



MENTAL HEALTH ASSISTANT
VERSION 3 (MHA3)
USER MANUAL

PATCH YS*5.01*103

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**Department of Veterans Affairs
Office of Information and Technology (OIT)
Product Development**

Revision History

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Preface

The Mental Health Assistant Version 3 (MHA) User Manual for Patch YS*5.01*103 provides the Department of Veterans Affairs Medical Center (DVAMC) Information Resource Management (IRM) staff and other DVAMC users with a straightforward means for implementing and utilizing the MHA software application. Detailed instructions, functional requirements, and examples for using the MHA are illustrated in this user manual.

NOTE: The Veterans Health Administration (VHA) fully supports Section 508 of The Rehabilitation Act and is committed to equal access for all users. While every effort has been made to ensure Section 508 compliance, we realize that there may be other issues. If you have questions or would like to see a copy of the Compliance Action Plan for future releases, please contact:

Heather Lewis, IT Project Manager
VACO
1-13 Christopher Way
Suite 3
Eatontown, NJ 07724
Phone # (732) 440-9632
email: heather.lewis@va.gov

NOTE: The text that describes screen captures is written in support of Section 508 compliance and always starts with “Examples:” in bold. Commands to utilize options are bolded.

Intended Audience

The intended audience for the MHA User Manual includes mental health clinicians, primary care clinicians, clerks, and patients.

Mental Health Assistant Version 3 User Manual Sections

The table of contents provides road map and page numbers for the information contained in this User Manual. As a redundant overview, the Mental Health Assistant Version 3 (MHA) User Manual for Patch YS*5.01*103 contains the following sections:

Preface: This section provides an overview of the manual.

Orientation: This section addresses package or audience specific notations or directions.

Table of Contents (TOC): The TOC provides references to major chapters and/or sections of the user manual.

Introduction: This section conveys the major functions, purposes, and how the software accomplishes the objectives.

Use of the Software: This section describes what the user needs to know in order to competently operate the MHA software application, including screen captures examples.

Glossary: This section contains the glossary of terms that are related to the MHA software application.

Appendix A: This section contains a list of shortcut keys use in the Mental Health Assistant.

Appendix B: Instructions on co-signing a progress note generated by MHA.

Appendix C: Procedures are described to remove data that were entered in error.

Appendix D: SecureDesktop (a MHA security application for patient data-entry) and Screen Pass (a screensaver security application) may require Windows Registry adjustments to work together.

Appendix E:

Appendix F: Instructions on adding an instrument's name to the CPRS Tool menu.

Acknowledgements

In support of Veterans Health Administration (VHA) Office of Information mission to provide exceptional Information Technology services to support the delivery of the best health care to veterans, the Mental Health Enhancements (MHE), MHA Development Team would like to acknowledge the following dedicated employees for their collaboration in designing, developing, and testing of the MHA software application:

Mental Health Enhancements, MHA Development Team

Daniel Carroll, Program Manager

Vickey L. Elijah, Software Quality Analyst

Heather Lewis, Project Manager

Richard Fischer, Project Manager

Roger Schultz Ph.D., Psychologist/Delphi Programmer

Vaughn Smith, 2nd M Programmer

Frank Traxler, M Programmer

Kevin Voorhees, Project Planner

Office of Mental Health Services, Informatics Section

Allan Finkelstien, Ph.D., Psychologist/M Programmer

Kathleen Lysell, Psy.D., Psychologist/Office of Mental Health Services, Chief Consultant

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Orientation

Documentation Retrieval Locations and Formats

Retrieval Formats Information

FILE NAMES	CONTENTS	RETRIEVAL FORMATS
YS501103_MHA3_UM.pdf	Mental Health Assistant Version 3 (MHA3) User Manual Patch YS*5.01*103	BINARY
YS501103_MHA3_UM.docx	Mental Health Assistant Version 3 (MHA3) User Manual Patch YS*5.01*103	BINARY

Retrieval Locations:

User Manuals (i.e., YS501103_MHA3_UM.pdf and YS501103_MHA3_UM.doc) are available in MS Word Format (doc) and Portable Document Format (pdf) at the Office of Information Field Offices (OIFOs) ANONYMOUS SOFTWARE directory FTP addresses listed below:

NOTE: All sites are encouraged to use the File Transfer Protocol (FTP) capability. Use the FTP address “*download.vista.med.va.gov*” (without the quotes) to connect to the first available FTP server where the files are located.

OI FIELD OFFICE	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]

VistA Website Locations:

User Manuals (i.e., YS501103_MHA3_UM.pdf and YS501103_MHA3_UM.docx) are available in MS Word Format (docx) and Portable Document Format (pdf) at the following Website location:

VISTA DOCUMENTATION LIBRARY (VDL):

<http://www.va.gov/vdl/>

Related Manual

VistA Mental Health (MH) Addiction Severity Index Multimedia Version (ASI-MV) Installation and User Guide (Patch YS*5.01*78).

Introduction

Overview

The Mental Health Assistant (MHA) is the graphical user interface (GUI) for the VistA Mental Health Package (MHP). MHA was developed to create an effective and efficient tool for mental health clinicians, primary care clinicians and their patients to use for the administration and scoring of assessment instruments and interviews. Additionally, results are displayed in report and graphical formats. MHA and MHP support mental health instruments (e.g., psychological tests, structured interviews, and staff rating scales), pain assessments, nursing assessments, and additional instruments, that are not available elsewhere in the Computerized Patient Record System (CPRS)/Veterans Information System and Technology Architecture (VistA). MHA has enjoyed widespread usage among mental health clinicians over the past several years, and the current revisions of MHA and MHP initiate steps toward re-engineering VistA Mental Health functionality.

The original revision of MHA created a closer integration with CPRS, by placing the MHA GUI on the CPRS Tools Menu. Additionally, functionality was created to allow a site to place an individual instrument on the CPRS Tools menu, allowing widespread access to that specific instrument without having to issue the menu for the MHP to all clinicians.

Additional functionality that strengthens the tie to the patient's medical record is the creation of a progress note in CPRS when an instrument is completed through MHA.

Furthermore, MHA maintains and strengthens its ties to the Clinical Reminders program, which allows for the presentation of specific instruments through reminder dialogs to all clinicians who resolve reminders.

To better meet the needs of clinicians and patients in different programs, particularly non-traditional settings, MHA can now run in a stand-alone mode to administer instruments offline for later uploading to VistA.

This version of MHA has added 20 new instruments to its library of instruments and has returned two retired instruments to active status (indicated by bold).

ASSIST – Alcohol, Smoking and Substance Involvement Screening Test
BAM – Brief Addiction Monitor
BASIS-24 - Behavior and Symptom Identification Scale
CDR – Clinical Dementia Rating Scale
CIWA AR – Clinical Institute Withdrawal Assessment - Alcohol Revised
COWS – Clinical Opiate Withdrawal Scale
FAST – Functional Assessment Staging
GAD 7 – Generalized Anxiety Disorder, 7 items
GDS – Geriatric Depression Scale
GDS DEMENTIA – Global Deterioration Scale
INDEX OF ADL – Katz Index of Independence in Activities of Daily Living
ISMI – Internalized Stigma of Mental Illness Inventory
NEOPI – Revised NEO Personality Inventory

PAI – Personality Assessment Inventory

PCLS-SZ – PTSD Checklist Stressor Specific

POQ – Pain Outcomes Questionnaire

SBR – Suicide Behavior Report

SLUMS – Saint Louis University Mental Status Examination

WAI-SR – Working Alliance Inventory-Short Revised

WHYMPI – West Haven-Yale Multidimensional Pain Inventory

ZBI SCREEN – Zarit Burden Interview: Screening version

ZBI SHORT – Zarit Burden Interview: Short version

The following enhancements are part of this version:

- Improve navigation by providing users a simpler option to go back to a previous screen in the Mental Health Assistant. An example would be something similar to the back arrow in Internet Explorer. Users are confused with clicking on “X” in upper right-hand corner of form (usually this action would terminate an application) to backup in the current version or the several steps needed to click on the FILE|EXIT menu option.
- Ability for users to select a consult to connect to the instrument’s administration is now supported.
- Users can print a blank instrument suitable for pencil-and-paper completion (except for the ASI and restricted instruments).
- A new tab on the “Instrument Review Results” page presents summary data of important instruments for the clinician.
- MHA can start at one of the four main options, i.e., Instrument Administrator, Instrument Review Results, ASI Manager or GAF Manager, or at the traditional Main Menu. The user can select their preference.

Test Sites

Patch YS*5.01*103 has been tested by the following Veteran Affairs Medical Centers (VAMCs) and Healthcare Network Systems (HCS):

Test Sites/Integrated	Operating System Platform	Test Site Size
Atlanta, GA VAMC	Cache/VMS	Large
Upstate New York HCS	Cache/VMS	Large/Integrated
St. Louis (Heartland East HCS)	Cache/VMS	Large/Integrated
Durham, NC	Cache/VMS	Large
Hines, IL VAMC	Cache/VMS	Large

Use of the Software

This section describes what is needed to successfully use the new **Mental Health Assistant**, Version 3 (MHA) software application for the following activities:

- Instrument Administrator
- Instrument Results Review
- Addition Severity Index (ASI) Manager
- Global Assessment of Manager (GAF)

Contingency Planning

Each facility using the MHA software application **must** develop a local contingency plan to be used in the event of application problems in a live environment. The facility contingency plan **must** identify procedures used for maintaining the functionality provided by the software in the event of a system outage.

Security Keys

MHA software application did not release any new security keys. The YSP security key is still required to control access to the results of “non-exempt” instruments. While anyone may administer a “non-exempt” instrument, only psychologists with the YSP security key may view the results. Holders of the YSP security key are determined by the Chief of Psychology or a senior psychologist at a facility that does not have a Chief of Psychology. The Chief of Psychology or senior psychologist also determines which tests are “exempt” (i.e., the results can be seen by anyone), and which are “non-exempt” (i.e., require the YSP key to see the results).

Windows Conventions

The startup, setup, and assignment functions for MHA use a Graphical User Interface (GUI). The glossary provides examples and explanations of many Window conventions.

<p>NOTE: Please see Appendix A,(located in the back of this manual) for a revised list of MHA shortcut keys. The list can be removed from this manual for easy access and viewing.</p>
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Mental Health Assistant and Section 508 Compliance

MHA can detect when a screen reader is in use. As a result, many of the operations within MHA are changed to enhance the readability and operations for screen readers. For example, group boxes are given more elaborate captions to explain the functions of the next component that the user will tab in to. Graphs of results are not presented, but the data are available in table form when a screen reader is detected.

Since radio groups, which form most of the multiple-choice questions employed in instruments, are not handled well by screen readers such as JAWS, the radio groups are replaced by list boxes. List boxes are read by screen readers without difficulty. The text of the questions and answers are the same whether presented as a radio group or a list box.

This manual is written for those who do not use screen readers. Thus, many of the screen shots contained in this manual would not be accurate if a screen reader were in use.

Mental Health Assistant Temporary Crash Files

To prevent data loss resulting from MHA being improperly closed (e.g., power outage), MHA creates a **temporary crash file** on the local PC hard drive when instruments are in the process of being administered. This temporary crash-file is updated each time a response is made; therefore, the temporary crash-file is always current. Upon normal program closure, this temporary crash-file is erased. Each time MHA begins, it looks for the temporary crash-file on the PC hard drive. If it exists, the data in the temporary crash-file are uploaded to the VistA Mental Health Package (MHP) database so the user can restart the incomplete administration. No data that identifies the patient are contained in the crash file (e.g., name, SSN).

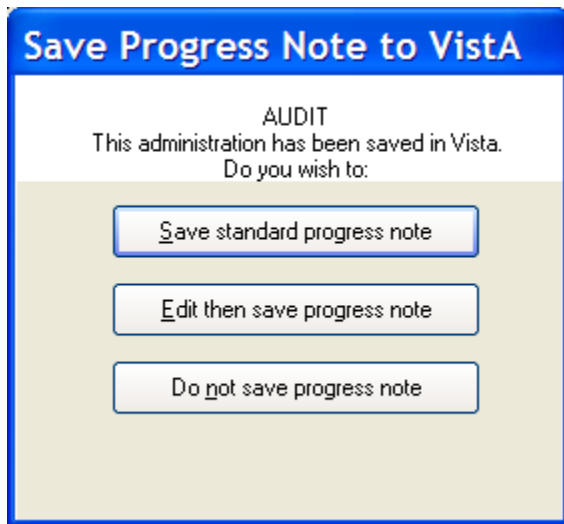
Mental Health Assistant Results and CPRS Progress Notes

Under normal circumstances and proper setup, the results of the instruments administered in MHA will become progress notes in CPRS.

If progress notes are not generated, the Clinical Applications Coordinator should be notified. If it does not already exist, create the progress note title of "Mental Health Diagnostic Study Note" in the progress note hierarchy. This is needed for MHA to automatically pass a note to CPRS from instrument administrations completed within MHA.

Some instruments do not generate progress notes because their results are to be viewed by designated staff; for example, the results of the Minnesota Multiphasic Personality Inventory, version 2, can only be viewed by psychologists who have the YSP key.

Example: The interviewer has the option to generate a progress note at completion of the AUDIT administration:



Mental Health Assistant Results and CPRS Consults

New to this version of MHA is the ability to create a Text Integration Utility (TIU) note containing the results of the instrument administered to the patient and linking it to a consult for that patient.

This patch requires the site to create a new TIU note title called MENTAL HEALTH CONSULT NOTE. If the user selects a consult from the dropdown list in the 'Link With Consult (optional)' box of the **Instrument Administrator** and completes an instrument, the MENTAL HEALTH CONSULT NOTE will be created and filed with the results of that instrument. The note will be linked to the consult selected. Only open consults are available for this process.

Mental Health Assistant version 2

The Mental Health Assistant, version 2, (MHA2) will be adversely impacted with the installation of this version of the Mental Health Assistant. MHA2 was released in Patch YS*5.01*71 in 2002. As with the Vista roll-and-scroll administrations of instruments in the Mental Health package, MHA2 could administer only legacy instruments (those in use before 2002) and would save the results of those administrations to files which are no longer being used. Further, those administrations are not collected in national databases for reporting and research purposes.

Users who start MHA2 will find that basic functions do not operate, such as when ordering an instrument to administer, a message would state that the Remote Procedure Call (RPC) is no longer valid. Essentially MHA2 is not operational as most of the needed RPCs have been retired.

NOTE: This release of the Mental Health Assistant should be the only version in use. It is recommended that MHA2 be removed from all workstations. It is usually located in the directory, C:\Program Files\Vista\YS\MHA.

Starting Mental Health Assistant

There are two ways to start Mental Health Assistant:

- VistA CPRS Tools Menu
- Off-line Mode

Starting Mental Health Assistant from VistA CPRS Tools Menu

The CPRS Tools menu is the standard way of connecting to the MHA software application. Since all MHA functionality is started and available to the user via the CPRS Tool menu, the CPRS software application **must** be installed on the PC workstation where Mental Health Assistant functionality is to be administered. The Mental Health Assistant software application is normally used by clinicians at VAMCs and VA satellite clinics where a “live” network connection to VistA is available. Most of the functionality described in this user manual assumes that the user is operating via the CPRS Tools menu.

NOTE: When the user’s VistA account is properly configured, there will be a **Mental Health Assistant** menu located on the CPRS Tools menu (as seen in the example below). If the **Mental Health Assistant** menu is missing from the CPRS Tools menu, users should contact their clinical coordinator to have it added.

To start CPRS software application **click** on the CPRS icon located on the Windows Desktop.

Example: CPRS icon located on the Windows Desktop.

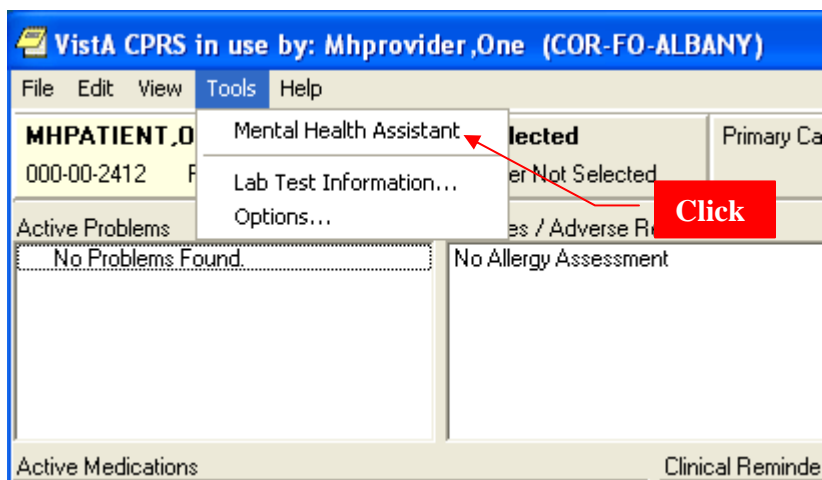


CPRSChart.Ink

Once the CPRS software application is started **click** on the CPRS drop-down list **Tools** menu to start **Mental Health Assistant**.

NOTE: If **Mental Health Assistant** asks users to logon to VistA again, users may contact their clinical coordinator to inquire about the availability of a Single Sign-on.

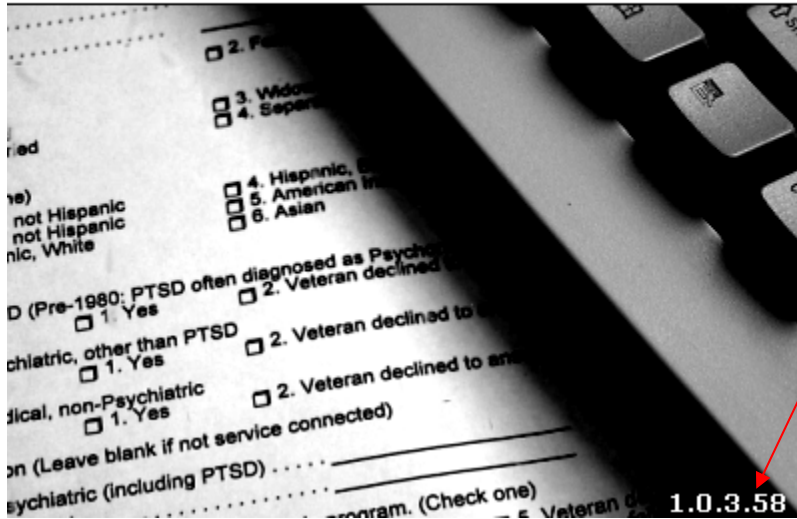
Example: CPRS drop-down list Tools menu displays **Mental Health Assistant**.



Click on the “Mental Health Assistant” menu item to start MHA. The splash screen is displayed briefly followed by MHA main menu.

Example: The Mental Health Assistant splash screen provides the version number of Mental Health Assistant.

Mental Health Assistant



Version Number

Example: Mental Health Assistant main menu



Starting Mental Health Assistant from Off-line Mode

Alternatively, off-line mode should be used only when the user and equipment are located at a remote site which has no means of connecting to the VistA network. The off-line mode starts only the smaller subset of the Mental Health Assistant functionality. This functionality handles administering instruments while not connected to VistA. To benefit from the work performed in the off-line mode, the user must eventually reconnect to the VistA network, at which time the off-line mode data is uploaded to the VistA database.

NOTE: Specific details about the Off-line mode are discussed later in this manual.

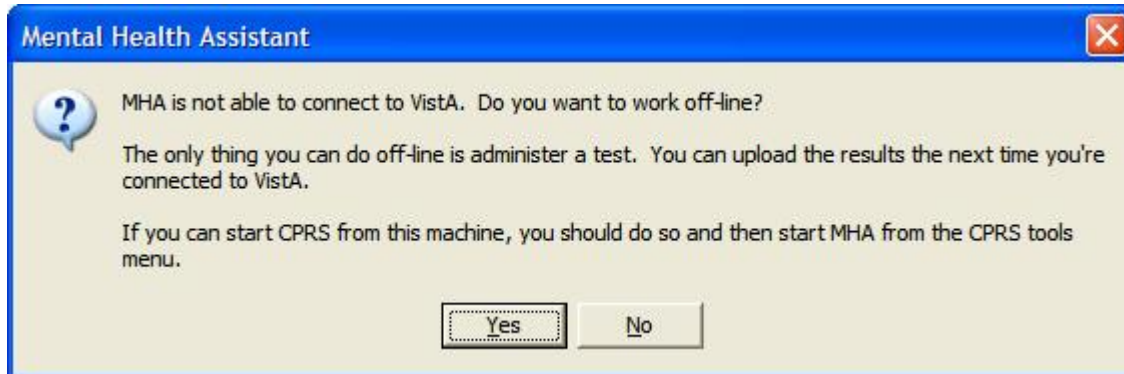
To start the **Mental Health Assistant** from the off-line mode **click** on the **Mental Health Assistant 3** icon located on the Windows Desktop.

Example: Mental Health Assistant 3 icon.



Click on the **Yes** command button located on the **Mental Health Assistant** dialog box to start the **Off-line mode** function.

Example: Mental Health Assistant dialog box.



Mental Health Assistant Main Menu Functions

The **Mental Health Assistant** main menu is the starting point for launching the four major activity areas in MHA:

- Instrument Administrator
- Instrument Results Review
- Addiction Severity Index Manager
- Global Assessment of Functioning Manager

Selected Patient Identification Label

The Selected Patient Identification label displays information about the currently-selected patient within MHA. All functions performed in MHA apply to this patient. This patient is the same as the one selected in CPRS and should remain synchronized with CPRS even when another patient is selected.

Title Bar

The Title Bar is used throughout MHA to display information about the context that applies to the current activity.

Launch Links

The launch links (i.e., Instrument Administrator, Instrument Results Review, Addiction Severity Index Manager, and Global Assessment of Functioning Manager) located on the **Mental Health Assistant** main menu function look very similar to links on a web page; however, MHA links do not invoke any web pages. Clicking on a launch link will start a new form that offers the user access to all the functions associated with that particular activity. Navigation is possible by pressing arrow keys. A highlighted, underlined link can be selected by pressing the return key.

Instrument Administrator

The Instrument Administrator launch link starts the Instrument Administrator activity where instruments are selected for administration. This is explained in detail later in this document.

Instrument Results Review

The Instrument Results Review launch link starts the Instrument Review activity, where results of previous administrations are visible.

Addiction Severity Index Manager

The Addiction Severity Index Manager launch link starts the ASI Manager activity where previous administrations and new administrations are handled.

Global Assessment of Functioning Manager

The Global Assessment of Functioning Manager link starts the GAF Manager where a GAF score can be entered, previous GAF's are visible and GAF criteria are quoted.

Starting the Instrument Administrator

To start the Instrument Administrator, **click** on the launch link “**Instrument Administrator**” located on the **Mental Health Assistant** main menu. It is also possible to press the “I” key, or the return key (when “Instrument Administrator” is highlighted and underlined) to display the Instrument Administrator form. After a brief pause, the Instrument Administrator form is displayed.

Example: Starting the **Instrument Administrator**.



Example: The **Instrument Administrator** form is used to select an instrument(s) and define administration parameters.

The screenshot shows a software window titled "Mental Health Assistant in use by MHPROVIDER, ONE". The window has a menu bar with "File", "Tools", and "Help". The main title is "Instrument Administrator" with a back arrow icon on the left and patient information "New, Outpatient SSN: xxx-xx-2333" on the right. The form is divided into several sections:

- Instruments Ordered By:** A dropdown menu with "MHPROVIDER, ONE" selected.
- Interviewer:** A dropdown menu with "MHPROVIDER, ONE" selected.
- Date of Administration:** A dropdown menu with "2/23/2011" selected.
- Visit Location:** A dropdown menu with "noncount" selected.
- Link With Consult (Optional):** A dropdown menu.
- Instructions:** A text box containing the text: "The presentation of instruments can be filtered: show all (no filter), only batteries, or only incomplete instruments."
- Available Instruments and Batteries:** A list of instruments with checkboxes and a "Show:" dropdown set to "All". The list includes: AIMS, ATQ, AUDC, AUDIT, AUIR, BAI, BDI2, BHS, BOMC, BPRS, BRADEN SCALE, and BSI.
- Instruments Chosen:** An empty list box with navigation arrows on the right.
- Display:** Radio buttons for "One Question at a Time" and "All Questions at Once" (selected). Buttons for "Patient Entry" and "Staff Entry" are also present.

Starting the Instrument Results Review Functions

To start the **Instrument Results Review** function, click on the **Instrument Results Review** text. You can also press the “R” key or the enter key when the text is highlighted. After a brief pause the Instrument Results Review form is displayed.

Example: Starting the **Instrument Results Review** form.



Example: The **Instrument Results Review** form is used to start the Instrument Results Review functions.

The screenshot shows a software window titled "Mental Health Assistant in use by MHPROVIDER, ONE". The window has a menu bar with "File", "Edit", "View", "Tools", and "Help". The main title bar reads "Instrument Results Review: AUDC" with a back arrow icon on the left and patient information "New, Outpatient" and "SSN: xxx-xx-2333" on the right.

The interface is divided into two main sections. On the left, under the heading "Instruments:", there is a table with the following data:

Date	Name
01/11/2011	AUDC
01/11/2011	BRADEN SCALE
01/11/2011	CAGE
01/11/2011	GAD-7

The right section displays the details for the selected "AUDC" instrument. The text is as follows:

Alcohol Use Disorders Identification Test Consumption (AUDC)

Date Given: 01/11/2011
 Clinician: Mhprovider,One
 Location: noncount

Veteran: New, Outpatient
 SSN: xxx-xx-2333
 DOB: Jan 1,1901 (110)
 Gender: Male

AUDC Score: 0 points
 In men, a score of 4 or more is considered positive; in women, a score of 3 or more is considered positive.

Questions and Answers

- How often did you have a drink containing alcohol in the past year?
Never
- How many drinks containing alcohol did you have on a typical day when you were drinking in the past year?
Not asked (patient reports no drinking in past year)
- How often did you have six or more drinks on one occasion in the past year?
Not asked (patient reports no drinking in past year)

Information contained in this note is based on a self report assessment and is not sufficient to use alone for diagnostic purposes. Assessment results should be verified for accuracy and used in conjunction with other diagnostic activities.

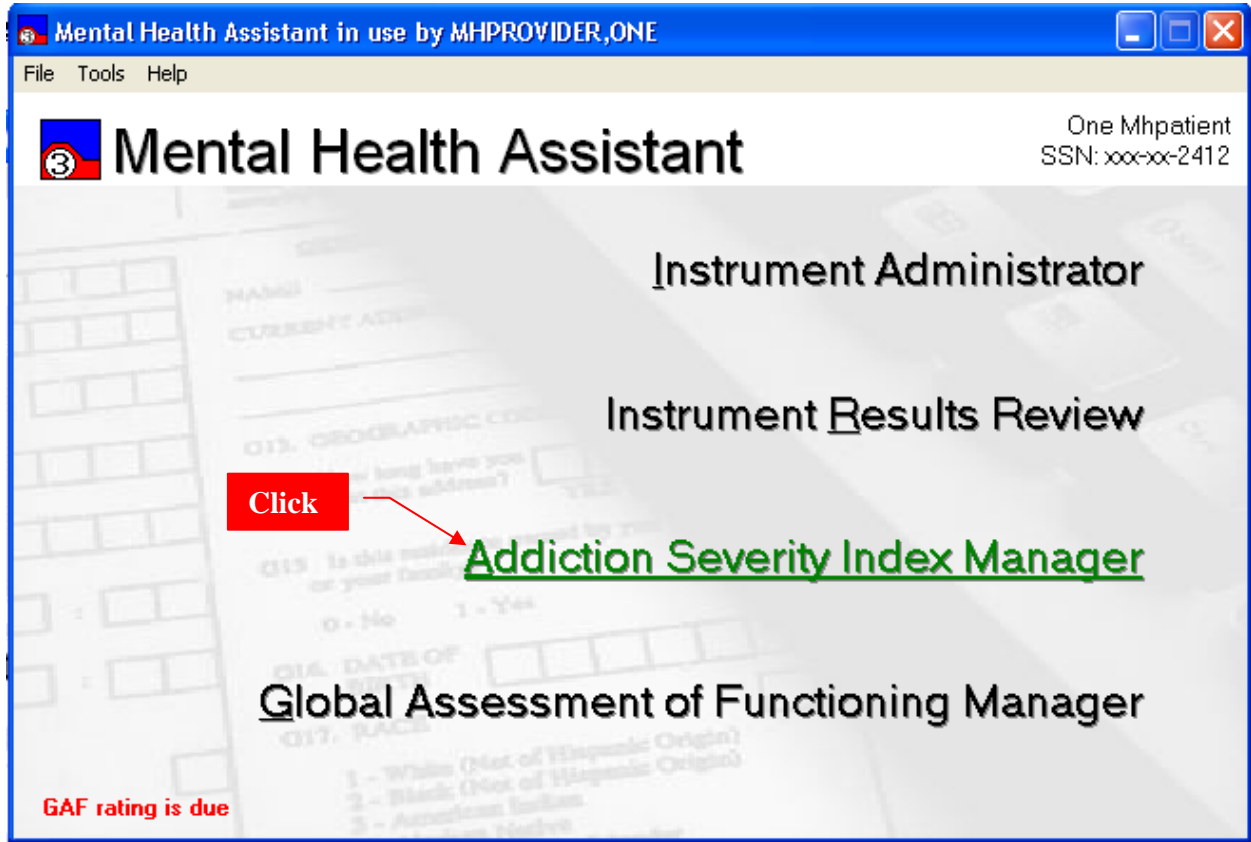
Total score: 0 points, which is a negative result.

At the bottom of the window, there are three tabs: "Reports", "Graph & Table", and "Special Results".

Starting the Addiction Severity Index Manager Function

To start the **Addiction Severity Index Manager**, click on the text **Addiction Severity Index Manager** or press the “A” key, or press the enter key when the text is highlighted. After a brief pause, the Addiction Severity Index Manager form is displayed.

Example: Starting the **Addiction Severity Index Manager** form.



Example: The **Addiction Severity Index Manager** form.

Mental Health Assistant in use by MHPROVIDER,ONE

File Edit View Tools Help

Addiction Severity Index Manager Mhpatient, One
SSN: xxx-xx-4444

New Edit Sign

Previous ASI

Date	Type	Ordered By	Status	Signed
4/22/2011	FULL	MHPROVIDER,ONE	Incomplete	False
4/21/2011	FULL	MHPROVIDER,ONE	Incomplete	False
2/18/2011	LITE	FINKELSTEIN,ALLAN	Pt Refused	True
4/22/2010	FULL	MHPROVIDER,ONE	Unable to respond	False
4/22/2009	FULL	MHPROVIDER,ONE	Incomplete	False

18 days since last ASI

MHPATIENT,ONE 666-11-4444 ASI FULL on 04/22/2011 by: MHPROVIDER,ONE
 ***** Unsigned Draft *****
 *** PSYCHOSOCIAL HISTORY ***

GENERAL INFORMATION

Mr. Mhpatient is a 33 year old Hispanic-Other, f1 question not answered male ACTIVE DUTY. He lists his religious preference as Other. He was admitted to the Detoxification Services program on Apr 22, 2011. In the past 30 days, he has . G19 QUESTION NOT APPLICABLE He has lived at his current address for 9 years, 9 months.

This report is based on a full ASI interview conducted in person on Apr 22, 2011 by One Mhprovider, Clinical Psychologist. Mr. Mhpatient completed the interview.

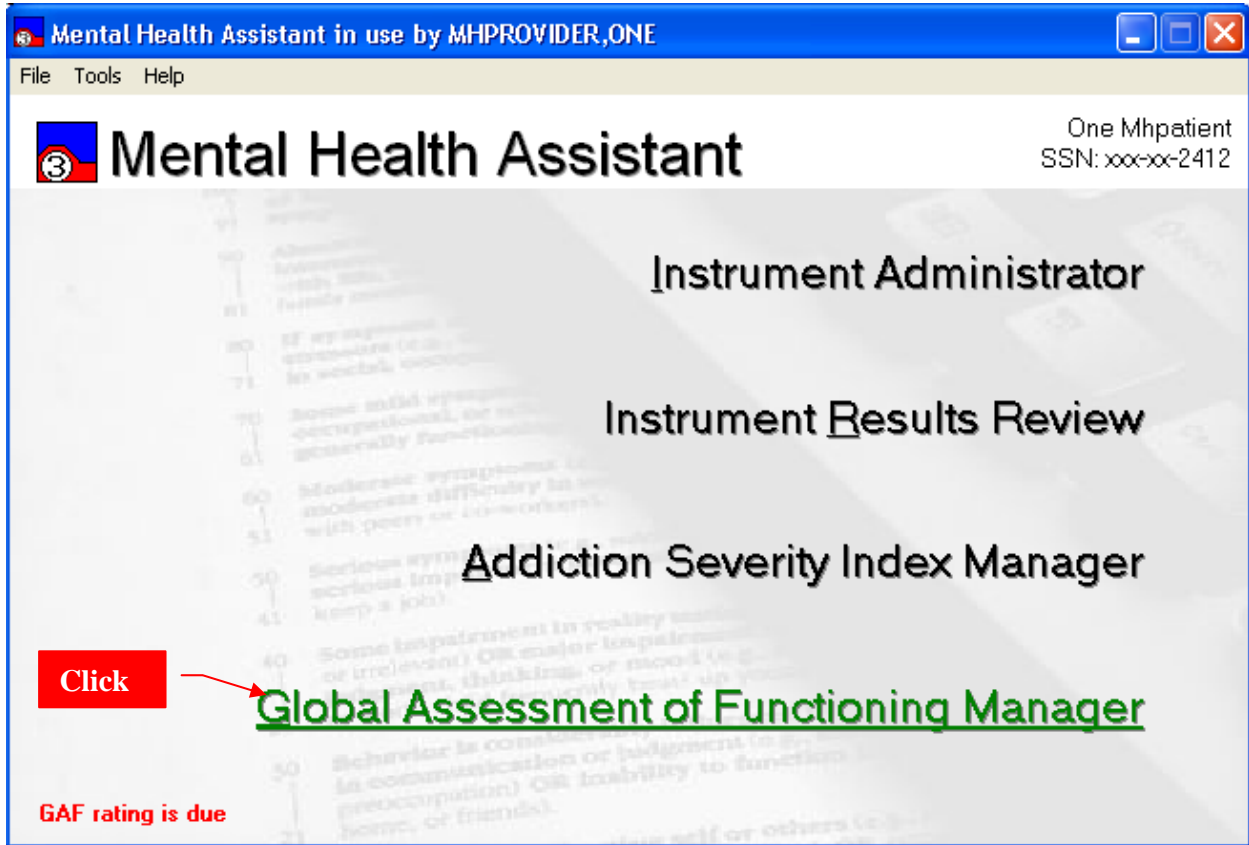
	Severity Rating	Composite Score
MEDICAL	X	0.0000
EMPLOYMENT	X	0.7053
ALCOHOL	3	0.4260
DRUG	3	0.1333
LEGAL	1	0.3067
FAMILY	X	----

Narrative Report Item Report Item Trends Domain Scores

Starting the Global Assessment of Functioning Manager

To start the **Global Assessment of Functioning Manager**, click on the launch link **Global Assessment of Functioning Manager** label located on the Mental Health Assistant main form. As with the previous selections, you can press the “G” key or the enter key (when the menu item is highlighted and underlined) to move to that form. After a brief pause the Global Assessment of Functioning Manager form will display.

Example: Starting the **Global Assessment of Functioning Manager** form.



Example: The Global Assessment of Functioning Manager form.

Mental Health Assistant in use by MHPROVIDER,ONE

File Edit View Action Tools Help

Global Assessment of Functioning Manager New, Outpatient
SSN: xxx-xx-2333

Date	GAF	Clinician
01/11/2011	53	MHPROVIDER,ONE
05/10/2010	41	MHPROVIDER,ONE
08/10/2009	45	MHPROVIDER,ONE
Mark Rating "Entered in Error"		

GAF Score

GAF Criteria

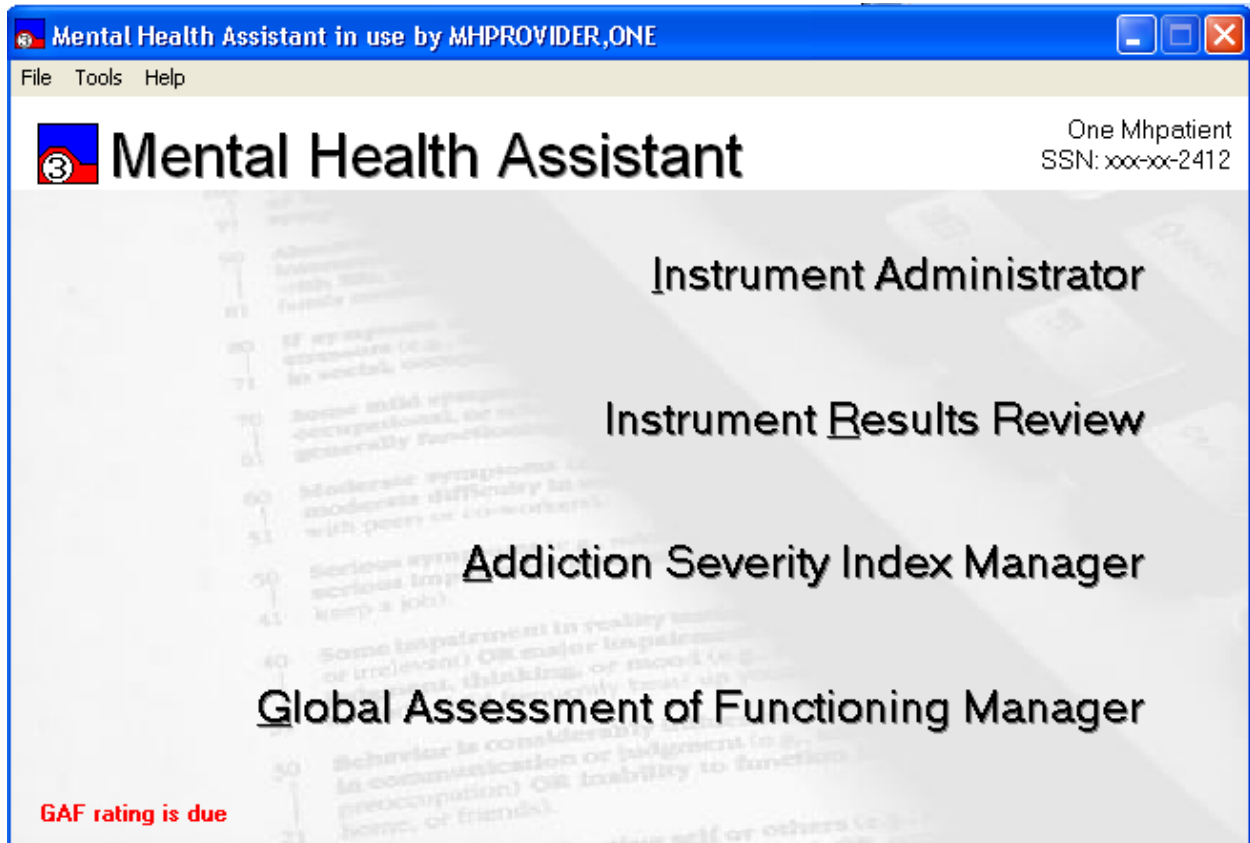
Range	Criteria
1-10	Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain minimal personal hygiene OR serious suicidal act with clear expectation of death.
11-20	Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death; frequently violent; OR occasionally fails to maintain minimal personal hygiene (e.g., smears feces) OR gross impairment in communication (e.g., largely incoherent or mute).
21-30	Behavior is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment (e.g., sometime incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (e.g., stays in bed all day; no job, home or friends).
31-40	Some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home and is failing at school).
41-50	Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) OR any serious impairment in social, occupational, or school functioning (e.g., no friends, unable to keep a job).
51-60	Moderate symptoms (e.g., flat affect and circumstantial speech, occasional panic attacks) OR moderate difficulty in social, occupational, or school functioning (e.g., few friends, conflicts with peers or co-workers).
61-70	Some mild symptoms (e.g., depressed mood and mild insomnia) OR some difficulty in social, occupational or school functioning (e.g., occasional truancy, or theft within the household), but generally functioning pretty well, has some meaningful interpersonal relationships.
71-80	If symptoms are present, they are transient and expectable reactions to psychosocial stressors (e.g., difficulty concentrating after family argument); no more than slight impairment in social, occupational, or school functioning (e.g., temporarily falling behind in schoolwork).
81-90	Absent or minimal symptoms (e.g., mild anxiety before an exam), good functioning in all areas, interested and involved in a wide range of activities, socially effective, generally satisfied with life, no more than everyday problems or concerns (e.g., an occasional argument with family members).
91-100	Superior functioning in a wide range of activities, life's problems never seem to get out of hand, is sought out by others because of his or her many positive qualities. No symptoms.

New GAF rating: Evaluation Date:

GAF rating is due

The “GAF rating is due” alert is displayed at the bottom-left of the main form if a GAF rating is due for the currently-selected patient. If a GAF is not required at this time, the alert is not displayed.

Example: “GAF rating is due” alert is displayed



File Menu

The **Mental Health Assistant** drop-down list **File menu** contains the following three menu items:

- Select Patient...
- Upload Results...
- Exit

Select Patient

NOTE: Refer to the CPRS documentation for instructions on patient selection procedures.

Example: From the main menu **click** on the drop-down **File menu** and **click** on the **Select Patient...** menu item. After a brief pause, the familiar CPRS patient-selection form is displayed. After selecting a different patient, both CPRS and MHA are synchronized and updated to identify the same new patient.



Upload Results

Clicking on the Upload Results menu item initiates the process for uploading off-line records to VistA.

Example: If any off-line administered records remain on this PC, the Upload Results menu item becomes enabled. If no records need to be uploaded to VistA, this menu item is visible, but disabled.



Exit

Example: To exit the **Mental Health Assistant** form and return to the Windows Desktop, **click** on **File** then **Exit**, or **click** on the **Close (X)** icon located at the top-right of the **Mental Health Assistant** form, or **press and hold** the **Alt** key then **press** the **F4** key.



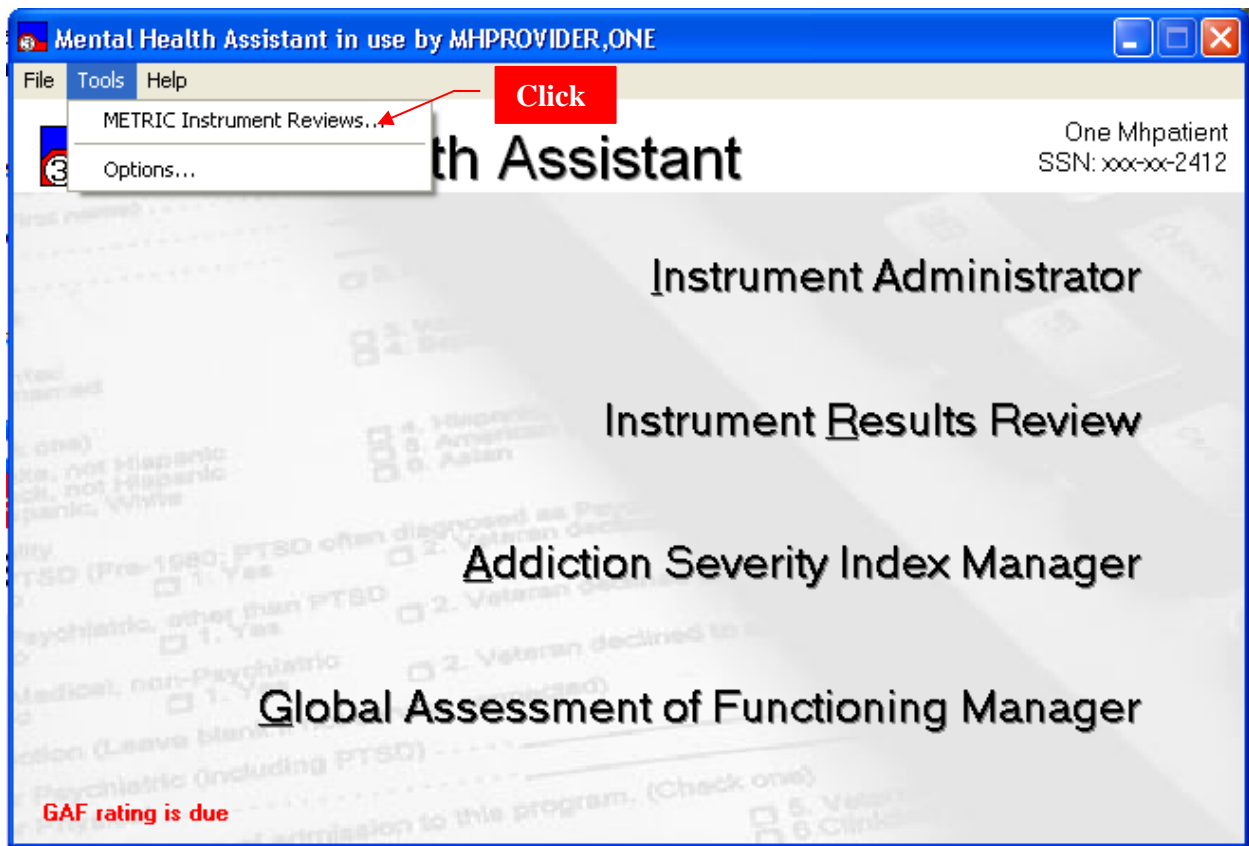
Tools Menu

METRIC Instrument Reviews...

The **METRIC Instrument Reviews** menu item is located on the MHA main menu (and most forms within MHA for easy access) drop-down **Tools** menu. The **METRIC Instrument Reviews** offers comprehensive information about all sorts of instruments, including Mental Health instruments. This menu item is offered as a courtesy and a quick way to link the METRIC website from **Mental Health Assistant**. This website is not associated in any way with **Mental Health Assistant**.

Click on the drop-down list **Tools** and **click** on the **METRIC Instrument Reviews...** menu item to display the METRIC website homepage.

Example: The **METRIC Instrument Reviews** menu item is located on the Mental Health Assistant dialog box Tools drop-down menu.



Example: METRIC website displayed in Internet Explorer.

Metric - Mental Health - Windows Internet Explorer
http://vawww.mentalhealth.va.gov/mha/metric.asp

File Edit View Favorites Tools Help Convert Select

Google Search More >>

Metric - Mental Health

UNITED STATES DEPARTMENT OF VETERANS AFFAIRS
INTRANET
Search All VA Web Pages Search
» Open Advanced Search

VA Intranet Home About VA Organizations Locations Employee Resources

Mental Health Home
Resources for Clinicians
Resources for Administrators
Office of Mental Health Services
Site Map
Site Search

MENTAL HEALTH

VA Health Services Research and Development: METRIC.

The METRIC Instrument Reviews were designed to give researchers the information necessary to make informed decisions about choosing a measure for their needs.

Disclaimer

This measurement section is an archive of original topic pieces and external resources that were selected and evaluated by [METRIC](#), an HSR&D Resource Center.

Please note that METRIC is no longer a Resource Center and that these sections are not currently being updated. (last updated in June 2006).

Section 508 Accessibility | Intranet Privacy Policy | No Fear Act
VHA Intranet Home | VBA Intranet Home | NCA Intranet Home

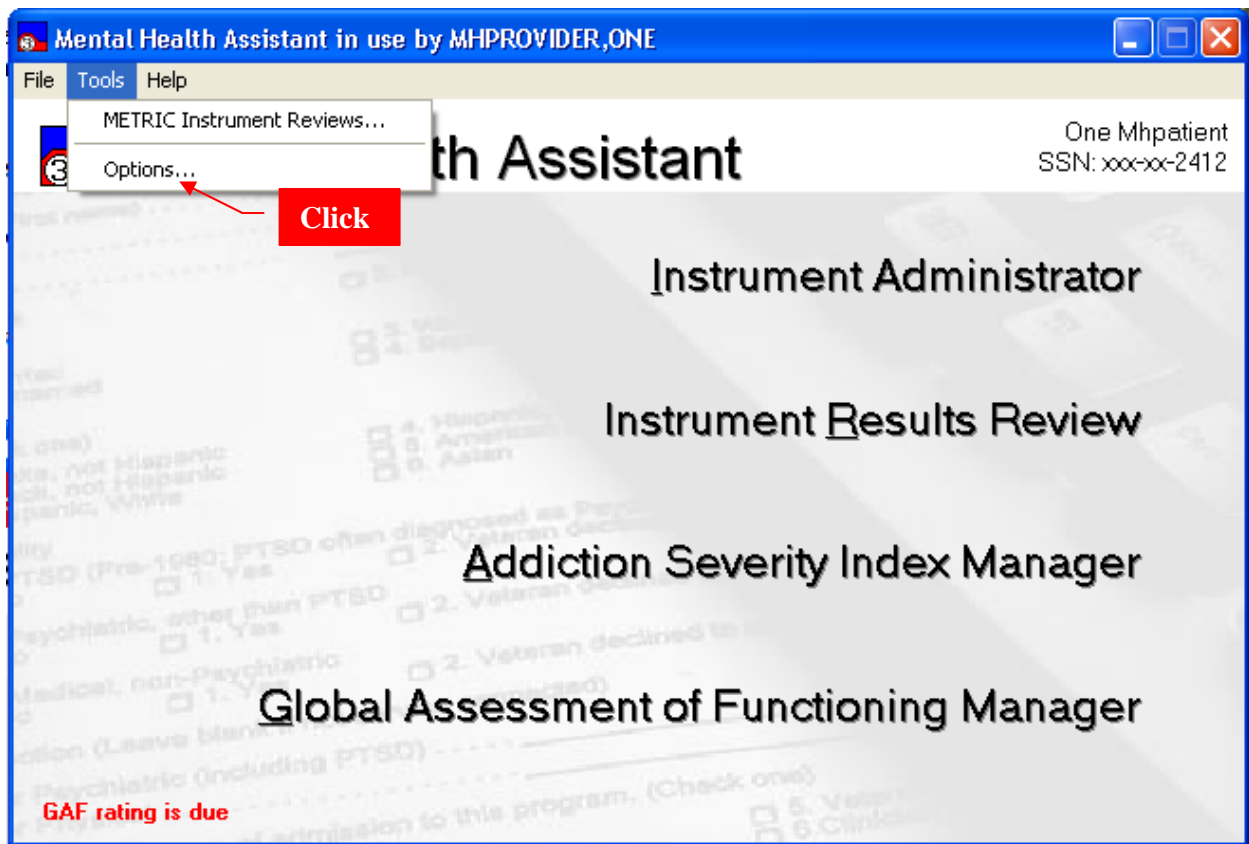
Reviewed/Updated Date: January 5, 2011

Options

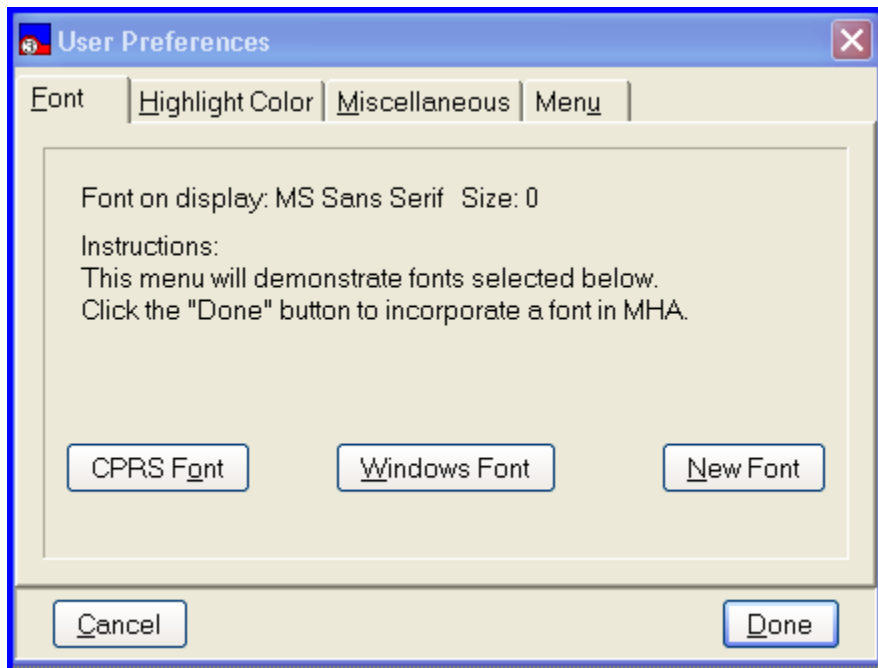
Clicking on the Tools Options menu item invokes the User Preferences form, where users can choose from different MHA system properties and behaviors. This is described in detail later in this manual.

Changing User Preferences

Example: Some system parameters are user-configurable and can be changed by **clicking** on the drop-down **Tools menu** and **Options...** menu item. The User Preferences form appears, allowing the user to make system changes, such as the default display font. The user may optionally abort changes before they are saved.



Example: Mental Health Assistant **User Preferences** form.



Help Menu

The Mental Health Assistant Help menu contains the following two menu items:

- Online Support
- About

Online Support...

MHA Online Support is available via the Mental Health Informatics Section's website. **Clicking** on the **Help** menu and **Online Support...** menu item will start the default Web browser and loads the following web address into the browser: <http://vaww.mentalhealth.va.gov>. Online Support appears as a menu item in most forms used in MHA so that access is readily available.

Example: Accessing Online Support.



About...

The **About...** menu item contains useful release information about MHA. This menu item is available on most forms used in MHA.

Example: How to Access **About** information. Click on **Help | About**.



Example: The **About Mental Health Assistant** form



Mental Health Assistant

Client Version: 1.0.3.58
Patches Required: YS*5.01*85,
YS*5.01*96, YS*5.01*103
Compile Date: 01/17/2012 06:59:36 AM
CRC: 1689076599
RPC Broker Version: XWB*1.1*40
RPC Version: 0
Located: RPCBroker1

Developed by the Department of Veterans Affairs. Unauthorized access or misuse of this system and/or it's data is a federal crime. Use of all data shall be in accordance with VA policy on security and privacy.

NOTE: The Veterans Health Administration (VHA) fully supports Section 508 of The Rehabilitation Act and is committed to equal access for all users. While every effort has been made to ensure Section 508 compliance, we realize that there may be other issues.

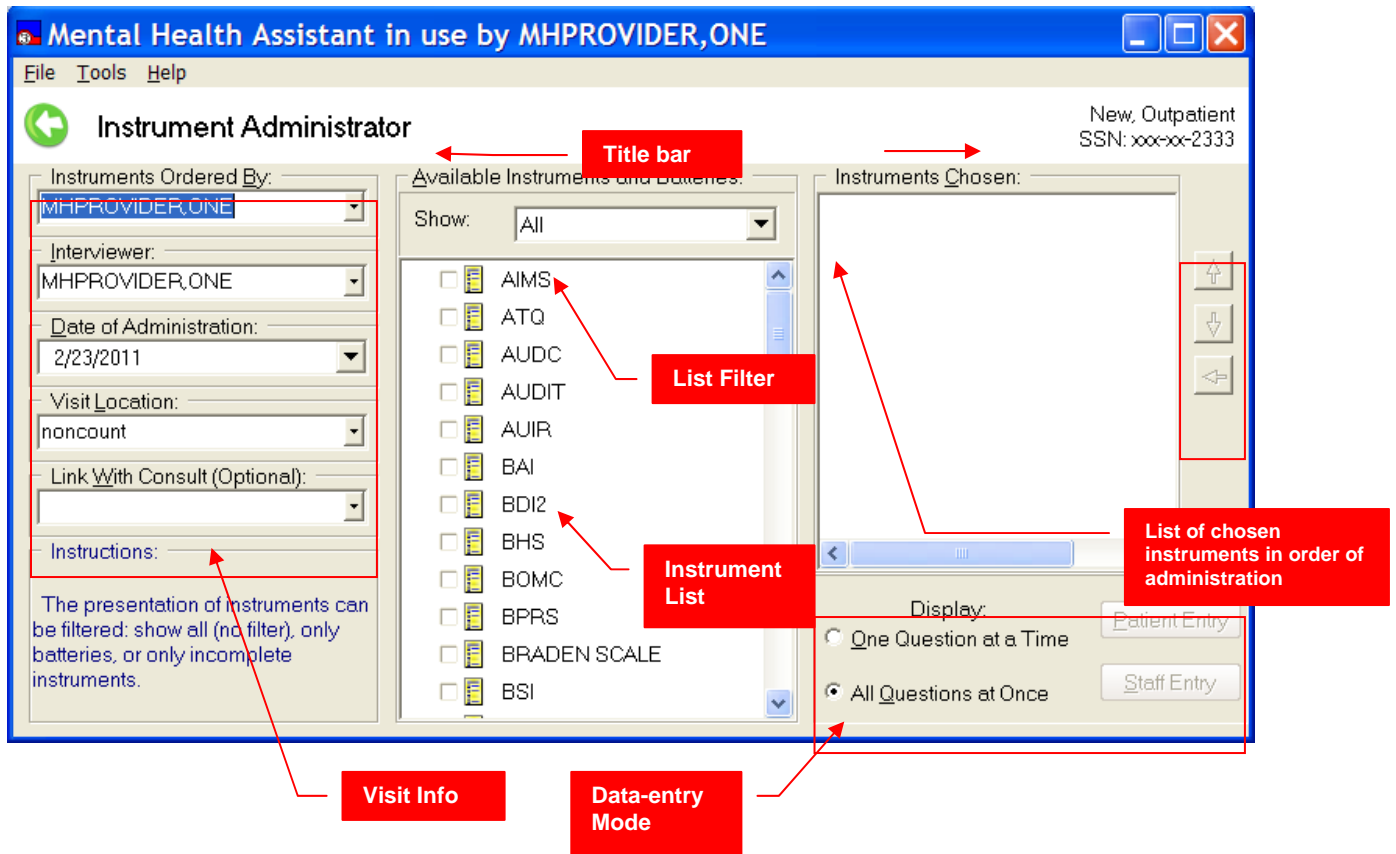
OK

Instrument Administrator Functions

Orientation

The **Instrument Administrator** functions allow the user to order new instrument(s) to administer to the selected patient and specify the data entry mode for the instruments. First, the user **must** specify the name of the user who is ordering the instrument to be administered. By default, the user requesting the test to be ordered is identified as the session user. Another user may be specified as the user ordering the instrument, in which case, the name of the original user that requested the test is notified by VistA E-mail that tests were administered in his/her name. The available set of instruments that can be ordered depends on the user access privileges (for example, whether the user ordering the instrument has the YSP key assigned).

Example: Mental Health Assistant **Instrument Administrator** form.



Main Menu

The **Main Menu** offers user functions in the context of the **Instrument Administrator Form**, such as selecting another patient and help.

Selected Patient Identification label

The Selected Patient Identification label displays information about who is the currently-selected patient within MHA. All functions performed in the Instrument Administrator will apply to this patient. This patient is the same as the one selected in CPRS and should remain synchronized with CPRS even when another patient is selected.

Title bar

The Title Bar is a visual artifact that is used throughout MHA to display information about the context that applies to the current activity. The left-pointing arrow, when clicked, will return the user to the Main Menu.

Visit information

The Visit information group of data-entry controls is used to describe the clinical particulars of a patient's visit, such as the clinician's name and the location of the visit and consult to associate the report of results (optional).

List filters

The list filters are used to change the number and types of instruments displayed in the Instruments and Batteries list.

Available Instruments and Batteries list

The Available Instruments and Batteries list is used to select which instruments will be administered. In some cases there will only be one instrument selected. The Available Instruments and Batteries list also allows for selecting multiple instruments or batteries, or a combination of both.

Instruments Chosen list

The Instruments Chosen list is the collection of instruments selected in the Instruments and Batteries list. The instruments are listed here in the order in which they will be administered—from top to bottom.

Re-sequencing buttons

The re-sequencing buttons are used to alter the order in which the instruments in the Instruments Chosen list will be administered. Instruments can be removed from the list too.

Data-entry mode selection

There are several combinations of data-entry display modes which are selected using the data-entry mode selection buttons.

Context-sensitive help

Context-sensitive help tips are displayed in this area and are dependent on where the mouse pointer is resting.

Ordering Instruments

Instruments can be ordered in three ways:

1. An existing test battery may be selected.
2. An incomplete administration may be restarted if it has not been too long since it was first started. The MMPI2, for example, must be completed within 24 hours; some instruments do not have time limits. Most instruments have a two day time limit for completion. If the time period has lapsed, the incomplete administration will not be listed.
3. New instruments may be selected individually and their order of administration specified.

The Instrument Administrator permits the user to select one of two data-entry Modes:

1. Staff entry, which is optimized for staff data entry when the staff person wishes to see test questions and answers while entering data. This is unsuited for patient entry.
2. Patient entry, which is optimized for on-line administration of instruments to a patient.

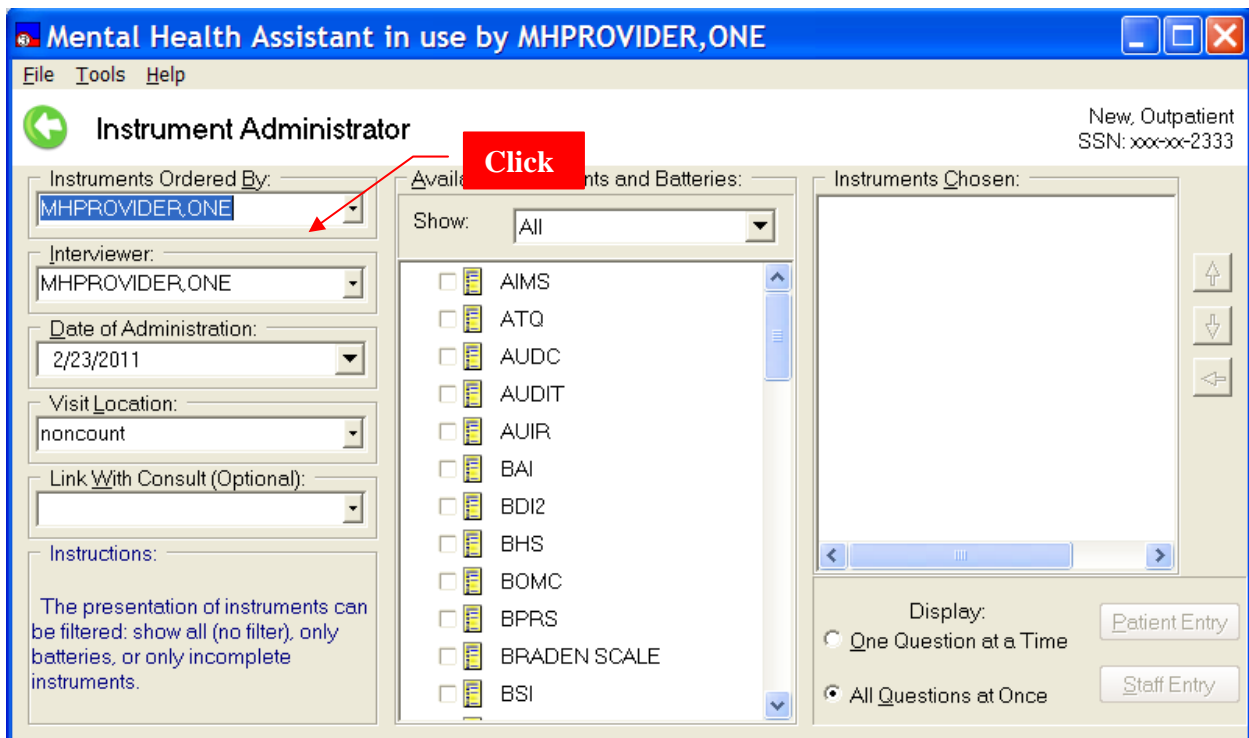
NOTE: Patient entry invokes special security measures to prevent patients from using the workstation for any other purpose than answering questions. Because security measures are not invoked for the staff entry modes it must not be used for the on-line self-administration of tests to patients. (See Appendix D for more information on SecureDesktop.)

Selecting a Person (other than yourself) for “Instruments Ordered By”

By default, the current user’s name is selected. It is necessary to select a different name only if the user is not the same person ordering the tests. To select a new person:

1. **Click** on the **drop-down list box** labeled “**Instruments Ordered By.**”
2. From that list of staff members, select the name of the person ordering the tests.

Example: The **Instrument Ordered By** person will receive an email notification in VistA regarding the administration and also appears as the **Instrument Ordered By** person in all reports related to this administration.

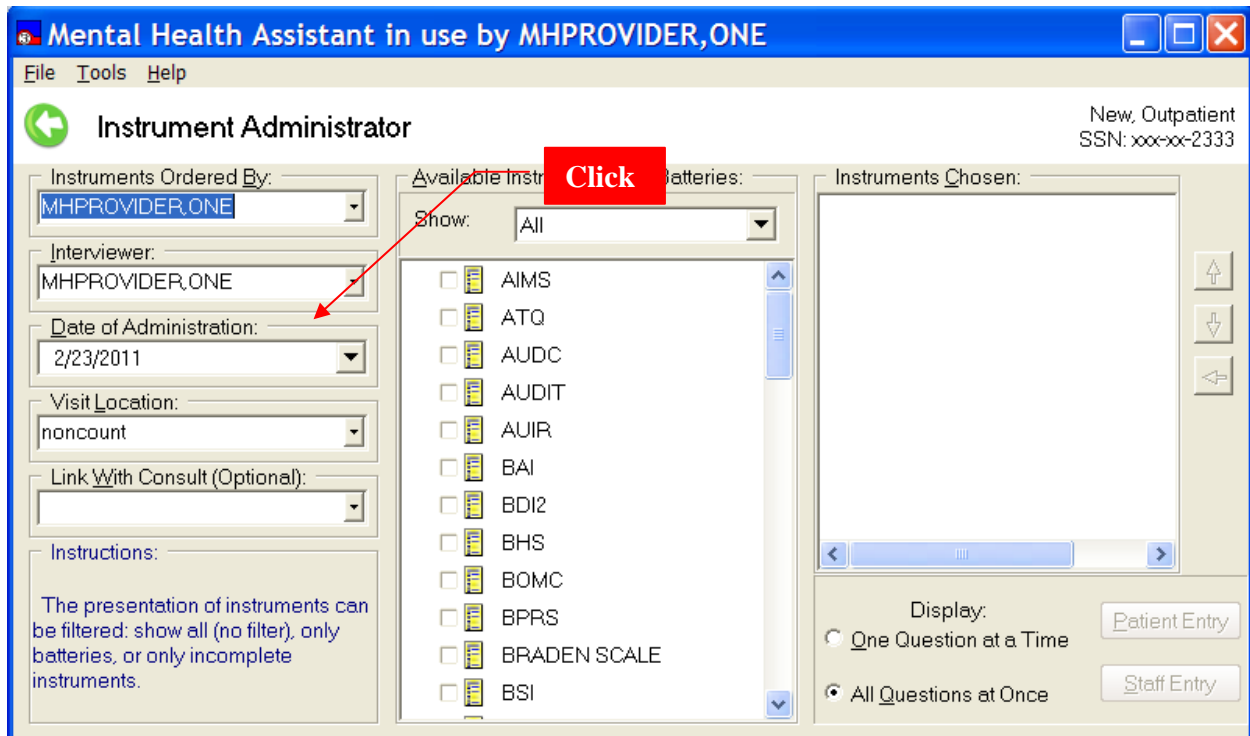


Selecting a Person for “Interviewer”

By default, the current user’s name is selected. It is necessary to select a different name only if the user is not the same person as the interviewer. To select a new person:

1. Click on the Drop-Down List Box labeled **Interviewer**
2. Select a name from the list

Example: The selected name also appears as the “Interviewer”, or “Printer” person in all reports related to the administration.

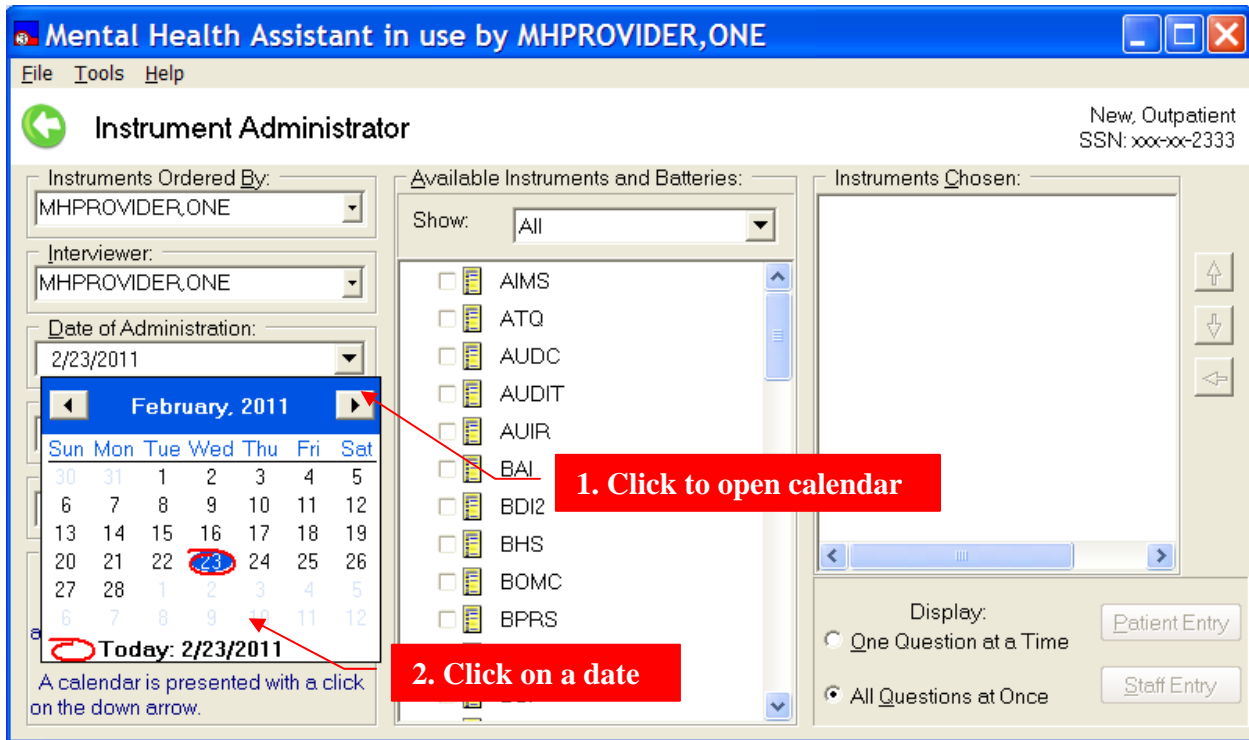


Selecting a Date of Administration

By default, today's day is presented in the date field. It is necessary to select a different date only if the date of administration is not the same as the current date. Future dates are not allowed. To select a new date:

1. Click on the Date-Picker labeled **Date of Administration**.
2. Select the administration date from the calendar, or type in the desired date.

Example: The selected date also appears as the date in all reports related to this administration.

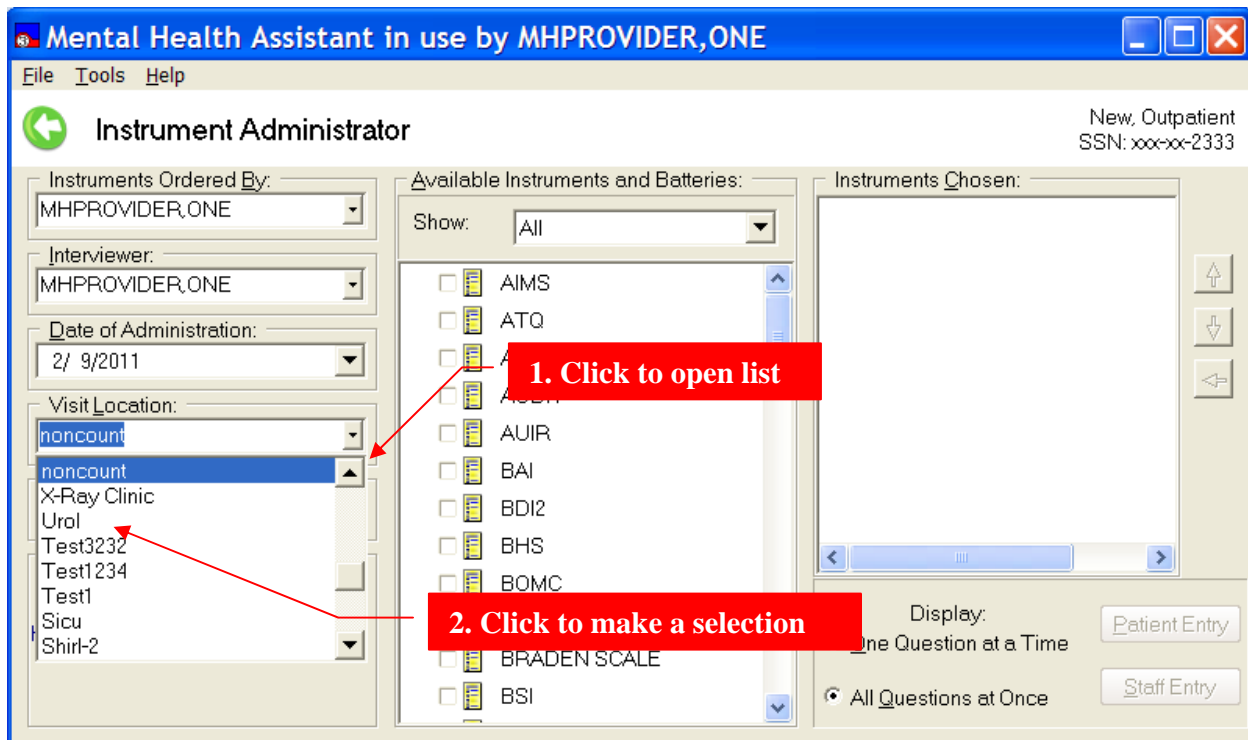


Selecting a Visit Location

By default, the previously-selected Visit Location is selected. It is necessary to select a different location only if the location is different from the one displayed. To select a new location:

1. Click on the Drop-Down List Box labeled **Visit Location**
2. Select a different location from the list.

Example: The selected location also appears as the location in all reports related to this administration.

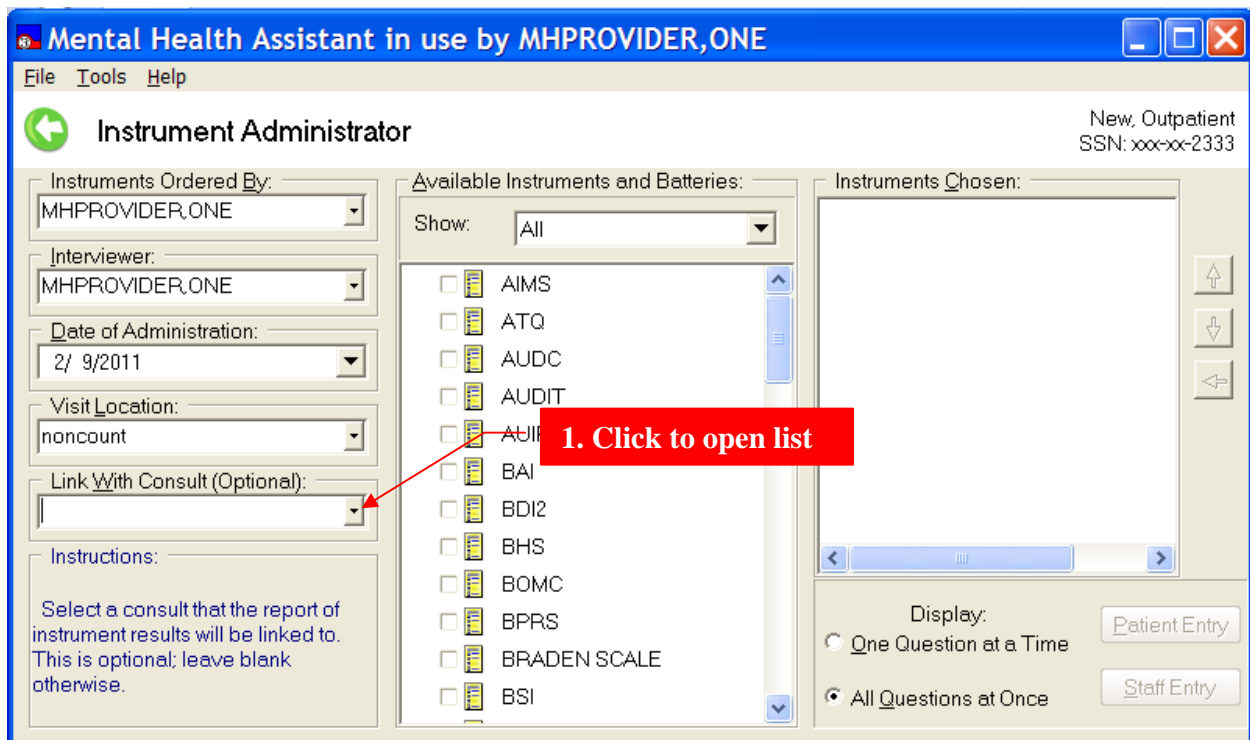


Selecting a Consult (Optional)

The report of the results for the administration of an instrument can be linked to a consult instead of a progress note (as will typically happen).

1. Click on the Drop-Down List Box labeled **Link with Consult**
2. Select a consult from the list (if there are no consults, the list will be blank).

Example: The reports related to this administration will be associated with the selected consult.



Filtering the display of Available Instruments and Batteries List

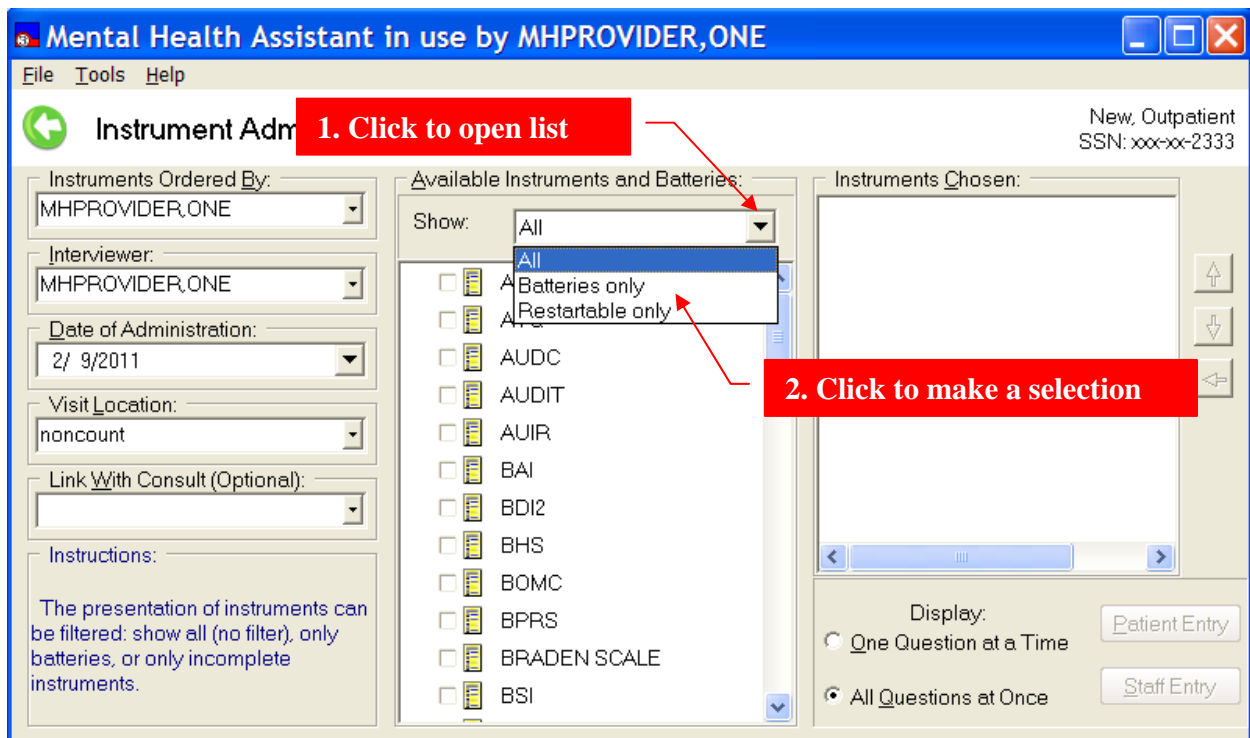
Which tests appear in the Available Instruments and Batteries list box depends on the user's access privileges to order tests (i.e., user must hold the YSP security key to be able to order selected instruments). By default, the list of Available Instruments and Batteries displays all instruments and batteries that the user identified as the Ordered By user has permission to administer. However, the list of Available Instruments and Batteries can be filtered in three different ways:

1. All instruments and batteries, in alphabetical order.
2. Batteries only.
3. Restartable instruments only (incomplete administrations which may be resumed, if there are any).

To change the lists filter:

1. Click on the Drop-Down List Box labeled Show
2. Select a filter for the list of available instruments.

Example: The displayed Instrument List changes to include only the instruments that meet the new filter's specification.

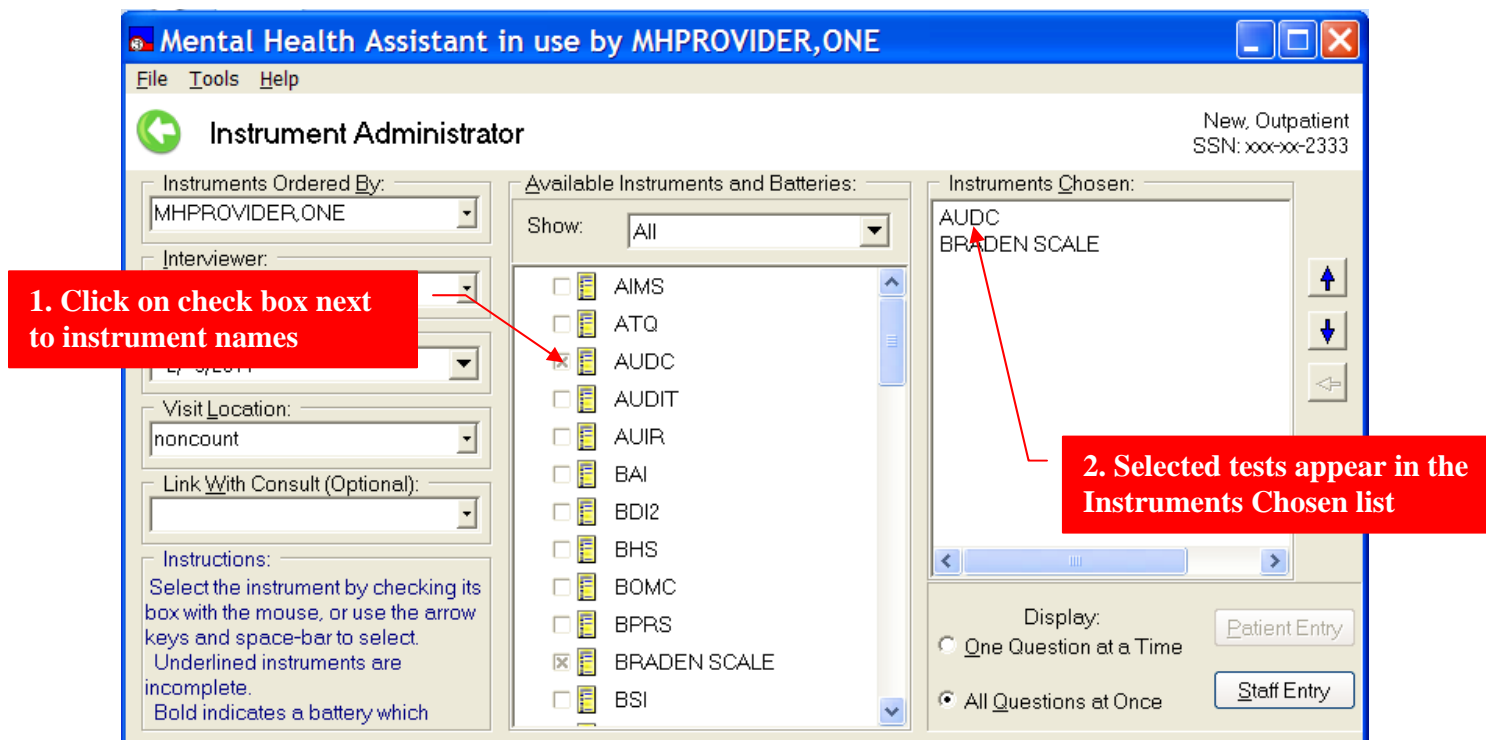


Choosing One or More Instruments

By default, nothing is selected on the list of Available Instruments and Batteries. The user must choose one or more instruments to administer during this session. In the case where there are multiple instruments that are administered frequently, the user has an option to create and select instrument battery, which simplifies selecting a group of instruments. The user may select any combination of single instruments and batteries.

To select instruments or batteries, **click** on the check box next to the **Available Instruments and Batteries** list box names found on the **Instrument List**.

Example: The **Available Instruments and Batteries** list box.



The selected instruments appear in the list of **Instruments Chosen**. These are the instruments selected for administration.

NOTE: Instruments are added to the Instruments Chosen list in the order in which they were selected in the Instrument List. This is the same sequence in which the tests will be administered unless the order is changed. The date and time of administration is appended at the end of an incomplete test name.

Restarting Incomplete Administrations

Whether an incomplete administration of an instrument can be restarted depends on how long ago it was first entered in MHA. The permissible lapse is a local site parameter. It is set using MHS Manager\Psych Test Utilities\Edit Instrument Restart Limit [YSINST RESTART LIMIT] option. Usually the lapse is two days. Restarting an incomplete administration from the **Instruments Chosen** list box is no different from starting a new test, so that process is not described here. The items that were answered in the first administration are carried over to the next one.

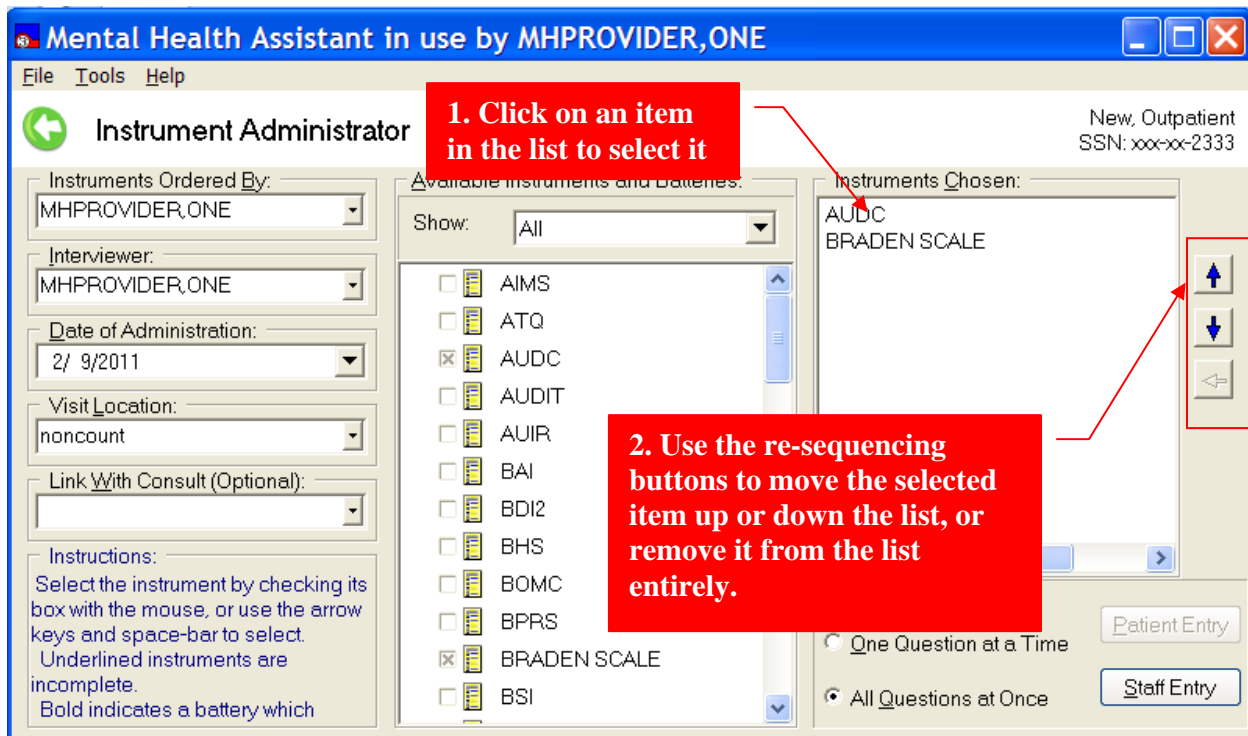
Manipulate the list of Instruments Chosen

After two or more instruments are added to the **Instruments Chosen** list, it is possible to rearrange the order in which they will be administered. The re-sequencing buttons may be used to change the order of the instruments in the list, or to remove instruments from the list. The order of administration is always from top to bottom.

To change the order, select the instrument item in the **Instruments Chosen** list. Using the re-sequencing buttons:

- **Click** on the up-arrow button to move the instrument up the list.
- **Click** on the down-arrow button to move the instrument down the list.
- **Click** on the left-arrow button to remove the instrument from the list.

Example: The **Instruments Chosen** list box.



Selecting Display Mode for Data Entry

There are two display modes in MHA: “Display One Question at a Time,” or display “All Questions at Once.”

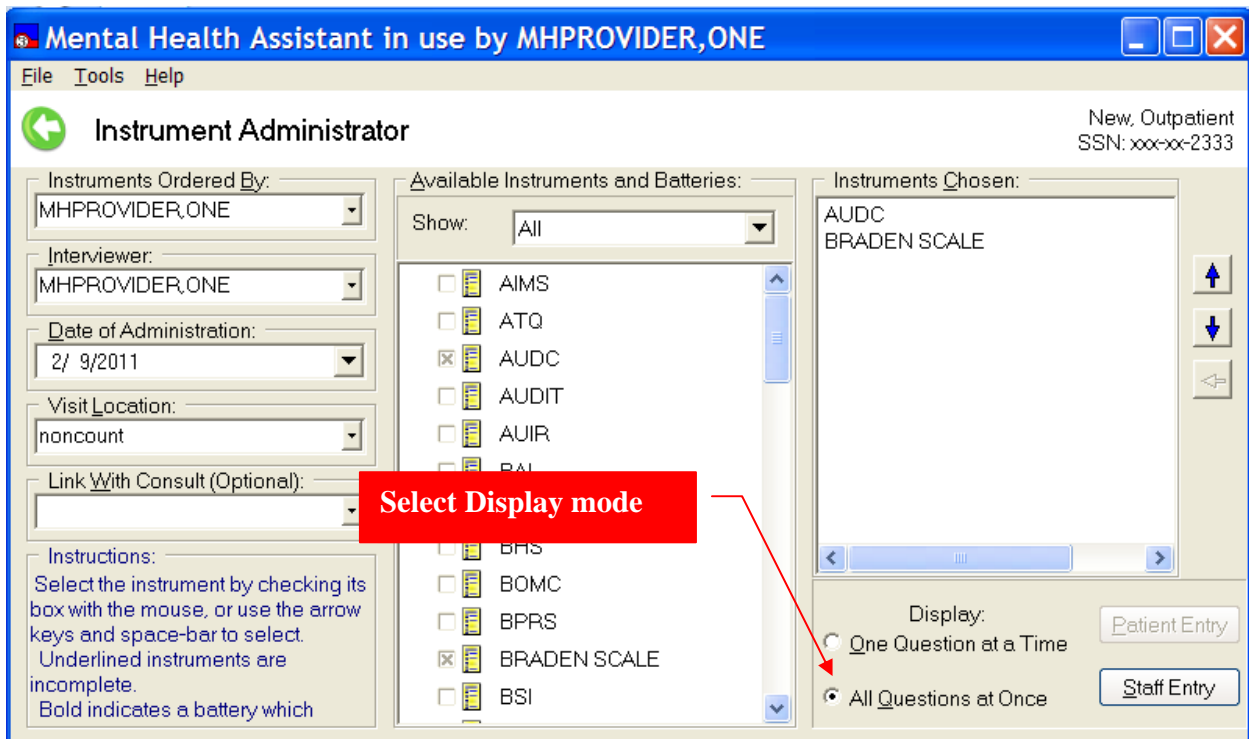
The **One Question at a Time** display mode is ideal for patient-entry, since it only displays one question in the data-entry form. This allows for a more focused and relaxed approach to responding to questions.

The **All Questions at Once** display mode is ideal for staff-entry, since it displays all the questions in a scrollable window. This allows for rapid navigation between questions, and a faster approach to entering data. It may be also be suited for some patients.

In MHA, either **One Question at a Time** or **All Questions at Once** may be used for patient-entry or staff-entry modes. It is a user preference choice.

- To select **One Question at a Time** display mode, click on the **One Question at a Time** option button.
- To select **All Questions at Once** display mode, click on the **All Questions at Once** option button.
- At least one test **must** be available in **Instruments Chosen**.

Example: Display mode selection.



Selecting “Patient Entry” Data-Entry Mode

Patient-entry mode supports the on-line testing of patients. **Patient Entry** has added security features to prevent unattended patients from using the workstation for unauthorized purposes. Clicking on the **Patient Entry** command button triggers the activation of the SecureDesktop security functionality.

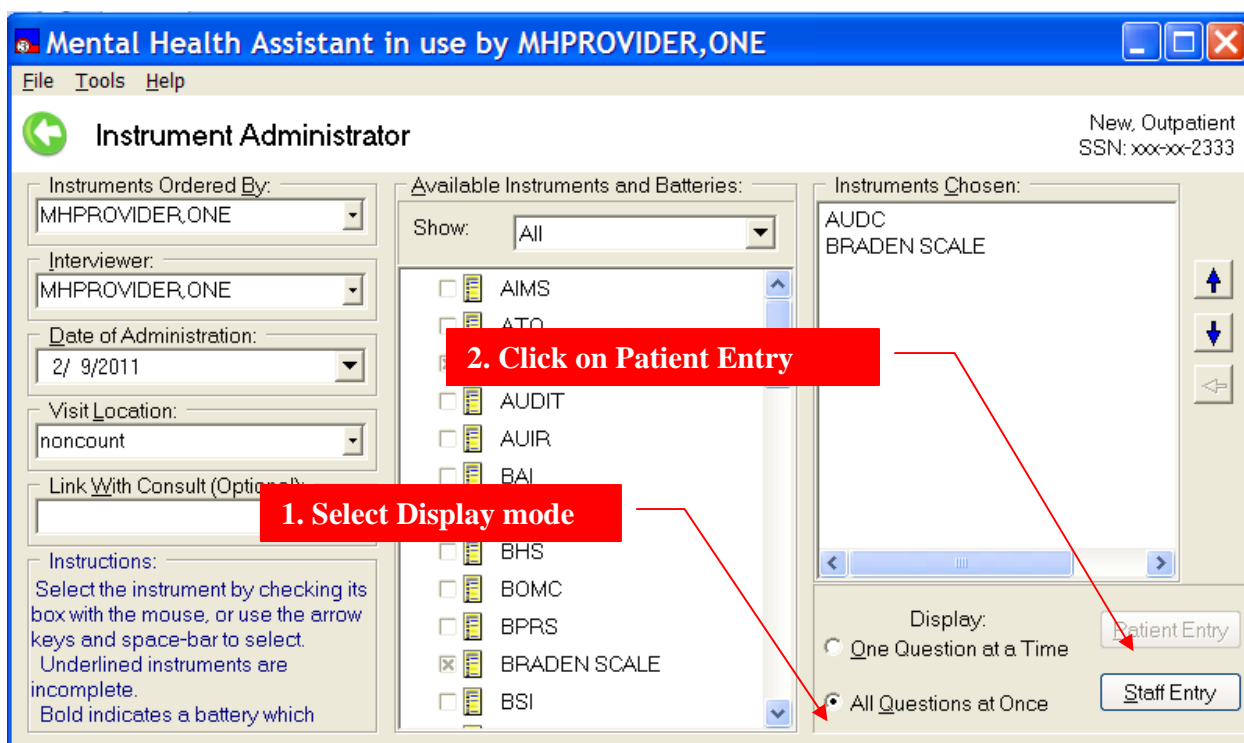
To start patient entry mode:

1. **Click** on the **Patient Entry** button
2. **Click** on **Yes** in response to the first warning prompt. Click on **No**, to abort invoking SecureDesktop and cancel patient entry.
3. **Click** on **OK** to respond to the second warning prompt

Additional notes about Patient-Entry mode:

- At least one test must be available in the **Instruments Chosen** list.
- If the **Patient Entry** button is disabled, this means that the SecureDesktop software is not properly installed on this PC – contact your local IRM for support, if needed.
- Any time Patient Entry mode is invoked, two warning messages are displayed. These messages are an indication that SecureDesktop is about to be activated.
- The **Single-Question** form or the **All-Questions** form is displayed, depending on which option button was selected.
- Appendix D has further details about the operation of SecureDesktop.

Example: Patient Entry button.



Example: SecureDesktop **WARNING** prompt #1.



Example: SecureDesktop **WARNING** prompt #2.



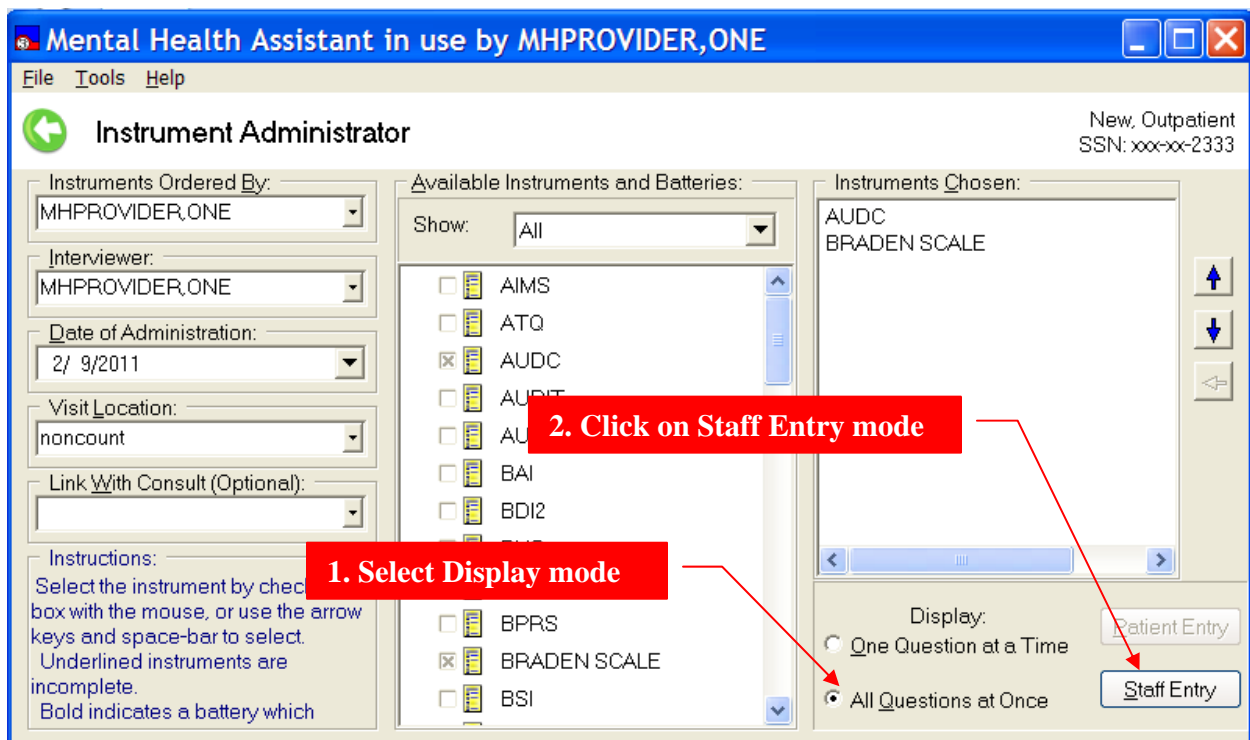
Selecting “Staff Entry” Data-Entry Mode

1. Click on the **Staff Entry** button.

Additional notes about Staff-Entry mode:

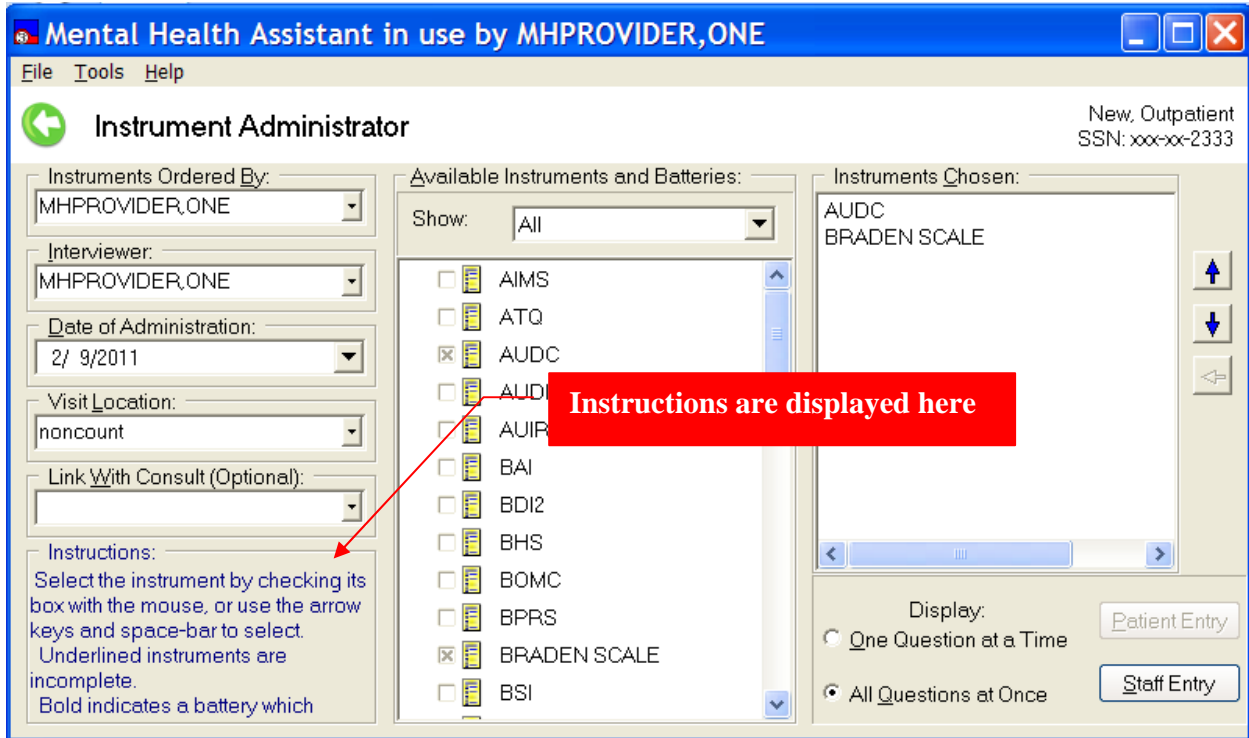
- At least one test must be available in the **Instruments Chosen** list.
- Staff-entry mode does not make use of the SecureDesktop functionality, since it is intended for staff use only, not for patients.
- The **Single-Question** form or the **All-Questions** form is displayed, depending on which option button was selected

Example: The **Staff Entry** button.



On-form Instructions

Example: The **On-form Instructions** are displayed in the bottom-left corner of the Instrument Administrator form. These are context-sensitive tips that change depending upon which part of the form the mouse pointer is resting on. Not all elements of the form trigger instructions.

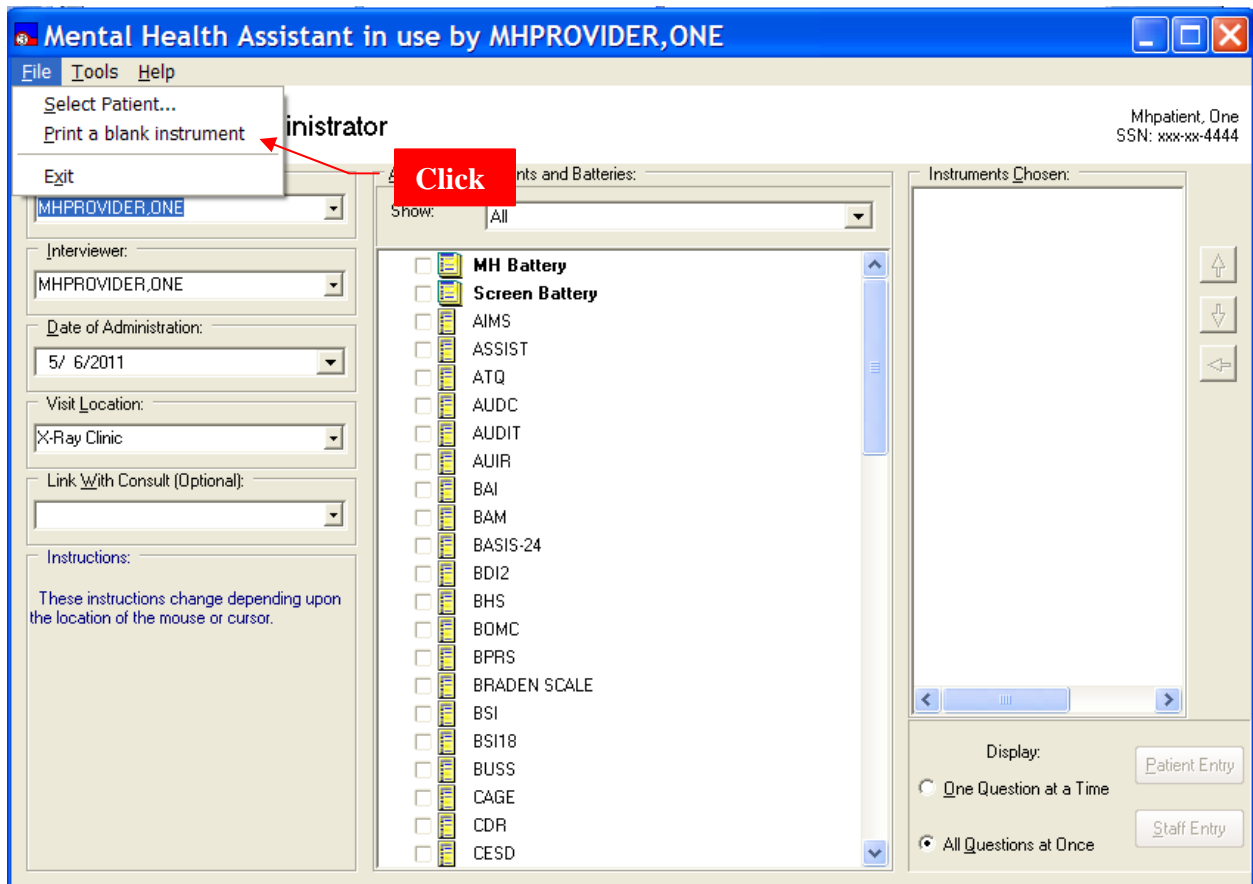


Printing a Blank Instrument

Sometimes it is useful to provide a pencil-and-paper version of an instrument to a patient that they can fill out themselves, in the waiting room, for example. Later the patient's responses can be entered into MHA by a clerk or clinician.

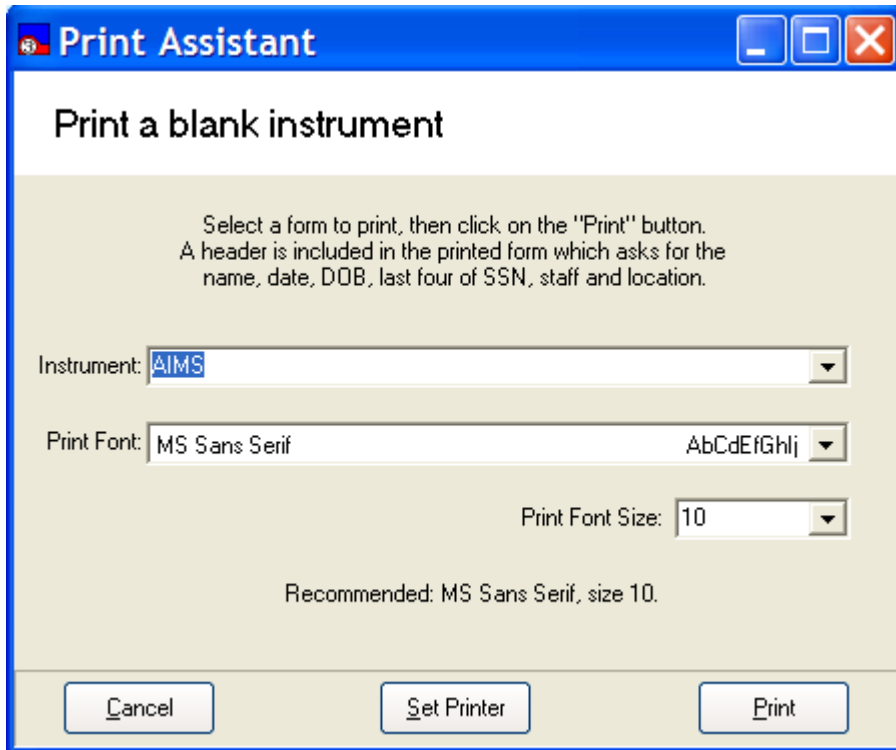
By opening the **File** menu, and clicking on the option, "**Print a blank instrument,**" the user can select an instrument, and define the printer and its settings. The operation of the print function is very standard and familiar to Windows users. The blank form will always have a heading which contains empty lines to gather identifying information on the patient, date, location and staff member. Information on the selected patient will not be printed on the blank form.

Example: To print a blank instrument:

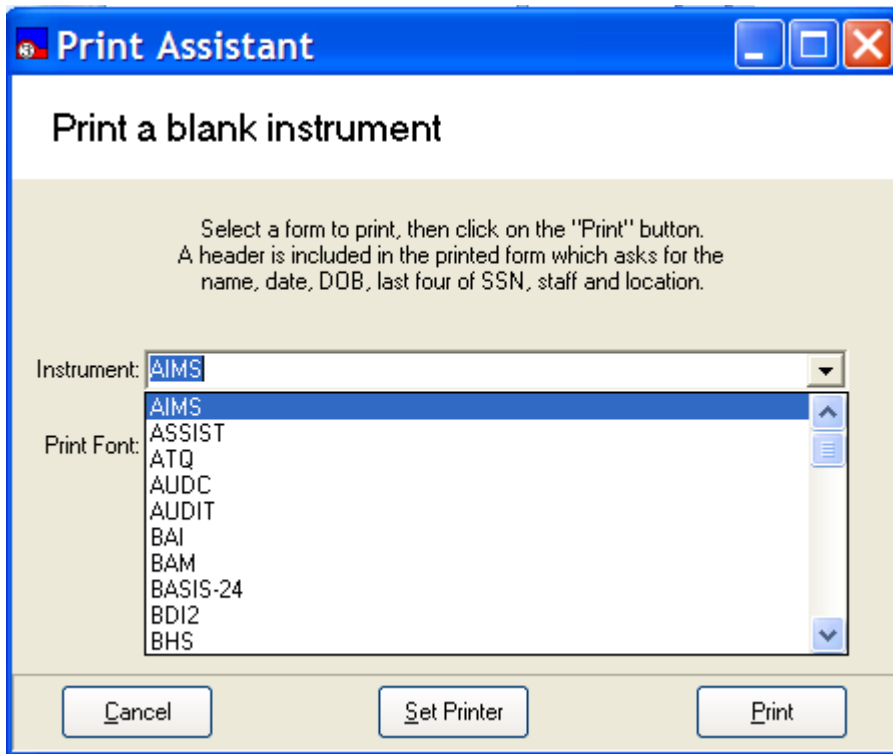


The Print Assistant provides the means to select the instrument to be printed, to change the font and size of the font, and make adjustments to the printer.

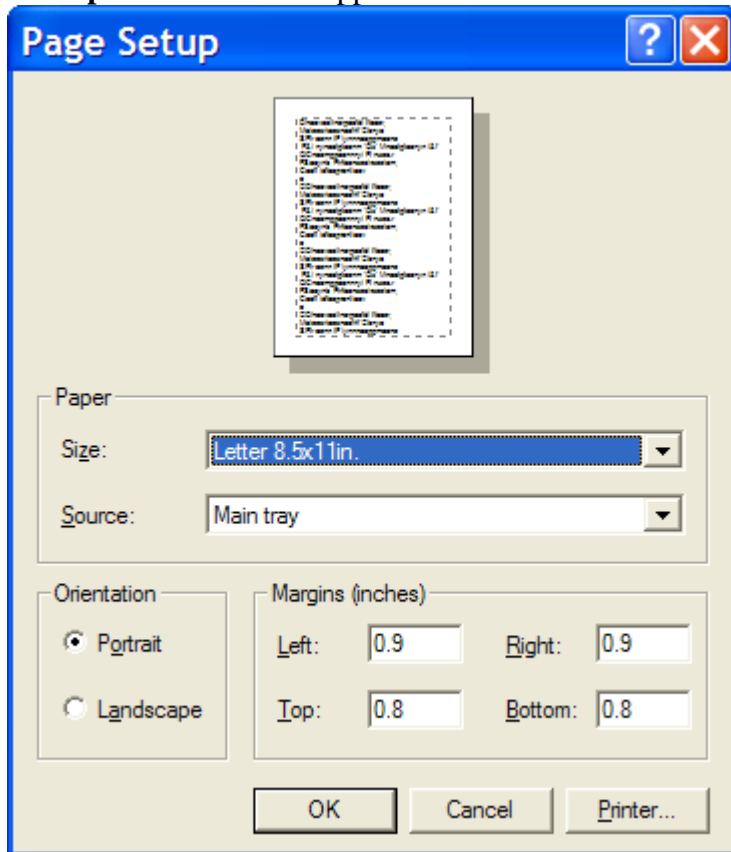
Example: The Print Assistant.



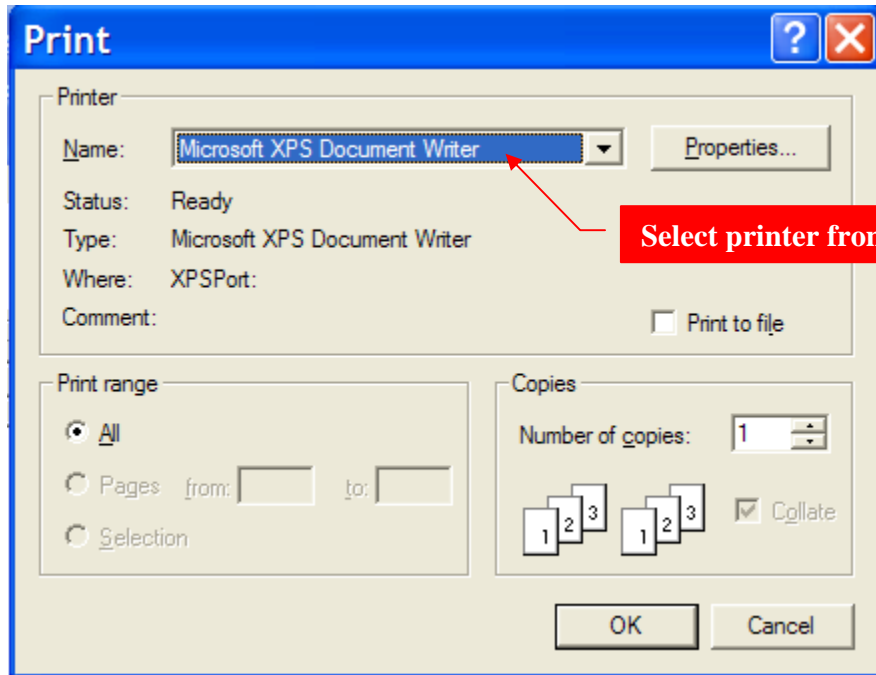
Example: To view the instruments that can be printed, click on the down arrow in the combo box. Select the instrument by clicking on it. Once the instrument is selected, click on the **Print** button to start printing, or the **Set Printer** button to configure the printer.



Example: This window appears when the **Set Printer** button is clicked.

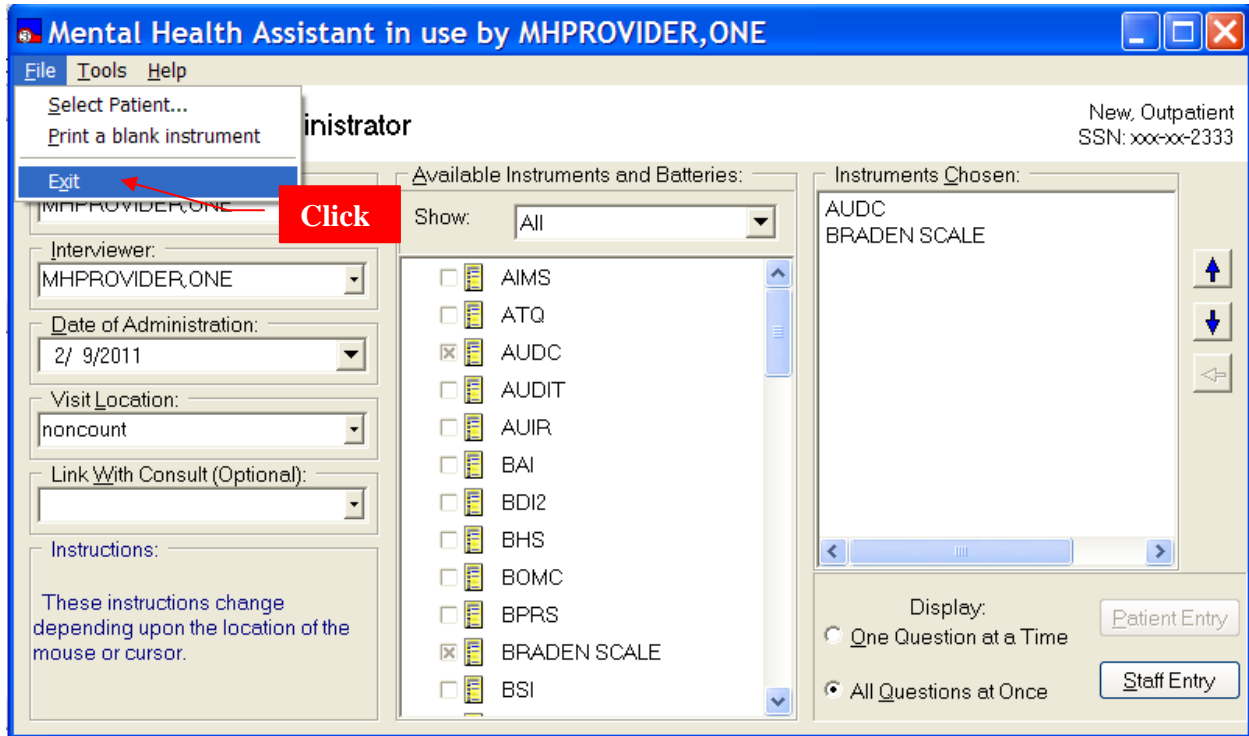


Example: To start printing, select the mapped name of the local printer and click on the **OK** button.



Exiting the Instrument Administrator Form

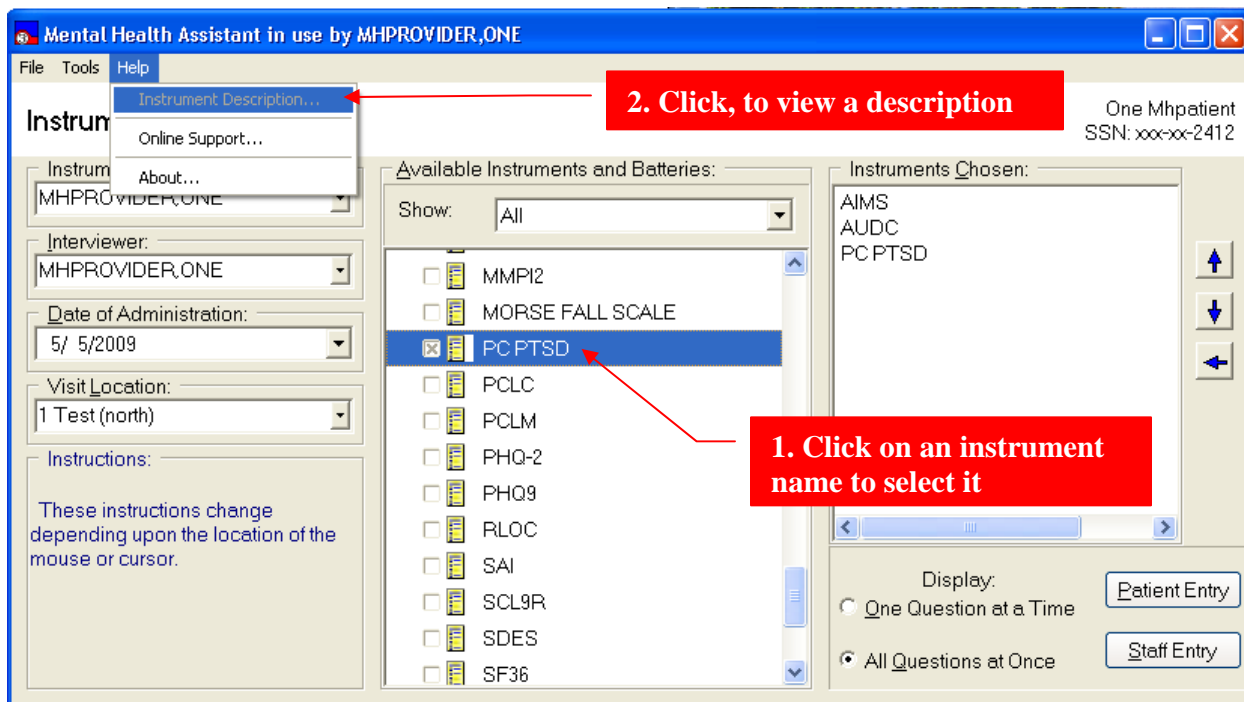
Example: To exit from the **Instrument Administrator** form, **click** on the **File | Exit** menu item. Alternatively, you can click on the “X” in the upper right-hand corner of the window, or, press the “ESC” key, or click on the left arrow. The **Instrument Administrator** form will close and the user is returned to the Mental Health Assistant main menu.



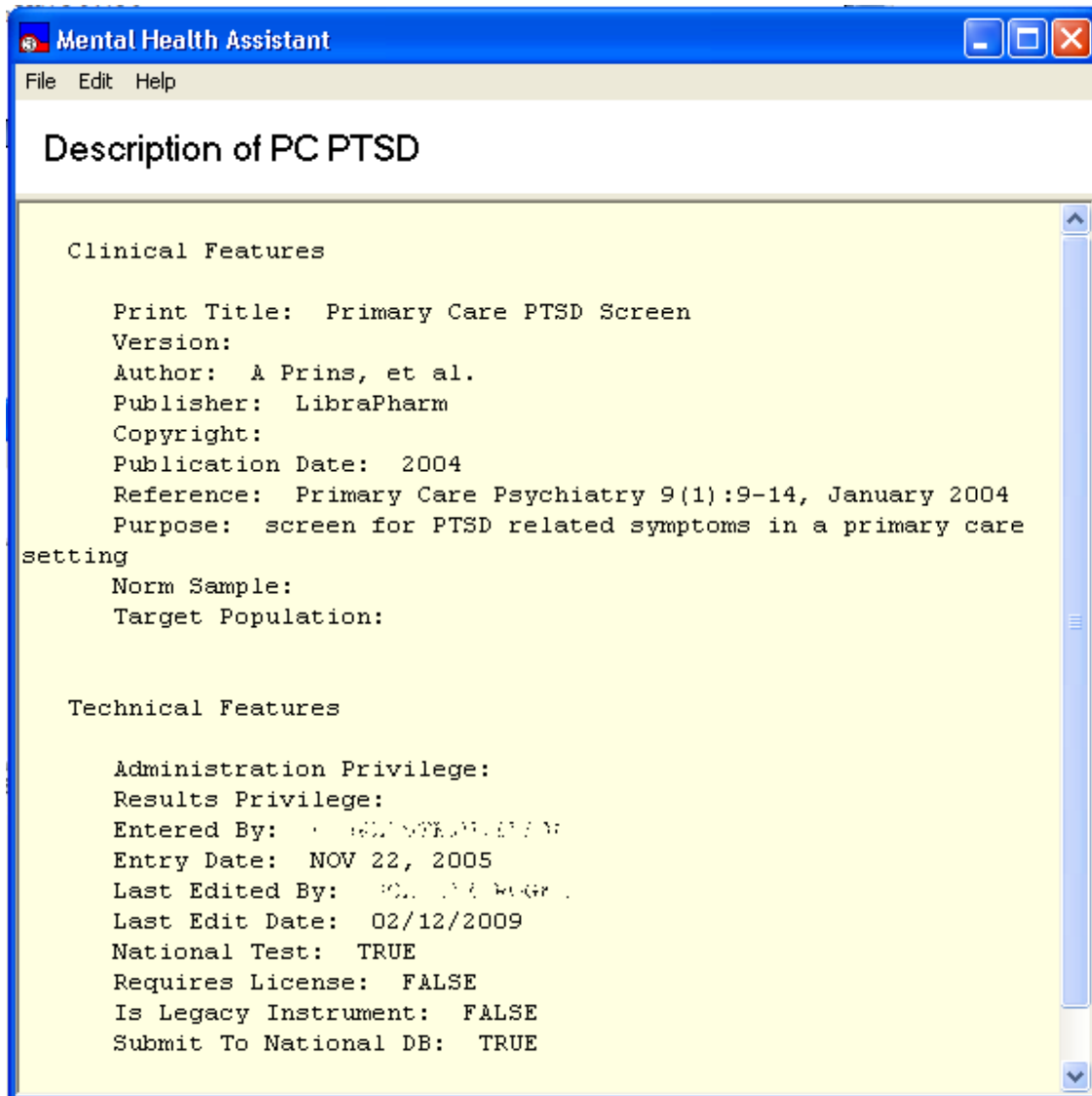
Reviewing a Description of the Selected Instrument

The clinical and technical features of any particular instrument supported by MHA can be reviewed by clicking on the instrument name followed by clicking on **Help | Instrument Description...** You can right-click on the instrument to perform the same operation.

Example: How to view information about an instrument.



Example: Description of an instrument.



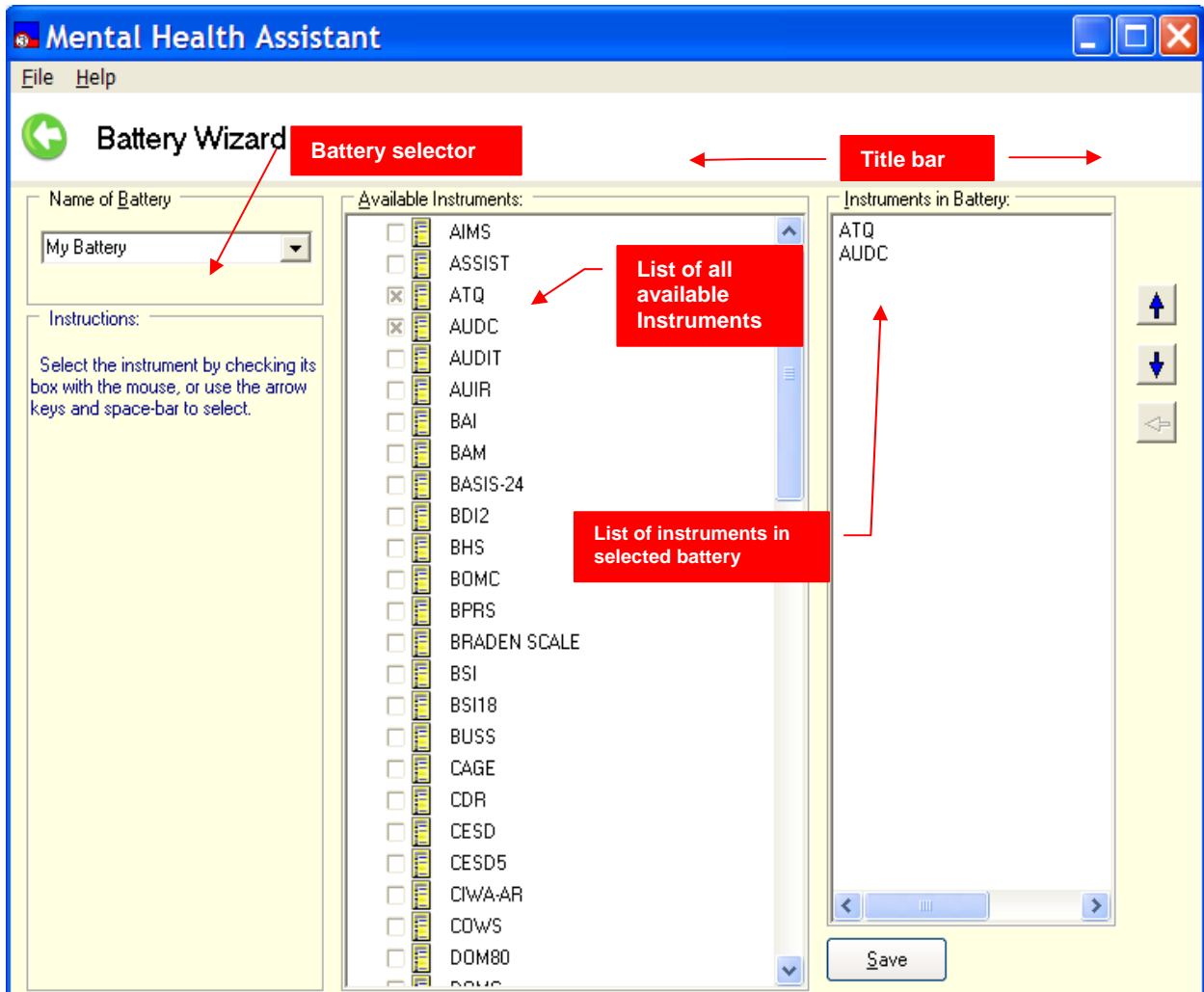
Instrument Administrator's Battery Wizard

Orientation

The Instrument Administrator's **Battery Wizard** is a tool for creating and maintaining persistent, reusable instrument batteries. User-defined batteries that are created using the **Battery Wizard** are listed in the **Available Instruments and Batteries** list box. When the instruments in a battery are added to the **Instruments Chosen** list, the names of the instruments contained in the battery are listed in **Instruments Chosen**, not the name of the battery.

Creating reusable batteries from frequently administered sets of instruments can reduce the time required to set up a testing session for patients with similar testing needs.

Example: The **Battery Wizard** form.



Main Menu

The Main Menu offers user functions in the context of the Battery Wizard, such as additional tools and help.

Title bar

The Title Bar is a visual artifact that is used throughout MHA to display information about the context that applies to the current activity.

Available Instruments and Batteries list

The Available Instruments and Batteries list is used to select which instruments will be administered. In some cases there will only be one instrument selected. This list also allows for selecting multiple instruments or batteries, or a combination of both.

Instruments in Battery list

The Instruments in Battery list is the collection of instruments selected to become part of the current battery. The instruments are listed here in the order in which they will be administered—from top to bottom.

Re-sequencing buttons

The re-sequencing buttons are used to alter the order in which the instruments in the Battery will be listed in the Instruments Chosen list. Instruments can be removed from the battery also.

Context-sensitive Help

Context-sensitive help tips are displayed in this area and are dependent on where the mouse pointer is resting.

Battery Selector

The Battery Selector Drop-Down Combo Box is used to type in the name of a new battery, or to select from a list of existing batteries. The battery name indicated here is the currently-selected battery to which all editing actions apply.

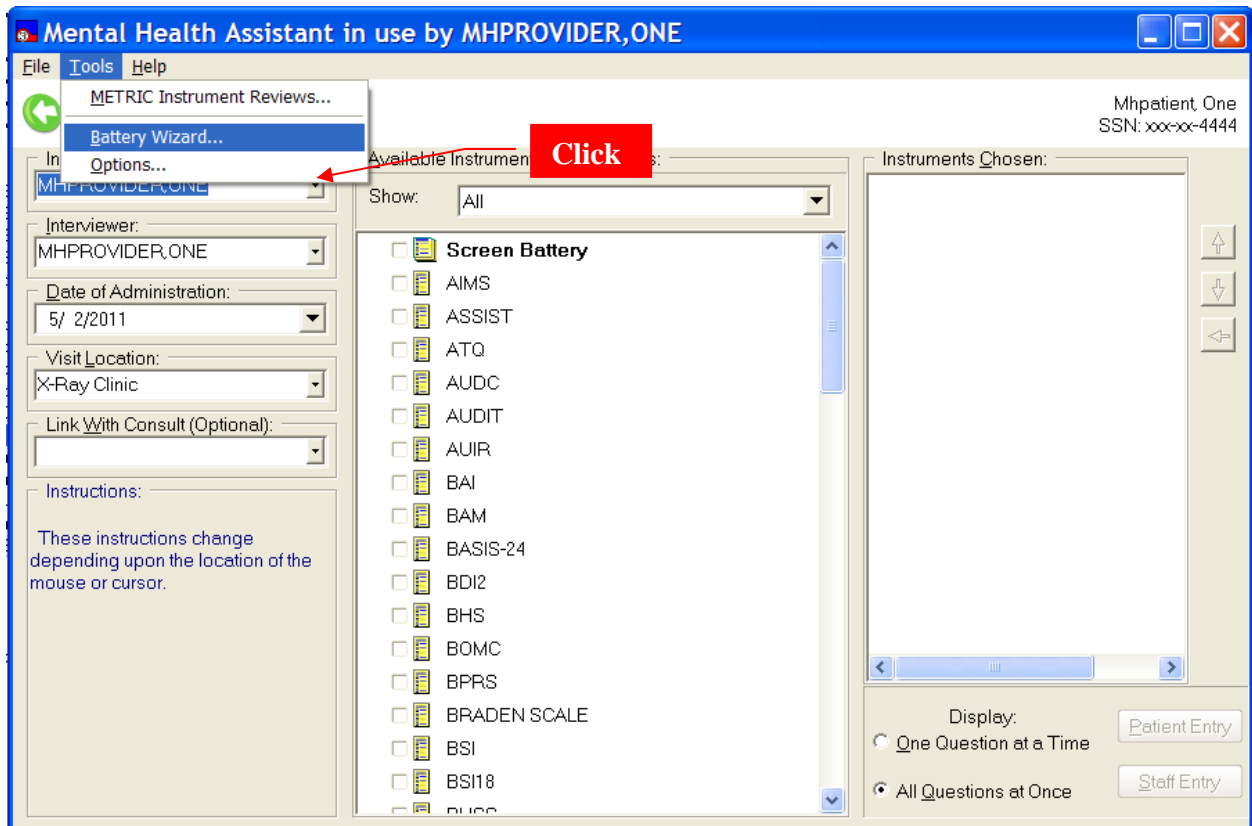
Save Button

The Save button is used to save to VistA all changes made to the current battery. After a battery is saved, its name will be listed in the list of Available Instruments and Batteries on the Instrument Administrator form.

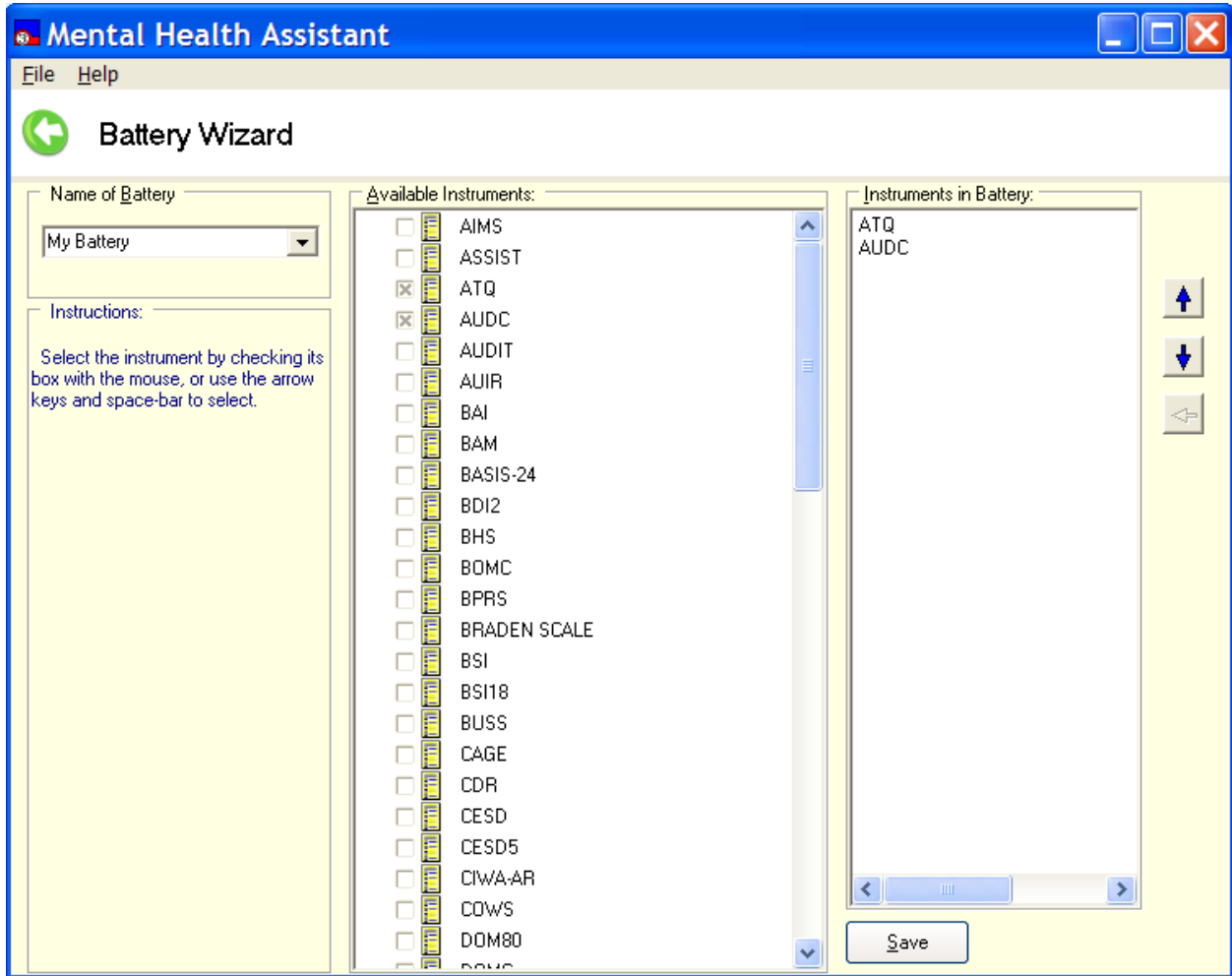
Invoking the Battery Wizard

The Battery Wizard **must** be invoked from the **Instrument Administrator** form. Similarly, all consequences of editing batteries are reflected in the Instrument Administrator, upon closing the **Battery Wizard** form.

Example: To start the **Battery Wizard**, click on **Tools | Battery Wizard...** located on the **Instrument Administrator's Tools** menu.



Example: Mental Health Assistant **Battery Wizard** form.



Battery Wizard: Creating a New User-defined Battery

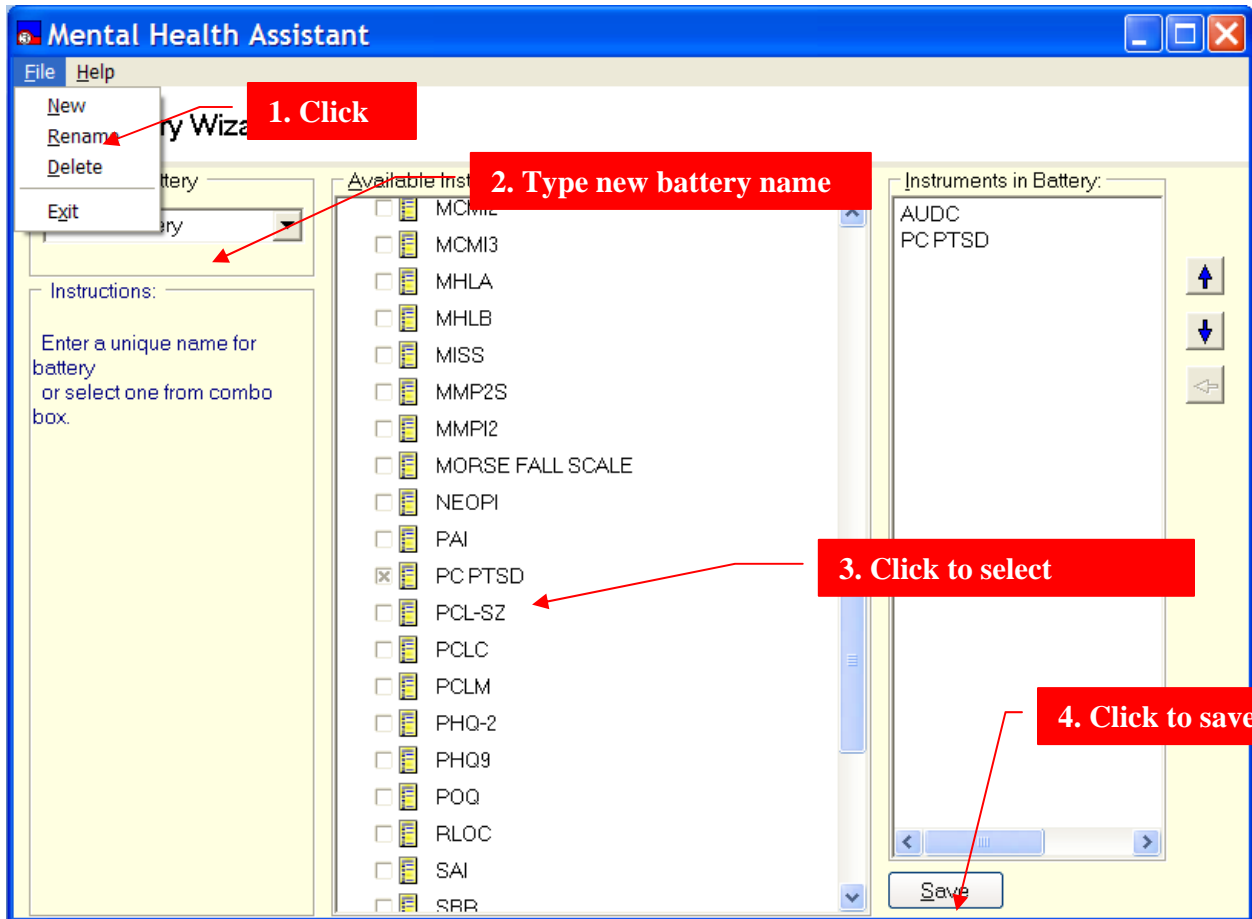
New batteries of instruments are created by first assigning a name to the new battery. Next, instruments (and other batteries) are added to the Instruments in Battery list by clicking on the desired instrument names shown in the **Available Instruments and Batteries** list box.

The **Instruments in Battery** list box can be manipulated to change the order of the tests and to add or remove tests. To modify the **Instruments in Battery** list of an existing battery, simply load the battery by selecting the battery name using the Name of Battery Drop-Down Combo Box.

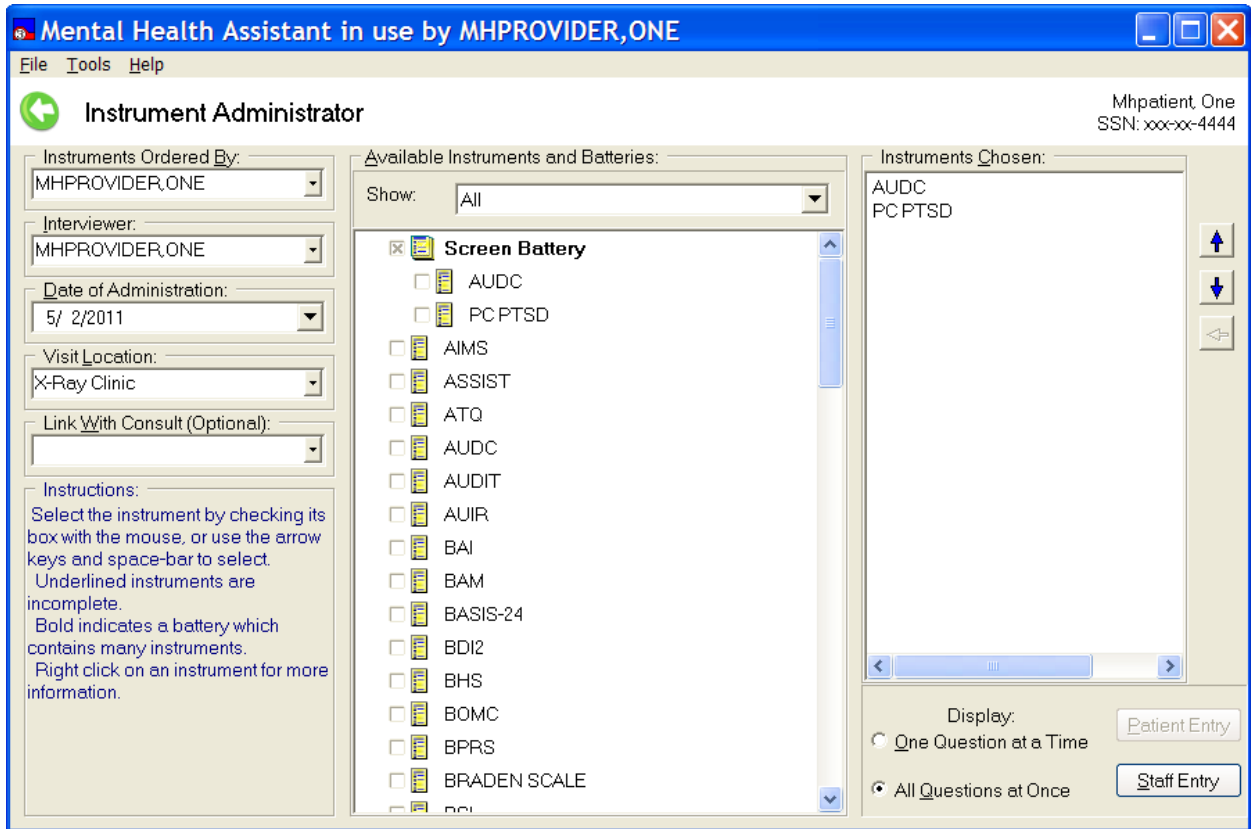
Here is an example of creating a new battery:

1. Click on **File | New** menu item.
2. Enter the name “**Screen Battery**” in the **Name of Battery** box.
3. Select **AUDC** and **PC-PTSD** instruments by clicking on the selection box next to their names.
4. Click on the **Save** button.
5. The new battery is saved after the **Save** button is pressed.
6. The **Battery Wizard** form is closed.
7. The **Instrument Administrator** form is shown and the newly-created battery appears in the list of **Available Instruments and Batteries**.
8. When **Screen Battery** is selected, the two instruments included in the battery are added to the **Instruments Chosen** list on the **Instrument Administrator** form.

Example: This is a display of creating a new battery from the **Name of Battery** box.



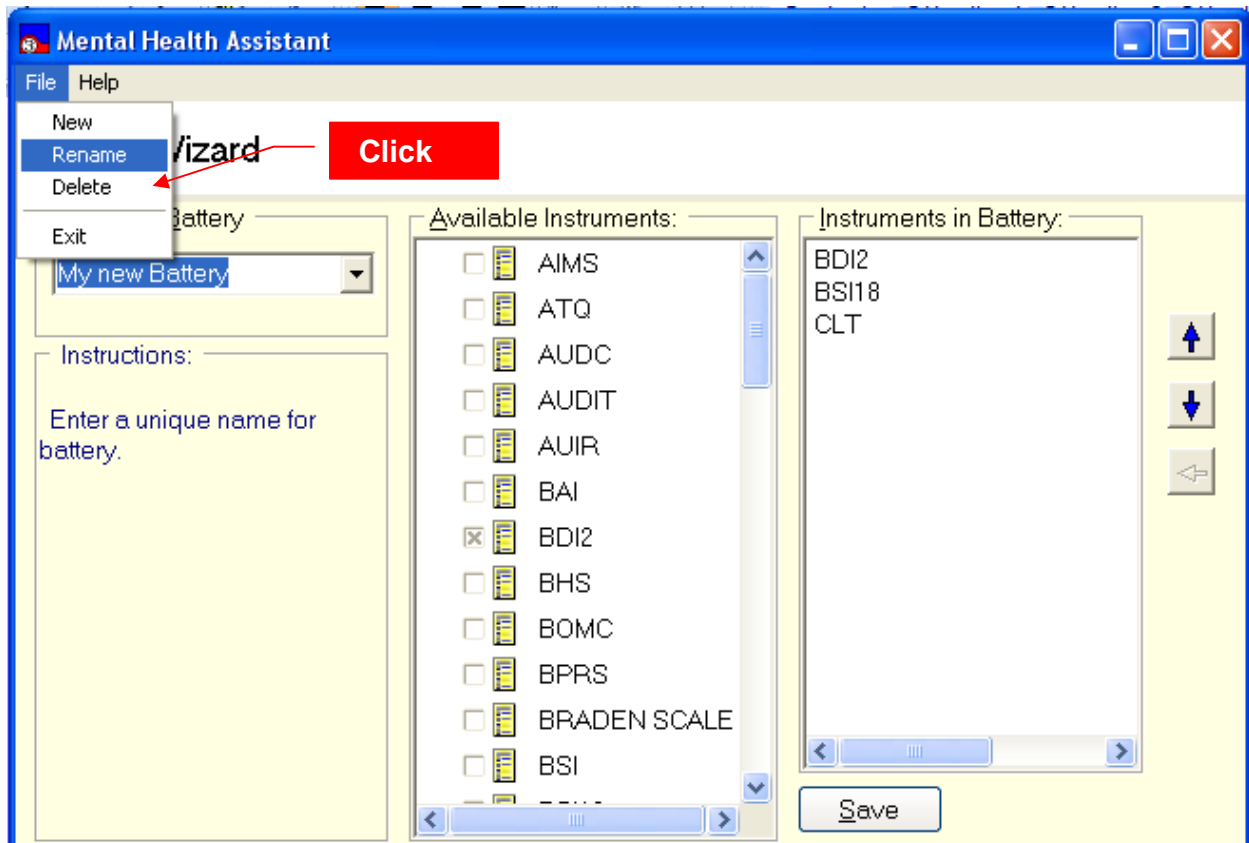
Example: Created battery is displayed and is available from the **Instrument Administrator** form under the **Available Instruments and Batteries** list. The two instruments included in the battery are displayed in the **Instruments Chosen** list box.



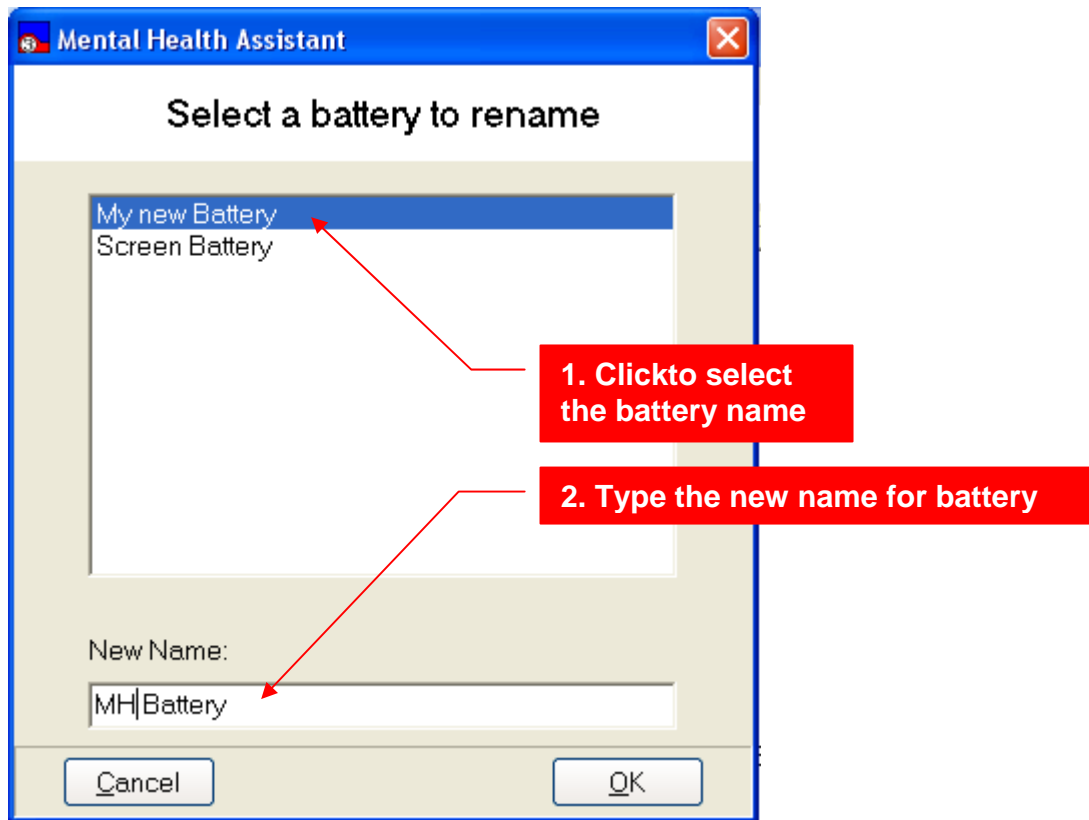
Renaming an Existing Battery

1. Go to Battery Wizard
2. Click on **File | Rename** menu item.
3. Select the battery that you wish to rename from the **Available Instruments and Batteries** list.
4. Type the new name for the battery
5. **Click Ok.**

Example: Open the **File | Rename** menu.

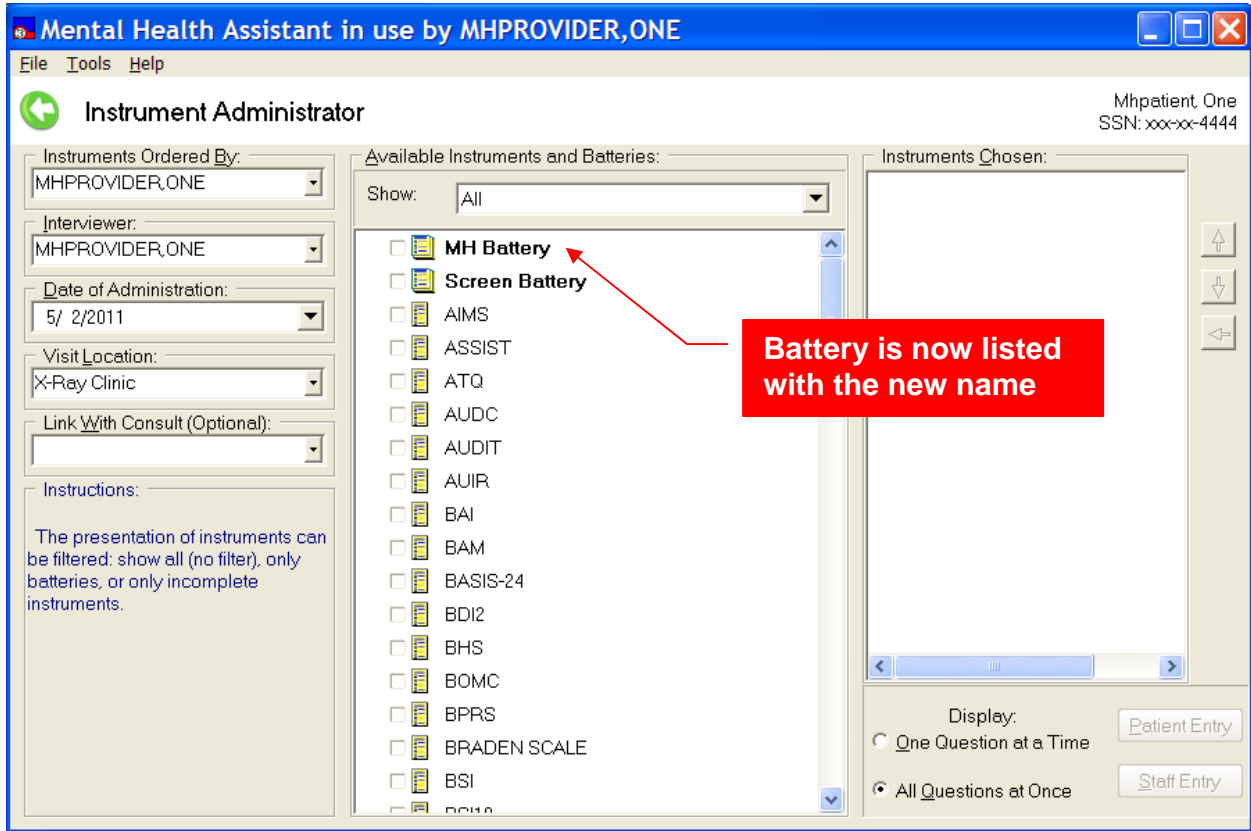


Example: Typing in a new name for an existing battery.



Once the **OK** button is pressed, the Battery Wizard can be closed (use the “exit” selection in the “File” menu, or click on the “X” in the upper right hand corner of the window, or press the escape key “ESC”). The battery’s new name will appear in the “Instrument Administrator” window.

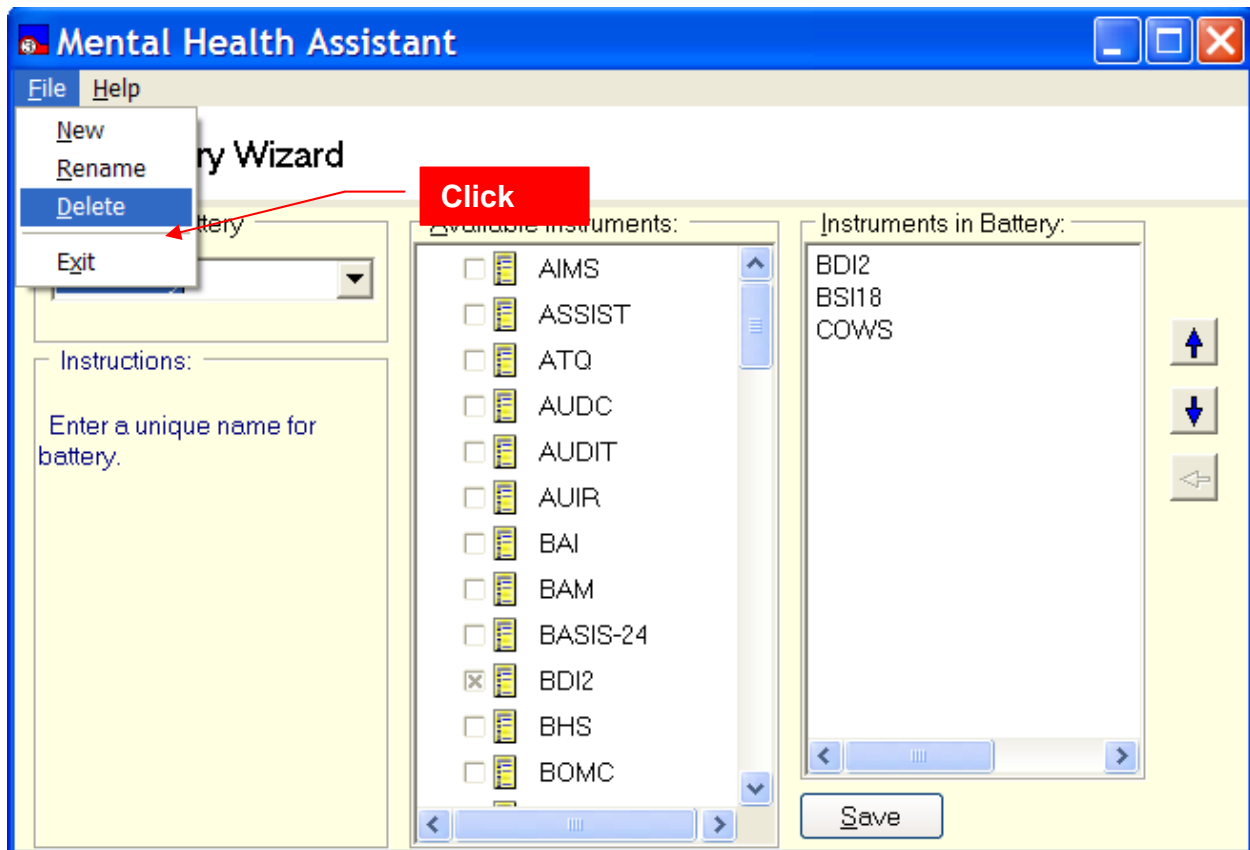
Example: Displaying the **New Name** from the **Available Instruments and Batteries** list box.



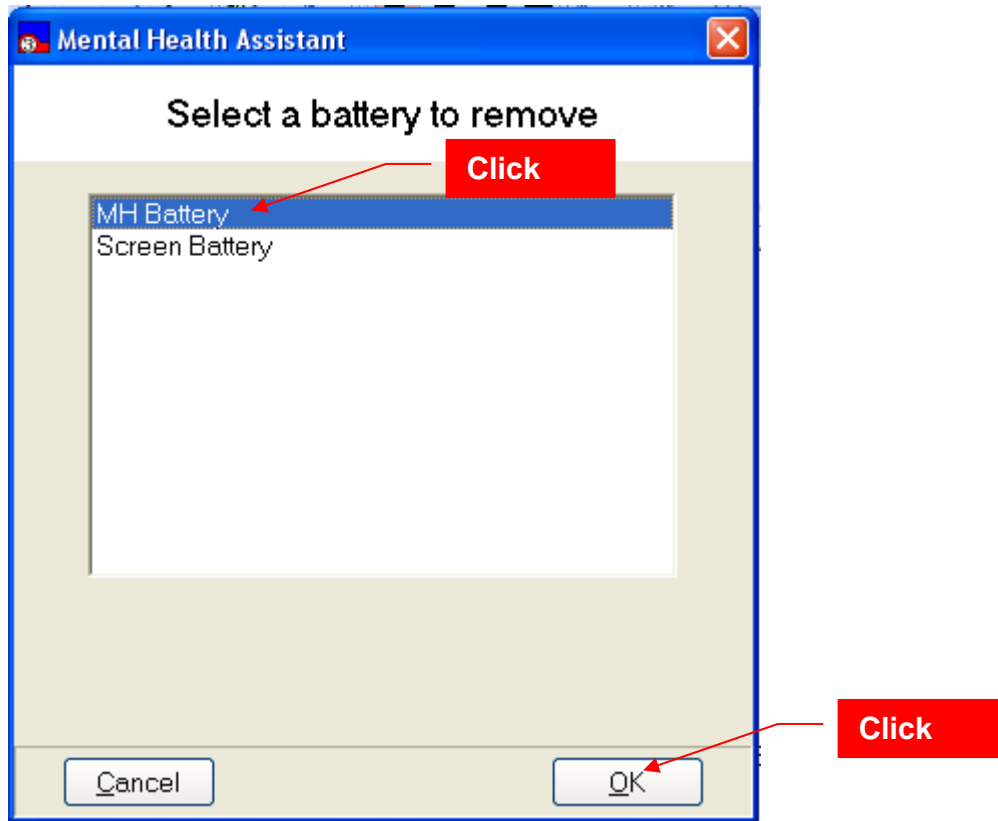
Deleting an Existing Battery

1. Go to the Battery Wizard
2. Click on **File | Delete** menu item.
3. Select the battery to be deleted from the **Available Instruments and Batteries** list box.
4. Click on **Yes**.
5. The selected battery is deleted from Vista and from the list of **Available Instruments and Batteries**.

Example: Deleting an existing battery.



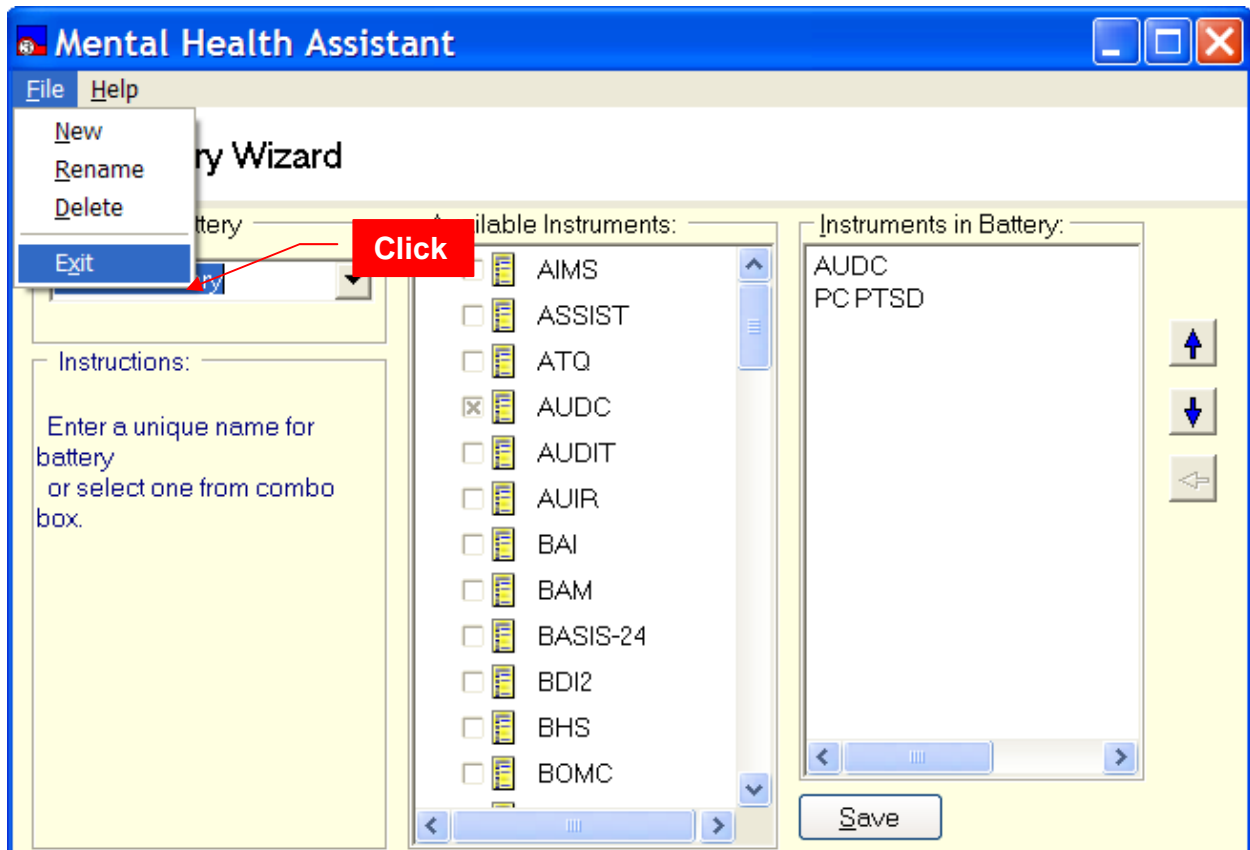
Example: Click on **File | Delete** menu item. Click on the **OK** button.



Exiting the Battery Wizard

To exit the **Battery Wizard** form and return to the **Instrument Administrator** form **click** on the drop-down **File | Exit** menu item. You can also press the “ESC” key, or click on the “X” in the upper right-hand corner of the form, or click on the left arrow. The **Battery Wizard** form will close and the user is returned to the **Instrument Administrator** form.

Example: Exit the Battery Wizard.



Instrument Administrator’s “One Question at a Time” Input Form

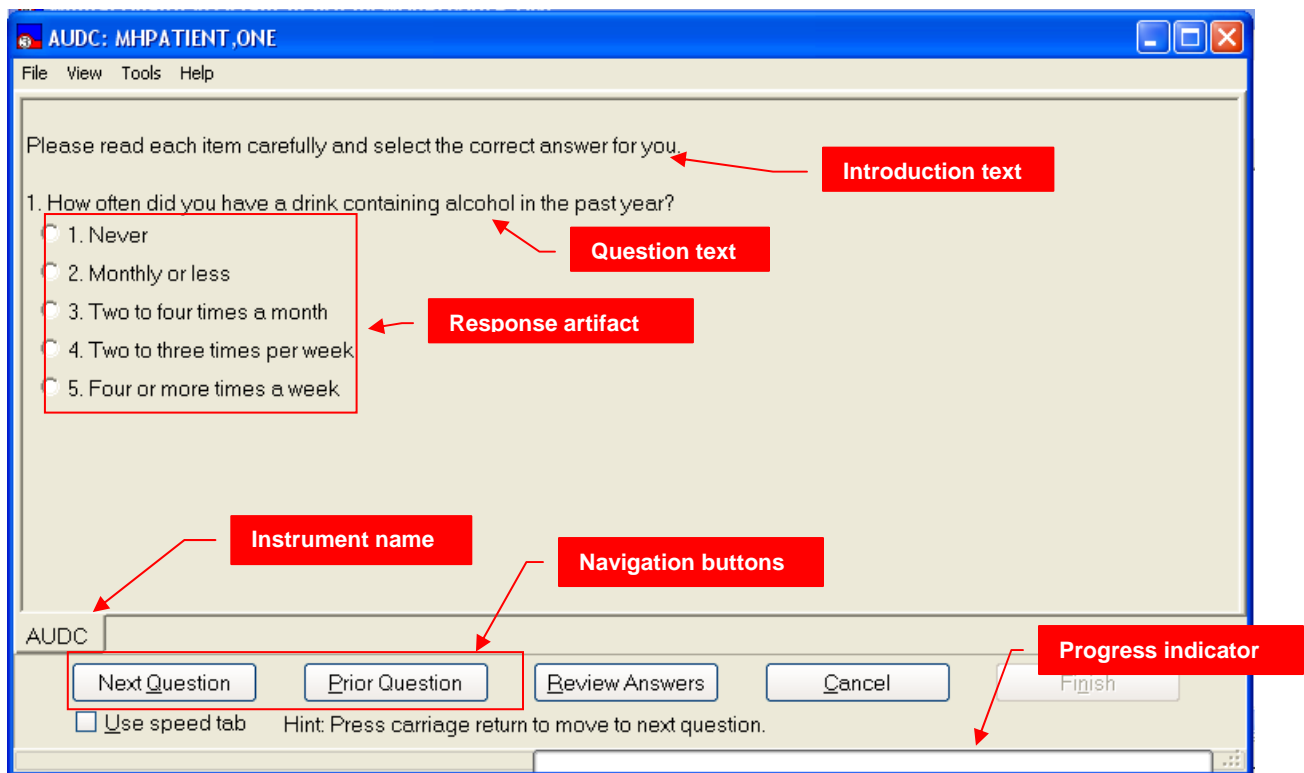
Orientation

The “**One Question at a Time**” data-entry form enables the user to answer questions by viewing and responding to one question at a time. This display mode is ideal for patient-entry, since it only displays one question in the data entry form. This allows for a more focused and relaxed approach to responding to questions. This mode is also suitable for staff entry as well. It boils down to a matter of personal preference.

This section lists, in detail, all the various types of visual artifacts that users are likely to interface with while responding to questions during an administration.

Refer to the glossary for a description of the visual elements on these forms, and how they are normally used.

Example: Single-question data-entry form.



The Main Menu

The Main Menu offers user functions in the context of the Single-Question form, such as tools and help.

The Selected Patient Identification Label

The **Selected Patient Identification** label displays information about who is the currently selected patient within MHA. All functions performed in the **Single-Question** form will apply to this patient.

The Instrument's Name

The Title Bar is a visual artifact that is used throughout MHA to display information about the context that applies to the current activity. In this case, the Title Bar displays the current instrument's name.

The Introduction Text

Introduction Text is used as narrative introduction to one or more questions. Generally, introductions present instructions on how to respond to questions.

The Question Text

The Question Text is the actual question presented to the user.

The Response Artifact

A Response Artifact is a visual control that the user will use to respond to the presented question. There are a number of different types of Response Artifacts in MHA, such as Drop-Down Combo Boxes, Text Boxes, Spin Edits and such. On the Single-question form, all response artifacts are displayed on the same area of the form.

The Navigation Buttons

The Navigation Buttons are used to display Previous and Next Questions. They are used to navigate through the sequence of all questions contained in the instrument.

The Progress Indicator

The Progress Indicator displays the current percentage of questions answered so far, represented by the number of questions answered, compared to the total number of questions in the instrument. If the progress bar is red, it indicates that a question was skipped; when green, all the questions so far have been answered.

The Review Answers Form

The Review Answers form is a navigational aid to use with instruments that contain a large number of questions. It presents a simple way to select a question for editing that is not contiguous to the present question.

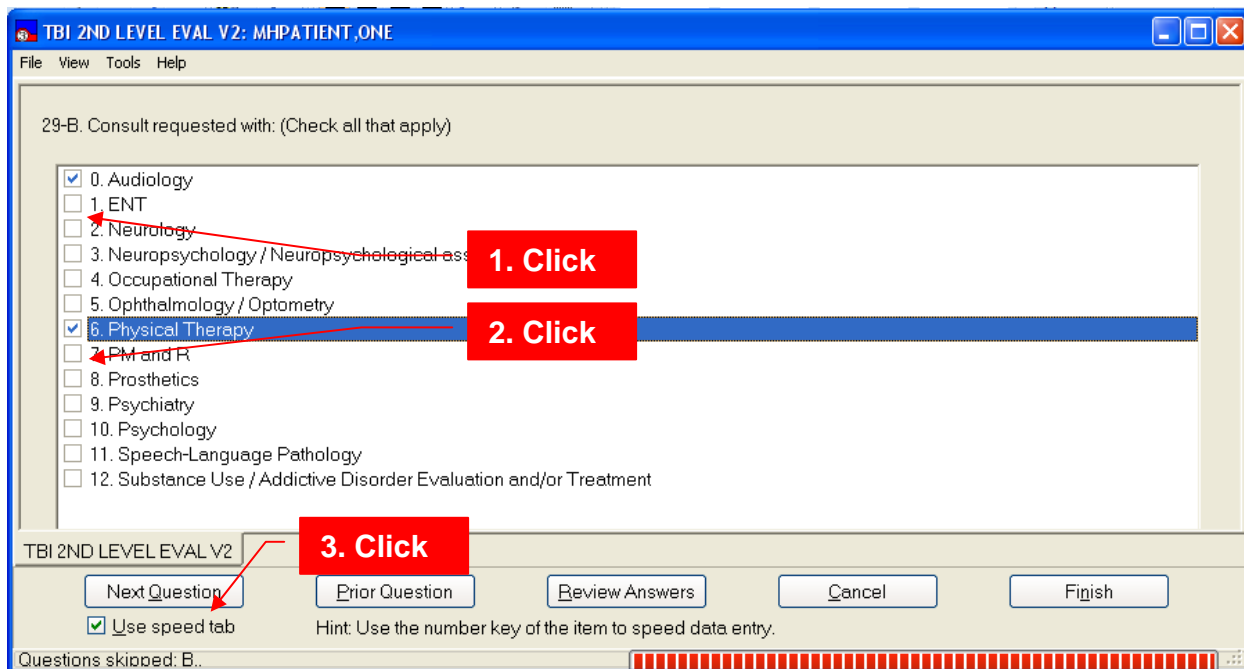
Responding to a Multi-choice Question Using a Multiple-Selection List Box

Multiple-Selection List Boxes allow the user to select one or more of the choices listed. To respond to a question:

1. Select one or more choices from the Multiple-Selection List Box on the form by clicking on the item, or, use the arrow keys to move to the desired item and press the space bar.
2. To go to the next question, click on **Next Question** button, or, press the “Enter” key.

The choices made are recorded and the next question is automatically displayed.

Example: Selecting two choices.



Responding to a Single-choice Question Using a Drop-Down List Box

NOTE: Drop-Down List Boxes allow selection of a single choice from a list. This type of question is also called a “combo box.”

To respond to a question:

1. **Click** on the down-arrow located on the drop-down list box to display the list, or, use the arrow keys to step through the sequence of items.
2. Select a program type from the list by clicking on the item, or, when the desired item is presented in the box, press the “Tab” or “Enter” key to select the item. It is also possible to type the number of the item’s designator (“1,” “2,” etc) if they are used.
3. To proceed, click on the **Next Question** button, or press the “Enter” key. Alternately, you can also press the “Tab” key until the **Next Question** button is active, then press the “Enter” key.

Example: Data Input form displaying a drop-down list box.

Addiction Severity Index - Lite for MHPATIENT, ONE SSN: 000002412

File Tools Help

1. Click General Information

G3. Program Type: Consultation/Liaison

G4. Date of Admission: Early Intervention/Education/Referral

G8. Interview Form (A): Detoxification Services

1. Full Intake Ambulatory except Opioid Substitution

G11. Interviewer : Opioid Substitution

G11a. Ordered By : Inpatient Acute Care

G12. Special: Substance Abuse Residential Rehabilitation Treatment Program

Compensated Work Therapy/Transitional R

Therapeutic Community

2. Click

Responding to a Question that Asks for a Currency Amount using aText Box

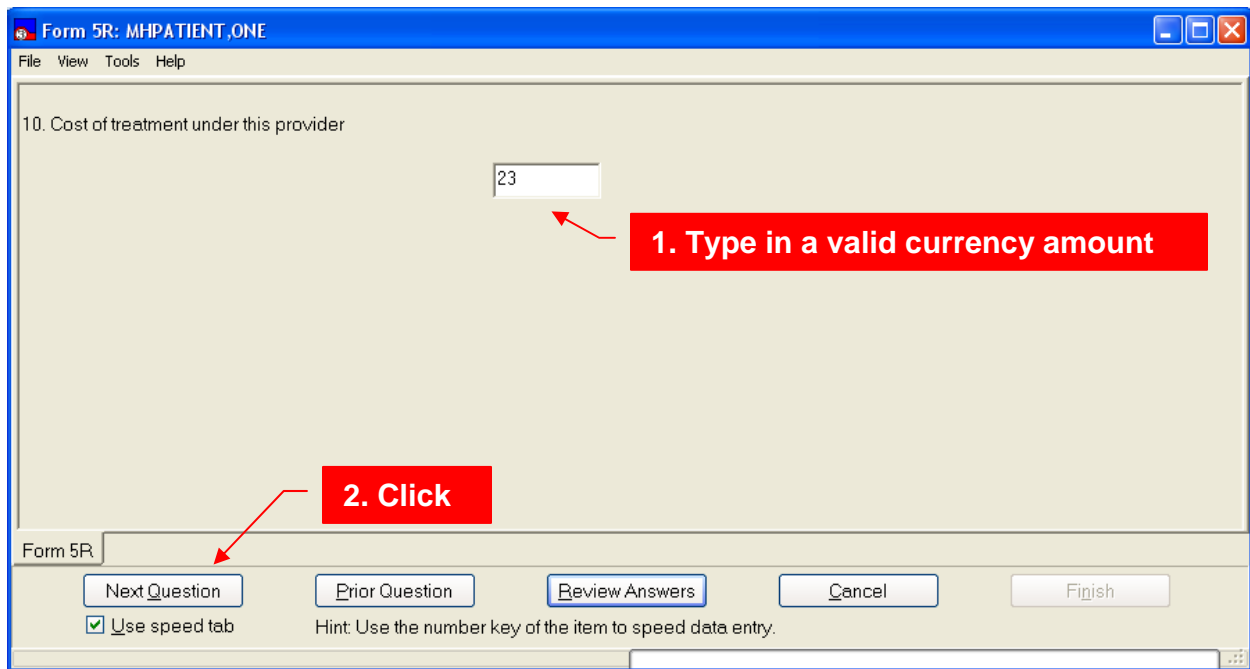
Some Text Box artifacts are configured to only accept valid currency values.

To respond to a question:

1. Type a currency value in the Text Box
2. Click on **Next Question** button, or press the “Enter” key.

The entered currency value is recorded and the next question is automatically displayed.

Example: Entering a currency amount.



Form 5R: MHPATIENT, ONE

File View Tools Help

10. Cost of treatment under this provider

23

1. Type in a valid currency amount

2. Click

Form 5R

Next Question Prior Question Review Answers Cancel Finish

Use speed tab Hint: Use the number key of the item to speed data entry.

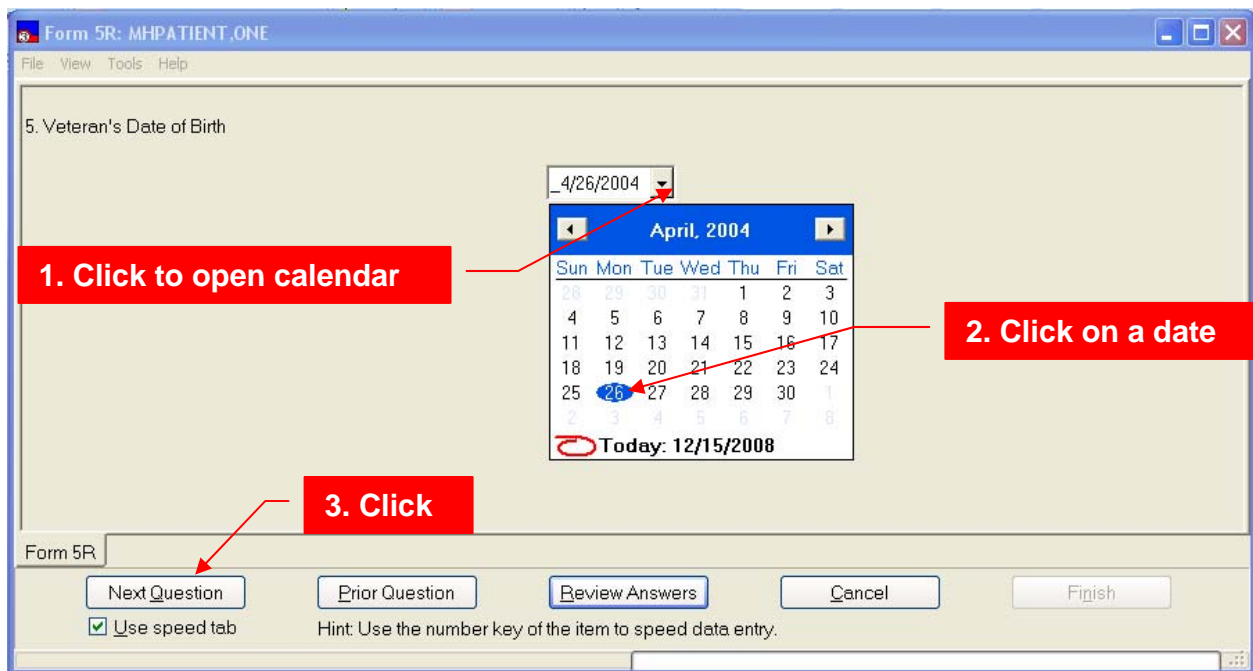
Responding to a question that asks for a date using a Date-Picker

Date-Pickers are used to respond to questions requiring a date for an answer. A Date-Picker displays a calendar from which a date is selected. Alternatively, the user may simply type the date in the Text Box portion of the Date-Picker artifact. In MHA, Date-Pickers usually don't allow for selecting a date in the future. To select a date:

1. Click on the button with the arrow-head to open the Date-Picker calendar component; alternately, you can type the date directly into the date box and skip the next step.
2. Navigate to the desired date and click on its number symbol.
3. Click on **Next Question** button, or, press the "Enter" key.

The selected date value is recorded and the next question is automatically displayed.

Example: Selecting a date.



Responding to a question that asks for a line of text using a Text Box

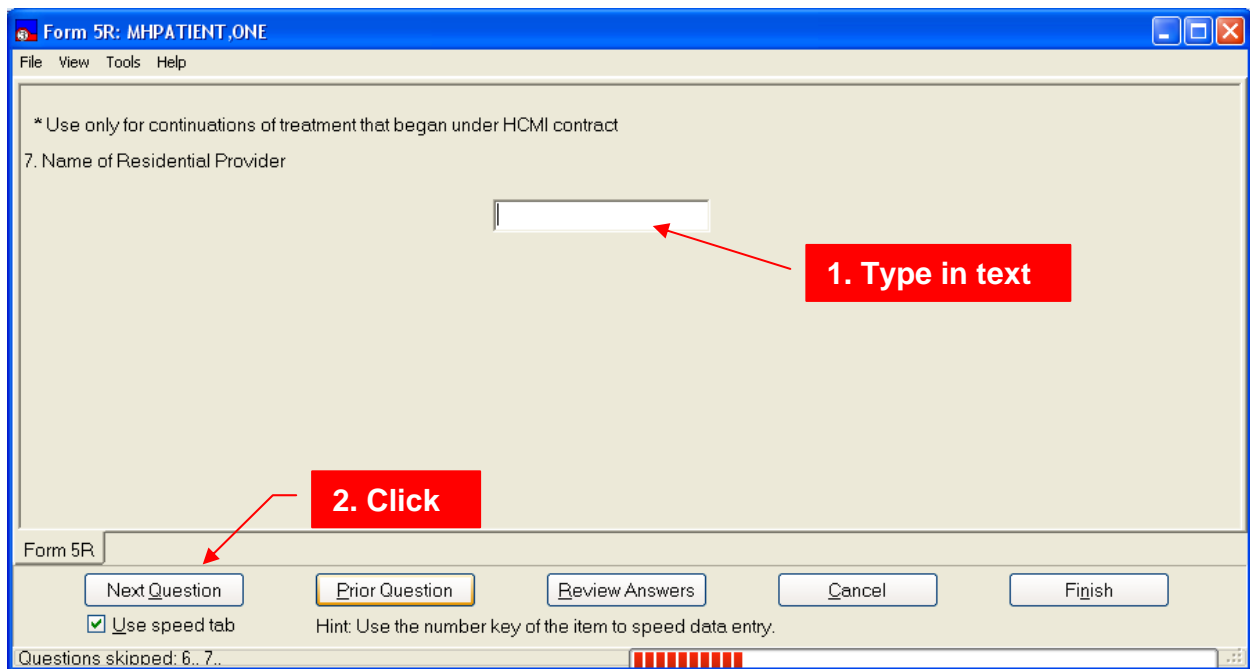
A Text Box allows entry of a single line of text as a response to a question.

To answer a question:

1. Type a line of text in the Text Box.
2. Click on **Next Question** button, or, press the “Enter” key.

The entered text is recorded and the next question is automatically displayed. A Text Box accepts any type of text.

Example: Entering text into a Text Box.



The screenshot shows a software window titled "Form 5R: MHPATIENT, ONE" with a menu bar (File, View, Tools, Help). The main area contains the text: "* Use only for continuations of treatment that began under HCMI contract" and "7. Name of Residential Provider". Below this is a text input field. A red arrow points from a red box labeled "1. Type in text" to the input field. Below the input field is a red box labeled "2. Click" with an arrow pointing to the "Next Question" button. The bottom of the window features a toolbar with buttons for "Next Question", "Prior Question", "Review Answers", "Cancel", and "Finish". There is also a checkbox for "Use speed tab" and a hint: "Hint: Use the number key of the item to speed data entry." At the very bottom, it says "Questions skipped: 6.. 7.." and a progress indicator.

Responding to a question from a list of answers using a Single-Selection List Box

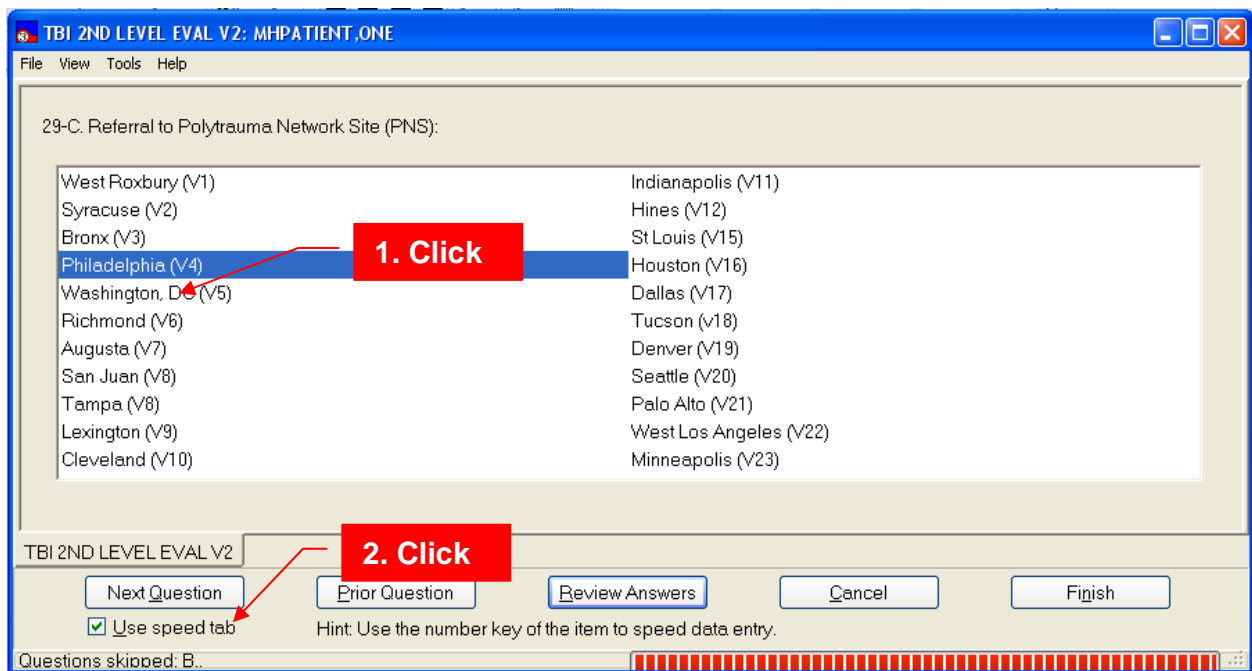
A Single-Selection List Box is very similar to a Combo Box, except that all available responses are readily visible. There is no drop-down list to trigger. To answer a question:

1. Select one item from the Single-Selection List Box by clicking on it, or use the arrow keys to move to desired item then press the “Tab” or “Enter” key.
2. Click on **Next Question** button, or, press the “Enter” key.

Alternately, if the “Speed Tab” is checked, you can press the number key that corresponds to the item’s designator. That key press will do two functions; it will select that item and display the next question.

The single choice made is recorded and the next question is automatically displayed.

Example: Selecting a single response.



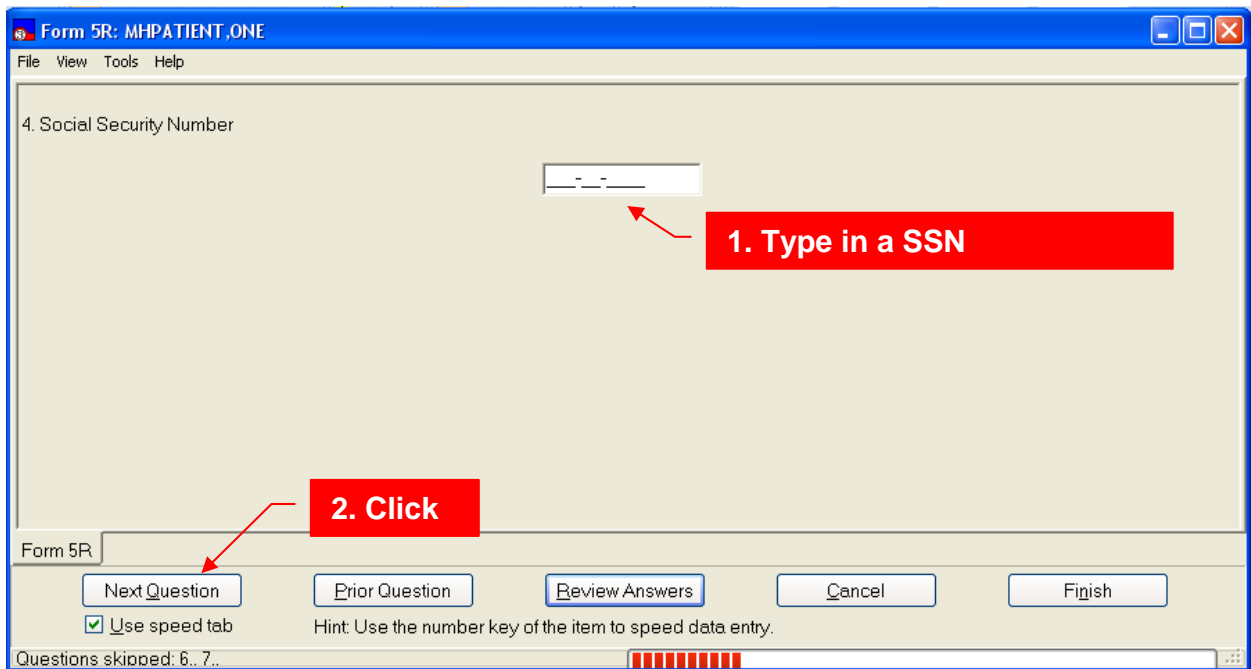
Responding to a question using a Masked Text Box that pre-formats input data

Masked Text Boxes automatically format the data entered into them. For instance, a Masked Text Box configured to accept a phone number, or Social Security Number, will automatically position and display the parenthesis and dashes normally found in fully-formed phone numbers or SSN. All that the user must type are the numbers. The rest of the formatting is done automatically.

Enter a Social Security Number:

1. Type only the numbers in a SSN in the Masked Text Box.
2. Click on **Next Question** button, or, press the “Enter” key.

Example: The Masked Text Box adds formatting to the entered numbers to reflect a standard SSN notation. Only numbers are accepted for input.



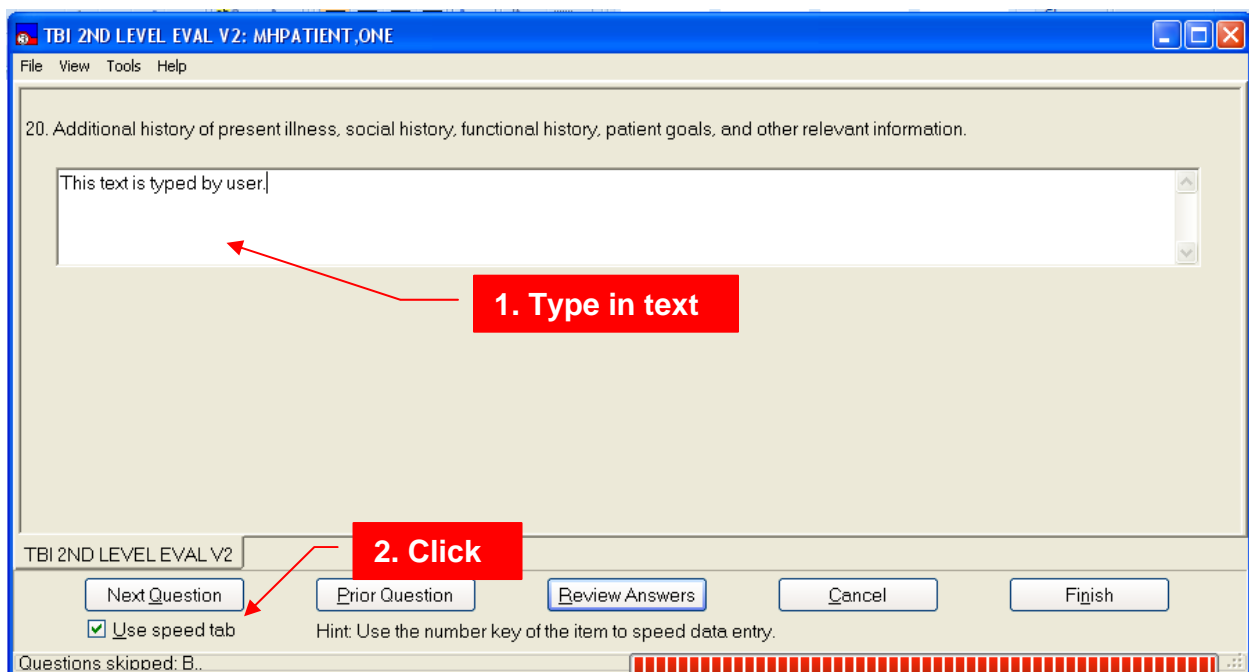
Responding to a question that asks for a long textual answer using a Multiple-Line Text Box

Multiple-Line Text Boxes accept more than one line of text.

To answer a question:

1. Type several lines of text in the Multiple-Line Text Box
2. Click on **Next Question** button, or, press the “Enter” key.

Example: The entered text is recorded and the next question is automatically displayed, The Multiple-Line Text Box accepts any type of text.



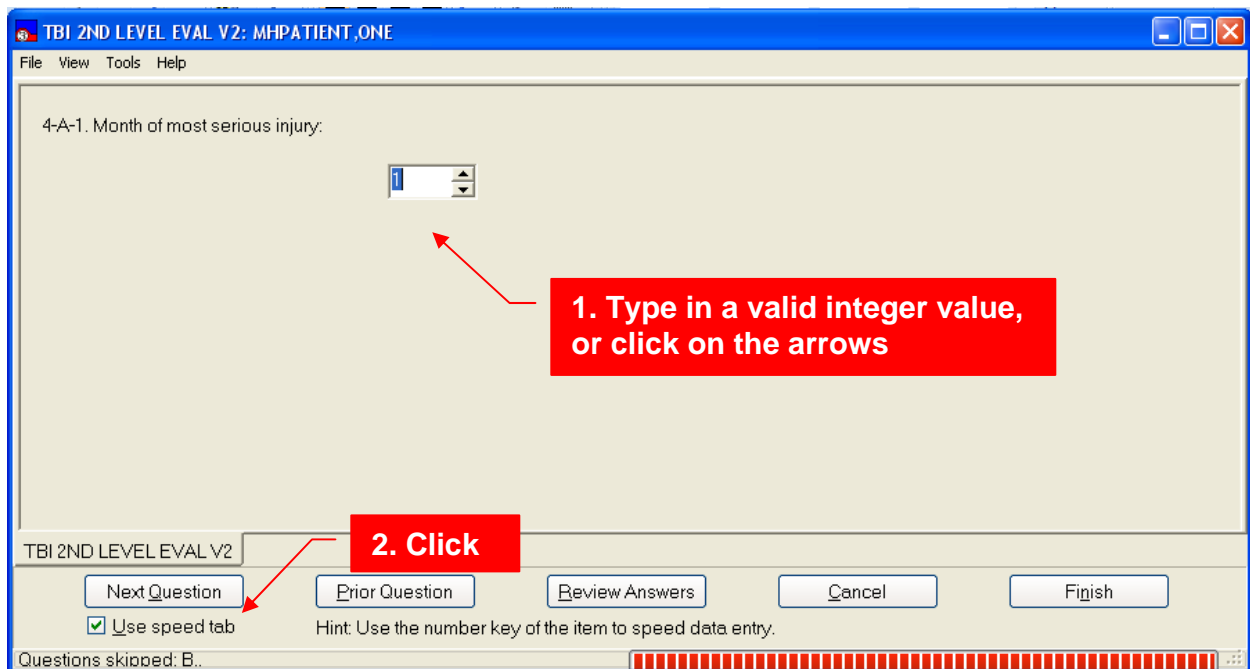
Respond to a question using a Spin Box that asks for an integer value

Spin Boxes are used to select from a list of consecutive integer values. Additionally, an integer value may be typed into the Text Box area of a Spin Box artifact. To answer a question:

1. Type an integer, or use the spin buttons with the arrowheads to enter a value in the Spin Box.
2. Click on **Next Question** button, or, press the “Enter” key.

The entered integer value is recorded and the next question is automatically displayed. The Spin Box only accepts integer values.

Example: Entering an integer value.



Responding to a question that asks for a single choice from a list using Option Buttons

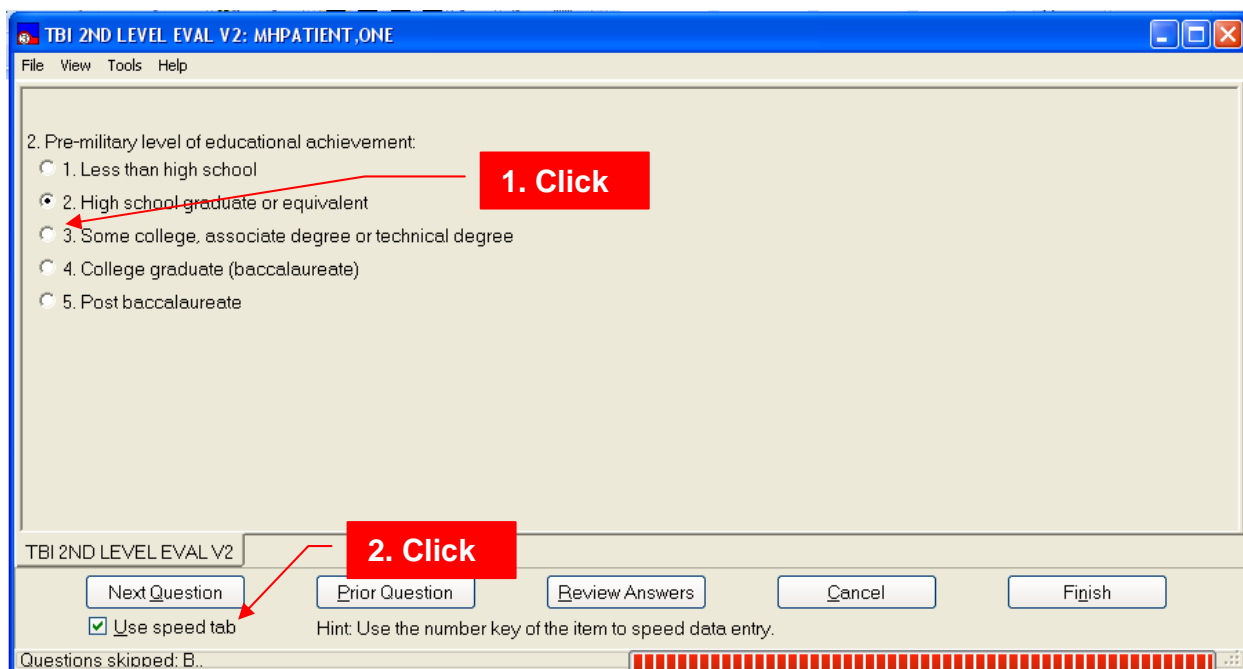
Option Buttons are used to answer questions from a list of mutually-exclusive answers. This is also called a radio group. To answer a question:

1. Click on one of the Option Buttons in the group, or, use the arrow keys to move to the desired option and press the “Tab” or “Enter” key to select the option.
2. Click on **Next Question** button, or, press the “Enter” key.

Alternately, if the “Speed Tab” is checked, you can press the number key that corresponds to the item’s designator. That key press will do two functions; it will select that item and display the next question.

The single choice made is recorded and the next question is automatically displayed.

Example: Selecting an Option Button (Radio Group) response.



Responding to a question that asks for a staff name from VistA using a Drop-Down List Box

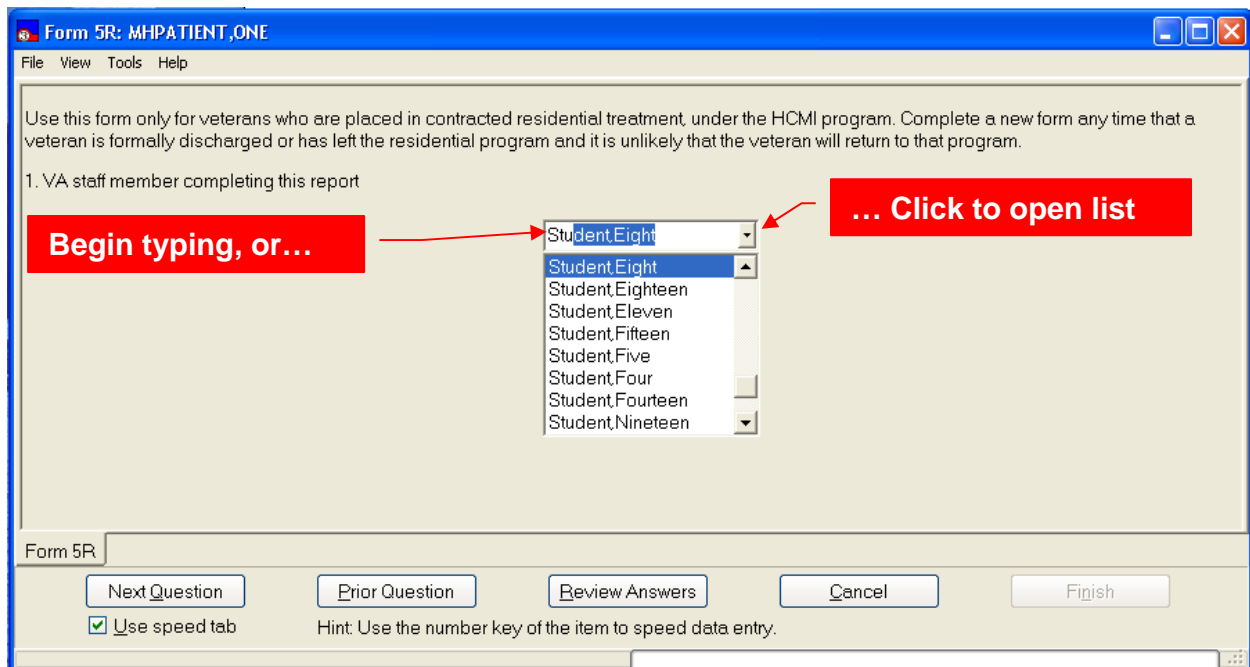
Staff list Drop-Down List Boxes are special list boxes that display a list of staff members from VistA.

To select a staff member:

1. Begin typing the first three letters of the last name in the Text Box part of the component.
2. If the complete name is not automatically filled in, select the name from the list of names that “dropped down” in the VistA Drop-Down List Box
3. Click on **Next Question** button, or, press the “Enter” key.

The name choice made is recorded and the next question is automatically displayed.

Example: Selecting a staff name from a list.



The screenshot shows a software window titled "Form 5R: MHPATIENT.ONE" with a menu bar (File, View, Tools, Help) and a main text area. The text area contains instructions and a question: "1. VA staff member completing this report". A dropdown list is open, showing a list of staff names: Student.Eight, Student.Eighteen, Student.Eleven, Student.Fifteen, Student.Five, Student.Four, Student.Fourteen, and Student.Nineteen. The name "Student.Eight" is selected. A red box with the text "Begin typing, or..." has an arrow pointing to the dropdown list. Another red box with the text "... Click to open list" has an arrow pointing to the dropdown arrow. At the bottom of the window, there are buttons for "Next Question", "Prior Question", "Review Answers", "Cancel", and "Finish". There is also a checkbox for "Use speed tab" and a hint: "Hint: Use the number key of the item to speed data entry."

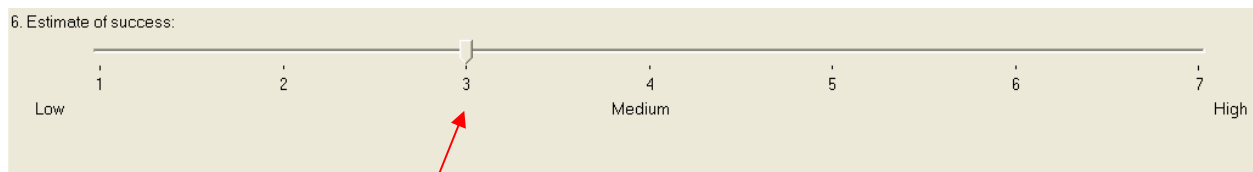
Responding to a question that asks for a value from a Slider

Sliders simplify visually selecting a value from a range of values. These are sometimes called track bars.

To answer a question:

1. **Select** a value on the Slider by moving the choice indicator on the scale to the number of your choice. You can also press the number key for the desired value.
2. Click on **Next Question** button, or, press the “Enter” key.

Example: Selecting a point on a scale. The selected Slider value is recorded and the next question is automatically displayed.



**Slide pointer to
make selection on
the scale**

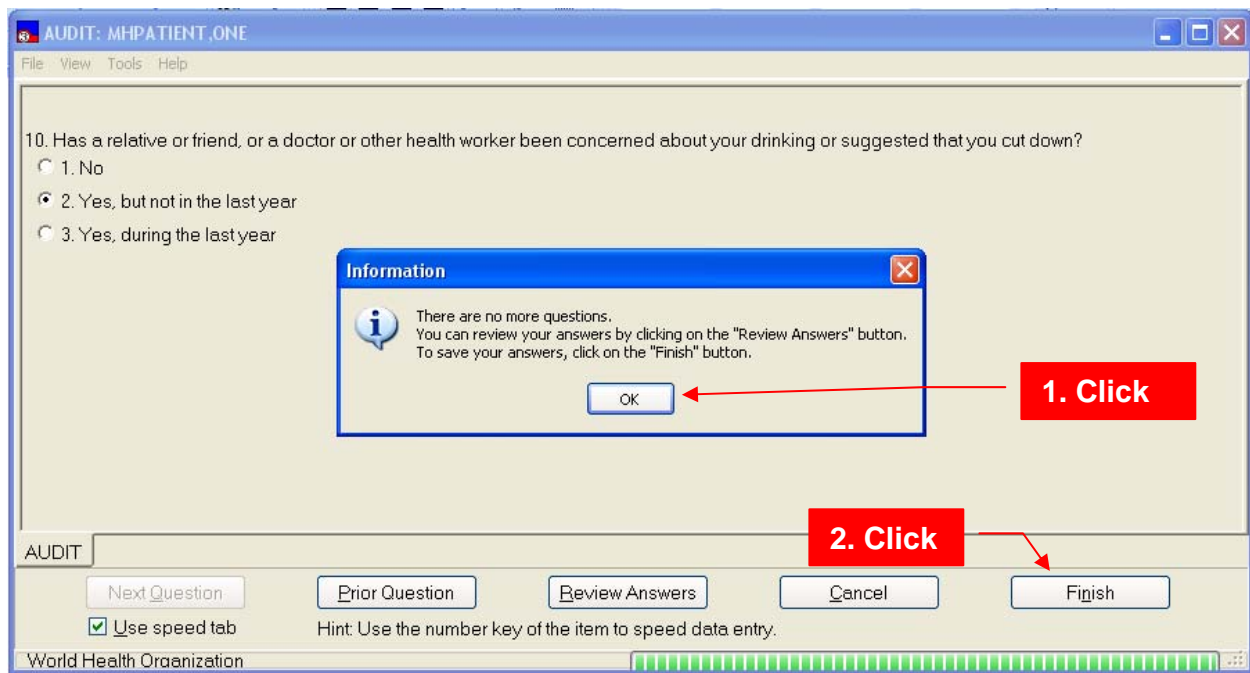
Identifying the End Point of an Instrument and Finishing the Instrument

The last question in an instrument will trigger a change in the displayed navigational buttons. The **Prior Question** buttons remain enabled and a dialog box will be displayed. Clicking on the **Finish** button will finish the test.

To finish a test:

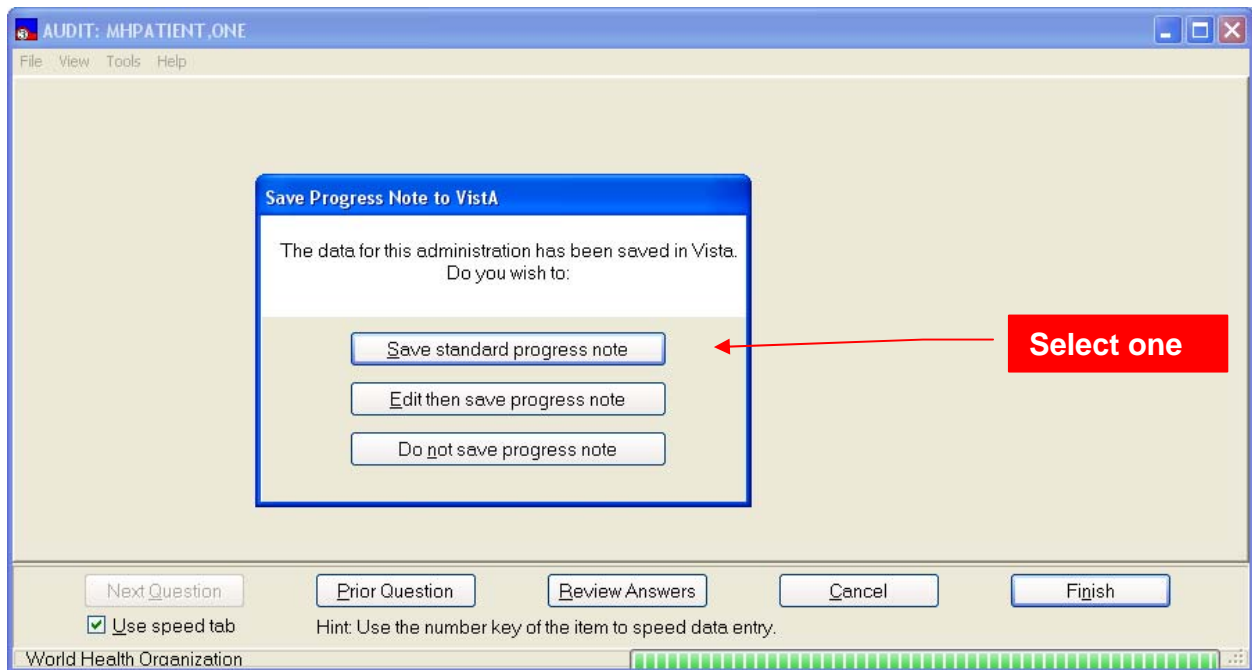
1. Answer every question in the instrument (the progress bar will be green).
2. On the last question, click on the **Finish** button.

Example: Finishing an instrument. Since this is the last question, the Information dialog is presented. Click on **OK** and then the **Finish** button.



Once the data are saved to VistA, the user is given the choice of 1) saving a standard progress note to VistA that summarizes the data and its score(s), 2) Editing the standard note before saving it and 3) not saving a progress note. See Appendix B for cases where a co-signer is required for signing a progress note.

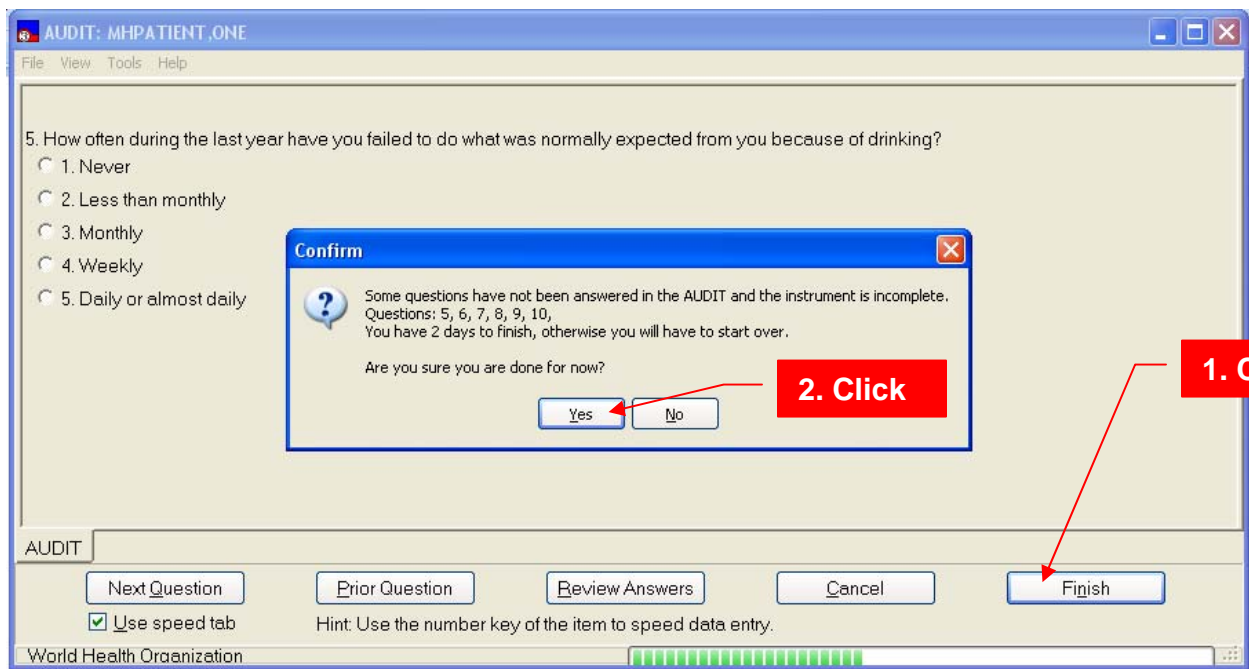
Example: Save a progress note query.



Incomplete Data-Entry Session

1. Click on the **Finish** button.
2. Click on the **YES** button of the “Confirm” dialog. The Confirm dialog will list the questions that have not been answered and will inform the user of the permitted delay to finish the administration. The Confirm dialog will also allow the user to return to the instrument.

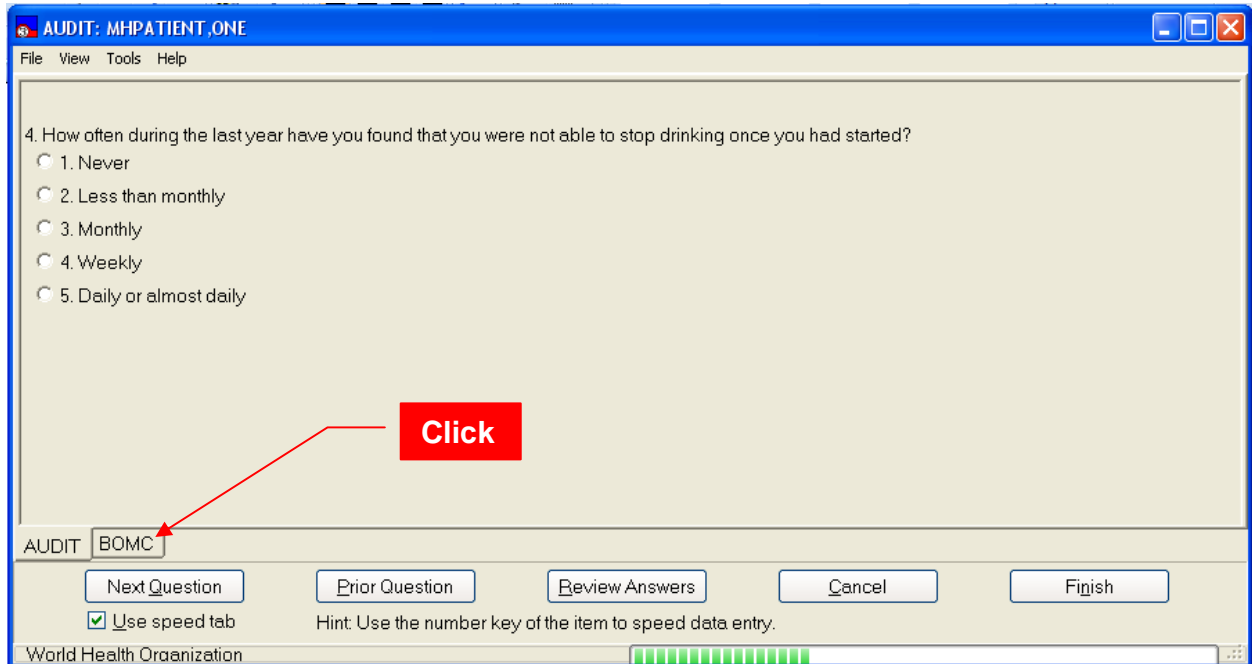
Example: When the **Finish** button is clicked, the confirm dialog is displayed. Click **Yes** to save the administration as “incomplete.”



Viewing the Next Instrument

Within the context of a series of instruments, it is possible to jump to different instruments.

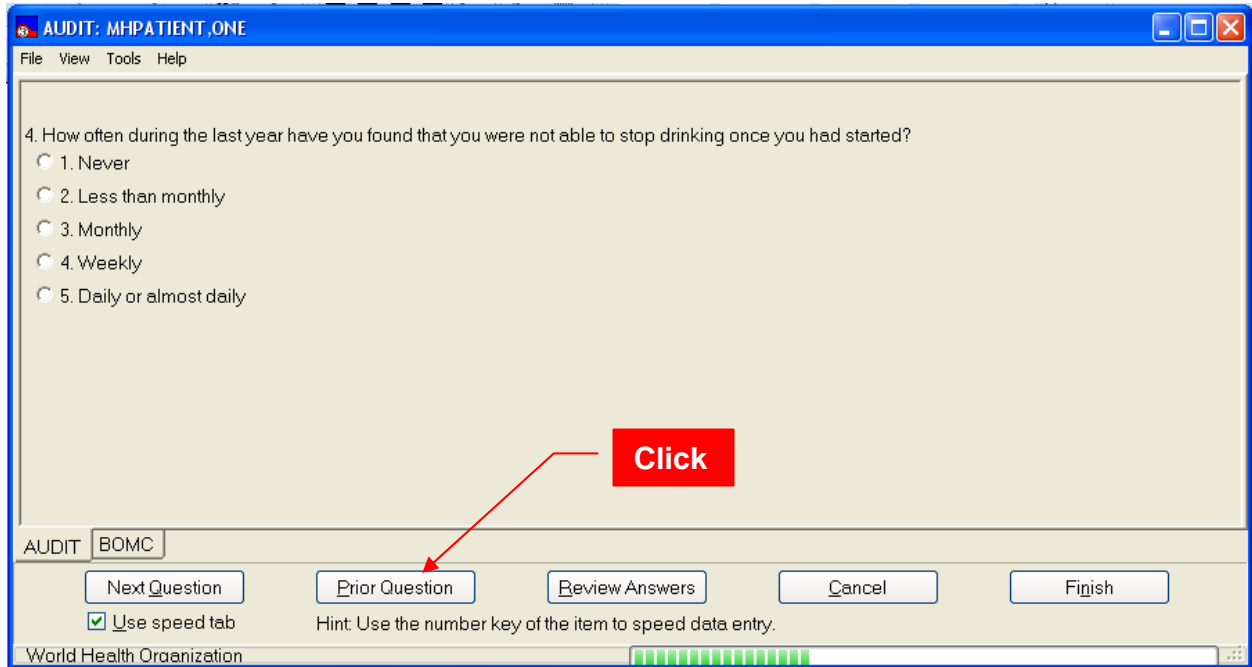
Example: Jumping to the next instrument. Click on the tab of the desired instrument. The responses are not lost on the current administration when you return.



Viewing the Prior Question

To view the question that is prior in order to the currently-selected question, click on the **Prior Question** button.

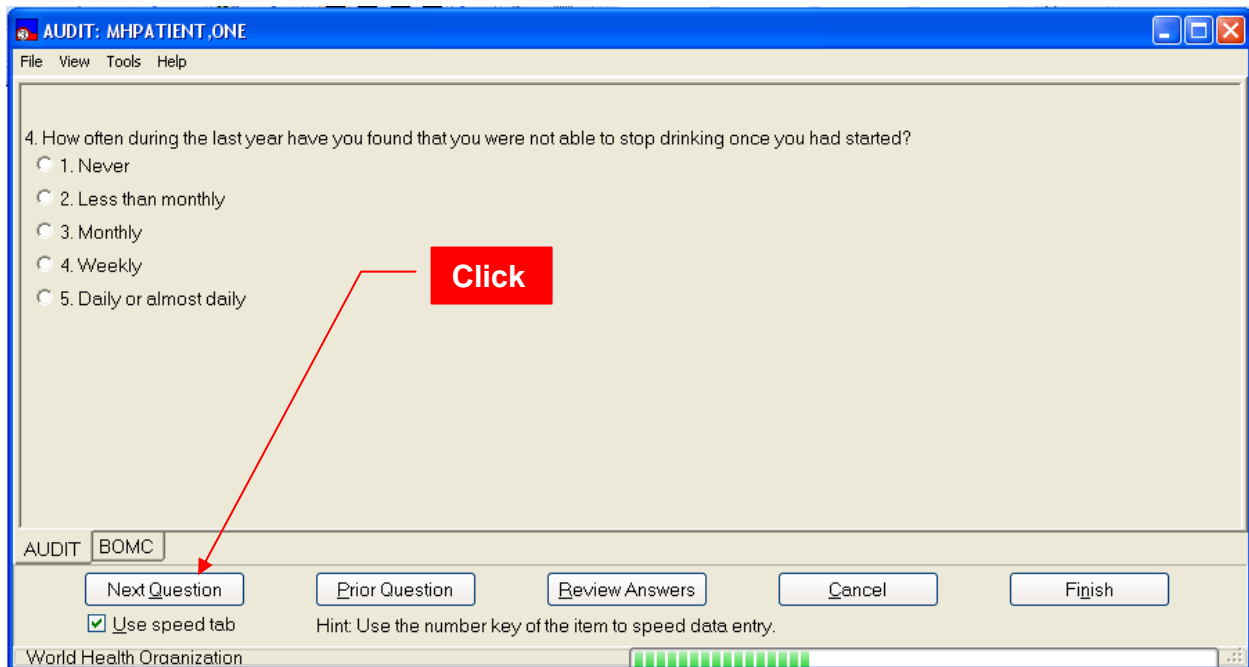
Example: The displayed question becomes the prior question within the current instrument.



View Next Question

To view the question that is next in order to the currently-selected question, **click** on the **Next Question** button.

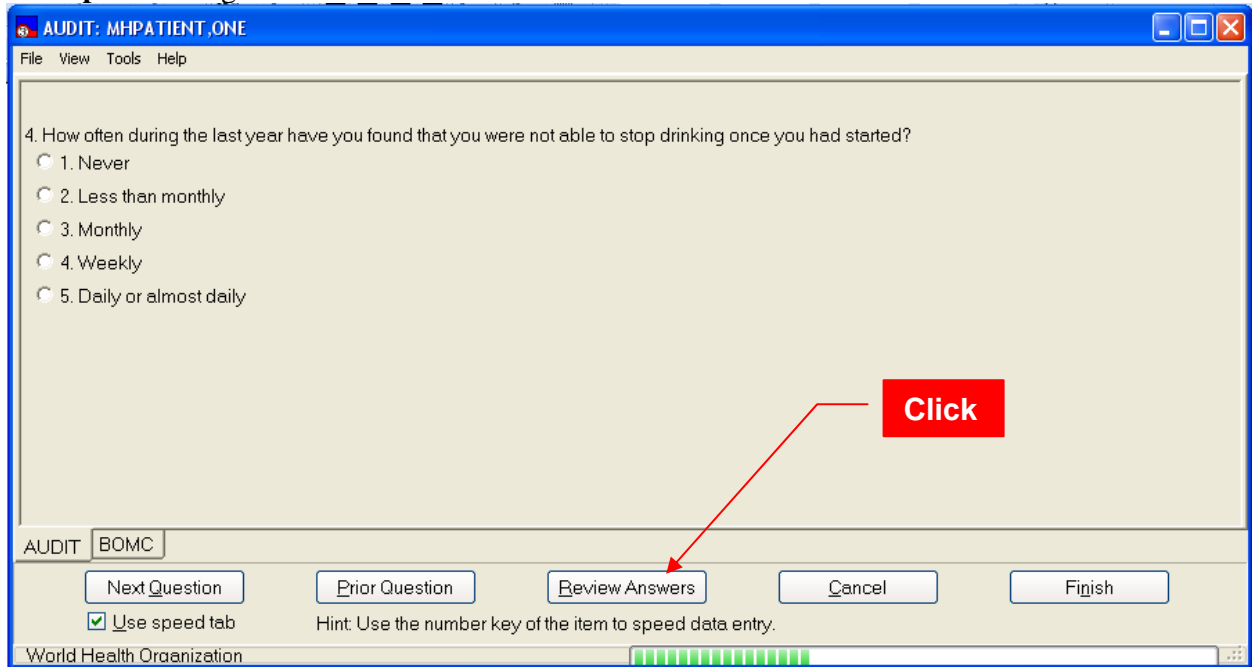
Example: The displayed question becomes the next question within the current instrument.



Review Answers

In the case where navigating through the questions in an instrument using the **Next Question** and **Prior Question** buttons is too cumbersome due to a large number of questions, the **Review Answers** offers a quicker way to move around. To start the Review Answers form, **click** on the **Review Answers** button.

Example: Starting the Review Answers form.



Changing Answers

To change a given answer, it is first necessary to return to that answer. There are two ways to navigate back to a previously-answered question: the question navigation buttons or the **Review Answers** form. Once the answer is again displayed in the form, simply choose or type in a different answer.

To change an answer using the **Review Answers** form:

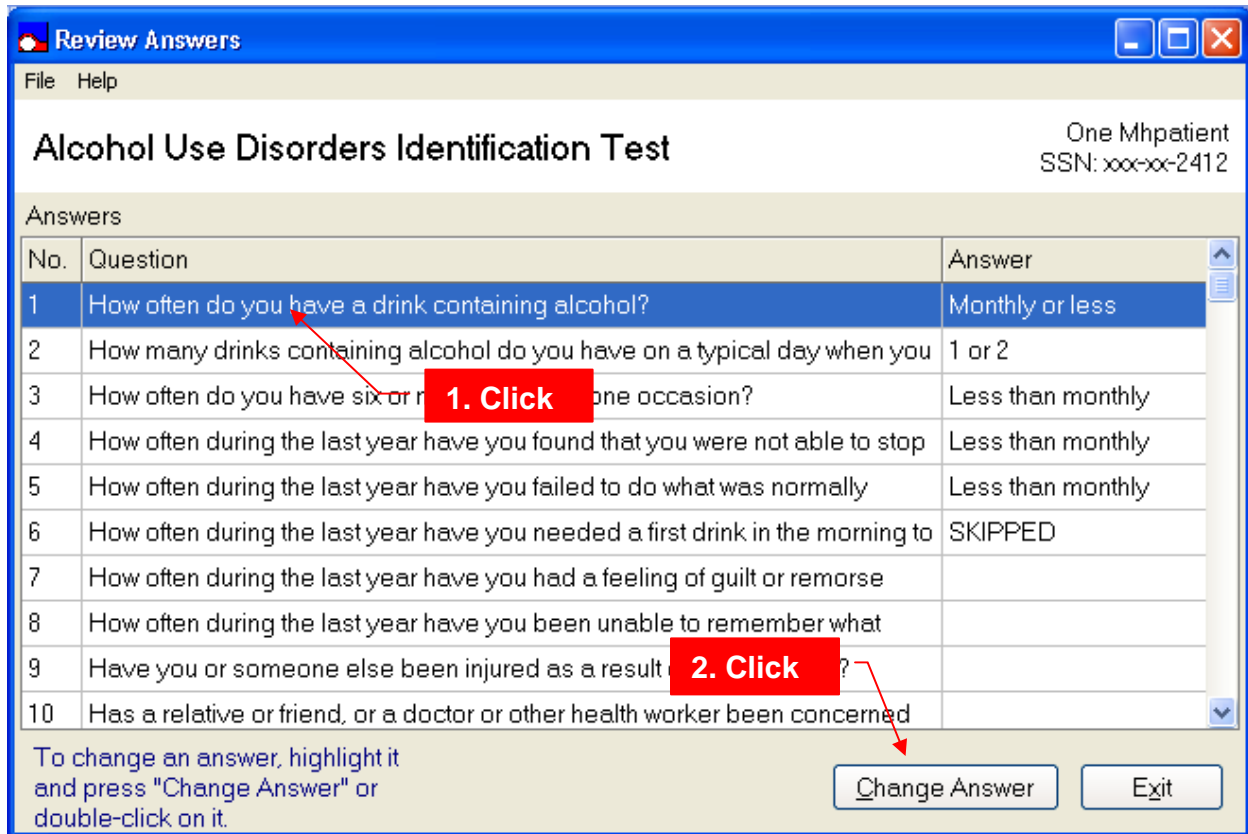
1. Click on any of the previously-answered questions listed in the table, to select the question.
2. Click on the **Change Answer** button.

To return to the Single-Question input form, without making any changes, **click** on the **Exit** button, or press the escape key “ESC”, or the **FILE | Exit**.

After clicking on the **Change Answer** button:

1. The Single-Question input form is displayed and the selected question is shown with the previously-entered response.
2. User can change the response to this question.

Example: Selecting a question to change.



Review Answers

File Help

Alcohol Use Disorders Identification Test

One Mhpatient
SSN: xxx-xx-2412

Answers

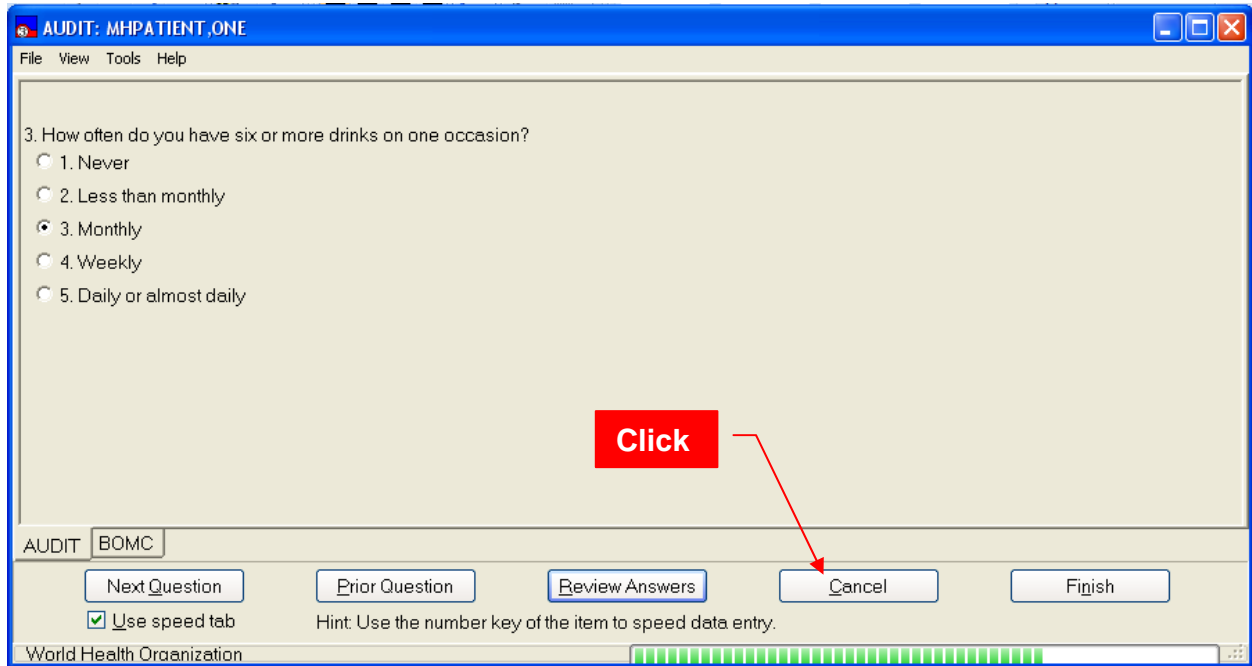
No.	Question	Answer
1	How often do you have a drink containing alcohol?	Monthly or less
2	How many drinks containing alcohol do you have on a typical day when you	1 or 2
3	How often do you have six or more drinks on one occasion?	Less than monthly
4	How often during the last year have you found that you were not able to stop	Less than monthly
5	How often during the last year have you failed to do what was normally	Less than monthly
6	How often during the last year have you needed a first drink in the morning to	SKIPPED
7	How often during the last year have you had a feeling of guilt or remorse	
8	How often during the last year have you been unable to remember what	
9	Have you or someone else been injured as a result of drinking?	
10	Has a relative or friend, or a doctor or other health worker been concerned	

To change an answer, highlight it and press "Change Answer" or double-click on it.

Change Answer Exit

Exiting Data-Entry Session without Saving the Answers

Example: To abort saving any of the given answers to an administration, **click** on the **Cancel** button. The editing session ends and no answers are saved.



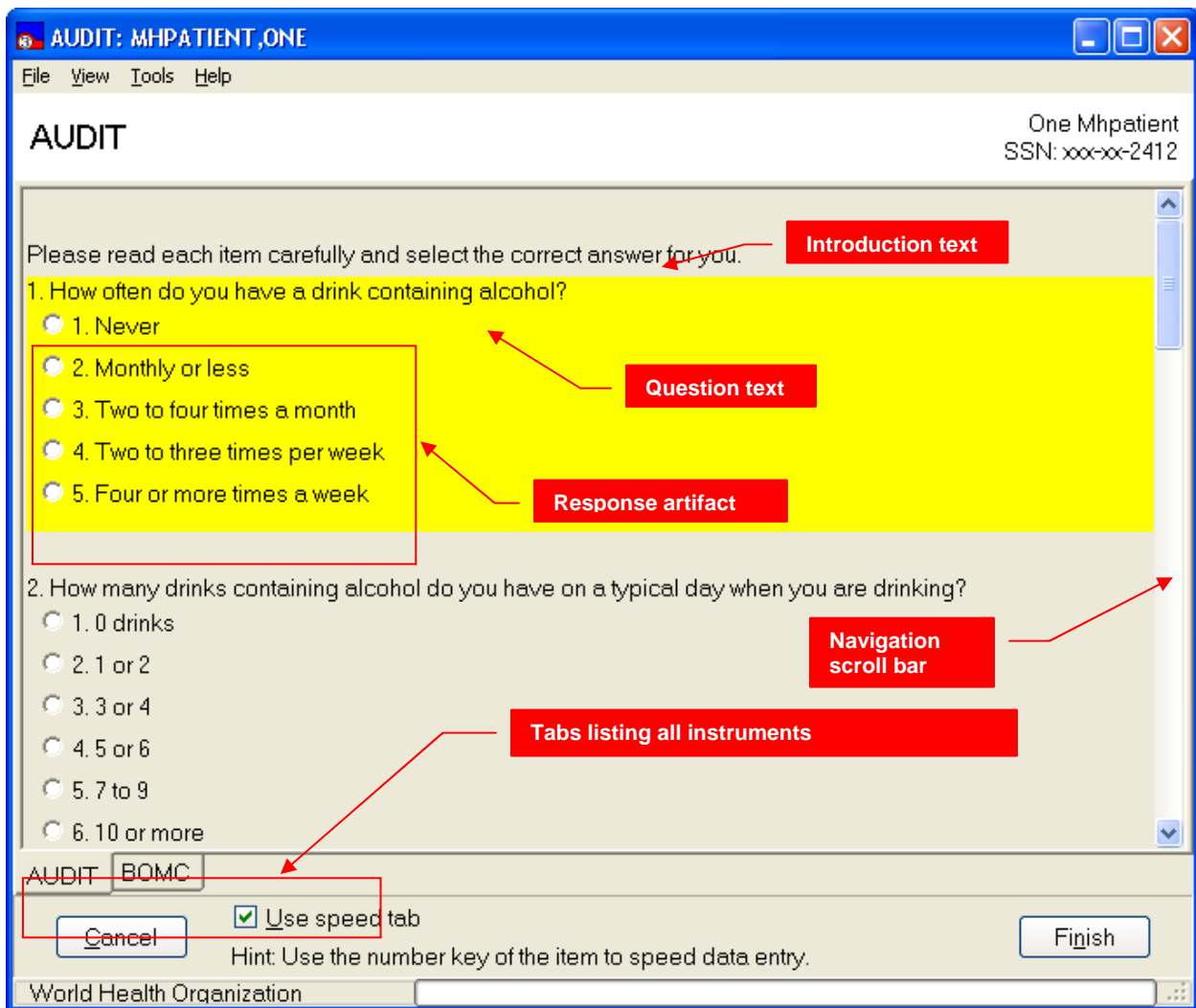
Instrument Administrator’s “All Questions At Once” Input Form

Orientation

The “**All Questions at Once**” data-entry form allows the user to answer questions by viewing and responding to any or all the instrument questions at any time. All questions are displayed at once on a scrollable form, much like a pencil-and-paper version of the instrument. The “**All Questions at Once**” data-entry form does not make use of a Review Answers form, or navigation buttons, since they would be redundant with the functions already offered by this form.

NOTE: The previous section described the visual elements used in MHA and will not be repeated here.

Example: “All-questions at once” data entry form.



Main Menu

The Mental Health Assistant Main Menu offers user functions in the context of the All Questions at Once form, such as tools and help.

Selected Patient Identification Label

The Selected Patient Identification label displays information about who is the currently-selected patient within MHA.

Instrument's Name

The Title Bar is a visual artifact that is used throughout MHA to display information about the context that applies to the current activity. In this case, the Title Bar displays the current instrument's name.

Section Text

Sometimes, instrument designers may group questions into sections. In this case, existing section titles are displayed in the form, just above any introduction or question text.

Introduction Text

The Introduction Text is used as narrative introduction to one or more questions. Generally, introductions present instructions on how to respond to questions.

Question Text

The Question Text is the actual question presented to the user.

Response Artifact

A Response Artifact is a visual control that the user will use to respond to the presented question. There are a number of different types of Response Artifacts in MHA, such as Drop-Down Combo Boxes, Text Boxes, Spin Edits and such.

Navigation Scroll Bar

The Navigation Scroll Bar is used to display any questions on the form which may be hidden below or above the current view.

Instrument Tabs

When the user is responding to a series of instruments, each individual instrument is indicated as a tab at the bottom of the form. These tabs are used to navigate among the different instruments in the series.

Navigation

The data-entry visual artifacts on this form respond in the same way that they do on the Single-Question form, the difference being that all questions are presented at once and that navigation to the different questions is done differently.

To navigate using the mouse, simply use the scroll bar until the desired question is within view. To navigate using the keyboard, use the **Tab** key to jump to the next question in the sequence. **Shift-Tab** causes a reverse jump to the previous question in the sequence.

Additionally, to automate the tabbing effect, there is the **Speed Tab** option that automatically tabs to the next question once a question is answered. However, the **Speed Tab** option has no effect on Multiple-Line Text Boxes, Single-Line Text Boxes, Date-Pick boxes and Spin Boxes.

While answering questions:

1. All questions pertaining to the current instrument are available on the current form.
2. The scroll bar permits navigation to all the instrument's questions on the form.
3. Using the Tab key for navigation performs as described above.
4. All data-entry visual artifacts respond in the same way as they do on the Single-Question form.
5. After saving the administration, the answers given will match the ones listed in the Instrument Results Review report.

Finish button

An instrument administration is finished once all questions have been answered.

To end an Instrument Administration:

1. Answer every question in the instrument (the progress bar will be green).
2. **Click** on the **Finish** button.
3. If a question has not been answered (the progress bar will be red), a warning message is displayed and the user can either return to the form, or save the instrument as incomplete .
4. All responses are saved to VistA.
5. The instrument saved message is displayed and user is returned to the MHA main menu.

Example: AUDIT instrument is saved by clicking on the **Finish** button.

AUDIT: MHPATIENT, ONE

File View Tools Help

AUDIT One Mhpatient
SSN: xxx-xx-2412

4. Weekly
 5. Daily or almost daily

9. Have you or someone else been injured as a result of your drinking?
 1. No
 2. Yes, but not in the last year
 3. Yes, during the last year

10. Has a relative or friend, or a doctor or other health worker been concerned about your drinking or suggeste
 1. No
 2. Yes, but not in the last year
 3. Yes, during the last year

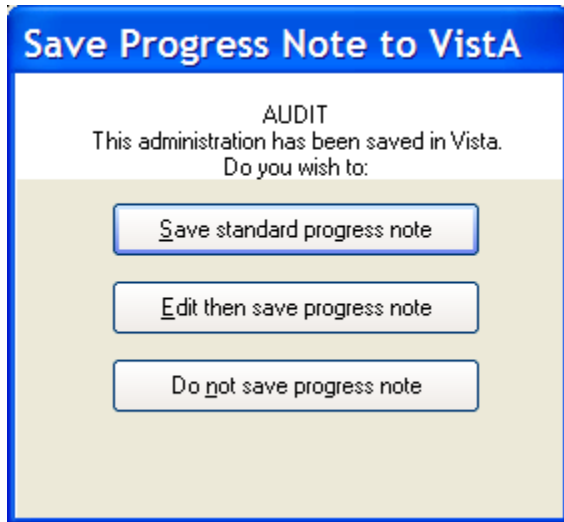
AUDIT BOMC

Use speed tab
Hint: Use the number key of the item to speed data entry.

World Health Organization

Once the answers are saved, the user is given the three options below concerning the progress note. See Appendix B for cases where a co-signer is required for signing a progress note.

Example: Progress Note dialog.



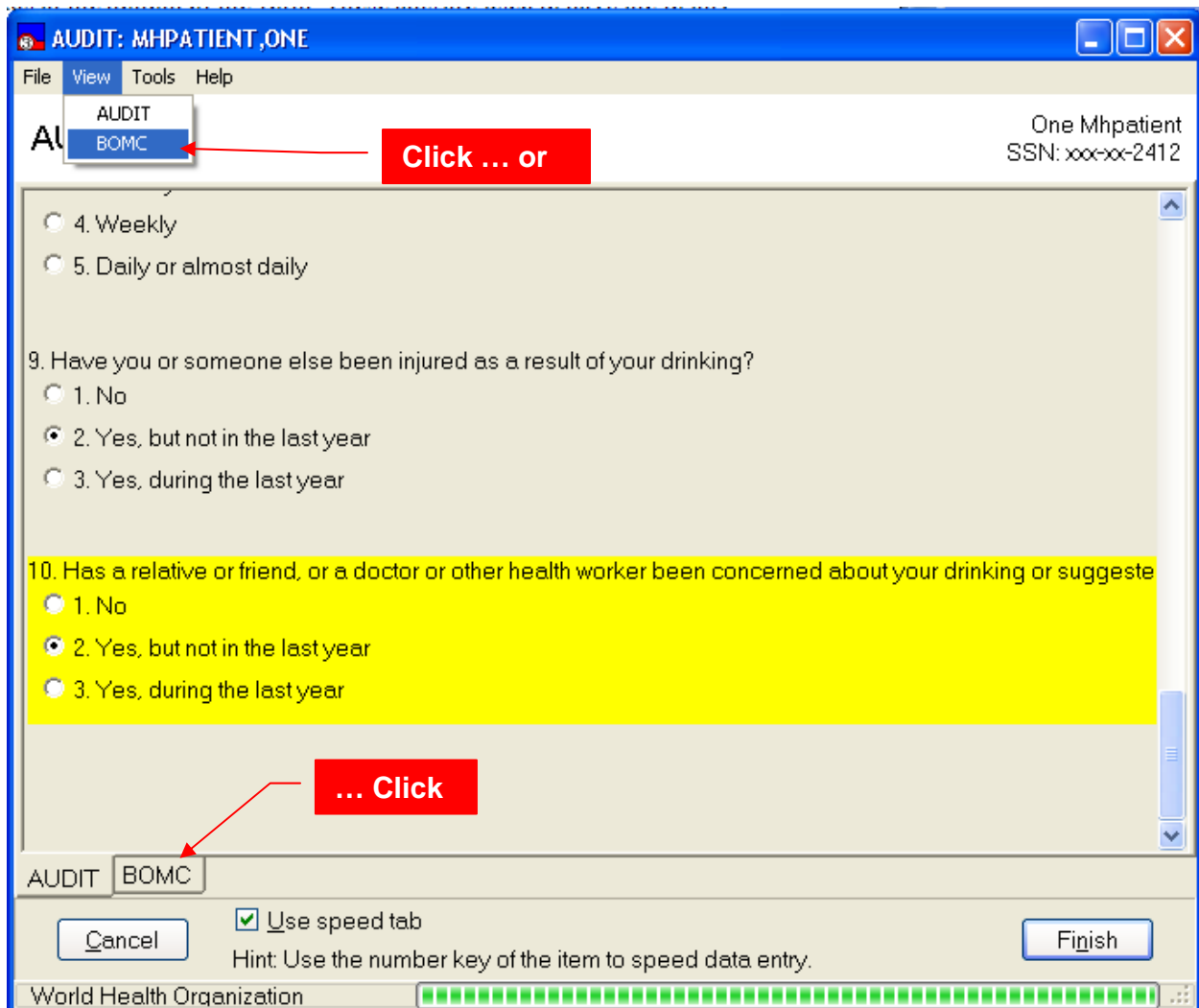
Selecting an Instrument within a Series

The instruments are listed in the tabs at the bottom of the form. These tabs are used to navigate to any of these instruments.

To change the current instrument:

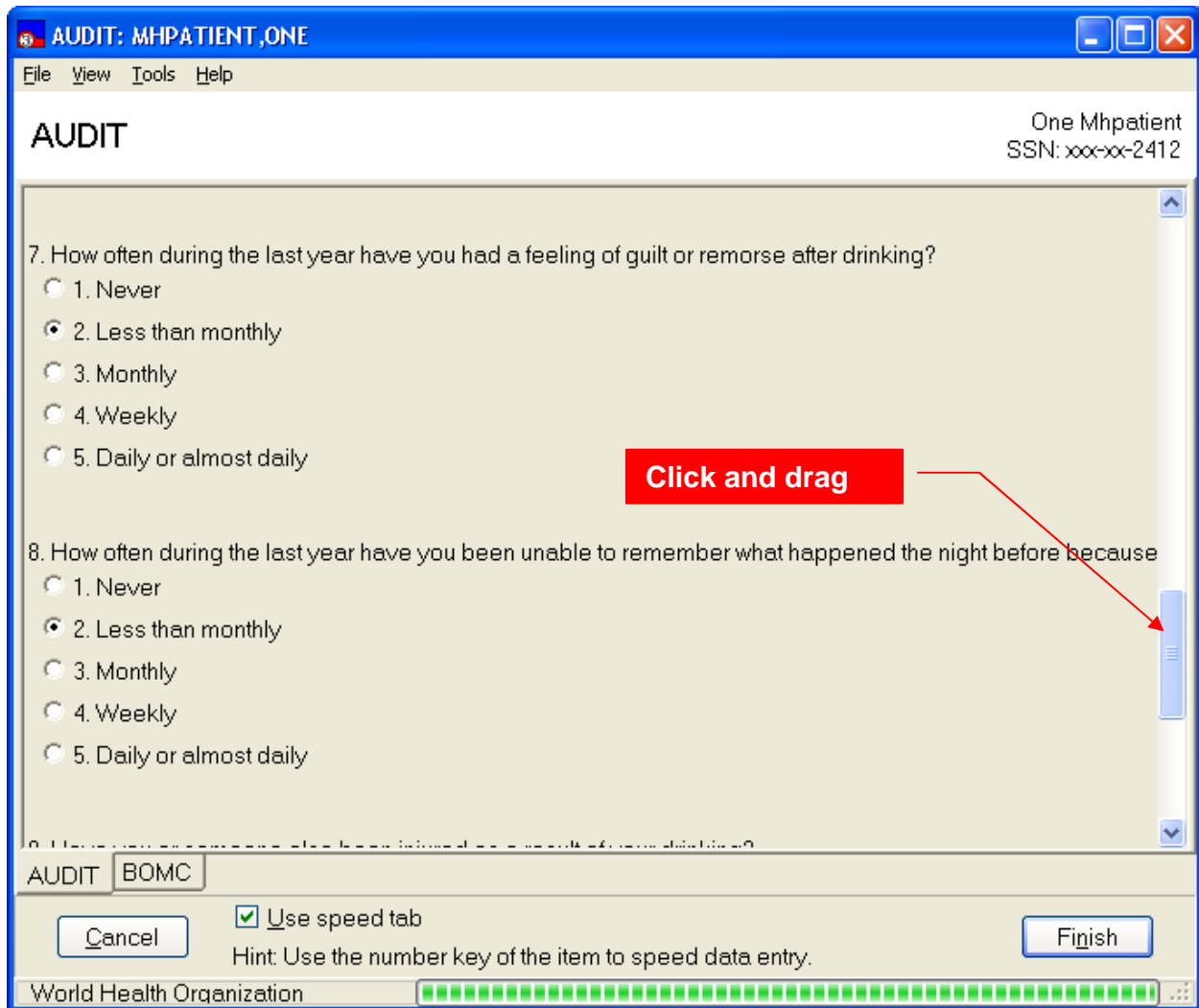
1. If the desired instrument tab is not the selected tab (in the foreground) **click** on the tab to bring the instrument to the foreground. **Or...**
2. Use the **View** menu option, **click** on the instrument's name in the View list.

Example: Selecting a different instrument.



To review answers given:

Example: Use the scroll bar to review every answer given. Moving the scroll bar permits all questions and answers to be viewed.



Change a Previously-given Answer

To change a previously-given answer, navigate to the question and change the answer.

Example: Question #7 with answer changed to the second item.

AUDIT: MHPATIENT, ONE

File View Tools Help

AUDIT One Mhpatient
SSN: xxx-xx-2412

7. How often during the last year have you had a feeling of guilt or remorse after drinking?

- 1. Never
- 2. Less than monthly
- 3. Monthly
- 4. Weekly
- 5. Daily or almost daily

8. How often during the last year have you been unable to remember what happened the night before because

- 1. Never
- 2. Less than monthly
- 3. Monthly
- 4. Weekly
- 5. Daily or almost daily

AUDIT BOMC

Use speed tab

Hint: Use the number key of the item to speed data entry.

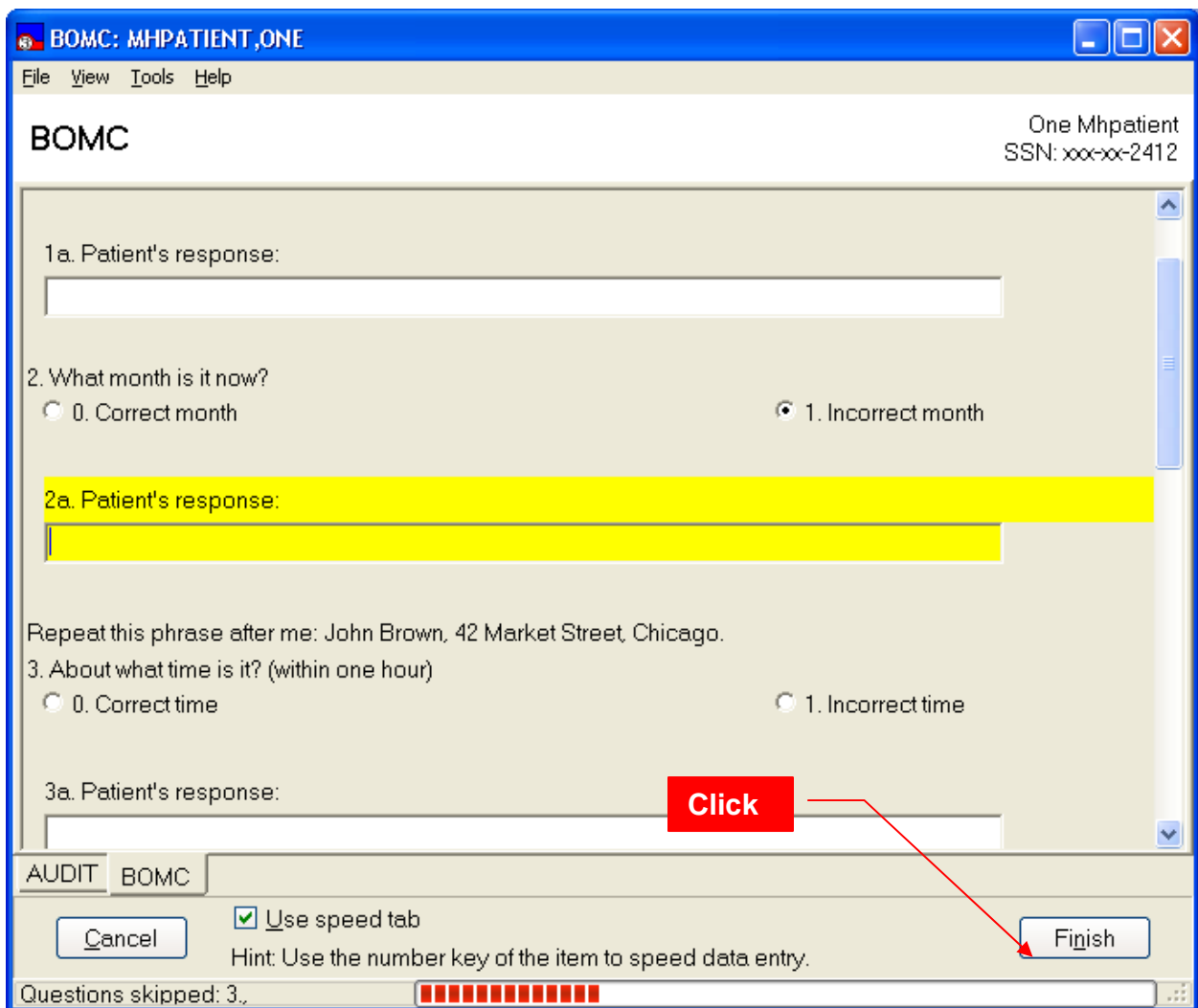
World Health Organization

Suspend responding to questions and save the administration in an incomplete state.

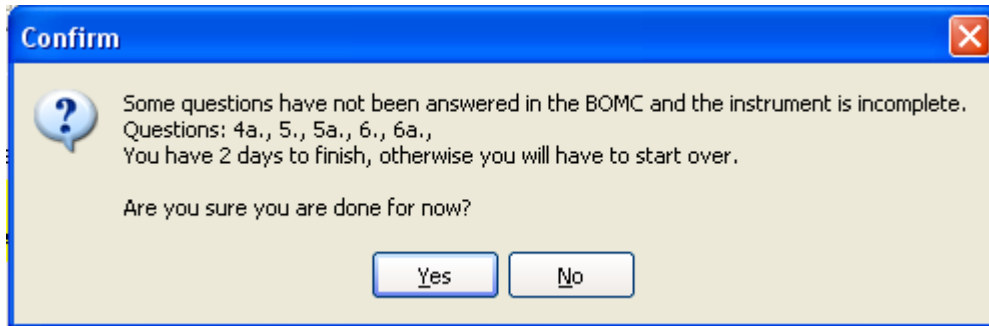
To suspend responding to questions, **click** on the **Finish** button.

1. The “All questions at once” data-entry form closes and the user is returned to the **Instrument Administrator** form
2. The instrument administration is automatically saved as an incomplete administration in VistA. No data is lost.
3. The instrument appears in the list of available instruments as an incomplete administration, which can be selected for resumption.

Example: BOMC saved as an incomplete administration.



Example: Warning given upon exiting an incomplete administration.



Exiting Data-Entry Session without Saving the Answers

To abort saving any of the given answers to an administration, **click** on the **Cancel** button. The session ends and no answers are saved.

Instrument Results Review Functions

Orientation

All previous tests completed by the selected patient are listed on the Instrument Results Review form, and one of those tests is always highlighted (by default, the first test in the list is highlighted when the user first accesses this form). A text-based report for the highlighted test is shown. If the highlighted instrument has a scale or scales, a graphical display of those scores is presented on the Graph & Table tab. There is also a Special Results tab which displays graphs of results from various instruments.

Example: The **Instrument Results Review** form offers functions to print, save and copy-paste reports, tables and graphs, as well as enable the user to append comments to the results of the highlighted test.

The screenshot shows a software window titled "Mental Health Assistant in use by MHPROVIDER,ONE". The main content area is titled "Instrument Results Review: AUDC" and displays a list of instruments on the left and a detailed report for the selected instrument (AUDC) on the right. The report includes patient information, a score of 7 points, and a list of questions and answers.

Date	Name
05/02/2011	AUDC
05/02/2011	SF36
05/02/2011	SF36
05/02/2011	FAST
05/02/2011	FAST
04/29/2011	AUDC
04/28/2011	FAST
04/28/2011	FAST
04/28/2011	FAST
04/25/2011	PHQ9
04/14/2011	MMPI2
04/14/2011	POQ
04/14/2011	POQ
04/14/2011	POQ
04/14/2011	WHYMPI
04/14/2011	WHYMPI
04/14/2011	AUDC
04/12/2011	CESD5
04/12/2011	BASIS-24
04/12/2011	CESD5
04/12/2011	STAI
04/12/2011	VALD
04/12/2011	WAS
04/12/2011	ZUNG
04/12/2011	SCL9R

Alcohol Use Disorders Identification Test Consumption (AUDC)

Date Given: 05/02/2011
Clinician: Mhprovider,One
Location: X-Ray Clinic

Veteran: Mhpatient, One
SSN: xxx-xx-4444
DOB: May 1,1978 (33)
Gender: Male

Score: 7 points, which is a positive result.

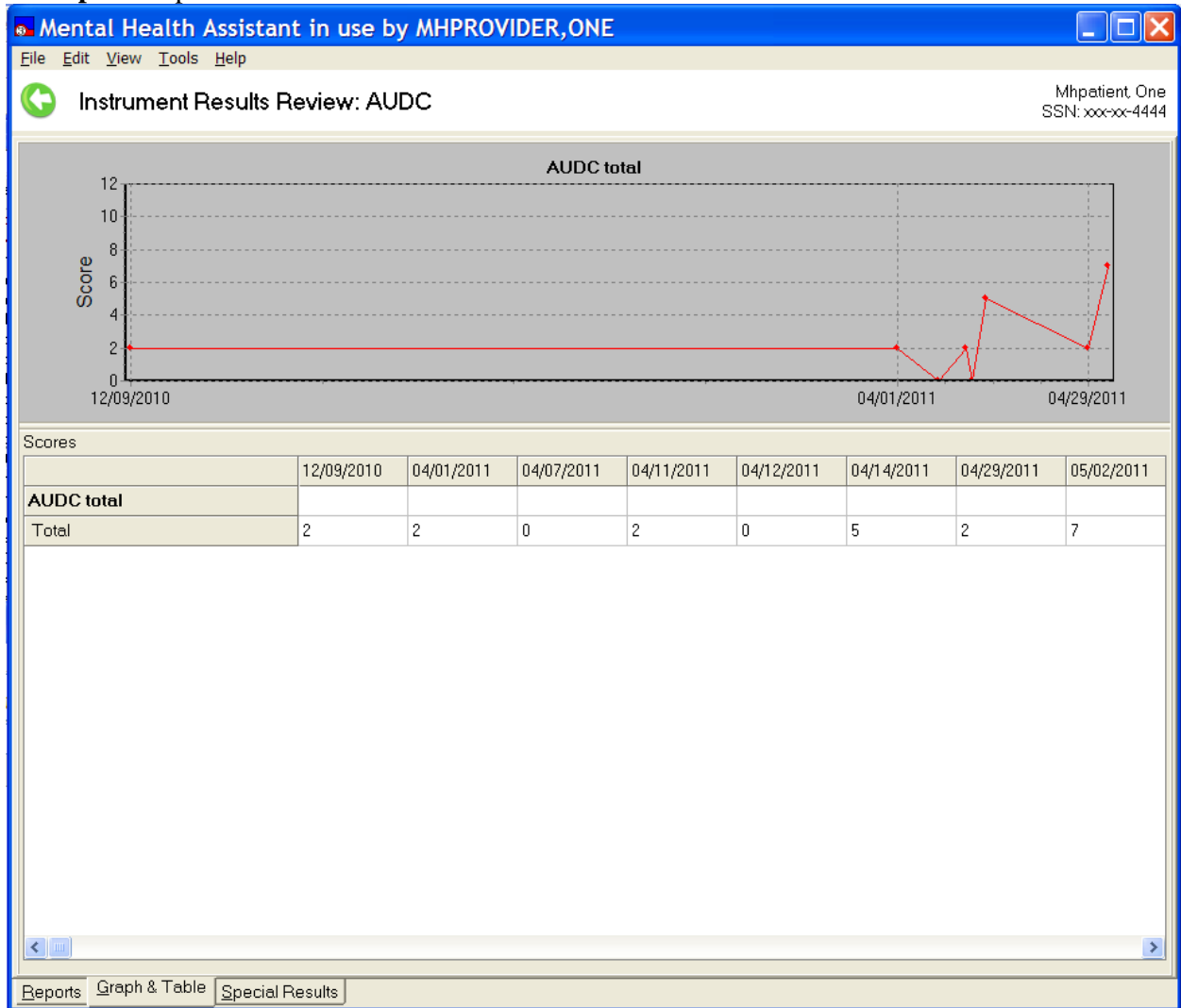
Questions and Answers

1. How often did you have a drink containing alcohol in the past year?
Two to four times a month
2. How many drinks containing alcohol did you have on a typical day when you were drinking in the past year?
5 or 6
3. How often did you have six or more drinks on one occasion in the past year?
Weekly

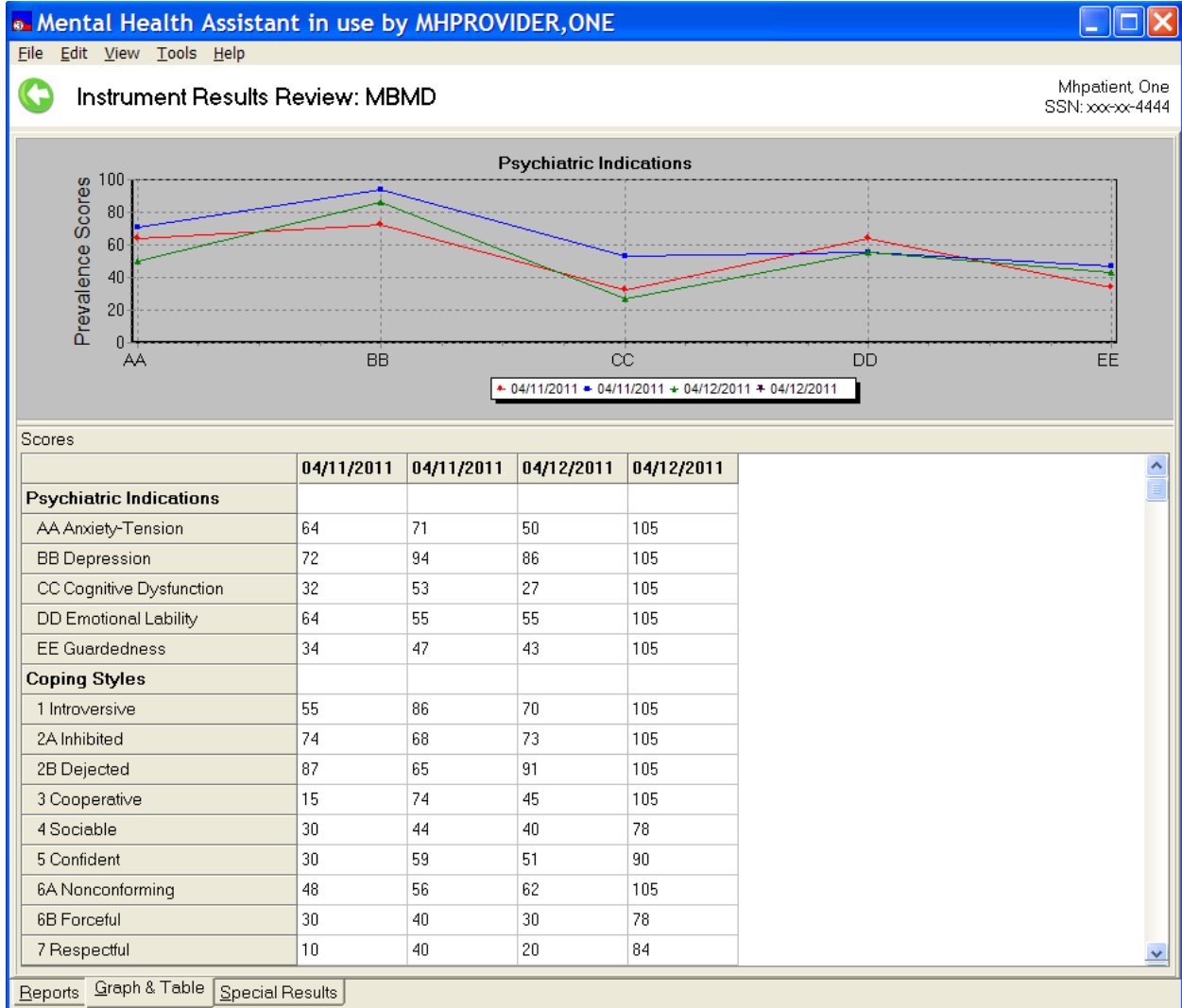
Information contained in this note is based on a self report assessment and is not sufficient to use alone for diagnostic purposes. Assessment results should be verified for accuracy and used in conjunction with other diagnostic activities.

Reports | Graph & Table | Special Results

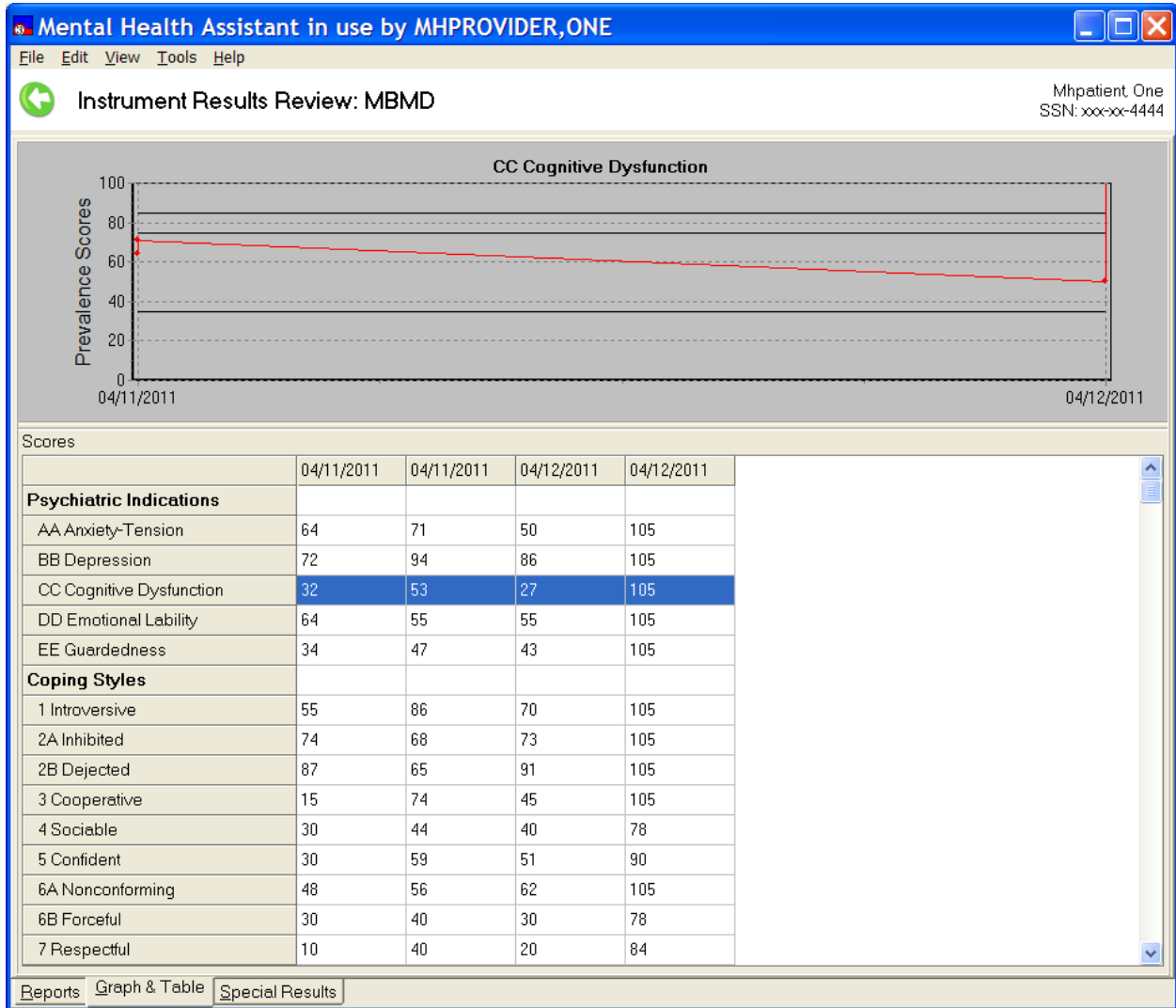
Example: Graph and table views.



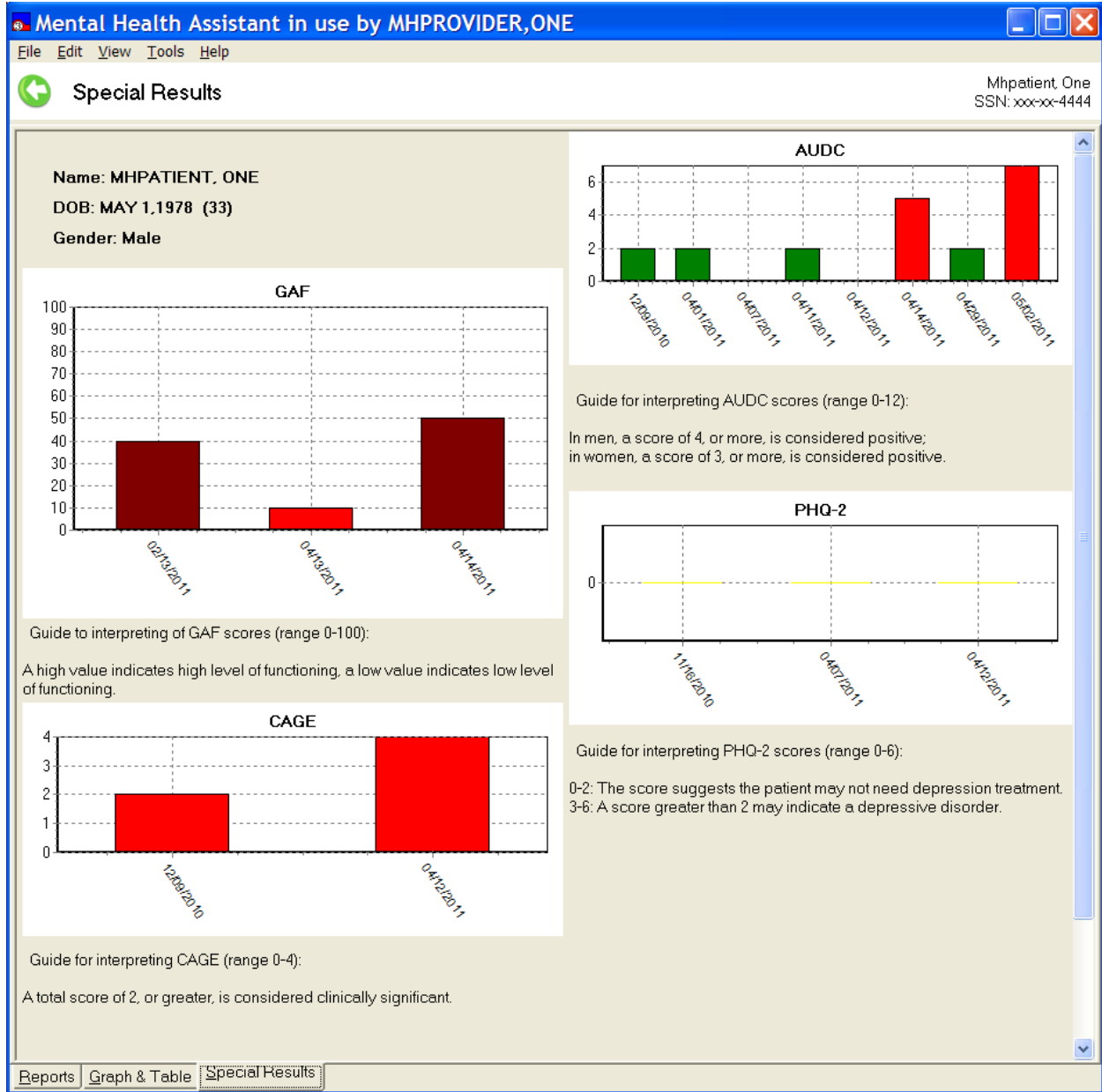
Example: Multi-scale instrument table and graph, in this case the MBMD. Click on the group of scales name (in this case the bold **Psychiatric Indicators**) to see only those scales.



Example: If you click on one of the scales, then this table and graph is presented.



Example: Special Results view.



The Special Results Tab can be tailored by the user. Most instruments with scales can be displayed, the order of the instruments displayed can be changed by the user, and the patient's responses can be displayed for each administration. The colors used in the Special Results tab are green (normal range), yellow (borderline range), maroon (serious range) and red (severe range). The Special Results tab, because of the extensive reliance on visual cues, is not present when a screen reader is in use.

Main Menu

The Main Menu offers user functions, such as tools and help.

Selected Patient Identification label

The Selected Patient Identification label displays information about who is the currently-selected patient within MHA.

Instrument's Name

The Title Bar is a visual artifact that is used throughout MHA to display information about the context that applies to the current activity. In this case, the Title Bar displays the current instrument's name.

List of Previously-Administered Tests

This is the list of all tests that have been administered to the selected patient. The list is also used for selecting which administration to process. The list may be sorted by date or by instrument name.

The Navigation Tabs

These tabs are used to switch between report, graph/table and Special Results views.

The Reports View:

The Report View displays an administration report in textual form, based on the patient's data stored in VistA for the selected administration.

The Graph and Table View:

The graph and table view displays both a table and graphical representation of test data values over time.

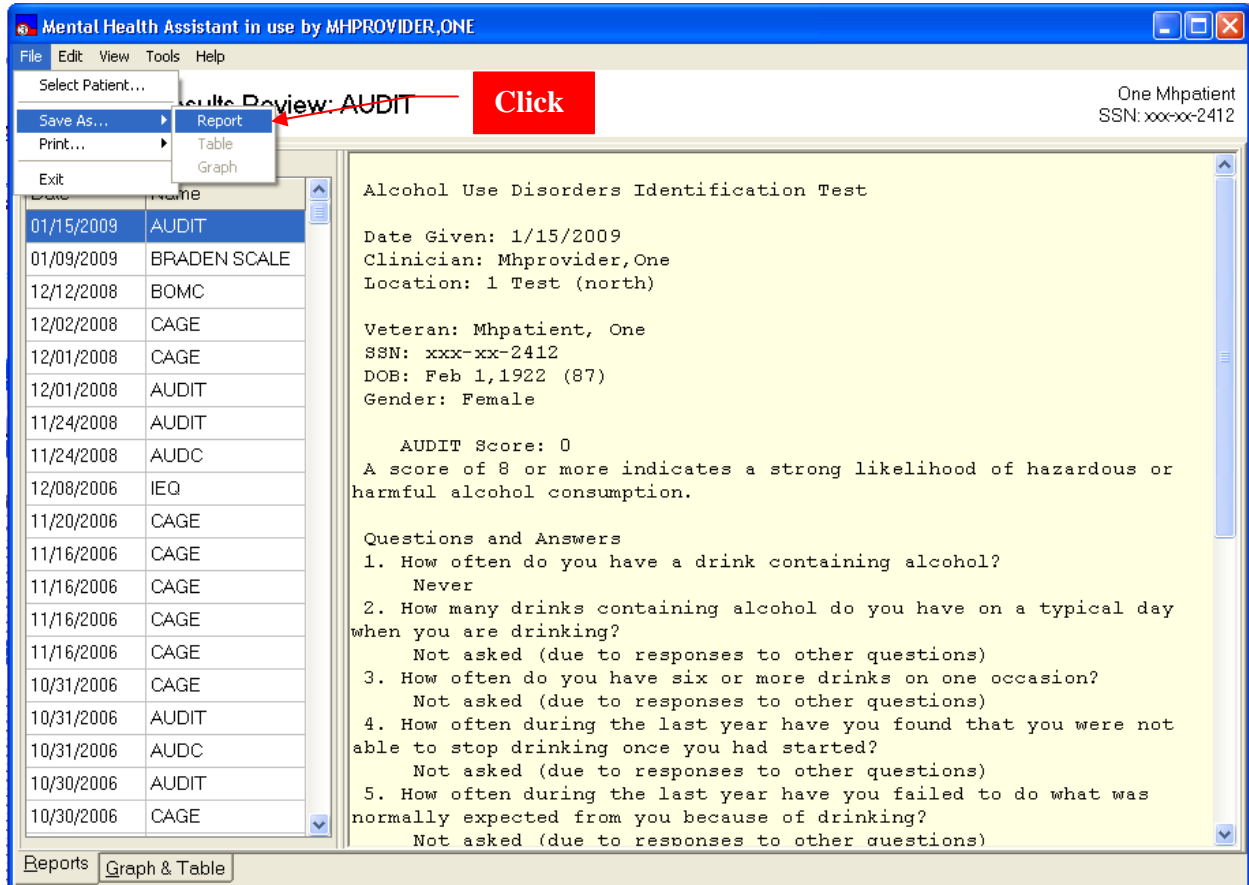
The Special Results View:

Special Results displays the results, over time, for selected instruments. Whereas the other two tabs display information on a single instrument, the Special Results view can present information on several instruments over time for the patient. The user can select the instruments displayed on the Special Results tab (see "Special Results Wizard" for instructions). This feature is not available for screen readers due to the intense visual representation of the data; the same information, however, is provided in the two previous tabs.

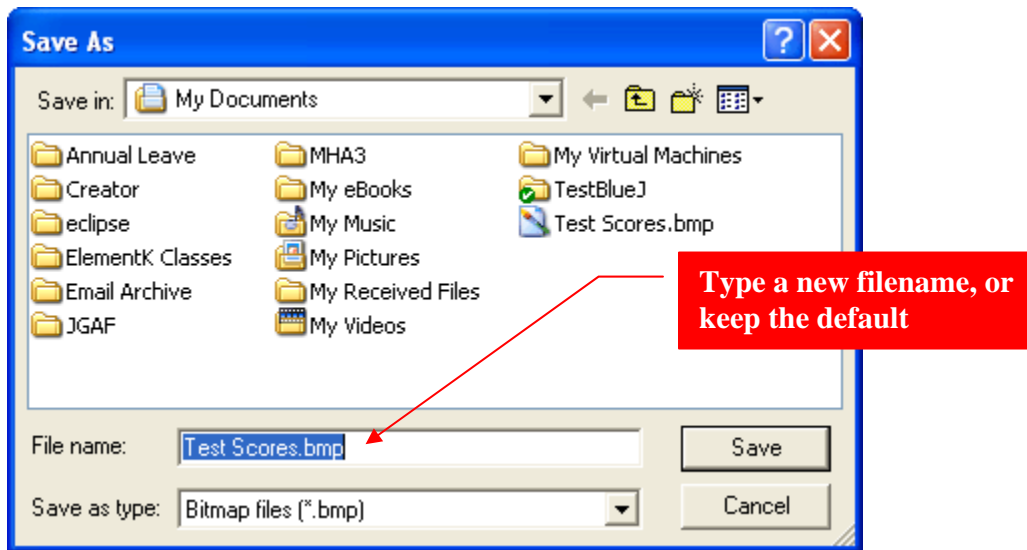
Saving a Graph, Report, or a Table to a File

To save a graph, report, or table, **click** on the drop-down **File Menu | Save As...** menu item and then **click** on Graph, Report, or Table. To save a graph or a table, the “Graph and Table” tab must be selected first.

Example: A message dialog appears that asks the user to enter a filename and storage location for the table, report or graph file to be saved. A graph is saved as a bitmap, a table is saved as an Excel file and a report is saved as a text file.



Example: Save As form

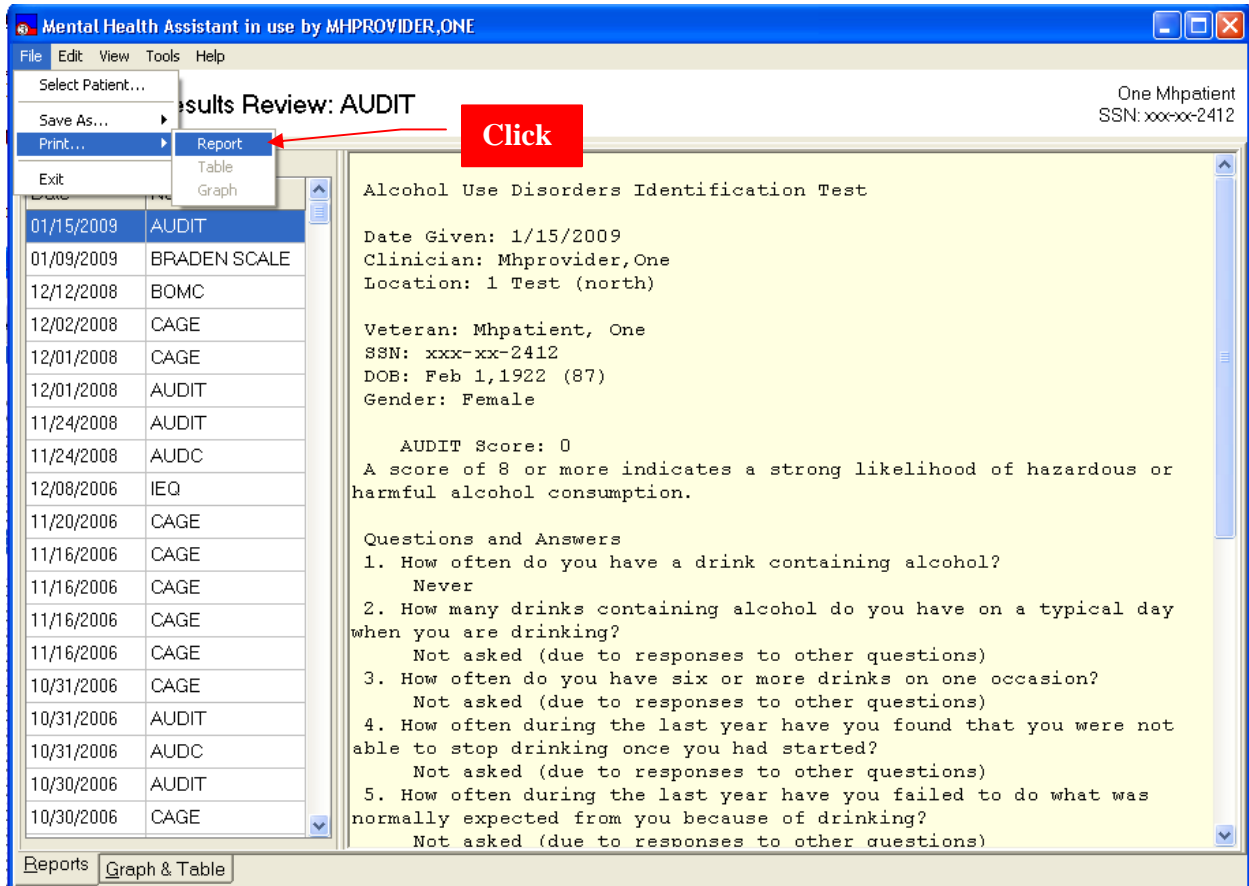


Printing a Graph, Report or Table.

To print a graph, report, or table, **click** on the drop-down **File Menu | Print...** menu item and then **click** on Graph, Report, or Table menu item.

A copy of the table, report or graph is sent directly to the default printer.

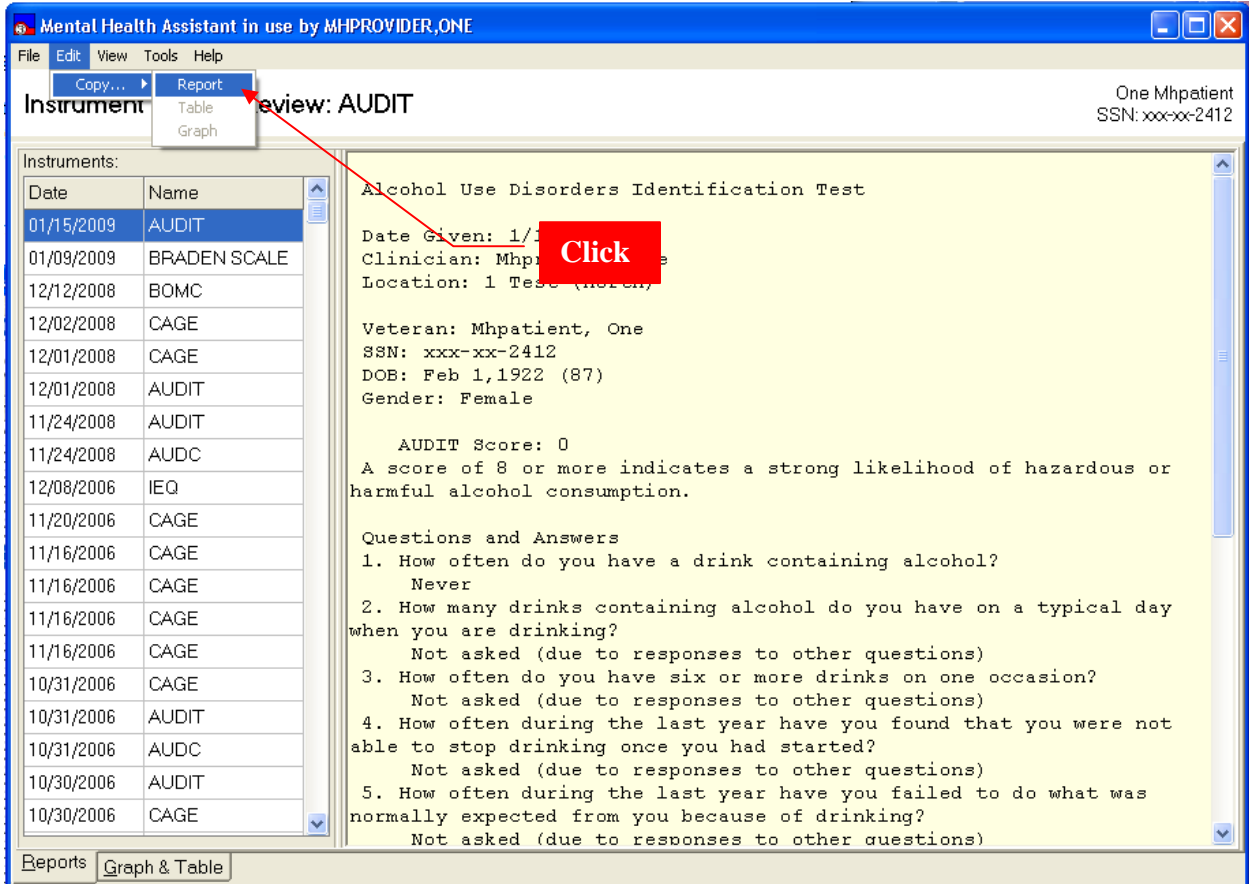
Example: Printing a graph, report, or table.



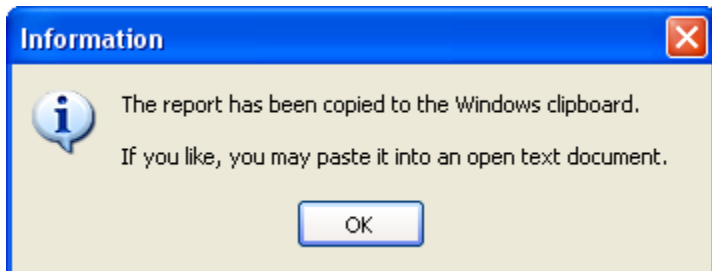
Copying a Graph, Report, or Table to the Windows Clipboard.

To copy a report, graph, or table to the Windows clipboard, **click** on drop-down **Edit | Copy...** menu item and then **click** on Graph, Report, or Table. A copy of the table, report or graph is sent to the Clipboard. The contents of the Clipboard can then be pasted onto an MS Word or Excel document.

Example: Copying a report the Windows clipboard.

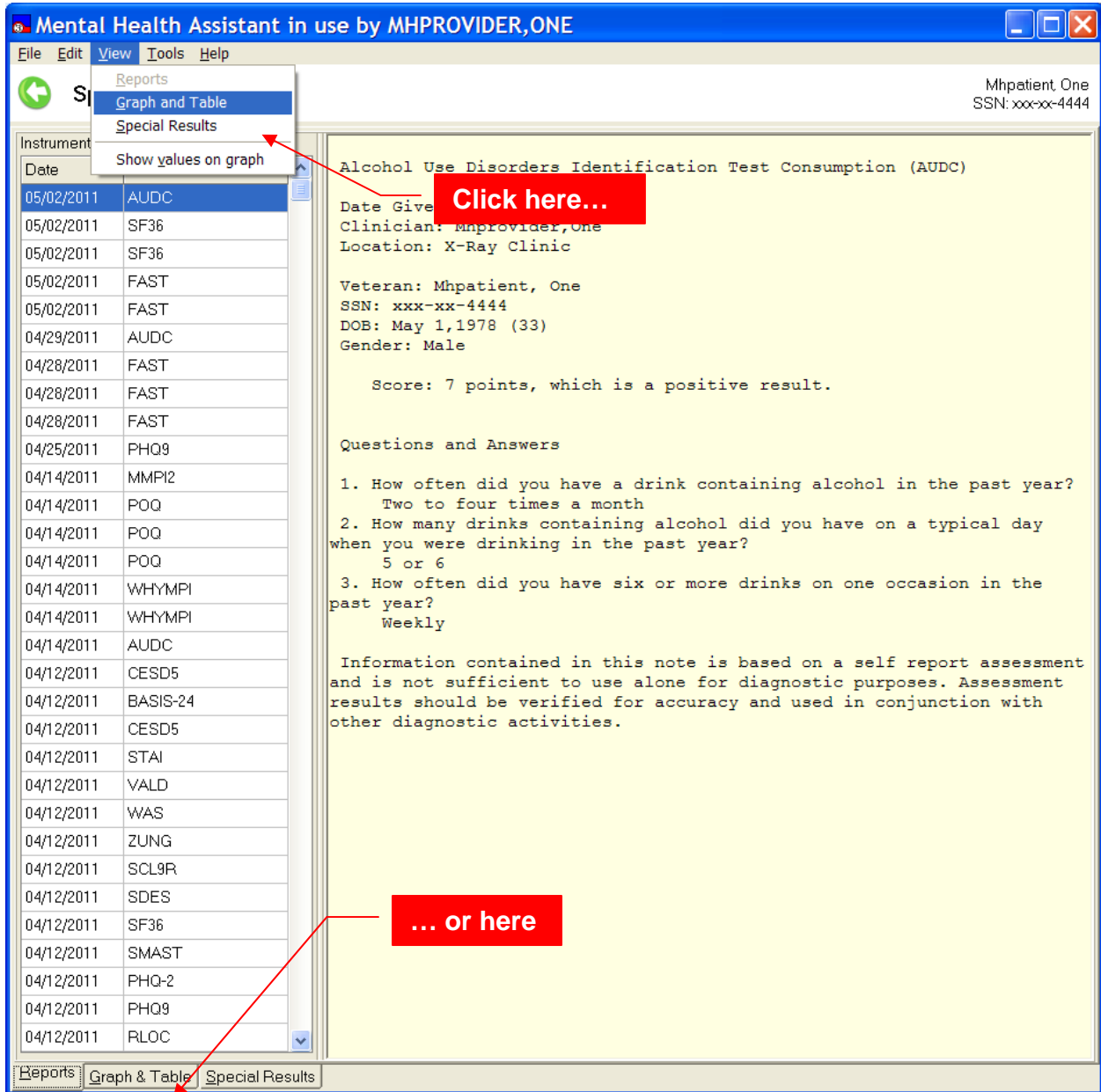


Example: Message displayed after copying to the clipboard



Switching Views in Instrument Results Review

Example: There are two ways to switch between views on the **Instrument Results Review** form; click on the navigation tabs at the bottom-left of the form (using the key strokes ALT-R, ALT-G or ALT-S will also work), or, open the **View** menu option and select from one of the three views.

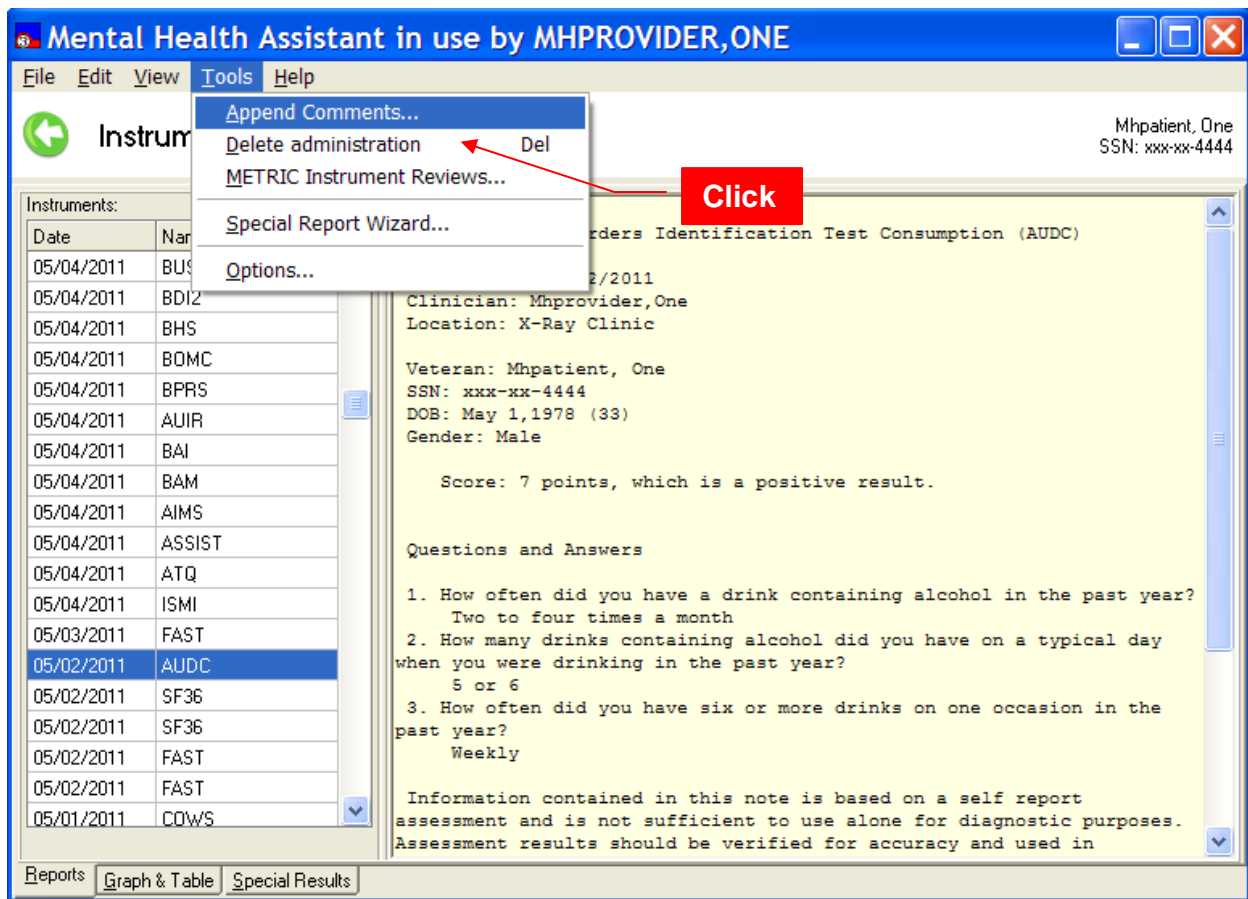


Appending Comments to an Existing Record

Comments can be appended to existing reports in Vista:

1. Select the instrument to which to append comments
2. **Click** on the **Tools | Append comments...** menu item or right click on the highlighted administration.
3. The Comments Editor Form is displayed.
4. Type a new comment in the Comments Editor
5. **Click** on **Save and Exit** button in the Comments Editor
6. Comment appears appended to the administration's report text

Example: Tools | Append Comments...item



Example: Right click on the desired administration to append.

Mental Health Assistant in use by MHPROVIDER,ONE

File Edit View Tools Help

Instrument Results Review: AUDC Mhpatient, One
SSN: xxx-xx-4444

Instruments:

Date	Name
05/04/2011	BUSS
05/04/2011	BDI2
05/04/2011	BHS
05/04/2011	BOMC
05/04/2011	BPRS
05/04/2011	AUIR
05/04/2011	BAI
05/04/2011	BAM
05/04/2011	AIMS
05/04/2011	ASSIST
05/04/2011	ATQ
05/04/2011	ISMI
05/03/2011	FAST
05/02/2011	AUDC
05/02/2011	SF36
05/02/2011	SF36
05/02/2011	FAST
05/02/2011	FAST
05/01/2011	CQWS

Alcohol Use Disorders Identification Test Consumption (AUDC)

Date Given: 05/02/2011
Clinician: Mhprovider,One
Location: X-Ray Clinic

Veteran: Mhpatient, One
SSN: xxx-xx-4444
DOB: May 1,1978 (33)
Gender: Male

Score: 7 points, wh

Questions and Answers

1. How often did you have a drink containing alcohol in the past year?
Two to four times a month

2. How many drinks containing alcohol did you have on a typical day when you were drinking in the past year?
5 or 6

3. How often did you have six or more drinks on one occasion in the past year?
Weekly

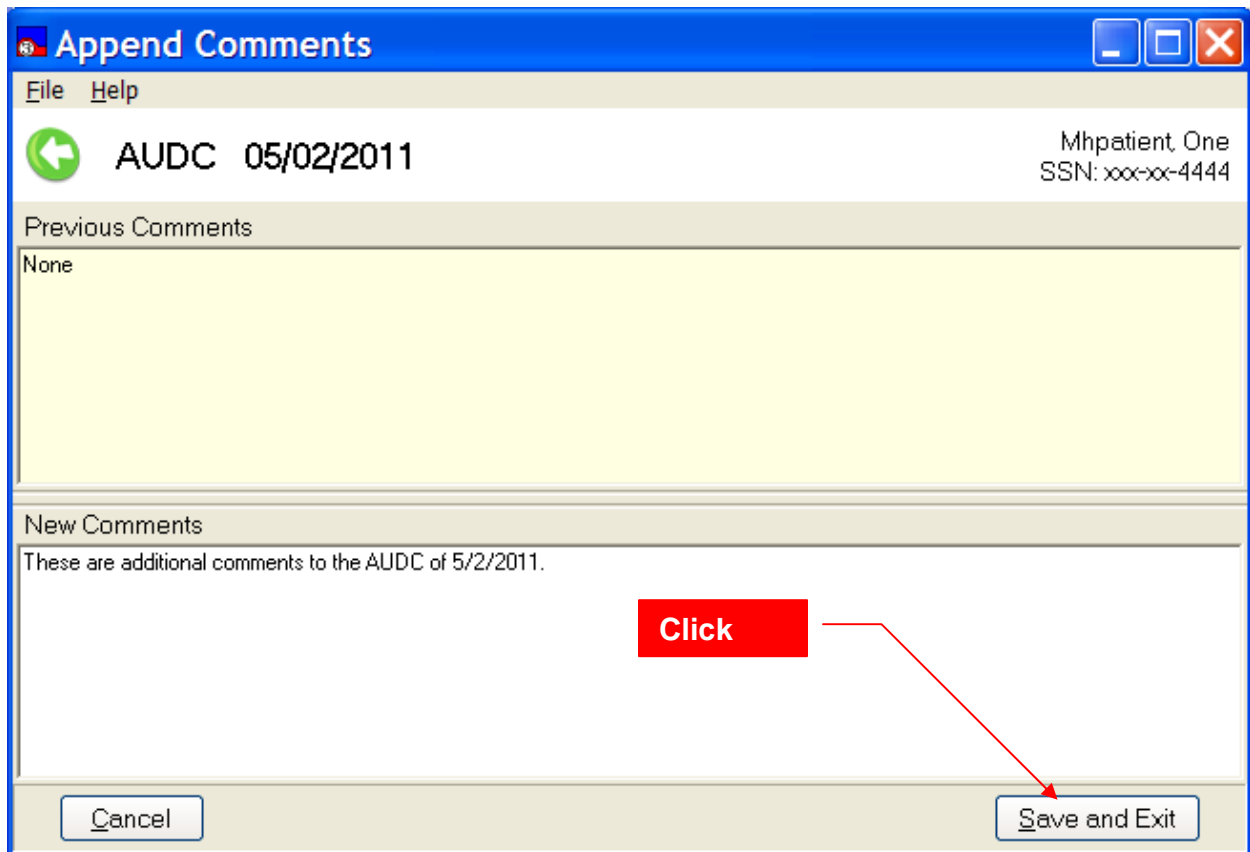
Information contained in this note is
assessment and is not sufficient to use alone for diagnostic purposes.
Assessment results should be verified for accuracy and used in

Reports Graph & Table Special Results

Example: Comments Editor form displays **previous** and **new** comments.

The screenshot shows a software window titled "Append Comments" with a menu bar containing "File" and "Help". The window displays patient information: "AUDC 05/02/2011" on the left and "Mhpatient, One SSN: xxx-xx-4444" on the right. Below this is a section labeled "Previous Comments" which contains the text "None". The main area is labeled "New Comments" and contains a text input field. A red arrow points from a red box containing the text "Type comments here" to the text input field. At the bottom of the window are two buttons: "Cancel" on the left and "Save and Exit" on the right.

Example: Save Comment and Exit.



Example: Comment added to a report.

Mental Health Assistant in use by MHPROVIDER,ONE

File Edit View Tools Help

Instrument Results Review: AUDC Mhpatient One
SSN: xxx-xx-4444

Date	Name
05/02/2011	AUDC
05/02/2011	SF36
05/02/2011	SF36
05/02/2011	FAST
05/02/2011	FAST
04/29/2011	AUDC
04/28/2011	FAST
04/28/2011	FAST
04/28/2011	FAST
04/25/2011	PHQ9
04/14/2011	MMPI2
04/14/2011	POQ
04/14/2011	POQ
04/14/2011	POQ
04/14/2011	WHYMPI
04/14/2011	WHYMPI
04/14/2011	AUDC
04/12/2011	CESD5
04/12/2011	BASIS-24
04/12/2011	CESD5
04/12/2011	STAI
04/12/2011	VALD
04/12/2011	WAS
04/12/2011	ZUNG
04/12/2011	SCL9R
04/12/2011	SDES
04/12/2011	SF36
04/12/2011	SMAST
04/12/2011	PHQ-2
04/12/2011	PHQ9
04/12/2011	RLOC

Alcohol Use Disorders Identification Test Consumption (AUDC)

Date Given: 05/02/2011
 Clinician: Mhprovider,One
 Location: X-Ray Clinic

Veteran: Mhpatient, One
 SSN: xxx-xx-4444
 DOB: May 1,1978 (33)
 Gender: Male

Score: 7 points, which is a positive result.

Questions and Answers

- How often did you have a drink containing alcohol in the past year?
Two to four times a month
- How many drinks containing alcohol did you have on a typical day when you were drinking in the past year?
5 or 6
- How often did you have six or more drinks on one occasion in the past year?
Weekly

Information contained in this note is based on a self report and is not sufficient to use alone for diagnostic purposes. results should be verified for accuracy and used in conjunction with other diagnostic activities.

 Comments-----

*** Comment Entered By: MHPROVIDER,ONE Comment Date: 5/2/2011 12:20:33 PM

These are additional comments to the AUDC of 5/2/2011.

Comment added to report

Reports | Graph & Table | Special Results

Removing Data Entered in Error

This function can be performed only by individuals who have access to the MHS Manager Functions in VistA, usually a Clinical Application Coordinator (CAC). The removal of data entered in error can be accomplished by the traditional roll-and-scroll method in VistA, or using MHA. This section describes the latter method; see Appendix C for the VistA instructions.

IMPORTANT: Data removed by either method will only remove the results of the administration of the instrument. Any progress notes, consult notes, etc., will not be removed.

Select the administration of the instrument you wish to remove. The instrument's name and the date of the administration will be highlighted, and its report will appear in the right window. In this example, notice that there are two administrations of the WHYMPI on 4/14/2011.

Example: An instrument's report is to be removed.

The screenshot shows the 'Mental Health Assistant in use by MHPROVIDER,ONE' window. The title bar includes 'File Edit View Tools Help'. The main window title is 'Instrument Results Review: AUDC'. The patient information is 'Mhpatient One' with SSN: xxx-xx-4444. The 'Instruments:' table lists various tests, with 'AUDC' selected for the date '05/02/2011'. The main display area shows the 'Alcohol Use Disorders Identification Test Consumption (AUDC)' report. The score is '7 points', which is highlighted by a red box with the text 'Administration to be deleted'. The report includes patient details, a score, and a list of questions and answers. A red arrow points from the red box to the 'AUDC' entry in the instrument list table.

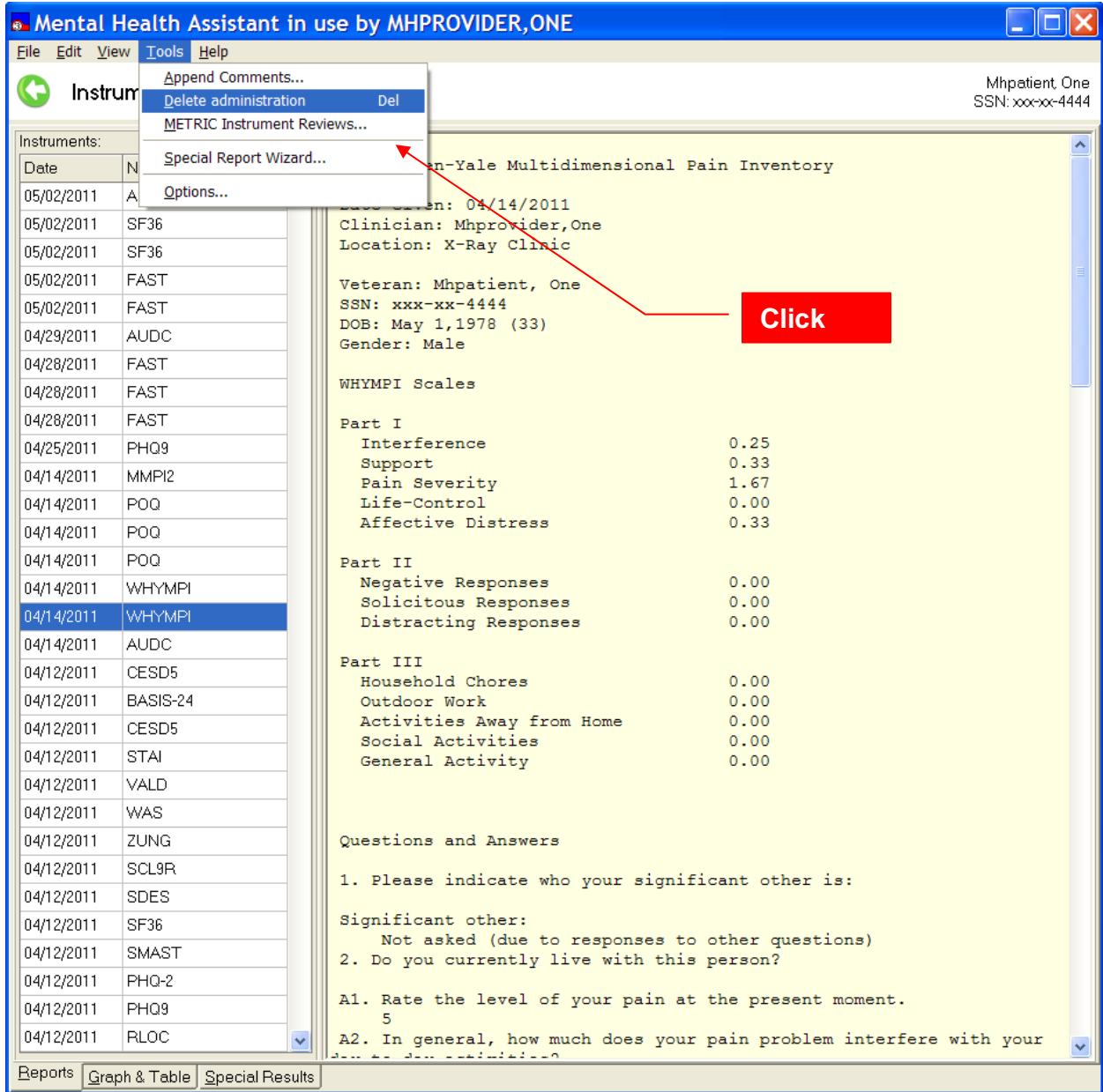
Date	Name
05/02/2011	AUDC
05/02/2011	SF36
05/02/2011	SF36
05/02/2011	FAST
05/02/2011	FAST
04/29/2011	AUDC
04/28/2011	FAST
04/28/2011	FAST
04/28/2011	FAST
04/25/2011	PHQ9
04/14/2011	MMPI2
04/14/2011	POQ
04/14/2011	POQ
04/14/2011	POQ
04/14/2011	WHYMPI
04/14/2011	WHYMPI
04/14/2011	AUDC
04/12/2011	CESD5
04/12/2011	BASIS-24
04/12/2011	CESD5
04/12/2011	STAI
04/12/2011	VALD
04/12/2011	WAS
04/12/2011	ZUNG
04/12/2011	SCL9R
04/12/2011	SDES
04/12/2011	SF36
04/12/2011	SMAST
04/12/2011	PHQ-2
04/12/2011	PHQ9
04/12/2011	RLOC

There are three ways to initiate the deletion process:

- 1) Select **Tools | Delete administration** from the menu.
- 2) Press the delete “DEL” key once an administration is highlighted.
- 3) Right click on the highlighted instrument, then select “Delete” from the pop-up menu.

These three methods are illustrated below.

Example: Use the menu option to delete an administration.



Example: Right click on the mouse to see the **Delete** command in the pop up window.

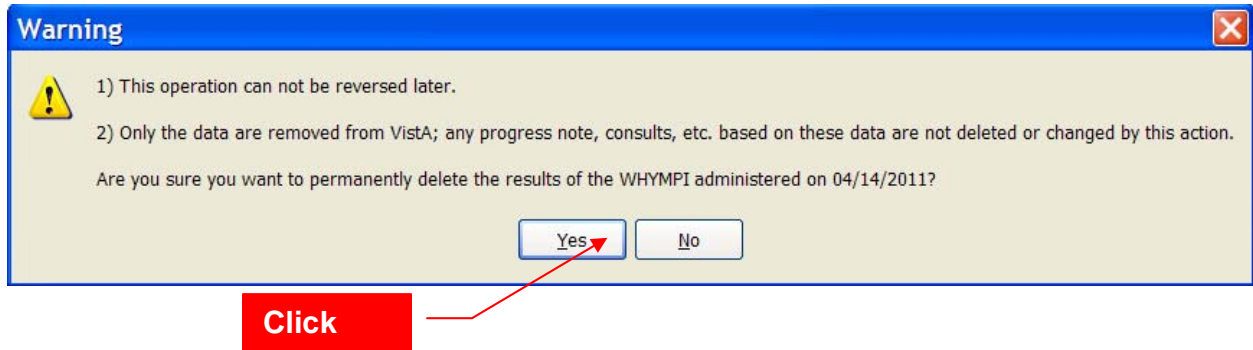
The screenshot shows the 'Mental Health Assistant in use by MHPROVI' application window. The title bar includes 'File Edit View Tools Help'. The main window title is 'Instrument Results Review: WHYMPI'. On the left, there is a table of instruments with columns 'Date' and 'Name'. The table contains 20 rows of data. The row for '04/14/2011' with 'WHYMPI' is selected. A context menu is open over this row, showing 'Append' and 'Delete' options. A red arrow points from a red box labeled '1. Right Click' to the right edge of the table. Another red arrow points from a red box labeled '2. Click' to the 'Delete' option in the context menu. On the right side of the window, there is a text area displaying patient information and 'WHYMPI Scales'.

Date	Name
05/02/2011	AUDC
05/02/2011	SF36
05/02/2011	SF36
05/02/2011	FAST
05/02/2011	FAST
04/29/2011	AUDC
04/28/2011	FAST
04/28/2011	FAST
04/28/2011	FAST
04/25/2011	PHQ9
04/14/2011	MMPI2
04/14/2011	POQ
04/14/2011	POQ
04/14/2011	POQ
04/14/2011	WHYMPI
04/14/2011	WHYMPI
04/14/2011	WHYMPI
04/12/2011	CESD5
04/12/2011	BASIS-24
04/12/2011	CESD5
04/12/2011	STAI
04/12/2011	VALD
04/12/2011	WAS
04/12/2011	ZUNG
04/12/2011	SCL9R

West Haven-Yal
Date Given: 04
Clinician: Mhp
Location: X-Re
Veteran: Mhpat
SSN: xxx-xx-44
DOB: May 1, 197
Gender: Male
WHYMPI Scales
Part I
Interference
St
Pain Severit
Life-Control
Affective Di
Part II
Negative Res
Solicitous F
Distracting
Part III
Household Ch
Outdoor Work
Activities A
Social Activ
General Acti
Questions and
1. Please indi

Once you press the delete “DEL” key, or one of the above methods, a warning dialog will appear.

Example: Warning dialog for deleting an administration.



If you are sure that the deletion is proper, click on the **Yes** button. If the data are removed successfully, the following prompt will appear. In addition, the list of instruments will have been refreshed.

Example: Instruments results screen refreshed and the successful delete message is presented.

The screenshot shows the 'Mental Health Assistant in use by MHPROVIDER, ONE' application window. The main window title is 'Instrument Results Review: AUDC'. On the left, there is a table of instruments with columns for 'Date' and 'Name'. The 'AUDC' instrument for '05/02/2011' is selected. The right pane displays details for the 'Alcohol Use Disorders Identification Test Consumption (AUDC)', including 'Date Given: 5/2/2011', 'Clinician: Mhprovider, One', 'Location: X-Ray Clinic', 'Veteran: Mhpatient, One', 'SSN: xxx-xx-4444', 'DOB: May 1, 1978 (33)', and 'Gender: Male'. An 'Information' dialog box is overlaid in the center, containing the text: 'The data were deleted. Remember that progress notes, consults, etc. are not deleted or changed by this process.' with an 'OK' button. At the bottom of the main window, there are tabs for 'Reports', 'Graph & Table', and 'Special Results'.

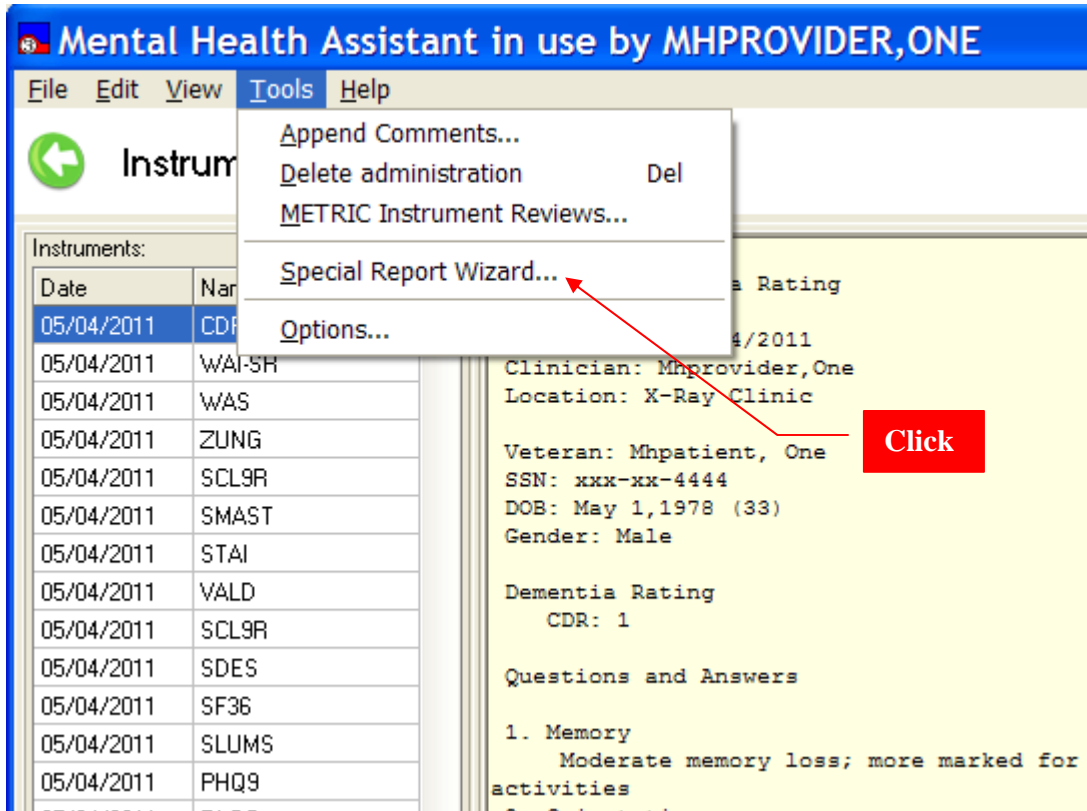
Date	Name
05/02/2011	AUDC
05/02/2011	SF36
05/02/2011	SF36
05/02/2011	FAST
05/02/2011	FAST
04/29/2011	AUDC
04/28/2011	FAST
04/28/2011	FAST
04/28/2011	FAST
04/25/2011	PHQ9
04/14/2011	MMPI2
04/14/2011	POQ
04/14/2011	POQ
04/14/2011	POQ
04/14/2011	WHYMPI
04/14/2011	AUDC
04/12/2011	CESD5
04/12/2011	BASIS-24
04/12/2011	CESD5
04/12/2011	STAI
04/12/2011	VALD
04/12/2011	WAS
04/12/2011	ZUNG
04/12/2011	SCL9R
04/12/2011	SDES
04/12/2011	SF36
04/12/2011	SMAST
04/12/2011	PHQ-2
04/12/2011	PHQ9
04/12/2011	RLOC
04/12/2011	SAI

Notice that only one administration of the WHYMPI is listed for 4/14/2011.

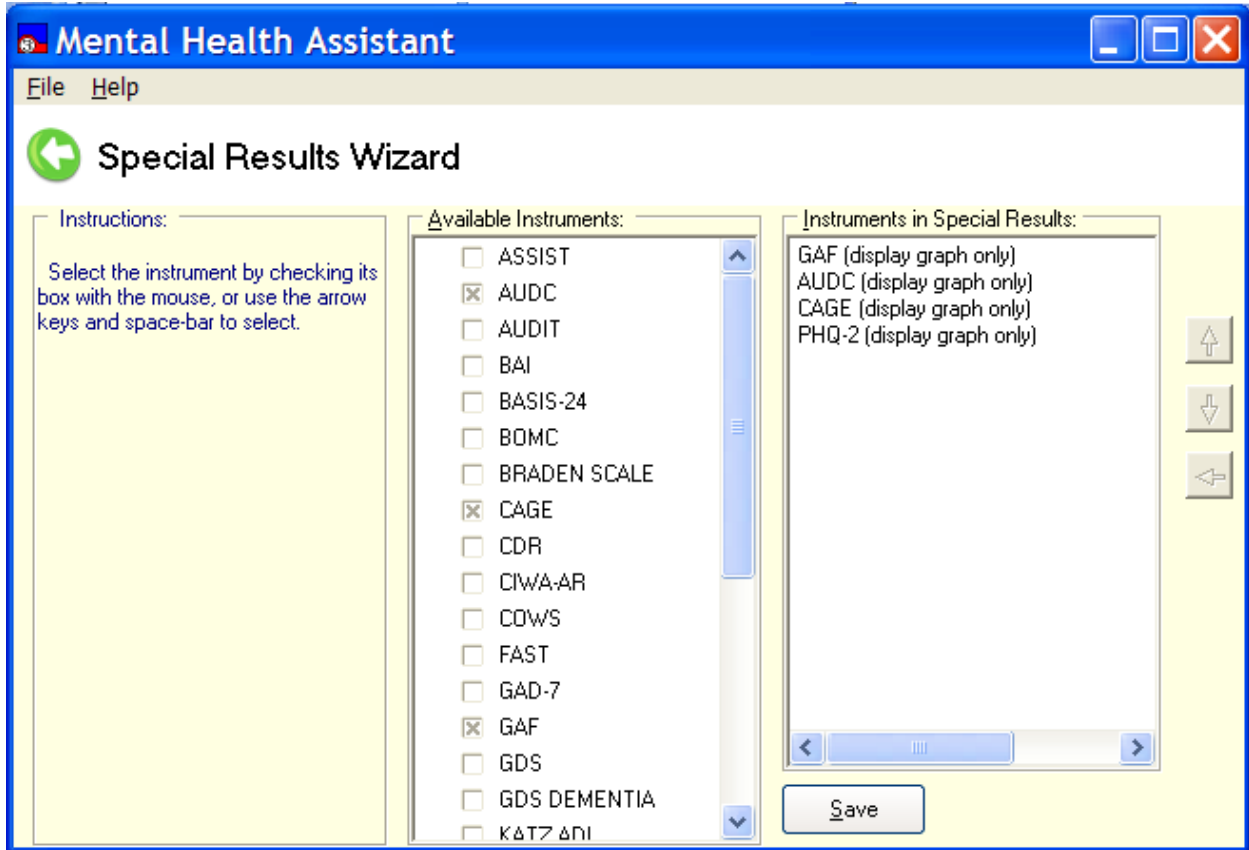
Special Results Wizard

The Special Results tab can be modified by the user. The order of the results of instruments can be arranged by the user. Also, responses to questions for a given instrument can be displayed.

Example: Opening the Special Results Wizard.

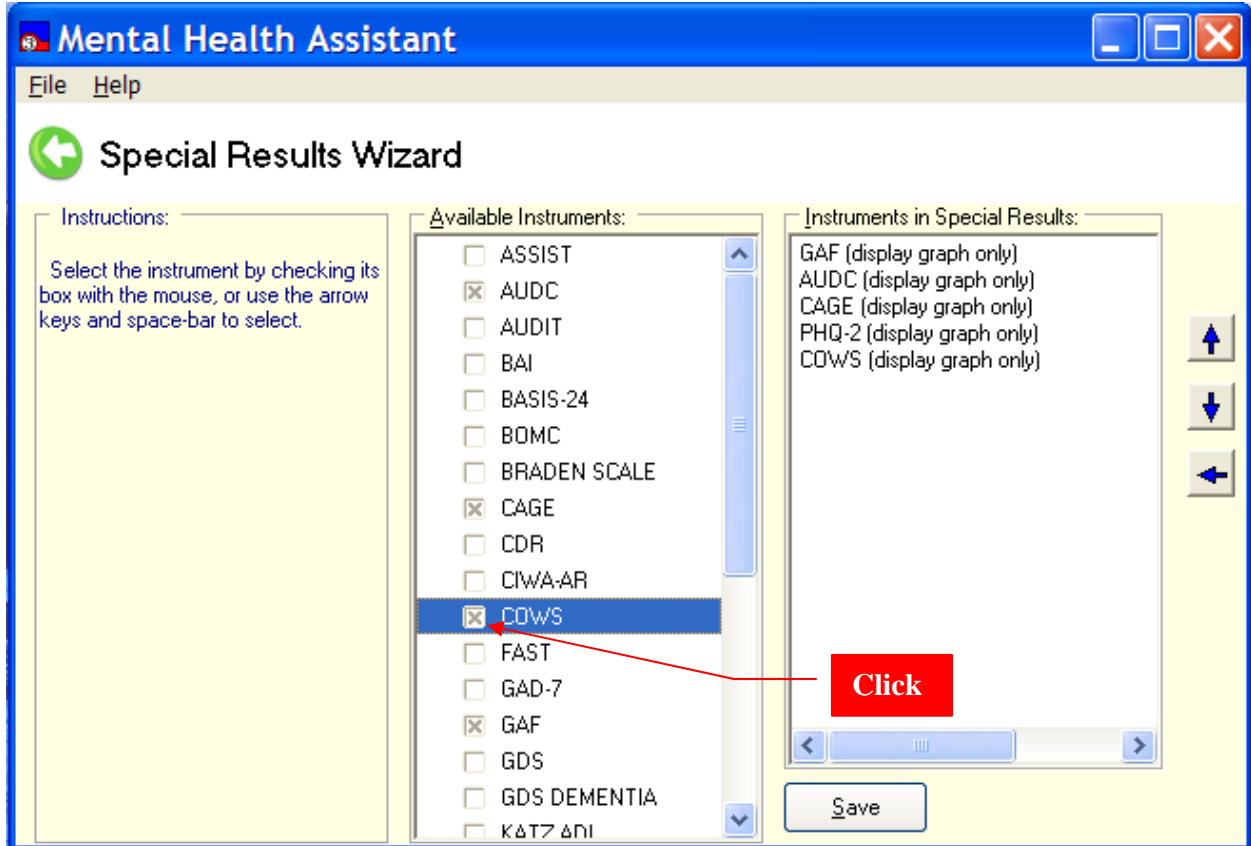


Example: Special Results Wizard form.



The Special Results Wizard provides a simple method to add or remove the results of an instrument viewed in the Special Results tab; simply click on the instrument to toggle the check box.

Example: Adding the results of COWS administrations.



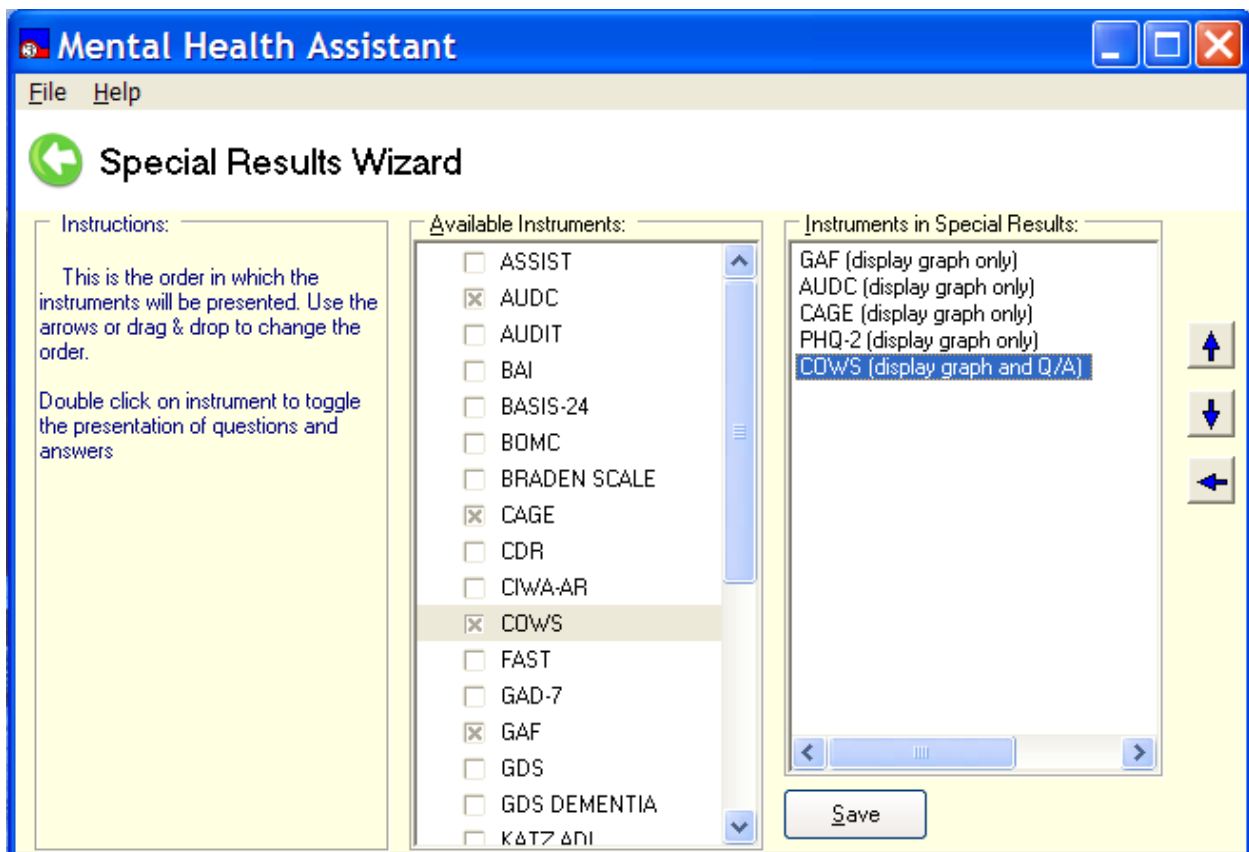
Changing the order of the results

The order of the results of the instruments can be changed using the up and down arrows. Click on the instrument's name in the "Instruments in Special Results" so that it is highlighted, then click on the up or down arrow to move it in the list.

Displaying the results with or without the questions and answers

By double-clicking on the name of the instrument in the "Instruments in Special Results" window, the results of the instrument will be displayed with or without the questions and answers.

Example: Double-clicking on the COWS in the "Instruments in Special Results" window.



By clicking on the **Save** button the changes will be saved. To **cancel** the session with the Special Results Wizard, close the form by using the **File | Exit** menu option, or click on the left arrow, or, click on the "X" in the upper right-hand corner, or press the escape key "ESC."

Example: COWS administrations are added to Special Results tab.

Mental Health Assistant in use by MHPROVIDER, ONE

File Edit View Tools Help

Special Results Mhpatient, One SSN: xxx-xx-4444

COWS

Date	COWS Score
05/01/2011	45
05/04/2011	25
05/04/2011	35
05/06/2011	25

Guide for interpreting COWS (range 0-67):
The higher the score, the greater the withdrawal symptoms. Less than 12: Mild. 13-24: Moderate. 25-36 Moderately severe. Above 36: Severe.

COWS responses for 05/01/2011
(To view another set of answers, click on the bar of the graph above.)

1. Resting Pulse Rate: Measured after patient is sitting or lying for one minute.
Pulse rate 101 - 120 (Score 2)
2. Sweating: Over past half-hour, not accounted for by room temperature or patient activity.
Sweat streaming off face (Score 4)
3. Restlessness: Observation during assessment.
Unable to sit still for more than a few seconds (Score 5)
4. Pupil size.
Pupils so dilated that only the rim of the iris is visible (Score 5)
5. Bone or joint aches: If patient was having pain previously, only the additional component attributed to opiates withdrawal is scored.
Patient is rubbing joints or muscles and is unable to sit still because of discomfort (Score 4)
6. Runny nose or tearing: Not accounted for by cold symptoms or allergies.
Nose constantly running or tears streaming down cheeks (Score 4)
7. GI upset: Over last half-hour.
Multiple episodes of diarrhea or vomiting (Score 5)
8. Tremor: Observation of outstretched hands.
Gross tremor or muscle twitching (Score 4)
9. Yawning: Observation during assessment.
Yawning several times per minute (Score 4)
10. Anxiety or Irritability.
Patient so irritable or anxious that participation in the assessment is difficult (Score 4)
11. Gooseflesh skin.
Prominent piloerection (Score 5)

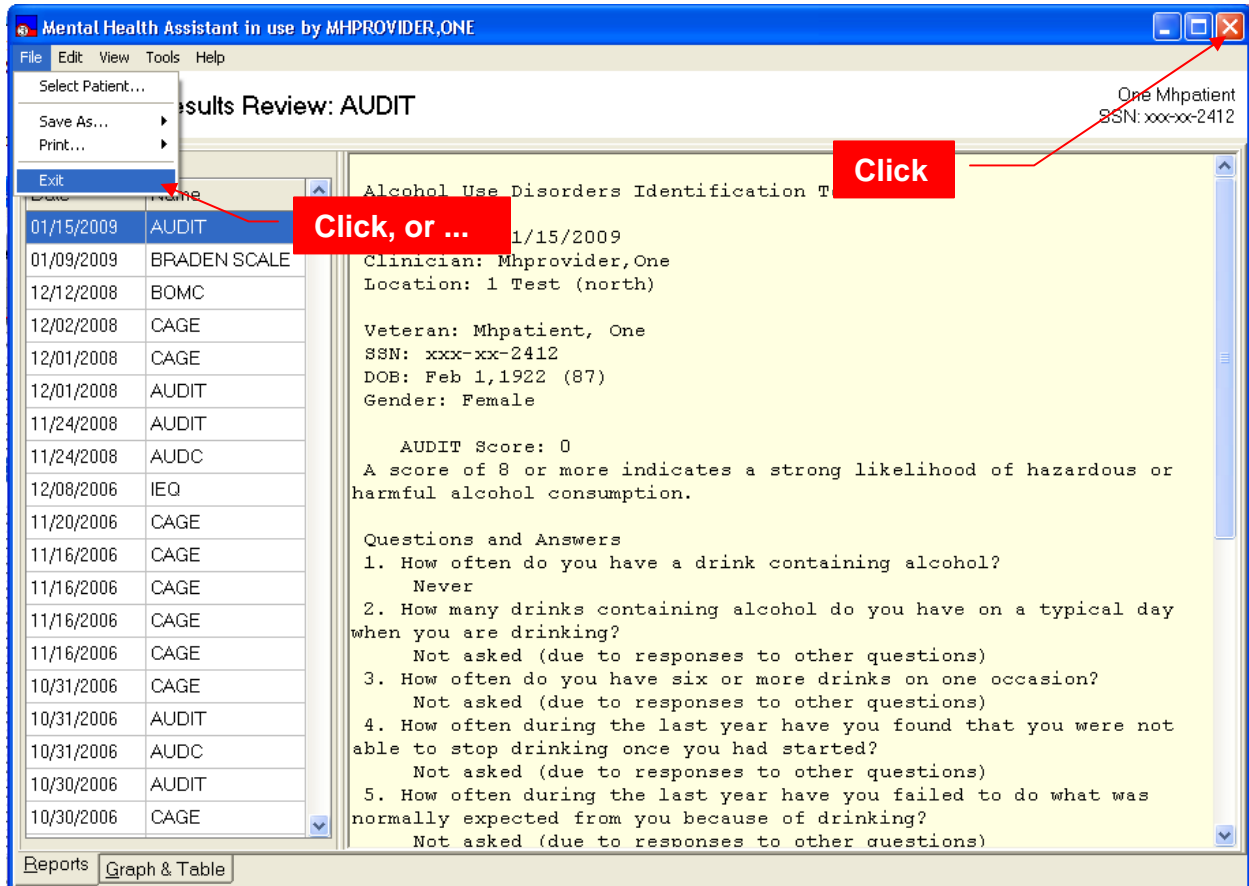
Reports Graph & Table **Special Results**

By clicking on the bar on the graph, the questions and answers for that date will appear below the graph. In the example above, the results from 05/01/2011 are presented.

Exiting the Instrument Results Review Form

To exit the Instruments Results Review form, **click** on the **File | Exit** menu item. The Instrument Results Review form will close and the user is returned to the MHA Main form. Alternately, you can press the “ESC” key, or click on the “X” in the upper right-hand corner of the form, or click on the left arrow.

Example: Exiting the Instruments Results Review form.



Addiction Severity Index Manager Functions

Orientation

The ASI Manager lists all previous interviews and makes it easy to view either the item report or narrative report for a selected interview.

Additional views of ASI data are provided. Both the **Domain Scores** and **Item Trends** functions present graphical and tabular data across multiple interviews. The Domain Scores option gives the user the opportunity to see either problem severity ratings or evaluation factor scores (see Alterman, et al., [1998] "New scales to assess change in the Addiction Severity Index for the opioid, cocaine, and alcohol dependent", *Psychology of Addictive Behavior*, 12, 233-246). The **Item Trends** option displays responses to selected individual items. It is hoped that these data views will help with treatment planning and treatment outcome monitoring.

A user-friendly interface for entering interview data is provided. This "New ASI" option enables staff to quickly enter data, to easily jump from one item to another, and to enter free text comments at any time. This option should greatly reduce data entry time, whether transcribing interview results from a paper form or entering them on-line during an interview. It is not a self-administered version of the ASI, though, and should not be used for patient entry of ASI responses.

Example: Addiction Severity Index Manage form

Main Menu

Selected patient identification

Title bar

Previous List of ASIs

ASI editing buttons

Last ASI days

Date	Type	Ordered By	Status	Signed
4/22/2011	FULL	MHPROVIDER,ONE	Incomplete	False
4/21/2011	FULL	MHPROVIDER,ONE	Incomplete	False
2/18/2011	LITE	FINKELSTEIN,ALLAN	Pt Refused	True
4/22/2010	ER,ONE	ER,ONE	Unable to respond	False

10 days since last ASI

MHPATIENT,ONE 666-11-4444 ASI FULL on 04/22/2011 by: MHPROVIDER,ONE
 ***** Unsigned Draft *****
 *** PSYCHOSOCIAL HISTORY ***

GENERAL INFORMATION

Mr. Mhpatient is a 33 year old Hispanic-Other,f1 question not answered male ACTIVE DUTY. He lists his religious preference as Other. He was admitted to the Detoxification Services program on Apr 22, 2011. In the past 30 days, he has . G19 QUESTION NOT APPLICABLE He has lived at his current address for 9 years, 9 months.

This report is based on a full ASI interview conducted in person on Apr 22, 2011 by One Mhprovider, Clinical Psychologist. Mr. Mhpatient completed the interview.

	Severity Rating	Composite Score
MEDICAL	X	0.0000
EMPLOYMENT	X	0.7053
ALCOHOL	3	0.4260
DRUG	3	0.1333
LEGAL	1	0.3067
FAMILY	X	----
PSYCHIATRIC	X	----

Narrative Report | Item Report | Item Trends | Domain Scores

Main Menu

The Main Menu offers user functions in the context of the ASI Manager form, such as tools and help.

Selected Patient Identification Label

The Selected Patient Identification label displays information about who is the currently-selected patient within MHA. All functions performed in the ASI Manager form will apply to this patient.

Title Bar

The Title Bar is a visual artifact that is used throughout MHA to display information about the context that applies to the current activity. In this case, the Title Bar displays the current instrument's name.

List of Previously-Administered ASIs

This is the list of all ASIs that have been administered to the selected patient. The list is also used for selecting which ASI to process.

Report View

The Report View displays an administration report in textual form, based on the patient's data stored in VistA for the selected administration.

Navigation Tabs

These tabs are used to switch between the various views of the data.

ASI Editing Buttons

The ASI Editing Buttons are used to create new ASIs or edit existing ones.

Days Since Last ASI Label

The Days Since Last ASI label is a reminder about how long ago the current patient had an ASI.

Determining the Number of Days since the Last ASI for Selected Patient

To determine when the last ASI was administered to the current patient, observe towards the middle-left of the ASI Manager form. Read the text label that states ““x” days since last ASI.”

Example: The last ASI for this patient was administered 10 days ago.

Previous ASI

Date	Type	Ordered By	Status	Signed
4/22/2011	FULL	MHPROVIDER,ONE	Incomplete	False
4/21/2011	FULL	MHPROVIDER,ONE	Incomplete	False
2/18/2011	LITE	FINKELSTEIN,ALLAN	Pt Refused	True
4/22/2010	FULL	MHPROVIDER,ONE	Unable to respond	False

10 days since last ASI

MHPATIENT, ONE 666-11-4444 ASI FULL on 04/22/2011 by: MHPROVIDER, ONE
 ***** Unsigned Draft *****
 *** PSYCHOSOCIAL HISTORY ***

GENERAL INFORMATION

Mr. Mhpatient is a 33 year old Hispanic-Other, f1 question not answered male ACTIVE DUTY. He lists his religious preference as Other. He was admitted to the Detoxification Services program on Apr 22, 2011. In the past 30 days, he has . G19 QUESTION NOT APPLICABLE He has lived at his current address for 9 years, 9 months.

This report is based on a full ASI interview conducted in person on Apr 22, 2011 by One Mhprovider, Clinical Psychologist. Mr. Mhpatient completed the interview.

	Severity Rating	Composite Score
MEDICAL	X	0.0000
EMPLOYMENT	X	0.7053
ALCOHOL	3	0.4260
DRUG	3	0.1333
LEGAL	1	0.3067
FAMILY	X	----
PSYCHIATRIC	X	----

Narrative Report | Item Report | Item Trends | Domain Scores

Selecting a Previous Interview

To select from previously administered interviews, click on the row for the desired interview from the table that lists all previous interviews (upper section of form). The clicked row will be highlighted, and the corresponding report type (Item or Narrative) will be shown below the table.

Example: The ASI interview dated 4/22/2011 is selected, and the Narrative Report is shown below.

Mental Health Assistant in use by MHPROVIDER, ONE

File Edit View Tools Help

Addiction Severity Index Manager Mhpatient, One
SSN: xxx-xx-4444

10 days since last ASI

Date	Type	Ordered By	Status	Signed
4/22/2011	FULL	MHPROVIDER,ONE	Incomplete	False
4/21/2011	FULL	MHPROVIDER,ONE	Incomplete	False
2/18/2011	LITE	FINKELSTEIN,ALLAN	Pt Refused	True
4/22/2010	FULL	MHPROVIDER,ONE	Unable to respond	False

MHPATIENT,ONE 666-11-4444 ASI FULL on 04/22/2011 by: MHPROVIDER,ONE
 ***** Unsigned Draft *****
 *** PSYCHOSOCIAL HISTORY ***

GENERAL INFORMATION

Mr. Mhpatient is a 33 year old Hispanic-Other, f1 question not answered male ACTIVE DUTY. He lists his religious preference as Other. He was admitted to the Detoxification Services program on Apr 22, 2011. In the past 30 days, he has . G19 QUESTION NOT APPLICABLE He has lived at his current address for 9 years, 9 months.

This report is based on a full ASI interview conducted in person on Apr 22, 2011 by One Mhprovider, Clinical Psychologist. Mr. Mhpatient completed the interview.

	Severity Rating	Composite Score
MEDICAL	X	0.0000
EMPLOYMENT	X	0.7053
ALCOHOL	3	0.4260
DRUG	3	0.1333
LEGAL	1	0.3067
FAMILY	X	----
PSYCHIATRIC	X	----

Narrative Report | Item Report | Item Trends | Domain Scores

Selecting a Report Type

To select a report type, click on a navigation tab at the bottom of the form. Switch between **Narrative Report** and **Item Report**. The selected report type will be shown for the selected (highlighted) interview.

Example: The Item Report for the 4/22/2011 interview is shown. Note that more than one ASI record must be available for displaying the Domain Scores or Item Trends tabs.

Mental Health Assistant in use by MHPROVIDER,ONE

File Edit View Tools Help

Addiction Severity Index Manager Mhpatient, One
SSN: xxx-xx-4444

Previous ASI

Date	Type	Ordered By	Status	Signed
4/22/2011	FULL	MHPROVIDER,ONE	Incomplete	False
4/21/2011	FULL	MHPROVIDER,ONE	Incomplete	False
2/18/2011	LITE	FINKELSTEIN,ALLAN	Pt Refused	True
4/22/2010	FULL	MHPROVIDER,ONE	Unable to respond	False

10 days since last ASI

MHPATIENT,ONE 666-11-4444 ASI FULL on 04/22/2011 by: MHPROVIDER,ONE
***** Unsigned Draft *****

***** GENERAL INFORMATION *****

Name: MHPATIENT,ONE
SS No.: 666114444

Admission Date: APR 22, 2011
Interview: APR 22, 2011
Time Begun:
Time Ended:
Contact Code: IN PERSON
Class: FULL
Gender: MALE

Transcriber: MHPROVIDER,ONE
Interviewer: MHPROVIDER,ONE
Special: INTERVIEW COMPLETED

Narrative Report **Item Report** Item Trends Domain Scores

2. Click

1. Click

Restarting an Unsigned ASI

NOTE: This option can be used to complete, edit, or sign an unsigned ASI.

Example: To restart an unsigned ASI, select an unsigned ASI in the table that lists previous ASIs on the ASI Manager. Click on the **Edit** button. The data entry form will appear, and previous answers will be inserted.

Mental Health Assistant in use by MHPROVIDER, ONE

File Edit View Tools Help

Addition Severity Index Manager Mhpatient, One SSN: xxx-xx-4444

10 days since last ASI

Date	Type	Ordered By	Status	Signed
4/22/2011	FULL	MHPROVIDER,ONE	Incomplete	False
4/21/2011	FULL	MHPROVIDER,ONE	Incomplete	False
2/18/2011	LITE	FINKELSTEIN,ALLAN	Pt Refused	True
4/22/2010	FULL	MHPROVIDER,ONE	Unable to respond	False

MHPATIENT, ONE 666-11-4444 ASI FULL on 04/22/2011 by: MHPROVIDER, ONE
***** Unsigned Draft *****
*** PSYCHOSOCIAL HISTORY ***

GENERAL INFORMATION

Mr. Mhpatient is a 33 year old Hispanic-Other, f1 question not answered male ACTIVE DUTY. He lists his religious preference as Other. He was admitted to the Detoxification Services program on Apr 22, 2011. In the past 30 days, he has . G19 QUESTION NOT APPLICABLE He has lived at his current address for 9 years, 9 months.

This report is based on a full ASI interview conducted in person on Apr 22, 2011 by One Mhprovider, Clinical Psychologist. Mr. Mhpatient completed the interview.

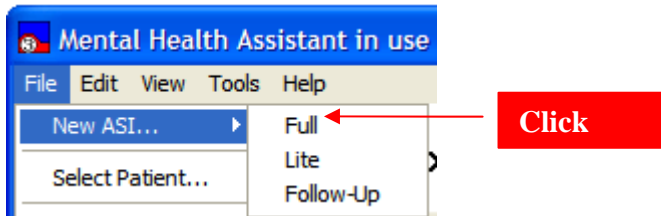
	Severity Rating	Composite Score
MEDICAL	X	0.0000
EMPLOYMENT	X	0.7053
ALCOHOL	3	0.4260
DRUG	3	0.1333
LEGAL	1	0.3067
FAMILY	X	----
PSYCHIATRIC	X	----

Narrative Report Item Report Item Trends Domain Scores

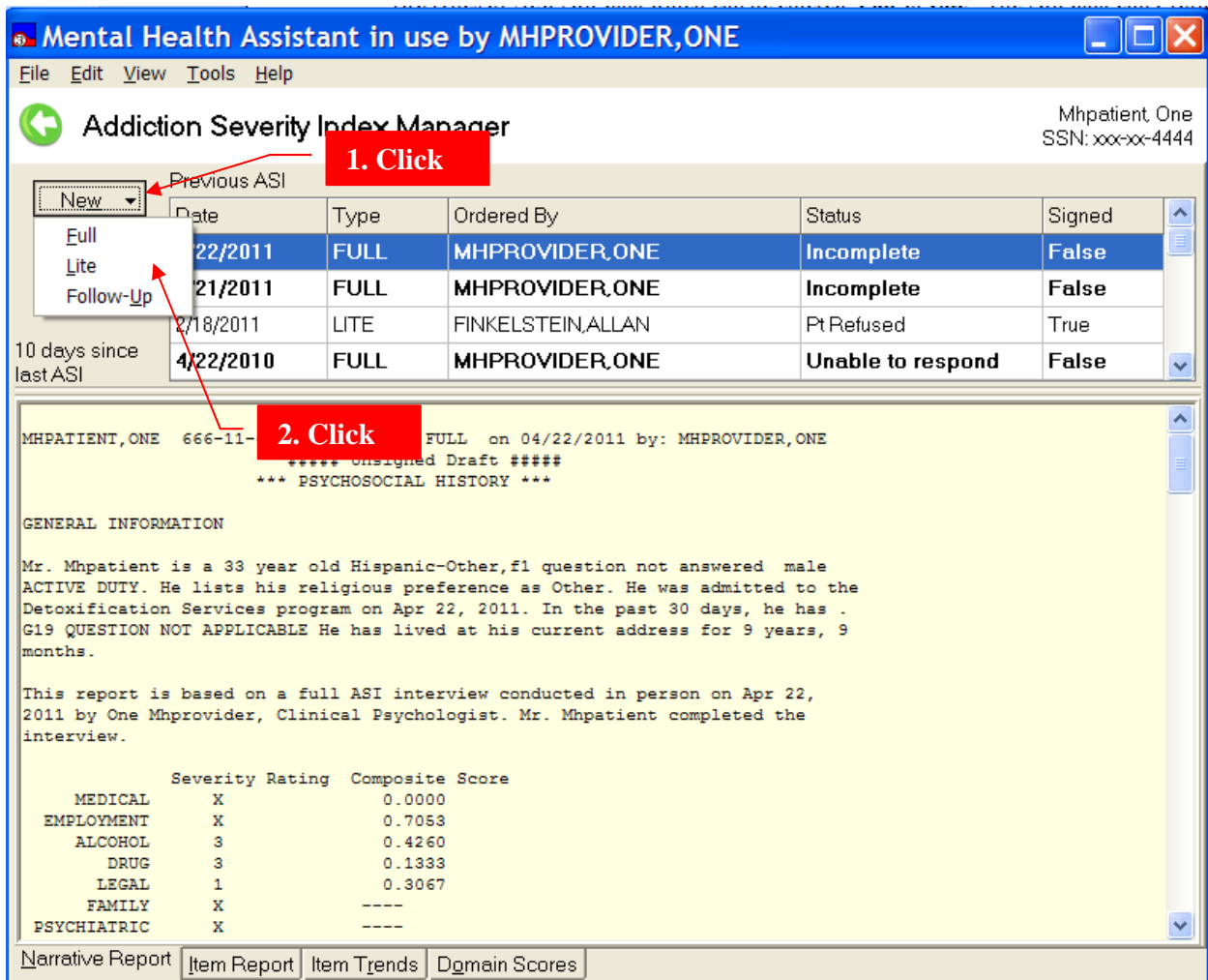
Starting a New ASI

To start a New ASI, **click** on the **New ASI** button, and then **click** on the **Full** menu item. There are two types of New ASI data which can be entered: **Full** or **Lite**. The ASI data entry form will appear, and will be formatted corresponding to the choice made by the user: Full or Lite.

Example: File | New ASI... menu item



Example: The **Addiction Severity Index Manager** form.



Date	Type	Ordered By	Status	Signed
22/2011	FULL	MHPROVIDER,ONE	Incomplete	False
21/2011	FULL	MHPROVIDER,ONE	Incomplete	False
2/18/2011	LITE	FINKELSTEIN,ALLAN	Pt Refused	True
4/22/2010	FULL	MHPROVIDER,ONE	Unable to respond	False

MHPATIENT, ONE 666-11- FULL on 04/22/2011 by: MHPROVIDER, ONE
***** Unsigned Draft *****
*** PSYCHOSOCIAL HISTORY ***

GENERAL INFORMATION

Mr. Mhpatient is a 33 year old Hispanic-Other, f1 question not answered male ACTIVE DUTY. He lists his religious preference as Other. He was admitted to the Detoxification Services program on Apr 22, 2011. In the past 30 days, he has . G19 QUESTION NOT APPLICABLE He has lived at his current address for 9 years, 9 months.

This report is based on a full ASI interview conducted in person on Apr 22, 2011 by One Mhprovider, Clinical Psychologist. Mr. Mhpatient completed the interview.

	Severity Rating	Composite Score
MEDICAL	X	0.0000
EMPLOYMENT	X	0.7053
ALCOHOL	3	0.4260
DRUG	3	0.1333
LEGAL	1	0.3067
FAMILY	X	----
PSYCHIATRIC	X	----

Narrative Report | Item Report | Item Trends | Domain Scores

When the ASI data entry form first begins, it highlights the first item. The first item, G3, is automatically set to the user's last selection. In addition, the fields “G4. Date of Admission” and “G5. Date of Interview,” contains today’s date as defaults; field “G9. Contact Type” is set to “1. In person” and “G11. Interviewer” and “G11a. Ordered By” are set to the staff member who logged on to MHA; field “G12. Special” is set to “N. Interview completed.”

ASI Type	Items with default values
Full	G4, G5, G8, G9, G11, G11a and G12.
Lite	G3, G4, G5, G8, G9, G11 and G11a.
Follow-up	G3, G4, G5, G8, G9, G11, G11a and G12.

Example: G8 is “grayed-out” because it is not modifiable. However, G8 displays the selected ASI type.

Saving a Report, Graph or Table to a File

To save a graph, report or table, **click on File | Save As...** menu item and then click on Graph, Report or Table. To save a graph or a table, the “Graph & Table” tab must be selected first.

The following types of reports are available:

- Narrative Report
- Item Report
- Item Trends Report
- Items Trends Graph
- Domain Scores Report
- Domain Scores Graph

Select the report or graph types by clicking on each of the four tabs at the bottom of the form.

Example: A message dialog appears that asks the user to enter a filename and storage location for the table, report or graph file to be saved. A graph is saved as a bitmap, a table is saved as an Excel file and a report is saved as a text file.

The screenshot shows the 'Mental Health Assistant in use by MHPROVIDER,ONE' window. The 'File' menu is open, and 'Save As...' is selected, which has opened a sub-menu with 'Report', 'Table', and 'Graph' options. A red arrow points to the 'Report' option. The main window displays a table of ASI data and a text area with patient information and scores.

	Type	Ordered By	Status	Signed
06/13/2006	LITE	MHPROVIDER,NEW	Completed	True
06/13/2006	LITE	MHPROVIDER,NEW	Incomplete	False
02/08/2006	LITE	MHPROVIDER,NEW	Completed	True
02/08/2006	LITE	MHPROVIDER,NEW	Ready to sign	False

880 days since last ASI

MHPATIENT,ONE 000-00-2412 ASI LITE on 12/08/2006 by: MHPROVIDER,NEW
*** PSYCHOSOCIAL HISTORY ***

GENERAL INFORMATION

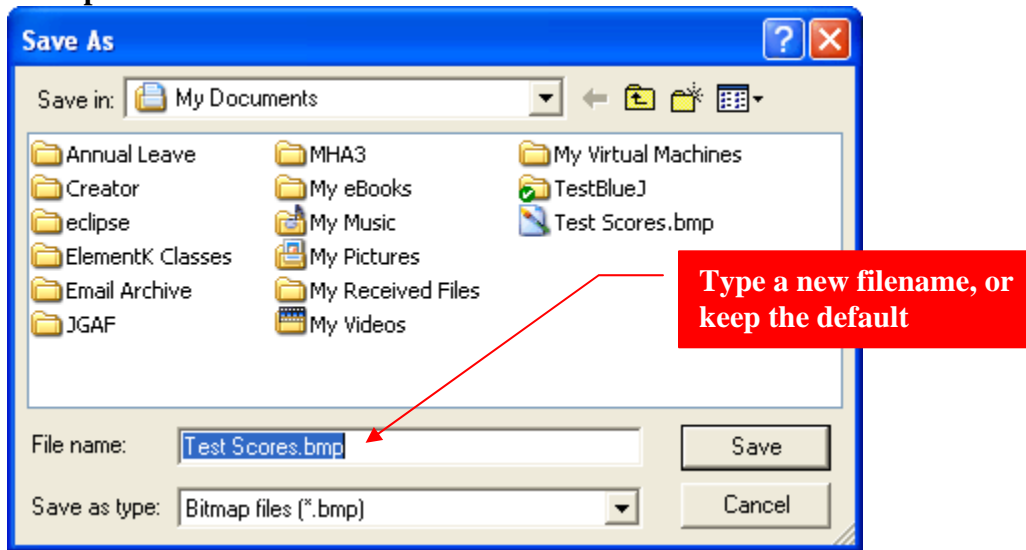
Ms. Mhpatient is a 87 year old White (not Hisp), married female NSC veteran. She lists her religious preference as Protestant. She was admitted to the Consultation/Liaison program on Dec 08, 2006. In the past 30 days, she has not been in a controlled environment. She has lived at her current address for 3 years, 3 months.

This report is based on an ASI Lite interview conducted in person on Dec 08, 2006 by New Mhprovider. Ms. Mhpatient completed the interview.

	Composite Score
MEDICAL	0.0222
EMPLOYMENT	0.6356

Narrative Report | Item Report | Item Trends | Domain Scores

Example: Save As form.



Printing a Report, Graph, or Table

To print a graph, report, or table, **click** on **File | Print** menu item and then **click** on Graph, Report, Table item. A copy of the table, report, or graph is sent directly to the default printer.

The following types of reports are available:

- Narrative Report
- Item Report
- Item Trends Report
- Items Trends Graph
- Domain Scores Report
- Domain Scores Graph

Example: Printing a Report, Graph, or Table.

Mental Health Assistant in use by MHPROVIDER,ONE

File Edit View Tools Help

One Mhpatient
SSN: xxx-xx-2412

Security Index Manager

880 days since last ASI

Type	Ordered By	Status	Signed
LITE	MHPROVIDER,NEW	Completed	True
LITE	MHPROVIDER,NEW	Incomplete	False
LITE	MHPROVIDER,NEW	Completed	True
LITE	MHPROVIDER,NEW	Ready to sign	False

MHPATIENT,ONE 000-00-2412 ASI LITE on 12/08/2006 by: MHPROVIDER,NEW
*** PSYCHOSOCIAL HISTORY ***

GENERAL INFORMATION

Ms. Mhpatient is a 87 year old White (not Hisp), married female NSC veteran. She lists her religious preference as Protestant. She was admitted to the Consultation/Liaison program on Dec 08, 2006. In the past 30 days, she has not been in a controlled environment. She has lived at her current address for 3 years, 3 months.

This report is based on an ASI Lite interview conducted in person on Dec 08, 2006 by New Mhprovider. Ms. Mhpatient completed the interview.

Composite Score
MEDICAL 0.0222
EMPLOYMENT 0.6356

Narrative Report | Item Report | Item Trends | Domain Scores

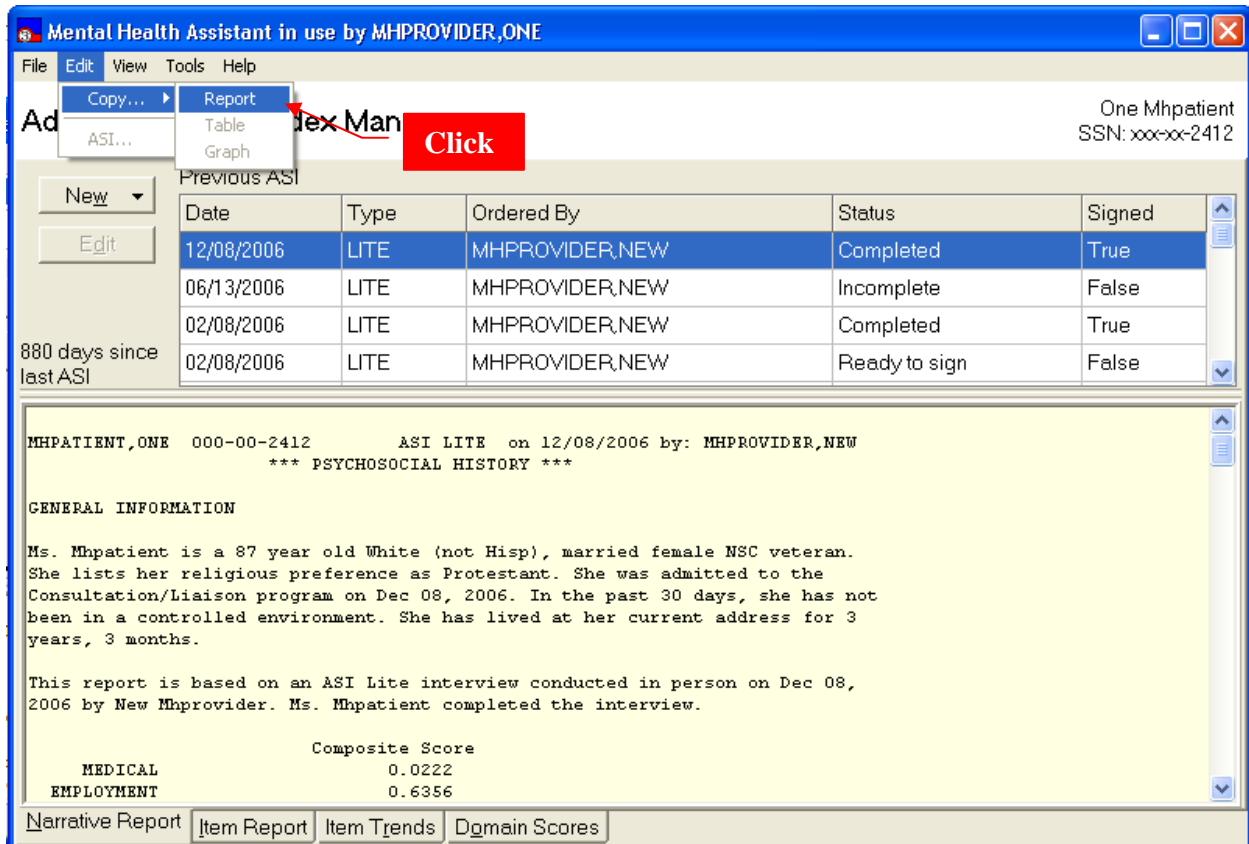
Copying a Report, Graph, or Table to the Windows Clipboard

To copy a report, graph, or table to the Windows clipboard, click on **Edit | Copy** menu item and then click on Graph, Report or Table. A copy of the table, report or graph is sent to the Clipboard. The contents of the Clipboard can then be pasted onto an MS Word or Excel document.

The following types of reports are available:

- Narrative Report
- Item Report
- Item Trends Report
- Items Trends Graph
- Domain Scores Report
- Domain Scores Graph

Example: Copying a Report, Graph, or Table to the Windows Clipboard.



The screenshot shows the 'Mental Health Assistant in use by MHPROVIDER,ONE' window. The 'Edit' menu is open, and the 'Copy...' option is selected, which has opened a sub-menu with 'Report', 'Table', and 'Graph' options. A red arrow points to the 'Report' option, and a red box with the word 'Click' is overlaid on the arrow. The main window displays a table of 'Previous ASI' records and a narrative report for patient 'MHPATIENT,ONE'.

Date	Type	Ordered By	Status	Signed
12/08/2006	LITE	MHPROVIDER,NEW	Completed	True
06/13/2006	LITE	MHPROVIDER,NEW	Incomplete	False
02/08/2006	LITE	MHPROVIDER,NEW	Completed	True
02/08/2006	LITE	MHPROVIDER,NEW	Ready to sign	False

MHPATIENT,ONE 000-00-2412 ASI LITE on 12/08/2006 by: MHPROVIDER,NEW
*** PSYCHOSOCIAL HISTORY ***

GENERAL INFORMATION

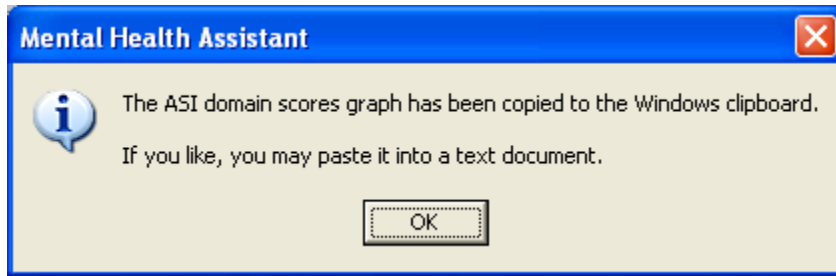
Ms. Mhpatient is a 87 year old White (not Hisp), married female NSC veteran. She lists her religious preference as Protestant. She was admitted to the Consultation/Liaison program on Dec 08, 2006. In the past 30 days, she has not been in a controlled environment. She has lived at her current address for 3 years, 3 months.

This report is based on an ASI Lite interview conducted in person on Dec 08, 2006 by New Mhprovider. Ms. Mhpatient completed the interview.

	Composite Score
MEDICAL	0.0222
EMPLOYMENT	0.6356

Narrative Report | Item Report | Item Trends | Domain Scores

Example: Message displayed after copying to the clipboard.



Navigating through the Different Views on the ASI Manager Form

To navigate, **click** on **View** and then **click** on any of the following **menu entries**:

- Narrative Report
- Item Report
- Item Trends
- Domain Scores

Example: The four tabs at the bottom of the form do the same thing.

The screenshot shows the 'Mental Health Assistant in use by MHPROVIDER,ONE' window. The 'View' menu is open, showing options: Narrative Report, Item Report, Item Trends, Domain Scores, and Show Graph Labels. A red arrow points from the 'View' menu to the 'Narrative Report' option, and another red arrow points from a red 'Click' box to the 'Narrative Report' option. Below the menu is a table of patient records:

Date	Type	Order	Status	Signed
4/22/2011	FULL	MHPROVIDER,ONE	Incomplete	False
4/21/2011	FULL	MHPROVIDER,ONE	Incomplete	False
2/18/2011	LITE	FINKELSTEIN,ALLAN	Pt Refused	True
4/22/2010	FULL	MHPROVIDER,ONE	Unable to respond	False

Below the table is a text area containing patient information and a psychosocial history section. A red arrow points from a red 'Click' box to the 'Narrative Report' tab at the bottom of the window.

MHPATIENT,ONE 666-11-4444 ASI FULL on 04/22/2011 by: MHPROVIDER,ONE
Unsigned Draft #####
*** PSYCHOSOCIAL HISTORY ***

GENERAL INFORMATION

Mr. Mhpatient is a 33 year old Hispanic-Other,f1 question not answered male ACTIVE DUTY. He lists his religious preference as Other. He was admitted to the Detoxification Services program on Apr 22, 2011. In the past 30 days, he has . G19 QUESTION NOT APPLICABLE He has lived at his current address for 9 years, 9 months.

This report is based on a full ASI interview conducted in person on Apr 22, 2011 by One Mhprovider, Clinical Psychologist. Mr. Mhpatient completed the interview.

	Severity Rating	Composite Score
MEDICAL	X	0.0000
EMPLOYMENT	X	0.7053
ALCOHOL	3	0.4260
DRUG	3	0.1333
LEGAL	1	0.3067
FAMILY	X	----
PSYCHIATRIC	X	----

Narrative Report | Item Report | Item Trends | Domain Scores

ASI: Data Entry

This section of the guide illustrates the action of different types of form components such as combo boxes, option button groups, etc. Not every instance of each type of component is shown, but the user can learn from these examples how every component of the data entry form is to be used.

Combo Boxes

Navigation and Selection: To navigate this list with the keyboard, use the up and down keys, or type the first few letters of program type. Using the mouse, slide the scroll bar or click on the up and down arrows on the scroll bar. To select a program type using the keyboard, press the “tab” or “enter”. The highlighted item is selected. Using the mouse, left click on the desired program type and the list will disappear.**Example:** From the ASI Data Entry Form, **click** on the down arrow of Item **G3. Program Type**, (light colored arrow above). A list of 21 ASI Program types will be displayed, eight at a time. Status bar will have context sensitive hints.

Addiction Severity Index

File Tools Help

General Information

G3. Program Type: Consultation/Liaison

G4. Date of Admission: Early Intervention/Education/Referral

G8. Interview Form (A): Detoxification Services

1. Full Intake Ambulatory except Opioid Substitution

Opioid Substitution

G11. Interviewer: Inpatient Acute Care

G11a. Ordered By: Substance Abuse Residential Rehabilitation Treatment Program

Compensated Work Therapy/Transitional Residence

G12. Special:

1. Patient terminated 3. Patient unable to respond

2. Patient refused N. Interview completed

*G14. How long have you lived at this address? Years: Months:

G15. Is this residence owned by you or your family?

0. No 1. Yes X. Not Answered

G17. Race

1. White (not Hispanic) 4. Alaskan Native 7. Hispanic - Puerto Rican

2. Black (not Hispanic) 5. Asian or Pacific Islander 8. Hispanic - Cuban

3. American Indian 6. Hispanic - Mexican 9. Other Hispanic

G18. Religious Preference

1. Protestant 3. Jewish 5. Other

2. Catholic 4. Islamic 6. None

General Comments:

Click on down arrow for list of programs. F1 for help.

Date Fields

Navigation and Selection: To navigate this calendar using the keyboard, press the left and right keys to change days and shift-left and shift-right to change months. Pressing the "home" key moves to the 1st day of the month. Press the "tab" or "enter" key to select the date and close the calendar. Clicking the mouse on a day will select the date and close the calendar. Clicking on the left and right arrows will change the month.

Example: From the ASI Data Entry Form, **click** on the down arrow of Item G4, Date of Admission. A calendar is displayed. The status bar will update its hint.

Addiction Severity Index

File Tools Help

General Information

G3. Program Type: Inpatient Acute Care

G4. Date of Admission: 3/10/2005

G5. Date of Interview: 3/10/2005

G8. Interview Form (AS...)
 1. Full Intake

G9. Contact Type:
 1. In person 2. Phone

G11. Interviewer: [Dropdown]

G11a. Ordered By: [Dropdown]

G12. Special:
 1. Patient term...
 2. Patient refus...
 Patient unable to respond
 Interview completed

*G14. How long have you lived at this address? Years: [Spinner] Months: [Spinner]

G15. Is this residence owned by you or your family?
 0. No 1. Yes X. Not Answered

G17. Race
 1. White (not Hispanic) 4. Alaskan Native 7. Hispanic - Puerto Rican
 2. Black (not Hispanic) 5. Asian or Pacific Islander 8. Hispanic - Cuban
 3. American Indian 6. Hispanic - Mexican 9. Other Hispanic

G18. Religious Preference
 1. Protestant 3. Jewish 5. Other
 2. Catholic 4. Islamic 6. None

General Comments:

General Info | Medical | Employment | Drug/Alcohol | Legal | Family Hx | Social | Psychia

Use down arrow to see calendar. Do not use future dates. F1 for help.

Example: The date can be typed directly in the edit box. The following formats are accepted: 4/14/2012, 4-14-12, 4.14.12, and 4,14,2012. Notice that the year can be entered as last two digits or four digits. Acceptable delimiters are the backslash, period, comma and dash. Dates in the future are not accepted.

Addiction Severity Index

File Tools Help

General Information

G3. Program Type: Inpatient Acute Care

G4. Date of Admission: 2/10/2005 ← G5. Date of Interview: 3/10/2005

G8. Interview Form (ABI Type):
 1. Full Intake 2. Lite Intake 3. Follow-up

G9. Contact Type:
 1. In person 2. Phone

G11. Interviewer: Mhprovider1_One

G11a. Ordered By: Mhprovider1_One

G12. Special:
 1. Patient terminated 3. Patient unable to respond
 2. Patient refused N. Interview completed

*G14. How long have you lived at this address? Years: Months:

G15. Is this residence owned by you or your family?
 0. No 1. Yes X. Not Answered

G17. Race
 1. White (not Hispanic) 4. Alaskan Native 7. Hispanic - Puerto Rican
 2. Black (not Hispanic) 5. Asian or Pacific Islander 8. Hispanic - Cuban
 3. American Indian 6. Hispanic - Mexican 9. Other Hispanic

G18. Religious Preference
 1. Protestant 3. Jewish 5. Other
 2. Catholic 4. Islamic 6. None

General Comments:

Use down arrow to see calendar. Do not use future dates. F1 for help.

Option Button Groups

Press the keys "1", "2", or "3" and the appropriate box will be checked and the user will be taken to the next item. While mouse input is effective, experienced users find keyboard entry to be quicker and easier. If an incorrect key is pressed, an error message will appear.

Example: From the ASI Data Entry Form, **click** on one of the boxes in item **G17**. By clicking on a box or its text a check will appear in that box and other checks will be removed from other boxes.

Addiction Severity Index

File Tools Help

General Information

G3. Program Type: Inpatient Acute Care

G4. Date of Admission: 2/10/2005 G5. Date of Interview: 3/10/2005

G8. Interview Form (ASI Type):
 1. Full Intake 2. Lite Intake 3. Follow-up

G9. Contact Type:
 1. In person 2. Phone

G11. Interviewer: Mhprovider1,One

G11a. Ordered By: Mhprovider1,One

G12. Special:
 1. Patient terminated 3. Patient unable to respond
 2. Patient refused N. Interview completed

*G14. How long have you lived at this address? Years: Months:

G15. Is this residence owned by you or your family?
 0. No 1. Yes X. Not Answered

G17. Race

1. White (not Hispanic) 4. Alaskan Native 7. Hispanic - Puerto Rican
 2. Black (not Hispanic) 5. Asian or Pacific Islander 8. Hispanic - Cuban
 3. American Indian 6. Hispanic - Mexican 9. Other Hispanic

When race is unknown, leave question blank

G18. Religious Preference
 1. Protestant 3. Jewish 5. Other
 2. Catholic 4. Islamic 6. None

General Comments:

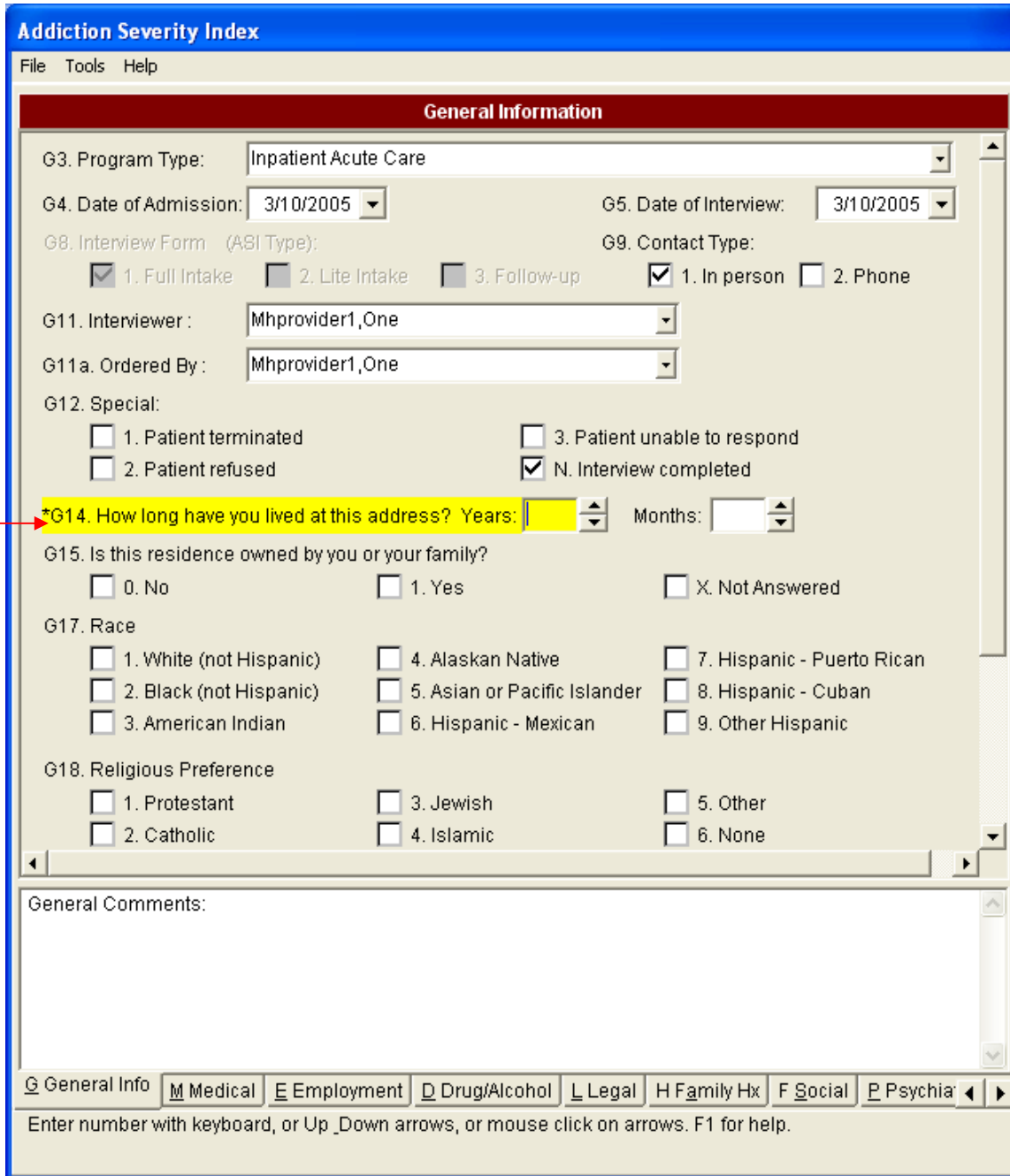
General Info Medical Employment Drug/Alcohol Legal Family Hx Social Psychia

When race is unknown, leave question blank

Spin Edit

Type the number of years—an acceptable number is from 0 to 99—and then press either the "tab" or "enter" key. The "Months:" will then become the active item and will be highlighted. If an incorrect number is entered, an error message will appear.

Example: From the ASI Data Entry Form, type in the year and press tab or enter key. The next item will then be highlighted, ready for input.



Addiction Severity Index

File Tools Help

General Information

G3. Program Type: Inpatient Acute Care

G4. Date of Admission: 3/10/2005 G5. Date of Interview: 3/10/2005

G8. Interview Form (ABI Type):
 1. Full Intake 2. Lite Intake 3. Follow-up

G9. Contact Type:
 1. In person 2. Phone

G11. Interviewer: Mhprovider1,One

G11a. Ordered By: Mhprovider1,One

G12. Special:
 1. Patient terminated 3. Patient unable to respond
 2. Patient refused N. Interview completed

*G14. How long have you lived at this address? Years: 0 Months: 0

G15. Is this residence owned by you or your family?
 0. No 1. Yes X. Not Answered

G17. Race
 1. White (not Hispanic) 4. Alaskan Native 7. Hispanic - Puerto Rican
 2. Black (not Hispanic) 5. Asian or Pacific Islander 8. Hispanic - Cuban
 3. American Indian 6. Hispanic - Mexican 9. Other Hispanic

G18. Religious Preference
 1. Protestant 3. Jewish 5. Other
 2. Catholic 4. Islamic 6. None

General Comments:

General Info Medical Employment Drug/Alcohol Legal Family Hx Social Psychia

Enter number with keyboard, or Up_Down arrows, or mouse click on arrows. F1 for help.

The spin-edit field can be increased by one when the up arrow receives a mouse click, or when the up-arrow key is pressed. To decrease the value, click on the down arrow or press the down arrow key. A number will not increase beyond the limit of the acceptable range. To move to the next item, press the "tab" or "enter" key.

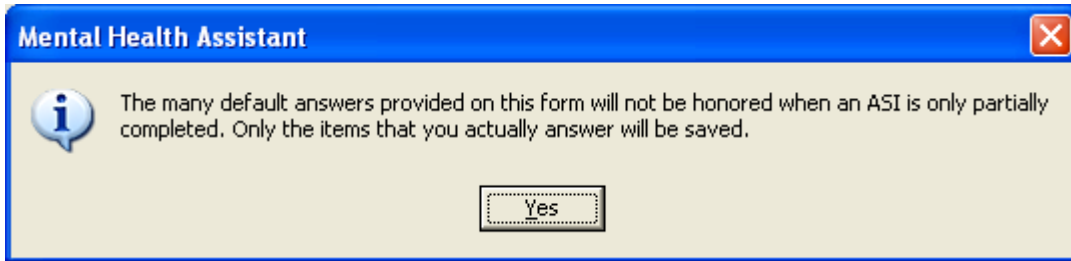
Example: From the ASI Data Entry Form, **click** on the up or down arrows of the spin-edit field of G14. The number in the spin-edit box will increase or decrease by one.

Item G12

From the ASI Data Entry Form, click on

1. **Patient Terminated** or
2. **Patient Refused** or
3. **Patient unable to respond"** on Item G12.

A dialog-message will appear indicating that default values will not be set for the user.



Item G19

The edit box is active only when item G19 has response "6. Other (Specify)" checked. Otherwise the edit box is disabled (user cannot write to it).

Example: From the ASI Data Entry Form, click on **6. Other (Specify)** on Item G19. The edit box below will become active.

Addiction Severity Index

File Tools Help

General Information

G12. Special:

1. Patient terminated 3. Patient unable to respond
 2. Patient refused N. Interview completed

*G14. How long have you lived at this address? Years: Months:

G15. Is this residence owned by you or your family?

0. No 1. Yes X. Not Answered

G17. Race

1. White (not Hispanic) 4. Alaskan Native 7. Hispanic - Puerto Rican
 2. Black (not Hispanic) 5. Asian or Pacific Islander 8. Hispanic - Cuban
 3. American Indian 6. Hispanic - Mexican 9. Other Hispanic

G18. Religious Preference

1. Protestant 3. Jewish 5. Other
 2. Catholic 4. Islamic 6. None

***G19. Have you been in a controlled environment in the past 30 days?**

1. No 4. Medical Treatment X. Not Answered
 2. Jail 5. Psychiatric Treatment N. Not Applicable
 3. Alcohol or Drug Treatment 6. Other (specify)

G20. How many days?

General Comments:

General Info Medical Employment Drug/Alcohol Legal Family Hx Social Psychia

A place, theoretically, without access to drugs or alcohol. F1 for help.

By clicking on “1. No” the edit box becomes disabled as does item G20. Item G20 will have a response of “N.” This will also occur with “X. Not Answered” and “N. Not Applicable.”

From the ASI Data Entry Form on Item G19, click on

1. No or

X. Not Answered

Example: The edit box below will, if active, become inactive and G20 will also become inactive with a value of “N”.

Medical Tab

The Medical Status page has a unique color on its title bar.

Example: From the ASI Data Entry Form, click on the tab, **Medical**. The form will move to the Medical Status page.

Addiction Severity Index
File Tools Help

Medical Status

*M1. How many times in your life have you been hospitalized for medical problems ("N" for never)?

M2. How long ago was your last hospitalization for a physical problem? Years: Months:

*M3. Do you have any chronic medical problems which continue to interfere with your life?
 0. No 1. Yes (specify) X. Not Answered

*M4. Are you taking any prescribed medication on a regular basis for a physical problem?
 0. No 1. Yes X. Not Answered

*M5. Do you receive a pension for a physical disability? (Exclude psychiatric disability)
 0. No 1. Yes (specify) X. Not Answered

*M6. How many days have you experienced medical problems in the past 30?

*M7. How troubled or bothered have you been by these medical problems in the past 30 days?
 0. Not at all 2. Moderately 4. Extremely
 1. Slightly 3. Considerably X. Not Answered

*M8. How important to you now is treatment for these medical problems?
 0. Not at all 2. Moderately 4. Extremely
 1. Slightly 3. Considerably X. Not Answered

M9. Interviewer: How would you rate the patient's need for medical treatment?

Medical Status Comments:

General Info **Medical** **E** Employment **D** Drug/Alcohol **L** Legal **H** Family Hx **F** Social **P** Psychia

Include O.D.'s, D.T.'s. Exclude detox, alcohol/drug and psychiatric treatment and childbirth (if without complications). F1 for help.

Item M1

If the patient has never been hospitalized in his or her life, it follows that the last hospitalization queried in M2 is not applicable.

Example: From the ASI Data Entry Form, type an “N” (case insensitive) in the spin-edit field for M1. The spin-edit fields for M2 will be changed to “N” and will become inactive.

Addiction Severity Index
File Tools Help

Medical Status

*M1. How many times in your life have you been hospitalized for medical problems ("N" for never)? N

M2. How long ago was your last hospitalization for a physical problem? Years: N Months: N

*M3. Do you have any chronic medical problems which continue to interfere with your life?
 0. No 1. Yes (specify) X. Not Answered

*M4. Are you taking any prescribed medication on a regular basis for a physical problem?
 0. No 1. Yes X. Not Answered

*M5. Do you receive a pension for a physical disability? (Exclude psychiatric disability)
 0. No 1. Yes (specify) X. Not Answered

*M6. How many days have you experienced medical problems in the past 30? _____

*M7. How troubled or bothered have you been by these medical problems in the past 30 days?
 0. Not at all 2. Moderately 4. Extremely
 1. Slightly 3. Considerably X. Not Answered

*M8. How important to you now is treatment for these medical problems?
 0. Not at all 2. Moderately 4. Extremely
 1. Slightly 3. Considerably X. Not Answered

M9. Interviewer: How would you rate the patient's need for medical treatment?
 0. Not at all 1. Slightly 2. Moderately 3. Considerably 4. Extremely X. Not Answered

Medical Status Comments:

General Info **M Medical** Employment Drug/Alcohol Legal Family Hx Social Psychia

Include O.D.'s, D.T.'s. Exclude detox, alcohol/drug and psychiatric treatment and childbirth (if without complications). F1 for help.

Medical Status Comments

The medical status Comments field is an edit field that accepts free text.

Example: From the ASI Data Entry Form, type comments in **Medical Status Comments** field. The memo field will accept free text.

Addiction Severity Index

File Tools Help

Medical Status

*M1. How many times in your life have you been hospitalized for medical problems ("N" for never)? N

M2. How long ago was your last hospitalization for a physical problem? Years: N Months: N

*M3. Do you have any chronic medical problems which continue to interfere with your life?

0. No 1. Yes (specify) X. Not Answered

*M4. Are you taking any prescribed medication on a regular basis for a physical problem?

0. No 1. Yes X. Not Answered

*M5. Do you receive a pension for a physical disability? (Exclude psychiatric disability)

0. No 1. Yes (specify) X. Not Answered

*M6. How many days have you experienced medical problems in the past 30?

*M7. How troubled or bothered have you been by these medical problems in the past 30 days?

0. Not at all 2. Moderately 4. Extremely
 1. Slightly 3. Considerably X. Not Answered

*M8. How important to you now is treatment for these medical problems?

0. Not at all 2. Moderately 4. Extremely
 1. Slightly 3. Considerably X. Not Answered

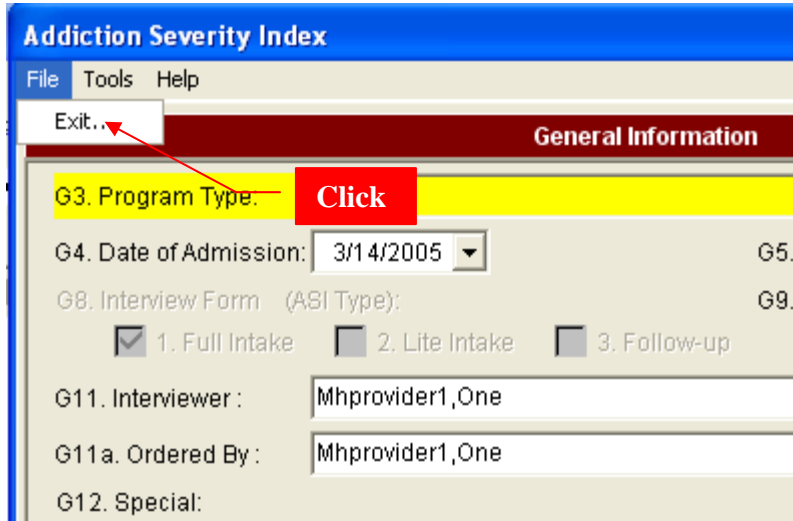
M9. Interviewer: How would you rate the patient's need for medical treatment?

Medical Status Comments: This is an example of medical status comments

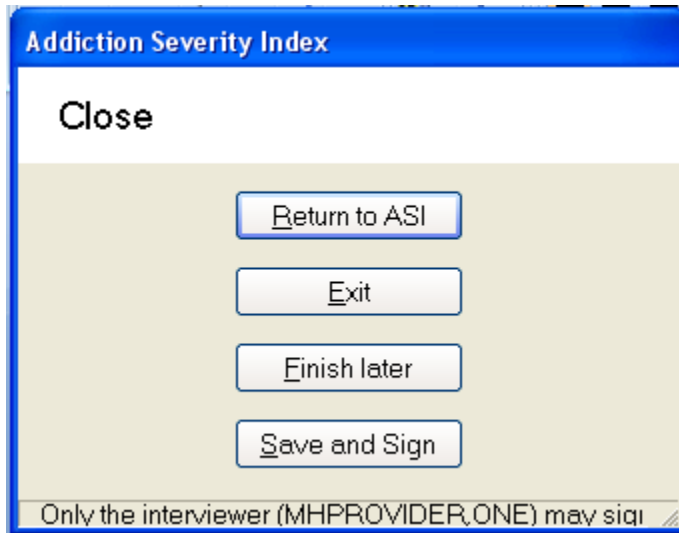
General Info **Medical** Employment Drug/Alcohol Legal Family Hx Social Psychia

Ending an ASI Data-entry Session

Example: To end an ASI session, click on the **File | Exit** menu option on the ASI data-entry form to invoke the **Close ASI** form. The **Close ASI** form is displayed

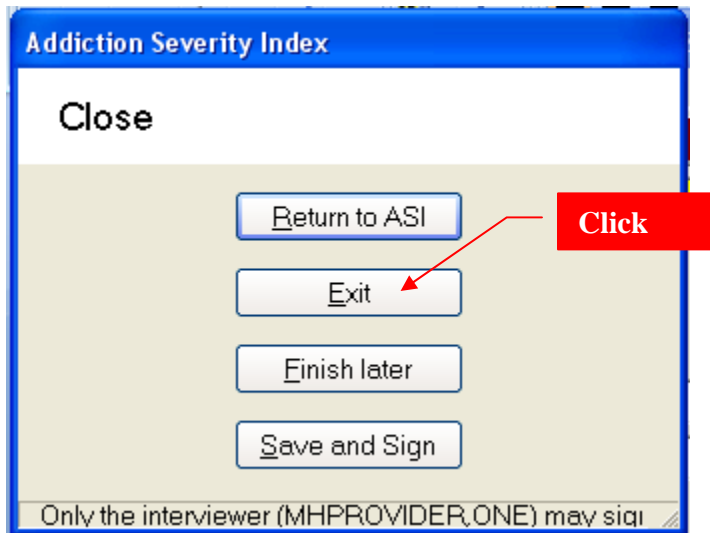


Example: ASI Close form.

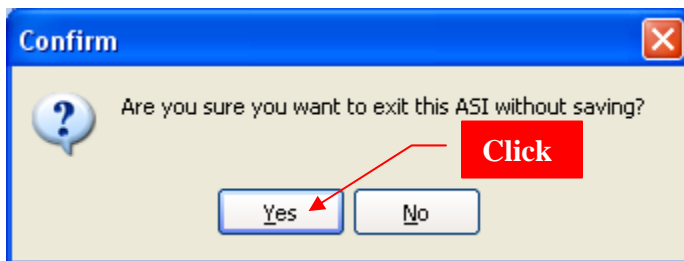


Closing ASI Data-entry Session with “Exit” option.

Example: To exit a session, ignoring all changes made, **click** on **Exit**, then in the next dialog box, select **YES**.

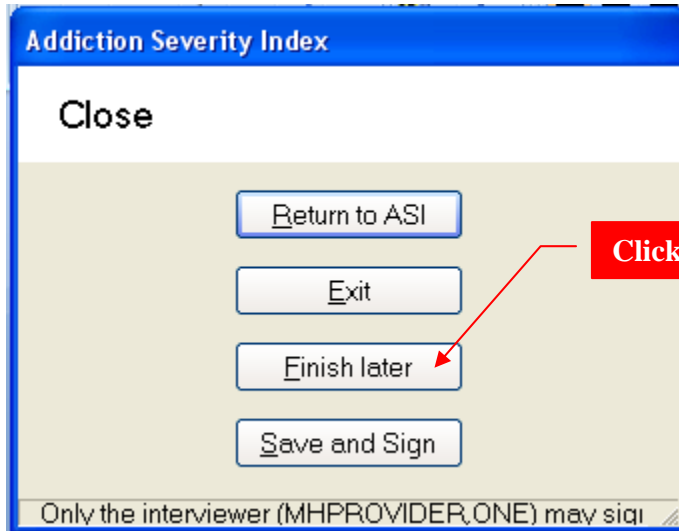


Example: Message box warning that ASI has not been saved.



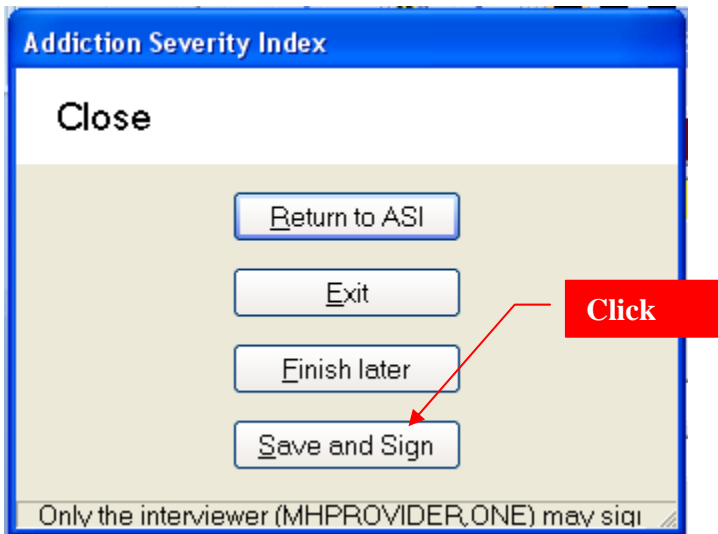
Closing ASI data-entry session with “Finish Later” option

Example: To finish a session “later”, click on **Finish Later** option on the **Close ASI** form. Work in progress is saved and the data-entry form is closed. No messages are displayed. The ASI is listed on the ASI Manager form as an incomplete ASI.

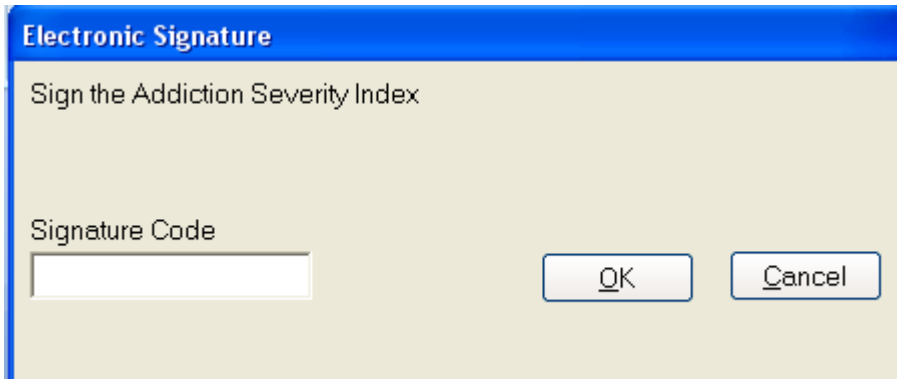


Closing ASI data-entry session with “Save and sign”

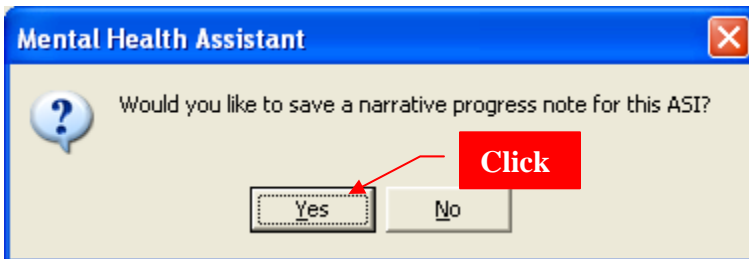
Example: To save and sign an ASI, **click** on **Save and sign** option on the **Close ASI** form.



Example: Electronic signature form contains the option to sign ASI.



Example: Option to save a progress note.



ASI: Business Rules

Business rules check to see whether pairs of responses are logically consistent. The table below lists all of these rules and their actions.

Item #'s	Coding Error	Cross Check Message	Yes/No OK	Cursor movement
G19 and G20	G19>1, and G20=0,00, or N	In the last question (G19), you recorded that the patient has been in a controlled environment in the past 30 days, this question, (G20) how many days, should be greater than 0.	OK	Pop-up after G20 is entered. Cursor doesn't move.
G19 and M1	G19=4, and M1=0, 00, N.	You recorded in the general information section (G19), that the patient had been hospitalized for medical problems in the past 30 days. This hospitalization would usually be coded in this question. Do you want to recode M1?	Yes/No	Pop-up after M1 is entered. If "Yes", the cursor doesn't move. If "No", cursor moves to M3.
G19 and M2	G19=4 and M2 years or months >0, 00, or N.	In the general information section (G19), you recorded that the patient had been hospitalized this month for medical problems. The correct coding in M2 is usually 00 00 in this case. Do you want to recode M2?	Yes/No	After M2 is entered. If "Yes", the cursor doesn't move. If "No", cursor moves to M3.
M6 and M7	M6>0, and M7=0.	In the last question, you recorded that the patient experienced some medical problems in the past 30 days. If this were true, then we would expect that the patient would be at least slightly bothered by these problems. Do you want to recode M7?	Yes/No	After M7 is entered. If "Yes", the cursor doesn't move. If "No", cursor moves to M8.
M6, M7 and M8	M6=0 or 00, and M7 or M8>0.	In question M6, you recorded that the patient experienced no medical problems in the past 30 days, since they report being troubled or wanting treatment (M7 or M8), it is fair to expect that they had some problem days. Go back to M6 and identify the number of days the problem has bothered them.	OK	After M8 is entered. Cursor moves back to M6.
E1a	E1a<4	You are reporting that the patient has had less than 4 years of education, this is rare. Please review this, did you include home schooling, grade school, etc.? Do you want to change E1?	Yes/No	Pop-up after E1b is entered. If "Yes", the cursor moves to E1a. If "No", cursor moves to E2.
E4 and E5	E4=0 and E5=1	If the client does not have a driver's license, E5 is always coded as "No". This is because E5 asks about the car as a way of evaluating ability to travel to and from a job. If the client does not have a license, they cannot "get credit" for having a car! The computer has made this change for you.	OK	Pop-up after E5 is entered. This is a forced change – there is not an option to leave E5=1 if E4=0.
E8 and E9	E8=0 and E9=1	In the last question (E8), you said no one contributes to the client's support, and in this question, you are saying the client gets most of his or her support from someone. Do you want to change your answer in E8?	Yes/No	Pop-up after E9 is entered. If "Yes", the cursor moves to E8. If "No", cursor moves to E10.

Item #'s	Coding Error	Cross Check Message	Yes/No OK	Cursor movement
E11 and E12	E11=0 or 00 and E12>0	In the last question (E11), you recorded that the patient was not paid for working at all in the past month. If this is the case, E12 is generally \$ 0. Do you want to change E11?	Yes/No	Pop-up after E12 is entered. If "Yes", the cursor moves to E11. If "No", cursor moves to E13.
E11 and E12	E11>0 and E12=0, 00, 000, or 0000	In the last question (E11), you recorded that the patient was paid for working this month. If this is the case, E12 is generally not \$ 0, unless the patient has collected no money for their work. Do you want to change E12?	Yes/No	Pop-up after E12 is entered. If "Yes", the cursor doesn't move. If "No", cursor moves to E13.
E15 and M5	E15=0, 00, 000, 0000, or 00000 and M5=1	You recorded earlier (M5), that the patient receives a pension for a medical problem. This income is generally recorded in E15 unless they did not receive any cash this month. Do you want to change E15?	Yes/No	Pop-up after E15 is entered. If "Yes", the cursor doesn't move. If "No", cursor moves to E16.
E19 and E20	E19>0 and E20=0	In E19, you recorded that the patient experienced some employment problems in the past 30 days. If this were true, then we would expect that the patient would be at least slightly bothered by these problems. Do you want to recode E20?	Yes/No	Pop-up after E20 is entered. If "Yes", the cursor doesn't move. If "No", cursor moves to E21.
D1a and D2a	D2a >D1a	You recorded that the patient drank "to intoxication" (D2) more days than total number of days drinking any alcohol at all (D1). Probe and recode D1. Remember D2 is a sub-set of D1.	OK	After D2a is entered. Cursor moves to D1a.
D1b and D2b	D2b > D1b	You recorded that the patient drank "to intoxication" (D2) more years than total number of years drinking any alcohol at all (D1). Probe and recode D1. Remember D2 is a sub-set of D1.	Ok	After D2b is entered. Cursor moves to D1b.
D1-D12 and G20	G20>0 and any item D1a-D12a=30	You recorded in the general information section that the patient had been in a controlled environment in the past month, yet they used either drugs or alcohol every day. Please review this. Do you want to change any information in the drug/alcohol grid?	Yes/No	Pop-up after D12a is entered. If "Yes", the cursor moves to D1a. If "No", cursor moves to D12b.
D14 and D1-D12	D14=3 - 12 or 16 and D1a>15	You report that the patient's problem does not include alcohol, however, the patient used alcohol at least 15 days in the past month. Please review this and consider option "Alcohol and one or more drugs" for question D14. Do you want to change D14?	Yes/No	Pop-up after D14 is entered. If "Yes", the cursor does not move. If "No", cursor moves to D15.
D16 and D1a-D12a	D16=0 or 00 and D1a-D12a>0	You recorded that the patient is "still sober", however, drug or alcohol use in the past 30 days is documented in the drug and alcohol grid. Please review this. Do you want to change D16?	Yes/No	Pop-up after D16 is entered. If "Yes", the cursor does not move. If "No", cursor moves to D17.
D17	D17>5	You recorded more than 5 episodes of DT's for this patient. This is extremely rare, please review the definition of DT's if you are unsure. Do you want to change it?	Yes/No	Pop-up after D17 is entered. If "Yes", the cursor does not move. If "No", cursor moves to D18.

Item #'s	Coding Error	Cross Check Message	Yes/No OK	Cursor movement
D19 and D21	D19=0 or 00 and D21>00	You recorded that the patient never had any treatments for alcohol abuse, so # of detox treatments is not applicable. Do you want to recode (D19), the total number of treatments received?	Yes/No	Pop-up after D21 is entered. If "Yes", the cursor moves to D19. If "No", cursor moves to D23.
D19 and D21	D19>0, and D21>D19	You recorded that the patient had more detox treatments than the total number of treatments received for alcohol abuse. Remember D21 is a sub-set of D19. Do you want to recode D19?	Yes/No	Pop-up after D21 is entered. If "Yes", the cursor moves to D19. If "No", cursor moves to D23.
D20 and D22	D20>0, and D22>D20	You recorded that the patient had more detox treatments than the total number of treatments received for drug abuse. Remember D22 is a sub-set of D20. Do you want to recode D20?	Yes/No	Pop-up after D22 is entered. If "Yes", the cursor moves to D20. If "No", cursor moves to D24.
D20 and D22	D20=0 or 00 and D22>00	You recorded that the patient never had any treatments for drug abuse, so # of detox treatments is not applicable. Do you want to recode (D20), the total number of treatments received?	Yes/No	Pop-up after D22 is entered. If "Yes", the cursor moves to D20. If "No", cursor moves to D24.
D1a and D23	D1a=0 or 00 and D23>0	You recorded no days of drinking in the past 30, but recorded the client has spent money on alcohol. This is unlikely. Please review. Do you want to change D23?	Yes/No	Pop-up after D23 is entered. If "Yes", the cursor does not move. If "No", cursor moves to D20.
D1a, D2a, and D23	D1a+D2a>0 and D23=0, 00, 000, 0000, or 00000	You recorded the client's drinking in the past 30 days (D1 and D2), but no money spent on alcohol. Please review this, do you want to change D23?	Yes/No	Pop-up after D23 is entered. If "Yes", the cursor does not move. If "No", cursor moves to D20.
D3a-D12a, and D24	All items D3a through D12a = 0 or 00 and D24 >0	You recorded zero days of drug use in the past 30, but the patient acknowledges spending money on drugs this month. Please review, and coded those drugs used in the past 30 days. Do you want to change # of days of drug use in the drug grid?	Yes/No	Pop-up after D24 is entered. If "Yes", the cursor moves to D3a. If "No", cursor moves to D25.
D3a-D12a, and D24	Any item D3a-D12a>0 and D24=0, 00, 000, 0000, or 00000.	You recorded days of drug use in the past 30 days, but no money spent on drugs, please review this. Do you want to change D24?	Yes/No	Pop-up after D24 is entered. If "Yes", the cursor does not move. If "No", cursor moves to D25.
D26, D28, and D30	D26>0 and D28 and/or D30=0	In an earlier question (D26), you recorded that the patient had experienced some days with alcohol problems in the past 30 days. If this is true, then we would expect the patient would be at least slightly bothered or slightly in need of treatment for these problems. Do you want to change your code on D28 and/or D30?	Yes/No	Pop-up after D30 is entered. If "Yes", the cursor moves to D28. If "No", cursor moves to D27.

Item #'s	Coding Error	Cross Check Message	Yes/No OK	Cursor movement
D26, D28, and D30	D26=0 or 00 and D28 or D30>0.	In an earlier question (D26), you recorded that the patient had no alcohol problems in the past 30 days. Since they report being troubled or wanting treatment, it is fair to expect that they had some problem days. Go back to D26 and identify the number of days the problem has bothered them.	OK	Pop-up after D30 is entered. Cursor moves to D26.
D27, D29, and D31	D27>0 and D29 and/or D31=0	In an earlier question (D27), you recorded that the patient had experienced some days with drug problems in the past 30 days. If this is true, then we would expect the patient would be at least slightly bothered or slightly in need of treatment for these problems. Do you want to change your code on D2 and/or D31?	Yes/No	Pop-up after D31 is entered. If "Yes", the cursor moves to D29. If "No", cursor moves to D32.
D27, D29, and D31	D27=0 and D29 or D31>0.	In an earlier question (D27), you recorded that the patient had no problems with drugs in the past 30 days. Since they report being troubled or wanting treatment, it is fair to expect that they had some problem days. Go back to D27 and identify the number of days the problem has bothered them.	OK	Pop-up after D31 is entered. Cursor moves to D27.
L3-L16 and L17	L3 through L16 total > L17	You recorded the patient had more convictions than the total number of times they were arrested and charged (L3 to L16). This is unusual. Do you want to change L17?	Yes/No	Pop-up after L17 is entered. If "Yes", the cursor does not move. If "No", cursor moves to L18.
L2 and L3-L16, L18-L20.	L2=1 and all L3-L16 and L18-L20=0 or 00.	In an earlier question (L2), you indicated the patient is on probation or parole. However, no arrests or charges are documented in items L3-L20. Do you want to recode any legal charges?	Yes/No	Pop-up after L20 is entered. If "Yes", the cursor moves to L3. If "No", cursor moves to L21.
L24 and L3-L16, L18-L20	L24=1, and L3-L16 and L18-L20=0 or 00	You recorded the patient is awaiting charges, trial or sentence (L24), but no arrests and/or charges are coded in L3-L16 or L18-L20. Do you want to recode any of the charges?	Yes/No	Pop-up after L24 is entered. If "Yes", the cursor moves to L3. If "No", cursor moves to L25.
L24 and L25	L24=0, and L25>0	You recorded the patient was not awaiting charges, trial or sentence (L24), yet you coded a charge in L25 (which would be not applicable). Do you want to recode L24?	Yes/No	Pop-up after L25 is entered. If "Yes", the cursor moves to L24. If "No", cursor moves to L26.
L26 and G19	G19=2 and L26=0 or 00	In the general information section, you recorded that the patient had been in jail in the past 30 days, this is usually also represented in L26. Do you want to change your code on L26?	Yes/No	Pop-up after L26 is entered. If "Yes", the cursor does not move. If "No", cursor moves to L27.
L27 and E17	E17>0 and L27=00	In the employment section, you recorded that the patient had illegal income in the past 30 days, this is usually also documented in L27. Do you want to change your code on L27?	Yes/No	Pop-up after L27 is entered. If "Yes", the cursor does not move. If "No", cursor moves to L28.

Item #'s	Coding Error	Cross Check Message	Yes/No OK	Cursor movement
F30, F32, and F34	F30>0 and F32 and/or F34=0	In an earlier question (F30), you recorded that the patient had some family conflicts in the past 30 days. If this is true, then we would expect that the patient would be at least slightly bothered or slightly in need of treatment. Do you want to recode F32 or F34?	Yes/No	Pop-up after F34 is entered. If "Yes", the cursor moves to F32. If "No", cursor moves to F31.
F30, F32, and F34	F30=0 or 00 and F32 and/or F34>0.	In an earlier question (F30), you recorded that the patient had no family conflicts in the past 30 days. Since they report being troubled or wanting treatment, it is fair to expect that they had some problem days. Do you want to go back to F30 and identify the number of days the problem has bothered them?	Yes/No	Pop-up after F34 is entered. Cursor moves to F30.
F31, F33, and F35	F31>0 and F33 and/or F35=0	In an earlier question (F31), you recorded that the patient had some conflicts with others in the past 30 days. If this is true, then we would expect that the patient would be at least slightly bothered or slightly in need of treatment for this recent problem. Do you want to recode F33 or F35?	Yes/No	Pop-up after F35 is entered. If "Yes", the cursor moves to F33. If "No", cursor moves to F36.
F31, F33, and F35	F31=0 and F33 or F35>0.	In an earlier question (F31), you recorded that the patient had no conflicts with others in the past 30 days. Since they report being troubled or wanting treatment, it is fair to expect that they had some problem days. Do you want to go back to F31 and identify the number of days the problem has bothered them?	Yes/No	Pop-up after F35 is entered. Cursor moves to F31.
P1, P2 and P10a/b	P1 + P2=0 or 00 and P10 a or b (past 30 days or lifetime)=1	You recorded that the patient has not had inpatient or outpatient treatment for psychiatric problems (P1 and P2), yet they have attempted suicide. Please review treatment they may have received for the suicide attempt. Do you want to recode P1 or P2?	Yes/No	Pop-up after P10a and b are entered. If "Yes", the cursor moves to P1. If "No", cursor moves to P11a.
P1, P2 and P11a/b	P1 + P2=0 or 00 and P11 a or b (past 30 days or lifetime)=1	You recorded that the patient has not had inpatient or outpatient treatment for psychiatric problems (P1 and P2), yet they have been prescribed medications for psychiatric problems. Please review treatment they may have received. Do you want to recode P1 or P2?	Yes/No	Pop-up after P11a and b are entered. If "Yes", the cursor moves to P1. If "No", cursor moves to P12.
P3 and E15	E15=0, 00, 000, 0000, or 0000 and P3=1	You recorded that the patient receives a pension for a psychiatric problem (P3). Unless they did not receive any cash this month, this income is generally recorded in the employment question about pension money received (E15). Go back and change E15 in the Employment section.	OK	Pop-up after P3 is entered. Cursor doesn't move.
P4a-P10a and P12	P4a through P10a=0 or 00, and P12>0	You report that the patient has had problems in the past 30 days, but none are recorded in the psychiatric symptom list P4 through P10. Please review P4 through P10, do you want to go back and change the code of any of the symptoms?	Yes/No	Pop-up after P12 is entered. If "Yes", the cursor moves to P4. If "No", cursor moves to P13.

Item #'s	Coding Error	Cross Check Message	Yes/No OK	Cursor movement
P4a-P10a and P12	P4a through P10a>0 and P12=0	You report that the patient has had no problems in the past 30 days, but problems are evident from the psychiatric symptom list P4 through P10, please probe about the number of days these symptoms bothered the client and recode P12.	OK	Pop-up after P12 is entered. Cursor does not move.
P9a and P10a	P9a and/or P10a=1	You report that the client has said they have either suicidal ideation or have attempted suicide in the past 30 days. Probe further for a plan for the suicide and/or dates of the suicide attempt. Notify your supervisor of these responses.	OK	After P10a is entered. Cursor moves to P10b.
P12, P13, and P14	P12>0 and P13 and/or P14=0.	You report that the patient had psychiatric problems in the past 30 days, (P12). Given these problems, we would expect that the patient would be at least slightly bothered or slightly in need of treatment for this recent problem, please recode P13 and/or P14.	OK	After P14 is entered. Cursor moves to P12.
P12, P13, and P14	P12=0 or 00 and P13 or P14>0.	You report that the patient had no psychiatric problems in the past 30 days (P12). If they report being troubled or wanting treatment, it is fair to expect that they had some problem days. Go back to P12 and identify the number of days the symptoms have bothered the client.	OK	After P14 is entered. Cursor moves to P12.

ASI : Changing User Preferences

User preferences can be changed in the **Tools | Options...** menu.

Example: Some system parameters are user-configurable and can be changed by clicking on the **Tools | Options...** menu item.

The screenshot shows the 'Addiction Severity Index' application window. The 'Tools' menu is open, and the 'Options...' option is selected. A red arrow points from the 'Options...' menu item to a red box with the word 'Click' written inside it. The main window displays several questions (M1-M8) with radio button options. Question M9 is highlighted in yellow. At the bottom, there is a 'Medical Status Comments' text area and a tabbed interface with tabs for 'General Info', 'Medical', 'Employment', 'Drug/Alcohol', 'Legal', 'Family Hx', 'Social', and 'Psychia'.

Default Form Size/Position

When the **Default Form Size/Position option** is checked, this function is used. If it is **not** checked, the Default Form Size/Position that was true when the MHA session was closed the last time is used. The status of the **Default Form Size/Position option** (i.e., checked or not checked) is saved from one MHA session to another, so the Default Form Size/Position settings or the user-preferred settings can always be used. The first time a MHA session is started, the **Default Form Size/Position option** is checked and the default settings are used.

From the Mental Health Assistant window, **click on Tools**, and **click on Default Form Size/Position**. The check-mark symbol displayed beside the **Default Form Size/Position option** toggles on and off and the window size will adjust accordingly.

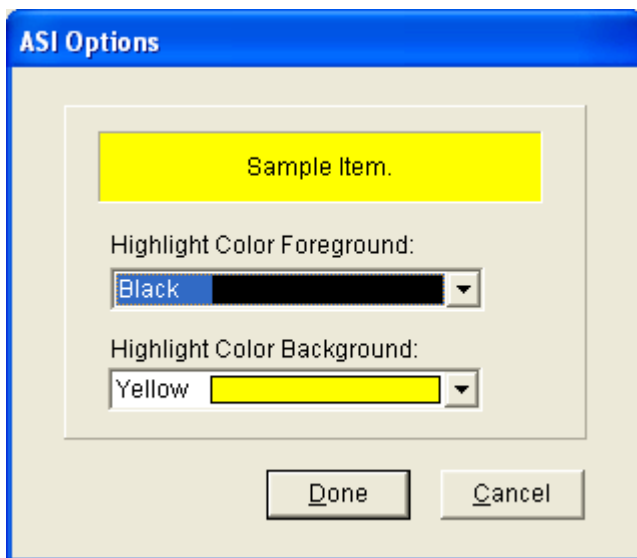
Speed Tab

The Speed Tab is provided to make data entry faster. ASI Items that require a simple click (or single keystroke) will move to the next item without the user pressing the **Tab** or **Enter** keys. This is particularly helpful on the Social and Psychiatric sections of the ASI.

Highlight Color

The colors depicting the highlighted items on the ASI form can be modified by the user. The default colors are black lettering on a yellow background. To change the foreground or background, use the combo box to select the desired colors. If the user selects the same color for both foreground and background, the item would not be visible and an error message would appear. No checks are conducted for tasteless color choices.

Example: Highlight color-selection form.

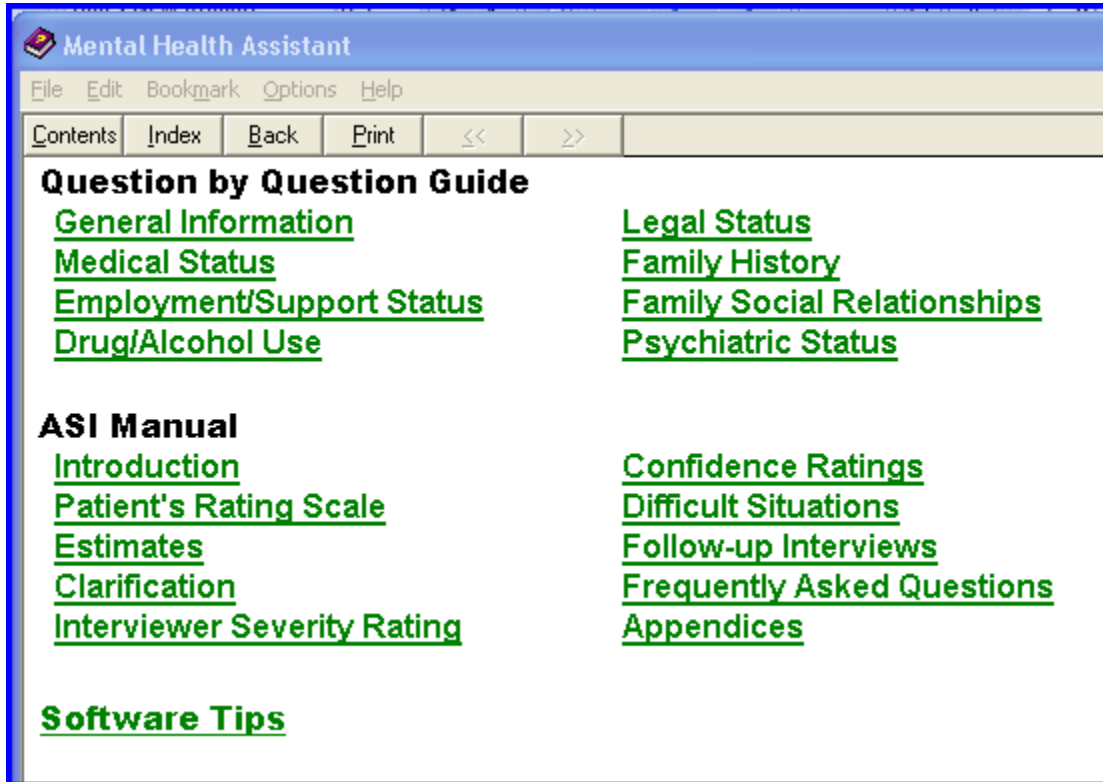


ASI: Help Menu Options

Opening the ASI Help File

Click on **Help | Contents...** on the help menu, to access the ASI Help file, from the ASI Data Entry Form. The help file for the clinician is opened. This is from the University of Pennsylvania/Veterans Administration Center for Studies of Addiction (1977).

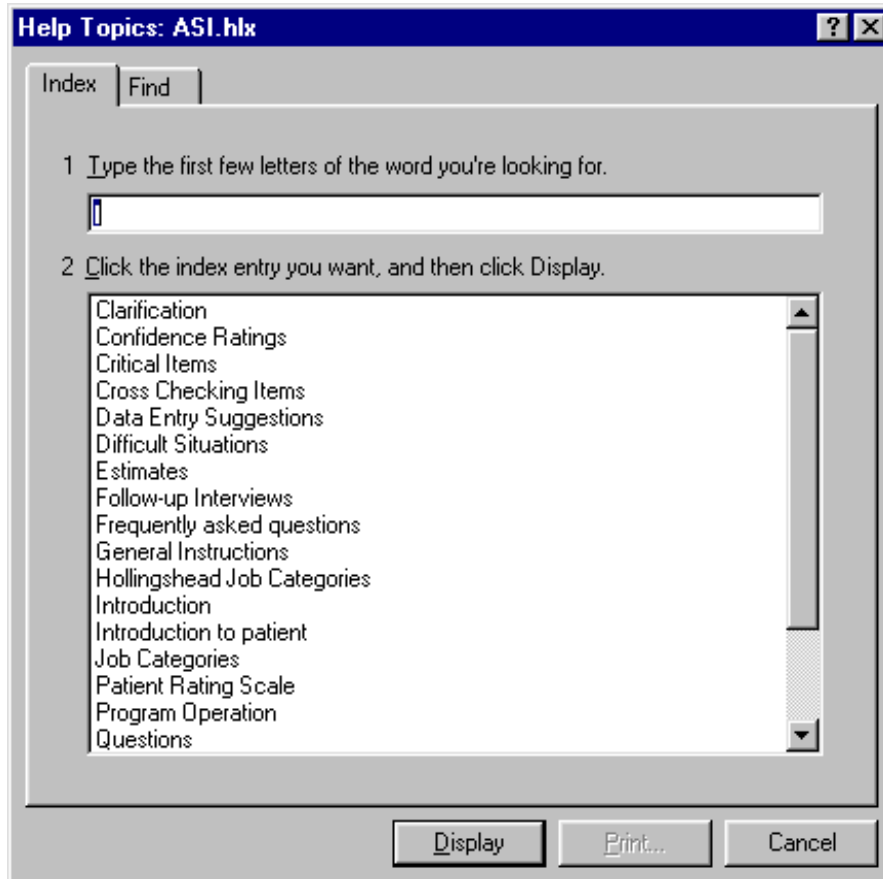
Example: ASI help file.



Using the Help Index

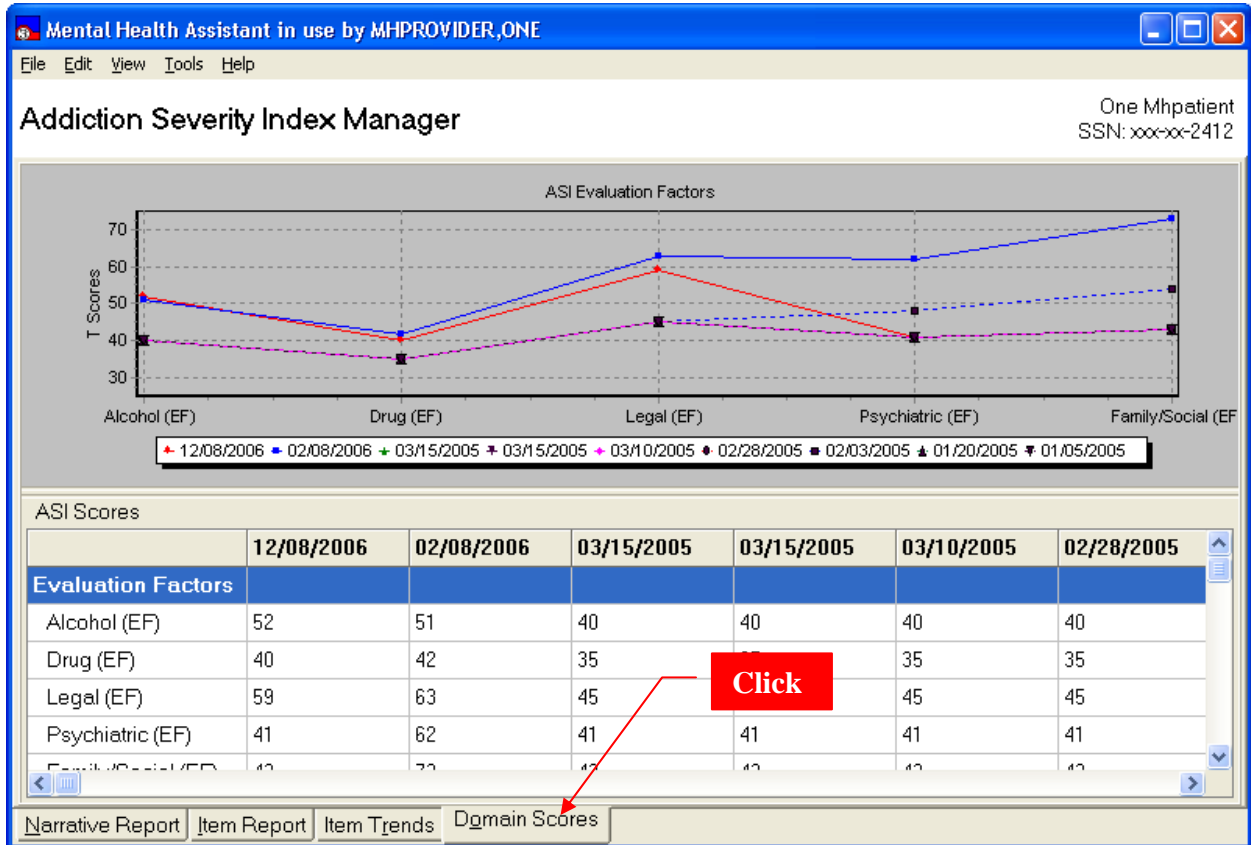
From the ASI Data Entry form, **click** on **Help Index** from the help menu to access the Help Index. The help file will be opened. This file has information concerning the operation of the program.

Example: ASI Help Index.



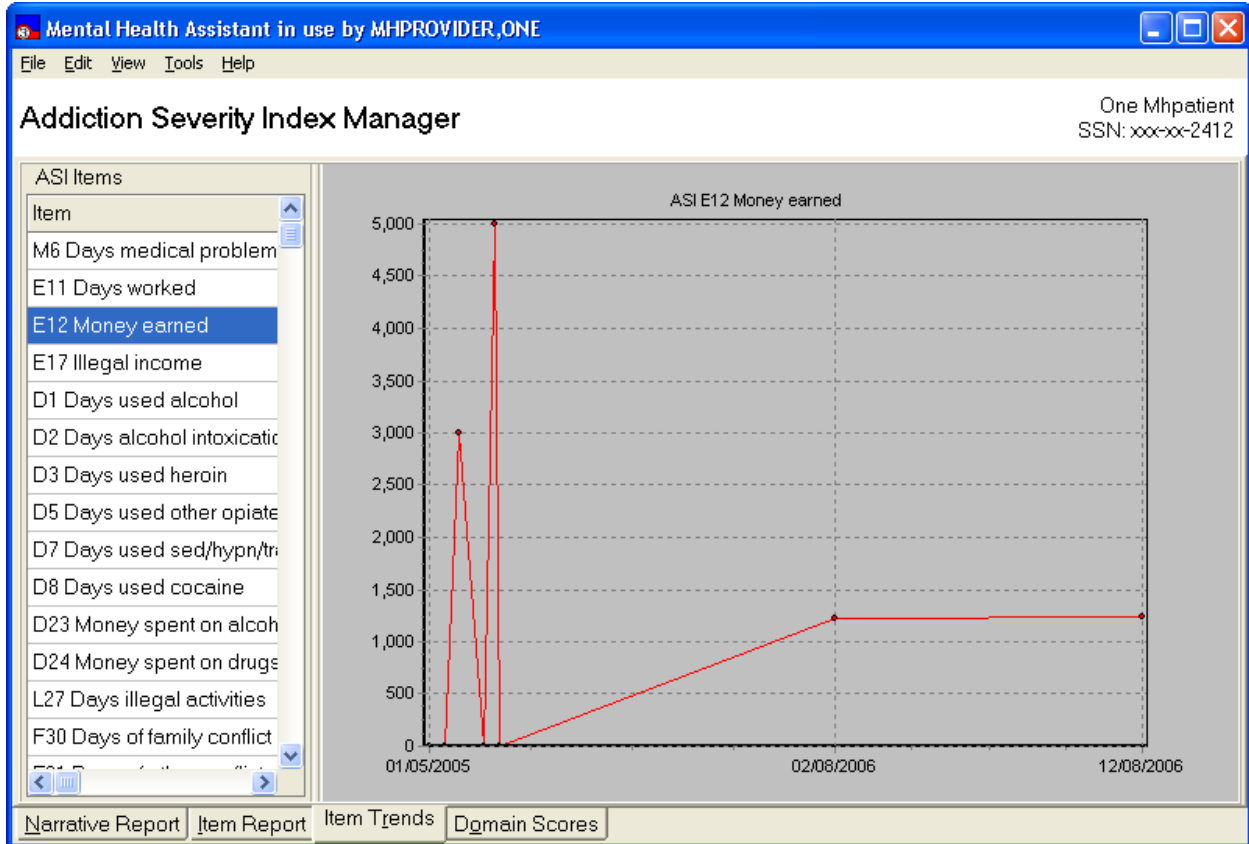
Domain Scores

Example: To view the Domain Scores, **click on Domain Scores** tab. The ASI domain results will be displayed in graph and text form.



Item Trends

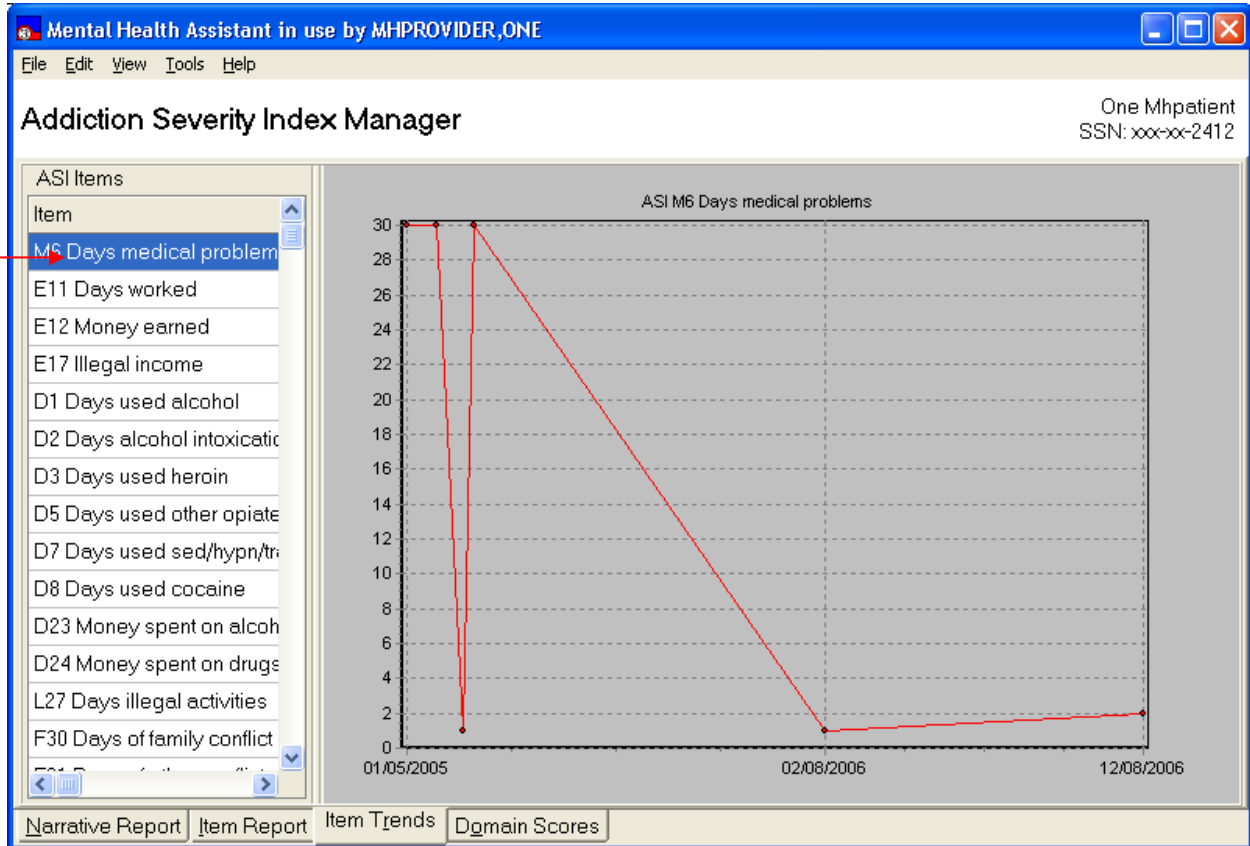
To view the Items Trend, click on **Item Trends** tab. Item-level data will be presented in tabular and graphical form across interviews.



Graphing a Different Item

To graph a different item, click on different row in table of item data. The new row will be highlighted and the data for that item will be graphed.

Example: The item was changed from E12 (previous example) to M6 by clicking on the M6 row. M6 data are graphed.



Returning to the Narrative Report View

Example: To return to the Narrative Report View, Click on the **Narrative Report** tab. The original view of the ASI tab is restored.

Mental Health Assistant in use by MHPROVIDER,ONE

File Edit View Tools Help

Addiction Severity Index Manager Mhpatient_One SSN: xxxxx-4444

Previous ASI

Date	Type	Ordered By	Status	Signed
4/22/2011	FULL	MHPROVIDER,ONE	Incomplete	False
4/21/2011	FULL	MHPROVIDER,ONE	Incomplete	False
2/18/2011	LITE	FINKELSTEIN,ALLAN	Pt Refused	True
4/22/2010	FULL	MHPROVIDER,ONE	Unable to respond	False

10 days since last ASI

MHPATIENT,ONE 666-11-4444 ASI FULL on 04/22/2011 by: MHPROVIDER,ONE
 ***** Unsigned Draft *****
 *** PSYCHOSOCIAL HISTORY ***

GENERAL INFORMATION

Mr. Mhpatient is a 33 year old Hispanic-Other,f1 question not answered male ACTIVE DUTY. He lists his religious preference as Other. He was admitted to the Detoxification Services program on Apr 22, 2011. In the past 30 days, he has . G19 QUESTION NOT APPLICABLE He has lived at his current address for 9 years, 9 months.

This report is based on a full ASI interview conducted in person on Apr 22, 2011 by One Mhprovider, Clinical Psychologist. Mr. Mhpatient completed the interview.

	Severity Rating	Score
MEDICAL	X	
EMPLOYMENT	X	
ALCOHOL	3	0.4260
DRUG	3	0.1333
LEGAL	1	0.3067
FAMILY	X	----
PSYCHIATRIC	X	----

Narrative Report Item Report Item Trends Domain Scores

GAF Manager Functions

Orientation

The GAF Manager gives the user an easy way to enter GAF ratings and to see previous ratings, which are graphed to indicate trends. When entering a new rating, the rating is associated with the GAF rating criteria. It is hoped this association will increase the reliability of ratings and reduce inter-rater variability in the assignment of GAF ratings.

Mental Health Assistant in use by MHPROVIDER, ONE

File Edit View Action Tools Help

Global Assessment of Functioning Manager Mhpatient_One SSN: xxxxx-4444

Date	GAF	Clinician
04/14/2011	50	MHPROVIDER, ONE
04/13/2011	10	MHPROVIDER, ONE
02/13/2011	40	MHPROVIDER, ONE

Mark Rating "Entered in Error"

Graph

GAF Score

02/13/2011 04/13/2011

Previous GAFs List

Range	Criteria
1-10	Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain minimal personal hygiene OR serious suicidal act with clear expectation of death.
11-20	Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death; frequently violent) OR occasionally fails to maintain minimal personal hygiene (e.g., smears feces) OR grossly impaired judgment (e.g., largely incoherent or mute).
21-30	Behavior is considerably influenced by delusions or hallucinations OR serious impairment of judgment (e.g., sometime incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (e.g., stays in bed all day; no job, home or friends).
31-40	Some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home and is failing at school).
41-50	Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) OR any serious impairment in social, occupational, or school functioning (e.g., no friends, unable to keep a job).
51-60	Moderate symptoms (e.g., flat affect and circumstantial speech, occasional panic attacks) OR moderate difficulty in social, occupational, or school functioning (e.g., few friends, conflicts with peers or co-workers).
61-70	Some mild symptoms (e.g., depressed mood and mild insomnia) OR some difficulty in social, occupational or school functioning (e.g., occasional truancy, or theft within the household), but generally functioning pretty well, has some meaningful interpersonal relationships.
71-80	If symptoms are present, they are transient and expectable reactions to psychosocial stressors (e.g., difficulty concentrating after family argument); no more than slight impairment in social, occupational, or school functioning (e.g., temporarily falling behind in schoolwork).
81-90	Absent or minimal symptoms (e.g., mild anxiety before an exam), good or excellent performance in a wide range of activities, socially effective, generally satisfied with life, no more than everyday problems or concerns (e.g., an occasional argument with family members).
91-100	Superior functioning in a wide range of activities, life's problems never seem to get out of hand, is sought out by others because of his or her many positive qualities. No symptoms.

GAF Criteria Table (score ranges and associated criteria)

GAF entry area

New GAF rating: 1 Evaluation Date: 5/ 2/2011 Save New Rating

Main Menu

The Main Menu offers user functions in the context of the GAF Manager form, such as tools and help.

Selected Patient Identification label

The Selected Patient Identification label displays information about who is the currently-selected patient within MHA. All functions performed in the GAF Manager form will apply to this patient.

Title Bar

The Title Bar is a visual artifact that is used throughout MHA to display information about the context that applies to the current activity. In this case, the Title Bar displays the form's name.

List of Previous GAF Ratings

This is the list of all GAF ratings given to the selected patient. The list is also used for selecting which GAF record to process.

Graph View

The Graph View displays a graphical representation of rating data values over time.

GAF Criteria Table

The GAF Criteria Table is a reference tool for clinicians to enable them to review the different criteria narratives and their associated rating ranges.

GAF Editing Button

The GAF Editing Button is used to edit a saved GAF rating that is still editable or to mark a saved GAF rating as "Entered in error".

New Rating Artifacts

The New Rating Artifacts are a group of controls that are adjusted to save a new GAF rating.

Selecting a Previous Rating

Example: To select a previous rating for processing, click on the row of the desired rating on the table that lists all previous ratings. That row will be highlighted.

Mental Health Assistant in use by MHPROVIDER,ONE

File Edit View Action Tools Help

Global Assessment of Functioning Manager One Mhpatient
SSN: xxx-xx-2412

Date	GAF	Clinician
02/03/2005	54	MHPROVIDER,NEW
02/01/2005	28	MHPROVIDER,NEW
01/21/2005	37	MHPROVIDER,NEW

Mark Rating "Entered in Error"

Click

GAF Score

100
80
60
40
20
0

01/21/2003 01/03/2005 07/19/2006 12/12/2008

GAF Criteria

Range	Criteria
1-10	Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain minimal personal hygiene OR serious suicidal act with clear expectation of death.
11-20	Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death; frequently violent; OR occasionally fails to maintain minimal personal hygiene (e.g., smears feces) OR gross impairment in communication (e.g., largely incoherent or mute).
21-30	Behavior is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment (e.g., sometime incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (e.g., stays in bed all day; no job, home or friends).
31-40	Some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home and is failing at school).

New GAF rating: Evaluation Date:

Entering a Rating Using GAF Criteria (Save a new rating)

The GAF Criteria table displays all GAF criteria. When the user starts the GAF Manager for the first time after selecting a new patient, the first row of GAF criteria is selected; a rating of 1 is in the **New GAF Rating** spin edit control, the **Evaluation Date** date-picker is set to today's date, and the **Save Rating** button disabled. The previous ratings view (above-left) includes a tabular and graphical representation of all previous GAF ratings as well as the rating criteria for the specified new GAF rating.

To save a new rating:

1. Click on one of the Criteria ranges and fine-tune the rating by adjusting the **New GAF Rating** spin-edit.
2. Select a different Evaluation Date, or leave the default date set.
3. Click on the **File | Save New Rating** menu item or the **Save New Rating** button.
4. The rating displayed in the spin edit control will be saved to VistA. The rating will be assigned the date displayed in the Evaluation Date date-picker, and the session user will be the rater. Soon after the new rating is saved, the new rating is displayed in the table and graph on the GAF Manager form.
5. The **Save New Rating** button and menu item will be disabled.

Example: A rating of 25 is entered for a date of 5/3/2011.

4. Save the new rating

1. Select a rating range

2. Fine-tune the rating

3. Adjust the date, if necessary

Mental Health Assistant in use by MHPROVIDER,ONE

File Edit View Action Tools Help

Select Patient...
 Save new Rating
 Save As...
 Print...
 Exit

Assessment of Functioning Manager

Mhpatient_One
 SSN: xxx-xx-4444

Date	Rating	Clinician
04/14/2011	50	MHPROVIDER,ONE
04/13/2011	10	MHPROVIDER,ONE
02/13/2011	40	MHPROVIDER,ONE

Mark Rating "Entered in Error"

GAF Score

100
80
60
40
20

04/13/2011

GAF Criteria

Range	Criteria
1-10	Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain minimal personal hygiene OR serious suicidal act with clear expectation of death.
11-20	Some danger of hurting self or others (e.g., suicidal ideation with communication of death; frequently violent) OR occasionally fails to maintain minimal personal hygiene (e.g., largely incoherent or mute).
21-30	Behavior is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment (e.g., sometime incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (e.g., stays in bed all day; no job, home or friends).
31-40	Some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home and is failing at school).
41-50	Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) OR any serious impairment in social, occupational, or school functioning (e.g., no friends, unable to keep a job).
51-60	Moderate symptoms (e.g., flat affect and circumstantial speech, occasional panic attacks) OR moderate difficulty in social, occupational, or school functioning (e.g., few friends, conflicts with peers or co-workers).
61-70	Some mild symptoms (e.g., depressed mood and mild insomnia) OR some difficulty in social, occupational or school functioning (e.g., occasional truancy, or theft within the household), but generally functioning pretty well, has some meaningful interpersonal relationships.
71-80	If symptoms are present, they are transient and expectable reactions to psychosocial stressors (e.g., difficulty concentrating after family argument); no more than slight impairment in social, occupational, or school functioning (e.g., temporarily falling behind in schoolwork).
81-90	Absent or minimal symptoms (e.g., mild anxiety before an exam), good functioning in all areas, interested and involved in a wide range of activities, socially effective, generally satisfied with life, no more than everyday problems or concerns (e.g., an occasional argument with family members).
91-100	Superior functioning in a wide range of activities, life's problems never seem to get out of hand, is sought out by others because of his or her many positive qualities. No symptoms.

New GAF rating: 25 Evaluation Date: 5/ 3/2011 Save New Rating

Entering a Rating Using the Spin Edit Control

To enter or change a rating:

1. Change the rating by typing a number between 1-100 in the spin edit control or by clicking on the up or down arrows.
2. Alpha characters or numbers outside the 1-100 range are not accepted.
3. The **Save Rating** button is enabled.

Example: Changing the rating to 25 displays the appropriate criteria row in the Criteria view and enables the **Save New Rating** button.

Mental Health Assistant in use by MHPROVIDER,ONE

File Edit View Action Tools Help

Global Assessment of Functioning Manager Mhpatient_One SSN: xxx-xx-4444

Date	GAF	Clinician
04/14/2011	50	MHPROVIDER,ONE
04/13/2011	10	MHPROVIDER,ONE
02/13/2011	40	MHPROVIDER,ONE

Mark Rating "Entered in Error"

GAF Score

02/13/2011 04/13/2011

GAF Criteria

Range	Criteria
1-10	Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain minimal personal hygiene OR serious suicidal act with clear expectation of death.
11-20	Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death; frequently violent; OR occasionally fails to maintain minimal personal hygiene (e.g., smears feces) OR gross impairment in communication (e.g., largely incoherent or mute).
21-30	Behavior is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment (e.g., sometime incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (e.g., stays in bed all day; no job, home or friends).
31-40	Some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home and is failing at school).
41-50	Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) OR any serious impairment in social, occupational, or school functioning (e.g., no friends, unable to keep a job).
51-60	Moderate symptoms (e.g., flat affect and circumstantial speech, occasional panic attacks) OR moderate difficulty in social, occupational, or school functioning (e.g., few friends, conflicts with peers or co-workers).
61-70	Some mild symptoms (e.g., depressed mood and mild insomnia) OR some difficulty in social, occupational or school functioning (e.g., occasional truancy, or theft within the household), but generally functioning pretty well, has some meaningful interpersonal relationships.
71-80	If symptoms are present, they are transient and expectable (e.g., difficulty concentrating after family argument); no more than slight impairment in social, occupational, or school functioning (e.g., temporarily falling behind in schoolwork).
81-90	Absent or minimal symptoms (e.g., mild anxiety before an exam), good functioning in all areas, interested and involved in a wide range of activities, socially effective, generally satisfied with life, no more than everyday problems or concerns (e.g., an occasional argument with family members).
91-100	Superior functioning in a wide range of activities, life's problems never seem to get out of hand, is sought out by others because of his or her many positive qualities. No symptoms.

New GAF rating: Evaluation Date:

Fine-tune the rating

Changing the Evaluation Date

To change an evaluation date:

1. Click on the down arrow of the Evaluation Date date-picker
2. Clicking on the down arrow produces a calendar artifact.
3. Clicking on a previous date inserts the new date into the date-picker text box.
4. Future dates cannot be selected.
5. Select a new date

Example: Clicking on the down arrow produces a calendar with the current evaluation date selected (today's date is the default). Click on the left arrow at the top of the calendar to go to a previous month. Click on today's date or an earlier date to select it as shown in the following example.

Mental Health Assistant in use by MHPROVIDER, ONE

File Edit View Action Tools Help

Global Assessment of Functioning Manager Mhpatient, One SSN: xxx-xx-4444

Date	GAF	Clinician
04/14/2011	50	MHPROVIDER, ONE
04/13/2011	10	MHPROVIDER, ONE
02/13/2011	40	MHPROVIDER, ONE

Mark Rating "Entered in Error"

GAF Score

02/13/2011 04/13/2011

GAF Criteria

Range	Criteria
1-10	Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain minimal personal hygiene OR serious suicidal act with clear expectation of death.
11-20	Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death; frequently violent; OR occasionally fails to maintain minimal personal hygiene (e.g., smears feces) OR gross impairment in communication (e.g., largely incoherent or mute).
21-30	Behavior is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment (e.g., sometime incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (e.g., stays in bed all day; no job, home or friends).
31-40	Some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home and is failing at school).
41-50	Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) OR any serious impairment in social, occupational, or school functioning (e.g., no friends, unable to keep a job).
51-60	Moderate symptoms (e.g., flat affect and circumstantial speech, occasional panic attacks) OR moderate difficulty in social, occupational, or school functioning (e.g., few friends, conflicts with peers or co-workers).
61-70	Some mild symptoms (e.g., depressed mood and mild insomnia) OR some difficulty in social, occupational or school functioning (e.g., occasional truancy, or theft within the household), but generally functioning pretty well, has some meaningful interpersonal relationships.
71-80	If symptoms are present, they are transient and do not significantly interfere with social, occupational, or school functioning (e.g., difficulty concentrating after family argument); temporarily falling behind in schoolwork.
81-90	Absent or minimal symptoms (e.g., mild depression); functioning in all areas, interested and involved in a wide range of activities, socially acceptable, and no more than everyday problems or concerns (e.g., an occasional argument with family).
91-100	Superior functioning in a wide range of activities; life is well regulated by the individual; no signs or symptoms of illness; because of his or her many positive qualities, the individual is sought out by others.

May, 2011

Sun	Mon	Tue	Wed	Thu	Fri	Sat
24	25	26	27	28	29	30
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	1	2	3	4

Today: 5/3/2011

New GAF rating: 25 Evaluation Date: 5/ 3/2011 Save New Rating

Adjust the date, as necessary

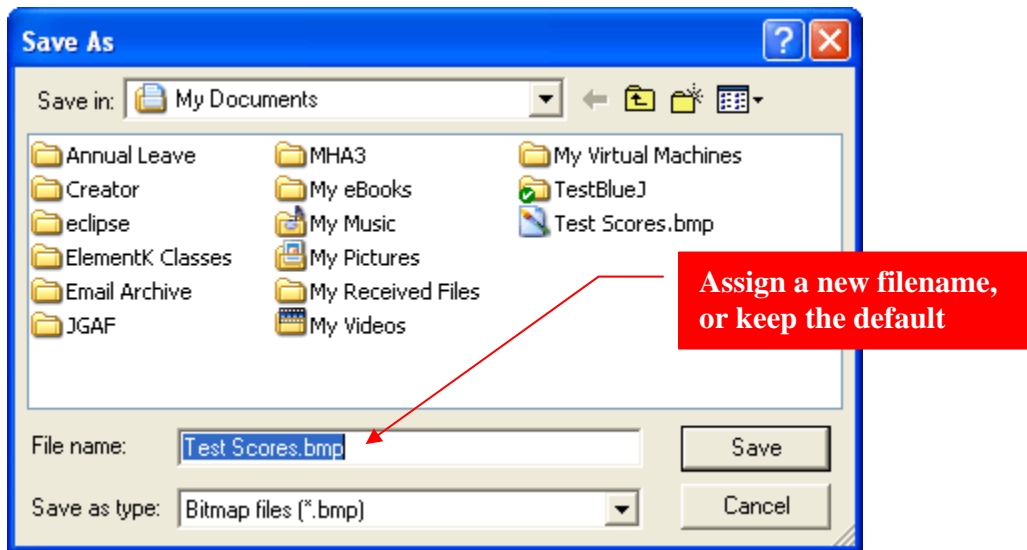
Saving a Graph or a Table to a File

Example: To save data to a file, click on **File | Save As** menu item and save one graph and one table. A message dialog appears that allows the user to enter a filename and storage location for the table or graph file to be saved. A graph is saved as a bitmap and a table is saved as an Excel file.

The screenshot shows the 'Mental Health Assistant' window for 'MHPROVIDER, ONE'. The 'File' menu is open, and the 'Save As...' option is selected, showing a sub-menu with 'Graph' and 'Table' options. A red arrow points to the 'Table' option, and a red box with the word 'Click' is positioned next to it. The main window displays a 'GAF Score' graph for 'Mhpatient, One' (SSN: xxx-xx-4444) with data points for 02/13/2011 (score 40) and 04/13/2011 (score 50). Below the graph is a table of GAF Criteria and a 'New GAF rating' input field set to 25, with an 'Evaluation Date' of 5/ 3/2011 and a 'Save New Rating' button.

Range	Criteria
1-10	Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain minimal personal hygiene OR serious suicidal act with clear expectation of death.
11-20	Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death; frequently violent; OR occasionally fails to maintain minimal personal hygiene (e.g., smears feces) OR gross impairment in communication (e.g., largely incoherent or mute).
21-30	Behavior is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment (e.g., sometime incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (e.g., stays in bed all day, no job, home or friends).
31-40	Some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home and is failing at school).
41-50	Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) OR any serious impairment in social, occupational, or school functioning (e.g., no friends, unable to keep a job).
51-60	Moderate symptoms (e.g., flat affect and circumstantial speech, occasional panic attacks) OR moderate difficulty in

Example: Save As form



Printing a Graph or a Table

Example: To print a GAF graph or table, click on **File | Print** menu item and print one graph and one table. A copy of the table or the graph is sent directly to the default printer.

The screenshot shows the 'Mental Health Assistant in use by MHPROVIDER, ONE' window. The 'File' menu is open, and the 'Print...' option is selected, which has opened a sub-menu with 'Graph' and 'Table' options. A red arrow points to the 'Table' option, and a red box with the word 'Click' is next to it. The main window displays a 'GAF Score' graph and a table of ratings.

Date	Rating	Provider
04/14/2011	50	MHPROVIDER, ONE
04/13/2011	10	MHPROVIDER, ONE
02/13/2011	40	MHPROVIDER, ONE

Mark Rating "Entered in Error"

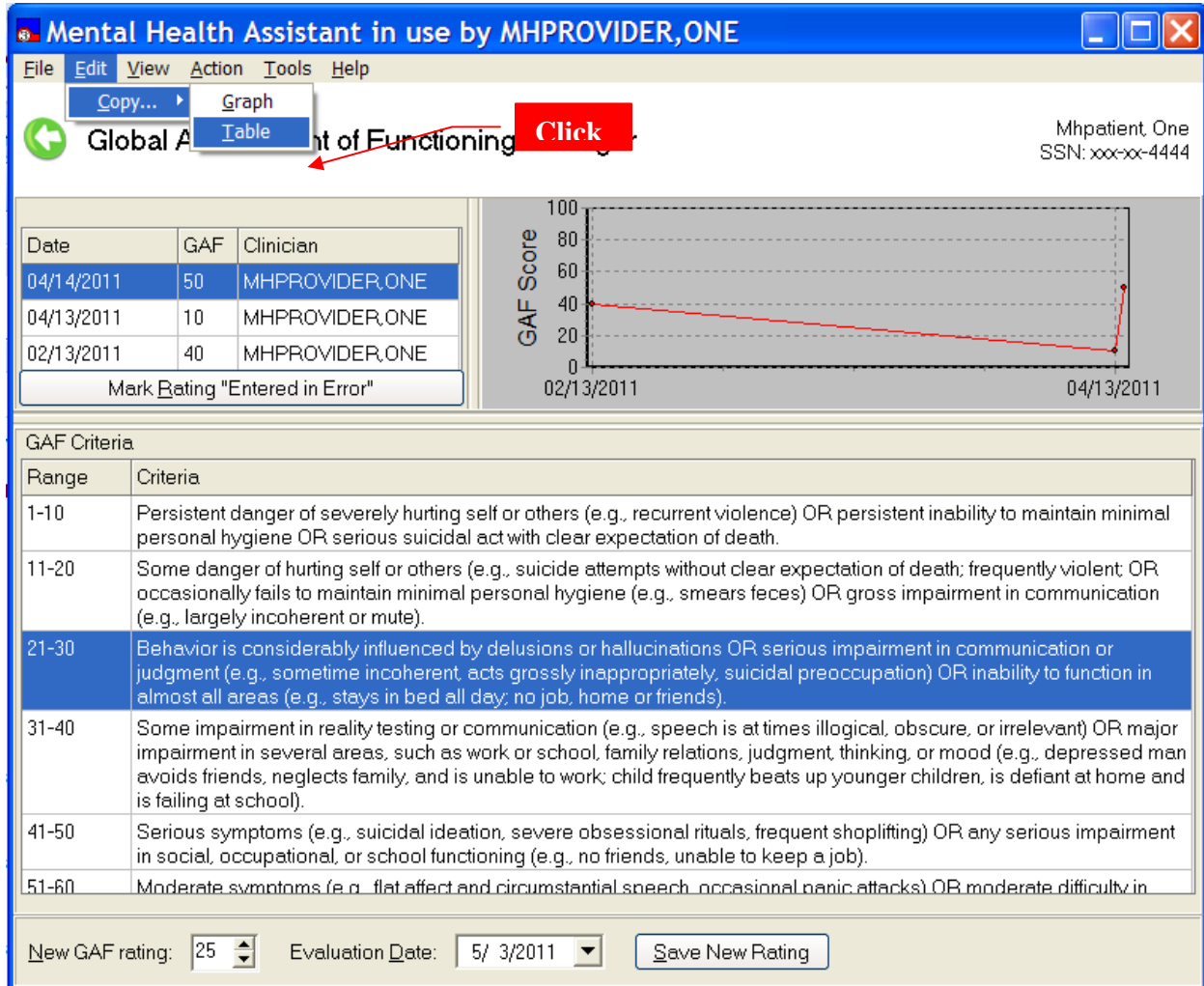
GAF Criteria

Range	Criteria
1-10	Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain minimal personal hygiene OR serious suicidal act with clear expectation of death.
11-20	Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death; frequently violent; OR occasionally fails to maintain minimal personal hygiene (e.g., smears feces) OR gross impairment in communication (e.g., largely incoherent or mute).
21-30	Behavior is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment (e.g., sometime incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (e.g., stays in bed all day; no job, home or friends).
31-40	Some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home and is failing at school).
41-50	Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) OR any serious impairment in social, occupational, or school functioning (e.g., no friends, unable to keep a job).
51-60	Moderate symptoms (e.g., flat affect and circumstantial speech, occasional panic attacks) OR moderate difficulty in

New GAF rating: Evaluation Date:

Copying a Graph or a Table to the Windows Clipboard

Example: To copy data to the clipboard, click on **Edit | Copy** menu item and copy to clipboard one graph and one table. A copy of the table or the graph is sent to the Clipboard. The contents of the Clipboard can be pasted onto an MS Word or Excel document.



The screenshot shows the 'Mental Health Assistant' window for 'MHPROVIDER, ONE'. The 'Edit' menu is open, and the 'Copy...' option is selected, which has opened a sub-menu with 'Graph' and 'Table' options. A red arrow points to the 'Table' option with the word 'Click' in a red box. The main window displays a table of GAF scores, a line graph of GAF scores over time, and a GAF Criteria table. At the bottom, there is a 'New GAF rating' field set to 25 and an 'Evaluation Date' dropdown set to 5/ 3/2011.

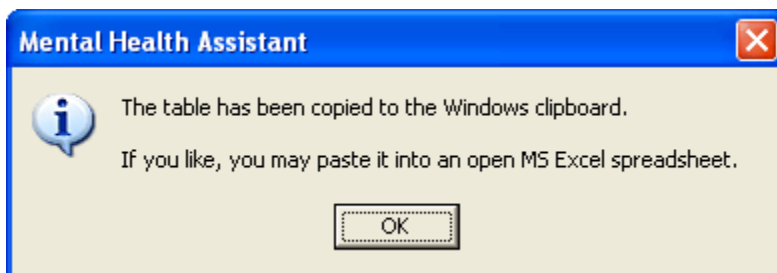
Date	GAF	Clinician
04/14/2011	50	MHPROVIDER, ONE
04/13/2011	10	MHPROVIDER, ONE
02/13/2011	40	MHPROVIDER, ONE

Mark Rating "Entered in Error"

Range	Criteria
1-10	Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain minimal personal hygiene OR serious suicidal act with clear expectation of death.
11-20	Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death; frequently violent; OR occasionally fails to maintain minimal personal hygiene (e.g., smears feces) OR gross impairment in communication (e.g., largely incoherent or mute).
21-30	Behavior is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment (e.g., sometime incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (e.g., stays in bed all day; no job, home or friends).
31-40	Some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home and is failing at school).
41-50	Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) OR any serious impairment in social, occupational, or school functioning (e.g., no friends, unable to keep a job).
51-60	Moderate symptoms (e.g., flat affect and circumstantial speech, occasional panic attacks) OR moderate difficulty in

New GAF rating: Evaluation Date:

Example: Message displayed after copying to the clipboard.



The message dialog box contains the following text:

The table has been copied to the Windows clipboard.
If you like, you may paste it into an open MS Excel spreadsheet.

Marking a Rating Entered in Error

NOTE: Only GAF ratings previously entered by you may be modified. This applies to entering ratings in error as well as changing or deleting a rating.

Example: To mark a rating as “entered in error”, select a rating from the list of previous ratings table. Click on the **Action | Mark Rating “Entered in Error”** menu item. The **Mark Rating “Entered in Error”** button does the same thing.

The screenshot shows the 'Mental Health Assistant in use by MHPROVIDER,ONE' window. The 'Action' menu is open, showing 'Save New Rating' and 'Mark Rating "Entered in Error"'. A red callout '2. Click' points to the 'Mark Rating "Entered in Error"' menu item. Below the menu is a table of previous ratings:

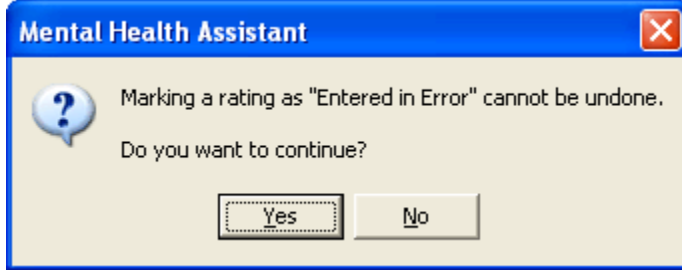
Date	GAF	Clinician
04/14/2011	50	MHPROVIDER,ONE
04/13/2011	10	MHPROVIDER,ONE
02/13/2011	40	MHPROVIDER,ONE

A red callout '1. Select' points to the '04/13/2011' row in the table. Below the table is a button labeled 'Mark Rating "Entered in Error"'. To the right is a line graph titled 'GAF Score' showing scores over time. Below the graph is a table of GAF Criteria:

Range	Criteria
1-10	Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain minimal personal hygiene OR serious suicidal act with clear expectation of death.
11-20	Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death; frequently violent; OR occasionally fails to maintain minimal personal hygiene (e.g., smears feces) OR gross impairment in communication (e.g., largely incoherent or mute).
21-30	Behavior is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment (e.g., sometime incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (e.g., stays in bed all day; no job, home or friends).
31-40	Some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home and is failing at school).
41-50	Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) OR any serious impairment in social, occupational, or school functioning (e.g., no friends, unable to keep a job).
51-60	Moderate symptoms (e.g., flat affect and circumstantial speech, occasional panic attacks) OR moderate difficulty in

At the bottom of the window, there is a 'New GAF rating:' field with a dropdown menu showing '25', an 'Evaluation Date:' field with a dropdown menu showing '5/ 3/2011', and a 'Save New Rating' button.

Example: A warning message appears. **Click YES** to mark the selected rating by marking with strikethrough the rating text in the table. **Click NO** to abort any changes.



Example: Rating marked as entered in error, labeled in strikethrough text.

Date	GAF	Clinician
04/14/2011	50	MHPROVIDER, ONE
04/13/2011	10	MHPROVIDER, ONE
02/13/2011	40	MHPROVIDER, ONE

Range	Criteria
1-10	Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain minimal personal hygiene OR serious suicidal act with clear expectation of death.
11-20	Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death; frequently violent; OR occasionally fails to maintain minimal personal hygiene (e.g., smears feces) OR gross impairment in communication (e.g., largely incoherent or mute).
21-30	Behavior is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment (e.g., sometime incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (e.g., stays in bed all day; no job, home or friends).
31-40	Some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home and is failing at school).
41-50	Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) OR any serious impairment in social, occupational, or school functioning (e.g., no friends, unable to keep a job).
51-60	Moderate symptoms (e.g., flat affect and circumstantial speech, occasional panic attacks) OR moderate difficulty in

Changing or Deleting a Rating

NOTE: A GAF rating may only be changed or deleted within two days of the date of the initial rating. After two days, the rating may only be marked in error. Ratings allowing modification or deletion are indicated in the table by bold text.

NOTE: Only GAF ratings previously entered by you may be modified. This applies to entering ratings in error as well as changing or deleting a rating.

Example: To delete or change a rating, select a rating which can be deleted or changed from the list of previous ratings. Click on **Action | Change/Delete Rating** menu item. A message dialog appears that allows the user to either delete or change the rating of the selected GAF. Any change or deletion is reflected in the updated ratings table. User may abort changes before they are saved.

The screenshot shows the 'Mental Health Assistant in use by MHPROVIDER, ONE' window. The 'Action' menu is open, highlighting 'Change/Delete Rating'. A red box labeled 'Click' points to this menu item. Below the menu is a table of ratings and a line graph showing GAF scores over time.

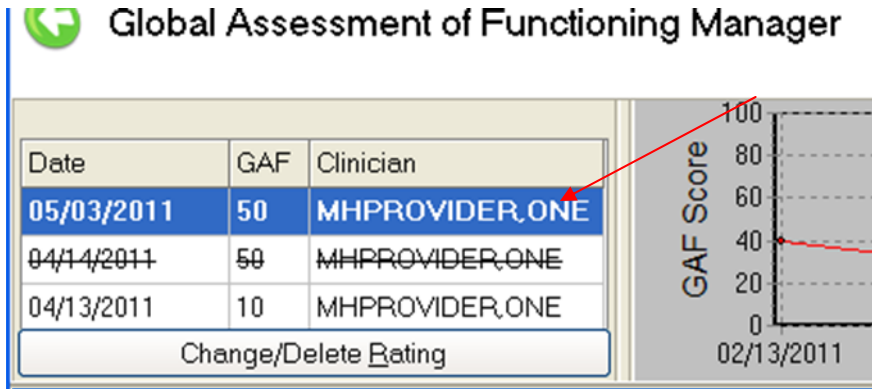
Date	GAF	Clinician
05/03/2011	50	MHPROVIDER, ONE
04/14/2011	50	MHPROVIDER, ONE
04/13/2011	10	MHPROVIDER, ONE

The graph shows GAF scores for 02/13/2011 (40), 04/13/2011 (10), and 05/03/2011 (50). The 'Change/Delete Rating' button is visible below the table.

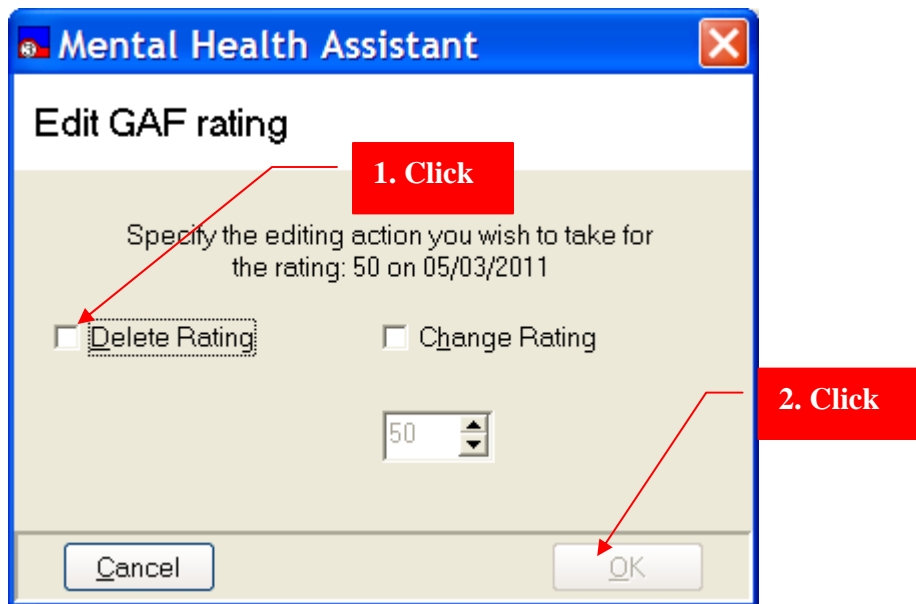
Range	Criteria
1-10	Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain minimal personal hygiene OR serious suicidal act with clear expectation of death.
11-20	Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death; frequently violent; OR occasionally fails to maintain minimal personal hygiene (e.g., smears feces) OR gross impairment in communication (e.g., largely incoherent or mute).
21-30	Behavior is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment (e.g., sometime incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (e.g., stays in bed all day; no job, home or friends).
31-40	Some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home and is failing at school).
41-50	Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) OR any serious impairment in social, occupational, or school functioning (e.g., no friends, unable to keep a job).
51-60	Moderate symptoms (e.g., flat affect and circumstantial speech, occasional panic attacks) OR moderate difficulty in

At the bottom, the 'New GAF rating' is set to 1 and the 'Evaluation Date' is 5/ 3/2011. A 'Save New Rating' button is present.

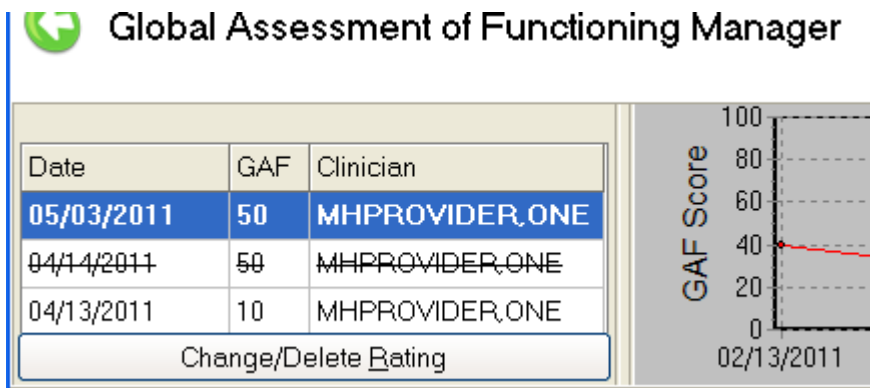
Example: Rating which may be deleted or changed is labeled in bold text.



Example: Deleting a rating



Example: Changing a GAF rating.

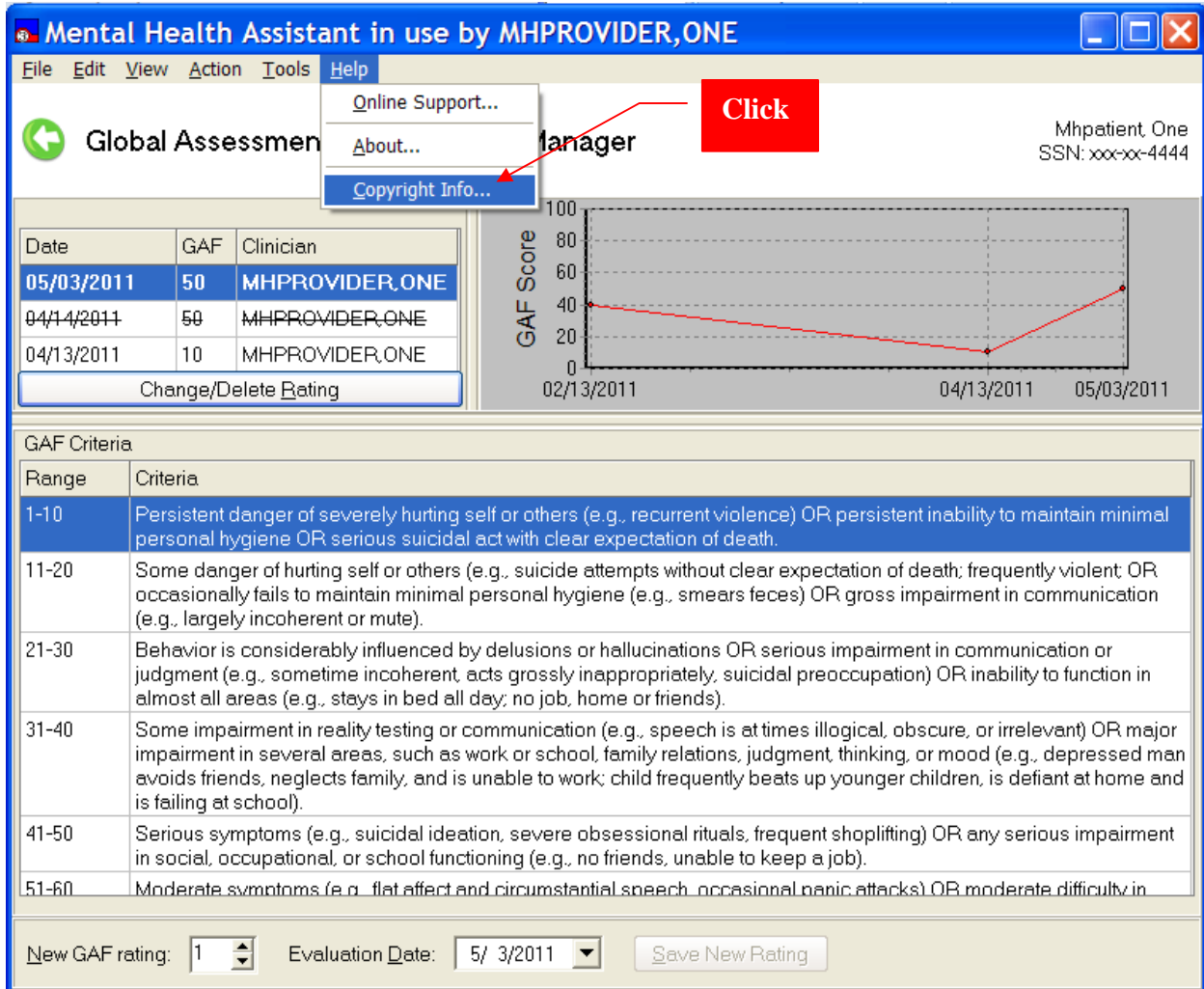


Example: Dialog to change a GAF rating.



GAF Access Copyright Information

Example: To access GAF copyright information, click on **Help | Copyright Info** menu item. The Copyright information message dialog is displayed.



The screenshot shows the 'Mental Health Assistant in use by MHPROVIDER, ONE' window. The 'Help' menu is open, and 'Copyright Info...' is selected. A red arrow points to this menu item, and a red box with the word 'Click' is next to it. The interface includes a table of GAF scores, a line graph, and GAF criteria.

Date	GAF	Clinician
05/03/2011	50	MHPROVIDER,ONE
04/14/2011	50	MHPROVIDER,ONE
04/13/2011	10	MHPROVIDER,ONE

Change/Delete Rating

GAF Score

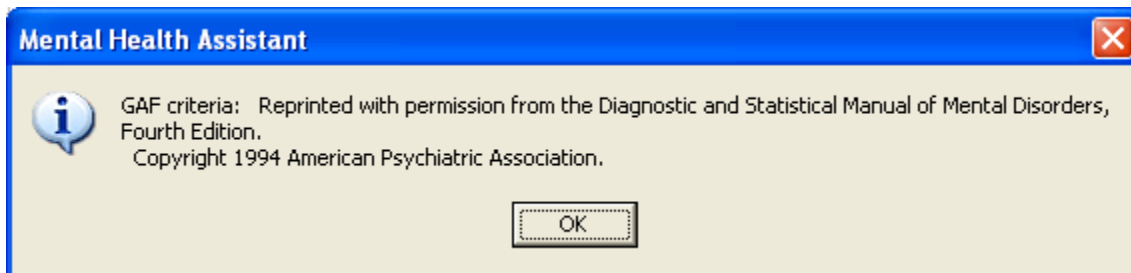
02/13/2011 04/13/2011 05/03/2011

GAF Criteria

Range	Criteria
1-10	Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain minimal personal hygiene OR serious suicidal act with clear expectation of death.
11-20	Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death; frequently violent) OR occasionally fails to maintain minimal personal hygiene (e.g., smears feces) OR gross impairment in communication (e.g., largely incoherent or mute).
21-30	Behavior is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment (e.g., sometime incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (e.g., stays in bed all day; no job, home or friends).
31-40	Some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home and is failing at school).
41-50	Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) OR any serious impairment in social, occupational, or school functioning (e.g., no friends, unable to keep a job).
51-60	Moderate symptoms (e.g., flat affect and circumstantial speech, occasional panic attacks) OR moderate difficulty in

New GAF rating: 1 Evaluation Date: 5/ 3/2011 Save New Rating

Example: Copyright information message dialog.



The dialog box is titled 'Mental Health Assistant' and contains the following text:

GAF criteria: Reprinted with permission from the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition.
Copyright 1994 American Psychiatric Association.

OK

Exiting the GAF Manager Form

Example: To exit the GAF Manager form, click on **File | Exit** menu item. You can also press the “ESC” key or click on the “X” in the upper right-hand corner of the form, or click on the left arrow. The GAF Manager form closes and user is returned to the MHA Main form.

The screenshot shows the 'Mental Health Assistant in use by MHPROVIDER,ONE' window. The 'File' menu is open, with 'Exit' selected. A red arrow points to 'Exit' from a red box labeled 'Click'. The main area shows a table of GAF ratings, a line graph of GAF scores over time, and a table of GAF criteria. The bottom of the window has input fields for 'New GAF rating' (25) and 'Evaluation Date' (5/ 6/2009), along with a 'Save New Rating' button.

Date	GAF	Clinician
02/03/2005	54	MHPROVIDER,NEW
02/01/2005	28	MHPROVIDER,NEW
01/21/2005	37	MHPROVIDER,NEW

Mark Rating "Entered in Error"

GAF Criteria

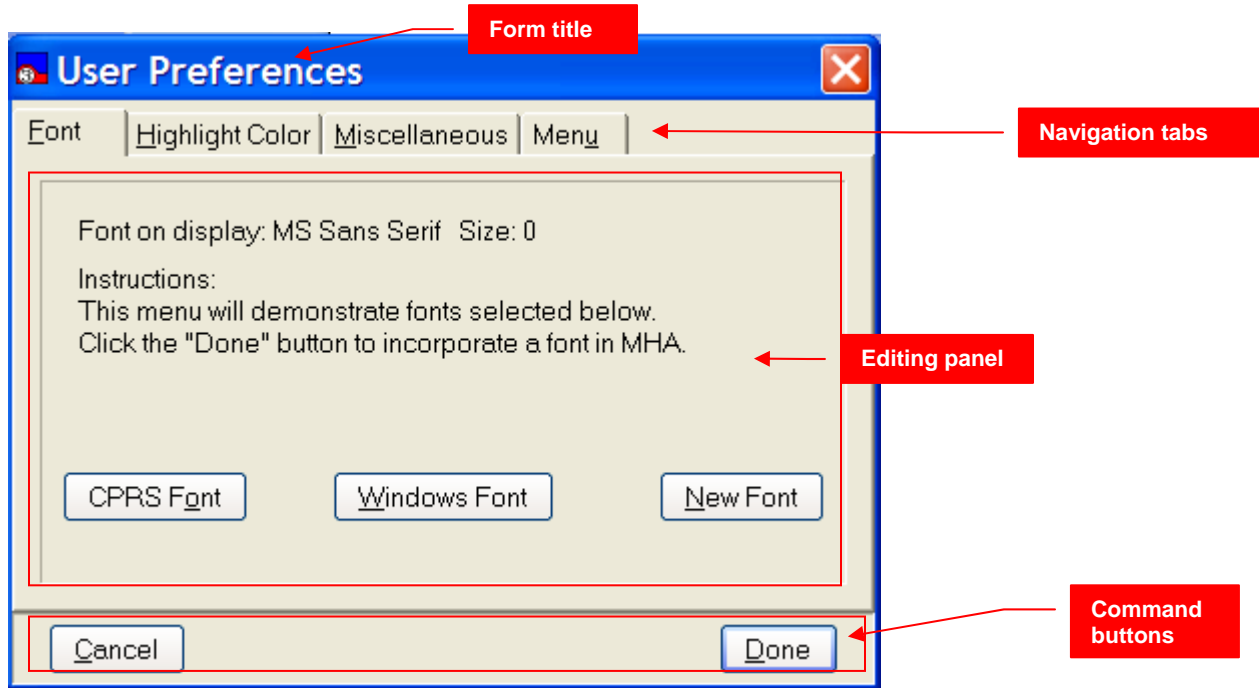
Range	Criteria
1-10	Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain minimal personal hygiene OR serious suicidal act with clear expectation of death.
11-20	Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death; frequently violent; OR occasionally fails to maintain minimal personal hygiene (e.g., smears feces) OR gross impairment in communication (e.g., largely incoherent or mute).
21-30	Behavior is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment (e.g., sometime incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (e.g., stays in bed all day, no job, home or friends).
31-40	Some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home and is failing at school).

New GAF rating: 25 Evaluation Date: 5/ 6/2009 Save New Rating

User Preferences Functions

Orientation

Example: The User Preferences form enables the user to customize the manner in which several functions are performed and displayed in MHA. Additionally, the font and display functions are an attempt to comply with Section 508 requirements in MHA's user interface.



Form Title

The Form Title simply identifies the form.

Navigation Tabs

The Navigation Tabs are used to access the various functions that are distributed across four panels.

Editing Panel

The Editing Panel displays the various artifacts that the user manipulates to make adjustments to preferences. There are four panels, but only one of them is visible at any one time.

Command Buttons

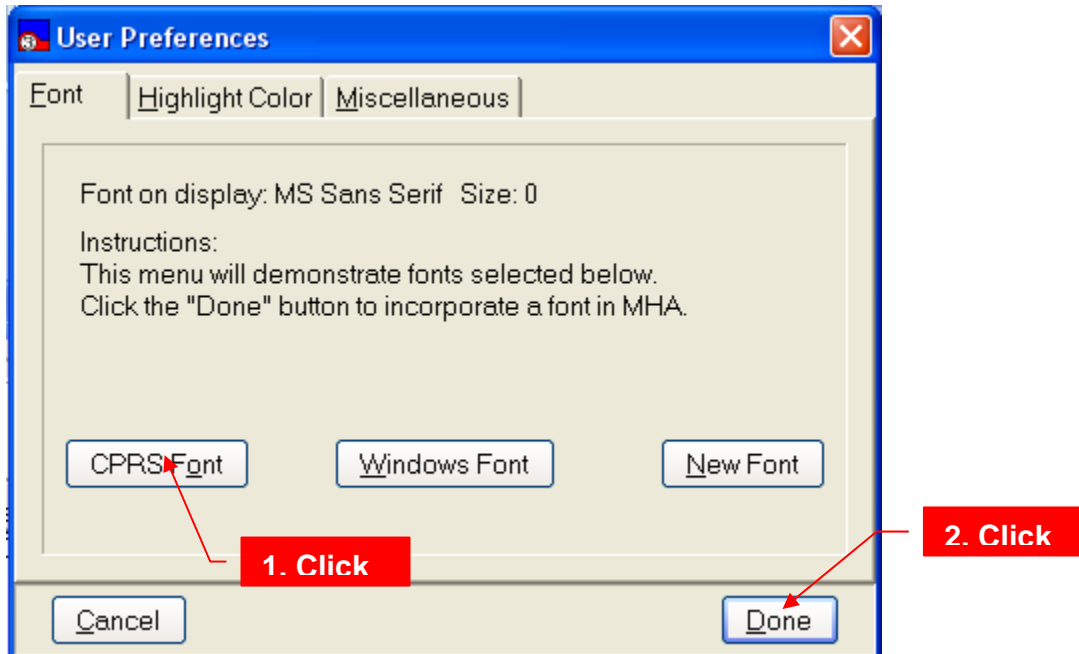
The Command Buttons are used to either cancel all actions or close the window and save the changes made.

Changing MHA System Font

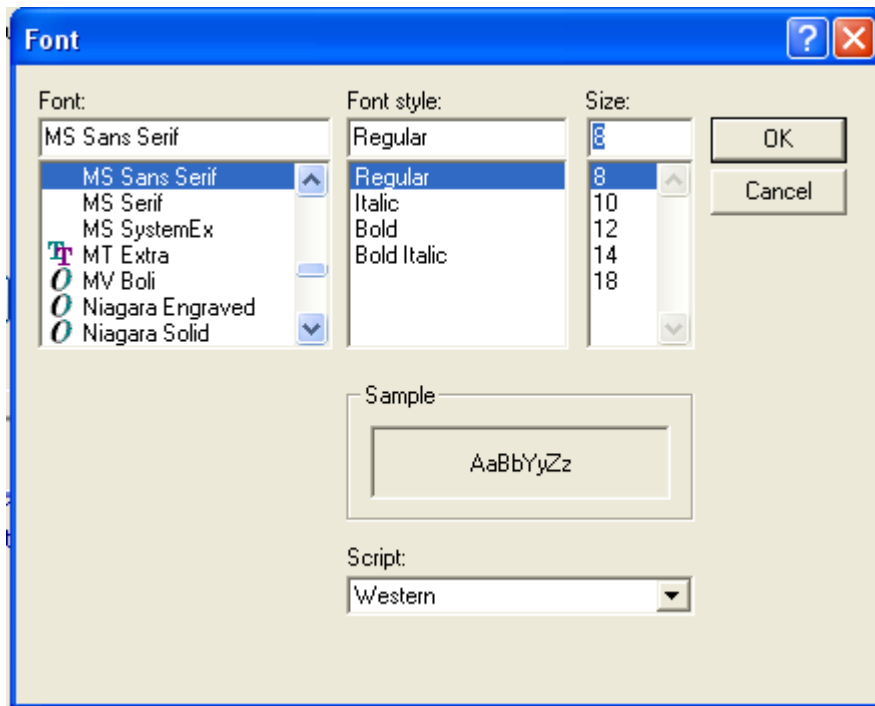
There are three types of fonts that the user may select to provide the best viewing comfort possible: The CPRS Font, the Windows Font, or a New Font. Selecting the CPRS Font will change MHA's font to match that with CPRS uses. If the user is comfortable with the CPRS font, then this may be a good choice. The Windows Font is the "default" Windows font. This font is used by the other programs on the system too. The New Font option enables the user to select from any of the fonts found on the PC. With this option it is possible to change font characteristics, such as size and bold, etc. In most cases, the font will not need to be changed from the one offered initially by MHA. To change Font options:

1. Click on any of the three font Option Buttons.
2. Click on the **Done** button

Example: Font tab. Clicking on **Cancel** ignores any choices made.



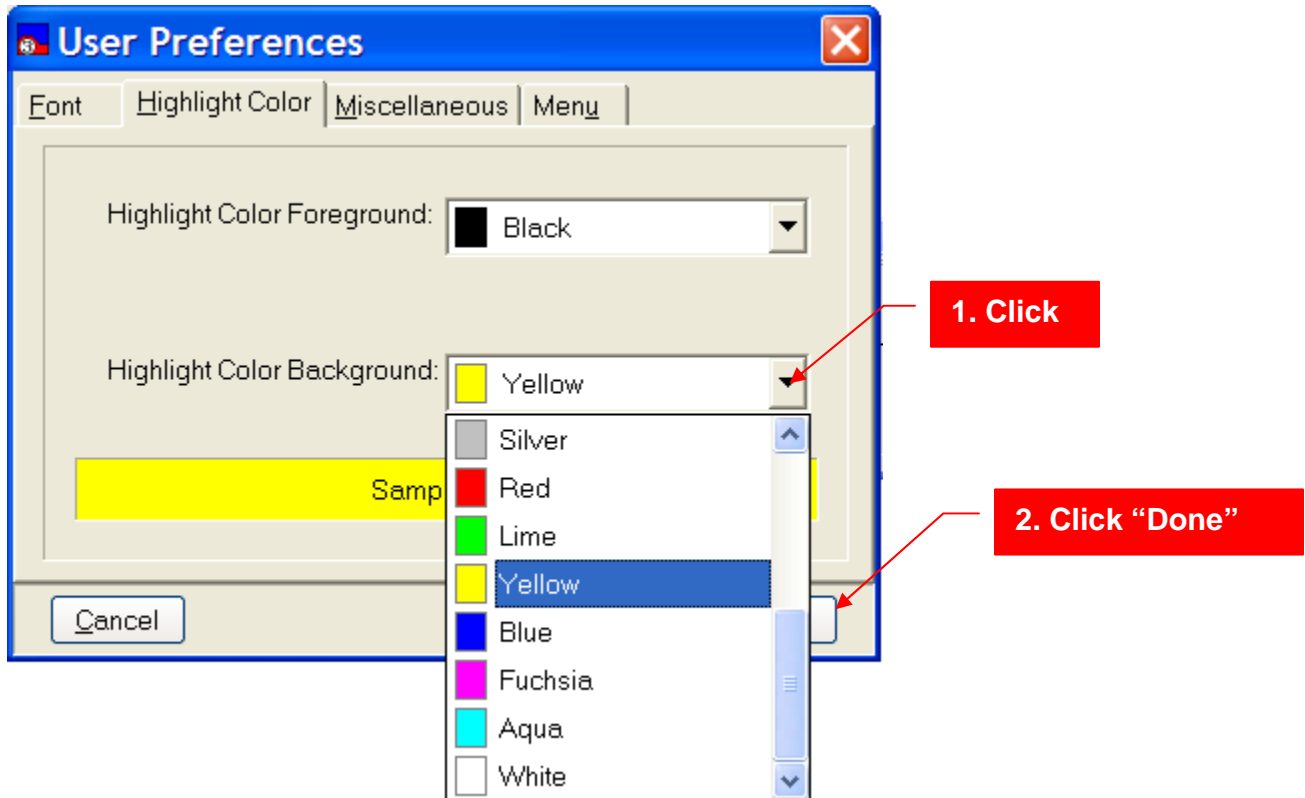
Example: If the **New Font** button is selected, the New Font selection prompt is displayed.



Changing the Displayed Highlight Colors on the All-Questions Data-input Form

As a navigational aide, the selected question on the All-Questions form is highlighted with a different color from the form's color. This color can be changed by choosing the Highlight Color tab and selecting colors from the artifacts on the Editing Panel.

Example: Highlight Color tab. Clicking on **Cancel** ignores any choices made.

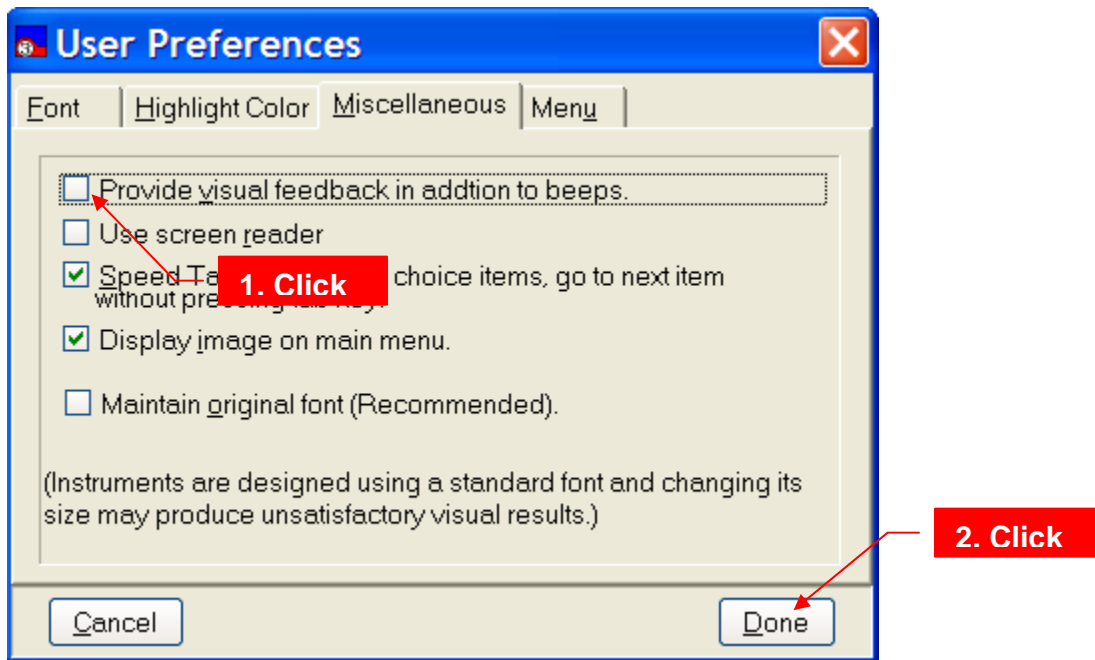


Toggling Visual Feedback On/Off

Visual Feedback displays error messages in addition to sound beeps. A dialog would be presented to identify the error the user made, for example, the dialog message says the wrong key had been pressed.

1. Click on the **Miscellaneous tab**
2. Click on the **“Provide visual feedback...”** button, so that a checkmark is displayed.

Example: Miscellaneous tab. **Clicking** on **Cancel** button ignores any choices made.



Toggling Screen Reader On/Off

MHA has the ability to detect when a screen reader is in use. MHA will automatically change many of its forms so that a screen reader can accurately and intelligently present information to the listener. Sometimes it is useful to run MHA as if a screen reader is in use, usually for testing purposes, and this toggle provides that ability.

To toggle Screen Reader:

1. Click on the **Miscellaneous tab**
2. Click on the **“Screen Reader...”** button, so that a checkmark is displayed
3. Click on the **Done** button

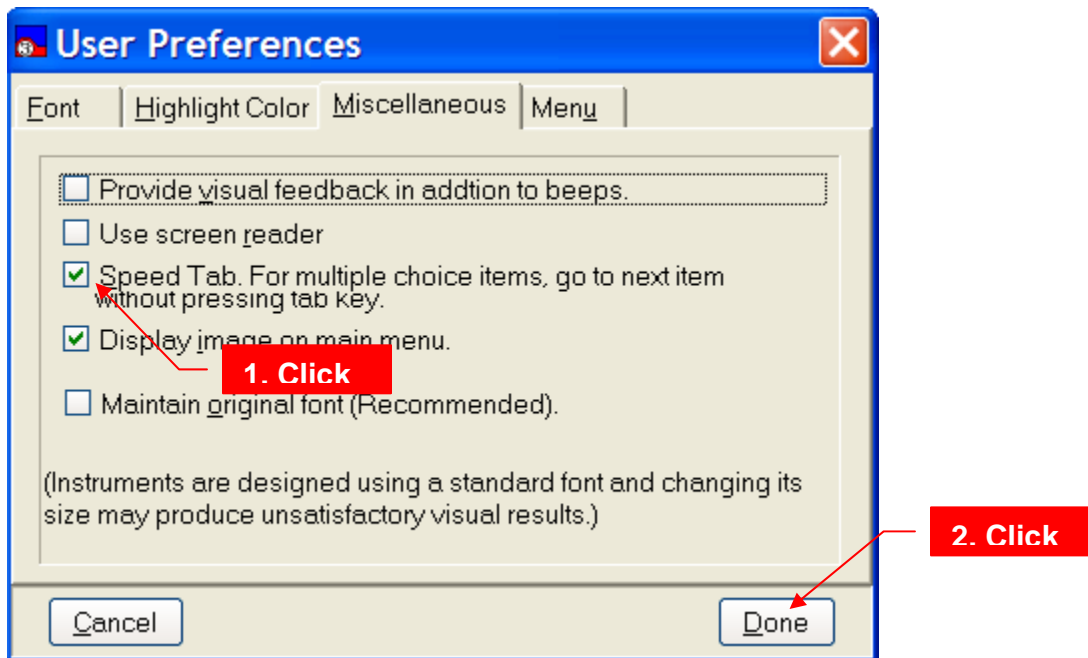
Toggling Speed Tab On/Off

Speed Tab is a feature to increase data entry speed. Speed Tab is actually an automatic “Tab” key press that is triggered after the user makes a choice from a question with multiple choice answers. This saves the user from having to press the Tab key to move on to subsequent questions on the form. However, the Speed Tab option has no effect on Multiple-Line Text Boxes, Single-Line Text Boxes and Spin Boxes. A check box to toggle the Speed Tab is also located on the data-entry form.

To toggle Speed Tab:

4. Click on the **Miscellaneous tab**
5. Click on the **“Speed Tab...”** button, so that a checkmark is displayed
6. Click on the **Done** button
7. Speed Tab functions are enabled in the data-entry forms, based on whether the checkmark was visible at the time of clicking on the **Done** button.

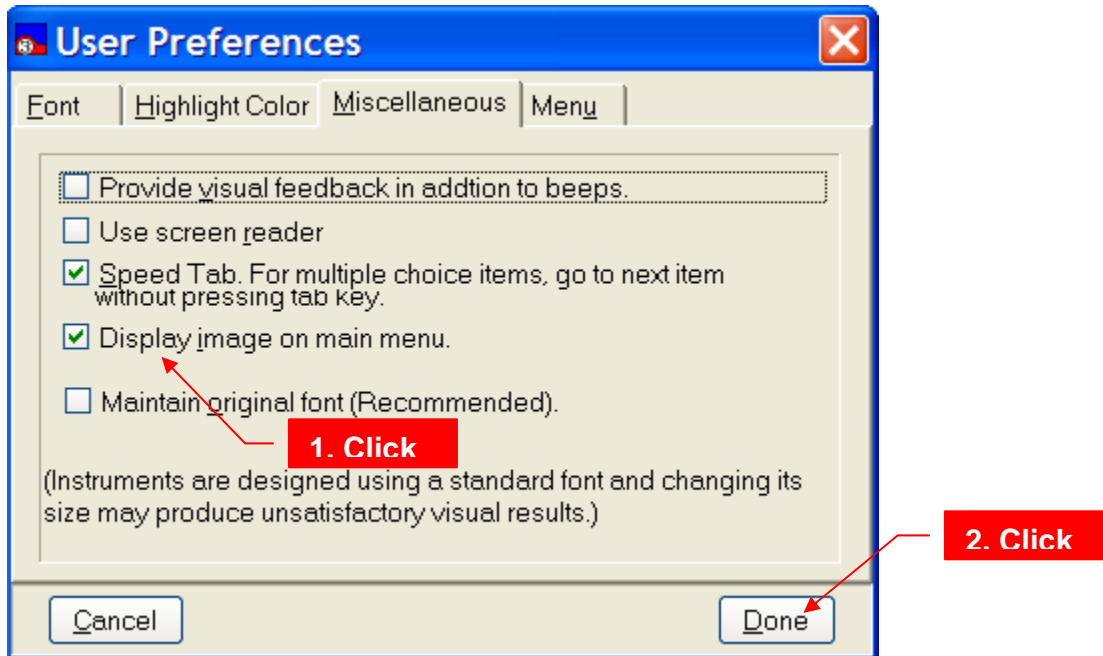
Example: Miscellaneous tab. clicking on **Cancel**, ignores any choices made.



Toggling the display of images on the main menu

The images on the Main Menu can be turned off or on by checking the box.

Example: Miscellaneous tab. clicking on **Cancel**, ignores any choices made.

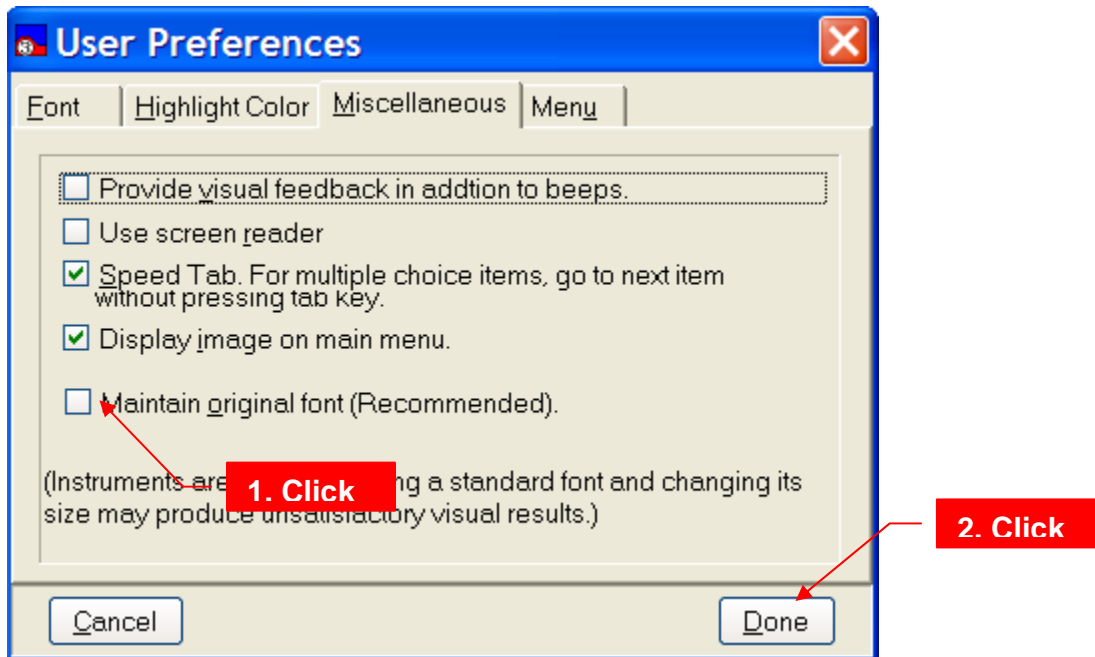


Toggling: Maintain Original Font on/off

When an instrument is designed for MHA there are sometimes design characteristics that are based on the size and type of font so that questions and answers are displayed in a readable manner. Every effort is made to accommodate larger or smaller fonts should that be the user's preference. Since the readability of an instrument is based on many factors (e.g., screen resolution, DPI settings, size of form), not just the font's size and type, this toggle provides a means to ensure the instrument will be readable in its original design. The Original Font is maintained, based on whether the checkmark is set for this toggle. To set this toggle:

1. **Click** on the **Miscellaneous** tab.
2. **Click** on the **"Maintain Original font..."** button, so that a checkmark is displayed.

Example: Miscellaneous tab. Clicking on **Cancel** ignores any choices made.



Selecting the starting point for MHA

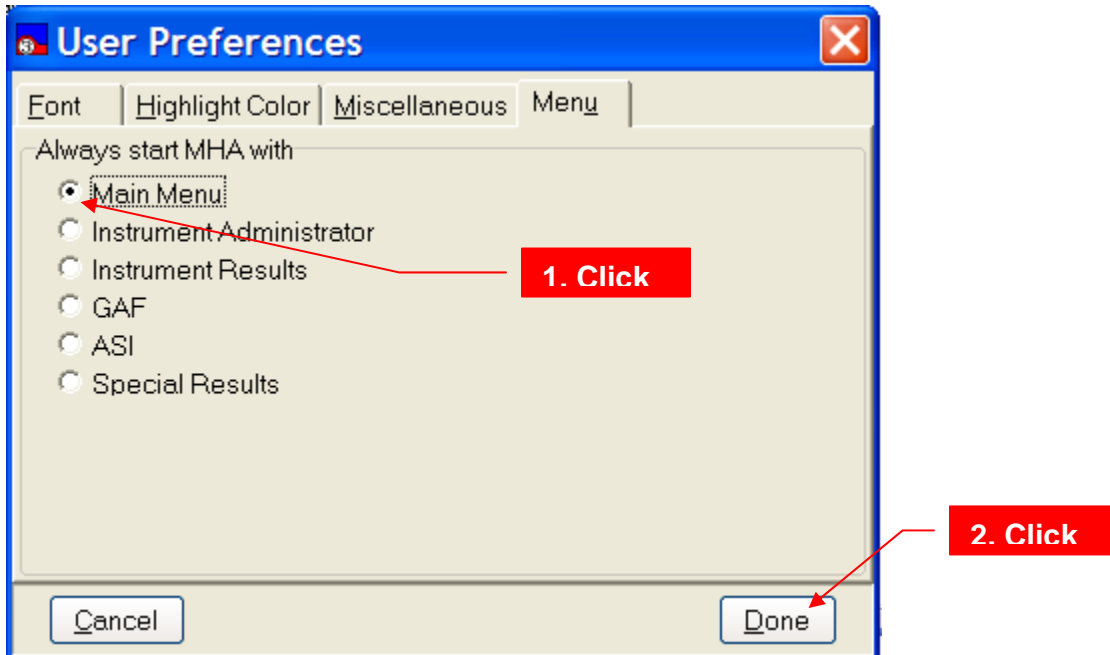
When MHA is started, it usually presents the Main Menu initially. This is the depiction throughout this manual. However, it is possible to bypass the Main Menu and present the “Instrument Administrator” instead. The user is able to select from the following starting points:

- Main Menu
- Instrument Administrator
- Instrument Results
- ASI
- GAF
- Special Results.

To change the initial display in MHA:

1. **Click** on the **Menu tab**.
2. **Click** on one of the possible menu options.

Example: Menu tab. Clicking on **Cancel** ignores any choices made.



Off-line Administration Functions

Orientation

Most users are likely to use MHA in the standard way, that is, by administering instruments while their computer is connected to a VistA system. However, MHA offers “off-line” testing features for users needing such functionality, such as at CBOCs. Off-line testing enables the user to administer an instrument when the user’s computer is not able to connect to a VistA system, temporarily saving the administration’s results in an encrypted local file. When a user returns to the office and resumes a connection to VistA, the user is asked to match the off-line patient information for a selected administration with the VistA patient information. If the user is satisfied with the match, the results can be uploaded to VistA, at which time the temporary local file is deleted.

The only way that MHA can connect to VistA is by being “launched” from the CPRS Tools menu. This is different from previous versions of MHA. So, to invoke MHA for off-line use, users will need to double-click on the Mental Health Assistant icon on the desktop.

Stored Off-line administrations are not useful until they are uploaded to VistA, at which time they become part of the patient’s official record.

Example: There are two principal forms that are used for processing off-line administrations. The Off-line Patient Manager is used while disconnected to VistA, while the Off-line Results Synchronizer is used once a connection to VistA is restored.

The screenshot shows the 'Off-Line Patient Manager' window. At the top, the title bar reads 'Mental Health Assistant'. Below it, the window title is 'Off-Line Patient Manager'. The main area is divided into two sections. The first section, 'Select existing off-line patient', contains a dropdown menu with 'MHPROVIDER, THREE' selected. A red callout box labeled 'Patient Selector' points to this dropdown. The second section, 'Patient details (Edit as needed)', contains several input fields: 'First Name: THREE', 'Last Name: MHPROVIDER', 'SSN: 666-12-3456', 'DOB: 8/10/1960', and 'Sex: Male Female'. A red callout box labeled 'Patient Edit Area' points to this section. At the bottom of the window are four buttons: 'New', 'Delete', 'Cancel', and 'OK'.

Patient Selector

The Patient Selector Drop-Down List Box is used to choose from a list of existing off-line patients.

Patient Edit Area

The Patient Edit Area contains the input artifacts that are used to edit and display patient information.

New button

The New button is used to prepare the form for entering information about a new patient.

Delete button

The Delete button removes the selected patient from the list of patients and deletes the local record.

Cancel button

The Cancel button closes the Off-line Patient Manager without selecting a patient.

Ok button

The Ok button selects the current patient for processing of off-line administrations.

Off-line Results Synchronizer

To use the Off-line Results Synchronizer, the following must be true:

- The PC is connected to VistA.
- MHA is launched from the CPRS Tools menu.
- The user has previously administered at least one off-line instrument that has not yet been uploaded to VistA.

The following functionality is restored once connected to VistA:

- Instruments Ordered-by selection
- Interviewer selection
- Visit Location selection
- Online Support

Example: Off-line Results Synchronizer

Mental Health Assistant

File Help

Off-Line Results Synchronizer
Pick an off-line record, find a matching patient in CPRS, and upload the record.

Off-Line Records

Name	SSN	DOB	Sex	Instrument	Date
MHPATIENT, ONE	000-00-2412	03/05/1992	FEMALE	DIT-2005	04/22/2005
MHPATIENT, ONE	000-00-2412	03/05/1992	FEMALE	CAGE	04/22/2005
MHPATIENT, TWO	000-00-8455	04/10/1940	FEMALE	AUDC	04/22/2005

Search for Matching CPRS Patient

Search for:

Enter some or all the letters of last name, or SSN, or the first letter of the last name plus last four digits of SSN. Search results below (click on name to select).

Name	SSN	DOB	Sex
MHPATIENT, ONE	000-00-2412	2/1/1922	FEMALE

Results of Match

	Off-Line Patient	CPRS Patient
Name	MHPATIENT, ONE	MHPATIENT, ONE
SSN	000-00-2412	000-00-2412
DOB	03/05/1992	2/1/1922
Sex	FEMALE	FEMALE

Match Confidence Level: Good

Main Menu

The Main Menu offers user functions in the context of the Off-line Results Synchronizer form, such as file and help.

Off-line Records List

This is the list of all tests that have been administered off-line, which haven't been uploaded to VistA yet. The list is used to select which administration to process.

CPRS Patient Search Panel

This group of artifacts is used to search for, and list, CPRS (VistA) patients which closely match the off-line patient that is selected in the Off-line Records List.

Patient Match Panel

This panel displays a table on which both the off-line and CPRS patient information is shown side-by-side to aid in determining the possibility of a match. All of the off-line patient information is assumed to come from the patient during an interview. In most cases, the information provided will be a perfect match to the information in VistA for the same patient. This matching scheme is a way for the clinician to verify that it is the same patient and to make any adjustments for typos and other minor errors.

Delete Off-line Record Button

This button triggers the deletion of the currently-selected off-line administration record. A confirmation prompt is displayed before deleting the record.

Upload Button

This button starts the process of uploading to VistA the currently-selected record.

Exit button

The Exit button closes the Off-line Results Synchronizer form.

Starting MHA in Off-line Mode from the Desktop Icon

To start MHA for off-line use:

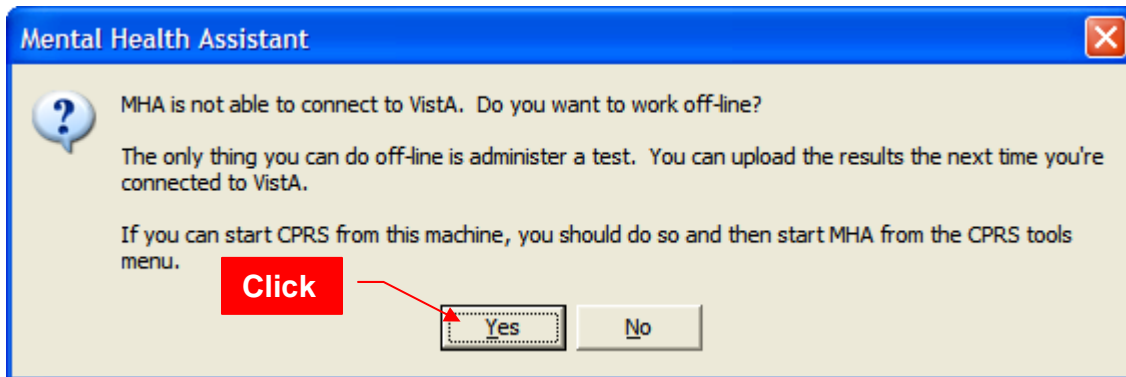
1. Locate the **Mental Health Assistant 3** icon, as pictured below, on the Windows Desktop
2. Double-click the icon
3. Click on the **Yes** button on the “**Do you want to work off-line**” prompt.
4. Clicking on **Yes** causes the Off-line Patient Manager form to display.

Clicking on the **No** button aborts MHA.

Example: The Mental Health Assistant icon on the Windows Desktop.



Example: “Do you want to work off-line” prompt



Selecting an Existing Patient from the Drop-Down List Box

To select an existing off-line patient record:

1. **Click** on the down-arrowhead to open up the Drop-Down List Box (Combo box).
2. **Click** on the name of the desired patient.

Example: The patient selected becomes the active patient on the Drop-Down List Box. Demographic information belonging to the selected patient fills the form.

Mental Health Assistant

Off-Line Patient Manager

Select existing off-line patient

MHPATIENT, ONE
MHPATIENT, ONE
MHPATIENT, TWO

1. Click to open

2. Click to make a selection

First Name: ONE
Last Name: MHPATIENT
SSN: 000-00-2412
DOB: 3/ 5/1992
Sex: Male Female

New Delete Cancel OK

Adding and Selecting a New Off-line Patient

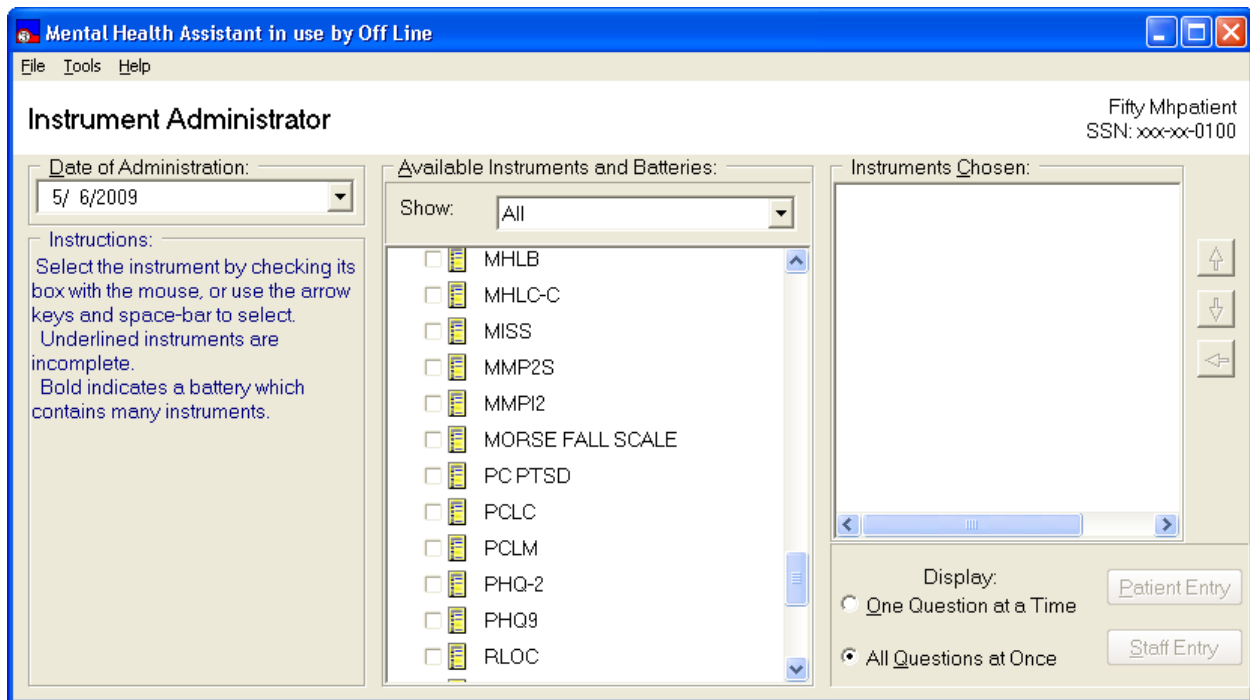
To add a new patient to the list of off-line patients:

1. **Click** on the **New** button.
2. **Enter** the new patient information in the corresponding fields.
3. **Click** on the **Ok** button.

Example: The data entry fields are cleared and appear blank and ready for input. After clicking on the **Ok** button, the user is presented in the **Instrument Administrator** form

The screenshot shows the 'Mental Health Assistant' window with the 'Off-Line Patient Manager' form. The form has a title bar with a close button. Below the title bar, there is a section 'Select existing off-line patient' with a dropdown menu. Below that is a section 'Patient details (Edit as needed)'. The form contains the following fields: 'First Name:' with the value 'TWO', 'Last Name:' with the value 'MHPATIENT', 'SSN:' with the value '000-00-8455', 'DOB:' with the value '4/10/1940' and a dropdown arrow, and 'Sex:' with radio buttons for 'Male' and 'Female', where 'Female' is selected. At the bottom of the form are four buttons: 'New', 'Delete', 'Cancel', and 'OK'. Three red callout boxes with arrows point to these buttons: '2. Enter patient information in provided fields' points to the input fields, '1. Click' points to the 'New' button, and '3. Click, to save patient and administer an instrument' points to the 'OK' button.

Example: Off-line Instrument Administrator form.



Since off-line administrations of instruments mean that the connection to VistA is not present, there are several features of MHA that are disabled:

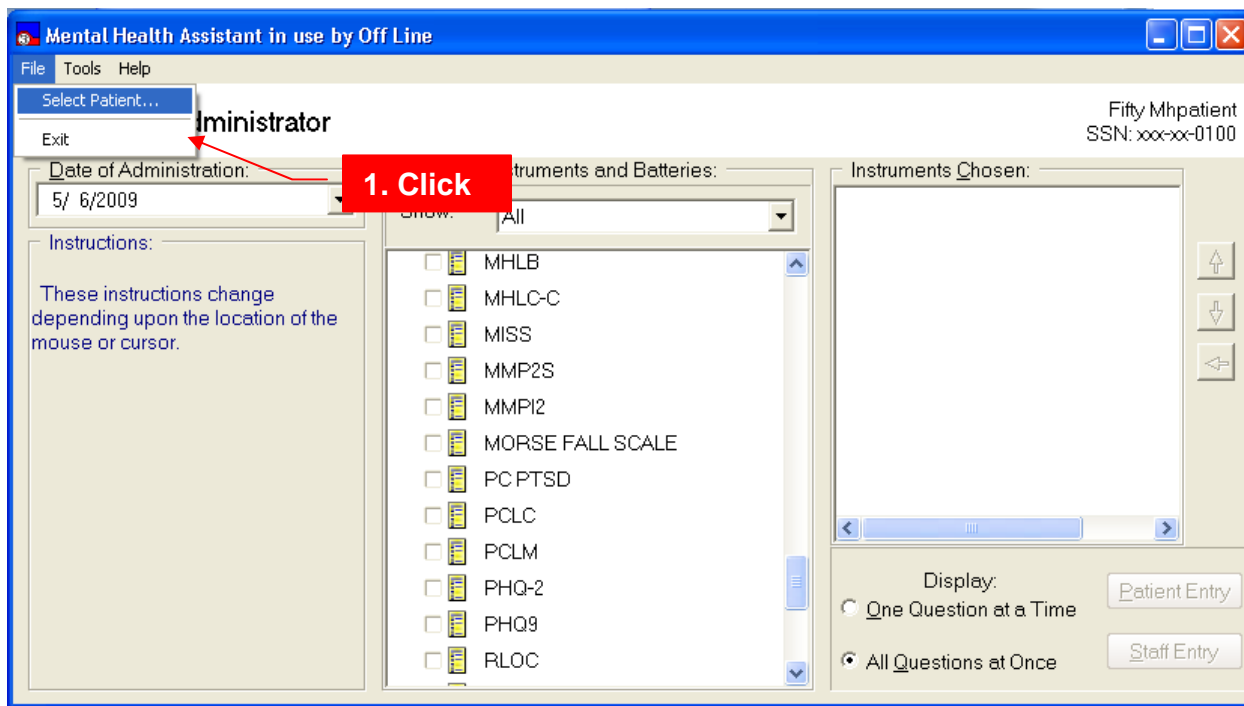
- Instruments Ordered-by selection
- Interviewer selection
- Visit Location selection
- METRIC Instruments Reviews
- Battery Wizard
- Instrument Description
- Online Support

Selecting a Different Off-line Patient from the Instrument Administrator Form

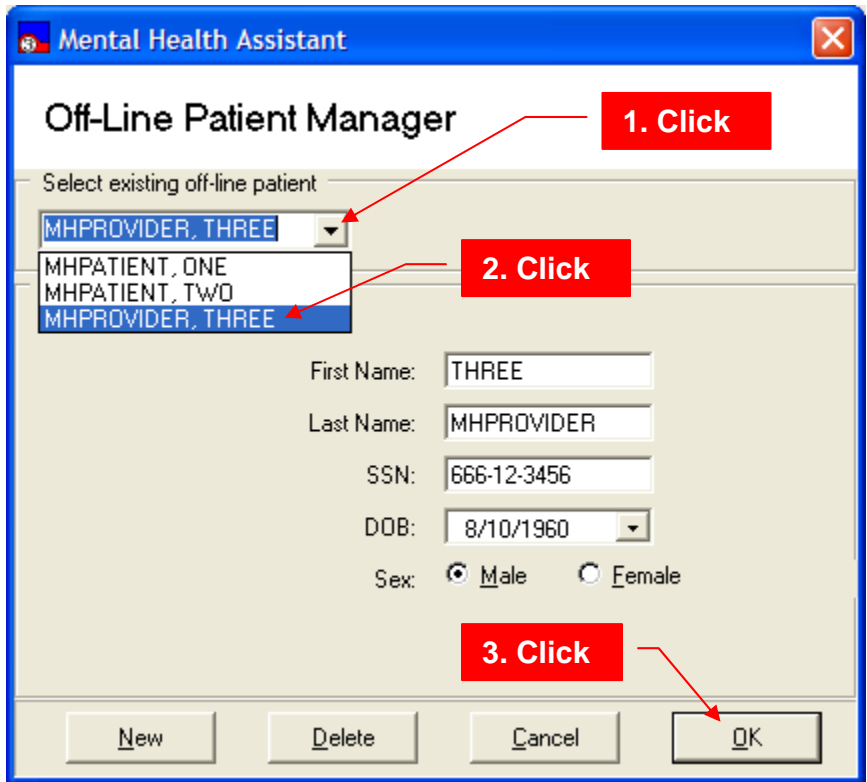
To select another off-line patient from the Instrument Administrator form:

1. From the **Instrument Administrator** form, click on **File | Select Patient...** menu option.
2. The **Off-line Patient Manager** form is displayed, offering an opportunity to choose a different existing or new patient.
3. Choose a different off-line patient from the **Off-line Patient Manager** form. After selecting another patient, and clicking **Ok**, the new selected patient is identified.

Example: Selecting a patient on the **Instrument Administrator** form.



Example: Selecting an existing patient on the **Off-line Patient Manager** form.



Deleting an Existing Off-line Patient

To delete an off-line patient:

1. **Select** the name of an off-line patient using the Drop-Down List Box.
2. **Click** on the **Delete** button.
3. The delete warning message is displayed
4. Click on **Yes** to delete the selected patient from the list OR **click** on the **No** tab to abort the deletion.

Example: Selecting the name of an off-line patient using the Drop-Down List Box.

Mental Health Assistant

Off-Line Patient Manager

Select existing off-line patient

MHPROVIDER, THREE
MHPATIENT, ONE
MHPATIENT, TWO
MHPROVIDER, THREE

1. Click

First Name: THREE
Last Name: MHPROVIDER
SSN: 666-12-3456
DOB: 8/10/1960
Sex: Male Female

2. Click

New Delete Cancel OK

Example: Delete warning message.

Mental Health Assistant

Are you sure you want to delete Three Mhprovider from the off-line patient file?
This action cannot be undone!

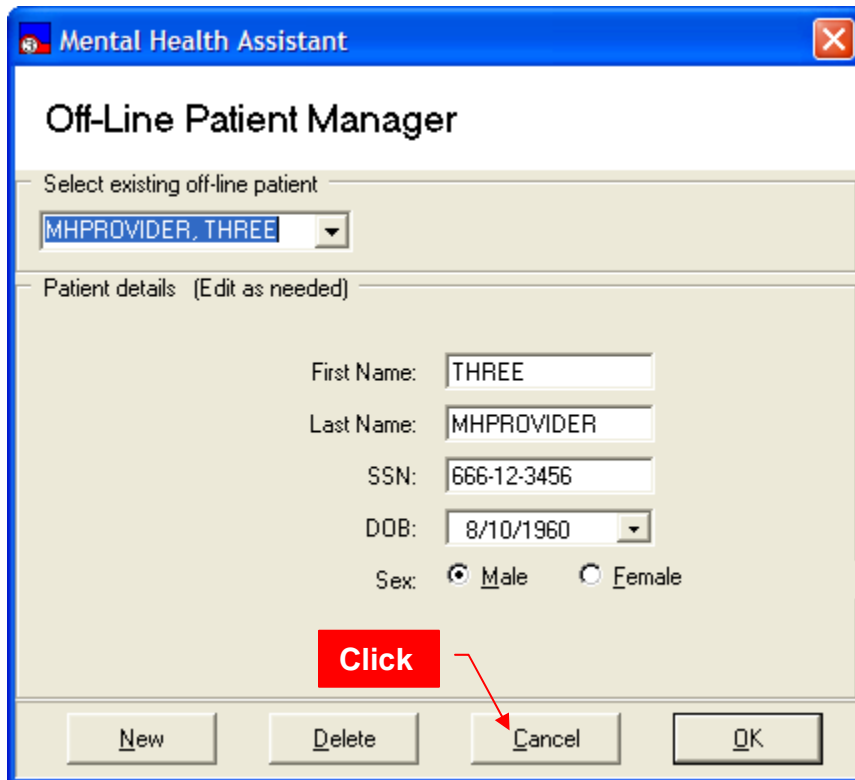
Yes No

Canceling Selection of an Off-line Patient

To exit the Off-line Patient Manager without selecting a patient:

1. Click on the **Cancel** button, or press the escape key “ESC”.
2. The cancel warning message is displayed.
3. Respond with **Yes** to the cancel warning message prompt.
4. Clicking on **Yes** closes the **Off-line Patient Manager** form.
5. Clicking on **No** returns to the **Off-line Patient Manager** form.

Example: Exiting the **Off-line Patient Manager** without selecting a patient.



Mental Health Assistant

Off-Line Patient Manager

Select existing off-line patient

MHPROVIDER, THREE

Patient details (Edit as needed)

First Name: THREE

Last Name: MHPROVIDER

SSN: 666-12-3456

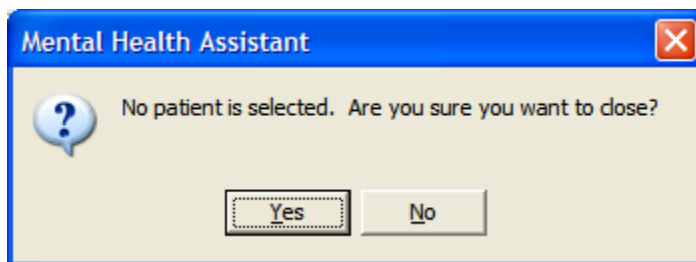
DOB: 8/10/1960

Sex: Male Female

Click

New Delete Cancel OK

Example: Cancel warning message prompt



Mental Health Assistant

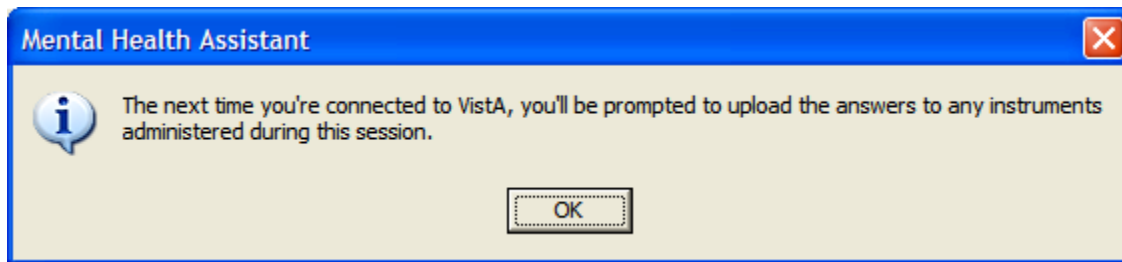
? No patient is selected. Are you sure you want to close?

Yes No

Closing the Off-line Patient Manager

When the Patient Off-Line Patient Manager is closed, and patient data have been entered, a prompt will appear that says the data can be uploaded to VistA the next time the user connects the computer to the VA network.

Example: Exit reminder prompt.



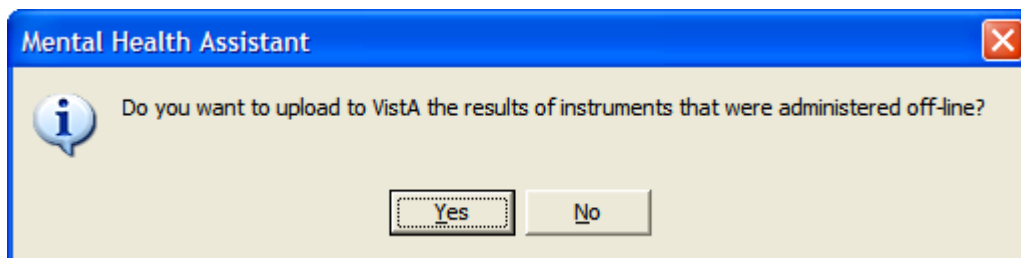
Recognizing the Availability of Off-line Administrations, and Initiating the Upload Process

If any records exist on the PC that were administered off-line, the user is reminded about them once MHA is launched from the CPRS Tools bar. A notification prompt is displayed and the user is offered a choice to upload these records at this time.

To upload existing off-line records:

1. Start CPRS.
2. Invoke MHA from the CPRS Tools menu.
3. If any off-line administration files are found on the PC, the "Do you want to upload to VistA..." prompt is presented. Otherwise, uploading functionality is bypassed and MHA starts up in normal VistA mode.
4. Uploading the confirmation prompt.

Example: Click on the **Yes** button, on the "Do you want to upload to VistA..." prompt. After clicking on **Yes**, the Off-line Results Synchronizer form is displayed.



Example: Off-line Results Synchronizer form.

Off-Line Results Synchronizer
Pick an off-line record, find a matching patient in CPRS, and upload the record.

Off-Line Records

Name	SSN	DOB	Sex	Instrument	Date
MHPATIENT, ONE	000-00-2412	03/05/1992	FEMALE	DIT-2005	04/22/2005
MHPATIENT, ONE	000-00-2412	03/05/1992	FEMALE	CAGE	04/22/2005
MHPATIENT, TWO	000-00-8455	04/10/1940	FEMALE	AUDC	04/22/2005

Search for Matching CPRS Patient

Search for:

Enter some or all the letters of last name, or SSN, or the first letter of the last name plus last four digits of SSN. Search results below (click on name to select).

Name	SSN	DOB	Sex
MHPATIENT, ONE	000-00-2412	2/1/1922	FEMALE

Results of Match

	Off-Line Patient	CPRS Patient
Name	MHPATIENT, ONE	MHPATIENT, ONE
SSN	000-00-2412	000-00-2412
DOB	03/05/1992	2/1/1922
Sex	FEMALE	FEMALE

Match Confidence Level: Good

Selecting an Off-line Record for Uploading

To select a record for uploading to VistA, click on the desired record from those presented on the **Off-line Records** list.

1. The clicked-on record becomes the selected record
2. The left column of the **Results of Match** grid is populated with demographic information from the selected off-line patient's record.
3. A search in the CPRS database is automatically triggered, to find and list the closest matching CPRS patient(s) on the **CPRS Patient Search Panel**
4. The right column of the **Results of Match** grid is populated with demographic information from the selected CPRS patient's record.
5. If more than one CPRS patient match is found, the first one in the list is automatically selected, although it may not necessarily be the best match.

Example: Off-line Records list containing three records.

Off-Line Records						
Name	SSN	DOB	Sex	Instrument	Date	
MHPATIENT, ONE	000-00-2412	03/05/1992	FEMALE	CAGE	04/22/2005 t	▲
MHPATIENT, ONE	000-00-2412	03/05/1992	FEMALE	AUDIT	04/22/2005 t	▲
MHPATIENT, TWO	000-00-8455	04/10/1940	FEMALE	AUDC	04/22/2005 t	▼



Click

Searching for a Matching CPRS Patient

There are two kinds of search methods available for finding a matching CPRS patient: the automatic initial search and a manual search.

The automatic initial search uses a text filter that is built from the selected off-line patient's first letter of the last name, followed by the last four of the SSN—the same way it is done in VistA. This text filter is automatically placed in the “**Search for**” Text Box, and is used for the initial search, which is triggered automatically.

Occasionally, the automatic initial search returns no results or returns poor matching results. In this case, the search text filter may be changed to customize a new result set. To start a manual search, replace the text in the **Search for** Text Box, and click on the **Go** button to trigger a new search, and a refreshed listing of possible matches.

Any text may be entered into the **Search for** Text Box, however, the patient's last name or the default search text typically works best.

Example: The CPRS Patient Search Panel with search results.

The screenshot shows a web interface titled "Search for Matching CPRS Patient". It features a search input field containing "M2412" and a "Go" button. A red arrow points from a red box labeled "2. Click" to the "Go" button. Below the input field is a text instruction: "Enter some or all the letters of last name, or SSN, or the first letter of the last name plus last four digits of SSN. Search results below (click on patient name to view details)". A red arrow points from a red box labeled "1. Enter custom search filter" to the search input field. Below the instruction is a table with the following data:

Name	SSN	DUB	Sex
MHPATIENT, ONE	000-00-2412	2/1/1922	FEMALE

A red arrow points from a red box labeled "List of possible matches" to the table.

Evaluating the results of a possible match

After a search, hopefully the off-line patient's demographic information results in an obvious match to the CPRS Patient, based on information stored in VistA. However, there will be exceptions, in which case the user is forced to make a judgment of whether there is a valid match or not. To aid in making this decision, the "Results of Match" grid displays information about the Off-Line Patient and the selected CPRS Patient.

Example: Results of Match grid.

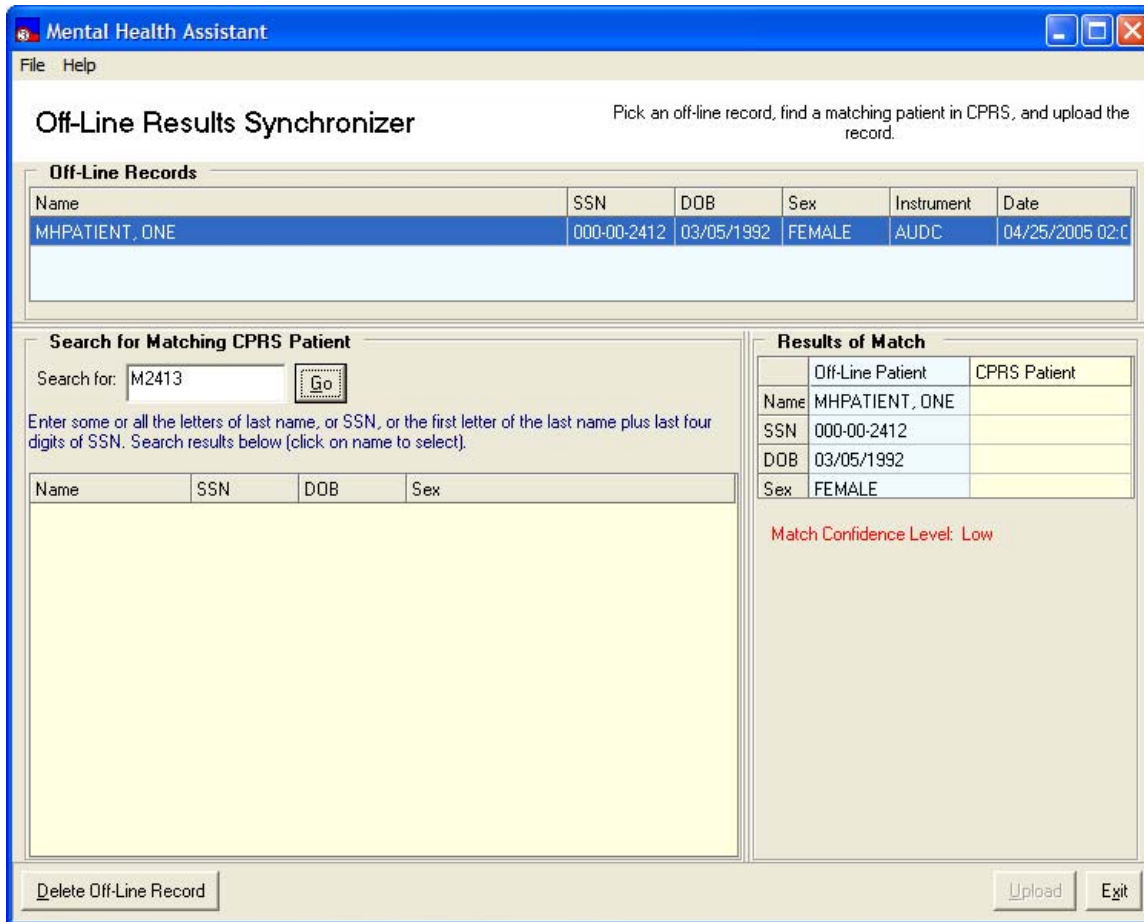
	Off-Line Patient	CPRS Patient
Name	MHPATIENT, ONE	MHPATIENT, ONE
SSN	000-00-2412	000-00-2412
DOB	03/05/1992	2/1/1922
Sex	FEMALE	FEMALE

Match Confidence Level: Good

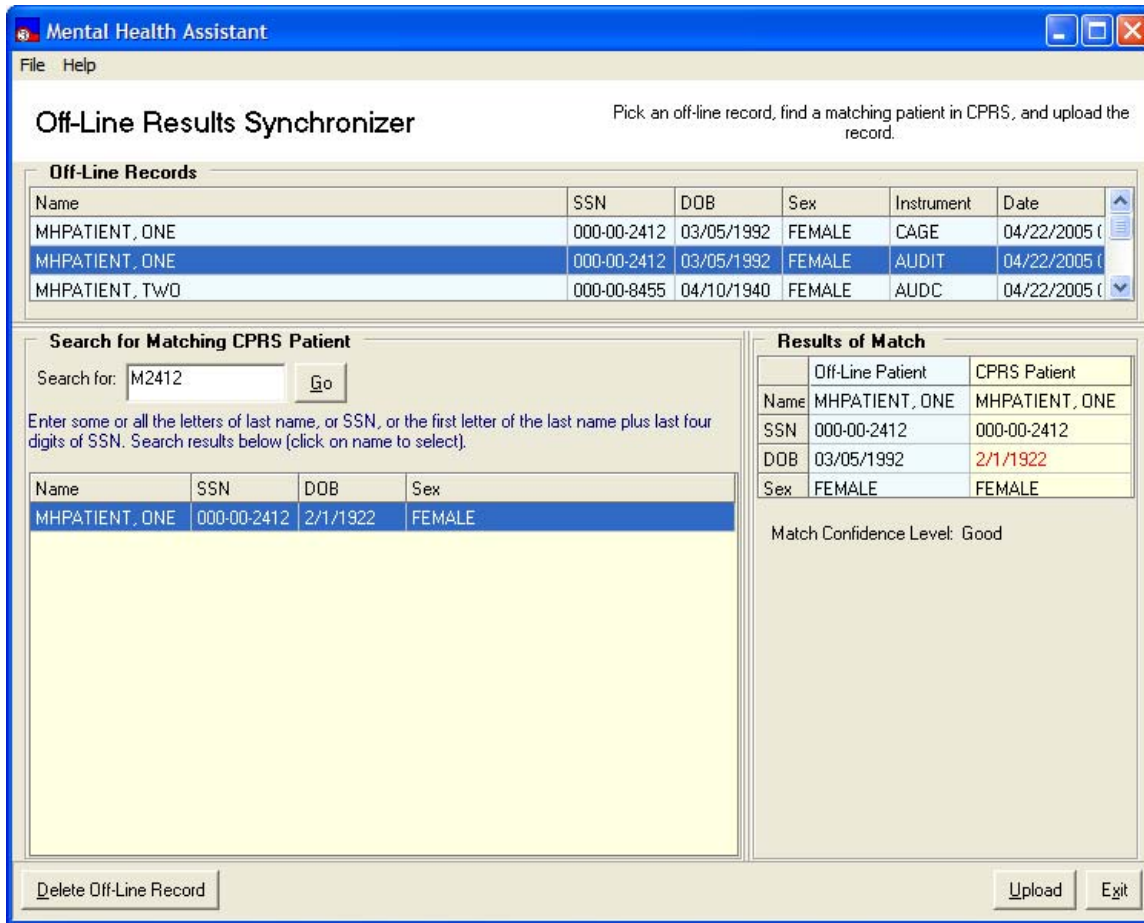
The "Results of Match" grid showing the Off-line and CPRS patients.

While MHA3 offers a calculated evaluation of the match, it is ultimately the user's responsibility to decide on the validity of a match before uploading results to VistA.

Example: A poor match: No patient was found in the VistA database that matches the search text. The “Search for” text filter must be changed, and a new search initiated. Try the last name.



Example: A good match: Three out of four fields match perfectly, and the search results list a single patient. It's possible that the unmatched field is the result of a typo or other type of data-entry mistake.

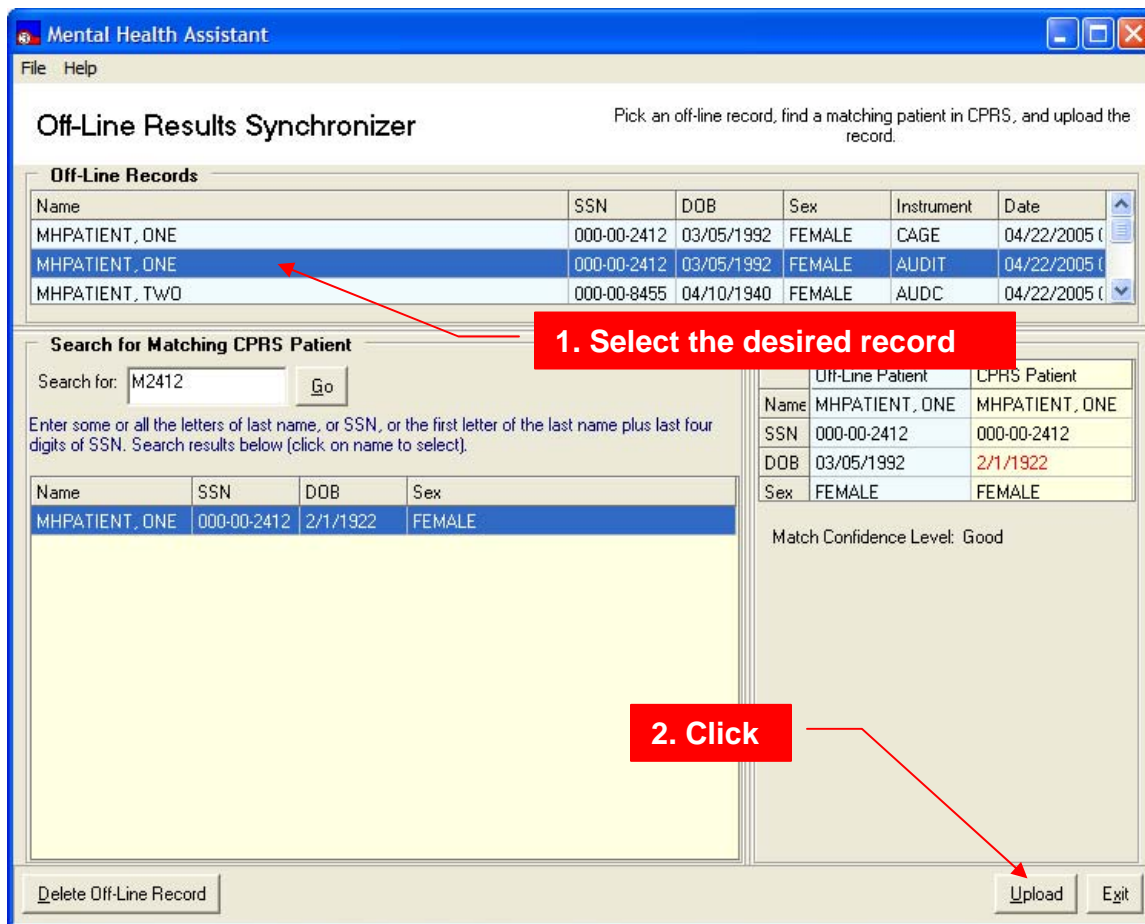


Uploading an Off-line Record to VistA

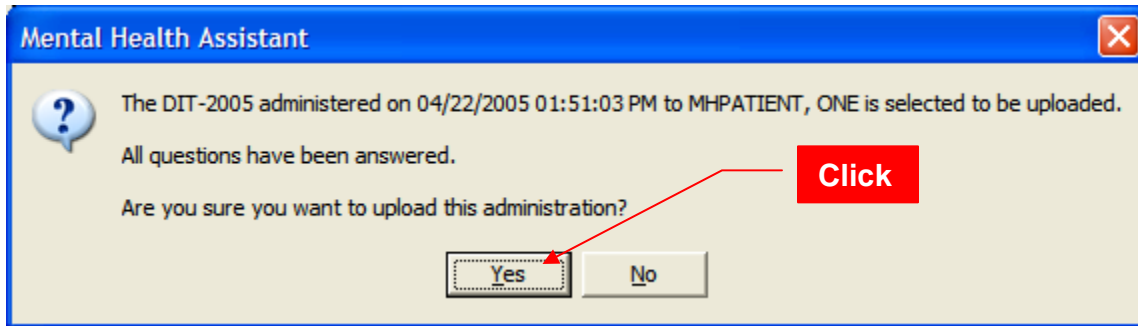
To upload a record to VistA:

1. Verify that the patient on the selected record is one that matches the CPRS patient.
2. **Click** on the **Upload** button.
3. **Click Yes** on the upload confirmation prompt
4. The additional required information prompt is displayed.
5. Enter the additional required information at the prompt, and then **click Ok**. The upload confirmation prompt is displayed.
6. The selected administration record is uploaded to VistA.
7. After uploading the record, the record is removed from the list of off-line records, which means that the record was deleted from the local file system too.

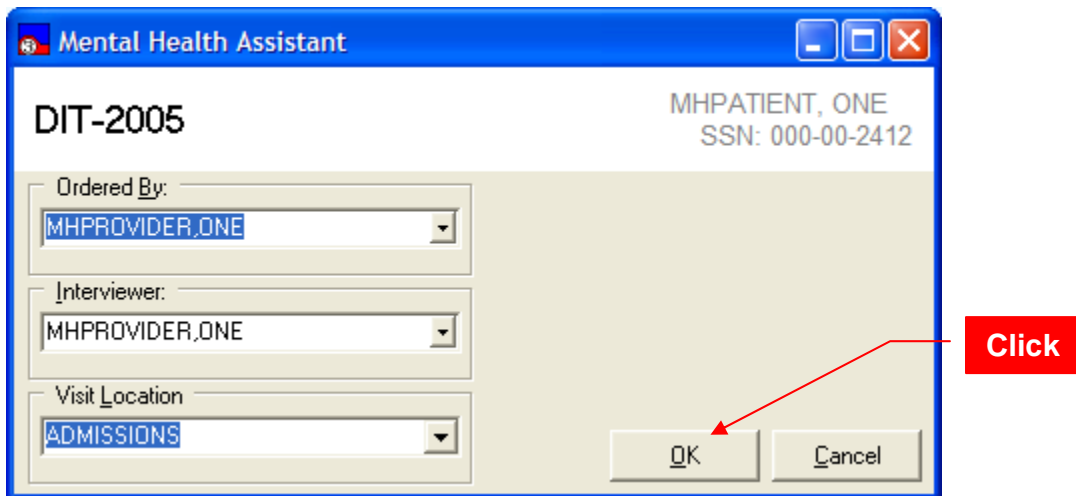
Example: To upload a record to VistA.



Example: Upload confirmation prompt. Responding with “No” will abort the upload.



Example: Additional required information prompt requesting Ordered By, Interviewer and Visit Location data. Change accordingly and then click Ok.



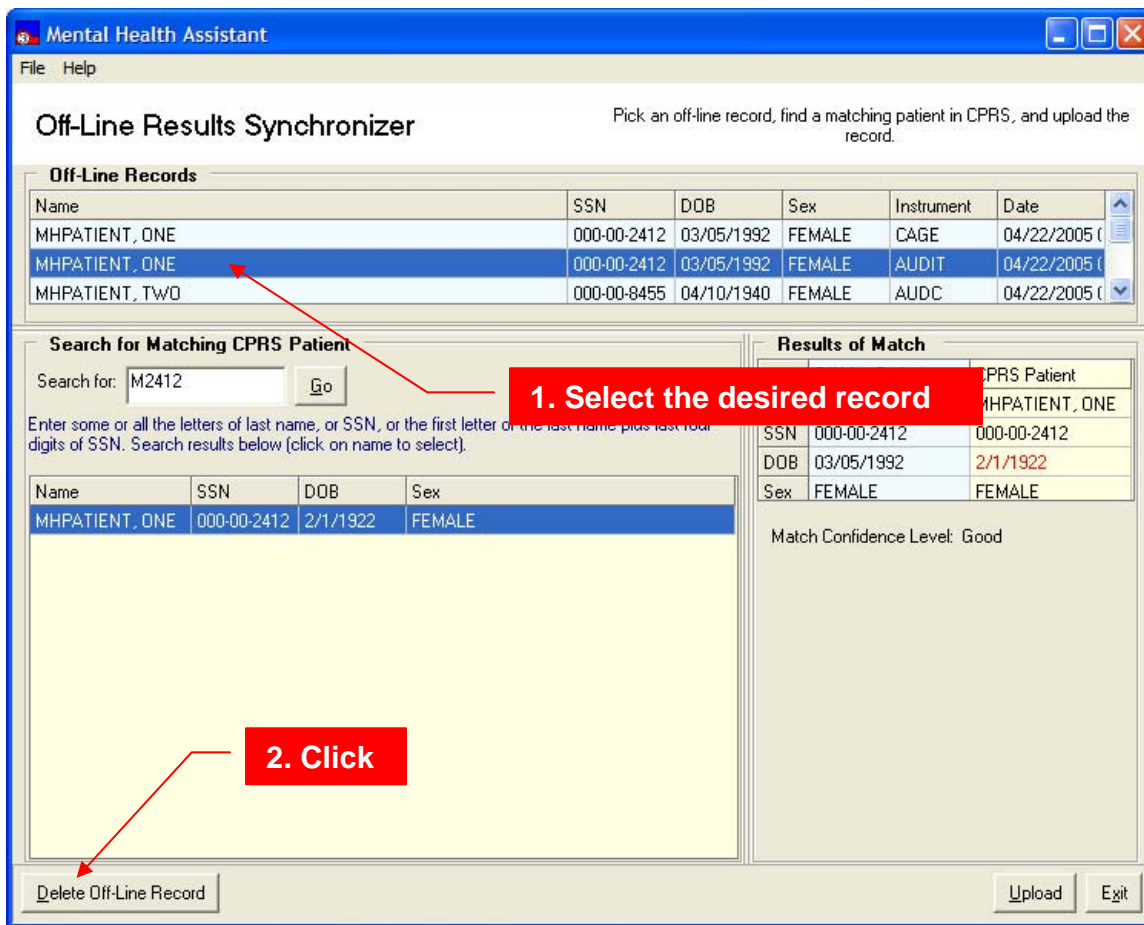
Deleting an Off-line Record

WARNING: Off-line records, by definition, have not been uploaded to VistA. Deleting a record cannot be undone.

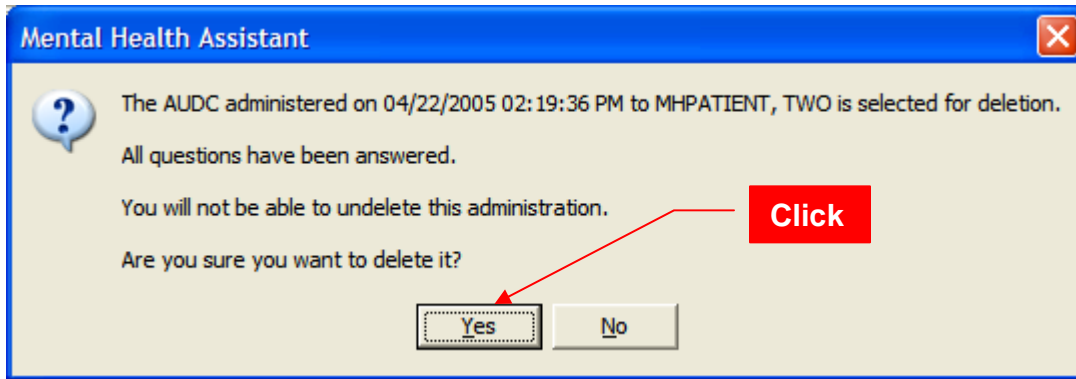
To delete an off-line record:

1. **Select** the record to be deleted.
2. **Click** on the **Delete off-line Record** button.
3. The delete confirmation prompt is displayed.
4. **Click** on the **Yes** button on the delete confirmation prompt.

Example: The selected record is removed from the list of records and from the local file system.

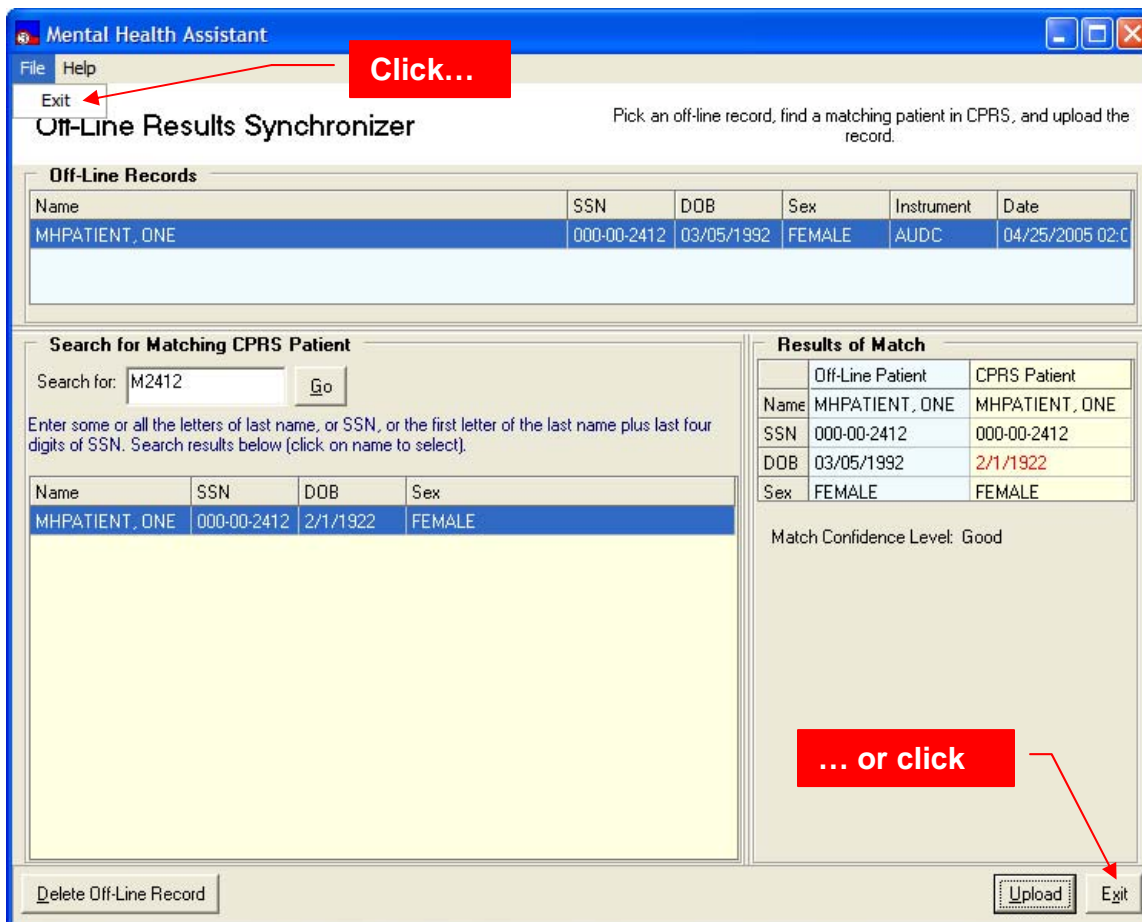


Example: Delete confirmation prompt. Clicking on No will abort deleting the record.



Exiting the Off-line Results Synchronizer Form

Example: To exit the **Off-line Results Synchronizer** form, **click** on the **Exit** button, or select **File|Exit** from the main menu, or press the escape key “ESC.” The Off-line Results Synchronizer form is closed and the MHA main form is displayed.



Single-Instrument Administrator Functions

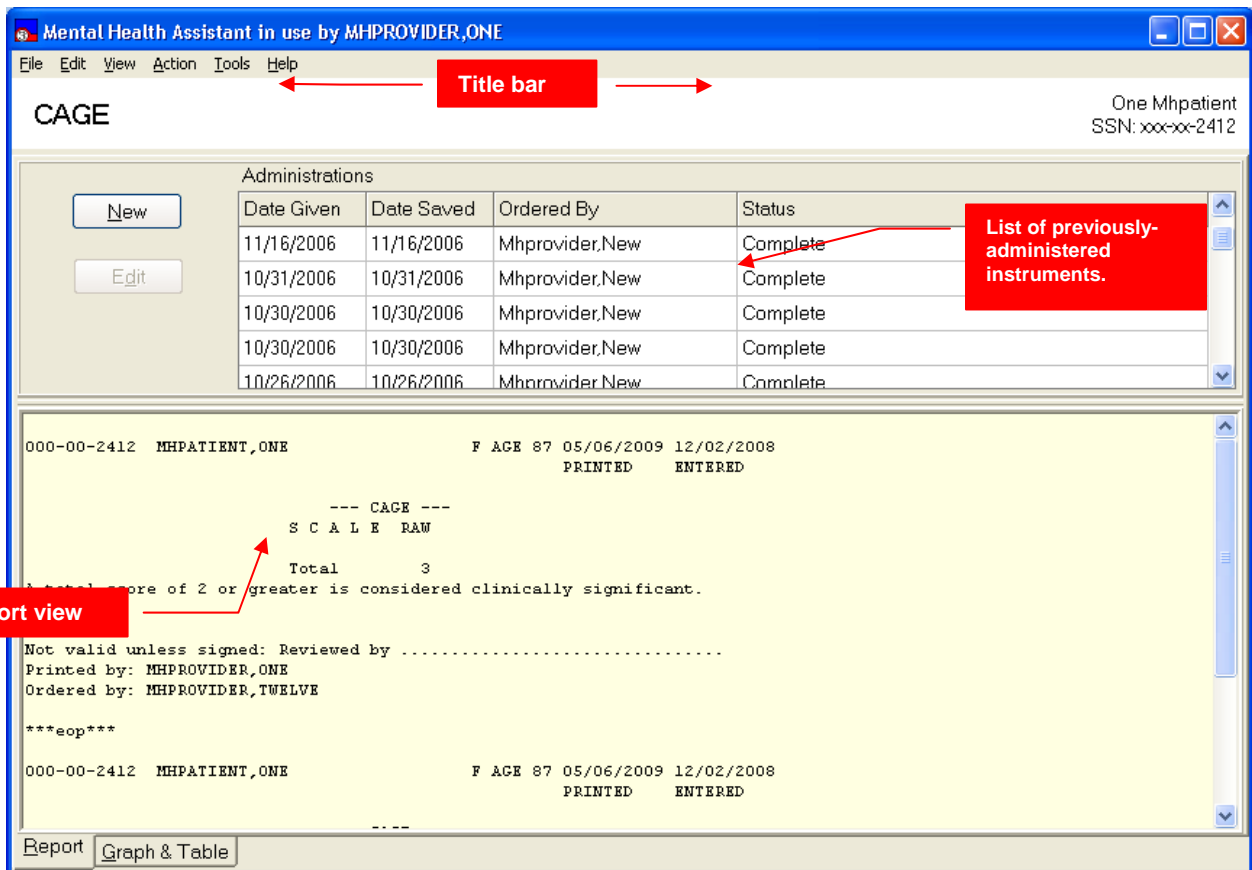
Orientation

The **Single-Instrument Administrator** is useful when the goal is to quickly and frequently administer only one instrument and there is no need to select from a list of other instruments or batteries.

Using the **Single-Instrument Administrator** bypasses the MHA Main form and the Instrument Administrator, proceeding directly to administering the instrument.

The **Single-Instrument Administrator** can only be invoked from the CPRS Tools menu and requires the Clinical Applications Coordinator to configure the Tools menu in VistA. See the Appendix E for instructions on how to add the name of the instrument to the CPRS Tools menu.

Example: The CAGE as viewed from the **Single-Instrument Administrator**.



Main Menu

The Main Menu offers user functions in the context of the Single-Instrument form, such as tools and help.

Selected Patient Identification Label

The Selected Patient Identification label displays information about who is the currently-selected patient within MHA. All functions performed in the Single-Question form will apply to this patient.

Instrument's Name

The Title Bar is a visual artifact that is used throughout MHA to display information about the context that applies to the current activity. In this case, the Title Bar displays the current instrument's name.

List of Previously-Administered Tests

This is the list of all tests that have been administered to the selected patient. The list is also used for selecting which administration to process.

Report View

The Report View displays an administration report in textual form, based on the patient's data stored in VistA for the selected administration.

The Navigation Tabs

These tabs are used to switch between report and graph/table view.

New button

The New button is used to start a new administration for the selected patient.

Edit Button

In the case that the selected administration is “editable”, based on how long ago it was administered, the Edit button becomes enabled and can be used to trigger editing of the selected administration.

Graph & Table

Graph View

Example: The **Graph View** displays a graphical representation of test data values over time.

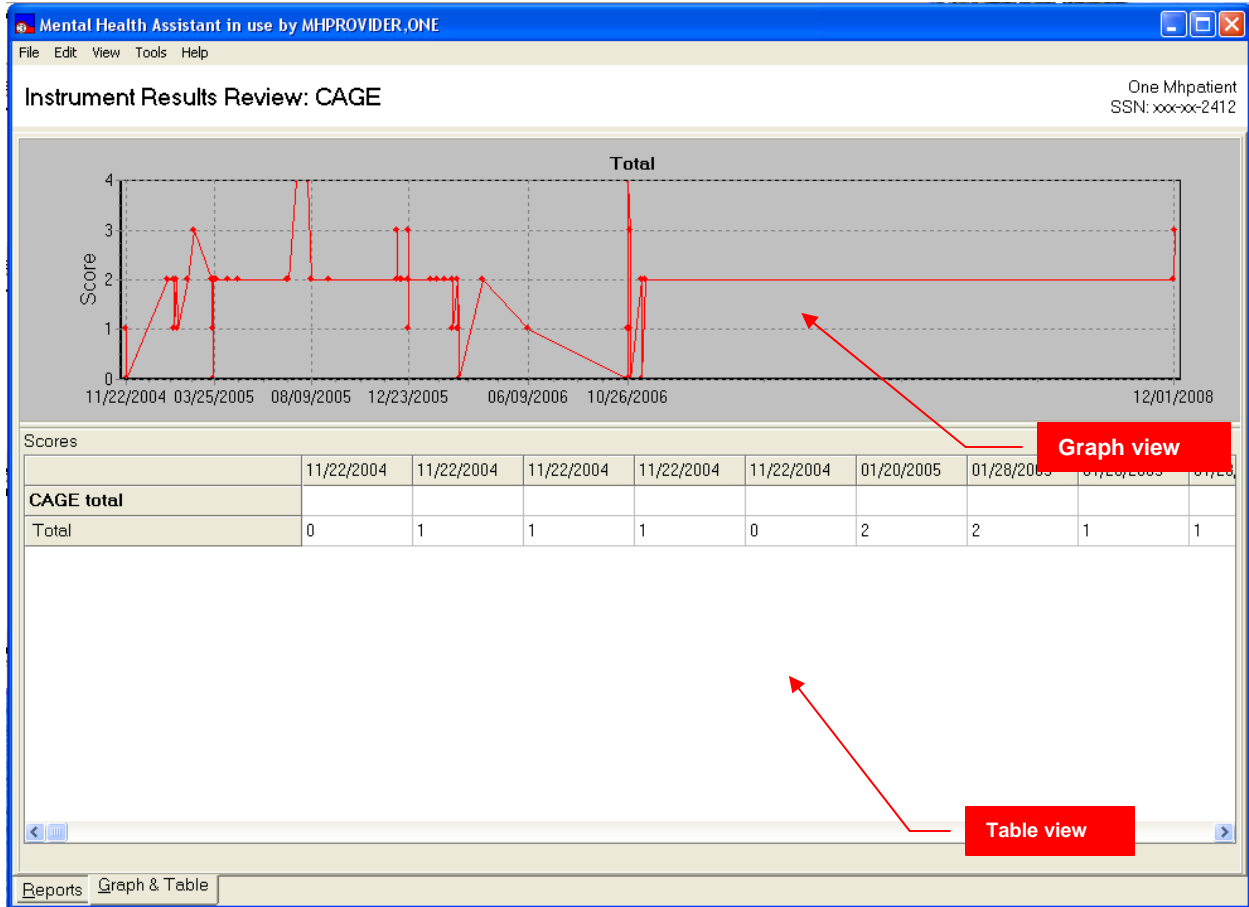
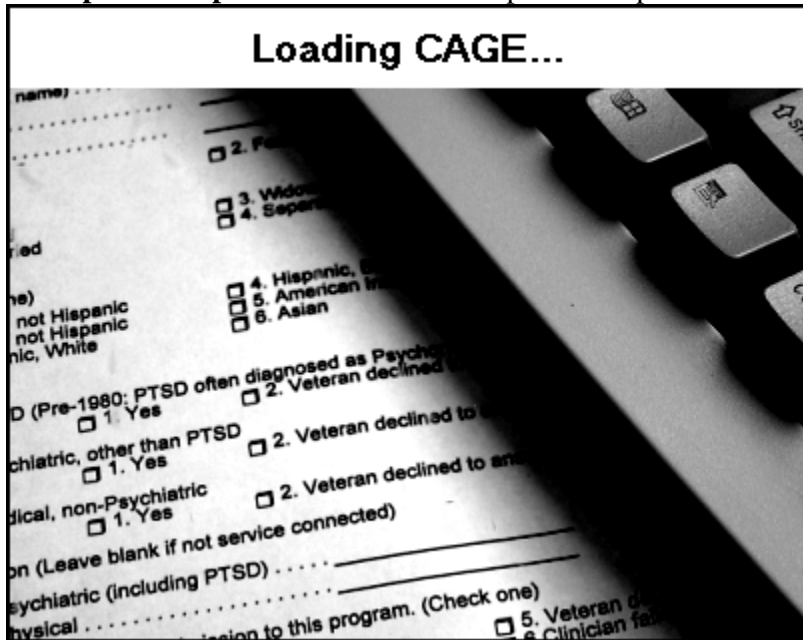


Table View

The **Table View** represents the same data as the Graph View, except that it is in table format. The Table View also functions as a means for selecting which administrations and characteristics to represent on the graph.

Example: The **Splash** screen is shown upon start up.



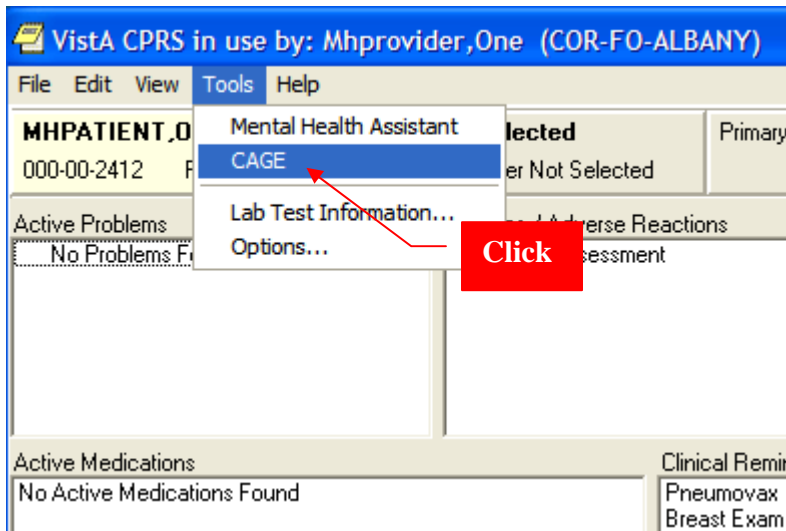
Invoking the Single-Instrument Administrator from the CPRS Tools Menu

The only way to invoke the **Single-Instrument Administrator** is from the CPRS Tools menu. In addition to the Mental Health Assistant, individual instrument types may be added to the CPRS tools menu, from which the **Single-Instrument Administrator** is started for any particular instrument type. To configure single instruments on the CPRS Tools menu, The Clinical Applications Coordinator needs to add a set of parameters to the user's Vista CPRS GUI Tools menu. See Appendix E for instructions.

In the following example, to start CAGE, start CPRS first. Then, once CPRS has settled, click on the **Tools** menu item, followed by a click on the **CAGE** menu item.

If CAGE starts normally, the "splash" form is displayed briefly, followed by the **Single-Instrument Administrator** form, as shown below.

Example: The CAGE instrument is started from the CPRS Tools menu.



Example: The **Single-Instrument Administrator** form for the CAGE.

Mental Health Assistant in use by MHPROVIDER, ONE

File Edit View Action Tools Help

CAGE One Mhpatient
SSN: xxx-xx-2412

Administrations

Date Given	Date Saved	Ordered By	Status
11/16/2006	11/16/2006	Mhprovider,New	Complete
10/31/2006	10/31/2006	Mhprovider,New	Complete
10/30/2006	10/30/2006	Mhprovider,New	Complete
10/30/2006	10/30/2006	Mhprovider,New	Complete
10/26/2006	10/26/2006	Mhrovider,New	Complete

000-00-2412 MHPATIENT, ONE F AGE 87 05/06/2009 12/02/2008
PRINTED ENTERED

--- CAGE ---
S C A L E RAW

Total 3
A total score of 2 or greater is considered clinically significant.

Not valid unless signed: Reviewed by

Printed by: MHPROVIDER, ONE
Ordered by: MHPROVIDER, TWELVE

****eop****

000-00-2412 MHPATIENT, ONE F AGE 87 05/06/2009 12/02/2008
PRINTED ENTERED

Report Graph & Table

The **Single-Instrument Administrator** form is designed for a single instrument. This form combines the **Instrument Administrator** and the **Instrument Results Review** functions on a single form. All of the functions on this form have been described in previous sections of this manual; for example, how to copy and paste reports, graphs, how to print results, append comments to a report, and so forth.

Starting a New Administration

Example: To start a new administration, **click on File | New...**

The screenshot shows the 'Mental Health Assistant' software window. The title bar reads 'Mental Health Assistant in use by MHPROVIDER,ONE'. The menu bar includes 'File', 'Edit', 'View', 'Action', 'Tools', and 'Help'. The 'File' menu is open, with 'New...' selected. A red callout box with the text 'Click here...' and an arrow points to the 'New...' option. The main window displays a table of 'Administrations' and a text-based report for patient '000-00-2412 MHPATIENT,ONE'.

One Mhpatient
SSN: xxx-xx-2412

Date Given	Date Saved	Ordered By	Status
11/16/2006	11/16/2006	Mhprovider,New	Complete
10/31/2006	10/31/2006	Mhprovider,New	Complete
10/30/2006	10/30/2006	Mhprovider,New	Complete
10/30/2006	10/30/2006	Mhprovider,New	Complete
10/26/2006	10/26/2006	Mhprovider,New	Complete

```
000-00-2412  MHPATIENT,ONE          F AGE 87 05/06/2009 12/02/2008
                                     PRINTED   ENTERED

      --- CAGE ---
      S C A L E  RAW
                Total      3
A total score of 2 or greater is considered clinically significant.

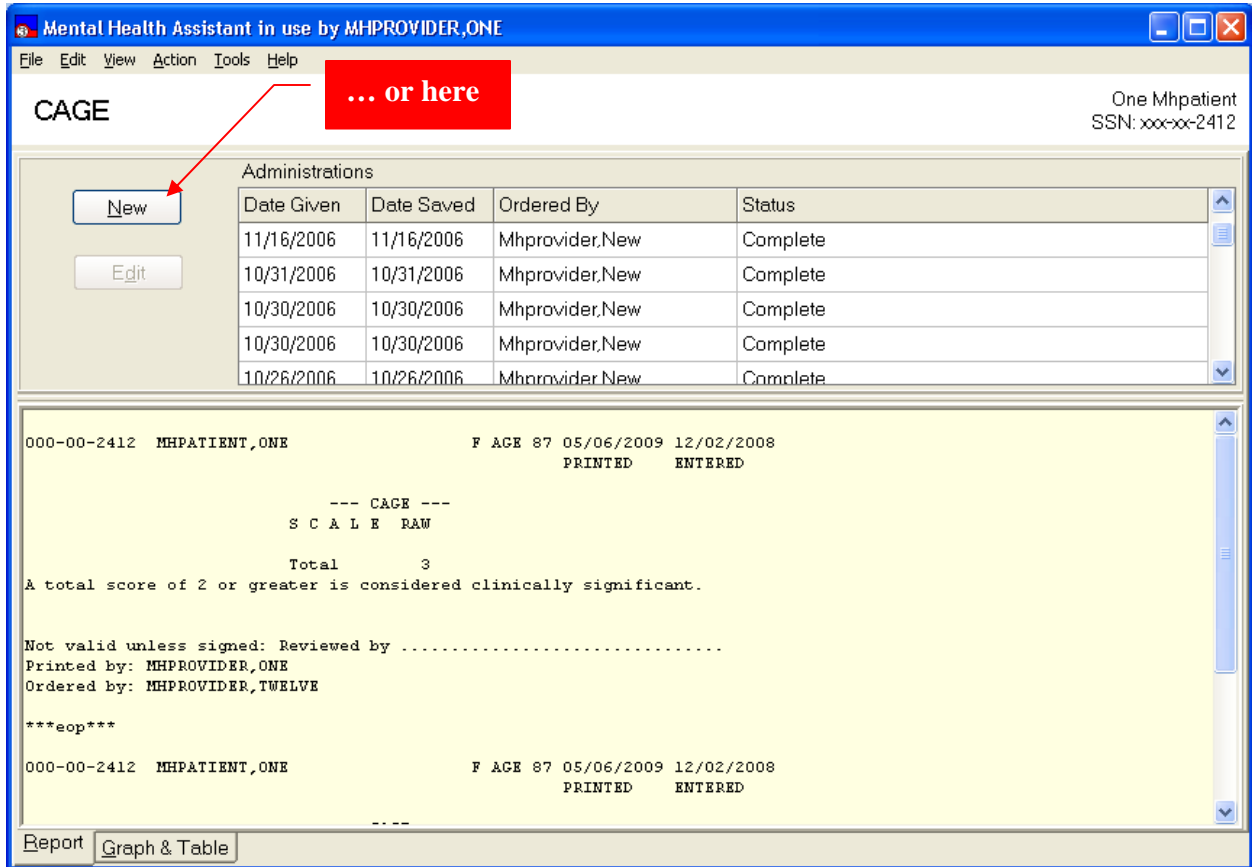
Not valid unless signed: Reviewed by .....
Printed by: MHPROVIDER,ONE
Ordered by: MHPROVIDER,TWELVE

***eop***

000-00-2412  MHPATIENT,ONE          F AGE 87 05/06/2009 12/02/2008
                                     PRINTED   ENTERED
```

Report Graph & Table

Example: To start a new administration click on the **New** button.



Once a new administration is selected, the identifying information for the administration is gathered by the next form. This is the same information needed for the administration of any instrument. The format is the same as that used by the **Instrument Administrator**.

Example: Identifying information for an administration of the CAGE.

The screenshot shows a software window titled "Mental Health Assistant in use by MHPROVI...". The window contains a form for administering the CAGE test. The form is titled "CAGE" and includes the following fields and options:

- Ordered By:** A dropdown menu with "MHPROVIDER,ONE" selected.
- Interviewer:** A dropdown menu with "MHPROVIDER,ONE" selected.
- Date of Administration:** A dropdown menu with "5/ 3/2011" selected.
- Visit Location:** A dropdown menu with "X-Ray Clinic" selected.
- Link With Consult (Optional):** An empty dropdown menu.
- Display:** Two radio button options: "All Questions at Once." (selected) and "One Question at a Time." (unselected).
- Buttons:** Two buttons at the bottom right: "Staff Entry" and "Patient Entry".

In the top right corner of the window, the text "Mhpatient, One" and "SSN: xxx-xx-4444" is displayed.

Switching to MHA Main Menu

Example: While the Single-Instrument Administrator initially bypasses MHA Main form, it offers a way to return to the Main form. **Click** on the **Action | MHA Main Menu** item.

The screenshot shows the 'Mental Health Assistant in use by MHPROVIDER,ONE' window. The 'Action' menu is open, highlighting 'MHA Main Menu'. A red arrow points to this menu item, and a red box with the word 'Click' is positioned next to it. Below the menu is a table of 'Administrations' with columns for Date Given, Date Saved, Ordered By, and Status. The table contains five rows of data. Below the table is a text area displaying a CAGE scale report for patient 000-00-2412, including a total score of 3 and a note that a score of 2 or greater is clinically significant. The report also includes fields for 'Printed by' and 'Ordered by'.

Date Given	Date Saved	Ordered By	Status
11/16/2006	11/16/2006	Mhprovider,New	Complete
10/31/2006	10/31/2006	Mhprovider,New	Complete
10/30/2006	10/30/2006	Mhprovider,New	Complete
10/30/2006	10/30/2006	Mhprovider,New	Complete
10/26/2006	10/26/2006	Mhrovider New	Complete

```
000-00-2412  MHPATIENT,ONE          F AGE 87 05/06/2009 12/02/2008
                                     PRINTED   ENTERED

      --- CAGE ---
      S C A L E  RAW

      Total      3
A total score of 2 or greater is considered clinically significant.

Not valid unless signed: Reviewed by .....
Printed by: MHPROVIDER,ONE
Ordered by: MHPROVIDER,TWELVE

****eop****

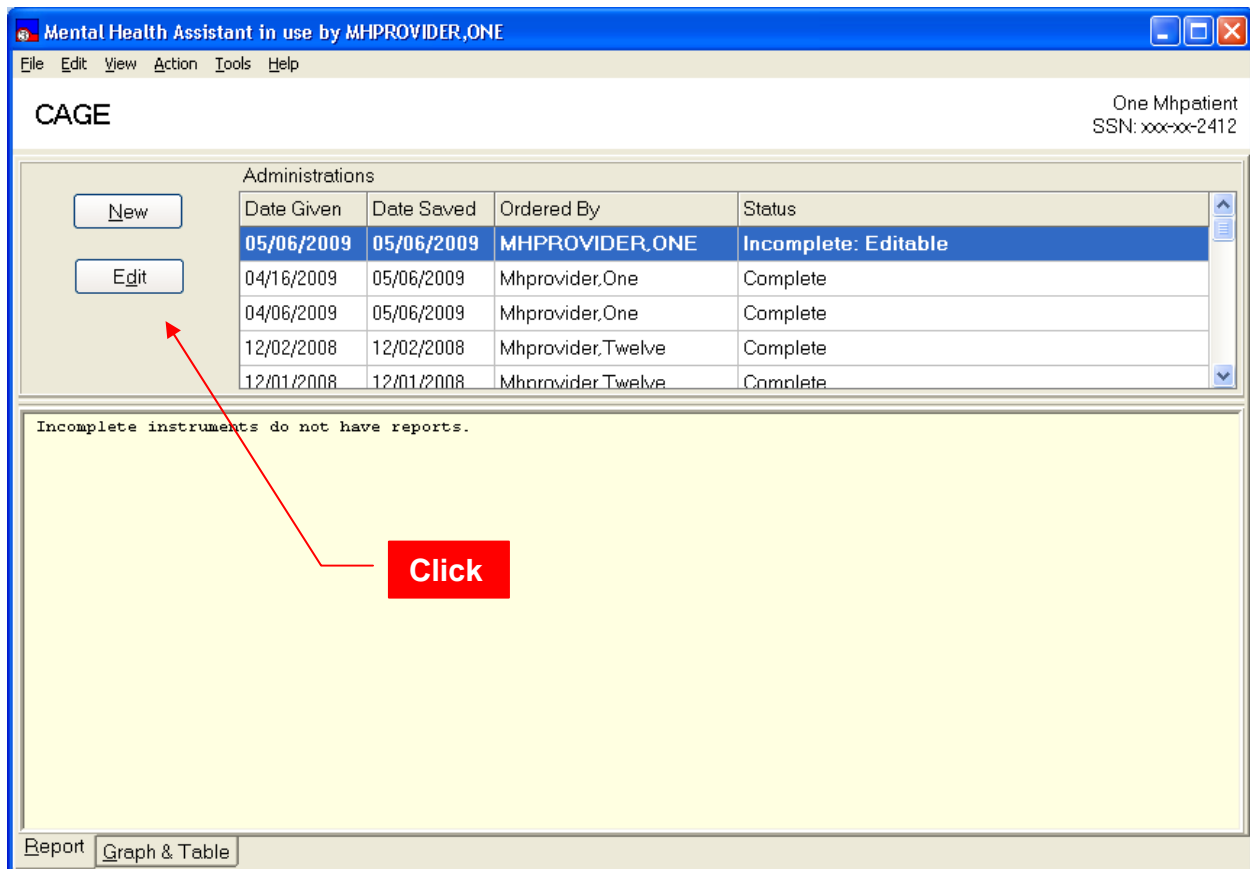
000-00-2412  MHPATIENT,ONE          F AGE 87 05/06/2009 12/02/2008
                                     PRINTED   ENTERED
```

Editing an Existing Editable Administration

To edit an administration:

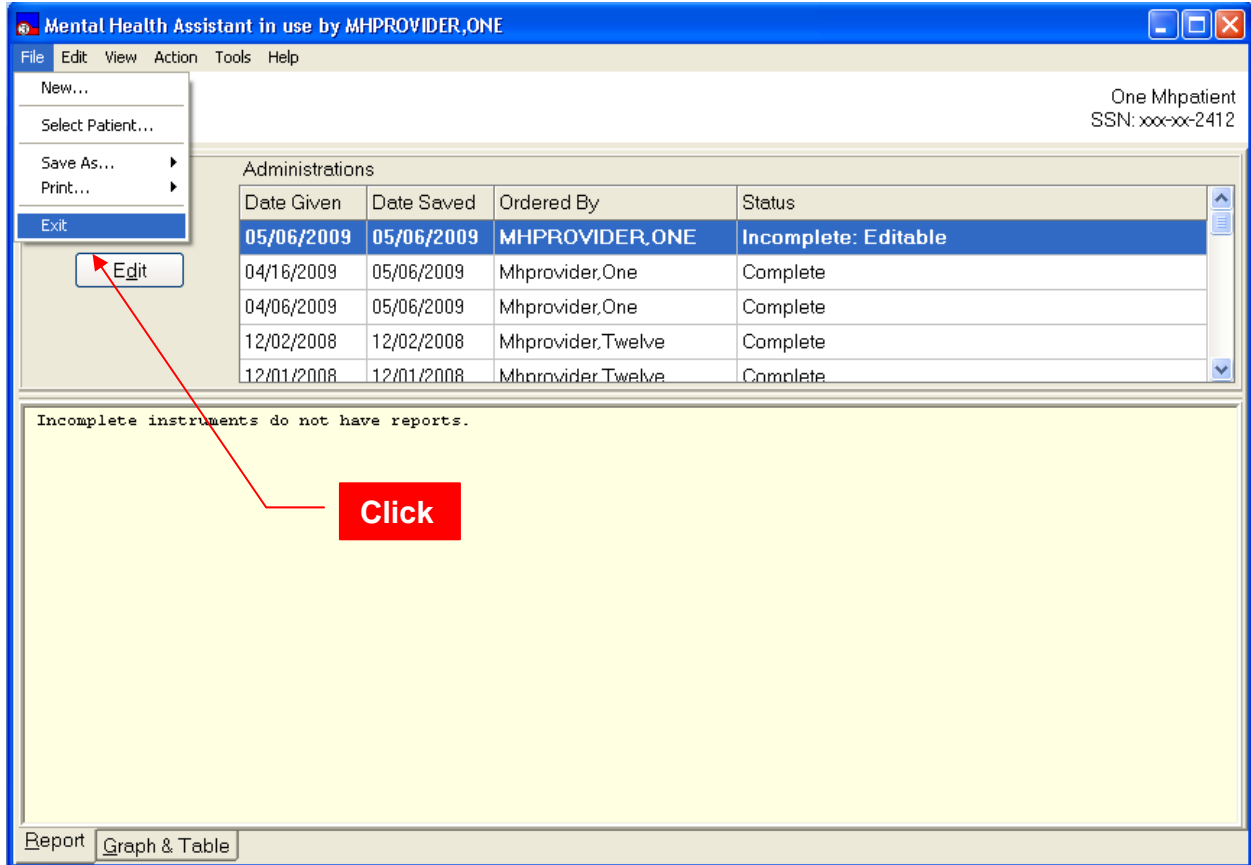
1. If the selected administration is editable the **Edit** button will be enabled.
2. Find and select an editable administration.
3. **Click** on the **Edit** button.
4. Administrations older than twenty-four hours are not editable.

Example: Editing an administration.



Exiting the Single Instrument Administrator Form

Example: To exit the **Single-Instrument Administrator** form, click on **File | Exit** menu item. The Single Instrument Administrator form closes and the user is returned to the MHA Main form.



Glossary

The following terms are associated with the Mental Health Assistant 3 software application release:

TERMS	DESCRIPTIONS
API	Application Programmer Interface
ASI	Addiction Severity Index
CLIENT	A computer that accesses shared network resources provided by another computer (called a server).
CLOSE	Closes the window. If there are any changes that have not been saved, you will get a confirmation message asking you if you want to continue without saving; save before exiting; or cancel the close action and return to the window.
CPRS	Computer Patient Record System
DBIA	Database Integration Agreement
DESKTOP	The background on your monitor, on which windows, icon, and dialog boxes appear.
EDIT BOX	This is a box where the user can type in free text using the keyboard.
ELEMENT NAME	Globally unique descriptive name for the field.
ENHANCEMENT	An 'enhancement' to an already existing Class I software package is the introduction of new or improved functionality.

TERMS	DESCRIPTIONS
FTP	File Transfer Protocol
GAF	Global Assessment of Functioning
GROUP	In User Manager, an account containing other accounts that are called members. The permissions and rights granted to a group are also provided to its members, which makes groups a convenient way to grant common capabilities to collections of user accounts. For Windows NT, groups are managed with User Manager. For Windows NT Server, groups are managed with User Manager of Domains.
GUI	Graphical User Interface.
HL7	Health Level 7
IRM	Information Resources Management
LENGTH (LEN)	The maximum number of characters that one occurrence of the data field may occupy.
LIST BOX	Box that shows a list of items. If more items exist than can be seen in the box, a scroll bar appears on the side of the box. Selecting an entry from a list box requires either double clicking the entry or single clicking the entry and pressing the spacebar.
MHP	Mental Health Package

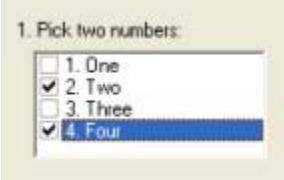
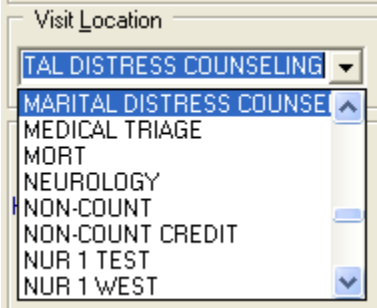
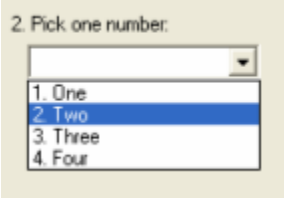

TERMS	DESCRIPTIONS
OK COMMAND BUTTON	Adds the new entry after the data has been entered.
OPTION BUTTON	A small round button that appears in a dialog box. Within a group of related option buttons, you can select only one button at time.
PACKAGE	An icon that represents an embedded or linked object. When you choose the package, the application that was used to create the object either plays the object (such as sound file) or opens and displays the object.
PASSWORD	A unique string of characters that must be entered before a logon or an access is authorized. A password is a security measure used to restrict logons to user accounts and access to computer systems and resources. For Windows NT, a password for a user account can be up to 14 characters long and is case-sensitive.
PATH	Specifies the location of a file within the directory tree. For example, to specify the path of a file named README.WRI located in the WINDOWS directory on drive C, you would type c:\windows\readme.wri .
PID	Patient Identification

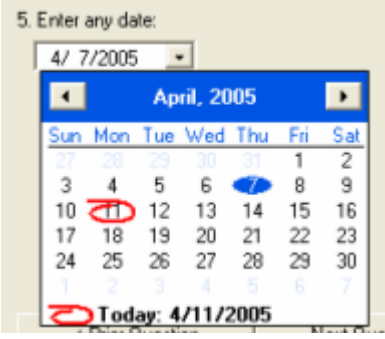
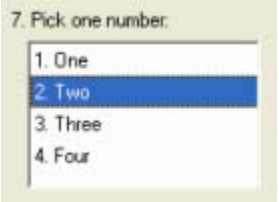
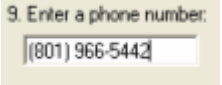

TERMS	DESCRIPTIONS
PREVIOUS	Previous enable the user to return to a previously answered question so the answer can be changed.
PSYCHOLOGIST	Performs patient care duties in accordance with Clinical Privileges as assigned or granted by the appropriate governing committee in the area of Psychology and Mental Health. This may include individuals, family and group counseling and psychotherapy, assertiveness, and other behavior training, etc.
RADIO BUTTON	Radio buttons appear in sets. Each button represents a single choice and normally only one button may be selected at any one time. For example, MALE or FEMALE may be offered as

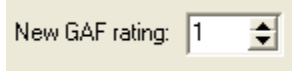
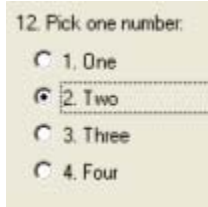

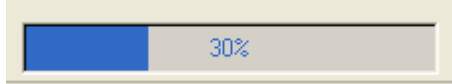
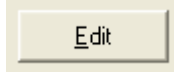

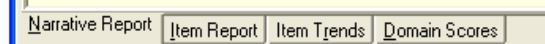
	choices through two radio buttons. Click in the button to select it.
RIGHT MOUSE BUTTON or SHIFT F10	You may click the right mouse button or press Shift F10 for a popup box of menu items.
RPC BROKER	Remote Producers Call Broker
RPC	Remote Producers Call, a message-passing facility that allows a distributed application to call services available on various computers in a network. Used during remote administration of computers.
Save to File (Save AS)	This is a standard feature of Microsoft applications where the user can type the name of the file to be saved. The user can also define the drive and directory where the file is to be saved. In some cases the file name presented in the edit box is sufficient and the user merely needs to click on the “Ok” button to save the file.
SHARE	To make resources, such as directories, printers, and ClipBook pages, available to network users.
Status Bar	A line of information related to the application running in the window. Usually located at the bottom of a window. Not all windows have a status bar.
Task List	A window that shows all running applications and enables you to switch between them. You can open Task List by choosing Switch To from the Control menu or by pressing CTRL=ESC.
Tab Key	Use the TAB key or the mouse to move between fields. Do not use the RETURN key. The RETURN key is usually reserved for the default command button or action (except in menu fields).
TCP/IP	Transmission Communication Protocol/Internet Protocol
TEXT BOX	Type the desired characters into the edit box. The selected entry will not be effective until you tab off or exit from the text box.

TOOLBAR	A series of shortcut buttons providing quick access to commands. Usually located directly below the menu bar. Not all windows have a toolbar.
TRANSPORT LAYER	The fourth layer of the OSI model. It ensures that messages are delivered error-free, in sequence, and with no losses or duplications. This layer repackages messages for their efficient transmission over the network. At the receiving end, the Transport layer unpacks the message, reassembles the original messages, and sends an acknowledgement of receipt.
UID	Unique Identifier
VA	Veterans Administration
VHA	Veterans Health Administration
VAMC	Department of Veterans Affairs Medical Center
VERA	Veterans Equitable Resource Allocation
VISN	Veterans Integrated Service Network
VistA	Veterans Health Information Systems and Technology Architecture
WORKSTATION	In general, a powerful computer having considerable calculating and graphics capability. For Windows NT, computers running the windows NT operating systems are called workstations, as distinguished from computers running Windows NT Server, which are called servers.

Glossary of Graphical User Interface (GUI) components used in MHA.

Component/Terms	Descriptions
<p>Multiple-Selection List Box</p> 	<p>A Multiple-Selection List Box permits selection of one or more choices from a list of choices. Simply click on the little boxes next to the selection's text and a check-mark symbol appears in the box, indicating your selection.</p>
<p>Drop-Down Combo Box</p> 	<p>A Drop-Down Combo Box contains a “hidden” list that is not visible until the user clicks on the button with the down-arrow icon. Then, the list appears and an item can be selected from the list. Click on the item that you wish to select. Drop-Down Combo Boxes also accept typed text in the component's Text Box. Some Drop-Down Combo Boxes are used to display data directly from VistA files, such as a list of staff members.</p>
<p>Drop-Down List Box</p> 	<p>A Drop-Down List Box contains a “hidden” list that is not visible until the user clicks on the button with the down-arrow icon. Then, the list appears and an item can be selected from the list. Click on the item that you wish to select. Unlike Drop-Down Combo Boxes, no text can be entered into the Text Box part of the component.</p>
<p>Text Box</p> 	<p>Text Boxes allow for typing a relatively small amount of text—generally, the length of a single line of text, or less. Normally, Text Boxes accept any text characters typed into them. However, in some cases, Text Boxes are restricted to accept only a pre-defined group of characters. For instance, only accepting integer or currency values.</p>

<p>Date-Picker</p> 	<p>A Date-Picker component offers two ways of entering date information. The first is to type in the date in the Text Box part of the component while observing the displayed format. Another way to pick a date is to click on the button with the down-arrow icon, which triggers the display of the visual calendar. By default the calendar displays the current month. Other dates can be navigated to by clicking on the name of the month, the year, and the side-arrows. To pick a date, click on the day number on the calendar.</p>
<p>Single-Selection List Box</p> 	<p>A Single-Selection List Box displays all available choices at once, from which only one of the mutually-exclusive selections may be made.</p>
<p>Masked Text Box</p> 	<p>A Masked Text Box is a special kind of Text Box in that it adds pre-configured formatting to the data entered into the component. In this example, the “() –“ formatting elements were correctly placed and automatically added to the phone number as the user typed in only the numbers.</p>
<p>Multiple-Line Text Box</p> 	<p>A Multiple-Line Text Box functions in the same manner as a single-line Text Box, but provides enough space for entering large amounts of text.</p>

<p>Spin Box</p> 	<p>Spin Boxes provide for the quick entry and verification of integer data. The buttons with the up and down arrowheads respectively increase or decrease the value of the displayed integer. Additionally, an integer value can be typed into the Text Box holding the integer value.</p>
<p>Option Buttons (Radio Group)</p> 	<p>Option Buttons display all available choices at once, from which one of the mutually-exclusive selections may be made. This is the most commonly-used component in Mental Health Assistant. To make a selection, click on one of the white circles, which will then display a black dot in its center.</p>
<p>Slider (Track bar)</p> 	<p>A Slider is a visual way of displaying a range from which to select a single value. The accompanying labels offer information about what the range limits mean.</p>
<p>Progress Indicator</p> 	<p>Indicates the amount of progress transpired during time-consuming events.</p>
<p>Command Button</p> 	<p>A button that executes a specific function when pressed.</p>
<p>Menu Button</p> 	<p>A button with more than one choice</p>
<p>Tabs</p> 	<p>A navigation method similar to tabs on a writing notebook.</p>

Appendix A

This is a list of shortcut keys used by the Mental Health Assistant (MHA), organized by the form that has focus.

Shortcut Keys

Main Menu

Alt-F	File Menu
S	Select Patient
U	Upload Results
X	Exit, close application
Alt-T	Tools Menu
M	METRIC Instrument Reviews
O	Options
Alt-H	Help Menu
O	Online Support
A	About
Alt-I or I	Instrument Administrator
Alt-R or R	Instrument Results Review
Alt-A or A	Addiction Severity Index Manager
Alt-G or G	Global Assessment of Functioning Manager
Alt-F4	Exit, close application

Instrument Administrator

Alt-F	File Menu
S	Select Patient
P	Print a blank instrument
X	Exit
Alt-T	Tools Menu
M	METRIC Instrument Reviews
B	Battery Wizard
O	Options
Alt-H	Help Menu
I	Instrument Description
O	Online Support
A	About
Alt-B	Instruments Ordered By
Alt-I	Interviewer
Alt-D	Date of Administration

Alt-L	Visit Location
Alt-W	Link with consult
Alt-A	Available Instruments and Batteries
Alt-C	Instruments Chosen
Alt-O	One Question at a Time
Alt-Q	All Questions at Once
Alt-P	Patient Entry
Alt-S	Staff Entry
ESC	Exit (returns to Main Menu)

Instrument Results Review

Alt-F	File Menu
S	Select Patient
A	Save As sub-menu
R	Report
T	Table
G	Graph
P	Print sub-menu
R	Report
T	Table
G	Graph
X	Exit
Alt-E	Edit Menu
C	Copy sub-menu
R	Report
T	Table
G	Graph
Alt-V	View Menu
R	Reports
G	Graph and Table
S	Special Results
V	Show values on graphs
Alt-T	Tools Menu
A	Append Comments
D	Delete administration
M	METRIC Instrument Reviews
S	Special Results Wizard
O	Options
Alt-H	Help Menu
O	Online Support
A	About
Alt-R	Reports
Alt-G	Graph and Table
Alt-S	Special Results

ESC	Exit (returns to Main Menu)
About	
Alt-O	OK, exit
ESC	Exit

Battery Wizard

Alt-F	File Menu
N	New
R	Rename
D	Delete
X	Exit
Alt-H	Help Menu
I	Instrument Description
O	Online Support
A	About
Alt-A	Available Instruments and Batteries
Alt-N	Name of Battery
Alt-I	Instruments in Battery
Alt-S	Save
ESC	Exit

One Question at a Time

Alt-F	File Menu
B	Print blank
C	Cancel
Alt-V	View Menu
	Varies based on instruments being administered
Alt-T	Tools Menu
M	METRIC Instrument Reviews
O	Options
Alt-H	Help
O	Online Support
A	About
Alt-P	Prior Question
Alt-Q	Next Question
Alt-R	Review Answers
Alt-C	Cancel
Alt-N	Finish
Alt-U	Use Speed Tab
ESC	Exit

Review Answers

Alt-F	File Menu
-------	-----------

X	Exit
Alt-H	Help Menu
O	Online Support
A	About
Alt-C	Change Answer
Alt-X	Exit
ESC	Exit

All Questions at Once

Alt-F	File Menu
B	Print blank
X	Exit
Alt-V	View Menu
	Varies based on instruments being administered
Alt-T	Tools Menu
M	METRIC Instrument Reviews
O	Options
Alt-H	Help Menu
O	Online Support
A	About
Alt-C	Cancel
Alt-N	Finish
Alt-U	Use Speed Tab
ESC	Exit

User Preferences

Alt-F	Font tab
Alt-O	CPRS Font
Alt-W	Windows Font
Alt-N	New Font
Alt-H	Highlight Color tab
Alt-M	Miscellaneous tab
Alt-V	Provide visual feedback
Alt-R	Screen reader
Alt-S	Speed tab
Alt-I	Display image
Alt-O	Maintain original font
Alt-U	Menu tab
Alt-C	Cancel

Alt-D	Done
ESC	Exit

Append Test Comments

Alt-F	File Menu
S	Save
X	Exit
Alt-H	Help Menu
O	Online Support
A	About
Alt-C	Cancel
Alt-S	Save and exit
ESC	Exit

Special Results Wizard

Alt-F	File Menu
X	Exit
Alt-H	Help Menu
I	Instrument Description
O	Online Support
A	About
Alt-A	Available instruments
Alt-I	Instruments in Special Results
Alt-S	Save
ESC	Exit

ASI Main Menu

Alt-F	File Menu
N	New ASI sub-menu
F	Full
L	Lite
U	Follow-Up
S	Select Patient
A	Save As sub-menu
R	Report/Table
G	Graph
P	Print sub-menu
R	Report/Table
G	Graph
X	Exit
Alt-E	Edit Menu
C	Copy sub-menu
R	Report/Table
G	Graph

	A	ASI
Alt-V		View Menu
	N	Narrative Report
	I	Item Report
	R	Item Trends
	D	Domain Scores
Alt-T		Tools Menu
	O	Options
Alt-H		Help Menu
	O	Online Support
	A	About
Alt-W		New button sub-menu
	F	Full
	L	Lite
	U	Follow-Up
ESC		Exit (returns to Main Menu)

ASI Data Entry

Alt-F		File Menu
	E	Exit
Alt-T		Tools Menu
	O	Options sub-menu
	H	Highlight Color
	T	Speed Tab
	S	Show hints
	D	Default Window Size/Position
Alt-F4		Exit
ESC		Exit
F1		Help for the highlighted item
Alt-H		Help Menu
	C	Contents
	I	Index
	O	Online Support
	A	About
Alt-A		Family History Section
Alt-D		Drug/Alcohol Use Section
Alt-E		Employment/Support Section
Alt-G		General Information Section
Alt-I		Spiritual Comments Section

Alt-L	Legal Status Section
Alt-M	Medical Status Section
Alt-P	Psychiatric Status Section
Alt-R	Leisure Comments Section
Alt-S	Family/Social Relationships Section

ASI Options

Alt-C	Cancel
Alt-D	Done
ESC	Exit

ASI Signature

Alt-C	Cancel
Alt-O	OK
ESC	Exit

ASI Termination

Alt-R	Return to ASI
Alt-E	Exit
Alt-F	Finish later
Alt-S	Save and Sign

GAF Manager

Alt-F	File Menu
S	Select Patient
R	Save New Rating
A	Save As sub-menu
G	Graph
T	Table
P	Print sub-menu
G	Graph
T	Table
X	Exit
Alt-E	Edit Menu
C	Copy sub-menu
G	Graph
T	Table
Alt-V	View Menu
S	Show values on graph
Alt-A	Action Menu
S	Save New Rating
R	Mark Rating "Entered in Error"
Alt-T	Tools Menu
O	Options

Alt-H	Help Menu
O	Online Support
A	About
C	Copyright Info
Alt-R	Mark Rating "Entered in Error" or Change Delete Rating
Alt-D	Delete Rating
Alt-N	New GAF Rating
Alt-D	Evaluation Date
Alt-S	Save New Rating
ESC	Exit (returns to Main Menu)

Edit GAF

Alt-D	Delete Rating
Alt-H	Change Rating
Alt-C	Cancel
Alt-O	OK
ESC	Exit

Off-line Results Synchronizer

Alt-F	File Menu
E	Exit
Alt-H	Help Menu
O	Online Support
A	About
Alt-S	Search for
Alt-G	Go (Start search)
Alt-D	Delete Off-Line record
Alt-U	Upload
Alt-X	Exit

Appendix B

How to co-sign a progress note generated by MHA

The following conditions are needed to generate a co-signer in TIU notes:

1. A progress note needs to be generated. (Some instruments do not generate progress notes.)
2. The person who is using MHA must be someone who needs a co-signer, like a student.

When an instrument is completed in MHA, and the two conditions are met, this dialog will appear:

Save Progress Note to Vista

The data for this administration has been saved in Vista.
Do you wish to:

A co-signer is required. Select from:

STUDENT, DDD

Save standard progress note

Edit then save progress note

Do not save progress note

Click

Select the person to co-sign the progress note from the drop-down list presented in the combo box. Once selected, press the button to either save the standard progress note, or edit the progress note before saving it.

Appendix C

How to remove patient data that was entered in error: VistA menu instructions

There are two methods to remove the data from an instrument's administration. The first uses the MHS Manager Functions in VistA and the second is available in MHA's **Instrument Review Results** form, described previously. In either case, this function can be performed only by individuals who have access to the MHS Manager Functions in VistA, usually a Clinical Application Coordinator (CAC).

IMPORTANT: Data removed by either method will only remove the results of the administration of the instrument. Any progress notes, or consult notes, etc., will not be removed. Here are the steps to follow in the "roll-and-scroll" version (the user responses are shown in red):

```
*** MENTAL HEALTH ***
MHS MANAGER FUNCTIONS

1  Inpatient Features management functions...
2  Mental Health System site parameters...
3  MHA2 Psych test utilities...
4  Move crisis notes and messages
5  Seclusion/Restraint Management Utilities...
6  Decision Tree Shell
7  MHA3 Utilities...

Select MHS Manager Option: 7 MHA3 Utilities
*** Mental Health ***
MHA3 Utilities
1  Print Test Form
2  Detailed Definition
3  Delete Patient Data
4  Stop/Re-Start Progress Notes for an Instrument
5  Exempt Test
6  Test Usage
7  XML Output
8  MHA3 HL7 Utilities...

Select MHA3 Utilities Option: 3 Delete Patient Data
```

```
Delete Patient Data

Select PATIENT NAME:  MHPATIENT,ONE   *SENSITIVE*  *SENSITIVE*
NO  EMPLOYEE

***WARNING***
***RESTRICTED RECORD***
*****
* This record is protected by the Privacy Act of 1974 and the Health *
* Insurance Portability and Accountability Act of 1996. If you elect *
* to proceed, you will be required to prove you have a need to know. *
* Accessing this patient is tracked, and your station Security Officer *
```

* will contact you for your justification. *

Do you want to continue processing this patient record? No// Y (Yes)

Message(s) are on file for MHPATIENT,ONE

Last message was entered on DEC 15, 1992

Enter RETURN to continue or '^' to exit:

Delete MHA3 data? No// YES

PHQ-2 on JAN 07, 2009@09:56:27 by MHPROVIDER,ONE

Delete? No// YES

Are you sure? No// YES ***Deleted

AUDC on NOV 26, 2008@14:28 by MHPROVIDER,ONE

Delete? No// ^

Appendix D

Some sites have reported difficulty installing SecureDesktop as the Windows registry is blocked by McAfee HIPS. Uninstalling HIPS allowed the installation to occur normally.

SecureDesktop & Screen Pass : How to correct Windows-Registry problems.

According to the Birch Grove Software site:

“Screen Pass is a screen locking system for Windows® that extends the capability of the standard workstation lock and gives network administrators complete control over idle workstations.

With Screen Pass, network administrators can enforce screensaver password use, screensaver timeout, and screen saver selection. Advanced features include automatic logout, automatic shutdown, customizable administrator override, and auditing of all logon/logoff and lock/unlock events.

Intended primarily for workstations connected to Novell Netware or Microsoft networks, Screen Pass can be distributed and managed remotely with or without group policy. The central management feature makes Screen Pass ideal for small, medium, and large networks - anywhere that security of idle workstations is a concern.”

Screen Pass installs its own version of a gina.dll and it may take precedence over the one used by Secure Desktop. If SecureDesktop does operate properly these changes may be necessary in the Windows Registry:

```
HKEY_LOCAL_MACHINE\SOFTWARE\Microsoft\Windows  
NT\CurrentVersion\Winlogon\GinaDLL=dwlgina2.dll
```

```
HKEY_LOCAL_MACHINE\SOFTWARE\Microsoft\Windows  
NT\CurrentVersion\Winlogon\GinaDLL_ScreenPass=msgina2.dll
```

See Remedy Ticket # HD0000000278953.

SecureDesktop : How to correct dwlGina2.dll problems.

A dwlGina2.dll error problem may occur when a non-administrator uninstalls MHA without an administrator first de-activating SecureDesktop.

Here is how to fix it:

1. Turn off defective PC, if on.
2. Start the PC and Windows in SAFE mode.
3. Logon as Administrator.
4. Find the file YS_MHA_SD_UNINSTALLGINA.exe. These files are typically found at C:\Program Files\Vista\YS\MHA3.
5. Run YS_MHA_SD_UNINSTALLGINA.exe. Click **Yes**, to uninstall it.
6. Reboot in normal mode.

If this doesn't work, then modify step five by first finding and running YS_MHA_SD_INSTALLGINA.exe. Click **Yes**, to install it. Then follow the remainder of step five.

Appendix E

Setting up Vista MHA3 on CPRS GUI Tools Menu for SecureDesktop

If your site uses an APPLICATION SERVER for access MHA3, you will need to create a 2nd instance under CPRS tools. SecureDesktop MUST access MHA3 from the LOCAL MACHINE that SecureDesktop is loaded. You cannot use MHA3 from an application server for SecureDesktop

Example: Setting up Vista MHA3 on the CPRS Tools menu for SecureDesktop, GUI Parameters [ORW PARAM GUI]

```
Select GUI Parameters Option: tm GUI<ENTER> Tool Menu Items
CPRS GUI Tools Menu may be set for the following:<ENTER>
1 User USR [choose from NEW PERSON]
2 Location LOC [choose from HOSPITAL LOCATION]
3 Division DIV [REGION 5]
4 System SYS [OEX.ISC-SLC.VA.GOV]
Enter selection: 1<ENTER> User NEW PERSON
Select NEW PERSON NAME: MHPROVIDER,ONE<ENTER> CPF
----- Setting CPRS GUI Tools Menu for User: MHPROVIDER,ONE-----
Sequence: ? <ENTER>
Enter the sequence in which this menu item should appear.
Select Sequence: 2
Are you adding 2 as a new Sequence? Yes//<ENTER> YES
Sequence: 2// <Enter>
Name=Command: MHA3_Patient Entry=C:\Progra~1\Vista\YS\MHA3\YS_MHA.exe
s=%SRV p=%PORT c=%DFN u=%DUZ m=%MREF
```

From the previous example, adjust according to your own system's settings, such as New Person Name and other parameters—consult the CPRS Setup Guide for the meaning of these parameters. The pertinent portion of the example is the “Name=Command:” field. This field should be entered exactly as shown, in a single line—no line-breaks allowed, including all the % parameters that follow the filename and path to the MHA3 executable file.

ALL five parameters must be included as shown above, in the precise order in which they are found in the example. Here is what the Name=Command line should look like:

Example: MHA3_Patient Entry=C:\Progra~1\Vista\YS\MHA3\YS_MHA.exe s=%SRV p=%PORT c=%DFN u=%DUZ m=%MREF

Sequence number 2 is shown in the example, but, if you have other entries in the Tools Menu, then the next free sequence number will do just fine. (Sometimes when cutting and pasting, unseen control characters can be included in the text and will cause the command line to malfunction.)

After this step is completed, a new choice will appear in the user's CPRS Tools Menu labeled "MHA3_Patient Entry". Clicking on this menu entry will start MHA3 with a selected patient synchronized to the one currently selected in CPRS and if SecureDesktop is installed on that machine, the Patient Entry Button will be enabled.

Appendix F

How to add the name of an instrument to the CPRS Tools menu

This is done in Vista; an example for the AUDC is provided below:

```
Select GUI Parameters Option: tm GUI<ENTER> Tool Menu Items
CPRS GUI Tools Menu may be set for the following:<ENTER>
1 User USR [choose from NEW PERSON]
2 Location LOC [choose from HOSPITAL LOCATION]
3 Division DIV [REGION 5]
4 System SYS [OEX.ISC-SLC.VA.GOV]
Enter selection: 1<ENTER> User NEW PERSON
Select NEW PERSON NAME: MHPROVIDER,ONE<ENTER> CPF
----- Setting CPRS GUI Tools Menu for User: MHPROVIDER,ONE-----
Sequence: ? <ENTER>
Enter the sequence in which this menu item should appear.
Select Sequence: 2
Are you adding 2 as a new Sequence? Yes//<ENTER> YES
Sequence: 2// <Enter>
Name=Command: AUDC =C:\Progra~1\Vista\YS\MHA3\YS_MHA.exe s=%SRV p=%PORT
c=%DFN u=%DUZ m=%MREF AUDC
```