

Clinical Procedures

Release Notes

Patch MD*1.0*21

June 2010

Department of Veterans Affairs Office of Information & Technology Office of Enterprise Development

Revision History

| Description | Date | Author |
|---------------------------|-----------|------------------|
| Patch MD*1.0*21 released. | June 2010 | Shirley Ackerman |
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Introduction

The high volume procedure enhancement is a new enhancement brought in with patch MD*1.0*21. A given facility may perform thousands of high volume procedures each month such as the electrocardiogram. This enhancement will streamline the note completion process of Clinical Procedures. This patch will accomplish the following:

- 1. Create an Application Proxy user called CLINICAL, DEVICE PROXY SERVICE.
- 2. Include the text impression of the result in the note (optional) or as Significant Finding of the procedure (optional). This is only available if the device sends the observation reporting text with the result.
- 3. Administratively close the note associated with the study for final results that are verified on the device using the proxy user or the interpreter (available for MUSE ONLY).
- 4. If the text impression is entered as Significant Finding, the note associated with the study will remain in the "Undictated" status and follow the normal Clinical Procedures process.
- 5. Pass Diagnosis and/or Current Procedure Terminology codes to Patient Care Encounter from the medical device (only if codes are available).
- 6. Complete the procedure request for the note that was closed.
- 7. Add a new option called MD HIGH VOLUME PROCEDURE SETUP which lets the user setup a procedure for high volume process.
- 8. Add a new option called MD PROC W/INCOMPLETE WORKLOAD which displays a list of procedures and the patients that have incomplete workload.

This patch will reduce the need for using the action "Complete/Update Results" to enter the interpretation and complete the procedure request in Computerized Patient Record System (CPRS) for some procedures. For certain medical devices, the text impression is available. It is easier for providers to access the text impression of the result, if the text is in the note or the Significant Finding. Each site is still responsible for entering the workload for the procedure.

The installation of the patch will load the routines, options, and parameter definitions for this enhancement. Refer to the Clinical Procedures Implementation Guide and Appendix E to setup a procedure for high volume.

There are modifications to the routines to remove global reference to the ICD Diagnosis file (#80) and use the Application Program Interface \$\$ICDDX^ICDCODE to get the ICD Diagnosis fields.