VistA Monograph

October 2013

Office of Information Technology,
Office of Product Development
And
Veterans Health Administration,
Office of Information and Analytics
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Introduction to The VistA Monograph

This Monograph provides an overview of the Veterans Health Information Systems and Technology Architecture information system—VistA—used by the Veterans Health Administration (VHA) of the U.S. Department of Veterans Affairs (VA) in serving America’s veterans through the provision of quality health care which enhances our Veterans’ health and well-being.

VistA Development Historical Overview

As Health Information Technology (HIT) adoption—particularly the implementation of Electronic Health Records (EHR) by providers and health systems—increases across America, VHA can proudly and rightfully claim to have pioneered many aspects of the enterprise-wide HIT/EHR discipline. VistA’s patient-centric focus embodies the clinical workflow processes that support VA’s models of care, and VistA has enabled measurable improvements in health outcomes.

VistA had its origins in the collaboration of VA clinicians and HIT staff who capitalized on 1970’s and 1980’s emerging technology capabilities and created a better-informed way to serve Veterans and the Public’s Health. Groups of clinical and IT specialists deployed locally-developed computer applications to enhance patient care. Though developed in a geographically and organizationally diverse fashion, these applications were based in the MUMPS computer language. (MUMPS is an acronym for the Massachusetts General Hospital Utility Multi-Programming System; the language, also known as M, remains prevalent in the health care arena and is the backbone of VistA and other well-known EHRs.) This decision to rely on MUMPS made it possible for these local development teams—often euphemistically known as “the Hard Hats”—to integrate these diverse applications, leading in 1982 to the forerunner to VistA, the Decentralized Hospital Computer Program (DHCP.) DHCP evolved into VistA commencing in 1996; a key element of this evolution was the development and deployment of the Computerized Patient Record System (CPRS)—a graphical user interface (GUI) that interacts with the VistA kernel of common functions and integrated applications via reusable interfaces—which has been widely recognized as a premier, tightly-integrated Computerized Physician Order Entry (CPOE) system, reflecting the direct role of clinicians in the development of VistA and its order management system.

As of this writing, the recently announced “VistA Evolution” portends the migration of VistA into an ever-more-capable HIT and EHR system for use not only “Intra-VHA” but with robust capabilities enhancing use “Inter-VHA,” most notably with the Department of Defense in the
advent of interoperable Electronic Health Record (iEHR) activities between the two Departments.

**Why a VistA Monograph?**
Owing to the myriad capabilities of VistA, and its ongoing evolution, VA deems it important to present and maintain the *VistA Monograph*. Collaboratively reviewed by numerous program offices and subject matter experts across VA, the *Monograph* is jointly maintained by the VA Office of Information Technology’s Product Development office, and VHA’s Office of Information and Analytics.

The purpose of the *Monograph* is to present a succinct and user-friendly overview of VHA’s VistA—most notably of the approximately 200 modules and applications comprising VistA—in general purpose language that provides basic information on the capabilities of each module. The *Monograph*, commencing with this version, also provides additional resources for readers interested in acquiring additional technical information on VistA, and identifies which offices within VA and VHA bear responsibility for maintaining *VistA Monograph* application/module descriptions moving forward.

**What is different in this version of the VistA Monograph?**

This version of the *Monograph*:
1. Introduces a new template format intended to enhance the appearance of and information within each VistA module’s description in the document.
2. Provides in each VistA module’s description (where applicable) identification of the relevant VHA Business Function Framework (BFF) “Line of Business” and “Function” allowing “line of sight” linkage between the respective modules and the BFF. Complete information on the BFF is available at [http://vaww.esm.infoshare.va.gov/sites/ba/default.aspx](http://vaww.esm.infoshare.va.gov/sites/ba/default.aspx)
3. Provides new table of content and index presentations, allowing for locating modules either alphabetically or by IT portfolio grouping (as was used in pre-2013 versions of the document) or primary functional area.
4. Identifies for each VistA module the responsible business owner office, VHA Health Systems Informatics or Strategic Investment Management Portfolio, and VA OIT Product Development section.
5. Includes external resource listing and depicts information sources used in the preparation of the document.
6. Removes references to “ HealtheVet VistA:” the series of envisioned VistA enhancements collectively referred to in previous editions of the Monograph as HealtheVet-VistA will be subsumed as appropriate under the “VistA Evolution” described above. (NOTE: Readers are encouraged to carefully differentiate “HealtheVet-VistA from the Veteran-facing array of products and services called “My HealtheVet”—a series of increasing, and increasingly vital, products and services relied upon heavily by VHA—and by the Veterans VHA serves, and their caregivers.

Planned for future versions of the Monograph:

1. Screen shots for selected modules.
2. Transition of the Monograph to a “live” searchable online presence, evolving from the current state “static” posting of a pdf of the document on a web site.
3. Inclusion of additional technical information for selected modules, presented as appendices.
4. Schedules for when and how future Monograph updates will occur.
5. Listings of emerging VistA applications.
6. Listings of other widely-used/critical applications that are NOT VistA modules per se but whose importance merits mention in this “service catalog.”
7. Descriptions of “VistA Core” particularly as it relates to the iEHR.
8. Descriptions of the “Open Source” or “Platinum VistA” builds.
9. Details on VistA Evolution.
10. Further enhancements to the Module template.

What is in the VistA Monograph...and what’s not?

WHAT’S IN? Thousands of programming components and millions of lines of computer code constitute VistA’s approximately 200 modules. The Monograph provides information on those modules.

VA describes as “Class 1” software those items that are nationally supported by VA OIT and deployed enterprise-wide across all of VHAs Medical Centers (VAMC) and Community Based Outpatient Clinics (CBOC). It is these enterprise-wide modules comprising VistA and deployed across the entire spectrum of VAMC and CBOC that are detailed in the Monograph.

WHAT’S NOT IN? There are many other software applications, some commercially-procured, some developed on either a regional level or VAMC/local level (known as “Class 2” and “Class 3” software) that are not nationally deployed and supported—and these items do not appear in
this version of the Monograph. Future editions of the Monograph will contain an appendix listing these important—but not VistA, by definition—applications and programs.

Where can I find the VistA Monograph?
The current edition of the VistA Monograph is available at the following VA website:
http://www.va.gov/vista_monograph/

How do I recommend changes to or ask questions about the VistA Monograph?
The Monograph is maintained jointly by VHA’s Office of Informatics and Analytics and by VA’s Office of Information Technology. Comments and suggestions for changes to the Monograph are welcomed, and should be forwarded via email to the OIT PD Product Support Monograph mailgroup.
WHAT IS VistA?

The VETERANS HEALTH INFORMATION SYSTEMS AND TECHNOLOGY ARCHITECTURE information system—VistA—is a Health Information Technology (HIT) system created and used by the Veterans Health Administration (VHA) of the U.S. Department of Veterans Affairs (VA) in serving America’s Veterans through the provision of exceptional-quality health care which enhances our Veterans’ health and well-being.

VistA Brief Technical Overview

VistA is an integrated Electronic Health Record (EHR) information technology system with application packages that share a common data store and common internal services. The data store and VistA kernel are implemented in the MUMPS (or M) computer language, and the Computerized Patient Record System (CPRS) graphical user interface (GUI) is implemented in Delphi. Application clients use a highly-efficient proprietary protocol to access data. VistA is highly configurable and customizable, and in addition to appropriate connectivity amongst VistA modules, VistA supports the integration of best-of-breed applications at multiple levels, including MUMPS API (Application Programming Interface,) Remote Procedure Call (RPC), Medical Domain Web Services (MDWS), HL7 (Health Level 7,) and data exchange via Blue Button or eHealth Exchanges. VistA comprises nearly 200 distinct applications/modules, 15,000 routines, and millions of lines of computer code.

The backbone of VHA’s clinical and administrative information technology capability, VistA has historically been built on a client-server architecture, which ties together workstations and personal computers with graphical user interfaces at VA facilities. The CPRS GUI is as well highly customizable and runs on workstations, laptops, tablets including iPads, and smart phones. VistA inter-operates with numerous commercial-off-the shelf software applications and with selected information technology systems of other federal agencies and, increasingly, health information exchange networks. At the time of publication of this edition of the Monograph, comprehensive proposed enhancements to VistA were in the initial stages; referred to as “VistA Evolution” these enhancements are will reflect development and architecture enhancements to allow greater interaction with data and greater efficiency for the VistA system.

Additional detailed technical information on VistA which exceeds the scope of this Monograph, is available at the VistA Documentation Library website.
Where is VistA used within VHA?

VistA is deployed universally across VHA at more than 1,500 sites of care, including each Veterans Affairs Medical Center (VAMC), Community Based Outpatient Clinic (CBOC) and Community Living Center (CLC), as well as at nearly 300 VA Vet Centers.

How do I request changes to VistA?

VA staff members wishing to propose enhancements to VistA have several options—most notable among these being the submission of a “New Service Request” through the Innovation and Development Request Portal (IDRP).

I am not in VHA...may I obtain VistA for my use?

VistA is available through several forums for interested parties not part of or affiliated with VA/VHA. VistA software applications are releasable through the Freedom of Information Act (FOIA). Under FOIA, certain records may be withheld in whole or in part from the requestor if they fall within certain FOIA exemptions. Two of these exemptions form the basis for witholding software by the VA:

- Protects certain records related solely to VA’s internal rules and practices.
- Protects trade secrets and confidential commercial or financial information.

Also removed are any copyrighted dynamic link library (dll), mental health tests, CPT codes, and electronic signature hashing algorithms. (These are detailed in a Readme.txt file on the CDs.) Requests for agency records or additional information via FOIA should be directed to:

Department of Veterans Affairs  
FOIA Services (10P2C1)  
810 Vermont Avenue, NW  
Washington, DC 20420

Electronic requests can be sent to VACOFOIASESERVICE@VA.GOV

VA is committed to the Open Source community and was instrumental in the establishment of the Open Source Electronic Health Record Agent (OSEHRA.) As part of the Department’s pioneering activities in the OSEHRA community, VA has contributed VistA code to the OSEHRA effort.

VistA is a comprehensive, full-featured Health Information System and Electronic Health Record. The software must be properly configured to each healthcare setting by individuals knowledgeable about the software before the system is used to support healthcare delivery. VistA does not self-install.
How do I recommend changes to or ask questions about the *VistA Monograph*?

Comments and suggestions for changes to the Monograph are welcomed, and should be forwarded via email to the OIT PD Product Support Monograph mailgroup.
THE VistA MODULES

Approximately 200 modules comprise VistA. Following, arranged alphabetically, is a description of, and supporting information about, each of those modules.

For some users, locating a particular module may be easier relying on VHA Health Systems Informatics (HSI) and Strategic Investment Management (SIM) portfolio nomenclature (similar to the alignment by OIT portfolios used in the formatting of previous Monographs.) A complete index cross-referencing the VistA modules with their respective VHA portfolio appears at the end of the Monograph, followed by an index arranging the modules in terms of Clinical Services, Administrative-Financial Services, Infrastructure and Repositories functional areas.

This edition of the Monograph introduces a new template format; information cells within each template are anticipated to be more robustly relied on in future editions. Selected terms used in this template, and brief explanations, include:

- “VistA Module”—the name of the module being described
- “Version”—provides the number of the most recent version (i.e., major release or significant re-release) of the module being described
- “Namespace”—a shorthand abbreviation for VA-specific nomenclature used to rapidly identify the programming domain for the module being described
- “Most Recent Patch”—within a “version” (as defined above) there will be an indefinite number of new software releases that, e.g., provide program enhancements or correct identified “bugs.” This item in the template provides information on the most current “patch” released across VHA for the module being described
- “Business Function Framework Line(s) of Business” and “Function(s)”—the Business Function Framework (BFF) is a hierarchical decomposition of the business functions performed by VHA. Inclusion of these elements here allows for a “line of sight” connection between VHA business functions and the VistA modules supporting their execution.
- “Business Owner”—refers to the office or organization within VHA with primary business responsibility for the module being described.
- “OIT Project Manager”—refers to the office or organization within VA OIT with primary information technology/development responsibility for the module being described.
# Accounts Receivable

**Vista Module:** Accounts Receivable  
**Version:** 4.5

**Namespace:** PRCA  
**Most Recent Patch:** PRCA*4.5*276

**Brief Description:** The Accounts Receivable (AR) package is a system of accounting and receivables management. The AR package automates the debt collection process and a billing module is available to create statements for non-medical care debts. Functionality is available to establish, follow-up on, collect against, and track all medical facility debts.

**Business Function Framework Line(s) of Business:** Manage Business Enabling Services  
**Business Function Framework Function(s):** Provide Financial Management

**VHA Portfolio:** Business Informatics

**Business Owner:** VHA CBO Revenue Operations  
**OIT Project Manager:** OIT PD/PSS/HPS

**Full Description:** Some of the debts owed to a VA facility may include patient care covered by health insurance companies, veteran co-payments, pharmacy prescription co-payments, employee salary overpayments, lost or damaged property, vendor collectibles, benefit overpayments, and services provided under a sharing agreement with another institution.

## Features

- Provides a generic billing system used to generate standardized bills.
- Receives patient and third party billing information passed automatically from the Integrated Billing (IB) package.
- Sends electronic transmissions to the Consolidated Copayment Processing Center (CCPC) in Austin, TX to generate patient statements.
- Automatically processes first party payments received from the Lockbox Bank.
- Calculates interest and administrative charges.
- Records, processes, and tracks payment information from patients, vendors, insurance companies, employees, and institutions.
- Records and tracks credit balances if debtors have overpaid their accounts, and processes refunds as appropriate.
- Updates Financial Management System (FMS) with Accounts Receivable data.
- Tracks and forwards eligible delinquent patient, vendor, and employee debts to the Treasury Program for offset.
- Tracks delinquent debts for Regional Counsel and Department of Justice for enforced collection.
- Provides the ability to set up repayment plans.
- Provides reports and inquiries for the follow-up and maintenance of outstanding receivables.
- Provides for transmission of certain AR bills over 90 days old to be referred to the Debt Management Center (DMC) for collection action.
- Automatically processes electronic payments and explanation of benefits documents received from third party insurance carriers through the EDI Lockbox bank.
- Allows modifications to locate 3rd Party claims with EOB’s
- Provides corrections to the printed EDI Lockbox reports
- Provides corrections to the Daily Activity Report and the Claims Matching report
- Allows VistA to receive, process and display data from FSC in HIPAA 5010 compatible format
- Provides a change in revenue reconciliation from deposits to comply with the Treasury mandate to accept new deposit numbers from the Treasury contracted bank
- Provides modification to the Third Party Joint Inquiry option to allow up to 10 characters of an inactive claim number to display
- Modifies the Full Account Profile option to allow up to 10 characters of an inactive claim number to display
- Creates the processes to support the receipt, storage and display of Medical deductible information from Trailblazer Health Care Enterprise
- Creates a new option called Medicare Deductible Alert Worklist from which users can view Medicare deductible information
- Provides modifications to AR routines to accommodate a longer ECME number. ECME number has been expanded to 12 digits in length.
- Provides modifications to the EDI Lockbox menu to allow VistA to receive, process and display ERA, EFT and EOB data from FSC in HIPPA 5010 compatible format.
### Admission, Discharge, Transfer (ADT)

<table>
<thead>
<tr>
<th>Vista Module: Admission, Discharge, Transfer (ADT)</th>
<th>Version: 5.3</th>
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<tbody>
<tr>
<td>Namespace: DG</td>
<td>Most Recent Patch:</td>
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**Brief Description:** The Admission, Discharge, Transfer (ADT) module provides a comprehensive range of software dedicated to the support of administrative functions related to patient admission, discharge, transfer, and registration. The functions of this package apply throughout a patient’s inpatient and/or outpatient stay, from registration, eligibility determination and Means Testing through discharge with on-line transmission of Patient Treatment File (PTF) data to the Austin Information Technology Center (AITC).

**Business Function Framework Line(s) of Business:** Provide Access to Health Care, Provide Health Care Administration

**Business Function Framework Function(s):** Provide Member Access, Perform Hospital Administration, Utilize Information Services

**VHA Portfolio:** Business Informatics

**Business Owner:** VHA Chief Business Office (CBO)  
**OIT Project Manager:** OIT PD

**Full Description:**

The ADT software also aids in recovery of cost of care by supplying comprehensive PTF/RUG-II and Means Test software. The ADT module functions as the focal collection point of patient information, encompassing demographic, employment, insurance, and medical history data. Many other modules, such as Laboratory, Pharmacy, Radiology, Nursing, and Dietetics, utilize information gathered through the various ADT options. Several features have been designed to maximize efficiency and maintain control over user access of specified sensitive patient records. The Patient Sensitivity function allows a level of security to be assigned to certain records within the database (i.e., records of employees, government officials, etc.) in order to maintain control over unauthorized user access. The Patient Lookup function screens user access of these records. It also provides for efficient and faster retrieval of patient records and identified potential duplicate patient entries. The ADT module allows for efficient and accurate collection, maintenance, and output of patient data, thus enhancing a health care facility’s ability to provide quality care to its patients. The functions within ADT currently fall into seven major categories: Application Processing (registration), Bed Control (inpatient movements), Inpatient Care Grouping (DRG)/Long Term Care Grouping (RUG), Data Transmission to National Database (PTF and RUG), Patient Assessment Instrument (PAI), Supervisor Functions (system setup and maintenance), and Local/National Management Reporting.
Features

- Provides on-line patient registration and disposition of applications for medical care.
- Tracks patient movements during inpatient stays.
- Provides up-to-date on-line patient information.
- Generates numerous managerial and statistical reports.
- Performs patient data consistency checks.
- Supports the flagging and monitoring of patient records deemed to be sensitive.
- Enrolls patients in the VA Patient Enrollment System during the registration process.
- Aids in cost recovery of care by supplying comprehensive PTF/RUG-II, Means Test, and pharmacy co-pay software.
## Anticoagulation Management Tool (AMT)

<table>
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<tr>
<th>Vista Module: Anticoagulation Management Tool (AMT)</th>
<th>Version: 1.0</th>
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<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
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**Brief Description:** Anticoagulation Management Tool (AMT) was developed at the Portland VA Medical Center to help simplify the complex, time consuming processes required to manage patients on anticoagulation medication. The tool enables the user to enter, review, and continuously update all information connected with patient anticoagulation management.

**Business Function Framework Line(s) of Business:** Provide Access to Health Care, Deliver Health Care

**Business Function Framework Function(s):** Provide Member Access, Provide Medical Services, Manage Health Records

**VHA Portfolio:** Health Provider Systems

**Business Owner:** VHA

**OIT Project Manager:** OIT PD

**Full Description:**

With the Anticoagulation Tracking, one can order lab tests, enter outside lab results and graphically review lab data, enter notes, complete encounter data, complete the consults if consults are used to initiate entry into the Anticoagulation clinic, and print a variety of patient letters. Upon exiting, the program all activities within the program are recorded on an Anticoagulation flow sheet maintained on the Computerized Patient Record System (CPRS) Reports tab. The Anticoagulation Tracking provides clinic staff a mechanism of ensuring continuous patient monitoring with a built-in mechanism that alerts staff when patients have not been monitored in a timely period. A Lost to Follow-up list is maintained to ensure that staff knows of patients who need attention.
### Automated Information Collection System (AICS)

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<tr>
<th>Vista Module: Automated Information Collection System (AICS)</th>
<th>Version: 3.0</th>
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<tr>
<td>Namespace: IBD</td>
<td>Most Recent Patch:</td>
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**Brief Description:** The Automated Information Collection System (AICS) software supports outpatient clinical efforts through the creation and printing of encounter forms that display relevant clinical information, and provides for the entry of clinical encounter data for local and national needs.

**Business Function Framework Line(s) of Business:** Deliver Health Care

**Business Function Framework Function(s):** Provide Ancillary Services, Manage Health Records

**VHA Portfolio: Business Informatics**

**Business Owner:** VHA Public Health

**OIT Project Manager:** OIT Health Administration Portfolio Enhancements (HAPE)

**Full Description:**
The AICS encounter forms are used to display relevant patient data for use during the appointment (e.g., demographics, allergies, clinical reminders, and problems) and to collect data about the appointment (e.g., procedures, providers, and diagnoses), thus providing an organized method of data collection through scanning or data entry. Many of the lists that a user sees in Computerized Patient Record System (CPRS) for input of outpatient encounter data are based on lists created when designing encounter forms for clinics.

A form generator is included, which allows sites to design forms that meet local medical facility needs. There is enough flexibility in the software so sites can build forms that meet their individual clinical, billing, and resource requirements. The encounter form may be filed in the clinical record. A print manager is included that allows sites to define reports to print in conjunction with the encounter form and any supplemental forms for each appointment. Reports can be defined to print at the division, clinic group, or clinic level. Utilities are available to manage when and where forms may print.

Data from encounter forms can be inputted (into VistA) in one of two ways. Forms can be scanned on client workstations with the data automatically transmitted to the VistA server, or clerks can key in data from forms.

**Features**

- Provides a form design utility that allows creation of attractive and easy to use forms for each clinic.
- Allows forms to be designed to print with patient data displayed, such as patient demographics, insurance information, allergies, and clinical reminders that are due and active problems.
• Allows for the creation of forms to collect data such as procedures, diagnoses, problems, providers, progress notes, vital signs, and Patient Care Encounter (PCE)-related data such as exams, health factors, patient education, skin tests, and immunizations.
• Provides a print manager that allows all clinic-specific forms to print with the encounter form for an appointment. The print manager also provides a setup system that, once accomplished, no longer requires daily user intervention.
• Provides an import/export utility that makes it easier for sites to exchange forms they have already created.
• Provides forms tracking to ensure that each form printed is processed or accounted for.
• Manual data entry options are available to allow data to be key entered by a clerk and passed to PCE to be stored.
## Automated Medical Information Exchange (AMIE)

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<tr>
<th>Vista Module: Automated Medical Information Exchange (AMIE)</th>
<th>Version: 2.7</th>
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<tr>
<td>Namespace: DVBA</td>
<td>Most Recent Patch:</td>
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**Brief Description:** The Automated Medical Information Exchange (AMIE) module facilitates the electronic interchange of veteran information between Veteran Benefits Administration (VBA) Regional Offices (ROs) and VA medical facilities.

**Business Function Framework Line(s) of Business:** N/A

**Business Function Framework Function(s):** N/A

**VHA Portfolio:** Health Provider Systems

**Business Owner:** VHA

**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** This comprehensive module provides an accurate audit trail to track most requests for information. The module is composed of two components: Facility administrative options (7131/7132) and VBA Regional Office options (2507 Compensation and Pension). Each area has individual items to maintain daily, and its own reports to print. RO staff access VA medical facility computers through VA national telecommunications network, and exercise their options on each local medical facility’s system as necessary.

### Features

- Provides access to local databases for identification of a veteran’s admission, discharge, outpatient treatment, patient care, and other information that may require adjudicative actions.
- Reduces overpayments previously caused by lost, misrouted, or improperly processed admission notifications.
- Provides on-line status determinations of pending compensation and pension examinations (requesting, scheduling, tracking, and updating results).
- Provides RO on-line access to the local databases for the confirmation of the propriety of payments based on hospitalization.
- Improves timeliness of the RO benefits adjustment processing.
- Allows medical centers to electronically access sections of the Physicians Guide for Disability Evaluation Examinations.
- Provides tracking of insufficiently completed compensation and pension examinations.
Automated Safety Incident Surveillance Tracking System (ASISTS)

Vista Module: Automated Safety Incident Surveillance Tracking System (ASISTS)  
Version: 2.0

Namespace: OOPS  
Most Recent Patch:

Brief Description: Automated Safety Incident Surveillance Tracking System (ASISTS) was designed to manage the data from all employee accidents, create a Report of Accident (VA Form 2162) from the data, and produce both the Office of Worker's Compensation Programs Form CA-1 (Instructions for Completing Employee's Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation) and Form CA-2 (Federal Employee's Notice of Occupational Disease and Claim for Compensation).

Business Function Framework Line(s)of Business: Provide Health Care Administration, Manage Business Enabling Services

Business Function Framework Function(s): Perform Hospital Administration, Manage Human Resources

VHA Portfolio: Business Informatics

Business Owner: VHA Public Health  
OIT Project Manager: OIT/PD/PSS/HPS

Full Description: Improving tracking and management of employee accidents, in general, and exposures to blood borne pathogens from needle sticks and sharps, in particular, is a high priority of VHA. Consequently, the package contains fields that are specific to needle stick, sharps, and bodily fluid exposures. The data collected from ASISTS is electronically transferred to a national database and used to identify system-wide problems and opportunities for focused education and to conduct research. The electronic submission of workers’ compensation claims to the Department of Labor is improving submission rates and reducing duplicate data collection and data entry.

Features

- Electronic signature is used extensively throughout this program. All three forms (VA Form 2162, CA-1, and CA-2) require appropriate signatures including that of the employee for the CA-1 and CA-2, which is used when electronically transferring the date to the Department of Labor.
- Bulletins alert employee health and infection control of any exposures to blood borne pathogens. The employee's supervisor, the safety officer, Human Resources Management, and
union representatives are notified of every incident. Electronic signatures trigger bulletins from the employee to the supervisor and union representatives and from the supervisor to the safety officer, alerting the recipient of action that should be taken.

☐ Every medical center employee has access to a menu structured specifically to the level of his/her involvement in the process: employee health, supervisor, safety officer, union representative, workers’ compensation personnel, and employee.

☐ The graphical user interface (GUI) for ASISTS facilitates the input and processing of accident reports and claims and improves the reporting functionality, including a revised OSHA and Needle stick log and graphical representation of the incident reports.

☐ Future versions will include a comprehensive employee health module for tracking and following numerous health issues.
# Bed Management Solution (BMS)

<table>
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<th>Vista Module: Bed Management Solution</th>
<th>Version: 1.0</th>
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<td>Namespace:</td>
<td>Most Recent Patch:</td>
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**Brief Description:** The Bed Management Solution (BMS) project addresses the Department of Veterans Affairs (VA) need to optimize the flow of patients from admission through discharge, and to improve patients’ safety, quality of care, and customer satisfaction. BMS provides the capability to manage bed availability at the facility, VISN and national levels and provides national data for bed availability during a disaster.

**Business Function Framework Line(s) of Business:**

**Business Function Framework Function(s):**

<table>
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<tr>
<th>VHA Portfolio: Health Provider Systems</th>
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<tr>
<td>Business Owner: Systems Redesign</td>
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</table>

**Full Description:** Bed Management Solution (BMS) v1.0 provides real-time, user friendly, web-based VistA interface to track patient movement and determine bed availability. BMS v1.0 supports/enables:

- Track current and pending bed availability and patient movement through the system
- Plan, prepare, and manage patient flow; identify and anticipate peak demands – facilitation of “Real-Time Demand and Capacity Management”
- Reduce non-VA care (“fee basis”) days and associated costs
- Display bed occupancy status for all beds in the facility (VAMC) and/or VISN
- Provide visibility of bed availability within all VAMCs for emergency management purposes
- Automate request and assignment of beds
- Reduce cycle times for bed cleaning and readiness
- Display and facilitate timely discharge appointments; anticipate and track patient discharges
- Provide links for entry and retrieval of Bed Management events
- Provide links for access and updating Bed Management Data, with respect to processes and retrieval of data that is not in any other system
• Store patient, operational, and transaction data, as needed to support and report on bed management, throughput events and cycle time data.

• Provide the ability for utilization in a multidivisional, integrated site environment with the ability to produce multi-site reports

• Facilitate efficient flow operations at multiple levels and provides reports on the performance of bed management activities, thus enabling VAMCs and VISNs to track key performance indicators and to impact performance on Deputy Under Secretary for Health (DUSH) monitors and guidelines.
## Beneficiary Travel

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<thead>
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<th>Vista Module: Beneficiary Travel</th>
<th>Version: 1.0</th>
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<td>Namespace:</td>
<td>Most Recent Patch:</td>
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**Brief Description:** The Beneficiary Travel module provides the ability to perform the functions involved in issuing beneficiary travel pay. Travel reimbursement is provided to specified categories of eligible veterans. It is also provided to non-employee attendants who are eligible for such reimbursement. These attendants will be issued travel pay under the veteran's name.

**Business Function Framework Line(s) of Business:** Provide Access to Health Care, Manage Business Enabling Services

**Business Function Framework Function(s):** Facilitate Patient Travel to Points of Care, Provide Financial Management

**VHA Portfolio:** Business Informatics

**Business Owner:** VHA Chief Business Office  
**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:**

Payment for travel by special mode (ambulance, handicapped van, etc.) may be authorized if medically necessary and approved before travel begins, except in cases of medical emergency where delay would be hazardous to life or health.

For certain claims, the system will compute the amount payable from factors such as account type, parameter set-up of deductible amount per visit and per month, one-way or round-trip mileage, and applied costs.

### Features

- Automatically computes the amount payable for claims with an account type of Compensation and Pension.
- Allows each site to define and edit site-specific beneficiary travel parameters.
- Produces a variety of statistical reports for a specified date range.
- Provides the ability to reprint the standard pre-formatted beneficiary travel form for cash reimbursement.
## Blind Rehabilitation

<table>
<thead>
<tr>
<th>Vista Module: Blind Rehabilitation</th>
<th>Version: 5.0</th>
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<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
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**Brief Description:** The Blind Rehabilitation Service program consists of the following four elements: VA Headquarters, Blind Rehab Centers (BRC), Visual Impairment Service Teams (VIST), and Blind Rehabilitation Outpatient Specialists (BROS).

**Business Function Framework Line(s) of Business:** Deliver Health Care

**Business Function Framework Function(s):** Provide Clinical Decision Support, Provide Care Management, Provide Ancillary Services, Manage Health Records

**VHA Portfolio:** Health Provider Systems

**Business Owner:** Rehabilitation and Prosthetic Services

**OIT Project Manager:** Product Development

**Full Description:** The Blind Rehabilitation application provides enhanced tracking and reporting of the blind rehabilitation services provided to veterans by:

- Visual Impairment Service Teams (VIST) Coordinators
- Blind Rehabilitation Centers (BRCs)
- Blind Rehabilitation Outpatient Specialists (BROS)
- Visual Impairment Services Outpatient Rehabilitation (VISOR) Programs
- Visual Impairment Center to Optimize Remaining Sight (VICTORS)

In addition to providing the base functionality of the BR 4.0 system, BR 5.0 provides a web-enabled GUI through which users can access enhanced capabilities intended for VIST Coordinators, new functionality for BROS, BRC personnel and waiting times and waiting list.

The Blind Rehabilitation 5.0 application provides entirely new functionality that encompasses and integrates all five segments of the Blind Rehabilitation Services including waiting times and waiting list.

- Complies with VistA Architecture
- Complies with 508 regulations, using W3C standards
- Accessible web based application, via a web browser
- Supports the OI Single Sign-on initiative
- User authentication via role based permissions
- User friendly
- Seamless continuum of care
- Minimum user disruption
- Simplified data entry
- Better identification and treatment of veterans
- Consolidates data
- Enables system driven waiting times and waiting list tracking and reporting capabilities
- Enables users to receive comprehensive views of a patient’s BR Services across institutions
- Facilitates data tracking and auditing capabilities
- Improves accountability
- Enhanced reporting features
- Provides Data Standardization which improves and provides consolidated data reporting
- Improved blind services tracking
- Enables Research and Provides Outcomes tracking and reporting capabilities
- Improves VHA organizational communication
- Transmits to the Health Data Repository
## Capacity Management Tools

**Vista Module:** Capacity Management Tools  
**Version:** 3.0

<table>
<thead>
<tr>
<th>Namespace: KMPD</th>
<th>Most Recent Patch:</th>
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**Brief Description:** The Capacity Management (CM) Tools software is a fully automated support tool developed by Capacity Planning (CP) Service. CM Tools are designed for Information Resource Management (IRM) and system administrators responsible for the capacity planning functions at their site, as well as (VistA) software developers.

**Business Function Framework Line(s) of Business:** Manage Business Enabling Services  
**Business Function Framework Function(s):** Utilize Information Technology Services

**VHA Portfolio:** Common Services

**Business Owner:** VHA & OIT  
**OIT Project Manager:** OIT ASD

**Full Description:**

The CM Tools are used to measure system performance, data growth, Computerized Patient Record System (CPRS) coversheet load times, option and protocol execution, and provide various data reports. There are also tools for developers: global lister, error lister, routine search, and evaluate M code. CM Tools entails the capture of all Veterans Health Information Systems and Technology Architecture (VistA) Health Level Seven (HL7) workload specifics from participating sites. This HL7 workload data is then summarized on a weekly basis and is automatically transferred via network mail (i.e., VistA MailMan) to the Capacity Planning (CP) National Database.

The Department of Veterans Affairs (VA) developed the Capacity Management Tools software in order to obtain more accurate information regarding the current and future VistA HL7 workload data at VA sites.

On a nightly basis, the CM Tools Background Driver option automatically compresses the information contained within the CP TIMING file (#8973.2) into daily statistics. These daily statistics are converted into an electronic mail message that is automatically transferred via network mail (i.e., VistA MailMan).
and merged into a Capacity Planning National Database where this data is used for evaluation purposes.

IRM staff utilizes the options that are available at the site to manage this software. IRM staff responsible for capacity planning tasks at the site can use these options to review system workload trends. Additionally, the IRM staff can review specific VistA HL7 workload data.

**Features**

- Provides access to local databases for identification of a veteran’s admission, discharge, outpatient treatment, patient care, and other information that may require adjudicative actions.
- Reduces overpayments previously caused by lost, misrouted, or improperly processed admission notifications.
- Provides on-line status determinations of pending compensation and pension examinations (requesting, scheduling, tracking, and updating results).
- Provides RO on-line access to the local databases for the confirmation of the propriety of payments based on hospitalization.
- Improves timeliness of the RO benefits adjustment processing.
- Allows medical centers to electronically access sections of the Physicians Guide for Disability Evaluation Examinations.
- Provides tracking of insufficiently completed compensation and pension examinations.
## Care Management

<table>
<thead>
<tr>
<th>Vista Module: Care Management</th>
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<tr>
<td>Namespace: ORRC</td>
<td>Most Recent Patch:</td>
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**Brief Description:** Care Management is the first application to offer a convenient way for health care providers to view on a single screen, pertinent information about multiple patients.

**Business Function Framework Line(s) of Business:** Provide Healthcare Administration, Deliver Healthcare

**Business Function Framework Function(s):** Perform Hospital Administration, Provide Medical Services, Manage Health Records

**VHA Portfolio:** Health Provider Systems

**Business Owner:** VHA Primary Care  
**OIT Project Manager:** OIT/PDS/PSS/HPS

**Full Description:**

With Care Management, users can see at a glance multiple patients for whom they have items that require attention. The current distribution of Care Management offers the following four perspectives (which are similar to applications):

- **Clinician Dashboard** – Provides an easy-to-read table of patients for whom clinicians have unacknowledged results or event notifications (such as hospital admissions, discharges, or unscheduled clinic visits), unsigned documents, or uncompleted tasks.
- **Nurse Dashboard** – Provides an easy-to-read table of patients for whom nurses have unacknowledged results, unviewed events, uncompleted tasks or text orders, unverified orders, or recent vitals.
- **Query Tool** – Enables authorized users to create reports based on the most current patient data available. The Query Tool offers five pre-defined reports and enables users to create their own customized reports.
- **Sign List** – Enables users to sign multiple items for multiple patients. For example, using the Sign List, a clinician can sign a discharge summary for John Smith and notes for Jane Smith simultaneously.

This distribution of Care Management also includes the Task Editor, which enables users to create patient-related tasks.

**Features**

Care Management comprises an extensive set of features designed to simplify and improve patient care. These features include (but are not limited to) the following:

- Colored-coded icons that indicate the priority status of dashboard items.
A default patient list that is based on users’ Computerized Patient Record System (CPRS) default patient list.
- A dynamically generated, user-based patient list.
- Custom patient lists.
- Checkboxes for acknowledging and verifying individual or multiple dashboard items.
- The ability to set date ranges for dashboard items.
- The ability to link tasks to other tasks or to events.
- The ability to prioritize, edit, and delete tasks.
- Text boxes that expand to provide detailed information about dashboard items.
- A variety of predefined reports, including the following:
  - Abnormal Results
  - Consult Status
  - Incomplete Orders
  - Recent Activity
  - Scheduled/Due Activity
- Custom reports with a wide selection of criteria, including (but not limited to) the following:
  - Screen by Inpatient, Outpatient, or Pharmacy Visits
  - Screen by Primary Outpatient Provider.
  - Orders/Results
  - Consults/Procedures
  - The ability to print and export reports
- Care Management is tightly integrated with CPRS. As a result, from within Care Management, users can:
  - Go directly to a patient’s chart in CPRS.
  - Clear selected result notifications in CPRS, including notifications in the following categories:
    - Events
    - Results
    - Actions
- Care Management’s intuitive Graphical User Interface (GUI) includes an extensive selection of clickable items from which users can:
  - Select a default perspective.
  - Select dashboard preferences.
  - View demographic information for individual patients.
  - View details about specific action items
### Clinical Context Object Workgroup (CCOW)

<table>
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<tr>
<th>Clinical Context Object Workgroup</th>
<th>Version: 4.3</th>
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<td>Namespace:</td>
<td>Most Recent Patch:</td>
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<tr>
<td>Brief Description: The Veterans Health Administration uses CCOW to share patient and user context between applications. Clinical Context Management is a method used to synchronize multiple GUI clinical computer applications to one subject, for example, the same patient.</td>
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**Business Function Framework Line(s) of Business:** Manage Business Enabling Services

**Business Function Framework Function(s):** Utilize Information Technology Services

**VHA Portfolio:** Common Services

**Business Owner:** VHA OHI  
**OIT Project Manager:** OIT EIE

Clinical Context Object Workgroup (CCOW), more commonly known as Clinical Context Management, enables the clinical end-user to experience the simplicity of interacting with one system, when in reality he or she may be using multiple independent applications through varying interfaces.

Clinical Context Management is a method used to synchronize multiple GUI clinical computer applications to one subject, for example, the same patient. Standard subjects include Patient, User, Encounter, Observation, and DICOM (Digital Imaging Communications in Medicine) type.

CCOW ensures secure and consistent access to patient data from varied sources. Benefits include applications that are easier to use, utilization of electronically available information, and an increase in patient safety. CCOW support for secure context management provides for HIPAA compliant communications and patient coordination.
Clinical Information Support System (CISS)

Vista Module: Clinical Information Support System (CISS)  Version: 1.0

Namespace:  Most Recent Patch:

Brief Description: The Clinical Information Support System (CISS) is a web-based portal application that provides a framework of services for the VA enterprise and supplies an integration point for its partner systems. The initial CISS partner system is the Occupational Health Record-keeping System (OHRS), a web-based application that enables occupational health staff to create, maintain, and monitor medical records for VA employees and generate national, VISN, and site-specific reports.

Business Function Framework Line(s) of Business: N/A

Business Function Framework Function(s): N/A

VHA Portfolio: Health Provider Systems

Business Owner: VHA Occupational Health  OIT Project Manager: OIT/PD

Full Description: The focus of OHRS is to collect clinical data for wellness, medical surveillance, and appropriate treatment of work-based injury or illness. OHRS will capture and store information on patient encounters, such as encounter type, purpose, status, provider, and other pertinent clinical data obtained during the patient visit. Users with appropriate security privileges are allowed to add and sign or co-sign the encounter and if needed, and perform scheduled and unscheduled reporting on items such as vaccination rates, vaccination and immunity statuses. The OHRS application does not share patient-specific data, but will collect data elements limited to information deemed critical to the Occupational Health delivery of care processes in the OHRS database. Employee data is obtained from the central Personnel and Accounting Integrated Data System (PAID) while volunteer information is obtained from the Voluntary Service System (VSS). Other Non-Paid and non-VSS data is collected by direct data entry into OHRS at the time of the patient encounter.

Features

The CISS Portal hosts one of its premier partner systems, Occupational Health Record-keeping Systems (OHRS), and has been available for use by VHA field clinicians and clinical support staff involved with employee health and safety since September 2009. Other candidate legacy applications that are planned for modernization to further leverage the CISS portal are:
- Automated Safety Incident Surveillance and Tracking System (ASISTS)
- Workers Compensation/Occupational Safety and Health Management Information System (WC/OSH MIS (WC/OSH-MIS))
Clinical Monitoring System

Vista Module: Clinical Monitoring System
Version: 1.0

Namespace: QAM

Most Recent Patch:

Brief Description: The heart of the Clinical Monitoring System package is in building monitors using conditions and groups for patient auto enrollment. The main function of this software is to capture data for patients meeting specified conditions. All monitors within the framework of this software are ultimately based upon patient data.

Business Function Framework Line(s) of Business: Deliver Healthcare, Manage Business Enabling Services

Business Function Framework Function(s): Provide Clinical Decision Support, Utilize Information Technology Services

VHA Portfolio: Business Informatics

Business Owner: VHA CBO
OIT Project Manager: OIT/PD/PSS/HPS

Full Description: To capture data, monitors are created to run nightly. The monitors capture data elements such as ward, treating specialty, SSN, age, etc. The data elements available for capture vary depending on the conditions selected when building monitors. The conditions are provided within the Clinical Monitoring System package. Some conditions require a group be defined, such as a group of wards, drug classes, MAS movement types, etc. Monitors are easily created through menu options and can be queued to run manually or nightly.

Features

- Provides the user with the ability to design a monitor that will auto enroll cases that meet the user's defined criteria/conditions from VistA.
- Allows the user to set time frames for computing percentages and tracking findings between time frames.
- Has the ability to alert users when important thresholds or dates are met.
- Provides a mechanism to add site-developed conditions and data elements and routines such as site-designed worksheets to the software. MUMPS programming is a required part of site-
specific enhancement.
- Provides mechanisms for controlling the disk space and CPU time resources used by the Clinical Monitoring System.
- Allows the user to manually enter cases.
### Clinical Procedures

<table>
<thead>
<tr>
<th>Vista Module: Clinical Procedures</th>
<th>Version: 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: MD</td>
<td>Most Recent Patch: MD<em>1.0</em>16</td>
</tr>
</tbody>
</table>

**Brief Description:** Clinical Procedures (CP) passes final patient results, using Health Level 7 (HL7) messaging, between vendor clinical information systems (CIS) and VistA. Patients’ test results or reports are displayed through the Computerized Patient Record System (CPRS).

**Business Function Framework Line(s) of Business:** Deliver Health Care, Manage Business Enabling Services

Business Function Framework Function(s): Provide Medical Services, Manage Health Records, Utilize Information Technology Services

**VHA Portfolio:** Health Provider Systems

Business Owner: VHA  
OIT Project Manager: OIT/PD/PSS/HPS

**Full Description:** Clinical Procedures (CP) passes final patient results, using Health Level 7 (HL7) messaging, between vendor clinical information systems (CIS) and VistA. Patients’ test results or reports are displayed through the Computerized Patient Record System (CPRS). The report data is stored on the Imaging Rapid Application Interface Development (RAID) and, in some instances; discrete data is stored in the Medicine package generated by medical devices. There are no specific procedures tracked through this application, nor are management workload reports generated. Links to DSS and other databases through PCE are supported through CP works with the Consult/Request Tracking, Text Integration Utility (TIU), CPRS, Patient Care Encounter (PCE), and VistA Imaging packages.

In conjunction with CPRS, CP also provides a method for clinicians to document findings and to complete final procedure reports via existing pathways in appropriate VistA applications. The CP functionality is not available in the List Manager (LM) version of CPRS. CP provides features that can be used across clinical specialties such as Medicine, Women’s Health, Surgery, Dental, Rehabilitation Medicine, and Neurology. Its functionality supports clinical practice in all patient care settings including clinics, Home Based Primary Care (HBPC), and in-patient units.
Features

- Allows clinicians to enter, review, interpret, and sign CP orders through one application, CPRS.
- Accepts a variety of file types for result report files.
- Allows images to be acquired, processed, stored, transmitted, and displayed by the VistA Imaging package.
- Defines the Hospital Location where the procedure is performed. This location determines which Encounter Form is presented to the end user.
- Allows electronic transfer of patient reports from medical devices to VistA.
- Provides Bi-directional interface capabilities.
- Provides easy to use user interfaces, including CP Manager, CP User, and CP Gateway.
- Affords improved internal communication between the procedural list and the primary care physician.
- Improve patient education through use of reports.
- Improves medical record keeping.

- MD*1.0*16 patch release provides:
  - Interface for collection of patient observational data from monitoring devices
  - Standardized terminology with VA Unique Identifiers (VUIDs)
  - GUI, locally-customizable flowsheets to view, enter and edit patient data
  - Admission Discharge and Transfer (ADT) Health Level 7 (HL7) message feed
  - Publication of data to CPRS (CliO service architecture and Text Integration Utilities notes)
  - User-friendly Clinical Procedures Console, configurable by user
## Compensation and Pension Record Interchange (CAPRI)

### Vista Module: Compensation and Pension Record Interchange

<table>
<thead>
<tr>
<th>Version:</th>
<th>2.7</th>
</tr>
</thead>
</table>

### Namespace:

**Most Recent Patch:**

### Brief Summary:

CAPRI is an information technology initiative to improve service to disabled veterans by promoting efficient communications between the Veterans Health Administration (VHA) and Veterans Benefits Administration (VBA).

### Business Function Framework Line(s) of Business:

- Provide Access to Health Care, Manage Business Enabling Services

### Business Function Framework Function(s):

- Provide Member Access, Utilize Information Technology Services

### VHA Portfolio: Business Informatics

<table>
<thead>
<tr>
<th>Business Owner:</th>
<th>VHA Office of Disability and Medical Assessment and VBA Compensation Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>OIT Project Manager:</td>
<td>OIT/PD/PSS/HPS</td>
</tr>
</tbody>
</table>

### Full Description:

Online access to medical data enhances the timeliness of the benefits determination. The CAPRI software acts as a bridge between the VBA and VHA information systems. It offers VBA Rating Veteran Service Representatives and Decision Review Officers help in building the rating decision documentation through online access to medical data. It offers VHA Compensation & Pension (C&P) staff an easy, standardized way of reporting C&P Examination results.

Using CAPRI, VBA employees have a standardized, user-friendly method to rapidly access veterans’ electronic medical records throughout the VA. Initially developed specifically for VBA, the utility of CAPRI has been expanded to other user groups that include VHA, Office of the Medical Inspector, OI, Research, Veteran Service Officers, and others. One of the primary features of CAPRI is the Compensation and Pension Worksheet Module (CPWM) which is used by VHA C&P providers and staff. CPWM provides clinical users access to exam templates and tools that are used to document C&P examinations.

### Features

- Demographics
- Ability to save template work in progress
- Load new patients into VistA system.
- View patient demographics.
- Report patient address changes to VHA.
- C&P Examination Functionality
  - Add/Edit C&P exam request.
- Create an insufficient exam request.
- Individual and cumulative pending exam tracking.
- Request VAF 7131 information.
- VA Regional Office reports.
- AMIS 290 report.
- Automatic Mailman bulletins to AMIE mail groups.
- All standard AMIE worksheets are available in template form.
- Automatic sending of completed exam requests.
- Ability for site to review exams before releasing it to VBA.
- Multiple templates can be merged into a single exam.
- Patient Records Navigation
- View health summaries.
- View appointment lists.
- View progress notes.
- View discharge summaries.
- View consult requests and results.
- View cumulative vitals.
- View active medications.
- View lab reports.
- View imaging.
- View procedures.
- View FHIE/DoD data, if available.
# Computerized Patient Record System (CPRS): Adverse Reaction Tracking (ART)

<table>
<thead>
<tr>
<th>Vista Module: CPRS: Adverse Reaction Tracking (ART)</th>
<th>Version: 4.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: GMRA</td>
<td>Most Recent Patch:</td>
</tr>
<tr>
<td>Brief Description: The Adverse Reaction Tracking (ART) program provides a common and consistent data structure for adverse reaction data. This module has options for data entry and validation, supported references for use by external software modules, and the ability to report adverse drug reaction data to the Food and Drug Administration (FDA).</td>
<td></td>
</tr>
<tr>
<td>Business Function Framework Line(s) of Business: Deliver Healthcare, Managing Business Enabling Services</td>
<td></td>
</tr>
<tr>
<td>Business Function Framework Function(s): Provide Clinical Decision Support, Manage Health Records, Utilize Information Technology Services</td>
<td></td>
</tr>
<tr>
<td>VHA Portfolio: Health Provider Systems</td>
<td></td>
</tr>
<tr>
<td>Business Owner: VHA Pharmacy Benefits Management (PBM)</td>
<td>OIT Project Manager: OIT/PD/PSS/HPS</td>
</tr>
<tr>
<td>Full Description:</td>
<td></td>
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</tbody>
</table>

**Features**

- Documents patient allergy and adverse drug reaction data.
- Provides the functionality for other VistA modules to extract and add patient reaction data.
- Provides a reporting mechanism that supports VHA Directive 10-92-070 which specifies reporting of adverse drug reactions to the FDA.
- Includes ART event points in an Application Programmers Interface (API) allowing other VistA packages to know when specific ART events take place so package tasks can be performed.
- Alerts the Pharmacy and Therapeutics Committee each time the signs/symptoms are modified for a patient reaction.
- Generates progress notes. Displays all information at the time of an ART event on the Progress Notes API and allows editing of the note prior to sign off.
- Allows the site to track whether the patient has been asked if he/she has allergies.
- Tracks when the patient chart and ID bands have been marked indicating a particular reaction.
- Differentiates between historical and observed reactions.
- Tracks the particular signs/symptoms for a reaction.
- Allows for configuration of allergy files.
- Allows for editing and verification of reaction data.
- Allows for the addition of comments for each reaction to ensure completeness in reporting.
- Contains extensive reporting capabilities.
- Contains an online reference guide.
# Computerized Patient Record System (CPRS):
## Authorization/Subscription (ASU)

<table>
<thead>
<tr>
<th>Vista Module: CPRS: Authorization/Subscription (ASU)</th>
<th>Version: 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Namespace:</strong> USR</td>
<td><strong>Most Recent Patch:</strong></td>
</tr>
<tr>
<td><strong>Brief Description:</strong> The Authorization/Subscription Utility (ASU) provides a method for identifying who is authorized to perform various actions on clinical documents. These actions include signing, co-signing, and amending. ASU originated in response to Text Integration Utilities' document definition needs. Current security key capabilities were unable to efficiently manage the needs of clinical documentation (Discharge Summaries, Progress Notes, etc.).</td>
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</tr>
<tr>
<td><strong>Business Function Framework Line(s) of Business:</strong> Deliver Healthcare, Managing Business Enabling Services</td>
<td></td>
</tr>
<tr>
<td><strong>Business Function Framework Function(s):</strong> Manage Health Records, Utilize Information Technology Services, Conduct Supply Chain Operations, Manage Fixed Assets</td>
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<tr>
<td><strong>VHA Portfolio:</strong> Health Provider Systems</td>
<td></td>
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<tr>
<td><strong>Business Owner:</strong> VHA HIM</td>
<td><strong>OIT Project Manager:</strong> OIT/PD/PSS/HPS</td>
</tr>
<tr>
<td><strong>Full Description:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Features</strong></td>
<td></td>
</tr>
<tr>
<td>- Defines, populates, and retrieves information about user classes. User classes can be defined hospital-wide or more narrowly for a specific service and can be used across VistA to replace and/or complement keys.</td>
<td></td>
</tr>
<tr>
<td>- Links user classes with Text Integrated Utilities (TIU) document definitions and document events. Allows sites to maintain membership of users in User Classes and to distribute such maintenance tasks.</td>
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<tr>
<td>- Lists class members as active or inactive.</td>
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</tr>
<tr>
<td>- Allows infinite hierarchies of subclasses.</td>
<td></td>
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<tr>
<td>- Defines business rules to further manage document activities.</td>
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</tbody>
</table>
**Computerized Patient Record System (CPRS): Clinical Reminders (CR)**

<table>
<thead>
<tr>
<th>Vista Module: CPRS: Clinical Reminders</th>
<th>Version: 2.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: PXRM</td>
<td>Most Recent Patch:</td>
</tr>
</tbody>
</table>

**Brief Description:** Clinical Reminders may be used for both clinical and administrative purposes. However, the primary goal is to provide relevant information to providers at the point of care, for improving care for veterans. The package benefits clinicians by providing pertinent data for clinical decision-making, reducing duplicate documenting activities, assisting in targeting patients with particular diagnoses and procedures or site-defined criteria, and assisting in compliance with VHA performance measures and with Health Promotion and Disease Prevention guidelines.

**Business Function Framework Line(s) of Business:** Deliver Health Care

**Business Function Framework Function(s):** Provide Clinical Decision Support, Provide Care Management, Provide Medical Services, Manage Health Records

<table>
<thead>
<tr>
<th>VHA Portfolio: Health Provider Systems</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Business Owner: VHA HI/CMIO</td>
<td>OIT Project Manager: OIT/PD/PSS/HPS</td>
</tr>
</tbody>
</table>

**Full Description:** Version 2 of Clinical Reminders contains many enhancements to improve processing and management of reminders. Performance has been enhanced through the creation of an index of all clinical data used in reminder findings. All enhancements are intended to help the Reminders functionality smoothly transition to CPRS reengineering.

**Features**

- Inform clinicians when a patient is due to receive clinical activity.
- Target the clinicians who can manage and resolve the clinical activity most appropriately.
- Identify patients to whom a reminder applies, based on VISTA patient data.
- Identify the clinical activities that resolve or satisfy reminders.
- Summarize pertinent patient information to help clinicians determine appropriate follow-up activities.
- Allow clinicians to resolve reminders through CPRS.
- Provide aggregate reports that assist clinicians in managing their entire patient caseload.
- Support national clinical practice guidelines
Computerized Patient Record System (CPRS): Consult/Request Tracking

<table>
<thead>
<tr>
<th>Vista Module: CPRS: Consult/Request Tracking</th>
<th>Version: 3.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: GMRC</td>
<td>Most Recent Patch:</td>
</tr>
<tr>
<td>Brief Description: The Consult/Request Tracking package provides an efficient way for clinicians to order consultations and procedures from other providers or services within the VHA system, at their own facility or another facility. It also provides a framework for tracking consults and reporting the results. It uses a patient's computerized patient record to store information about consult requests.</td>
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<tr>
<td>Business Function Framework Line(s) of Business: Deliver Health Care</td>
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</tr>
<tr>
<td>Business Function Framework Function(s): Provide Clinical Decision Support, Provide Medical Services Manage Health Records</td>
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<tr>
<td>VHA Portfolio: Health Provider Systems</td>
<td></td>
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<tr>
<td>Business Owner: VHA HI/CMIO</td>
<td>OIT Project Manager: OIT/PD</td>
</tr>
<tr>
<td>Full Description:</td>
<td></td>
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<tr>
<td>Features:</td>
<td></td>
</tr>
<tr>
<td>☐ Allows direct access to Consults functions through menu options in CPRS.</td>
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</tr>
<tr>
<td>☐ Uses Consults' own menu options for managing the system, generating reports, tracking consults, or entering results for an existing consult request.</td>
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<tr>
<td>☐ Allows staff to set up consults as CPRS Quick Orders, streamlining the ordering process.</td>
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<tr>
<td>☐ Integrates with Prosthetics to track Home Oxygen, Eyeglasses, Contact Lenses, and other Prosthetics services.</td>
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<tr>
<td>☐ Produces a permanent record of the request and resolution for the patient's medical record.</td>
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<tr>
<td>☐ Allows all relevant parties to see the consult report in the context of the patient's record.</td>
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</tr>
<tr>
<td>☐ Allows use of TIU templates and boilerplate to report findings.</td>
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</tr>
<tr>
<td>☐ Allows display of Consult reports through TIU and CPRS.</td>
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</tr>
<tr>
<td>☐ Enables clinicians to order a consult at another facility, using HL7 Messaging and the VA Intranet.</td>
<td></td>
</tr>
</tbody>
</table>
Computerized Patient Record System (CPRS): Health Summary

**Vista Module:** CPRS: Health Summary  
**Version:** 2.7

**Namespace:** GMTS  
**Last Update:** Most Recent Patch

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

**Business Function Framework Line(s) of Business:** Deliver Healthcare

**Business Function Framework Function(s):** Provide Clinical Decision Support, Manage Health Records

**VHA Portfolio:** Health Provider Systems

**Business Owner:** VHA Patient Care Services  
**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** Incorporating and integrating from numerous VistA packages, Health Summary provides in standardized format a clinically-oriented overview of either individual patients or cohorts of patients across numerous data elements.

**Features**

- CPRS: Health Summary integrates data from the following packages:
  - Admission Discharge Transfer (ADT)/Registration
  - Clinical Procedures/Medicine
  - Compensation Pension Records Interchange (CAPRI)/Automated Medical Information Exchange (AMIE)
  - Computerized Patient Record System (CPRS)
  - CPRS: Adverse Reaction Tracking (ART)
  - CPRS: Clinical Reminders
  - CPRS: Consults/Request Tracking
  - CPRS: Problem List
  - CPRS: Text Integration Utility (TIU)
  - Laboratory
  - Mental Health
  - Nursing
  - Nutrition and Food Service (NFS)
  - Patient Care Encounter (PCE)
  - Pharmacy: Inpatient Medications
  - Pharmacy: Outpatient Pharmacy
  - Radiology
  - Scheduling
  - Social Work
  - Spinal Cord Dysfunction
  - Surgery
  - VistA Imaging System
- Health Summary users can print an Outpatient Pharmacy Action Profile with bar codes in tandem with a health summary.
- Health Summary now exports components that allow staff to view remote patient data through CPRS. Additionally, remote clinical data can be viewed using any Health Summary Type that has an identically named Health Summary Type installed at both the local and remote sites.
- Clinical Reminders work with Health Summary to furnish providers with timely information about their patients' health maintenance schedules. Providers can work with local coordinators to set up customized schedules based on local and national guidelines for patient education, immunizations, and other procedures.
- Health Summary components 'Progress Notes' and 'Selected Progress Notes' can display the new interdisciplinary progress notes and all of the entries associated with the interdisciplinary notes.
Computerized Patient Record System (CPRS): Problem List

<table>
<thead>
<tr>
<th>Vista Module: CPRS: Problem List</th>
<th>Version: 2.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: GMPL</td>
<td></td>
</tr>
<tr>
<td>Brief Description: A Problem List is used to document and track a patient’s problems. It provides the clinician with a current and historical view of the patient’s health care problems across clinical specialties, and allows each identified problem to be traceable through the VistA system in terms of treatment, test results, and outcome.</td>
<td></td>
</tr>
<tr>
<td>Business Function Framework Line(s) of Business: Deliver Healthcare</td>
<td></td>
</tr>
<tr>
<td>Business Function Framework Function(s): Provide Medical Services, Manage Health Records</td>
<td></td>
</tr>
<tr>
<td>VHA Portfolio: Health Provider Systems</td>
<td></td>
</tr>
<tr>
<td>Business Owner: VHA HI/CMIO</td>
<td>OIT Project Manager: OIT/PD/PSS/HPS</td>
</tr>
<tr>
<td>Full Description: This application supports care givers, such as physicians, nurses, social workers, and others, in inpatient and outpatient settings. It is also designed to be used by medical and coding clerks. A variety of different data entry methods are possible with this application. Use of Problem List varies from site to site, depending on the data entry method a facility has chosen. Many sites use Encounter Forms, with clerks entering most of the data in the encounter forms. Encounter forms are generated from patient data in the system and added to or modified by clinicians. Problem List can be linked to other sections of the medical record, such as Health Summary, Progress Notes, Order Entry/Results Reporting, Consults, test results, care plans for Nursing and Mental Health, Discharge Summaries, and Billing/Encounter Forms. The application supports import of problem information from other clinical settings outside the immediate medical facility.</td>
<td></td>
</tr>
<tr>
<td>Features:</td>
<td></td>
</tr>
<tr>
<td>☐ Allows a clinician to view an individual problem list for any given patient.</td>
<td></td>
</tr>
<tr>
<td>☐ Supports a variety of specialized views of a patient’s problem list.</td>
<td></td>
</tr>
<tr>
<td>☐ Uses the Lexicon utility that permits the use of “natural” terminology when selecting a problem. Each term is well defined and understandable. A user, site, or application may substitute a preferred synonym.</td>
<td></td>
</tr>
<tr>
<td>☐ Can be linked to other sections of the medical record, such as Health Summary, Progress Notes, Order Entry/Results Reporting, Consults, test results, care plans for Nursing and Mental Health, Discharge Summaries, and Billing/Encounter Forms.</td>
<td></td>
</tr>
<tr>
<td>☐ Supports import of problem information from other clinical settings outside the immediate medical facility.</td>
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</tr>
<tr>
<td>☐ Allows reformulation of a problem.</td>
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</tr>
<tr>
<td>☐ Supports multiple forms of data capture: direct clinician entries, clerk entry, encounter forms, foreign problem lists, scanned encounter forms, hand-held devices, etc.</td>
<td></td>
</tr>
<tr>
<td>☐ Requires minimal data entry.</td>
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</tr>
</tbody>
</table>

VistA Monograph 53 October 2013
Computerized Patient Record System (CPRS): Text Integration Utilities (TIU)

<table>
<thead>
<tr>
<th>Vista Module: CPRS: Text Integration Utilities (TIU)</th>
<th>Version: 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: TIU</td>
<td>Most Recent Patch:</td>
</tr>
</tbody>
</table>

Brief Description: Text Integration Utilities (TIU) simplifies the use and management of clinical documents for both clinical and administrative medical facility personnel. In connection with Authorization/Subscription Utility (ASU), a facility can set up policies and practices for determining who is responsible or has the privilege for performing various actions on required documents.

The Version 1.0 release included Discharge Summary and Progress Notes. With the release of CPRS and Consults/Request Tracking, TIU has been upgraded to integrate with these packages.

Business Function Framework Line(s) of Business: Deliver Healthcare, Manage Business Enabling Services

Business Function Framework Function(s): Manage Health Records, Utilize Information Technology Services

VHA Portfolio: Health Provider Systems

Business Owner: VHA OIA HIM OIT Project Manager: OIT/PD/PSS/HPS

Full Description: Interfaces with the Computerized Patient Record System (CPRS): the template utilities in the GUI version of CPRS allow speedy point-and-click composition of notes, consults, and summaries. Templates can be set up for specific types of documents for specific clinical needs. Interfaces with Problem List, Automated Information Capture System (AICS), Patient Care Encounter (PCE), Authorization/Subscription Utility (ASU), Incomplete Record Tracking, Health Summary, and Visit Tracking. Uses a standardized and common user interface, which allows clinicians and others to retrieve many kinds of documents from a single source.

Interfaces with VistA Imaging allowing clinicians to link TIU documents to all types of clinical images such as X-rays, MRIs, and CAT scans. The package permits document input from a variety of data capture methodologies such as transcription, direct entry through CPRS or the TIU package, or upload of ASCII formatted documents into VistA.

TIU follows HL7 interface and other communication standards.

Features:
- Provides boilerplate functionality for the automatic fill-in of information from VistA files into TIU documents. Boilerplates and embedded objects can be set up for specific types of documents for specific clinical needs.
- Interfaces with the Computerized Patient Record System (CPRS) – the template utilities in the GUI version of CPRS allow speedy point-and-click composition of notes, consults, and...
summaries. Templates can be set up for specific types of documents for specific clinical needs. Interfaces with Problem List, Automated Information Capture System (AICS), Patient Care Encounter (PCE), Authorization/Subscription Utility (ASU), Incomplete Record Tracking, Health Summary, and Visit Tracking. Uses a standardized and common user interface, which allows clinicians and others to retrieve many kinds of documents from a single source.

- Enables health care practitioners to enter interdisciplinary notes regarding a single episode of care for a patient. This is accomplished through the addition of a level to the tree structure where a note can have children (subordinate entries) and each of the children can have a different author. This provides for more complete patient records and facilitates input from a variety of practitioners regarding a single episode of care.

- Interfaces with VistA Imaging allowing clinicians to link TIU documents to all types of clinical images such as X-rays, MRIs, and CAT scans.

- Uses an integrated database, which lets clinicians, quality management staff, researchers, and management search for and retrieve clinical documents more efficiently because documents reside in a single location within the database.

- Permits document input from a variety of data capture methodologies such as transcription, direct entry through CPRS or the TIU package, or upload of ASCII formatted documents into VistA.

- Uses a uniform file structure for storage of documents and management of document type.

- Uses a consistent file structure for defining elements and parameters of a document.

- Allows a variety of user actions, such as entry, edit, electronic signature, addenda, browse, notifications, etc.

- Allows a variety of management functions, including amendment, deletion, and identification of signature surrogate, re-assignment, and administrative authentication.

- Follows HL7 interface and other communication standards.
## Computerized Patient Record System (CPRS): Text Integration Utilities (TIU) Group Notes

<table>
<thead>
<tr>
<th>Vista Module: CPRS: Text Integration Utilities (TIU) Group Notes</th>
<th>Version: 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Namespace</strong></td>
<td><strong>Most Recent Patch:</strong></td>
</tr>
<tr>
<td>Brief Description: This program was designed to assist providers in documenting group therapy sessions and events such as immunization clinics.</td>
<td></td>
</tr>
</tbody>
</table>

**Business Function Framework Line(s) of Business:** *(Information listed is for CPRS TIU since no record of TIU Group Notes was found)* Deliver Healthcare, Manage Business Enabling Services  
Business Function Framework Function(s): Manage Health Records, Utilize Information Technology Services  

<table>
<thead>
<tr>
<th>VHA Portfolio: Health Provider Systems</th>
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<tbody>
<tr>
<td><strong>Business Owner:</strong> VHA Patient Care Services</td>
<td><strong>OIT Project Manager:</strong> OIT/PD/PSS/HPS</td>
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</table>

**Full Description:** TIU Group notes allows the easy assembly of patient groups based on Clinics, Specialties, Wards, Teams, or Provider lists. It then allows the note author to specify parts of a note that apply to the entire group and parts that apply to individuals. It does the same with encounter data. After the note and encounter information is complete, it provides for a single signature for the entire group.
## Cross-Application Integration Protocol (CAIP)

<table>
<thead>
<tr>
<th>Vista Module: Cross Application Integration Protocol (CAIP)</th>
<th>Version:</th>
</tr>
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<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch</td>
</tr>
</tbody>
</table>

**Brief Description:** The CAIP specification introduces a structure for defining, providing, and accessing services as shared resources within the VHA.

**Business Function Framework Line of Business:**

**Business Function Framework Function(s):**

**VHA Portfolio: Common Services**

**Business Owner:**

**OIT Project Manager:**

**Full Description:** It is structured around a service-oriented and/or service-based architectural objective, which promotes good software development practices, such as loose coupling between applications, and is centered on the concepts of Services and Capabilities.

The CAIP framework is an implementation of the CAIP Specification.

**Features:**

- Provides Business Delegate interfaces for use by the Service Provider when developing Business Delegates for their services.
- Provides Consumer-Side/Technology Adaptation to the Service Facades of the service.
- Allows Implementation of the Business Delegate Factory, which uses the Service Locator to find service information from the Naming and Directory Service.
Decision Support System (DSS) Extracts

Vista Module: Decision Support System (DSS) Extracts
Version: 3.0

Namespace: ECX
Most Recent Patch:

Brief Description: The VistA Decision Support System (DSS) Extracts software provides a means of exporting data from selected VistA software modules and transmitting it to a Decision Support System (DSS) resident at the Austin Information Technology Center (AITC). This transfer is accomplished through a set of extract routines, intermediate files, audit reports, transmission, and purge routines.

Business Function Framework Line of Business: Deliver Health Care, Manage Business Enabling Services
Business Function Framework Function(s): Provide Clinical Decision Support, Utilize Information Technology Services

VHA Portfolio: Business Informatics

Business Owner: VHA CFO – Decision Support Office
OIT Project Manager: OIT SD&E EAS (Enterprise Application Support)

Full Description: Data from VistA packages is stored by the extract routines in the intermediate files, where it is temporarily available for local use and auditing. The data is then transmitted to the AITC where it is formatted and uploaded into commercial software. After the data has been successfully uploaded into the commercial software, it is purged from the intermediate files.

Extracts consist of the following functions: implementation of extract processes; scheduling extracts, verifying extracts against other VistA reports, transmission of extracts to the commercial software, verification of transmission, and purging extracts.

Features

- Extracts data from the following VistA software packages:
  - Admissions (PIMS)
  - Audiology and Speech Pathology (QUASAR)
  - BCMA Extract
  - Blood Bank (Laboratory)
- Clinic Visit (PIMS)
- Event Capture
- Inpatient Medications (IV-Pharmacy)
- Laboratory
- Laboratory Results
- Nutrition
- Pharmacy Prescriptions (Pharmacy)
- PIMS
- Prosthetics
  - Radiology
  - Surgery
- Transfer and Discharge (PIMS)
- Treating Specialty Change (PIMS)
- Unit Dose (Pharmacy)

- Uses a roll-and-scroll format that allows users to perform the various functions by selecting the appropriate menu options.
- Uses VA Mailman to transmit data to commercial software resident at the AITC.
Dental Record Manager (DRM) Plus

<table>
<thead>
<tr>
<th>Vista Module: Dental Record Manager (DRM) Plus</th>
<th>Version: 4.7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
</tr>
<tr>
<td>Brief Description: The original Dental Record Manager (DRM) software, installed in all VA dental clinics by the end of FY 2001, provided a customized user-friendly Windows interface for entering clinical encounter information and assisted with the assessment of ongoing care using current patient data for completed procedures.</td>
<td></td>
</tr>
</tbody>
</table>

| Business Function Framework Line(s) of Business: Deliver Health Care, Manage Business Enabling Services |
| Function(s): Provide Care Management, Provide Dentistry, Provide Medical Services, Manage Health Records, Provide Financial Management, Utilize Information Technology Services |

<table>
<thead>
<tr>
<th>VHA Portfolio: Health Provider Systems</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business Owner: VHA Dental</td>
</tr>
<tr>
<td>Full Description: DRM Plus brings significant graphical interface (GUI) entry and display enhancements to the original DRM version. DRM Plus records diagnostic findings, including head and neck lesions, restorative and periodontal charting, and sequenced treatment planning. DRM Plus helps assure quality care, patient safety, and staff communication in an environment that is fully integrated with the VA electronic health record.</td>
</tr>
<tr>
<td>The DRM Project also replaces the Dental Activity System (DAS) national and local reporting structure with the new Dental Encounter System (DES).</td>
</tr>
<tr>
<td>Chart/Treatment: This tab replaces the DRM Encounter Note tab and features the Treatment &amp; Exam and the Periodontal Chart views. Features include head and neck findings, advanced graphics, and sequencing.</td>
</tr>
<tr>
<td>Treatment &amp; Exam: This screen is used to record and display oral and maxillofacial diagnostic examination findings, including restorative findings. Certain diagnoses, such as implants, impacted teeth, retained roots and teeth flagged for observation, appear graphically on all screens.</td>
</tr>
<tr>
<td>Periodontal Chart: This screen records and measures various types of periodontal conditions. Periodontal charting icons are condition-specific, allowing a graphic charting display as well as the identification of critical elements in periodontal report tables. Critical elements charted include pocket depth, bleeding, delayed bleeding, FGM, MGJ, suppuration, mobility, and furcation involvement. Treatment Plan: This screen allows the provider to enter and sequence a plan of care. Color is used to differentiate the status of various conditions. Some items appear graphically on all screens.</td>
</tr>
</tbody>
</table>
Completed Care: This screen is used to enter procedures completed during the current visit. Certain completed care procedures, entered from the Completed Care Screen, appear graphically on all screens.

**Clinical Benefits**

- Improves communication among treating dental providers for patient oral and maxillofacial findings and for plan of care, including sequencing.
- Easily captures oral and maxillofacial diagnostic findings in a graphical and transaction-oriented format.
- Offers the provider the flexibility to enter only completed procedures or to enter the full range of findings, planned care, and completed procedures for each patient.
- Provides tracking of head and neck lesions entered by multiple dental providers.
- Captures periodontal findings in a graphical charting display that includes reports.
- Provides a dynamic interface for multiple dental providers to sequence the patient plan of care.
- Offers a visual display of most transactions, including implants and prostheses.
- Offers additional administrative and management tools for tracking workload and individual patient treatment plans.
- Provides for integration of medical CPT codes into the software.
- Interfaces with the new Dental Encounter System (DES) local and national database.
- Provides a dental history file that includes all completed procedures for each patient.

Integrates dental information within the VA electronic health record environment with a user-friendly graphical user interface (GUI).
# Diagnostic Related Group (DRG) Grouper

**Vista Module:** CPRS: Diagnostic Related Group (DRG) Grouper  
**Version:** 18.0

**Namespace:** ICD  
**Most Recent Patch:**

**Brief Description:** The Diagnostic Related Group (DRG) Grouper is based on the Medicare Grouper requirements as defined by the Centers for Medicaid and Medicare Services (CMS) and as reported in the Federal Register. Each DRG represents a class of patients who are deemed medically comparable and who require approximately equal amounts of health care resources.

**Business Function Framework Line of Business:** Manage Public Health, Deliver Healthcare, Manage Business Enabling Services

**Business Function Framework Function(s):** Conduct Epidemiological Assessments, Manage Health Records, Utilize Information Technology Services, Provide Financial Management

**VHA Portfolio:** Business Informatics

**Business Owner:** VHA Office of Informatics and Analytics  
**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** The module groups diagnostic and operation/procedure codes into the DRGs based on the combination of codes, age, sex, discharge status, and occurrence of death.

## Features

- Provides annual updates that conform to the latest release of the commercial grouper.
- Functions within or apart from other modules.
- Supplies detailed descriptions of DRGs, diagnostic codes, and operation/procedure codes.
- Accepts one primary diagnosis and multiple secondary diagnostic codes and operation/procedure codes.

Displays weighted work unit values as well as national and local high and low trim point values for each DRG.
## Duplicate Record Merge

**Vista Module:** Duplicate Record Merge  
**Version:** 7.3

**Namespace:**  
**Most Recent Patch:**

Brief Description: Patient Merge provides an automated method to eliminate duplicate patient records within the VistA database. It is an operational implementation of the Duplicate Resolution Utilities, which were released to the field with Kernel Toolkit.

**Business Function Framework Line(s) of Business:** Deliver Health Care, Manage Business Enabling  
**Business Function Framework Function(s):** Manage Health Records, Utilize Information Technology Services

**VHA Portfolio:** Common Services

**Business Owner:** VHA  
**OIT Project Manager:** OIT

### Full Description:

The overall process is broken down into these phases: the search for potential duplicate record pairs, review/verification of the pairs, approval of those pairs, and the merge of the record pairs.

### Features:

- Initial search and identification of potential duplicate records is accomplished by performing comparisons on key patient traits in the centralized Person Service Identify Management (PSIM) database. It is the goal of PSIM to provide an authoritative source for persons’ identity traits throughout the Veterans Health Administration (VHA).

- The review/verification phase of the patient merge process consists of two levels of review before verification. The primary reviewer performs a review of patient demographic information and determines if the pair is a duplicate record, then selects the record that will be merged into the other record, which is known as the merge direction. When data from ancillary services is present, a notification (via MailMan message or alert – or both) is sent to the designated ancillary reviewers. All reviewers determine whether the record pair is a duplicate, not a duplicate, or unable to determine the status. If all reviewers conclude that the pairs are duplicates and need to be merged, the record pair is designated as a verified duplicate available for merge approval. For those pairs determined not to be duplicates, the processing stops and the status indicates they are verified as non-duplicates. If status cannot be determined, the record pair remains in the DUPLICATE RECORD file and processing ends.

- The next phase is the merge of the record pairs. A wait time may be configured between verification and merge. The merge is a non-reversible process. Once the pair of records is merged, there is no automated way of undoing the process. The application has been written to support multiple parallel jobs (threads - as specified by the site) during the merge process.
Electronic Error and Enhancement Reporting (E3R)

<table>
<thead>
<tr>
<th>Vista Module: Electronic Error and Enhancement Reporting (E3R)</th>
<th>Version: 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
</tr>
<tr>
<td>Brief Description: Electronic Error and Enhancement Reporting (E3R) package is designed for storing, reporting, and tracking the requests for changes in VistA applications.</td>
<td></td>
</tr>
<tr>
<td>Business Function Framework Line of Business: Provide Health Care Administration, Manage Business Enabling Services</td>
<td></td>
</tr>
<tr>
<td>Business Function Framework Function(s): Monitor Clinical Performance, Utilize Information Technology Services</td>
<td></td>
</tr>
<tr>
<td>VHA Portfolio: Common Services</td>
<td></td>
</tr>
<tr>
<td>Business Owner: VHA</td>
<td>OIT Project Manager: OIT</td>
</tr>
</tbody>
</table>

| Full Description: Anyone in VHA may propose an enhancement using E3R. The individual making the proposal specifies which package (module) in VistA he/she believes needs the enhancement. The enhancement request is sent to a user group associated with the package. The members of that mail group exchange messages on their view of the enhancement request. The proposal, along with all of the feedback from the mail group, is sent to the package's development program director for a final decision. E3R tracks and logs the entire discussion process on these enhancement proposals. Provides for submitter to initiate, modify, view or cancel a request. Assigns a suspense date and a status category to all submitted E3Rs. The status category informs all users of the request's current state in the processing cycle. Generates a mail message containing the text of the request whenever an E3R is generated. The message is sent to the submitter, the package developer and members of the mail group associated with the package. Tracks package developer's response to each E3R request. Developer can deny or accept the request, enter comments on it, and refer a request to an arbitrator if he feels the request should not be assigned to a package. Permits an arbitrator to enter comments, to reassign the request to the appropriate package, and, along with the package developer, to accept or deny the request. Produces several reports available to both users and developers. |

Features

- Tracking, storing, reporting requests for changes in VistA
Electronic Signature (Esig)

- **VistA Module:** Electronic Signature (Esig)
- **Version:** 1.0
- **Namespace:** XOBE
- **Most Recent Patch**

**Brief Description:** The Electronic Signature (Esig) service provides an interim solution for the use of electronic codes during certain VistA security infrastructure and architecture evolutions.

**Business Function Framework Line(s) of Business:** Manage Business Enabling

**Business Function Framework Function(s):** Utilize Information Technology Services

**VHA Portfolio:** Health Provider Systems

**Business Owner:** VHA

**OIT Project Manager:** OIT

**Full Description:** The service duplicates for Java applications (J2EE or J2SE) the Kernel V. 8.0 electronic signature functionality currently used by VistA/M applications. Esig furnishes a standard, consistent set of APIs that VistA developers can use to provide users access to electronic signature data stored on VistA/M systems.

Esig APIs make calls from Java applications to VistA/M systems to retrieve, validate, and store electronic signature codes and signature block information (name, title, office phone, etc.). Additional Java APIs provide encoding/decoding, hash, and checksum calculation utilities, but do not interact with the VistA/M system.

Applications that implement the Esig service must provide a user interface (UI) to prompt users for their secret codes when authorizing orders, prescriptions, financial transactions, or other business processes. Users may also need the UI to create or modify their code or signature block data.

**Features**

- Provides applications access to Kernel electronic signature APIs.
- Supports J2EE and J2SE implementations.
- Requires ESIG KIDS build installation on VistA/M server.
VistA application provides any necessary user interfaces.

- Distributed with feature-complete sample applications (J2SE and J2EE).
- Sample J2EE application can be deployed to admin/managed servers/clusters.
- Electronic Signature security features are based on the following requirements:
  - VistA Esig applications are required to authorize and authenticate their users.
    - Infrastructure tools such as KAAJEE (Kernel Authentication and Authorization for J2EE) and FatKAAT (rich-client Kernel Authentication and Authorization) are mandated for use in indicated VistA Web-based and rich-client applications, respectively.
## Emergency Department Integration Software (EDIS)

<table>
<thead>
<tr>
<th>Vista Module: Emergency Department Integration Software (EDIS)</th>
<th>Version: 2.1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
</tr>
</tbody>
</table>

**Brief Description:** Emergency Department Integration Software (EDIS) incorporates several Web-based views that extend the current Computerized Patient Record System (CPRS) to help healthcare professionals track and manage the flow of patient care in the emergency-department setting.

**Business Function Framework Line(s) of Business:** Provide Healthcare Administration, Deliver Healthcare, Manage Business Enabling Services

**Business Function Framework Function(s):** Conduct Disaster Preparedness Programs, Provide Nursing, Provide Medical Services, Manage Health Records, Utilize Information Technology Services

**VHA Portfolio:** Health Provider Systems

<table>
<thead>
<tr>
<th>Business Owner: Systems Redesign</th>
<th>OIT Project Manager: OIT PD</th>
</tr>
</thead>
</table>

**Full Description:** EDIS views are based on an application originally developed in VISN 2. Most views are site-configurable.

**Features:**
- Addition of emergency department patients to the application’s display board
- Viewing of information about patients on the display board
- Editing of Patient Information and configuring the display board
- Removal of patients from the display board/entering of patient dispositions
- Creation of administrative reports
- Provides role-based access to specific functionality sets with views disabled based on these role-based access protocols
Engineering (Automated Engineering Management System/Medical Equipment Reporting System: AEMS/MERS)

Vista Module: Engineering (AEM/MERS)  Version: 7.0

Namespace: EN  Most Recent Patch:

Brief Description: Engineering, also known as Automated Engineering Management System/Medical Equipment Reporting System (AEMS/MERS), facilitates the management of information needed to effectively discharge key operational responsibilities normally assigned to VA engineering organizations, such as Work Orders, Equipment Management, Program Management and Space/Facility Management.

Business Function Framework Line of Business: Provide Health Care Administration, Manage Business Enabling Services

Business Function Framework Function(s): Perform Hospital Administration, Manage VHA-wide Administrative Services, Conduct Supply Chain Operations, Provide Financial Management

VHA Portfolio: Business Informatics

Business Owner: VHA Procurement and Logistics Office (PLO)  OIT Project Manager: OIT Corporate Delivery Projects

Full Description:

The Engineering package was designed as a resource that can be shared by medical center administrative staff. Safeguards against unauthorized editing of key data elements of non-expendable (NX) equipment records have been designed into the system. Engineering maintains integration agreements with Integrated Funds Distribution, Control Point Activity, Accounting and Procurement (IFCAP) such that the status of work orders is automatically updated on the basis of orders for parts or service. The Engineering package is the VA's official record of inventory for capitalized personal property.

Features

- Manages electronic work orders. Staff throughout a facility can electronically enter work requests. These requests are promptly reviewed by Engineering personnel and assigned to the
appropriate maintenance shop.

- Tracks and controls work orders, maintaining annotated repair histories for medical and non-medical equipment. There is a separate menu option for display of incomplete work orders.
- Uses bar codes for equipment inventory and preventive maintenance. Completed work orders are automatically posted to equipment histories.
- The Project Tracking module is used to record significant events during construction and non-recurring maintenance projects when the management of such a project has been delegated to the facility.

The Equipment Management module contains building features (square footage, floor coverings, window types, etc.) and keeps track of locks and keys. Provides capitalized personal property data to the Fixed Assets subsystem (FAP) of the Financial Management System (FMS).
### Enrollment Application System: 10-10EZ Application

<table>
<thead>
<tr>
<th>Vista Module: Enrollment Application System</th>
<th>Version: 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: EAS</td>
<td>Most Recent Patch:</td>
</tr>
</tbody>
</table>

**Brief Description:** Enrollment Application System (EAS) facilitates the processing of the 10-10EZ Application for Health Benefits, which has been transmitted to the VHA site from the **On-Line** 10-10EZ web-based software.

**Business Function Framework Line(s) of Business:** Provide Access to Health Care

**Business Function Framework Function(s):** Provide Member Access

**VHA Portfolio:** Business Informatics

**Business Owner:** VHA Chief Business Office

**OIT Project Manager:** OIT Product Development (PD)

**Full Description:**

Enrollment Application System (EAS) facilitates the processing of the 10-10EZ Application for Health Benefits, which has been transmitted to VHA for action from the **On-Line** 10-10EZ web-based software.

The 10-10EZ module allows site staff with enrollment and registration responsibilities to review all data entered by a veteran on the electronic 10-1 0EZ form before committing the data to the site database. It also provides a basic tracking mechanism in order to follow the progress of the veteran’s application and respond to specific inquiries.

**Features**

- Automatically receives incoming 10-10EZ data transmissions from the Web-based application into a VistA holding file.
- Provides a List Manager interface that allows the enrollment/registration staff to:
  - Match the Applicant with an existing Patient record when appropriate.
  - Review all 10-10EZ data and perform corrections as needed.
  - Print the 10-1 0EZ form with data in order to send to the veteran for signature.
  - Verify that the veteran has signed the 10-10EZ.
  - Commits 10-10EZ data to the VistA Patient database in preparation for further enrollment and/or registration activities.
  - Responds to customer (e.g., veteran) inquiries as to the status of a 10-10EZ Application.
  - Provides an audit trail of all significant actions performed in processing a 10-10EZ
Application as a basis for management reports.

- Retains a copy of any original Patient database data elements overwritten by incoming 10-10EZ data elements.
# Enrollment Application System: Local Signed Means Test Application (ROSSIO 22)

<table>
<thead>
<tr>
<th>Vista Module: Enrollment Application System: Local Signed Means Test Application (ROSSIO 22)</th>
<th>Version: 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: EAS</td>
<td>Most Recent Patch: EAS<em>1</em>15</td>
</tr>
<tr>
<td>Brief Description:</td>
<td>This module assists in the identification of best practices for conducting means test including necessary Veteran signatures.</td>
</tr>
<tr>
<td>Business Function Framework Line(s) of Business:</td>
<td>Provide Access to Health Care</td>
</tr>
<tr>
<td>Business Function Framework Function(s):</td>
<td>Provide Member Access</td>
</tr>
<tr>
<td>VHA Portfolio:</td>
<td>Business Informatics</td>
</tr>
<tr>
<td>Business Owner:</td>
<td>VHA CBO</td>
</tr>
<tr>
<td>OIT Project Manager:</td>
<td>OIT PD</td>
</tr>
<tr>
<td>Full Description:</td>
<td>This project was initially undertaken in response to Item #22 in the &quot;Report of Task Force to Review Enrollment, Means Testing and Income Verification&quot; (a.k.a. Rossio Report) dated December 15, 2000. In the area of Means Test (MT) Deficiencies, Item #22 required that the Veterans Health Administration (VHA) identify best practices for means testing and acquiring veterans' signatures at the local level and explore the promulgation of these best practices throughout the system. Until Patch EAS<em>1</em>3 was released in April 2002, there were no provisions within Veterans Health Information Systems and Technology Architecture (VistA) functionality that prevented the scheduling of future appointments for patients who required a MT. Additionally, there was no mechanism present to provide the patient adequate notification of the need to provide a current MT prior to the annual anniversary date. In response to the Rossio Report, the Enrollment Task Force recommended the national implementation of functionality similar to that developed locally at several sites in order to manage scheduling activities for veterans who require the completion of a MT. Sites that had developed and implemented local software (Class III) provided copies of their routines and supporting documentation to the Enrollment Systems Group (ESG) to assist in this endeavor. Patch EAS<em>1</em>3 (April 2002) provided a national patch release to the Enrollment Application Systems (EAS) software of locally implemented software that had been converted from Class III to Class I. Patch EAS<em>1</em>15 is in response to requests for enhancements and changes to the way MT reminder letters are printed and to correct issues with letter printing as reported by several sites.</td>
</tr>
</tbody>
</table>
Features:

- Manual generation of letters to veterans at designated times prior to the expiration of a veteran's MT and the tracking of letter status.
- Automated MT letter functionality provides the VistA site with the ability to notify the patient in advance of the need to provide a MT via the use of a letter generated 60 days prior to the MT anniversary date and following up with additional letters at the 30 and 0-day marks if a response is not received.
### Enrollment Application System: Long Term Care (LTC) Copayment

<table>
<thead>
<tr>
<th>Vista Module: Enrollment Application System: Long Term Care (LTC) Copayment</th>
<th>Version: 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: EAS</td>
<td>Most Recent Patch:</td>
</tr>
<tr>
<td>Brief Description: This module supports the mandate for collection of Long Term Care copayments, as required by Public Law 106-117.</td>
<td></td>
</tr>
<tr>
<td>Business Function Framework Line(s) of Business: Provide Access to Health Care</td>
<td></td>
</tr>
<tr>
<td>Business Function Framework Function(s): Provide Member Access</td>
<td></td>
</tr>
<tr>
<td>VHA Portfolio: Business Informatics</td>
<td></td>
</tr>
<tr>
<td>Business Owner: VHA CBO</td>
<td>OIT Project Manager: OIT PD</td>
</tr>
</tbody>
</table>

### Full Description:

The Veterans Millennium Health Care and Benefits Act, Public Law 106-117, Sec. 101, mandates the application of copayments for veterans receiving Long Term Care (LTC) services. The LTC Copayment software is designed to work in conjunction with software currently in place for determining veteran medical and pharmacy copayment obligations and benefit eligibility based on military history, service-connected disabilities, and financial input.

**Features**

- Allows users to enter, edit, store and print financial information given by the veteran on VA Form 10-10EC, Application for Extended Care Services. (Authorized VA users can download a sample form from the Long-term Care Copayments web page on the VistaU Enrollment Training Initiatives web site at [http://vawww.vistau.med.va.gov/Enrollment/LTC_copayments.html](http://vawww.vistau.med.va.gov/Enrollment/LTC_copayments.html))
- Allows users to designate a veteran who is exempt from the LTC copayments and the reason for the exemption
- Using the financial information entered from the VA Form 10-10EC, Application for Extended Care Services, automatically calculates and displays or prints an estimate of the LTC copayments that the veteran will be obligated to pay for the next twelve months
- Provides Integrated Billing with a veteran's copayment amount via an API
- Automates eligibility exemptions
- Adds the LTC Copayment Exemption Test submenu and associated user options
- Provides spend-down calculations.
- Allows users who have the appropriate security key to delete a LTC Copayment Test (10-10EC)
- Allows users who have the appropriate security key to edit the date of a LTC Copayment Test
- Allows users to add a new LTC Copayment Test for the veteran at any time, including multiple tests within the same year
- Allows users to enter burial and funeral expenses for single veterans
- Allows users to enter expenses greater than total income on the input screen for the LTC Copayment Test (10-10EC)
- Displays the veteran’s LTC copayment status and last test date when using the following Registration user options: Load/Edit, Patient Inquiry, and Register a Patient
- If the veteran did not agree to pay the copayments display a message that indicates that the veteran is ineligible for LTC services
- Prevents the entry of a LTC Copayment Test for a patient who is not a veteran.
- Corrects the display of the DECLINES TO PROVIDE FINANCIAL INFORMATION field to include both the “YES” and “NO” responses when the LTC Copayment Test is displayed
- Modifies the Calculated LTC Copayments report to correctly display the maximum copayment amounts for veterans who refuse to pay the copayment
- Corrects the determination of the LTC Copayment status when a veteran’s income is $0. The LTC Copayment status will be EXEMPT. This change addresses NOIS MAC-1102-61792.
- Adds a new menu option, Expiring or Expired LTC Copayment Tests, to the LTC Copayments menu. It allows users to print a report listing veterans whose LTC Copayment Tests have already expired or are about to expire
### Enrollment System

<table>
<thead>
<tr>
<th>Vista Module: Enrollment System</th>
<th>Version: 3.0</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
</tr>
<tr>
<td>Brief Description: The Enrollment System is VHA’s System of Record (SOR) for managing enrollment and eligibility information. The Enrollment System collects and verifies enrollment and eligibility information which is used to determine services a Veteran and other VHA health care beneficiaries are entitled to receive.</td>
<td></td>
</tr>
</tbody>
</table>

| Business Function Framework Line(s) of Business: Deliver Healthcare, Provide Access to Health Care, Provide Health Care Administration, |
| Business Function Framework Function(s): Provide Member Access and Perform Hospital Administration, |

<table>
<thead>
<tr>
<th>VHA Portfolio: Business Informatics</th>
</tr>
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<tbody>
<tr>
<td><strong>Business Owner:</strong> Chief Business Office (CBO)</td>
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</tbody>
</table>

**Full Description:** Enrollment System Redesign (sometimes referred to as the Health Eligibility Case Management System (HECMS) allows updates to the enterprise enrollment system to be shared with all treating facilities of interest for a given veteran, yielding timelier and more efficient eligibility determinations.

**Functions:**

- **Expert System:** Based on information obtained from sites, VBA (Veterans Benefit Administration) and Health Eligibility Center (HEC) staff determine and communicate verified medical benefits eligibility and enrollment (E&E) information for all Veterans and beneficiaries.

- **Work Flow (Case Management):** For every exception where the expert system process cannot make a determination, "cases" are created for human intervention. HEC staff utilizes HECMS to manage these "cases" to completion so that verified E&E can be determined.
Enterprise Exception Log Service (EELS)

<table>
<thead>
<tr>
<th>Vista Module: Enterprise Exception Log Services (EELS)</th>
<th>Version: 3.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
</tr>
<tr>
<td>Brief Description: The Enterprise Exception Log Service (EELS) provides for the consolidation and analysis of exception logs generated by VistA components and services, as well as other logs generated by infrastructure components.</td>
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</tbody>
</table>

Business Function Framework Line(s) of Business: Manage Business Enabling Services

Business Function Framework Function(s): Utilize Information Technology Services

VHA Portfolio: Common Services

Business Owner: VHA
OIT Project Manager: OIT

Full Description:

Enterprise Exception Log Service is a web-based application responsible for collecting error logs of applications, databases and systems. It is a suite of software applications that collects and stores exception information generated by client VA software applications. It incorporates exception logging analysis and reporting capabilities into the VistA environment to monitor services and information assets across the enterprise. It provides an enterprise exception logging service and associated infrastructure that enables the retrieval of exception logs from any VistA component in the VistA shared service architecture environment, and their transportation to a central repository, where that information is available for analysis and reporting purposes. It improves organizational support structures and processes to address the needs of application modernization.

Features

- Collects error log data
- Provides robust capacity to facilitate event information activity from indicated locations
- Organizes the errors from numerous locations into one database
- Provides Analysis and Reporting functionality
Equipment /Turn-In Request

Vista Module: Equipment /Turn-In Request  Version: 1.0

Namespace: PRCN  Most Recent Patch:

Brief Description: The Equipment/Turn-In Request software provides additional functionality within the Integrated Funds Distribution, Control Point Activity, Accounting and Procurement (IFCAP) package, including the ability to enter an electronic request for new, non-expendable equipment and replacement equipment.

Business Function Framework Line of Business: Manage Business Enabling

Business Function Framework Function(s): Conduct Supply Chain Operations

VHA Portfolio: Business Informatics

Business Owner: VHA Procurement and Logistics Office (PLO)  OIT Project Manager: OIT/PD?PSS?HPS

Full Description: The Equipment/Turn-In Request software adds the functionality for tracking the request through the many stages of review, prior to its approval and becoming a permanent transaction. Users are allowed to turn in old equipment currently tracked in the Equipment Inventory file, generate an Engineering work order, and track its movement to its final disposition and removal from the inventory list. The Equipment/Turn-In Request serves as a records maintenance system, allowing the user to record important events throughout the ordering process. Such records can be printed in report format as supporting documentation about the equipment life cycle.

Features

- The CMR official is ultimately responsible for new and existing equipment located at the medical facilities.
- A requester can enter an electronic request for new or replacement equipment via VistA.
- A requester can enter an electronic request to dispose of obsolete equipment.
- The CMR official can approve, edit, or cancel an equipment request.
- Engineering work orders can be generated for initial, additional, and replacement equipment.
- The Equipment/Turn-In Request module has several organizational elements that use different
components of the software. Non-expendable equipment must go through several approval steps before it can be ordered.

- Requestor
- Consolidated Memorandum of Receipt (CMR) Official
- Personal Property Manager (PPM)
- Equipment Committee
- Engineering
- Other Concurring Officials

Turning in non-expendable equipment also requires several approval steps.

- Requestor
- Consolidated Memorandum of Receipt (CMR) Official
- Personal Property Manager (PPM)
- Engineering
  - Warehouse
**Event Capture System**

<table>
<thead>
<tr>
<th>Vista Module: Event Capture System</th>
<th>Version: 3.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: EC</td>
<td>Most Recent Patch:</td>
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</tbody>
</table>

**Brief Description:** The Event Capture System (ECS) provides a mechanism to track and account for procedures and delivered services that are not handled in any other VistA package. The procedures and services tracked through Event Capture are associated with (1) the patient to whom they were delivered, (2) the provider requesting the service or procedure and (3) the Decision Support System (DSS) Unit responsible for delivering the service.

**Business Function Framework Line(s) of Business:** N/A

**Business Function Framework Function(s):** N/A

**VHA Portfolio:** Business Informatics

**Business Owner:** VHA CFO – Decision Support Office  
**OIT Project Manager:** OIT SDE&E EAS (Enterprise Application Support)

**Full Description:** DSS Units typically represent the smallest identifiable work unit in a clinical service at the medical center and are defined by the VAMCs. A DSS Unit can represent any of the following:

- An entire service.
- A section of a service.
- A small section within a section.
- A medical equipment item used in patient procedures.

When creating or editing DSS Units, users choose what (if any) data is sent to Patient Care Encounter (PCE). The advantage of using Event Capture to send data to PCE is that it eliminates the duplicate effort of entering the same workload data in the Scheduling software, then transmitting to PCE.

**Features**

- Allows each VAMC to utilize the software for its own resource/costing needs.
- Implements DSS Units.
- Assigns user access to all or specific DSS Units.
- Sets up Event Code Screens to define relevant procedures for a DSS Unit.
- Allows single and batch data entry for patient procedures.
- Generates reports for workload and other statistical tracking.
- Provides a Graphical User Interface to the ECS application.
- Allows user to upload patient encounter data to Event Capture from a spreadsheet.
- Files encounter records in PCE for DSS Units defined to send data to PCE.
## Fee Basis

<table>
<thead>
<tr>
<th>Vista Module: Fee Basis</th>
<th>Version: 1.0</th>
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</thead>
<tbody>
<tr>
<td>Namespace: FB</td>
<td>Most Recent Patch:</td>
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</tbody>
</table>

**Brief Description:** The Fee Basis package supports VHA’s Fee for Service program, which is care authorized for veterans who are legally eligible and are in need of care that cannot feasibly be provided by a VA facility.

**Business Function Framework Line(s) of Business:** Manage Business Enabling Services

**Business Function Framework Function(s):** Provide Financial Management

**VHA Portfolio:** Business Informatics

**Business Owner:** VHA Chief Business Office (CBO) – Purchased Care

**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** A VA facility unable to meet the patient care requirements of a veteran may authorize fee basis services for short-term care, ongoing outpatient care, or home health care from non-VA health care facilities. Bills for service are then submitted to the authorizing VA facility. The bill is reviewed by the facility and certified for payment through VA’s payment center in Austin, Texas.

The Fee Basis package provides for more efficient and accurate operation of the fee for service program with reduction of paperwork, savings in staff hours, minimization of errors, and by allowing medical facilities to have greater control over disbursement of fee medical, pharmacy, and travel monies.

**Features**

- Performs entire fee for service process, both authorized and unauthorized, for Outpatient Medical Fee, Civilian Hospital, Community Nursing Home, and Pharmacy Fee.
- Automatically sends vendor updates from the central system to keep all files accurate and up-to-date.
- Provides money management for all payments through the interface with the Financial Management System.
Automatically receives payment confirmations from the U.S. Department of the Treasury, populating payment histories with check numbers and payment dates.

Outpatient Medical Fee:
- Authorizes Fee Basis treatment.
- Enters fee providers and payments.
- Creates, closes out, and releases batches of invoices.
- Records travel payment.

Civilian Hospital:
- Provides the ability to perform complete payment process, from entering patient authorizations to transmitting completed batch data (including the calculation of Medicare reimbursement).

Community Nursing Home:
- Provides the ability to perform complete payment process.

Pharmacy Fee:
- Provides the means to administer the Hometown Pharmacy.
- Provides payment for medications furnished Veterans on an emergency basis.
- Facilitates the quick completion of previously repetitive actions and gives quick, accurate access to patient payment history.

State Home:
- Provides the ability to track veterans receiving care provided by a state home facility.
## FileMan Delphi Components (FMDC)

<table>
<thead>
<tr>
<th>Vista Module: FileMan Delphi Components (FDMC)</th>
<th>Version: 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: FMDC</td>
<td>Most Recent Patch:</td>
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<tr>
<td>Brief Description: VA FileMan is Veterans Health Information Systems and Technology Architecture’s (VistA) database management system (DBMS). It runs in any American National Standards Institute (ANSI) environment.</td>
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<tr>
<td>Business Function Framework Line(s) of Business: Deliver Health Care, Manage Business Enabling Services</td>
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<tr>
<td>Business Function Framework Function(s): Manage Health Records, Utilize Information Technology Services</td>
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<tr>
<td>VHA Portfolio: Common Services</td>
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<tr>
<td>Business Owner: VHA</td>
<td>OIT Project Manager: OIT</td>
</tr>
<tr>
<td>Full Description: The majority of Veterans Health Administration (VHA) clinical data is stored in VA FileMan files and is retrieved and accessed through VA FileMan Application Program Interfaces (API) and user interfaces.</td>
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</table>

### Features

**For Users:**

- Standalone user interface for adding, editing, printing, and searching data.
- Form-based editing (ScreenMan).
- Easy terminal-based editing of word processing database fields (Screen Editor).
- Flexible, extensive report module.
- Scrollable onscreen output of any report (Browser device).
- Data interchange with outside applications such as PC spreadsheets and databases (Import and Export Tools).
For Developers:
- Full support for forms-based interfaces to the database (ScreenMan API, Form Editor).
- Full database access for client-server applications (Database Server API).
- Easy scrolling-mode interfaces to the database (Classic API).
- Full database access in Delphi-based applications via FileMan Delphi Components.
- Data archiving and transport tools.
- Comprehensive file creation and management utilities.
- SQL Interface (SQLI) projects all of the information needed by M-to-SQL vendors to access VA FileMan through M-to-SQL products.
- Supports Keys and compound cross-references (Indexes).
- Performance: M and VA FileMan provide fast database performance and high utilization of our computer systems.
- Portability - Portable, platform-independent database services provided to applications by VA FileMan, combined with the operating system portability layer of Kernel, allow VHA to upgrade its hospital computing platforms without significant changes to application code.
- Openness - VA FileMan is open; it facilitates data access from outside applications. The Database Server (DBS) API enables client/server access to VA FileMan data. The FileMan Delphi Components take advantage of the DBS API to encapsulate the details of retrieving, validating, and updating VA FileMan data.
# Fugitive Felon Program (FFP)

<table>
<thead>
<tr>
<th>Vista Module: Fugitive Felon Program (FFP)</th>
<th>Version: 1.0</th>
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<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
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<tr>
<td>Brief Description: The Fugitive Felon functionality in VistA and via the Health Eligibility Center is designed to identify veterans who are fugitive felons receiving VA medical care.</td>
<td></td>
</tr>
<tr>
<td><strong>Business Function Framework Line(s) of Business:</strong> Provide Access to Healthcare, Provide Health Care Administration, Manage Business Enabling Services</td>
<td></td>
</tr>
<tr>
<td><strong>Function(s):</strong> Provide Member Access, Perform Hospital Administration, Manage VHA-wide Administration Services</td>
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<tr>
<td><strong>VHA Portfolio:</strong> Business Informatics</td>
<td></td>
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<tr>
<td><strong>Business Owner:</strong> VHA Chief Business Office</td>
<td><strong>OIT Project Manager:</strong> OIT Product Development (PD)</td>
</tr>
<tr>
<td><strong>Full Description:</strong> Public Law (PL) 107-103, Section 505, prohibits provision of certain benefits to veterans or their dependents that are classified as fugitive felons. This law requires VA to provide current address information, upon written request, to any Federal, State, or local law enforcement official, if s/he: provides information required to fully identify the person, identifies the person as being a fugitive felon, or certifies that apprehending such person is within the official duties of such official. This project software provides the following functionality for VHA implementation: adds several fields to the VISTA Patient File to store the Fugitive Felon Flag and track when the flag was entered and removed, creates a new security key to control access to the Fugitive Felon Flag and the associated menu options, provides menu options that allow users to set and clear the Fugitive Felon Flag, and to print the various reports associated with the new fields, and displays user alert from Scheduling and Registration options.</td>
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## Features

- VistA Changes
- Security Controls
- Functionality
- Reports
- Issues
# Functional Independence Measures (FIM)

<table>
<thead>
<tr>
<th>Vista Module: Functional independence Measures (FIM)</th>
<th>Version: 1.0</th>
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<tbody>
<tr>
<td>Namespace: RMIM</td>
<td>Most Recent Patch:</td>
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</table>

**Brief Description:** The Functional Independence Measures (FIM) Version 1.0 provides an integration of FIM assessments into the Computerized Patient Record System (CPRS) and into the Functional Status and Outcomes Database (FSOD) at the VA Austin Information Technology Center (AITC). The FIM is an 18-item, 7-level functional assessment designed to evaluate the amount of assistance required by a person with a disability to perform basic life activities safely and effectively.

**Business Function Framework Line(s) of Business:** Manage Public Health, Deliver Health Care

**Business Function Framework Function(s):** Provide Medical Registry Service, Provide Care Management, Provide Medical Services, Provide Ancillary Services

**VHA Portfolio:** Health Provider Systems

**Business Owner:** VHA  
**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** There are five types of FIM assessments: admission, goals, interim, discharge, and follow-up. The FIM assessments are used clinically to monitor the outcomes of rehabilitative care as required by the Joint Commission (TJC) and the Commission on the Accreditation of Rehabilitative Facilities (CARF). According to VHA Directive 2000-16 series, medical centers are mandated to measure and track rehabilitation outcomes on all new stroke, lower-extremity amputees, and traumatic brain injury (TBI) patients using the FIM.

**Features:**
- Graphic User Interface (GUI) front-end programmed in Delphi to allow multiple clinicians to input FIM data for a given patient.
- Visibility in CPRS of FIM documentation as a progress note with addendums and/or a completed consults.
- Eliminating the need for the clinician search of VistA for the information and re-enter for FIM.
- FIM data placement in a VistA FileMan file for Health Level Seven (HL7) transmission to the FSOD at AITC.
## Generic Code Sheet

**Vista Module:** Generic Code Sheet  
**Version:** 1.0

**Namespace:** GEC  
**Most Recent Patch:**

**Brief Description:** The Generic Code Sheet module allows code sheet data to be entered and transmitted electronically from the medical facility service level to the national database.

**Business Function Framework Line(s) of Business:** Deliver Health Care, Manage Business Enabling Services  
**Business Function Framework Function(s):** Manage Health Records, Provide Financial Management

**VHA Portfolio:** Business Informatics

**Business Owner:** Chief Business Office (CBO) – Member Services  
**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** Security features prohibit unauthorized access to code sheets. Data can easily be entered and edited via VA FileMan. Reports are available which help manage the code sheets from creation through batching and transmission and tools are included within the module to aid in the development of new code sheets at the local or national level.

### Features

- Contains approximately 250 automated code sheets.
- Allows new code sheets to be automated and included within the module.
- Allows easy on-line input of code sheet data from a VA FileMan or word processing format.
- Eliminates keypunch and typing errors.
- Provides code sheet security at the medical facility service or module level.
- Allows code sheets to be batched and transmitted to any domain connected to the VA network.
- Allows easy on-line editing and modifications to code sheets and batches.
- Provides purge capabilities consistent with current regulations that require code sheet retention for seven years.
- Generates reports that detail the status of a code sheet or batch and prints the data contained within a code sheet or batch.
# Health Data Informatics

<table>
<thead>
<tr>
<th>Vista Module: Health Data Informatics</th>
<th>Version: 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: HDI</td>
<td>Most Recent Patch:</td>
</tr>
<tr>
<td>Brief Description: The Health Data Informatics (HDI) package provides a basic method for seeding VHA Unique Identifiers (VUIDs) for reference data in existing VistA applications.</td>
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</tr>
<tr>
<td>Business Function Framework Line(s) of Business: Manage Business Enabling Services</td>
<td></td>
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<tr>
<td>Business Function Framework Function(s): Utilize Information Technology Services</td>
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<tr>
<td>VHA Portfolio: Common Services</td>
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<tr>
<td>Business Owner: Health Data Governance</td>
<td>OIT Project Manager: OIT STS</td>
</tr>
<tr>
<td>Full Description: The Health Data Informatics (HDI) package provides a basic method for seeding VHA Unique Identifiers (VUIDs) for reference data in existing VistA applications. A VUID is a meaningless number, which is automatically assigned to concepts, properties, and relationships in a terminology to facilitate their access and manipulation by computers. The HDI package will be used by each VistA site to seed VUIDs in their existing global files that contain reference data, such as drug names, names of known allergens, and so forth. These files have been grouped into domains, and each domain will be standardized separately. As each domain’s files are originally standardized, the HDI package is used to assign a VUID to each term or concept in the file. Subsequent standardization updates and maintenance on these files will be handled separately by the New Term Rapid Turnaround (NTRT) program.</td>
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### Health Information Technology Sharing (HITS): Bi-Directional Health Information Exchange BHIE

<table>
<thead>
<tr>
<th>Vista Module: Health Information Technology Sharing Health Information Technology Sharing (HITS): Bi-Directional Health Information Exchange (BHIE)</th>
<th>Version: 1.0</th>
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<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
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</table>

**Brief Description:** The ability to share data across agencies and facilities is an important component in providing the complete information necessary for clinical decision-making and high-quality veteran care. BHIE enables data exchange between VA and DoD.

**Business Function Framework Line(s) of Business:** Deliver Healthcare, Manage Business Enabling Services

**Business Function Framework Function(s):** Manage Health Records, Utilize Information Technology Services

**VHA Portfolio:** Health Data Systems

**Business Owner:** VHA  
**OIT Project Manager:** OIT

**Full Description:** BHIE was deployed to all VA facilities in October 2004. BHIE expands on FHIE technology by allowing textual reports to flow from DoD to VA as well as from VA to DoD. DoD has implemented BHIE at 25 host sites that support 15 medical centers, 18 hospitals and more than 190 clinics, including Europe, Hawaii and Alaska.

Data exchanged through BHIE include Drug and Food Allergies, Admission/Discharge/Transfer (ADT) data, Consults, Inpatient Discharge Summaries and Notes, Laboratory (Orders, Chemistry & Hematology, Cytology, Microbiology, and Surgical Pathology), Outpatient Encounters and the Standard Ambulatory Data Record (SADR), which provides summaries of Outpatient Episodes.

Also shared are Outpatient Pharmacy Data, Pharmacy Data Transaction Service (PDTS) which includes non-government prescription information, Progress Notes, Pre and Post Deployment Health Assessments (PPDHA), Post Deployment Health Reassessments (PDHRA), Theater (Field medical facilities) clinical
Information, Radiology Text Reports and Problem List.
### Health Information Technology Sharing (HITS): Federal Health Information Exchange (FHIE)

<table>
<thead>
<tr>
<th>Vista Module: Health Information Technology Sharing (HITS): Federal Health Information Exchange (FHIE)</th>
<th>Version: 1.0</th>
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<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
</tr>
<tr>
<td>Brief Description: The ability to share data across agencies and facilities is an important component in providing the complete information necessary for clinical decision-making and high-quality veteran care. FHIE enables information on separating service members from DoD to VA on a monthly basis.</td>
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</table>

| **Business Function Framework Line(s) of Business:** Deliver Healthcare, Manage Business Enabling Services |
| **Business Function Framework Function(s):** Manage Health Records, Utilize Information Technology Services |

| **VHA Portfolio:** Health Data Systems |
| **Business Owner:** VHA | **OIT Project Manager:** OIT |

**Full Description:** FHIE was deployed to all VA facilities in 2002, and supports the uni-directional exchange of health record data from the Department of Defense (DoD) to the Department of Veterans Affairs (VA). The data exchange is in the form of textual reports via a secure shared data repository.

VHA clinicians and VBA claims staff access this data in the repository through Compensation and Pension Records Interchange (CAPRI). Information available through FHIE includes outpatient pharmacy (government and retail), allergy, laboratory (chemistry, hematology, anatomic pathology, surgical pathology, and cytology), radiology reports, consults, admission, discharge, transfer (ADT), and ambulatory coding data. DoD also has made pre-and post-deployment health assessment and post deployment health reassessment data available for viewing by VA through the FHIE framework.
# Health Information Technology Sharing (HITS): Clinical Health Data Repository (CHDR)

**Vista Module:** Health Information Technology Sharing (HITS): Clinical Health Data Repository (CHDR)  
**Version:** 1.0

<table>
<thead>
<tr>
<th>Namespace:</th>
<th>Most Recent Patch:</th>
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**Brief Description:** The ability to share data across agencies and facilities is an important component in providing the complete information necessary for clinical decision-making and high-quality veteran care. CHDR provides a mediation service for the exchange of standardized outpatient prescriptions and allergy information.

**Business Function Framework Line(s) of Business:** Deliver Healthcare, Manage Business Enabling Services  
**Business Function Framework Function(s):** Manage Health Records, Utilize Information Technology Services

**VHA Portfolio:** Health Data Systems

**Business Owner:** VHA  
**OIT Project Manager:** OIT

**Full Description:** Clinical Health Data Repository (CHDR) shares computable health record data elements between DoD’s Clinical Data Repository (CDR) and VA’s Health Data Repository (HDR). Data are exchanged for patients identified and matched as Active Dual Consumers (ADCs) of both VA and DoD health care. VA and DoD conducted the first successful test of CHDR in a live patient environment in June 2006, and have since expanded

One of the key features of CHDR is the exchange of standardized, computable (as opposed to textual) data. This “semantic interoperability” provides data that each agency can use with its own electronic decision support tools. In April 2007, VA released a program called Remote Data Interoperability (RDI), which extended the existing local Drug-Drug, and Drug-Allergy order checks to include data from all VA and DoD facilities at which a patient has been treated. This significantly increases patient safety by ensuring electronic decision support tools are based on all available electronic patient health record information rather than data from just one VistA computer system.
**Health Information Technology Sharing (HITS): Global War on Terror**

<table>
<thead>
<tr>
<th>Vista Module: Health Information Technology Sharing (HITS): Global War on Terror</th>
<th>Version: 1.0</th>
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<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
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</table>

**Brief Description:** The ability to share data across agencies and facilities is an important component in providing the complete information necessary for clinical decision-making and high-quality veteran care. This functionality, referred to as “Big 7” provided information exchange and interoperability across 7 critical parameters.

**Business Function Framework Line(s) of Business:** Deliver Healthcare, Manage Business Enabling Services

**Business Function Framework Function(s):** Manage Health Records, Utilize Information Technology Services

**VHA Portfolio: Health Data Systems**

**Business Owner: VHA**  **OIT Project Manager: OIT**

**Full Description:** The “Big 7” projects are developed to facilitate a smooth transition between DoD and VA for Global War on Terror (GWOT) veterans and to expedite transfer and improve the management of high-risk patients such as those with polytrauma and Traumatic Brain Injury (TBI).

The “Big 7” includes:

- **OIF/OEF Combat Veteran Identifier.** Provides visual representation in the Computerized Patient Record System (CPRS) to indicate the patient has served in combat in either Operation Iraqi Freedom (OIF) or Operation Enduring Freedom (OEF).
- **Traumatic Brain Injury (TBI) Database.** Supports tracking, monitoring of care quality, trend analysis and performance improvement for patients with TBI.
- **Polytrauma Marker:**
  - Updates the Functional Independence Measure.
  - Addresses special needs of polytrauma patients.
  - Provides alerts and reminders and supports consistent management, reporting and displaying of important patient characteristics.
- 7DoD/VA BHIE-CDR (Theater) Interface. Provides an interface to OIF/OEF data stored in DoD’s Theater Medical Data System (TMDS) using the BHIE framework.
- Joint Patient Tracking Application (JPTA) / Veterans Tracking Application (VTA):
  - Gives VA providers access to critical patient information from the theater of operations in DoD’s JPTA system.
  - Establishes a link to VTA from within CPRS and VA’s VistAWEB.
- Clinical Transfer Form:
  - DoD and VA nurse developed Situation, Background, Assessment, Recommendations (S-BAR) document that is a nursing patient hand-off used when patients are transferred between agencies.
  - DoD Scanning Interface: provides scanned patient record that is transmitted as a bookmarked file to a Clinical Document Note is created and the scanned file attached. The Clinical Document Note is accessible across the VA.
Health Information Technology Sharing (HITS): Laboratory Data Sharing and Interoperability (LDSI)

<table>
<thead>
<tr>
<th>Vista Module: Health Information Technology Sharing (HITS): Laboratory Data Sharing and Interoperability (LDSI)</th>
<th>Version: 5.2</th>
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<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
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<tr>
<td>Brief Description: The Laboratory Data Sharing Interoperability (LDSI) project supports the electronic order entry and real-time lab results exchange between the Department of Defense (DoD) and the Department of Veterans Affairs (VA).</td>
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<tr>
<td>Business Function Framework Line(s) of Business: Deliver Healthcare, Manage Business Enabling Services</td>
<td></td>
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<tr>
<td>Business Function Framework Function(s): Manage Health Records, Utilize Information Technology Services</td>
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<tr>
<td>VHA Portfolio: Health Data Systems</td>
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<tr>
<td>Business Owner: VHA</td>
<td>OIT Project Manager: OIT</td>
</tr>
<tr>
<td>Full Description: LDSI provides laboratory order portability between selected DoD/VA sites that have local sharing agreements for laboratory services.</td>
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<tr>
<td>The goals of the project are:</td>
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<tr>
<td>1. To share/coordinate resources to reduce costs and redundancies while increasing efficiencies within the two organizations</td>
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<tr>
<td>2. Facilitate electronic exchange of patient information between DoD and VA to enhance patient care delivery</td>
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<tr>
<td>LDSI provides interagency messaging between VA/DoD sites that have a local sharing agreement for laboratory services (with either VA or DoD serving as the performing laboratory). LDSI Phase 1 enabled electronic ordering and results retrieval of chemistry and hematology laboratory tests between VA and DoD. Phase 2 extends the exchange of ordering and results data exchange to include anatomic pathology and microbiology laboratory tests between VA and DoD.</td>
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# Health Level 7 (HL7) (VistA Messaging)

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<tr>
<th>Vista Module: Health Level 7 (HL7) (VistA Messaging)</th>
<th>Version: 1.0</th>
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<tr>
<td>Namespace: HL</td>
<td>Most Recent Patch:</td>
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</table>

**Brief Description:** Health Level Seven (HL7) is an American National Standards Institute (ANSI) standard messaging protocol that specifies the set of transactions and encoding rules for electronic data exchange between health care computer systems.

**Business Function Framework Line(s) of Business:** Manage Business Enabling Services

**Business Function Framework Function(s):** Utilize Information Technology Services

**VHA Portfolio: Common Services**

**Business Owner: VHA**  
**OIT Project Manager: OIT**

**Full Description:** In today's health care environment, computer systems from multiple vendors and at geographically dispersed sites are used in conjunction with core facility computer systems to create integrated delivery of information to the end-user. Linking such systems to exchange data and work together is a non-trivial task, particularly given the complexity of health care data.

Health Level Seven (HL7) is an American National Standards Institute (ANSI) standard messaging protocol that specifies the set of transactions and encoding rules for electronic data exchange between health care computer systems. HL7 provides an open, standards-based framework that computer systems can use to exchange health care data with each other. The HL7 standards development group is directly focused on health care informatics standards, and cooperates closely with developers of other standards.

The Veterans Health Information Systems and Technology Architecture (VistA) HL7 package enables M-based (VistA) applications running on core facility computer systems to exchange health care information with other computer systems. It provides messaging services and a single toolset for M-based VistA applications to create, send, receive, and process HL7 messages.
Many VistA applications use VistA HL7 to exchange data in HL7 format with other facilities and/or applications, including Anesthesiology, Master Veteran Index/Patient Demographics (MVI/PD), Laboratory, Outpatient Pharmacy, Patient Management System (PMS), Radiology, and Veteran ID Card (VIC). The VistA HL7 package is also used to integrate commercial off-the-shelf (COTS) health care applications with M-based core facility computer systems.

Features

- Communication—Facilitates Point-to-Point and Publish-and-Subscribe messaging between two or more applications; and provides the transport mechanism using HL7-supported lower level transmission protocols (e.g., Hybrid Lower Level Protocol [HLLP], X3.28, or Minimum Lower Level Protocol [MLLP] over Transmission Control Protocol / Internet Protocol [TCP/IP]), which provide error detection and session control; provides dynamic routing of messages.

- Processing—Queues incoming and outgoing messages for reliable messaging; validates HL7 Message Header (MSH) information for all incoming messages; and sends HL7 acknowledgment (ACK) messages back to sending applications upon message receipt.

- Message Administration—Provides functionality to assist the application developer in setting up HL7 interfaces by hiding the complex lower level communication; monitors message transmissions statuses; and provides reports on pending transmissions and those with errors.

- Programming Utilities—Provides the developer with a rich collection of Application Program Interfaces (API) to facilitate the creation, exchange, and transmission of messages; provides a set of predefined variables to use for building HL7 messages/segments; automatically creates all HL7 Message Header (MSH) segments; and invokes the appropriate application routine to process message data when a message is received.
## Health Level Seven Optimized (HLSO) (VistA Messaging)

<table>
<thead>
<tr>
<th>Vista Module: Health Level Seven Optimized (HLO) (VistA Messaging)</th>
<th>Version: 1.6</th>
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<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
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</table>

**Brief Description:** Health Level Seven (HL7) is an American National Standards Institute (ANSI) standard messaging protocol that specifies the set of transactions and encoding rules for electronic data exchange between health care computer systems.

**Business Function Framework Line(s) of Business:** Manage Business Enabling Services

**Business Function Framework Function(s):** Utilize Information Technology Services

**VHA Portfolio:** Common Services

**Business Owner:** VHA

**OIT Project Manager:** OIT

**Full Description:** Previous applications supported simple point-to-point HL7 transactions between VistA and a local commercial off-the-shelf (COTS) system using Hybrid Lower Layer Protocol (HLLP), which then required transmission to other VA facilities using VA MailMan. This release added the ability to "broadcast" a message to multiple recipients, and provide support for the X3.28 LLP, and additional subsequent patches to this release addressed continuing increased demand for additional messaging services through enhancements which included more complex message routing (dynamic addressing), and messaging using Minimal Lower Layer Protocol (MLLP) over Transmission Control Protocol (TCP).
# Home Based Primary Care (HBPC)

<table>
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<tr>
<th>Vista Module: Home Based Primary Care (HBPC)</th>
<th>Version: 1.0</th>
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<tr>
<td>Namespace: HBH</td>
<td>Most Recent Patch:</td>
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**Brief Description:** The Home Based Primary Care (HBPC) module is designed to allow for the local entry and verification and data management of HBPC patient-related data. HBPC was previously referred to as Hospital Based Home Care (HBHC).

**Business Function Framework Line(s) of Business:** Provide Health Care Administration, Deliver Health Care

**Business Function Framework Function(s):** Manage Remote Care Services, Provide Patient Self-Management Services

**VHA Portfolio: Health Provider Systems**

**Business Owner:** VHA Office of Geriatrics and Extended Care  
**OIT Project Manager:** OIT/PD/PS/HPS

**Full Description:** This local database structure gives the HBPC program greater accountability for the integrity of its data, and eliminates the correction cycle previously required to correct data entry errors at the central database. Each site can now transmit complete records of HBPC patient information monthly to the Austin Information Technology Center (AITC) for processing. The AITC will continue to generate the same quarterly reports—only the source of the data has changed. This system eliminates the paper reporting system between medical centers and the AITC database.

**Features**

- Uses Appointment Management to handle patient visits and captures that visit data from Patient Care Encounter for transmission to the AITC. Provides for the entry and editing of patient evaluations and admission/discharge data.
- Provides automatic transmission of data to the central database.
- Allows data validation and correction to be completed at the individual medical center prior to transmission to the central database.
- Allows for medical center control over the site's HBPC database.
- Enables medical facilities to generate a wide variety of reports covering:
- Visit, admission and discharge data.
- Length of stay.
- Rejections.
- Procedures.
- Census for program, team, case manager, and/or provider.

Enables the HBPC program manager to control and assess the staff workload and organizational characteristics.

An additional feature, Medical Foster Care, has been added to HBPC. Medical Foster Home (MFH) combines adult foster care in a privately owned residence located in the community with Home Based Primary Care (HBPC) or Spinal Cord Injury Home Care (SCI-HC). MFH offers an alternative to nursing home placement, merging personal care in a private home with medical & rehabilitation support from specialized VA home care programs. Veterans placed in MFH meet nursing home admission criteria and are responsible for MFH charges.
# Home Telehealth

**Vista Module:** Home Telehealth  
**Version:** 1.0

**Namespace:**  
**Most Recent Patch:**

**Brief Description:** The goal of the Home Telehealth IT program is to integrate vendor-supported Home Telehealth services into the VistA medical information infrastructure. The Home Telehealth program builds on the excellent existing and evolving VistA system.

**Business Function Framework Line(s) of Business:** Provide Health Care Administration, Deliver Health Care, Manage Business Enabling Services

**Business Function Framework Function(s):** Manage Remote Care Services, Provide Patient Self-Management Services, Provide Ancillary Services, Utilize Information Technology Services

**VHA Portfolio:** Health Data Systems

**Business Owner:** VHA Telehealth  
**OIT Project Manager:** OIT

**Full Description:** This phase of the Home Telehealth project moves us towards an integrated environment through the following process:

- The patient screening process starts with a VistA Consult.
- The Consult is completed through the standard VistA Progress Note.
- Patient sign-up is done through a VistA Patient Information Management System (PIMS) interface. The care coordinator selects the patient name, the supporting vendor, the consult type, the care coordinator’s name, and then submits the request. VistA extracts all the pertinent patient data and sends a Health Level Seven (HL7) Sign-Up message to the vendor server.
- The care coordinator then uses the vendor software to associate the home device with the patient record on the vendor system.
- Measurement data gathered by devices in the veteran’s home are stored in the vendor server and available for review, and are sent to the VA’s Health Data Repository (HDR) using HL7 messages sent through the VistA Interface Engine (VIE) Infrastructure.
- The Home Telehealth data in the HDR along with VistA data from facility VistA systems is
viewed using VistAWeb, which is available through the Computerized Patient Records System (CPRS) by using the Remote Data View (RDV) function.

Monthly, vendor servers send HL7 messages to the Sign-Up VistA facility for the Care Coordinator to review draft progress notes summarizing patient activity from the previous month.

This functionality involves components on the vendor servers as well as several VistA packages including Consults, PIMS for sign up, Progress Notes, TIU, VIE, Master Veteran Index (MVI), HDR, Clinical Data Services (CDS), Clinical Context Object Workgroup (CCOW) for patient context, VistAWeb, and CPRS. Network connectivity must be available to allow these various components to operate and communicate.

VistAWeb, MVI, HDR, and CDS reside at the national level. The rest of the components are installed at the facility level.
## Homeless Management Information System

<table>
<thead>
<tr>
<th>Vista Module: Homeless Management Information (HMIS)</th>
<th>Version: 1.0</th>
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<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
</tr>
<tr>
<td>Brief Description: Homeless Management Information System (HMIS) collects and stores longitudinal, person-level information about persons who access the Department’s homeless service system.</td>
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<tr>
<td><strong>Business Function Framework Line(s) of Business:</strong></td>
<td></td>
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<tr>
<td><strong>Business Function Framework Function(s):</strong></td>
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<tr>
<td><strong>VHA Portfolio:</strong> Health Provider Systems</td>
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<tr>
<td><strong>Business Owner:</strong> VHA</td>
<td><strong>OIT Project Manager:</strong> OIT</td>
</tr>
<tr>
<td><strong>Full Description:</strong> In support of the Departmental Major Initiative to Eliminate Veteran Homelessness, and in support of satisfying Congressional direction regarding data capture on homelessness, HMIS software allows VA homeless assistance providers better access to comprehensive data to coordinate care, manage their operations, and better serve their clients. Several software packages comprise the total HMIS inventory in use by VA.</td>
<td></td>
</tr>
</tbody>
</table>
# Hospital Inquiry (HINQ)

**Vista Module: Hospital Inquiry (HINQ)**  
**Version: 4.0**

**Namespace: DVB**  
**Most Recent Patch:**

**Brief Description:** The Hospital Inquiry (HINQ) module provides the capability to request and obtain veteran eligibility data via the VA National Telecommunications Network. Individual or group requests are sent from a local computer to a remote Veterans Benefits Administration (VBA) computer where veteran information is stored. The VBA network that supports HINQ is composed of four computer systems located in regional VA payment centers.

**Business Function Framework Line(s) of Business:**  
Provide Access to Health Care

**Business Function Framework Function(s):**  
Provide Member Access

**VHA Portfolio:**  
Business Informatics

**Business Owner:** VHA Chief Business Office  
**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:**

HINQ interfaces with other modules to allow users to make eligibility requests. An on-line suspense file stores requests for later transmission and records HINQ responses, thus creating a log of HINQ activity.

The HINQ module provides facilities with the ability to obtain veteran eligibility information quickly, accurately, and efficiently, allowing medical center personnel to act expeditiously on patient requests for medical treatment and other benefits. Additionally, returned HINQ data may be loaded directly into the local Patient file through various screens. The screens display both the data in the HINQ message and what is currently in the Patient file for comparison.

**Features**

- Sends on-line requests individually and forwards multiple requests in a batch mode.
- Tracks and updates various requests from customer.
- Establishes ‘real-time’ links between VHA and VBA computers to service time-of-the-essence requests.
- Processes routine requests in background, allowing the requester to perform other tasks.
- Alerts the requester when responses are received from VBA computers.
- Alerts the requester when there is a discrepancy found between the returned HINQ
information and what is in the Patient file.

- Provides the capability to update returned HINQ data directly into the Patient file.
Identity Management (IdM) Service

Vista Module: Identity Management (IdM) Service  Version: 1.0

Namespace:  Most Recent Patch:

Brief Description: The Identity Management (IdM) Service Program provides technical support and development for the management of the identity of persons for the Department of Veterans Affairs.

Business Function Framework Line(s) of Business: Deliver Health Care, Manage Business Enabling Services

Business Function Framework Function(s): Manage Health Records, Utilize Information Technology Services

VHA Portfolio: Common Services

Business Owner: VHA  OIT Project Manager: OIT

Identity Management Service (IdMS) is comprised of Organization Service (OS) and Person Service (PS) and its peripheral applications and services, Person Service Identity Management (PSIM), Person Service Demographics (PSD), Person Service Lookup (PSL), and Identity Management Data Quality Toolkit (IMDQ.TK) and provides ability to effectively maintain and share unique identifiers across the enterprise to improve health care delivery and data, as well as eliminate inappropriate merges of patient data.

Features

Organization Service

Organization Service (OS) is the authoritative source for organizations, location, and medical device information for VistA. Currently, Common Services/Organization Service (CS/OS) v3.0 builds on CS/OS v1.0 and v2.0 functionality for the enumeration of medical facilities for Health Insurance Portability and Accountability Act (HIPAA), and development of the following architecturally significant features:

- Enumeration, Relationship, and Point-In-Time Management
**Person Service**

Common Services/Person Service (CS/PS) provides a consistent interface for accessing and maintenance of crosscutting person administrative information to a trusted set of client applications and services. In doing so, CS/PS is the authoritative source for person identification in the Veterans Health Administration (VHA) domain. The sub-services of Common Services/Person Service include:

- Person Service Identity Management (PSIM).
- Identity Management Data Quality Toolkit (IMDQ TK).
- PS Demographics (PSD).
- Person Service Construct (PSC).
- Person Service Lookup (PSL).
## Incident Reporting

<table>
<thead>
<tr>
<th>Vista Module: Incident Reporting</th>
<th>Version: 2.0</th>
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<tbody>
<tr>
<td>Namespace: QAN</td>
<td>Most Recent Patch:</td>
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</table>

### Brief Description
The Incident Reporting module supports VHA policy by compiling data on patient incidents. It organizes the data into defined categories for reporting and tracking at medical facility level and for transmission to the National Quality Assurance Database for Headquarters review and tracking.

### Business Function Framework
- **Line(s) of Business:** Provide Health Care Administration, Manage Business Enabling Services
- **Function(s):** Perform Hospital Administration, Utilize Information Technology Services

### VHA Portfolio
- **Business Informatics**

### Full Description
Incident Reporting allows for the entry of all required incident information plus descriptive data and actions taken on all reportable and/or locally defined incidents.

### Features
- Prints out a Pseudo 10-2633 Incident Worksheet.
- Provides an ad hoc reporting mechanism that uses VA FileMan modifiers for sorting or printing the following data fields:
  - Patient Type of Death
  - Patient ID Level of Review
  - Date of Admission
  - Date of Incident
  - Patient Type Incident Case Status
  - Ward/Clinic Severity Level
  - Treating Specialty Fall Assessment Score
  - Service Person Reporting the Incident
  - Responsible Service Patient Diagnosis
  - Medication Errors Medical Center Action
| Case Number Incident Description | Incident Pertinent Information | Incident Location National Case Status |
Income Verification Match (IVM)

<table>
<thead>
<tr>
<th>Vista Module: Income Verification Match (IVM)</th>
<th>Version: 2.0</th>
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<tbody>
<tr>
<td>Namespace: IVM</td>
<td>Most Recent Patch:</td>
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</table>

Brief Description: The Income Verification Match (IVM) module is designed to extract patient-reported Means Test data and transmit it to the Health Eligibility Center (HEC) located in Atlanta, Georgia. IVM allows Veterans Health Administration (VHA) to accurately assess a patient’s eligibility for health care when the eligibility criterion is income-based.

Business Function Framework Line(s) of Business: Provide Access to Health Care

Business Function Framework Function(s): Provide Member Access

VHA Portfolio: Business Informatics

Business Owner: VHA CBO

OIT Project Manager: OIT/PD/PSS/HPS

Full Description:

IVM electronically transfers patient income and demographic data for eligible veterans whose VA health care is based on income and for whom a Means Test has been completed. It also sends automatic updates if pertinent patient data is edited at the medical center.

As part of this process, HEC compares the extracted data with earned and unearned income data retrieved from Social Security Administration (SSA) and Internal Revenue Service (IRS). Patients with reported income in the mandatory category, but whose actual income has been proven to be above that level, may have their eligibility for health care changed to the discretionary category and are subject to back billing.

The HEC sends the updated demographic information to the medical facilities for upload. The IVM module allows the HEC data to be compared with locally collected data and selectively uploaded. As a result of the income verification process performed by the HEC, an updated means test is transmitted to the VA facility, which updates the veteran’s eligibility for health care and creates co-payment charges for previous episodes of care. The software provides inquiries and reports that track all IVM activity.

Features
- Transmits data for basic demographics, next-of-kin, income, temporary address, eligibility, guardian, military service, and employer information to the HEC for patients who are entered into the VAMC database. Automatically transmits an updated message if this information is changed.
- Allows the HEC to query the medical facility for the most up-to-date patient information.
- Allows updated demographic and insurance information from the HEC to be uploaded into the patient’s record.
- Automatically loads updated income information from the HEC (including IVM Converted financial tests) and updates the veteran’s eligibility for health care.
- Allows generation of status inquiries, statistical Means Test, and data transmission reports.
Incomplete Records Tracking (IRT)

<table>
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<tr>
<th>Vista Module: Incomplete Records Tracking (IRT)</th>
<th>Version: 1.0</th>
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<tr>
<td>Namespace: DGJ</td>
<td>Most Recent Patch:</td>
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</table>

Brief Description: The Incomplete Records Tracking (IRT) package provides the medical center the ability to monitor incomplete records. Interim summaries, discharge summaries, and both inpatient and outpatient operation reports are tracked. Records may be incomplete or deficient for one or more of the following reasons - not dictated, not transcribed, not signed, or not reviewed.

Business Function Framework Line(s) of Business: Deliver Health Care

Business Function Framework Function(s): Provide Medical Services, Manage Health Records

VHA Portfolio: Health Provider Systems

| Business Owner: VHA | OIT Project Manager: OIT/PD/PSS/HPS |

Full Description: A list of the deficiencies each site will track is distributed with the software. These deficiency names and categories are highlighted on the screen display and are not editable. Sites may add new deficiencies. Deficiencies that are entered by the site are not highlighted on the screen display and can be edited.

Features

- Provides the ability to enter a new or edit an existing incomplete record in the IRT tracking system, edit a completed IRT record, and delete an IRT entry.
- Allows each site to establish and edit site-specific IRT parameters.
- Produces a variety of statistical reports for a specified date range.
# Insurance Capture Buffer

**Vista Module: Insurance Capture Buffer**

**Version:** 2.0

**Namespace:** DSIV

**Brief Description:** The Insurance Capture Buffer (ICB) module is an insurance card scanning and VistA Buffer File update management system designed to enhance the insurance data collection and verification processes for Veterans Affairs Medical Centers.

**Business Function Framework Line(s) of Business:** N/A

**Business Function Framework Function(s):** N/A

**VHA Portfolio: Business Informatics**

**Business Owner:** VHA CBO

**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:**

ICB is integrated with several VistA components such as, Appointment Scheduling and the Patient’s Insurance File. ICB provides an electronic list of veterans with scheduled appointments whose insurance needs to be verified. The “Patient Update” List is used by check-in and registration clerks to scan insurance cards for those identified. Scanned images are stored and are immediately accessible to verification clerks via the “Insurance Buffer Entries” list. Data from the image can be compared with existing insurance data within VistA. By using advanced Optical Character Recognition (OCR) technology, insurance-related text can be entered directly from the digital image and saved to the VistA Insurance Buffer. A reporting utility is available to Business Office Managers to ensure compliance of check-in and verification clerks.

By expediting the data collection process at check-in, ICB helps a VA facility improve the patient check-in experience and customer satisfaction. It also increases insurance data accuracy and allows for standardization of the verification process.

**Features**

- Paperless Work Flow
- Reduce Insurance Buffer File Errors
- Audit functionality by categories including Patients, Clerks and Date
- Identify the patient by appointment and location
- Alerts entry clerks to update insurance information
- Scan the insurance card with a small desktop scanner
- Saves the image for the insurance verification clerk
- Comprehensive and Accurate Process for Verification Clerks:
  - View work list of patients with recently scanned cards
  - Compare existing VistA data against scanned insurance card image
  - OCR to capture data directly from insurance card image
  - Save updated data to VistA Insurance Buffer File
  - Save updated data image to VistA Imaging
Intake and Output

Vista Module: Intake and Output  Version: 2.0

Namespace:  Most Recent Patch:

Brief Description: The Intake and Output (I&O) application is designed to store, in the patient's electronic health record, all patient intake and output information associated with a hospital stay or outpatient visit.

Business Function Framework Line(s) of Business: Deliver Health Care

Business Function Framework Function(s): Provide Medical Services, Manage Health Records

VHA Portfolio: Health Provider Systems

Business Owner: ONS (Office of Nursing Service)  OIT Project Manager: OIT/PD/PSS/HPS

Full Description: The Intake and Output (I&O) application is designed to store, in the patient's electronic health record, all patient intake and output information associated with a hospital stay or outpatient visit. This application is not service-specific; it interfaces with the Patient Information Management System (PIMS) (MAS), Nursing, and Pharmacy applications.

Features

- Users may electronically document patient intake (e.g., oral fluids, tube feedings, intravenous fluids, irrigations, and other types of intake defined by the facility) and patient output (e.g., excreted patient material such as urine, nasogastric secretions, emesis, drainage, liquid feces/stool, and other types of output defined by the facility).

- Intake data can be entered through either a quick or a detailed route. The quick route documents the total fluid consumed. The detailed route requests the user to enter information regarding the specific type of fluid intake (e.g., orange juice, water, soup) along with the quantity absorbed.

- The Start/Add/DC IV and Maintenance option contains nine protocols associated with intravenous therapy:
  - Start IV—Start a new IV line or heparin/saline lock/port.
  - Solution: Replace/DC/Convert/Finish Solution—DC current solution then replace a new solution to the selected IV line, or convert the IV according to the user's choice.
  - Replace Same Solution—Replace the same solution to a selected IV.
  - D/C IV Lock/Port and Site—Remove IV/lock/port from a selected IV site.
- Care/Maintenance/Flush—check site condition, dressing change, tube change and flush.
- Add Additional Solutions(s) —Add additional solution(s) without discontinuing an existing one.
- Restart DCd IV—Restart an IV that was discontinued (DCd) due to infiltration or other reasons.
- Adjust Infusion Rate—Adjust infusion rate for a selected IV.
- Flush—Flush all IV line(s) for a selected infusion site.

The software supports documentation of intravenous intake via both single and multi-lumen catheters and is interfaced with the IV module of the Pharmacy software. The following reports are included:

- Print I/O Summary by Patient (by Shift and Day(s))
- Print I/O Summary (Midnight to Present)
- Print I/O Summary (48 Hours)
- 24 Hours Itemized Shift Report
- Intravenous Infusion Flow Sheet

The last four reports can be printed for all patients on a ward, for patients in selected rooms on a ward, and for an individual patient.
**Integrated Billing (IB)**

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<tr>
<th>Vista Module: Integrated Billing (IB)</th>
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<tr>
<td>Namespace: IB</td>
<td>Most Recent Patch:</td>
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<tr>
<td>Brief Description:</td>
<td></td>
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<tr>
<td>The Integrated Billing (IB) software</td>
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<tr>
<td>provides all the features necessary</td>
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<tr>
<td>to create first party (patient) and</td>
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<tr>
<td>third party (insurance carriers/Medicare) bills.</td>
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**Business Function Framework Line(s) of Business:**
Provide Health Care Administration, Manage Business Enabling Services

**Function(s):**
Perform Hospital Administration, Utilize Information Technology Services

**VHA Portfolio: Business Informatics**

**Business Owner: VHA CBO**

**OIT Project Manager: OIT/PD/PSS/HPS**

**Full Description:**
IB allows for the capture, maintenance, and storage of insurance data including policy information and related benefits. It provides the ability to electronically transmit bills to payers with the data required by HIPAA. It also provides the ability to receive and store electronic 835 Health Care Claim Payment/Advice. It includes the ability to create printed bills which can then be mailed to payers who are unable to accept an electronic claim.

A Claims Tracking feature is available to assist utilization review staff in tracking episodes of care, completing pre-certifications, completing continued stay reviews, and processing appeals and denials.

An Automated Biller module provides a process that automatically creates bills for billable events which can then be finished and authorized by the billing staff. The IB software also provides many reporting features that support the billing staff by providing statistics, tracking and historical information.

This software is highly integrated with other VistA packages. It is dependent on data from Registration, Scheduling, Outpatient Pharmacy, Patient Care Encounter (PCE), and Prosthetics to determine billable events. Bills and charges created in IB are passed to Accounts Receivable for processing.

**Features**

- Tracks events requiring insurance company reviews from the time of the actual event until final payment is resolved.
- Provides the ability to setup insurance companies and insurance plans and to store all
relevant data associated with each of the group or individual plans.

- Provides the ability to enter and maintain each patient’s insurance data.
- Automates the creation of bills for patient charges for prescriptions, inpatient and outpatient co-payments, and long term care co-payments. For medication co-payments, it tracks charges billed to a veteran at all sites to ensure that the annual maximum billing cap is not exceeded.
- Automates the creation of third party bills for patient health care services based on billable events in Claims Tracking.
- Provides the ability to create claims and print or transmit them to third party payers for reimbursement.
- Automates the pricing of third party claims using Reasonable Charges based on care provided, payer, and provider.
- Provides the ability to include inpatient stays, outpatient visits/procedures, prescriptions, and prosthetic supplies on third party claims.
- Provides the ability to electronically transmit claims to Medicare and third-party payers and to receive electronically transmitted remittance advices from Medicare and third-party payers.
- Provides the ability to define insurance company-specific billing parameters so bills can better reflect local insurance company requirements.
- Provides the ability to load lists of billable rates into VistA through Charge Master.
- Provides the ability to configure local overrides to national billing forms (Output Formatter overrides) to meet non-standard requirements of individual insurance companies.
- Provides a variety of IB reports that allow sites to monitor various aspects of the billing program such as the tracking of electronic claims, unbilled events, claim statistics, etc.
- Provides the ability for sites to track and price services provided to out-of-network patients.
- Allows VistA to receive, process and display ERA/EOB and MRA EOB data from FSC in HIPAA 5010 compatible format.
- Provides automatic updates to patient insurance information (bypassing the insurance buffer) by including Medicare in the insurance verification process.
- Provides character '%' next to the bill number to indicate that there is a payment in the Explanation of Benefits file.
### Integrated Funds Distribution, Control Point activity, Accounting and Procurement (IFCAP)

<table>
<thead>
<tr>
<th>Vista Module: Integrated Funds Distribution, Control Point activity, Accounting and Procurement (IFCAP)</th>
<th>Version: 5.1</th>
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</thead>
<tbody>
<tr>
<td>Namespace: PRC</td>
<td>Most Recent Patch:</td>
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<tr>
<td>Brief Description: Integrated Funds Distribution, Control Point Activity, Accounting and Procurement (IFCAP) module automates a spectrum of VA financial activities. VA employees use IFCAP to manage budgets, order goods and services, maintain records of available funds, determine the status of a request, compare vendors and items to determine the best purchase, record the receipt of items into the warehouse, and pay vendors.</td>
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<tr>
<td>Business Function Framework Line(s) of Business: Manage Business Enabling Services</td>
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<tr>
<td>VHA Portfolio: Business Informatics</td>
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<tr>
<td>Business Owner: VHA Procurement and Logistics Office</td>
<td>OIT Project Manager: OIT/PD/PSS/HPS</td>
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<tr>
<td>Full Description: IFCAP automates the written regulations and policy for VA funding and procurement, which define the actions taken on requests for goods and services as formal transactions, orders, and payments.</td>
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</table>

**Features**

- Allows users in different services to view the same document on-screen.
- Automates funds distribution, request for goods and services, purchase order, funds obligation, and the receipt process.
- Standardizes funds management. Automatically generates yearly budget elements for IFCAP control points.
- Maintains year-to-date balance for control points. Integrates service-level requisitions and facility administrative activities, and updates service-level records.
- Shares vendor and item master data to eliminate duplicate input and promote user accuracy.
- Affixes processing status to each request at each step in the ordering cycle. Enhances security with the use of a unique electronic signature code for each user required to authorize an action.
- Sets an encoded value based on key fields from each record signed.
- Transmits financial and inventory data to VA central accounting and inventory systems.
- Updates IFCAP records automatically with central accounting system data.
- Provides various reports that give the current status of any request, a service fund balance, and data required for budget analysis, and a listing of requests sorted according to control point specifications.
- Enables electronic transmission of purchase orders to vendors through Electronic Data Interchange (EDI) and updates purchase order status automatically.
- Enables authorized users to purchase goods using Electronic Data Interchange (EDI) process for total electronic processing between vendor and buyer.
- Supports the ordering of goods under contract from specific vendors via delivery orders.
- Supports the payment for goods/services via the government purchase card and the subsequent on-line reconciliation.
- Transmits Federal Procurement Data System (FPDS) data to the Austin Information Technology Center (AITC) to support enterprise level tracking of procurement history.
- Supports monthly management analysis activities by transmitting inventory and purchase order activity data to the Clinical Logistics Report Server at AITC.
- Supports, via a graphical tool, the reviewing of purchase order activity and other logistical data within IFCAP; and the export of that data to MS Excel spreadsheets for further analysis.
- Supports both the identification of items by their National Item File number (NIF #) and the standardized naming of items through an interface between IFCAP and the National Item File.
- Transmits inventory and purchase order activity data to the Clinical Logistics Report Server (CLRS) on a monthly basis for management analysis.
- Provides numerous Inventory management features including desired stock levels, automatically generated (autogen) replenishment orders, identification via bar code technology, and numerous reporting mechanisms.
- Supports the identification and tracking of on-demand items at the primary and the secondary level.
- Enforces the separation of duties. Controls are implemented with respect to Requestors, Approving Official and Obligators.
- Provides bi-directional communication between IFCAP and the commercial Electronic Contracting Management System (eCMS) location at the (AITC) in Austin, TX.
Integrated Patient Funds

Vista Module: Integrated Patient Funds          Version: 3.0
Namespace: PRPF                             Most Recent Patch:

Brief Description: The Integrated Patient Funds software automates the “bank-like” functionality that VA provides for patients to manage their personal funds while hospitalized in a VA medical facility.

Business Function Framework Line(s) of Business: Manage Business Enabling Services
Business Function Framework Function(s): Provide Financial Management

VHA Portfolio: Business Informatics
Business Owner: VHA CBO     OIT Project Manager: OIT/PD/PSS/HPS

Full Description: The Integrated Patient Funds software automates the “bank-like” functionality that VA provides for patients to manage their personal funds while hospitalized in a VA medical facility.

Patient funds clerks create an individual patient account with information on a patient’s psychological classification, financial status, and cash balance. Additional transactions consist of the deposit and withdrawal of funds.

Features

- Shares patient account data to eliminate duplicate input and promote accuracy.
- Records deposits and withdrawals.
- Promotes security with the use of unique electronic signature codes.
- Allows withdrawal restrictions for designated patients.
- Allows users (e.g., patient funds clerk and agent cashier) to view the same information on-line.
- Allows reconciliation of patient funds records with Fiscal Service.
- Provides varied reports with the current status of patient accounts, summary transaction information, restriction lists, and suspense files.
**Kernel**

<table>
<thead>
<tr>
<th>Vista Module: Kernel</th>
<th>Version: 8.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: XU</td>
<td>Most Recent Patch:</td>
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</table>

**Brief Description:** Kernel provides a portability layer between the underlying operating system and application code.

**Business Function Framework Line(s) of Business:** Manage Business Enabling Services

**Business Function Framework Function(s):** Utilize Information Technology Services

**VHA Portfolio:** Common Services

<table>
<thead>
<tr>
<th>Business Owner: VHA</th>
<th>OIT Project Manager: OIT</th>
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</table>

**Full Description:** Kernel provides a portability layer between the underlying operating system and application code. This results in the entire Veterans Health Information Systems and Technology Architecture (VistA) system being portable among different computers, operating systems, and implementations. This, together with the database portability provided by VA FileMan, eliminates the cost of application conversions each time VHA changes its computing platforms. Kernel also offers shared services for VistA applications, resulting in reduced development costs and a common user interface, and provides system management tools for managing VistA computer systems. Integrated Single Sign-on—The RPC Broker supports a single sign-on point from a client workstation to the server. Users need only sign on once when accessing multiple VistA applications on the same workstation.

**Features**

- **ZOSF/ZOSV Operating System Interface** — The core of Kernel’s portability layer. Insulates applications from being tied to any particular hardware platform, operating system, or implementation.
- **Sign-on and Security Management**—Controls user access by device, time, and day of week; controls user access to programs, menus, files, fields, and devices; audits by user, device, program, file, and field; and provides electronic signature capability.
- **Menu Manager**—Manages all application menus to provide a standard user environment; customizes menus for individual users; shares or restricts menus to a user or a set of users; provides secure delegation of menu management authority; and delivers priority system alerts.
- **Error Processing**—Provides a consistent method for recording and processing application errors.
- **Device Handler**—Defines generic terminal types to reuse for similar peripherals; supports host files in layered operating system environments; insulates programmers from device- and operating system-specific coding; and provides standard user device selection.
across different environments.

- Task Manager—Provides flexible background job scheduling; allows users to control their own tasks; and permits specification of device, priority, and time of execution.
- Kernel Installation and Distribution System (KIDS, namespace XPD)—Provides a mechanism to create a distribution of packages and patches; allows distribution via a MailMan message or a host file; and allows queuing the installation of a distribution for off-hours.
- Library Functions – provides Date, String, Mathematical, Hyperbolic Trigonometric Measurement and Utility functions.
- Domain Name Resolution—Provides an Application Program Interface (API) to resolve domain names into an Internet Protocol (IP) address.
- Kernel Delphi Components (KDC)—Provides developers with the capability to develop VistA client/server software. These Delphi-based components enable client applications to communicate and exchange Kernel-related data with VistA M Servers (e.g. alerts and date/time).
## Kernel Authentication & Authorization for Java 2 Enterprise Edition (KAAJEE)

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<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
</tr>
<tr>
<td>Brief Description: Kernel Authentication &amp; Authorization for Java 2 Enterprise Edition (KAAJEE) addresses the Authentication and Authorization (AA) needs of VistA Web-based applications in the J2EE environment</td>
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</tr>
<tr>
<td><strong>Business Function Framework Line(s) of Business:</strong> Manage Business Enabling Services</td>
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<tr>
<td><strong>Business Function Framework Function(s):</strong> Utilize Information Technology Services</td>
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<tr>
<td><strong>VHA Portfolio:</strong> Common Services</td>
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<tr>
<td><strong>Business Owner:</strong> VHA</td>
<td><strong>OIT Project Manager:</strong> OIT</td>
</tr>
<tr>
<td>Full Description: Kernel Authentication &amp; Authorization for Java 2 Enterprise Edition (KAAJEE) addresses the Authentication and Authorization (AA) needs of VistA Web-based applications in the J2EE environment. KAAJEE Iteration 1 was designed to run on the WebLogic V. 8.1 (SP4 or higher) Application Server with intention to allow for future WebLogic iterations. VistALink provides connectivity between KAAJEE and the VistA M Server.</td>
<td></td>
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</tbody>
</table>
Kernel Toolkit

Vista Module: Kernel Toolkit
Version: 7.3

Namespace: XT
Most Recent Patch:

Brief Description: Kernel Toolkit (also referred to as “Toolkit”) supplements the Kernel software package. It provides Development and Quality Assessment Tools and System Management Utilities.

Business Function Framework Line(s) of Business: Manage Business Enabling Services

Business Function Framework Function(s): Utilize Information Technology Services

VHA Portfolio: Common Services

Business Owner: VHA
OIT Project Manager: OIT

Full Description: Kernel Toolkit (also referred to as “Toolkit”) supplements the Kernel software package. It provides Development and Quality Assessment Tools and System Management Utilities.

Features

- Development and Quality Assessment Tools
  - Promote standard programmer interfaces.
  - Provide programmer and systems management.
  - Provide a portable routine and global editor.
  - Check adherence to programming standards and correct syntax with the XINDEX tool.
  - Provide support for data standardization,
  - Provide standard error trapping, storing, and reporting.
  - Support quality assessment tools for the comparison of routines and data dictionaries.
  - Provide software project management utilities.
  - Provide tools to work with data in Extensible Markup Language (XML).

- System Management Utilities
  - Customize and tune site parameters for local requirements.
  - Provide a Multi-Term Lookup Utility for enhanced VA FileMan lookups.
    - Provide PARAMETERS file (#8989.5) for user-specific to system-level tracking of parameter values.
## Kernel Unwinder

<table>
<thead>
<tr>
<th>Vista Module: Kernel Unwinder</th>
<th>Version: 7.1</th>
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</thead>
<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
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</table>

**Brief Description:** The Kernel Unwinder is a utility that is used in conjunction with the Protocol file (#101) to create modular building blocks for applications.

**Business Function Framework Line(s) of Business:** Manage Business Enabling Services

**Business Function Framework Function(s):** Utilize Information Technology Services

**VHA Portfolio:** Common Services

| Business Owner: VHA | OIT Project Manager: OIT |

**Full Description:** The Kernel Unwinder allows hierarchical traversing of menus, as found in Menu Management, and also the structuring of order protocols, into independent, reusable modules. Each node becomes a "building block" from which more sophisticated modules may be built. For instance, the node "Order Shirt" may have as sub-items, "Get Size," "Get Color," "Get Style," and "Get Delivery Date." Each of these sub-items may, in turn, be used to build other modules.

Provisions have been made to allow additional building blocks to be placed at the item level of the node. Their purpose is to allow modifying actions to be executed and thus increase the flexibility of each module.
## Laboratory

<table>
<thead>
<tr>
<th>Vista Module: Laboratory</th>
<th>Version: 5.2</th>
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<tbody>
<tr>
<td>Namespace: LR</td>
<td>Most Recent Patch:</td>
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</tbody>
</table>

**Brief Description:** The VistA Laboratory module is a clinically oriented system designed to provide data to health care personnel. It assists the Pathology and Laboratory Medicine Service (P&LMS) in managing and automating the workload and reporting process.

**Business Function Framework Line(s) of Business:** Deliver Healthcare, Manage Business Enabling Services

**Business Function Framework Function(s):** Provide Medical Services, Provide Ancillary Services, Utilize Information Technology Services

<table>
<thead>
<tr>
<th>VHA Portfolio: Health Provider Systems</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business Owner: Pathology and Laboratory Medicine Service (P&amp;LMS)</td>
</tr>
<tr>
<td>OIT Project Manager: Health Products Division</td>
</tr>
</tbody>
</table>

**Full Description:** The Laboratory module supports the following areas: General Laboratory, Microbiology, Histology, Cytology, and Blood Donor. Additionally, activity-specific VistA applications exist for the following Laboratory areas, and they are explained in more detail in individual write-ups immediately following this one: Anatomic Pathology (including Surgical Pathology, and Electron Microscopy), Blood Bank, Electronic Data Interchange (LEDI), Emerging Pathogens Initiative (EPI), HOWDY Computerized Login Process, National Laboratory Tests (NLT) Documents and LOING Request Form, Point of Care (POC), Universal Interface (UI), and VistA Blood Establishment Computer Software (VBECS).

### Features

- **Phlebotomy/Ordering**
  - Computerized Patient Record System (CPRS).
  - Supports ward order entry.
  - Prints collection lists and labels and supports barcode printing.
  - Provides maximum ordering frequency (e.g., daily, user-defined limits).
  - Supports immediate request for blood specimen collection.

- **Processing**
  - Provides work lists by urgency and accession number (instrument-specific).
  - Produces lists of incomplete, workload/data capture reports, and lists for verification of data.
  - Supports uni-directional and bi-directional Auto Instrument interfacing.
- Supports automatic download to automated instruments.
- Supports via Laboratory Electronic Data Interchange (LEDI) a bidirectional interface that allows for ordering and processing of laboratory tests “VA to VA”, “VA to DoD”, and “VA to Commercial Reference Laboratory” for all areas of the clinical laboratory (excepting Blood Bank)

**Verification/Release of Data**
- Provides Delta Checks, flagging high/low/critical results.
- Presents critical values to the technologist in reverse video.
- Supports review/verification by group or individual accessions.
- Provides various on-screen alerts.
- Automated electronic result message generation via LEDI.

**Reports**
- Produces supervisory management, audit trail, data integrity, quality management and utilization review reports.
- Provides searches for specific antibiotic with defined antimicrobial patterns.
- Produces discharge summaries and cumulative and discrete episode reports.
- Produces automatic transmission of verified data to the ordering location.
- Provides quality control/search capabilities (e.g., critical values, high/low values and Systemized Nomenclature of Medicine—Clinical Terms [SNOMED CT®]).
- Produces reports for Laboratory Management Information Program.
- Produces and transmits roll-up reports to national database.
- Produces site-customized management reports.
- Schedules patient cumulative reports based on inpatient or outpatient treatment.

**Data Extracts Capabilities for External Databases:**
- Laboratory Management Index Program workload data.
- Laboratory Workload for Decision Support System.
- Hepatitis C clinical information.
- Emerging Pathogen clinical data, antimicrobial trend, infection control, and Health Department reports.
- Patient Care Encounter workload.
- LEDI messages to remote Laboratory Information Systems (LIS).
**Laboratory: Anatomic Pathology**

<table>
<thead>
<tr>
<th>Vista Module: Laboratory: Anatomic Pathology</th>
<th>Version: 5.2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
</tr>
<tr>
<td>Brief Description: The VistA Laboratory Anatomic Pathology module automates record keeping and reporting for all areas of Anatomic Pathology (i.e., Surgical Pathology (SP), Cytopathology, Electron Microscopy (EM), and Autopsy).</td>
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</tr>
<tr>
<td><strong>Business Function Framework Line(s) of Business:</strong> Deliver Health Care, Manage Business Enabling Services</td>
<td></td>
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<tr>
<td><strong>Business Function Framework Function(s):</strong> Provide Medical Services, Provide Ancillary Services, Utilize Information Technology Services</td>
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<tr>
<td><strong>VHA Portfolio:</strong> Health Provider Systems</td>
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<tr>
<td><strong>Business Owner:</strong> Pathology and Laboratory Medicine Service (P&amp;LMS)</td>
<td><strong>OIT Project Manager:</strong> OIT/PD/PSS/HPS</td>
</tr>
<tr>
<td>Full Description: The module provides valuable quality management features, increases productivity, provides comprehensive search and reporting capabilities, and facilitates the gathering of workload statistics.</td>
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</table>

**Features**

Provides quality management features, including:

- Access to historical pathology data during microscopic examination of current specimens.
- Lists of incomplete cytopathology, surgical pathology, EM, and autopsy reports.
- Turnaround time reports for all anatomic pathology sections.
- Generation of defined groups of cases requiring additional review, as defined by the accrediting agencies.
- Compilation of all information (e.g., special stains, immunopathology, or electron microscopy studies) in a single cumulative patient summary.
- On-command printing of laboratory test results of specified tests.
- Tracking outcomes of Quality Management review.
- Increases productivity through:
  - On-line access to historical anatomic pathology data (diagnosis and Systemized
Nomenclature of Medicine—Clinical Terms SNOMED CT® codes only).

- Immediate availability of information regarding surgical pathology, cytology, electron microscopy specimens, and autopsy.
- Access to verified/released reports by non-laboratory personnel.
- Generation of labels for both specimens and slides.
- Interface with Voice Recognition Systems.
- Provides comprehensive searching/reporting capabilities, including:
  - Final pathology, autopsy, cytology, and EM reports.
  - A log of all specimens accessioned, including final diagnoses.
  - A variety of reports based on morphology, procedure, and etiology disease field entries, including:
    - List of patients with a particular diagnosis.
    - List of specimens from a particular site.
    - List of specimens from a particular procedure (e.g., biopsies, frozen sections).
- Provides workload statistics for:
  - Number of specimens accessioned by area.
  - Number of blocks, slides, and stains prepared.
**Laboratory: Blood Bank**

<table>
<thead>
<tr>
<th>Vista Module: Laboratory: Blood Bank</th>
<th>Version: 5.2</th>
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<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
</tr>
<tr>
<td>Brief Description: Maintains and supports VHA Blood Bank medical devices that are compliant with Food and Drug Administration (FDA) Quality System Regulations and manufacturing Code of Federal Regulations (CFR). Oversight and compliance with Blood Bank business needs as pertains to supporting the software system.</td>
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<tr>
<td><strong>Business Function Framework Line(s) of Business:</strong> Deliver Health Care, Manage Business Enabling Services</td>
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<tr>
<td><strong>Business Function Framework Function(s):</strong> Provide Ancillary Services, Utilize Information Technology Services</td>
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<tr>
<td><strong>VHA Portfolio:</strong> Health Provider Systems</td>
<td></td>
</tr>
<tr>
<td><strong>Business Owner:</strong> VHA</td>
<td><strong>OIT Project Manager:</strong> OIT</td>
</tr>
<tr>
<td>Full Description: This module is DISABLED FOR NEW DATA ENTRY. Legacy transfusion records however are available for review.</td>
<td></td>
</tr>
<tr>
<td>VistA Blood Establishment Computer Software (VBECs) replaces and supersedes VistA Blood Bank v5.2 for blood bank operations. VistA Blood Bank v5.2 blood unit records remaining after the transfer of patient information to VBECs are available for reference only and are not editable.</td>
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</table>
# Laboratory: Electronic Data Interchange (LEDI)

<table>
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<tr>
<th>Vista Module: Laboratory</th>
<th>Version: 5.2</th>
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<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch</td>
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</table>

**Brief Description:** The Laboratory Electronic Data Interchange (LEDI) software reduces or eliminates the need for manual ordering and reporting of laboratory results to interface laboratories. The software minimizes the amount of manual labor associated with preparing samples for delivery and processing at the host lab facility.

- **Business Function Framework Line(s) of Business:** Deliver Health Care, Manage Business Enabling Services
- **Business Function Framework Function(s):** Provide Medical Services, Provide Ancillary Services, Utilize Information Technology Services

**VHA Portfolio:** Health Provider Systems

- **Business Owner:** Business Owner: Pathology and Laboratory Medicine Service (P&LMS)
- **OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** The VistA Laboratory Electronic Data Interchange software application provides electronic messaging for Lab Test Ordering and Lab Test Results Reporting between VA health care facilities’ laboratories based, on the Health Level Seven (HL7) Version 2.3 Standard Specification and VistA Health Level Seven (HL7) Version 1.6 Standard Specification. These Specifications are used as the basis for defining VistA Laboratory Universal Interface (UI) and LEDI HL7 Interface Standard Specification Version 1.2.

**Features**

- Addresses the electronic lab test order transfer from the host facility laboratory to collection facilities laboratories.
- Provides for the automated transfer of verified test results from the host facility back to the collection facility’s laboratory for release to the patient electronic health record.
- Provides storage of lab test results in the clinical database at the collection facility laboratory. The LEDI software electronically returns test results to the collection facility laboratory using the HL7 protocols. Results returned to the collection facility laboratory would be processed and verified as if completed by an auto instrument. This eliminates manual entry of results at the collection facility laboratory.
- Creates the automation of shipping lists to process the laboratory work at the collection and host laboratories.
Provides the capability to interface non-VistA laboratory information systems. This includes university hospitals, commercial reference laboratories, other government agencies and centralized clinical patient record systems.

- Sends/Receives Laboratory HL7 Messages.
- Utilizes TCP/IP Protocol as a Communication Protocol. [Data transfers outside VA will require Secure Transmission Protocol or VPN.]
- Transmits/receives lab test orders.
## Laboratory: Emerging Pathogens Initiative (EPI)

<table>
<thead>
<tr>
<th>Vista Module: Laboratory: Emerging Pathogens Initiative (EPI)</th>
<th>Version: 5.2</th>
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<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td>Most Recent Patch</td>
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<tr>
<td><strong>Brief Description:</strong> The Laboratory Emerging Pathogens Initiative (EPI) software package allows the Department of Veterans Affairs (VA) to track Emerging Pathogens on the national level without the necessity for additional local data entry.</td>
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<tr>
<td><strong>Business Function Framework Line(s) of Business:</strong> Provide Health Care Administration, Manage Business Enabling Services</td>
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<tr>
<td><strong>Business Function Framework Function(s):</strong> Perform Hospital Administration, Utilize Information Technology Services</td>
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<tr>
<td><strong>VHA Portfolio:</strong> Health Provider Systems</td>
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<tr>
<td><strong>Business Owner:</strong> Infections Disease Surveillance</td>
<td><strong>OIT Project Manager:</strong> OIT/PD/PSS/HPS</td>
</tr>
<tr>
<td><strong>Full Description:</strong> Using this objective information, plans can be formulated on the national level for intervention strategies and resource needs. Results of aggregate data can also be shared with appropriate public health authorities for planning on the national level for the non-VA and private health care sectors.</td>
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</table>

The Laboratory EPI program is designed to automatically provide data on emerging pathogens to Veterans Affairs Headquarters (VAHQ) without additional individual data entry at the site level. The data will be sent to Austin Information Technology Center (AITC) for initial processing and coupling with denominator data related to workload. VAHQ data retrieval and analysis can then be accomplished.

### Features

- Identify Emerging Pathogens.
- Extract specific data associated with the Emerging Pathogen.
- Transmit data to AITC
- Create national SAS™ data sets for Infectious Diseases Program Office access.
## Laboratory: HOWDY Computerized Login Process

<table>
<thead>
<tr>
<th>Vista Module: Laboratory: HOWDY Computerized Login Process</th>
<th>Version: 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
</tr>
<tr>
<td>Brief Description: Howdy is a Class 3 to Class 1 which introduced a computerized phlebotomy login process called “howdy” as an automated laboratory check-in application which can be used within the VistA Laboratory module.</td>
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</tbody>
</table>

**Business Function Framework Line(s) of Business:** Provide Health Care Administration, Manage Business Enabling Services

**Business Function Framework Function(s):** Perform Hospital Administration, Utilize Information Technology Services

**VHA Portfolio:** Health Provider Systems

**Business Owner:** Laboratory

**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** This software performs the following functions:

### Features

- Howdy automates laboratory check-in, accessioning of orders, and printing of specimen labels
- Howdy captures collection process times and provides the information required to create phlebotomy performance reports
- Howdy eliminates the need for a hand-written log book for sign-in where the patient's name and SSN can be compromised
- Howdy can utilize bar code technology to assist in the process of patient and specimen identification.
### Laboratory: National Laboratory Test (NLT) Documents and LOINC® Request Form

<table>
<thead>
<tr>
<th>Vista Module: Laboratory : National Laboratory Tests (NLT) Documents and LOINC® Request Form</th>
<th>Version: 5.2</th>
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</thead>
<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
</tr>
<tr>
<td>Brief Description: The National Laboratory Test Documents establish a standard coding across documents in an effort to unite laboratory records.</td>
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<tr>
<td>Business Function Framework Line(s) of Business: Provide Health Care Administration, Manage Business Enabling Services</td>
<td></td>
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<tr>
<td>Business Function Framework Function(s): Perform Hospital Administration, Utilize Information Technology Services</td>
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<tr>
<td>VHA Portfolio: Health Provider Systems</td>
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<tr>
<td>Business Owner: Laboratory</td>
<td>OIT Project Manager: OIT/PD/PSS/HPS</td>
</tr>
<tr>
<td>Full Description: The National Laboratory Test (NLT) Mapping to Logical Observation Identifier Names And Codes (LOINC())</td>
<td></td>
</tr>
<tr>
<td>LOINC® Description</td>
<td>The benefit of this mapping effort is to provide a way to support multiple normal ranges based on test, method, specimen, sex, and patient age. The structure will allow multiple normal ranges within the same laboratory with differing equipment or methods for doing the same procedure. The final product (the normal range, critical high, critical low, reporting units, and method) will be stored with each individual result. Creation of new Data Names for normal range change will be eliminated.</td>
</tr>
</tbody>
</table>
### Laboratory: Point of Care (POC)

**Vista Module: Laboratory: Point of Care (POC)**

**Version: 5.2**

**Namespace:**

**Most Recent Patch:**

**Brief Description:** The VistA Laboratory Point of Care (POC) supports the Laboratory Health Level 7 (HL7) Point of Care (POC) interface. Point of Care systems usually consist of a POC device, a docking station and a server which is configured to connect to Vista.

**Business Function Framework Line(s) of Business:** Provide Health Care Administration, Manage Business Enabling Services

**Function(s):** Perform Hospital Administration, Utilize Information Technology Services

**VHA Portfolio: Health Provider Systems**

**Business Owner: VHA**

**OIT Project Manager: OIT/PD/PSS/HPS**

**Full Description:** POC utilizes existing functionality provided by Laboratory Universal Interface (UI) and Laboratory Electronic Data Interchange (LEDI) software. The software supports the transmission, processing and storing of POC TEST RESULTS in the VistA Laboratory package. The ability of POC interfaces to subscribe to VistA HL7 Admissions, Discharge, Transfer (ADT) messages for patient demographics and location information is provided as needed. Support for 5 separate POC interfaces is provided. Additional interfaces can be added locally when naming of additional interfaces are in conformance to name spacing instructions. POC is a type of interface that downloads and stores results for a bed side analyzer/device or any instrument that performs laboratory testing at the site of care (examination, treatment, diagnosis, etc.). The accession and verification procedures are modified to accommodate POC type of data storage. POC results are not verified by the traditional laboratory methods.

**Features:**

- Identifies testing facility’s name and address for every POC test on the laboratory report.
- Tags each result to identify the person performing the testing on the laboratory report.
- Enhances Laboratory Supervisor Summary reports to also display the name of the POC operator who generated the results. This will eliminate the need to store this information as comments.
- Stores the Equipment Instance Identifier (EII) with the results.
- Expands business rules for laboratory orders to facilitate detection of discrepancies by the provider responsible for the patient’s care.
**Laboratory: Universal Interface (UI)**

<table>
<thead>
<tr>
<th>Vista Module: Laboratory: Universal Interface</th>
<th>Version: 2.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
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</tbody>
</table>

**Brief Description:** The Laboratory Universal Interface (UI) is designed to make the process of interfacing automated instruments easier, faster, and more reliable.

**Business Function Framework Line(s) of Business:** Provide Health Care Administration, Manage Business Enabling Services

**Function(s):** Perform Hospital Administration, Utilize Information Technology Services

<table>
<thead>
<tr>
<th>VHA Portfolio: Heath Provider Systems</th>
</tr>
</thead>
</table>

**Business Owner:** Laboratory

**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** Laboratory UI uses the standard messaging protocol Health Level Seven (HL7) to communicate with all instruments. HL7 is a standard developed by health care information systems professionals to simplify the communications between computer systems that must exchange information. HL7 was adopted by Decentralized Hospital Computer Program (DHCP) as the primary communications protocol for messaging between systems and even between applications on the same system.

The laboratory technologist sees very little change between the Laboratory UI and the traditional interface system. After the Laboratory Information Manager (LIM) or ADPAC sets up the files and installs the new hardware, the technologist can accession, build Load/Work lists, download, and verify the results as usual. The benefit of using the Laboratory UI is that almost any instrument by any manufacturer can be interfaced quickly and dependably, in unidirectional or bidirectional mode. Interfacing is only subject to the limitations of the instrument.
# Laboratory: VistA Blood Establishment Computer Software (VBECs)

<table>
<thead>
<tr>
<th>Vista Module: Laboratory: VistA Blood Establishment Computer Software (VBECs)</th>
<th>Version: 2.0</th>
</tr>
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<table>
<thead>
<tr>
<th>Namespace: VBEC</th>
<th>Most Recent Patch:</th>
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</table>

**Brief Description:** The main purpose of VBECs is to automate the daily processing of blood inventory and patient transfusions in a hospital transfusion service. VBECs facilitates ongoing compliance with Food and Drug Administration (FDA) standards for medical devices and enhances the VA Veterans Health Administration’s (VHA’s) ability to produce high-quality blood products and services to veterans. The system follows blood bank standards, standards of national accrediting agencies, FDA regulations, and VA policies. VBECs is the replacement for the VistA Blood Bank application.

**Business Function Framework Line(s) of Business:** Deliver Health Care, Manage Business Enabling Services

**Business Function Framework Function(s):** Provide Ancillary Services, Manage Health Records, Utilize Information Technology Services

**VHA Portfolio:** Health Provider Systems

**Business Owner:** P&LMS  
**OIT Project Manager:** OIT

**Full Description:** VistA Blood Establishment Computer Software (VBECs) is the Blood Bank System which replaced the previous blood bank software (VistA Blood Bank v5.2) at the Department of Veterans Affairs (VA). The system follows blood bank standards, standards of national accrediting agencies, FDA regulations, and VA policies. VBECs is considered a medical device by the FDA (Food and Drug Administration), which places OI/PD/the Blood Bank Team in the role of “manufacturer.”

VBECs supersedes VistA Blood Bank v5.2 for blood bank operations. VistA Blood Bank v5.2 blood unit records remaining after the transfer of patient information to VBECs are available for reference-only and cannot be edited. VistA Blood Bank v5.2 validation records must be maintained for five years after the last of the blood unit records is transferred to VBECs.

**Features:**

- Interfaces with BCE-PPI Transfusion Verification, VistA Laboratory, CPRS order dialog and reports, DSS, and ADT.
- Provides direct data entry user interface supported by business rules and truth tables for transfusion related testing.
- Alerts users to testing conflicts, potential contraindications for testing and unit selection, and overrides from standard entries (requiring explanation to proceed).
| Provides barcode scanning capability for patient safety and technologist efficiency |
Lexicon Utility

Vista Module: Lexicon Utility  
Version: 2.0

Namespace: LEX  
Most Recent Patch:

Brief Description: The VistA Lexicon Utility Version 2.0 is a dictionary of medical terms which can be used by all clinical areas. It provides the basis for a common language of terminology so that all members of a health care team may communicate with each other. It provides a variety of coding schemes and the ability to update these coding systems.

Business Function Framework Line(s) of Business: Deliver Health Care, Manage Business Enabling Services

Business Function Framework Function(s): Manage Health Records, Utilize Information Technology Services

VHA Portfolio: Health Data Systems

Business Owner: Health Information Management  
OIT Project Manager: STS

Full Description: The Lexicon is a standardized reference for clinical terminology across VHA that enables clinical information to be recorded, transmitted, retrieved, and analyzed in a precise and consistent manner independent of clinic or medical center.

The Lexicon provides a comprehensive Application Program Interface (API) that enables any application that needs to use standardized terminology to be able to interface. At its inception in the early 1990s, the scope of the Lexicon was limited to expressing diagnostic clinical problems in easy-to-understand terminology and associating terms to coding systems such as International Classification of Diseases (ICD), Clinical Modification (ICD-9-CM), Diagnostic and Statistical Manual of Mental Disorders (DSM), and the North American Nursing Diagnosis Association (NANDA).

Over the years, this scope broadened to provide a general-purpose utility that serves the terminology needs of many packages, including Problem List (standardized using SNOMED CT®), Encounter Forms, Text Integration Utility (TIU), Event Capture, Federal Health Information Exchange (FHIE), and the Laboratory Data Sharing Interoperability (LDSI) project. In addition to providing terminology, the
Lexicon provides a coding system update deployment mechanism. A large number of applications, packages, and services (VistA and external) are now dependent on the quarterly updates, Integrated Billing, Fee Basis, Automated Information Collection System (AICS), Laboratory, Dental, Prosthetics, Mental Health, Radiology, Surgery, Registration, Patient Care Encounter (PCE), Event Capture, Quality: Audiology and Speech Analysis and Reporting (QUASAR), Home Based Primary Care, Clinical Reminders, Text Integration Utility (TIU), Laboratory Data Sharing Interoperability (LDSI), and standardized Problem List.

**Features**

- Provides a basis for a common language of terminology, so that all members of a health care team can communicate with each other.
- Provides a concept-based terminology that is well defined, understandable, and encodable by multiple coding schemes.
- Provides for site modification of term definitions, captured by the software and transmitted to the Lexicon team for ratification and possible inclusion in future updates.
- Provides the ability to deploy updates to systems from Standards Development Organizations (SDOs) that are required by statute, mandated by an oversight body, or required by VHA business needs, including CPT, HCPCS, CPT modifiers, ICD-9 Diagnoses, ICD-9 Procedures, and SNOMED CT®.
- Provides for user definable (user, specialty, or clinic) controlled views of vocabulary through the use of subsets that may be based on a combination of semantic types and code sources.
- Accepts the provider term if a search of the dictionary does not find a match, and forwards to the Lexicon team for analysis and possible inclusion in future updates.
- Allows abbreviations or shortcuts to provide quick access to frequently used definitions.
- Optimizes search results by placing the most frequently used terms near the start of the list.
- Supports coding system versioning, activation history, and code text history.
Library

Vista Module: Library  Version: 2.5

Namespace: LBR  Most Recent Patch:

Brief Description: The Library module is designed to automate the entire serials management process in VA Library Services.

Business Function Framework Line(s) of Business:

Business Function Framework Function(s):

VHA Portfolio: Business Informatics

Business Owner: OIA Patient Care Services  OIT Project Manager: OIT/PD/PSS/HPS

Full Description: The Serials Control module has three components. The Serials Management component creates the local library’s serials database, along with retrospective holdings and purchasing information and copy information, such as location and category. The module is designed so that access to this component may be restricted, if desired, to the serials expert on the library staff, usually a medical librarian or the Chief. Access to the Serials Control component where daily actions are managed (e.g., check-ins, routing, and generation of reports) may be given to other Library Service staff members. A minor component of the module, Library Site Parameters, allows for the initialization of the module. A centrally produced Title Authority file, a database of over 9,477 serial titles owned by VALNET (VA Library Network) libraries, was preloaded with standard bibliographic data and provided as a part of this module.

Library makes it possible for local sites to carry only locally active entries in their local database. When new entries are needed, they can be downloaded automatically from the national database into a site’s local database.

Features:

- Creates a local serials database.
- Provides acquisition and retention information.
- Provides purchasing and vendor information.
- Provides holdings information and shelving location information.
- Categorizes by type and subject.
- Provides check-in with next issue prediction.
- Generates routing slips.
- Tracks materials returned from routing.
- Displays check-in history.
- Generates 20 management reports (e.g., listings, monthly check-in statistics, monthly routing statistics, tracking of unreturned routed issues, missing issue reports for claiming replacements or reports, etc.).
## List Manager

<table>
<thead>
<tr>
<th>Vista Module: List Manager</th>
<th>Version: Unknown</th>
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<tbody>
<tr>
<td>Namespace: VALM</td>
<td>Most Recent Patch:</td>
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</table>

**Brief Description:** The List Manager was developed to provide an efficient way for applications to present a list of items to the user for action.

**Business Function Framework Line(s) of Business:** Manage Business Enabling Services

**Business Function Framework Function(s):** Utilize Information Technology Services

**VHA Portfolio:** Common Services

| Business Owner: VHA | OIT Project Manager: OIT |

**Full Description:** The List Manager was developed to provide an efficient way for applications to present a list of items to the user for action. It is a developmental tool that enables programmers to:

- Display a list of items to the user.
- Allow the user to browse back and forth through the items one at a time or by screen.
- Allow the user to select items from the list.
- Specify the actions that can be applied to selected items from the list.
- Call List Manager again as part of an action.

Protocols are the "actions" that users can take against items on the list. A number of standard protocols come as part of the List Manager utility. Most of these are actions that allow the user to browse the list of items. The List Manager contains the Workbench programmer utility, which allows the development of a List Manager application without having to move from one development tool to another.
**MailMan**

Vista Module: MailMan  
Version: 8.0

<table>
<thead>
<tr>
<th>Namespace: XM</th>
<th>Most Recent Patch:</th>
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</thead>
</table>

Brief Description: The VistA MailMan software is designed to allow users to send and receive mail from individuals or groups electronically through communication lines, modems, and other networks.

| Business Function Framework Line(s) of Business: Manage Business Enabling Services |
| Business Function Framework Function(s): Utilize Information Technology Services |

| VHA Portfolio: Common Services |
| Business Owner: VHA and OIT Infrastructure and Security Services (ISS) |
| OIT Project Manager: OIT |

Full Description: The VistA MailMan software is designed to allow users to send and receive mail from individuals or groups electronically through communication lines, modems, and other networks. These electronic mail messages (i.e., e-mail) can range from personal letters to formal bulletins extracting data from VA FileMan. MailMan is an electronic messaging system that transmits messages, computer programs, data dictionaries, and data between users and applications located at the same or at different facilities. Network MailMan disseminates information across any communications medium.

When MailMan is integrated into an application, it notifies individuals and groups about important events. From VA FileMan, a change in the value of a field can trigger a message called a bulletin. MailMan is easy for the user to learn and to use and provides extensive online help. There is also an extensive set of MailMan Application Program Interfaces (API) for the developer.

Features:
- Delivery options set by user (e.g., individuals, mail groups, devices; staggered delivery)
- Chained responses, managed automatically and available for review by all recipients
- Configurable interface
- Mail basket organization
- Mail filtering
- Search capabilities
- Reminders and notifications
- Secure messages
- Surrogate capability
- Software message processing
- Software code transport (Whole modules and patches for installation at remote sites are sent in Kernel Installation and Distribution [KIDS] PackMan messages.)
- Network transmissions over TCP/IP (Transmission Control Protocol/Internet Protocol) channels to any Simple Mail Transfer Protocol (SMTP)-compatible mail system
- Statistics Collection
- Domain Name Service (DNS) (creates automatic replication of IP address changes to every VistA MailMan system)
**Master Veteran Index (MVI)**

<table>
<thead>
<tr>
<th>Vista Module: Master Patient Index</th>
<th>Version: 2.0</th>
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</thead>
<tbody>
<tr>
<td>Namespace: MPIF</td>
<td></td>
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<tr>
<td>Most Recent Patch:</td>
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</table>

Brief Description: The Master Veteran Index (MVI) database (formerly known as the Master Patient Index [MPI]) is the primary vehicle for assigning and maintaining unique patient identifiers. A gateway in VistA establishes connectivity between VA Medical Center (VAMC) systems and patient registration processes and links to the MVI for message processing and patient identification. The MVI has been created to support maintenance of a unique patient identifier and a single master index of all Veterans Health Administration (VHA) patients and to allow messaging of patient information among the institutional partners [i.e., VHA, Veterans Benefits Administration (VBA), Board of Veterans Appeals (BVA), National Cemetery Service (NCS), and Department of Defense (DoD).] MVI creates an index that uniquely identifies each active patient treated by the Veterans Administration, identifies the sites where a patient is receiving care, and supports crucial sharing of Veteran patient information across sites.

**Business Function Framework Line(s) of Business:** Deliver Health Care, Manage Business Enabling Services

**Business Function Framework Function(s):** Manage Health Records, Utilize Information Technology Services, Provide Enterprise Reporting

**VHA Portfolio:** Common Services

**Business Owner: VHA**

**OIT Project Manager: OIT**

Full Description: The MVI maintains a central index to correctly identify each patient and track the sites of interest. MVI data is maintained in a centralized, dynamic database that is available to meet multiple information needs across many applications and systems. The MVI central database, located at VA Austin Information Technology Center, is composed of a unique list of patients and a current list of systems to which each patient entry is correlated. This enables the sharing of patient data between operationally diverse systems. Each record (or index entry) in the MVI contains a small amount of identity/demographic data used to identify individual entries. It is primarily used by VistA applications requiring the need to enumerate unique patients at their facilities.

The MVI assigns each patient (1) a unique patient identifier (Integration Control Number, or ICN) and (2) initially assigns the requesting site as the Coordinating Master Of Record (CMOR), which represents the system that is presently the authoritative source for the patient's identity data. Each index entry in the MVI also contains the patient's identifying information (e.g., name, SSN, date of birth, gender) and a current list of facilities where the patient has been seen. The MVI is updated as new patients are added or demographic information is updated at the correlated system. Once a CMOR has been assigned to a patient, the MVI will only accept changes and/or updates to patient identity information from the CMOR site. The CMOR can be changed at any time, when necessary, to reflect the authoritative source for this data.

The Master Veteran Index Patient Index/Patient Demographics (MVI/PD) was developed to initialize active patients to the Master Patient Index (MPI) and to establish the framework for the sharing of patient information between sites. (The original Master Patient Index VistA (MPI) and Patient Demographics (PD) software packages were distributed and installed together.) This software enables
sites to:

- Request an ICN assignment
- Query the MVI for known data
- Update the MVI when changes occur to demographic fields stored on the index itself or to other facilities and systems of interest.

- Obtain a Treating Facility List of sites where the patient is also known by this ICN (Each site becomes part of the network of sites that share key demographic data for patients via HL7 messaging.)
### Medical Domain Web Services (MDWS)

<table>
<thead>
<tr>
<th>Vista Module: Medical Domain Web Services (MDWS)</th>
<th>Version: 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
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<tr>
<td>Brief Description: Medical Domain Web Services (MDWS) (pronounced “meadows”) is a suite of Service Oriented Architecture (SOA) middle-tier web services that exposes medical domain functionality.</td>
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</tr>
<tr>
<td>Business Function Framework Line(s) of Business: Manage Business Enabling Services</td>
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<tr>
<td>Business Function Framework Function(s): Utilize Information Technology Services</td>
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<tr>
<td><strong>VHA Portfolio: Common Services</strong></td>
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<tr>
<td>Business Owner: OIA HI HI2</td>
<td>OIT Project Manager: OIT</td>
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</tbody>
</table>

**Full Description:** Medical Domain Web Services (MDWS) (pronounced “meadows”) is a suite of Service Oriented Architecture (SOA) middle-tier web services that exposes medical domain functionality, Medical Domain Objects (MDO). MDWS is equipped with the capacity to virtualize any legacy Veterans Health Information Systems and Technology Architecture (VistA) Remote Procedure Call (RPC) as a web service. A web service is an Application Programming Interface (API), which uses Simple Object Access Protocol (SOAP), the standardized protocol to communicate with subscribed client applications.
<table>
<thead>
<tr>
<th><strong>Medicine</strong></th>
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<tbody>
<tr>
<td><strong>Vista Module:</strong> Medicine</td>
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<tr>
<td><strong>Namespace:</strong> MC</td>
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<tr>
<td><strong>Brief Description:</strong> The Medicine module serves clinical services and maximizes the use of the data within VistA. VAMC database. The module allows entry, edit, and viewing of data for many medical tests and procedures.</td>
</tr>
<tr>
<td><strong>Business Function Framework Line(s) of Business:</strong> Deliver Healthcare</td>
</tr>
<tr>
<td><strong>Business Function Framework Function(s):</strong> Provide Nursing, Provide Medical Services, Manage Health Records</td>
</tr>
<tr>
<td><strong>VHA Portfolio:</strong> Health Provider Systems</td>
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<tr>
<td><strong>Business Owner:</strong> Clinical Services</td>
</tr>
<tr>
<td><strong>Full Description:</strong> The Summary of Patient Procedures allows the clinician to view a two-line summary of all medical procedures for each patient. These summaries are most often presented in descending order from most recent to oldest. Details of the procedures can be viewed by selecting the summary of interest. Medicine components include: Cardiology, Pulmonary, Gastrointestinal, Hematology, Pacemaker, Rheumatology, and Generalized Procedure.</td>
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</tbody>
</table>

**Features**

- Provides a Summary of Patient Procedures for all procedures performed on a particular patient with simple drill downs for further information. Reports for all procedures are menu options.
- Provides both scroll mode and screen entry features for all components and provides word processing-based consult software for all procedures.
- Features an extensive screen entry system for Cardiac Catheterization Lab, Holter, Electrophysiology, Exercise Tolerance Test, Echo, and Electrocardiogram. Standards-based electronic transfer of ECG and Holter data to VistA is available.
- Allows the entry and edit of Esophageal Gastroduodenoscopy (EGD), Endoscopic Retrograde Cholangiogram and Pancreatogram (ERCP), Colonoscopy, and Laparoscopy findings or data.
- Allows the entry, edit, and printing of endoscopic data and Pulmonary Function test data.
- Contains a diagnosis filter that allows the separation of primary and secondary diagnoses, a consult component, and an automatically-generated recall list within both the Gastrointestinal and Pulmonary components.
- Allows data entry and edit for Generator and Lead implants, and follow-up surveillance within the
Pacemaker component. The software also permits the direct electronic transfer of a report to the National Pacemaker Centers using VA network mail.

- Permits data entry and edit of Bone Marrow Aspirates (BMA) and Bone Marrow Biopsies (BMB).
- Allows the tracking of Rheumatology visits and is based on standards developed by the American Rheumatology Associations Medical Information System (ARAMIS).
**Mental Health**

<table>
<thead>
<tr>
<th>Vista Module: Mental Health</th>
<th>Version: 5.01</th>
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<tbody>
<tr>
<td>Namespace: YS</td>
<td>Most Recent Patch:</td>
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</table>

**Brief Description:** The Mental Health module provides computer support for both clinical and administrative patient care activities associated with mental health care.

**Business Function Framework Line(s) of Business:** Deliver Healthcare, Manage Business Enabling Services

**Business Function Framework Function(s):** Provide Clinical Decision Support, Provide Medical Services, Manage Health Records, Utilize Information Technology Services

**VHA Portfolio: Health Provider Systems**

<table>
<thead>
<tr>
<th>Business Owner: Mental Health</th>
<th>OIT Project Manager: OIT/PD/PSS/HPS</th>
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</table>

**Full Description:** Psychiatrists and psychologists have directed this VistA module’s design with active input from all health care disciplines, guided by the principle of creating software that makes the clinician’s job easier and leads to better patient care. A by-product of this approach has been the creation of a clinical database, which is useful to mental health program managers in many ways, including evaluating clinical productivity, monitoring and improving the quality of care, and trending various patient care events. This clinical database package is comprehensive and accessible from workstations throughout medical facilities.

**Features**

- Provides a mini clinical record that includes:
  - A patient profile with demographic information and a brief index of the clinical database, including physical examinations, psychological tests, and clinical interviews, problem list, and diagnoses.
  - Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) and International Classification of Diseases (ICD-9) diagnoses. Psychological test and interview results, reviews of systems, past medical histories, crisis notes, clinical patient messages, and progress notes.
  - A Global Assessment of Functioning (GAF) Case Finder Report, which lists all patients that have not been given a GAF score within the last 90 days.
  - The ability for patients to undergo psychological tests and clinical interviews at a workstation, saving considerable clinician time. Psychological tests are automatically scored for retrieval, with access governed by the guidelines of the American Psychological Association.
VistA Mental Health (MH) Addiction Severity Index Multimedia Version (ASI-MV):
- Provides functionality required to run associated commercial-off-the-shelf (COTS) software.
- Allows clinicians and patients to enter demographics and self-administered interviews via a workstation using video and audio technology.
- Provides the patients with privacy and appropriate time to complete an interview.

VistA Mental Health Assistant (MHA) Graphical User Interface (GUI):
- Provides a crash recovery file.
- Displays patient demographics data, which can be printed, copied to the Windows clipboard, or saved to a text file.
- Context-sensitive help is available for most items, with suggestions for test administration and interpretations.
- Provides a user-friendly interface for entering interview data.
  - Enhances the ability of both staff and patients to enter psychological test data.
  - Creates reports and graphical displays of complex tests by sub-category or scales.
  - Creates psychological test order windows that display tests that can be ordered based on the provider privileges.
  - Provides a text report of selected tests and graphs of numeric scores.
## Messaging and Interface Services Program

<table>
<thead>
<tr>
<th>Vista Module: Messaging and Interface Services Program (M&amp;IS)</th>
<th>Version:</th>
</tr>
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<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
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<tr>
<td>Brief Description: The Common Services Messaging and Interface Services (M&amp;IS) Program focuses on providing a one-stop message service shop by allowing an application or service to communicate with another application or service through a common interface</td>
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<tr>
<td>Business Function Framework Line(s) of Business: Manage Business Enabling Services</td>
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<tr>
<td>Business Function Framework Function(s): Utilize Information Technology Services</td>
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<tr>
<td>VHA Portfolio: Common Services</td>
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<tr>
<td>Business Owner: VHA &amp; OIT</td>
<td>OIT Project Manager: OIT</td>
</tr>
<tr>
<td>Full Description: M&amp;IS Program addresses problems associated with moving data between Veterans Affairs (VA) and commercial applications. It supports the VA’s goal of creating portable, electronic health records and concurrently promotes patient safety (e.g., via Providing first-in, first-out message delivery which ensures that pharmacy orders are delivered in the sequence they are received.)</td>
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Methicillin Resistant Staphylococcus Aureus Program Tools (MRSA-PT)

<table>
<thead>
<tr>
<th>Vista Module: Methicillin Resistant Staphylococcus Aureus Program Tools (MRSA-PT)</th>
<th>Version: 1.0</th>
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</thead>
<tbody>
<tr>
<td>Namespace: MMRS</td>
<td>Most Recent Patch:</td>
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</table>

Brief Description: The MRSA Program Tools (MRSA-PT) application provides a method to extract data related to MRSA Nares screening, clinical cultures, and patient movements within the selected facility.

**Business Function Framework Line(s) of Business:** Provide Health Care Administration, Deliver Health Care, Manage Business Enabling Services

**Business Function Framework Function(s):** Perform Hospital Administration, Provide Ancillary Services, Manage Health Records, Utilize Information Technology Services

**VHA Portfolio:** Health Provider Systems

| Business Owner: VHA Office of Primary Care Operations | OIT Project Manager: OIT/PD/PSS/HPS |

Full Description: MRSA-PT contains reports that will extract and consolidate required data for entry into the Inpatient Evaluation Center (IPEC). Reports can also be generated to display real-time patient specific information, and can be used to identify patients that have a selected multi-drug resistant organism (MDRO) and to identify patients who did or did not receive a MRSA Nares screen upon admission to the unit. Supporting the VHA MRSA Prevention Initiative directives, this module, once configured at the local VAMC level provides the following reports which can be used to monitor MRSA:

**MRSA IPEC Report:** This option allows the user to print the MRSA IPEC Report. The report can be run for all the locations in a Division or a specific location. The report can be run for either Admission (prevalence measures) or Discharge/Transmission (transmission measures).

**Isolation Report (Census List and MDRO History):** This option allows the user to print the Isolation Report for each unit. The Isolation Report includes MDROs selected in the initial setup and the historical time frame to search for the last positive result. If sites utilize Isolation Orders, these will also print on the report.

**Nares Screen Compliance List:** This option allows the user to print a report to capture real-time patient information on a unit at a specified time to determine if a Nares screen was obtained upon admission to the unit. This report allows the unit to determine patients that received (or did not receive) a Nares screen upon admission.
**Mobile Electronic Documentation (MED)**

<table>
<thead>
<tr>
<th>Vista Module: Mobile Electronic Documentation</th>
<th>Version: 2.3</th>
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<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
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<tr>
<td>Brief Description: Allows staff to access a patient's previously downloaded electronic medical record information when not connected to the VA network.</td>
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<tr>
<td>Business Function Framework Line(s) of Business: Deliver Healthcare, Manage Business Enabling Services</td>
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<tr>
<td>Business Function Framework Function(s): Manage Health Records, Utilize Information Technology Services</td>
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<tr>
<td>VHA Portfolio: Health Provider Systems</td>
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<tr>
<td>Business Owner: Office of Geriatrics and Extended Care (GEC)</td>
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<tr>
<td>OIT Project Manager: OIT/PD/PSS/HPS</td>
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</table>

**Full Description:** Mobile Electronic Documentation (MED) 2.3 is a Veterans Health Information Systems and Technology Architecture (VistA) software application. It enables Department of Veterans Affairs (VA) staff to access a patient's previously downloaded electronic medical record information when not connected to the VA network. MED is designed to work in tandem with the Computerized Patient Record System (CPRS) as temporary storage of patient notes. This includes the ability to enter notes using CPRS exported Templates (.txml). MED promotes user satisfaction and efficiency in the login and documentation process by allowing access to CPRS at the point of care (POC) and avoiding the duplicate process of charting handwritten notes at the end of the day.
## M-to-M Broker

<table>
<thead>
<tr>
<th>Vista Module: M-to-M Broker</th>
<th>Version:</th>
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<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
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</table>

**Brief Description:** This software broker allows M (also known as “MUMPS”) computer program instances on different servers to communicate with each other to transfer data and business rules.

**Business Function Framework Line(s) of Business:** Manage Business Enabling Services

**Business Function Framework Function(s):** Utilize Information Technology Services

<table>
<thead>
<tr>
<th><strong>VHA Portfolio:</strong> Common Services</th>
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<tbody>
<tr>
<td><strong>Business Owner:</strong> VHA &amp; OIT Health Systems</td>
</tr>
<tr>
<td><strong>Design &amp; Development (HSD&amp;D), Infrastructure &amp; Security Services (ISS)</strong></td>
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<tr>
<td><strong>OIT Project Manager:</strong> OIT</td>
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</table>

**Full Description:** The VistA M-to-M Broker is a new implementation aspect of the RPC (Remote Procedure Call) Broker offering Client/Server functionality resident solely within a VistA non-Graphical User Interface (non-GUI) environment. It enables the exchange of VistA M-based data and business rules between two VistA M servers, where both servers reside on local and/or remote VistA systems:

- The requesting server functions in the capacity of a Client.
- The server receiving that request functions in the capacity of a Server.

The Client/Server roles of each server can vary depending on what point in time each VistA M server is making the request for data from its counterpart VistA M server.
# My HealtheVet

**Vista Module:** My HealtheVet  
**Version:** 1.0

**Namespace:** MHV  
**Most Recent Patch:**

**Brief Description:** My HealtheVet (MHV) is a web-based application that creates an online environment where veterans, family, and clinicians may come together to optimize veterans’ health care. Web technology combines essential health record information enhanced by online health resources to enable and encourage patient/clinician collaboration.

<table>
<thead>
<tr>
<th>Business Function Framework Line(s) of Business:</th>
<th>Provide Access to Health Care, Deliver Health Care, Manage Business Enabling Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business Function Framework Function(s):</td>
<td>Provide Member Access, Provide Communication and Outreach, Provide Access to Self-Services, Provide Patient Self-Management Services, Provide Care Management, Provide Medical Services, Provide Ancillary Services, Manage Health Records</td>
</tr>
</tbody>
</table>

**VHA Portfolio:** Health Provider Systems

**Business Owner:** VHA HI MHV  
**OIT Project Manager:** OIT

**Full Description:** The implications of My HealtheVet are far-reaching. Clinicians are able to communicate and collaborate with Veterans much more easily. The online environment maps closely to existing clinical business practices, while extending the way care is delivered and managed. As Veterans build up their lifelong health records, they are able to choose to share all or part of the information in their account with all their health care providers, inside and outside the VA. This has the potential to dramatically improve the quality of care available to our nation's Veterans. The My HealtheVet system consists of a national system housed at the Austin Information Technology Center (AITC), and the My HealtheVet Veteran Information System Technology Architecture (Vista) package.

**Features:**

The My HealtheVet web site ([https://www.myhealth.va.gov/index.html](https://www.myhealth.va.gov/index.html)) allows users to:
- request and receive prescription refills of medication that has been provided by the VA
- provide a history of prescription medication for the user
- provide current refill requests and their status
- prepare and revise a personal health record consisting of many aspects related to their care with both current and historical information
- increase their knowledge about health conditions
- better record their health status
- communicate with their care providers
- become better-informed participants and in improving their health
- use BLUE BUTTON to view, print, download and store information from their personal health record (PHR). Veterans who receive care from VA can set their user preferences so that some VA and/or DoD records feed into their VA Blue Button copy of their PHR, such as their military service information. The downloadable PHR via Blue Button can provide numerous data points and users who elect to upgrade to a Premium account receive full access to My HealtheVet features including Secure Messaging with their VA health care team, and Lab Results, Immunizations, VA Problem List and VA Notes among others.
# National Patch Module (NPM)

**Vista Module: National Patch Module (NPM)**

<table>
<thead>
<tr>
<th>Version: 3.0</th>
</tr>
</thead>
</table>

**Namespace:**

Most Recent Patch:

**Brief Description:** The National Patch Module Guide describes the purpose, roles, responsibilities, and steps for the initiation, development, and entry of patches to VHA Information Systems and Technology Architecture (VistA) products via the National Patch Module (NPM).

**Business Function Framework Line(s) of Business:** Manage Business Enabling Services

**Business Function Framework Function(s):** Utilize Information Technology Services

**VHA Portfolio: Common Services**

Business Owner: VHA Release Board and OIT  
OIT Project Manager: OIT

**Full Description:** The National Patch Module (NPM) is a software package that provides a database for the distribution of software patches and updates for the Department of Veterans Affairs' VistA system. Options are provided for systematic entry and review of patches by developers, review and release of patches by verifiers, and display and distribution of the released verified patches to the users. Once a necessary patch solution is identified, a developer enters a patch in the NPM identified by package namespace, version, and a patch number. At this point, the patch entry has a status of "under development" and is accessible only by other developers of the package. When the patch is completed and ready for review, a second developer changes the status to "completed/unverified" and the patch becomes available for review by designated verifiers of the package and processing through the appropriate Release Board process.
# National Provider Identifier (NPI)

<table>
<thead>
<tr>
<th>Vista Module: National Provider Identifier (NPI)</th>
<th>Version:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
</tr>
<tr>
<td><strong>Brief Description:</strong> The National Provider Identifier (NPI) project began in 2006 to develop software to support NPI enumeration and taxonomy codes within the Veterans Health Administration (VHA). The work supported Public Law 104-191, the Health Insurance Portability and Accountability Act (HIPAA) of 1996.</td>
<td></td>
</tr>
</tbody>
</table>

| **Business Function Framework Line(s) of Business:** |
| **Business Function Framework Function(s):** |
| **VHA Portfolio: Common Services** |
| **Business Owner:** VHA CBO | **OIT Project Manager:** OIT |

| **Full Description:** Maintained by Centers for Medicare and Medicaid Services (CMS), NPI serves as the standard unique health identifier for health care providers. A ten-position, numeric identifier used to universally identify trained, licensed individual and organizational providers of health care services and supplies, NPIs must be obtained by health care providers who are covered entities. Taxonomy codes are national specialty codes used by providers to indicate their specialty at the claim level. |

The HIPAA NPI Final Rule requires that covered entities (i.e. health plans, health care clearinghouses, and those health care providers who transmit any health information in electronic form in connection with a transaction for which the Secretary of the Department of Health and Human Services [HHS] has adopted a standard) use NPIs in standard transactions by the compliance date of May 23, 2007 for large payers, and May 23, 2008 for small payers. |

<table>
<thead>
<tr>
<th><strong>Features</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ <strong>Fee Basis</strong></td>
</tr>
<tr>
<td>o The addition of a Referring provider prompt to the user entry and edit of fee authorizations</td>
</tr>
<tr>
<td>o Allow display and printing of the Referring provider name on VA 10-7078 and 10-7079 Authorization Forms and the Referring provider NPI on the same forms, given the provider’s permission to disclose it to non-VA entities for business reasons.</td>
</tr>
</tbody>
</table>

☐ **Integrated Billing** |
| o Authorization checks, as of May 23, 2008, will not flag an error on a claim, preventing it from being submitted, due to a missing taxonomy code associated with Attending, |
Rendering, and Referring providers on the claim.

- Allow a given provider’s NPI to be active in both the NEW PERSON file (#200) and the IB NON/OTHER VA BILLING PROVIDER file (#355.93) at the same time (from Integrated Billing’s Provider ID Maintenance option).

Accounts Receivable

- Modifications to the 835 message from Austin to VistA. This includes the addition of rendering/servicing provider’s name and NPI, and the billing provider’s NPI to the Account Receivables’ Electronic Explanation of Benefits (EEOB) Work list.

Kernel

- Allow a given provider’s NPI to be active in both the NEW PERSON file (#200) and the IB NON/OTHER VA BILLING PROVIDER file (#355.93) at the same time (from Kernel’s Add/Edit NPI Values for Providers option).
- Implement a flag to capture a provider’s permission to share his or her NPI with non-VA entities for business purposes other than those covered in currently established Routine Use provisions.
- Improvements to the reports generated by the List of NPI data for CBO option and the Print Local NPI Reports option.
- As of December 15, 2010 The Chief Business Office schedules an NPI Crosswalk Extract report periodically (typically once a month) from all Veteran's Administration provider sites. The scheduling of this report is done via the VA NPI Crosswalk Extract Administration web site using HL7 messages. The NPI Crosswalk Extract process is automated and runs in the background at each site.
National Utilization Management Integration (NUMI)

Vista Module: National Utilization Management Integration (NUMI)  Version: 1.0

Namespace:  Most Recent Patch:

Brief Description: The National Utilization Management Integration (NUMI) application is a web-based application that automates documentation of clinical features relevant to each patient’s condition and the associated clinical services provided as part of VHA’s medical benefits package. NUMI is an integration of a commercial-off-the-shelf (COTS) software application with existing legacy VistA.

Business Function Framework Line(s) of Business: Provide Health Care Administration, Manage Business Enabling Services

Business Function Framework Function(s): Monitor Clinical Performance, Provide Financial Management, Provide Enterprise Reporting

VHA Portfolio: Health Provider Systems

Business Owner: Office of Quality and Performance  OIT Project Manager: OIT/PD/PSS/HPS

Full Description: NUMI provides electronic access to evidence-based criteria that assists hospital staff in the management of inpatient admissions. The NUMI application retrieves data directly from VistA, eliminating redundancy and errors from re-entering patient records and information. NUMI was established to meet a specific business need of the Office of Quality and Performance (OQP) to provide automation support to field Utilization Management nurses that perform reviews of clinical care activities. These utilization reviews are considered core procedures to support both quality improvement and business/compliance functions central to VA’s mission. Utilization Management and Utilization Review staff review multiple significant events in a patient’s care (admission, transfer, discharge, major procedures), assessing such patient management decisions against established clinical guidelines.

The NUMI application provides the capability for local, regional and national documenting of the following utilization review activities:

- Place patient in the most appropriate level of care
- Identify and improve system barriers to providing the right care at the right time, and at the right cost
- Automate the retrieval of patient information for the UM review process
- Modify the initial acceptance criteria
- Create a log file with information about events in a patient record
- Display a list of patient record with filters and search features for each review
- Provide reasons for meeting or not meeting (UM) criteria
- Enter information (“reminders”) about actions to be performed in the future
- Provide the acceptable reports to comply with VSSC reporting requirements
- Maintain the data such as Facility, Provider Outcomes, and Reason codes.

The National Utilization Management Integration (NUMI) is deployed at the Enterprise Infrastructure Engineering (EIE) Health Solutions Center.
Network Health Exchange (NHE)

Vista Module: Network Health Exchange (NHE) | Version: 5.1
---|---
Namespace: AFJX | Most Recent Patch:
Brief Description: Network Health Exchange (NHE) is a Veterans Health Information Systems and Technology Architecture (VistA) module that provides clinicians quick and easy access to patients’ information from any VA medical facility where a patient has received care.

Business Function Framework Line(s) of Business: Deliver Health Care
Business Function Framework Function(s): Provide Clinical Decision Support, Manage Health Records

VHA Portfolio: Common Services

Business Owner: | OIT Project Manager:

Full Description: The NHE package accesses information concerning clinic visits, diagnoses, prescriptions, laboratory tests, radiology exams, and hospital admissions. It enables clinicians to request medical or pharmacy records for a patient from a single site or several sites. NHE obtains Health Summary information through an interface with the Health Summary VistA module.

NHE uses predefined formats, thus requiring less input by the user and resulting in simpler, faster access to patient data. Patient data is displayed in a format similar to that of Health Summary and can be viewed on-screen or printed.

**Features**

- **Simple User Interface**—Users simply select the data type (Clinical or only Pharmacy data) and the amount of patient data they would like returned (all data or 12 months only), and then enter the patient’s name or Social Security Number in order to initiate the request for data from another VA facility.

- **Retrieval and Printing of Patient Data**—Retrieved patient data (Clinical Record or Pharmacy information, either a comprehensive history or activity only within the last 12 months) can be printed or viewed on-screen.

- **Quick Response**—NHE is fully automated and user requests are generally fulfilled in a matter of minutes.

- **Data Returned in Health Summary Format**—Patient data is returned in an NHE mail message, formatted similarly to the Health Summary, beginning with patient demographics, followed by
categorized medical information, and indicating the name of the VA facility where the data resides.

- User Notification with Alerts—The user requesting patient data via NHE is notified of data receipt through an alert that appears within the menu system.
- Purging Retrieved Patient Data—In order to allow sites to control disk space usage, NHE provides an option to purge the retrieved patient data messages nightly.
- Special Security Features—This system is intended for use by health professionals who have direct patient care responsibilities and have need for clinical information. NHE generates a bulletin if data is requested from a sensitive patient record. The bulletin is directed to the same user group that currently reviews notices about access to sensitive patient records.
- Package Management—The availability of NHE options is based on the level of menu access granted to each user.
Nursing

Vista Module: Nursing  Version: 4.0

Namespace: NUR  Most Recent Patch: 

Brief Description: The Nursing application is a component of the Department of Veterans Affairs VistA program. It is comprised of multiple modules (i.e., Administration, Education, Clinical, Quality Assurance, and Package Management).

Business Function Framework Line(s) of Business: Provide Health Care Administration, Deliver Health Care, Manage Business Enabling Services

Business Function Framework Function(s): Perform Hospital Administration, Maintain Care Practitioners and Providers Information, Monitor Clinical Performance, Provide Patient and Family Care Education, Provide Clinical Decision Support, Provide Care Management, Manage Human Resources

VHA Portfolio: Health Provider Systems

Business Owner: ONS (Office of Nursing Service)  OIT Project Manager: OIT/PD/PSS/HPS

Full Description: Nursing is comprised of multiple modules (Administration, Clinical, Education, Performance Improvement, and Research). Administration covers personnel management information, resource management/analysis tracking, and mandatory reports. Clinical covers patient classification, patient assessment, nursing care plans, and patient care assignments, clinical protocols/guidelines for care, patient education material, and discharge planning. Education covers education reports, and student affiliation information. Performance Improvement covers QA problem tracking system, infection control trends, patient incident analysis, employee accident analysis, continuous care monitors (clinical data), and administrative monitors. Research covers resource listing of VA nurse researchers.

Features

- Administration:
  - Tracks staff information.
  - Generates management reports on employees.
  - Accumulates daily statistics on the number of patients treated.
  - Generates daily, monthly, quarterly, and yearly AMIS Reports.
  - Provides workload statistics based on AMIS data.
  - Provides miscellaneous patient acuity reports.

- Clinical:
  - Contains a patient classification system that generates reports by bed section and ward.
  - Includes nationally developed standard nursing care plans for initiating patient care plan generation.
  - Allows nurses to generate a patient care plan based on patient problems, identified goals, and specified nursing interventions.
  - Allows a staff nurse to update a patient's nursing ward location and/or nursing AMIS bed section to insure accurate patient classification entries.
  - Allows users to enter vital signs, height, and weight for patients.
  - Allows users to generate Intake and Output reports, an End of Shift Report, and a
Health Summary Report by patient or ward.

- **Package Management:**
  - Allows sites to modify data in specified nursing files.
  - Provides special ADP Coordinator functions for executing nursing options that affect patient acuity, man-hours, FTEE status, etc.
  - Provides ADP Coordinator options for admitting/transferring/discharging patients within the Nursing system when the MAS System is off-line.
# Nutrition and Food Service (N&FS)

<table>
<thead>
<tr>
<th>Vista Module: Nutrition and Food Service (N&amp;FS)</th>
<th>Version: 5.5</th>
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</thead>
<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
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</table>

Brief Description: The Nutrition and Food Service (N&FS) software integrates the automation of many Clinical Nutrition, Food Management, and Management Reports functions. The Clinical N&FS activities of Nutrition Screening, Nutrition Assessment, Diet Order Entry, Tube Feeding and Supplemental Feeding Orders, Patient Food Preferences, Specific Diet Pattern Calculations, Nutrient Analysis of meals, Consult Reporting, Encounter Tracking, and Quality Care Monitoring are all available in this program.

Business Function Framework Line(s) of Business: Provide Health Care Administration, Deliver Health Care

Business Function Framework Function(s): Manage Health Care Costs and Administrative Efficiency, Provide Clinical Decision Support, Provide Medical Services, Provide Ancillary Services, Manage Health Records

VHA Portfolio: Health Provider Systems

Business Owner: Nutrition and Food Service

OIT Project Manager: OIT/PD/PSS/HPS

Full Description: The Food Management function has complete automation of food production activities; Service and Distribution, Inventory and Cost Management, Recipe Expansion, Menu and Recipe Nutrient Analysis, Meal and Diet Pattern Development and Implementation, Diet Card and Tray Ticket Printing, and Quality Service Tracking are available. The Management Reports include the Served Meals, Additional Meals, Cost per Meal, Tube Feeding Cost, Supplemental Feeding Cost, Staffing Data, Encounter Data, and Annual Management Reports.

## Features

- Allows the building of a site-specific listing of patient food preferences that can be incorporated in meal production calculations and the printed diet card and tray tickets programs.
- Manages patients' requests or dietary requirements for specific food items or utensils, allowing the selection of standing orders for any patient, for any meal or quantity.
- Controls all aspects of ingredient usage.
- Develops a list of site-specific recipes that includes portion size, preparation area and time,
equipment and serving utensils, recipe category, ingredients, and directions for preparation. Recipes can be quickly analyzed for their nutrient value.

- Creates multiple meals and menu cycles. Meals can be used in different patterns by creating menu cycles or by creating special holiday dates within a cycle. It allows for the nutrient analysis of meals or daily/weekly menus.

- Controls quantities produced in the Food Management program. Specific patient diet orders are reorganized into production diets and diet patterns that reflect the foods to be served. This information is used along with data from the meal file to generate production reports, diet cards and/or tray tickets. A forecasting tool also exists in the section that allows the manager to anticipate, by percentage of total census, the type and quantity of various production diets that will be needed by any selected service point.

- Allows the entry of information required by the Annual Report that is not automatically retrieved from the program.

- Prints a patient-specific record of all diet order entry information.

- Controls the order entry activity.

- Manages food items and their nutrients using the latest USDA data, food items from sources such as Bowes and Church, and additional data from research.

- Handles N&FS consults and allows the reassignment of active consults from one staff member to another.

- Manages the supplemental feeding food items and menus. A supplemental feeding menu automatically goes into effect at the time of diet order entry and changes automatically with new orders.
## Occupational Health Recordkeeping System (OHRS)

<table>
<thead>
<tr>
<th>Vista Module: Occupational Health Recordkeeping System (OHRS)</th>
<th>Version: 1.0</th>
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</table>

### Brief Description:
VA built the web-based Occupational Health Recordkeeping System (OHRS) to electronically document, track and report health information on VA employees, volunteers and others who work in VA facilities, and to document care provided to other Federal agency employees.

### Business Function Framework Line(s) of Business:

### Business Function Framework Function(s):

<table>
<thead>
<tr>
<th>VHA Portfolio: Health Provider Systems</th>
<th>OIT Project Manager: OIT</th>
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</table>

### Full Description:
OHRS enables occupational health staff to create, maintain, and monitor medical records for VA employees and generate national, VISN, and site-specific reports.

VA clinical staff involved in administering seasonal and H1N1 flu vaccine to VA staff and other Federal agency employees must use OHRS to:
- Document vaccination administration
- Track persons who need vaccinations
- Report on vaccination and immunity status.

VA staff can access OHRS through the VA Clinical Information Support System portal.

OHRS is locally hosted within the Clinical Information Support System (CISS) application. Hence, it is hosted nationally at Falling Waters, WV (primary) and Hines, IL (standby).

Ongoing OHRS work covers requirements, deployment, architecting, data portioning, technology selection, and authorization groups.
## Occurrence Screen

**Vista Module: Occurrence Screen**  
**Version: 3.0**

<table>
<thead>
<tr>
<th>Namespace: QAO</th>
<th>Most Recent Patch:</th>
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</table>

**Brief Description:** The Occurrence Screen module supports VHA policy by providing for the identification of events requiring follow-up review. It generates worksheets used by clinical, peer, management, and committee-level reviewers and identifies practitioner, systems, and equipment-related problems and results. The program enables medical facilities to define site-specific screens and to track events associated with them.

**Business Function Framework Line(s) of Business:** Provide Health Care Administration

**Business Function Framework Function(s):** Perform Hospital Administration

**VHA Portfolio:** Business Informatics

**Business Owner:** Office of Patient Care Services  
**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** The Occurrence Screen package is a component of the Quality/Risk Management subsystem within the Veterans Health Information Systems and Technology Architecture (VistA) system. It is designed to be used as a tool to accomplish the following:

- Automate the gathering of Occurrence Screen data. This is accomplished by a daily running of the automatic enrollment routine, which captures screens 101.1, 102, and 107 (when site is using the VistA Surgery package). There is a provision for the manual entry of screens if they cannot be or were not auto enrolled from data currently available in the VistA system.
- Provide for the inclusion of hospital-specific screens within the program. These screens must be entered manually. It also allows continued tracking of the screens that are no longer required.
- Automate the creation of clinical, peer, management, and committee worksheets. The findings and/or actions of the previous review levels can be printed.
- Facilitate the tracking of occurrences by means of various tracking reports. An ad hoc report feature is included for use in trend analysis.
- Produce the Semi-Annual Summary of Occurrence Screening.

The Occurrence Screen software gathers and manipulates data for the following Occurrence Screens.

- **Readmission within 10 days**  
  (Screen 101.1)  
  - Justified exceptions excluded by the software.
    - Scheduled readmission
    - Prior discharge AMA (against medical advice) or Irregular
    - Readmission to CLC, Intermediate Medicine, or Domiciliary
  - Justified exceptions that cannot be excluded by the software.
    - Readmission for alcohol or drug abuse, chemotherapy, or radiation therapy
    - Condition precipitating readmission didn't exist at time of prior admission
  - Admission within 3 days following unscheduled Ambulatory Care visit  
    (Screen 102)
- Justified exceptions excluded by the software.
  - Scheduled admission
  - Admission same day as visit
  - Admission to Psychiatry Service, CLC, Intermediate Medicine, or Domiciliary
- Return to OR in same admission (Screen 107)
  - Justified exceptions excluded by the software.
    - Two operations separated by more than 7 days
    - Second procedure unrelated to first
    - Planned multiple stage procedure documented prior to first surgery (when the case is scheduled prior to the first surgery being done)
- Justified exceptions that cannot be excluded by the software.
  - Planned multiple stage procedure documented prior to first surgery (when the case is not scheduled prior to the first surgery being done)
  - Second operation in response to findings from first procedure

Provisions are made within the package for the addition of other hospital-specific screens. National screens that were discontinued through policy changes are listed in the package as "Inactive" but may be made "Local" to reactivate them.
## Oncology

<table>
<thead>
<tr>
<th>Vista Module: Oncology</th>
<th>Version: 2.1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: ONC</td>
<td>Most Recent Patch</td>
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</tbody>
</table>

**Brief Description:** The Oncology module automates the tumor registry and supports tumor registrars in abstracting cancer cases, following up on cancer patients and producing the Hospital Annual Report. Functions are grouped according to order of use: Case Finding and Suspense; Abstracting, Printing and Quality Management; Follow-up; Registry Lists; Annual Reports; Statistical Reports; and Utilities.

**Business Function Framework Line(s) of Business:** Manage Public Health, Manage Business Enabling Services

**Business Function Framework Function(s):** Conduct Epidemiological Assessments, Provide Medical Registry Service, Utilize Information Technology Services

**VHA Portfolio: Health Provider Systems**

**Business Owner:** Office of Patient Care Services  
**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** The Oncology application functions in accordance with the current editions of American College of Surgeons (ACOS) guidance. It contains required data standards and data sets necessary to bring the tumor registry module into compliance with the Facility Oncology Registry Data Standards (FORDS) 2003 specifications approved by the Commission on Cancer (COC); Surveillance, Epidemiology, and End Results Reporting (SEER) Extent of Disease for site-specific surgery; International Classification of Disease—Oncology 3rd Edition; and American Joint Commission on Cancer (AJCC) Manual for the Staging of Cancer, 1st through 6th Editions.

**Features:**
- The software supports multi-divisional sites.
- The program automatically finds cases by searching the database from Anatomical Pathology (Surgery, Cytology, Electron Microscopy, and Autopsy), Radiology, and Patient Treatment File (PTF)). Cases can be entered into the Suspense File by date of diagnosis, and chart request pull lists can be printed.
- Demographics are drawn directly from Patient Information Management System (PIMS) patient file and stored permanently. Cancer identification data is obtained from the local database (e.g., laboratory and radiology test results).
- The program accessions and abstracts with extensive on-line help and stages the extent of disease automatically.
- It produces a wide range of follow-up lists and registry lists needed for accreditation and allows entry of contacts directly into Oncology Contact File.
- Professional letters covering diverse situations and customization of letters are available.
- Predefined annual reports can be generated and the user can create specialized reports using VA FileMan.
- Reports to the ACOS can be generated using special routines that extract data onto floppy disk. The same functionality is available for state reporting.
- The database can be customized to suit the individual hospital.
- The full set of TNM codes is included from the appropriate edition of the AJCC Manual on
Staging of Cancer.

- The program allows on-line completion of Patient Care Evaluations (PCEs) during the abstracting function if the case being abstracted fulfills the selection criteria for the PCE.
Patient Advocate Tracking System

Vista Module: Patient Advocate Tracking System (PATS)

Version: 1.0

Namespace: Most Recent Patch:

Brief Description: The Patient Advocate Tracking System (PATS) is a web-based application with a centralized database and notification function (email) for tracking patient-related issues and is designed to work on various operating systems.

Business Function Framework Line of Business: Provide Access to Health Care, Provide Health Care Administration, Manage Business Enabling Services

Business Function Framework Function(s): Provide Communications and Outreach, Manage Customer Relations, Utilize Information Technology Services

VHA Portfolio: Business Informatics

Business Owner: VA Office of Patient Centered Care and Cultural Transformation (OPCC&CT)

OIT Project Manager: OIT/PD/PSS/HPS

Full Description: The PATS software tracks and trends compliments and complaints and measures the facility’s types of complaints as they relate to the Customer Services Standards and the National Patient Satisfaction Survey. This package supports the Patient Advocate with the collection and categorization of complaints and compliments that give the medical center an opportunity to meet and exceed the customer’s expectations. The issue codes provide the opportunity to track types of complaints and provide trends of specific complaints. Included within the issue codes are the Customer Service Standards. A recent reliability study of the codes has revealed an exceptionally high reliability in the selection of appropriate codes. To help with improving perceptions, the tracking program can also extract data specific for women veterans by eras of service (i.e., Gulf War, Vietnam) as well as clinic, product line, or services.

PATTS enables users to perform the following tasks:
• Add a Report of Contact (ROC) which details a Veteran’s issue (compliment or complaint).
• Edit, close, reopen, and delete an ROC.
• Send Informational Notifications to communicate an issue to an employee involved in a Report of Contact and/or the employee’s supervisor.
• Send Action Request Notifications, which require a response from the individual regarding action to be taken or next steps.
• Generate site-specific and National reports.
• Create ad hoc reports.
- Display reports online and save them in a variety of formats (i.e., Word, Excel, PDF files).

PATS automatically rolls up data to the VISN Support Service Center (VSSC) to provide additional National reports. The PATS system is deployed at the Enterprise Infrastructure Engineering (EIE) Health Solutions Center.
# Patient Assessment Documentation Package (PADP)

<table>
<thead>
<tr>
<th>Vista Module: Patient Assessment Documentation Package (PADP)</th>
<th>Version: 1.0</th>
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</thead>
<tbody>
<tr>
<td>Namespace: NUPA</td>
<td>Most Recent Patch:</td>
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</table>

**Brief Description:** The Patient Assessment Documentation Package (PADP) application enables Registered Nurses (RNs) to document, in a standardized format, patient care during an inpatient stay.

**Business Function Framework Line(s) of Business:** Manage Business Enabling Services

**Business Function Framework Function(s):** Manage Clinical Documents

**VHA Portfolio: Common Services**

| Business Owner: Office of Nursing Services | OIT Project Manager: OIT/PD/PSS/HPS |

**Full Description:** The Patient Assessment Documentation Package (PADP) is a Veterans Health Information Systems and Technology Architecture (VistA) software application that enables Registered Nurses (RNs) to document, in a standardized format, patient care during an inpatient stay. Although the content is standardized for use across the VA system, some parameters can be set to support the unique processes at individual medical centers.

PADP interfaces directly with several VistA applications, including Computerized Patient Record System (CPRS), Clinical Reminders, Consult Tracking, Allergy/Adverse Reaction Tracking, Mental Health, Vitals, and Patient Care Encounter (PCE).

**Features:**
- Admission – RN Assessment allows RNs to document the status of the patient at admission.
  - Associated with the note: RN Admission Assessment
- Admission – Nursing Data Collection allows Licensed Practical Nurses (LPNs) and other nursing staff, including the RN, to enter basic patient data, such as vitals and belongings at the time of admission.
  - Associated with the note: Nursing Admission Data Collection
- RN Reassessment allows RNs to document the condition of the patient on a regular basis and any time during the inpatient stay.
  - Associated with the note: RN Reassessment
- Interdisciplinary Plan of Care interfaces with admission and reassessment data, and allows additional information to be entered by the RN and other health care personnel (physicians, social workers, chaplain, etc.). All clinical staff can enter information into the Plan of Care. The Plan of Care can be printed and given to the patient when appropriate.
  - Associated with the note: Interdisciplinary Plan of Care
- Printouts available in PADP include:
  - The Daily Plan®, health summary to be given to patient and family
  - Plan of Care to guide nursing staff actions
  - Discharge Plan for discharge planners/actions
  - Belongings, documenting patient belongings
  - Safe Patient Handling to guide patient transfers
### Patient Care Encounter (PCE)

<table>
<thead>
<tr>
<th>Vista Module: Patient Care Encounter</th>
<th>Version: 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: PX</td>
<td>Most Recent Patch:</td>
</tr>
</tbody>
</table>

**Brief Description:** Patient Care Encounter (PCE) captures clinical data resulting from ambulatory care patient encounters. The captured clinical data documents “encounters” and related encounter information, such as problems treated at encounter, procedures done, immunizations, patient education, and skin tests.

**Business Function Framework Line(s) of Business:** Deliver Healthcare, Manage Business Enabling Services  
**Business Function Framework Function(s):** Provide Medical Services, Manage Health Records, Provide Enterprise Reporting

**VHA Portfolio: Business Informatics**

**Business Owner:** VHA OIA Health Information Governance  
**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:**

PCE provides a data repository for long-term clinical data. A goal of PCE is to support many data capture methods for integrating clinical data from many environments. Pilot efforts included population of the PCE clinical repository via scanner technologies and workstations. The key users of this clinical data are clinicians, management, and Quality Management personnel.

PCE also captures classification information such as Service Connected (SC) condition, Agent Orange Exposure, Military Sexual Trauma, Shipboard Hazard and Defense (SHAD), etc., as these pertain to the specific patient.

PCE is also vital in collecting Current Procedural Terminology (CPT) and International Classification of Diseases (ICD-9) information during patient care episodes.

**Features**

- Acts as VA’s long-term clinical repository, documenting encounters from local and non-VA facilities.
- Provides a primary and secondary clinical visit management utility based on appointments and related services.
- Interfaces with the Health Summary package to provide components based on data captured
and stored in the PCE clinical repository.

- Supports capture of outpatient encounter data. Data collection methods include:
  - Interface between scanner/workstation and clinical repository.
  - On-line data capture using List Manager user interface.
  - Historical load utilities for lab and outpatient pharmacy.
Patient Data Exchange (PDX)

<table>
<thead>
<tr>
<th>Vista Module: Patient Data Exchange (PDX)</th>
<th>Version: 1.5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: VAQ</td>
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<tr>
<td>Brief Description: Patient Data Exchange (PDX) is a VistA module designed to electronically request and receive patient demographics, episodes of care, medications, and diagnostic evaluations from other VA facilities. Data is retrieved from files at a remote site and is assembled into a coherent, composite record, greatly enhancing the quality of care provided for the patient.</td>
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</tbody>
</table>

| Business Function Framework Line(s) of Business: Manage Business Enabling Services |
| Business Function Framework Function(s): Utilize Information Technology Services |
| VHA Portfolio: Common Services |
| Business Owner: VHA | OIT Project Manager: OIT |

Full Description: PDX allows for the setup of a work group of selected facilities that agree to an automatic data exchange. For facilities in the work group, data is returned automatically, within minutes after a request is entered. There are exceptions, however, such as records that have been flagged as sensitive. Any record that does not meet the criteria for automatic processing is reviewed and processed manually.

Once the request is processed, the patient’s record is forwarded to the requesting facility. The requests and data are moved from one facility to another using MailMan, VA’s electronic mail utility. The requesting facility receives administrative, pharmaceutical, and clinical information that is stored in its files and is available for terminal display or printing.

Features:
- Electronic data requests for selected patient from other facility(ies)
- Automatic processing, and allows for manual processing for certain records, e.g., those flagged as sensitive
- Capability to send data to a remote site without first receiving a request
- Display/print capability for data received from other facility(ies)
- Encryption of site-specific patient information
- Send/request capability for a patient from multiple sites for multiple segments
- Status check on results
- Display of demographic data from a remote site, and capability to load/edit select demographic data into the local site file.
# Patient Record Flags

<table>
<thead>
<tr>
<th>Vista Module: Patient Record Flags</th>
<th>Version: 1.0</th>
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</thead>
<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
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</table>

**Brief Description:** The Patient Record Flags (PRF) software provides users with the ability to create, assign, inactivate, edit, produce reports, and view patient record flag alerts.

**Business Function Framework Line(s) of Business:** Managing Business Enabling Services

**Business Function Framework Function(s):** Utilize Information Technology Services

**VHA Portfolio:** Health Provider Systems

**Business Owner:** VHA  
**OIT Project Manager:** OIT

**Full Description:** This VistA module provides the ability to create, assign, inactivate, edit, produce reports on, and view patient record flag alerts. Patient record flags are used to alert VHA medical staff and employees of patients whose behavior, medical status, or characteristics may pose a threat either to their safety, the safety of other patients or employees, or which may otherwise compromise the delivery of quality safe health care. The use of patient record flags must be strictly controlled and implemented following VA Directives.

Patient record flags are divided into Category I (national) and Category II (local) flags. Category I flags are nationally approved and distributed by VHA nationally released software for implementation by all facilities. The Category I flag is shared across all known treating facilities for the patient utilizing VistA HL7 messaging. Category II flags are locally established by individual VISNs or facilities. They are not shared between facilities.
# Patient Representative

**Vista Module:** Patient Representative  
**Version:** 2.0

<table>
<thead>
<tr>
<th>Namespace: QAC</th>
<th>Most Recent Patch:</th>
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</table>

**Brief Description:** The purpose of the Patient Representative module is to ensure that VA medical facilities respond to patient needs. The software tracks and trends compliments and complaints and measures the facility’s types of complaints as they relate to the Customer Services Standards and the National Patient Satisfaction Survey.

**Business Function Framework Line(s) of Business:** Provide Access to Health Care, Provide Health Care Administration, Manage Business Enabling Services

**Business Function Framework Function(s):** Provide Communications and Outreach, Manage Customer Relations, Utilize Information Technology Services, Provide Enterprise Reporting

**VHA Portfolio:** Business Informatics

<table>
<thead>
<tr>
<th>Business Owner: National Veteran Service and Advocacy Program (NVSAP)</th>
<th>OIT Project Manager: OIT/PD/PSS/HPS</th>
</tr>
</thead>
</table>

**Full Description:** This package supports the Patient Advocate with the collection and categorization of complaints and compliments that give the medical center an opportunity to meet and exceed the customer’s expectations. The issue codes provide the opportunity to track types of complaints and provide trends of specific complaints. Included within the issue codes are the Customer Service Standards.

A recent reliability study of the codes has revealed an exceptionally high reliability in the selection of appropriate codes. To help with improving perceptions, the tracking program can also extract data specific for women veterans by eras of service (i.e., Gulf War, Vietnam) as well as clinic, product line, or services.

**Features**

- Entering and editing contact information.
- Sending Reports of Contact via the Alert system.
- Tracking contacts that have responses due.
- Printing various lists, statistical reports, and ad hoc reports.
### Personnel and Accounting Integrated Data (PAID): Education Tracking

<table>
<thead>
<tr>
<th>Vista Module: Personnel and Accounting Integrated Data (PAID)</th>
<th>Version: 4.0</th>
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</thead>
<tbody>
<tr>
<td>Namespace: PRS</td>
<td>Most Recent Patch:</td>
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<tr>
<td>Brief Description: PAID is comprised of the Enhanced Time and Attendance system and the Education Tracking system.</td>
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<tr>
<td><strong>Business Function Framework Line(s) of Business:</strong> Manage Business Enabling Services</td>
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<tr>
<td><strong>Business Function Framework Function(s):</strong> Manage Human Resources</td>
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<tr>
<td><strong>VHA Portfolio: Business Informatics</strong></td>
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<tr>
<td><strong>Business Owner: Office of Financial Management</strong></td>
<td><strong>OIT Project Manager: OIT/PD/PSS/HPS</strong></td>
</tr>
<tr>
<td>Full Description: Education Tracking documents employee and student participation at mandatory and ward in-services, continuing education programs, and all other employee training. Training information is protected with varying levels of access.</td>
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<tr>
<td><strong>Features:</strong></td>
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<tr>
<td>- Creates a class database with pertinent class information including class name, presenter, location, contact hours, accrediting organizations, etc.</td>
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<tr>
<td>- Contains a class registration component that limits class registrants by number or service</td>
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<tr>
<td>- Credits class participation to individual attendee records</td>
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<tr>
<td>- Provides site-configurable mandatory training groups, accrediting organizations, presentation media, and class purpose</td>
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<tr>
<td>- Contains a variety of reports including registration roster and employee training reports</td>
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</tbody>
</table>
**Personnel and Accounting Integrated Data (PAID): Enhanced Time and Attendance (ETA)**

<table>
<thead>
<tr>
<th>Vista Module: Personnel and Accounting Integrated Data (PAID): Enhanced Time and Attendance</th>
<th>Version: 4.0</th>
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<tbody>
<tr>
<td>Namespace: PRS</td>
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<tr>
<td>Brief Description: PAID is comprised of the Enhanced Time and Attendance system and the Education Tracking system.</td>
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</tr>
<tr>
<td>Business Function Framework Line(s) of Business: Manage Business Enabling Services</td>
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<tr>
<td>Business Function Framework Function(s): Manage Human Resources</td>
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<tr>
<td>VHA Portfolio: Business Informatics</td>
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<tr>
<td>Business Owner: Office of Financial Management, Payroll and HR Systems Service</td>
<td>OIT Project Manager: OIT/PD/PSS/HPS</td>
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</tbody>
</table>

Full Description: The Enhanced Time and Attendance System (ETA) automates time and attendance for employees, timekeepers, payroll, and supervisors. It provides employees the ability to request leave and display both the status of pending requests and leave balances and allows payroll to manage time and leave (T&L) units and tours of duty. It provides timekeeping, supervisory certification, and overtime management.

**Features:**

- Timekeepers can enter and edit employee data and view time card status
- Payroll can view processing status of T&Ls, locate uncertified/incomplete timecards
- Payroll can manage T&L units by multiple elements including supervisors, timekeepers and employees
- Payroll supervisor transmits all payroll data to Central PAID in Austin and monitors transmission status
- PAID builds and updates employee records with Central PAID
- Employees may submit electronic leave requests, and also view request status, leave balances, and service records
- Supervisors can approve electronic requests and timecards and view employee leave reports.

PAID functionality will be replaced by VATAS in the FY 2013-2014 timeframe.
# Pharmacy: Automatic Replenishment/Ward Stock (AR/WS)

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<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
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<tr>
<td>Brief Description: The Automatic Replenishment/Ward Stock (AR/WS) package provides a method to track drug distribution and inventory management within a medical center.</td>
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<tr>
<td><strong>Business Function Framework Line(s) of Business:</strong> Provide Health Care Administration, Deliver Health Care,</td>
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<tr>
<td><strong>Function(s):</strong> Conduct Disaster Preparedness Programs, Provide Ancillary Services</td>
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<tr>
<td><strong>VHA Portfolio:</strong> Health Provider Systems</td>
<td></td>
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<tr>
<td><strong>Business Owner:</strong> Pharmacy Benefits Management (PBM)</td>
<td><strong>OIT Project Manager:</strong> OIT/PD/PSS/HP</td>
</tr>
<tr>
<td><strong>Full Description:</strong> The Automatic Replenishment/Ward Stock (AR/WS) package provides a method to track drug distribution and inventory management within a medical center. The AR/WS module is designed to allow each medical center to adapt the system to its own needs.</td>
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</table>

## Features:

The AR/WS package:

- Provides inventory management capabilities for clinical care locations and drug crash carts.
- Allows easy drug item inactivation for inventory locations.
- Provides tools to develop medication storage areas with lists of drugs to be maintained in that area. Drugs are classified by inventory type and assigned storage location and stock level.
- Groups medication storage areas together by inventory group name. Grouping may be by location, date (time or frequency of inventory), or inventory type.
- Provides tools to conduct inventory: prints inventory sheets and/or pick lists to determine stock to be replenished in medication storage areas and, by a selected method, replaces needed inventory items.
- Maintains backorder totals if a physical inventory is conducted and entered into AR/WS software.
- Provides inventory management reporting capabilities for clinical care locations and drug crash carts.
- Provides ability to select by inventory group on all reports.
- Supplies a report to fill on-demand requests for out-of-stock items or items not part of the
standard inventory.

- Provides various printouts as well as several management statistical reports for the creation and maintenance of the system.
Pharmacy: Bar Code Medication Administration (BCMA)

**Visa Module:** Pharmacy: Bar Code Medication Administration (BCMA)  
**Version:** 3.0

**Namespace:** PSB  
**Most Recent Patch:**

**Brief Description:** Bar Code Medication Administration (BCMA) software provides a real-time, point-of-care solution for validating the administration of Unit Dose (UD) and Intravenous (IV) medications to inpatients in Veterans Administration Medical Centers (VAMCs).

**Business Function Framework Line(s) of Business:** Provide Health Care Administration, Deliver Health Care, Manage Business Enabling Services

**Business Function Framework Function(s):** Perform Hospital Administration, Provide Clinical Decision Support, Provide Medical Services, Provide Ancillary Services, Manage Health Records, Utilize Information Technology Services

**VHA Portfolio:** Health Provider Systems

**Business Owner:** OIA/BCMA and PBM  
**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** Bar Code Medication Administration (BCMA) software provides a real-time, point-of-care solution for validating the administration of Unit Dose (UD) and Intravenous (IV) medications to inpatients in Veterans Administration Medical Centers (VAMCs).

BCMA uses a Graphical User Interface (GUI), MS Windows-based Client/Server architecture, designed to improve the accuracy of the medication administration process, and to increase the efficiency of the administration documentation process. The end result is enhanced patient safety and patient care at VAMCs.

As a clinician scans each patient’s wristband and medication using a bar code scanner, BCMA immediately validates the patient and their medication, and that the medication is ordered, timely, and in the correct dosage. At the same time, BCMA electronically updates the patient’s Medication Administration History (MAH). The software is fully compatible with other VistA applications.

**Features:** The BCMA software provides the following features:

- Medication Tabs on a patient’s Virtual Due List (VDL) are designed for separating and viewing the different types of active Unit Dose, IV Push, IV Piggyback, and large-volume IV medication orders. Each Tab provides an “alert” light, which turns green only when the patient has active medication orders for that Tab.

- Patient safety tools include a Missed Medications Report, an alert when due medications are not administered, a notification when a patient is transferred, and an alert light to indicate that a medication order exists for the Schedule Type and Start/Stop Date and Time selected on the VDL. Other tools include a listing of Allergies and Adverse Drug Reactions (ADRs) that are documented for a patient in the Allergy/Adverse Reaction Tracking (ART) package.
A Computerized Patient Record System (CPRS) Med Order Button (or “Hot Button”) on the BCMA Tool Bar streamlines the workflow in ICU-type environments. This button links nurses directly to CPRS for electronically ordering, documenting, reviewing and signing verbal and telephone STAT and NOW (One-Time) medication orders already administered to patients.

BCMA increases the amount and type of information available to nurses at the point of care, improves communications between Nursing and Pharmacy staff, records Missing Doses for patients, sends an electronic Missing Dose Request to the Pharmacy, and supports Health Level Seven (HL7) messaging.

Management and accountability tools identify PRN entries that require effectiveness comments and pain scores, list medications that were not scanned as administered during an administration time window, list early/late administration variances, and allow nurses to set site-specific parameters and defaults on their systems.


Either VA or HIS Operational Environment is recognized and appropriate patient identifier displayed.

Section 508 enhancements are in place to ensure enhanced accessibility.

Additions to the BCMA Order Detail report include CPRS Order Checks, Provider override reasons, and pharmacist intervention information, and a “hover-over” feature displays visuals indicator when override/intervention reasons exist.

Automated reporting method of bar code scanning failures (of both patient wristbands and medication bar code labels) shorten resolution times, and allow for proactive analysis of failure information to prevent future scanning failures.

Creation of a record within Patient Care Encounter (PCE) for medications marked as given in BCMA that have been identified as immunizations.
**Pharmacy: Bar Code Medication Administration (BCMA) Backup Utility (BCBU)**

<table>
<thead>
<tr>
<th>Vista Module: Pharmacy: Bar Code Medication Administration (BCMA) Backup Utility</th>
<th>Version:</th>
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<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
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<tr>
<td><strong>Brief Description:</strong> The BCBU interfaces with the VistA application to provide a real-time backup of all inpatient medication activities on a designated workstation(s).</td>
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<tr>
<td><strong>Business Function Framework Line(s) of Business:</strong> Provide Health Care Administration, Deliver Health Care, Manage Business Enabling Services</td>
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<tr>
<td><strong>Business Function Framework Function(s):</strong> Perform Hospital Administration, Provide Clinical Decision Support, Provide Medical Services, Provide Ancillary Services, Manage Health Records, Utilize Information Technology Services</td>
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<tr>
<td><strong>VHA Portfolio:</strong> Health Provider Systems</td>
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<tr>
<td><strong>Business Owner:</strong> OIA/BCMA and PBM</td>
<td><strong>OIT Project Manager:</strong> OIT/PD/PSS/HPS</td>
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</table>

**Full Description:** BCBU allows compliance with Automated Information Systems (AIS) security directives requiring all facilities to be responsible for the development, maintenance, and annual testing of individual AIS contingencies. BCBU maintains a current copy on the designated workstation of all inpatient pharmacy activities, including the inpatient medication orders, medication administrations, and allergies that are included on a Pharmacy Medication Administration Record (MAR).

Designated workstation(s) will contain current information regarding inpatient medication orders (Unit Dose and IV), medication administration record (MAR), medication administration history (MAH) and patient allergies. Workstations are updated using the HL7 package. These workstations are available for use according to local policies concerning VistA, BCMA, or network contingencies.

**Features:**

- Graphical User Interface (GUI) allows users to navigate through date more quickly and efficiently
- PSB BCBU Errors Mail group notifies responsible users of potential problems with sending information to the Contingency Workstations
- Only active inpatient data are kept
- Menu options on workstations allow users to generate reports if VistA is unavailable.
# Pharmacy: Consolidated Mail Outpatient Pharmacy (CMOP)

**Vista Module:** Pharmacy: Consolidated Mail Output Pharmacy (CMOP)  
**Version:** 1.0

**Namespace:**  
**Most Recent Patch:**

**Brief Description:** The Consolidated Mail Outpatient Pharmacy (CMOP) package provides a regional system resource to expedite the distribution of mail-out prescriptions to veteran patients.

**Business Function Framework Line(s) of Business:** Provide Access to Health Care, Deliver Health Care, Manage Business Enabling Services

**Business Function Framework Function(s):** Provide Access to Self-Services, Provide Clinical Decision Support, Provide Ancillary Services, Utilize Information Technology Services, Provide Enterprise Reporting

**VHA Portfolio:** Health Provider Systems

**Business Owner:** Patient Care Services  
**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** CMOP host facilities, regionally located, receive data from medical centers within the area of service. Current CMOPs are designed to handle the dispensing and mailing of between 20,000 and 40,000 prescriptions in an 8-hour workday.

**Features**

- Patients submit medication requests via telephone, mail, or in person at each medical facility. When necessary, pharmacy personnel enter the orders into the patient database.
- Each area CMOP host facility establishes a schedule for the electronic transmission of the prescription data.
- Prescriptions are transmitted electronically from the medical facility to the automated prescription dispensing equipment, checked by a pharmacist, mailed to the patient, and information on the prescription filled is returned to update the medical center database.
- The process is highly integrated with the Outpatient Pharmacy software and requires no additional processing by pharmacy personnel responsible for entering the prescription.
- All prescriptions are automatically screened by the CMOP software and set for transmission if
appropriate.

- The user is then notified that the prescription will be dispensed by the CMOP. Once the prescription is processed by the CMOP, the prescription file at the medical center is updated accordingly.
- Pharmacy staff may view the prescription at any time to determine if it has been transmitted to CMOP, dispensed, not dispensed, etc.
- Upon fulfillment of the medication order by the CMOP, any applicable pharmacy prescription co-payment is billed as the medical center files are updated with the release information.
- The software provides order tracking and operational data for the CMOPs.
- The software allows prescriptions written for schedule III-V controlled substances to be electronically transmitted to the CMOP facilities.
Pharmacy: Controlled Substances

Vista Module: Pharmacy: Controlled Substances
Version: 3.0

Namespace: Pharmacy Benefits
Most Recent Patch: OIT Project Manager: OIT/PD/PSS/HPS

Brief Description: The Controlled Substances package provides functionality to monitor and track the receipt, inventory, and dispensing of all controlled substances.

Business Function Framework Line(s) of Business: Deliver Health Care

Function(s): Provide Ancillary Services

VHA Portfolio: Health Provider Systems

Business Owner: Pharmacy Benefits Management (PBM)

Full Description: The Controlled Substances package provides functionality to monitor and track the receipt, inventory, and dispensing of all controlled substances. This software provides the pharmacy with the capability to define a controlled substance location and a list of controlled substances to maintain a perpetual inventory. The capability for Pharmacy personnel to receive a controlled substance order, which automatically updates the quantity on hand and receipt history, is also available. Nursing personnel can request orders for controlled substances via on-demand requests and receive these orders when delivered from Pharmacy. Pharmacy may dispense controlled substances, using the automated VA forms 10–2321 and 10–2638, to complete an order request.

Features: Controlled Substances package provides the following features:
- Monitors/tracks the receipt, inventory, and dispensing of controlled substances.
- Allows management inspections to automatically identify discrepancies in stock levels.
- Allows nursing to place orders for controlled substances via on-demand requests.
- Provides AMIS and cost reporting data.
- Maintains perpetual vault inventory balances.
- Provides the functionality to return to stock, transfer between locations, cancel orders, and log outpatient prescriptions.
- Automates current inventory requirements that allow medical facilities to detect discrepancies or diversions of controlled substances, thereby improving overall drug accountability.
- Provides a Controlled Substance Inspector Menu that allows access to several specialized reports used in the inspection process
- Interfaces with the Outpatient Pharmacy package to provide updates to inventory upon Return to Stock activity
- Provides tracking for controlled substances being held for destruction and allows for the
documentation of that destruction

- Provides an HL7 interface to Narcotic Dispensing Equipment systems
Pharmacy: Drug Accountability/Inventory Interface

Vista Module: Pharmacy: Drug Accountability/Inventory Interface
Version: 3.0

Namespace: Most Recent Patch:

Brief Description: The Drug Accountability/Inventory Interface works toward perpetual inventory for each VA medical facility pharmacy by tracking all drugs through pharmacy locations.

Business Function Framework Line(s) of Business: Deliver Health Care

Business Function Framework Function(s): Provide Ancillary Services

VHA Portfolio: Health Provider Systems

Business Owner: Pharmacy Benefits Management (PBM)
OIT Project Manager: OIT/PD/PSS/HPS

Full Description: The Drug Accountability/Inventory Interface works toward perpetual inventory for each VA medical facility pharmacy by tracking all drugs through pharmacy locations. Drugs are added to the pharmacy location as they are received from the Prime Vendor. This allows sites to receive invoice information containing data for confirmed orders. With the prime vendor, the data is uploaded into VistA using a Graphical User Interface to perform the upload. The files are uploaded into Drug Accountability, processed, and upon verification, the pharmacy locations or master vaults are updated. Dispensing data is collected from pharmacy packages to decrement balances. Drug Accountability also provides the capability for Pharmacy personnel to display or print procurement history, drug balance adjustments, and order data.

Features:

There are two primary methods of receiving invoice data into Drug Accountability:

- Prime Vendor Data
- IFCAP Data

Both methods involve having the user place the invoice orders with the appropriate company. With the prime vendor, the data is uploaded into VistA using a Graphical User Interface to perform the upload. With IFCAP, the data is automatically shipped to VistA upon receipt at the warehouse.

The Prime Vendor Interface includes the following features:

- It automatically updates the Drug Accountability pharmacy locations based on dispensing and receiving information, and it also updates master vaults based on receiving information.
- Drugs are added as the invoice data is received.
- If the invoiced drug’s order unit and dispense units per order unit are the same as the information currently contained in the local DRUG file, the NDC field in the DRUG file is overwritten with the most recent National Drug Code (NDC) number.
- The reorder quantities for the pharmacy locations and master vaults are provided on a daily
basis by way of a mail message Generic Inventory Package

The IFCAP Interface includes the following features:

- When a pharmacy order invoice is received and entered into the IFCAP purchasing system, the receipt data will be collected and compiled to an Health Level Seven (HL7) message and transmitted ‘real time’ to VistA Drug Accountability.
- Upon receiving the message, the receipt data will be stored in a temporary global, and Drug Accountability will alert the user about the Pharmacy receipt.
- After receiving invoice data into the warehouse, the transmission from IFCAP will place data into a temporary global.
- When Pharmacy personnel sign into the Drug Accountability package, the program will check for the existence of orders to process.
- If the orders exist, and the user has the proper security key, the data can then be received into Drug Accountability.
- Each Purchase Order received will be for a specific pharmacy location. If items are to be shipped/received at different pharmacy locations, a different purchase order will be created/shipped for each location.

Both Interfaces include the following features:

- Vendor-specific information and procurement history is displayed for a selected drug.
- Pharmacy locations are established and populated.
- A purge capability with scheduling queuing is provided.
- Support is provided for NDC code set and pricing for Electronic Claims Management Engine pharmacy electronic billing.
# Pharmacy: Electronic Claims Management Engine (ECME)

<table>
<thead>
<tr>
<th>Vista Module: Electronic Claims Management Engine (ECME) (AKA: ePharmacy)</th>
<th>Version: 1.0</th>
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<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch</strong></td>
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<tr>
<td><strong>Brief Description:</strong> The Electronic Claims Management Engine (ECME) package provides the ability to create and distribute electronic Outpatient Pharmacy claims to insurance companies on behalf of VHA Pharmacy prescription beneficiaries in a real-time environment. The application does not impact first party co-payments and minimizes the impact on legacy pharmacy workflow.</td>
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<tr>
<td><strong>Business Function Framework Line(s) of Business:</strong> Deliver Health Care, Manage Business Enabling Services</td>
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<tr>
<td><strong>Function(s):</strong> Provide Medical Services, Provide Financial Management</td>
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<td><strong>VHA Portfolio:</strong> Health Provider Systems</td>
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<tr>
<td><strong>Business Owner:</strong> Chief Business Office</td>
<td><strong>OIT Project Manager:</strong> OIT/PD/PSS/HPS</td>
</tr>
<tr>
<td><strong>Full Description:</strong> This system meets the Health Insurance Portability and Accountability Act (HIPAA) of 1996 mandate, specific to the Electronic Transactions and Code Sets rule regarding compliance with submitting claims electronically to insurance companies via the National Council for Prescription Drug Programs (NCPDP) standard transmission format. ECME receives a billing determination by Integrated Billing (IB) if an Outpatient Pharmacy order is billable. If so, ECME builds a NCPDP electronic claim transaction using data required by the insurance company for claim adjudication, as defined within the company’s individual payer sheet. Claims are submitted during the Outpatient Pharmacy finish process, and again during the Outpatient Pharmacy release process if the claim was initially rejected. If any additional edits or other events occur to the prescription, such as a return to stock, ECME generates additional electronic claims to payers updating them on the prescription billable status and updates IB with any claim specific information.</td>
<td></td>
</tr>
<tr>
<td><strong>Features:</strong> The ECME application provides the following features:</td>
<td></td>
</tr>
<tr>
<td>▪ Creation of outpatient pharmacy electronic claims for real-time submission to third party insurance companies for adjudication utilizing billing activities within the VHA prescription fill process.</td>
<td></td>
</tr>
<tr>
<td>▪ Utilization of information provided by a subscription with a vendor to create electronic claims.</td>
<td></td>
</tr>
<tr>
<td>▪ Support and integrated functionality for TRICARE/CHAMPS, ChampVA, and itemized charging methods for prescription pricing.</td>
<td></td>
</tr>
<tr>
<td>▪ Enhancements to VHA revenue cycle management by submitting claims at the point of service while building claim segments using payer-provided transaction formats compliant with the NCPDP standard.</td>
<td></td>
</tr>
<tr>
<td>▪ Collection and presentation of DUR information to application users based on information received from payer claim responses.</td>
<td></td>
</tr>
<tr>
<td>▪ Reporting and on-line work list presentation formats supporting VHA claims adjudication requirements.</td>
<td></td>
</tr>
<tr>
<td>▪ Integration with VistA IB for prescription billing determination and claims tracking.</td>
<td></td>
</tr>
</tbody>
</table>
- Integration with VistA Pharmacy applications when creating claims based on Pharmacy workflow.
- Communication with the VistA Health Level Seven (HL7) application and messaging software solution to store and forward electronic pharmacy claims for third party insurance adjudication.
**Pharmacy: Enterprise Customization System (PECS)**

<table>
<thead>
<tr>
<th>Vista Module: Pharmacy Enterprise Customization System (PECS)</th>
<th>Version: 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch</td>
</tr>
<tr>
<td>Brief Description: PECS allows users to customize the contents of a number of pharmacy-related information sets.</td>
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</tr>
</tbody>
</table>

**Business Function Framework Line(s) of Business:** Deliver Health Care  
**Business Function Framework Function(s):** Provide Clinical Decision Support

<table>
<thead>
<tr>
<th>VHA Portfolio: Health Provider Systems</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business Owner: Pharmacy Benefits Management (PBM)</td>
</tr>
</tbody>
</table>

**Full Description:** The Pharmacy Enterprise Customization System (PECS) is a Graphical User Interface (GUI) application that allows users to customize the contents of the following five business concepts: Drug-Drug Interaction, Drug Pair, Duplicate Therapy, Dose Range and Professional Monograph. All customizations will be performed at the national level to provide consistent order checks between facilities.

**Features:**

- Customization of FDB
  - Performed by PBM at national level
  - Provide auto updates of custom/standard FDB tables to local/regional databases
- Ability to query
- Ability to view, modify, review, approve and delete customizations created
- Ability to deliver customizations to be used by MOCHA order check process
- Ability to customize users view
- Improved work flows
- Enhanced search functionality
- File Transfer Protocol (FTB) capability to update from national database to all local/regional instances of FDB standard and custom tables.
# Pharmacy: Inpatient Medications

**Vista Module:** Pharmacy: Inpatient Medications  
**Version:** 5.0

<table>
<thead>
<tr>
<th>Namespace:</th>
<th>Most Recent Patch:</th>
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</thead>
<tbody>
<tr>
<td>Brief Description:</td>
<td>The Inpatient Medications package integrates functions from the Intravenous (IV) and Unit Dose (UD) modules.</td>
</tr>
<tr>
<td>Business Function Framework Line(s) of Business:</td>
<td>Provide Health Care Administration, Deliver Health Care, Manage Business Enabling Services</td>
</tr>
<tr>
<td>Function(s):</td>
<td>Conduct Disaster Preparedness Programs, Provide Clinical Decision Support, Provide Medical Services, Provide Ancillary Services, Manage Health Records</td>
</tr>
<tr>
<td>VHA Portfolio: Health Provider Systems</td>
<td></td>
</tr>
<tr>
<td>Business Owner:</td>
<td>Pharmacy Benefits Management (PBM)</td>
</tr>
<tr>
<td>OIT Project Manager:</td>
<td>OIT/PD/PSS/HPS</td>
</tr>
</tbody>
</table>

**Full Description:** The Inpatient Medications package integrates functions from the Intravenous (IV) and Unit Dose (UD) modules. This integration provides a comprehensive record of medications utilized during hospitalization of the veteran, the functionality for clinician order entry through Computerized Patient Record System (CPRS), and tailors processes by facility, user, and/or medication.

**Features:** Integrated software allows these features, via the List Manager interface, for both IV and Unit Dose. This provides the user the capability to:
- Browse through a list of orders and take action(s) against those items.
- Print 7-day, 14-day, and 24-hour Medical Administration Records (MARs), labels, and profiles from within the options.
- Select a detailed allergy report, document new allergies or adverse drug reactions.
- Update the Patient’s Record from within List Manager.
- Provides Drug/Drug Interaction, Drug/Class Interaction, Duplicate Drug, and Duplicate Class Order checks.
- Allows easier drug selection using Orderable Item.
- Provides on-line order maintenance (for example: edit, renewal, cancellation) and marks orders that need attention.
- Provides on-line order entry with an integrity check for each order type.
- Generates labels containing order and patient information upon the entry/maintenance of an order.
- Provides on-line or printed patient profiles that include a history of medication orders for the current or last medical center visit.
- Displays patient order information and histories of all actions taken on active orders.
- Provides an Action Profile of patient medication orders for use by physicians to cancel or continue medications.
- Provides a Stop Order Notice report to notify users of orders near expiration.
- Cancels/holds medication orders for patients transferred between wards and/or services.
- Provides dispensing cost reports by patient, ward, service, drug, and providers.
- Provides reports and forms by patient, ward, and selected groups of wards.
Allows electronic entry and inpatient processing of medication orders for an outpatient receiving treatment via a clinic or ancillary service.
### Pharmacy: Inpatient Medications—Intravenous (IV)

**Vista Module: Pharmacy: Inpatient Medications - Intravenous (IV)  
Version: 5.0**

**Namespace:** Most Recent Patch:

**Brief Description:** Inpatient Medications’ Intravenous (IV) module provides pharmacists and their staffs with IV labels, manufacturing worksheets, ward lists for order updates, and management reports. It permits the Pharmacy staff to track the manufacture of IV formulas with greater control than manual procedures allow.

**Business Function Framework Line(s) of Business:** Provide Health Care Administration, Deliver Health Care, Manage Business Enabling Services

**Business Function Framework Function(s):** Conduct Disaster Preparedness Programs, Provide Clinical Decision Support, Provide Medical Services, Provide Ancillary Services, Manage Health Records

**VHA Portfolio: Health Provider Systems**

**Business Owner:** Pharmacy Benefits Management (PBM)  
**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** Inpatient Medications’ Intravenous (IV) module provides pharmacists and their staffs with IV labels, manufacturing worksheets, ward lists for order updates, and management reports. It permits the Pharmacy staff to track the manufacture of IV formulas with greater control than manual procedures allow.

Through order entry and ward list updating, the staff can easily establish and maintain an accurate and timely data set of IV orders. A carefully designed set of checks and balances has been incorporated to ensure that the patient is supplied IV solutions quickly and accurately.

**Features: IV module:**

- Generates Manufacturing Lists to facilitate maximum efficiency in the preparation and delivery of IV products.
- Generates IV labels containing all necessary patient, drug, and schedule information. Labels provide a bar-coded identifier which when used in conjunction with Bar Code Med Administration greatly enhances patient safety.
- Generates management reports designed to track drug costs and workload by ward, provider, IV room, and patient.
- Provides on-line generation of production reports such as renewal lists, active order lists, and formulary drug reports.
- Discontinues/holds orders for patients transferred between wards and/or services.
- Allows electronic entry and inpatient processing of medication orders for an outpatient receiving treatment via a clinic or ancillary service.
## Pharmacy: Inpatient Medications—Unit Dose (UD)

<table>
<thead>
<tr>
<th>Vista Module: Pharmacy: Inpatient Medications – Unit Dose (UD)</th>
<th>Version:</th>
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</thead>
<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
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</table>

Brief Description: The Unit Dose (UD) module of Inpatient Medications provides a standard computerized system for dispensing and managing inpatient medications. Timely, accurate, accessible, and up-to-date patient medication information is available from any terminal within the facility. Computer-generated working forms allow personnel to dedicate more time to patient care.

Business Function Framework Line(s) of Business: Provide Health Care Administration, Deliver Health Care, Manage Business Enabling Services

Business Function Framework Function(s): Conduct Disaster Preparedness Programs, Provide Clinical Decision Support, Provide Medical Services, Provide Ancillary Services, Manage Health Records

VHA Portfolio: Health Provider Systems

| Business Owner: Pharmacy Benefits Management (PBM) | OIT Project Manager: OIT/PD/PSS/HPS |

Full Description: The Unit Dose (UD) module of Inpatient Medications provides a standard computerized system for dispensing and managing inpatient medications. Timely, accurate, accessible, and up-to-date patient medication information is available from any terminal within the facility. Computer-generated working forms allow personnel to dedicate more time to patient care.

Features: Unit Dose module:

- Allows immediate entry of pre-defined sets of unit dose orders.
- Provides computerized pick lists, which include pre-calculated doses for pharmacists.
- Provides an interface to automated dispensing equipment.
**Pharmacy: Medication Order Check Healthcare Application (MOCHA)**

<table>
<thead>
<tr>
<th>Vista Module: Pharmacy: Medication Order Check Healthcare Application (MOCHA)</th>
<th>Version: 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td>Most Recent Patch</td>
</tr>
<tr>
<td><strong>Brief Description:</strong></td>
<td>Medication Order Check Healthcare Application (MOCHA) v1.0 provides for the implementation of Enhanced Order Checks (Drug-Drug Interactions and Duplicate Therapy.)</td>
</tr>
</tbody>
</table>

| **Business Function Framework Line(s) of Business:** | Deliver Health Care |
| **Business Function Framework Function(s):** | Provide Clinical Decision Support, Provide Medical Services, Provide Ancillary Services |

| **VHA Portfolio: Health Provider Systems** | OIT Project Manager: OIT/PD/PSS/HP |
| **Business Owner:** | Pharmacy Benefits Management (PBM) |

**Full Description:** Medication Order Check Healthcare Application (MOCHA) v1.0 provides for the implementation of Enhanced Order Checks (Drug-Drug Interactions and Duplicate Therapy).

**Features:** VistA enhancements include:
- Provides enhanced Order Checking to the CPRS, Inpatient Medications and Outpatient Medications applications;
- Enhanced drug-drug interaction order check to provide the clinician with more information by displaying a short description of the clinical effects of the drug interaction and providing an optional view of a detailed professional drug interaction monograph;
- Enhanced Duplicate Therapy to utilize FDB’s Enhanced Therapeutic Classification (ETC) system which allows for multiple classes per drug;
- Creation/modification of Application Program Interfaces (APIs) (e.g., CPRS, etc..) to support the order check enhancements.
- HealtheVet (HeV) construction will include component(s) to utilize services provided by a commercial drug database to support Legacy VistA order check changes.
- Addition of new CPRS Order Checks
- Timely notification of recently discontinued/expired outpatient and inpatient medication orders
### Pharmacy: National Drug File (NDF)

**Vista Module:** Pharmacy National Drug File (NDF)  
**Version:** 4.0

**Namespace:** PS  
**Most Recent Patch:**

**Brief Description:** The National Drug File (NDF) package provides standardization of the local drug files in all VA medical facilities. Standardization includes the adoption of new drug nomenclature and drug classification, as well as linking the local drug file entries to data in the National Drug files.

**Business Function Framework Line(s) of Business:** Deliver Health Care, Manage Business Enabling Services

**Function(s):** Provide Medical Services, Provide Ancillary Services, Manage Health Records, Utilize Information Technology Services

**VHA Portfolio:** Health Provider Systems

**Business Owner:** Pharmacy Benefits Management (PBM)  
**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** The National Drug File (NDF) package provides standardization of the local drug files in all VA medical facilities. Standardization includes the adoption of new drug nomenclature and drug classification, as well as linking the local drug file entries to data in the National Drug files. For drugs approved by the Food and Drug Administration (FDA), NDF provides VA medical facilities with the ability to access information concerning dosage form, strength and unit, package size and type, manufacturer’s trade name, and National Drug Code (NDC) information. The NDF software also lays the foundation for sharing prescription information among medical facilities.

**Features: National Drug File:**
- Standardizes drug file information.
- Standardizes drug classifications.
- Adopts standard nomenclature.
- Provides up-to-date prescription and over-the-counter information.
- Provides available sources for drugs manufactured and approved by the FDA.
- Provides a base for implementation of drug inventory control and management throughout VA (i.e., Consolidated Mail Outpatient Pharmacy and Pharmacy Benefits Management).
- Allows file access by NDC, manufacturer’s trade name, ingredient, dosage form, dosage strength, route of administration, and VA drug classification.
- Allows management of drug information, including reports on drugs by classification, ingredient, NDC, trade name, and/or active/inactive status.
- Matches additions to medical center drug files with the national drug database.
- Provides an ingredient file that is an integral component of the Allergy Tracking and Outpatient Pharmacy (drug-drug interactions) modules.
- Provides an enhanced formulary report listing local, VISN, and National Formulary information.
- Includes the Patient Medication Information Sheets that feature the following:
  - An explanation of how and why to take a medication and the possible side effects.
  - Information supplied by commercial sources.
  - Information that is copyrighted and periodically updated.
- Utilizes data provided and standardized by contract for point of sale electronic billing using Electronic Claims Management Engine (ECME).
- Manage FDA Medication Guides
Pharmacy: Outpatient Pharmacy

Vista Module: Outpatient Pharmacy | Version: 7.0
---|---

Namespace: Most Recent Patch

Brief Description: Outpatient Pharmacy provides a method for managing the medications given to Veterans who have visited a clinic or who have received prescriptions upon discharge from the hospital.

Business Function Framework Line(s) of Business: Provide, Health Care Administration, Deliver Health Care, Manage Business Enabling Services

Business Function Framework Function(s): Perform Hospital Administration, Conduct Disaster Preparedness Programs, Provide Medical Services, Provide Clinical Decision support, Provide Medical Services, Provide Ancillary Services, Manage Health Records, Utilize Information Technology Services

VHA Portfolio: Health Provider Systems

Business Owner: Pharmacy Benefits Management (PBM) | OIT Project Manager: OIT/PD/PSS/HPS
---|---

Full Description: Outpatient Pharmacy provides a method for managing the medications given to Veterans who have visited a clinic or who have received prescriptions upon discharge from the hospital. Prescription labels are automatically generated and refill request forms are printed. Medication histories are kept online to permit checks for potential interactions. Profiles can be generated to assist the clinician in managing the patient’s medication regimen. Management reports aid the pharmacy in controlling inventory and costs.

The primary benefits to the Veteran are the assurance that he or she is receiving the proper medication and the convenience of obtaining refills easily. The clinicians and pharmacists responsible for patient care benefit from a complete, accurate, and current medication profile available at any time to allow professional evaluation of treatment plans. Utilization, cost, and workload reports provide management cost-controlling tools while maintaining the highest level of patient care.

Features: Outpatient Pharmacy package:

- Checks new prescriptions against existing prescriptions (for the same medication, therapeutic class, reported allergies, reactions, or drug interactions).
- Allows pharmacists to verify data entered by technicians prior to the printing of labels.
- Allows for the renewal of prescriptions that have no remaining refills. Prints labels for new, renewed, and refilled prescriptions.
- Auto-cancels individual prescriptions for a patient after admission for inpatient treatment.
- Creates medication profiles for patient charts to meet the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) requirements for a current medication list. Profiles are suitable for counseling patients.
Allows the Action Profile to be used as a quick renew/cancel request form by clinic providers, which allows for rapid entry of request by Pharmacy staff.

Provides the Screen Profile for review at several points in the order/entry process.

Provides basic Drug Use Evaluation (DUE) template generator.

Provides necessary laboratory checks and reports to meet national requirements for Clozapine dispensing.

Provides finishing of orders entered through CPRS.

Provides information for billing any applicable medication co-payment when the prescription is released.

Allows the user to select a different action without leaving an option.

Uses List Manager features to allow:
  o  Pharmacist or technician to browse through a list of actions.
  o  Pharmacist or technician to take action against those items.
  o  User to select an action that displays an action or informational profile.

Works with Integrated Billing (IB) and Electronic Claims Management Engine (ECME) to enable and manage point of sale billing supporting the Healthcare Insurance Portability and Accountability Act (HIPAA) Electronic Claims and Code set congressional mandate.

Allows prescription labels and Prescription Medication Information (PMI) sheets to be printed in another language if the system has the other language fields populated in Pharmacy Data Management and the individual patient is identified with the other language preference flag.

Allows the ability to print a microchip-embedded label for a prescription. This label can then be read by ScripTalk®, thus improving patient safety for visually impaired veterans.

Provides display of Herbal, over the counter (OTC), and Non-VA medications documented through CPRS. The data will be used for screening of Drug-Herbal and Drug-Drug Interactions with prescribed medications in VistA.
Pharmacy: Pharmacy Benefits Management (PBM)

Vista Module: Pharmacy: Pharmacy Benefits Management (PBM)  
Version: 4.0

Namespace: PSU  
Most Recent Patch: 

Brief Description: The Pharmacy Benefits Management (PBM) package extracts medication dispensing data elements from numerous locations and makes reports available allowing projections of local drug usage and identification of potential accountability problem areas. The extracted data is transmitted to the PBM using VA Mailman. The Pharmacy Benefits Management (PBM) database that collects information on medication dispensed to both inpatient and outpatient veterans who receive care from the VA is housed at the Hines Information Technology Center (HITC).

Business Function Framework Line(s) of Business: Deliver Health Care, Manage Business Enabling Services

Business Function Framework Function(s): Provide Medical Services, Provide Ancillary Services, Utilize Information Technology Services, Provide Enterprise Reporting

VHA Portfolio: Health Provider Systems

Business Owner: Pharmacy Benefits Management (PBM)  
OIT Project Manager: OIT/PD/PSS/HPS

Full Description:

The Pharmacy Benefits Management (PBM) package replaced the Drug and Pharmaceutical Products management (D&PPM) application. The software extracts medication dispensing data elements from the Outpatient Pharmacy, Inpatient Medications IV and Unit Dose, Automatic Replenishment/Ward Stock, and Controlled Substance modules; it also extracts procurement information from Drug Accountability, Integrated Funds Control, Accounting and Procurement (IFCAP), and a limited amount of Laboratory data on a monthly basis.

The software makes data extraction reports available at Veterans Affairs Medical Centers (VAMCs) and allows local management to use the data to project local drug usage and identify potential drug accountability problem areas. The Pharmacy Benefits Management Strategic Health Group (PBM) is able to provide information on local facility, Veterans Integrated Service Network (VISN) and national product use on monthly, quarterly, and annual intervals.

The extracted data is transmitted to the PBM using VA Mailman. The Mailman message headers display how many messages were sent for a particular module along with the facility name and number from which the data was extracted. The header easily identifies the module from which the data was
extracted, and confirmation messages include the number of Mailman messages generated for each module.

**Features:** Pharmacy Benefits Management contains the following:
- Breakout of Inpatient Medications IV and Unit Dose, Outpatient Pharmacy, and Controlled Substance modules by dispensing occurrence.
- Breakout of procurement information by line item.
- Collection of the Prime Vendor Procurement Information (requires implementation of Drug Accountability V 3.0), Pharmacy AMIS data, Laboratory data, and Patient and Provider information.
- Capture of controlled substance dispensing to patients if electronic Controlled Substance Administration Record (CSAR) is implemented with Controlled Substance Version 3.0.
- Extraction of data and generation of drug and statistical data summary reports by inpatient division or outpatient site whenever possible.
- Inclusion of National Formulary Indicator and Restriction.
- Mechanism to monitor the successful completion of the automatic monthly extraction job and to notify users if a problem exists.
Pharmacy: Pharmacy Data Management (PDM)

Vista Module: Pharmacy: Pharmacy Data Management (PDM)  Version: 1.0

Namespace: PSS  Most Recent Patch:

Brief Description: The Pharmacy Data Management (PDM) package provides tools for managing site configurable data in pharmacy files.

Business Function Framework Line(s) of Business: Deliver Health Care

Business Function Framework Function(s): Provide Clinical Decision Support, Provide Medical Services, Provide Ancillary Services

VHA Portfolio: Health Provider Systems

Business Owner: Pharmacy Benefits Management (PBM)  OIT Project Manager: OIT/PD/PSS/HP

Full Description: The Pharmacy Data Management (PDM) package includes tools for creating the Pharmacy Orderable Items and maintaining files necessary for the Computerized Patients Records Systems (CPRS). PDM consolidates tools for managing the various pharmacy software products, such as Outpatient Pharmacy and Inpatient Medications, to facilitate the maintenance of files used within these applications. Prior to the release of the Pharmacy Data Management (PDM) software, the maintenance of pharmaceutical items within the local DRUG file (#50) was accomplished using application specific options. PDM provides a single option to maintain this file to facilitate this process.

Features  Pharmacy Data Management provides:

- Tools for managing pharmacy orderable items.
- Centralized control of pharmacy files and frequently used options into one location.
- A new drug enter/edit option, which allows the user to edit fields for all pharmacy packages.
- The ability to identify drug interactions.
- Tools for marking drugs to be transmitted to the Consolidated Mail Outpatient Pharmacies.
- Local point-of-sale billing functionality for Electronic Claims Management Engine (ECME) electronic claim submission.
## Pharmacy: Pharmacy Product System—National Registries (PPS-N)

<table>
<thead>
<tr>
<th>Vista Module: Pharmacy Product System - National Registries (PPS-N)</th>
<th>Version: 1.0</th>
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<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
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<tr>
<td><strong>Brief Description:</strong> The Pharmacy Product System – National (PPS-N) is a Web-based application that allows select members of the Department of Veterans Affairs (VA) Pharmacy Benefits Management (PBM) Services to create and revise pharmacy drug information</td>
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<tr>
<td><strong>Business Function Framework Line(s) of Business:</strong> Deliver Health Care, Manage Business Enabling Services</td>
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<tr>
<td><strong>Business Function Framework Function(s):</strong> Provide Ancillary Services, Manage Health Records, Utilize Information Technology Services, Provide Enterprise Reporting</td>
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<td><strong>VHA Portfolio:</strong> Health Provider Systems</td>
<td><strong>OIT Project Manager:</strong> OIT</td>
</tr>
<tr>
<td><strong>Business Owner:</strong> Pharmacy Benefits Management (PBM)</td>
<td><strong>Full Description:</strong> The PPS-N and the PPS-N Migration projects provide two distinct capabilities that are included in the same application which is part of Pharmacy Re-Engineering (PRE) initiatives within VHA.</td>
</tr>
<tr>
<td><strong>Features:</strong> The PPS-N application allows national VA personnel to more easily, quickly and safely manage the VA National Formulary which directs which products, such as medications and supplies, are to be purchased and used by the VA hospital system.</td>
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<td><strong>The key capabilities are:</strong> Provide a means for users to manage the National VA Formulary items. This includes being able to request the addition and update of items, and then approve these requests.</td>
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<td>Provide a means to synchronize PPS-N data with NDFMS.</td>
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<td>Provide a means to interface with a third-party commercial-off-the-shelf (COTS) drug data source. Via this interface PPS-N:</td>
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<td>o Provides a means for users to manage additions and changes made in the COTS drug data source, including synchronization of this data with the PPS-N Enterprise Product List (EPL).</td>
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<td></td>
<td>o Provides a means for users to search for data within the COTS drug data source.</td>
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<td></td>
<td>o Provides a means for users to manage the mapping of VA concepts to COTS concepts.</td>
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</tbody>
</table>
- Provides a means for users to perform reports on items added by the COTS drug data source.
- Provide a means for users to perform various simple and advanced searches for item data contained within PPS-N.
- Provide a means for users to perform reports on the item data contained within PPS-N.
- Provide a means to retrieve pricing information from the Federal Supply Schedule (FSS) system, and then to display this information to the PPS-N users.
- Provide a means to retrieve Standard Medication Route information from the VA Enterprise Terminology System (VETS), and then to manage this data within PPS-N.
- Provide a process executed on the legacy NDFMS system to support data synchronization with the PPS-N database.
# Prosthetics

<table>
<thead>
<tr>
<th>Vista Module: Prosthetics</th>
<th>Version: 3.0</th>
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<tr>
<td>Namespace: RMPR</td>
<td>Most Recent Patch:</td>
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</table>

**Brief Description:** The VistA Prosthetics package automates purchasing. The Prosthetics module enhances patient care by determining what prosthetic services and devices have been provided to the Veteran in the past, and decreasing the time required for the order, delivery, and/or repair of devices.

**Business Function Framework Line(s) of Business:** Deliver Health Care

**Business Function Framework Function(s):** Provide Dentistry, Provide Prosthetics and Sensory Aids

**VHA Portfolio:** Health Provider Systems

**Business Owner:** VHA Office of Patient Care Services Programs

**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** The Prosthetics package provides control and auditing of expenditures and generates management reports.

## Features

- The Purchasing module interfaces with IFCAP (Integrated Funds, Distribution, Control Point Activity, Accounting and Procurement). Users enter requests to purchase and repair items or services using online VA forms or Purchase Card that allows tracking of the transactions. The Purchasing module uses a Prosthetics VistA Suite Graphical User Interface (GUI) application.
  
- The Electronic Record of Prosthetic Services (VAF 10-2319) tracks demographics, disability codes, new purchases, repairs/replacements, service cards, clothing allowance, automobile adaptive equipment, and Home Improvement Structural Alterations (HISA).
  
- The Lab module has Orthotic Lab, Restoration Lab, Shoe Last Clinics, Wheelchair Repair Shops, and the Denver Distribution Center. This module is accessible using a Prosthetics VistA Suite Graphical User Interface (GUI) application.
  
- The Inventory module tracks quantities of prosthetic items that facilities have in stock.
  
- The Administrative Home Oxygen module manages vendor billing and current prescriptions. Sites have the ability to update various information for billing (vendor, PSAS HCPCS, Fund...
Control Point, Item and Unit Cost) as appropriate.

- The Suspense module tracks patient requests for prosthetic appliances or services through Prosthetics or Computerized Patient Record System (CPRS).

The National Prosthetics Patient Database (NPPD) module captures medical center Prosthetic patient transaction data. The NPPD Detail Display Report is available through the Prosthetic VistA Suite Graphic User Interface (GUI) application.
## Quality Audiology and Speech Analysis and Reporting (QUASAR)

<table>
<thead>
<tr>
<th>Vista Module: QUASAR</th>
<th>Version: 3.0</th>
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</thead>
<tbody>
<tr>
<td>Namespace: ACKQ</td>
<td>Most Recent Patch:</td>
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</tbody>
</table>

Brief Description: Quality Audiology and Speech Analysis and Reporting (QUASAR) is a VistA software package written for the Audiology and Speech Pathology Service. QUASAR is used to enter, edit, and retrieve data for each episode of care.

<table>
<thead>
<tr>
<th>Business Function Framework Line(s) of Business:</th>
<th>Deliver Health Care</th>
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<tbody>
<tr>
<td>Business Function Framework Function(s):</td>
<td>Provide Ancillary Services</td>
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<tr>
<th>VHA Portfolio: Health Provider Systems</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business Owner: Audiology and Speech Pathology Service</td>
</tr>
</tbody>
</table>

Full Description:

### Features

- Provides automatic transmission of visit data to the Patient Care Encounter (PCE) program in order to incorporate QUASAR visit data in Ambulatory Care Reporting Program (ACRP) and in the Decision Support System (DSS).
- Produces a variety of reports useful to local managers, medical center management, and central planners.
- Allows for Generation of customized reports.
- Produces an automated Cost Distribution Report (CDR) RCS-10-01 41.
- Generates and processes Audiology compensation and pension visits through an agreement with the Automated Medical Information Exchange (AMIE) package.
- Allows input of a patient's audiogram and display of audiometric data in graphical or tabular format. The audiogram may then be signed and transmitted to the VA Denver Distribution Center (DDC) for inclusion in a patient's hearing aid order. (The audiogram will also be recorded in the DDC's national database of audiometric data.)
# Quality Management Integration Module

<table>
<thead>
<tr>
<th>Vista Module: Quality Management Integration Module</th>
<th>Version: 1.7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: QAQ</td>
<td>Most Recent Patch:</td>
</tr>
</tbody>
</table>

**Brief Description:** The QM Integration Module, (previously “Quality Assurance Integration”) contains utilities that are common to some or all of the QM software packages. It is part of the installation for all QM packages (via the the Combined Site Parameters Edit option.)

**Business Function Framework Line(s) of Business:** Provide Access to Health Care, Deliver Health Care

**Business Function Framework Function(s):** Provide Member Access, Provide Medical Services, Manage Health Records

**VHA Portfolio:** Business Informatics

| Business Owner: VHA CBO | OIT Project Manager: OIT |

**Full Description:** The QM Integration Module links the QM software through a QM Manager menu.

The QM Integration module consists of the following utilities.

- **Date Selector** — The date selector is found within many of the reports options. It lets the user choose the date range that is needed for the report.

- **Group Selector** — The group selector is a sort process that provides the ability to select a list of records. It lets the user select more than one item to print or view at a time. This reduces the number of key strokes needed to produce a specific outcome.

- **AD Hoc Report Generator** — The Ad Hoc Report Generator uses basic VA FileMan sort and print modifiers and adds the capability of building macros (often termed templates) for those reports that are routinely required.

- **Audit File** — The audit file builds an audit trail for each record in the QM packages. You can see the contents of the audit file in the Occurrence Screen software by using the Audit File Inquiry option. In other software, the audit trail is accessible to the IRM staff through VA FileMan.
Radiology/Nuclear Medicine

Vista Module: Radiology/Nuclear Medicine  Version: 5.0

Namespace: RA  Most Recent Patch:

Brief Description: Radiology/Nuclear Medicine is a comprehensive software package designed to assist with the functions related to processing patients for imaging examinations.

Business Function Framework Line(s) of Business:  Provide Access to Health Care, Deliver Health Care

Business Function Framework Function(s): Provide Member Access, Provide Medical Services, Manage Health Records

VHA Portfolio: Health Provider Systems

Business Owner: VHA  OIT Project Manager: OIT/PD/PSS/HPS

Full Description: The Radiology/Nuclear Medicine package automates the entire range of diagnostic functions performed in imaging departments, including order entry of requests, registration of patients for exams, processing of exams, recording of reports/results, verification of reports on-line, displaying/printing results for clinical staff, automatic tracking of requests/exams/reports, and generation of management statistics/reports, both recurring and ad hoc.

Features

Functionality is screened by Imaging Type to make it look as if there are separate sub-packages. Many options are also screened by or allow selection by division and/or imaging location.

- There is on-line patient registration for exams, automatic printing of Radiology orders and transcription of patient radiological/nuclear medicine reports.

- Management reports include workload, complications and ad hoc summaries, daily activity logs, examination statistics, and performance indicators.

- Health Level 7 (HL7) (e.g., voice-to-text and PACS equipment) standard for interfacing with non-VistA computer systems is supported for the exchange of radiology/nuclear medicine results.

- There is on-line physician verification of radiological/nuclear medicine exam reports using electronic signatures.

- Stop codes and procedures associated with a radiological/nuclear medicine exam are
automatically credited for reimbursement purposes.

- It interfaces with the Computerized Patient Record System module for entry of radiology/nuclear medicine requests and display of results to clinical staff.

- It interfaces with the Adverse Reaction Tracking (ART) module by allowing users to add contrast media reactions to ART via the Radiology/Nuclear Medicine package.

- It interfaces with the Women's Health module by automatically adding mammogram and ultrasound procedures for female patients to the Women's Health database.

- It supports entry of multiple diagnostic codes and multiple interpreting by residents and staff.

- There is a single combined report for a set of related procedures. This is a "print set" mechanism for entering a single report for all descendant cases registered from a parent order.

- It provides the ability to enter and edit information specific to radiopharmaceuticals for Nuclear Medicine.

- It allows on-line verification of "STAT" category requests.

- It allows for the selection and printing of multiple reports.
**Record Tracking**

**Vista Module: Record Tracking**

**Version: 2.0**

**Namespace: RT**

**Most Recent Patch:**

**Brief Description:** The Record Tracking module provides for the maintenance and control of health records and x-ray films to facilitate availability to a variety of users. The system offers a wide range of individual site-definable parameters such that it may be custom-tailored to specific needs and used in any type of file setting.

**Business Function Framework**

**Line(s) of Business:** Deliver Health Care

**Function(s):** Provide Ancillary Services, Manage Health Records

**VHA Portfolio:** Business Informatics

**Business Owner:** VHA

**OIT Project Manager:** OIT/PD/PSS/HP

**Full Description:** The Record Tracking module is integrated with other associated modules such as Radiology and Patient Information Management System.

The module supports requisitioning activities for individual records within a facility and between facilities, and automates file room functions in support of the following activities:

- Creation of new records/volumes
- Charge-out/check-in of records
- Inactivation/reactivation and deletion of records
- Printing of bar code labels
- Transfer of records to other facilities
- Recharging records to other borrowers
- Flagging a record as missing
- Record retirements

**Features**
Uses bar code technology, prints bar code labels for the charts, and uses bar code equipment to charge records.

Displays informational bulletins when a record is checked into a file room.

Bulletins may include the following information: pending requests for the record, the record has previously been flagged as missing, loose filing exists, the patient is currently an inpatient, or the record is being checked into a file room other than its home.

Offers a complete system for maintenance and control of records that may be used with ease in any type of file setting.

Produces a variety of reports associated with the module that may be used to assist management in workload analysis and control of records.

Creates pull lists to provide requests for records in conjunction with clinic scheduling and record retirement.
# Remote Order Entry System (ROES)

<table>
<thead>
<tr>
<th>Vista Module: Remote Order Entry (ROES)</th>
<th>Version: 3.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: RMPF</td>
<td>Most Recent Patch:</td>
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</tbody>
</table>

**Brief Description:** The Remote Order Entry System (ROES) is the front-end of the Denver Distribution Center’s (DDC) supply chain/order fulfillment production system. ROES is used by Department of Veterans Affairs (VA) clinicians to place orders for certain types of medical products and services that are maintained under contract by the DDC.

**Business Function Framework Line(s) of Business:** Manage Business Enabling Services

**Business Function Framework Function(s):** Manage VHA-wide Administrative Services, Conduct Supply Chain Operations

**VHA Portfolio:** Health Provider Systems

**Business Owner:** VHA  
**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** The most substantial product line handled through ROES is custom hearing aids. As implied by the name, custom hearing aids are highly specialized devices custom made for individual Veteran patients. Other product lines handled through ROES include stock hearing aids, hearing aid accessories and batteries, prosthetic items, aids for the visually impaired and assistive devices. The hearing aid repair is a line of service provided by the DDC and facilitated by ROES.

The ROES application and database integrates the DDC enterprise business functions of contracting/acquisition management, order fulfillment, distribution management, finance, and product life cycle support. Extensive order tracking, serialized device registration, patient/device history, and sales/financial reporting are also supported by the database.

**Features**

- ROES uses advanced technologies and practices in software design, supporting hardware platform, database management, and network integration.
- ROES also integrates Web-based application architecture with a VistA environment, obtaining an optimum mix of decentralized VistA interfacing with centralized data management.
- The database is optimized for the DDC's progressive procurement and distribution practices, advanced general business practices, and current VA regulations.
# Remote Procedure Call Broker (RPC)

<table>
<thead>
<tr>
<th>Vista Module: Remote Procedure Call Broker (RPC)</th>
<th>Version: 1.1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: XWB</td>
<td>Most Recent Patch</td>
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<tr>
<td>Brief Description: RPC enables for Veterans Health Information Systems and Technology Architecture (VistA) providing Windows-based graphical user interface (GUI) software applications.</td>
<td></td>
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<tr>
<td>Business Function Framework Line(s) of Business: Manage Business Enabling Services</td>
<td></td>
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<tr>
<td>Business Function Framework Function(s): Utilize Information Technology Services</td>
<td></td>
</tr>
<tr>
<td>VHA Portfolio: Common Services</td>
<td></td>
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<tr>
<td>Business Owner: VHA &amp; OIT</td>
<td>OIT Project Manager: OIT</td>
</tr>
<tr>
<td>Full Description: This type of software application typically runs as a client in a client/server environment. One of the challenges in creating such applications is establishing communication between the client workstation and VistA’s M-based servers. In a secure manner over a Transmission Control Protocol/Internet Protocol (TCP/IP) network, users need to be able to log onto a server, initiate activities on the server, and retrieve and update data on the server.</td>
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<tr>
<td>VistA’s Remote Procedure Call (RPC) Broker software provides functionality so that GUI developers can:</td>
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<tr>
<td>Establish a connection from a client workstation to a VistA M Server.</td>
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<tr>
<td>Run RPCs on the VistA M Server.</td>
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<tr>
<td>Return data to the client workstation.</td>
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<tr>
<td>The VistA M Server continuously runs an RPC Broker listener process whose purpose is to establish connections with clients. When the listener process receives a connection request from a client, it spawns a separate handler process, which then handles all communications with the client. Once connected, the client can execute Remote Procedure Calls on the VistA M Server. RPCs are written in M and accessed through the VistA M Server’s REMOTE PROCEDURE file (#8994).</td>
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<tr>
<td>Features:</td>
<td></td>
</tr>
<tr>
<td>- Broker Developer Kit (BDK)</td>
<td></td>
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<tr>
<td>- Dynamic Link Library</td>
<td></td>
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<tr>
<td>- Client/Server security</td>
<td></td>
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<tr>
<td>- Integrated Single Sign-On</td>
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<tr>
<td>- Silent Sign-On</td>
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<tr>
<td>- Shared Broker</td>
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<tr>
<td>- Non-callback Connection</td>
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<tr>
<td>- CCOW-enabled</td>
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<tr>
<td>- M-to-M Broker</td>
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<tr>
<td>- Broker Security Enhancement (BSE)</td>
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</table>
### Repositories: Administrative Data Repository (ADR)

<table>
<thead>
<tr>
<th>Vista Module: Repositories: Administrative Data Repository (ADR)</th>
<th>Version:</th>
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<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
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</table>

**Brief Description:** The ADR is a transactional data repository which serves as the authoritative source for selected VistA demographic and eligibility/enrollment information for all persons. The ADR houses information migrated from the Health Eligibility Center and Master Veteran Index.

**Business Function Framework Line(s) of Business:**

**Business Function Framework Function(s):**

**VHA Portfolio: Health Data Systems**

**Business Owner:** OIA  | **OIT Project Manager:** OIT

**Full Description:**

The Administrative Data Repository (ADR) Project includes the Data Migration Initiative (DMI) and Site Demographic Data Migration (SDDM) initiative.

The ADR Project primarily supports development of the Enrollment Systems Redesign (ESR) and Person Service applications and may support several additional VistA re-engineering projects. ADR incorporates standard administrative reference data from Standards & Terminology Services.
Repositories: Clinical Data Repository/Health Data Repository (CHDR)

<table>
<thead>
<tr>
<th>Vista Module: Repositories: Clinical Data Repository/Health Data Repository (CHDR) (AKA: Clinical Health Data Repository)</th>
<th>Version: 2.1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
</tr>
<tr>
<td>Brief Description: The Clinical Health Data Repository (CHDR) shares computable health record data elements between DoD’s Clinical Data Repository (CDR) and VA’s Health Data Repository (HDR)</td>
<td></td>
</tr>
<tr>
<td>Business Function Framework Line(s) of Business: Deliver Health Care, Manage Business Enabling Services</td>
<td></td>
</tr>
<tr>
<td>Business Function Framework Function(s): Provide Clinical Decision Support, Provide Ancillary Services, Manage Health Records, Utilize Information Technology Services</td>
<td></td>
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<tr>
<td>VHA Portfolio: Health Data Systems</td>
<td></td>
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<tr>
<td>Business Owner: OIA HI</td>
<td>OIT Project Manager: OIT/PD/PSS/HPS</td>
</tr>
</tbody>
</table>

Full Description: The CHDR generates standards-based, computable electronic health record (EHR) data elements between DoD’s Clinical Data Repository (CDR) and VA’s Health Data Repository (HDR) for patients identified and matched as Active Dual Consumers (ADCs) of both VA and DoD health care.

Clinical data for these “dual consumers” (patients receiving healthcare or expected to receive healthcare at both VA and DoD medical facilities.) Data for patients is stored at each agency’s local healthcare systems: at DoD this occurs in the Clinical Data Repository (CDR), a component of the Armed Forces Health Longitudinal Technology Application (AHLTA). At VA, the Health Data Repository (HDR) stores the CHDR data. The CHDR system is the link between the two repositories, and once the patient is marked “active,” the data exchange is enabled.

Most patients marked active are so marked by the DoD automated process. At VA, patients can be marked “active” manually, using the CHDR Administration Application Interface (CHDR Admin GUI.) After the computed data is exchanged, it can be used by each agency’s native healthcare information system. At VA, the integrated data can be viewed through VistAWeb while triggered Drug/Drug and/or Drug Allergy alerts will manifest in the Computerized Patient Record System (CPRS.)
# Repositories: Health Data Repository (HDR)

<table>
<thead>
<tr>
<th>Vista Module: Repositories: Health Data Repository (HDR) Data Warehouse (DW)</th>
<th>Version:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
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</table>

**Brief Description:** HDR is a national, clinical data storehouse that supports integrated, computable and/or viewable access to the patient’s longitudinal health record. The HDR serves as the authoritative source for data from DoD Clinical Data Repository and for the Home TeleHealth program.

**Business Function Framework Line(s) of Business:** Deliver Health Care, Manage Business Enabling Services

**Business Function Framework Function(s):** Manage Health Records, Utilize Information Technology Services

**VHA Portfolio: Health Data Systems**

**Business Owner:** OIA  
**OIT Project Manager:** OIT

**Full Description:** The Repositories Program supports storage of enterprise-wide, Veteran-centric clinical and administrative data via the Health Data Repository (HDR) and Administrative Data Repository (ADR) products. HDR, a relational database that stores discrete data rather than messages, enables provider to obtain integrated data views and acquire patient-specific clinical information to support treatment decisions.

**Features:**
- HDR Historical (Hx) provides historical clinical data from VistA in a computable and/or viewable access form to user interfaces such as RDI, CHDR, and VistAWeb.
- The HDR Data Warehouse (DW) meets the data needs of the VA research and analysis community without impacting database performance for the end-users.
## Resource Usage Monitor (RUM)

<table>
<thead>
<tr>
<th>Vista Module: Resource Usage Monitor (RUM)</th>
<th>Version: 2.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
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</tbody>
</table>

**Brief Description:** The Resource Usage Monitor (RUM) software is intended for use by staff responsible for the capacity planning functions at their respective facilities. RUM software provides Veterans Health Information Systems and Technology Architecture (VistA) option workload information.

**Business Function Framework Line(s) of Business:** Manage Business Enabling Services

**Business Function Framework Function(s):** Utilize Information Technology Services

**VHA Portfolio:** Common Services

**Business Owner:** VHA & OIT

**OIT Project Manager:** OIT

**Full Description:** Menus and options are provided locally at the respective sites to allow staff to accomplish and monitor workload/usage information.

Data collection activities in RUM obtain system and VistA option information from the each site and automatically transfer this data via network mail to the Capacity Planning National Database. RUM provides information regarding current and future VistA workload at VA sites.
### Scheduling

<table>
<thead>
<tr>
<th>Vista Module: Scheduling</th>
<th>Version: 5.3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: SD</td>
<td>Most Recent Patch:</td>
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</table>

**Brief Description:** The Scheduling module automates all aspects of the outpatient appointment process, including the ability to check in/check out patients, clinic set-up and maintenance, enrollment/scheduling/discharge of patients to and from various clinics, and the generation of managerial reports, statistical reports, patient letters, and workload reporting. It provides for multiple-appointment booking, which enables the user to schedule, at one time, numerous appointments on a consecutive day/week basis.

**Business Function Framework Line(s) of Business:** Provide Access to Health Care, Provide Health Care Administration

**Business Function Framework Function(s):** Provide Member Access, Perform Hospital Administration, Manage Health Records, Perform Financial Management, Utilize Information Technology Services

**VHA Portfolio: Business Informatics**

| Business Owner: VHA National Director of Systems Redesign | OIT Project Manager: OIT/PD/PSS/HPS |

**Full Description:**

The system may display numerous messages when an appointment is scheduled depending on the availability of the slot requested. These include notification that the appointment is an overbook, the patient already has an appointment scheduled for that date and time, or the appointment cannot be made due to previous inactivation of the designated clinic. In addition, certain classification questions are prompted during the check-out process (if applicable) to determine if treatment rendered was connected to special circumstances (such as Agent Orange, Ionizing Radiation, Persian Gulf, etc.). If an appointment cannot be scheduled because of limitations, the user is prompted to add the appointment information to a Wait List for future scheduling.

Patient Appointment Information gathers appointment data to be loaded into the National Database in Austin for statistical reporting. Patient appointments are scanned from September 1, 2002 to the present, and appointment data meeting specified criteria are transmitted to the Austin Information Technology Center (AITC). Subsequent transmissions will update the National Database. This additional data supplements the existing Clinic Appointment Wait Time extracts.
The functions within Scheduling currently fall into four major categories: Appointment Scheduling, Local Reporting (outputs), National Data Collection, and Module Set-Up and Maintenance.

**Features**

- Creates fixed or variable length clinic patterns.
- Provides on-line clinic availability and system identification of conditions such as first available appointment.
- Interacts with the Record Tracking module allowing chart request at the time of appointment scheduling.
- Generates cancellation, no-show, and pre-appointment letters.
- Provides on-line transmission of pertinent visit information to the national database at AITC.
- Patient Appointment Information functionality collects and formats data for Health Level Seven (HL7) batch transmission.
- **Ambulatory Care Reporting Project (ACRP)**
  - Provides clinical, diagnostic, and administrative data to assist in determination of resource utilization, corporate costs, forecasting, and healthcare planning. Identifies date, time, and provider of services provided, patient demographic data, and transmission of workload credit data to the National Patient Care Database (NPCDB).
- **Automated Service Connected Designation (ASCD)**
  - Automates Service Connected (SC) or Non-Service Connected (NSC) designation based upon clinician input (e.g., ICD or Related Disability Codes) during encounter processing, and lists potential billable and non-billable encounters.
- **Electronic Wait List (EWL)**
  - Automates placing patients on a Wait List or multiple wait lists for a Primary Care team or position, a scheduling service/specialty, or a specific clinic, provides reporting capabilities, and places a patient on wait list as needed when an appointment is cancelled by the clinic.
- **Patient Appointment Information Transmission (PAIT)**
  - Provides patient appointment wait time statistics to the National Patient Data Base at the (AITC) for reporting.
- **Primary Care Management Module (PCMM)**
  - Assists in maintaining accurate patient listings for primary care teams and panels, providing a Graphical User Interface (GUI) for creating positions and assigning staff to teams, as well as for assigning/unassigning patients to primary care teams and providers’ positions.
- **Recall Reminder**
  - Provides prompts to clinic staff for patients requiring return appointments when those appointments are greater than 90-120 days in the future, including ability to produce clinic recall letters or cards for patients to encourage them to schedule appointments.
# Shift Handoff Tool

<table>
<thead>
<tr>
<th><strong>Vista Module:</strong> Shift Handoff Tool</th>
<th><strong>Version:</strong> 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Namespace:</strong> CRHD</td>
<td><strong>Most Recent Patch:</strong></td>
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</tbody>
</table>

**Brief Description:** The Shift Handoff Tool standardizes information exchanged between physicians as they transfer patient care responsibilities incidental to changes of shifts.

**Business Function Framework Line(s) of Business:** Deliver Health Care

**Business Function Framework Function(s):** Provide Medical Services, Manage Health Records

**VHA Portfolio: Health Provider Systems**

**Business Owner:** Patient Care Services (PCS)  
**OIT Project Manager:** Service Delivery and Engineering (SDE)

**Full Description:** The Shift Handoff Tool had its beginnings in the “CAIRO” product originally developed by the Indianapolis VAMC Development Group. It provides standard data elements such as Allergies, Medications, Problems, History and Physical, Admitting Diagnosis, Labs, and Consults as part of the information elements routinely communicated Physician-to-Physician at shift handoff. This tool yields clear, readable and standardized-format communications that enhance patient safety and efficacy of care. The tool allows for information to be printed out and carried by physicians during rounds, facilitating collection of essential notes that are then input to update the Shift Handoff Tool information for the next shift’s providers.
## Single Sign On/User Context (SSO/UC)

<table>
<thead>
<tr>
<th>Vista Module: Single Sign On/User Context (SSO/UC)</th>
<th>Version:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
</tr>
<tr>
<td>Brief Description: Single sign-on (SSO) service with interfaces to VistA and non-VistA systems.</td>
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<tr>
<td>Business Function Framework Line(s) of Business: Manage Business Enabling Services</td>
<td></td>
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<tr>
<td>Business Function Framework Function(s): Utilize Information Technology Services</td>
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<tr>
<td>VHA Portfolio: Common Services</td>
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<tr>
<td>Business Owner: OIT &amp; VHA</td>
<td>OIT Project Manager: OIT</td>
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</table>

Full Description: The goal of the Single Sign-on/User Context (SSO/UC) Project is to provide a secure single sign-on architecture. This architecture allows users to authenticate and sign on to multiple applications that are Clinical Content Object Workgroup (CCOW-enabled and SSO/UC-aware using a single set of credentials, which will reduce the need for multiple IDs and passwords in the VistA clinician desktop environment. SSO capability is implemented within the framework of the HL7 CCOW User Context standard.

The CCOW User Context standard:

- Is a standard of the HL7 standards body.
- Provides coordination among client healthcare applications, allowing them to synchronize around several CCOW subjects and share context (e.g., Patient, Encounter, and User Context).
- Ensures secure and consistent context management
Social Work

Vista Module: Social Work  Version: 3.0

Namespace: SOW  Most Recent Patch:

Brief Description: The Social Work package is designed to facilitate the Social Work Service functions within a medical facility and is composed of Case Management, Clinical Assessment, and Community Resource.

Business Function Framework Line(s) of Business: Deliver Health Care

Business Function Framework Function(s): Provide Care Management, Provide Ancillary Services

VHA Portfolio: Health Provider Systems

Business Owner: VHA  OIT Project Manager: OIT/PD/PSS/HPS

Full Description: Within the Social Work module, the Case Management software is used for managing social work cases (e.g., opening and closing cases, recording problems and outcomes, storing referrals) and for generation of reports that are transmitted quarterly to VA Central Office. The Clinical Assessment software provides a method of identifying, upon admission, patients most likely to require social work assistance before or after discharge. The hospital stay may be minimized with the anticipation of patients’ domestic or social needs prior to discharge. The Community Resource software allows the social worker to build a network of local community agencies that can serve the veteran. The network enables the worker to expediently match the needs of the client to the existing community resources, thereby increasing productivity and viable referrals.

Features

- Automatic screening that uses predetermined and site-specific criteria (e.g., Veteran with no permanent address) to determine if a patient needs the services of Social Work Service prior to discharge.
- Creates networks of local community agencies (e.g., alcohol treatment, housing, health) that can serve Veterans.
- Compiles a list of community resources by user-selected category (e.g., name, town, type, zip code).
- Identifies local residential care homes and maintains detailed information on the homes (e.g., rates, vacancies, residents, date home assessed by a VA social worker).
- Allows workers to track patients and homes in the residential care home program by home and patient registry printouts.
- Facilitates mailings to residential care home sponsors by printing address labels.
- Tracks caseloads by recording the openings and closings of cases.
- Compiles and produces monthly and quarterly reports and transmits data electronically module.
- Provides patient teaching and monitoring necessary for VHA-wide system of coordination/care management services.
- Provides for standardized Psychosocial Database/Assessment for inclusion in patient health records. Also, provides mechanism for entering progress notes.
- Provides for automated quality management monitors and reviews.
**Spinal Cord Injury and Disorders Outcomes (SCIDO)**

<table>
<thead>
<tr>
<th>Vista Module: Social Work</th>
<th>Version: 3.0</th>
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<tbody>
<tr>
<td>Namespace: SPN</td>
<td>Most Recent Patch:</td>
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</table>

**Brief Description:** The Spinal Cord Injury and Disorders Outcomes (SCIDO) 3.0 application converts the Spinal Cord Dysfunction (SCD) Registry from a legacy command line system to a client server platform with a graphical user interface (GUI) and enhanced capabilities.

**Business Function Framework Line(s) of Business:** Manage Public Health, Deliver Health Care

**Business Function Framework Function(s):** Provide Medical Registry Service, Provide Care Management

<table>
<thead>
<tr>
<th>VHA Portfolio: Health Provider Systems</th>
<th>OIT Project Manager: OIT/PD/PSS/HPS</th>
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<tbody>
<tr>
<td>Business Owner: VHA</td>
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</table>

**Full Description:** The Spinal Cord Injury and Disorders Outcomes (SCIDO) application is a system for compiling spinal cord injury and disorders information. The SCIDO application accesses several other Veterans Health Information Systems and Technology Architecture (VistA) programs that contain information regarding diagnoses, prescriptions, surgical procedures, laboratory tests, radiological exams, patient demographics, hospital admissions, and clinical visits. This access allows clinical staff to take advantage of the data supported by VistA. Information can be summarized at three levels: local medical center, SCI region, or national research access.
### Standards and Terminology Services (STS)

<table>
<thead>
<tr>
<th>Vista Module: Standards and Terminology (STS):</th>
<th>Version: 1.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brief Description: STS is the authoritative source for clinical and administrative data standards for the VHA.</td>
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<tr>
<td>Business Function Framework Line(s) of Business: Manage Business Enabling Services</td>
<td></td>
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<tr>
<td>Business Function Framework Function(s): Utilize Information Technology Services</td>
<td></td>
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<tr>
<td>VHA Portfolio: Health Data Systems</td>
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<tr>
<td>Business Owner: OIA</td>
<td>OIT Project Manager: OIT</td>
</tr>
</tbody>
</table>

**Full Description:** STS enables the interoperability and exchange of standardized & computable information among VA facilities, VistA 1.5/2.0 Applications and Services, and with government and private healthcare partners as well as intragovermental agencies projects such as Consolidated Health Informatics and the Health Information Technology Standards Panel.

**Data Standardization:** Standard reference terminology is critical to VA’s capability to share computable and interoperable health information across VA and with non-VA partners which is critical in automated processes such as drug-drug and drug-allergy order checks and other clinical decision support. Access to complete and accurate health information for a Veteran at any site supports patient safety, and contributes to informed clinical decision-making, personalized patient care, and improved population health.

**Terminology Services:** The foundation of STS’s terminology services is the Terminology Model which describes the properties, attributes, designations, and relationships for each standard concept to clearly define each term. The deployment service establishes and maintains consistent standard reference files across all VistA databases, and the standardization process remains responsive to the needs of end users and patients through the New Term Rapid Turnaround (NTRT) process, which allows new terms to be requested from the field. After domain-specific teams of subject matter experts approve clinical terminology requests, new terms are deployed to all VistA databases; similarly, NTRT is used to inactivate terms that are no longer part of the standard.

Administrative data is standardized via deployment of standard reference tables. STS also uses standards from external Standards Development Organizations (SDOs) such as Systemized Nomenclature of Medicine—Clinical Terminology (SNOMED CT®), and the International Classification of Diseases—Ninth Revision—Clinical Modification (ICD-9-CM), Current Procedural Terminology (CPT and others. STS also provides terminology mediation for cross agency interoperability efforts.
## Statistical Analysis of Global Growth (SAGG)

<table>
<thead>
<tr>
<th>Vista Module: Secure Software Development (SSD)</th>
<th>Version: 2.0</th>
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<tbody>
<tr>
<td>Namespace: KMPS</td>
<td>Most Recent Patch:</td>
</tr>
<tr>
<td>Brief Description: The Veterans Health Administration (VHA) developed the Statistical Analysis of Global Growth (SAGG) software in order to obtain more accurate information regarding the current and future Veterans Health Information Systems and Technology Architecture (VistA) database growth rates at the VA Medical Centers (VAMCs).</td>
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<tr>
<td>Business Function Framework Line(s) of Business: Managing Business Enabling Services</td>
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<tr>
<td>Business Function Framework Function(s): Utilize Information Technology Services</td>
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<tr>
<td>VHA Portfolio: Common Services</td>
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<tr>
<td>Business Owner: VHA &amp; OIT</td>
<td>OIT Project Manager: OIT</td>
</tr>
</tbody>
</table>
| Full Description: The Statistical Analysis of Global Growth (SAGG) software is intended to be utilized by staff responsible for the capacity management functions at their respective facilities. The SAGG software allows the facility to review database, software, and file size information.
## Surgery

**Vista Module:** Surgery  
**Version:** 3.0  
**Namespace:** SR  
**Most Recent Patch:**

**Brief Description:** The Surgery package is designed to be used by surgeons, surgical residents, anesthesia providers, operating room nurses, and other surgical staff. This software integrates scheduling surgical cases and tracking clinical patient data to provide a variety of administrative and clinical reports.

**Business Function Framework Line(s) of Business:** Provide Health Care Administration, Deliver Health Care

**Business Function Framework Function(s):** Perform Hospital Administration, Monitor Clinical Performance, Provide Medical Services

**VHA Portfolio:** Health Provider Systems  
**Business Owner:** National Surgery Office  
**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** In the operating room, the software provides on-line access to the clinical record and automatically generates post-operative reports, including the Nurse Intraoperative Report. Automated scheduling provides better operating room utilization and greater ease in distributing the operating room schedule, and the software generates monthly, quarterly, and annual surgical reports, thus reducing the amount of clinical overhead associated with the management of the Surgical Service. The Surgery software facilitates morbidity and mortality tracking and other complications, providing vital information to the Chief of Surgery and to VA Central Office.

### Features

- Allows a surgeon to generate requests for surgical procedures.
- Allows operating room scheduling managers to assign operating rooms and time slots and generates operating room schedules.
- Allows for the rescheduling or cancellation of operative procedures.
- Facilitates entry of information specific to an individual surgical case (e.g., staff, times, diagnoses, complications, anesthesia).
- Provides for on-line entry of data inside the operating room during the actual operative procedure.
- Generates patient records and nurse reports.
- Produces management reports (e.g., Annual Report of Surgical Procedures, Attending Surgeons...
Produce quarterly and annual reports for VA Central Office.

- Provides secured access to lists of cancellations and the Morbidity and Mortality Report.
- Extracts data necessary to monitor risk management issues.
- Provides additional checks for Transfusion Error Risk Management.
- Includes a generic Health Level Seven (HL7) interface for use with commercial Automated Anesthesia Information Systems.
- Includes an interface to the Patient Care Encounters (PCE) software that allows ambulatory procedure workload information to be transmitted to the National Patient Care Database (NPCD) at AITC.

**Risk Assessment**

- Provides tracking mechanism for both surgical risk and observed-to-expected (O/E) risk-adjusted outcomes across facilities for all surgeries for eight major sub-specialties and for cardiac surgery.
- Provides for entry of non-cardiac assessment information including pre-operative information, laboratory test results, operation information, and intraoperative and post-operative occurrences.
- Provides for entry of cardiac assessment information, including clinical information, cardiac catheterization and angiographic data, operative risk summary data, cardiac procedures requiring cardio-pulmonary bypass, and intraoperative and post-operative occurrences.
- Creates a Surgery Risk Assessment on each patient assessed and lists these by categories including complete, incomplete, and transmitted assessments, as well as list of major surgical cases and all surgical cases.
- Generates monthly Surgical Case Workload Report.
- Prints follow-up letters to patients 30 days after a procedure.
### Survey Generator

<table>
<thead>
<tr>
<th>Vista Module: Survey Generator</th>
<th>Version: 2.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace: QAP</td>
<td>Most Recent Patch:</td>
</tr>
<tr>
<td>Brief Description: The Survey Generator is a software package which allows creation and maintenance of computerized survey forms.</td>
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<tr>
<td>Business Function Framework Line(s) of Business: Provide Healthcare Administration</td>
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<tr>
<td>Business Function Framework Function(s): Manage Customer Relations, Utilize Information Technology Services</td>
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<tr>
<td>VHA Portfolio: Common Services</td>
<td></td>
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<tr>
<td>Business Owner: VHA</td>
<td>OIT Project Manager: OIT/PD/PSS/HPS</td>
</tr>
<tr>
<td>Full Description: The Survey Generator is a software package which allows creation and maintenance of computerized survey forms. It also provides for entry of any respondents answers via computer terminal or a hard copy filled out and then entered by any designated person. In addition, it provides useful statistical information by survey alone or by demographic data items.</td>
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</tbody>
</table>
**VA FileMan**

<table>
<thead>
<tr>
<th>Vista Module: VA FileMan</th>
<th>Version: 22.0</th>
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<tbody>
<tr>
<td>Namespace: DI</td>
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<td></td>
<td>Most Recent Patch:</td>
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</table>

**Brief Description:** VA FileMan is the VistA database management system (DBMS). It runs in any American National Standards Institute (ANSI) environment. The majority of VHA clinical data is stored in VA FileMan files and is retrieved and accessed through VA FileMan Application Program Interfaces (API) and user interfaces.

**Business Function Framework Line(s) of Business:** Deliver Health Care, Manage Business Enabling Services

**Business Function Framework Function(s):** Manage Health Records, Utilize Information Technology Services

**VHA Portfolio:** Common Services

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<thead>
<tr>
<th>Business Owner: VHA</th>
<th>OIT Project Manager: OIT</th>
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</table>

**Full Description:** VA FileMan is the database management system for the Veterans Health Information Systems and Technology Architecture (VistA) environment.

**Features:**

**For users**
- Standalone user interface for adding, editing, printing, and searching data
- Form-based editing
- Flexible, extensive report module
- Data interchange with outside applications (import and export tools)

**For developers**
- Full support for forms-based interfaces to the database
- Full database access for client-server operations
- Easy scrolling-mode interfaces to the database and full database access
- Data archiving and transport tools
- Supports keys and compound cross-references
- Performance yielded by the use of M and VA FileMan
- Portability
- Openness
- Native support for Keys and compound cross references
## Veterans Point of Service

<table>
<thead>
<tr>
<th>Vista Module: Veterans Point of Service</th>
<th>Version:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
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<tr>
<td>Brief Description: Point of Service supports the VHA’s implementation of interactive kiosks which allow Veterans and VA staff to perform various tasks.</td>
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</tbody>
</table>

### Business Function Framework Line(s) of Business:

### Business Function Framework Function(s):

### VHA Portfolio: Business Informatics

<table>
<thead>
<tr>
<th>Business Owner: CBO</th>
<th>OIT Project Manager: OIT/PD/PSS/HPS</th>
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### Full Description:

The VA’s vision for the VETLINK VA Point of Service (VPS) kiosk is to streamline and improve patient clinical and administrative processes across the VA healthcare network and to provide standard, easy-to-use capabilities for patients and employees to access and update information and perform business transactions through incremental releases. The VA’s vision includes a modular and configurable solution that may be tailored to fit each facility’s individual needs.

The VETLINK VPS Kiosk Application Server uses the RPC BROKER to make calls to the Remote Procedures (RPCs) residing on the VistA host.

### Features

- **VPS KIOSK INTERFACE** This broker type option contains the RPCs that support the VPS Kiosk system. The VETLINK VPS Kiosk system will call upon these RPCs for specific events triggered by the kiosk machine accessed by a patient (e.g., at check-in) or by VAMC staff. The following remote procedures are attached to this menu.
  - **VPS GET PATIENT DEMOGRAPHIC** - This RPC will accept patient SSN as input then retrieve patient demographic data from VistA.
  - **VPS GET CLINIC** - This RPC will accept a partial or full Clinic Name as input then retrieves Clinic IEN, Clinic Name, Clinic Physical Location from VistA based on the matching Clinic Name characters from the INPUT String.
  - **XWB GET VARIABLE VALUE** - This pre-existing RPC BROKER RPC accepts the name of a variable that will be evaluated and its value returned to the server. For example, this RPC
may be called with a parameter like DUZ that will be returned as 123456.

- ORWPT FULLSSN - This pre-existing OE/RR RPC accepts an SSN in the format 999999999(P), and returns a list of matching patients.
- ORWPT LAST5 - This pre-existing OE/RR RPC returns a list of patients matching the string of Last Name Initial Last 4 SSN (Initial/Last 4 look-up to PATIENT file).
### Veterans Identification Card (VIC)

**Vista Module:** Veteran ID Card (VIC)  
**Version:** 1.0

**Brief Description:** The Veteran Identification Card (VIC) replaces the embossed data card as a means of identifying veteran patients entitled to care and services at Department of Veterans Affairs (DVA) health care facilities.

**Business Function Framework Line(s) of Business:** Provide Access to Health Care, Provide Health Care Administration, Deliver Healthcare

**Business Function Framework Function(s):** Provide Member Access, Perform Hospital Administration, Manage Health Records

**VHA Portfolio:** Business Informatics

**Business Owner:** CBO  
**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:**

The replacement VIC displays a larger color photograph of the veteran and the veteran’s name. There is no embossed information on the card. A VistA print option provides labels with the patient’s identifying information. The labels can be affixed to medical record forms in lieu of using the embossed cards to imprint this information when pre-printed forms are not available.

A color photograph of the veteran is taken at the local medical center using the Patient Image Capture Software (PICS) on a Clinical Context Object Workgroup (CCOW) enabled workstation. The photograph is sent to the local VistA imaging server, making it available to the Computerized Patient Record System (CPRS) and other VistA applications. The photograph and VistA patient data is also transmitted to the National Card Management Directory (NCMD) in Silver Spring, MD (a repository of VIC data).

Once the Health Eligibility Center (HEC) has verified the patient’s eligibility, the veteran has been assigned an appropriate enrollment status, and also assigned a national Integration Control Number (ICN), the VIC data and images are transmitted to the external card print vendor using secure protocols. The external card print vendor creates the VIC cards and mails them to the veterans.

For homeless veterans, the external card print vendor mails the cards to the appropriate medical center, which then issues the cards to those veterans.
Features

- Veteran’s picture, name, and care type (i.e., service connected) on card face as well as POW and Purple Heart status as appropriate.
- Magnetic stripe on card encoded with the patient’s name, social security number, date of birth, sex, patient type, veteran status, and service-connected indicator.
<table>
<thead>
<tr>
<th>Vista Module: Veterans Personal Finance System (VPFS)</th>
<th>Version: #1.1.3</th>
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<tbody>
<tr>
<td>Namespace:</td>
<td>Most Recent Patch:</td>
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<tr>
<td>Brief Description: The Integrated Patient Funds software automates the “bank-like” functionality that VA provides for patients to manage their personal funds while hospitalized in a VA medical facility.</td>
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<tr>
<td>Business Function Framework Line(s) of Business: Provide Healthcare Administration</td>
<td></td>
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<tr>
<td>Business Function Framework Function(s): Perform Hospital Administration</td>
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<tr>
<td>VHA Portfolio: Business Informatics</td>
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</tr>
<tr>
<td>Business Owner: VHA CBO</td>
<td>OIT Project Manager: OIT/PD/PSS/HPS</td>
</tr>
<tr>
<td>Full Description: VPFS replaces the Personal Funds of Patients (PFOP) system that was used previously. VPFS looks different from PFOP because it is a web-based application; however, its design and functionality are modeled after PFOP. You can perform all of the functions in VPFS that were available in PFOP, with the exception of a few functions that are no longer needed because of the new built-in security controls.</td>
<td></td>
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<tr>
<td>One of the major changes is that VPFS is a centralized system. With PFOP, each site used a stand-alone copy of the software and there were differences between local versions, such as data structures, business rules, etc. With VPFS, all sites access the same centralized application using a web browser over the VHA secure Intranet. VPFS stores all data for all sites in one centralized database. Access to the data in the database is controlled by security software that limits access according to VistA site and user role.</td>
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</table>
**Virtual Patient Record (VPR)**

<table>
<thead>
<tr>
<th>Vista Module: Virtual Patient Record (VPR)</th>
<th>Version: 1.0</th>
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<tbody>
<tr>
<td><strong>Namespace:</strong></td>
<td><strong>Most Recent Patch:</strong></td>
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<tr>
<td><strong>Brief Description:</strong> Virtual Patient Record (VPR) is a foundation software package component of the Health Management Platform architecture. This architecture is part of the scope of the Health Informatics Initiative.</td>
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</table>

| **Business Function Framework Line(s) of Business:** Manage Business Enabling Services |
| **Business Function Framework Function(s):** Utilize Information Technology Services |

| **VHA Portfolio:** Health Provider Systems |
| **Business Owner:** | **OIT Project Manager:** |

**Full Description:** VPR extracts patient data from domains at local and remote VistA sites to provide a cached view of patient charts. It provides normalized fields with common field names and data structures across domains. VPR includes two remote procedure calls (RPCs), one comprised of routines that extract data from VistA and the other that returns the current version number for VPR.
### VistA Data Extraction Framework (VDEF)

<table>
<thead>
<tr>
<th>Vista Module: VistA Data Extraction Framework (VDEF)</th>
<th>Version: 1.0</th>
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</thead>
<tbody>
<tr>
<td><strong>Namespace:</strong> VDEF</td>
<td><strong>Most Recent Patch:</strong></td>
</tr>
<tr>
<td>Brief Description: VistA Data Extraction Framework (VDEF) is a VistA package that uses hard-coded M routines to create and deliver Health Level 7 (HL7) messages.</td>
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<tr>
<td><strong>Business Function Framework Line(s) of Business:</strong> Manage Business Enabling Services</td>
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<tr>
<td><strong>Business Function Framework Function(s):</strong> Utilize Information Technology Services</td>
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<tr>
<td><strong>VHA Portfolio:</strong> Common Services</td>
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<tr>
<td><strong>Business Owner:</strong> VHA &amp; OIT</td>
<td><strong>OIT Project Manager:</strong> OIT</td>
</tr>
<tr>
<td>Full Description: The VDEF package supports queuing requests for messages, controls the timing of message creation, monitors the request queue, and records errors encountered during message creation. The hard-coded programs are M programs belonging to an application’s namespace. Messages are delivered using the VistA HL7 package.</td>
<td></td>
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</tbody>
</table>
Vista Module: VistA Imaging System  
Version: 3.0  

Namespace: MAG  
Most Recent Patch:  

Brief Description: VistA Imaging facilitates medical decision-making by delivering complete multimedia patient information to the clinician’s desktop in an integrated manner. Windows-based workstations, which are interfaced to the main hospital system in a client-server architecture, make images and associated text data available at all times anywhere in the hospital or across VA.

Business Function Framework Line(s) of Business: Deliver Health Care, Manage Business Enabling Services  
Business Function Framework Function(s): Provide Ancillary Services, Utilize Information Technology Services  

VHA Portfolio: Health Provider Systems  
OIT Project Manager: OIT/PD/PSS/HPS  

Full Description: VistA Imaging handles high quality image data from many specialties, including cardiology, pulmonary and gastrointestinal medicine, pathology, radiology, hematology, and nuclear medicine. VistA Imaging can also provide text reports from the hospital information system, scanned documents, and electrocardiograms. VistA Imaging is integrated with the Computerized Patient Record System (CPRS) to provide a comprehensive electronic patient record with access to images from across VA as well as DoD, and provides VA images to DoD as well. VistA Imaging’s diagnostic display software (VistARad) can be used when a commercial Picture Archiving and Communication System (PACS) is unavailable for the filmless interpretation of radiology studies and for workflow management.

VistA Imaging is made up of the following components:

- Core Infrastructure
- Document and Ancillary Imaging
- Filmless Radiology
- Telemedicine

Features:
- Provides capture, display, manipulation, and management functions for a wide variety of medical images such as radiographs, sonograms, EKG tracings, gastroenterology studies, pulmonary bronchoscope exams, podiatry, dermatology, and ophthalmology images. VistA Imaging can store and display any sort of multimedia data, including digital images, motion video clips, graphics, scanned documents, and audio files.
- Integrated with CPRS, allowing users to view images automatically for a selected patient. When a user views a radiology report or progress note in CPRS, the associated images are easily
available.
- Provides a standard interface between VistA and commercial PACS.
- Automatically acquires complete studies from DICOM-compliant modalities (CT, MRI, digital x-ray, ultrasound, etc.), associates the studies with the correct patient and report, and stores the studies in VistA Imaging for inclusion in the electronic patient record.
- Provides image file storage, management, and retrieval from magnetic and optical disk servers and supports data capture, storage, and retrieval over a local or wide area network (WAN).
- Provides access to electronic medical records from remote VA medical facilities over the VA intranet.

**Core Infrastructure**
- Includes the components used to capture, store, and display all types of images. Images can be captured using video cameras, digital cameras, document scanners, x-ray scanners, and imported files created by electronically by commercial systems. Images can also be directly acquired from DICOM-compliant devices such as CT scanners, MR scanners and digital x-ray machines. Components include:
  - DICOM text gateways, which provide patient and order information to medical devices (such as CT scanners and digital radiography systems), allowing selection of the examination to be performed. The data provided by DICOM text gateways complies with the DICOM Modality Worklist standard.
  - DICOM image gateways, which allow VistA Imaging to receive images from PACS or acquisition devices. Image gateways can also be used to transfer images from the VistA system to any DICOM-compliant devices for display, printing, or teleradiology purposes.
  - Windows-based workstation software for clinical image display and capture.
  - The Background Processor, which manages image storage on various network devices, including magnetic storage (RAID) and optical storage (jukebox) as a long-term archive.
  - The VistA Imaging database, which manages image information and the relationship between images and study data.
  - The commercially available equipment required by VistA Imaging, including magnetic servers, optical disk jukeboxes, and utility workstations.
- Features of the Core Imaging Infrastructure
  - Acquires images and multimedia data.
  - Stores images to allow immediate access and long-term permanent storage.
  - Communicates and displays images in a timely manner.
  - Processes various types of images from multiple specialties.
  - Links images to the VistA integrated patient record so that they can be retrieved by patient or study/progress note.
  - Protects security and privacy of images, and prevents alteration of images after capture.
  - Enables remote viewing and capture of images.
    - Automatically acquires complete studies from DICOM-compliant modalities (CT, MRI, digital x-ray, ultrasound, etc.), associates the studies with the correct patient and report, and stores the studies in VistA Imaging for inclusion in the electronic patient record.
    - Provides image file storage, management, and retrieval from magnetic...
and optical disk servers and supports data capture, storage, and retrieval over a local or wide area network (WAN).
- Provides access to electronic medical records from remote VA medical facilities over the VA intranet.

- **Document and Ancillary Imaging** provides document imaging and management and integration to the medical record.
  - **DOCUMENT IMAGING** allows scanned and electronically generated documents to be associated with the online patient record and displayed on clinical workstations. Benefits and features include:
    - Online availability of all information in the electronic patient record, including handwritten papers, drawings, signed documents, and medical correspondence.
    - Linkage of paper-based patient information to the electronic patient record, making all patient information quickly available and easily retrievable through a single workstation.
    - Immediate availability of critical documents, such as advance directives and informed consent forms, at the time they are needed.
    - Elimination of lost or misfiled medical chart information.
    - Interfaces to commercial document scanning systems and systems that generate documents electronically.
    - Scanning and indexing of black-and-white, grayscale, and color documents, including: signed advance directives, consent forms, annotated drawings, external medical records documents, and administrative documents such as Means Test forms.
    - Ability to annotate standard online diagrams and save the annotated diagrams with a progress note.
    - Automatic transmission of signed means test documents to the Health Eligibility Center (HEC), in compliance with VA requirements.
    - Document image storage in short- and long term- storage devices.
    - Display and printing of document images for clinical and administrative purposes.
  - **ANCILLARY IMAGING** captures, stores, and displays images for a particular service or specialty. This may be accomplished using the Clinical Capture workstation or by interfaces to commercial systems. Features include:
    - Interfaces to commercial EKG systems for display of electrocardiograms on clinical workstations.
    - Supports automatic DICOM interfaces for capture of specialty images from compliant systems (DICOM Modality Worklist Conformance Requirements are provided to sites purchasing specialty equipment).
    - Processes various types of images from multiple specialties. DICOM and Clinical Workstation support for ophthalmology, dental, endoscopy, pathology, cardiology, and other specialties is provided.
    - Links images to the VistA integrated patient record so that they can be retrieved by patient or study/progress note.
    - Protects the security and privacy of images, and prevents alteration of images after capture.
Filmless Radiology uses high-resolution workstations and high-speed servers to allow radiology departments to operate without generating x-ray film when a commercial Picture Archiving and Communication System (PACS) is unavailable. Workstations running VistaRAD, VistA Imaging’s diagnostic image display software, are used by radiologists for the online interpretation of images acquired by CR, CT, MRI, and other modalities. Features include:

- Highly customizable hanging protocols.
- User-specific profiles that are applied regardless of login location.
- Integration with voice dictation systems.
- Automatic data integrity checks and notifications.
- Easy access to image review, analysis, and manipulation tools.
- Optional on-demand routing for telemedicine/teleradiology.
- Direct access to requisitions, reports, and health summary data.
- Compliant with HIPAA, the Federal Privacy Act, and VA security policies.
- Key image identification and saved annotations.
- A ‘ReadList’ function that allows a user to update the status of an open exam and immediately display the next unread exam in a single step.
- Site-configurable exam lists.

Telemedicine VistA Imaging Telemedicine provides immediate access to images from anywhere in the VHA, including imported images and reports. Functionality includes remote viewing and access to images during disaster situations. This “Remote Image Views” capability allows access to the complete electronic health care record no matter where the patient is within the VA healthcare network. Features include:

- Immediate access to images from any other point on the VHA healthcare network without contacting the other facility.
- Avoidance of redundant testing that is often done in urgent situations if images and reports are not readily available.
- Reduction of patient wait times because all information is immediately available.
- More informed decision making because all images and reports can be reviewed, providing a clear picture of the patient’s care in the past and of the treatment the patient has been receiving.
- No need to make hard copy of images or films to send with the patient for a referral visit to another VAMC.
- Images and reports from studies done at hospitals outside the VA network, once imported into VistA Imaging, are available immediately everywhere.
- Patients can view their own images with their clinician, even if those images are stored at another facility.
- Clinicians can access all images and scanned documents at home or from remote clinics.
- In case of disasters, the images of displaced patients are available at other VA facilities.
VistaLink

Vista Module: VistALink

Version: 1.6

Namespace: XOBV

Brief Description: VistALink enables applications to communicate with VistA/M systems. It provides a synchronous communication mechanism from Java-based applications to M.

Business Function Framework Line(s) of Business: Manage Business Enabling Services

Business Function Framework Function(s): Utilize Information Technology Services

VHA Portfolio: Common Services

Business Owner: VHA

OIT Project Manager: OIT

Full Description: VistALink consists of an M-side listener and Java-side adapter libraries compliant with the J2EE Connectors specification for Enterprise Information System (EIS) adapters. VistALink comports to system architecture requirements, and supplements other alternatives for communication between M-based and JAVA-based applications, including Remote Procedure Call (RPC) Broke, HL7 interface messaging software, and Web Services.

Features

- Client/Server connectivity from Java client to M
- J2EE Application Server connectivity to M—Supports applications and services running on a J2EE application server, enabling them to initiate a call to an M server and execute RPCs.
- Implements the Java 2 Enterprise Edition (J2EE) Connectors specification.
- Supports VistA modules requiring this communication capability, including Patient Advocate Tracking System (PATS), Veterans Personal Finance System (VPFS) and Blind Rehabilitation.
VistaWeb

<table>
<thead>
<tr>
<th>Vista Module: VistaWeb</th>
<th>Version: 16.0</th>
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<tbody>
<tr>
<td>Namespace: WEBV</td>
<td>Most Recent Patch:</td>
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</table>

Brief Description: VistAWeb is a read-only intranet web application. It delivers to the client a uniform, well-defined suite of objects from the medical domain, including objects such as patient, provider, progress note, lab results, prescriptions, allergies, and imaging.

Business Function Framework Line(s) of Business: Deliver Health Care, Manage Business Enabling Services

Business Function Framework Function(s): Manage Health Records, Utilize Information Technology Services

VHA Portfolio: Health Provider Systems

Business Owner: VHA

OIT Project Manager: OIT/PD/PSS/HPS

Full Description: VistAWeb enables VA clinicians to view VistA data generated from their own as well as remote Veterans Affairs Medical Centers (VAMCs) as well as information from the Department of Defense (DoD). With significant ease of use, flexibility, and reliability, VistAWeb is a preferred method for remotely accessing such information, and it is used, in addition, for reviewing remote patient information found in VistA, the Bidirectional Health Information Exchange (BHIE) system, the Health Data Repository II (HDR II) databases, and the eHealth Exchange. This capability with the eHealth Exchange renders VistAWeb a key component of Virtual Lifetime Electronic Record (VLER) electronic health information exchange.

VistAWeb reflects the reports behavior of the Computerized Patient Record System (CPRS) and Remote Data View (RDV), and affords robust and timely retrieval of remote-site patient data, supplementing CPRS/RDV.
### Visual Impairment Service Team (VIST)

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<td>Namespace: ANRV</td>
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<td>Brief Description: The Visual Impairment Service Team (VIST) module enhances the efficiency of the Visual Impairment Service Team programs within the Department of Veterans Affairs (VA).</td>
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<td>Business Function Framework Line(s) of Business: Deliver Health Care</td>
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<td>Business Function Framework Function(s): Provide Care Management, Provide Ancillary Services</td>
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<td>VHA Portfolio: Health Provider Systems</td>
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<tr>
<td>Business Owner:</td>
<td>OIT Project Manager:</td>
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<td>Full Description: With this program, Visual Impairment Service Teams are able to easily manage and track activities and services provided to blinded Veterans in their service area. This program integrates several fields of patient data to produce a variety of reports. The VIST patient record printout can be used in place of VA Form (10-1371) and is a more versatile document than the card. Semi-annual Automated Management Information System (AMIS) reports can be run and Veterans can be added or deleted from the rolls as indicated.</td>
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## Vitals/Measurements

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<td><strong>Namespace:</strong></td>
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**Brief Description:** The Vitals/Measurements application is designed to store, in the patient's electronic health record, all vital signs and various measurements associated with a patient's hospital stay or outpatient clinic visit.

**Business Function Framework Line(s) of Business:** Deliver Health Care

**Business Function Framework Function(s):** Provide Medical Services

**VHA Portfolio:** Health Provider Systems

**Business Owner:** Patient Care Services (PCS)  **OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** Data can be accessed by several Veterans Health Information Systems and Technology Architecture VistA applications (e.g., Health Summary and Pharmacy) that interface with the Vitals/Measurements application.

### Features

- Contains a Graphical User Interface (GUI) to make editing and viewing of data easier.
- Supports documentation of a patient's vital signs (e.g., temperature, pulse, and respiration).
- Tracks a patient's height, weight, central venous pressure (CVP), circumference/girth, and oxygen saturation via oximetry with supplemental oxygen information.
- Supports documentation of detailed or positional blood pressures for a patient (i.e., bilateral blood pressures taken in a sitting, standing, and lying position).
- Associates qualifiers (alpha characters appended to the measurement's numeric value) to provide a more detailed description of the patient's vital measurements.
- Prints patient's cumulative measurements on the Vital Signs Record and the Cumulative Vitals Report.
- Displays latest information on all of the patient's vital measurements in both metric equivalents and U.S. customary units along with the date/time the information was obtained.
- Prints expanded vitals graphic report, which includes the patient's intake and output when present in the patient's database (refer to the Intake and Output application).
- Allows facilities to establish hospital-wide high and low values for each vital sign or
measurement.
- Identifies abnormal patient values on vitals/measurements reports (those values outside the high and low range).
- Allows for printing of the following patient measurements in a linear graphic format when a compatible (programmable) printer is used: (otherwise plotted data values are not connected by a line)
  - Temperature and pulse.
  - Blood pressure.
  - Weight.
  - Pulse oximetry and respiration.
  - Pain.
- Supports the archiving and purging of patient measurements.
- Passes patient vitals/measurements information (numeric values only) within a specific date range to the Health Summary application.
- Records a reason for the omission of a patient's vitals/measurements.
Voluntary Service System (VSS)

Vista Module: Voluntary Service System (VSS)  Version: 4.0

<table>
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Brief Description: VSS is a national-level application replacing the site-based Voluntary Timekeeping System (VTK); it is used to track and manage the hours of service contributed by volunteers and volunteer organizations at VA facilities.

Business Function Framework Line(s) of Business: Provide Health Care Administration, Manage Business Enabling Services

Business Function Framework Function(s): Perform Hospital Administration, Manage Human Resources

VHA Portfolio: Business Informatics

Business Owner: VHA Office of Voluntary Service Programs  OIT Project Manager: OIT/PD/PSS/HPS

Full Description: The VSS application helps voluntary staff accomplish their tasks more easily through a Web-based graphical user interface. Users at the local and national level are able to generate a wider array of reports about volunteers and sponsoring organizations. In addition, volunteers are able to log their own hours and print meal tickets themselves at secure log-in “kiosks.”

VSS users interact directly with a national, centralized database, and consolidated national reporting no longer requires data transmissions back and forth between sites and the Austin Information Technology Center (AITC). Direct access to data provides instantaneous updates and up-to-minute reporting for all users. Central Office administrators and voluntary staff thus have broader and more reliable data for managing volunteer services.

Features

- Provides multi-lingual interaction with volunteers during log-in.
- Supports and enhances security for multiple division facilities.
- Displays/prints entire master record for a single volunteer.
- Provides local printing of address labels and telephone lists.
- Reduces workload required to input mass award code changes.
- Prints individual meal ticket for volunteer after Auto Log-in.
- Provides real-time national reporting of data for all stations.
# Women’s Health

**Vista Module: Women’s Health**  
**Version: 1.0**

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**Brief Description:** The purpose of the Women’s Health package is to establish a computerized tracking system that generates aggregate data at the facility level to assist in the assessment of various aspects of care provided to women Veterans, such as efficiency of care, outcomes of care, and quality of care for individual patients.

**Business Function Framework Line(s) of Business:** Manage Public Health, Deliver Health Care, Manage Business Enabling Services

**Business Function Framework Function(s):** Provide Medical Registry Service, Provide Medical Services, Utilize Information Technology Services

**VHA Portfolio: Health Provider Systems**

**Business Owner: Women’s Health Services**  
**OIT Project Manager: OIT/PD/PSS/HPS**

**Full Description:** This module provides data to assist in population health areas, including determining if there are differences in disease frequency between women Veterans and the general population; providing information for clinical guideline development; and determining if preventive health screening guidelines developed for the general population are applicable, or need modification in the women Veteran population. This VistA module also provides data on workload, preventive screening, women Veterans health profile, outcome measurement, and provider profiling.

## Features

The Women’s Health software is composed of three main modules:

- Patient Management
- Management Reports
- Manager's Functions.

- **Patient Management** is the portion of the software used to manage individual patient care, that is, their procedures, due dates, and correspondence. Under the Patient Management menu, it is possible to maintain patient data such as the date of the next PAP smear, colposcopy or mammogram, the patient's pregnancy and her EDC (due date), as well as the patient's current PAP regimen.
o It is also possible to track the patient's individual procedures: the date performed, the 
provider and clinic, the results or diagnosis, etc. Notifications (letters and phone calls) may 
also be tracked.

o A file of form letters has been included in the software, and these letters may be edited 
and personalized for a clinic's particular needs. Reminder letters can be queued months 
in advance of a future appointment, then printed and mailed out shortly before the 
tentative appointment.

☐ Management Reports is the portion of the software used to print epidemiological reports, such 
as the number of women who received a mammogram for the selected time period or the 
number of patients having abnormal PAP results during a selected time period. Under the 
Management Reports menu, it is possible to produce lists of patients who are past their due dates 
for follow-up procedures. It is also possible to store program statistics by date for later 
comparison of program trends and progress.

☐ Manager's Functions are that portion of the software that provides the ADPAC (Automated 
Data Program Application Coordinator) with a set of utilities for configuring the software to 
the specific needs of the respective site. It also provides utilities for other program needs, 
such as customizing tables, making special edits to patient data (e.g., pregnancy log, PAP 
regimen log), printing notification letters, running error reports, and documenting 
laboratory results. By using the File Maintenance options under the Manager's Functions 
menu, it is possible to maintain site-specific parameters, such as the text of form letters, the 
types of notifications and their synonyms, how and when letters get printed, and several 
defaults relating to dates.
## Wounded Injured and Ill Warriors

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**Brief Description:** Wounded Injured and Ill Warriors (WII) module was developed as a tool to provide accurate and timely personnel and health related data to the Department of Defense/Defense Finance and Accounting Service (DoD/DFAS) supporting adequate maintenance of pay and entitlements for all wounded warriors.

**Business Function Framework Line(s) of Business:** Deliver Health Care

**Business Function Framework Function(s):** Provide Medical Services, Provide Ancillary Services

**VHA Portfolio:** Business Informatics

**Business Owner:** VHA

**OIT Project Manager:** OIT/PD/PSS/HPS

**Full Description:** Through a collaborative effort between VHA and DoD/DFAS, a Memorandum of Understanding (MOU) was reached to provide defined data elements to DFAS for tracking of active duty service members who were admitted to VA inpatient facilities. The MOU established the authorities and agreement for the exchange of information relating to admissions and discharges from VA inpatient facilities of active duty personnel.

There is a weekly collection process of admissions and discharges for active duty service members at each VA inpatient facility. This collection and consolidation of data into a single repository is reviewed and transmitted to DFAS to a central data collection point. Each facility runs the weekly background job which collects data based on admissions and discharges for patients with a Primary or Other Eligibility of TRICARE, SHARING AGREEMENT or OTHER FEDERAL AGENCY. Upon completion of the background job, VistA will send an email message to the local WII ADT REVIEWER mail group alerting facility staff on whether there are entries requiring approval. The message indicates either potential or no potential active duty admissions/discharges for the past week. If there were potential admissions/discharges, then the message will state there are active duty admissions, reflect the number of potential active duty admissions or discharges needing review, the record count, and the time period of the report. Staff will review and process those potential active duty cases.
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Other Resources

Vista Documentation Library: This library contains a collection of available end-user documentation for all current applications (software packages), and also includes some tools not listed in the monograph. All documents can be viewed, downloaded, and printed. Some documents have links to a Web version, and may optionally have an archive file (.ZIP or .EXE) containing the Web pages for download.

http://www.va.gov/vdl

VHA Enterprise Architecture: VHA developed an Enterprise Architecture that provides a technical framework to promote a one-technology vision across the Department so that all systems are interoperable.

http://www.ea.oit.va.gov/index.asp

Corporate Database Monograph: The Corporate Database Monograph provides an overview of the active VHA national databases. Information contained in this monograph allows stakeholders to identify opportunities for database consolidations, determine authoritative data sources, and work with VHA Data Quality committees to implement data standardization and quality control processes for corporate databases.

http://vaww.va.gov/.../nds/CorporateDatabasesMonograph.asp

Vista Monograph on the Internet: http://www.va.gov/vista_monograph/