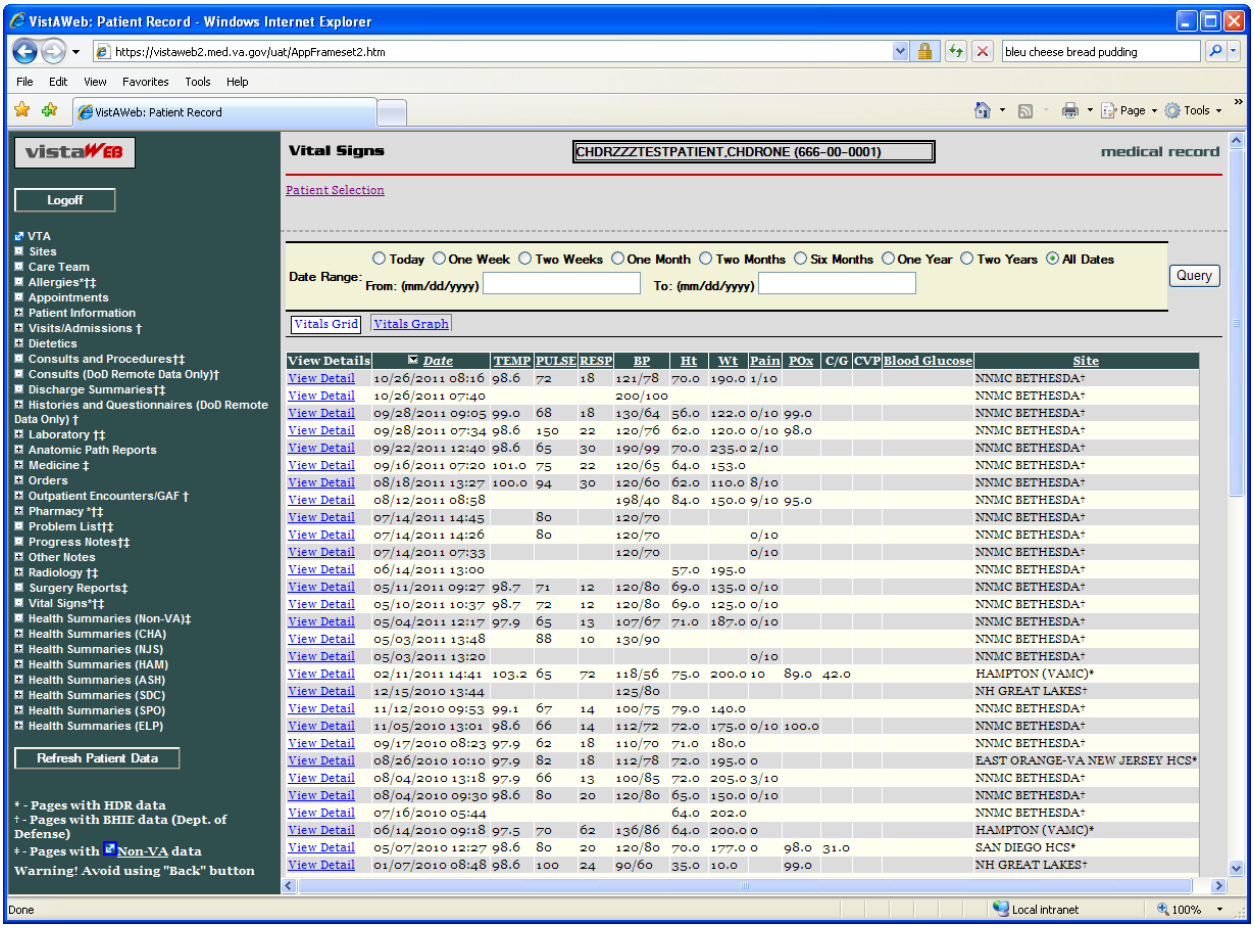
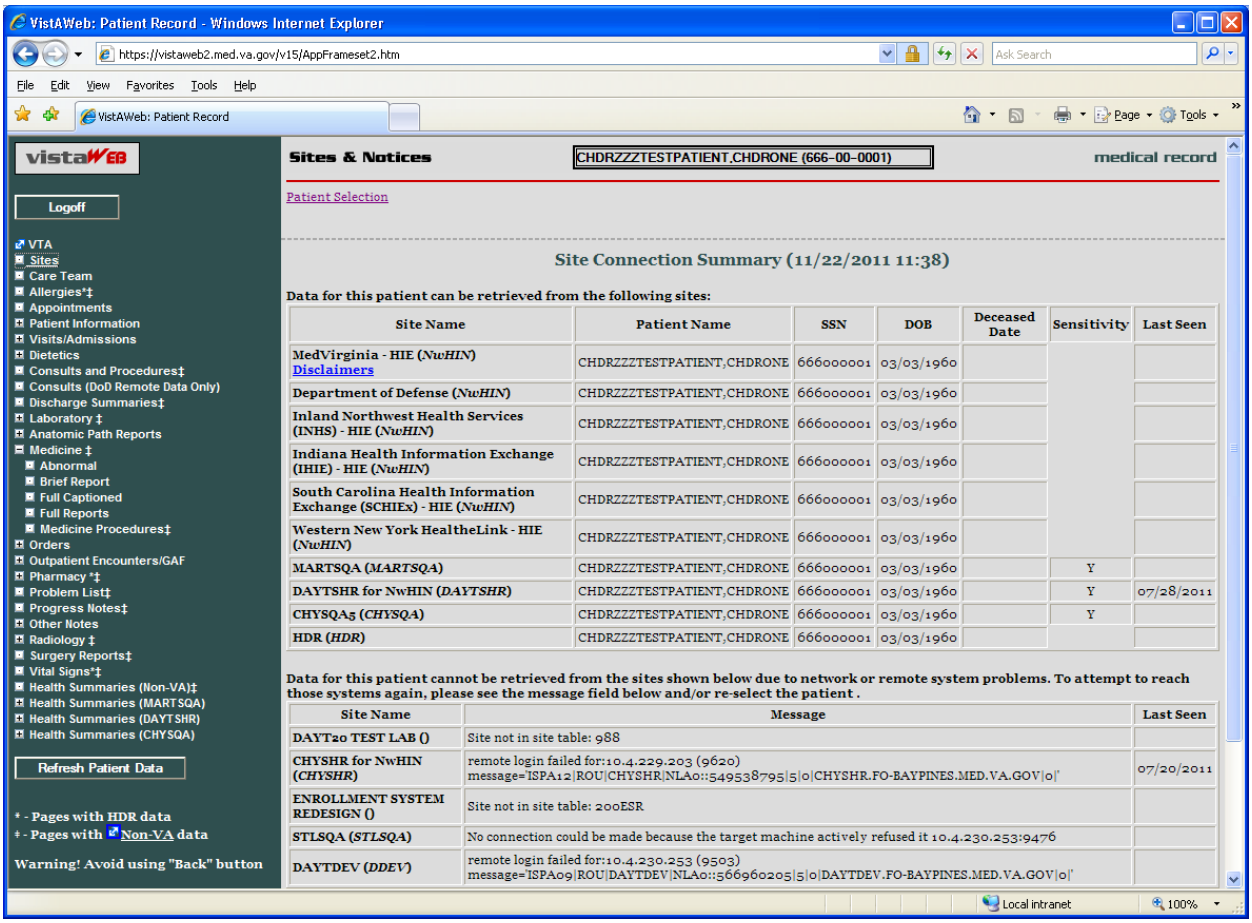


Figure 6: Display of Aggregated Vital Signs Report:



4. Added support for the following NwHIN partners:
   - Community Health Information Collaborative (CHIC) Minnesota
   - Indiana Health Information Network (IHIN)
   - Inland Northwest Health Services (INHS)
   - Multicare Health System
   - North Carolina Health Information and Communications Alliance (NCHICA)
   - South Carolina Health Information Exchange (SCHIEx)
   - Utah Health Information Network (UHIN)
   - Western New York HealtheLink - HIE

Figure 7: VistAWeb "Sites & Notices" Page with new NwHIN partners:



NOTE: Double dagger indicates pages with NwHIN (non-VA) data.

4. Display of C62 clinical note information from the Department of Defense in the Consults and Procedures domain.
   - Displays the start date and time information in the "Consult Date/time" column of the search results table with the format of "HH:MM". The NwHIN field that will provide this information is called: "**serviceStartTime**".

   - Changes the existing "Service" column title to display "VA Service or Non-VA Note Title" of the Consults and Procedures search results table.

5. Display of C62 clinical note information from the Department of Defense in the Discharge Summaries domain.
   - Displays the start date and time information in the "Admit Date" column of the search results table with the format of "HH:MM". The NwHIN field that will provide this information is called: serviceStartTime.

- Displays the stop date and time information in the Discharge Date column of the search results table with the format of "HH:MM". The NwHIN field that will provide this information is called: serviceStopTime.

- Changes the existing "Author" column title to display "VA Author or Non-VA Note Title" of the Discharge Summaries search results table.

6. Display of C62 clinical note information from the Department of Defense in the Laboratory-> Pathology Studies (Non-VA) domain.

   - Displays the start date and time information in the "Collection Date" column of the search results table with the format of "HH:MM". The NwHIN field that will provide this information is called: "serviceStartTime".

   - Changes the existing "Specimen" column title to display " Note Title" of the Surgical Pathology search results table.

7. Display of C62 clinical note information from the Department of Defense in the Progress Notes domain.
   - Displays the start date and time information in the "Date" column of the search results table with the format of "HH:MM". The NwHIN field that will provide this information is called: "**serviceStartTime**".

8. Displays C62 clinical note information from the Department of Defense in the Radiology-> Radiology Reports domain.
   - Displays the start date and time information in the "Exam Date" column of the search results table with the format of "HH:MM". The NwHIN field that will provide this information is called: "serviceStartTime".

   - Changes the existing "Procedure Name" column title to display "VA Procedure Name or Non-VA Note Title" of the Radiology Reports search results table.

9. Displays C62 clinical note information from the Department of Defense in the Surgery Reports domain.
   - Displays the start date and time information in the "Date of Operation" column of the search results table with the format of "HH:MM". The NwHIN field that will provide this information is called: "serviceStartTime".

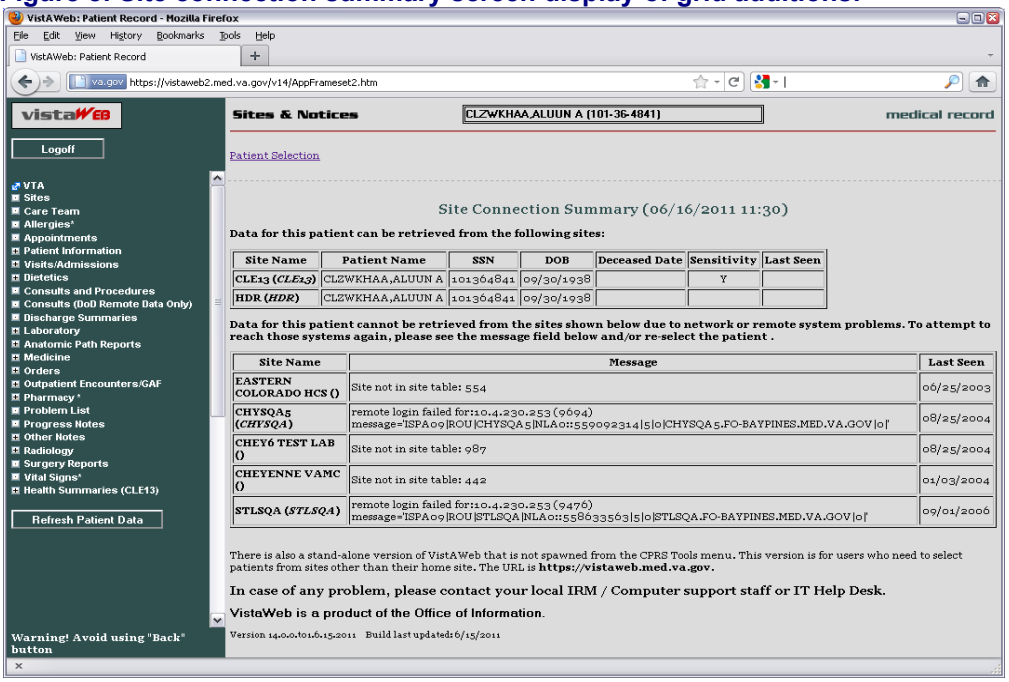
   - Changes the existing "Operative Procedure" column title to display "VA Operative Procedure or Non-VA Note Title" of the Surgery Reports search results table.

10. Displays a double dagger (‡) for all six of the new domains that will display C62 information on the left-hand navigation menu—Consults and Procedures, Discharge Summaries, Laboratory-> Pathology Studies (Non-VA), Progress Notes, Radiology-> Radiology Reports, and Surgery Reports.

11. The following 508 compliance fixes are implemented:

- Table row headers are added to each cell of the Site Connection Summary screen display grids.

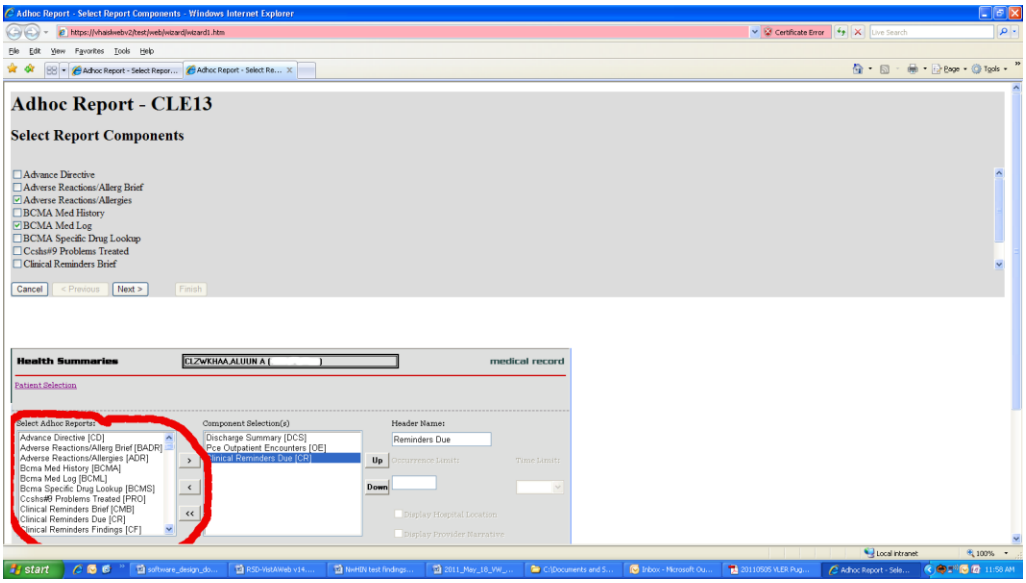
Figure 8: Site connection summary screen display of grid additions:



- Raw identification is added to table columns and cells in patient reports.
- A patient's social security number (SSN) and date of birth (DOB) are accessible for screen reader during tab navigation.
- The Health Summaries query building screens are reworked.

Figure 9: Health summaries query building screens.

- The upper portion displays the new wizard being implemented and the lower portion displays the old functionality which will no longer be available:



12. The NwHIN c32 display is increased from 800X600 to 1024X768 for enhanced readability.

13. The identification format within the NwHIN adapter interface informing NwHIN partners where patient information is coming from has been changed: "Department of Veterans Affairs – User Site Name".

Remedy Tickets Resolved:

1. VistAWeb will no longer display an OOPs error when generating the All Outpatient Pharmacy report. VistAWeb will display any and all patient data whose prescriptions contain the less than or greater than symbols. Remedy ticket # HD0000000485020.
2. The national help desk phone number in all OOPs errors and other error messages is replaced with the following: "Please contact your local IRM / help desk."
3. A notice is added in the patch description that users are required to use Internet Explorer 7 or higher. This will allow VistAWeb buttons to display properly. Remedy ticket # HD0000000489238.
4. VistAWeb will hide the error that users experience when VistA authenticates to the wrong PERSON entry in VistA. Remedy ticket # HD0000000491577.
5. The correct user name will be displayed on detail printouts. Remedy ticket # HD0000000472296.

Accessing VistAWeb

There are three ways to access patient data using VistAWeb.

1. VistAWeb can be made available by adding it to the CPRS Tools Menu.
2. CPRS users also have direct "one-click" access to VistaWeb from a VistaWeb button located on the CPRS Toolbar.

These two methods are referred to as CPRS-spawned versions of VistAWeb. They are compliant with the Health Level 7 (HL7) Clinical Context Object Workgroup (CCOW) standards and, therefore, maintain context with the patient selected in CPRS.

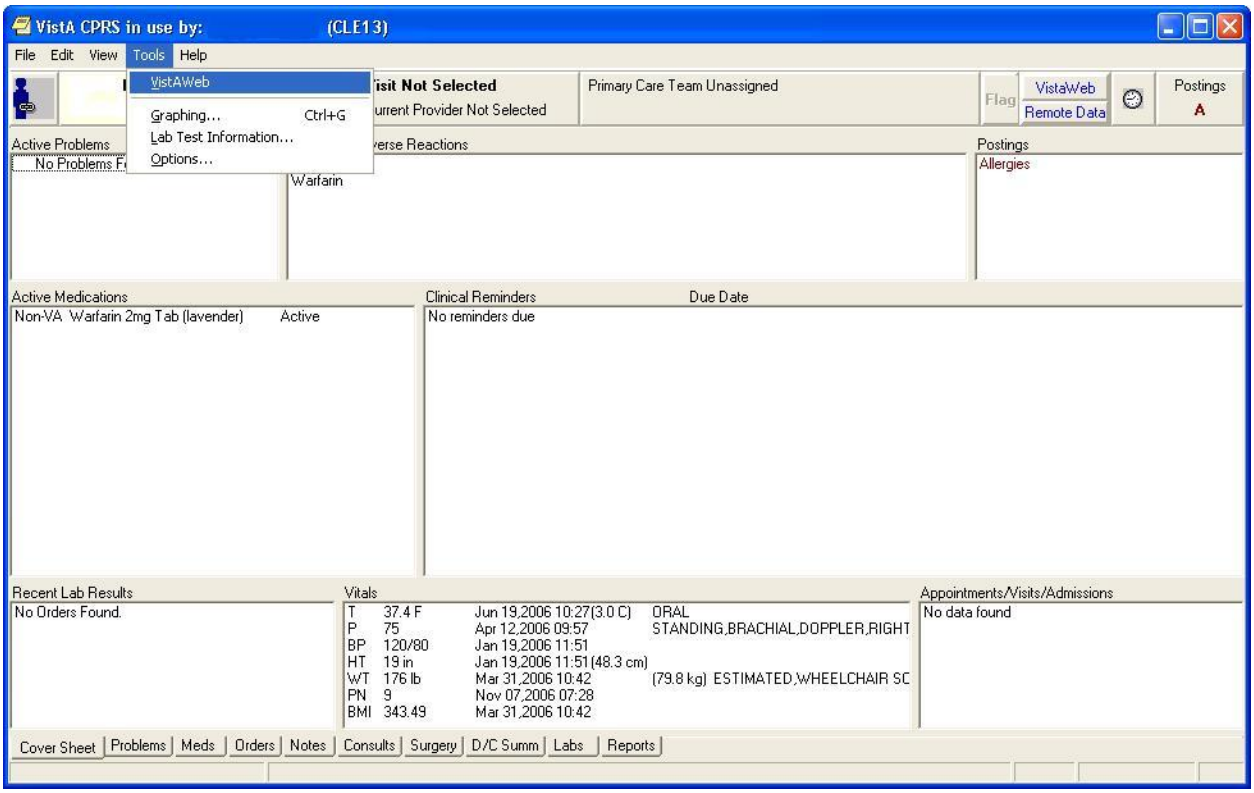
3. As a third option, VistAWeb can be accessed in a standalone mode by entering the uniform resource locator (URL) link (https://vistaweb.med.va.gov/) in the Internet Explorer address bar.

These methods of accessing VistAWeb are discussed in more detail in later sections of this manual.

VistAWeb under the CPRS Tools Menu

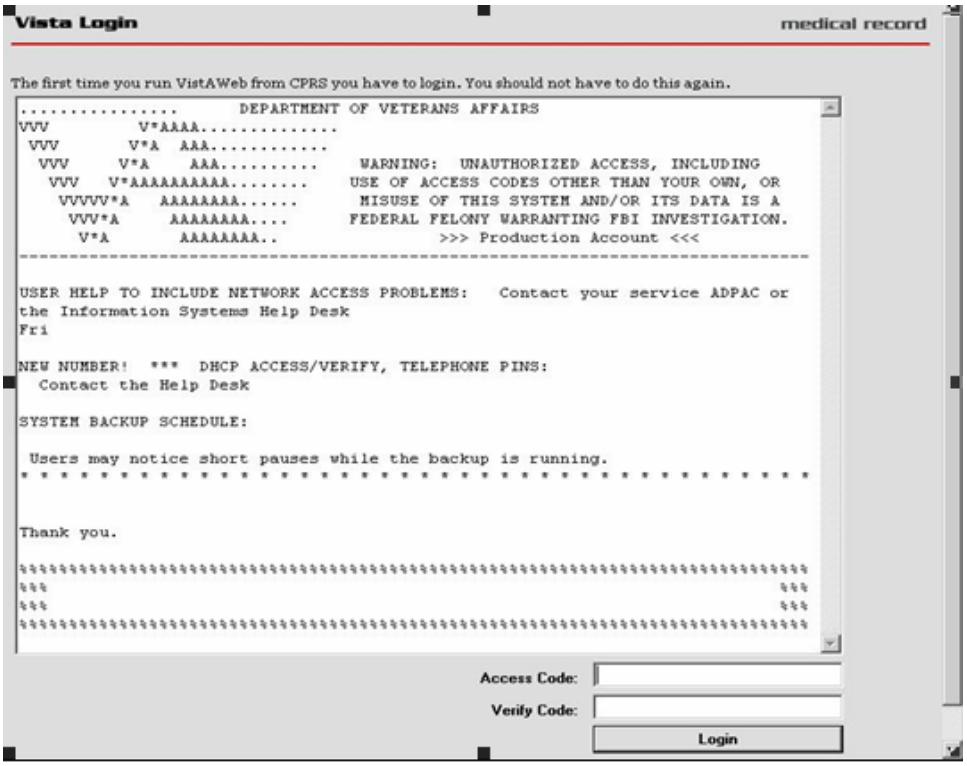
To access VistAWeb, you must first log into CPRS using your access/verify codes, select a patient, and select VistAWeb from the Tools menu (Figure). VistAWeb will maintain context with the selected patient and retrieve data for that patient from all sites where the patient has records. When you select a different patient from the CPRS File menu, VistAWeb will maintain context with the new selection. This is described in Patient Context in CPRS-Spawned VistAWeb.

Figure 10: VistAWeb Access from the CPRS Tools Menu



The first time you launch VistAWeb from CPRS, a login (using the same access and verify codes as for CPRS) is required (Figure). Subsequent uses of VistAWeb do not require a second login.

Figure 11: Initial Launch Using CPRS Access and Verify Codes



Access to VistAWeb from CPRS VistaWeb Button

A VistAWeb button is available next to the Remote Data Available button (Figure 19); when you click this button, CPRS will launch VistAWeb for you. Additionally, when VistAWeb is launched by CPRS, patient context is maintained. This means that VistAWeb will change patients whenever you do a patient selection in CPRS.

Figure 12: VistAWeb from the VistaWeb Button

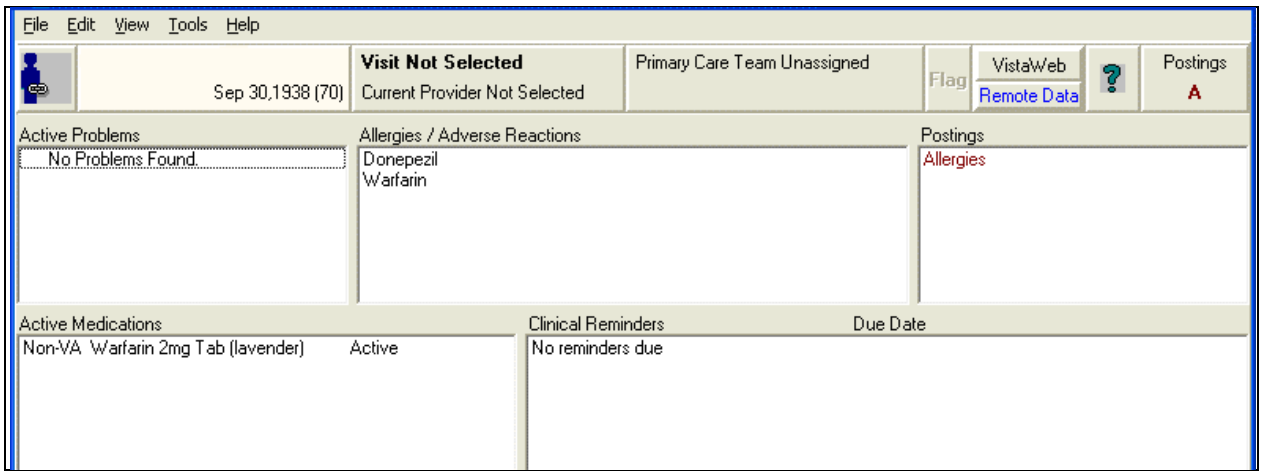
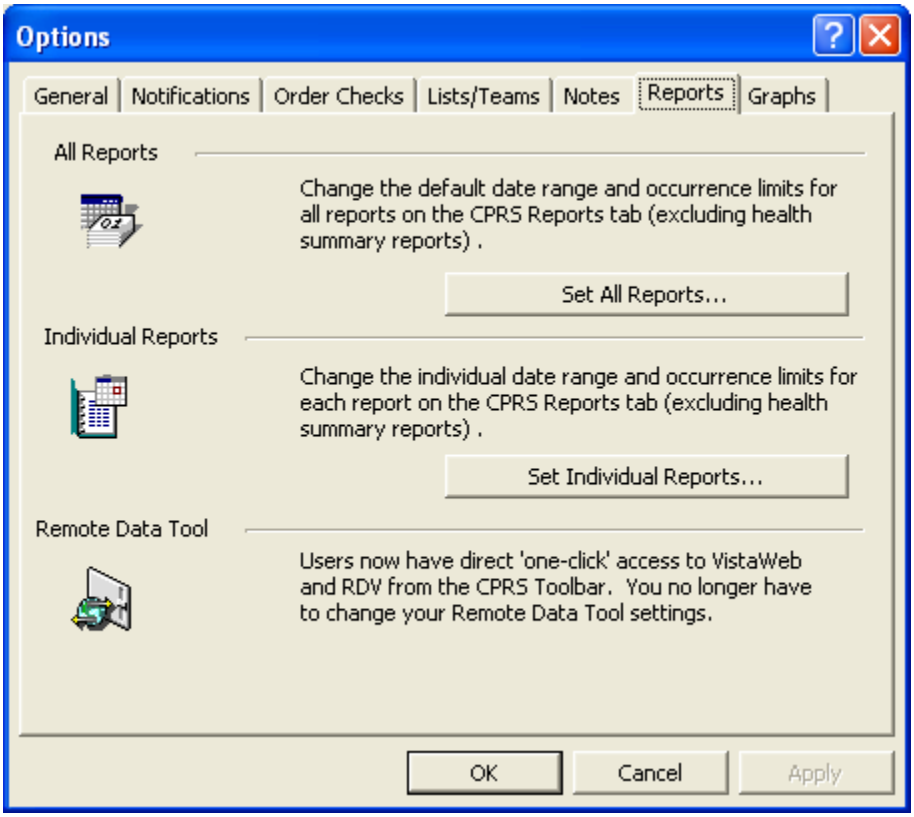


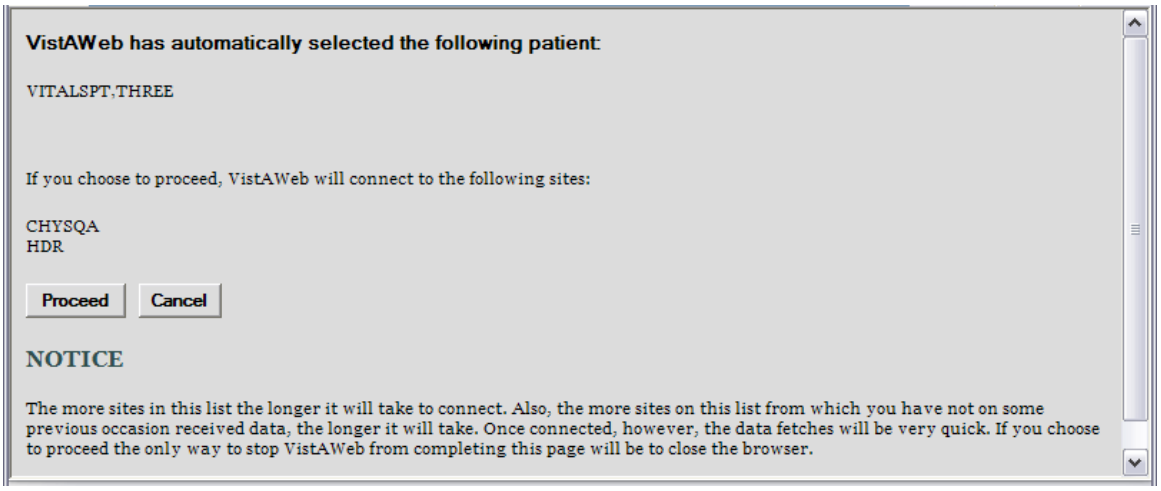
Figure 13: New Remote Data Tool message on Options screen



Patient Context in CPRS-Spawned VistAWeb

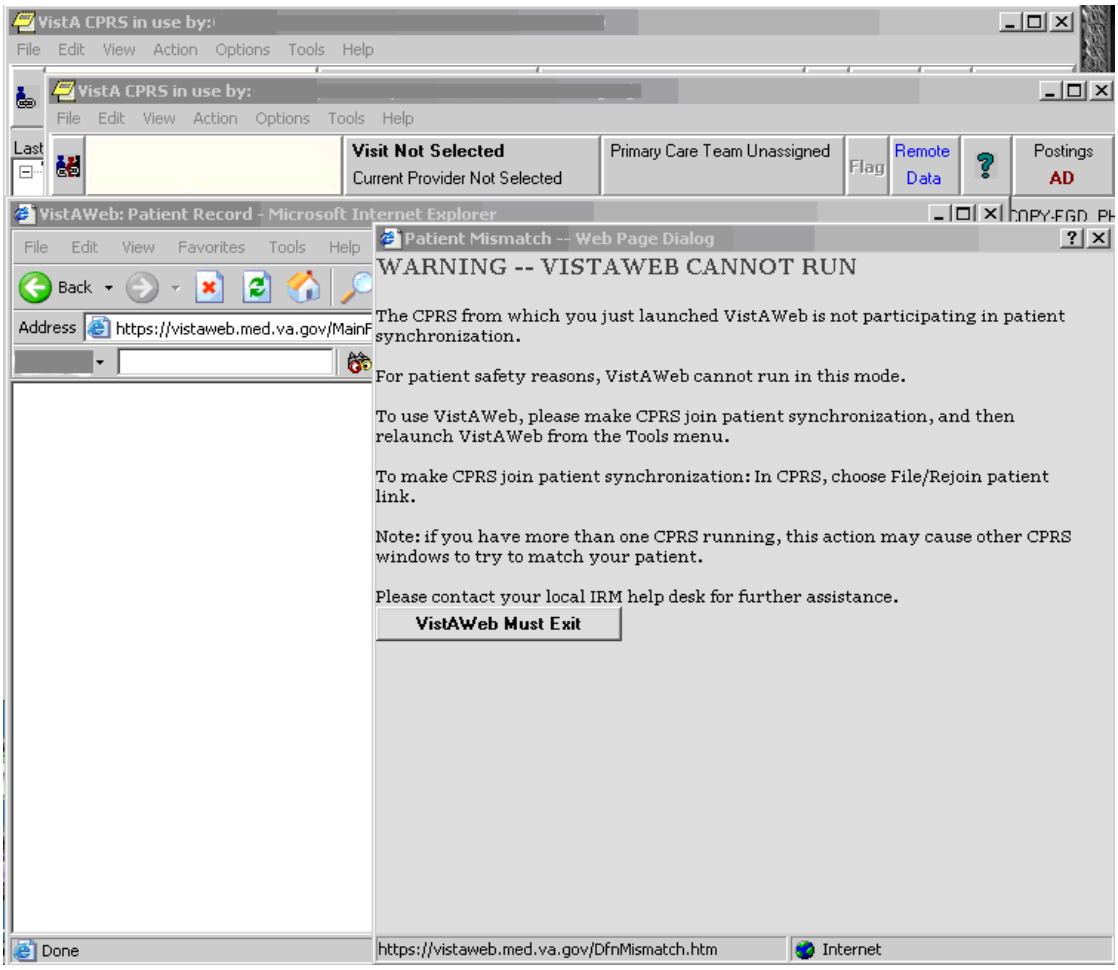
VistAWeb is a CCOW-compliant application and, therefore, maintains context with the patient who was selected in CPRS. When you spawn VistAWeb from CPRS, VistAWeb presents you with a screen that confirms the patient identity, the sites where there is patient data, and gives you the option to proceed or cancel (Figure 20). If you select Proceed, VistAWeb displays the Sites & Notices screen for the new patient along with a menu of reports that are available in VistAWeb. If you select Cancel, VistAWeb forces you to close the session. When using VistAWeb through the CPRS Tools menu, you won't be able to select a new patient from within the VistAWeb application; however, you can return to CPRS to select a new patient and the VistAWeb connection process will begin again.

Figure 14: VistAWeb Maintains Context with the CPRS Patient



To avoid potential patient safety problems, VistAWeb will not open from a CPRS session that is not in context. This can occur when multiple CPRS sessions are open on the desktop. In the following example (Figure 21), two CPRS sessions are open. One session is in context, as indicated by the icon with a blue person and a connected chain link. The other CPRS session is not participating in patient context, as indicated by the icon with red and blue people and a broken chain. The VistAWeb warning message is the result of attempting to launch VistAWeb from the CPRS session that is not in context. VistAWeb forces the user to exit the attempted connection.

Figure 15: Two CPRS Sessions: One in Context, One Not in Context



VistAWeb Directly from IE ("Standalone" VistAWeb)

VistAWeb can also be accessed directly from Internet Explorer (IE) by entering https://vistaweb.med.va.gov/ in the IE address bar. Users must select their local site for login, then log in using their CPRS/VistA access and verify code pair.

Note: *Some links found in this user manual go to sites or pages found on the VA intranet. These sites or pages are not accessible from outside the VA network.*

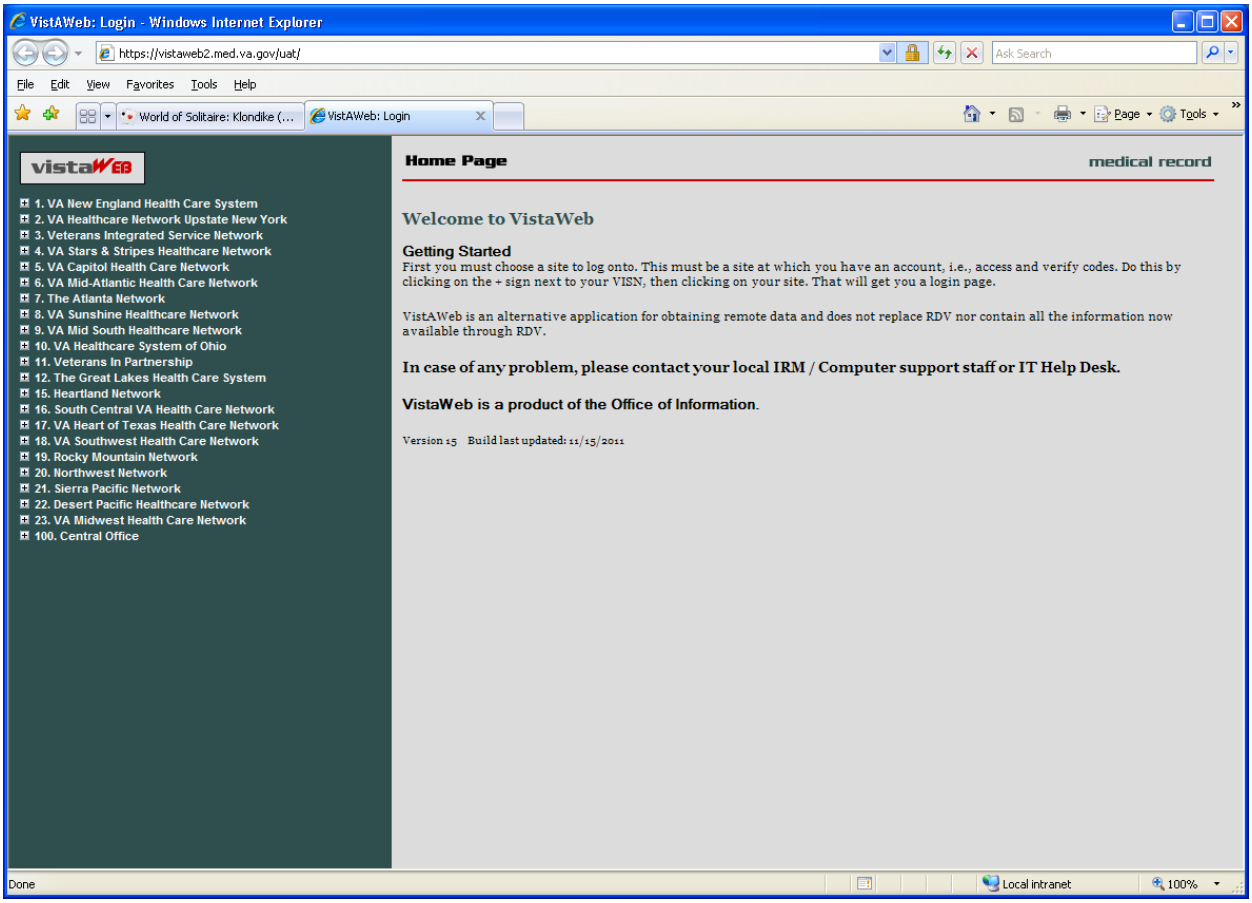
Once you have made your login site selection, you may want to save the URL in the IE "Favorites" menu for future ease of access.

Note: *Users who regularly only use the standalone version of VistAWeb will be required to update their verify codes periodically, just as they would if logging into CPRS. When this happens, the login screen will display the message, "User must enter a new Verify code at this time."*

By default, users will be able to look up only those patients who are in their local VistA site. Data for those patients will be retrieved from all other sites the patients have visited. Some users (researchers or referral coordinators, for example) may need to look up patients who are not in the local VistA. VistAWeb requires that these users be granted Special User access. *Special Users* and *Requesting Special User Access* are discussed in more detail later in this manual

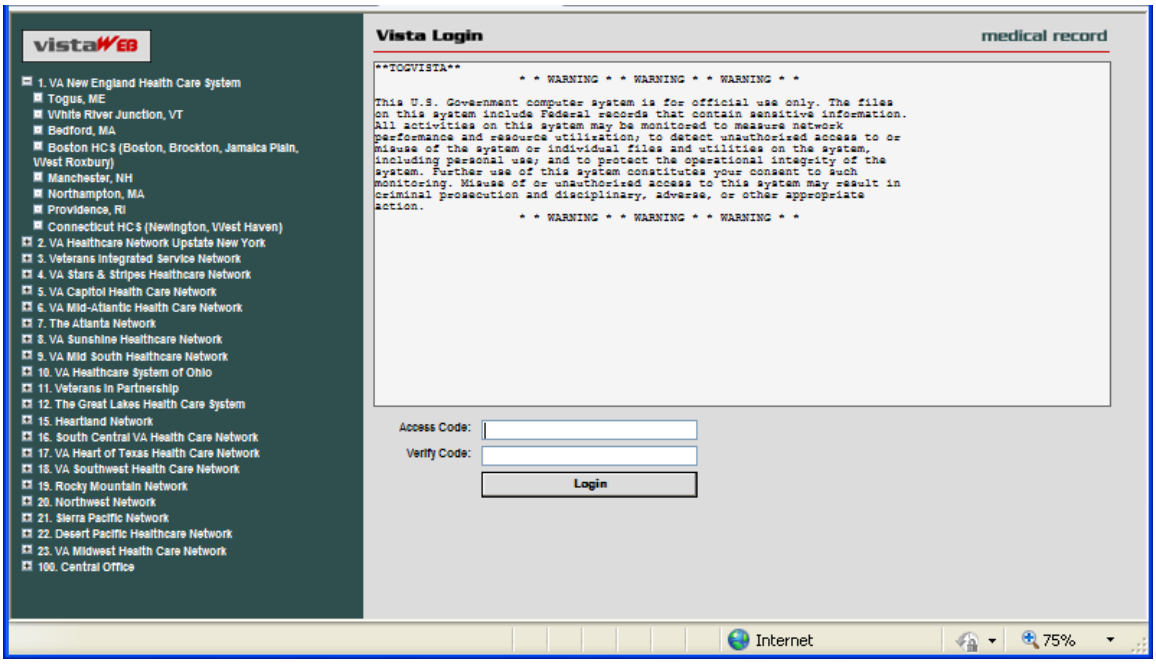
Note: *An exception to the VistA/CPRS account requirement is made for properly credentialed Special Users, who do not have clinical VistA accounts. For those users, access can be obtained by logging in through the "100. Central Office Claims System," as shown at the bottom of the sites menu in Figure 25.*

Figure 16: VistAWeb Home Page



To log into VistAWeb, select the site where you have an account from the list of sites on the left side of the page. The VistA login page for that site will appear (Figure 23). You should enter your access/verify codes the same way you would enter them in CPRS.

Figure 17: VistAWeb – VistA Site-Login Screen



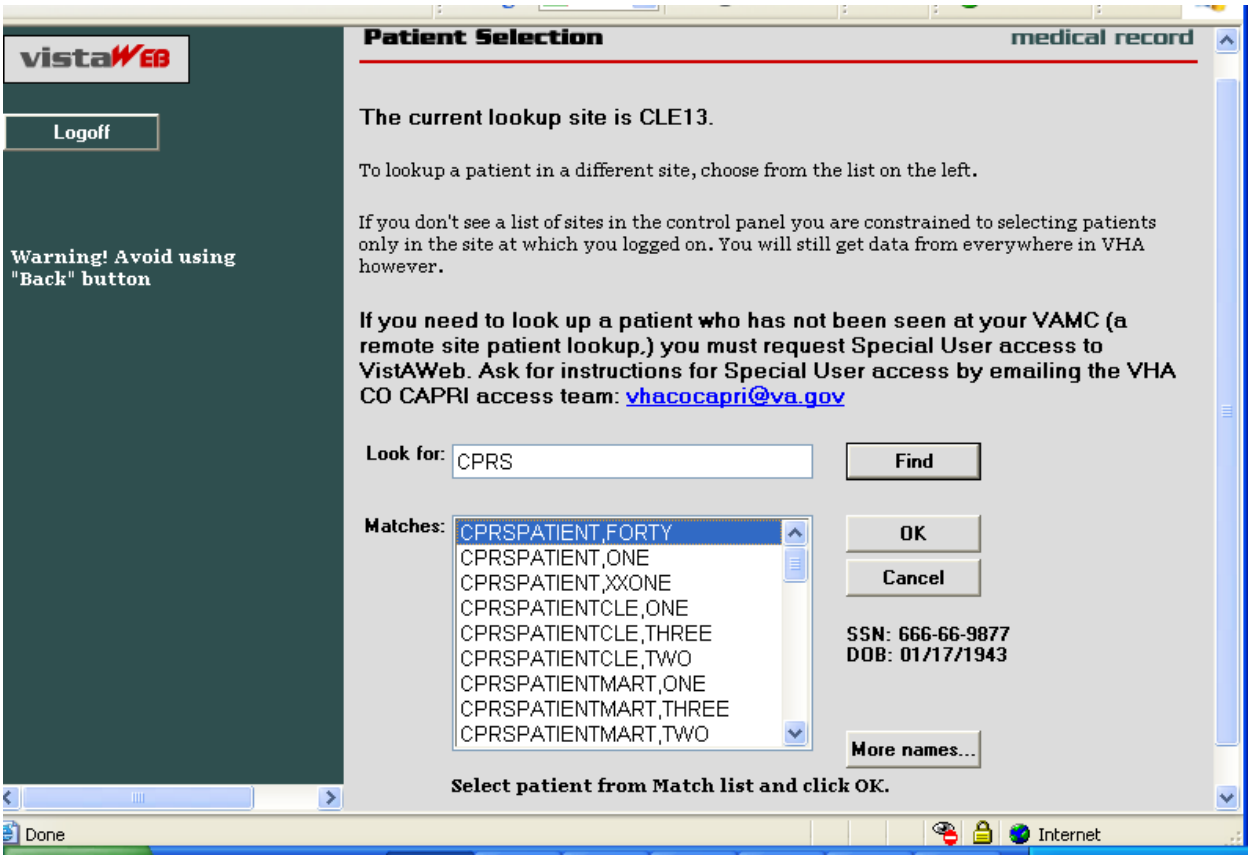
a

After you log into VistAWeb, the Patient Selection screen appears. If you have Special User access, a list of sites for patient selection will be present on the left side of the screen. Special Users may select a site other than their login site for patient selection. All other users will be limited to patient selection from their login site only. **In either case, data for the selected patient will be automatically retrieved from all sites where that patient has data**.

Patient Selection

In standalone VistAWeb, patient selection can be performed in much the same way as in CPRS. You can enter the patient's name, part of the patient's last name, social security number, or the five-digit identifier (first letter of patient's last name plus the last four digits of the patient's social security number). After entering one of these identifiers, click your mouse button on the FIND button or press the Enter key on the keyboard. A list of potential matching patients appears in the box below (Figure 24). If there are more names available than shown in the scroll box, click the "More names…" button to see them. Once you have identified the desired patient, click your mouse button on the patient name, and click the mouse again on the OK button or press the Enter key on the keyboard.

Figure 18: Using the Patient Selection Screen to "Find" a Patient



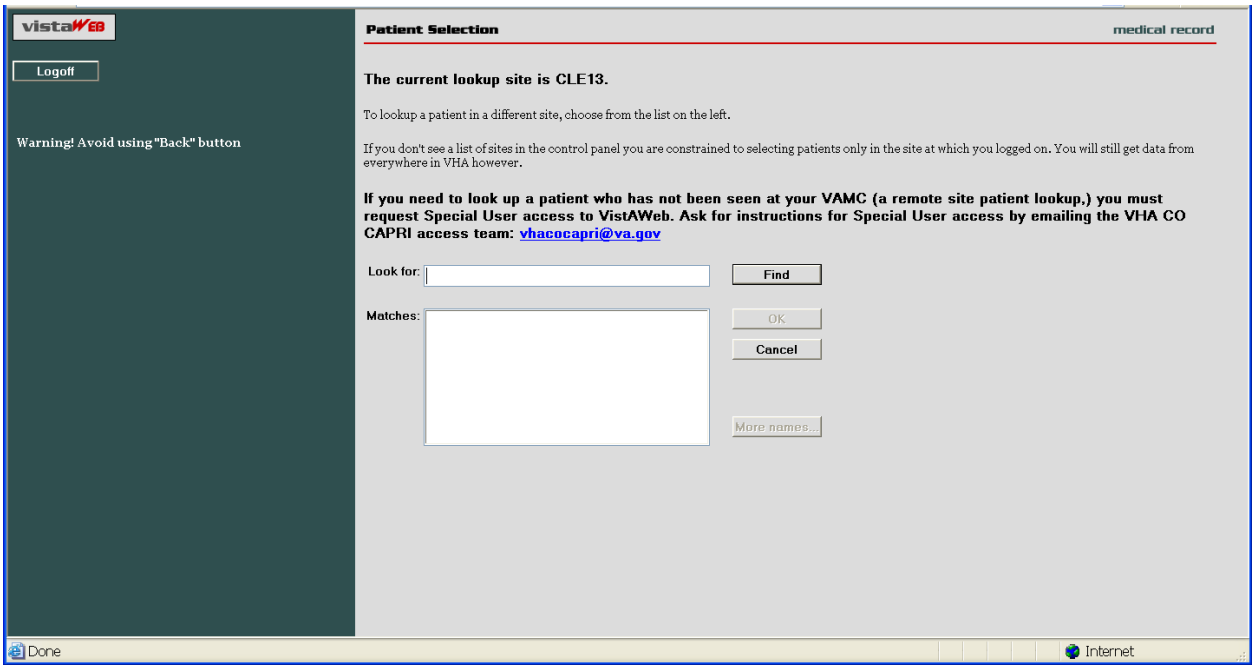
In the example above, the user does not have Special User access, so patient selection is limited to the local site where the user first logged in. There is no list of alternate patient selection sites on the left side of the VistAWeb Patient Selection screen.

Special Users

By default, users of VistAWeb are permitted to select patients that are in the local VistA system where the user logs in. VistAWeb will retrieve data for these patients from all sites where the patients have records. Some users (researchers or referral coordinators, for example) may need to select patients that are not in the local VistA. These users will require Special User access, which can be granted for one site in addition to the login site, several sites, an entire VISN, or all sites nationally.

After logging in to VistAWeb, Special Users will see the Patient Selection screen, with a list of sites accessible for patient selection (Figure 25).

Figure 19: Special User Multiple Site and Patient Selection



In the example above, the user is a Special User who has access to perform patient selection at all VISN 11 sites, which are listed on the left side of the screen. To select a patient from a site other than the login site, you must first click on the desired site on the left side of the screen and then perform patient selection.

Requesting Special User Access

Requests for Special User access fall into one of three categories:

- **National Programs** requiring "Special User" access, such as Blind Rehab, Transplant, War Related Illnesses, and so forth
- **VA Researchers** requiring "Special User" access for the purpose of approved research projects
- **All Others**, for example, local users, requiring "Special User" access to multiple VA sites for the purpose of clinical opinions, referral coordination, and so forth

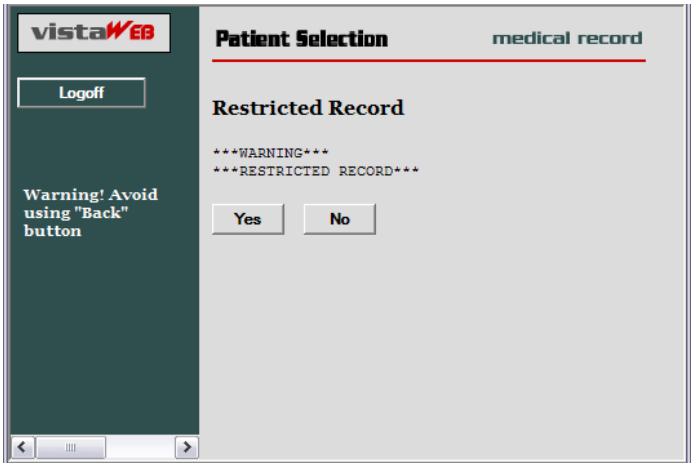
All users requesting "Special User" access will be required to verify completion of the annual VHA Privacy Policy Training and VA Information Security Awareness Course and to sign the Rules of Behavior prior to approval of the request.

Individuals requesting Special User access to VistAWeb should fill out instructions described in this webpage: http://vaww4.va.gov/hia/UserGroups.htm

Sensitive Patient Warning

Similar to CPRS, standalone VistAWeb displays a warning to you if you select a patient who has been flagged or designated as a Sensitive Patient (Figure 26). VistAWeb differs from CPRS in that it will display the warning message to you if the patient is sensitive in ANY of the sites from where the sensitive data will be retrieved. If you elect to proceed, notification will be sent to the Information Security Officer (ISO) at any and all sites where the patient data is marked sensitive. Both standalone and CPRS-spawned versions of VistAWeb also display the sensitivity status on the Sites & Notices screen.

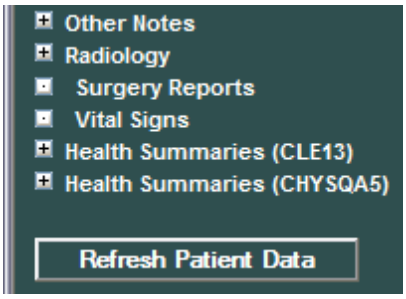
Figure 20: Restricted Record Warning



Refresh Patient Data

A *Refresh Patient Data* button has been added to VistAWeb that allows you to update reports without having to log off and back into a VistAWeb session (Figure 27) when new data is added to the patient's record in CPRS. Clicking on the Refresh Patient Data button returns you to the Sites & Notices screen from which you can navigate back to the appropriate report to see the new data.

Figure 21: Refresh Patient Data Button



Category 1 Patient Record Flags

Category I Patient Record Flags are now displayed in standalone sessions of VistAWeb before the user is permitted to "Continue to Patient Record" (Figure 28). The Category I flags are also displayed in both standalone and spawned versions of VistAWeb on the Sites & Notices screen (Figure 44).

Figure 22: Example Category I Patient Record Flag in Standalone VistAWeb

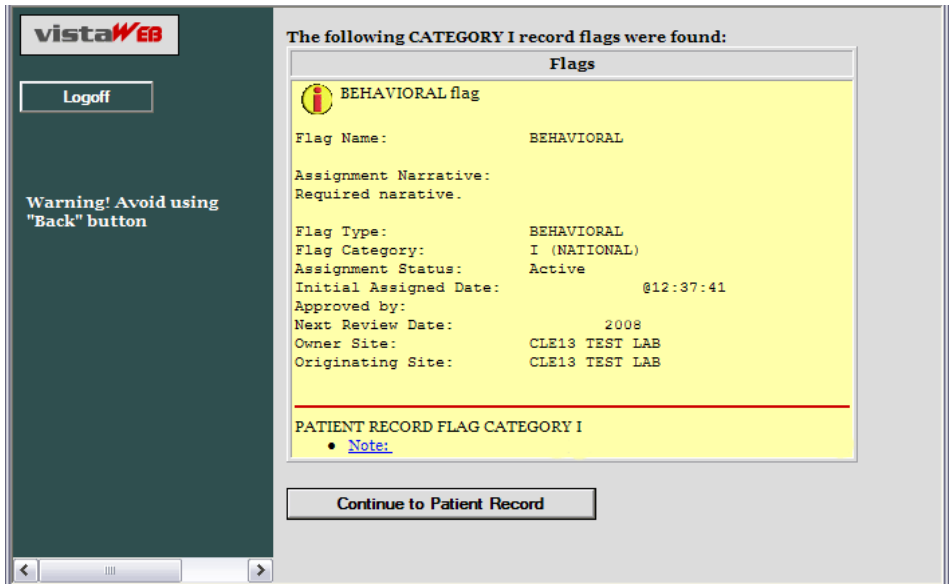
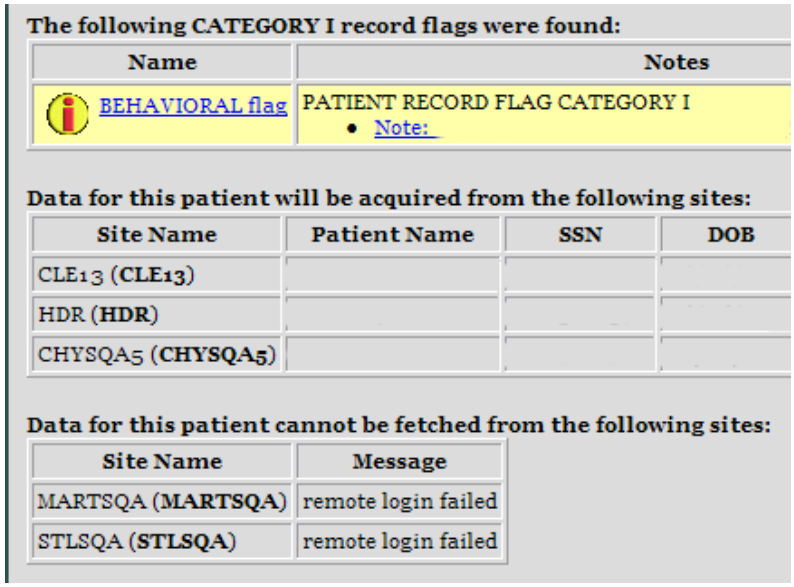


Figure 23: Example Category I Patient Record Flag on the Sites & Notices Screen



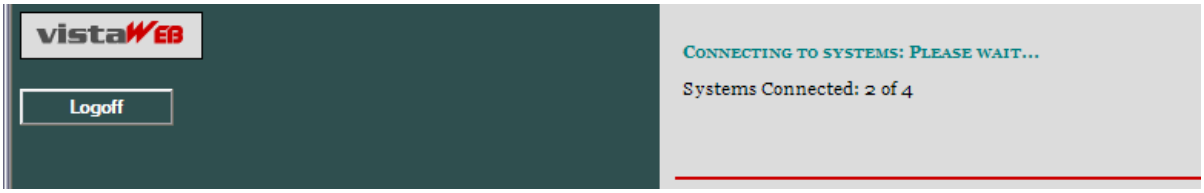
Using VistAWeb

After the Patient Selection page, all VistAWeb functionality for a Special User is the same as for other users, except that there is no clinical context management as described earlier in *Patient Context in CPRS-Spawned VistAWeb*.

Automatic Retrieval of Data from Multiple Sites

When the patient is first selected, VistAWeb determines how many sites the patient has visited and displays a message similar to the following to let you know that VistAWeb is establishing connections to those systems (Figure 30).

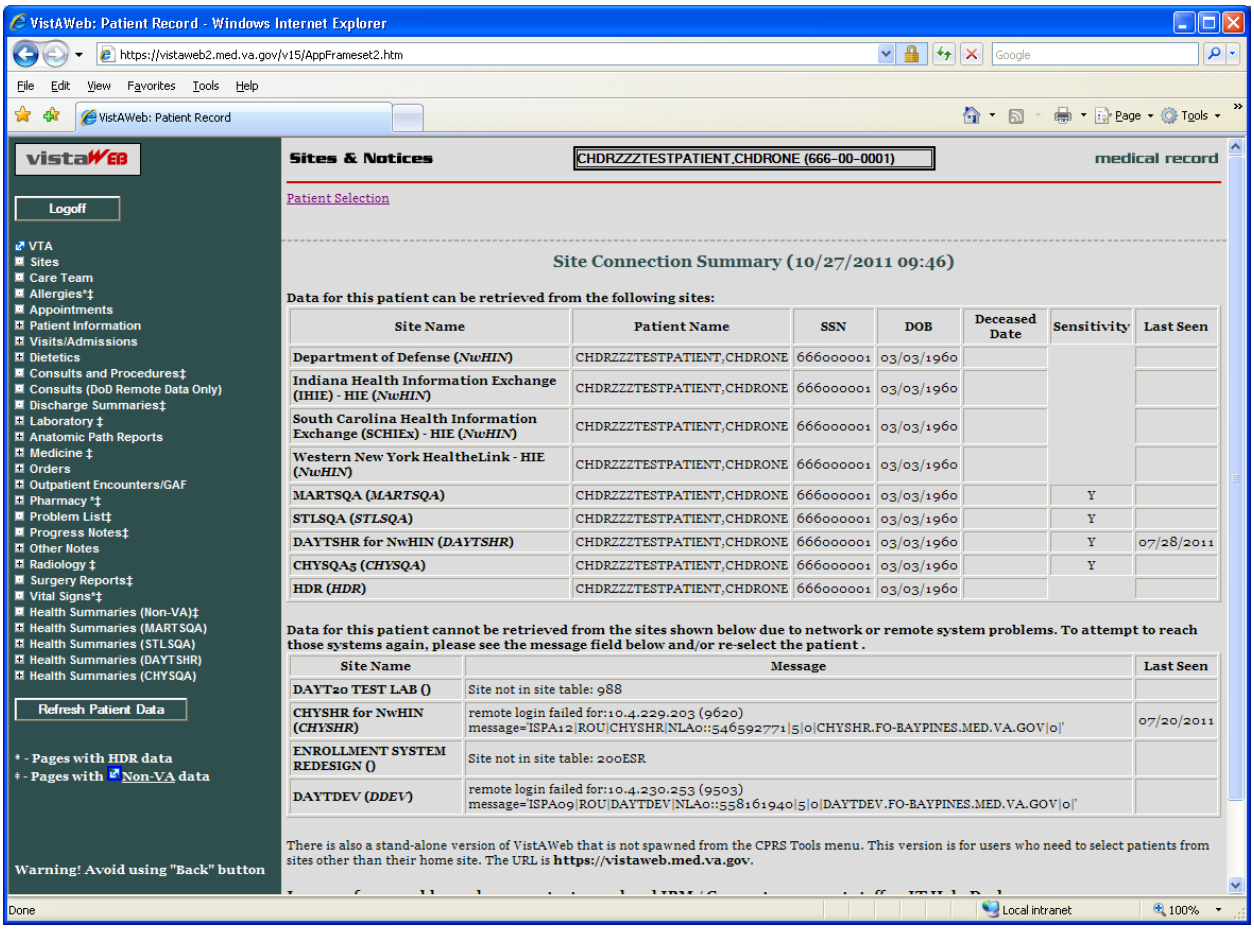
Figure 24: Please Wait…Message



The Sites and Notices page is then displayed, which includes a list of sites where data for that patient will be retrieved. In the following example (Figure 25), data will be retrieved from CLE13, HDR, and CHYSQA5. If VistAWeb cannot connect to some of the systems (sites) where the patient has been seen, that information is supplied in table format below the sites that are connected. The Last Seen field in the tables is only populated when the Master Patient Index (MPI) has that information to report.

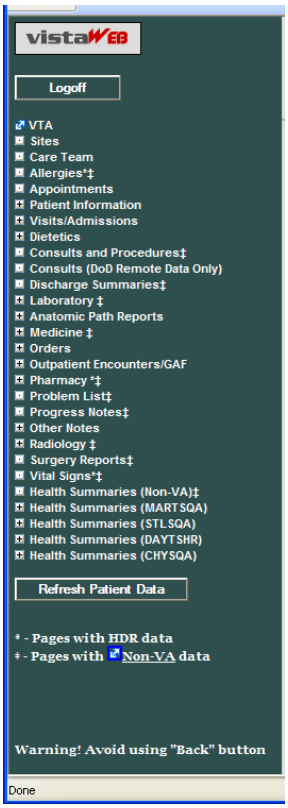
On the left side of the screen, there is a list of reports for which VistAWeb is able to retrieve patient data. For more detail regarding the type of reports, refer to the *Expanded List of All Reports* section of this manual.

Figure 25: Patient Data Available at Multiple Sites



Reports/"domains" that have data from non-VAMCs are indicated with the appropriate icon from the legend; these reports/domains show the data in an "aggregated view," which means that all sources provide that data for the specific report/domain.

Figure 26: Aggregated View

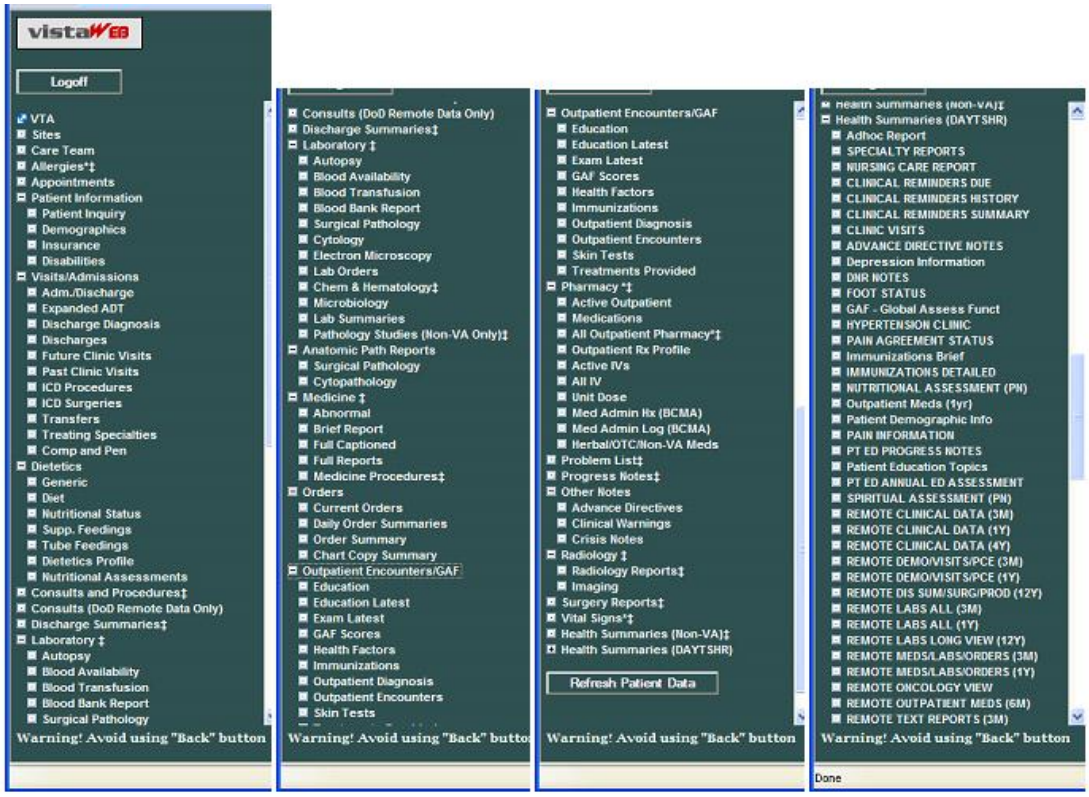


Expanded List of All Reports

Entries preceded by a plus sign (+) can be expanded to show sub-reports by clicking the mouse on the plus sign (+). Expanded lists can be collapsed by clicking the mouse on the minus sign (–).**Error! Reference source not found.** is a fully expanded list of reports retrieved by VistAWeb,. In addition to National and local VistA health summaries, VISN level health summaries are available. Consequently, the list of available summaries can be quite long and will vary depending on the user's login site. The list of health summaries is similar to the Health Summary list available from the Reports tab in CPRS.

Items on the menu that are followed by this symbol **(≠)** will include NwHIN DoD data, if available.

Figure 27: Expanded List of VistAWeb Reports



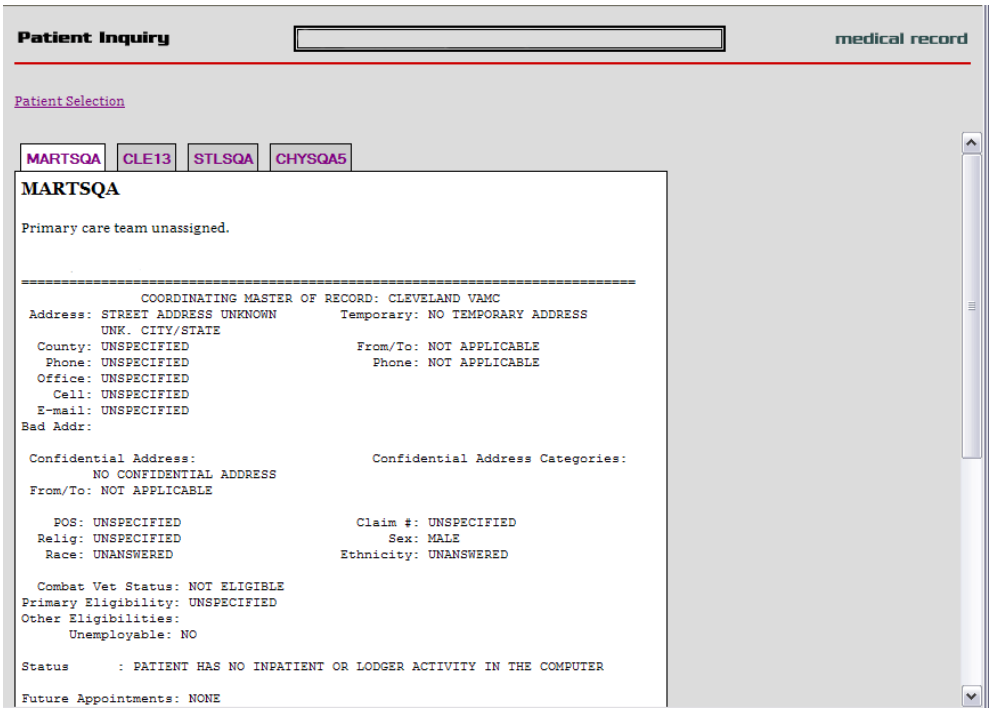
Report Examples

There are over 80 different reports available in VistAWeb. A representative sampling is presented here to demonstrate the different types of reports and formatting options.

Text Reports

Text reports are the most basic of all reports available to users. Text is displayed in a non-interactive mode and is very similar to the corresponding reports found in CPRS from the Reports tab. One example of a Text report is the Patient Inquiry report (Figure 33). All site data is retrieved for the selected report, and the patient's data for the associated site is placed within the tab from where the data was retrieved. In the example below, there are four tabs: MARTSQA, CLE13, STLSQA, and CHYSQA5. To view data retrieved from MARTSQA for the selected patient, click the mouse on the MARTSQA tab. If any particular report is not available from a site where the patient has been seen, or if there is no data for a specified date range, then that site's report tab will return the statement "No Data Found." See Figure 4.

Figure 28: Patient Inquiry Text Report

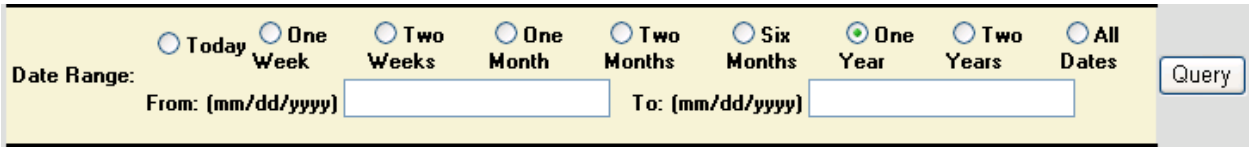


Text Report with Date Range Option

In report screens where date ranges can be typed, two digits can be entered for years, and dashes can be entered instead of slashes. VistAWeb will reformat to the dd/mm/yyyy format for the user, e.g., 12-11-05 will be reformatted to 12/11/2005 automatically. Typing in a date range clears any set radio button. Likewise, setting a radio button for one of the available time periods will clear dates previously typed into the From/To fields. The following

composed sequence demonstrates that VistAWeb corrects the date format and then shows that clicking the All Results button clears the To/From date fields (Figure 34).

Figure 29: Date Range Entry and Radio Button Selection



When these reports are generated they are presented in table format, which typically can be sorted and can contain data from multiple sites, as with Allergies, Outpatient Pharmacy, and Vital Signs reports. In the following example report of Progress Notes (Figure 35) or Chem & Hematology (Figure 36), the initial default query is performed automatically for a one-year time period, and the maximum number of items per site to return is defaulted to 50. You can type in a different number or click in the All Data box to retrieve all the items for the specified period. You can select a different time period or enter a From/To date range, and you can specify a different maximum number of items to return. Click the mouse on the Query button to run the report for the new time period or date range and number of items. Note that, if the default number is deleted, either a minimum of 1 item must be requested or All Data must be checked for the specified time period. Otherwise, an error message is displayed.

Figure 30: Progress Notes Report showing AWIV column, Date Range, Number, and Query

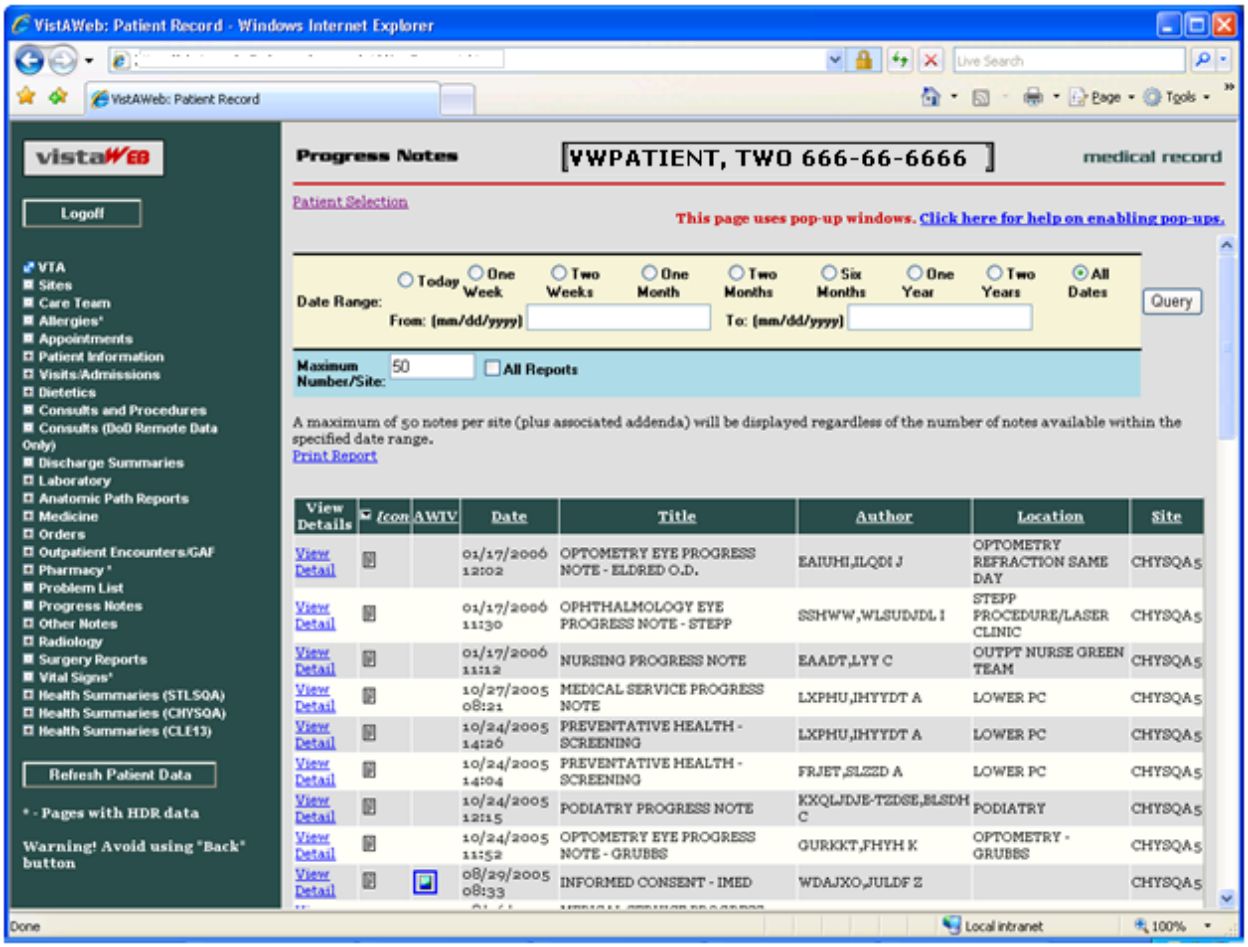
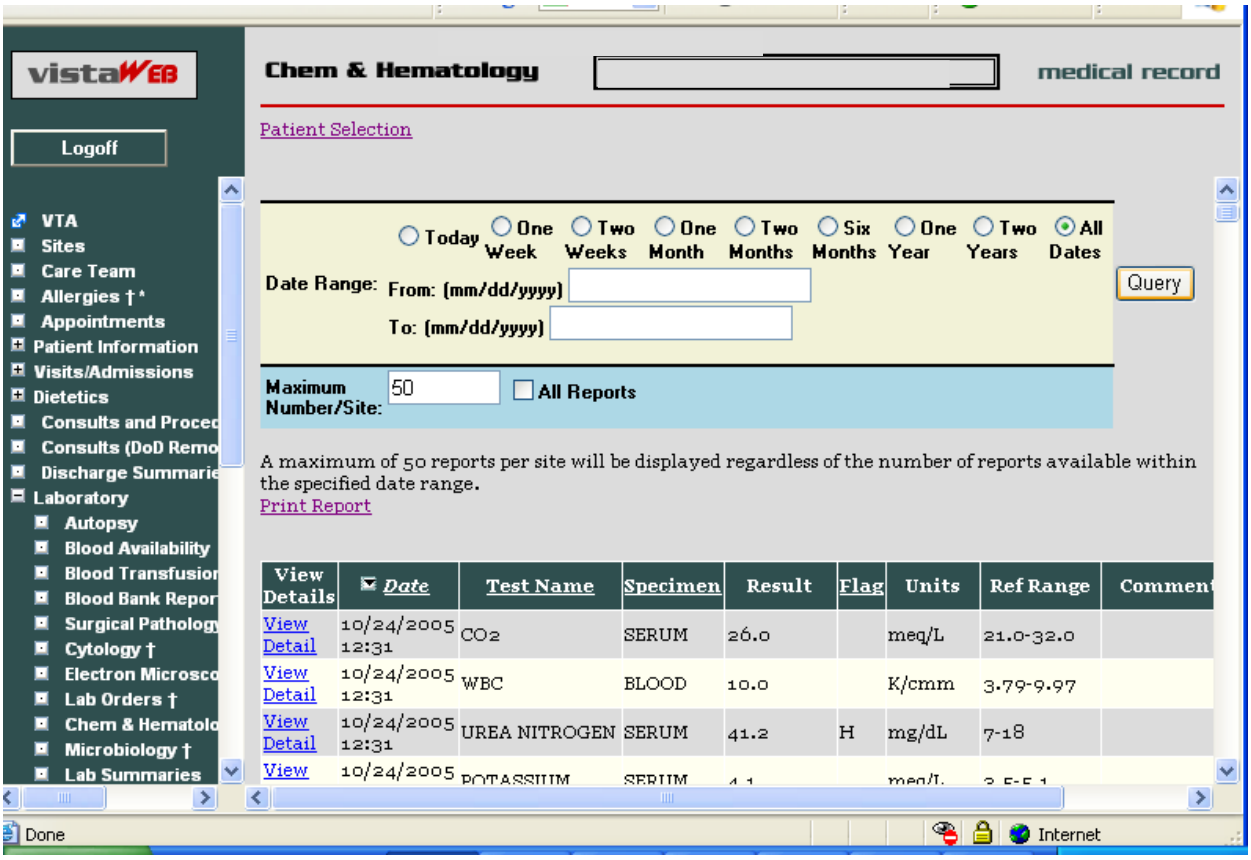


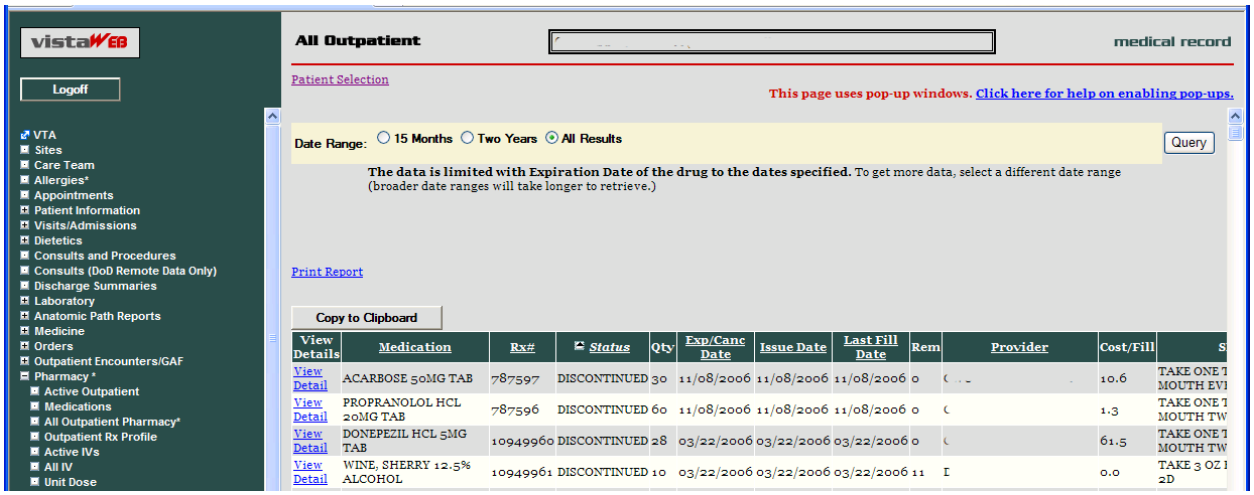
Figure 31: Progress Notes Report with Chem & Hematology



Predefined Filtering and Date Range

The Pharmacy – All Outpatient report often contains a large number of entries, depending on the patient's history of outpatient prescriptions. Providing shorter date ranges allows for the quicker retrieval of data. For this report, the Date Range selection criteria defaults to *15 Months*. You can select *2 Years* or *All Results* by clicking on their radio buttons and then clicking the Query button (Figure 37). Note that the expired dates for the two medications shown are 1995 and 1996, and these would not have been retrieved by selecting 15 Months or Two Years.

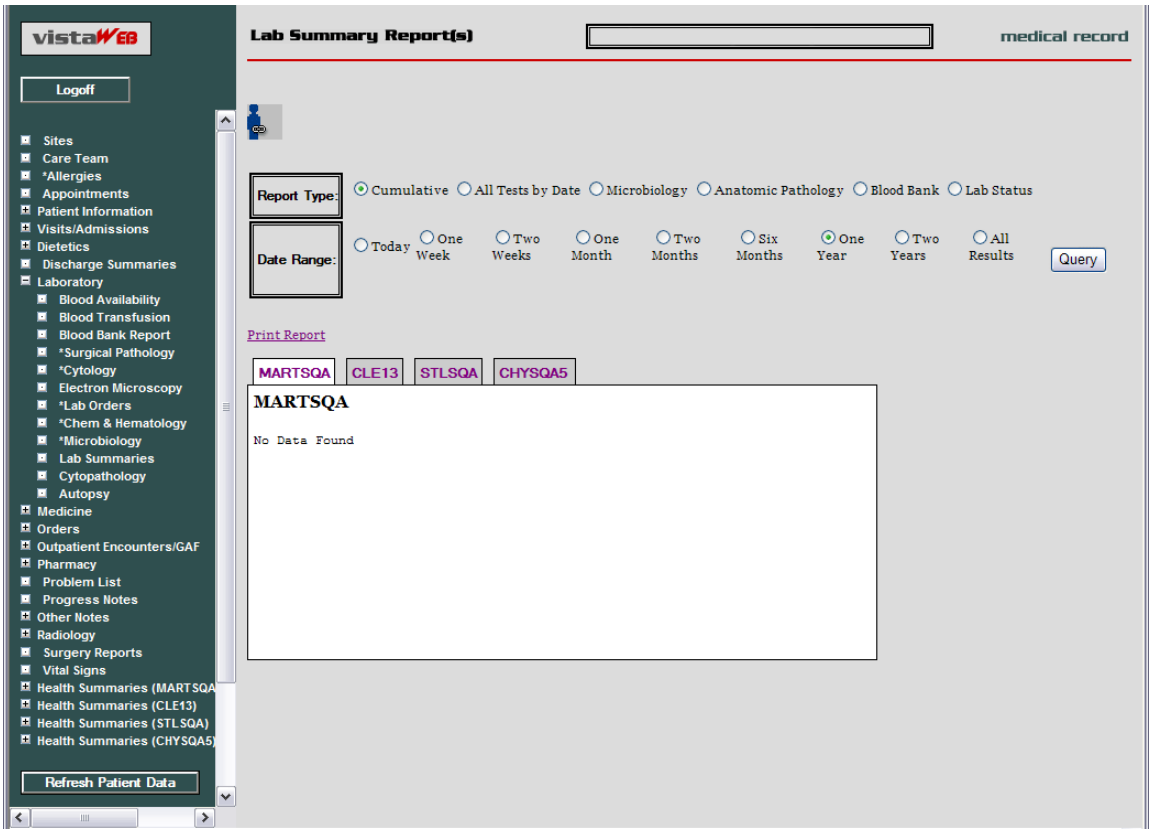
Figure 32: Date Range Selection Criteria for All Outpatient Pharmacy Report



Some reports require you to enter the date range before the report will appear (Figure 38). This is the case for queries that have the potential to return very large amounts of data or where filtering the data lends usability to the report. Summaries, such as Discharge, Lab, some Order summaries, and both of the Med Admin Hx and Med Admin Log reports, tend to generate large volumes of data. Narrowing the date range for a report for a patient's summary data may improve the speed of the data retrieval.

Some reports that do not require a date range include the following: Sites, Care Team, Allergies, Appointments, Patient Inquiry, Patient Demographics, Patient Insurance, Dietetics Profile, Blood Bank, Daily Order Summary, Medications, Outpatient Rx Profile, All IV, and Imaging.

Figure 33: Date Range for Lab and Other Large Volume Reports



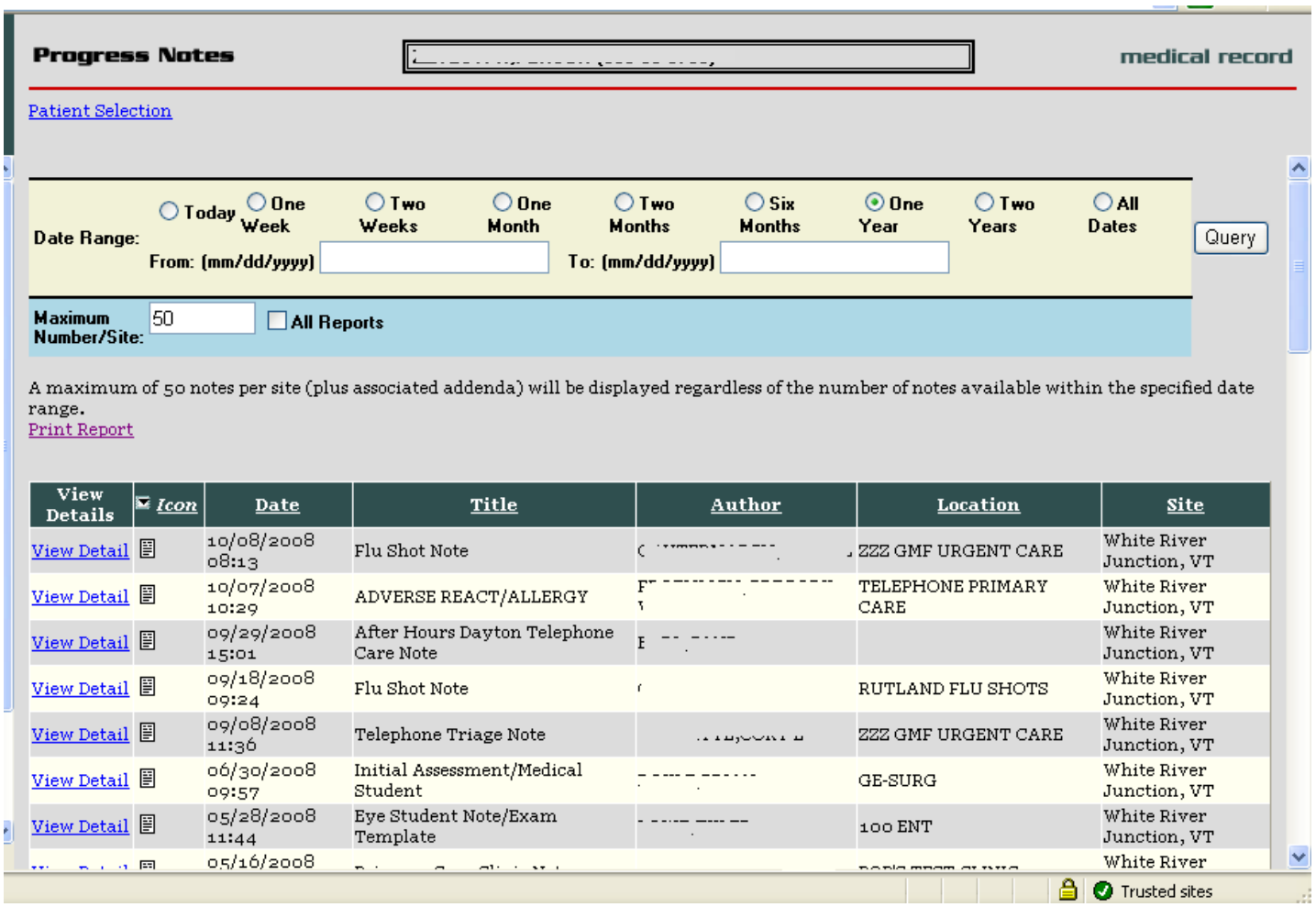
Data Grid Style of Report

The data grid style of report presents data in the form of a grid or table, with the data being retrieved and displayed according to a specified date range. The data for most of the tables can then be sorted in multiple ways. The underlined column headers indicate which columns may be used for sorting. Report data is generally retrieved and presented with the most recent date at the top, descending to the earliest date at the bottom. For some reports, Vitals for example, data from multiple sites is presented strictly by date, without consideration for the site. For some other reports, Problem List for example, the problems from multiple sites are displayed by status (active first) and then in descending date order for one site and then descending order for the next site, and so on. Then inactive problems are listed if there are any. In most of the reports that have a date column, clicking the date won't change the sorting of that column unless some other sort, alphabetical, for example, had been done which upset the descending date order.

Data Grid with View Detail

The data grid that contains a View Detail column permits you to view additional detail about a selected item in a row. In this example, Progress Notes titles are listed in VistAWeb (Figure 39). To view the actual text of the note, click on the View Detail link for the note of interest.

Figure 34: Progress Notes



When you click on the View Detail link, the detail of the selected note appears in a pop-up box, represented in the example below (Figure 40). Click on the Print or Close buttons to effect the desired action.

Figure 35: View Details of Progress Note (AWIV – Imaging details)

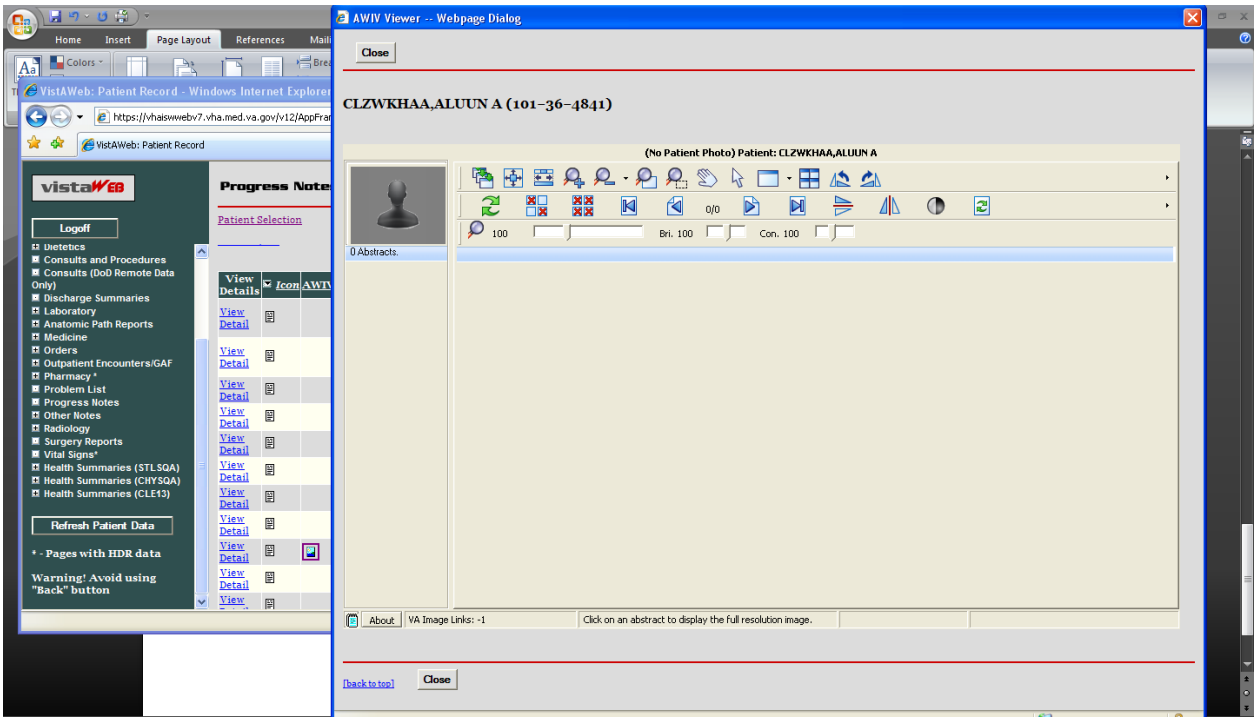


Figure 36: Imaging Report

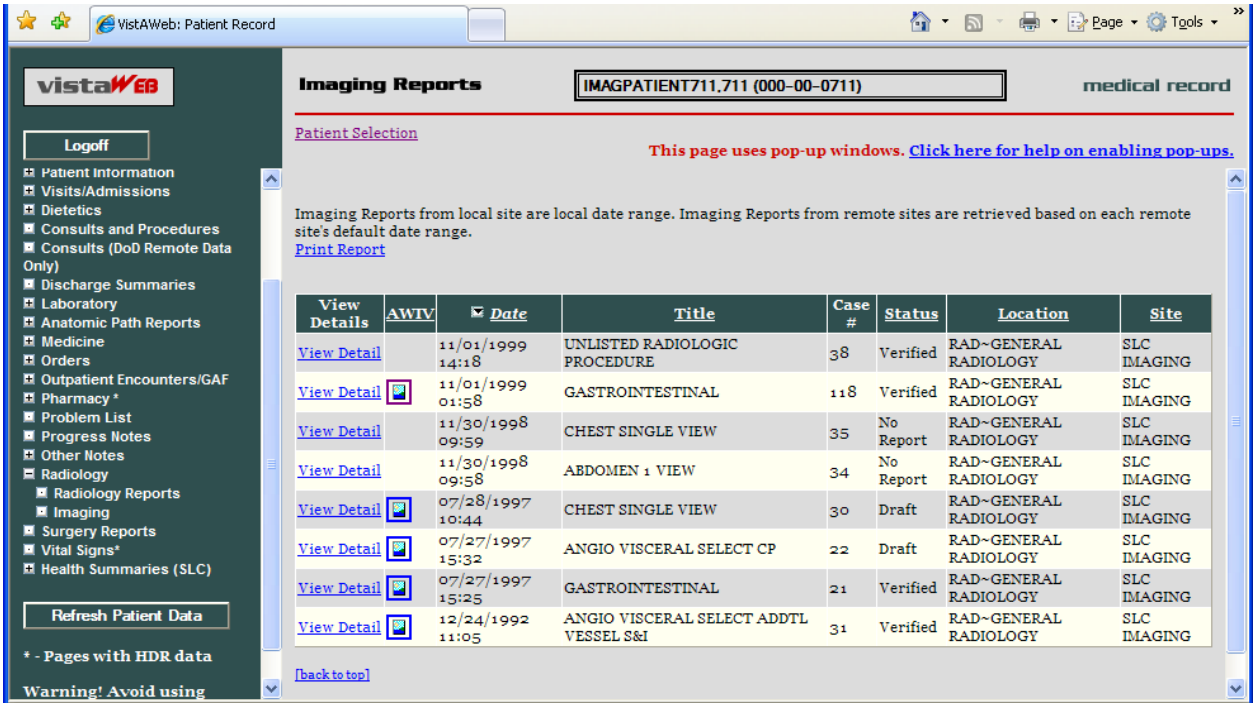
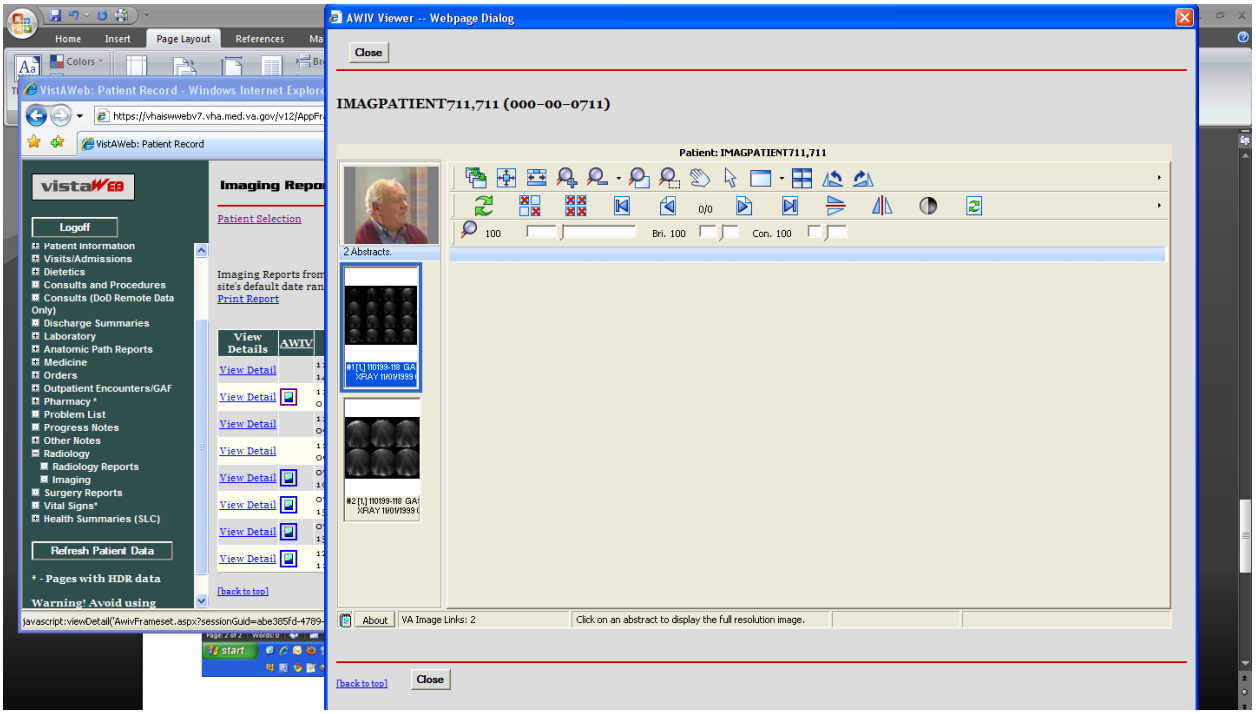


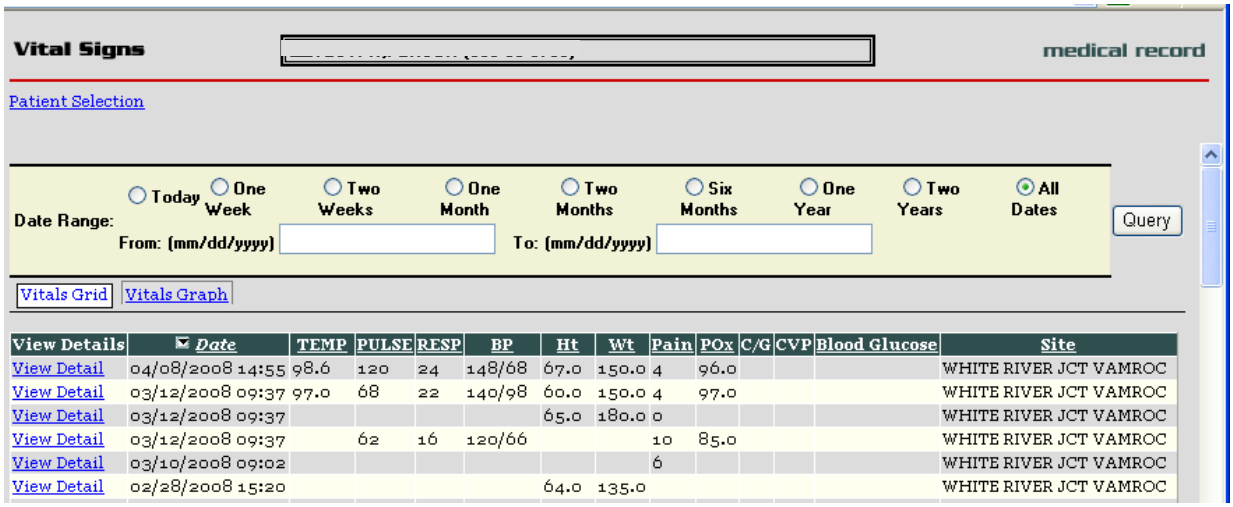
Figure 37: Imaging Report Details



Vital Signs Report

In the following Vital Signs example report, note that three of the Site column listings display HT as the site where the vitals were taken. The HT indicates the data was supplied through the Home Telehealth (HT) interface.

Figure 38: Vital Sign Report Presented as Table



Vital Signs [redacted] medical record

Patient Selection

Date Range: ○ Today ○ One Week ○ Two Weeks ○ One Month ○ Two Months ○ Six Months ○ One Year ○ Two Years ◉ All Dates

From: (mm/dd/yyyy) To: (mm/dd/yyyy) Query

Vitals Grid | Vitals Graph

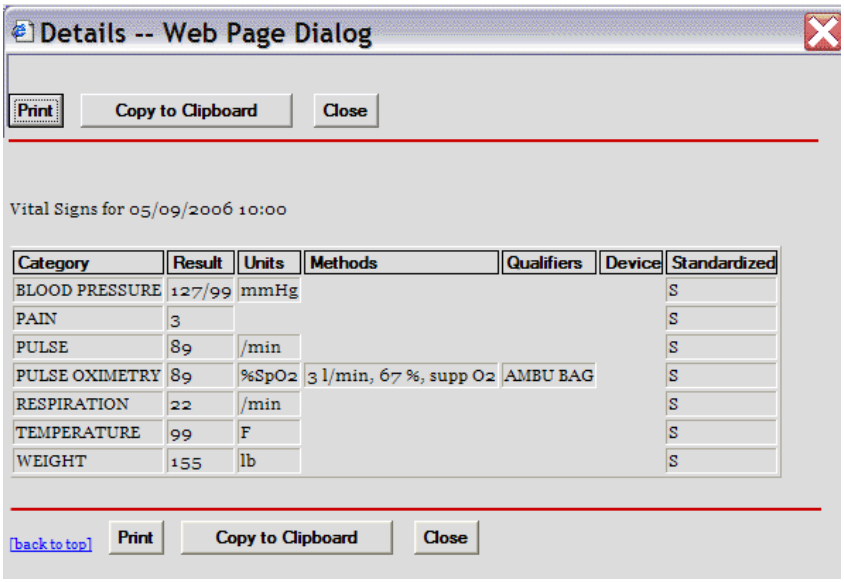
View Details	Date	TEMP	PULSE	RESP	BP	Ht	Wt	Pain	POx	C/G	CVP	Blood Glucose	Site
View Detail	04/08/2008 14:55	98.6	120	24	148/68	67.0	150.0	4	96.0				WHITE RIVER JCT VAMROC
View Detail	03/12/2008 09:37	97.0	68	22	140/98	60.0	150.0	4	97.0				WHITE RIVER JCT VAMROC
View Detail	03/12/2008 09:37					65.0	180.0	0					WHITE RIVER JCT VAMROC
View Detail	03/12/2008 09:37		62	16	120/66			10	85.0				WHITE RIVER JCT VAMROC
View Detail	03/10/2008 09:02							6					WHITE RIVER JCT VAMROC
View Detail	02/28/2008 15:20					64.0	135.0						WHITE RIVER JCT VAMROC

When you select View Details of an HT site from the Vital Signs screen, additional information is provided about the method of data entry, qualifiers, vitals measuring devices, and that data standardization has been accomplished for this vital sign record (Figure 44).

Figure 39: View Details of HT Standardized Vitals

If the vitals data is coming from the HDR-IMS repository, but was not entered through the HT interface, the Details – Web Page Dialog will show the letter S in the Standardized column and any other data that was entered through the Vitals package that maps to other column headings. In the following example, the Methods and Qualifiers for supplemental oxygen that was delivered to the patient are shown.

Figure 40: View Details of Non-HT Standardized Vitals



If the vitals data is coming from the HDR-Historical database or a VistA site, the Standardized column does not display the letter S and no data is supplied for Units, Methods, Qualifiers, or Device. If for some reason the HDR databases are inaccessible, VistAWeb still polls the VistA sites where the patient has been seen and will return any available requested data for display.

Figure 41: View Details of Non-Standardized Vitals

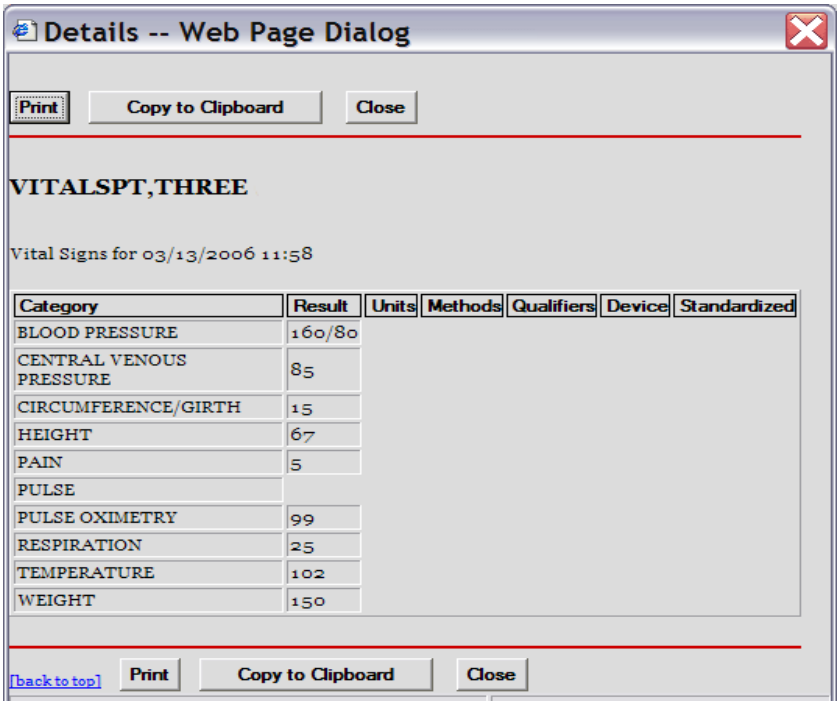
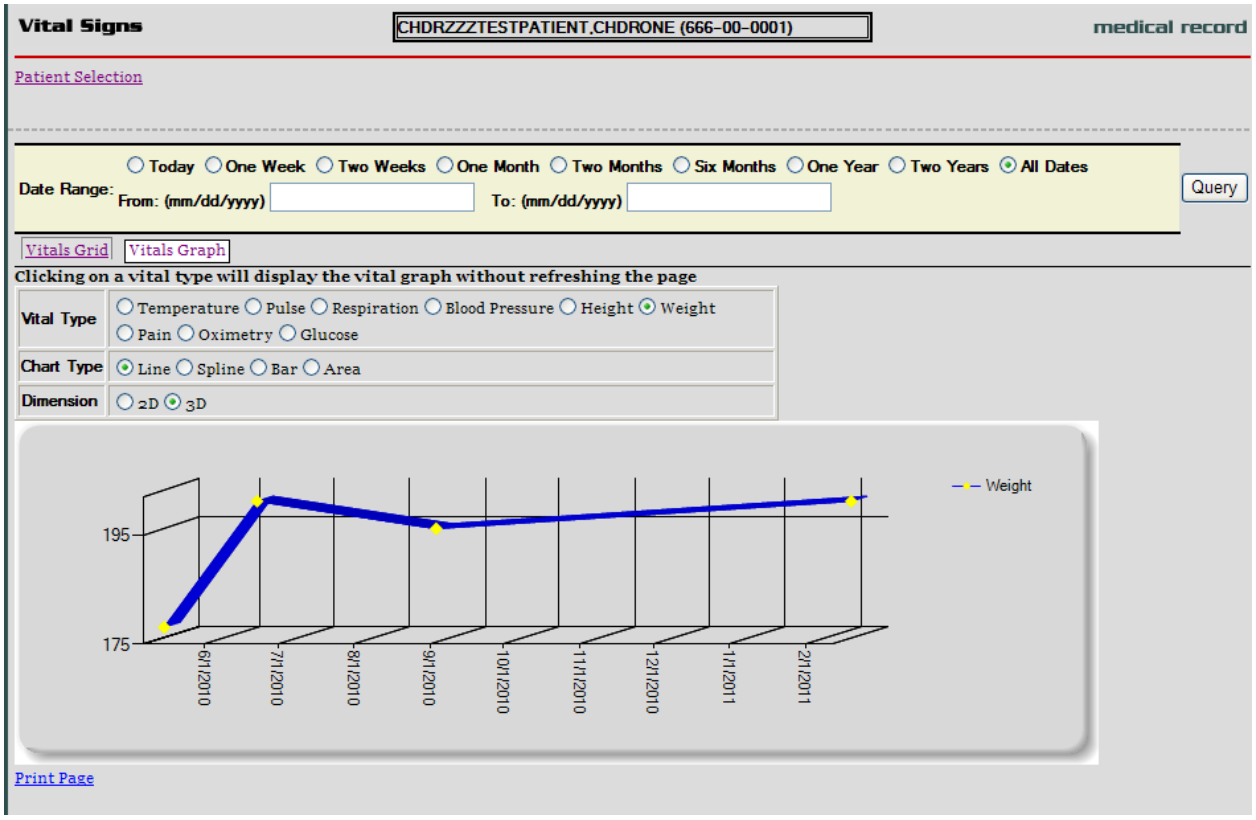


Figure 42: Vitals Graphing



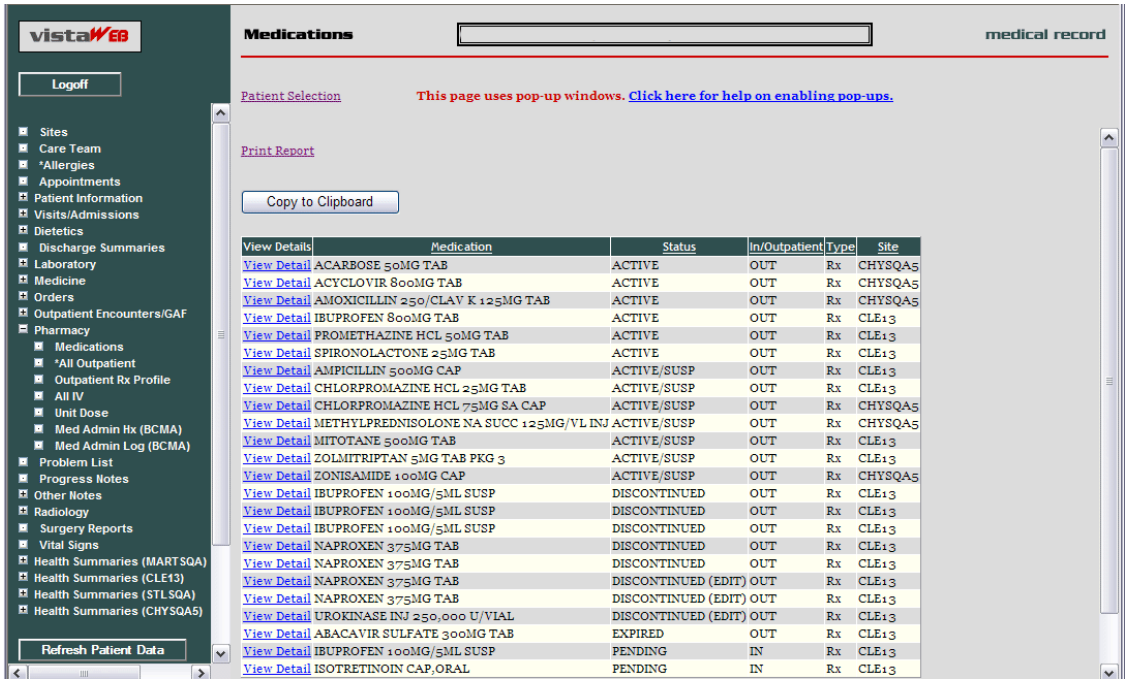
Data Grid with Copy to Clipboard Option

The following example of a Medications report lists a variety of medications and their statuses, along with Copy to Clipboard button (Figure 48). Providers often find it useful to copy lists of active and suspended medications to a patient note. When you click the mouse on the Copy to Clipboard button, the list of Active and Suspended medications is automatically copied to the clipboard and grouped by Status. Discontinued and expired medications are not copied.

NOTE: When you do a copy to clipboard, this data is available to other web pages, which poses a patient safety issue, since patient information can be seen by other web pages

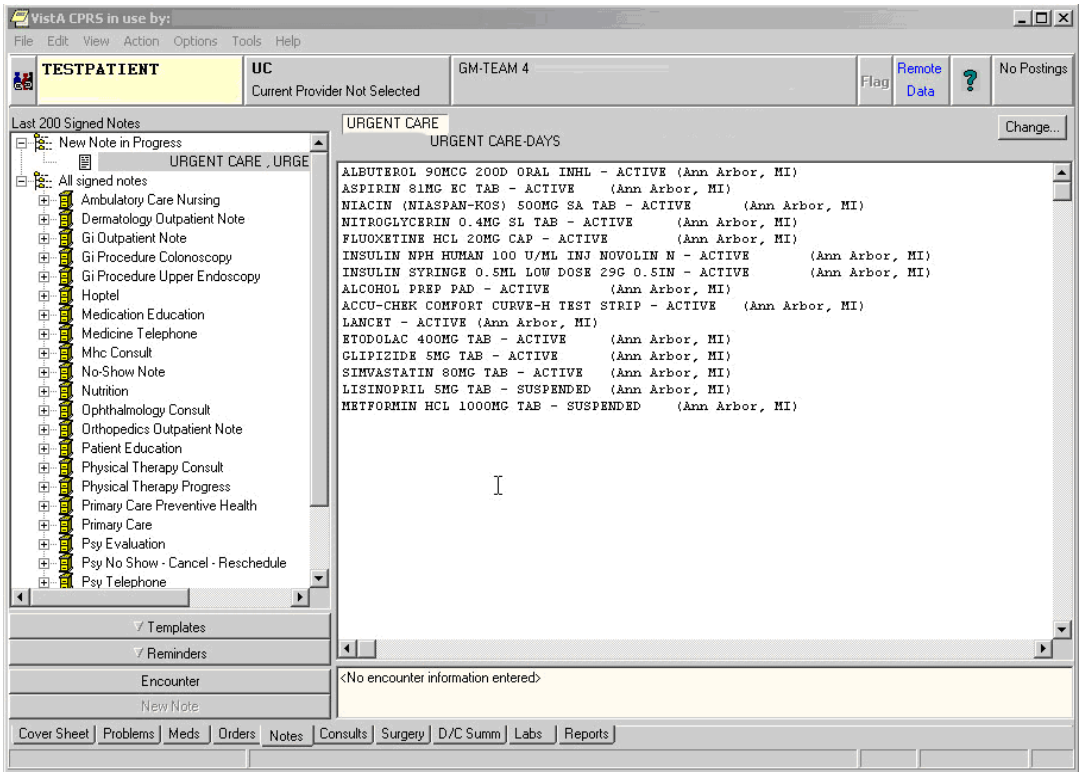
In V8, users can set up an option that doesn't allow the clipboard data to be available to other web pages.

Figure 43: Copy to Clipboard



The list can be pasted into another document or a Progress Note within CPRS. The following screen capture shows active and suspended medications from a Medications report grouped by Status and pasted into a CPRS note (Figure 49).

Figure 44: Medications from VistAWeb Pasted into CPRS Progress Note



Note: *VistAWeb displays Non-VA and Herbal/OTC medications if applicable. In the following screen capture of a Medication report, the Type field has one medication listed as Non-VA. The View Detail for this medication provides details and states "Patient wants to buy from Non-VA pharmacy."*

Figure 45: Non-VA Medications

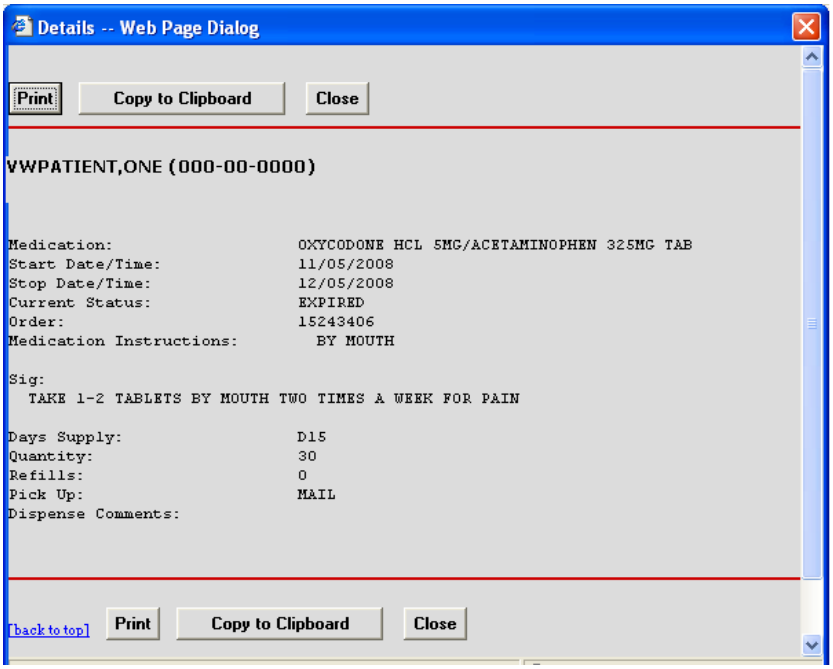
View Details	Medication	Status	In/Outpatient	Type	Site
View Detail	ABACAVIR SULFATE 300MG TAB	ACTIVE	OUT	Non-VA	CLE13
View Detail	DEXTROSE 5% IN LACTATED RINGER'S INJ,SOLN	NON-VERIFIED	IN	Rx	CLE13
View Detail	DIGOXIN TAB	NON-VERIFIED	IN	Rx	CLE13
View Detail	POTASSIUM CHLORIDE INJ,SOLN	NON-VERIFIED	IN	Rx	CLE13
View Detail	RABEPRAZOLE TAB,EC	PENDING	IN	Rx	CLE13
View Detail	RABEPRAZOLE TAB,EC	PENDING	IN	Rx	CLE13

Department of Defense Reports

VistAWeb version10 added the following:

1. Detailed display for DoD data for the Outpatient Pharmacy report. The following fields are displayed in the detailed display:
    - Medication
    - Start Date/ Time
    - Stop Date/ Time
    - Current Status
    - Order #
    - Medication Instructions
    - Sig
    - Days Supply
    - Quantity
    - Refills
    - Pick Up
    - Dispense Comments

Figure 46: Outpatient Pharmacy detailed display



1. Three new reports under Pharmacy:
    - Active Outpatient
    - Active IV report
    - Herbal/OTC/Non-VA Meds

Figure 47: Active Outpatient Medications - Grid

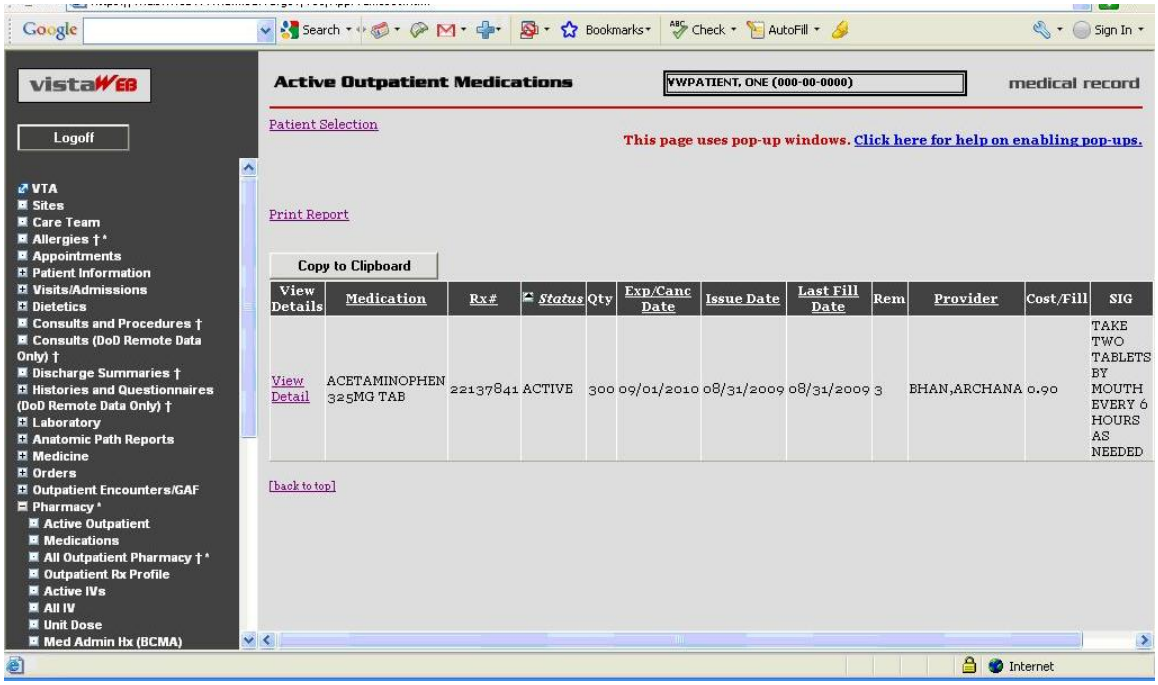


Figure 48: Active Outpatient Medications - Details

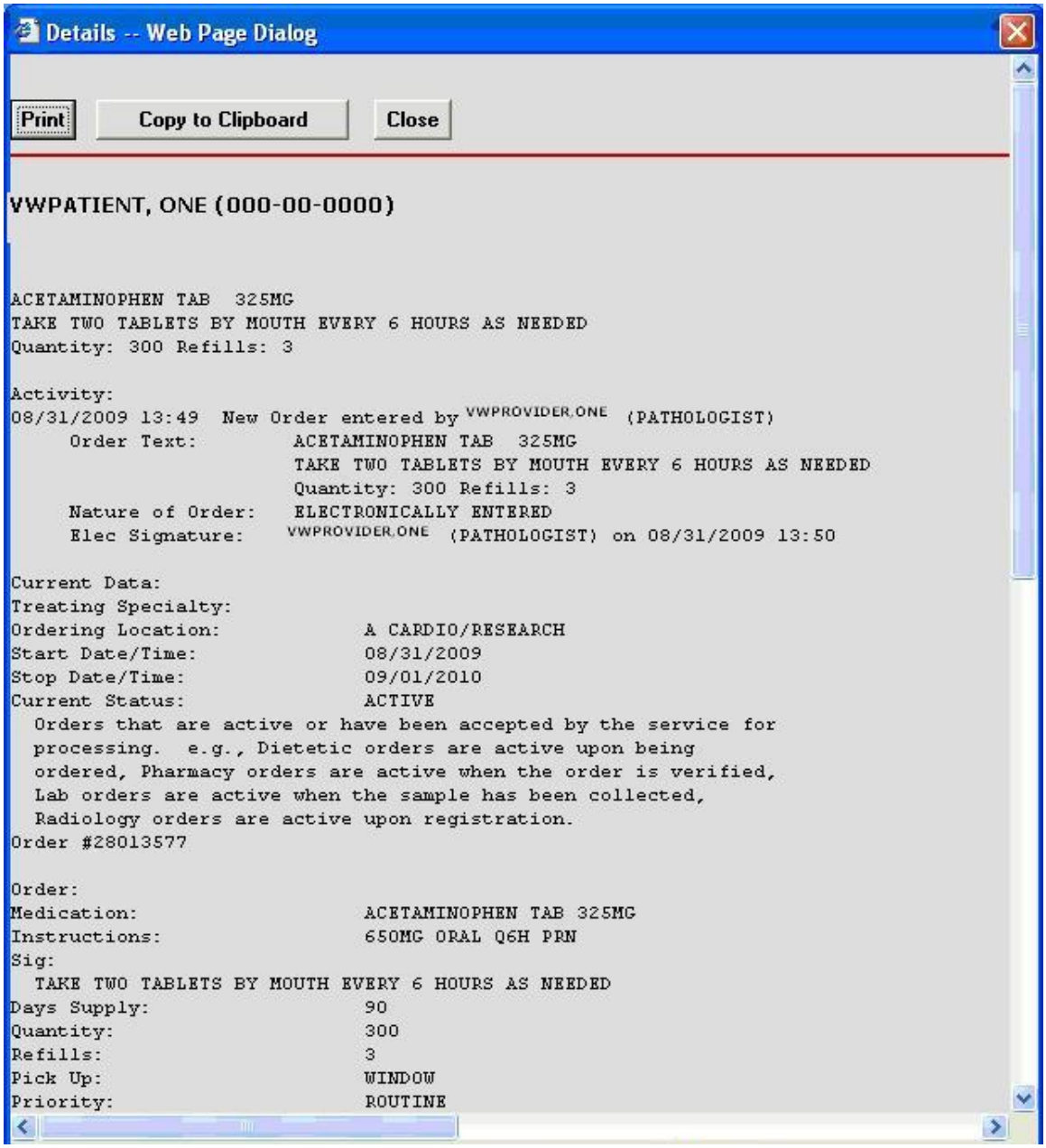


Figure 49: Active IV

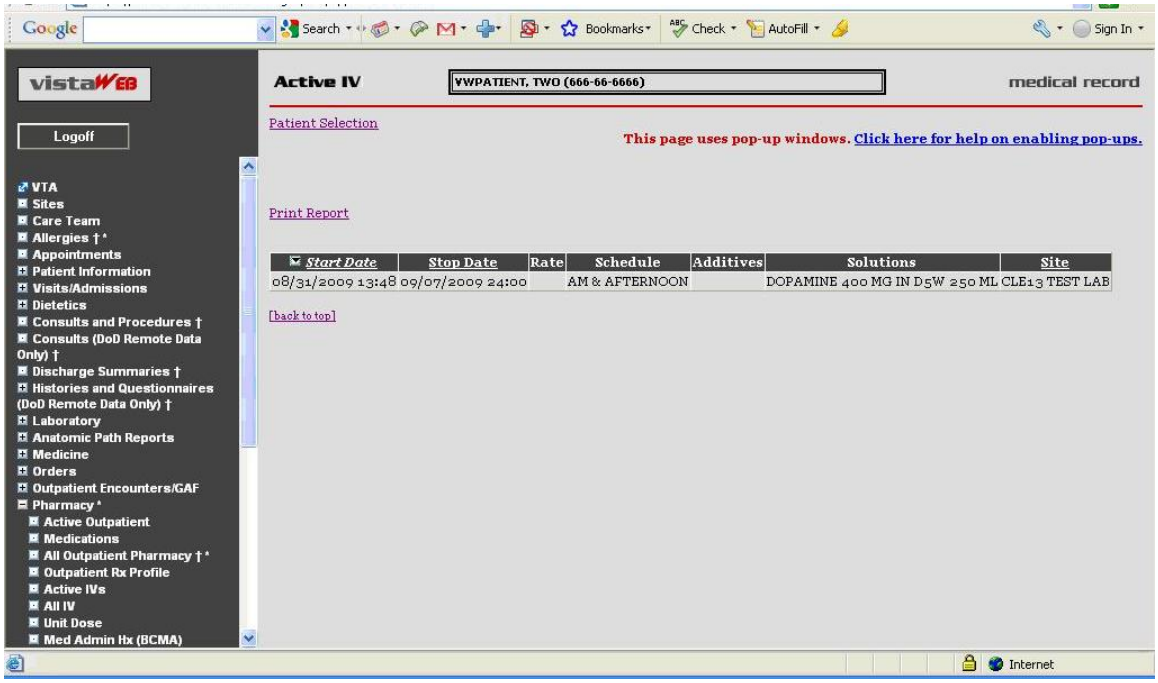
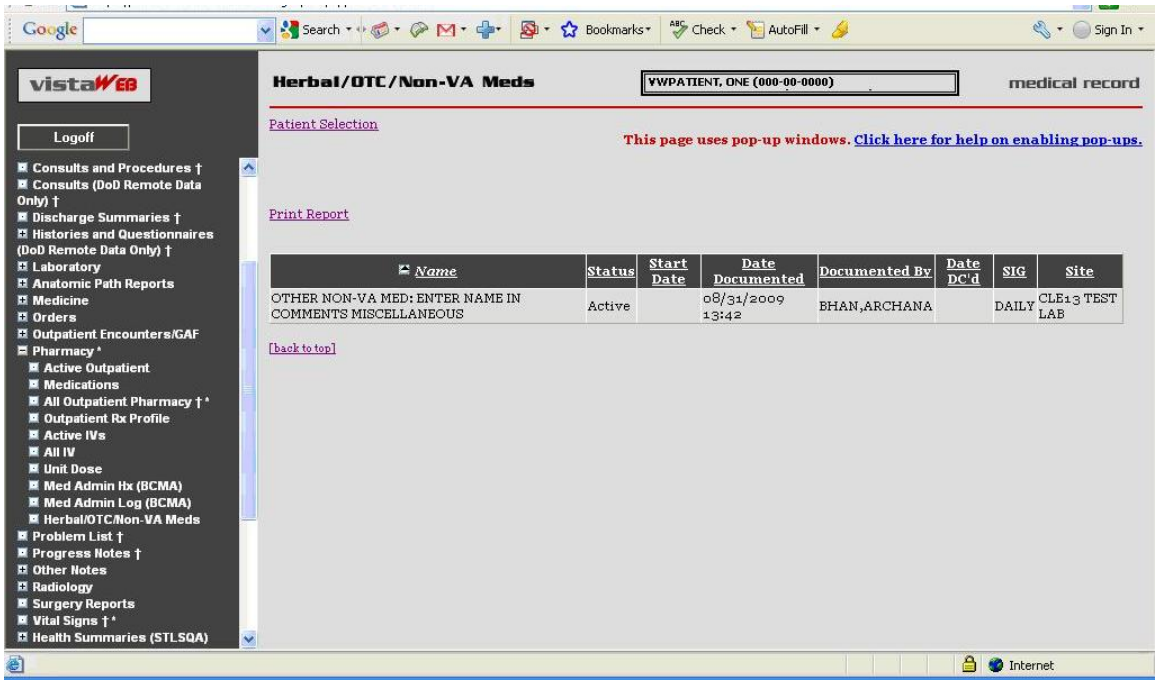


Figure 50: Herbal / OTC / Non-VA Meds



2. In response to PSPO 832:
    - Added a new centered heading "Site Connection Summary" followed by the date and time in parenthesis.
      Example: "Site Connection Summary (12/19/2008 10:06AM)"

- Added the following two notes above the tables that display a list of the sites that VistAWeb could / could not connect to:
  - Data for this patient can be retrieved from the following sites:
  - Data for this patient cannot be retrieved from the sites shown below due to network or remote system problems. To attempt to reach those systems again, please see the message field below and/or re-select the patient":

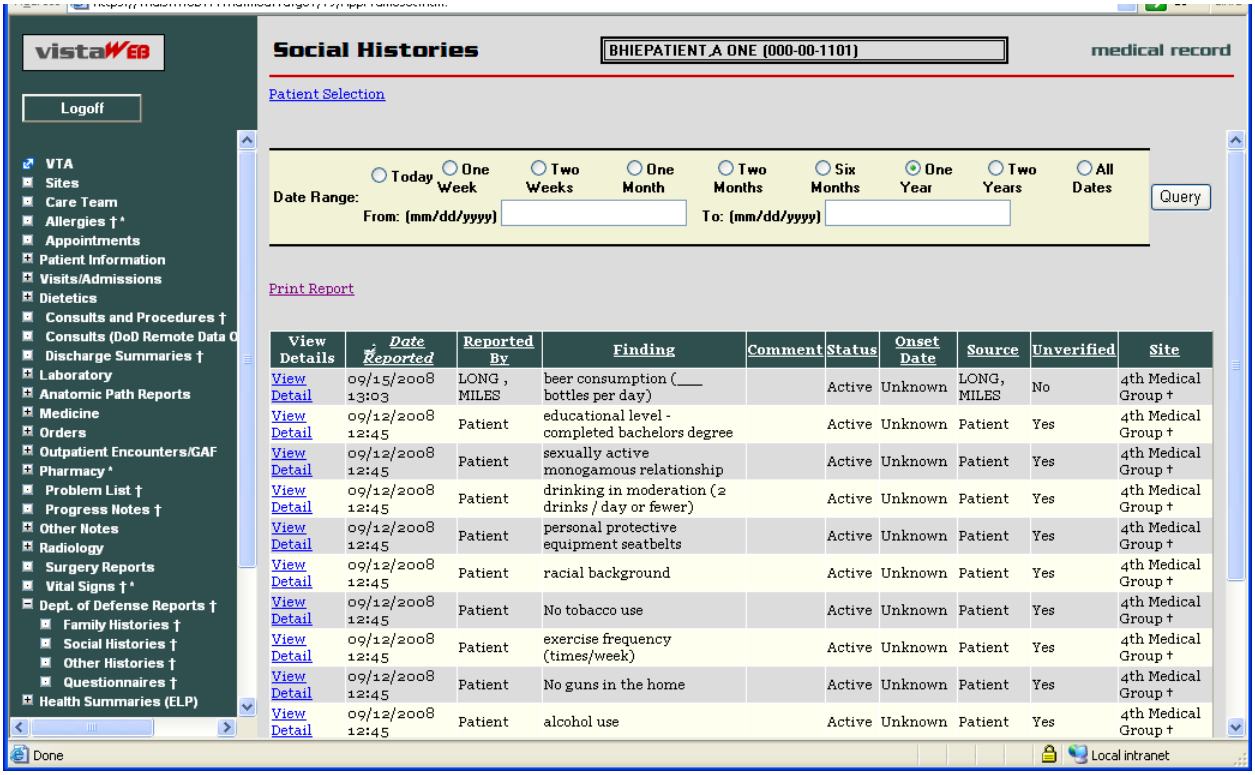
Department of Defense (DoD) Reports, cont'd

VistAWeb version 9 added reports to retrieve and display data received through the BHIE Framework from DoD for the following:

- Family Histories
- Social Histories
- Other Histories
- Questionnaires

Users can select a date range and specify the number of observations, and the BHIE real-time DoD data and DoD pre-separation data within these parameters are displayed in VistAWeb for the above mentioned reports.

Figure 51: Dept of Defense Reports – Social Histories



When the “view details” window is clicked, a new window with details pops up.

Figure 52-: Dept of Defense Reports – Details

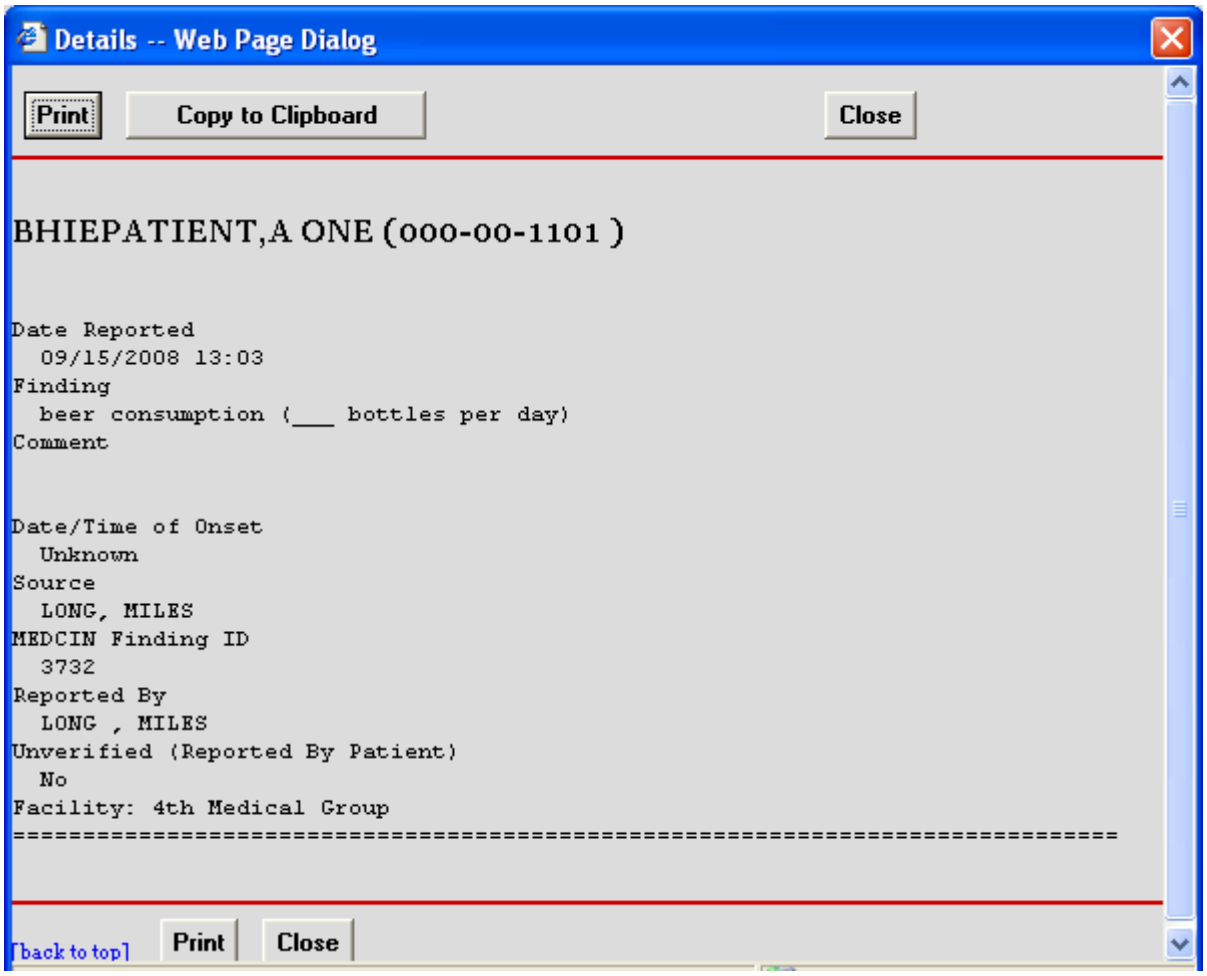
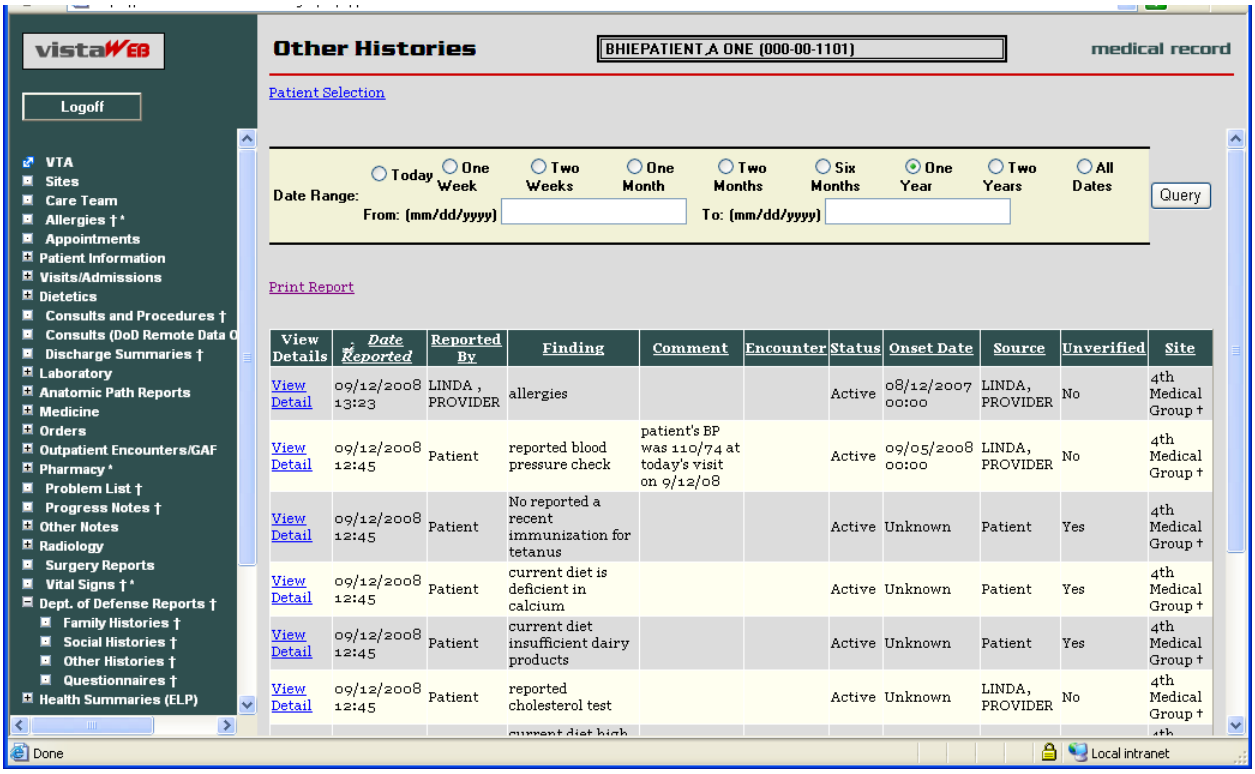


Figure 53: Dept of Defense Reports – Other Histories



View Details	Date Reported	Reported By	Finding	Comment	Encounter	Status	Onset Date	Source	Unverified	Site
View Detail	09/12/2008 13:23	LINDA , PROVIDER	allergies			Active	08/12/2007 00:00	LINDA, PROVIDER	No	4th Medical Group †
View Detail	09/12/2008 12:45	Patient	reported blood pressure check	patient's BP was 110/74 at today's visit on 9/12/08		Active	09/05/2008 00:00	LINDA, PROVIDER	No	4th Medical Group †
View Detail	09/12/2008 12:45	Patient	No reported a recent immunization for tetanus			Active	Unknown	Patient	Yes	4th Medical Group †
View Detail	09/12/2008 12:45	Patient	current diet is deficient in calcium			Active	Unknown	Patient	Yes	4th Medical Group †
View Detail	09/12/2008 12:45	Patient	current diet insufficient dairy products			Active	Unknown	Patient	Yes	4th Medical Group †
View Detail	09/12/2008 12:45	Patient	reported cholesterol test			Active	Unknown	LINDA, PROVIDER	No	4th Medical Group †

Figure 54: Dept of Defense Reports – Other Histories Details

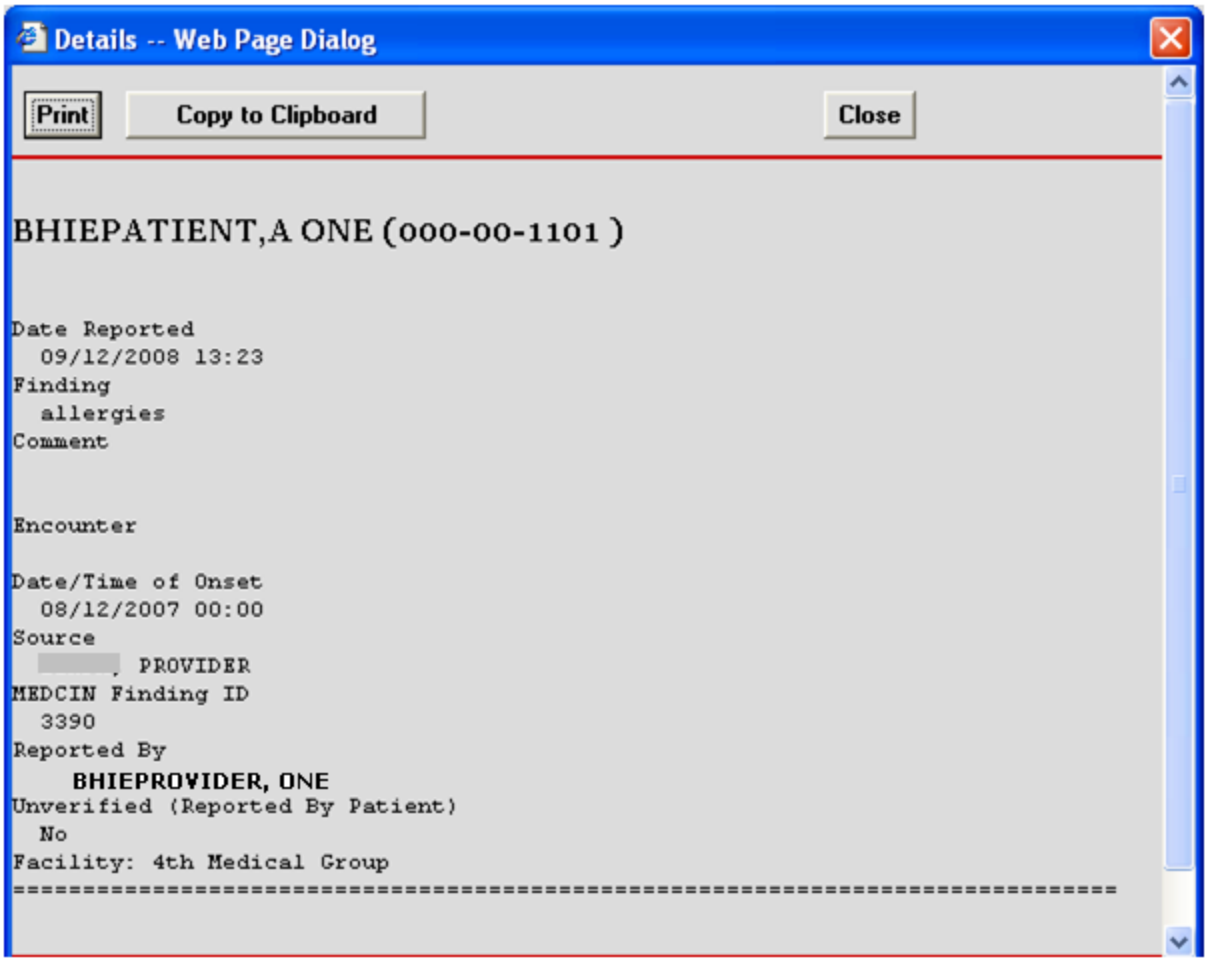


Figure 55: Dept of Defense Reports – Questionnaires

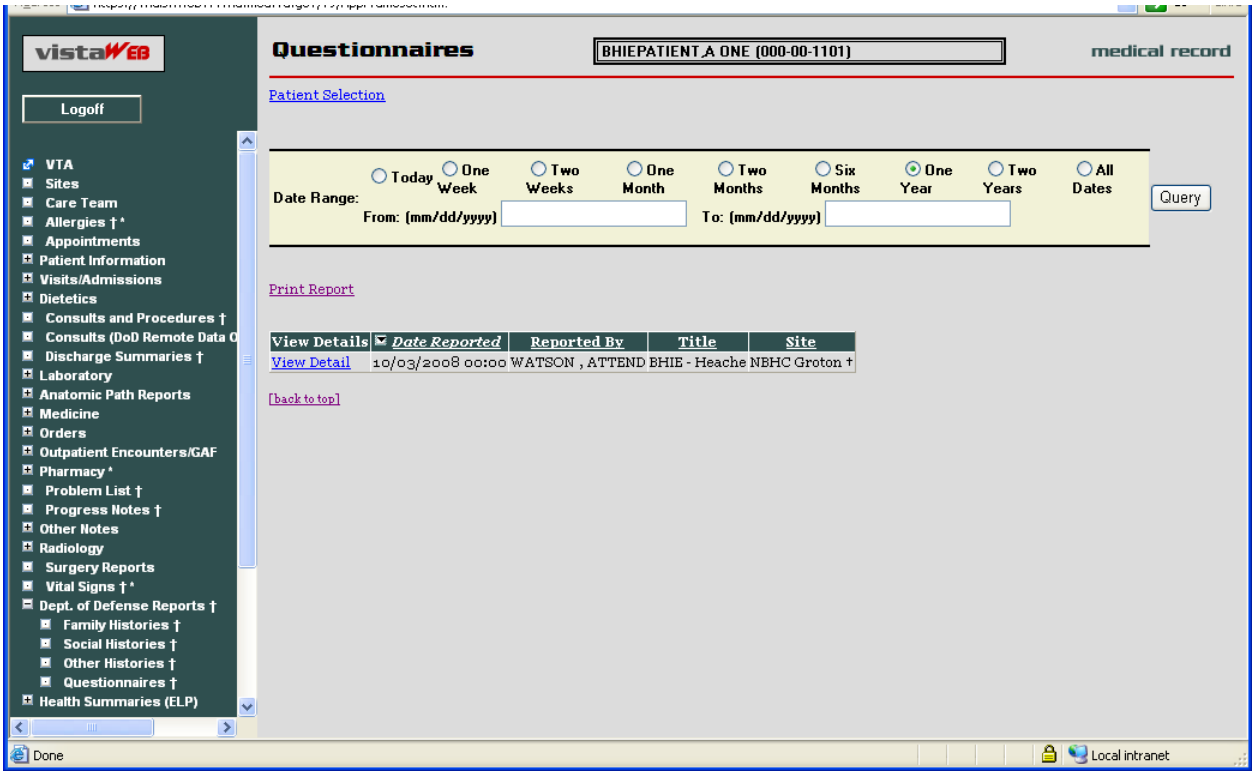


Figure 56: Dept of Defense Reports – Questionnaires Details

Other Past Medical Histories report from DoD

HART Report from Department of Defense

The report referenced by the HART (Health Assessment Review Tool) Report is comprised of answers ("findings") to a health assessment questionnaire (health indicator data including physical activity, overweight and obesity, substance abuse, etc.). Although this is originally entered in a question and answer format, the report is stored and displayed simply as "findings" (no longer associated with questions). The report is displayed in VistAWeb as **"Other Past Medical Histories."**

Data displayed on the HART report was not truncated in the Comment column, so the entire report appeared making the row unreasonably tall.

The report will now have similar truncating for HART data as is done in CPRS. This will reduce the size of the report and make it easier for the user to read. The entire text of the comment field will be available in the detailed display window.

The display of the "Comment" field will be restricted to 30 characters in the grid view of the "Other Past Medical Histories" report in VistAWeb.

Figure 57: Comment Field

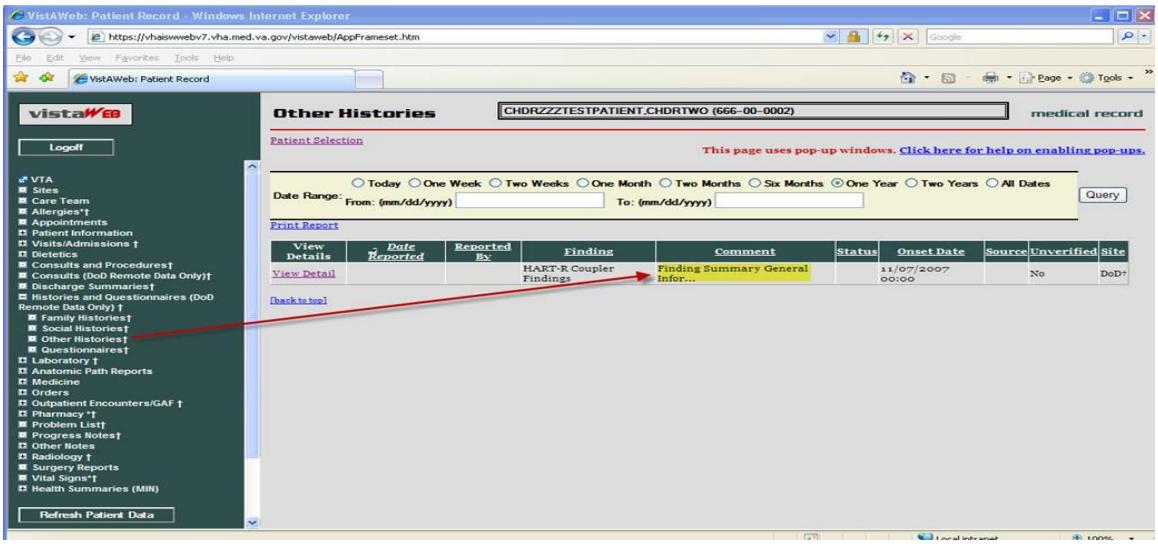
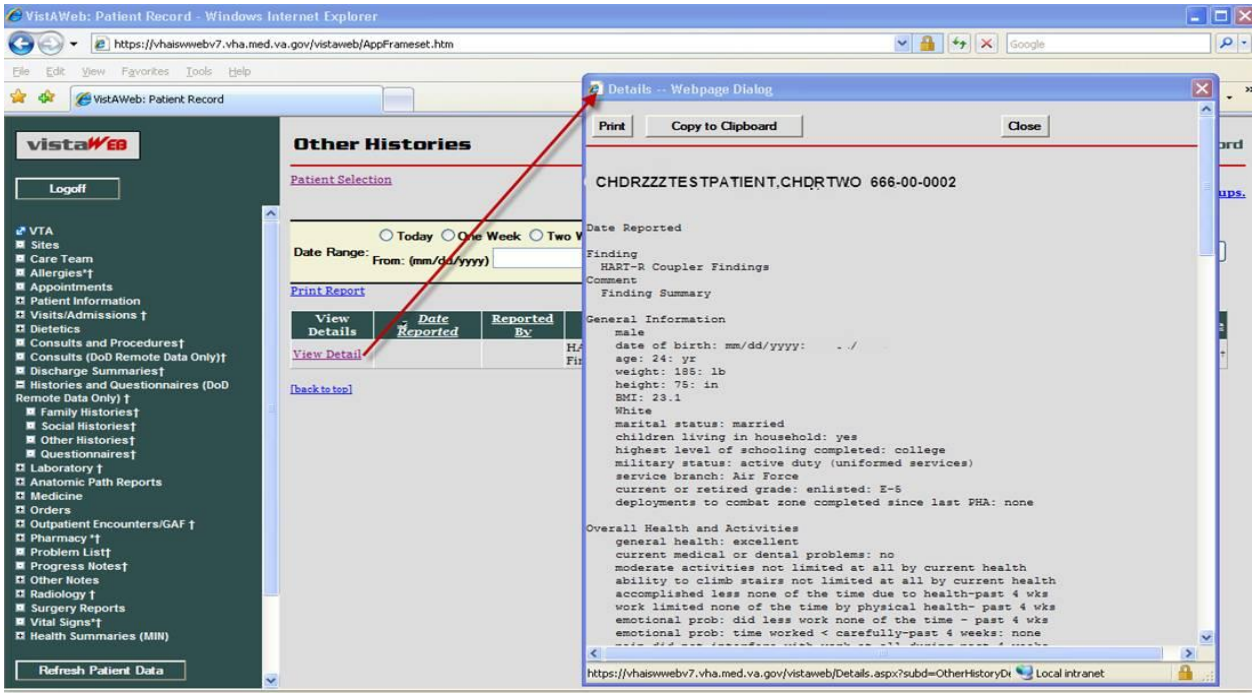


Figure 58: Detailed Display



NwHIN Documents

Detailed views for NwHIN documents (also called Non-VA) :

Figure 59: Display of Aggregated Reports Procedures

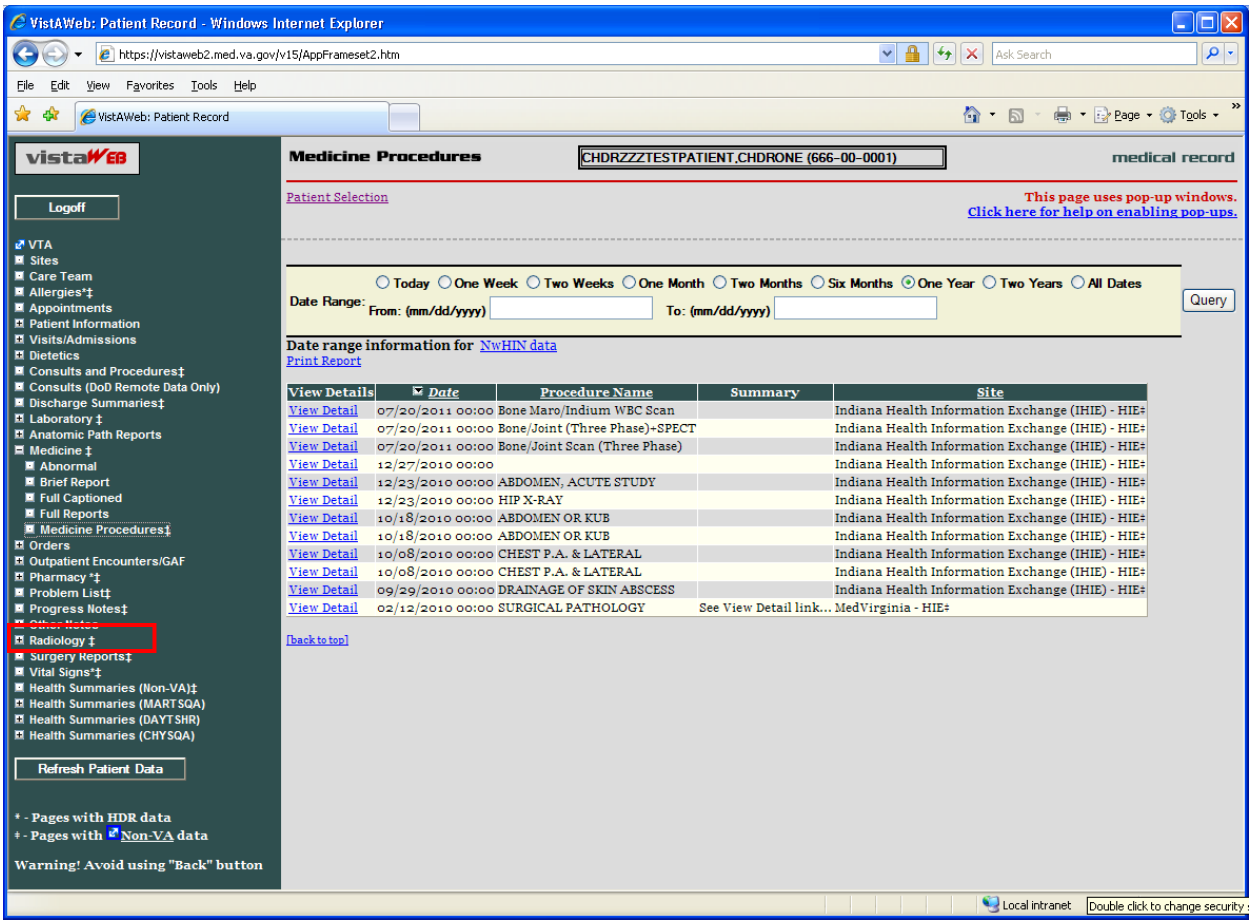
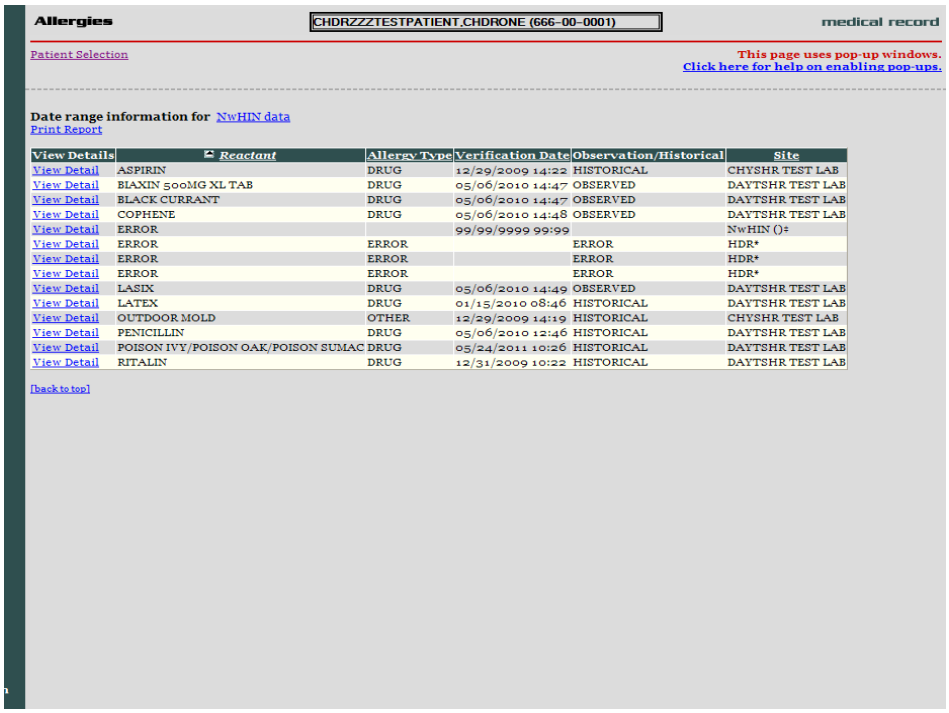


Figure 60: Allergies Report

This is a grid-type report. Columns can be sorted and view detail will open up another box and provide more info



Allergies | CHDRZZZTESTPATIENT,CHDRONE (666-00-0001) | medical record

Patient Selection

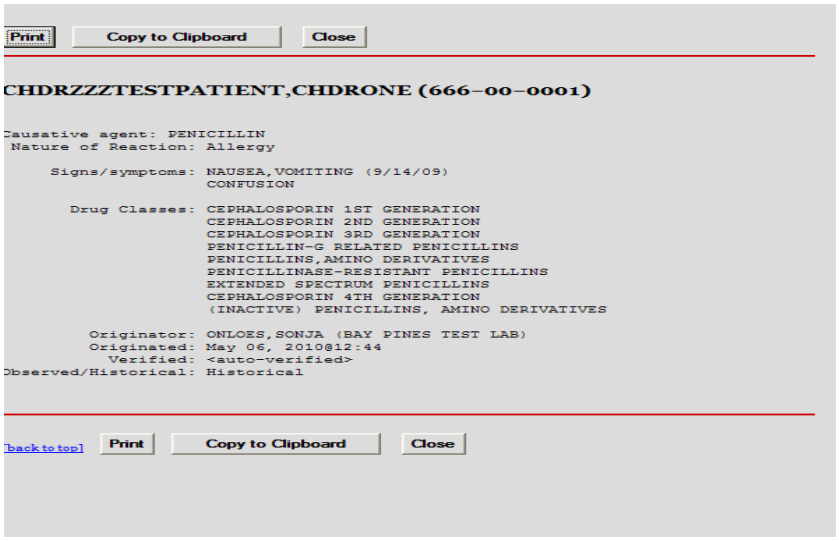
This page uses pop-up windows.
Click here for help on enabling pop-ups.

Date range information for NwHIN data
Print Report

View Details	Reactant	Allergy Type	Verification Date	Observation/Historical	Site
View Detail	ASPIRIN	DRUG	12/29/2009 14:22	HISTORICAL	CHYSHR TEST LAB
View Detail	BIAXIN 500MG XL TAB	DRUG	05/06/2010 14:47	OBSERVED	DAYTSHR TEST LAB
View Detail	BLACK CURRANT	DRUG	05/06/2010 14:47	OBSERVED	DAYTSHR TEST LAB
View Detail	COPHENE	DRUG	05/06/2010 14:48	OBSERVED	DAYTSHR TEST LAB
View Detail	ERROR		99/99/9999 99:99		NwHIN ()#
View Detail	ERROR	ERROR		ERROR	HDR*
View Detail	ERROR	ERROR		ERROR	HDR*
View Detail	ERROR	ERROR		ERROR	HDR*
View Detail	LASIX	DRUG	05/06/2010 14:49	OBSERVED	DAYTSHR TEST LAB
View Detail	LATEX	DRUG	01/15/2010 08:46	HISTORICAL	DAYTSHR TEST LAB
View Detail	OUTDOOR MOLD	OTHER	12/29/2009 14:19	HISTORICAL	CHYSHR TEST LAB
View Detail	PENICILLIN	DRUG	05/06/2010 12:46	HISTORICAL	DAYTSHR TEST LAB
View Detail	POISON IVY/POISON OAK/POISON SUMAC	DRUG	05/24/2011 10:26	HISTORICAL	DAYTSHR TEST LAB
View Detail	RITALIN	DRUG	12/31/2009 10:22	HISTORICAL	DAYTSHR TEST LAB

[back to top]

Figure 61: Allergies Report – View Details



Print | Copy to Clipboard | Close

CHDRZZZTESTPATIENT,CHDRONE (666-00-0001)

```
Causative agent: PENICILLIN
 Nature of Reaction: Allergy

     Signs/symptoms: NAUSEA,VOMITING (9/14/09)
                     CONFUSION

       Drug Classes: CEPHALOSPORIN 1ST GENERATION
                     CEPHALOSPORIN 2ND GENERATION
                     CEPHALOSPORIN 3RD GENERATION
                     PENICILLIN-G RELATED PENICILLINS
                     PENICILLINS,AMINO DERIVATIVES
                     PENICILLINASE-RESISTANT PENICILLINS
                     EXTENDED SPECTRUM PENICILLINS
                     CEPHALOSPORIN 4TH GENERATION
                     (INACTIVE) PENICILLINS, AMINO DERIVATIVES

         Originator: ONLOES,SONJA (BAY PINES TEST LAB)
         Originated: May 06, 2010@12:44
           Verified: <auto-verified>
Observed/Historical: Historical
```

[back to top] Print | Copy to Clipboard | Close

Figure 62: Chem and Hematology Grid-style report

This is a variation on the grid-style of report displayed earlier; adding in the max number/site default of 50 or user can select all reports

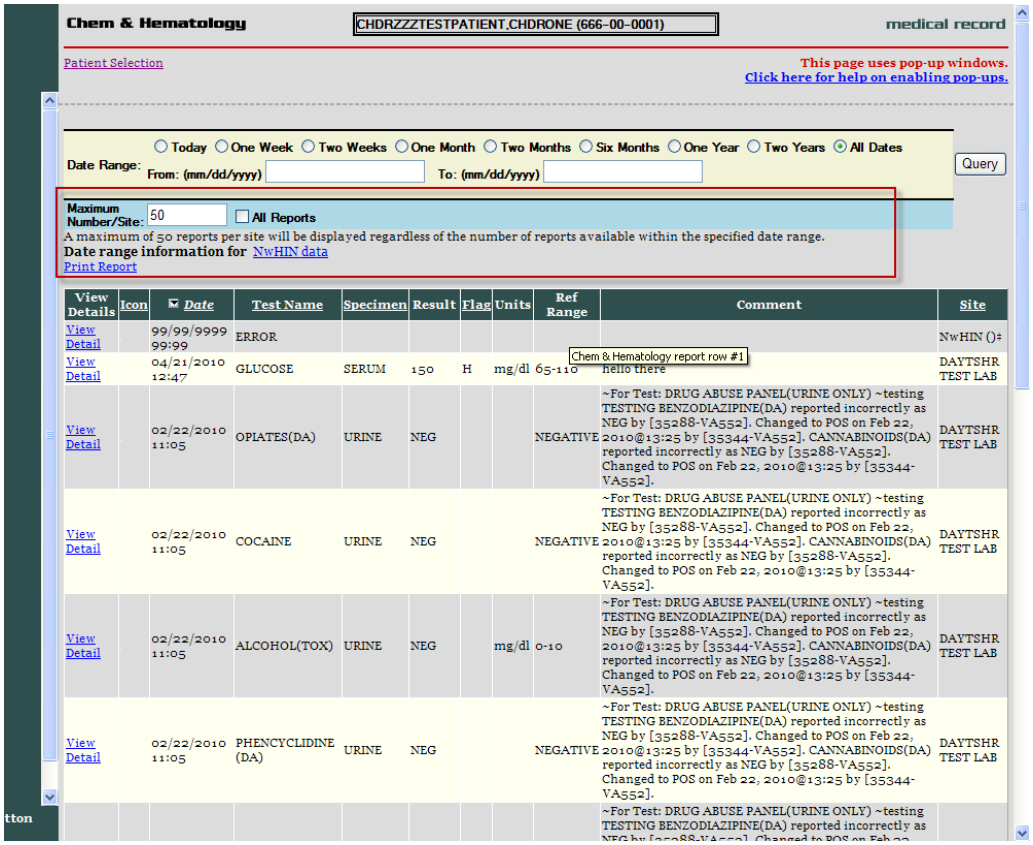
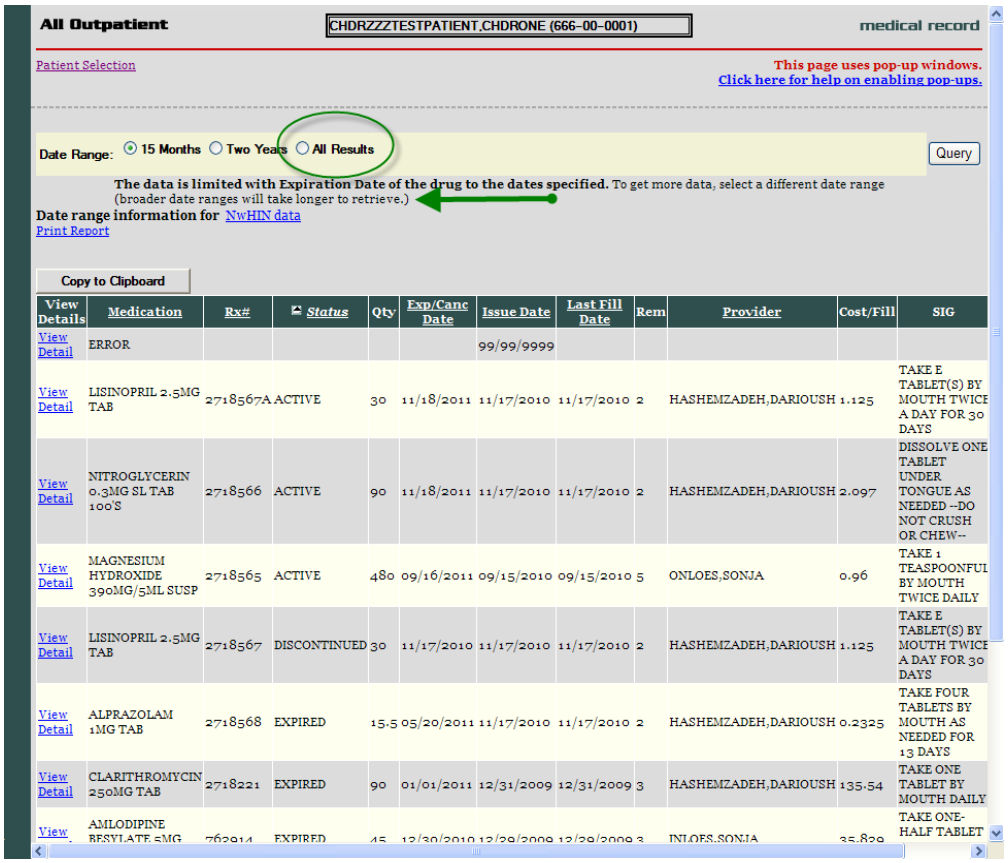


Figure 63: ALL OUTPATIENT PHARMACY PROFILE

This popular report pulls data from HDR/DoD/NwHIN sites; default is 15 months with the ability and disclaimer to pull all results.



All Outpatient CHDRZZZTESTPATIENT,CHDRONE (666-00-0001) medical record

Patient Selection

This page uses pop-up windows.
Click here for help on enabling pop-ups.

Date Range: (•) 15 Months ( ) Two Years ( ) All Results Query

The data is limited with Expiration Date of the drug to the dates specified. To get more data, select a different date range (broader date ranges will take longer to retrieve.)

Date range information for NwHIN data

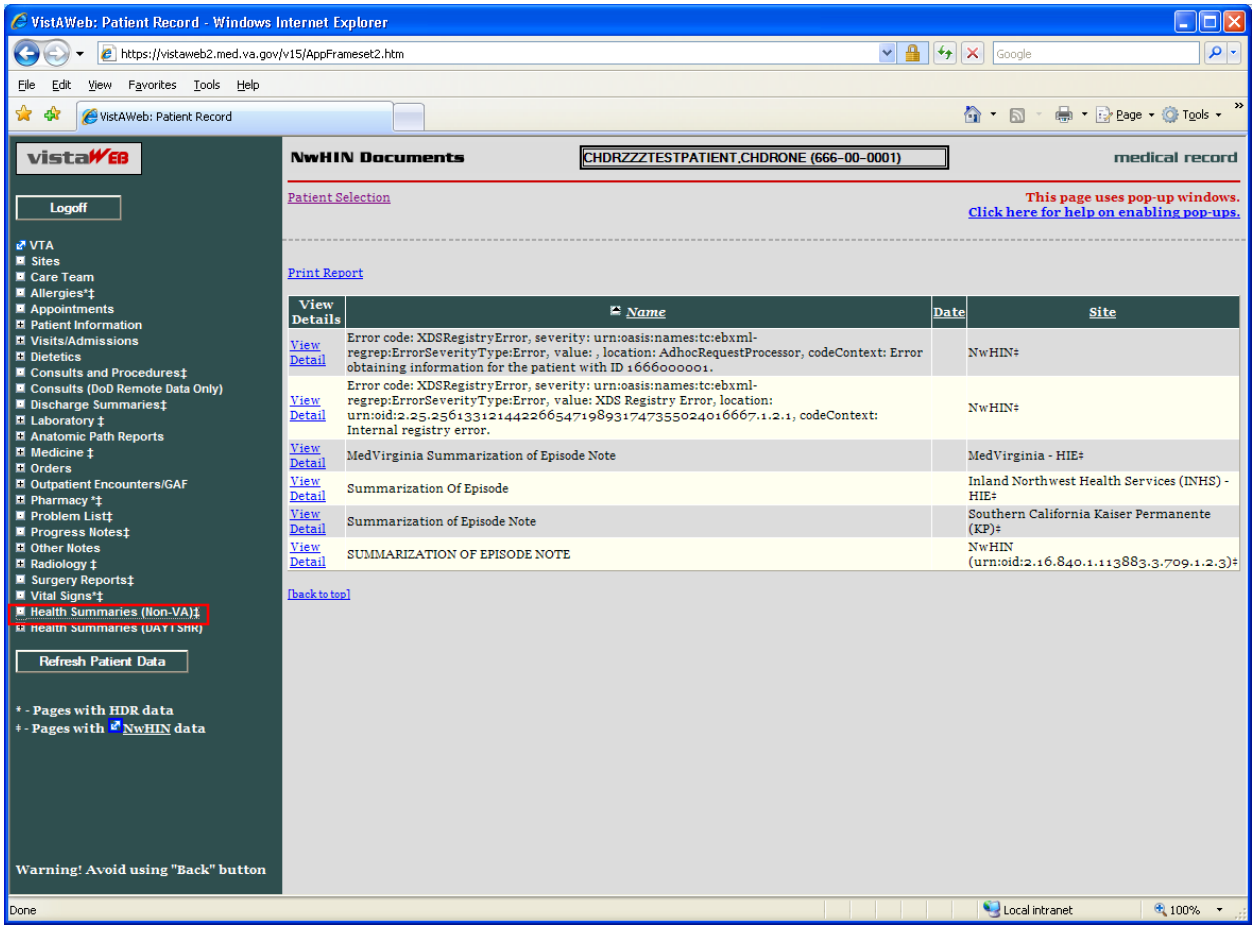
Print Report

Copy to Clipboard

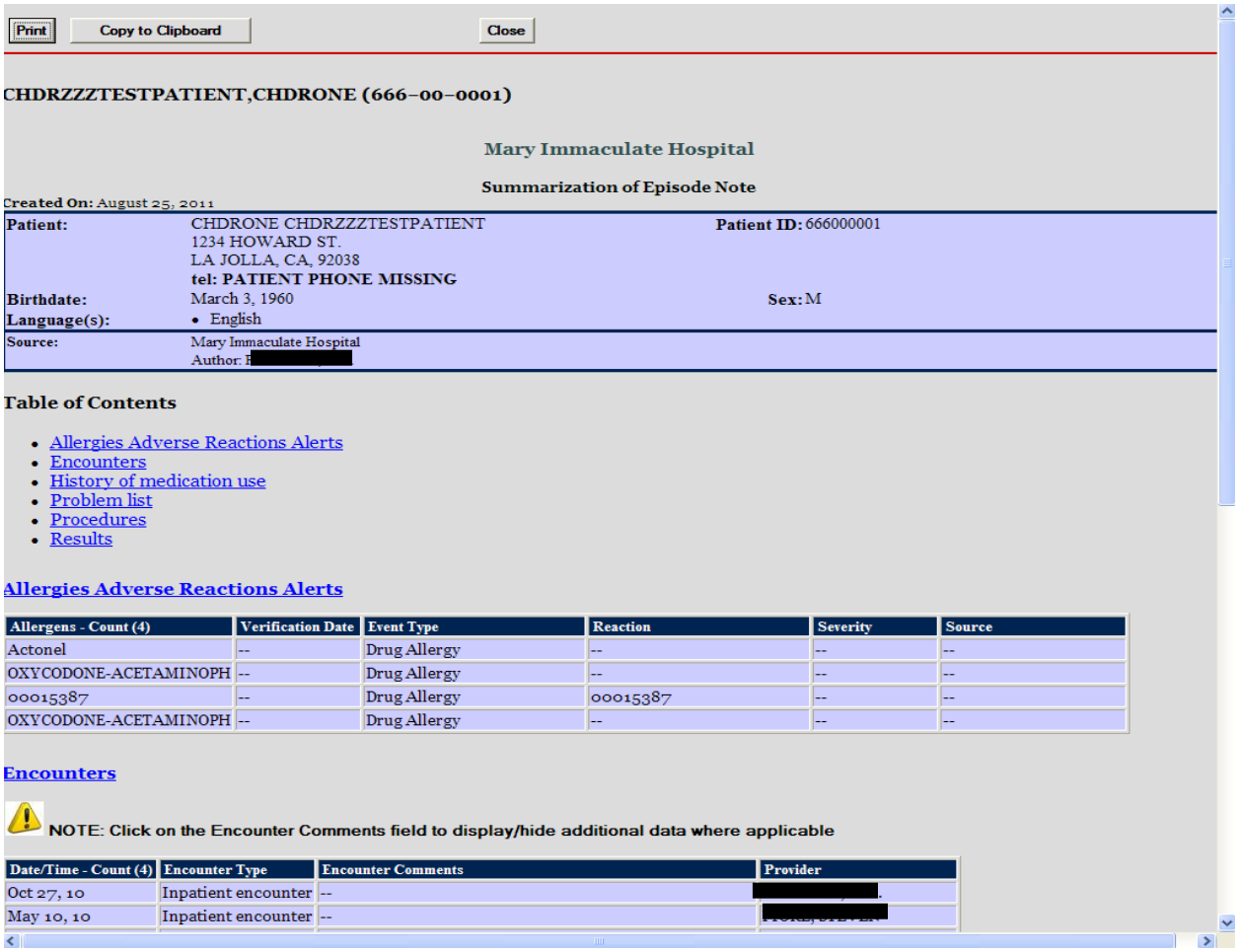
View Details	Medication	Rx#	Status	Qty	Exp/Canc Date	Issue Date	Last Fill Date	Rem	Provider	Cost/Fill	SIG
View Detail	ERROR					99/99/9999					
View Detail	LISINOPRIL 2.5MG TAB	2718567A	ACTIVE	30	11/18/2011	11/17/2010	11/17/2010	2	HASHEMZADEH,DARIOUSH	1.125	TAKE E TABLET(S) BY MOUTH TWICE A DAY FOR 30 DAYS
View Detail	NITROGLYCERIN 0.3MG SL TAB 100'S	2718566	ACTIVE	90	11/18/2011	11/17/2010	11/17/2010	2	HASHEMZADEH,DARIOUSH	2.097	DISSOLVE ONE TABLET UNDER TONGUE AS NEEDED --DO NOT CRUSH OR CHEW--
View Detail	MAGNESIUM HYDROXIDE 390MG/5ML SUSP	2718565	ACTIVE	480	09/16/2011	09/15/2010	09/15/2010	5	ONLOES,SONJA	0.96	TAKE 1 TEASPOONFUL BY MOUTH TWICE DAILY
View Detail	LISINOPRIL 2.5MG TAB	2718567	DISCONTINUED	30	11/17/2010	11/17/2010	11/17/2010	2	HASHEMZADEH,DARIOUSH	1.125	TAKE E TABLET(S) BY MOUTH TWICE A DAY FOR 30 DAYS
View Detail	ALPRAZOLAM 1MG TAB	2718568	EXPIRED	15.5	05/20/2011	11/17/2010	11/17/2010	2	HASHEMZADEH,DARIOUSH	0.2325	TAKE FOUR TABLETS BY MOUTH AS NEEDED FOR 13 DAYS
View Detail	CLARITHROMYCIN 250MG TAB	2718221	EXPIRED	90	01/01/2011	12/31/2009	12/31/2009	3	HASHEMZADEH,DARIOUSH	135.54	TAKE ONE TABLET BY MOUTH DAILY
View	AMLODIPINE BESYLATE 5MG	762914	EXPIRED	45	12/30/2010	12/29/2009	12/29/2009	3	INLOES,SONJA	35.829	TAKE ONE-HALF TABLET

Figure 64: Health Summaries (Non-VA) - NwHIN Documents (C32 and/or C62)

On this report, you can click on view detail to see the total report from a partner



. Figure 65: NwHIN Documents (C32 and/or C62) - Details



Print Copy to Clipboard Close

CHDRZZZTESTPATIENT,CHDRONE (666-00-0001)

Mary Immaculate Hospital

Summarization of Episode Note

Created On: August 25, 2011

Patient:	CHDRONE CHDRZZZTESTPATIENT 1234 HOWARD ST. LA JOLLA, CA, 92038 tel: PATIENT PHONE MISSING	Patient ID: 666000001
Birthdate:	March 3, 1960	Sex: M
Language(s):	• English	
Source:	Mary Immaculate Hospital Author: [redacted]	

Table of Contents

- Allergies Adverse Reactions Alerts
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- Problem list
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Allergies Adverse Reactions Alerts

Allergens - Count (4)	Verification Date	Event Type	Reaction	Severity	Source
Actonel	--	Drug Allergy	--	--	--
OXYCODONE-ACETAMINOPH	--	Drug Allergy	--	--	--
00015387	--	Drug Allergy	00015387	--	--
OXYCODONE-ACETAMINOPH	--	Drug Allergy	--	--	--

Encounters

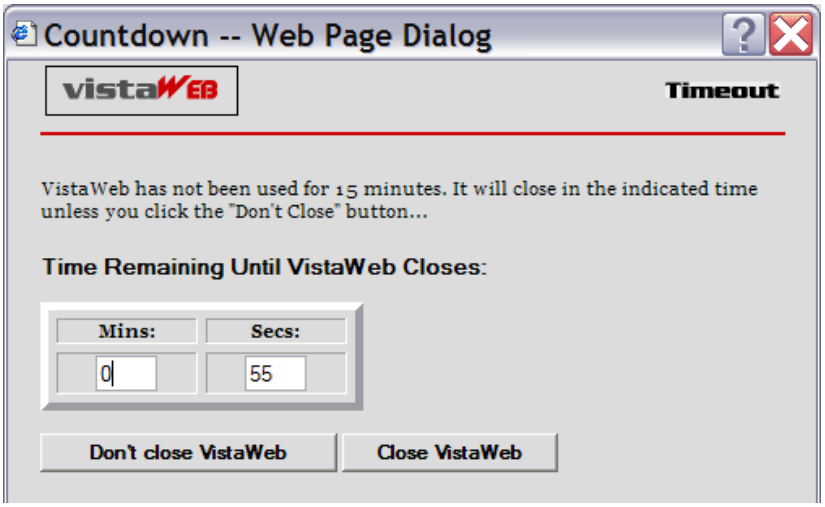
NOTE: Click on the Encounter Comments field to display/hide additional data where applicable

Date/Time - Count (4)	Encounter Type	Encounter Comments	Provider
Oct 27, 10	Inpatient encounter	--	[redacted]
May 10, 10	Inpatient encounter	--	[redacted]

VistAWeb Timeout

VistAWeb has a 15-minute inactivity timeout, which disconnects you from the current session if you don't respond to the 2-minute Web Page Dialog Countdown. Click the *Don't close VistAWeb* button to reset the timer to 15 minutes. Click the *Close VistAWeb* button to exit VistAWeb immediately.

Figure 67: VistAWeb Timeout Dialog Box



If you allow VistAWeb to timeout, the following Microsoft Internet Explorer dialog box is displayed telling you that VistAWeb is trying to close the window. If you click the No button, an empty Internet Explorer window will remain. If you want to continue to use VistAWeb, you will have to reestablish your connection, and since VistAWeb will bring up the new session in a new window anyway, you should click the Yes button to eliminate this empty window.

Figure 68: Internet Explorer Close Dialog

Under some circumstances, VistAWeb will cease operations. This is usually related to running a standalone session and a spawned session of VistAWeb at the same time. When this occurs, you will be presented one of the following messages indicating an appropriate course of action for you to pursue (Figure 72 and Figure 73).

Figure 69: Empty Session Message – Rerun VistAWeb

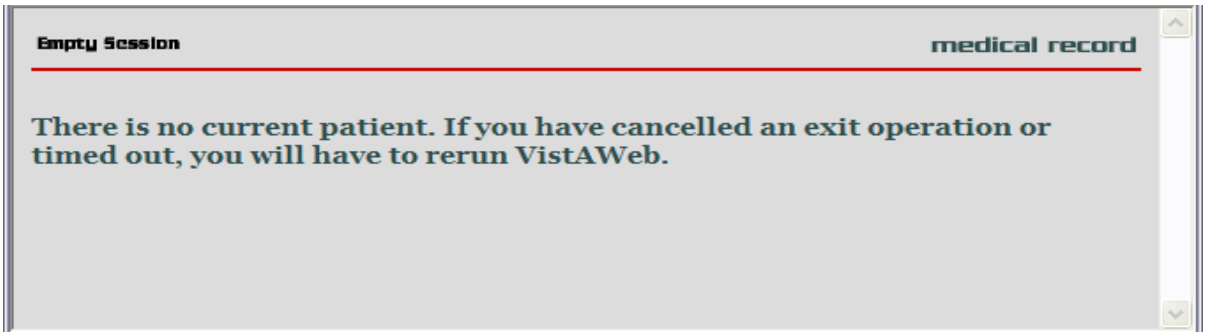
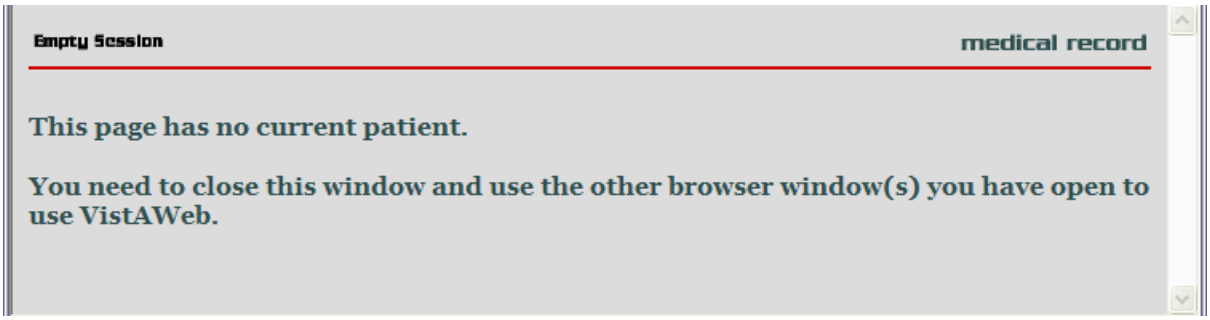


Figure 70: Empty Session Message – Use a Different Browser Window



Glossary: Acronyms, Abbreviations, and Definitions

Term	Definition
2D	2 Dimensional
3D	3 Dimensional
AWIV	Advanced Windows Imaging Viewer
BHIE	Bidirectional Health Information Exchange
CCOW	Clinical Context Object Workgroup
CDS	Clinical Data Service
CHDR	Clinical Data Repository (DoD) – Health Data Repository (VHA)
CPRS	Computerized Patient Record System
DoD	Department of Defense
FHIE	Federal Health Information Exchange
GUI	Graphical User Interface
HDR	Health Data Repository
HDR II	Health Data Repository II – final stage of project to develop and deploy an HDR
HDR-Hx	Health Data Repository-Historical
HDR-IMS	Health Data Repository-Interim Messaging Solution
HITSP	Healthcare Information Technology Standards Panel
HL7	Health Level 7
HT	Home Telehealth
IE	Internet Explorer (Microsoft)
IHS	Indian Health Service
IRM	Information Resource Management
ISO	Information Security Officer
JPTA	Joint Patient Tracking Application
LHR	Legal Health Record
MPI	Master Patient Index
NwHIN	Nationwide Health Information Network
RDV	Remote Data View
RPC	Remote Procedure Call
URL	Uniform Resource Locator (internet address)
VA	Department of Veterans Affairs
VAMC	Department of Veterans Affairs Medical Center
VHA	Veterans Health Administration
VISN	Veterans Integrated Service Network
VistA	Veterans (Health) Information Systems and Technology Architecture
VTA	Veteran Tracking Application

Definitions

http://vaww.oed.wss.va.gov/process/Library/master_glossary/masterglossary.htm

Term	Definition
Application Coordinator	Designated individuals responsible for user-level management and maintenance of an application package, such as CPRS or Laboratory. Also abbreviated as ADPAC (Automated Data Processing Application Coordinator) or CAC (Clinical Application Coordinator)
Austin Information Technology Center (AITC)	The AITC (a.k.a. Austin Automation Center (AAC)) provides comprehensive e-government solutions to match the critical needs of VA and other federal agency customers, from managing data to automating business processes. The AITC supports over 100 customer applications that provide mission\ critical data for financial management, payroll, human resources, logistics, medical records, eligibility benefits and supply functions.
Business Owner	A key stakeholder (individual or entity) that is accountable for the business outcomes for a particular existing or new Information Technology (IT) system and has the final authority on project scope, deliverables, quality, risks, and change management processes.
C32	NwHIN Health Summary documents. ***HITSP definition:*** The HITSP Summary Documents Using HL7 Continuity of Care Document (CCD) Component describes the document content summarizing a consumer's medical status for the purpose of information exchange. The content may include administrative (e.g., registration, demographics, insurance, etc.) and clinical (problem list, medication list, allergies, test results, etc) information. This specification defines content in order to promote interoperability between participating systems.
C62	NwHIN Clinical Note documents. ***HITSP definition:*** The HITSP Unstructured Document Component is provided for the capture and storage of patient identifiable, unstructured document content, such as text, PDF, and images rendered in PDF. It is based on the Cross-Enterprise Sharing of Scanned Documents (XDS-SD) Integration Profile from the Integrating the Healthcare Enterprise (IHE) IT Infrastructure Technical Framework (ITI-TF).
Computerized Patient Record System	The Computerized Patient Record System (CPRS) is a VistA application that enables users to enter, review, and continuously update all the information connected with any patient. In addition, CPRS supports clinical decision-making, with order-checking, alerts, clinical reminders, and patient record flags.

Data Standardization Program	The development, adoption, implementation, and verification of standard terminology within VA software applications to promote interoperability of patient record data between VA and non-VA healthcare providers and to ensure that clinical decisions are based on each patient's entire medical record. Program scope includes standard clinical and administrative terminologies for both current and future VA software applications. (Also see data standardization.)
Domain	Medical areas such as Allergies, Consults, Notes, Laboratory, Medical Procedures, etc. An area of knowledge or activity characterized by a family of related systems. An area of knowledge or activity characterized by a set of concepts and terminology understood by practitioners in that area.
Double dagger (‡)	The double dagger is a symbol that is displayed next to VistAWeb domains to indicate that NwHIN (non-VA) data is available.
Enterprise System Engineering (ESE)	ESE replaces Testing Service, IVV, and Enterprise Infrastructure Engineering (EIE)
Federal Health Information Exchange (FHIE)	The Federal Health Information Exchange (FHIE) Program is a Federal IT health care initiative that facilitates the secure electronic one-way exchange of patient medical information between Government health organizations. The project participants are the Department of Defense (DoD) and the Department of Veterans Affairs (VA).
Healthcare Information Technology Standards Panel (HITSP)	The Healthcare Information Technology Standards Panel is a cooperative partnership between the public and private sectors. The Panel was formed for the purpose of harmonizing and integrating standards that will meet clinical and business needs for sharing information among organizations and systems.
Health Data Repository	A repository of clinical information normally residing on one or more independent platforms for use by clinicians and other personnel in support of patient-centric care. The data is retrieved from heritage, transaction-oriented systems and is organized in a format to support clinical decision-making in support of patient care. Formerly known as Clinical Data Repository.
HL7	Health Level Seven is one of several American National Standards Institute (ANSI) -accredited Standards Developing Organizations (SDOs) operating in the healthcare arena.
Initial Operating Capability (IOC) Testing	Initial Operating Capability (IOC) Testing (formerly known as field testing) is when a product/system that has been modified/enhanced is placed into a limited production (live) environment, which includes a minimum of three test sites of varying size/complexity, in order to test the new features and functionality of the product/system and to ascertain if the features and functionality perform as expected and do not adversely affect the existing functionality of the product/system.

Requirements	User needs that trigger the development of a program, system, or project. Requirements may be business, functional, and/or system needs. They are documented in detail in the Requirements Specifications Document (RSD) document.
Subject Matter Experts (SME)	Persons representing application development/functional requirements.
User Acceptance Testing (UAT)	UAT is a type of acceptance test that involves end-users as testers. User Acceptance Test (1) exercises the functionality of the application using test data in a controlled test environment and (2) evaluates the usability of a component or system. The Program Manager may invite Product Support to participate in this evaluation.
Veterans Health Administration (VHA)	VHA facilities are divided into geographical regions called VISNs. In the 1990s VHA organized into 22 administrative VISN regions. VISN 20 services veterans in Alaska, Idaho, Oregon and Washington. However each individual facility continued to maintain its own clinical database (VISTA); the databases were not integrated as a VISN. In 1997-98 VISN 20 began an initiative called CHIPS, to develop a VISN wide information system for decision support, performance measuring and population studies.
VHA Health Information Model (VHIM)	VHIM is an enterprise-wide initiative developed to guide the re-engineering of VHA systems. It is a UML-based model that classifies and represents data elements, including their relationships and constraints. The VHIM mitigates risk of project failure by creating standardized service payloads that all systems will understand. It is a computationally independent model, meaning it can be transformed to different implementations – such as XML, Java, Delphi, etc. It is the authoritative source for semantics and information structure for VHA.
Veterans Health Information Systems And Technology Architecture (VISTA)	1. A term used to describe the VA's health care information system. It encompasses in-house developed applications developed by VA staff (see Decentralized Hospital Computer Program), office automation applications, locally developed applications and commercial-off-the-shelf applications. 2. VISTA is the largest healthcare system in the world and is extremely complex. The majority of the historical VISTA documentation is out of date and does not provide the detailed information needed by development teams. The development of the current VISTA environment occurred by evolution and was triggered by needs; it was not designed as a whole system. Therefore, the software code, relationships, data structure, and infrastructure were developed incrementally, in individual applications and functions, and are very interdependent.