# Department of Veterans Affairs

# Prosthetics Basics

# User Manual



**Version 3.0**

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**Department of Veterans Affairs**
**Office of Information and Technology**
**Enterprise Program Management Office**

# Revision History

| Date | Version | Description | Author |
|------|---------|-------------|--------|
| 10/2016 | RMPR*3.0*178 | Added new option RMPR GIP STOCK to Purchasing Menu (p. 6) | L. Behuniak, VA PM<br>B. Thomas, TW |
| 08/2014 | RMPR*3.0*168 | Updates for ICD-10<br>Updated title page<br>New ICD-10 screen capture (p.47) | T. Bennett, VA PM<br>R. Wilson, HP PM<br>R. Wilder, TW |
| 08/2011 | RMPR*3*167 | Modify text when referencing Form 1358. See page 88. | M Anthony, PM<br>C Arceneaux, TW |
| 3/01/2010 | RMPR*3*150 | Added new option EDIT 2319 (Vendor, QTY, Cost) | April Scott, PM<br>Gary Werner, TW |
| 5/19/2004 | | Initial Version 3.0 | |

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# Prosthetics Basics User Manual

## Section 1:  Understanding Main Menu Features

## Overview

**Audience**

The *Prosthetics Basics User Manual* is for new Prosthetics users of the Prosthetics Sensory Aids Service (PSAS) system including Purchasing Agents and any other new end user on the system.

This manual will provide a general overview of the entire system as well as step-by-step instructions of the more frequently used menus and options.

**Main Menu**

The main menu for Prosthetics is the following - the **Prosthetic's Officials** Menu:

| Prosthetic's Officials Menu | |
|---|---|
| PU | Purchasing |
| DD | Display/Print |
| UT | Utilities |
| AM | AMIS |
| SU | Suspense |
| CO | Correspondence |
| SC | Scheduled Meetings & Home/Liaison |
| PS | Process Form 2529-3 |
| EL | Eligibility Inquiry |
| ET | PSC/Entitlement Records |
| HO | Home Oxygen Main Menu |
| INV | Pros Inventory Main |
| ND | NPPD Tools |
| VR | Verify/Repair Purchase Card Form |

**In this manual**

The following are the sections in this manual.

# Overview, Continued

**Menu Options**     Below are the **Prosthetic Official's Main Menu** options, the option name for each, the synonym, and a description of each.  To display this information, type three question marks at the following prompt:

Select Prosthetic Official's Menu Option: **???  <Enter>**

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Purchasing | PU | RMPR PURCHAS-ING MENU | Purchasing menu, sub-menu of Prosthetic Clerk/Official master menus. |
| Display/Print | DD | RMPR DISPLAY/PRINT | Display/Print menu for Prosthetic Clerks and Officials. This is a sub-menu of Prosthetic Clerks and Official's master menus. |
| Utilities | UT | RMPR UTILITIES | This is the Prosthetic's Utility Menu. |
| AMIS | AM | RMPR MGMT REPORTS | AMIS data is generated from this menu option. |
| Suspense | SU | RMPR SUSPENSE MENU | This is the menu for Suspense Options. |
| Correspondence | CO | RMPR CORR MAIN | This is the main menu for Correspondence. |
| Scheduled Meetings & Home/Liaison Visits | SC | RMPR SCHED-H/L VISITS | This is the main menu for Scheduled Meetings and Home Liaison Visits. |
| Eligibility Inquiry | EL | RMPR ELG INQ | This option is an eligibility inquiry into the MAS PATIENT file (#2). |
| PSC/ Entitlement Records | ET | RMPR ENTITLE-MENT/PSC | This is the menu for Prosthetic Service Card and Entitlement Records. |

| | | | |
|---|---|---|---|
| Home Oxygen Main Menu | HO | RMPO-MENU-MAIN | This menu helps you manage your home oxygen program.  It tracks costs of services, helps you manage billings, and alerts you when it is time to send letters to patients (e.g., prescription expiration). |
| NPPD Tools | ND | RMPR NPPD TOOLS | This option contains all tools associated with the National Prosthetic Patient Database. |

# Overview, Continued

**Menu Options**  
(continued)

Below are the **Prosthetic Official's Main Menu** options, the option name for each, the synonym, and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Process Form 2529-3 | PS | RMPR 2529-3 MAIN | Main Menu for Prosthetics Lab Module |
| Pros Inventory Main | INV | RMPR INV MAIN | Prosthetic generic inventory system. |
| NPPD Tools | ND | RMPR NPPD TOOLS | Tools for the National Prosthetics Patient Database |
| Verify/Repair Purchase Card Form | VR | RMPR Verify/ Repair PC Number | Temporary option used to fix reconciliations of Purchase Card orders. |

# Purchasing Menu (PU)

**Menu option descriptions**

Below are the **Purchasing Menu (PU)** options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Enter New Request | EN | RMPR ENT REQUESTS | This is the sub-menu for entering prosthetic purchasing requests that link with IFCAP. |
| Stock Issues | SI | RMPR STOCK ISS | This is the Stock Issue Menu Options. |
| Reprints | RP | RMPR REPRINTS | This is the Reprint Menu for Prosthetic Purchasing Forms. |
| Record 2237 Purchase to 10-2319 | RE | RMPR ENT 2237 | This option will record the information from a VAF 2237 to a patient's VAF 10-219 record. |
| Edit/Delete 2237 from 10-2319 | ED | RMPR 2319 EDT | This option will edit or delete information posted from a VAF 2237 record to a patient's VAF 10-2319. |
| Cancel a Transaction | CA | RMPR CANCEL | This option will cancel purchasing transactions that have not been closed out. |
| Close Out | CO | RMPR CLOSE-OUT | This is locked with RMPRSUPERVISOR. This option is used to close out transactions when invoices are received from the vendor.  This will update the actual VAF 1358 account balance. |
| Cancel Purchase Card Transaction | CPC | RMPR4 PCC | This option will cancel the Purchase Card Transaction and remove the purchase from the Patient's 10-2319 Record. |

| | | | |
|---|---|---|---|
| Reconcile/Close Out Purchase Card Transaction | CPO | RMPR4 CLOSE OUT | This option is used to close out purchasing transactions that used the Purchase Card. This option will <u>not</u> post to IFCAP 1358. |
| Generic Inventory Stock Issues | GIP | RMPR GIP STOCK | This option allows sites to issue prosthetics stock that is maintained by the IFCAP Generic Inventory Package (GIP) rather than the prosthetics inventory Package (PIP).* |

*Patch RMPR*3.0*178 configures VistA to allow the Prosthetics Department to use GIP instead of PIP. It automatically updates inventory in IFCAP GIP. However, when items issued are from an INVENTORY POINT linked to a Point of Use (POU) supply cabinet, option does not update the inventory, since special cabinets automatically update GIP inventory balances, via HL7 messaging, when stock is removed. This option also checks the DynaMed System Parameter flag to determine if the site is running DynaMed, and if so this option will abort. Sites using DynaMed should continue to use PIP until a solution is implemented for DynaMed and GIP.

# Purchasing Menu (PU), Continued

**Menu option descriptions** (continued)

Below are the **Purchasing Menu (PU)** options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Edit 2319 | ED2 | RMPR EDIT 2319 | This option will allow limited editing of purchasing and stock issue transactions recorded on a patient's VAF 10-2319. |
| EDIT 2319 (Vendor, QTY, Cost) | ED2C | RMPR EDIT 2319 VENDOR/QTY/COST | This option will allow users with the RMPRSUPERVISOR key to edit Vendor, Qty & cost. |
| Edit Purchase Card Transaction | EDPC | RMPR4 EDPC | This option will edit the 2421PC form once it has been created. |
| Add Historical Data | HI | RMPR HIS DATA | This option will allow posting an item to the patient's VAF 10-2319 without counting on AMIS. |
| Delete Historical Data | HID | RMPR HIS DEL | This option deletes historical data. |
| List Open 1358 Prosthetic Transactions | LI | RMPR PRINT OPEN TRANS | This option lists VAF 1358 transactions that have not been closed out. |
| List Open 1358 Transactions by Initiator | LII | RMPR PRINT OPEN TRANS INIT | This option will print open 1358 transactions in the Prosthetics package, sorted by initiator. |
| List Open Purchase Card Transactions | LPC | RMPR4 LIST OPN | This menu will print all open Purchase Card Transactions. The Purchase Card Number will be encrypted, except for the creator and supervisor. |

| List Open Purchase Card Transactions by Initiator | LPCI | RMPR4 LIST OPEN BY INIT | This option will print the open Purchase Card Transactions by Initiator, sorted by transaction date. |
|---|---|---|---|

# Purchasing Menu (PU)

**Menu option descriptions**

Below are the **Purchasing Menu (PU)** options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Purchase Card Summary Sheet | LPS | RMPR4 PC SUM | This option displays the Purchase Card Summary by Card Number. It will list the open and closed obligations. |

# Display/Print Menu (DD)

**Menu option descriptions**

Below are the **Display/Print Menu (DD)** options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Display/Print Patient 2319 | 23 | RMPR PRINT 2319 | Display/print a patient's VAF 10-2319. |
| Transaction Inquiry | TI | RMPR 1358 INQ | Inquiry to single purchasing transaction. |
| Print All Prosthetic Items | IP | RMPR PRINT ALL ITEMS | This option prints all Prosthetic Item Master records along with their new and repair AMIS codes. Lab AMIS codes are not printed with this version of Prosthetics. |
| Print Prosthetic Billings for MAS | BI | RMPR PRINT BILL | Prints all NSC (non-service connected) items issued to patients for billing purposes. |
| Item History | IH | RMPR ITEM HISTORY | Prints an item history of all purchases made for this item. |
| Search for Recalled Item | SE | RMPR PRINT RECALL | Searches the RECORD OF PROS APPLIANCE/ REPAIR file (#660) for recalled item. |
| Site Parameter Inquiry | SI | RMPR SITE INQ | This menu option should be used to review your local site information. |
| Vendor Inquiry | VI | RMPR INQ VEND | This option is an inquiry to the IFCAP VENDOR file (#440). |

# Utilities Menu (UT)

**Menu option descriptions**

Below are the **Utilities Menu** options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Add/Edit Patient to Prosthetics | AP | RMPR ADD PATIENT | This option will add a new patient to the PROSTHETICS PATIENT file (#665).  You may also edit existing patient data using this option. |
| Enter Prosthetic Disability Code to 2319 | DIS | RMPR DIS ENTRY | This will add or delete Disability Codes to be counted on AMIS. |
| Delete Prosthetic Disability Code from 2319 | REM | RMPR DEL CODE | Mark Disability Code from patient's VAF 10-2319 as deactivated. |
| Enter/Edit Prosthetic Item Master | EN | RMPR ADD ITEM MASTER | This option adds a new Item Record to File 661, PROS ITEM MASTER. |
| IFCAP Utilities | IF | RMPR VEN/ITEM | Menu for IFCAP Vendor and Item Edit options. |
| Purge Obsolete Data | PGE | RMPR PURGE MENU | This is the Purge Menu. |
| Flag Item as Returned/Condemned | RC | RMPR RETURN | This will place items as returned, condemned, turned-in, lost or broken.  To review this data once entered, review the patient's VAF 10-2319 record on the third screen. |
| Edit Returned/ Condemned Item | RE | RMPR RETURNED EDIT | This option will allow users to edit or delete items that have been flagged as returned or condemned. |
| Enter/Edit Site Parameters | SP | RMPR SITE MENU | To enter/edit station Prosthetics site parameters. |

# Suspense Menu (SU)

**Menu option descriptions**

A Suspense Request (through the **Suspense Menu**) is a request for service or an item that is tracked by a five-day Delayed Order Report. The five workday policy refers to the process or time it takes from receiving the order in Prosthetics to the time an initial action on a request or the time the request is fulfilled has been taken.

If this process takes more than five workdays, it is flagged on the report for monitoring and reporting purposes. It is also denoted in the Suspense list by an asterisk.

**Menu option descriptions**

Below are the **Suspense Menu** options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Add Suspense Record | AS | RMPR ADD SUSPENSE | Adds a new Suspense Record to the PROSTHETIC SUSPENSE file (#668). The patient need not be in the PROSTHETICS PATIENT file (#665). |
| Close Suspense Record | CS | RMPR CLOSE SUSPENSE | This will close out the suspense record, and flag it as completed. |
| Edit Suspense Record | ES | RMPR SUSPENSE EDIT | This option will edit a suspense record for a patient. |
| Inquire to Individual Suspense Record | IS | RMPR INQ SUSPENSE | This option will display the complete Suspense Record for a veteran. |
| Print Closed Suspense Records | PC | RMPR SUSPENSE PRINT CLOSED | This will print the closed suspense records for a date range. |
| Print Open Suspense Records | PO | RMPR SUSPENSE PRINT | This option will list all open suspense records. |

# Suspense Menu (SU), Continued

**Menu option descriptions**
(continued)

Below are the **Suspense Menu** options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Print 5 Day Old Suspense Report | PR | RMPR SUSPENSE PRINT 5 DAY OLD | This option prints all suspense records over 5 working days old. |
| Print Suspense Statistics | ST | RMPR SUSPENSE STAT | Prints statistics from the PROSTHETICS SUSPENSE file (#668). |
| Suspense Processing | SP | RMPR SUSP MENU | This is the List Manager version of Suspense Processing, to be used with Consult Tracking. |

# Correspondence Menu (CO)

**Menu option descriptions**

Below are the **Correspondence Menu** options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Create a Letter | CR | RMPR CORR CREATE | Creates new letter for Prosthetics. |
| Delete Patient Correspondence Letter | DE | RMPR CORR DELETE | Deletes correspondence letter from the PROS LETTER TRANSACTION file (#665.4). |
| Add/Edit Correspondence Skeleton Letter | ED | RMPR CORR EDIT | This option allows Prosthetics managers to edit the basic skeleton letters (FORM LETTER TYPE). |
| Print/Display Patient Correspondence Letter | PR | RMPR CORR VIEW | View correspondence letter. |
| Print Correspondence Skeleton Letter | PS | RMPR CORR PRINT | Allows printing of a correspondence letter. |

# Scheduled Meetings and Home/Liaison Visits Menu (SC)

**Menu option descriptions**

Below are the **Scheduled Meetings and Home/Liaison Visits (SC)** Menu options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Pull over Scheduled Clinic Visits | PL | RMPR PULL SCHED | This option will allow scheduling clinic visits to be pulled over to VAF 10-2527. |
| Edit Form 10-2527 Information | 25 | RMPR EDIT 2527 | Enter referral and action information to patient's clinic visits. |
| Delete Scheduled Prosthetic Clinic Visits | DL | RMPR SCHED DEL | This option will allow the user to delete Prosthetics clinic visits that have been pulled over to the VAF 10-2527. |
| Enter/Edit Closed Time for Clinic Visits | CA | RMPR CLOSE APP | Clinic team member may enter or change time that a scheduled clinic appointment was actually completed. |
| Appointment Roster and Action Sheet | AP | RMPR PRT 2527 | Prints VAF 10-2527 for single clinic after information has been pulled over from MAS scheduled clinic visits. |
| Open Home/Liaison Visits | OP | RMPR H/L OPEN | Open home or liaison visits for Prosthetics. |
| Close Home/Liaison Visits | CO | RMPR H/L CLOSE | Close open home or liaison visits by entering the date closed and the total hours of the visit. |
| Edit/Delete Home/Liaison Visits | ED | RMPR H/L EDIT | Edit/delete home or liaison visits. |
| Print Closed Home/Liaison Visits | PC | RMPR H/L PRINT CLOSED | Print closed home/liaison visits. |
| Print Open Home/Liaison Visits | PO | RMPR H/L PRINT OPEN | Print open home or liaison visits. |

# Process Form 2529-3 (PS)

**Menu option descriptions**

Below are the **Process Form 2529-3** Menu options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| 2529-3 Request Menu | RQ | RMPR 2529-3 | This menu will be used by the Prosthetics administrative personnel to enter, edit, print and close out VAF 10-2529-3 requests. |
| Prosthetic Lab Menu | LB | RMPR LAB MENU | This is the main menu for Prosthetic Laboratory Technicians. |

# Eligibility Inquiry (EL) Menu

**Menu option descriptions**

The **Eligibility Inquiry** is an option and does not have submenu options. The following is an example of this option

**Screen sample**

```
   PU    Purchasing ...
   DD    Display/Print ...
   UT    Utilities ...
   AM    AMIS ...
   SU    Suspense ...
   CO    Correspondence ...
   SC    Scheduled Meetings and Home/Liaison Visits ...
   PS    Process Form 2529-3 ...
   EL    Eligibility Inquiry
   ET    PSC/Entitlement Records ...
   HO    Home Oxygen Main Menu ...
   INV   Pros Inventory Main ...
   ND    NPPD Tools ...
   OC    CoreFLS Order Control
   VR    VERIFY/REPAIR PURCHASE CARD NUMBER

Select Prosthetic Official's Menu Option: EL <Enter> Eligibility Inquiry
SITE: Hines Development System//
Select PATIENT NAME:   PROSPATIENT,ONE   1-1-30   000000001   NO    PILL

 Enrollment Priority:           Category: IN PROCESS    End Date:

              *** Patient Requires a Means Test ***
              Primary Means Test Required from FEB 13,2002

Enter <RETURN> to continue.   <Enter>

PROSPATIENT,ONE           SSN:000-00-0001   DOB: JAN 1,1930    CLAIM#

Phone: PHONE                          Phone:
Current Address:                      Primary Next of Kin Address:
1ST LINE OF STREET ADDRESS
SECOND LINE OF STREET ADDRESS

Patient Type: PILL                    Period of Service: OTHER OR NONE
Primary Eligibility Code:             Status: REQUIRED
NSC                                   Eligibility Status:

Receiving A&A Benefits? NO            Receiving Housebound Benefits? NO
Receiving Social Security? NO         Receiving VA Pension? NO
Receiving Military Retirement? NO     Receiving VA Disability? NO

Patient Name: PROSPATIENT,ONE         SSN: 000-00-0001

MAS Disability Code(s):

*POW? NO
Enter `^`to exit, or `return` to continue:   <Enter>
```

*Continued on next page*

# Eligibility Inquiry (EL) Menu, Continued

**Example (continued)**

The Eligibility Inquiry also provides Last Movement Actions, Pending Appointments, and letters on file.  You can select a Letter on File to be viewed. Enter the number of the letter to display and press **<Enter>** at the **Device** prompts.

**Screen sample** (continued)

```
PROSPATIENT,ONE     SSN: 000-00-0001   DOB: JAN 1,1930    CLAIM#

                        Last Movement Actions
Trans. Type: TRANSFER                   Trans. Type: ADMISSION
Date: SEP 11,1995@15:04:29              Date: SEP 11,1995@14:59:18
Type of Movement:                       Type of Movement:
INTERWARD TRANSFER                      DIRECT
Ward: 1AS                               Ward: 5NM
Physician: PROSPROVIDER,ONE             Physician: PROSPROVIDER,TWO
Diagnosis: SICK                         Diagnosis: SICK
                        Clinic Enrollments
Clinic                                  Enrollment Date    OPT or AC
MCGILL,TEST                             MAR 21,2000@13:11     OPT


                        Pending Appointments
Appt. Date        Clinic                        Status    Type
MAR 1,2004@09:15    PROSTHETICS                  INPATIENT APPOINTMENTREGULAR
SITE: Hines Development System//

Letters on file:

#    Patient              Type of letter   Employee            Date of letter
--------------------------------------------------------------------------------
1    PROSPATIENT,ONE    TEST              PROSPROVIDER,THREE      JUN 03, 2003
2    PROSPATIENT,ONE    ADP FL 10-90      PROSPROVIDER,THREE      JUN 02, 2003
3    PROSPATIENT,ONE    TEST              PROSPROVIDER,THREE      FEB 08, 2002
4    PROSPATIENT,ONE    HO 30 DAY TEST    PROSPROVIDER,THREE      FEB 08, 2002
5    PROSPATIENT,ONE    HO 30 DAY TEST    PROSPROVIDER,THREE      FEB 08, 2002

Enter '^' to stop or
Enter a number (1-5): 2  <Enter>
DEVICE: HOME//  <Enter>  TELNET    Right Margin: 80//<Enter>
```

*Continued on next page*

# Eligibility Inquiry (EL) Menu, Continued

**Letter on File**    Below is the Letter on File that you selected to view for the specific patient
displayed.

**Screen sample**
(continued)

```
                        REQUEST FOR QUOTATION
                          Date: Feb 12, 2004

    TO:                                     FROM: PROSVENDOR,ONE
                                                  Hines Development System
                                                  TEST 2
                                                  HINES, IL  60142

        Vendor Phone #:                         Veteran: PROSPATIENT,ONE
                                                  SSN:    000000001

    Your firm is being considered for the following:

    An estimate on the above-listed item(s) is requested.  YOUR QUOTATION
    DOES NOT CONSTITUTE A PURCHASE ORDER.  Upon completion of the esti-
    mate, return the original to the Veterans Affairs facility indicated
    above and retain a copy for your files.

    If approved, a purchase order will be prepared and forwarded to you.

    Sincerely,



    PROSPROVIDER,FOUR
    CHIEF
```

**Screen sample**
(continued)

```
                        VENDOR'S ESTIMATE
                    (To be completed by Vendor)
    ----------------------------------------------------------------
    |     Article or Service       |Quantity| Unit |Unit Cost|Total Cost|
    ----------------------------------------------------------------
    |                              |        |      |         |          |
    |                              |        |      |         |          |
    |                              |        |      |         |          |
    |                              |        |      |         |          |
    |                              |        |      |         |          |
    |                              |        |      |         |          |
    |                              |        |      |         |          |
    ----------------------------------------------------------------
    | Vendor:                            Contract number (if applicable) |
    | Address:                                                           |
    | City:                                                              |
    | State:           Zip:                                              |
    | Telephone:                                                         |
    | Date:                      Signature & Title of Company Official|
    | Note:List Terms/Discounts if Applicable                            |
    ----------------------------------------------------------------
                                                    FL 10-90 ADP

Would you like to see more letters? No//   (No)
Do you wish to create a correspondence letter? No//   (No)
```

# PSC/Entitlement Records (ET) Menu

**Menu option descriptions**

Below are the **PSC/Entitlement Records (ET)** Menu options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Add/Edit Clothing Allowance | AC | RMPR CLOTHING | Adds a Clothing Allowance for a patient. |
| Add/Edit Prosthetic Service Card | PS | RMPR ADD PSC | This option will add a Prosthetic Service Card to the patient's VAF 10-2319 record. |
| Enter/Edit Auto Adaptive Info | AU | RMPR AUTO | This option is the main menu to enter/edit auto-adaptive equipment purchased for the patient.<br><br>This allows adding a new Vehicle of Record, adding van modifications, new items, and editing of items and repairs. |
| Record Other Patient Information | RO | RMPR ADD OD | This option allows a free-text word processing area for storage of other information needed by service on the patient's VAF 10-2319 record.<br><br>Information such as eye color, hair color, patient's station, etc. is included. |

# Home Oxygen Main Menu (HO)

**Menu option descriptions**

Below are the **Home Oxygen Main Menu (HO)** options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Add/Edit Home Oxygen Patient | ED | RMPO ADD/EDIT PAT | This option allows the user to add patients to the Prosthetics Patient file, edit demographics (e.g., therapy activation date and eligibility for home oxygen services), and document prescription and billing equipment data. |
| Billing Transactions | BT | RMPO BILLING TRANSAC TIONS | This option allows you to edit bills for a specific month, accept those transactions, and post them. |
| Generate Letters | LE | RMPO LIST/PRIN T MANAGE R | This option creates a list of patients who are due to receive letters and prints the letters. |
| Home Oxygen Patient Template Update | TU | RMPO HO PAT TEMPLAT E UPDA | This is a utility for updating vendor, HCPCS, FCP, item, and unit cost of all Home Oxygen patients in a particular station at once.<br><br>Only the patient template is changed, not the monthly billing.  If the monthly billing is already been created for a certain month, changes on the template will not affect the billing cycle. |

**Menu option descriptions**

Below are the **Home Oxygen Main Menu (HO)** options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Inactivate/Activate Oxygen Patient | IN | RMPO INACT/ACT | This is an option to deactivate and activate/reactivate home oxygen patients. |
| Purchase Card Sign Off | SO | RMPO PO SIGN OFF | Once a billing is accepted and posted, this option can be used to sign off on the billing. |
| Reports | RE | RMPO-RPT-MAINMENU | This menu contains reports on active and inactive home oxygen patients, addresses, prescription reports, billing discrepancies, etc. |
| Site Parameters Enter/Edit | SI | RMPO SITE EE | This option is used to define those parameters specific to the site such as: letters that should be generated and default prescription expiration dates. |
| Verify Posted Billing Transactions | PB | RMPO POST 2319 | This option posts all Home Oxygen billing transactions for a selected month for bills posted in IFCAP but not in Patient 2319 records. It will loop through all the records for the MONTH and VENDOR entered. |

# Pros Inventory Main (INV)

**Menu option descriptions**

Below are the **Pros Inventory Main (INV)** Menu options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Add Inventory LOCATION or ITEMS | AE | RMPR INV ADD | This is an option to add a Location, HCPCS or ITEMS for inventory. Users can edit item fields under this option. |
| Deactivate Inventory Location | DE | RMPR INV DEACTIVATE | This option is only given to the holder of RMPRMANGAER key. It requires the electronic signatures of 2 users holding this key to be entered before a location can be deactivated. |
| Edit Inventory Items | EI | RMPR INV EDIT | This option is for editing an Inventory Location or Items. You can only edit an Item or Location that has already been set-up. |
| Edit Inventory Location | EL | RMPR INV EDIT LOCATION | This option is for editing an existing inventory location. |
| Inventory Reports | RP | RMPR INV REPORTS | Various Inventory reports are available through this option. |
| Order Item from Supply or Vendor | OI | RMPR INV ORDER | This is an option to record that an Item has been ordered. This option will not automatically order an item from Supply or Vendor. |

# Pros Inventory Main (INV), Continued

**Menu options continued**

Below are the **Pros Inventory Main (INV)** Menu options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Receive Item from Supply, Vendor or Patient | RC | RMPR INV RECEIVE | This is an option to record that an Item has been received and entered into the Prosthetics Inventory. Receiving an Item in Supply through the IFCAP package does not update the Prosthetics Inventory module. This option has to be done separately for an Item to be received and recorded in the Prosthetics module. |
| Reconcile Item Balance | UP | RMPR INV RECON-CILE | This is an option to reconcile or update Items in Prosthetics Inventory. Users can update the Quantity, Total Cost, Vendor, Unit of Issue, Re-order Level and Description. |
| Remove/Deactivate HCPCS/Item from Inventory | RE | RMPR INV REMOVE HCPCS/ ITEM | This option removes/ deactivates inventory item(s) from the Prosthetics Inventory Program. Once an item has been removed/ deactivated, that item is not accessible. Only users with RMPRMANAGER key can access this option. |
| Transfer Stock Between Locations | TR | RMPR INV TRAN | This is an option to transfer an Item to a different Location. In order to transfer an Item, it must be set-up to both Locations. User can transfer all Quantities or certain Quantities. This option does not remove an item from a location if all quantities have been transferred. |

# NPPD Tools Menu (ND)

**Menu option descriptions**

Below are the **NPPD Tools Menu (ND)** options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Add/Edit HCPCS Synonyms | AE | RMPR ADD/EDIT HCPCS SYNONYM | This option will only edit the DESCRIPTION and SYNONYM in the Prosthetics HCPCS file. |
| DSS HCPCS History | HH | RMPR HCPCS HISTORY | This menu will display all HCPCS issued on a Patient's 2319 records for a date range. |
| HCPCS Inquiry | INQ | RMPR NPPD INQ | You can look up one HCPCS at a time with this option. |
| NPPD Detail Display | | RMPR NPPD GUI | For users to be able to use the NPPD Detail Display GUI front-end, this option must be on either their primary or secondary menu options. This option has also been placed on RMPR NPPD TOOLS to give users who have access to the current NPPD options, access to NPPD GUI Detail Display. Note: 'B' type option for use after installation of RMPR*3*71. 'B' type options are not visible to roll & scroll users. |
| Print 2529-3 Single Line | LSL | RMPR NPPDL PRL L | This option will print a single line, either New or Repair in Detail format for the form type 2529-3 only.  This is the Lab. |

*Continued on next page*

**Menu option descriptions**

Below are the **NPPD Tools Menu (ND)** options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Print 2529-3 Worksheets | LPRT | RMPR NPPDL PRT | This option provides both Summary and Detail worksheets.  They are divided into the following two basic parts with a station summary of each:<br><br>* New Activities<br>* Repair Activities<br><br>The above are further broken down by each mapped NPPD Group with a summary of each. Within each NPPD Group, there is an NPPD Line with a summary. The Detail display adds an itemized listing for each NPPD Line within the NPPD Group, so every transaction for the date range selected is displayed.<br><br>It is recommended to send this report to a device that will print a 132-right margin. This will not only ensure that you get the entire report, it will also expand the length of some of the data (e.g., Item and HCPCS DESCRIPTION on the Detail Worksheet) to make it more legible. |
| Print NPPD Single Line Detail | SL | RMPR NPPD PRL L | This option will print a single line, either New or Repair in Detail format. |

*Continued on next page*

# NPPD Tools Menu (ND), Continued

**Menu option descriptions**

Below are the **NPPD Tools Menu (ND)** options, the synonym, option name and a description of each.

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Print NPPD Worksheets | PRT | RMPR NPPD PRT | Printing functionality. |
| Print PSAS HCPCS List | MAP | RMPR NPPD LIST | Printing functionality. |
| PSAS HCPCS History | PH | RMPR PSAS HCPCS HISTORY | View history of PSAS HCPCS. |
| Quick Edit 2319 Record | QED2 | RMPR NPPD QUICK EDIT | This menu is a quick edit of the 2319 Record.  This will allow you to select a record by the number displayed on the detail NPPD report for quick corrections. |

# Section 2: Display/Print Menu

## Overview

**Introduction**   The **Display/Print (DD)** menu is a sub-menu of **Prosthetic Clerks and Official's** master menus.  The internal option name is:  RMPR DISPLAY/ PRINT, and the synonym is:  DD.

The audience for this feature is Prosthetics Clerks as well as Officials.

**Menu Option**   Below is the Prosthetic Official's Menu.

| Synonym | Menu Option |
|---------|-------------|
| PU | Purchasing… |
| DD | Display/Print… |
| UT | Utilities… |
| AM | AMIS… |
| SU | Suspense … |
| CO | Correspondence… |
| SC | Scheduled Meeting and Home/Liaison Visits … |
| PS | Process Form 2529-3… |
| EL | Eligibility Inquiry |
| ET | PSC/Entitlement Records … |
| HO | Home Oxygen Main Menu… |
| INV | Pros Inventory Main … |
| ND | NPPD Tool … |

**In this section**   The following chapters are in this section:

# Display/Print Menu Option Descriptions

**Menu Option descriptions**

Below are the **Display/Print** Menu options with the option name and a description of each.

| Display/Print Menu | |
|---|---|
| 23 | Display/Print Patient 2319 |
| TI | Transaction Inquiry |
| IP | Print All Prosthetic Items |
| BI | Print Prosthetic Billings for MAS |
| IH | Item History |
| SE | Search for Recall by Lot/Serial Number |
| SI | Site Parameter Inquiry |
| VI | Vendor Inquiry |

| Menu Option | Synonym | Option Name | Description |
|---|---|---|---|
| Display/Print Patient 2319 | 23 | RMPR PRINT 2319 | Display/print a patient's VAF 10-2319 (Note the 2319 contains more than eligibility) |
| Transaction Inquiry | TI | RMPR 1358 INQ | Inquiry to single purchasing transaction. |
| Print All Prosthetic Items | IP | RMPR PRINT ALL ITEMS | This option prints all Prosthetic Item Master records along with their new and repair AMIS codes. Lab AMIS codes are not printed with this version of Prosthetics. |
| Print Prosthetic Billings for MAS | BI | RMPR PRINT BILL | Prints all NSC (non-service connected) items issued to patients for billing purposes. |
| Item History | IH | RMPR ITEM HISTORY | Prints an item history of all purchases made for this item. |
| Search for Recalled Item | SE | RMPR PRINT RECALL | Searches the RECORD OF PROS APPLIANCE/REPAIR file (#660) for recalled item. |
| Site Parameter Inquiry | SI | RMPR SITE INQ | This menu option should be used to review your local site information. |
| Vendor Inquiry | VI | RMPR INQ VEN | This option is an inquiry to the IFCAP VENDOR file (#440). |

# Display/Print Patient 2319 (23)

**Introduction**      You can view or print the 10-2319 Prosthetics Veteran patient information from the **Display/Print Patient 2319 (23)** option.  You will be prompted to select a patient.

You will also be prompted for a device to print the Patient 10-2319.  You have the choice to send the report to a printer by entering a printer at the Device prompt or view selected portions of the 2319 on your terminal screen.

<u>Note:</u>  Output to a printer will produce a different display than when it is sent to a terminal screen as you have a choice of which eligibility screens to view versus the printout will print the entire Patient 2319.

**Options**      Here are the screens that you can view from the patient's 2319:

Patient Demographics
Clinic Enrollments/Correspondence
Entitlement Information
Appliance Transactions
Auto Adaptive Information
Critical Comments
Add/Edit Disability Code
Home Oxygen Items

**In this chapter**      The following topics are in this chapter:

# View and Print the Patient 2319

**Display the 2319**   You can display the 10-2319 Prosthetics Veteran record using the **Display/Print Patient 2319 (23)** Menu option.

**Steps**   To display or print the 10-2319 Prosthetics Veteran record, follow these steps:

| Step | Action |
|------|--------|
| 1 | At the `Select Display/Print Option` prompt, type 23 to access the Display/Print Patient 2319 (23) option. |
| 2 | At the **Site:** prompt, press **<Enter>** to accept the default setting or type a "**?**" to display a list and select a site from the list. |
| 3 | At the **Select Prosthetic Patient** prompt, enter a Prosthetic patient name with the "LAST NAME,FIRST NAME" format. |
| 4 | Press <**Enter**> to continue. |
| 5 | Patient identification information displays.  : **At the …OK? Yes//  prompt, press <Enter> to continue**. |

**2319 Screen**

```
  23     Display/Print Patient 2319
 TI      Transaction Inquiry
 IP      Print All Prosthetic Items
 BI      Print Prosthetic Billings for MAS
 IH      Item History
 SE      Search for Recalled Item
 SI      Site Parameter Inquiry
 VI      Vendor Inquiry


Select Display/Print Option: 23 <Enter> Display/Print Patient 2319
SITE: SUPPORT ISC// <Enter>                              499
Select PROSTHETIC PATIENT: PROSPATIENT,ONE <Enter>  PROSPATIENT,ONE
1-1-30    000000001

         ...OK? Yes// <Enter>  (Yes)
         HINES, IL
```

*Continued on next page*

## View and Print the Patient 2319, Continued

**Printing vs.
Displaying the
2319**

Printing is different than viewing the 2319 on your terminal! If you elect to print the 2319 information by entering **SLAVE or another printer device**, the <u>entire</u> Record of Appliances and Repairs prints out.

**Steps**
(continued)

To display or print the 10-2319 Prosthetics Veteran record, follow these steps:

| Step | Action |
|------|--------|
| 6 | The system displays the **Device: Home//** prompt. Press <**Enter**> twice to display information to your terminal screen or type **SLAVE** to print the information to your personal printer. <br><br> You can print the information to another printer by typing the printer ID. |
| 7 | The system displays: **Right Margin: 80//** (unless you requested to print to a printer using the SLAVE entry). Press <**Enter**> to continue. |
| 8 | The Disability Codes display for the selected patient and you are given a choice of information to view, edit or print from the patient's 2319. |

**2319 Screen**
(continued)

```
DEVICE: HOME//  <Enter>   TELNET    Right Margin: 80// <Enter>

*Comments on File.

Current Disability Codes are:

COS/B           EMPLOYEE        NSC
AMP/LAE         SC VIETNAM      S/C

Select one of the following
          1        PATIENT DEMOGRAPHICS
          2        CLINIC ENROLLMENTS/CORRESPONDENCE
          3        ENTITLEMENT INFORMATION
          4        APPLIANCE TRANSACTIONS
          5        AUTO ADAPTIVE INFORMATION
          6        CRITICAL COMMENTS
          7        ADD/EDIT DISABILITY CODE
          8        HOME OXYGEN ITEMS

Enter 10-2319 screen to VIEW (1-8),'^' to EXIT, or 'return' to
continue :
```

# View Patient Demographics

| | |
|---|---|
| **Function description** | You can view the patient's demographics by entering 1 at the **"Enter 10-2319 screen to VIEW..."** This includes the patient's name, social security number, date of birth, address and phone, eligibility and benefits, and claim number, which is shown at the top of the 2319 form. |

**Steps**    To view patient demographics, follow these steps:

| Step | Action |
|---|---|
| 1 | Type "**1**" to select the **Patient Demographics** screen at the prompt, and press <**Enter**>. |
| 2 | The patient demographics display as shown below. |
| 3 | Press <**Enter**> to continue.  If there is no entry for POW?, you may enter it at this time or press the <**Enter**> key to accept a default of NO. |
| 4 | The current Disability Codes display if available. |

**Patient Demographics Screen**

```
Select one of the following:
          1         PATIENT DEMOGRAPHICS
          2         CLINIC ENROLLMENTS/CORRESPONDENCE
          3         ENTITLEMENT INFORMATION
          4         APPLIANCE TRANSACTIONS
          5         AUTO ADAPTIVE INFORMATION
          6         CRITICAL COMMENTS
          7         ADD/EDIT DISABILITY CODE
          8         HOME OXYGEN ITEMS

Enter 10-2319 screen to VIEW (1-8),'^' to EXIT, or 'return' to continue : 1
<Enter> PATIENT DEMOGRAPHICS


PROSPATIENT,ONE              SSN: 000000001   DOB: JAN 1,1930    CLAIM#
Phone:                                 Phone:
Current Address:                       Primary Next of Kin Address:
ABC STREET
CHICAGO, ILLINOIS 60000


Patient Type: PILL                Period of Service: OTHER OR NONE
Primary Eligibility Code:              Status: REQUIRED
NSC                                    Eligibility Status:

Receiving A&A Benefits? NO        Receiving Housebound Benefits? NO
Receiving Social Security? NO           Receiving VA Pension? NO
Receiving Military Retirement? NO       Receiving VA Disability? NO
Prosthetic Disability Code(s): COS/B-NSC AMP/LAE-SC

Enter RETURN to continue or '^' to exit:    <Enter>
*POW? NO


Enter return to continue or `^` to exit: <Enter>
Current Disability Codes are:
COS/B          EMPLOYEE        NSC
AMP/LAE        SC VIETNAM      S/C
ORTH/PLS       INPATIENT       S/C
```

Output

Disability Codes

# View Clinic Enrollments/Correspondence

| | |
|---|---|
| **Function description** | You can view the clinic enrollments and correspondence for the patient by selecting to view screen 2. |

**Steps**　To view clinic enrollments and correspondence for a veteran, follow these steps:

| Step | Action |
|---|---|
| 1 | Type 2 at the prompt: "Enter 10-2319 screen to VIEW (1-8)…" to select the Clinic Enrollments/Correspondence (2) screen. |
| 2 | The following information displays:  Last Movement Actions, Clinic Enrollments, and Pending Appointments. |
| 3 | Press <**Enter**> at the **Would you like to see more clinics?  No//** prompt to accept the default setting or **Y** for **Yes**.<br><br>Note:  This prompt may not appear if there aren't many clinics. |
| 4 | Press <**Enter**> to continue. |
| 5 | To view correspondence, see next page, "**View Letters on File**." |

**Clinic Enrollment/ Correspondence Screen**

```
Select one of the following:
        1          PATIENT DEMOGRAPHICS
        2          CLINIC ENROLLMENTS/CORRESPONDENCE
        3          ENTITLEMENT INFORMATION
        4          APPLIANCE TRANSACTIONS
        5          AUTO ADAPTIVE INFORMATION
        6          CRITICAL COMMENTS
        7          ADD/EDIT DISABILITY CODE
        8          HOME OXYGEN ITEMS

Enter 10-2319 screen to VIEW (1-8),'^' to EXIT, or 'return' to continue : 2
<Enter>   CLINIC ENROLLMENTS/CORRESPONDENCE


PROSPATIENT,TWO          SSN: 000-00-0002   DOB: FEB 28,1949   CLAIM#

                    Last Movement Actions
Trans. Type: DISCHARGE                  Trans. Type: ADMISSION
Date: JAN 12,1997@08:00                  Date: JUN 5,1996@12:47:34
Type of Movement:                       Type of Movement:
REGULAR                                 OPT-SC
Ward: 2AS                               Ward: 2AS
Physician: PROSPROVIDER,FIVE            Physician: PROSPROVIDER,FIVE
Diagnosis: SOB                          Diagnosis: SOB
                    Clinic Enrollments
Clinic                                  Enrollment Date     OPT or AC
HOUSE/A                                 MAY 17,1994             OPT
TEST1                                   NOV 1,1994@11:10        OPT
Would you like to see more clinics? No// n  (No) <Enter>


                    Pending Appointments
    No Pending Appointments for this Patient
Enter RETURN to continue or '^' to exit:      <ENTER>
```

# View Letters/Correspondence on File

| | |
|---|---|
| **Clinic Enrollments** | You can also view the letters on file for the patient using **Clinic Enrollments/Correspondence (2)**. |

| | |
|---|---|
| **Steps** (continued) | To view letters on file for a patient, follow these steps: |

| Step | Action |
|------|--------|
| 6 | The letter listings on file display for a patient if available. |
| 7 | The **Enter a number** prompt displays to view a letter. Type the number of the letter you want to view or print and press <**Enter**.> |
| 8 | The **DEVICE: HOME//** prompt displays. Press <**Enter**> to continue to view the letter or enter a printer device. This example shows you how to view the letter. |
| 9 | Press <**Enter**> again after the **Right Margin:  80//** prompt. |

**Letters on File**

```
Letters on file:

#    Patient          Type of letter   Employee                Date of letter
--------------------------------------------------------------------------------
1 PROSPATIENT,ONE    ADP FL 10-90     PROSPROVIDER,THREE        DEC 16, 1999
2 PROSPATIENT,ONE    HO 30 DAY TEST   PROSPROVIDER,THREE        FEB 08, 2002
3 PROSPATIENT,ONE    HO 30 DAY TEST   PROSPROVIDER,THREE        FEB 08, 2002

Enter '^' to stop or Enter a number (1-3):1  <Enter>
DEVICE: HOME//  <Enter>   TELNET    Right Margin: 80//  <Enter>

                          REQUEST FOR QUOTATION
                           Date: Mar 13, 2000

    TO: VENDOR NAME                            FROM: PROSVENDOR,ONE
        7000 SOUTH ST                                SUPPORT ISC
        CHICAGO, ILLINOIS  60620
                                               CHICAGO, IL  60619

        Vendor Phone #: (555)
Veteran: PROSPATIENT,ONE
                                               SSN:    000000001

    Your firm is being considered for the following:
      PROSTHETIC LEG

    An estimate on the above-listed item(s) is requested.  YOUR QUOTATION
    DOES NOT CONSTITUTE A PURCHASE ORDER.  Upon completion of the esti-
    mate, return the original to the Veterans Affairs facility indicated
    above and retain a copy for your files.

    If approved, a purchase order will be prepared and forwarded to you.

    Sincerely,

    PROSPROVIDER,SIX, ACTING CHIEF, PROSTHETICS SERVICE CHIEF
```

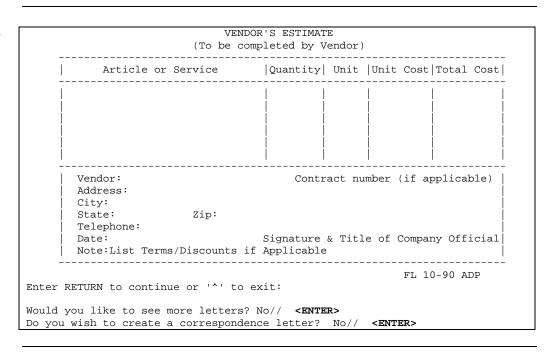# View Letters/Correspondence on File, Continued

**Output**

A letter on file sample is shown below for a patient's Vendor Estimate.

**Steps**
(continued)

To view letters on file, continue to follow these steps:

| Step | Action |
|------|--------|
| 10 | The letter(s) displays if available for a patient. |
| 11 | At the **Would you like to see more letters? No//** prompt, press <**Enter**> to accept the default of **No**. If you want to view more letters that are on file, type **Y** for **Yes**. |
| 12 | At the **Do You wish to create a correspondence letter?  No//** prompt, press <**Enter**> to accept the default setting or type **Y** for **Yes**. (See the **Correspondence** section for instructions.) |
| 13 | The **Suspense** Menu may display for you to enter a request for a Prosthetic item or service (depending on the settings at your site). |

**Sample Letter Screen**

```
                          VENDOR'S ESTIMATE
                      (To be completed by Vendor)
      -----------------------------------------------------------------
      |    Article or Service     |Quantity| Unit |Unit Cost|Total Cost|
      -----------------------------------------------------------------
      |                           |        |      |         |          |
      |                           |        |      |         |          |
      |                           |        |      |         |          |
      |                           |        |      |         |          |
      |                           |        |      |         |          |
      |                           |        |      |         |          |
      |                           |        |      |         |          |
      -----------------------------------------------------------------
      | Vendor:                         Contract number (if applicable) |
      | Address:                                                        |
      | City:                                                           |
      | State:            Zip:                                          |
      | Telephone:                                                      |
      | Date:                       Signature & Title of Company Official|
      | Note:List Terms/Discounts if Applicable                         |
      -----------------------------------------------------------------
                                                       FL 10-90 ADP
Enter RETURN to continue or '^' to exit:

Would you like to see more letters? No//   <ENTER>
Do you wish to create a correspondence letter?  No//   <ENTER>
```

# View Entitlement Information

| | |
|---|---|
| **Function description** | You can view the patient's entitlement information by typing **(3)** at the "**Enter 10-2319 screen to VIEW**..." prompt. |

**Steps** To view entitlement information, follow these steps:

| Step | Action |
|---|---|
| 1 | Select the **Entitlement Information** screen by typing **3.** |
| 2 | The patient name, social security number, date of birth, and claim number displays as well as any entitlements. This includes a clothing allowance if applicable, automobile information, and items returned. |

**Entitlement Screen**

```
Select one of the following:
          1         PATIENT DEMOGRAPHICS
          2         CLINIC ENROLLMENTS/CORRESPONDENCE
          3         ENTITLEMENT INFORMATION
          4         APPLIANCE TRANSACTIONS
          5         AUTO ADAPTIVE INFORMATION
          6         CRITICAL COMMENTS
          7         ADD/EDIT DISABILITY CODE
          8         HOME OXYGEN ITEMS

Enter 10-2319 screen to VIEW (1-8),'^' to EXIT, or 'return' to continue : 3
<Enter> ENTITLEMENT INFORMATION

PROSPATIENT,ONE              SSN: 000-00-0001   DOB: JAN 1,1930    CLAIM#

PSC Issue Card:  Appliance    Ht 68  Wt 192  Eyes BR  Hair GY     Serial
Number
JAN 31, 2000     TEST ITEM

Clothing Allowance:  Date: 04-01-01  ELIGIBLE  STATIC
                     Date of Exam: JUL 11, 2000
Examiner: PROSPROVIDER,EIGHT

                     Desc:
                     Date: 03-15-02  NOT-ELIGIBLE  NON-STATIC
                     Date of Exam: MAR 10, 2002 Examiner: PROSPROVIDER,NINE
                     Desc:
                     Date: 05-08-02  ELIGIBLE  STATIC
                     Date of Exam: MAY 08, 2002 Examiner: PROSPROVIDER,SEVEN
                     Desc: TESTING


Items Returned: Date        Item                      Serial      Status

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

# View Appliance Transactions

**Function description**

You can view appliance transactions for the patient by typing **4** at the **"Enter 10-2319 screen to VIEW..."** prompt.

**Steps**

To view entitlement information, follow these steps:

| Step | Action |
|------|--------|
| 1 | Select the **Appliance Transactions** screen by typing **4**. |
| 2 | If you want to view the complete entry for a transaction, type the number of the transaction at the "**Enter 1-n to show full entry...**" prompt. |

**Appliance Transactions Screen**

```
Select one of the following:
        1          PATIENT DEMOGRAPHICS
        2          CLINIC ENROLLMENTS/CORRESPONDENCE
        3          ENTITLEMENT INFORMATION
        4          APPLIANCE TRANSACTIONS
        5          AUTO ADAPTIVE INFORMATION
        6          CRITICAL COMMENTS
        7          ADD/EDIT DISABILITY CODE
        8          HOME OXYGEN ITEMS

Enter 10-2319 screen to VIEW (1-8),'^' to EXIT, or 'return' to
continue : 4 <Enter> APPLIANCE TRANSACTIONS

PROSPATIENT,TWO        SSN: 000-00-0002   DOB: FEB 28,1949   CLAIM#

     Date   Qty  Item      Type  Vendor    Sta  Serial  Delivery Date Tot
Cost
1. 02/16/00  1  TEST ITEM  I VENDOR,TWO     499                         9.00
2. 02/16/00  2  TEST ITEM  I VENDOR,TWO     499                         5.00
3. 02/16/00  1  EYEGLASSES I VENDOR,TWO     499                         0.00
4. 05/07/03 1   WHEELCHAIR I VENDOR,THREE           05/07/03  300.00
+=Turned-In  *=Historical Data  I=Initial  X=Repair  S=Spare  R=Replacement

Enter 1-19 to show full entry, '^' to exit or `return` to continue.
4 <Enter>
```

*Continued on next page*

# View Appliance Transactions, Continued

**Continued…**     Below is the complete entry for the transaction selected previously.

**Appliance/**
**Repair Line**
**Item Detail**

```
PROSTHETICS,PATIENTONE            SSN: 000-12-3456            DOB: 01-01-1000
                        APPLIANCE/REPAIR LINE ITEM DETAIL              <4-1>

TYPE OF FORM:            INITIATOR:                    DATE: OCT 01, 2013
DELIVER TO:
TYPE TRANS: INITIAL ISSUE      QTY:      SOURCE: COMMERCIAL
VENDOR:
DELIVERY DATE:
TOTAL COST:                    OBL:
REMARKS:
DISABILITY SERVED: NSC/OP
ITEM DESCRIPTION: COOKIE
APPLIANCE: COOKIE
CONTRACT #:
EXCLUDED/WAIVER:
PSAS HCPCS: A4364      ADHESIVE
ICD10 Code: A00.0   CHOLERA DUE TO VIBRIO CHOLERAE 01, BIOVAR CHOLERAE

CPT MODIFIER:
DESCRIPTION:
EXTENDED DESCRIPTION:

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

**Screen output**     Below is the continued screen output from the **Appliance Transaction** information.

# View Auto Adaptive Information

**Function description**

You can view the patient's auto adaptive information by typing **5** at **the "Enter 10-2319 screen to VIEW..."** prompt.

**Auto Adaptive Screen**

```
Select one of the following:
        1       PATIENT DEMOGRAPHICS
        2       CLINIC ENROLLMENTS/CORRESPONDENCE
        3       ENTITLEMENT INFORMATION
        4       APPLIANCE TRANSACTIONS
        5       AUTO ADAPTIVE INFORMATION
        6       CRITICAL COMMENTS
        7       ADD/EDIT DISABILITY CODE
        8       HOME OXYGEN ITEMS

Enter 10-2319 screen to VIEW (1-8),'^' to EXIT, or 'return' to continue : 5
AUTO ADAPTIVE INFORMATION

NAME: PTROSPATIENT,TWO       SSN: 000000002  CLAIM NO.
VEHICLE ID#       YEAR PURCHASE DATE  MAKE    MODEL         PAGE 1
PROCESS DATE   ITEM             QTY        COST      AMIS      TYPE
                          '*' Denotes Inactive Vehicle of Record
---------------------------------------------------------------------
VAN-123            199  MAR 13, 2000   FORD      VAN     4502: MAR 13, 2000

MAR 13, 2000   AIR-CONDITIONING  1      $500.00   ADAP EQP   INITIAL
MAR 13, 2000   CB RADIO          1      $100.00   VAN MOD    INITIAL

                          Total/Date:       $600.00

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

# View Critical Comments

| | |
|---|---|
| **Function description** | You can view, add, or edit any critical comments for the patient by typing 6 at the "**Enter 10-2319 screen to VIEW**..." prompt. |

**Steps**　　To add or edit critical comments, follow these steps:

| Step | Action |
|---|---|
| 1 | Select the **Critical Comments** option by typing **6**. |
| 2 | At the Would you like to Add/Edit Patient Critical Comments? No// prompt, type Y for Yes, and press <Enter>. |
| 3 | At the **Edit? No//** prompt, type **Y** for **Yes**, and press <**Enter**>. |
| 4 | The word processing text editor displays for you to type your note. |
| 5 | Press the **Num Lock** key and the **E** key together to exit and save the information. |

**Critical Comments Screen**

```
Select one of the following:
         1        PATIENT DEMOGRAPHICS
         2        CLINIC ENROLLMENTS/CORRESPONDENCE
         3        ENTITLEMENT INFORMATION
         4        APPLIANCE TRANSACTIONS
         5        AUTO ADAPTIVE INFORMATION
         6        CRITICAL COMMENTS
         7        ADD/EDIT DISABILITY CODE
         8        HOME OXYGEN ITEMS

Enter 10-2319 screen to VIEW (1-8),'^' to EXIT, or 'return' to continue : 6
CRITICAL COMMENTS

PATIENT:PROSPATIENT,ONE                              CRITICAL COMMENTS
No Patient Critical Comments Recorded for this patient!

Would you like to Add/Edit Patient Critical Comments? No// Y  (Yes)
CRITICAL COMMENTS:
  No existing text
  Edit? NO// YES

==[ WRAP ]==[ INSERT ]======< CRITICAL COMMENTS >=====[ <PF1>H=Help]=
Editing Critical Comments.




<======T======T======T======T======T======T======T======T======T>====

PATIENT: PROSPATIENT,ONE                              CRITICAL COMMENTS
Editing Critical Comments.

Would you like to Add/Edit Patient Critical Comments? No// <Enter> (No)
*Comments on file
```

# Add/Edit Disability Codes

**Function description**
You can add to or edit the patient's disability codes by typing **7** at the **"Enter 10-2319 screen to VIEW..."** prompt.

**Steps**
To add or edit a Disability Code, follow these steps:

| Step | Action |
|------|--------|
| 1 | Select the **Add/Edit Disability Code** option by typing **7**. |
| 2 | At the Would you like to Add/Edit a Disability Code to the Patient's 2319? Yes// prompt, press <Enter.> |
| 3 | At the **Select Prosthetic Disability Code** prompt, type a Disability Code, and press **<Enter.>** (You can also type two question marks to view a list and select one.) |

**Add/Edit Disability Code Screen**

```
Select one of the following:
          1          PATIENT DEMOGRAPHICS
          2          CLINIC ENROLLMENTS/CORRESPONDENCE
          3          ENTITLEMENT INFORMATION
          4          APPLIANCE TRANSACTIONS
          5          AUTO ADAPTIVE INFORMATION
          6          CRITICAL COMMENTS
          7          ADD/EDIT DISABILITY CODE
          8          HOME OXYGEN ITEMS

Enter 10-2319 screen to VIEW (1-8),'^' to EXIT, or 'return' to continue : 7
<Enter> ADD/EDIT DISABILITY CODE
Would you like to ADD/EDIT a Disability Code to the Patient's 2319? YES//
<Enter>

Select PROSTHETIC DISABILITY CODE: ??  <Enter>
Choose from:
   AMP/LAE      SC    SC VIETNAM
   COS/B        NSC   EMPLOYEE

     You may enter a new PROSTHETIC DISABILITY CODE, if you wish
     This is a pointer to the Prosthetic Disability Code file (662).

   Choose from:
   1            AMP/LAE
   2            AMP/LAK
   3            AMP/LBE

Select PROSTHETIC DISABILITY CODE: 1 <Enter> AMP/LAE
        ...OK? Yes// <Enter>   (Yes)
              SC    SC VIETNAM

Select one of the following:
          E           EDIT DISABILITY CODE
          A           ADD DUPLICATE DISABILITY CODE

Enter response: EDIT// A <Enter> ADD DUPLICATE DISABILITY CODE
PROSTHETIC DISABILITY CODE: AMP/LAE// <Enter>
```

*Continued on next page*

# Add/Edit Disability Codes, Continued

**Add a Code**

To continue to add a Disability Code, see the sample screen below.  At the **Would you like to Mark a Disability Code as Deleted?  NO//** prompt, press <**Enter**> to accept the default setting.

**Steps**

To add or edit a Disability Code, follow these steps:

| Step | Action |
|------|--------|
| 1 | Select the **Add/Edit Disability Code** option by typing **7**. |

**Add/Edit Disability Code Screen (continued)**

```
SERVICE/NON-SERVICE: ??
     Enter `1` for Service Connected or `2` for Non-Service Connected.
     Choose from:
      1         SERVICE CONNECTED
      2         NON-SERVICE CONNECTED
SERVICE/NON-SERVICE: 2  NON-SERVICE CONNECTED


ELIGIBILITY CATEGORY: ??
        This field stores the Eligibility Category for the Patient.

     Choose from:
      1         SC VIETNAM
      2         ALL OTHER SERVICE-CONNECTED
      3         NSC A&A
      4         OTHERS ELIGIBLE
      5         V.I.S.T.
      6         VOC REHAB
      7         PHC
      8         INPATIENT
      9         EMPLOYEE
      10        PRIMA FACIA
ELIGIBILITY CATEGORY: 1  SC VIETNAM

Select PROSTHETIC DISABILITY CODE:  <Enter>

PROSPATIENT,ONE HAS THE FOLLOWING DISABILITY CODES:

     COS/B     NSC    EMPLOYEE
     AMP/LAE   SC     SC VIETNAM
     AMP/LAE   NSC    SC VIETNAM

Would you like to Mark a Disability Code as Deleted? NO// <Enter>
*Comments on file
```

# Add/Edit Disability Codes, Continued

**To Edit a Code**  You can edit and delete a Disability Code using this screen.  To edit a disability code, type **E** for **Edit Disability Code** at the Enter Response prompt.  Press **<Enter>** at the additional prompts to accept the default settings.

You delete a Disability Code for a patient by entering YES at the **Would you like to Mark a Disability Code as Deleted?  No//** prompt.

**Add/Edit Disability Code Screen**

```
Select one of the following:

        E          EDIT DISABILITY CODE
        A          ADD DUPLICATE DISABILITY CODE

Enter response: EDIT// <Enter> DISABILITY CODE
PROSTHETIC DISABILITY CODE: AO/AUTO// <Enter>
SERVICE/NON-SERVICE: SERVICE CONNECTED// <Enter>
ELIGIBILITY CATEGORY: SC VIETNAM// <Enter>

Select PROSTHETIC DISABILITY CODE: <Enter>
PROSPATIENT,ONE HAS THE FOLLOWING DISABILITY CODES:

    COS/B     NSC   EMPLOYEE
    AMP/LAE   SC    SC VIETNAM
    AMP/LAE   NSC   SC VIETNAM
    ORTH/PLS  SC    INPATIENT
    ORTH/DLF  SC    SC VIETNAM
    AO/AUTO   SC    SC VIETNAM


Would you like to Mark a Disability Code as Deleted? NO// <Enter>
*Comments on file
```

# View Home Oxygen Items

**Function description**

You can view the patient's home oxygen information by typing **8** at the **"Enter 10-2319...."** prompt.

**Sample output**

```
Select one of the following:
          1          PATIENT DEMOGRAPHICS
          2          CLINIC ENROLLMENTS/CORRESPONDENCE
          3          ENTITLEMENT INFORMATION
          4          APPLIANCE TRANSACTIONS
          5          AUTO ADAPTIVE INFORMATION
          6          CRITICAL COMMENTS
          7          ADD/EDIT DISABILITY CODE
          8          HOME OXYGEN ITEMS

Enter 10-2319 screen to VIEW (1-8),'^' to EXIT, or 'return' to continue: 8
<Enter> HOME OXYGEN ITEMS
PROSPATIENT,THREE     000-00-0003
Current Prescription (#5)
       Active Date: OCT 16,2003    Expiration Date: OCT 15,2004
   CONCENTRATOR O2 @ 28% VIA COOL AEROSOL TRACH MASK, BUNN COMPRESSOR, M TANK

       10 E TANKS, 4 TRACH MASKS, 6 1000 ML PREFILLED AND 4 500 ML AEROSOL BTLS
       PER MO.
       NEBULIZER .5 CC ALBUTEROL & 2.5 CC IPRATROPRIUM,
       2 #6 SHILEY TRACH TUBES CUFFED, UNFENESTRATED EVERY 6 MONTHS WITH NON-
       DISPOSABLE INNER CANNULAS
Enter RETURN to continue or '^' to exit:  <Enter>


PROSPATIENT,THREE     SSN: 000-00-0003   DOB: OCT 12,1954   CLAIM# 391580866
   Date     Qty    Item     Type  Vendor    Sta  Serial  Delivery Date Tot Cost
1. 01/27/04  4   HUMIDIFIER   X FIRST COMM  695           02/11/04      26.60
   4111
2. 01/27/04  1   OXYGEN-REN   X FIRST COMM  695           02/11/04      90.25
   4111
3. 01/27/04  1   OX-COMPRES   X FIRST COMM  695           02/11/04      42.75
   4111
4. 12/17/03 12   NEBULIZER    I FIRST COMM  695           12/22/03      14.76
   4111
5. 12/17/03  1   OXYGEN-REN   X FIRST COMM  695           12/22/03      90.25
   4111
6. 12/17/03  8   OXYGEN-REF   X FIRST COMM  695           12/22/03      72.24
   4111
7. 12/17/03  1   OX-COMPRES   X FIRST COMM  695           12/22/03      42.75
   4111
8. 11/24/03  4   HUMIDIFIER   X FIRST COMM  695           12/05/03      26.60
   4111
9. 11/24/03  4   NEBULIZER    I FIRST COMM  695           12/05/03       4.92
   4111
10. 11/24/03 1   OXYGEN-REN   X FIRST COMM  695           12/05/03      90.25
```

# Transaction Inquiry (TI)

## View a Transaction

| **Function description** | You can view a single purchasing transaction through the **Transaction Inquiry (TI)** option from the **Display/Print** Menu. (This option displays purchasing information for a specific transaction from the Prosthetics 1358 file (#664.)) |
|---|---|

**Steps**    To perform a transaction inquiry, follow these steps:

| Step | Action |
|---|---|
| 1 | Type **TI** for the **Transaction Inquiry** option from the **Display/Print** Menu. |
| 2 | At the Select Patient Name or Transaction Number prompt, type a patient name or transaction number, and press <**Enter**>. |
| 3 | Select the transaction you want to view from the list of transactions displayed. |

**Transaction Inquiry Screen**

```
   23     Display/Print Patient 2319
   TI     Transaction Inquiry
   IP     Print All Prosthetic Items
   BI     Print Prosthetic Billings for MAS
   IH     Item History
   SE     Search for Recalled Item
   SI     Site Parameter Inquiry
   VI     Vendor Inquiry

Select Display/Print Option: TI <Enter> Transaction Inquiry

Select Patient Name or Transaction Number: PROVIDER1,TWO  <Enter>
PROSPATIENT,ONE         1-1-30
   453890765    NO     PILL              HINES, IL
1 PATIENT,ONE  1-31-2000 PATIENT,ONEClosed REF: 0002  EYEGLASSES
2 PATIENT,ONE  1-31-2000 PATIENT,ONEClosed REF: 0003  TEST ITEM
3 PATIENT,ONE  1-31-2000 PATIENT,ONE      REF: 0004  TEST ITEM
4 PATIENT,ONE  1-31-2000 PATIENT,ONE                 TEST ITEM
5 PATIENT,ONE  1-31-2000 PATIENT,ONE      REF: 0003  PICKUP/DELIVERY

Press <RETURN> to see more, '^' to exit this list, OR CHOOSE 1-5: 1
<Enter>
```

# View a Transaction, Continued

**Print a transaction**

You can also print a transaction as well as view one.

**Steps** (continued)

To perform a transaction inquiry, follow these steps:

| Step | Action |
|------|--------|
| 4 | The `Device` prompt appears. |
| 5 | At the `Device` prompt, press <**Enter**> twice to display information to your terminal screen. (You can also type **SLAVE** to send the information to your printer, and press <**Enter**>.) |
| 6 | The transaction information displays for the requested patient. |

**Transaction Inquiry Screen**

```
1-31-2000 PROSPATIENT,ONE      Closed      REF: 0002    EYEGLASSES

DEVICE: <Enter>  TELNET     Right Margin: 80// <Enter>
PROSTHETICS 1358 LIST                   SEP 27,2000  09:46    PAGE 1
---------------------------------------------------------------------

DATE: JAN 31, 2000                   PATIENT: PROSPATIENT,ONE
  OBLIGATION NUMBER: 499-C45004      VENDOR: VENDOR PRODUCTION
  C.P.: 499-94-2-055-0047            REFERENCE: 499-C45004-0002
  CLOSE OUT DATE: JAN 31, 2000@13:05:53 INITIATOR: PROVIDER,THREE
  EST. SHIPPING CHARGE: 1            SHIPPING ENTRY: JAN 31, 2000
  STATION NAME: SUPPORT ISC
ITEM: EYEGLASSES                     BRIEF DESCRIPTION: ITEM 1
  UNIT COST: 1                       QTY: 1
  UNIT OF ISSUE: EA                  TYPE OF TRANSACTION: INITIAL
ISSUE
  PATIENT CATEGORY: SC/OP            SOURCE: COMMERCIAL
  APPLIANCE/REPAIR: JAN 31, 2000     PSAS HCPCS: A4500
  CLOSE-OUT REMARKS: CLOSE           FORM TYPE: 2421
  CLOSED BY: PROVIDER,THREE            DELIVER TO: VETERAN
  DATE REQUIRED: MAR 01, 2000        DELIVERY TIME: 30

Select Patient Name or Transaction Number: <Enter> to exit the
screen.
```

# Print All Prosthetic Items (IP)

## Overview

**Introduction**    The **Print All Prosthetic Items (IP)** option prints all Prosthetic Item Master records along with their new and repair AMIS codes.  This listing is useful for Purchasing Agents as a catalog of all current Prosthetic items available for issue, and for Prosthetics Supervisors to validate correctness of Prosthetics AMIS codes.

Note:  Lab AMIS codes are not printed with this version of Prosthetics.

**Steps**    To print all Prosthetic items, follow these steps:

| Step | Action |
|------|--------|
| 1 | Type IP for the Print All Prosthetic Items option from the Display/Print Menu. |
| 2 | At the `Device` prompt, press <**Enter**>.  The following displays: `Right Margin: 80//`. |
| 3 | Press <**Enter**>. |

**Print All Prosthetic Items Screen**

```
   23     Display/Print Patient 2319
   TI     Transaction Inquiry
   IP     Print All Prosthetic Items
   BI     Print Prosthetic Billings for MAS
   IH     Item History
   SE     Search for Recalled Item
   SI     Site Parameter Inquiry
   VI     Vendor Inquiry

Select Display/Print Option: IP <Enter> Print All Prosthetic Items
DEVICE:  <Enter>   TELNET    Right Margin: 80// <Enter>
```

**Recommendation**    It is recommended that you run this option quarterly to verify the AMIS codes that have been assigned.  This will assure that you will receive proper calculations in your AMIS Worksheets.

# View the Prosthetic Item Master List

**Prosthetic Item Master List**

You can view the Prosthetic Item Master List from the **Print All Prosthetic Items (IP)** option.  Notice that the Item Master List below has three pages displayed with the Item Number, short description, and extended description.

**Print All Prosthetic Items Screen** (continued)

```
PROS ITEM MASTER LIST                              SEP 27,2000  09:47   PAGE 1

ITEM
NUMBER  SHORT DESCRIPTION         DESCRIPTION
-------------------------------------------------------------------------------
3       **SYRINGE-SUBCUTANEOUS-3I  3 IN SUBCUTANEOUS SYRINGE (3)
        ANC:   05 A    ARC: R01   ONC: 10  ORC: R15 A  RNC:      RRC:
        ANC:   01 A    ARC: R15   ONC:     ORC:        RNC:      RRC:
        ANC:   04 A    ARC: R03 B ONC: 03  ORC: R15 A  RNC:      RRC:
59      EYEGLASSES                EYEGLASSES
        ANC:   11      ARC: R06   ONC: 10  ORC: R15 A  RNC:  04  RRC:   R13
10000   EYEGLASSES                EYEGLASSES
        ANC:   11      ARC: R06   ONC:     ORC:        RNC:      RRC:

PROS ITEM MASTER LIST                              SEP 27,2000  09:47   PAGE 2

ITEM
NUMBER  SHORT DESCRIPTION         DESCRIPTION
-------------------------------------------------------------------------------

        ANC:   04 A    ARC:       ONC:     ORC:        RNC:      RRC:
903     TEST ITEM                 TEST
        ANC:   05 D    ARC: R15   ONC:     ORC: R15 B  RNC:      RRC:
55      WHEELCHAIR-ADULT/HEMI/BLU  STANDARD ADULT ROLLS 2000 HEMI WHEELCHAIR
                                  WITH ELEVATING LEG REST AND ANTI TIPPER,
                                  BLUE (55)
        ANC:   R14     ARC: R15   ONC: 10  ORC: R15 A  RNC:  10  RRC:   R12
56      WHEELCHAIR-CLASSIC-18X16   PREMIER CLASSIC STANDARD WIDTH AND DEPTH,
                                  18X16, SEAT HEIGHT (19 3/4) BACK HEIGHT
                                  STYLE 16 1/2IN, FIXED DETACHABLE DESK
                                  LENGTH ARMS, REAR WHEEL SIZE 24X11IN,
                                  BLACK MOLDED WITH SOLID SNAP ON TIRES,
                                  CHROME PLATED STEEL HANDRIMS, PUSH TO LOCK
                                  WHEEL LOCKS, 8X1 CASTERS, BLACK MOLDED

PROS ITEM MASTER LIST                              SEP 27,2000  09:47   PAGE 3

ITEM
NUMBER  SHORT DESCRIPTION         DESCRIPTION
-------------------------------------------------------------------------------
                                  WITH SOLID TIRES, REGAL BLUE LEATHERETTE
                                  UPHOLSTERY, CHROME FRAME FINISH (56)
        ANC:   17 A    ARC: R15   ONC: 12  ORC: R15 D  RNC:  09  RRC:
```

# Print Prosthetic Billings for MAS (BI)

## Overview

**Introduction**   The **Print Prosthetic Billings for MAS (BI)** option prints all NSC (non-service connected) items issued to patients for billing purposes.  MAS stands for Medical Administrative Services.

**Steps**   To view Prosthetic Billings for MAS, follow these steps:

| Step | Action |
|------|--------|
| 1 | Type BI for the Print Prosthetic Billings for MAS option from the Display/Print Menu. |
| 2 | At the Site prompt, enter the name of the site and press **<Enter>**. |
| 3 | At the **Start With Delivery Date** prompt, enter the beginning date of the date range.  (For instance if the report should cover one year from the current date, enter T-365 which stands for "Today minus 365 days from today"). |
| 4 | At the **End With Delivery Date** prompt, type a **T** for **Today** if you want to enter the end of the date range with the current date. |
| 5 | At the **Device** prompt, enter a printer or press <**Enter**>.  The following displays: **Right Margin: 80//**. Press <**Enter**> again. |

**Print Prosthetic Billings for MAS Screen**

```
   23      Display/Print Patient 2319
   TI      Transaction Inquiry
   IP      Print All Prosthetic Items
   BI      Print Prosthetic Billings for MAS
   IH      Item History
   SE      Search for Recalled Item
   SI      Site Parameter Inquiry
   VI      Vendor Inquiry

Select Display/Print Option: BI  Print Prosthetic Billings for MAS
SITE: Hines Development System//   499

Start With Delivery Date: T-365  (SEP 28, 1999)
End With Delivery Date: T  (SEP 27, 2000)
DEVICE: HOME// <Enter>  TELNET    Right Margin: 80// <Enter>

...EXCUSE ME, JUST A MOMENT PLEASE...
...PREPARING TO PRINT PROSTHETIC BILLING...
```

**Purchasing Menu**   Each transaction done through the **Purchasing** Menu requires the Prosthetic Purchasing Agent to enter the correct patient category for each item issued.  Any item issued to a veteran who is NSC/OP and has insurance recorded in the MAS Patient file, will appear on this listing for billing purposes in MAS.

# View Prosthetic Billing Information

| | |
|---|---|
| **Billing Information** | Below are the first two pages of the Prosthetic billing information for this sample. |

**Print Prosthetic Billings for MAS Screen** (continued)

```
PATIENT NAME     SSN          SEP 28, 1999-SEP 27, 2000STA 499  PAGE 1
-------------------------------------------------------------------------------
TEST,A                5465
   Insurance   COB Subscriber ID    Group       Holder  Effective Expires
   =======================================================================
   BLUE CROSS     9432              111         SELF    03/01/70


06/21/00 06/21/00  TEST ITEM                       QTY: 1 TOTAL COST:    1.00

PROSPATIENT,TWO       0002
   Insurance   COB Subscriber ID    Group       Holder  Effective Expires
   =======================================================================
   AETNA          72727272          1633        SELF    01/01/90  01/01/99
   BLUE CROSS  p  088888888         3333        SELF    01/01/93


12/13/99 12/20/99* EYEGLASSES                      QTY: 1 TOTAL COST:   50.00


    PATIENT NAME     SSN          SEP 28, 1999-SEP 27, 2000STA 499  PAGE 2
-------------------------------------------------------------------------------
PROSPATIENT,TWO       0002
   Insurance   COB Subscriber ID    Group       Holder  Effective Expires
   =======================================================================
   AETNA          72727272          1633        SELF    01/01/90  01/01/99
   BLUE CROSS  p  088888888         3333        SELF    01/01/93


12/13/99 12/13/99  EYEGLASSES                      QTY: 1 TOTAL COST:    5.00
12/13/99 12/13/99  WHEELCHAIR-ADULT/HEMI/BLUE-STD  QTY: 1 TOTAL COST:    5.00

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

# View Prosthetic Billing Information, Continued

**Billing information**

Below are pages 3 and 4 of the Prosthetic billing information of this report.

**Print Prosthetic Billings for MAS Screen** (continued)

```
    PATIENT NAME      SSN              SEP 28, 1999-SEP 27, 2000STA 499  PAGE 3
-------------------------------------------------------------------------------

PROSPATIENT,TWO      0002
   Insurance   COB Subscriber ID     Group         Holder  Effective  Expires
   ============================================================================
   AETNA            72727272         1633          SELF    01/01/90   01/01/99
   BLUE CROSS   p  088888888         3333          SELF    01/01/93


12/13/99 12/13/99  EYEGLASSES                        QTY: 1 TOTAL COST:    50.00
12/13/99 12/13/99  EYEGLASSES                        QTY: 1 TOTAL COST:    50.00
12/13/99 12/13/99  EYEGLASSES                        QTY: 1 TOTAL COST:    50.00
12/13/99 12/13/99  EYEGLASSES                        QTY: 1 TOTAL COST:    50.00
12/13/99 12/13/99  EYEGLASSES                        QTY: 1 TOTAL COST:     5.00
12/13/99 12/13/99  WHEELCHAIR-ADULT/HEMI/BLUE-STD    QTY: 1 TOTAL COST:     5.00
12/20/99 12/20/99  EYEGLASSES                        QTY: 1 TOTAL COST:    50.00

Enter RETURN to continue or '^' to exit: <Enter>

    PATIENT NAME      SSN              SEP 28, 1999-SEP 27, 2000STA 499  PAGE 4
-------------------------------------------------------------------------------

PROSPATIENT,TWO      0002
   Insurance   COB Subscriber ID     Group         Holder  Effective  Expires
   ============================================================================
   AETNA            72727272         1633          SELF    01/01/90   01/01/99
   BLUE CROSS   p  088888888         3333          SELF    01/01/93


12/20/99 12/20/99  EYEGLASSES                        QTY: 1 TOTAL COST:     5.00
12/20/99 12/20/99  WHEELCHAIR-ADULT/HEMI/BLUE-STD    QTY: 1 TOTAL COST:     5.00
12/20/99 12/20/99  EYEGLASSES                        QTY: 1 TOTAL COST:    50.00
12/20/99 12/20/99  EYEGLASSES                        QTY: 1 TOTAL COST:     5.00
12/20/99 12/20/99  WHEELCHAIR-ADULT/HEMI/BLUE-ST     QTY: 1 TOTAL COST:     5.00
01/07/00 01/07/00  EYEGLASSES                        QTY: 1 TOTAL COST:     5.00
01/07/00 01/07/00  EYEGLASSES                        QTY: 1 TOTAL COST:     5.00
```

# Item History (IH)

## View Item History

**Introduction**    The **Item History (IH)** option from the **Display/Print** Menu prints the history of all purchases made for an item you select.  It allows you to review the history of all items issued during any date range you may choose.  You can view the request date, patient name, SSN, Vendor, Serial Number, quantity, total cost, and Initiator.

There are four types of transactions including:  1) Initial Issue, 2) Replacement, 3) Repair, and 4) Spare.  You can select multiple items to view at one time.  This includes who received the item, cost of the item, quantity, purchased or issued, etc.

**Steps**    To view item history, follow these steps:

| Step | Action |
|------|--------|
| 1 | Type **IH** for the **Item History** option from the **Display/Print** Menu. |
| 2 | At the Site prompt, press <**Enter**> to accept the default Site or type two question marks to display and list and select a different site. |
| 3 | Once you have selected a site, an **OK?   Yes//** prompt displays. |
| 4 | Press <**Enter**> and another Select Item prompt displays. |

**Item History Screen**

```
   23      Display/Print Patient 2319
   TI      Transaction Inquiry
   IP      Print All Prosthetic Items
   BI      Print Prosthetic Billings for MAS
   IH      Item History
   SE      Search for Recalled Item
   SI      Site Parameter Inquiry
   VI      Vendor Inquiry

Select Display/Print Option: IH <Enter> Item History
SITE: Hines Development System2//   ST. NUM. 578

Select ITEM 1: ??  <Enter>
   Choose from:
   3           **** THIS ITEM IS INACTIVE ****
   7
   9           **** THIS ITEM IS INACTIVE, USE ITEM NUMBER 11 ****
   40
   55

Select ITEM 1: 3
     1   3      **** THIS ITEM IS INACTIVE ****
     2   345-1234  55
CHOOSE 1-2: 2 <Enter> 55
        ...OK? Yes//   (Yes)  <Enter>

Select ITEM 2: <Enter> or enter another item.
```

# View Item History Within a Date Range

| | |
|---|---|
| **Item Master file** | Please note that the item number and the item name must correspond with what is contained in the Prosthetics Item Master file when you are requesting to view items in the **Item History** option. |

| | |
|---|---|
| **Steps** (continued) | To view item history, follow these steps: |

| Step | Action |
|---|---|
| 5 | At the **Beginning Date:  T-30//** prompt, press <**Enter**> to accept this default setting.  You can also enter a different entry for a beginning date. |
| 6 | At the **Ending Date:  TODAY//** prompt, press <**Enter**> to accept this default setting.  You can also enter a different entry for an ending date. |
| 7 | At the **Device** prompt, press <**Enter**>.  The following displays: **Right Margin: 80//**.  Press <**Enter**> again. |
| 8 | The Item History displays. |

| | |
|---|---|
| **Item History Screen** (continued) | |

```
Beginning Date: T-30// <Enter>  (AUG 29, 2000)
Ending Date: TODAY// <Enter>    (SEP 28, 2000)
DEVICE: HOME// <Enter>   TELNET      Right Margin: 80// <Enter>

...EXCUSE ME, LET ME THINK ABOUT THAT A MOMENT...
ITEM HISTORY:  WHEELCHAIR-ADULT/HEMI/BLUE-STD FOR ALL       STA ST. NUM. 578P
AGE 1

REQUEST DATE       PATIENT NAME   SSN    VENDOR          AUG 29, 2000-SEP 28,
2000
SEP 25, 2000@11:56 PATIENT,FOUR    2750  Vendor SERIAL NBR:     QTY:  1
TOTAL COST:    23.00    INITIAL ISSUE
INITIATOR:      PROSPROVIDER,THREE

TOTAL DOLLARS SPENT ON THIS ITEM: $    23.00   TOTAL QUANTITY ISSUED:    1
```

# Search for Recalled Item (SE)

## Overview

**Introduction**     The **Search for Recalled Item (SE)** option from the **Display/Print** Menu searches the RECORD OF PROS APPLIANCE/REPAIR file (#660) for a recalled item.

**Steps**     To search for a recalled item, follow these steps:

| Step | Action |
|------|--------|
| 1 | Type SE for the Search for Recalled Item (SE) option from the Display/Print Menu. |
| 2 | At the **Site** prompt, press <**Enter**> to accept the default Site or type two question marks to display a list and select a different site. |
| 3 | At the **Beginning Date** prompt, enter a date for the beginning of the date range of the data you want to view, and press <**Enter**>. (For instance, if you want a range of a year of data, enter **T-365** for "Today minus 365 days from the current date.") |
| 4 | At the **Ending Date** prompt, enter the end date of the date range of the data you want to view, and press <**Enter**>. (For instance, you can enter **T** for **Today** for the current date.) |
| 5 | At the **Select one of the following** prompts, a list of options display including: 1) **Search by Serial Number or Lot Number** or 2) **Search by Item**. Type the option that you want and press <**Enter**>. |

**Search for Recalled Item Screen**

```
   23      Display/Print Patient 2319
   TI      Transaction Inquiry
   IP      Print All Prosthetic Items
   BI      Print Prosthetic Billings for MAS
   IH      Item History
   SE      Search for Recalled Item
   SI      Site Parameter Inquiry
   VI      Vendor Inquiry

Select Display/Print Option: SE  Search for Recalled Item
SITE: A 345678901234567890123456789 LONG NAME//   499

Beginning Date: T-365  (SEP 28, 1999)
Ending Date: T  (SEP 27, 2000)


Select one of the following:

        1          Search by Serial Number or Lot Number
        2          Search by Item

Enter response: <Enter>
```

# Search by Serial Number or Lot Number

**Search patterns**      Items issued through the Prosthetics stock program can be traced to an individual patient if either the item's lot or serial number was recorded at the time of the issue. To use the **Search by Serial Number or Lot Number** option, some unique pattern in either the lot or serial number must be known.

For example, to find all issues to patients receiving an item with the Serial Number (or in the Lot Number) of **90-222-98**, enter **90-** at the "**Enter Serial Number or Lot Number:**" prompt. A search of the database will begin and the results may be sent to the screen or printer. Multiple results may display.

For this example, entering **90-222** or **222** would have given the same results. Entering 222-90 would NOT have found these transactions since 222-90 is NOT a pattern in either transaction's Serial Number or Lot Number.

**Note:** You may also search by item name.

**Steps**      To search for a recalled item, follow these steps:

| Step | Action |
|------|--------|
| 1 | Enter 1 for the Search by Serial Number or Lot Number. |
| 2 | At the `Enter Serial Number or Lot Number` prompt, you can enter partial information to begin the search. |
| 3 | At the `Device` prompt, press <**Enter**>. The following displays: `Right Margin: 80//`. Press <**Enter**> again. |

**Search by Serial Number or Lot Number Screen**

```
     Select one of the following:

        1          Search by Serial Number or Lot Number
        2          Search by Item

Enter response: 1  Search by Serial Number or Lot Number
Enter Serial Number or Lot Number: 9
DEVICE: <Enter> HOME//   TELNET     Right Margin: 80//  <Enter>

...HMMM, I'M WORKING AS FAST AS I CAN..

RECALLED ITEM REPORT
JUN 20, 1997-OCT 02, 2000 STA ST. NUM. 578                    PAGE 1
REQUEST DATE   PATIENT NAME   SSN    ITEM           VENDOR

JUN 01, 2000   TEST,H         5612   TEST ITEM      PROSVENDOR,THREE
LOT NBR:                 SERIAL NBR: K0429

                         END OF REPORT
```

# Search by Item Number

| | |
|---|---|
| **Report description** | The **Recalled Item Report** displays the request date, patient name, SSN, item and vendor. |

**Steps**

To search for a recalled item, follow these steps:

| Step | Action |
|---|---|
| 6 | At the **Select ITEM** prompt, type either an item number or two question marks to display a list and then select one. |
| 7 | At the **Device:   HOME//** prompt, press <**Enter**> twice to display the information to your terminal screen (or type **SLAVE** to print it). |

**Search for Recalled Item Screen** (continued)

```
Select one of the following:

        1         Search by Serial Number or Lot Number
        2         Search by Item

Enter response: 2  Search by Item Select ITEM: ??

   Choose from:
   3            **** THIS ITEM IS INACTIVE ****
   7
   9            **** THIS ITEM IS INACTIVE, USE ITEM NUMBER 11 ****
   40
   55
   56

Select ITEM: 3
    1   3        **** THIS ITEM IS INACTIVE ****
    2   345-1234  55
CHOOSE 1-2: 1 <Enter>   3      **** THIS ITEM IS INACTIVE ****
        ...OK? Yes//  <Enter>  (Yes)

DEVICE: HOME//  <Enter>  TELNET     Right Margin: 80// <Enter>

        RECALLED ITEM REPORT     SEP 28, 1999-SEP 27, 2000   STA 499   PAGE 1
REQUEST DATE    PATIENT NAME    SSN    ITEM                 VENDOR

MAY 19, 2000    PATIENT,TWO   8888  **SYRINGE-SUBCUTA  PROSVENDOR,THREE
LOT NBR:                SERIAL NBR:

MAY 22, 2000    PATIENT,TWO 8888  **SYRINGE-SUBCUTA  PROSVENDOR,FIVE
LOT NBR:                SERIAL NBR:

MAY 23, 2000    PATIENT,TWO  8888  **SYRINGE-SUBCUTA  PROSVENDOR,FIVE

LOT NBR:                SERIAL NBR:

                        END OF REPORT
```

## Search by Item Number, Continued

**Example**

The following is an example of the usefulness of the **Search for Recalled Item** option:

A vendor calls the Prosthetic office to look for a patient's name and/or purchase order number but all they have is the item that was purchased and the date of the purchase.

By using this option, you can locate the patient's name and the item at the prompt that asks for the beginning and ending date.

You would then access the patient's 2319 which is located under the **Display/Print** option.

Select the Appliance Transactions option.

Select the date given to you by the vendor and enter the number that matches the date.

The number will show full entry, and you will be able to locate the purchase order number.

# Site Parameter Inquiry (SI)

## Overview

**Introduction**    The **Site Parameter Inquiry (SI)** option from the **Display/Print** Menu should be used to review your local site information.

**Steps**    To inquire on a site parameter, follow these steps:

| Step | Action |
|------|--------|
| 1 | Type ST for the Search for Recalled Item (ST) option from the Display/Print Menu. |
| 2 | At the **Site** prompt, type two question marks to display a list and select a site. |
| 3 | At the **Device:    HOME//** prompt, press <**Enter**> twice to display the information to your terminal screen (or type **SLAVE** to print it). |

**Site Parameter Inquiry Screen**

```
   23      Display/Print Patient 2319
   TI      Transaction Inquiry
   IP      Print All Prosthetic Items
   BI      Print Prosthetic Billings for MAS
   IH      Item History
   SE      Search for Recalled Item
   SI      Site Parameter Inquiry
   VI      Vendor Inquiry

Select Display/Print Option: SI <Enter> Site Parameter Inquiry

Select PROSTHETICS SITE PARAMETERS SITE NAME: ??

   Choose from:
   Hines Development System
   Hines Development System2
   CORKWELL VAMC
   HINESTEST
   SAN ANTONIO VAMC
   ZZOJ VAMC VAMC

Select PROSTHETICS SITE PARAMETERS SITE NAME: H  <Enter>
     1   Hines System Development
     2   Hines System Development2
CHOOSE 1-2: 1 <Enter>  Hines System Development

DEVICE: 1    <Enter>   P-SLAVE-CERA10  173C
```

# Vendor Inquiry (VI)

## Overview

**Introduction**    The **Vendor Inquiry** (VI) option from the **Display/Print** Menu provides a display of all information contained in IFCAP's Vendor file. Enter the vendor's name and the information is displayed. You can type two question marks to display a list of vendors to select one.

**Display/Print Menu Screen**

```
   23     Display/Print Patient 2319
   TI     Transaction Inquiry
   IP     Print All Prosthetic Items
   BI     Print Prosthetic Billings for MAS
   IH     Item History
   SE     Search for Recalled Item
   SI     Site Parameter Inquiry
   VI     Vendor Inquiry

Select Display/Print Option: VI   <Enter> Vendor Inquiry

Select VENDOR NAME: ?? <Enter>

   Choose from:
   1          PROSVENDOR,FOUR                                NO:   1
ORD ADD:M AND M AVENUE                        FMS:
       HACKETTSTOWN, NJ 07840                 CODE:        FAX:555 555-1212
****THIS VENDOR IS INACTIVE, NO REPLACEMENT VENDOR *****
     PLEASE CHOOSE ANOTHER VENDOR
   2          PROSVENDOR,FIVE                 PH:555 555-5555  NO:   2
ORD ADD:1ST AVE NO 22ND                       FMS:
       HINES, IL 60141                        CODE:          FAX:

   3          PROSVENDOR,THREE                PH:555-555-5555  NO:   3
ORD ADD:CORPORATE ORDER ENTRY                 FMS:
       ANY PARK, IL 60064                     CODE:          FAX:

   4          PROSVENDOR,SIX          EDI  PH:555 555-5555  NO:   4
ORD ADD:7701 SOUTH ST                          FMS:TEST TEST
       CHICAGO, IL 60620                      CODE:          FAX:

   5          PROSVENDOR,SEVEN        PH:555 555-5555  NO:   5
ORD ADD:7501 S PULASKI                        FMS:
       CHICAGO, IL 60652                      CODE:FED000000    FAX:

                 ^
Select VENDOR NAME: PROSVENDOR,SIX <Enter> PROSVENDOR,SIX  EDIPH:555 555-
5555NO:
    4
ORD ADD:7701 SOUTH ST                          FMS:TEST TEST
       CHICAGO, IL 60620                      CODE:          FAX:

        ...OK? Yes//   (Yes) <Enter>
```

# Vendor Inquiry Screen Output

**Vendor Report**    The Vendor report displays for the vendor selected.  You can press <**Enter**> at the
**Device** prompt, to display the information to your terminal or type **SLAVE** to send it
to your printer for a hard copy.

**Vendor Inquiry**
**Screen**

```
DEVICE:  <Enter> TELNET    Right Margin: 80// <Enter>
VENDOR LIST                                 OCT  3,2000  15:13    PAGE 1
--------------------------------------------------------------------------------

NUMBER: 4                               NAME: PROSVENDOR,SIX
  ORDERING ADDRESS1: 7701 SOUTH CLAREMONT
  ORDERING CITY: CHICAGO                ORDERING STATE: ILLINOIS
  ORDERING ZIP CODE: 60620         PROCUREMENT CONTACT PERSON: PROVIDER,TEN
  VENDOR PHONE NUMBER: (555) 555-5555  BILLING ADDRESS1: BILLING ADDRESS 1
  BILLING ADDRESS2: BILLING ADDRESS 2  BILLING CITY: CHICAGO
  BILLING STATE: ILLINOIS              BILLING ZIP CODE: 60620
  BILLING PHONE NUMBER: 555-5555
TYPE OF OWNERSHIP (FY88): V   VIETNAM VETERAN - OWNED
SOCIOECONOMIC GROUP (FPDS): Q  VIETNAM VET-OWNED SM
SOCIOECONOMIC GROUP (FPDS): S  VETERAN-OWNED SM BUSINESS
  BUSINESS TYPE (FPDS): SMALL          LABOR SURPLUS AREA?: YES
  BUSINESS TYPE (FPDS-88): SMALL       IS A SF129 ON FILE?: YES
  DATE OF SF129: OCT 23, 1992          GUARANTEED DELIVERY VENDOR?: NO
  SPECIAL FACTORS: FAX#555-2509/FOB D  EDI VENDOR?: YES
  VENDOR ID NUMBER: 77778
```

# Section 3:  Purchasing Menu (PU)

## Overview

**Introduction**     Creating the Prosthetics purchase order is an involved process and includes the following:

It combines patient information, vendor, item, obligation, and cost information on a single purchasing document.

It is integrated with six other VISTA applications including:  PSAS, IFCAP, Consult Tracking, CPRS, Patient Care Encounters, DSS and Billing.  They are integrated by exchange of data between applications.

It is also different because of the structure of the National Prosthetics Patient Database (NPPD) and the NPPD requirements.

Creating the PSAS purchasing document using IFCAP interface is a seamless process.

PSAS data (patient name, SSN, address, and phone number) are automatically printed on PSAS obligation document.

**Background**     PSAS has developed a customized **Purchasing Menu** in the prosthetics software package in VISTA, which calls into IFCAP, in order to alleviate the need to switch to and from various packages in VISTA or various screens.  This reduced processing time of procuring devices/appliances and services for direct patient care.

The **National Prosthetic Patient Database (NPPD)** requires various fields, which are patient specific, in order to ensure we are adhering to eligibility criteria, and maintaining prescription, diagnosis, ordering, vendor, item, and accounting data is captured on the patients record.  The need for one point of entry and seamless entry/order processing has proven effective in reducing delays and fast effective processing of orders.

PSAS is held to a five-day time limit in processing an order (again since it is for direct patient care), and VISN Directors performance standards state such.

**Prosthetics System**     The **Purchasing Menu (PU)** is accessed from the **Prosthetic Official's Menu**.

# Overview, Continued

**VA Forms**
Purchasing interfaces with IFCAP into the IFCAP 1358 module. Forms printed include the following:

VAF 10-2421, Prosthetics Authorization and Invoice
Form Letter 10-55, Authority to Exceed Amount on Service Card.

For tracking transactions associated with purchasing, Prosthetics will accommodate:

VAF 10-2520, Prosthetic Service Card Invoice
VAF 10-2914, Prescription and Authorization for Eyeglasses - Computer entry of
    eyeglass prescriptions has been automated.
No-Form, Pickup/Delivery Charges
Request for Estimate (FL 10-55)
Patient Notification Letter.

Listed below are all of the menus and sub-menus that you will use for purchasing purposes. If the system does not allow you to access an option, contact your Fiscal Service and inform them that you need access to fund control points.

**Purchasing Menu (PU)**

```
Select Prosthetic Official's Menu Option: PU  Purchasing

   EN      Enter New Request ...
   SI      Stock Issues ...
   RP      Reprints ...
   RE      Record 2237 Purchase to 2319
   ED      Edit/Delete 2237 from 10-2319
   CA      Cancel a Transaction
   CO      Close Out
   CPC     Cancel Purchase Card Transaction
   CPO     Reconcile/Close Out Purchase Card Transaction
   ED2     Edit 2319
   ED2C    Edit 2319 (Vendor,QTY,Cost)
   EDPC    Edit Purchase Card Transaction
   HI      Add Historical Data
   HID     Delete Historical Data Entry
   LI      List Open 1358 Prosthetic Transactions
   LII     List Open 1358 Transactions By Initiator
   LPC     List Open Purchase Card Transactions
   LPCI    List Open Purchase Card Transactions By Initiator
   LPS     Purchase Card Summary Sheet

Select Purchasing Option:
```

**In this manual**
The following topics are covered under the Purchasing Menu:

| Topic | See Page |
|-------|----------|
| List Open 1358 Prosthetic Transactions (LI) | 61 |
| Close Out (CO) | 63 |
| Enter a New Request (EN) | 64 |

*Continued on next page*

## **Overview,** Continued

**Stock Issues**    There is a separate **Stock Issues User Manual** that was developed with Patch
RMPR*3*61 the Inventory/Bar Coding enhancement.  Therefore this menu and the
menu options will not be explained in this basic manual.

**Purchase Cards**    There is also a **Purchase Cards User Manual** that is available from the Vista
Document Library for you to download and therefore will not be explained in this
basic manual.

The **Purchase Cards User Manual** also documents the following Purchasing
options:

Purchase Card Form (PC) – from the **Enter New Request (EN) Menu**
CPC - Cancel Purchase Card Transaction
CPO - Reconcile/Close Out Purchase Card Transaction
LPC - List Open Purchase Card Transactions
LPCI - List Open Purchase Card Transactions By Initiator
LPS - Purchase Card Summary Sheet
Reprint a Purchase Card Form (PCR) – from the **Reprints (RP) Menu**

# List Open 1358 Prosthetic Transactions (LI)

**Introduction**    The **List Open 1358 Prosthetic Transactions (LI)** option produces a report that will print the open 1358 transactions in the Prosthetics Package, sorted by initiator. However, it will not include manual transactions that were created in the IFCAP 1358 module. Once the transaction has been closed out, it will not appear on this report.

**Purchasing (PU) Menu**

```
   EN      Enter New Request ...
   SI      Stock Issues ...
   RP      Reprints ...
   RE      Record 2237 Purchase to 2319
   ED      Edit/Delete 2237 from 10-2319
   CA      Cancel a Transaction
   CO      Close Out
   CPC     Cancel Purchase Card Transaction
   CPO     Reconcile/Close Out Purchase Card Transaction
   ED2     Edit 2319
   ED2C    Edit 2319 (Vendor,QTY,Cost)
   EDPC    Edit Purchase Card Transaction
   HI      Add Historical Data
   HID     Delete Historical Data Entry
   LI      List Open 1358 Prosthetic Transactions
   LII     List Open 1358 Transactions By Initiator
   LPC     List Open Purchase Card Transactions
   LPCI    List Open Purchase Card Transactions By Initiator
   LPS     Purchase Card Summary Sheet

Select Purchasing Option: LI <Enter>  List Open 1358 Prosthetic Transactions
This report lists open purchasing transactions created in the
Prosthetic Package.  It will not include manual transactions done
in the IFCAP 1358 module.

SITE: Hines Development System//  <Enter>                    499


Starting Date: T-300 <Enter>   (JAN 31, 2001)
Ending Date: T <Enter>  (NOV 27, 2001)
DEVICE: HOME// <Enter>    TELNET    Right Margin: 80// <Enter>

…Hmmm, I'm working as fast as I can
```

**Site**    Multiple division sites are available

**Date prompts**    The date prompts determine the range of dates for which the report will be produced.

*Continued on next page*

# List Open 1358 Prosthetic Transactions (LI), Continued

**Output**      Here's the output:

**Screen output**

```
FROM: JAN 31, 2001-NOV 27, 2001   OPEN 1358 TRANSACTIONS      STA 499    PAGE 1

PATIENT NAME    SSN    OBLIGATION REQUEST DATE    VENDOR       ITEM      ITEM COST
PATIENT,FIVE    0005   A20012-0132 FEB 02, 2001   VENDOR,EIGHT  TEST ITEM     0.01
PATIENT,FOUR    0004   A20012-0133 FEB 05, 2001   VENDOR,THREE  TEST ITEM     0.01
PATIENT,FIVE    0005   A20012-0134 FEB 06, 2001   VENDOR,THREE  TEST ITEM     0.01
PATIENT,FIVE    0005   A20012-0135 FEB 06, 2001   VENDOR,THREE  EYEGLASSES    0.01
PATIENT,FOUR    0004   A20012-0140 MAY 22, 2001   VENDOR,NINE   *SHIPPING     1.00
                                                                OXYGEN DEV    1.00
PATIENT,FOUR    0004   A20012-0141 JUL 10, 2001   VENDOR,TEN    OXYGEN DEV    1.00
PATIENT,FOUR    0004   A20012-0142 JUL 16, 2001   VENDOR,THREE *DELIVERY      1.00
PATIENT,F0UR    0004   A20012-0143 JUL 19, 2001   VENDOR,THRE   TEST ITEM     2.00
PATIENT,FOUR    0004   A20012-0144 JUL 19, 2001   VENDOR,TEN    DELIVERY
```

# Close Out (CO)

**Menu description**

The **Close Out (CO)** option is used to close out transactions when invoices are received from the vendor.  This will update the actual VAF 1358 account balance.

**Screen sample**

```
   EN     Enter New Request ...
   SI     Stock Issues ...
   RP     Reprints ...
   RE     Record 2237 Purchase to 2319
   ED     Edit/Delete 2237 from 10-2319
   CA     Cancel a Transaction
   CO     Close Out
   CPC    Cancel Purchase Card Transaction
   CPO    Reconcile/Close Out Purchase Card Transaction
   ED2    Edit 2319
   ED2C   Edit 2319 (Vendor,QTY,Cost)
   EDPC   Edit Purchase Card Transaction
   HI     Add Historical Data
   HID    Delete Historical Data Entry
   LI     List Open 1358 Prosthetic Transactions
   LII    List Open 1358 Transactions By Initiator
   LPC    List Open Purchase Card Transactions
   LPCI   List Open Purchase Card Transactions By Initiator
   LPS    Purchase Card Summary Sheet

Select Purchasing Option: CO <Enter>   Close Out
SITE: Hines Development System//  <Enter>          499
Select OBLIGATION NUMBER:    499-A20012  07-01-97  1358   Obligated - 1358
             FCP: 910     $ 2000.00
1358 Balance is $ 2911.23
Select PATIENT:    8-16-2001   PROSPATIENT,FOUR    REF: 0167  SHOE COMPONENTS


    PROSPATIENT,FOUR              000-00-0004        499-A20012
-------------------------------------------------------------------------------

    ITEM: 913   SHOE COMPONENTS              AMIS: 20
    PSAS HCPCS CODE: L3455  SHOE HEEL NEW LEATHER STANDA
    CPT MODIFIER: LT,RT
    REMARKS: TESTING

    DESCRIPTION: TESTING
    SERIAL NUMBER:
    UNIT COST: 20      UNIT OF ISSUE: EA   QTY: 1    ITEM COST:   20.00
    TYPE: INITIAL      CATEGORY: SC/OP    SPECIAL CATEGORY:

                       SUB TOTAL:                         $  20.00

                       % DISCOUNT:  5                     $   1.00
                       SHIPPING CHARGE:                   $   2.00

                       TOTAL COST:                        $  21.00


Ready to Close-Out Transaction? No// Y   <Enter>   (Yes)
CLOSE-OUT REMARKS: TESTING  <Enter>
Updated 1 10-2319 record for this Veteran

    Closed out Transaction
```

# Enter New Request (EN)

## Overview

**Menu description**

In order to use the **Enter New Request (EN)** option or to enter a new transaction, you must choose one of the menu options (purchasing forms) below. All of the options listed under this menu are similar in several ways. Each form type will, upon posting, update the patient's electronic 10-2319, and record the transaction to the 1358 obligation that you choose.

Once posted, these requests may only be closed out or cancelled. After you begin input into the computer, these forms must be completed to the point of posting to the 1358 obligation and patient's 10-2319 record. If the form is not completed, exiting the program during input of one of these forms will cause the transaction to be deleted. (This is unlike IFCAP where a transaction may be started and later edited.)

**Note:** Prosthetics purchasing forms are not saved in the computer for editing at a later time.

**Enter New Request Menu (EN)**

```
   EN    Enter New Request ...
   SI    Stock Issues ...
   RP    Reprints ...
   RE    Record 2237 Purchase to 2319
   ED    Edit/Delete 2237 from 10-2319
   CA    Cancel a Transaction
   CO    Close Out
   CPC   Cancel Purchase Card Transaction
   CPO   Reconcile/Close Out Purchase Card Transaction
   ED2   Edit 2319
   ED2C  Edit 2319 (Vendor,QTY,Cost)
   EDPC  Edit Purchase Card Transaction
   HI    Add Historical Data
   HID   Delete Historical Data Entry
   LI    List Open 1358 Prosthetic Transactions
   LII   List Open 1358 Transactions By Initiator
   LPC   List Open Purchase Card Transactions
   LPCI  List Open Purchase Card Transactions By Initiator
   LPS   Purchase Card Summary Sheet

Select Purchasing Option: EN   <Enter>   Enter New Request
   24    2421 Form
   25    2520 Transaction without printing 10-55
   10    10-55 PSC Form
   29    2914 Eyeglass Record
   NF    Create a No-Form Daily Record
   PD    Pickup and Delivery Charges
   PC    Purchase Card Form
   SS    Purchase Card Site Parameter
```

| Topic | See Page |
|-------|----------|
| 2421 Form (24) | 65 |
| 2520 Transaction without printing 10-55 | 75 |
| 10-55 PSC Form (10) | 77 |
| 2914 Eyeglass Record (29) | 80 |

*Continued on next page*

# Enter a 2421 Form (24)

**Introduction**     With the **2421 Form (24)** option, the user will create a 2421 Form for a selected patient. This form will update the patient's electronic 10-2319, and record the transaction to the 1358 obligation that you choose. Once posted, this request may only be closed out or cancelled.

**When do you use this option?**     You must use the **2421 Form (24)** option when a vendor does NOT accept the government purchase card. (This is another form of a Prosthetics Purchase Order using a 1358.)

**What is the process?**     After you access the **2421 Form (24)** option, this form must be completed to the point of posting to the 1358 obligation and patient's 10-2319 record. If it is not completed, exiting the program during input will cause the transaction to be deleted.

You will be prompted to enter the site, substation, obligation number, patient, and disability code(s) if none exists. If the patient already has disability codes, they will display.

You may view any of the 10-2319 patient screens (patient demographics, clinic enrollments/correspondence, entitlement information, appliance transactions, auto adaptive information, critical comments, add/edit disability code).

# Enter a 2421 Form (24), Continued

**Obligation Number**

This is the 1358 Number. This prompt will display: **This will Create a 10-2421 Do you wish to Continue? Yes//**. By pressing **<Enter>**, you accept the default answer of YES and are asked to select the Prosthetics 1358 patient.

The Obligation Number is also considered all of the following: Procurement & Accounting Transactions Purchase Order Number, or method of processing, or Depot Voucher No., or Supply Status, or Supply Status Order, or FCP or vendor, or Purchase Card holder, or Requisition No.(Supply), or Issue Voucher No.(Supply), or Issue Voucher No.(Fiscal), or Inventory/Distribution Point, or ISMS Order No.

**Steps**

To enter a **2421 Form (24),** follow these steps:

| Step | Action |
|------|--------|
| 1 | Select the `Form Type` (i.e., 2421 Form (24)). |
| 2 | Enter the **Site** (if a multi-site facility). |
| 3 | Enter the 1358 Obligation Number. |

**2421 Form screen**

```
SITE: Hines Development System//  <Enter>                    499

Select OBLIGATION NUMBER: ?? <Enter>
      Choose from:
  499-A20003    11-24-95  1358   Cancelled Order
           FCP: 910      $ 0.00
  499-A20010    01-04-00  1358   Order Not Completely Prepared
           FCP: 910      $ 0.00
  499-A20012    07-01-97  1358   Obligated - 1358
           FCP: 910      $ 2000.00

Select OBLIGATION NUMBER: 499-a20012    07-01-97  1358   Obligated - 1358
           FCP: 910      $ 2000.00
1358 Balance is $ 2984.97
This will Create a 10-2421 Do you wish to Continue? Yes// Y <Enter>  (Yes)
```

# Enter a 2421 Form (24), Continued

**Prosthetic patient**

The patient selected must be in both the MAS patient file and the Prosthetic Patient file. If the patient is not in the Prosthetic Patient file, but is in the MAS Patient file, you may enter the patient into the Prosthetic Patient file at this time.

The current Disability codes will be displayed for the selected patient. If there is no Prosthetic Disability Code entered for the patient, you must do so prior to continuing.

**Steps**

To continue to enter a **2421 Form (24),** follow these steps:

| Step | Action |
|------|--------|
| 4 | Enter the **Prosthetic Patient**. The Disability Codes will display. |
| 5 | Enter the **Date** or press **<Enter>** to accept the default setting. |
| 6 | Select a **Vendor**. |

**Screen Sample**

```
Select PROSTHETIC PATIENT: PATIENT,FOUR <Enter> PATIENT,FOUR        12-27-50
000654321        YES    SC VETERAN
 Enrollment Priority: GROUP 2   Category: IN PROCESS     End Date:

        ...OK? Yes// <Enter>  (Yes)
        SUPPORT ISC

Current Disability Codes are:
AMP/LS         INPATIENT     S/C
BLD/TRE        EMPLOYEE      NSC
Enter 10-2319 screen to VIEW (1-8),'^' to EXIT, or 'return' to continue:

DATE REQUIRED: T+30//  <Enter> (AUG 18, 2001)

VENDOR:??
     Enter the Vendor the item is being purchased from.
VENDOR: VENDOR,THREE   <Enter>  VENDOR,THREE     PH:555 555-5555  NO:   3
ORD ADD:CORPORATE ORDER ENTRY               FMS:
       PARK, IL 60064                CODE:          FAX:
         ...OK? Yes//  <Enter> (Yes)
```

**Date Required**

Press **<Enter>** at the **Date Required** prompt to accept the default response, which is today's date plus 30 days. If another date is necessary (i.e., item is needed in one week), enter that date.

**Vendor**

Select the Vendor for the item you are purchasing. If the computer does not recognize the vendor you select, you must first enter the vendor into the IFCAP file.

You may enter an **^** to exit the program at this time if you need to enter data into either of these files.

# Enter a 2421 Form (24), Continued

**Contract/BOA Number**
If the item you are purchasing is on contract with the vendor, enter the Contract Number at the prompt.

**Type of Transaction**
Enter a question mark (?) to view the choices for the **Type of Transaction** prompt. They are the following:

I   Initial Issue
R   Replace
S   Spare
X   Repair

**Steps**
To continue to enter a **2421 Form (24),** follow these steps:

| Step | Action |
|------|--------|
| 7 | Select a Contract/BOA Number. |
| 8 | Select a Type of Transaction. |

**2421 Form Screen**
(continued)

```
Select CONTRACT/BOA NUMBER: ?? <Enter>

  Choose from:
  V797P-5640M        --      EXP. DATE: 12-31-95      MOL$100000
CONTRACT
  V797P-5894M        02-09-00     EXP. DATE: 05-04-01
MIN$1000/MOL$15000
  CONTRACT


Select CONTRACT/BOA NUMBER: v797p-5640M  <Enter> --     EXP. DATE:
12-31-95     MOL $100000     CONTRACT

TYPE OF TRANSACTION: I  <Enter>   INITIAL ISSUE
```

# Enter a 2421 Form (24), Continued

**Patient Category**

The **Patient Category** includes the following:

SC/OP (Service connected/Outpatient)
SC/IP (Service connected/Inpatient)
NSC/IP (Non-service connected/Inpatient)
NSC/OP (Non-service connected/Outpatient)

**Note:** If you select the NSC/OP option, a prompt for Special Category appears requiring you to select from one of four options (i.e., Special Legislation, AA, etc.)

**Item**

This is the item entered into the Prosthetic Item master list. You can search for an item using the question mark processing feature.

**PSAS HCPCS**

Enter the appropriate HCPCS (Health Care Financing Administration Common Procedure Coding System) code. Try the HCPCS, E1399 if unknown. This field should have the HCPCS code for the Item you are selecting. HCPCS is a uniform method to report professional services, procedures and supplies for healthcare providers and medical suppliers.

**Steps**
(continued)

To continue to enter a **2421 Form (24),** follow these steps:

| Step | Action |
|------|--------|
| 9 | Enter the **Patient Category**. (If the veteran is NSC/OP, then select a Special Category.) |
| 10 | Select the **Item** to be Issued or Repaired. |
| 11 | Select the **PSAS HCPCS** and if necessary a **CPT Modifier**. |

**2421 Form screen**
(continued)

```
PATIENT CATEGORY: ??
Enter a code from the list.

     Select one of the following:
          1          SC/OP
          2          SC/IP
          3          NSC/IP
          4          NSC/OP

PATIENT CATEGORY: NSC/IP <Enter>


Select ITEM: 913      SHOE COMPONENTS
          ...OK? Yes//  <Enter> (Yes)

PSAS HCPCS: L3455 <Enter>     SHOE HEEL NEW LEATHER STANDA
Enter a CPT MODIFIER for HCPCS L3455:  (LT/RT/B):  Both Left and Right
```

# Enter a 2421 Form (24), Continued

**Brief/Extended
Description of
Item**

You can type a brief description of the item for that specific vendor. This
description will print on the 10-2421 form for use by the vendor to determine what
item is to be provided to the veteran.

At the Extended Description, you can further describe the item for the vendor in a
text editor at the **Edit?** prompt.

**Steps**
(continued)

To continue to enter a **2421 Form (24),** follow these steps:

| Step | Action |
|------|--------|
| 12 | Enter a brief and an extended description of the item (for the vendor). |
| 13 | Enter the **Quantity** to be Purchased. |
| 14 | Enter Unit Cost. |
| 15 | Enter Unit of Issue. |
| 16 | Enter **Remarks** (2310 and 1358). |
| 17 | Establish a **Shipping Charge** (optional). |

**2421 Form
screen**
(continued)

```
BRIEF DESCRIPTION OF ITEM (for Vendor): SHOE HEEL

EXTENDED DESCRIPTION:
  No existing text
  Edit? NO//

QTY: 1 <Enter>
UNIT COST: 2500  <Enter>
UNIT OF ISSUE: ea <Enter>      EACH

REMARKS (2319 and 1358):
--------------------------------
EST. SHIPPING CHARGE:
```

| Prompt | Description |
|--------|-------------|
| Quantity | Enter the number of the item you want to order – total amount of units issued for this item. |
| Unit Cost | Enter the cost of one item to be purchased. |
| Unit of Issue | This field uses data from the IFCAP system (i.e., ea for Each). |
| Remarks | Any Remarks you would like printed on the 1358 Obligation form and the 10-2319 should be entered here. |

| Est. Shipping Charge | The estimated shipping charge when the transaction is created.  This field only holds the estimate, not the actual charge. |

# Enter a 2421 Form (24), Continued

**Percent Discount**

Contains the percent discount for the purchase. Estimated Cost and Actual Cost are calculated with the percent Discount.

**Deliver To**

You have four selections of delivery locations to choose one.

**Steps** (continued)

To continue to enter a **2421 Form (24),** follow these steps:

| Step | Action |
|------|--------|
| 18 | Enter a **Percent Discount** (if applicable). |
| 19 | Select one of the following to **Deliver To**: <br> Veteran <br> VAMC Warehouse <br> Prosthetics <br> Other |
| 20 | Answer Yes or No at the following prompt: Are you ready to POST to IFCAP and 10-2319 NOW? No// |

**2421 Form screen** (continued)

```
PERCENT DISCOUNT: <Enter>
DELIVER TO: ?? <Enter>
Enter a code from the list.

     Select one of the following:
          1          VETERAN
          2          VAMC WAREHOUSE
          3          PROSTHETICS
OTHER

DELIVER TO: PROSTHETICS <Enter>

Are you ready to POST to IFCAP and 10-2319 NOW? No// NO <Enter> (No)
```

**Are you ready to Post?**

The prompt, **Are you ready to Post to IFCAP and the 2319 now?//No** displays. The default answer for posting will always be **NO**. Accept the default answer by pressing the **<Enter>** key, so you may verify that the information entered on the request is correct. The data entered displays for your review.

If information is not correct, you have the option to edit the transaction as shown in the example on the next page.

# Enter a 2421 Form (24), Continued

**Display Entry**   The data entered displays below for your review if you accepted the default of **NO** at the **Are you ready to Post to IFCAP and 10-2319 NOW?** prompt.

**2421 Form screen**
(continued)

```
    PROSPATIENT,FOUR         000-00-0004         499-A20012
--------------------------------------------------------------------------------

    ITEM: 903   TEST ITEM                        AMIS: 05 D
    PSAS HCPCS CODE: VENDOR,FOUR  HEART PACEMAKER, PERMANENT
    CPT MODIFIER: GX

    DELIVER TO: PROSTHETICS

    DESCRIPTION: Heart Pacemaker, Permanent
    SERIAL NUMBER:
    UNIT COST: 2500     UNIT OF ISSUE: EA   QTY: 1    ITEM COST: 2500.00
    TYPE: INITIAL       CATEGORY: NSC/IP   SPECIAL CATEGORY:

                        SUB TOTAL:                         $2500.00

                        % DISCOUNT:
                        SHIPPING CHARGE:                   $   0.00

                        TOTAL COST:                        $2500.00


Enter Item to Edit: 903       TEST ITEM
        ...OK? Yes//  <Enter> (Yes)
```

*Continued on next page*

# Enter a 2421 Form (24), Continued

**Edit the form**    You can now edit the prompts if you need to change anything on the order.  Press **<Enter>** to view each prompt and accept the default entry shown.

**Steps**
(continued)

To continue to enter a **2421 Form (24),** follow these steps:

| Step | Action |
|------|--------|
| 21 | Press **<Enter>** for each prompt that you do not want to edit. |
| 22 | None of the fields have been edited in the example below because the information is correct.  When you are asked again **Are you Ready to POST to IFCAP and 10-2319 NOW? NO//** you can answer YES. |
| 23 | A YES response at the **Would you like to print the Privacy Act Statement?** will print an additional page to the 10-2319. |
| 24 | At the prompt, **Would you like to print a Patient Notification letter?** A YES response will print the Patient Notification letter on the purchasing printer defined in the Site Parameter File.  You may also print the Patient Notification letter from the **Reprint 2421 Form (24)** option from the **Reprints (RP) Menu**. |

**2421 Form screen**
(continued)

```
TYPE OF TRANSACTION: INITIAL ISSUE// <Enter>
PATIENT CATEGORY: NSC/IP// <Enter>
ITEM: TEST ITEM// <Enter>
PSAS HCPCS: SI501// <Enter>
BRIEF DESCRIPTION: Heart Pacemaker, Permanent  Replace  <Enter>
EXTENDED DESCRIPTION: <Enter>
  No existing text
  Edit? NO// <Enter>
QTY: 1// <Enter>
UNIT COST: 2500// 2  <Enter>
     ** Total for Previous Item(s) is $2500
     ** Total With This Amount is $2
UNIT OF ISSUE: EA// <Enter>
REMARKS: <Enter>
EST. SHIPPING CHARGE: <Enter>
PERCENT DISCOUNT: <Enter>
DATE REQUIRED: AUG 18,2001// <Enter>
DELIVER TO: PROSTHETICS// <Enter>

Enter Item to Edit:

Are you ready to POST to IFCAP and 10-2319 NOW? No// Y <Enter> (Yes)
Would you like to print the Privacy Act Statement? Yes// Y <Enter>  (Yes)
Would you like to print a Patient Notification letter? No// <Enter>   (No)
     Posting Now ...
     1358 Transaction has been assigned Number: 499-A20012-0143
     Updated 10-2319
DEVICE: HOME// <Enter>    TELNET    Right Margin: 80//  <Enter>
```

# Enter a 2421 Form (24), Continued

**Final Output**    Below is the output of the data from the **2421 Form (24)** option.  Then the **Suspense Processing (SU)** screen displays and allows you to perform an action on a Suspense item and link it to the item(s) you just ordered through the **Stock Issues (SI) Menu**.

**2421 Form (24) Screen – Final Output**

```
OMB Number 2900-0188          Estimated Burden: 4 minutes
      ***ORIGINAL COPY AND COMMERCIAL INVOICE MUST BE SUBMITTED***
            TO THE VAMC PROSTHETIC ACTIVITY LISTED BELOW
_____
Department of Veterans Affairs|Prosthetics Authorization for Items or Services
----------------------------------------------------------------------
1. Name and Address of Vendor        2. Name and Address of VA Facility
    PROSVENDOR,THREE                 Hines Development System (499/121)
    CORPORATE ORDER ENTRY            TEST 2
    PO BOX 1140                      HINES, IL  60142
    ANY PARK,IL 60064
    (800) 255-5162                   222
----------------------------------------------------------------------
3. Veterans Name (Last, First, MI)   4. Date of Authorization
    PROSPATIENT,FOUR                     JUL 19, 2001
----------------------------------------------------------------------
5. Veterans Address                  6. Date Required
    100 HOLLYWOOD                         AUG 18, 2001
    HOLLYWOOD,CALIFORNIA             --------------------------------------
                                     9. Authority For Issuance  CFR 17.115
                                         CHARGE MEDICAL APPROPRIATION
----------------------------------------------------------------------
7. Claim Number 000654322P           8. SSN 000-00-0004
----------------------------------------------------------------------
10. Statistical Data        11. FOB Point  12. Discount   13. Delivery Time
NSC/IP                          DEST           %              30 Days
                                     --------------------------------------
                                     14. Delivery To: PROSTHETICS
----------------------------------------------------------------------
              15. DESCRIPTION OF ITEMS OR SERVICES AUTHORIZED
----------------------------------------------------------------------
ITEM NUMBER           DESCRIPTION/NOMENCLATURE   QUANTITY  UNIT   UNIT   AMOUNT
                                                  ORDERED          PRICE
----------------------------------------------------------------------
#1. Heart Pacemaker, Permanent                     1     EA   2.00    2.00
----------------------------------------------------------------------
16. Contract Number:                                   Subtotal:    2.00
    ACCT.#: 17000000     Discount $ 0.00 Shipping:  0.00 Total $    2.00
----------------------------------------------------------------------
17. Signature and Title of  18. DATE   19. Signature and Title of   20. Date
    Requesting Official                Contracting/Accountable Officer
    PROSPROVIDER1,ONE                      PROSPROVIDER,FOUR
----------------------------------------------------------------------
                         Order and Receipt Action
----------------------------------------------------------------------
21. Order Number  22. Date of Order  23. Date Item Received   24. Date
Delivered
    499-A20012-0143    JUL 19, 2001
----------------------------------------------------------------------
25. The articles or services listed herein have been received, or rendered
ordered in the quantity and quality specified originally or as shown by
authenticated changes, except as noted.
                                  Signature of Veteran or VA Official
```

# Enter a 2520 Transaction without Printing 10-55 (25)

**Description**    From the **Purchasing (PU) Menu** and the **Enter New Request (EN) Menu**, you can access the **2520 Transaction without Printing (25)** option.  This is used for VAF 10-2520 PSC transactions that are under $300.00 and do not have an FL 10-55. It will then post to the VAF 1358 and patient's VAF 10-2319 record.

**Screen sample**

```
24      2421 Form
25      2520 Transaction without printing 10-55
10      10-55 PSC Form
29      2914 Eyeglass Record
NF      Create a No-Form Daily Record
PD      Pickup and Delivery Charges
PC      Purchase Card Form
SS      Purchase Card Site Parameter

Select Enter New Request Option: 25 <Enter> 2520 Transaction without printing
10-55
SITE: Hines Development System//  <Enter>                    499

Select OBLIGATION NUMBER: 499-A20012     07-01-97  1358    Obligated - 1358
            FCP: 910     $ 2000.00
1358 Balance is $ 2570.23
This will Create ALL OTHER Do you wish to Continue? Yes// <Enter>  (Yes)
Select PROSTHETIC PATIENT:    PATIENT,FOUR <Enter>     SUPPORT ISC       12-27-
50    00012275
OP    YES    SC VETERAN


Current Disability Codes are:

AMP/LS         INPATIENT      S/C
BLD/TRE        EMPLOYEE       NSC
Enter 10-2319 screen to VIEW (1-8),'^' to EXIT, or 'return' to continue:
Enter 'W' for WHEELCHAIR, 'O' for BRACE, 'B' for BLIND AIDS, 'A' for ART.
LIMBS
Select PSC ITEM CATEGORY: ??  <Enter>

CHOOSE FROM:
    W         WHEELCHAIR
    O         BRACE
    B         BLIND AID
    A         ARTIFICIAL LIMB
Enter 'W' for WHEELCHAIR, 'O' for BRACE, 'B' for BLIND AIDS, 'A' for ART.
LIMBS
Select PSC ITEM CATEGORY: W
You will not be able to exceed an item repair cost of more than $100.00.

Add/Edit/View Patient PSC? No// Y <Enter>   (Yes)

Select PSC ISSUE CARD: ??  <Enter>
  1             MAY 22, 2000 TEST     345-678

        You may enter a new PSC ISSUE CARD, if you wish
        This is the date the PSC card was issued.

Select PSC ISSUE CARD: 1  5-22-2000 TEST     345-678
PSC ISSUE CARD DATE: MAY 22,2000// <Enter>
```

# Enter a 2520 Transaction without Printing 10-55 (25), Continued

**Screen sample** (continued)

```
ITEM: EYEGLASSES// ??  <Enter>
        This is the PSC item issued to the patient.

    Choose from:
    3            **SYRINGE-SUBCUTANEOUS-3IN     **** THIS ITEM IS INACTIVE ****
    55           WHEELCHAIR-ADULT/HEMI/BLUE-STD FOR ALL PATIENTS
    56           WHEELCHAIR-CLASSIC-18X16
    59           EYEGLASSES
    99           OXYGEN CONCENTRATOR
    100          OXYGEN DEVICE
    903          TEST ITEM
    912          WHEELCHAIR GLOVES
    913          SHOE COMPONENTS
    921          WHEELCHAIR - ELECTRIC
    922          WHEELCHAIR - MANUAL
    925          SHOES
    10000        EYEGLASSES

ITEM: EYEGLASSES// <Enter>
DETAILED DESCRIPTION: TEST// <Enter>
SERIAL NUMBER: 345-678// <Enter>

Select PSC ISSUE CARD: ??  <Enter>
   1           MAY 22, 2000 TEST     345-678

        You may enter a new PSC ISSUE CARD, if you wish
        This is the date the PSC card was issued.

Select PSC ISSUE CARD: 1  <Enter>  5-22-2000 TEST     345-678

PSC ISSUE CARD DATE: MAY 22,2000// <Enter>
ITEM: EYEGLASSES// <Enter>
DETAILED DESCRIPTION: TEST// <Enter>
SERIAL NUMBER: 345-678// <Enter>
Select PSC ISSUE CARD: 1  <Enter>   5-22-2000 TEST     345-678
PSC ISSUE CARD DATE: MAY 22,2000// <Enter>
ITEM: EYEGLASSES// <Enter>
DETAILED DESCRIPTION: TEST// <Enter>
```

# 10-55 PSC Form (10)

**Description**   From the **Purchasing (PU) Menu** and the **Enter New Request (EN) Menu**, you can access the **10-55 PSC Form (10)**.  This will create a new FL 10-55 form and post purchasing data to patient's VAF 10-2319 record and update the Service's VAF 1358 obligation.

**Sample 10-55 PSC Form (10)**

```
24      2421 Form
25      2520 Transaction without printing 10-55
10      10-55 PSC Form
29      2914 Eyeglass Record
NF      Create a No-Form Daily Record
PD      Pickup and Delivery Charges
PC      Purchase Card Form
SS      Purchase Card Site Parameter

Select Enter New Request Option: 10  10-55 PSC Form
SITE: Hines Development System//
Select STATION NUMBER:    499    SUPPORT ISC
Select OBLIGATION NUMBER: ??

   Choose from:
   499-A20003    11-24-95  1358   Cancelled Order
           FCP: 910     $ 0.00
   499-A20010    01-04-00  1358   Order Not Completely Prepared
           FCP: 910     $ 0.00
   499-A20012    07-01-97  1358   Obligated - 1358
           FCP: 910     $ 2000.00

Select OBLIGATION NUMBER: 499-A20012 <Enter> 07-01-97  1358   Obligated - 1358
           FCP: 910     $ 2000.00
1358 Balance is $ 259.79
This will Create a PSC 10-55 Do you wish to Continue? Yes// <Enter>    (Yes)
Select PROSTHETIC PATIENT: PROSPATIENT,ONE <Enter>  PROSPATIENT,ONE 1-1-30
453890765
 NO    PILL
 Enrollment Priority:            Category: IN PROCESS    End Date:

             *** Patient Requires a Means Test ***
             Primary Means Test Required from FEB 13,2002
         ...OK? Yes// <Enter>  (Yes)
          HINES, IL
```

*Continued on next page*

# 10-55 PSC Form (10), Continued

**Screen**
(continued)

```
*Comments on file

Current Disability Codes are:

COS/B          EMPLOYEE          NSC
AMP/LAE        SC VIETNAM        S/C
AMP/LAE        SC VIETNAM        NSC                    Deleted...
ORTH/PLS       INPATIENT         S/C
*More Disability Codes on File, See Screen 1
Enter 10-2319 screen to VIEW (1-8),'^' to EXIT, or 'return' to continue:
Add/Edit/View Patient PSC? No// y  (Yes)
Select PSC ISSUE CARD:


      NAME                                     SERIAL NUMBER
1.    TEST ITEM

SELECT NUMBER: 1  <Enter>
VENDOR:    PROSVENDOR,THREE                  PH:555 555-5555  NO:    3
ORD ADD:CORPORATE ORDER ENTRY                    FMS:
        ANY PARK, IL 60064                  CODE:          FAX:
          ...OK? Yes// <Enter>   (Yes)

  TYPE OF TRANSACTION: I <Enter> INITIAL ISSUE
  PATIENT CATEGORY: 4 <Enter> NSC/OP
  SPECIAL CATEGORY: 4 <Enter> ELIGIBILITY REFORM
  PSAS HCPCS:    A4254 <Enter>  BATTERY FOR GLUCOSE MONITOR
  DESCRIPTION OF ITEM (For Vendor): Battery
  EXTENDED DESCRIPTION:
    No existing text
    Edit? NO//
  QTY: 1// <Enter>
  UNIT COST: 20 <Enter>
  UNIT OF ISSUE: JB//  <Enter>      JOB
  REMARKS (2319 and 1358): battery  <Enter>
EST. SHIPPING CHARGE: 2  <Enter>

Are you ready to POST to IFCAP and 10-2319 NOW? No// y <Enter> (Yes)
Would you like to print the Privacy Act Statement? Yes// n <Enter> (No)
     Posting Now ...
     1358 Transaction has been assigned Number: 499-A20012-0226
     Updated 10-2319
DEVICE: HOME// <Enter>  TELNET    Right Margin: 80// <Enter>
```

# 10-55 PSC Form (10), Continued

**Letter on file**    Below is the letter on file for the 10-55 PSC Form (10).

**Sample Letter**

```
DEPARTMENT OF VETERANS AFFAIRS
Hines Development System
TEST 2
HINES, IL  60142


PROSVENDOR,THREE                         In Reply Refer to:  -121
CORPORATE ORDER ENTRY                       PROSPATIENT,ONE
ANY PARK, IL 60064                          000-00-0001
                                            499-A20012-0226


PROSVENDOR,THREE

   With reference to your request of 02/18/04, authority is granted to
repair the appliance described below for the above-named veteran.
.......................................................................
                 DESCRIPTION OF APPLIANCE OR REPAIR
                                                      Unit      Total
   Item  Name                  Serial Number    Qty   Price     Cost

.......................................................................
   903   TEST ITEM                               1    $20.00
         Battery
                               Shipping Charge:       $2.00

   The total cost, not including mailing cost, will not exceed     $20.00

   When repairs are completed, please attach the original of this letter to
   the original copy of your invoice covering repair charges.  Your invoice,
   in original and one copy should then be forwarded to this office for
   payment.

   Please retain the duplicate copy of this letter for your files.

   Sincerely,

   PROVIDER,FOUR, Chief
   CHIEF

   Initiator: PROSPROVIDER1,ONE    REF: 578         ADP FORM 10-55
```

# 2914 Eyeglass Record (29)

**Description**     From the **Purchasing (PU) Menu** and the **Enter New Request  (EN) Menu**, you
can access the **2914 Eyeglass Record (29)**.  This will create a VAF 10-2914
eyeglass record and post to the patient's VAF 10-2319 and VAF 1358 obligation.

**Enter New
Request Menu**

```
    24      2421 Form
    25      2520 Transaction without printing 10-55
    10      10-55 PSC Form
    29      2914 Eyeglass Record
    NF      Create a No-Form Daily Record
    PD      Pickup and Delivery Charges
    PC      Purchase Card Form
    SS      Purchase Card Site Parameter

Select Enter New Request Option: 29 <Enter>  2914 Eyeglass Record
```

**2914 Eyeglass
Record Screen
sample**

```
SITE: Hines Development System//    <Enter>
Select STATION NUMBER: <Enter>    499
Select OBLIGATION NUMBER:    499-A20012  07-01-97  1358   Obligated - 1358
           FCP: 910     $ 2000.00  <Enter>
1358 Balance is $ 237.79
This will Create an EYEGLASS 10-2914 Do you wish to Continue? Yes// <Enter>
(Yes)
Select PROSTHETIC PATIENT:    PROSPATIENT,ONE    HINES, IL    1-1-30
000890765
    NO    PILL

*Comments on file
Current Disability Codes are:
COS/B          EMPLOYEE       NSC
AMP/LAE        SC VIETNAM     S/C
AMP/LAE        SC VIETNAM     NSC                   Deleted...
ORTH/PLS       INPATIENT      S/C

*More Disability Codes on File, See Screen 1
Enter 10-2319 screen to VIEW (1-8),'^' to EXIT, or 'return' to continue:
<Enter>
```

## 2914 Eyeglass Record (29), Continued

**Screen sample**
(continued)

```
Enter a screen number (1-8) OR '^' TO EXIT.
     Select one of the following:
           1          PATIENT DEMOGRAPHICS
           2          CLINIC ENROLLMENTS/CORRESPONDENCE
           3          ENTITLEMENT INFORMATION
           4          APPLIANCE TRANSACTIONS
           5          AUTO ADAPTIVE INFORMATION
           6          CRITICAL COMMENTS
           7          ADD/EDIT DISABILITY CODE
           8          HOME OXYGEN ITEMS

Enter 10-2319 screen to VIEW (1-8),'^' to EXIT, or 'return' to continue:
<Enter>
VENDOR:    PROSVENDOR,THREE                          PH:555 555-5555  NO:     3
ORD ADD:CORPORATE ORDER ENTRY                    FMS:
        ANY PARK, IL 60064                  CODE:           FAX:


        ...OK? Yes// <Enter>    (Yes)

ITEM (for AMIS): ?? <Enter>
     Choose from:
   59           EYEGLASSES
   10000           EYEGLASSES

ITEM (for AMIS): 59  <Enter>        EYEGLASSES
        ...OK? Yes// <Enter>    (Yes)

  TYPE OF TRANSACTION: I <Enter>    INITIAL ISSUE
  PATIENT CATEGORY: NSC OP  <Enter>
  PSAS HCPCS:    A4254 <Enter>    Eyeglass
  BRIEF DESCRIPTION: Eyeglass for a stigmatism  <Enter>
  QTY: 1// <Enter>
  UNIT COST: 29.99 <Enter>
  UNIT OF ISSUE: ea  <Enter>        EACH
  REMARKS (2319 and 1358): Ordered eyeglasses <Enter>
EST. SHIPPING CHARGE: 3.50 <Enter>

Are you ready to POST to IFCAP and 10-2319 NOW? No// y  <Enter>   (Yes)
     Posting Now ...
     1358 Transaction has been assigned Number: 499-A20012-0227
     Updated 10-2319
```

# Appendix A – Online Help

---

**Question Mark Help**   You can view online descriptive help for menus, options, and prompts.  You can enter one, two, or three question marks to get extended online help in Prosthetics.

---

**? (Single question mark)**   Entering a **single question mark** at a prompt provides you with a single line of standard help.

---

**?? (Double question mark)**

**Two question marks** entered at a prompt provide you with a list of choices appropriate to the prompt where you entered the question marks.

```
SITE: Hines Development System// ?? <Enter>

   Choose from:
   ATLANTA VAMC                               508
   CORKWELL VAMC                              500
   HINESTEST                                  998
   Hines Development System                   499
   SAN ANTONIO VAMC                           671
   ZZOJ VAMC VAMC                             991

SITE: Hines Development System//
```

---

**Menu Options**   You can enter **three question marks** to view Menu option descriptions.

---

**??? (Triple question mark)**

Entering three question marks provides you with a brief description and a synonym:

```
   24      2421 Form
   25      2520 Transaction without printing 10-55
   10      10-55 PSC Form
   29      2914 Eyeglass Record
   NF      Create a No-Form Daily Record
   PD      Pickup and Delivery Charges
   PC      Purchase Card Form
   SS      Purchase Card Site Parameter

Select Enter New Request Option: ??? <Enter>

'10-55 PSC Form'    Option name: RMPR 10-55    Synonym: 10
    This will create a new FL 10-55 form and post purchasing data to
patient's VAF 10-2319 record and update the Service's VAF 1358 obligation.

'2421 Form'     Option name: RMPR 2421     Synonym: 24
    This option will create a new VAF 10-2421 form, post to the patient's
    VAF 10-2319, and update the VAF 1358 obligation.

'2520 Transaction without printing 10-55'     Option name: RMPR 2520
Synonym: 25
    For VAF 10-2520 PSC transactions that are under $300.00 and do not have
and FL 10-55.  It will then post to the VAF 1358 and patient's VAF 10-2319
record.
```

---

# Appendix B - Glossary

| | |
|---|---|
| **Ad Hoc** | An Ad-hoc has a specific purpose.  Example: MS Access ad hoc query done to obtain specific data. |
| **AMIS** | Automated Management Information System. |
| **Authorization** | An estimated payment that will be applied to the 1358. |
| **Control Point** | The division of monies to a specified service, activity, or purpose from an appropriation.  This is a financial element, existing only in IFCAP, that corresponds to the ACCS number in FMS. |
| **Cost Center** | Subsections of Fund Control Points.  Cost centers allow fiscal staff to create total expense reports for a section or service, and requestors to assign requests to that section or service. |
| **DCT** | Document Confirmation Transactions |
| **Default** | A normal or suggested response to a prompt that is provided by the system. |
| **Detailed Inventory ID** | A description of the item and/or where it can be found within a location. |
| **DSS** | Decision Support System |
| **FMS** | Financial Management System (FMS), which has replaced CALM as the primary accounting system for administration appropriations.<br><br>FMS has a comprehensive database that provides for flexible on-line and/or batch processing, ad-hoc reporting, interactive query capability and extensive security.<br><br>FMS is concerned with budget execution, general ledger, funds control, accounts receivable, accounts payable and cost accounting. |

| | |
|---|---|
| **FPDS** | Federal Procurement Data System. |
| **Fund Control Point** | CALM accounting element that is not used by FMS. |
| **Funds Distribution** | A group of fiscal options that allow the budget analyst to distribute funds to control points and track budget distribution reports information. |
| **GIP** | Generic Inventory package. |
| **Grouper Counter** | The grouper counter is used to associate multiple entries in file 660, Record of Appliance/Repair, to a single patient. A post-init routine initially sets the counter for you at 99999999, then counts backwards. Do not edit this number. |
| **HCPCS** | Healthcare Financing Administration Common Procedure Coding System. A code that represents an item or service. |
| **IFCAP** | Integrated Funds Distribution, Control Point Activity, Accounting and Procurement. |
| **Item File** | A listing of items specified by A&MM as being purchased repetitively. This file maintains a full description of the item, related stock numbers, vendors, contract numbers, and a procurement history. |
| **Item History** | Procurement information stored in the ITEM file. A history is kept by fund control point at the time of request. |
| **Item Master Number** | A computer-generated number used to identify an item in the ITEM file. |
| **Location** | A specific area that contains prosthetic stock. |
| **MCCR** | Medical Care Cost Recovery |

| | |
|---|---|
| **No-Form Daily Record** | The no-form type of purchasing transaction is used to record purchases from local Durable Medical Equipment (DME) contracts.  Not all VAMCs use this type of contract.  Items such as hospital beds, bath transfer equipment, etc. are examples of types of equipment purchased from a DME on this form. |
| **NPPD** | National Prosthetics Patient Database |
| **Obligation** | The commitment of funds.  The process that Fiscal Service completes to set aside monies to cover the cost of a purchase order. |
| **Obligation Number** | The C prefix number that Fiscal Service assigns to the 1358. |
| **Patient Category** | The patient's service connection and patient status: <br> SC/OP <br> SC/IP <br> NSC/IP <br> NSC/OP |
| **Pickup and Delivery Charges Form** | Pickup and delivery charges must be included in AMIS information.  This computer form records pickup and delivery charges when a local vendor is required by contract to pickup/deliver prosthetic items at a veteran's home. |
| **PSAS Item** | Prosthetic Sensory Aids Service (PSAS) item that can be issued to a patient.  There may be multiple PSAS items associated with one HCPCS: <br><br> Sling, arm extra large <br> Sling, arm medium <br> Sling, arm small |
| **PSC** | Prosthetic Service Card |
| **Purchase Order** | A government document authorizing the purchase of goods or services within the terms indicated. |

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| **Purchasing Agents** | A&MM employees legally empowered to purchase goods and services from commercial vendors. |
| **Reference Number** | Also known as the transaction number. The computer-generated number that identifies a request. It is comprised of the station number, fiscal year, quarter, control point, four-digit sequence number. |
| **Re-order Level** | A level at which time a stock item should be re-ordered. A mailman message will appear daily indicating the re-order level has been reached. |
| **Short Description** | The nomenclature that identifies the item in the ITEM MASTER file. It is restricted to three-to-sixty characters and consists of what the item is, what kind of item, and the size of the item (e.g., glove-surgical medium). |
| **Site Parameters** | Information such as station number, cashier address, billing address, etc., that is unique to your station. |
| **Source** | The distribution for the stock, either VA or Commercial. |
| **Transaction** | Any action that affects a bill or an account. All transactions are numbered sequentially and may be examined individually. |
| **Transaction Number** | The number of the transaction that funded a control point. It consists of the station, fiscal year, quarter, control point sequence number. |
| **Type of Transaction** | A first-time issue, a repair of a previous issue, a spare, or a replacement of a stock item:<br>Initial = I<br>Repair = X<br>Spare = S<br>Replace = R |
| **Unit of Issue** | How the item is issued, e.g., box, each, bottle, etc. |

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| **VA** | The Department of Veterans Affairs, formerly called the Veterans Administration. |
| **VA Form 4-1358** | This VA form is used to record estimated obligations or changes in estimated obligations. |
| **VA Form 10-2319** | Each time a patient receives medical equipment, supplier or services from Prosthetics Service, the item purchased is recorded on this form (Record of Appliance/Repair).  This is an overall list of all appliances/repairs purchased for a veteran. |
| **VA Form 10-2421** | This is the main purchasing authorization and invoice form for items or services issued by Prosthetics Service. |
| **VA Form 10-2520** | This form is used to authorize repairs for prosthetic items/appliances prior to the item being sent to a vendor for repair. |
| **VA Form 10-2527** | Appointment roster and action sheet for clinics. |
| **VA Form 10-2914** | Eyeglasses are authorized for purchase on this form. |
| **VA Form 10-55** | This repair authorization form letter is used by Prosthetics Service to authorize repairs of prosthetic items/appliances sent directly to the vendor by the veteran, without prior Prosthetic Service approval on VA Form 10-2520. |
| **VA Form 10-7306d (AMIS)** | This form tracks cumulative active prosthetics disability codes for AMIS calculations. |
| **VA Form 2237** | This form is used to request goods and services by a service/section, through A&MM. |
| **VA Form 2421PC** | This form keeps track of purchases that are used with a purchase card.  Form 1358 is no longer available when a purchase card is used. |

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| **Vendor** | The company from which the item is purchased. |
| **Vendor File** | An IFCAP file (440) of vendors that the facility conducts business. This file contains ordering and billing addresses, contract information, FPDS information, and telephone numbers. |
| **V*IST*A** | Veterans Health Information Systems and Technology Architecture, formerly Decentralized Hospital Computer Program of the Veterans Health Administration (VHA), Department of Veterans Affairs (VA).<br><br>V*IST*A software, developed by the VA, is used to support clinical and administrative functions at VA Medical Centers nationwide. It is written in M and, via the Kernel, runs on all major M implementations regardless of vendor.<br><br>V*IST*A is composed of packages that undergo a verification process to ensure conformity with name spacing and other V*IST*A standards and conventions. |