Clinical Case Registries (CCR)

Version 1.5



Release Notes

Documentation Revised August 2012 For Patch ROR*1.5*18

Department of Veterans Affairs

Office of Enterprise Development

Health Data Systems – Registries

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Revision History

Date	Description	Author	Role
August, 2012	Final release for Patch ROR*1.5*18. See <u>Table 1</u> for	John Sanders	Project Manager
	Details.	Connie Ray	M Developer
		Linda Berry	Software Quality Assurance Analyst
		Edward Micyus	Delphi Developer
		Dan Zaudtke	Tech Writer
April, 2012	Final release for Patch ROR*1.5*17. See <u>Table 1</u> for	John Sanders	Project Manager
	Details.	Connie Ray	M Developer
		Linda Berry	Software Quality Assurance Analyst
		Edward Micyus	Delphi Developer
		Dan Zaudtke	Tech Writer
September, 2011	Final release for Patch ROR*1.5*15. See Table 1 for	John Sanders	Project Manager
	Details.	Connie Ray	M Developer
		Linda Berry	Software Quality Assurance Analyst
		Edward Micyus	Delphi Developer
		Dan Zaudtke	Tech Writer
March, 2011	Patch ROR*1.5*14. See <i>User Manual</i> for details.	Vida Dunie	Tech Writer
		Angela Saunders	M Developer
		Linda Berry	Software Quality Assurance Analyst
		Ed Micyus	Delphi Developer
September, 2010	Final release for Patch ROR*1.5*13. See <i>User Manual</i> for details.	Kenneth Rikard	Project Manager
April, 2010	Final release for Patch ROR*1.5*10: See <i>User</i>		
	Manual for details.	Edward Micyus	Delphi Developer
		Angela Saunders	M Developer
		Linda Berry	Software Quality Assurance Analyst
		VJ McDonald	Technical Writer
July, 2009	Patch ROR*1.5*8: See <i>User Manual</i> for details.	Kenneth Rikard Edward Micyus Victor Carr Angela Saunders Linda Berry	Project Manager Delphi Developer M Developer M Developer Software Quality Assurance Analyst
		VJ McDonald	Technical Writer

Date	Description	Author	Role
July, 2008	Patch ROR*1.5*7: See <i>User Manual</i> for details.	(unknown)	
May, 2008	Patch ROR*1.5*6: See <i>User Manual</i> for details.	(unknown)	
March, 2008	Patch ROR*1.5*5: See <i>User Manual</i> for details.	(unknown)	
December, 2007	Patch ROR*1.5*4: See <i>User Manual</i> for details.	(unknown)	
November, 2007	Patch ROR*1.5*3: See <i>User Manual</i> for details.	(unknown)	
October, 2007	Patch ROR*1.5*2: See <i>User Manual</i> for details.	(unknown)	
October 2006	Patch ROR*1.5*1: See <i>User Manual</i> for details.	Christine Beynon	
February 2006	Completely updated for CCR Version 1.5	Christine Long	
June 2002	Initial release of CCR Version 1.0	(unknown)	

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1.0 Introduction

The Clinical Case Registries (CCR) software application collects data on the population of veterans with certain clinical conditions, namely Hepatitis C and Human Immunodeficiency Virus (HIV) infections at the local and national level as well as 16 local, generic registries.

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

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

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

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

CCR provides these key features:

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

CCR also provides the following functions:

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

2.0 What's New with ROR*1.5*18

Patch ROR*1.5*18 includes maintenance and enhancement modifications to version 1.5 of the Clinical Case Registries (CCR) application that correct inherent shortcomings in the existing software and enhance other existing capabilities. ROR*1.5*18 contains the following enhancements (E), modifications (M) and fixes (F):

Table 1 - Changes for Patch 18

#	Description	Type
_		
1	This patch is designed to allow reporting tools used with the national Hepatitis C	E
	and HIV registries to be used with local registries. Sixteen new local registries are	
	added based on ICD9 codes provided by the national Office of Public	
	Health/Population Health. The new registries represent patient diagnostic groups	
	for: Alzheimer's Disease	
	Amputation	
	Breast Cancer	
	Cerebrovascular Disease (CVD)	
	Chronic Obstructive Pulmonary Disease (COPD)	
	Chronic Renal Disease (CRD)	
	Congestive Heart Failure (CHF)	
	Diabetes	
	Dyslipidemia Typidemia	
	Hypertension	
	Ischemic Heart Disease (IHD)	
	Low Vision/Blind	
	Mental Health Mental Health	
	Multiple Sclerosis	
	Osteoarthritis	
	Rheumatoid Arthritis	-
2	An option, Initialize new registries (one time) is provided to schedule the initial build	E
	of the new registries. The option is locked with the ROR VA IRM security key. It is	
	run one time and will search for patients with qualifying ICD9 codes linked to	
	outpatient visits, problem lists and inpatient stays back to 1/1/1985. Patients	
	added to a local registry are automatically confirmed. The confirmation date is	
	set to the earliest date of the qualifying ICD9 code. Registries are not available to	
	users until they are initialized.	
3	Once the registries are initialized, the nightly job (ROR TASK) searches for new	E
	patients with qualifying ICD9 codes. Patients added to one of the 16 local	
	registries are automatically confirmed. The confirmation date is set to the date of	
4	the qualifying ICD code.	3.4
4	Only data from the national registries for HIV and Hepatitis C will be transmitted	M
	to the national database.	
L		l

#	Description	Type
5	Two new security keys have been added, ROR VA GENERIC ADMIN and ROR VA GENERIC USER. These keys only provide access to the local registries. Users assigned the new ROR VA GENERIC ADMIN key will have the ability to delete patients from any of the sixteen local registries. Patients are deleted immediately and the deletion is logged in the technical log. If the patient has a future qualifying result, the patient is added back to the appropriate registry. Users with the ROR VA GENERIC USER key will have the ability to run reports on all the local registries.	E
6	It will no longer be necessary to run the option, Re-index the ACL cross-reference manually after assigning or un-assigning a security key. The user's access privileges will be automatically updated at the time the user logs on.	M
<mark>7</mark>	The Select a Registry screen displayed when the user logs on, will list all the registries to which the user has keys. The national registries for Hepatitis C and HIV will be listed first. The local registries will be listed next in alphabetical order separated from the national registries by a blank line.	E
8	The Patient screen for local registries does not include a Pending only checkbox or a Pending Comments column because patients added to local registries are automatically confirmed.	E
9	Site parameters can be customized for local registries. The site parameters screen displays tabs for Lab Tests, Notifications and Local Fields. A generic tab on the right side of the screen displays laboratory tests. Select local laboratory tests under the Registry Lab tab and move them to the right. Once a laboratory test is added, it is displayed in the middle pane of the Registry Lab Patient Data Editor. The names of VistA users who need to receive notifications about problems in	M
	registry processes can be added under the Notifications tab. Local fields can also be added to individual local registries. These fields are used to include/exclude patients from reports.	

<mark>#</mark>	Description	Type
10	The following reports can be run for local registries: BMI by Range Report Clinic Follow Up Report Combined Meds and Labs Report Current Inpatient List Report Diagnosis Report General Utilization and Demographics Report Procedures Report Radiology Utilization Report Inpatient Utilization Report Lab Utilization Report Liver Score by Range Report Outpatient Utilization Report Patient Medication History Report Pharmacy Prescription Utilization Report Renal Function by Range Report	M
11	The List of Registry Patients can be run for local registries but has been modified for use with local registries. The Pending checkbox has been removed from the Report Status panel. Pending comments and First diagnosed at this facility checkboxes have been removed from the Report Options panel.	M
12	The following reports are not supported for local registries: DAA Lab Monitoring Report Potential DAA Candidates Report Registry Lab Tests by Range Report Registry Medications Report VERA Reimbursement Report	M
13	If the user has keys for the registries, the Other Registries selection panel will display those registries. Registries listed in this panel can be used to include/exclude patients on reports.	F
14	The Common Template for Depression has been deleted and replaced with two new Common Templates for Major Depression and Other Depression. These templates are used to filter patients based on diagnoses when running reports.	M
15	ROR TASK has been modified to automatically update all registries. It is no longer necessary to list registries in the TASK PARAMETERS field. The description of the option has been modified to reflect this change.	E
<mark>16</mark>	The Select Patient panel has been added to the DAA Lab Monitoring report.	E

Table 2 - Global Updates for Patch ROR*1.5*18

File Name and Number	Update
ROR REGISTRY	New entries "va diabetes", "va mental health", "va
PARAMETERS (#798.1)	CHF", "VA IHD", "VA BREAST CA", "VA HTN", "VA
	CVD", "VA OSTEOARTHRITIS", "VA COPD", "VA DYSLIPIDEMIA", "VA CRD", "VA ALZHEIMERS", "VA
	RHEUM", "VA AMPUTATION", "VA BLIND", "VA MULTIPLE
	SCLEROSIS.

File Name and Number	Update
ROR SELECTION RULE (#798.2)	New entries "VA ALZHEIMERS PROBLEM", VA ALZHEIMERS PTF", "VA ALZHEIMERS VPOV", "VA AMPUTATION PROBLEM", "VA AMPUTATION PROBLEM", "VA BLIND PTF", "VA BLIND PTF", "VA BLIND VPOV", "VA BLIND PROBLEM", "VA BLIND PTF", "VA BLIND VPOV", "VA BREAST CA PROBLEM", "VA BREAST CA PTF", "VA BREAST CA PTF", "VA BREAST CA VPOV", "VA COPD PROBLEM", "VA COPD PTF", "VA COPD VPOV", "VA COPD PROBLEM", "VA COPD PTF", "VA COPD VPOV", "VA CVD PROBLEM", "VA CVD PTF", "VA CVD VPOV", "VA DIABETES PROBLEM", "VA DIABETES PTF", "VA DIABETES VPOV", "VA DYSLIPIDEMIA PTF", "VA DYSLIPIDEMIA VPOV", "VA HTN PROBLEM", "VA HTN PROBLEM", "VA HTN PTF", "VA HTN VPOV", "VA MENTAL HEALTH PROBLEM", "VA MENTAL HEALTH PTF", "VA MENTAL HEALTH PROBLEM", "VA MULTIPLE SCLEROSIS PROBLEM", "VA MULTIPLE SCLEROSIS PROBLEM", "VA MULTIPLE SCLEROSIS PROBLEM", "VA MULTIPLE SCLEROSIS PROBLEM", "VA OSTEOARTHRITIS PROBLEM", "VA OSTEOARTHRITIS PROBLEM", "VA OSTEOARTHRITIS PROBLEM", "VA OSTEOARTHRITIS PROBLEM", "VA RHEUM VPOV", "VA RHEUM PTF", "VA RHEUM VPOV", "VA RHEUM VPOV", "VA RHEUM PTF", "VA RHEUM VPOV", "VA RHEUM VP
	Modified entries "VA HEPC PROBLEM", "VA HEPC PTF", "VA HEPC VPOV", "VA HIV PROBLEM", "VA HIV PTF", "VA HIV VPOV"
ROR ICD SEARCH (#798.5)	New entries "VA DIABETES", "VA MENTAL HEALTH"," VA CHF"," VA IHD"," VA BREAST CA", "VA HTN", "VA CVD", "VA OSTEOARTHRITIS", "VA COPD", "VA DYSLIPIDEMIA", "VA CRD", "VA ALZHEIMERS", "VA RHEUM", "VA AMPUTATION", "VA BLIND", "VA MULTIPLE SCLEROSIS",
ROR LIST ITEM(#799.1)	New entries "BMI", "MELD", "MELD-Na", "APRI", "FIB-4", "Creatinine clearance by Cockcroft-Gault", "eGFR by MDRD", "eGFR by CKD-EPI"
ROR METADATA (#799.2)	Modified entries "45", "9000010.07", "9000011"
PARAMETERS (#8989.5)	New Entries "Other Depression", "Major Depression" Deleted Entries "Depression"

3.0 Obtaining Software and Documentation

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

Table 3 - Software and Documentation Sources

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

Table 4 - Files Included in Distribution

File Name	Contents	Retrieval Format
ROR1_5P18GUI.ZIP	Zipped GUI distributive	BINARY
ROR1_5P18DOC1.ZIP	Zipped DOC distributive, which includes both . PDF and . DOC formats:	BINARY
	► User Manual (ROR1_5_18UM)	
ROR1_5P18DOC2.ZIP	► Installation and Implementation Guide (ROR1_5_18IG)	BINARY
	Technical Manual / Security Guide (ROR1_5_18TM)	
	► Release Notes (ROR1_5_18RN)	

Patch ROR*1.5*18 is available in the National Patch Module on FORUM¹ as a PackMan message.

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

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

4.0 VistA Documentation on the Intranet

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

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

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

5.0 Specific Instructions

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

6.0 Matching GUI Version to Patch

WARNING If the **GUI** and **VistA** software versions do not match, users may encounter problems with the application. For example, if the site has installed Patch ROR*1.5*18, users' **GUI** installations should also be at Patch level 18. Users can determine the **GUI** version by using the Help | About CCR menu option.



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

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

Users may download the latest GUI software as outlined in 3.0 above.

Figure 1 - Help | About Pane

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