

Clinical Case Registries (CCR)

Version 1.5



Release Notes

Documentation Revised September 2011
For Patch ROR*1.5*15

**Department of Veterans Affairs
Office of Enterprise Development
Health Data Systems – Registries**

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Revision History

Date	Description	Author	Role
September, 2011	Final release for Patch ROR*1.5*15. See Table 1 for Details.	John Sanders Connie Ray Linda Berry Edward Micyus Dan Zaudtke	Project Manager M Developer Software Quality Assurance Analyst Delphi Developer Tech Writer
March, 2011	Patch ROR*1.5*14. See <i>User Manual</i> for details.	Vida Dunie Angela Saunders Linda Berry Ed Micyus	Tech Writer M Developer Software Quality Assurance Analyst Delphi Developer
September, 2010	Final release for Patch ROR*1.5*13. See <i>User Manual</i> for details.	Kenneth Rikard	Project Manager
April, 2010	Final release for Patch ROR*1.5*10: See <i>User Manual</i> for details.	Edward Micyus Angela Saunders Linda Berry VJ McDonald	Delphi Developer M Developer Software Quality Assurance Analyst Technical Writer
July, 2009	Patch ROR*1.5*8: See <i>User Manual</i> for details.	Kenneth Rikard Edward Micyus Victor Carr Angela Saunders Linda Berry VJ McDonald	Project Manager Delphi Developer M Developer M Developer Software Quality Assurance Analyst Technical Writer
July, 2008	Patch ROR*1.5*7: See <i>User Manual</i> for details.	(unknown)	
May, 2008	Patch ROR*1.5*6: See <i>User Manual</i> for details.	(unknown)	
March, 2008	Patch ROR*1.5*5: See <i>User Manual</i> for details.	(unknown)	
December, 2007	Patch ROR*1.5*4: See <i>User Manual</i> for details.	(unknown)	
November, 2007	Patch ROR*1.5*3: See <i>User Manual</i> for details.	(unknown)	
October, 2007	Patch ROR*1.5*2: See <i>User Manual</i> for details.	(unknown)	
October 2006	Patch ROR*1.5*1: See <i>User Manual</i> for details.	Christine Beynon	
February 2006	Completely updated for CCR Version 1.5	Christine Long	
June 2002	Initial release of CCR Version 1.0	(unknown)	

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1.0 Introduction

The Clinical Case Registries (CCR) software application collects data on the population of veterans with certain clinical conditions, namely Hepatitis C and Human Immunodeficiency Virus (HIV) infections.

Data from the registries is used for both clinical and administrative reporting on both a local and national level. Each facility can produce local reports (information related to patients seen in their system). Reports from the national database are used to monitor clinical and administrative trends, including issues related to patient safety, quality of care, and disease evolution across the national population of patients.

The software uses pre-defined selection rules that identify patients with possible Hepatitis C and/or HIV (such as a disease related *International Statistical Classification of Diseases and Related Health Problems*, ninth edition—commonly abbreviated as “ICD-9”—code or a positive result on an antibody test) and adds them to the registry in a pending state. Pending patients are reviewed by the local registry coordinator and if the data confirm the diagnosis, the local registry coordinator confirms the patient in the registry.

Each night a background process transmits a set of predefined data via [Health Level 7 \(HL7\)](#) message to the national CCR database at the [Corporate Data Center Operations \(CDCO\)](#). Data from both the Hepatitis C and HIV registries are aggregated in the same message. If there is more new data than is allowed by the registry parameter for a single CCR HL7 batch message (the current limit is 5 megabytes), the software will send several messages during a single night. The CCR software creates a limited set of database elements to be stored locally in the [Veterans Health Information Systems and Technology Architecture \(VistA\)](#) system, and focuses on assuring that the local listing is complete and accurate, that the desired data elements are extracted, and that data elements are appropriately transmitted to the national database.

The registries at each facility will store selected HIV and Hepatitis C data from 1985 to the present.

CCR provides these key features:

- Automates the development of a local list of patients with evidence of HIV or Hepatitis C infection.
- Automatically transmits patient data from the local registry lists to a national database.
- Provides robust reporting capabilities.

CCR also provides the following functions:

- Facilitates the tracking of patient outcomes relating to treatment.
- Identifies and tracks important trends in treatment response, adverse events, and time on therapy.
- Monitors quality of care using both process and patient outcome measures.

2.0 What's New with ROR*1.5*15

Patch ROR*1.5*15 includes maintenance and enhancement modifications to version 1.5 of the Clinical Case Registries (CCR) application that correct inherent shortcomings in the existing software and enhance other existing capabilities. ROR*1.5*15 contains the following enhancements (E), modifications (M) and fixes (F):

Table 1 – Changes for Patch 15

#	Description	Type
1	Three new HCV generic Drugs, Telaprevir, Boceprevir and Rilpivirine were approved by the FDA in May, 2011. These three medications have been added to the ROR GENERIC DRUG (#799.51) file and can now be selected on reports to provide information about the patients who are taking the new medications.	E
2	The Renal Function by Range Report has been enhanced to include a new option for calculating the eGFR called the CKD-EPI equation. The CKD-EPI GFR is an estimate of glomerular filtration (GFR) using serum creatinine and demographic factors. It is a relatively new equation that is believed to be superior to the MDRD GFR equation. If selected, the CKD-EPI scores are summarized on the report by chronic kidney disease stage	E
3	The result ranges panel on the Renal Function by Range report will include a note that reads, "Lab tests used to calculate renal function are identified by LOINC code. Your local lab ADPAC should be contacted regarding errors in LOINC codes."	M
4	The header on the Renal Function by Range report currently reads, "Lab tests used to calculate Cockcroft-Gault and/or eGFR by MDRD scores are identified by LOINC code." This text will be updated to read, "Lab tests used in calculations are identified by LOINC code."	M
5	The cover sheet text of the Renal Function by Range report will be amended to include the list of LOINC codes that are used. The new text on the Renal Function by Range report will read, "Lab tests used to calculate scores are identified by LOINC code. Your local lab ADPAC should be contacted regarding errors in LOINC codes."	E
6	The Liver Score by Range report has been modified to display only those tests used in the calculation of the liver scores selected by the user. If the user selects the APRI and/or FIB4 tests, then the Bili, Cr, INR, and Na rows should not appear on the report. If the user selects the MELD and/or MELDNA tests, then the AST, Platelet, and ALT rows should not appear on the report.	M
7	The result ranges panel on the Liver Score by Range report will include a note that reads, "Lab tests used in calculations are identified by LOINC code. Your local lab ADPAC should be contacted regarding errors in LOINC codes."	M

#	Description	Type
8	Users may now use Diagnosed at this VA as a local field. This is a CCR:HIV only option.	E
9	Users may now type ?? or click the All Divisions button to display all Divisions in the left-hand pick box.	E
10	The CDC Form has been modified to correct the transposition of check box values for the Bisexual male and Intravenous/injection drug user questions.	F
11	The CDC Form has been modified to check the appropriate checkbox if the user selects 'yes' to the question Received Clotting Factor for Hemophilia/Coagulation disorder.	F
12	An invalid date check and error message have been added for the question, Received transfusion of blood/blood components (other than clotting factor) on the Risk Factors tab in the Patient Editor.	E
13	A future date check and error message have been added for the question, Received transfusion of blood/blood components (other than clotting factor) on the Risk Factors tab in the Patient Editor.	E
14	A future date check and error message have been added for the question, Did the patient ever have an AIDS OI? on the Clinical Status in the Patient Editor.	E
15	An historical data extraction for Non-VA Meds has been added to the ROR HISTORICAL DATA EXTRACTION file (#799.6) for automatic execution during the next nightly extract.	E
16	The Date Range panels (Date Range, Medications Date Range, Lab Tests Date Range and Utilization Date Range) were re-designed for easier use with Assistive Technology.	M

Table 2 – Global Updates for Patch ROR*1.5*15

File Name and Number	Update
ROR LIST ITEM (#799.1)	New entries "eGFR by CKD-EPI," "eGFR by CKD-EPI"
ROR XML ITEM (#799.31)	New entries "HIV_DX," "MDRD," "CKD," "NPMDRD" and "NPCKD" are added to the file.
ROR GENERIC DRUG (#799.51)	New entries "Telaprevir," "Boceprevir"
DIALOG (#.84)	7981020.001 Renal Function by Range (HTML) 7981020.002 Renal Function by Range (CSV) 7981998.001 CSS and Scripts

3.0 Obtaining Software and Documentation

The CCR 1.5 software distributives and documentation files are available for downloading from the following Office of Information Field Offices (OIFO) [ANONYMOUS SOFTWARE] directories.

Table 3 – Software and Documentation Sources

OIFO	FTP Address	Directory
Albany	ftp.fo-albany.med.va.gov	ANONYMOUS . SOFTWARE
Hines	ftp.fo-hines.med.va.gov	ANONYMOUS . SOFTWARE
Salt Lake City	ftp.fo-slc.med.va.gov	ANONYMOUS . SOFTWARE

Table 4 – Files Included in Distribution

File Name	Contents	Retrieval Format
ROR1_5P15GUI.ZIP	Zipped GUI distributive	BINARY
ROR1_5P15DOC1.ZIP	Zipped DOC distributive, which includes both .PDF and .DOC formats: ▶ User Manual (ROR1_5_15UM)	BINARY
ROR1_5P15DOC2.ZIP	▶ Installation and Implementation Guide (ROR1_5_15IG) ▶ Technical Manual / Security Guide (ROR1_5_15TM) ▶ Release Notes (ROR1_5_15RN)	BINARY

Patch ROR*1.5*15 is available in the National Patch Module on FORUM¹ as a PackMan message.

¹ FORUM is the VA’s national-scale email system. FORUM uses the VistA mail software and provides an excellent interface for threaded messages that can take the form on ongoing discussions. The national patch module is a VistA application that helps developers to manage the numbering, inventory, and release of patches. Patches are developed in response to request submissions and an error reporting request system known as National Online Information Sharing. A process called the Kernel Installation Distribution System (KIDS) is used to roll up patches into text messages that can be sent to sites along with installation instructions. The patch builds are sent as text messages via email, and the recipient (*e.g.*, a site administrator) can run a PackMan function to unpack the KIDS build and install the selected routines.

See <http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.100.5551&rep=rep1&type=pdf>

4.0 VistA Documentation on the Intranet

Documentation for this product, including all of the software manuals, is available in the VistA Document Library (VDL). The Clinical Case Registries documentation may be found at <http://www.va.gov/vdl/application.asp?appid=126>.

For additional information about the CCR, access the CCR Home Page at the following address: <http://VistA.med.va.gov/ClinicalSpecialties/CCR/>.

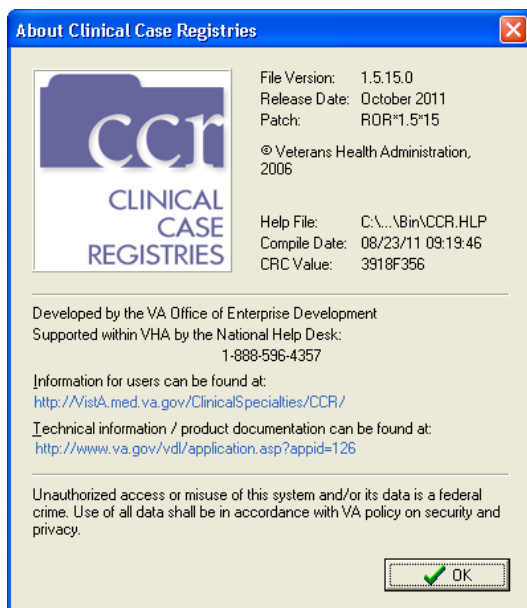
Training links and information are also available at <http://vaww.VistAu.med.va.gov/VistAu/CCR/>.

5.0 Specific Instructions

(See the *CCR Installation and Implementation Guide* for installation instructions.)

6.0 Matching GUI Version to Patch

WARNING If the **GUI** and **VistA** software versions do not match, users may encounter problems with the application. For example, if the site has installed Patch ROR*1.5*15, users' **GUI** installations should also be at Patch level 15. Users can determine the **GUI** version by using the Help | About CCR menu option.



This menu option displays the **About Clinical Case Registries** pane. It shows basic information about the current file version including the release date, patch number, similar to the screen shown here where the Clinical Case Registries software was developed and the software compile date. Click **[OK]** or press the **< Esc >** key to close the pane.

Since CCR 1.5.10, this window meets current VA GUI Standards and Conventions requirements.

Users may download the latest GUI software as outlined in [3.0 above](#).

Figure 1 – Help | About Pane

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