

Patient Care Encounter (PCE) User Manual



**Version 1.0
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**Department of Veterans Affairs
Office of Information and Technology (OI&T)**

Revision History

Date	Description (Patch # if applicable)	Project Manager	Project Authors
12/2023	<p>PX*1.0*235 Updated the following sections:</p> <p>3.10 How to Add or Edit ICD Diagnoses. Step 2. Inserted COMPACT Act Administrative Eligibility into screen recreation.</p> <p>3.11.1 Steps to edit a CPT. Step 2. Inserted COMPACT Act Administrative Eligibility into screen recreation. Step 3. Inserted COMPACT Act Administrative Eligibility into screen recreation.</p> <p>3.12 How to Add or Edit and Immunization. Step 2. Inserted COMPACT Act Administrative Eligibility into screen recreation.</p> <p>3.15 How to Add or Edit a Skin Test. Step 5. Inserted COMPACT Act Administrative Eligibility into screen recreation.</p> <p>3.18.1 Steps to add a Checkout Interview. Step 2. Added note about COMPACT Act administrative eligibility status. Inserted COMPACT Act Administrative Eligibility into screen recreation.</p>	Booz Allen Hamilton	Booz Allen Hamilton
09/2022	<p>PX*1.0*217: Updated the following sections: 3.13, 3.15, 6.2 and 6.3.</p> <p>Added new sections:</p> <ul style="list-style-type: none"> 6.4 -Transfer Immunization Inventory Between Facilities, 6.5 - Display Immunization Inventory Report, 6.6 - DEF Immunization Default Responses Enter/Edit, 7.1.1 - PCE File Inquiry. <p>Fixed the Doses Unused error in the immunization inventory report screenshot.</p> <p>Inserted a NOTE in front of a statement about a contraindication/refusal reason and defaults.</p> <p>Added Ordered by Policy to the How to Add or Edit an Immunization section and screenshot.</p>	Liberty ITS	Liberty ITS

	Updated the Screenman editing form screenshot in the Options Descriptions section. Section 6.3 - Key Concepts: Added the Immunization Lot Add/Edit/Display menu listing.		
05/2021	PX*1*211 Revised dates on Title page and in Footers. Reviewed for 508 accessibility	Liberty ITS	Liberty ITS
04/2019	PX*1*211 – Made updates to 1.6, 3.14, 4.0. Added definition of Standard Code. Made multiple updates to screen captures to show newer information.		
12/2017	PX*1*219 – Made update to section: 5.1. Added section 5.5 PCE/SD Debugging Utilities.		
11/2016	OI&T TW Standards implemented and Section 508 accommodations added.		
08/2016	PX*1*216 – Made updates to sections: 3.13, 5.2, 6.4, 6.6. Added new section 9.4.		
08/2016	PX*1*215 – Made updates to sections: 1.5, 3.3.1, 3.5 thru 3.13, 3.15 thru 3.19, 5.2, 6.1, 6.1.1, 7.1, 7.2.9, 7.3. Added new sections 3.14, 6.7.		
01/2016	PX*1*210 – Made updates to sections: 3.13, 3.15, 5.2, 6.1, 6.1.1, Added sections: 6.4, 6.5, 6.6 and formatting edits.		
03/2015	PX*1*206 – Updates to Skin Test information.		
12/2014	PX*1*201 – Remediated doc for 508 compliance.		
10/2014	PX*1*201 – Made additions to the PCE Update Encounter screen and some format edits.		
08/2014	Manual updated to show changes with patch PX*1*201.		
06/2014	PX*1*199 – Updates for ICD-10 PCE Encounter Actions: Changed DX Diagnosis (ICD9) to DX Diagnosis (ICD) (pp. 19, 21-27, 29-30, 34-36, 38-39, 41-42, 44, 47). Changed Diagnosis Ranked by Frequency Report codes (pp. 57-59, 105, 113, 115-116). Miscellaneous ICD changes (pp. 108, 129, 134) Technical Edit.		
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	Changed environmental contaminants to SW Asia Conditions.		
10/2008	Formatting Edits.		
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03/2005	Manual updated to show changes with Patch PX*1*380. See section: Glossary – Clinic. Conforming Clinics. Non- Conforming Clinics.		
11/2004	Manual updated to comply with SOP 192-352 Displaying Sensitive Data.		

Table of Contents

1.0 INTRODUCTION.....	1
1.1. PURPOSE AND BENEFITS OF PCE.....	1
1.1.1. Goals of Ambulatory Data Capture Project.....	1
1.2. SOFTWARE NECESSARY TO SUPPORT ADCP.....	1
1.3. FUNCTIONALITY OF PCE.....	2
1.3.1. Interactive Interfaces.....	2
1.3.2. Non-interactive Interfaces.....	2
1.4. DEFINITIONS.....	2
1.5. POTENTIAL PCE WORKFLOW.....	3
1.6. SOURCES OF DATA.....	4
1.7. DESIGNING ENCOUNTER FORMS.....	4
1.8. XU*8*27 - NEW PERSON FILE PATCH.....	4
2.0 ORIENTATION.....	6
2.1. PCE LIST MANAGER INTERFACE.....	6
2.1.1. Other (Hidden) Actions.....	7
2.2. REVIEW SCREENS.....	7
2.2.1. List by Appointment.....	8
2.2.2. List by Encounter.....	8
2.3. SELECT NEW PATIENT, VIEW BY CLINIC, CHANGE DATE RANGE.....	9
2.3.1. Expand Appointment.....	10
2.3.2. Appointment.....	12
3.0 USING PCE LIST MANAGER INTERFACE FOR ENCOUNTERS.....	13
3.1. PCE DATA ENTRY OPTIONS.....	13
3.1.1. PCE Encounter Data Entry - Supervisor.....	13
3.1.2. PCE Encounter Data Entry.....	13
3.1.3. PCE Encounter Data Entry and Delete.....	13
3.1.4. PCE Encounter Data Entry without Delete.....	13
3.2. PCE ACTIONS.....	14
3.3. ADDING AND EDITING PATIENT CARE ENCOUNTERS.....	15
3.3.1. Adding New Encounters.....	15
3.4. MAKE A HISTORICAL ENCOUNTER.....	17
3.5. UPDATE ENCOUNTER.....	18
3.5.1. Quick Tricks.....	19

3.6.	EDIT AN ITEM	20
3.7.	DELETE AN ITEM.....	22
3.8.	HOW TO ADD OR EDIT AN ENCOUNTER	23
3.9.	HOW TO ADD OR EDIT A PROVIDER.....	24
3.10.	HOW TO ADD OR EDIT ICD DIAGNOSES.....	25
3.11.	HOW TO ADD OR EDIT A CPT (PROCEDURE).....	27
3.11.1.	Steps to edit a CPT:.....	27
3.12.	HOW TO ADD OR EDIT AN IMMUNIZATION.....	29
3.13.	HOW TO ADD OR EDIT IMMUNIZATION CONTRAINDICATION OR REFUSAL EVENTS.....	32
3.14.	HOW TO ADD OR EDIT A PATIENT ED	33
3.15.	HOW TO ADD OR EDIT A SKIN TEST.....	34
3.16.	HOW TO ADD OR EDIT AN EXAM	36
3.17.	HOW TO ADD OR EDIT HEALTH FACTORS.....	37
3.18.	HOW TO ADD OR EDIT THE CHECKOUT INTERVIEW.....	38
3.18.1.	Steps to add a Checkout Interview:	38
3.19.	ADDING OR EDITING DIRECTIONS TO PATIENT'S HOME.....	41
3.20.	KEY CONCEPTS	43
4.0	PCE AND HEALTH SUMMARY	44
5.0	MANAGING PCE.....	45
5.1.	PCE MENUS AND OPTIONS.....	45
5.2.	PCE COORDINATOR MENU	46
5.3.	KEY CONCEPTS	47
5.4.	PCE SITE PARAMETERS.....	47
5.4.1.	PCE Site Parameters Menu	47
5.4.2.	Option Descriptions.....	47
5.4.3.	PCE HS/RPT Parameter Menu	47
5.4.4.	PCE Site Parameters Edit Example.....	48
5.4.5.	Key Concepts.....	48
5.5.	PCE/SD DEBUGGING UTILITIES	49
6.0	TABLE MAINTENANCE	53
6.1.	PCE TABLE MAINTENANCE MENU	53
6.1.1.	Option Descriptions.....	53
6.2.	LOT IMMUNIZATION LOT ADD/EDIT/DISPLAY	58
6.3.	KEY CONCEPTS	58

6.4.	TRANSFER IMMUNIZATION INVENTORY BETWEEN FACILITIES	59
6.5.	DISPLAY IMMUNIZATION INVENTORY REPORT	60
6.6.	DEF IMMUNIZATION DEFAULT RESPONSES ENTER/EDIT.....	62
7.0	INFO PCE INFORMATION ONLY	65
7.1.	PCE INFORMATION ONLY MENU.....	65
7.1.1.	Active Educ. Topic List – Detailed	65
7.1.2.	Education Topic List.....	65
7.1.3.	Education Topic Inquiry.....	65
7.1.4.	Exam List.....	65
7.1.5.	Health Factor List.....	65
7.1.6.	Immunization List.....	65
7.1.7.	Skin Test List.....	66
7.1.1.	PCE File Inquiry.....	66
7.2.	KEY CONCEPTS	66
7.3.	PCE CLINICAL REPORTS.....	66
7.3.1.	Patient Activity by Location.....	67
7.3.1.1.	Admission/Discharge Activities.....	67
7.3.1.2.	Emergency Room Clinic Activities.....	67
7.3.1.3.	Critical Lab Values.....	68
7.3.2.	Caseload Profile by Clinic	69
7.3.3.	Technical Description.....	70
7.3.4.	PCE Encounter Summary	72
7.3.5.	Diagnoses Ranked by Frequency.....	75
7.3.6.	Location Encounter Counts	77
7.3.7.	Provider Encounter Counts	78
7.4.	KEY CONCEPTS	81
7.5.	MISSING DATA REPORT	81
7.6.	ACCOUNTING OF IMMUNIZATION DISCLOSURES REPORT	83
8.0	SUPPLEMENTARY MATERIAL.....	85
8.1.	HELPFUL HINTS.....	85
8.2.	FREQUENTLY ASKED QUESTIONS.....	85
9.0	DEVICE INTERFACE ERROR REPORTS	89
10.0	GLOSSARY.....	90

1.0 Introduction

Patient Care Encounter (PCE) helps sites collect, manage, and display outpatient encounter data (including providers, procedure codes, and diagnostic codes) in compliance with the 10/1/96 Ambulatory Care Data Capture mandate from the Undersecretary of Health.

PCE also helps sites document patient education, examinations, treatments, skin tests, and immunizations, as well as collect and manage other clinically significant data, such as defining Health Factors.

Although treatments are one of the data types that can be stored in PCE, in practice, they were found not to be useful. As a result, treatment data has not been stored or used since shortly after PCE was released.

PCE data may come from multiple sources, including external data acquisition devices (such as mark sense scanners), provider interaction through CPRS, or clerical data entry. PCE data can be retrieved by patient, ward, or clinic. Information entered through PCE can be viewed on Health Summaries or other reports, and it is also used for clinical decision support, i.e., Clinical Reminders.

1.1. Purpose and Benefits of PCE

The Veterans Health Administration has determined that it must have adequate, accurate, and timely information about each ambulatory care encounter/service provided in order to enhance patient care and to manage our health care resources into the future. Effective October 1, 1996, VHA facilities are required to report each ambulatory encounter and/or ancillary service. Provider, procedure, and diagnosis information is included in the minimum data set that will be reported to the National Patient Care Data Base (NPCDB). The Ambulatory Data Capture Project was formed to coordinate the many software packages and their developers who support this effort.

1.1.1. Goals of Ambulatory Data Capture Project

- Capture purpose of visit/problem, diagnoses, procedures, and providers
- Develop a fast, accurate method for getting ambulatory care data into VistA
- Return clinically relevant data back to the Clinician
- Make data available for workload reporting, DSS, research, MCCR, and other ongoing VHA needs

1.2. Software Necessary to Support ADCP

- Automated Information Collection System (AICS) and other capture solutions
- Patient Care Encounter
- Problem List

- Patient Information Management System
- National Patient Care Data Base

Patient Care Encounter (PCE) ensures that every encounter has an associated provider(s), procedure code(s), and diagnostic code(s), in accordance with this mandate.

PCE also helps fill a gap in current VistA patient information by capturing other clinical data such as exams, health factors, immunizations, skin tests, treatments, and patient education, which can then be viewed on Health Summaries and other clinical reports, and can be used for clinical decision support.

1.3. Functionality of PCE

Version 1.0 of PCE provides options that allow:

- Collection and management of outpatient encounter data.
- Presentation of outpatient encounter data through Health Summary components and Clinical Reports. Outpatient encounter data is captured through interactive and non-interactive interfaces.

1.3.1. Interactive Interfaces

Online data capture using a user interface developed with List Manager tools. Online data capture in which Scheduling integrates with PCE to collect checkout information. PCE data is collected in CPRS through Reminder Dialogs and Encounter Forms.

1.3.2. Non-interactive Interfaces

PCE Device Interface, which supports the collection of encounter form data from scanners such as PANDAS, Pen-based TeleForm, and Automated Information Collection System (AICS). The interface also supports workstation collection of outpatient encounter data.

PCE application programming interface (API) which supports the collection of outpatient encounter data from ancillary packages such as Laboratory, Radiology, Text Integration Utility (TIU).

1.4. Definitions

Outpatient Visit: The visit of an outpatient to one or more units or facilities located in or directed by the provider maintaining the outpatient health care services (clinic, physician's office, hospital/medical center) within one calendar day.

Encounter: A contact between a patient and a provider who has primary responsibility for assessing and treating the patient at a given contact, exercising independent judgment. A patient may have multiple encounters per visit. Outpatient encounters include scheduled appointments and walk-in unscheduled visits. A clinician's telephone

communications with a patient may be represented by a separate visit entry. If the patient is seen in an outpatient clinic while an inpatient, this is treated as a separate encounter.

Episode of Care: Many encounters for the same problem can constitute an episode of care. An outpatient episode of care may be a single encounter or can encompass multiple encounters over a long period of time. The definition of an episode of care may be interpreted differently by different professional services even for the same problem. Therefore, the duration of an episode of care is dependent on the viewpoints of individuals delivering or reviewing the care provided.

Ancillary Service/Occasion of Service: A specified instance of an act of service involved in the care of a patient or consumer which is not an encounter. These occasions of service may be the result of an encounter; for example, tests or procedures ordered as part of an encounter. A patient may have multiple occasions of service per encounter or per visit.

Provider: The entity which furnishes health care to a consumer. This definition includes an individual or defined group of individuals who provide a defined unit of health care services (defined = codable) to one or more individuals at a single session.

1.5. Potential PCE Workflow

1. A provider has a patient encounter (appointment, walk-in, telephone call, mail conversation, etc.).

Materials available to provider:

- Health Summary with new components summarizing previous encounters, and a health reminders component based on clinical repository data
- Encounter Form with pre-defined terminology for the provider's clinic/service type
- Clinical Reminders and Reminder Dialogs
- PCE Clinical Reports, Action Profile, Daily Order Summary, Lab Interim report, and other VistA reports.

2. The provider documents the encounter.

Types of data collected and stored in PCE:

- Providers
- ICD Diagnoses
- CPT procedures provided
- SNOMED CT codes
- Immunizations (CPT-mappable)
- Immunization Contraindications/Refusals

- Skin tests (CPT-mappable)
 - Patient education
 - Exams (non-CPT-mappable)
 - Treatments (non-CPT-mappable)
3. Information from a hard copy encounter form is entered into VistA by a data entry clerk or scanned via an interface utility.
 4. Encounter form data that isn't scanned or is scanned incorrectly can be entered or edited through the PCE data entry program described in this manual.
 5. Providers can enter immunizations, patient education, or other pieces of clinical information through PCE.
 6. Providers can view items entered into PCE on a Health Summary or customized report. If any of these items have been set up for clinical reminders, these reminders will appear on the patient's health summary.

1.6. Sources of Data

PCE data can be entered through many mechanisms, including:

- CPRS Encounter Forms and Reminder Dialogs
- Scheduling (PIMS) check-out process
- AICS Encounter Forms
- PANDAS™ scanning system
- TeleForm scanning system
- Imaging workstation
- PCE List Manager Interface

1.7. Designing Encounter Forms

To use AICS Encounter Forms with scanners or for direct data entry (either clinician or data entry clerk), you can design encounter forms for your hospital or clinic with the AICS Encounter Form generator. See the AICS User Manual for instructions about creating Encounter Forms.

1.8. XU*8*27 - New Person File Patch

As part of the October 1, 1996 mandate, VAMCs must collect provider information. The provider information reported is the "Person Class" defined for all providers associated with ambulatory care delivery.

To comply with this requirement, all VAMC providers must be assigned a Profession/Occupation code (Person Class) so that a Person Class can be associated with each ambulatory patient encounter by October 1, 1996.

Patch XU*8*27 has been developed to provide functionality that will enable you to assign Person Class information.

2.0 Orientation

2.1. PCE List Manager Interface

While clinicians input and view PCE data primarily through CPRS, PCE provides a List Manager interface that can be used to review all of the details of an encounter and update the encounter if needed. To learn more about entering Encounter information, please see the *CPRS User Guide: GUI Version*.

The List Manager Utility allows PCE to display a list of items in a screen format, with possible actions (add, edit, print) listed below. If the list is longer than one screen, the header and action portions of the screen remain stable, while the center display scrolls. So if there are too many patient encounters to fit within the scrolling portion of the screen, when you press the return key, that portion of the screen scrolls while the top and bottom stay unchanged.

PCE Encounter List		Mar 14, 2019@10:07:27	Page: 1 of 2
AVIVAPATIENT,FIVE		666-00-0925	Clinic: All
Date range: 1/1/1998 to 3/14/2019			
* - New GAF Score Required			
Encounter		Clinic	Appointment Status
1	12/5/2017	Historical Encounter at	
2	6/4/2010 13:00	GENERAL MEDICINE	
3	5/28/2010 08:00	GENERAL MEDICINE	ACTION REQUIRED
4	11/3/2009 14:00	GENERAL MEDICINE	
5	6/24/2009 13:00	OPHTHAMOLOGY	
6	6/10/2009 13:00	GENERAL MEDICINE	
7	6/3/2009 08:00	GENERAL MEDICINE	
8	3/12/2009 13:00	GENERAL MEDICINE	
9	12/8/2008 13:00	GENERAL MEDICINE	
+ + Next Screen - Prev Screen ?? More Actions			
UE	Update Encounter	CD Change Date Range	DD Display Detail
LI	List by Appointment	CC Change Clinic	GF GAF Score
AD	Add Standalone Enc.	IN Check Out Interview	
HI	Make Historical Enc.	PC PC Assign or Unassign	QU Quit
		TI Display Team Info	
PB Patient Problem List			
SP	Select New Patient	VC View by Clinic	
Select Action: Next Screen//			

Without leaving the option, you can:

- Browse through the list
- Select items that need action
- Take action on those items
- Select other actions

You select an action by typing the name or abbreviation at the Select Action prompt.

Actions may be preselected by typing the action abbreviation, then the number of the encounter on the list. For example, UE=1 will process entry 1 for Update Encounter

2.1.1. Other (Hidden) Actions

If you enter two question marks (??) at the Select Item(s) prompt, you will see a list of other actions that you can use with PCE.

```
Select Item(s): Quit// ??
The following actions are also available:
+ Next Screen      FS      First Screen      SL      Search List
- Previous Screen  LS      Last Screen      ADPL     Auto Display(On/Off)
UP      Up a Line      GO      Go to Page
DN      Down a Line     RD      Re Display Screen  SP      Leave Update and
>      Shift View to Right PS      Print Screen      Select New Patient
<      Shift View to Left PL      Print List
Press RETURN to continue or '^' to exit:
```

2.2. Review Screens

PCE provides several different perspectives for viewing encounter data. You can change to any of these views whenever you're at a Select Action: prompt.

- List by Appointment
- List by Encounter
- Select New Patient
- View by Clinic/Ward
- Change Date Range
- Display Detail
- Expand Appointment
- Appointment Lists

2.2.1. List by Appointment

Most encounters are associated with an appointment (the exceptions are Standalone Encounters, which are usually walk-ins, and Historical Encounters, which usually took place at another location). Therefore, you need to identify an appointment to associate encounter information with before you enter this information. You can change your view to List by Encounter if you wish to enter standalone or historical encounters. You can also change your default view (whether you see the Appointment List or the Encounter List when you enter PCE) through the option, PCE Parameters Add/Edit.

PCE Appointment List Jul 26, 2018@08:07:20 Page: 1 of 1			
PCEPATIENT, ONE 000-45-6789		Clinic: All	
Date range: 07/16/18 to 07/30/18		Total Appointment Profile	
	Clinic	Appt Date/Time	Status
1	Diabetes Clinic	May 18, 2018 16:48	Action Req/Checked Out
2	Cardiology	May 22, 2018 09:00	Checked Out
3	Diabetes Clinic	Jun 22, 2018 11:00	Checked Out
4	Cardiology	Jun 23, 2018 09:00	No Action Taken
5	Diabetes Clinic	Jun 23, 2018 09:30	Checked Out
6	Diabetes Clinic	Jul 23, 2018 10:00	No Action Taken
7	Cardiology	Jul 25, 2018 09:00	Checked Out
+ Next Screen - Prev Screen ?? More Actions			
UE	Update Encounter	SP Select New Patient	VC View by Clinic
LI	List by Encounter	CD Change Date Range	DD Display Detail
AD	Add Standalone Enc.		EP Expand Appointment
AL	Appointment Lists	IN Check Out Interview	QU Quit
Select Action: Quit//			

2.2.2. List by Encounter

PCE Encounter List		Oct 30, 2018@10:07:27		Page: 1 of 2	
THIRTEEN,OUTPATIENT		666-00-0613		Clinic: All	
Date range: 9/30/2018 to 10/30/2018					
* - New GAF Score Required					
Encounter		Clinic		Appointment Status	
1	10/12/2018 08:14	PATIENT EVALUATION			
2	10/12/2018 08:17	PATIENT EVALUATION			
3	10/12/2018 08:21	PRIMARY CARE		ACTION REQUIRED	
4	10/12/2018 08:24	PRIMARY CARE - Jeanne			
5	10/12/2018 08:26	20 MINUTE			
+ Next Screen - Prev Screen ?? More Actions					
UE	Update Encounter	CD	Change Date Range	DD	Display Detail
LI	List by Appointment	CC	Change Clinic	GF	GAF Score
AD	Add Standalone Enc.	IN	Check Out Interview		
HI	Make Historical Enc.	PC	PC Assign or Unassign	QU	Quit
		TI	Display Team Info		
PB Patient Problem List					
SP	Select New Patient	VC	View by Clinic		
Select Action: Quit//					

List by Encounters includes ancillary encounters only if the process starts either through PCE Encounter Data Entry Supervisor or PXCE Encounter Viewer.

2.3. Select New Patient, View by Clinic, Change Date Range

You can change to another patient, another Clinic, or to a different date range and start all over just by selecting one of these actions at any Select Action prompt.

Display Detail

```
PCE Encounter List           Mar 14, 2019@11:04:28           Page:    1 of    2
AVIVAPATIENT,FIVE         666-00-0925           Clinic:  All
Date range:  1/1/1998 to 3/14/2019
                        * - New GAF Score Required

      Encounter           Clinic           Appointment Status
1    12/5/2017           Historical Encounter at
2    6/4/2010  13:00      GENERAL MEDICINE
3    5/28/2010  08:00      GENERAL MEDICINE           ACTION REQUIRED
4    11/3/2009  14:00      GENERAL MEDICINE
5    6/24/2009  13:00      OPHTHAMOLOGY
6    6/10/2009  13:00      GENERAL MEDICINE
7    6/3/2009   08:00      GENERAL MEDICINE
8    3/12/2009  13:00      GENERAL MEDICINE
9    12/8/2008  13:00      GENERAL MEDICINE
+          + Next Screen  - Prev Screen  ?? More Actions
LI  List by Appointment  CC  Change Clinic           GF  GAF Score
AD  Add Standalone Enc.  IN  Check Out Interview
HI  Make Historical Enc.  PC  PC Assign or Unassign  QU  Quit
                        TI  Display Team Info
PB  Patient Problem List
SP  Select New Patient   VC  View by Clinic
Select Action: Next Screen// DD  Display Detail
Select Encounter (1-15): 1
```

```
Encounter Profile           Mar 14, 2019@11:05:26           Page:    1 of    5
AVIVAPATIENT,FIVE         666-00-0925           Clinic:
Encounter Date  12/5/2017           Clinic Stop:

1  Encounter Date and Time:  DEC 05, 2017
   Patient Name:  AVIVAPATIENT,FIVE

2  Provider:  STUDENT,EIGHT  PRIMARY  Physician/Physician/Osteopath
   Event Date and Time:  MAR 05, 2019@12:19:36
   Package:  PCE PATIENT CARE ENCOUNTER
   Data Source:  PXCE DATA ENTRY
3  Provider:  PROVIDER,FIVEHUNDREDTHREE  Physician/Physician/Osteopath
   Package:  PCE PATIENT CARE ENCOUNTER
   Data Source:  PXCE DATA ENTRY
4  Education Topic:  VA-TOBACCO USE SCREENING
   Level of Understanding:  GOOD
   Event Date and Time:  MAR 05, 2019@12:21:48
+          + Next Screen  - Prev Screen  ?? More Actions

EP  Expand Entry
Select Action:Next Screen// EP  Expand Entry
```


2.3.1. Expand Appointment

This action lets you see an Expanded Profile for a selected patient appointment. Note that the top line says Page: 1 of 5, indicating that you should press ENTER after each screen display to see the entire expanded profile. To scroll back, press the minus (-) key.

```
Expanded Profile      Jul 26, 2018@08:48:51      Page: 1 of 5
Patient: PCEPATIENT,ONE (6789)                  Outpatient
Appointment #: 1                               Clinic: DIABETES CLINIC

*** Appointment Demographics ***

      Name: PCEPATIENT,ONE                      Clinic: DIABETES CLINIC
      ID: 000-45-6789                          Date/Time: JUL 18, 2018@16:48
      Status: ACTION REQ/CHECKED OUT
Purpose of Vst.: UNSCHEDULED
      Length of Appt: 30                      Appt Type: REGULAR
      Lab:                                     Elig of Appt: SC LESS THAN 50%
      X-ray:                                   Overbook: NO
      EKG:                                     Collateral Appt: NO
      Other Info:
Enrolled in this clinic: YES                     OPT or AC: OPT
      Enrollment Date/Time: JUN 04, 2017
+      Enter ?? for more actions

Select Action: Next Screen// [ENTER]
```

```
Expanded Profile Jul 26, 2018@08:52:10 Page: 2 of 5
Patient: PCEPATIENT,ONE (6789)                  Outpatient
Appointment #: 1 Clinic: DIABETES CLINIC
+
*** Appointment Event Log ***
Event      Date      User
-----
Appt Made  JUL 18, 2018    PCEUSER,ONE
Check In
Check Out  JUL 18, 2018@16:48    PCEUSER,ONE
Check Out Entered JUL 18, 2018@16:49:05
No-Show/Cancel

      Checked Out:
      Cancel Reason:
      Cancel Remark:
      Rebooked Date:
+      Enter ?? for more actions

Select Action: Next Screen// [ENTER]
```

```

Expanded Profile      Jul 26, 2018@08:52:10    Page:  3 of  5
Patient: PCEPATIENT,ONE (6789)                                Outpatient
Appointment #: 1                                             Clinic: DIABETES CLINIC

*** Patient Information ***
Date of Birth: APR 01, 1944                                ID: 000-45-6789
Sex: FEMALE                                                Marital Status: SINGLE
                                                    Religious Pref.: UNKNOWN/NO PREFERENC

Primary Elig.: SC, LESS THAN 50%                                POS: VIETNAM ERA
Address:                                                    Phone:
    321 S 3400 E
    SALT LAKE CITY, UTAH  84105
Radiation Exposure: YES                                Status: NO INPT./LOD. ACT.
Prisoner of War: NO                                Last Admit/Lodger Date:
    AO Exposure: YES                                Last Disch./Lodger Date:
+      Enter ?? for more actions

Select Action: Next Screen// [ENTER]

```

```

Expanded Profile      Jul 26, 2018@08:52:10    Page:  4 of  5
Patient: PCEPATIENT,ONE (6789)                                Outpatient
Appointment #: 1                                             Clinic: DIABETES CLINIC

*** Check Out ***
CLASSIFICATION      [Required]
1      Treatment for SC Condition: NO
2      Combat Veteran: NO
3      Agent Orange Exposure: YES
4      Ionizing Radiation Exposure: NO
5      SW Asia Conditions: NO
6      Military Sexual Trauma: NO
7      Head and/or Neck Cancer: NO

PROVIDER      [Required]      DIAGNOSIS      [Required]
1  PCEPROVIDER,ONE+
      Enter ?? for more actions

Select Action: Next Screen// [ENTER]

```

2.3.2. Appointment

This action gives you a list of possible appointment statuses and lets you change the appointments that will appear on the list, based on their statuses.

```
PCE Appointment Jul 26, 2018@09:04:16 Page: 1 of 1
PCEPATIENT,ONE 000-45-6789 Clinic: All
Date range: 07/16/18 to 07/30/18 Total Appointment Profile
```

	Clinic	Appt Date/Time	Status
1	Diabetes Clinic	Jul 18, 2018 16:48	Action Req/Checked Out
3	Cardiology	Jul 22, 2018 09:00	Checked Out
4	Cardiology	Jul 22, 2018 10:00	Checked Out
5	Diabetes Clinic	Jun 22, 2018 11:00	Checked Out
7	Cardiology	Jun 23, 2018 09:00	No Action Taken
11	Cardiology	May 25, 2018 09:00	Checked Out

```
+ Next Screen - Prev Screen ?? More Actions
UE Update Encounter SP Select New Patient VC View by Clinic
LI List by Encounter CD Change Date Range DD Display Detail
AD Add Standalone Enc. EP Expand Appointment
AL Appointment Lists IN Check Out Interview QU Quit
Select Action: Quit// AL Appointment Lists

Select List:Total Appt Profile// ?

CA Cancelled NA No Action Taken
CI Checked In NC Non Count Appointments
CO Checked Out NS No Shows
FU Future Appointments TA Total Appt Profile
IP Inpatient Appointments

Enter selection(s) by typing the name(s), number(s), or abbreviation(s).

Select List:Total Appt Profile// CO
```

```
PCE Appointment List Jul 26, 2018@09:11:39 Page: 1 of 1
PCEPATIENT,ONE 000-45-6789 Clinic: All
Date range: 07/16/18 to 07/30/18 Checked Out Appointments
```

	Clinic	Appt Date/Time	Status
2	Cardiology	Jul 22, 2018 09:00	Checked Out
4	Diabetes Clinic	Jul 22, 2018 11:00	Checked Out
7	Diabetes Clinic	Jun 24, 2018 09:00	Checked Out
8	Cardiology	Jun 25, 2018 09:00	Checked Out

```
+ Next Screen - Prev Screen ?? More Actions
UE Update Encounter SP Select New Patient VC View by Clinic
LI List by Encounter CD Change Date Range DD Display Detail
AD Add Standalone Enc. EP Expand Appointment
AL Appointment Lists IN Check Out Interview QU Quit
Select Action: Quit// [ENTER]
```

3.0 Using PCE List Manager Interface for Encounters

Health Care Providers interact with PCE primarily through CPRS. When there are problems with an encounter such as a missing or incorrect diagnosis the PCE List Manager interface provides a convenient way to make the corrections. Therefore, this interface is used primarily by those who are responsible for correcting encounters.

This section describes how to perform these functions.

3.1. PCE Data Entry Options

Patient Care Encounter lets you add information, edit information, or add a new encounter to a patient's database. When you enter the program through the PCE User Interface described in this manual, you first view a list of encounters for a patient (by appointment). Appointments are provided to the PCE program by the Checkout process of the Scheduling package.

After you select a particular view and the appointments or encounters are displayed on your screen, you can add or edit information.

PCE has four options for adding or editing encounter information.

3.1.1. PCE Encounter Data Entry - Supervisor

This option is for users who can document a clinical encounter in PCE, and can also delete any encounter entries, even though they are not the creator of the entries. This option is intended for the Coordinator for PCE and/or supervisor of the encounter data entry staff.

3.1.2. PCE Encounter Data Entry

This option is for users who can document a clinical encounter in PCE, but can only delete entries they have created. The data entered via this option includes visit information (where and when), and clinical data related to the visit.

3.1.3. PCE Encounter Data Entry and Delete

This option is for users who can document a clinical encounter in PCE, and can also delete any encounter entries, even though they are not the creator of the entries. This option is on the Clinician menu.

3.1.4. PCE Encounter Data Entry without Delete

This option is for users who can document a clinical encounter in the PCE, but should not be able to delete any entries, including ones that they have created.

3.2. PCE Actions

"Actions" are the choices listed at the bottom of the PCE screens (following the shaded bar) which you can select, either to edit or add to the appointments or encounter shown in the top part of the screen, or to see a different view of that information.

UE	Update Encounter	SP	Select New Patient	VC	View by Clinic
LI	List by Encounter	CD	Change Date Range	DD	Display Detail
AD	Add Standalone Enc.	EP	Expand Appointment		
AL	Appointment Lists	IN	Check Out Interview	QU	Quit

The following actions can be used at the Appointment List or Encounter List screens.

ADD STANDALONE ENC – This action lets you add a new encounter not associated with a credit stop.

APPOINTMENT LISTS – This action allows you to change which appointments will be displayed based on their status. For example, you may change the display to list cancelled, checked in, checked out, future appointments, inpatient appointments, appointment where no action has been taken, non-count appointments, no show appointments, or all appointments.

CHANGE CLINIC – This action lets you change the display list of encounters based on hospital location. If the list includes encounters for all locations, you can select a new location and the list will be redisplayed with only encounters that relate to that location.

CHANGE DATE RANGE – This action allows you to change the date range used for displaying encounters or appointments. You may change the beginning and/or ending date.

CHECKOUT INTERVIEW – This action allows you to go through the interview questions for an encounter that is associated with an appointment. You may also edit additional information such as provider, diagnosis, and procedure. You may also edit an encounter that is associated with an appointment by entering the number associated with the item at the "Select Action" prompt or using the Update Encounter.

DISPLAY DETAIL – This action displays all available information related to one encounter for a selected appointment.

EXPAND APPOINTMENT – This action allows you to display all the patient demographics and appointment event log items that have been entered for a selected patient appointment. Expand Appointment displays information from the Scheduling package and not from PCE.

LIST BY ENCOUNTER – This action allows you to change the display from a list of appointments for this patient or clinic to a list of encounters for the same patient or clinic. There may be several encounters for one appointment.

LIST BY APPOINTMENT – This action allows you to change the display from a list of encounters for this patient or clinic to a list of appointments for the same patient or clinic. Not every appointment may have an encounter associated with it, so you can add encounters from this view.

MAKE HISTORICAL ENC – This action lets you add encounter information for an old encounter or one that took place at another hospital or clinic (VA or non-VA). Although you can't get workload credit for this kind of encounter, it can be used to help compute clinical reminders.

SELECT NEW PATIENT – This action allows you to change the display of encounters based on the patient. If you select a new patient, the display will include encounters or appointments for the selected patient.

UPDATE ENCOUNTER – This action lets you edit an encounter that is associated with an appointment. You may edit information such as provider, diagnosis, procedure, treatment, immunization, skin test, patient education, exams, and treatments, as well as date, service connection, and demographic data.

VIEW BY CLINIC – This action allows you to change the display of appointments or encounters based on a Clinic. For example, if your current list includes all appointments for a specified date range for the selected patient, and you want to display all appointments for a specific clinic, you may use this action to change the display to include appointments or encounters for the desired clinic.

QUIT – This action allows you to exit PCE and return to your menu.

Note: You can add Health Summary, Problem List, and Progress Notes as actions to the PCE screens, to enable you to go directly to these programs. See the PCE Installation Guide for instructions.

3.3. Adding and Editing Patient Care Encounters

Follow the steps in the next few pages to add, delete, or edit encounters.

3.3.1. Adding New Encounters

Use the Add Standalone Enc. action to enter a new encounter which may or may not have an appointment associated with it.

1. Select the PCE Encounter Data Entry option and a patient or clinic.

Select PCE Clinician Menu Option: ENC PCE Encounter Data Entry and Delete Select Patient or Clinic name: PCEPATIENT,ONE
--

2. Select Add Standalone Enc. at the Select Action prompt.

```
PCE Encounter List      Jul 26, 2018@07:46:56   Page: 1 of 2
PCEPATIENT,ONE        000-45-6789           Clinic: All
Date range: 07/16/18 to 07/30/18

      Encounter          Clinic              Clinic Stop
1 07/25/18 08:00        DIABETES CLINIC          306 DIABETES
2 07/25/18 09:00        CARDIOLOGY               303 CARDIOLOGY
3 07/23/18 16:28        HAND                    409 ORTHOPEDICS
4 06/22/18 09:00        CARDIOLOGY               303 CARDIOLOGY
5 06/22/18 11:00        DIABETES CLINIC          306 DIABETES
6 05/19/18 15:07        CARDIOLOGY               303 CARDIOLOGY
+      + Next Screen    - Prev Screen    ?? More Actions
UE Update Encounter     SP Select New Patient  VC View by Clinic
LI List by Appointment  CD Change Date Range  DD Display Detail
AD Add Standalone Enc.  CC Change Clinic
HI Make Historical Enc. IN Check Out Interview QU Quit
Select Action: Next Screen// AD Add Standalone Enc.
```

3. Enter the Encounter Date and Time and the Hospital Location where the encounter took place.

```
Encounter Date and Time: N (7/1/18 - 7/26/18):N (JUL 26, 2018@07:47:51)
Hospital Location: DIABETES CLINIC PCEPROVIDER,ONE
APPOINTMENT TYPE: REGULAR// [ENTER]
```

4. Respond to the following classification prompts:

```
--- Classification --- [Required]

Was treatment for SC Condition? NO
Was treatment related to Combat? NO
Was treatment related to Agent Orange Exposure? NO
Was treatment related to Ionizing Radiation Exposure? NO
Was treatment related to SW Asia Conditions? NO
Was treatment related to Military Sexual Trauma? NO
Was treatment related to Head and/or Neck Cancer? NO
```

5. The screen displays the encounter data.

```
PCE Update Encounter   Jul 26, 2018@07:56:59   Page: 1 of 1
PCEPATIENT,ONE        000-45-6789           Clinic: DIABETES CLINIC
Encounter Date 07/26/18 07:56           Clinic Stop: 306 DIABETES

1 Encounter Date and Time: JUL 26, 2018@07:56:37

      + Next Screen    - Prev Screen    ?? More Actions
ED Edit an Item        SC Standard Codes    HF Health Factors
DE Delete an Item      TR Treatment        DD Display Detail
EN Encounter           IM Immunization    DB Display Brief
PR Provider           PE Patient Ed      IN Check Out Interview
DX Diagnosis (ICD)     ST Skin Test        CR Contra/Refusal Event
CP CPT (Procedure)    XA Exam             QU Quit
Select Action: Quit// [ENTER]
```

3.4. Make a Historical Encounter

You can create encounters for patient visits that occurred at some time in the past (exact time may be unknown) or at some other location (possibly non-VA). Although these are not used for workload credit, they can be used for setting up the reminder maintenance system.

Note: If month or day are not known, historical encounters will appear on encounter screens or reports with zeroes for the missing dates; for example, 01/00/95 or 00/00/94.

Steps to use this action:

1. Change to View by Encounters if you are in the Appointment View.
2. Select the Make Historical Enc action at the Select Action prompt.

PCE Encounter List		Jul 26, 2018@07:46:56	Page: 1 of 2
PCEPATIENT, ONE		000-45-6789	Clinic: All
Date range: 07/16/18 to 07/30/18			
Encounter	Clinic	Clinic Stop	
1 07/25/18 08:00	DIABETES CLINIC	306 DIABETES	
2 07/25/18 09:00	CARDIOLOGY	303 CARDIOLOGY	
3 07/23/18 16:28	HAND	409 ORTHOPEDICS	
4 06/22/18 09:00	CARDIOLOGY	303 CARDIOLOGY	
5 06/22/18 11:00	DIABETES CLINIC	306 DIABETES	
6 05/19/18 15:07	CARDIOLOGY	303 CARDIOLOGY	
+ + Next Screen - Prev Screen ?? More Actions			
UE Update Encounter	SP Select New Patient	VC View by Clinic	
LI List by Appointment	CD Change Date Range	DD Display Detail	
AD Add Standalone Enc.	CC Change Clinic		
HI Make Historical Enc.	IN Check Out Interview	QU Quit	
Select Action: Next Screen// HI			
This will create a historical encounter for documenting a clinical encounter only and will not be used by Scheduling, Billing or Workload credit.			
Enter RETURN to continue or '^' to exit: [ENTER]			

3. Enter the date of the encounter and the time, if known.
4. Enter the location where the encounter took place. If it happened at a non-VA hospital or clinic, type that name. Otherwise enter the name or number of the VA Medical Center or other facility.

Encounter Date and (optional) Time:	12/17 (DEC 2017)
Is this a VA location?	N// [ENTER]
Non VA Location of Encounter:	University Clinic
Comments:	

5. Enter any comments that are needed to clarify the encounter (optional).

3.5. Update Encounter

With the Update Encounter action, you can add or edit encounter information, either through the Edit an Item or Delete an Item actions, or by choosing one of the following:

<i>CPT (Procedure)</i>	<i>ICD (Diagnosis)</i>
<i>Encounter</i>	<i>Exam</i>
<i>Health Factors</i>	<i>Immunization</i>
<i>Patient Ed</i>	<i>Provider</i>
<i>Skin test</i>	<i>Contraindication/Refusal Event</i>
<i>Treatment</i>	<i>SNOMED CT code</i>

Note: IRM or a Clinical Coordinator can change the items or categories available to choose from for many of these actions (Treatment, Patient Ed, Immunization, etc.) through the PCE Table Maintenance Menu. If you wish to define these items, check with your Coordinator.

Follow the steps below to use Update Encounter.

1. A screen like this appears. Type UE at the Select Action prompt.

```

PCE Encounter List           Mar 14, 2019@11:31:02   age:    1 of    2
AVIVAPATIENT,FIVE         666-00-0925           Clinic: All
Date range:  1/1/1998 to 3/14/2019
                        * - New GAF Score Required

      Encounter           Clinic           Appointment Status
1    12/5/2017           Historical Encounter at
2 6/4/2010  13:00        GENERAL MEDICINE
3 5/28/2010  08:00        GENERAL MEDICINE           ACTION REQUIRED
4 11/3/2009  14:00        GENERAL MEDICINE
5 6/24/2009  13:00        OPTHAMODOLOGY
6 6/10/2009  13:00        GENERAL MEDICINE
7 6/3/2009  08:00        GENERAL MEDICINE
8 3/12/2009  13:00        GENERAL MEDICINE
9 12/8/2008  13:00        GENERAL MEDICINE
+      + Next Screen    - Prev Screen    ?? More Actions
UE Update Encounter     CD Change Date Range    DD Display Detail
LI List by Appointment  CC Change Clinic        GF GAF Score
AD Add Standalone Enc.  IN Check Out Interview
HI Make Historical Enc.  PC PC Assign or Unassign  QU Quit
                        TI Display Team Info
PB Patient Problem List
SP Select New Patient    VC View by Clinic
Select Action: Next Screen// UE

```

2. Select the appointment you want to add items to or to edit.

3. Select the number of the item to be edited or an action that will let you add or edit encounter information.

PCE Update Encounter	Mar 14, 2019@13:18:34	Page: 1 of 1
AVIVAPATIENT,FIVE	666-00-0925	Clinic: GENERAL MEDICINE
Encounter Date 5/28/2010 08:00	Clinic Stop: 301	GENERAL INTERNAL MEDI

- 1 Encounter Date and Time: MAY 28, 2010@08:00
- 2 Provider: STUDENT,EIGHT PRIMARY Physician/Physician/Osteopath
- 3 Education Topic: VA-TOBACCO USE SCREENING
- 4 Coding System: SNOMED CT
Code: 721283000 (SCT) Acidosis due to type 1 diabetes mellitus (disorder)

+ Next Screen	- Prev Screen	?? More Actions
ED Edit an Item	SC Standard Codes	HF Health Factors
DE Delete an Item	TR Treatment	DD Display Detail
EN Encounter	IM Immunization	DB Display Brief
PR Provider	PE Patient Ed	IN Check Out Interview
DX Diagnosis (ICD)	ST Skin Test	CR Contra/Refusal Event
CP CPT (Procedure)	XA Exam	

Select Action: Next Screen//

3.5.1. Quick Tricks

After Diagnosis has been entered, if the Provider Narrative is an exact match, you can enter = and the diagnosis will be duplicated here.

The equals sign (=) can also be used as a shortcut when selecting an action plus encounters or appointments from a list in a single response (e.g., Select Action: ED=2).

UE=1 will process entry 1 for Update Encounter.

3.6. Edit an Item

When you choose the action Edit an Item, you will be prompted item-by-item to enter information about a selected encounter.

Steps to Edit an Item:

1. Select UE from the PCE Encounter List screen.

```
PCE Encounter List           Mar 14, 2019@13:39:45   Page:    1 of    2
AVIVAPATIENT,FIVE         666-00-0925           Clinic:  All
Date range:  1/1/2000 to 3/14/2019
                        * - New GAF Score Required

      Encounter           Clinic           Appointment Status
1    12/5/2017           Historical Encounter at
2 6/4/2010 13:00         GENERAL MEDICINE
3 5/28/2010 08:00        GENERAL MEDICINE           ACTION REQUIRED
4 11/3/2009 14:00        GENERAL MEDICINE
5 6/24/2009 13:00        OPTHAMOMOLOGY
6 6/10/2009 13:00        GENERAL MEDICINE
7 6/3/2009 08:00         GENERAL MEDICINE
8 3/12/2009 13:00        GENERAL MEDICINE
9 12/8/2008 13:00        GENERAL MEDICINE
+      + Next Screen      - Prev Screen    ?? More Actions
UE  Update Encounter      CD  Change Date Range      DD  Display Detail
LI  List by Appointment   CC  Change Clinic          GF  GAF Score
AD  Add Standalone Enc.  IN  Check Out Interview
HI  Make Historical Enc.  PC  PC Assign or Unassign  QU  Quit
                        TI  Display Team Info
PB  Patient Problem List
SP  Select New Patient    VC  View by Clinic
Select Action: Next Screen// UE
```

2. Select the encounter you want to edit.
3. Select ED from the PCE Update Encounter screen.

```
PCE Update Encounter        Mar 05, 2019@13:47:57   Page:    1 of    1
AVIVAPATIENT,FIVE         666-00-0925           Clinic:  GENERAL MEDICINE
Encounter Date  5/28/2010 08:00           Clinic Stop:  301  GENERAL INTERNAL MEDI

1 Encounter Date and Time:  MAY 28, 2010@08:00

2 Provider:  STUDENT,EIGHT  Physician/Physician/Osteopath
3 Education Topic:  VA-TOBACCO USE SCREENING
4 Education Topic:  DIABETES DIET
5 Coding System:  SNOMED CT
  Code: 721283000 (SCT) Acidosis due to type 1 diabetes mellitus (disorder)

      + Next Screen      - Prev Screen    ?? More Actions
ED  Edit an Item         SC  Standard Codes          HF  Health Factors
DE  Delete an Item       TR  Treatment              DD  Display Detail
EN  Encounter            IM  Immunization           DB  Display Brief
PR  Provider             PE  Patient Ed              IN  Check Out Interview
DX  Diagnosis (ICD)      ST  Skin Test              CR  Contra/Refusal Event
CP  CPT (Procedure)     XA  Exam                  QU  Quit
Select Action: Quit// ed  Edit an Item
```

4. Respond to each of the following prompts, as appropriate.

```

Select Entry(s) (1-5): 4

Education Topic:  DIABETES DIET
Level of Understanding:  GOOD// GOOD
Enter the Event Date and Time:  03/05/2019@13:47:43//    (MAR 05, 2019@13:47:43)
Encounter Provider:  stude
    1  STUDENT,EIGHT          S8
    2  STUDENT,FIVE           S5
    3  STUDENT,FOUR           S4
    4  STUDENT,NINE           S9
    5  STUDENT,ONE
Press <Enter> to see more, '^' to exit this list,  OR
CHOOSE 1-5: 2  STUDENT,FIVE          S5
Is this provider Primary or Secondary?  P// SECONDARY
Comments:  Patient is motivated to change diet to lose weight and lower blood
sugar

```

5. The edited screen is then displayed.

```

PCE Update Encounter      Mar 05, 2019@13:51:12  Page:    1 of    1
AVIVAPATIENT,FIVE      666-00-0925      Clinic:  GENERAL MEDICINE
Encounter Date  5/28/2010  08:00      Clinic Stop:  301  GENERAL INTERNAL MEDI

    1 Encounter Date and Time:  MAY 28, 2010@08:00

    2 Provider:  STUDENT,EIGHT  Physician/Physician/Osteopath
    3 Provider:  STUDENT,FIVE   Physician/Physician/Osteopath
    4 Education Topic:  VA-TOBACCO USE SCREENING
    5 Education Topic:  DIABETES DIET
    6 Coding System:  SNOMED CT
      Code: 721283000 (SCT) Acidosis due to type 1 diabetes mellitus (disorder)

      + Next Screen    - Prev Screen    ?? More Actions
ED  Edit an Item      SC  Standard Codes      HF  Health Factors
DE  Delete an Item    TR  Treatment            DD  Display Detail
EN  Encounter         IM  Immunization         DB  Display Brief
PR  Provider          PE  Patient Ed           IN  Check Out Interview
DX  Diagnosis (ICD)   ST  Skin Test             CR  Contra/Refusal Event
CP  CPT (Procedure)   XA  Exam                QU  Quit
Select Action: Quit//

```

3.7. Delete an Item

Steps to Delete an Item:

1. Select UE from the PCE Encounter List screen.
2. Select the encounter you wish to edit.
3. Select DE from the PCE Update Encounter screen.

```
PCE Update Encounter      Oct 30, 2018@14:47:57      Page: 1 of 1
THIRTEEN, OUTPATIENT    666-00-0613      Clinic: PRIMARY CARE
Encounter Date 10/12/2018 08:21      Clinic Stop: 105 X-RAY

1 Encounter Date and Time: Oct 12, 2018@08:21:16

2 Provider: PROVIDER, FIVEHUNDREDTHREE PRIMARY ATTENDING Physician/Physi
3 ICD Code: E08.29 (ICD-10-CM) Diabetes mellitus due to underlying condition
      with other diabetic complication
      Provider Narrative: STABLE
      Primary or Secondary Diagnosis: PRIMARY
4 Health Factor: KSM

      + Next Screen      - Prev Screen      ?? More Actions
ED Edit an Item          SC Standard Codes      HF Health Factors
DE Delete an Item        TR Treatment          DD Display Detail
EN Encounter             IM Immunization      DB Display Brief
PR Provider             PE Patient Ed        IN Check Out Interview
DX Diagnosis (ICD)       ST Skin Test          CR Contra/Refusal Event
CP CPT (Procedure)      XA Exam              QU Quit
Select Action: Quit// DE Delete an Item
Select Entry(s) (2 - 4): 2 - 4
```

4. Answer the following prompts to indicate which items you will delete.

```
Select Action: Quit// DE Delete an Item
Select Entry(s) (2 - 4): 2 - 4

Deleting Provider PROVIDER, FIVEHUNDREDTHREE PRIMARY ATTENDING Physician/Physi
Are you sure you want to remove this entry? NO//

Deleting Diagnosis E08.29 (ICD-10-CM) Diabetes mellitus due to underlying
condition with other diabetic complication
Are you sure you want to remove this entry? NO//

Deleting Health Factor KSM
Are you sure you want to remove this entry? NO// YES
```

5. The edited screen is then displayed.

```
PCE Update Encounter      Oct 30, 2018@14:50:46      Page: 1 of 1
THIRTEEN, OUTPATIENT    666-00-0613      Clinic: PRIMARY CARE
Encounter Date 10/12/2018 08:21      Clinic Stop: 105 X-RAY

1 Encounter Date and Time: Oct 12, 2018@08:21:16

2 Provider: PROVIDER, FIVEHUNDREDTHREE PRIMARY ATTENDING Physician/Physi
3 ICD Code: E08.29 (ICD-10-CM) Diabetes mellitus due to underlying condition
      with other diabetic complication
Provider Narrative: STABLE
Primary or Secondary Diagnosis: PRIMARY

      + Next Screen      - Prev Screen      ?? More Actions
ED Edit an Item          SC Standard Codes      HF Health Factors
DE Delete an Item        TR Treatment          DD Display Detail
EN Encounter             IM Immunization      DB Display Brief
PR Provider              PE Patient Ed          IN Check Out Interview
DX Diagnosis (ICD)       ST Skin Test          CR Contra/Refusal Event
CP CPT (Procedure)       XA Exam              QU Quit
Select Action: Quit//
```

3.8. How to Add or Edit an Encounter

You can add an encounter for an appointment that doesn't have an encounter associated with it or edit an existing encounter.

Steps to edit an Encounter:

1. Select UE from the PCE Appointment List screen.
2. Select EN from the PCE Update Encounter screen.

```
PCE Encounter List      Oct 30, 2018@14:54:40      Page: 1 of 1
THIRTEEN, OUTPATIENT    666-00-0613      Clinic: All
Date range: 9/30/2018 to 10/30/2018
      * - New GAF Score Required

      Encounter      Clinic      Appointment Status
1 10/12/2018 08:14 PATIENT EVALUATION
2 10/12/2018 08:17 PATIENT EVALUATION
3 10/12/2018 08:21 PRIMARY CARE      ACTION REQUIRED
4 10/12/2018 08:24 PRIMARY CARE - Jeanne
5 10/12/2018 08:26 20 MINUTE

      + Next Screen      - Prev Screen      ?? More Actions
LI List by Appointment  CC Change Clinic      GF GAF Score
AD Add Standalone Enc.  IN Check Out Interview
HI Make Historical Enc. PC PC Assign or Unassign QU Quit
      TI Display Team Info
PB Patient Problem List
SP Select New Patient  VC View by Clinic
Select Action: Quit// UE Update Encounter
```

- Respond to the following prompts for the encounter, as appropriate.

```
Check out date and time: OCT 17,2018@09:00// [ENTER] (OCT 17, 2018@09:00)

--- Classification --- [Required]
Was treatment for SC Condition? YES// [ENTER]
```

- If you answer NO to the last prompt above, you get additional prompts as shown below.

```
Check out date and time: OCT 23,2018@15:17//[ENTER] (OCT 23, 2018@15:17)

--- Classification --- [Required]

Was treatment for SC Condition? YES// n NO
Was treatment related to Combat? n NO
Was treatment related to Agent Orange Exposure? n NO
Was treatment related to Ionizing Radiation Exposure? n NO
Was treatment related to SW Asia Conditions? n NO
Was treatment related to Military Sexual Trauma? n NO
Was treatment related to Head and/or Neck Cancer? n NO
```

3.9. How to Add or Edit a Provider

When you enter or edit a provider for an encounter, you will be prompted to enter whether the provider is Primary and/or Attending. The default provider entered at checkout is the primary provider.

Steps to add or edit a Provider:

- Select UE, from the PCE Appointment List screen.
- Select the appointment and encounter you wish to edit.
- Select PR from the PCE Update Encounter screen.

```
PCE Encounter List      Oct 30, 2018@10:07:27      Page:      1 of      2
THIRTEEN,OUTPATIENT    666-00-0613      Clinic:  PATIENT EVALUATION
Encounter Date 10/12/2018 08:14      Clinic Stop: 102 ADMITTING/SCREENING

1 Encounter Date and Time: Oct 12, 2018@08:14:47

2 Provider: PROVIDER, FIVEHUNDREDTHREE PRIMARY Physician/Physician/Osteopa
3 ICD Code: E08.29 (ICD-10-CM) Diabetes mellitus due to underlying condition
           with diabetic chronic kidney disease
   Provider Narrative: STABLE
   Primary or Secondary Diagnosis: PRIMARY
4 Health Factor: KSM
5 Health Factor: AJM FACTOR
6 Coding System: ICD-10-CM
   Code: E08.00 (10D) Diabetes Mellitus due to Underlying Condition with

      + Next Screen      - Prev Screen      ?? More Actions
ED Edit an Item          SC Standard Codes      HF Health Factors
DE Delete an Item        TR Treatment          DD Display Detail
EN Encounter             IM Immunization      DB Display Brief
PR Provider              PE Patient Ed          IN Check Out Interview
DX Diagnosis (ICD)        ST Skin Test          CR Contra/Refusal Event
CP CPT (Procedure)        XA Exam              QU Quit
```

```
Select Action: Next Screen//
```

4. Choose whether you want to edit or add and respond to the other prompts, as appropriate.

```
--- Provider ---

 1 PROVIDER, FIVEHUNDREDTHREE PRIMARY Physician/Physician/Osteopa
Enter 1-1 to Edit, or 'A' to Add: 1

Provider: PROVIDER, FIVEHUNDREDTHREE
Is this Provider Primary: YES//
Is this Provider Attending: NO//
```

5. The edited screen is then displayed.

3.10. How to Add or Edit ICD Diagnoses

You can enter a diagnosis and/or an ICD diagnosis code for a patient's encounter. You will be prompted to designate the diagnosis as primary or secondary. CIDC (Clinical Indicator Data Capture) has added functionality that displays patient Service Connected and Rated Disabilities for those SC patients. In addition, an optional Ordering/Resulting Diagnosis prompt asks, "Is this Diagnosis Ordering, Resulting, or Both." See Note in Step 3.

With functionality put in place by the Code Set Versioning project, only ICD Codes that are active for the encounter date and time will be available.

Steps to add a Diagnosis:

1. Select UE from the PCE Appointment List screen.
2. Select DX from the PCE Update Encounter screen.

The sample below is from PCE Data Entry, also note that these prompts are seen in the Appointment Management Check-Out option.

```
PCE Update Encounter Aug 21, 2018@15:57:33 Page: 1 of 1
PCEpatient,one 000-00-0001P Clinic: GENERAL MEDICINE AT ALBANY
Encounter Date 6/25/2018 10:00 Clinic Stop: 301 GENERAL INTERNAL MEDI

 1 Encounter Date and Time: JUN 25, 2018@10:00

      + Next Screen - Prev Screen ?? More Actions
ED Edit an Item SC Standard Codes HF Health Factors
DE Delete an Item TR Treatment DD Display Detail
EN Encounter IM Immunization DB Display Brief
PR Provider PE Patient Ed IN Check Out Interview
DX Diagnosis (ICD) ST Skin Test CR Contra/Refusal Event
CP CPT (Procedure) XA Exam QU Quit
Select Action: Quit//
Select Action: Quit// DX Diagnosis (ICD 9) [ENTER]

COMPACT Act Administrative Eligibility:
COMPACT Act: Eligibile

Patient's Service Connection and Rated Disabilities:

SC Percent: 100%
Rated Disabilities: TRAUMATIC ARTHRITIS (10%-SC)
DIABETES MELLITUS (0%-SC)
```



```

--- Diagnosis ---

1   891.0      OPEN WND KNEE/LEG/ANKLE
2   200.01     RETICULOSARCOMA HEAD
Enter 1-2 to Edit, or 'A' to Add: A [ENTER]

```

3. Respond to the following prompts for the diagnosis, as appropriate.

```

Patient's Service Connection and Rated Disabilities:

      SC Percent: 100%
Rated Disabilities: TRAUMATIC ARTHRITIS (10%-SC)
                   DIABETES MELLITUS (0%-SC)
Code or Diagnosis: 891.0// 891.0 891.0 OPEN WND KNEE/LEG/ANKLE
                   ...OK? Yes// (Yes) [ENTER]

Provider Narrative: OPEN WOUND OF KNEE, LEG (EXCEPT THIGH), AND ANKLE, WITHOUT
MENTION OF COMPLICATION
Replace [ENTER]
OPEN WOUND OF KNEE, LEG (EXCEPT THIGH), AND ANKLE, WITHOUT MENTION OF
COMPLICATI
ON [ENTER]
Is this Diagnosis Primary for the Encounter: YES// [ENTER]
Is this Diagnosis Ordering, Resulting, or Both: RESULTING [ENTER] (See NOTE)
Injury Date and (optional) Time: [ENTER]
Modifier: FOLLOW UP [ENTER]
Encounter Provider: PCEprovider,one BM DOC [ENTER]
[ Provider Narrative Category:] [ENTER]
Comments: SEVERE HEADACHE [ENTER]

--- Classification --- [Required]

Was treatment for SC Condition? NO// [ENTER]
Was treatment related to Combat? NO// [ENTER]
Was treatment related to Agent Orange Exposure? NO// [ENTER]
Was treatment related to Ionizing Radiation Exposure? NO// [ENTER]
Was treatment related to SW Asia Conditions? NO// [ENTER]
Was treatment related to Military Sexual Trauma? NO// [ENTER]
Was treatment related to Head and/or Neck Cancer? NO// [ENTER]

```

Note: The Ordering/Resulting Diagnosis prompt is available for some application encounters (i.e., Surgery) that choose to distinguish between the ordering diagnosis and resulting diagnosis. This prompt is optional.

IF USER CHOOSES:	INTEGRATED BILLING (IB) CAN GENERATE:
Ordering	Institutional claim UB92.
Resulting	Professional claim HCFA 1500.
Both	Institutional and Professional claims UB92 and HCFA 1500.

When Ordering/Resulting Diagnosis is not entered, IB personnel must research the Provider's documentation for Ordering and Resulting diagnosis information.

4. The edited screen is then displayed.

3.11. How to Add or Edit a CPT (Procedure)

When you choose CPT (Procedure) under Update Encounter, you will also be prompted to enter the Provider Narrative, Quantity, Diagnosis, Principal Procedure, Encounter Provider, and comments. With functionality put in place by the Code Set Versioning project, only CPT Codes that are active for the encounter date and time will be available.

One Primary diagnosis and up to seven Secondary diagnoses may be associated with a procedure as clinical indicators. The example below shows the association as it appears on the PCE Encounter Profile screen.

CPT Code:	76003	NEEDLE LOCALIZATION BY X-RAY
Order Reference:	13559999	
Provider Narrative:	RENAL CYST ABLATION	
Quantity:	1	
Ordering Provider:	RNMprovider,one	
Encounter Provider:	RNMprovider,two	
Primary Diagnosis:	246.2	CYST OF THYROID
1st Secondary Diagnosis:	362.54	MACULAR CYST OR HOLE
2nd Secondary Diagnosis:	364.63	PRIMARY CYST PARS PLANA
3rd Secondary Diagnosis:	364.64	EXUDAT CYST PARS PLANA
4th Secondary Diagnosis:	383.31	POSTMASTOID MUCOSAL CYST
5th Secondary Diagnosis:	478.26	CYST PHARYNX/NASOPHARYNX
6th Secondary Diagnosis:	522.8	RADICULAR CYST
7th Secondary Diagnosis:	577.2	PANCREAT CYST/PSEUDOCYST

3.11.1.Steps to edit a CPT:

1. Select UE from the PCE Appointment List screen.
2. Select CP from the PCE Update Encounter screen. PCE Update Encounter Jul 02, 2018@08:24:21 Page: 1 of 1

PCEoutpatient,two	000-00-0002	Clinic:	CARDIOLOGY
Encounter Date	07/01/18 11:08	Clinic Stop:	303 CARDIOLOGY
1 Encounter Date and Time: JUL 22, 2018@11:08:14			
2 Provider: PCEprovider,one PRIMARY ATTENDING			
3 ICD Code: V70.3 MED EXAM NEC-ADMIN PURP			
Provider Narrative: OTHER GENERAL MEDICAL EXAMINATION FOR ADMINISTRATIVE PURPOSES			
Primary/Secondary Diagnosis: PRIMARY			
4 CPT Code: 25066 BIOPSY FOREARM SOFT TISSUES			
CPT Modifier: 22 UNUSUAL PROCEDURAL SERVICES			
5 Education Topic: VA-TOBACCO USE SCREENING			
+ Next Screen - Prev Screen ?? More Actions			
ED	Edit an Item	SC	Standard Codes
DE	Delete an Item	TR	Treatment
EN	Encounter	IM	Immunization
PR	Provider	PE	Patient Ed
DX	Diagnosis (ICD)	ST	Skin Test
CP	CPT (Procedure)	XA	Exam
Select Action: Quit//		HF	Health Factors
Select Action: Quit// cp [ENTER] CPT (PROCEDURE)		DD	Display Detail
COMPACT Act Administrative Eligibility:		DB	Display Brief
COMPACT Act: ELIGIBLE		IN	Check Out Interview
Patient's Service Connection and Rated Disabilities:		CR	Contra/Refusal Event
SC Percent: 40%		QU	Quit

```
Rated Disabilities: KNEE CONDITION (20%-SC)
                   KNEE CONDITION (10%-SC)
                   DEGENERATIVE ARTHRITIS (10%-SC)
```

3. Respond to the following prompts for the Procedure, as appropriate. --- CPT ---

```
1 K0104 Cylinder tank carrier
Enter 1-1 to Edit, or 'A' to Add: A [ENTER]

COMPACT Act Administrative Eligibility:
COMPACT Act: ELIGIBLE

Patient's Service Connection and Rated Disabilities:

SC Percent: 40%
Rated Disabilities: KNEE CONDITION (20%-SC)
                   KNEE CONDITION (10%-SC)
                   DEGENERATIVE ARTHRITIS (10%-SC)
CPT Code: 82075 [ENTER] ASSAY OF BREATH ETHANOL
Select CPT MODIFIER: [ENTER]
Provider Narrative: BREATH TEST [ENTER]
Quantity: 1// 1 [ENTER]
Principal Procedure: YES
Ordering Provider: PCEprovider,one (RESIDENT) MFL 000A
Encounter Provider: PCEprovider,two (RESIDENT) MFL 000A
Provider Narrative Category: [ENTER]

Comments: TESTING CIDC [ENTER]
Primary Diagnosis:303.01 [ENTER] AC ALCOHOL INTOX-CONTIN (w C/C)
Diagnosis is Primary? P// PRIMARY [ENTER]
Provider Narrative: [ENTER]
ACUTE ALCOHOLIC INTOXICATION IN ALCOHOLISM, CONTINUOUS DRINKING BEHAVIOR
Diagnosis Modifier: [ENTER]

--- Classification --- [Required]

Was treatment for SC Condition? y YES [ENTER]
Was treatment related to Combat? y YES [ENTER]
Was treatment related to Agent Orange Exposure? y YES [ENTER]
Was treatment related to Ionizing Radiation Exposure? y YES [ENTER]
Was treatment related to SW Asia Conditions? y YES [ENTER]
Was treatment related to Military Sexual Trauma? y YES [ENTER]
Was treatment related to Head and/or Neck Cancer? NO// y YES [ENTER]
1st Secondary Diagnosis: [ENTER]

COMPACT Act Administrative Eligibility:
COMPACT Act: ELIGIBLE

Patient's Service Connection and Rated Disabilities:

SC Percent: 40%
Rated Disabilities: KNEE CONDITION (20%-SC)
                   KNEE CONDITION (10%-SC)
                   DEGENERATIVE ARTHRITIS (10%-SC)
CPT Code:
```

4. The edited screen is then displayed.

PCE Update Encounter	Jul 02, 2018@08:24:21	Page: 1 of 1
PCEoutpatient,two	000-00-0002	Clinic: TELEPHONE-PROSTHETICS
Encounter Date	10/00/2014 00:00	Clinic Stop: 999 TELEPHONE/PROSTHETICS

1 Encounter Date and Time: OCT 00, 2014@00:00:00

2 Provider: PCEprovider,one PRIMARY Physician/Physician/Osteopath/

3 ICD Code: 303.01 AC ALCOHOL INTOX-CONTIN
 Provider Narrative: ACUTE ALCOHOLIC INTOXICATION IN ALCOHOLISM, CONTINUOUS DRINKING BEHAVIOR
 Primary/Secondary Diagnosis for the Encounter: PRIMARY

4 ICD Code: 716.26 ALLERG ARTHRITIS-L/LEG
 Provider Narrative: ALLERGIC ARTHRITIS INVOLVING LOWER LEG

5 CPT Code: K0999 Cylinder tank carrier
 Primary Diagnosis: 428.0 CONGEST HEART FAIL UNSPESIFIED

6 CPT Code: 82075 ASSAY OF BREATH ETHANOL
 Provider Narrative: BREATH TEST
 Primary Diagnosis: 303.01 AC ALCOHOL INTOX-CONTIN
 1st Secondary Diagnosis: 716.26 ALLERG ARTHRITIS-L/LEG

+ Next Screen - Prev Screen ?? More Actions

Select Action: Quit//

ED Edit an Item	SC Standard Codes	HF Health Factors
DE Delete an Item	TR Treatment	DD Display Detail
EN Encounter	IM Immunization	DB Display Brief
PR Provider	PE Patient Ed	IN Check Out Interview
DX Diagnosis (ICD)	ST Skin Test	CR Contra/Refusal Event
CP CPT (Procedure)	XA Exam	QU Quit

Select Action: Quit//

3.12. How to Add or Edit an Immunization

When you choose Immunization under Update Encounter, you will also be prompted to enter the Dose, Units, Route of Administration, Site of Administration, Lot Number, Ordered By Policy, Ordering Provider, Encounter Provider, Series, Reaction, Repeat Contraindicated, Administered Date and Time, and Comments.

Note: Lot numbers stored in the immunization inventory with an associated facility are available for selection based upon the institution/division of the hospital location of the encounter. Lot numbers with no associated facility are available for selection at any hospital location. All new lot numbers added to the immunization inventory must have an associated facility.

Immunizations are mapped to CPT codes. When an Immunization is entered, if the supervisor option is used, the user will be prompted for diagnoses which are associated with the mapped CPT code. If the diagnoses have not already appeared in the encounter, the user will be prompted for additional information to qualify the diagnosis such as modifiers, comments and SC/EI classifications.

Steps to add an Immunization:

1. Select UE from the PCE Appointment List screen.
2. Select IM from the PCE Update Encounter screen.

```

PCE Update Encounter      Jul 25, 2018@08:24:21      Page: 1 of 1
PCEoutpatient,two      000-00-0002      Clinic: CARDIOLOGY
Encounter Date 07/22/15 11:08      Clinic Stop: 303 CARDIOLOGY

1 Encounter Date and Time: JUL 22, 2015@11:08:14

2 Provider: PCEprovider,one      PRIMARY      ATTENDING
3 ICDCode: V70.3      MED EXAM NEC-ADMIN PURP
  Provider Narrative: OTHER GENERAL MEDICAL EXAMINATION FOR
                     ADMINISTRATIVE PURPOSES
  Primary/Secondary Diagnosis: PRIMARY
4 CPT Code: 25066      BIOPSY FOREARM SOFT TISSUES
  CPT Modifier: 22      UNUSUAL PROCEDURAL SERVICES
5 Education Topic: VA-TOBACCO USE SCREENING

      + Next Screen      - Prev Screen      ?? More Actions
ED Edit an Item      SC Standard Codes      HF Health Factors
DE Delete an Item      TR Treatment      DD Display Detail
EN Encounter      IM Immunization      DB Display Brief
PR Provider      PE Patient Ed      IN Check Out Interview
DX Diagnosis (ICD)      ST Skin Test      CR Contra/Refusal Event
CP CPT (Procedure)      XA Exam      QU Quit
Select Action: Quit//
Select Action: Quit//im      Immunization [ENTER]

--- Immunization ---

COMPACT Act Administrative Eligibility:
COMPACT Act: ELIGIBLE

Patient's Service Connection and Rated Disabilities:

      SC Percent: 100%
Rated Disabilities: TRAUMATIC ARTHRITIS (10%-SC)
                   DIABETES MELLITUS (0%-SC)

```

3. Respond to the following prompts for the immunization, as appropriate.

```

Immunization: TD-ADULT [ENTER]
Lot Number: EE11337 [ENTER]          PFIZER, INC          TD (ADULT)          11-30-2017
100 DOSES UNUSED
Ordered By Policy:
Ordering Provider: PCEprovider,Two [ENTER]          TP          PROVIDER
Encounter Provider: PCEprovider,one // ST.PETE (PHYSICIAN) PO 045A [ENTER]
Series: BOOSTER [ENTER]
Reaction: FEVER [ENTER]
Repeat Contraindicated: NO//[ENTER] NO (OK TO USE IN THE FUTURE)
Administered Date and (optional) Time: 09172004 [ENTER] (SEP 17, 2004)
Dose: .5 [Enter]
Dose Units: mL [Enter]
1 mL milliliter mL
2 mL/(10.h) milliliter per 10 hour mL/(10.h)
3 mL/(12.h) milliliter per 12 hour mL/(12.h)
4 mL/(2.h) milliliter per 2 hour mL/(2.h)
5 mL/(24.h) milliliter per 24 hour mL/(24.h)
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1 [Enter] milliliter mL
Route of Administration: IM [Enter] INTRAMUSCULAR IM
Site of Administration (Body): LA [Enter] LEFT ARM LA
Comments: TESTING CIDC [ENTER]
ICD Primary Diagnosis: 276.6 [ENTER] FLUID OVERLOAD (w C/C)
Provider Narrative: [ENTER]
FLUID OVERLOAD DISORDER
Diagnosis Modifier: [ENTER]

--- Classification --- [Required]

Was treatment for SC Condition? YES// [ENTER]
Was treatment related to Combat? YES// [ENTER]
Was treatment related to Agent Orange Exposure? NO// [ENTER]
Was treatment related to Ionizing Radiation Exposure? NO// [ENTER]
Was treatment related to SW Asia Conditions? NO//[ENTER]
Was treatment related to Military Sexual Trauma? NO// [ENTER]
Was treatment related to Head and/or Neck Cancer? YES// [ENTER]
Immunization: [ENTER]

```

4. The edited screen is then displayed.

3.13. How to Add or Edit Immunization Contraindication or Refusal Events

When you choose Contra/Refusal Event under Update Encounter, you will also be prompted to enter the Immunization, Event Date and Time, Encounter Provider, Warning Until Date, and Comments.

Steps to add a Contra/Refusal Event:

1. Select UE from the PCE Appointment List screen.
2. Select CR from the PCE Update Encounter screen.

```
PCE Update Encounter      Mar 25, 2019@07:55:53      Page:      1 of      2
THIRTEEN,OUTPATIENT      666-00-0613      Clinic:  20 MINUTE
Encounter Date  10/31/2018  09:00      Clinic Stop:  301  GENERAL INTERNAL MEDI

  1 Encounter Date and Time:  OCT 31, 2018@09:00

  2 Provider:  COORDINATOR,BCMA  PRIMARY  Nursing/R.N.
  3 Provider:  PHYSICIAN,ASSISTANT  Physician Assistants & Advanced Practice Nu
  4 ICD Code:  F17.200 (ICD-10-CM) Nicotine dependence, unspecified,
              uncomplicated
  Provider Narrative:  TESTING
  Primary or Secondary Diagnosis:  PRIMARY
  Ordering/Resulting Diagnosis:  BOTH O&R
  5 CPT Code:  90715      TDAP VACCINE 7 YRS/> IM
  6 Immunization:  TDAP

+      Enter ?? for more actions
ED  Edit an Item      SC  Standard Codes      HF  Health Factors
DE  Delete an Item      TR  Treatment      DD  Display Detail
EN  Encounter      IM  Immunization      DB  Display Brief
PR  Provider      PE  Patient Ed      IN  Check Out Interview
DX  Diagnosis (ICD)      ST  Skin Test      CR  Contra/Refusal Event
CP  CPT (Procedure)      XA  Exam      QU  Quit
Select Action: Next Screen//
```

3. Respond to the prompts listed in the screenshot below for the immunization, as appropriate. When recording a refusal reason, the system will ask if the patient is refusing all the immunizations in this vaccine group (default), or just this specific formulation of vaccine.

```
Contraindication/Refusal:  LATEX ALLERGY [ENTER]
Immunization:  RELIGIOUS EXEMPTION [ENTER]
Refused all immunizations in this group?:  YES// [ENTER]
Event Date and Time:  NOW  (MAR 10, 2018@16:28) [ENTER]
Encounter Provider:  PCEprovider,one // [ENTER]
Warning Until Date:  [ENTER]
Comments:  [ENTER]

Contraindication/Refusal:  [ENTER]
```

4. The edited screen is then displayed.

3.14. How to Add or Edit a Patient Ed

When you choose Patient Ed under Update Encounter, you will be prompted to enter the Education Topic, Level of Understanding, Encounter Provider, and Comments.

Note: A Clinical Coordinator can change the items or categories available to choose from for Patient Ed through the PCE Table Maintenance Menu. If you wish to help define the Patient Education list, check with your Coordinator.

Steps to add Patient Ed:

1. Select UE from the PCE Appointment List screen.
2. Select PE from the PCE Update Encounter screen.

```
PCE Update Encounter   Jul 25, 2018@08:24:21   Page: 1 of 1
PCEPATIENT,ONE       000-45-6789             Clinic:  CARDIOLOGY
Encounter Date 07/22/18 11:08             Clinic Stop: 303  CARDIOLOGY

1 Encounter Date and Time: JUL 22, 2018@11:08:14

2 Provider: PCEPROVIDER,ONE    PRIMARY    ATTENDING
3 ICD Code: V70.3             MED EXAM NEC-ADMIN PURP
  Provider Narrative: OTHER GENERAL MEDICAL EXAMINATION FOR
                     ADMINISTRATIVE PURPOSES
  Primary/Secondary Diagnosis: PRIMARY
4 CPT Code: 25066             BIOPSY FOREARM SOFT TISSUES
  CPT Modifier: 22           UNUSUAL PROCEDURAL SERVICES
5 Education Topic: VA-TOBACCO USE SCREENING

      + Next Screen   - Prev Screen   ?? More Actions
Edit an Item          SC Standard Codes   HF Health Factors
DE Delete an Item     TR Treatment        DD Display Detail
EN Encounter          IM Immunization     DB Display Brief
PR Provider          PE Patient Ed        IN Check Out Interview
DX Diagnosis (ICD)    ST Skin Test        CR Contra/Refusal Event
CP CPT (Procedure)    XA Exam            QU Quit
Select Action: Quit// PE Patient Ed
```

3. Respond to the following prompts for Patient Education.

```
Education Topic: Followup
Level of Understanding: 3 GOOD
Encounter Provider: PCEPROVIDER,ONE// [ENTER]
Enter the measurement, the allowed range is -43.18 to 3.92
The maximum number of decimal digits is 2
The current value is: //2.2
Comments: [ENTER]
```

4. The edited screen is then displayed.

3.15. How to Add or Edit a Skin Test

Skin tests are typically entered on two separate Visits. On the first Visit, the Skin Test administration is recorded. On the second Visit, the Skin Test reading is recorded. Previously, this was recorded in one V Skin Test entry. However, since the Patch PX*1*217 release, they can be entered as two separate, but linked entries.

When you choose Skin Test under Update Encounter, you will first get prompted to select a Skin Test and then, you will get prompted to select whether you are recording a skin test Administration, Reading, or Both.

If you select Administration, you will be prompted to enter the Placement Date and Time, Ordering Provider, Administered By, Anatomic Location, and Placement Comments.

If you select Reading, it will prompt you to select a placement entry that the reading is for, and it will then prompt for the Reading Date and Time, Reading in Millimeters, Results, Reader, and Reading Comments.

If you select Both, it will prompt for both the placement and reading fields.

Steps to add a Skin Test:

1. Select UE from the PCE Appointment List screen.
2. Select ST from the PCE Update Encounter screen.

```
PCE Update Encounter      Mar 13, 2019@13:00:02   Page:    1 of    2
AVIVAPATIENT,FIVE      666-00-0925      Clinic:
Encounter Date      12/5/2017      Clinic Stop:

  1 Encounter Date and Time:  DEC 05, 2017@11:08:14

  2 Provider:  STUDENT,EIGHT  PRIMARY  Physician/Physician/Osteopath
  3 Provider:  PROVIDER,FIVEHUNDREDTHREE  Physician/Physician/Osteopath
  4 Education Topic:  VA-TOBACCO USE SCREENING
  5 Health Factor:  RG TEST
    Level/Severity:  HEAVY/SEVERE
  6 Contra/Refusal Event:  LATEX ALLERGY
  7 Coding System:  SNOMED CT
    Code: 237620003 (SCT) Abnormal metabolic state in diabetes mellitus
        (disorder)

+      + Next Screen  - Prev Screen  ?? More Actions
ED  Edit an Item      SC  Standard Codes      HF  Health Factors
DE  Delete an Item    TR  Treatment            DD  Display Detail
EN  Encounter         IM  Immunization         DB  Display Brief
PR  Provider         PE  Patient Ed            IN  Check Out Interview
DX  Diagnosis (ICD)   ST  Skin Test            CR  Contra/Refusal Event
CP  CPT (Procedure)  XA  Exam              QU  Quit

Select Action: Quit//
Select Action: Next Screen// ST
```

3. Select whether you are recording a skin test Administration, Reading, or Both. In this example, an Administration is being recorded.

```
--- Skin Test ---
COMPACT Act Administrative Eligibility:
    COMPACT Act: ELIGIBLE

Patient's Service Connection and Rated Disabilities:

    SC Percent: %
Rated Disabilities: None Stated
Skin Test: PPD TUBERCULIN [ENTER]

Are you recording a skin test (A)dministration, (R)eading, or (B)oth?
ADMINISTRATION [ENTER]
Placement Date and Time: // NOW [ENTER] (SEP 15, 2021@11:17:34)
Ordering Provider: CPRSPROV,ONE [ENTER]
Is this provider Primary or Secondary? P // [ENTER] PRIMARY
Administered By: CPRSPROV,ONE [ENTER]
Anatomic Location: LLFA [ENTER] LEFT LOWER FOREARM LLFA
Placement Comments: [ENTER]
```

4. When the patient comes to the clinic a few days later for the reading, select ST from the PCE Update Encounter screen to create a new skin test entry for the reading. When prompted with “Are you recording a skin test”, select “Reading” and select the skin test placement for the reading.

```
Select Action: Quit// ST
    1 Skin Test
    2 Standard Codes
CHOOSE 1-2: 1 Skin Test

COMPACT Act Administrative Eligibility:
    COMPACT Act: ELIGIBLE

Patient's Service Connection and Rated Disabilities:

    SC Percent: %
Rated Disabilities: None Stated
Skin Test: PPD TUBERCULIN

Are you recording a skin test (A)dministration, (R)eading, or (B)oth? READING
[ENTER]

Is this reading for the PPD skin test administered on
Sep 15, 2021@11:17? YES// [ENTER]

We will link this skin test reading to that placement entry.

Reading Date and Time: NOW [ENTER] (SEP 15, 2021@11:18)
Reading in millimeters (mm): 2 [ENTER]

    Select one of the following:

        P POSITIVE
        N NEGATIVE
        D DOUBTFUL
        O NO TAKE

Results: NEGATIVE [ENTER]
Reader: CPRSPROV,ONE [ENTER]
```

Reading Comments: [ENTER]

5. Alternatively, the administration and reading can be recorded at one time.

```
Select Action: Quit// ST
      1      Skin Test
      2      Standard Codes
CHOOSE 1-2: 1      Skin Test

COMPACT Act Administrative Eligibility:
      COMPACT Act: ELIGIBLE

Patient's Service Connection and Rated Disabilities:

      SC Percent: %
Rated Disabilities: None Stated
Skin Test: PPD TUBERCULIN [ENTER]

Are you recording a skin test (A)dmistration, (R)eading, or (B)oth? BOTH
[ENTER]
Placement Date and Time: // NOW [ENTER] (SEP 15, 2021@11:26:26)
Ordering Provider: CPRSPROV,ONE [ENTER]
Is this provider Primary or Secondary? P// [ENTER] PRIMARY
Administered By: CPRSPROV,ONE [ENTER]
Anatomic Location: LEFT LOWER FOREARM [ENTER]      LLFA
Placement Comments: [ENTER]
Reading Date and Time: NOW [ENTER] (SEP 15, 2021@11:26)
Reading in millimeters (mm): 2 [ENTER]

      Select one of the following:

      P      POSITIVE
      N      NEGATIVE
      D      DOUBTFUL
      O      NO TAKE

Results: NEGATIVE [ENTER]
Reader: CPRSPROV,ONE [ENTER]
Reading Comments: [ENTER]
```

3.16. How to Add or Edit an Exam

When you choose Exam under Update Encounter, you will also be prompted to enter the Topic, Level of Understanding, and Encounter Provider.

Note: A Clinical Coordinator can change the items or categories available to choose from for Exams through the PCE Table Maintenance Menu. To help define the Exam list, check with your Coordinator.

Steps to add an Exam:

1. Select UE, from the PCE Appointment List screen.
2. Select XA from the PCE Update Encounter screen.

```
PCE Update Encounter      Mar 13, 2019@13:17:45 Page:      1 of      2
AVIVAPATIENT,FIVE      666-00-0925      Clinic:
Encounter Date      12/5/2017      Clinic Stop:

      1 Encounter Date and Time: DEC 05, 2017@11:08:14
```

```

2 Provider:  STUDENT,EIGHT  PRIMARY  Physician/Physician/Osteopath
3 Provider:  PROVIDER,FIVEHUNDREDTHREE  Physician/Physician/Osteopath
4 Education Topic:  VA-TOBACCO USE SCREENING
5 Skin Test:  CANDIDA
6 Health Factor:  RG TEST
  Level/Severity:  HEAVY/SEVERE
7 Contra/Refusal Event:  LATEX ALLERGY
8 Coding System:  SNOMED CT
  Code: 237620003 (SCT) Abnormal metabolic state in diabetes mellitus

+          + Next Screen  - Prev Screen  ?? More Actions
ED  Edit an Item          SC  Standard Codes          HF  Health Factors
DE  Delete an Item        TR  Treatment              DD  Display Detail
EN  Encounter             IM  Immunization           DB  Display Brief
PR  Provider              PE  Patient Ed             IN  Check Out Interview
DX  Diagnosis (ICD)       ST  Skin Test             CR  Contra/Refusal Event
CP  CPT (Procedure)      XA  Exam                QU  Quit
Select Action: Next Screen// XA  Exam

```

3. Respond to the following prompts for Exams, as appropriate.

```

Exam:  GENERAL EXAM          LOCAL
Results:  ?

Choose from:
A          ABNORMAL
N          NORMAL

Results:  NORMAL
Enter the Event Date and Time:  NOW//  (MAR 13, 2019@13:22:22)
Encounter Provider:  TEST  PROVIDER,FIVEHUNDREDTHREE          TS
10BA1/ADP          Scholar Extraordinaire
Comments:

```

4. The edited screen is then displayed.

3.17. How to Add or Edit Health Factors

When you choose Health Factors under Update Encounter, you will also be prompted to enter the Level/Severity and comments.

Note: A Clinical Coordinator can change the items to choose from for Health Factors through the PCE Table Maintenance Menu. If you wish to help define the Health Factor list, check with your Coordinator.

Steps to add a Health Factor:

1. Select UE from the PCE Appointment List screen.
2. Select HF from the PCE Update Encounter screen.

```

PCE Update Encounter          Mar 13, 2019@13:41:08  Page:  1 of  2
AVIVAPATIENT,FIVE          666-00-0925          Clinic:
Encounter Date  12/5/2017          Clinic Stop:

1 Encounter Date and Time:  DEC 05, 2017@11:08:14

2 Provider:  STUDENT,EIGHT  PRIMARY  Physician/Physician/Osteopath
3 Provider:  PROVIDER,FIVEHUNDREDTHREE  Physician/Physician/Osteopath
4 Education Topic:  VA-TOBACCO USE SCREENING
5 Skin Test:  CANDIDA

```

+	+ Next Screen	- Prev Screen	?? More Actions
ED	Edit an Item	SC	Standard Codes
DE	Delete an Item	TR	Treatment
EN	Encounter	IM	Immunization
PR	Provider	PE	Patient Ed
DX	Diagnosis (ICD)	ST	Skin Test
CP	CPT (Procedure)	XA	Exam
		HF	Health Factors
		DD	Display Detail
		DB	Display Brief
		IN	Check Out Interview
		CR	Contra/Refusal Event
		QU	Quit

Select Action: Next Screen// HF Health Factors

3. Respond to the following prompts for the Health Factor, as appropriate.

```
Health Factor: current smoker
Level/Severity: ?
Choose from:
M MINIMAL
MO MODERATE
H HEAVY/SEVERE
Level/Severity: HEAVY/SEVERE
Comments: Trying to quit
Health Factor: [ENTER]
```

4. The edited screen is then displayed.

3.18. How to Add or Edit the Checkout Interview

The "Checkout Interview" which is done for all outpatients through the Scheduling package, can also be done through PCE. You are prompted to enter Provider (and to designate if Primary Provider), Service-connection status, CPT codes, Diagnosis, etc. You may also designate if the Diagnosis should be added to the patient's Problem List.

REMEMBER: Entering one or two question marks will provide help (including lists of acceptable CPT codes, Diagnoses) on how to respond to prompts. With functionality put in place by the Code Set Versioning project, only ICD and CPT Codes that are active for the encounter date and time will be available.

3.18.1.Steps to add a Checkout Interview:

1. Select Checkout Interview from the Encounter or Appointment List screen or from the Update Encounter screen. Note that the input prompts may vary depending on what data is already stored for the encounter.

```
PCE Update Encounter      Mar 19, 2019@14:13:12      Page: 1 of 1
CRPATIENT,ONE      666-11-2222      Clinic: Mental Health
Encounter Date 5/24/2018 10:00      Clinic Stop: 502 MENTAL HEALTH CLINIC

1 Encounter Date and Time: MAY 24, 2018@10:00

2 Provider: WHPROVIDER,THIRTEEN PRIMARY Physician/Physician/Osteopath
3 ICD Code: J11.89 (ICD-10-CM) Influenza due to unidentified influenza virus
with other manifestations
Provider Narrative: Influenza due to unidentified influenza virus with
other manifestations
Primary or Secondary Diagnosis: PRIMARY
4 CPT Code: 99211 OFFICE/OUTPATIENT VISIT EST

Enter ?? for more actions
```

ED Edit an Item	SC Standard Codes	HF Health Factors
DE Delete an Item	TR Treatment	DD Display Detail
EN Encounter	IM Immunization	DB Display Brief
PR Provider	PE Patient Ed	IN Check Out Interview
DX Diagnosis (ICD)	ST Skin Test	CR Contra/Refusal Event
CP CPT (Procedure)	XA Exam	QU Quit

Select Action: Quit//

- If prompted, confirm or edit the checkout date and service-connection status. You will also see the COMPACT Act administrative eligibility status. Select Action: Quit// in Check Out Interview

Check out date and time: MAR 18, 2019@12:58//

COMPACT Act Administrative Eligibility:
COMPACT Act: ELIGIBLE

Patient's Service Connection and Rated Disabilities:

SC Percent: 100%

Rated Disabilities: TRAUMATIC ARTHRITIS (10%-SC)
DIABETES MELLITUS (0%-SC)

--- Classification --- [Required]

Was treatment for SC Condition? YES// [ENTER]

- Enter the provider associated with the procedure performed during this encounter. (You can enter more than one provider and more than one procedure for each provider.)

PAT/APPT/CLINIC: CRPATIENT, ONE MAY 24, 2018@10:00 Mental Health
PROVIDER: ...There is 1 PROVIDER associated with this encounter.

- - E N C O U N T E R P R O V I D E R S - -

No.	PROVIDER	PERSON CLASS ON	MAY 24, 2018@10:00
1	WHPROVIDER, THIRTEEN	PRIMARY	Physician/Physician/Osteopath

Enter PROVIDER: WHPROVIDER, THIRTEEN //

Is this the PRIMARY provider for this ENCOUNTER? YES//

- Enter the ICD code or Diagnosis and whether you want it added to the Problem List.

PAT/APPT/CLINIC: CRPATIENT, ONE MAY 24, 2018@10:00 Mental Health
ICD CODE: ...There is 1 ICD-10 CODE associated with this encounter.

- - E N C O U N T E R D I A G N O S I S (ICD CODES) - -

No.	ICD	DESCRIPTION	PROBLEM LIST
1	J11.89	Influenza due to unidentified Influenza virus with other Manifestations	PRIMARY

Enter ICD-10 Diagnosis :

Would you like to add any Diagnoses to the Problem List? NO//

5. Enter the Procedure (CPT code or procedure name).

You can enter the CPT code or CPT Category or description. A '*' next to a procedure indicates that it was either added or edited during this session. You can also remove an existing CPT code for this encounter by entering 0 or @.

```
PAT/APPT/CLINIC: CRPATIENT,ONE MAY 24, 2018@10:00 Mental Health
PROVIDER: ...Enter the provider associated with the CPT'S.....
CPT: ...There is 1 PROCEDURE associated with this encounter.
- - E N C O U N T E R P R O C E D U R E S (CPT CODES) - -
No. CPT CODE QUANTITY DESCRIPTION PROVIDER
1 99211 1 OFFICE/OUTPATIENT VISIT EST WHPROVIDER,THIRTEEN
Ordering Provider:

Enter PROCEDURE (CPT CODE): 86710
```

6. If there are applicable modifiers enter the modifiers and the number of times the procedure was administered. If there are no applicable modifiers you will not be prompted.

```
Enter PROCEDURE (CPT CODE): 86710
Select CPT MODIFIER: 33 PREVENTIVE SERVICES CPT
Select CPT MODIFIER:

How many times was this procedure performed: 1//
Enter PROVIDER associated with PROCEDURE: WHPROVIDER,THIRTEEN //
Enter Ordering Provider: //
What is ICD-10 DIAGNOSIS 1 for this procedure:

PAT/APPT/CLINIC: CRPATIENT,ONE MAY 24, 2018@10:00 Mental Health
PROVIDER: ...Enter the provider associated with the CPT'S.....
CPT: ...There are 2 PROCEDURES associated with this encounter.
- - E N C O U N T E R P R O C E D U R E S (CPT CODES) - -
No. CPT CODE QUANTITY DESCRIPTION PROVIDER
1 86710* 1 INFLUENZA VIRUS ANTIBODY WHPROVIDER,THIRTEEN
CPT Modifier: 33 PREVENTIVE SERVICES
Ordering Provider:
2 99211 1 OFFICE/OUTPATIENT VISIT EST WHPROVIDER,THIRTEEN
Ordering Provider:

Enter NEXT PROCEDURE (CPT CODE):
```

7. The Update Encounter screen is then redisplayed with the Checkout Interview information.

```
PCE Update Encounter Mar 19, 2019@14:35:05 Page: 1 of 1
CRPATIENT,ONE 666-11-2222 Clinic: Mental Health
Encounter Date 5/24/2018 10:00 Clinic Stop: 502 MENTAL HEALTH CLINIC
```

```

1 Encounter Date and Time:  MAY 24, 2018@10:00

2 Provider:  WHPROVIDER,THIRTEEN  PRIMARY  Physician/Physician/Osteopath
3 ICD Code:  J11.89 (ICD-10-CM) Influenza due to unidentified influenza virus
              with other manifestations
   Provider Narrative:  Influenza due to unidentified influenza virus with
                       other manifestations
   Primary or Secondary Diagnosis:  PRIMARY
4 CPT Code:  99211  OFFICE/OUTPATIENT VISIT EST
5 CPT Code:  86710  INFLUENZA VIRUS ANTIBODY
   CPT Modifier:  33  PREVENTIVE SERVICES

      Enter ?? for more actions
ED  Edit an Item          SC  Standard Codes          HF  Health Factors
DE  Delete an Item       TR  Treatment              DD  Display Detail
EN  Encounter            IM  Immunization            DB  Display Brief
PR  Provider             PE  Patient Ed              IN  Check Out Interview
DX  Diagnosis (ICD)      ST  Skin Test              CR  Contra/Refusal Event
CP  CPT (Procedure)      XA  Exam                QU  Quit
Select Action: Quit//

```

3.19. Adding or Editing Directions to Patient's Home

The Directions to Patient's Home Add/Edit option lets you enter directions to a patient's home, which can then be displayed on a Health Summary.

This feature is especially useful for Hospital-Based Home Care staff.

Steps to add directions to patient's home:

1. Choose HOME from the main PCE menu.
2. Select a patient name.
3. If no directions have already been entered, type in free text at the prompt.

Note: The screen editor you use in all your work will determine how you enter text.

```

Select PCE Coordinator Menu Option: home  Directions to Patient's Home Add/Edit

Select PATIENT NAME: PCEPATIENT
1  PCEPATIENT,ONE      06-04-08      000456789      NON-VETERAN (OTHER)
2  PCEPATIENT,TWO      02-16-33      666000000      NSC VETERAN
CHOOSE 1-2: 1  PCEPATIENT,ONE 06-04-08      000456789      NON-VETERAN (OTHER)

LOCATION OF HOME:
1>On the dock.
2>
EDIT Option:[ENTER]

Select PATIENT NAME:[ENTER]

```

4. To edit directions that were previously entered, select the edit option and proceed to edit according to the screen editor process you normally use.

```

Select PCE Coordinator Menu Option: home  Directions to Patient's Home Add/Edit

Select PATIENT NAME: PCEPATIENT,EIGHT  PCEPATIENT,EIGHT  09-12-44  666777888
SC VETERAN

```



```
LOCATION OF HOME:. . .  
  6> WIER STREET. TURN LEFT ON WEIR STREET AND GO TO END.  
  7> TO THE LEFT OF THE DEADEND IS A DIRT PATH.  
  8> FOLLOW THIS PATH 1/4 MILES UNTIL YOU REACH A WHITE HOUSE.  
EDIT Option: 8  
REPLACE: WHITE      WITH:  GREEN      REPLACE: [ENTER]  
EDIT Option: [ENTER]  
  
Select PATIENT NAME: [ENTER]
```

3.20. Key Concepts

- Clinicians can add individual types of data (immunizations, patient education) through the PCE user interface.
- Clerks can add encounter form data that was incorrectly scanned or was missing.
- The equals sign (=) can be used as a shortcut when selecting an action plus encounters or appointments from a list (e.g., Select Action: ED=2).
- Information added to PCE can be viewed on the Health Summary or on PCE Clinical Reports.
- PCE data elements can be used as Clinical Reminders findings in reminder definitions and remind dialogs. This is explained in detail in *Clinical Reminders Manager's Manual*.
- Each site can modify the choices available in PCE files for health factors, patient education, etc.
- You can enter encounter information for an inexact time in the past or from another site through Make Historical Enc.
- Information entered through the Checkout Interview goes into the Scheduling package. The Checkout Interview information can also be entered directly through the Scheduling package. The dialogues, screens and resulting data are identical between the two packages.

4.0 PCE and Health Summary

Information such as Patient Education, Health Factors, and Immunizations, as well as clinical reminders about when these things are due, can be displayed on Health Summaries. Health Summary has special components designed to include these elements. See PCE Clinical Reports in this manual for setting up Clinical Reminders to appear on Health Summaries. Patch PX*1*211 added a Print Name field to Exams and Health Factors; Education Topics already had one. Previously, the PCE Health Summary extract routines for Education Topics, Exams, and Health Factors returned the .01 field for Health Summary to display as the name. Now, if the Print Name is defined it will be returned instead of the .01. If it is not defined, then the .01 will be returned.

An example of Health Summary with PCE components appears below.

```

03/19/2019 15:07
***** CONFIDENTIAL EXAMPLE SUMMARY *****
CRPATIENT,ONE      666-11-2222      DOB: 10/17/1942
----- ED - Education -----
Event/Visit Facility      Topic - Understanding Level
Date
03/19/2019 Pecan Stre      Home Telehealth-Caregiver education/support - FAIR
Measurement: 2 {STDV}
Home Telehealth-Caregiver education/support - POOR
Measurement: 1 {STDV}
08/02/2016 ISC-SLC-A4      Pkr Local
Measurement: 7
10/18/2004 ISC-SLC-A4      Nutrition/weight Screening - GOOD
----- EXAM - Exams Latest -----
Event/Visit Facility      Exam - Result
Date
04/13/2018 ISC-SLC-A4      Hand Exam
Measurement: 5.1 mm[Hg]
----- HF - Health Factors -----
Event/Visit Category
Date      Health Factor
11/09/2015 CCHT (CARE COORDINATION HOME TELEHEALTH) [C]
Ccht Enrollment-ending Date
CCHT DISCHARGE [C]
12/21/2015 Ccht Discharge-all Equip Returned (Yes)
Ccht Discharge-all Issues Addressed(yes)
Ccht Discharge-referred To New Location
Testing comment
Ccht Discharge-relocated Out Of Svc Area
CCHT TELEHEALTH DEMOGRAPHICS [C]
Measurement: 3.4 [ppm]
TOBACCO [C]
08/02/2012 Current Non-Smoker
This is a HF test comment.
END *
Press <RET> to continue, ^ to exit, or select component:
```

5.0 Managing PCE

IRM staff and Clinical Coordinators manage PCE by assigning menus, setting site parameters, defining clinical reminders, setting up clinical reports, and modifying local tables containing patient education, health factors, and other items through the Table Maintenance options.

5.1. PCE Menus and Options

The following menus and options are exported with PCE:

PCE IRM Main Menu:

SP	PCE Site Parameters Menu ...
TBL	PCE Table Maintenance ...
DE	PCE/SD Debugging Utilities ...
INFO	PCE Information Only ...
RM	PCE Reminder Maintenance Menu ...
CR	PCE Clinical Reports ...
HOME	Directions to Patient's Home Add/Edit
CO	PCE Coordinator Menu ...
CL	PCE Clinician Menu ...
DEWO	PCE Delete Encounters W/O Visit

- Assign the IRM Main Menu or at least the first five options/menus to IRM staff or coordinators who will be responsible for setting up PCE, maintaining the entries in the PCE tables (such as Patient Education, Health Factors, etc.), and defining the clinical reminders/maintenance system for your site.
- Assign the PCE Coordinator Menu to the Application Coordinator who will use all of the PCE options.
- Assign the PCE Clinician Menu to clinicians who will be entering or editing data, who will use clinical reports, who need the PCE Information Only menu to see the basis for reminders, and who might add or edit directions to a patient's home for appearance on a health summary.
- Assign Directions to Patient's Home Add/Edit to anyone who needs to enter directions to a patient's home. This is especially useful for Hospital-Based Home Care staff (directions can be viewed on Health Summaries).

5.2. PCE Coordinator Menu

The PCE Coordinator Menu includes all of the user interface options as well as the options for file maintenance.

```
SUP    PCE Encounter Data Entry - Supervisor
PCE    PCE Encounter Data Entry
DEL    PCE Encounter Data Entry and Delete
NOD    PCE Encounter Data Entry without Delete
TBL    PCE Table Maintenance ...
      ED    Education Topic Management
      EX    Exam Management
      HF    Health Factor Management
      TS    Text/Keyword Search
      IMC   Inactive Mapped Codes Report
      DEF   Immunization Default Responses Enter/Edit
      INFO  PCE Information Only ...
INFO   PCE Information Only ...
      EDA   Active Educ. Topic List - Detailed
      EDL   Education Topic List
      EDI   Education Topic Inquiry
      EX    Exam List
      HF    Health Factor List
      HFX   Health Factor List 132
      IM    Immunization List
      SK    Skin Test List
      TR    Treatment List
      CM    PCE Code Mapping List
HOME   Directions to Patient's Home Add/Edit
MDR    CIDC Missing Data Report
PARM   PCE HS/RPT Parameter Menu ...
DIS    Accounting Of Immunization Disclosures Report
DIE    PCE Device Interface Error Report
VIEW   PCE Encounter Viewer
```

Assign PCE Encounter Data Entry - Supervisor to users who can document a clinical encounter and can also delete any encounter entries, even though they are not the creator of the entries. This option also allows, contrary to all other PXCE Encounter Data Entry, users to display, and even modify ancillary encounters so it should be assigned with caution.

Assign PCE Encounter Data Entry to data entry staff who can document a clinical encounter and who can delete their own entries.

Assign PCE Encounter Date Entry and Delete to users who can document a clinical encounter and can also delete any encounter entries, even though they are not the creator of the entries.

Assign PCE Encounter Data Entry without Delete to users who can document a clinical encounter, but should not be able to delete any entries, including ones that they have created.

5.3. Key Concepts

- PCE menus and options are designed for two main types of users: 1) end users (clinicians and clerks) and 2) managers and coordinators.
- The end user options included data entry options and clinical reports.
- The manager and coordinator options include the maintenance menus and the site parameters set-up option.

5.4. PCE Site Parameters

The PCE Site Parameters Menu on the PCE IRM Main Menu contains the PCE HS/RPT Parameter menu, PCE Edit Disposition Clinics, and PCE Site Parameters Edit.

5.4.1. PCE Site Parameters Menu

SITE	PCE Site Parameters Edit
RPT	PCE HS/RPT Parameter Menu ...
PRNT	PCE HS/RPT Parameters Print
RPT	PCE Report Parameter Edit

5.4.2. Option Descriptions

PCE Site Parameters Edit

This option is used to edit entries in the PCE PARAMETERS file. The parameters that are set are used as the default controls for the user interface when it starts up. You can set your default view as Appointment or Encounter, and a range of dates.

PCE HS/RPT Parameters Print

This option prints the current PCE Parameter definitions that are used by Health Summary and some of the PCE Reports.

PCE Report Parameter Edit

This option is used to define parameters that will be used by the PCE Report Module. The report edit option allows your site to specify which clinics in file #44 represent "Emergency Room" clinics, and what Lab tests from file #60 should be used for looking up patient data for Glucose, Cholesterol, LDL Cholesterol and HBA1C lab results. These fields are used by the reports Caseload Profile by Clinic, and Patient Activity by Location. To get a printout of current definitions in the PCE Parameters fields for these fields, use the PCE HS/RPT Parameters Print.

5.4.3. PCE HS/RPT Parameter Menu

The PCE HS/RPT Parameter menu contains print and edit options for PCE fields related to the Health Summary package and PCE Reports module.

Use the print option to see what the current definition is for these fields.

Two PCE Clinical Reports—Caseload Profile by Clinic and Patient Activity by—track Critical Lab Values and Emergency Room Visits. The PCE Report Parameter Edit option allows your site to specify which clinics in Hospital Location file (#44) represent "Emergency Room" clinics and what tests from the Laboratory Test file (#60) should be used for looking up patient data for Glucose, Cholesterol, LDL Cholesterol and HBA1C lab results. (This is necessary since the Laboratory Test File is not standardized and each site may have customized it differently.)

5.4.4. PCE Site Parameters Edit Example

The parameters that are set through this option are used as the default controls for the user interface when it starts up.

```

SITE    PCE Site Parameters Edit
RPT     PCE HS/RPT Parameter Menu ...

Select PCE Site Parameter Menu Option: site    PCE Site Parameters Edit

Select PCE PARAMETERS ONE: 1
STARTUP VIEW: APPOINTMENT// ??
    This is the default list that PCE Encounter Data Entry starts in for all
    users.
    Choose from:
        V          VISIT/ENCOUNTER
        A          APPOINTMENT
STARTUP VIEW: APPOINTMENT// v  VISIT/ENCOUNTER
BEGINNING PATIENT DATE OFFSET: -30// [ENTER]
ENDING PATIENT DATE OFFSET: 2// [ENTER]
BEGINNING HOS LOC DATE OFFSET: -14// -30
ENDING HOS LOC DATE OFFSET: 2// [ENTER]
RETURN WARNINGS: YES// ?
    Enter YES if you want the Device Interface to return warnings if there
    are no diagnoses or procedures passed.
    Choose from:
        0          NO
        1          YES
RETURN WARNINGS: YES// [ENTER]
MULTIPLE PRIMARY DIAGNOSES: RETURN WARNING//
NO PRIMARY DIAGNOSIS:
SD/PCE SWITCH OVER DATE: AUG 21,1996//
HEALTH SUMMARY START DATE: OCT 10,1997//
MANAGEMENT MAIL GROUP: PCE MANAGEMENT//

Select PCE PARAMETERS ONE: [ENTER]
```

5.4.5. Key Concepts

- Coordinators can set the parameters that are used as the default controls for the user interface when it starts up. You can set your default view as Appointment or Encounter, and also a range of dates.
- Coordinators can specify which clinics in file #44 represent "Emergency Room" clinics, and what Lab tests from file #60 should be used for looking up patient data for Glucose, Cholesterol, LDL Cholesterol, and HBA1C lab results.

5.5. PCE/SD Debugging Utilities

The PCE/SD Debugging Utilities menu is available from the PCE IRM Main Menu [PX IRM MAIN MENU].

```
Select Option: PCE IRM Main Menu PX IRM MAIN MENU

  SP      PCE Site Parameter Menu ...
  TBL     PCE Table Maintenance ...
  DE      PCE/SD Debugging Utilities ...
  INFO    PCE Information Only ...
  RM      Reminder Managers Menu ...
  CR      PCE Clinical Reports ...
  HOME    Directions to Patient's Home Add/Edit
  CO      PCE Coordinator Menu ...
  CL      PCE Clinician Menu ...

Select PCE IRM Main Menu <TEST ACCOUNT> Option: De PCE/SD Debugging Utilities

  U      User's Visit Review
  V      PCE V File Cross Reference Repair

Select PCE/SD Debugging Utilities <TEST ACCOUNT> Option:
```

The main menu for the PCE/Scheduling Debugging Utilities contains these two options. Below is a description of the options.

PXQ USER REVIEW – User's Visit Review

This is a report of the visits and the files that store the visit-related information.

PX V File Repair – PCE V File Cross Reference Repair

This option provides a number of options that allow the user to both report on and fix broken V File Cross References.

Note: Only experienced Programmers should access this option.

Here is the User's Visit Review option and menu:

```
Select PCE IRM Main Menu <TEST ACCOUNT> Option: De PCE/SD Debugging Utilities

  U      User's Visit Review
  V      PCE V File Cross Reference Repair

Select PCE/SD Debugging Utilities <TEST ACCOUNT> Option: U User's Visit Review

  Select one of the following:

      P      Patient List of Visits
      I      Internal Entry Number of VISIT

Enter '^' to exit
Select by (P)atient or (I)en: I// Patient List of Visits
Patient Name: CRPATIENT,ONE      10-17-42      666112222      YES      SC VETER
AN
Enter Starting Date (eg. T-4) : JAN 1,2010//
Enter Ending Date : MAY 17,2018//
```


Example output:

PAT/SEX/AGE/SSN: CRPATIENT,ONE MALE 76 Years 666-11-2222
ENCOUNTERS: ...Select an ENCOUNTER

```

-- 30 ENCOUNTERS --
No. DATE          TIME      HOSPITAL LOCATION  CATEGORY  UNIQUE I D
1  APR 30, 2018    07:42    RAD ROOM          ANCILLARY 1FPV-TEST
2  JUL 29, 2017    15:40                      PRIMARY   1FQD-TEST
3  FEB 26, 2017    12:23    ROBIN'S CLINIC    PRIMARY   1FQB-TEST
4  AUG 02, 2016    08:30    GENERAL MEDICINE  PRIMARY   1FHN-TEST
5  FEB 26, 2016    12:23    ROBIN'S CLINIC    PRIMARY   1FQ8-TEST
6  DEC 21, 2015    08:34    GENERAL MEDICINE  PRIMARY   1FC9-TEST
7  NOV 09, 2015                      PRIMARY   1FCB-TEST
8  SEP 01, 2015    08:00    GENERAL MEDICINE  PRIMARY   1FH2-TEST
9  MAR 22, 2013    12:00    Mental Health     PRIMARY   1FBP-TEST
10 SEP 17, 2012    08:00    Mental Health     PRIMARY   1FB4-TEST

```

'RETURN' to continue or '-' for previous screen
Select Encounter by entering the ITEM No. :9

After selecting the item, select from this menu (D, A, or C):

Expanded Profile Jul 26, 2018 08:52:10 Page: 3 of 5
Select one of the following:

```

D      Default (first field of each file/subfile)
A      All fields in a file/subfile (except 'NULL')
C      Customized by User (Default plus added fields)

```

~~~~~  
To Customize your display use VA Fileman to add entries in file  
PCE CUSTOMIZE REPORT, with your NAME, FILE/SUBFILE#s, and FIELD#s  
that you want to have included in the report.  
~~~~~

Enter '^ ^' to exit option
Format of Print out: D// efault (first field of each file/subfile)

DEVICE: HOME// ;132;444 HOME (CRT)

*** RECORD OF RELATED ENTRIES ***

The Following is the VISIT file entry and
ALL records pointing back to this entry.

VISIT RECORD --- #8477

DATE/TIME --- MAR 22, 2013@12:00
PATIENT --- CRPATIENT,ONE
LOCATION --- Mental Health

```

-----
FILE = VISIT #9000010 RECORD #8477
VISIT/ADMIT DATE&TIME = MAR 22, 2013@12:00
DATE VISIT CREATED    = MAR 23, 2013@23:00
TYPE                  = VA
PATIENT NAME          = CRPATIENT,ONE
LOC. OF ENCOUNTER     = ISC-SLC-A4
SERVICE CATEGORY     = AMBULATORY
DSS ID                = MENTAL HEALTH CLINIC - IND
DEPENDENT ENTRY COUNT = 1

```

```

DELETE FLAG                =
PARENT VISIT LINK          =
DATE LAST MODIFIED         = JUL 19, 2017@08:27:51
CHECK OUT DATE&TIME        =
ELIGIBILITY                =
HOSPITAL LOCATION          = Mental Health
CREATED BY USER            = TASKMAN,PROXY USER
OPTION USED TO CREATE      = SDAM BACKGROUND JOB
PROTOCOL                   =
PFSS ACCOUNT REFERENCE     =
OUTSIDE LOCATION           =
VISIT ID                   = 1FBP-TEST
PATIENT STATUS IN/OUT      = OUT
ENCOUNTER TYPE             = PRIMARY
SERVICE CONNECTED         =
AGENT ORANGE EXPOSURE      =
IONIZING RADIATION EXPOSURE =
SW ASIA CONDITIONS         =
MILITARY SEXUAL TRAUMA     =
HEAD AND/OR NECK CANCER    =
COMBAT VETERAN             =
PROJ 112/SHAD              =
SERVICE CONNECTION EDIT FLAG = EDITABLE
AGENT ORANGE EDIT FLAG     = EDITABLE
IONIZING RADIATION EDIT FLAG = EDITABLE
SW ASIA CONDITIONS EDIT FLAG = EDITABLE
MST EDIT FLAG              = EDITABLE
HEAD AND NECK CANCER EDIT FLAG = EDITABLE
COMBAT VETERAN EDIT FLAG   = EDITABLE
PROJ 112/SHAD EDIT FLAG    = EDITABLE
COMMENTS                   =
PACKAGE                    = SCHEDULING
DATA SOURCE                 =

```

```

FILE = OUTPATIENT ENCOUNTER #409.68  RECORD #3063
DATE                = MAR 22, 2013@12:00
LOCATION              = Mental Health
ORIGINATING PROCESS TYPE = APPOINTMENT

```

The Following is the OUTPATIENT ENCOUNTER entry and most of the records pointing back to it.

OUTPATIENT ENCOUNTER --- #3063

```

FILE = OUTPATIENT ENCOUNTER #409.68  RECORD #3063
DATE                = MAR 22, 2013@12:00
LOCATION              = Mental Health
ORIGINATING PROCESS TYPE = APPOINTMENT

```

The Following is the SCHEDULING VISITS file.
This is where Scheduling stores the CPT codes.

END OF DISPLAY

Note: The D, A, or C options produce a similar report, as does the selecting by IEN instead of Patient Name.

The PCE V File Cross Reference Repair selections are covered in Appendix A-11 of the User Manual Appendices document.

PCE Delete Encounters W/O Visit

This option provides a tool for IRM to correct Encounters that have missing Visits. The missing Visits can cause a problem where the Encounters cannot be checked out. Under this menu option, there are 4 sub options described in detail in the text of patch PX*1*153:

- BUILD will find the missing encounters based on date range entries
- REPORT will print the problem encounters per build
- FIX ALL will fix all the encounters that are indicated by the build
- FIX INDIVIDUAL will fix encounters for one patient

6.0 Table Maintenance

The Table Maintenance options let sites add or edit the items in the tables for Health Factors, Patient Education, Skin Tests, etc.

Patch PX*1*211 replaced the various options for managing Education Topics, Exams, and Health Factors with an integrated management tool. Immunizations and Skin Tests have been standardized and cannot be edited. The available Immunizations and Skin Tests can be viewed via the PCE Information Only menu.

6.1. PCE Table Maintenance Menu

ED	Education Topic Management
EX	Exam Management
HF	Health Factor Management
TS	Text/Keyword Search
IMC	Inactive Mapped Codes Report
LOT	Immunization Lot Add/Edit/Display
DEF	Immunization Default Responses Enter/Edit
INFO	PCE Information Only ...

6.1.1. Option Descriptions

Education Topic Management, Exam Management, and Health Factor Management

The integrated management systems for each of these data types are very similar, so if you understand one of them you will understand all three. Accordingly, an explanation of the Health Factor Management functionality will serve as an explanation of all three. When you start Health Factor management, it opens a List Manager screen that lists all the health factors defined on the system.

Health Factor Management		May 21, 2018@09:30:19	Page:	1 of 621
Health Factor File Entries.				
No.	Health Factor	<u>Description</u>		
1	1:1 COUNSELING			
2	90 DAY MONITORING ZARIT BURDEN INTERVIEW [C]			
3	A A PAIN AM OUTSIDE ASSESSMENT			
4	A A PAIN AM PAIN SCORE UNACCEPTABLE.			
5	A A PAIN ASSESS DECLINED			
6	A A PAIN HISTORY CATEGORY [C]			
7	A A PAIN HX COMPLETE			
8	A A PAIN HX FORM TO PATIENT.			
9	A A PAIN HX FURTHER EVALUATION			
10	A A PAIN HX NEW PAIN			
+ + Next Screen - Prev Screen ?? More Actions				
ADD Add				
EDIT Edit				
COPY Copy				
INQ Inquire				
CL Change Log				
Select Action: Next Screen//				

The Health Factor column is an alphabetically sorted list of the .01's of the health factors. It will display up to the first 52 characters of the .01. If a Description is defined up to the first 17 characters will be displayed. Since this is a List Manager screen all the standard List Manager actions such as SL (search list), FS (first screen), and LS (last screen) can all be used. Typing a "?" will display the help in the FileMan Browser.

```
Health Factor Management Help
Select one of the following actions:
ADD - add a new health factor.
EDIT - edit a health factor.
COPY - copy an existing health factor to a new health factor.
INQ - health factor inquiry.
CL - health factor change log display.

You can select the action first and then the entry or choose the entry and then
the action.

Col> 1 |Press <PF1>H for help| Line> 10 of 10 Screen> 1 of 1
```

The ADD action lets you add a new health factor. Once the required fields have been entered you are taken to a ScreenMan editing form where the remaining fields can be entered.

The EDIT action opens the ScreenMan editing form. Note that entries whose Class is National cannot be edited.

The COPY action prompts for a new .01 and then copies the selected health factor into the new health factor. Once the copy is complete there is a prompt asking if you want to edit it, if you respond YES you are taken to the ScreenMan editing form.

The INQ action displays a detailed listing of the selected health factor.

The CL action displays the Change Log.

Details for each of these actions follows.

ADD:

```
Enter a new Health Factor Name: NEW HEALTH FACTOR
Enter the Entry Type: FACTOR
Enter the Category: REMINDER FACTORS [C] LOCAL
Enter the Class: LOCAL
Enter Display on Health Summary: N
Enter a new Health Factor Name: NEW HEALTH FACTOR CATEGORY
Enter the Entry Type: CATEGORY
Category names must end with '[C]', appending it for you.
NEW HEALTH FACTOR CATEGORY [C]
Enter the Class: LOCAL
Enter Display on Health Summary: N
```

EDIT opens a ScreenMan form for editing the selected health factor. If you are not familiar with using ScreenMan, see the "ScreenMan" section in the VA FileMan User Manual.

```

NAME: A A PAIN HX FORM TO PATIENT.
PRINT NAME: A A Pain Hx Form To Patient.
DESCRIPTION:
ENTRY TYPE: FACTOR      DISPLAY ON HEALTH SUMMARY: YES INACTIVE FLAG:
CATEGORY: PAIN HX CATEGORY [C]
SHORT NAME:
LOWER AGE:              UPPER AGE:              USE ONLY WITH SEX:

MIN VALUE:              MAX VALUE:              MAX DECIMALS:
UCUM UNITS:
PROMPT CAPTION:              UCUM DISPLAY:

Coding Sys              Code              Linked Delete

CLASS: LOCAL      SPONSOR:

COMMAND:              Press <PF1>H for help  Insert

```

INQ:

```

-----
Health Factor Inquiry
-----
1:1 COUNSELING                                         No. 663615
-----
Print Name: 1:1 Counseling
Class: LOCAL
Sponsor:
Entry Type: FACTOR
Category: PREFERRED LEARNING STYLE [C]
Display on Health Summary: YES
Inactive Flag:
Short Name:
Lower Age:  Upper Age:
Use Only With Sex:

Description:

Code Mappings
Coding System: CPT = CPT-4
Code      Activation Inactivation      Mapped      Linked
-----
4000F      01/01/2005      05/24/2017@13:10:31

Code      Description
-----
4000F      Tobacco use Cessation Intervention, Counseling (COPD, CAP,
CAD, Asthma) (DM) (PV)

Coding System: ICD = ICD-9-CM
Code      Activation Inactivation      Mapped      Linked
-----
V65.3      10/01/1978  10/01/2015  05/17/2016@09:31:09  05/25/2017@10:19:59

Value Range
Not defined

```

CL: Anytime a change is made to a health factor an entry is automatically made in the Change Log, it records the user who made the change and the date and time it was done. If the user they can add information describing what was changed and why. The CL action displays the entire Change Log starting with the oldest entry.

```
HEALTH FACTORS Change Log for IEN=663615
Edit By: USER,ONE on MAY 11, 2016@15:01:24

Edit By: USER,TWO on MAY 25, 2017@10:17:14

Edit By: USER,TWO on MAY 25, 2017@10:19:59

Edit By: USER,ONE on MAY 17, 2016@09:31:22
ADDED ENTRIES FOR COUNSELING

Edit By: USER,ONE on MAY 17, 2016@09:39:12
UNLINKED AND REMOVED MAPPING OF 250.00

Edit By: USER,ONE on MAY 17, 2016@09:51:57
ADDED SCT CODE

Edit By: USER,TWO on MAY 24, 2017@10:36:08

Edit By: USER,TWO on MAY 24, 2017@11:23:06

Edit By: USER,TWO on MAY 24, 2017@11:57:41

Edit By: USER,TWO on MAY 24, 2017@11:58:49
Col> 1 |Press <PF1>H for help| Line> 22 of 24 Screen> 1 of 2
```

TS Text/Keyword Search

This option lets you search all the text fields in selected PCE files for a set of keywords.

```
Select PCE Table Maintenance <TEST ACCOUNT> Option: TS Text/Keyword Search
Search PCE files for keywords.
Select from the following list of files:
1. Education Topics
2. Exam
3. Health Factors
4. Immunizations
5. Skin Test

Select the files to search: 1-5

Should the search be case-sensitive? N// O
Input the keywords, one per line. Enter NULL or '^' to exit.
Input a keyword: diabetes

Input a keyword:
```

The results are displayed in a FileMan Browser screen. It shows the file name, entry, and field where the keyword was found:

```

                                Text/Keyword Search
The search was for the following keywords:
DIABETES

File: EDUCATION TOPICS
Entry VA-SUBSTANCE ABUSE (IEN=1) contains 1 match.
  Found in field SUBTOPIC the text is:
    VA-DIABETES

Entry ALCOHOL USE AND MEDICAL PROBLEMS (IEN=44) contains 1 match.
  Found in field EDUCATIONAL STANDARDS the text is:
    7. diabetes and poor glucose control

Entry VA-DIABETES DISEASE PROCESS (IEN=354) contains 4 matches.
  Found in field NAME the text is:
    VA-DIABETES DISEASE PROCESS
  Found in field PRINT NAME the text is:
    Diabetes Disease Process
  Found in field EDUCATIONAL STANDARDS the text is:
    2. Explain the role of obesity in Diabetes Mellitus and insulin resistance.
    4. Assist the patient in understanding that diabetes is a lifelong condition

Entry VA-DIABETES COMPLICATIONS (IEN=355) contains 3 matches.
HYPER-TXT|Press <PF1>H for help| Line>      22 of 169  Screen>      1 of 8
```

IMC Inactive Mapped Codes Report

This will produce a report of all mapped codes that are inactive.

```

                                Inactive Mapped Codes
EDUCATION TOPICS inactive mapped codes.

PKR HOME TELEHEALTH-CAREGIVER EDUCATION/SUPPORT (IEN=663078)
  ICD 250.01, inactivated: 10/01/2015

PKR LOCAL (IEN=660013)
  ICD V62.3, inactivated: 10/01/2015

PKR MAP TEST (IEN=375)
  ICD V62.3, inactivated: 10/01/2015

-----
HEALTH FACTORS inactive mapped codes.

1:1 COUNSELING (IEN=663615)
  ICD V65.3, inactivated: 10/01/2015

DIABETIC EYE EXAM DONE ELSEWHERE (IEN=537167)
  ICD 250.00, inactivated: 10/01/2015

FOBT CARDS GIVEN TO PT (IEN=674027)
  ICD 250.01, inactivated: 10/01/2015
Col>   1 |Press <PF1>H for help| Line>      22 of 120  Screen>      1 of 6
```


6.2. LOT Immunization Lot Add/Edit/Display

This option allows an authorized user to add or update an immunization lot, to transfer lots between divisions, and to display or print an Immunization Inventory Report. Upon entering this option, the user must select an associated facility. Inventory information to be updated or displayed will be related to the selected facility.

```
Select PCE Table Maintenance Option: LOT [ENTER] Immunization Lot Add/Ed
it/Display

IMMUNIZATION INVENTORY FUNCTIONS

Select associated VA facility from the list or enter another facility.
    MAYBERRY (900)
    MAYBERRY OPC (900A4)
Inventory information to be updated or displayed will be related to
the selected facility.

Enter the facility name or station number: 900A4 [ENTER] MAYBERRY OPC  NC  OCMC  900A4

IMMUNIZATION INVENTORY FUNCTIONS FOR MAYBERRY OPC (900A4)

1. Enter/Edit Immunization Lot
2. Transfer Immunization Inventory Between Facilities
3. Display/Print Immunization Inventory Report

Enter a number:  (1-2): 1 [ENTER]

    Enter/Edit Immunization Lot for MAYBERRY OPC (900A4)

Select IMMUNIZATION LOT LOT NUMBER: EE11337 [ENTER]  PFIZER, INC      TD (ADULT)      11-
30-2017          99 DOSES UNUSED

LOT NUMBER: EE11337// ** Already assigned and cannot be edited. **
MANUFACTURER: PFIZER, INC// [ENTER]
VACCINE: TD (ADULT)// [ENTER]
EXPIRATION DATE: NOV 30,2017// [ENTER]
STATUS: ACTIVE// [ENTER]
STARTING COUNT: 100// [ENTER]
DOSES UNUSED: 99// [ENTER]
LOW SUPPLY ALERT: 50 [ENTER]
NDC CODE (VA): [ENTER]
```

6.3. Key Concepts

- User must hold the PXV IMM INVENTORY MGR security key to access the menu option, Immunization Lot Add/Edit/Display.
- Multi-division functionality requires selection of an associated facility upon accessing this menu option. Inventory information to be updated or displayed will be related to the selected facility.
- Only active immunization lots may be selected when documenting an immunization.
- When documenting an immunization, only immunization lots with an associated facility that matches the institution/division of the hospital location may be

selected. Older immunization lots with no associated facility will be available for selection at any hospital location.

- Entries in the IMMUNIZATION LOT file (#9999999.41) must be unique, that is, the immunization name, lot number and manufacturer combination must be unique to the associated facility.
- An immunization lot that has been assigned to a patient's immunization record may not be deleted from the IMMUNIZATION LOT file (#9999999.41).
- When an immunization lot number is assigned to a patient's immunization record, the number in the DOSES UNUSED field is decremented.
- When the DOSES UNUSED falls below the LOW SUPPLY ALERT, a MailMan message will be sent notifying: a) the PXV IMM INVENTORY MGR security key holders and b) the PXV IMM INVENTORY ALERTS Mail Group.

6.4. Transfer Immunization Inventory Between Facilities

This option allows a user to transfer inventory between one division and another. If the division receiving the inventory does not currently have the lot configured, it will create a new lot entry for this division, and then initialize the Starting Count and Doses Unused to the amount of inventory being transferred.

```
Select PCE Table Maintenance Option: LOT [ENTER] Immunization Lot Add/Edit/Display

IMMUNIZATION INVENTORY FUNCTIONS

Select associated VA facility from the list or enter another facility.
    MAYBERRY (900)
    MAYBERRY OPC (900A4)
Inventory information to be updated or displayed will be related to
the selected facility.

Enter the facility name or station number: 900A4 [ENTER] MAYBERRY OPC  NC  OCMC  500A4

IMMUNIZATION INVENTORY FUNCTIONS FOR MAYBERRY OPC (900A4)

1. Enter/Edit Immunization Lot
2. Transfer Immunization Inventory Between Facilities
3. Display/Print Immunization Inventory Report

Enter a number:  (1-2): 2 [ENTER]

    Transfer Vaccine Inventory From CAMP MASTER (500)

Select IMMUNIZATION LOT LOT NUMBER: KFLDKFO9I34 [ENTER]      PFIZER, INC      VACCINIA
(SMALLPOX)      06-01-2022      MAYBERRY OPC  8998 DOSES UNUSED

    Current Balance: 8998

Enter Quantity to Transfer:  (1-8998): 500 [ENTER]
Enter the facility name or station number: 900 [ENTER] MAYBERRY

MALONE does not currently stock this lot!
```

Do you want to continue? YES [ENTER]

VACCINIA (SMALLPOX)
Manufacturer: PFIZER, INC
Lot: KFLDKFO9I34
Exp Date: 6/1/2022

Transferring: 500 (Doses)

From: CAMP MASTER (500)
To : MALONE (528G1)

OK to post? Yes// [ENTER] YES

Updating vaccine on-hand balances now...
Done!

6.5. Display Immunization Inventory Report

This option allows a user to print the immunization inventory report. You can either choose to print all or selected active inventory, or active inventory with zero doses available. The report will print Immunization, Lot Number, Status, By (initials of the user who first marked this lot as active), Doses Unused, Expiration Date, Manufacturer, and Station Number.

```
Select PCE Table Maintenance Option: LOT [ENTER] Immunization Lot Add/Edit/Display  
IMMUNIZATION INVENTORY FUNCTIONS  
Select associated VA facility from the list or enter another facility.  
    MAYBERRY (900)  
    MAYBERRY OPC (900A4)  
Inventory information to be updated or displayed will be related to  
the selected facility.  
Enter the facility name or station number: 900A4 [ENTER] MAYBERRY OPC  NC  OCMC  500A4  
  
IMMUNIZATION INVENTORY FUNCTIONS FOR MAYBERRY OPC (900A4)  
1. Enter/Edit Immunization Lot  
2. Transfer Immunization Inventory Between Facilities  
3. Display/Print Immunization Inventory Report  
Enter a number: (1-2): 3 [ENTER]  
  
IMMUNIZATION INVENTORY REPORTS FOR MAYBERRY OPC (900A4)  
Display/Print Which of the Following?  
1. All or Selected Active Inventory  
2. Active Inventory With Zero Doses Available  
Enter a number: (1-2): 1 [ENTER]
```

Display Inventory Information for All Immunizations? YES// NO [ENTER]

Display Inventory Information for which Immunization? ANTHRAX [ENTER] 24

Select an Additional Immunization: RUBELLA [ENTER] 06

Select an Additional Immunization: [ENTER]

Display/Print on which Device: GENERIC PRINTER [ENTER] Right Margin: 80 [ENTER]

MAYBERRY OPC (900A4)
SELECTED ACTIVE IMMUNIZATION INVENTORY
DATE PRINTED: AUG 11,2015

IMMUNIZATION LOT NUMBER MANUFACTURER	STATUS	BY	DOSES UNUSED	EXPIRATION DATE STATION NUMBER
=====				
ANTHRAX PH5429DT6 BAXTER HEALTHCARE CORPORATION	ACTIVE	LT	0	DEC 31, 2015 900A4
ANTHRAX P92A8769LN SCLAVO, INC.	ACTIVE	CP	45	DEC 31, 2016 900A4
RUBELLA TC180-R ABBOTT LABORATORIES	ACTIVE	CP	73	NOV 30, 2017 NA

Select PCE Table Maintenance Option: LOT [ENTER] Immunization Lot Add/Edit/Display

IMMUNIZATION INVENTORY FUNCTIONS

Select associated VA facility from the list or enter another facility.

MAYBERRY (900)

MAYBERRY OPC (900A4)

Inventory information to be updated or displayed will be related to the selected facility.

Enter the facility name or station number: 900A4 [ENTER] MAYBERRY OPC NC OCMC 900A4

IMMUNIZATION INVENTORY FUNCTIONS FOR MAYBERRY OPC (900A4)

1. Enter/Edit Immunization Lot
2. Transfer Immunization Inventory Between Facilities
3. Display/Print Immunization Inventory Report

Enter a number: (1-2): 3 [ENTER]

IMMUNIZATION INVENTORY REPORTS FOR MAYBERRY OPC (900A4)

Display/Print Which of the Following?

1. All or Selected Active Inventory
2. Active Inventory With Zero Doses Available

Enter a number: (1-2): 2 [ENTER]

Display/Print on which Device: GENERIC PRINTER [ENTER] Right Margin: 80 [ENTER]

MAYBERRY OPC (900A4)
ACTIVE IMMUNIZATION INVENTORY - ZERO DOSES AVAILABLE
DATE PRINTED: AUG 11, 2015

IMMUNIZATION LOT NUMBER MANUFACTURER	STATUS	BY	DOSES UNUSED	EXPIRATION DATE STATION NUMBER
=====				
ANTHRAX PH5429DT6 BAXTER HEALTHCARE CORPORATION	ACTIVE	CP	0	DEC 31, 2015 900A4
MUMPS F8A5632B MERCK AND CO., INC.	ACTIVE	LT	0	NOV 30, 2015 NA

6.6. DEF Immunization Default Responses Enter/Edit

This option allows the user to enter or update information in the IMM DEFAULT RESPONSES file (#920.05). Defaults entered for a parent division will be inherited by any children divisions, unless they defined their own defaults.

When prompted with “Do you want to enter defaults for (I)mmunizations or (C)ontra/Refusals?”, enter “I” to enter defaults for Immunizations.

The user can enter defaults for Route of Administration, Site of Administration, Dose, Dose Units, Non-Standard Dose Units, and Comments.

The field, Non-Standard Dose Units should only be populated if there is no standard dose unit for this immunization (e.g, capsule, tablet, drop). However, if the dose is measured in standard units (e.g., mL), then enter the standard units in the Dose Units prompt, and leave the Non-Standard Dose Units field empty.

Select PCE Table Maintenance Option: DEF [ENTER] Immunization Default Re
Sponses Enter/Edit

Enter/Edit Immunization Default Responses

Select Facility: MAYBERRY [ENTER]

1	MAYBERRY	NC	VAMC	900
2	MAYBERRY OPC	NC	OCMC	900A4

CHOOSE 1-2: 1 [ENTER] MAYBERRY NC VAMC 900

Enter/Edit Immunization/Contra/Refusal Default Responses

Select Facility: MAYBERRY

Do you want to enter defaults for (I)mmunizations or (C)ontra/Refusals? I [ENTER]
mmunizations

Enter/Edit Immunization Default Responses

Facility: MAYBERRY (900)

```

Select IMMUNIZATION: MUMPS [ENTER] 07
ROUTE OF ADMINISTRATION: IM [ENTER] INTRAMUSCULAR IM
SITE OF ADMINISTRATION: LA [ENTER] LEFT ARM LA
DOSE: 1 [ENTER]
DOSE UNITS: mL [ENTER]
1 mL milliliter mL
2 mL/(10.h) milliliter per 10 hour mL/(10.h)
3 mL/(12.h) milliliter per 12 hour mL/(12.h)
4 mL/(2.h) milliliter per 2 hour mL/(2.h)
5 mL/(24.h) milliliter per 24 hour mL/(24.h)
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1 [ENTER] milliliter mL
NON-STANDARD DOSE UNITS: [ENTER]
COMMENTS: [ENTER]
Select IMMUNIZATION:

```

When prompted with “Do you want to enter defaults for (I)mmunizations or (C)ontra/Refusals?”, enter “C” to enter defaults for Contraindications and Refusals.

The user can enter a default Warn Until Date (i.e., reschedule date) for that contraindication or refusal. If that contraindication or refusal should have a Warn Until Date of forever (i.e., Cancel Series and stop forecasting), enter a ‘0’ (zero) for the Warn Until Date.

NOTE: If a contraindication or refusal reason does not have a default defined, it will not be selectable in CPRS.

```

Select PCE Table Maintenance Option: DEF [ENTER] Immunization Default Re
Sponses Enter/Edit

Enter/Edit Immunization Default Responses

Select Facility: MAYBERRY [ENTER]
1 MAYBERRY NC VAMC 900
2 MAYBERRY OPC NC OCMC 900A4
CHOOSE 1-2: 1 [ENTER] MAYBERRY NC VAMC 900

Enter/Edit Immunization/Contra/Refusal Default Responses

Select Facility: MAYBERRY

Do you want to enter defaults for (I)mmunizations or (C)ontra/Refusals? C [ENTER] Contr
aindications/Refusals

Enter/Edit Contra/Refusal Default Responses

Facility: MAYBERRY (900)

Select CONTRA/REFUSAL: SEVERE REACTION PREVIOUS DOSE [ENTER] VXC20
...OK? Yes// [ENTER] (Yes)
CONTRA/REFUSAL: SEVERE REACTION PREVIOUS DOSE//
WARN UNTIL DAYS: 0// [ENTER]
Select CONTRA/REFUSAL: PATIENT DECISION
...OK? Yes// [ENTER] (Yes)
CONTRA/REFUSAL: PATIENT DECISION// [ENTER]
WARN UNTIL DAYS: 30// [ENTER]

```

Select CONTRA/REFUSAL:

7.0 INFO PCE Information Only

This is a menu of options that lists entries in the files/tables for patient education, exams, health factors, immunizations, and skin tests.

7.1. PCE Information Only Menu

PCE Information Only Menu	
EDA	Active Educ. Topic List - Detailed
EDL	Education Topic List
EDI	Education Topic Inquiry
EX	Exam List
HF	Health Factor List
IM	Immunization List
SK	Skin Test List

7.1.1. Active Educ. Topic List – Detailed

This lists the current detailed definition of the goals and standards defined for the active education topics.

7.1.2. Education Topic List

This option prints a brief list of ALL Education Topics using only two fields: Inactive Flag status and Topic Name.

7.1.3. Education Topic Inquiry

This option can be used to print the definition of a specific Education Topic definition.

7.1.4. Exam List

This option lists all of the exam names, with their Active Status, that are defined in the Exam file for use with PCE.

7.1.5. Health Factor List

This option lists the Health Factors by Category, with their Active Status, that have been defined in the Health Factor file for use with PCE.

7.1.6. Immunization List

This option lists all immunizations, with their Active Status, which have been defined in the Immunization file for use with PCE.

Note: To see what CPT codes may be related to the immunization entries, print the PCE Code Mapping List.

7.1.7. Skin Test List

This option lists all skin tests, with their Active Status, that have been defined in the Skin Test file for use with PCE.

7.1.1. PCE File Inquiry

This option allows a user to lookup an entry from one of the PCE source files. The selectable files are limited to: Education Topics (#9999999.09), Exam (#9999999.15), Health Factors (#9999999.64), Immunization (#9999999.14), Imm Contraindication Reasons (#920.4), Imm Refusal Reasons (#920.5), Skin Test (#9999999.28), and Treatment (#9999999.17).

7.2. Key Concepts

- Options on the Information Only menu list clinical terminology used in the PCE files/tables to represent patient education, exams, health factors, immunizations, and skin tests.
- The terminology in these tables determines what clinical data will be collectable for these classes of clinical data.

7.3. PCE Clinical Reports

The PCE Clinical Reports options provide clinicians and managers with summary data about their patients, workload activity, and encounter counts. The reports extract data from various files in VistA, including laboratory, pharmacy, and PIMS to create output reports which have been requested by physicians throughout the VA.

Clinical Reports Menu:

PA	Patient Activity by Location
CP	Caseload Profile by Clinic
ES	PCE Encounter Summary
DX	Diagnosis Ranked by Frequency
LE	Location Encounter Counts
PE	Provider Encounter Counts

The Caseload Profile by Clinic and Patient Activity by Location reports track Critical Lab Values and Emergency Room Visits (among other things). The PCE Report Parameter Edit option on the PCE HS/RPT Parameter menu allows your site to specify which clinics in the Hospital Location file (#44) represent "Emergency Room" clinics and what tests from the Laboratory Test file (#60) should be used for looking up patient data for Glucose, Cholesterol, LDL Cholesterol and HBA1C lab results. (This is necessary since the Laboratory Test File is not standardized and each site may have customized it differently.)

Note: If month or day are not known, historical encounters will appear on encounter screens or reports with zeroes for the missing dates; for example, 01/00/95 or 00/00/94.

7.3.1. Patient Activity by Location

This report may be set up for hospital location or stop code. The report format is a summary of all selected locations. For each location, scheduling data is used to identify patients whose appointments were either scheduled, unscheduled, cancelled, or are no-shows during the patient appointment date range. VistA data for these patients is then examined for possible patient activities for admissions/discharges, emergency room encounters, and critical lab values during the patient activity date range. If any of these activities has occurred, data specific to the activity is reported along with the patient's address, phone, and future appointments that fall in the future appointment date range.

This report was developed as a measure of continuity of care. If a provider of record has his or her care-giving interrupted through clinical rotation, leave, reassignment, or for any other reason, this report may be used to get an update on patient activities in his/her caseload.

This report is also useful when care is not interrupted. Clinical staff may wish to review patient activity by clinic for events, which they might be unaware of.

Patient activities that are included in this report are:

7.3.1.1. Admission/Discharge Activities

All admissions and discharges within the selected date range are reported. If corresponding discharges exist for admissions, the discharges are shown, and vice versa; corresponding admissions are shown for discharges.

7.3.1.2. Emergency Room Clinic Activities

All Emergency Room stops within the selected date range are reported. Emergency Room visit date and time are displayed for all encounters with an identified Emergency Room stop. Emergency rooms are identified through the PCE PARAMETERS file. This data is entered by the clinical coordinator or IRM staff through the PCE Report Parameter Setup option.

7.3.1.3. Critical Lab Values

All critical lab values reported within the selected date range are presented, along with a column to identify whether the value is critically high or critically low.

```
Select PCE Clinical Reports Option: Patient Activity Report

Select FACILITY: SALT LAKE CITY SALT LAKE CITY UT 660
Select another FACILITY: <Enter>

Do you want to display encounters at Non-VA sites ? NO//

    Select one of the following:
        HA All Hospital Locations (with encounters)
        HS Selected Hospital Locations
        CA All Clinic Stops (with encounters)
        CS Selected Clinic Stops

Determine patient activity for: HS// HA All Hospital Locations (with
encounters)

Want to start each location on a new page: Y// NO

Enter PATIENT APPOINTMENT BEGINNING DATE: 9/1/18 (SEP 01, 2018)
Enter PATIENT APPOINTMENT ENDING DATE: 9/30/18 (SEP 30, 2018)

Enter PATIENT ACTIVITY BEGINNING DATE: 9/1/18 (SEP 01, 2018)
Enter PATIENT ACTIVITY ENDING DATE: Apr 29, 2019// 9/30/18 (SEP 30, 2018)

Enter FUTURE APPOINTMENT BEGINNING DATE: Apr 29, 2019// <Enter> (APR 29,
2019)
Enter FUTURE APPOINTMENT ENDING DATE: 12/30/19 (DEC 30, 2019)

DEVICE: HOME// <Enter>
Sorting appointments done

Sorting patient information done

                                         Apr 29, 2019@3:03:05 pm Page 1
Criteria for Patient Activity Report
  Location selection criteria: All Hospital Locations (with encounters)
  Patient appointment date range: Sep 01, 2018 through Sep 30, 2018
  Patient activity date range: Sep 01, 2018 through Sep 30, 2018
  Future appointment date range: Apr 29, 2019 through Dec 30, 2019

-----
Facility: SALT LAKE CITY 660
Location: ADMITTING AND SCREENING

-----
PCEPATIENT,ONE 000-45-6789
352 SW KENTWOOD RD SALT LAKE CITY UTAH 33452
Appointment criteria met:
  9/30/18 14:30      ADMITTING AND SCREENING      SCHEDULED VISIT
----- Inpatient Stays -----
  7/31/89 - present 4 WEST                      LOS: 2829
  Last Tr. Specialty: PSYCHIATRY                  Last Prov:
  Admitting Diagnosis: Disoriented

-----
Facility: SALT LAKE CITY 660
Location: ADMITTING AND SCREENING

-----
PCEPATIENT,TEN 666-45-6789 412 555-5555
555 ENDLESS ST. PITTSBURGH PENNSYLVANIA 15206
Appointment criteria met:
```

9/23/18 09:00	ADMITTING AND SCREENING	SCHEDULED VISIT
----- Emergency Room Visits -----		
9/25/18 11:30	DIABETES CLINIC	

PCEPATIENT, THREE 00-00-6788		
22 3RD AVENUE SALT LAKE CITY UTAH 84112		
Appointment criteria met:		
9/ 2/18 09:00	ADMITTING AND SCREENING	SCHEDULED VISIT
----- Critical Lab Values -----		
9/30/18	GLUCOSE	500 mg/dl
9/30/18	UREA NITROGEN	500 mg/dL

Facility: SALT LAKE CITY 660		
Location: CARDIOLOGY		

PCEPATIENT, FOUR 666-99-2222		
2237 E 1894 S Salt Lake City UTAH 84105		
Appointment criteria met:		
9/30/18 10:00	CARDIOLOGY	SCHEDULED VISIT
----- Emergency Room Visits -----		
9/30/18 09:00	CARDIOLOGY CLINIC	
Enter RETURN to continue or '^' to exit:		
Apr 29, 2019 3:03:05 pm Page 2		

Facility: SALT LAKE CITY 660		
Location: DIABETES CLINIC		

PCEPATIENT, SEVEN 000-88-9989		
470 RANDOLPH ROAD SALT LAKE CITY UTAH 33595		
Appointment criteria met:		
9/24/18 09:00	DIABETES CLINIC	SCHEDULED VISIT
----- Critical Lab Values -----		
9/30/18	GLUCOSE	500 mg/dl
9/30/18	UREA NITROGEN	500 mg/dL

Facility: SALT LAKE CITY 660		
Location: EYE CLINIC		

PCEPATIENT, EIGHT 666-12-1223		
2122 S 5TH EAST SALT LAKE CITY UTAH 84108		
Appointment criteria met:		
9/18/18 13:00	EYE CLINIC	SCHEDULED VISIT
Enter RETURN to continue or '^' to exit:		

7.3.2. Caseload Profile by Clinic

This report generates a profile of the patients in a clinic's caseload for a selected date range. One or more clinics or a stop code may be selected to represent the caseload. If a stop code is selected, a report is generated for each clinic within that stop code. The percentage and overall mean are calculated based on the patient data for all of the clinics selected. Where only one clinic is selected, these values are not applicable.

Note: There must be at least one PCE encounter within the selected date range for this report, even though there may be lab, radiology, and outpatient pharmacy occasions of service with the other timeframes (6 & 12 months).

This report combines PCE encounter, Lab, Radiology, Outpatient Pharmacy, and Admissions data. It provides a profile of the patients making up a clinic's caseload, over a representative period of time. Clinical staff will decide the appropriate date range. Report areas are demographics of clinic caseload, preventive medicine, quality of care markers, and utilization. Patient age, diagnosis, gender, Lab assay, RX, and procedure are all used to generate the patient profile.

There are three separate timeframes for the report output:

- SELECTED DATE RANGE
- THE SIX (6) MONTHS PREVIOUS TO BEGINNING DATE
- THE TWELVE (12) MONTHS PREVIOUS TO BEGINNING DATE

Search ranges are listed at the top of each report section.

DEMOGRAPHICS are based on the selected date range.

PREVENTIVE MEDICINE is based on 1) ICD codes recorded in PCE encounter diagnoses and 2) Radiology for the period 12 months previous to the beginning date.

QUALITY OF CARE MARKERS are based on Laboratory results, PCE encounter diagnoses, and scheduling data for the period six months previous to the beginning date.

UTILIZATION data is based on PCE encounters and outpatient pharmacy prescriptions for the period 12 months previous to the beginning date.

The six and twelve-month profiles probably won't change much month-to-month. How long the report takes to run varies according to the number of selected clinics, the number of encounters within that clinic, and the complexity of the patient data for any selected clinic.

7.3.3. Technical Description

This option executes the Scheduling Package Clinic Workload (SET^SDCWL3) routines to identify patients whose appointments were either scheduled, unscheduled, cancelled, or no-shows during the selected date range.

Admissions are found by a call to IN5^VADPT for each date within the selected date range. Temporary storage of this data, for report purposes is at the global node ^TMP(\$J,"ADM",DFN,ADMISSION DATE). This node is set to discharge date^room-bed^street address^address line 2^city^state^zipcode^phone number.

Emergency clinics must be defined in field 801 of the PCE PARAMETERS file, which is a multiple pointing to the HOSPITAL LOCATION file. The ER clinic names are stored permanently at the global location: ^PX(815,D0,RR1,D1,0). A call is made to SDA^VADPT for stops occurring within the selected date range for the array of clinics listed at the above global location.

Laboratory data assessed for critical values is based on the Subfile 63.04 of the Lab DATA file (63), which stores results from Chemistry, Hematology, Toxicology, RIA, Serology, and others. Critical values are identified through a pattern match of a numeric

value followed by a "*". The global location read is ^LR(LRDFN,"CH",INVERSE LAB DATE, LAB TEST FIELD NUMBER). Piece one contains the result. Piece 2 indicates a critical value and if it is high or low (e.g. *H).

```
Select PCE Clinical Reports Option: CP Caseload Profile by Clinic
                                Caseload Profile by Clinic

The overall mean values for this report will be for the clinic(s) selected which had
encounters during the selected date range.

Select clinic(s) by (H)OSPITAL LOCATION or CLINIC (S)TOP CODE: S CLINIC STOP CODE

Select the CLINIC STOP code: DIABETES

Enter ENCOUNTER BEGINNING DATE: T-30 (JUN 29, 2018)
Enter ENCOUNTER ENDING DATE: Jul 29, 2018// [ENTER] (JUL 29, 2018)

DEVICE: HOME// [ENTER]
```

Jul 29, 2018@11:21

Caseload Profile by Clinic

Clinic: DIABETES CLINIC
Compared to the mean of: DIABETES Clinic Stop
for 1 of 1 clinics with data

CASELOAD DEMOGRAPHICS for Encounter date range		Clinic		Overall
Jan 01, 2019 to Jan 31, 2019		#	%	Mean %
Number of patient encounters	40	-	-	-
Number of clinic sessions	17	-	-	-
Number of patients per clinic session	1.7	-	-	-
Median patient age in years	49	-	-	-
Patients with: Coronary Artery Disease	0	0.0	0.0	
Diabetes	3	60.0	60.0	
Hypertension	0	0.0	0.0	
Hyperlipidemia	0	0.0	0.0	
Diabetes and Hypertension	0	0.0	0.0	

PREVENTIVE MEDICINE (12 mos. prior to Jan 31, 2019)		Clinic		Overall
Jan 31, 2018 to Jan 31, 2019		#	%	Mean %
Patients who smoke.	0	0.0	0.0	
Females >50 who had a mammogram in the last year (There were 1 females >50 years of age).	0	0.0	0.0	

QUALITY OF CARE MARKERS (6 mos. prior to Mar 22, 2019)		Clinic	Overall
Jul 31, 2018 to Jan 31, 2019		#	Mean #
Average HBA1C of your patients with Diabetes	N/A	N/A	
Patients with HBA1C > 7%	0	0.0	
Patients w/ Coronary Artery Disease who smoke	0	0.0	
Ave. LDL for patients with Coronary Artery Disease (0 of 0 pats. with CAD had no LDL results.)	N/A	N/A	
Number of patients with: Glucose >240	0	0.0	
Cholesterol >200	0	0.0	
Either a Systolic bp >160 or Diastolic bp > 90	0	0.0	
Unscheduled encounters per patient.	0.0	0.0	
Emergency Room encounters per patient.	5.2	5.2	

Hospitalizations per patient.	0.0	0.0

UTILIZATION DATA (12 months prior to Jan 31, 2019 Jul 31, 2019 to Jan 31, 2019	Number #	Overall Mean #

Number of male patients	2	-
Number of female patients	3	-
Average number of encounters per patient	1.0	1.0
Average number of active outpt. medications per patient	0.0	0.0
Average pharmacy cost per patient	\$ 0.0	0.0
Press RETURN to continue...		

7.3.4. PCE Encounter Summary

This report provides a summary of PCE encounters. For the purposes of this report an encounter is any entry in the Visit File. The report can be run by location or by provider. Encounters included in the report are selected by a combination of date range, service categories, and encounter types.

Data for the selected encounters is categorized and summarized in several ways. CPT codes associated with encounters are classified by Evaluation and Management Code. Those falling into the E&M group are sorted into the categories new, established, consult, and other.

The number of unique patients is determined for each location and for all the locations selected for the report. The sum of the uniques for each location will generally be larger than the total number of uniques because a patient may be counted as a unique in more than one location but will only be counted once for the entire facility.

Three visit totals are calculated. A visit is defined as any patient activity at a location in one day. Thus, a patient having multiple encounters at a location on one day will count as one visit. The three visit totals given are total visits, inpatient visits, and outpatient visits. The sum of the inpatient and outpatient visits will not be equal to the total visits if a patient had both an inpatient and outpatient visit on the same day.

For each selected encounter an attempt is made to find an associated appointment. This is done using the Outpatient Encounter file which provides a link between encounters and appointments. Purpose of Visit data is tabulated for each appointment that is found. Purpose of Visit includes the categories C&P, 10-10, scheduled, and unscheduled.

If there is an appointment without an associated encounter it will not be tabulated on this report. Cancelled and no-show appointments do not have an associated encounter so they cannot be included in this report. Even if they could, the information on cancelled and no-show appointments stored in Scheduling is not complete making it impossible to give accurate counts.

```
Select PCE Clinical Reports <TEST ACCOUNT> Option: ES  PCE Encounter Summary
Select FACILITY: SALT LAKE CITY HCS//      UT  VAMC  660
Select another FACILITY:

Do you want to display encounters at Non-VA sites ? NO//

This report may be done by location or provider

    Select one of the following:

        L      Location
        P      Provider

Do the report by: L// Location

    Select one of the following:

        HA      All Hospital Locations (with encounters)
        HS      Selected Hospital Locations
        CA      All Clinic Stops (with encounters)
        CS      Selected Clinic Stops

Select ENCOUNTER LOCATION CRITERIA: HS// HA  All Hospital Locations (with encounters)

Enter ENCOUNTER BEGINNING DATE:  1/1/2019 (JAN 01, 2019)
Enter ENCOUNTER ENDING DATE: 1/31/2019  (JAN 31, 2019)

Select SERVICE CATEGORIES: AI//

Select ENCOUNTER TYPES: P//

DEVICE: HOME// ;;99  HOME

Sorting encounters done

Sorting appointments done


Mar 22, 2019@9:11:10 am  Page 1

PCE Encounter Summary

Criteria for Encounter Summary Report
Location selection criteria: All Hospital Locations (with encounters)
Encounter date range:      Jan 01, 1996 through Mar 22, 2019
Service categories:        AI
    A - AMBULATORY
    I - IN HOSPITAL
Encounter types:          P
    P - PRIMARY

-----
Abbreviations Used in this Report
```


E&M Codes		Appointment Type									

NEW=NEW		C&P=C&P									
EST=ESTABLISHED		10-10=10-10									
CON=CONSULT		SCH=SCHEDULED VISIT									
OTH=OTHER		UNS=UNSCHED. VISIT									

Facility: SALT LAKE CITY HCS 660											
LOCATION											
		E&M CATEGORIES				NON	NO	TOT	TOT	UNIQ	IN
PCE:	NEW	EST	CON	OTH	E&M	CPT	ENC	VIS	SSN	PAT	OUT

SCH:	C&P	10-10	SCH	UNS							
=====											
CARDIOLOGY (303)											
PCE:	0	0	0	0	1	1	2	2	2	0	2

SCH:	0	0	0	0							
DIABETIC EDUCATION-INDIV-MOD B (306)											
PCE:	0	0	0	0	0	4	4	3	3	0	3

SCH:	0	0	1	0							
ONCOLOGY (316)											
PCE:	0	0	0	0	0	1	1	1	1	0	1

SCH:	0	0	0	0							
PULMONARY CLINIC (301)											
PCE:	0	0	0	0	0	8	8	4	2	1	3

SCH:	0	0	1	0							
SALT LAKE CITY HCS 660 (totals)											
PCE:	0	0	0	0	1	14	15	8	5	1	7

SCH:	0	0	2	0							
GRAND TOTALS											
PCE:	0	0	0	0	1	14	15	8	5	1	7

SCH:	0	0	2	0							
End of the report. Press ENTER/RETURN to continue...											

7.3.5. Diagnoses Ranked by Frequency

This report lists the most frequent diagnostic codes (ICD) and the most frequent diagnostic categories that were entered for PCE outpatient encounters in your facility. These are presented in inverted frequency sequence (most frequent on top).

You can modify this report to show very selective views by choosing the elements to be included. These selection criteria include:

- The maximum number of diagnosis entries to be displayed (e.g., top 50). If this is blank, then all of the diagnoses satisfying the selection criteria will be ranked.
- Primary diagnosis or all diagnoses related to outpatient encounters.
- A date range when the PCE outpatient encounters occurred.
- Service Category (A -Ambulatory, H- Hospitalization, I -In Hospital, T- Telecommunications, E- Event (Historical), D- Daily Hospitalization Data, X-Ancillary Package Daily Data).
- Clinic Stop Code.
- Provider.
- Age of Patient.
- Sex of Patient.

```
Select PCE Clinical Reports Option: dx  Diagnosis Ranked by Frequency
Select FACILITY: SALT LAKE CITY      UT      660
Select another FACILITY: 660aa  SALT LAKE DOM UT      VAMC      660AA
Select another FACILITY: [ENTER]

Do you want to display encounters at Non-VA sites ? NO//
Select PRIMARY DIAGNOSIS ONLY (P) or ALL DIAGNOSES (A): P// All  Diagnoses (Primary
and Secondary)
Enter ENCOUNTER BEGINNING DATE:  t-300  (JUL 27, 2017)
Enter ENCOUNTER ENDING DATE: May 22, 2018//[ENTER](MAY 22, 2018)
This report will include all VA clinic encounters for all patients
unless you modify the criteria.  Do you want to modify the criteria?
Enter Y (YES) or N (NO) N// y  YES
Encounters may be selected by any combination of the following attributes:
  1  Service Category
  2  Clinic Stop Code
  3  Provider
  4  Age of Patient
  5  Sex of Patient
  6  All Encounters
Enter encounter selection attribute number(s) :  (1-6): 1,2
Select SERVICE CATEGORIES: AI// AHIT
Select CLINIC STOP: CARDIOLOGY
Select another CLINIC STOP: DIABETES
Select another CLINIC STOP: [ENTER]
Enter the maximum NUMBER OF DIAGNOSES to display in the report: 10// [ENTER]
DEVICE: HOME// [ENTER]  VAX      RIGHT MARGIN: 80//[ENTER]
                                     May 22, 2015@11:20:38 am  Page 1
                                     PCE Diagnosis Ranked by Frequency
Criteria for Frequency of Diagnoses Report
Encounter diagnoses:      All Diagnoses (Primary and Sec.)
Encounter date range:     Jul 27, 2014 through May 22, 2015
Patient date of birth:    ALL
Patient sex:              ALL
Selected clinics:         YES
Service categories:       AHIT
Maximum number of diagnoses to be displayed: 10
Facility: SALT LAKE CITY  660
```

Clinic Stop: CARDIOLOGY (143)

Total number of Encounters meeting the selection criteria: 71

Total number of Diagnoses for these Encounters: 45

Diagnoses/Encounter ratio: 0.63

PCE Diagnosis Ranked by Frequency

10 Most Frequent ICD Diagnoses:

Code	Description	Frequency
100.0	LEPTOSPIROS ICTEROHEM	6
401.1	BENIGN HYPERTENSION	6
100.81	LEPTOSPIRAL MENINGITIS	3
342.01	FLAC HEMIPLEG & HEMIPAR, DOM.	2
501.	ASBESTOSIS	2
142.0	MALIG NEO PAROTID	2
429.3	CARDIOMEGALY	2
100.89	LEPTOSPIRAL INFECT NEC	2
701.0	CIRCUMSCRIBE SCLERODERMA	1
500.	COAL WORKERS' PNEUMOCON	1

10 Most Frequent ICD Diagnostic Categories:

Diagnostic Category	Count
CIRCULATORY SYSTEM	10
INFECTIOUS & PARASITIC	8
NERVOUS SYSTEM	8
MENTAL DISEASES & DISORDERS	4
SKIN,BREAST,SUBCUTANEOUS T	3
RESPIRATORY SYSTEM	3
MYELOPROLIFERATIVE,NEOPLASIA	2
DIGESTIVE SYSTEM	2
EAR, NOSE, MOUTH & THROAT	2
INJURY,POISONING,DRUG TOXICITY	1

Facility: SALT LAKE CITY 660

Clinic Stop: DIABETES (146)

Total number of Encounters meeting the selection criteria: 26

Total number of Diagnoses for these Encounters: 17

Diagnoses/Encounter ratio: 0.65

PCE Diagnosis Ranked by Frequency

10 Most Frequent ICD9 Diagnoses:

Code	Description	Count
1. 100.0	LEPTOSPIROS ICTEROHEM	2
2. 401.1	BENIGN HYPERTENSION	2
3. 309.81	PROLONG POSTTRAUM STRESS	2
4. 250.01	DIABETES MELLI W/O COMP TYP I	2
5. 123.2	TAENIA SAGINATA INFECT	2
6. 342.01	FLAC HEMIPLEG & HEMIPAR, DOM.	1
7. 345.01	GEN NONCNV EP W INTR EP	1
8. 367.0	HYPERMETROPIA	1
9. 398.99	RHEUMATIC HEART DIS NEC	1
10. 371.53	GRANULAR CORNEA DYSTRPHY	1

10 Most Frequent ICD9 Diagnostic Categories:

Diagnostic Category	Count
1. CIRCULATORY SYSTEM	3
2. EYE	3
3. NERVOUS SYSTEM	3
4. MENTAL DISEASES & DISORDERS	2
5. INFECTIOUS & PARASITIC	2
6. ENDOCRINE,NUTRIT,METABOLIC	2
7. DIGESTIVE SYSTEM	2

The following selected Facilities had no encounters that met the selection criteria.

SALT LAKE DOM 6001

End of the report.

8 Most Frequent ICD10 Diagnoses:		
Code	Description	Freq.
A00.0	Cholera due to <i>Vibrio cholerae</i> 01, biovar <i>cholerae</i> 3	
E08.649	Diabetes due to underlying condition w hypoglycemia w/o coma	2
W54.OXXA	Bitten by dog, initial encounter	1
I11.0	Hypertensive heart disease with heart failure	1
I10.	Essential (primary) hypertension	1
H21.253	Iridoschisis, bilateral	1
E11.319	Type 2 diabetes w unsp diabetic rtnop w/o macular edema	1
A01.00	Typhoid fever, unspecified	

7.3.6. Location Encounter Counts

This report counts PCE outpatient encounters in a date range by location. The location selection can be based on facility, hospital location(s), or clinic stop(s). The report can be run for all hospital locations or clinic stops in a facility or selected hospital locations, or clinic stops.

```

Select PCE Clinical Reports Option: LE  Location Encounter Counts

Select FACILITY: SALT LAKE CITY          UT          660
Select another FACILITY: [ENTER]

Do you want to display encounters at Non-VA sites ? NO//

Enter ENCOUNTER BEGINNING DATE:  T-150  (DEC 26, 2017)
Enter ENCOUNTER ENDING DATE:  May 24, 2018// [ENTER]  (MAY 24, 2018)

    Select one of the following:
        HA          All Hospital Locations
        HS          Selected Hospital Locations
        CA          All Clinic Stops
        CS          Selected Clinic Stops

Determine encounter counts for: HA// HS  Selected Hospital Locations

Select HOSPITAL LOCATION: CARDIOLOGY          PCEPROVIDER,ONE
Select another HOSPITAL LOCATION: DIABETES CLINIC          PCEPROVIDER,ONE
Select another HOSPITAL LOCATION: ENDOCRINOLOGY          PCEPROVIDER,TEN
Select another HOSPITAL LOCATION:[ENTER]

Select SERVICE CATEGORIES: AI//

DEVICE: HOME// [ENTER]

```

PCE Location Encounter Counts

Criteria for Hospital Location Encounter Count Report

Location selection criteria: Selected Hospital Locations
 Encounter date range: Dec 26, 2017 through May 24, 2018
 Service categories: AI
 A - AMBULATORY
 I - IN HOSPITAL

Facility: SALT LAKE CITY 660

Hospital Location (Stop Code)	No. of Encounters
CARDIOLOGY (303)	72
DIABETES CLINIC (306)	28
ENDOCRINOLOGY (305)	23
Total facility encounters	123
Total encounters	123

End of the report.

7.3.7. Provider Encounter Counts

This report lists provider counts related to PCE outpatient encounters. The selection criteria include facility, service category, encounter provided, and date range.

Person Class selection is based on the PERSON CLASS file, used to support Ambulatory Care Reporting. Person Class entries are composed of three pieces:

- Occupation (required in class definition)
- Specialty (optional)
- Sub-specialty (optional)

Once the selection criteria are chosen, the user can request a detailed or a summary report. The detailed report gives totals by date and hospital location (clinic) for each provider. The summary report lists total encounters for each provider. In patch PX*1*211 CPRS Teams were added as an additional way to select the providers to run the report on.

```
Select PCE Clinical Reports Option: PE  Provider Encounter Counts
Select FACILITY: SALT LAKE CITY  UT 660
Select another FACILITY: [ENTER]

Do you want to display encounters at Non-VA sites ? NO//

Enter ENCOUNTER BEGINNING DATE: T-100 (FEB 14, 2018)
Enter ENCOUNTER ENDING DATE: May 24, 2018//[ENTER] (MAY 24, 2018)

Select SERVICE CATEGORIES: AI//[ENTER]

Select one of the following:

A All Providers
P Primary Providers
S Selected Providers
C Selected Person Classes
```

```

T          Select Providers by CPRS Team (OE/RR List)

Select ENCOUNTER PROVIDER CRITERIA: A// All Providers (with encounters)
Select one of the following:

S          Summary
D          Detail by clinic and date

Which type of report: S// [ENTER] Summary

DEVICE: HOME// [ENTER]
Sorting encounters done

May 24, 2018@2:18:09 pm Page 1
PCE Provider Encounter Counts

Criteria for Provider Encounter Summary Report
Provider selection criteria: Selected Providers
Report date range: Feb 14, 2018 through May 24, 2018
Service categories: AI
A - AMBULATORY
I - IN HOSPITAL

Facility: SALT LAKE CITY 660
(Person Class)
Provider (Occupation+Specialty+Subspecialty) Encounters
-----
PCEPROVIDER,ONE (Nursing Service+Nursing Administrato..) 3
PCEPROVIDER,TWO (Pharmacy Services) 6
PCEPROVIDER,SIX (Unknown) 15
PCEPROVIDER,NINE (Pharmacy Services) 10
PCEPROVIDER,TEN (Medical Servcies) 92
PCEPROVIDER,FOUR (Eye and Vision Services+Ophthalmic Med) 27
PCEPROVIDER,FIVE (Physician Assistant+Medical) 4
PCEPROVIDER,EIGHT(Physician) 7
Total facility encounters 164
Total encounters 164

End of the report.

```

This Selected Person Classes option lets you compile a report of selected Person Classes based on occupation, specialty, and/or sub-specialty. A wild card (*) may be entered as a response for any of the Person Class pieces. For example, if you want a report on every provider from a specific specialty, occupation would be "*", specialty would be the specific specialty, and sub-specialty would be "*."

```

Select PCE Clinical Reports Option: PE Provider Encounter Counts

Select FACILITY: SALT LAKE CITY// <Enter> UT 660
Select another FACILITY:

Do you want to display encounters at Non-VA sites ? NO//

Enter ENCOUNTER BEGINNING DATE: T-300 (APR 13, 2018)
Enter ENCOUNTER ENDING DATE: Feb 07, 2019//<Enter> (FEB 07, 2019)

Select SERVICE CATEGORIES: AI//<Enter>
Select one of the following:
A All Providers (with encounters)
P Primary Providers (with encounters)
S Selected Providers
C Selected Person Classes

```

```

Select ENCOUNTER PROVIDER CRITERIA: S// C Selected Person Classes
Select PERSON CLASS (OCCUPATION, SPECIALTY, SUBSPECIALTY)

Select OCCUPATION (enter * for all, return to end selection): *
The currently selected OCCUPATION is: *
Select SPECIALTY (enter * for all, return to change OCCUPATION): PHYSICAL
THERAPIST
Select SUBSPECIALTY (enter * for all): *

Your Person Class Selection was:
OCCUPATION: *
SPECIALTY: Physical Therapist
SUBSPECIALTY: *
Is this selection correct? YES

The currently selected OCCUPATION is: *
  Select SPECIALTY (enter * for all, return to change OCCUPATION): <Enter>

Select another PERSON CLASS OCCUPATION

  Select OCCUPATION (enter * for all, return to end selection): <Enter>

    Select one of the following:
      S Summary
      D Detail by clinic and date

Which type of report: S// <Enter> Summary
DEVICE: HOME// <Enter> VAX RIGHT MARGIN: 70//<Enter>

Sorting encounters done

                                Feb 07, 2019@8:21:03 am Page 1

PCE Provider Encounter Counts
Criteria for Provider Encounter Summary Report
  Provider selection criteria: Selected Person Classes
  Report date range:         Apr 13, 2018 through Feb 07, 2019
  Service categories:       AI
    A - AMBULATORY
    I - IN HOSPITAL
Selected Person Classes:
  Occupation: *
  Specialty: Physical Therapist
  Subspecialty: *
-----
Facility: SALT LAKE CITY 660

      Person Class
Provider      (Occupation+Specialty+Subspecialty)  Encounters
-----
PCEPROVIDER,ONE  (Respiratory, Rehabil...+Physical  25
                  Therapist+Clinical Electrophys...)
PCEPROVIDER,TWO  (Respiratory, Rehabil...+Physical   5
                  Therapist+Clinical Electrophys...)
                  ---
                  Total facility encounters 30
                  Total encounters 30

End of the report.

```

7.4. Key Concepts

- You can produce reports for Patient Activity by Location, Caseload Profile by Clinic, PCE Encounter Summary, Frequency of Diagnosis, Location Encounter Counts, and Provider Encounter Counts.
- All reports can be customized to show only specified date ranges, clinics, providers, types of encounters (cancelled, walk-ins, etc.), etc.
- The reports extract data from various files in VistA, including laboratory, pharmacy, and PIMS to create output reports which have been requested by physicians throughout the VA.
- Patient Activity by Location provides a measure of continuity of care. If a provider of record has his or her care-giving interrupted through clinical rotation, leave, reassignment, or for any other reason, this report may be used to get an update on patient activities in his/her caseload.
- PCE Encounter Summary provides a summary of clinic workload based on the evaluation and management codes associated with encounters.

7.5. Missing Data Report

The Missing Data Report (MDR) option is available from the PCE Coordinator menu. The MDR identifies CIDC data elements missing from PCE.

Who can use this report?

This report provides the HIMS (Health Information Management Systems) staff the ability to sort encounters missing CIDC data using a variety of specific data items. It allows the printing of two formats, statistics versus detail, in order to perform trending for possible follow-up with providers for education/training purposes.

Note: The MDR must be printed to a 132 column device in order to view the entire data set.

```
PCE Missing Data Report

Would you like to include ALL Data Sources? YES//

      **** Date Range Selection ****

Beginning date: 1/1/2018  (JAN 01, 2018)
      Ending date: 12/31/2018  (DEC 31, 2018)
              *** Report Sort Selection ***

(1)  DATA SOURCE
(2)  CPT
(3)  DIAGNOSIS
(4)  PATIENT
```


(5) ELIGIBILITY

Enter number between 1 and 5: 2

Select one of the following:

D DETAILED REPORT
S STATISTICS ONLY

Select report type: DETAILED REPORT//

This report requires 132 column output.

DEVICE: HOME// ;132;999 HOME

PCE MISSING DATA REPORT
MAR 22,2019@10:52:39
By Clinic, Provider, and Date
JAN 1,2018 through DEC 31,201

8

Page 1

Patient	SSN	Date/Time	Enc. ID	Creat
ed by User	Defect			
=====				
=====				

1 CARY'S CLINIC

Unknown

SORT VALUE: CPT= Unknown

DEC 03, 2018:

CRPATIENT,TWO 666-22-8828 DEC 03, 2018@09:07:371FQ3-TEST PCEPROVIDER, ONE
Visit is missing a Procedure Code

TOTAL DEFECTS FOR 1FQ3-TEST: 1

TOTAL DEFECTS FOR DEC 03, 2018: 1

TOTAL ENCOUNTERS FOR DEC 03, 2018: 1

TOTAL DEFECTS FOR SORT VALUE - Unknown: 1

TOTAL ENCOUNTERS FOR SORT VALUE - Unknown: 1

TOTAL DEFECTS FOR Unknown: 1

TOTAL ENCOUNTERS FOR Unknown: 1

TOTAL DEFECTS FOR 1 CARY'S CLINIC: 1

TOTAL ENCOUNTERS FOR 1 CARY'S CLINIC: 1

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

PCE MISSING DATA REPORT
MAR 22,2019@10:52:45
By Clinic, Provider, and Date
JAN 1,2018 through DEC 31,201

8

Page 2

Patient	SSN	Date/Time	Enc. ID	Creat
ed by User	Defect			
=====				
=====				

```

Mental Health
Unknown
  SORT VALUE:  CPT= 99211
    MAY 24, 2018:
-----
CRPATIENT,ONE          666-11-2222  MAY 24, 2018@10:00  1FP1-TEST          TASKM
AN,PROXY U      Procedure: 86710 missing assoc. DXs

                      Procedure: 99211 missing assoc. DXs

                      TOTAL DEFECTS FOR 1FP1-TEST:  2

                      TOTAL DEFECTS FOR MAY 24, 2018:  2
                      TOTAL ENCOUNTERS FOR MAY 24, 2018:  1
                      TOTAL DEFECTS FOR SORT VALUE - 99211:  2
                      TOTAL ENCOUNTERS FOR SORT VALUE - 99211:  1
                      TOTAL DEFECTS FOR Unknown:  2
                      TOTAL ENCOUNTERS FOR Unknown:  1
TOTAL DEFECTS FOR Mental Health:  2
TOTAL ENCOUNTERS FOR Mental Health:  1

GRAND TOTAL NUMBER OF DEFECTS:  3
GRAND TOTAL NUMBER OF ENCOUNTERS = 2

```

7.6. Accounting of Immunization Disclosures Report

The Accounting of Immunization Disclosures Report [PXV IMM DISCLOSURE REPORT] option is available from the PCE Coordinator Menu [PX PCE COORDINATOR MENU]. This option is used for generating a list of immunization administration records transmitted to external agencies. This option allows for a date range selection as well as one, multiple or all agencies and one, multiple or all patients. The list is sorted by disclosure date/time, agency, and then by patient.

Note: This report must be printed to a 132 column device in order to view the entire data set.

```

Select PCE Coordinator Menu Option: DIS <ENTER> Accounting Of Immunization Disclosures
Report

  BEGIN DATE: T-30 <ENTER>  (MAY 23, 2016)

  END DATE: TODAY//T <ENTER> (JUN 22, 2016)

  You may select a single or multiple AGENCIES,
  or enter ^ALL to select all AGENCIES.

  Select AGENCY: ^ALL <ENTER>

  You may select a single or multiple PATIENTS,
  or enter ^ALL to select all PATIENTS.

  Select PATIENT: ^ALL <ENTER>

This report is designed for a 132 column format (compressed).

DEVICE: HOME// 0;132;9999 <ENTER>  SSH VIRTUAL TERMINAL

```

ACCOUNTING OF DISCLOSURES REPORT

Report printed on: Jun 22, 2016@14:35:17

Date Range: 5/23/16 - 6/22/16

Agency(ies): ALL

Page: 1

Patient(s):

ALL

Info Disclosed: Name, DOB, Sex, Race, Ethnicity, Mother Maiden Name, Place of Birth, Address, Phone Number, NOK, Immunization Data
Purpose: Record and track a complete immunization history for the purpose of public health care coordination

DT DISCLOSED IMMUNIZATION	DISCLOSED TO	ADMIN DT	PATIENT
6/22/16@02:00	WE		TESTPAT,VIMM(9876)
VARICELLA		5/25/16@17:20	
6/22/16@02:00	WIR		TESPATNM,ONE(0738)
INFLUENZA, HIGH DOSE SEASONAL		5/23/16@21:23	
6/22/16@13:51	FLORIDA IIR		TESTPAT,VIMM(9876)
HIB-HEP B		5/25/16@17:18	
6/22/16@14:54	GEORGIA IMMUIZATION REGISTRY		TESTPAT,VIMM(9876)
HIB-HEP B		5/25/16@17:18	

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

Select PCE Coordinator Menu Option:

8.0 Supplementary Material

8.1. Helpful Hints

The Automated Information Collection System (AICS) package includes a Print Manager that allows sites to define reports that should print along with the encounter forms. This can save considerable time preparing and collating reports for appointments. See the Automated Information Collection System User Manual for instructions.

You can add Health Summary, Problem List, and Progress Notes as actions to PCE, to allow quick access to these programs. When you press the [RETURN] key at the quit prompts (or up-arrow out), you are automatically returned to PCE.

Since problems can occur if you delete patients (the internal entry number of the file can be reassigned, causing discrepancies in the data), we recommend that you should NEVER delete any patients.

If you see zeroes instead of numbers on encounter dates (e.g., 00/00/95 or 01/00/96)—on reports or encounter displays—they are for Historical Encounters where the exact date is not known.

Shortcuts

After Diagnosis has been entered, if the Provider Narrative is an exact match, you can enter = and the diagnosis is duplicated.

The equals sign (=) can also be used as a shortcut when selecting an action plus encounters or appointments from a list in a single response (e.g., Select Action: ED=2).

To quickly add or edit encounter information, select an appointment number at the first appointment screen.

8.2. Frequently Asked Questions

Q: What is the 10/1/96 mandate and how does PCE fit into it?

A: The Veterans Health Administration has determined that it must have adequate, accurate, and timely information about each ambulatory care encounter/service provided in order to enhance patient care and to manage our health care resources into the future. Effective October 1, 1996, VHA facilities are required to report each ambulatory encounter and/or ancillary service. Provider, procedure, and diagnosis information is included in the minimum data set that will be reported to the National Patient Care Data Base (NPCDB). The Ambulatory Data Capture Project (ADCP) was formed to coordinate the various VistA packages involved in meeting this mandate.

Patient Care Encounter (PCE) ensures that every encounter has an associated provider(s), procedure code(s), and diagnostic code(s), in accordance with this mandate.

Software necessary to support ADCP:

- Automated Information Collection System (AICS) and other capture solutions
- Patient Care Encounter (including):
 - Visit Tracking v.2.0
 - Patch SD*5.3*27
 - Patch GMT*2.7*8
- Problem List
- Patient Information Management System
- National Patient Care Data Base.

Other Patches involved in the 10/1/96 mandate:

PATCH	DESCRIPTION
XU*8*27	Person Class File and Utilities
IB*2*60	Collects Type of Insurance, passes active Ambulatory Surgery Procedure codes to PCE Enables entry of providers, and diagnoses interactively into PCE
RA*4.5*4	Interfaces with PCE to pass provider and procedure data for ambulatory Radiology/Nuclear Medicine encounters
LR*5.2*127	Interfaces with PCE to pass provider and procedure data for ambulatory Laboratory encounters
IBD*2.1*2	AICS Manual Data Entry functionality
GMRV*3*3	Measurement Data collected via AICS passed through PCE Device Interface to Vitals/Measurement Pkg
SD*5.3*44	Ambulatory Care Reporting Patch

Q. How does PCE collect and report on diagnosis and procedures that are checked off on the DIAGNOSIS and CPT PROCEDURE tool kit boxes on Encounter Forms?

A: Items that are checked off in the above mentioned tool kit boxes are validated and stored by PCE into PCE files and then shared with other subscribing packages such as Scheduling.

Two PCE Health Summary Components, Outpatient Diagnosis and Outpatient Encounter, display diagnosis and procedure information:

- The Outpatient Diagnosis Component displays the date of the encounter, the facility, the hospital location, the encounter eligibility, the provider(s), the diagnoses, ICD-9 or ICD-10 code, ICD-9 or ICD-10 text and Provider Narrative.

- The Outpatient Encounter component displays all the information included in the Outpatient Diagnosis component plus the procedure(s), CPT code, short description and Provider Narrative.

If an immunization or skin test is collected by PCE through any of the four data collection interfaces PCE supports, data is stored in the procedure file and the Immunization or Skin Test file. Immunization or Skin Test information is included in the Outpatient Encounter component displays.

In addition, there are separate PCE Skin Test and Immunization components which only display information specific to Skin Tests and Immunizations. The Immunization component displays immunization, series, date, facility, and reaction. The Skin Test component displays skin test, reading, results, reading date, facility.

If you want to display Patient Education, Examinations, and Health Factor information using the PCE Health Summary components, check the specific EF tool kit boxes. Otherwise that information is to be entered manually either through AICS manual data entry or PCE manual data entry.

PCE also exports six clinical reports. Two of those reports display diagnosis data related to the numbers of patients associated with the identified diagnoses: Caseload Profile by Clinic and Diagnosis Ranked by Frequency.

Q: Explain how "Health Factors" in PCE and AICS are to be used and how this data may eventually be shared within a VISN. How are the level/severity modifiers (SEVERE, MOD and MIN) used in health factors when the health factors are not consistent with such quantification?

A: Here's a little background. The Indian Health Service used the Health Factors originally. The HEAVY, MODERATE, MINIMUM SEVERITY modifiers can be used with a health factor if clinicians wish to define their factors in a manner that makes these modifiers useful. They do not have to be used where they do not make sense.

AICS allows encounter form designers to include health factors on their encounter forms, with or without these modifiers. The health factors that are checked off by clinicians can be captured via scanning and stored in the V Health Factor file.

The initial set of health factor entries was defined by Indian Health Service. Additional health factors, based on feedback from a supporting clinical team, and the Ambulatory Care EP were added as part of the original development of PCE.

The Health Summary package has a Health Factor component which shows the latest health factors for each health factor category. If modifiers were collected for the health factors, they would be displayed in this component.

The health factor information can be viewed as risk assessment or risk factor data which could provide useful information to guide the clinician as the care giver. For example, the PCE package includes a predefined clinical reminder for determining whether tobacco education needs to be given to the patient. The

Health factors distributed with PCE include the Health factor category of TOBACCO and within that category of health factors is a factor for "LIFETIME NON-SMOKER." If a clinician had a patient who never has smoked or used any form of tobacco, the reminder will not come up for the patient if the health factor for "LIFETIME NON-SMOKER" has been captured off the encounter form.

9.0 Device Interface Error Reports

The PCE Device Interface Error Report lets you look up PCE device interface errors by Error Number, Error Date and Time, Encounter Date and Time, or by Patient Name.

```
Select PCE Coordinator Menu Option: die  PCE Device Interface Error Report
  Select one of the following:
      ERN      Error Number
      PDT      Processing Date and Time
      EDT      Encounter Date and Time
      PAT      Patient Name
```

```
Look up PCE device interface errors based on: ERN//  Error Number
Enter the beginning error number:  (1-4): 1// [ENTER]
Enter the ending error number:  (1-4): 4// [ENTER]
```

```
DEVICE: HOME// [ENTER] VAX      RIGHT MARGIN: 80// [ENTER]
```

May 24, 2018@4:10:05 pm Page 1

PCE Device Interface Error Report

Report based on Error Numbers 1 through 4.

Error Number: 1

Patient: PCEPATIENT,ONE 000-45-6789
Encounter date: May 06, 2018@14:53:17
Processing date: May 06, 2018@16:18:53

File: 9000010.07 (V POV) Field .04 (PROVIDER NARRATIVE)
Error message: Missing Required Fields
Node: 0

Original:
Updated: 2016^1026^^244^^^^^^^S^^^20

File: 9000010.07 (V POV) Field .04 (PROVIDER NARRATIVE)
Error message: Missing Required Fields
Node: 0

Original:
Updated: 2016^1026^^244^^^^^^^S^^^20

Error Number: 2

Patient: PCEPATIENT,ONE 000-45-6789
Encounter date: May 06, 2018@14:53:17
Processing date: May 06, 2018@16:38:59
File: 9000010.07 (V POV) IEN: 54 Field .04 (PROVIDER NARRATIVE)
Error message: Not Stored = 2X3
Node: 0 ETC.

10.0 Glossary

ADCP: Ambulatory Data Capture Project. ADCP was formed to coordinate the various VistA packages involved in meeting this mandate. AICS Automated Information Collection System, formerly Integrated Billing, the program that makes Encounter Forms.

Action: A functional process that a clinician or clerk uses in the PCE computer program. For example, "Update Encounter" is an action that allows the user to pick an encounter and edit information that was previously entered (either through PCE or the PIMS Checkout process), or add new information (such as an immunization or patient education).

Appointment: A scheduled meeting with a provider or at a clinic; can include several encounters with other providers or clinics for tests, procedures, etc.

Checkout Process: Part of Medical Administration (the PIMS package), the checkout process can create appointments which are entered into the PCE component.

Clinic: An entry in the HOSPITAL LOCATION File #44 with a TYPE="C". Clinics must have stop codes in compliance with their restriction type. (See: Conforming Clinics; Non-conforming Clinics).

Clinician: A doctor or other provider in the medical center who is authorized to provide patient care.

Conforming Clinics: Clinics that have stop codes in compliance with their restriction types. Stop codes are used in accordance to their assigned restriction types. Stop codes with restriction type 'P' can only be used in the primary stop code position. Stop codes with restriction type 'S' can only be used in the secondary stop code position. Stop codes with restriction type 'E' can be used in either the primary or secondary stop code position.

CPRS: Computerized Patient Record System, a clinical record system which integrates many VistA packages to provide a common entry and data retrieval point for clinicians and other hospital personnel.

CPT: Common Procedure Terminology; a method for coding procedures performed on a patient, for billing purposes.

CSV: Code Set Versioning is mandated under the Health Information Portability and Accountability Act (HIPAA). PCE uses the Lexicon APIs that support CSV, this allows users to select codes based upon a date that an event occurred with the Standards Development Organization (SDO)-established specific code that existed on that event date.

Encounter: Each patient meeting with a provider, during an appointment, by telephone, or as a walk-in. A patient can have multiple encounters for one appointment or during a single visit to a VAMC.

Encounter Form: A paper form used to display data pertaining to an outpatient visit and to collect additional data pertaining to that visit. The AICS package is automating encounter forms.

Episode of Care: Many encounters for the same problem can constitute an episode of care. An outpatient episode of care may be a single encounter or can encompass multiple encounters over a long period of time. The definition of an episode of care may be interpreted differently by different professional services even for the same problem. Therefore, the duration of an episode of care is dependent on the viewpoints of individuals delivering or reviewing the care provided.

Health Summary: A Health Summary is a clinically oriented, structured report that extracts many kinds of data from VistA and displays it in a standard format. The individual patient is the focus of health summaries, but health summaries can also be printed or displayed for groups of patients. The data displayed covers a wide range of health-related information such as demographic data, allergies, current active medical problems, laboratory results, etc.

Indian Health Service (IHS): IHS developed a computer program similar to VA's VistA, which contains Patient Care Component (PCC) from which PCE and many of its components were derived.

Inpatient Visit: Inpatient encounters include the admission of a patient to a VAMC and any clinically significant change related to treatment of that patient. For example, a treating specialty change is clinically significant, whereas a bed switch is not. The clinically significant visits created throughout the inpatient stay would be related to the inpatient admission visit. If the patient is seen in an outpatient clinic while an Inpatient, this is treated as a separate encounter.

Integrated Billing (IB): A VistA package responsible for identifying billable episodes of care, creating bills, and tracking the whole billing process through to the passing of charges to Accounts Receivable (AR). Includes the Encounter Form utility.

MCCR: Medical Care Cost Recovery, a VistA entity which supports Integrated Billing and many data capture pilot projects related to PCE.

Non-conforming Clinics: Clinics with stop codes that do not comply with the assigned stop code restriction types of P=Primary, S=Secondary and E=Either.

NPCDB: National Patient Care Data Base, a database maintained in Austin which stores the minimum data set for all ambulatory care encounters.

Occasion of Service: A specified instance of an act of service involved in the care of a patient or consumer which is not an encounter. These occasions of service may be the result of an encounter; for example, tests or procedures ordered as part of an encounter. A patient may have multiple occasions of service per encounter or per visit.

Outpatient Visit: The visit of an outpatient to one or more units or facilities located in or directed by the provider maintaining the outpatient health care services (clinic, physician's office, hospital/medical center) within one calendar day. Outpatient encounters include scheduled appointments and walk-in unscheduled visits. A clinician's telephone communications with a patient may be represented by a separate visit entry.

Person Class: An enhancement to the New Person file, XU*8*27 NEW PERSON File Patch (8/5/96), which enables all VAMC providers to be assigned a Profession/ Occupation code (Person Class) so that a Person Class can be associated with each ambulatory patient encounter by October 1, 1996.

Procedure (CPT): A test or action done for or to a patient that can be coded with the CPT coding process.

Provider: A person who furnishes health care to a consumer; such as a professionally licensed practitioner who is authorized to operate a health care delivery facility. This definition includes an individual or defined group of individuals who provide a defined unit of health care services (defined = codable) to one or more individuals at a single session.

Standard Code: There are a number of systems to classify and code medical terminology, examples include CPT (Current Procedural Terminology), ICD (International Classifications of Diseases), and SNOMED CT (Systemized Nomenclature of Medicine- Clinical Terms)

Stop Code: A three-digit number corresponding to an additional stop/service a patient received in conjunction with a clinic visit. Stop code entries are used so that medical facilities may receive credit for the services rendered during a patient visit.

Visit: Each encounter with a provider during a patient's appointment; can also be a telephone call or a walk-in.

Visit Tracking: A VistA package which links patient-related information in a file structure that allows meaningful reporting and historically accurate categorization of patient events and episodes of care. It was originally a separate package but was made part of PCE by patch PX*1*76.

VistA: Veterans Information System Technology Architecture.