Anticoagulation Management Tool
Installation/Implementation Guide
(Patch OR*3.0*447)

Initial Release: March 2010
Revised: February 2018

Department of Veterans Affairs
Office of Enterprise Development
Product Development
## Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Description of Change</th>
<th>Author(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feb 2018</td>
<td>Patch OR *447</td>
<td>H. Chipman, K. Watson</td>
</tr>
<tr>
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<td>Patch OR *391</td>
<td>T. Robinson</td>
</tr>
<tr>
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<td>Patch OR *354</td>
<td>K. Kellick</td>
</tr>
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<td>Patch OR *339</td>
<td>K. Kellick</td>
</tr>
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</tr>
</tbody>
</table>
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Introduction

This tool was developed at the Portland VA Medical Center to help simplify the complex, time consuming processes required to manage outpatients on anticoagulation medication.

The tool enables the user to enter, review, and continuously update all information connected with patient anticoagulation management. With the Anticoagulation Management Tool (AMT), 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 viewable on an Anticoagulation flow sheet located on the Computerized Patient Record System (CPRS) Reports tab. AMT provides clinic staff a mechanism of ensuring continuous patient monitoring with a built-in mechanism that alerts staff when patients haven’t been monitored in a timely period. A Lost to Follow-up list is maintained to insure that staff knows of patients who need attention.

In preparation for the VA’s transition to become two factor authentication (2FA) compliant the Anticoagulation Management Tool (GUI) requires an upgrade to Delphi version XE8 in order to implement the new Remote Procedure Call (RPC) Broker allowing compliance. Patch OR*3.0*447 is the patch that will accomplish that update. OR*3.0*447 is made up of an informational MUMPS patch and a new Windows executable file (AntiCoagulate.exe).

Scope

The scope of this manual covers the installation steps performed by a Pharmacy Service Automated Data Processing Application Coordinator (ADPAC) or Clinical Application Coordinator (CAC). Other steps, such as performing the Kernel Installation and Distribution System (KIDS) install and downloading the ZIP file from the anonymous server used for software distribution are performed by members of the Information Technology (IT) or Information Resources Management (IRM) staff, depending on the size and organization of your medical center. These steps are covered in the Patch Description that accompanies the server side (M) code of this application.

The remainder of the manual is from the initial installation of AMT and previous patches. The information should help the users configure AMT.

Screen Capture Conventions

In this manual, user responses are shown in bold type. In most cases, you need only enter the first few letters to increase speed and accuracy. Pressing the Return or Enter key, which is indicated by the symbol <Enter>, must follow every response you enter. This symbol is not shown, but is implied, following bold type entries.

Enter a caret, indicated by the symbol (^), at almost any prompt to terminate the line of questioning and return to the previous level in the routine. Continue entering up-arrows to exit the system.
Online Help

In the VistA roll and scroll interface, online help is available at almost any prompt in the software by entering a single question mark (?). This will provide information to help you answer the prompt. In some instances, entering double (??) or triple (???) question marks will provide more detailed information.

The Anti-Coagulation Management (AMT) tool executable also has online help that can be accessed by using the Help | Contents menu item. Users can then use the Contents, Index, or Search features to locate information about the various features of the AMT tool.

Installation of Patch OR*3.0*447

The authoritative source for instructions pertaining to the installation for OR*3.0*447 Anticoagulation Management Tool (AMT) is the patch description available on FORUM.

Pre-Conditions

Before the AMT can be installed, the following packages and patches must be installed and fully patched in your accounts.

<table>
<thead>
<tr>
<th>Application Name</th>
<th>Version</th>
</tr>
</thead>
<tbody>
<tr>
<td>Authorization/Subscription Utility (ASU)</td>
<td>V 1.0</td>
</tr>
<tr>
<td>Consult/Request Tracking</td>
<td>V 2.5</td>
</tr>
<tr>
<td>Kernel</td>
<td>V. 8.0</td>
</tr>
<tr>
<td>Laboratory</td>
<td>V. 5.2</td>
</tr>
<tr>
<td>Order Entry/Results Reporting (OE/RR)</td>
<td>V. 3.0</td>
</tr>
<tr>
<td>Patient Care Encounter (PCE)</td>
<td>V. 1.0</td>
</tr>
<tr>
<td>RPC Broker</td>
<td>V 1.1</td>
</tr>
<tr>
<td>Text Integration Utilities (TIU)</td>
<td>V 1.0</td>
</tr>
<tr>
<td>ToolKit</td>
<td>V. 7.3</td>
</tr>
<tr>
<td>VA FileMan</td>
<td>V. 22.0</td>
</tr>
</tbody>
</table>

Software Retrieval

To obtain the current client- and server-side software, use FTP to retrieve OR_30_447.ZIP from one of the following OI Field Offices' ANONYMOUS.SOFTWARE directories:

<table>
<thead>
<tr>
<th>OI Field Office</th>
<th>FTP Address</th>
<th>Directory</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hines</td>
<td>ftp.fo-hines.med.va.gov</td>
<td>anonymous.software</td>
</tr>
<tr>
<td>Salt Lake City</td>
<td>ftp.fo-slc.med.va.gov</td>
<td>anonymous.software</td>
</tr>
</tbody>
</table>
The software distribution includes these files:

<table>
<thead>
<tr>
<th>File Name</th>
<th>Retrieval Format</th>
<th>Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>OR_30_447.ZIP</td>
<td>BINARY</td>
<td>2.865 MB</td>
</tr>
</tbody>
</table>

The ZIP file will contain the following files so that sites can install as they would like:

- AntiCoagulate.exe
- Anticoag_help_file.hlp
- Anticoag help file.cnt
- AntiCoagulate.map
- CVVisit.rav
- MAppt No FAX Labs.rav
- MAppt.rav

**Server-Side Installation**

There are no M routine updates for patch OR*3.0*447.
Configuring Clinics with Default Codes and Additional Indications

After successful installation of AMT, IT staff should confer with local CACs and AMT users to:

1. Set the appropriate values for the Automatic Primary and Secondary Indications for Care to be used in each Anticoagulation Clinic. To receive proper workload credit, these should be set as follows:
   - Auto Primary Indic for Care (ICD-9-CM) V58.83
   - Auto Secondary Indic for Care (ICD-9-CM) V58.61
   - Auto Primary Indic for Care (ICD-10-CM) Z51.81
   - Auto Secondary Ind for Care (ICD-10-CM) Z79.01

This can be done using the ORAM ANTICOAGULATION CLINIC PARAMETERS VistA option, under the ORAM ANTICOAGULATION SETUP menu.

Set up the Anticoagulation Parameters per Clinic

Next, you’ll need to set parameters for one or more clinic locations, using the same Anticoagulation Clinic Parameters option:
Note:

All that’s required to use the Anticoagulation Management Tool (AMT) for more than one clinic is to repeat the following parameter setup for each clinic.

Before starting the clinic parameter setup, gather the information you need. The following page contains a worksheet for gathering clinic-specific information. Any parameters left blank on this level inherit the Division parameter.

One major addition to the clinic parameters are the CPT codes AMT uses for different kinds of contacts. These codes may be sensitive to variables such as Inpatient or Outpatient as well as the qualifications of the provider. On close examination you may find that a clinic that is offered daily is staffed by a PharmD on Monday, Tuesday, and Friday and an MD on Wednesday and Thursday. On close examination you actually have two clinics here with a need for different CPT codes. Consult with the coding experts in your facility for guidance. (Both clinics should share the same team lists and the team lists will be processes as if there were only one clinic.)

Make a copy of it for each clinic you are setting up.
### Anticoagulation Management Clinic Parameter Worksheet:

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Value (Clinic)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinic Name</td>
<td></td>
</tr>
<tr>
<td>Anticoagulation Team (All)</td>
<td></td>
</tr>
<tr>
<td>Anticoagulation Team (Complex)</td>
<td></td>
</tr>
<tr>
<td>Address Line 1</td>
<td></td>
</tr>
<tr>
<td>Address Line 2</td>
<td></td>
</tr>
<tr>
<td>Address Line 3</td>
<td></td>
</tr>
<tr>
<td>Clinic Phone Number</td>
<td></td>
</tr>
<tr>
<td>Clinic FAX Number</td>
<td></td>
</tr>
<tr>
<td>Toll Free Phone Number</td>
<td></td>
</tr>
<tr>
<td>Point of Contact Name</td>
<td></td>
</tr>
<tr>
<td>Signature Block Name or Clinic</td>
<td></td>
</tr>
<tr>
<td>Signature Block Title</td>
<td></td>
</tr>
<tr>
<td>Consult Link Enabled (Y or N)</td>
<td></td>
</tr>
<tr>
<td>Consult Request Service Name</td>
<td></td>
</tr>
<tr>
<td>PCE Link Enabled (Y or N)</td>
<td></td>
</tr>
<tr>
<td>Auto Primary Indic for Care (ICD-9-CM)</td>
<td></td>
</tr>
<tr>
<td>Auto Secondary Indic for Care (ICD-9-CM)</td>
<td></td>
</tr>
<tr>
<td>Auto Primary Indic for Care (ICD-10-CM)</td>
<td></td>
</tr>
<tr>
<td>Auto Secondary Ind for Care (ICD-10-CM)</td>
<td></td>
</tr>
<tr>
<td>Simple Phone Visit (CPT)</td>
<td></td>
</tr>
<tr>
<td>Complex Phone Visit (CPT)</td>
<td></td>
</tr>
<tr>
<td>Letter To Patient (CPT)</td>
<td></td>
</tr>
<tr>
<td>Orientation Class (CPT)</td>
<td></td>
</tr>
<tr>
<td>Initial Office Visit (CPT)</td>
<td></td>
</tr>
<tr>
<td>Subsequent Visit (CPT)</td>
<td></td>
</tr>
<tr>
<td>Anticoagulation VISIT Clinic Location</td>
<td></td>
</tr>
<tr>
<td>Anticoagulation PHONE Clinic Location</td>
<td></td>
</tr>
<tr>
<td>Anticoagulation NON-COUNT Clinic</td>
<td></td>
</tr>
<tr>
<td>Default Pill Strength</td>
<td></td>
</tr>
<tr>
<td>Include Time with Next INR Date (Y or 0)</td>
<td></td>
</tr>
<tr>
<td>Look-back Days for Appointment Matching</td>
<td></td>
</tr>
<tr>
<td>Look-ahead Days for Appointment Matching</td>
<td></td>
</tr>
</tbody>
</table>
This is a screen capture of the clinic parameter setup:

```
Select GUI Parameters Option: COAG  GUI Anticoagulation Parameters
   D  Division-wide Anticoagulation Parameters
   C  Anticoagulation Clinic Parameters

Select GUI Anticoagulation Parameters Option: C  Anticoagulation Clinic Parameters
Select CLINIC: SLC - ANTICOAGULATION  CPRSPROVIDER,SEVEN

Anticoagulation Clinic Params for Location: SLC - ANTICOAGULATION
--------------------------------------------------------------------------------
Clinic Name
Anticoagulation Team (All)
Anticoagulation Team (Complex)
Address Line 1
Address Line 2
Address Line 3
Clinic Phone Number
Clinic FAX Number
Toll Free Phone Number
Point of Contact Name
Signature Block Name or Clinic
Signature Block Title
Consult Link Enabled
Consult Request Service Name
PCE Link Enabled
Automatic Indication for Care
Simple Phone Visit (CPT)
Complex Phone Visit (CPT)
Letter To Patient (CPT)
Orientation Class (CPT)
Initial Office Visit (CPT)
Subsequent Visit (CPT)
Anticoagulation VISIT Clinic Location
Anticoagulation PHONE Clinic Location
Anticoagulation NON-COUNT Clinic
Default Pill Strength
Include Time with Next INR Date
Look-back Days for Appointment Matching
Look-ahead Days for Appointment Matching
--------------------------------------------------------------------------------
Clinic Name: Anticoagulation Main
Anticoagulation Team (All): Anticoagulation M3 Replace <Enter>
Anticoagulation Team (Complex): AMT6A
Address Line 1: VA Medical Center
Address Line 2: 0001 Nonexistent Drive
Address Line 3: Salt Lake City, UT 84148
Clinic Phone Number: (801)000-0092x2222
Clinic FAX Number: (801)000-1096
Toll Free Phone Number: 1-(800)000-4012
Point of Contact Name: Anticoagulation Clinic
Signature Block Name or Clinic: Clinical Pharmacist
Signature Block Title: Anticoagulation Clinic
Consult Link Enabled: YES
Consult Request Service Name: ANTICOAGULATION MANAGEMENT  ANTICOAGULATION MANAGEMENT
PCE Link Enabled: YES
Auto Primary Indic for Care (ICD-9-CM): V85.83
Auto Secondary Indic for Care (ICD-9-CM): V58.61
Auto Primary Indic for Care (ICD-10-CM): Z51.81
Auto Secondary Ind: for Care (ICD-10-CM): Z79.01
Simple Phone Visit (CPT) : <Enter>
Complex Phone Visit (CPT) : <Enter>
Letter To Patient (CPT) : <Enter>
Orientation Class (CPT) : <Enter>
Initial Office Visit (CPT) : <Enter>
```

CPT codes entered for the clinic override the codes entered for the division. Leave these blank if the division level codes work.
2. (Optional) Sites can review the items used in the two parameters for additional indications for care: ORAM INDICATIONS FOR CARE and ORAM I10 INDICATIONS FOR CARE.
Client Installation Instructions

The software distribution includes following files:

- ANTICOAG_HELP_FILE.chm – the Windows help file
- ANTICOAGULATE.EXE – the Windows executable file

Placement of Client Software: Local vs. Network

ANTCOAGULATE.EXE and the help file ANTICOAG_HELP_FILE.CHM need to be copied to a common directory on each workstation used by AMT Clinicians (e.g., C:\Program Files (x86)\Vista\Anticoagulate), or placed on a shared network directory (e.g., \whaisl\XYZ\Anticoagulate), at the site's discretion. Network latency may result in longer launch times, if a network directory is chosen. However, this cost may be offset by increased ease of applying software updates.

You may wish to consider the following rule of thumb:

If the number of workstations on which the client software would need to be installed and updated exceeds ten, then you may wish to place the client software on a shared network directory. Otherwise, place the software locally, to optimize for performance.

Regardless of your decision, the ANTICOAGULATE.EXE and ANTICOAG_HELP_FILE.CHM files must always be installed together in the same directory, if the online help feature is to function properly.

IMPORTANT: Also, please note that the Tools Menu execution of the program does not work unless the .exe is in the same directory on each workstation.

Network Installation

If you have run the software from a server, you can still do that.

To install the ANTICOAGULATE.EXE and ANTICOAG_HELP_FILE.CHM on a server, use the following steps:

1. Replace the old versions of the files on the server.
2. From the .zip file, move the manuals to the appropriate location where users can access them.
3. Verify that the new version of AMT is working.
4. If the new version is working correctly, you can delete the old help files with the .hlp and the .cnt extensions.

Manual Client Installation

To install the application manually on each workstation, the site can copy the OR_30_447.zip locally and then unzip the files and place the files in the appropriate locations. The default location is c:\program files (x86)\vista\AMT. The person installing the software can choose to change the location.

Note: Remember that the ANTICOAGULATE.EXE is usually run from the Tools menu in CPRS. You will need to ensure that it is installed in the same location for the Tools menu item to work correctly. Also, remember that the ANTICOAGULATE.EXE and ANTICOAG_HELP_FILE.CHM files must be in the same directory for the help file to work correctly.
Obtaining Available Documentation Instructions

The following document will be distributed with OR*3.0*447. It will be located on the [VA Document Library (VDL)].

- ORAMIG.PDF – Acrobat version of this manual
- ORAMIG.DOC – Microsoft Word version of this manual

As with all software releases, the .PDF versions of the documentation is the official version and the one you should rely on for further distribution of the entire manual. The .DOC files are a courtesy to medical centers who want to divide out parts of the manuals, optionally with local.
Part B: Configuration from Previous AMT Version

This part of the manual is retained for sites to have previous configuration information only.

Pre-Conditions

Before the AMT can be installed, the following packages and patches must be installed and fully patched in your accounts.

<table>
<thead>
<tr>
<th>Application Name</th>
<th>Version</th>
</tr>
</thead>
<tbody>
<tr>
<td>Authorization/Subscription Utility (ASU)</td>
<td>V 1.0</td>
</tr>
<tr>
<td>Consult/Request Tracking</td>
<td>V 2.5</td>
</tr>
<tr>
<td>Kernel</td>
<td>V 8.0</td>
</tr>
<tr>
<td>Laboratory</td>
<td>V 5.2</td>
</tr>
<tr>
<td>Order Entry/Results Reporting (OE/RR)</td>
<td>V 3.0</td>
</tr>
<tr>
<td>Patient Care Encounter (PCE)</td>
<td>V 1.0</td>
</tr>
<tr>
<td>RPC Broker</td>
<td>V 1.1</td>
</tr>
<tr>
<td>Text Integration Utilities (TIU)</td>
<td>V 1.0</td>
</tr>
<tr>
<td>ToolKit</td>
<td>V 7.3</td>
</tr>
<tr>
<td>VA FileMan</td>
<td>V 22.0</td>
</tr>
<tr>
<td>Visit Tracking</td>
<td>V 2.0</td>
</tr>
</tbody>
</table>

Client Installation Instructions:

This information was from the previous patches and is retained here for the site’s reference.

OR*3.0*391:

AMT was previously updated for the International Classification of Diseases, Tenth Revision (ICD-10) coding system when it is implemented. Patch OR*3.0*391 was the patch that accomplished that update.

The installation for patch OR*3.0*391 contained the file OR_30_391.zip and OR_30_391.KID.

The ZIP file contained the following files:

- AMT_1_0_391_7.msi
- AntiCoagulate.exe
- Anticoag_help_file.chm
- The manual set:
  - ORAMIG.DOC
  - ORAMIG.PDF
  - ORAMTM.DOC
  - ORAMTM.PDF
  - ORAMUM.DOC
The M routines for patch OR*3.0*391 were included in the OR_3_391.KID. After downloading the files, perform the server install of the OR*3.0*391 released patch by following these steps:

1. Verify that patch OR*3.0*361 is installed on system before attempting to install OR*3.0*391.
2. From the Kernel Installation & Distribution System menu, select the Installation menu:

<table>
<thead>
<tr>
<th>KIDS Main Menu (XPD MAIN):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Edits and Distribution ...</td>
</tr>
<tr>
<td>Utilities ...</td>
</tr>
<tr>
<td>Installation ...</td>
</tr>
<tr>
<td>Patch Monitor Main Menu ...</td>
</tr>
<tr>
<td>Select Kernel Installation &amp; Distribution System &lt;TEST ACCOUNT&gt; Option:</td>
</tr>
<tr>
<td>INSTALLATION</td>
</tr>
</tbody>
</table>
1. From this menu, choose to Load a Distribution and enter the location of the Host File OR_3_391.KID.

| 1 | Load a Distribution          |
| 2 | Verify Checksums in Transport Global |
| 3 | Print Transport Global       |
| 4 | Compare Transport Global to Current System |
| 5 | Backup a Transport Global   |
| 6 | Install Package(s)          |
|   | Restart Install of Package(s) |
|   | Unload a Distribution       |

Select Installation <TEST ACCOUNT> Option: Load a Distribution
Enter a Host File: <Path to KID File>OR_30_391.KID

KIDS Distribution saved on Jan 28, 2015@09:55:11
Comment: OR*3*391 TEST v7

This Distribution contains Transport Globals for the following Package(s):
OR*3.0*391
Distribution OK!

Want to Continue with Load? YES// <Enter>
Loading Distribution...

OR*3.0*391
Use INSTALL NAME: OR*3.0*391 to install this Distribution.

2. From the same menu, you may select to use the following options: (when prompted for INSTALL NAME, enter OR*3.0*391).

| 1 | Load a Distribution          |
| 2 | Verify Checksums in Transport Global |
| 3 | Print Transport Global       |
| 4 | Compare Transport Global to Current System |
| 5 | Backup a Transport Global   |
| 6 | Install Package(s)          |
|   | Restart Install of Package(s) |
|   | Unload a Distribution       |

Select Installation <TEST ACCOUNT> Option: 2 Verify Checksums in Transport Global
Select INSTALL NAME: OR,391 OR*3.0*391 4/17/15@11:52:51
=> OR*3*391 TEST v7 ;Created on Jan 28, 2015@09:55:11

This Distribution was loaded on Apr 17, 2015@11:52:51 with header of
OR*3*391 TEST v7 ;Created on Jan 28, 2015@09:55:11
It consisted of the following Install(s):
OR*3.0*391

Want each Routine Listed with Checksums: Yes// <Enter> YES
DEVICE: HOME// <Enter> TELNET PORT

PACKAGE: OR*3.0*391  Apr 17, 2015 11:57 am
ORAM Calculated 83839096
ORAM1 Calculated 175474289
ORAM2 Calculated 58023259
ORAMSET Calculated 59301848
ORAMX Calculated 169673089
ORAMX1 Calculated 81414252
ORY391 Calculated 58110854

7 Routines checked, 0 failed.

Sites can also do the following:

a. The option PRINT TRANSPORT GLOBAL is an optional function for the installation of this patch. It can provide printed documentation of the components contained in the KIDS build, but again it is optional.

b. The option COMPARE TRANSPORT GLOBAL TO CURRENT SYSTEM can be run because there is a routine included in this patch that is already on your system. All other routines in the patch are new routines.

c. The option to BACKUP A TRANSPORT GLOBAL should be run also because there is one routine already on your system, but all the other routines installed are new to the system.

2. To install the patch Select option #6 INSTALL PACKAG(S)

```
1      Load a Distribution
2      Verify Checksums in Transport Global
3      Print Transport Global
4      Compare Transport Global to Current System
5      Backup a Transport Global
6      Install Package(s)

Select INSTALL NAME: OR*3.0*391
This Distribution was loaded on Apr 17, 2015@12:07:28 with header of
OR*3.0*391 TEST v7 ;Created on Jan 28, 2015@09:55:11
It consisted of the following Install(s):
OR*3.0*391
Checking Install for Package OR*3.0*391
```

3. When Prompted "Want KIDS to INHIBIT LOGONs during the install? O//" respond NO.

4. When Prompted "Want to DISABLE Scheduled Options, Menu Options, and Protocols? NO//" respond NO.

Enter the Device you want to print the Install messages.
You can queue the install by enter a 'Q' at the device prompt.
Enter a '^' to abort the install.

DEVICE: HOME // <Enter> HOME
OR*3.0*391

Installing Recurrent PE = 416.2
Installing TIA = 435.9
Installing Valve-Mech = V43.3
Installing Valve-Tissue = V42.2
Updating Routine file...
Updating KIDS files...
OR*3.0*391 Installed.
   Apr 17, 2015@12:09:32

Not a production UCI

NO Install Message sent

100% Complete

Install Completed

OR*3*307:
The installation for patch OR*3.0*307 contained the file OR_30_307.zip. This file was a bundled .ZIP archive and included the following files:

- ANTICOAG HELP FILE.cnt – the help table of contents file
- ANTICOAG_HELP_FILE.HLP – the Windows help file
- ANTICOAGULATE.EXE – the Windows executable file
- CVISIT.RAV – the template file for missed visits
- MAPPT.RAV – the template file for new dosages
- MAPPT NO FAX LABS.RAV – alternate template file for new dosages
- ORAMIG.PDF – Acrobat version of this manual
- ORAMIG.DOC – Microsoft Word version of this manual
- ORAMTM.PDF – Acrobat version of the Technical Manual
- ORAMTM.DOC – Microsoft Word version of the Technical manual
- ORAMUM.PDF – Acrobat version of the User Manual
- ORAMUM.DOC – Microsoft Word version of the User Manual

Sites were instructed to unZIP file OR_30_307.ZIP to a temporary location either on a server or on your workstation depending upon local policies for software installation.
As with all software releases, the .PDF versions of the documentation it the official version and the one you should rely on for further distribution of the entire manual. The .DOC files are a courtesy to medical centers who want to divide out parts of the manuals, optionally with local.

The help files previously consisted of the ANTICOAG HELP FILE.cnt and ANTICOAG_HELP_FILE.HLP. With the new help file Anticoag_help_file.chm, the previous help files can be removed.

Other File Placement

*It is against VA security policy to use FAXed results from an outside laboratory*

The CVISIT.RAV, MAPPT.RAV, and MAPPT NO FAX LABS.RAV files should be placed in a shared network directory on a file server. These are Rave Reports Template files, which define the format for Letters that your clinicians will send to patients enrolled in the Anticoagulation Management Clinic.

VA Security Policy does NOT allow FAXed results from outside laboratories. Therefore your letters must not reference faxed results from outside laboratories. To remove that reference in the letters you must rename the file MAPPT.RAV to some other name, for example: MAPPT0.RAV, then rename the file MAPPT NO FAX LABS.RAV to MAPPT.RAV. The path to this directory will be identified for the application when you set the Division-wide Parameters, as described in the Installation/Implementation Guide.

The directory where the .RAV files are located is specified in the parameter setup. In the case of the ANTICOAGULATE.EXE file an example of the parameter setup is given in the Set up Tools Menu Option for Anticoagulation Management section. By default, the .CNT and .HLP files must be in the same directory. In the case of the two .RAV files an example of the parameter setup is given in the Set up the Anticoagulation Parameters per Division section.
Reports
The KIDS install places menu options for reports on the server but does not place them into your menu structure. These are:

- Anticoagulation Complication Report [ORAM COMPLICATIONS REPORT]
- All Anticoagulation Patients [ORAM PATIENT LIST ALL]
- Complex Anticoagulation Patients [ORAM PATIENT LIST COMPLEX]
- Next Lab Patient List [ORAM PATIENT LIST NEXT LAB]
- Single Patient TTR [ORAM ROSENDAAL SINGLE PT TTR]
- Calculate TTR (Rosendaal Method) [ORAM ROSENDAAL TTR REPORT]

TTR stands for Time in Therapeutic Range.

The installation also provides two umbrella menu options that provide access to these reports:

- Anticoagulation Management Reports [ORAM REPORTS MENU]
  This option includes the commands:
  C       Anticoagulation Complication Report
  R       Calculate TTR (Rosendaal Method)
  S       Single Patient TTR
  P       Anticoagulation Patient Lists

- Anticoagulation Patient Lists [ORAM PATIENT LIST MENU]
  This includes the commands:
  A       All Anticoagulation Patients
  C       Complex Anticoagulation Patients

These reports must be assigned to the clinic personnel who need them in the performance of their duties.

To have access to the reports on the menu, users must have them assigned to their menu tree.

Auto Sign-on
The Anticoagulation Management Tool (AMT) can work more effectively if a site allows users to have Auto Sign-on enabled. If a site desires to enable Auto Sign-on the following steps can be employed.

- IRM will decide to turn on Auto sign On for your site by editing the KERNEL SYSTEMS PARAMETERS file (#8989.3). Within 8989.3 set the fields DEFAULT AUTO SIGN-ON to Yes (or 1) and the field DEFAULT MULTIPLE SIGN-ON LIMIT to 2 or greater.
- In the NEW PERSON File (#200) each clinic worker using the Anticoagulator GUI needs to have the field MULTIPLE SIGN-ON set to ALLOWED. This field is accessed through the EVE editing program.
- The RPC client broker (ClAgent.exe) must be installed and running on each clinic workstation.

Auto Sign-on is different from Single Sign-on, which relies on Clinical Context Object Workgroup (CCOW) to work and is not supported by AMT.
Steps for Implementation

1. Assign Menus

2. Check for or Create:
   A. Team Lists
   B. TIU Document Definitions
   C. Clinic Locations
   D. Consult Service
   E. DSS Unit

3. Option ORMGR - CPRS Manager Menu
   Set up the Anticoagulation Parameters per Division
   Set up the Anticoagulation Parameters per Clinic

1. Set up Tools Menu Option for Anticoagulation Management

5. Set Daily Tasks
   Run ORAM SET TEAMS
1. Assign Menus

ORAM ANTICOAGULATION CONTEXT is the option used by this application to communicate with the Kernel Broker. You cannot run AntiCoagulate.exe on a workstation unless you have this menu option or you have programmer access mode. All users of this application must have this menu assigned to them as a secondary menu or as part of their primary menu tree.

Users with administrative duties should also have the one or more of the following menus assigned:

- Anticoagulation Management Reports [ORAM REPORTS MENU]
- Anticoagulation Patient Lists [ORAM PATIENT LIST MENU]

2. Check for or Create the following:

Before entering the parameter values that determine the behavior of the application, you’ll want to check your system to see whether there are Team Lists, TIU Document Titles, Hospital Locations, Consult Service, and DSS ID entries that can be used for the Anticoagulation Management Tool (AMT) with little or no modifications.

Note:

1. Be sure to make note of the results of this step for use in step 3, Option ORMGR - CPRS Manager Menu.
A. Team Lists

Use the Team List Mgmt Menu option [ORLP TEAM MENU] to check whether existing team lists may suffice. In most cases you must create two new team lists:

1. **Anticoagulation Team (All)**

   The Anticoagulation Team (ALL) list, shows all patients scheduled for that team for that day AND any patients NOT completed on previous days. Patients drop off this list as they are completed in the Anticoagulation Management Tool (AMT).

2. **Anticoagulation Team (Complex)**

   The Anticoagulation Team (COMPLEX) patient list pulls out the complex patients so that they are not lost on the larger list (they appear on both lists).

Patients drop off these lists as they are completed in AMT.

This is a FileMan listing for the two team lists that are used for AMT.

<table>
<thead>
<tr>
<th>NAME: <strong>ANTICOAGULATION TEAM (ALL)</strong></th>
<th>TYPE: TEAM PATIENT MANUAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>UPPER CASE: ANTICOAG ALL</td>
<td>CREATOR: CPRSPROVIDER,SEVEN</td>
</tr>
<tr>
<td>CREATION D/T: MAY 20, 2003</td>
<td></td>
</tr>
<tr>
<td>USER: CPRSPROVIDER,SIX</td>
<td></td>
</tr>
<tr>
<td>MEMBER: CP. . .</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME: <strong>ANTICOAGULATION TEAM (COMPLEX)</strong></th>
<th>TYPE: MANUAL REMOVAL/AUTOLINK ADDITION</th>
</tr>
</thead>
<tbody>
<tr>
<td>UPPER CASE: ANTICOAG COMPLEX</td>
<td>CREATOR: CPRSPROVIDER,SEVEN</td>
</tr>
<tr>
<td>SUBSCRIBE: YES</td>
<td>CREATION D/T: SEP 05, 2003</td>
</tr>
<tr>
<td>USER: CPRSPROVIDER,SIX</td>
<td></td>
</tr>
<tr>
<td>USER: CPRSPROVIDER,ONE</td>
<td></td>
</tr>
<tr>
<td>USER: CPRSPROVIDER,SEVEN</td>
<td></td>
</tr>
<tr>
<td>MEMBER: CP. . .</td>
<td></td>
</tr>
</tbody>
</table>

Please note that it is not necessary to use exactly these same team names because the link between these teams and AMT is explicitly set in the GUI Anticoagulation Parameters.
B. TIU Document Definitions

The Anticoagulation Management Tool (AMT) uses three (3) parameters to store TIU note titles that document an initial visit, an interim or routine visit, and the discharge visit. Use the Edit Document Definitions [TIUF EDIT DDEFS MGR] option to check whether adequate titles are already defined to support these, or create a new Document Class for Anticoagulation, along with these Titles:

1) **Anticoagulation Initial Note**
   This is the TIU Document Title that identifies the Anticoagulation Initial Assessment Note, which is entered for the patient's first visit upon enrollment in the Clinic.

2) **Anticoagulation Interim Note**
   This is the TIU Document Title that identifies the Anticoagulation Interim Note, which is entered during the patient's ongoing treatment by the Anticoagulation clinic.

3) **Anticoagulation Discharge Note**
   This is the TIU Document Title that identifies the Anticoagulation Discharge Note, which is entered upon the patient's discharge from the Anticoagulation clinic.

Note:

*If you do not use the VHA ENTERPRISE STANDARD TITLES as shown in the screen capture, then you must use the Title Mapping Utilities ... [TIU MAP TITLES MENU] to map the titles you use to VHA ENTERPRISE STANDARD TITLES.*

Make a note of the titles for use in the parameter setup outlined below. Here is a FileMan inquiry from the TIU Document Definition file (8925.1) covering documents needed for Anticoagulation Management:

---

**NAME:** ANTICOAG INITIAL NOTE ELECTRONIC
**PRINT NAME:** ANTICOAG INITIAL NOTE
**TYPE:** TITLE
**CLASS OWNER:** CLINICAL COORDINATOR
**STATUS:** ACTIVE
**SUPPRESS VISIT SELECTION:** YES
**VHA ENTERPRISE STANDARD TITLE:** INITIAL EVALUATION NOTE
**MAP ATTEMPTED:** DEC 07, 2006@14:58:44
**MAP ATTEMPTED BY:** BRENK, THOMAS M
**TIMESTAMP:** 59372,53350

**NAME:** ANTICOAG DISCHARGE
**PRINT NAME:** ANTICOAG DISCHARGE
**TYPE:** TITLE
**CLASS OWNER:** CLINICAL COORDINATOR
**STATUS:** ACTIVE
**VHA ENTERPRISE STANDARD TITLE:** PHARMACY COUNSELING DISCHARGE NOTE
**MAP ATTEMPTED:** DEC 07, 2006@13:35:43
**MAP ATTEMPTED BY:** BRENK, THOMAS M
**TIMESTAMP:** 59457,48152

**NAME:** ANTICOAGULATION
**PRINT NAME:** ANTICOAGULATION
**TYPE:** TITLE
**CLASS OWNER:** CLINICAL COORDINATOR
**STATUS:** ACTIVE
**SUPPRESS VISIT SELECTION:** YES
**VHA ENTERPRISE STANDARD TITLE:** PHARMACY NOTE
**MAP ATTEMPTED:** DEC 07, 2006@13:37:03
**MAP ATTEMPTED BY:** BRENK, THOMAS M
**TIMESTAMP:** 58834,55125
C. Clinic Locations

Use the Set up a Clinic [SDBUILD] option to check whether Clinics exist that you can use in place of these, or to create new Clinic Locations:

1. **Anticoagulation VISIT Clinic Location**
   This should be a Clinic for FACE to FACE visits. The program does not care if you use the same clinic for both the phone and face to face, but for PCE credit they must be COUNT CLINICS.

2. **Anticoagulation PHONE Clinic Location**
   This should be a Clinic for Telephone visits. The program does not care if you use the same clinic for both the phone and face to face, but for PCE credit they must be COUNT CLINICS.

3. **Anticoagulation NON-COUNT Clinic**
   This is a NON-COUNT clinic location, which will be used for notes only, when no PCE data is recorded.

If you have only one physical anticoagulation clinic, we strongly urge that you use these names.

The following is a FileMan list showing an example of a typical set of hospital locations that can be used for Anticoagulation Management:

```
FILE 44: HOSPITAL LOCATION

INDEX: 8005  NAME: EC ANTICOAGULATION
ABBREVIATION: COAG  TYPE: CLINIC
INSTITUTION: PORTLAND (OR) VAMC
STOP CODE NUMBER: ANTI-COAGULATION CLINIC
SERVICE: MEDICINE  PHYSICAL LOCATION: ANTICOAG
DIVISION: PORTLAND  NON-COUNT CLINIC? (Y OR N): NO
CREDIT STOP CODE: CLINICAL PHARMACY  CLINIC MEETS AT THIS FACILITY?: YES
TYPE EXTENSION: CLINIC  WORKLOAD VALIDATION AT CHK OUT: YES
SYNONYM: EANTI
PRINT ACTION PROFILE: YES  DEFAULT APPOINTMENT TYPE: REGULAR
PROVIDER: ORPROVIDER,EIGHT
PROVIDER: m
PROVIDER: n
PROVIDER: h  DEFAULT PROVIDER: YES
REQUIRE ACTION PROFILES?: YES  ALLOWABLE CONSECUTIVE NO-SHOWS: 2
MAX # DAYS FOR FUTURE BOOKING: 390  MAX # DAYS FOR AUTO-REBOOK: 1
PRIVILEGED USER: MA
PRIVILEGED USER: SC
PROHIBIT ACCESS TO CLINIC?: YES  LENGTH OF APP'T: 15
DISPLAY INCREMENTS PER HOUR: 15-MIN  OVERBOOKS/DAY MAXIMUM: 25

INDEX: 9727  NAME: EC ANTICOAG PHONE
ABBREVIATION: COAG  TYPE: CLINIC
INSTITUTION: PORTLAND (OR) VAMC  STOP CODE NUMBER: TELEPHONE/ANCILLARY
SERVICE: MEDICINE  DIVISION: PORTLAND
COLLATERAL VISITS? (Y OR N): NO  NON-COUNT CLINIC? (Y OR N): NO
CREDIT STOP CODE: ANTI-COAGULATION CLINIC
CLINIC MEETS AT THIS FACILITY?: YES  TREATING SPECIALTY: GENERAL MEDICINE
TYPE EXTENSION: CLINIC
```
EXTENDED SPECIAL INSTRUCTIONS: Clinic used for the capture of anti-coag telephone visits - Event Capture creates appointments in this clinic automatically.

Created to separate telephone from provider contact calls, so that patients will not be billed as if they saw a provider when in fact they received a telephone call only.

DATE/TIME CLINIC BUILT: NOV 21, 2003@12:14:10
DEFAULT APPOINTMENT TYPE: REGULAR
PROVIDER: ORPROVIDER,EIGHT
REQUIRE ACTION PROFILES?: NO
MAX # DAYS FOR FUTURE BOOKING: 11
LENGTH OF APP’T: 15
ALLOWABLE CONSECUTIVE NO-SHOWS: 0
MAX # DAYS FOR AUTO-REBOOK: 1
OVERBOOKS/DAY MAXIMUM: 0
DISPLAY INCREMENTS PER HOUR: 15-MIN
PATTERN DATE: JAN 19, 2004
.... (MANY PATTERN DATES)

NonCount example:

INDEX: 7007
NAME: ANTICOAGULATION LAB +
ABBREVIATION: COAG
INSTITUTION: PORTLAND (OR) VAMC
SERVICE: MEDICINE
DIVISION: PORTLAND
CLINIC METAS AT THIS FACILITY?: YES
SYNONYM: COAGLAB
TELEPHONE: 5460
PRINT ACTION PROFILE: YES
CONFIRMATION LETTER: ANTICOAG
EXCLUDE ON INELIGIBLE SCREEN?: Y
EXTENDED SPECIAL INSTRUCTIONS: DO NOT schedule, reschedule or cancel in this clinic, contact Anticoag at ext 52496.

*** PLEASE NOTE ****

If patient requests sooner or delayed appt than ordered, please send priority email to "G.Anticoag".

Always verify current home telephone!!!

PROGRAM: AREA A COAG
DATE/TIME CLINIC BUILT: MAR 03, 1995@11:14:01
DEFAULT APPOINTMENT TYPE: REGULAR
MAF CONFIRM VET APPT: YES, ON MAF 'CONFIRM LIST'
D. Consult Service

It is highly recommended that you use a consult request to move new patients into this program. If you opt to not use consults, you can skip this step and mark Consult Enabled to No in the parameter setup. However, the only other feature of VistA that might be useful to is the Additional Signers feature of Progress Notes. If you describe a patient’s condition, then specify a key member of the Anticoagulation Team, that member will get an alert and be able to read the progress not. All-in-all, using a consult is a much more straight-forward procedure.

Use the Set up Consult Services option [GMRC SETUP REQUEST SERVICES] to determine whether there’s already an Anticoagulation Consult Request Service. If you have only one clinic, then it should be called:

**Anticoagulation Management**

This is the name to the Consult Request Service with which Consult data will be associated for the Anticoagulation clinic. It is used only if the linkage with the Consult Package is enabled.

If there is more than one anticoagulation clinic, then you need a consult service for each of them—appropriately named.

If you are using consults to start anticoagulation management of patients now, you may already have a consult service set up. The pharmacists who use the system (that is, close the consult) need to be users in the Request Service file. To easily allow for coverage and changes to personnel, the whole user class can be assigned. Here is an example of using the Set up Consult Services option [CMRC SETUP REQUEST SERVICES] for Anticoagulation Management:

```
Select OPTION NAME: gmrc mgr  Consult Management

RPT  Consult Tracking Reports ...
SS   Set up Consult Services
SU   Service User Management
CS   Consult Service Tracking
RX   Pharmacy TPN Consults
GU   Group update of consult/procedure requests
UA   Determine users' update authority
UN   Determine if user is notification recipient
NR   Determine notification recipients for a service
TD   Test Default Reason for Request
LH   List Consult Service Hierarchy
PR   Setup procedures
CP   Copy Prosthetics services
DS   Duplicate Sub-Service
IFC  IFC Management Menu ...
TP   Print Test Page

Select Consult Management Option: SS  Set up Consult Services
Select Service/Specialty: ANTICOAGULATION MANAGEMENT
SERVICE NAME: ANTICOAGULATION MANAGEMENT  Replace
ABBREVIATED PRINT NAME (Optional): Anticoa  Anticoa
INTERNAL NAME: ANTICOAGULATION  ANTICOAGULATION
Select SYNONYM: Coumadin  Coumadin
SERVICE USAGE:
SERVICE PRINTER: Pharm01
```
NOTIFY SERVICE ON DC: ALWAYS ALWAYS
REPRINT 513 ON DC: NEVER NEVER
PREREQUISITE:
  1> Please be aware that this consult service has required
  2> questions which must be answered in order for your consult to be properly
  3> addressed.
  4>
  5> Anticoagulation Program (ACP) will assume management once patient is
  6> enrolled into program by attending first orientation class, or *if* other
  7> arrangements *are* made directly with clinic. PCP or designee *must* assume
  8> management until pt is enrolled into ACP.
  9> <Enter>
EDIT Option:
PROVISIONAL DX PROMPT: OPTIONAL OPTIONAL
PROVISIONAL DX INPUT: FREE TEXT FREE TEXT
DEFAULT REASON FOR REQUEST:
  1> (Template Not Complete)
  2> <Enter>
RESTRICT DEFAULT REASON EDIT: NO EDITING NO EDITING

Inter-facility information
IFC ROUTING SITE: <Enter>
IFC REMOTE NAME: <Enter>
Select IFC SENDING FACILITY: <Enter>

SERVICE INDIVIDUAL TO NOTIFY: CPRSPROVIDER,SEVEN CPRSPROVIDER,SEVEN
Select SERVICE TEAM TO NOTIFY: ANTICOAGULATION - ALL ANTICOAGULATION - ALL
Select NOTIFICATION BY PT LOCATION: <Enter>
PROCESS PARENTS FOR NOTIFS: <Enter>
Select UPDATE USERS W/O NOTIFICATIONS: <Enter>
Select UPDATE TEAMS W/O NOTIFICATIONS: <Enter>
Select UPDATE USER CLASS W/O NOTIFS: PHARMACIST
  Are you adding 'PHARMACIST' as a new UPDATE USER CLASSES W/O NOTIFS (the 1ST
  for this REQUEST SERVICES)? No// (No)?
Select UPDATE USER CLASS W/O NOTIFS: CLINICAL PHARMACIST
  Are you adding 'CLINICAL PHARMACIST' as a new UPDATE USER CLASSES W/O NOTIFS
  (the 1ST for this REQUEST SERVICES)? No// Y (Yes)
Select UPDATE USER CLASS W/O NOTIFS: PHARMACIST
  Are you adding 'PHARMACIST' as a new UPDATE USER CLASSES W/O NOTIFS (the 2ND
  for this REQUEST SERVICES)? No// Y (Yes)
Select UPDATE USER CLASS W/O NOTIFS: PHARMACY STUDENT
  Are you adding 'PHARMACY STUDENT' as a new UPDATE USER CLASSES W/O NOTIFS
  (the 3RD for this REQUEST SERVICES)? No// Y (Yes)
Select UPDATE USER CLASS W/O NOTIFS: <Enter>
Select ADMINISTRATIVE UPDATE USER: CPRSPROVIDER,SEVEN CPRSPROVIDER,SEVEN
SRC Pharmacy Staff Pharmacist
  Are you adding 'CPRSPROVIDER,SEVEN' as a new ADMINISTRATIVE UPDATE USERS (the
  2ND for this REQUEST SERVICES)? No// Y (Yes)
NOTIFICATION RECIPIENT: Y YES
Select ADMINISTRATIVE UPDATE USER:
Select ADMINISTRATIVE UPDATE TEAM:
PROCESS PARENTS FOR UPDATES:

SPECIAL UPDATES INDIVIDUAL: CPRSPROVIDER,SEVEN
RESULT MGMT USER CLASS: <Enter>
UNRESTRICTED ACCESS: <Enter>
Select SUB-SERVICE/SPECIALTY: <Enter>
ADMINISTRATIVE: <Enter>

Add/Edit Another Service? NO//
**Decision Support System Unit**

Decision Support System Extracts (DSS) V. 3.0 provides a means of exporting data from selected Veterans Health Information Systems and Technology Architecture (VistA) modules to a Decision Support System (DSS) resident in the VA Austin Information Technology Center (AITC). This system is the VA's only means of complying with the Congressional mandate for the use of a management system that can assign costs to the product level. DSS unit codes were installed with the DSS application and can be checked both here and in the parameter setup to insure the values are correct.

**DSS Unit:** This is the name to the DSS Unit to which the anticoagulation data will be associated. Use VA FileMan to inquire to the DSS Unit File to:

1. Determine whether a DSS Unit for Anticoagulation already exists
2. To create a new DSS Unit if an adequate substitute doesn’t exist.

**Note:**

*This file must not be directly modified using FileMan! Please contact your local DSS coordinator if a DSS unit needs to be added.*

Here is a FileMan printout from the DSS UNIT file (#754):

<table>
<thead>
<tr>
<th>NAME: ANTICOAG</th>
<th>SERVICE: MEDICINE</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEDICAL SPECIALTY: AMBULATORY CARE</td>
<td>COST CENTER: 820100 Medical</td>
</tr>
<tr>
<td>UNIT NUMBER: MMG1</td>
<td>INACTIVE (Y/N): NO</td>
</tr>
<tr>
<td>USE FOR EVENT CAPTURE: YES</td>
<td>CATEGORY (Y/N): NO</td>
</tr>
<tr>
<td>DATA ENTRY DATE/TIME DEFAULT: NOW</td>
<td>SEND TO PCE: Send All Records</td>
</tr>
</tbody>
</table>

DSS ID from the clinic stop file (40.7)

<table>
<thead>
<tr>
<th>NAME: ANTI-COAGULATION CLINIC</th>
<th>AMIS REPORTING STOP CODE: 317</th>
</tr>
</thead>
<tbody>
<tr>
<td>COST DISTRIBUTION CENTER: 2110.00</td>
<td>RESTRICTION TYPE: Either</td>
</tr>
</tbody>
</table>

**3. Set Parameters**

Parameters are set on the division and clinic level. Any parameter that is on both levels can be inherited; if not set for clinic the division value is used. The division corresponds to the medical center. One or more clinics can be established in each division—at least one clinic must be defined. (Look in Appendix A: Alternate Workflow at Clinic Setup for a discussion of division/clinic structure.)

Before starting the parameter setup, gather the information you need. Review the screen captures below and make sure you have the correct information for your medical clinic and medical center. Included on the next page is a worksheet that could be used to assist you in this process. Make a copy of it for each Division you are responsible for.
### Anticoagulation Management Division Parameter Worksheet:

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Value (Division)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your Medical Center Name</td>
<td></td>
</tr>
<tr>
<td>Complete path to network folder where .RAV files are accessible</td>
<td></td>
</tr>
<tr>
<td>The local names for International Normalization Ratio (INR) quick order</td>
<td></td>
</tr>
<tr>
<td>The local names for Complete Blood Count (CBC) quick order</td>
<td></td>
</tr>
<tr>
<td>Track Hematocrit (HCT) or Hemoglobin (Hgb) HGB</td>
<td></td>
</tr>
<tr>
<td>The note titles used for anticoagulation at your site:</td>
<td></td>
</tr>
<tr>
<td>Anticoagulation Initial Note Title:</td>
<td></td>
</tr>
<tr>
<td>Anticoagulation Interim Note Title:</td>
<td></td>
</tr>
<tr>
<td>Anticoagulation Discharge Note Title:</td>
<td></td>
</tr>
<tr>
<td>Simple telephone Visit:</td>
<td></td>
</tr>
<tr>
<td>Complex Telephone Visit:</td>
<td></td>
</tr>
<tr>
<td>Letter to the Patient:</td>
<td></td>
</tr>
<tr>
<td>Orientation Class:</td>
<td></td>
</tr>
<tr>
<td>Initial Office Visit:</td>
<td></td>
</tr>
<tr>
<td>Subsequent Office Visit:</td>
<td></td>
</tr>
<tr>
<td>The Decision Support System (DSS) unit</td>
<td></td>
</tr>
<tr>
<td>DSS ID</td>
<td></td>
</tr>
</tbody>
</table>
Set up the Anticoagulation Parameters per Division

Starting from the ORMGR option, follow the CPRS Configuration | GUI Parameters | GUI Anticoagulation Parameters menu path, to set up the parameters for each division defined on your VistA system.

```
DEV5A3:CPRS27>D ^XUP

Setting up programmer environment
This is a TEST account.

Terminal Type set to: C-VT320

Select OPTION NAME: ORMGR  CPRS Manager Menu

  CL  Clinician Menu ...
  NM  Nurse Menu ...
  WC  Ward Clerk Menu ...
  PE  CPRS Configuration (Clin Coord) ...
  IR  CPRS Configuration (IRM) ...

Select CPRS Manager Menu Option: PE  CPRS Configuration (Clin Coord)

  AL  Allocate OE/RR Security Keys
  KK  Check for Multiple Keys
  DC  Edit DC Reasons
  GP  GUI Parameters ...
  GA  GUI Access - Tabs, RPL
  MI  Miscellaneous Parameters
  NO  Notification Mgmt Menu ...
  OC  Order Checking Mgmt Menu ...
  MM  Order Menu Management ...
  LI  Patient List Mgmt Menu ...
  FP  Print Formats
  PR  Print/Report Parameters ...
  RE  Release/Cancel Delayed Orders
  US  Unsigned orders search
  EX  Set Unsigned Orders View on Exit
  NA  Search orders by Nature or Status
  DO  Event Delayed Orders Menu ...
  LO  Lapsed Orders search
  PM  Performance Monitor Report

Select CPRS Configuration (Clin Coord) Option: GP  GUI Parameters

  CS  GUI Cover Sheet Display Parameters ...
  HS  GUI Health Summary Types
  TM  GUI Tool Menu Items
  MP  GUI Parameters - Miscellaneous
  UC  GUI Clear Size & Position Settings for User
  RE  GUI Report Parameters ...
  NV  GUI Non-VA Med Statements/Reasons
  EX  GUI Expired Orders Search Hours
  RM  GUI Remove Button Enabled
  NON  GUI Remove Button Enabled for Non-OR Alerts
  CLOZ  GUI Edit Inpatient Clozapine Message
  COAG  GUI Anticoagulation Parameters ...
  EIE  GUI Mark Allergy Entered in Error

Select GUI Parameters Option: COAG  GUI Anticoagulation Parameters

  D  Division-wide Anticoagulation Parameters
  C  Anticoagulation Clinic Parameters
```
Select GUI Anticoagulation Parameters Option: d Division-wide

Enter Anticoagulation Management Parameters by Division:

Select INSTITUTION NAME: salt lake city hcs UT VAMC 660

Anticoagulation Site Params for Division: SALT LAKE CITY HCS

------------------------------------------------------------------------------
Medical Center Name: Salt Lake City VAHCS
Complete path to network folder: \VHAISLMul1\OfficeCommon\Anticoagulation Flow Sheet\
INR Quick Order: LRTZ PT WITH INR OP
CBC Quick Order: LRTZ CBC SP ONCE
Hematocrit (HCT) or Hemoglobin (Hgb): HGB
Anticoagulation Initial Note: ANTICOAGULATION INITIAL ASSESSMENT NOTE
Neal Anticoagulation: ANTICOAGULATION E&M NOTE
Anticoagulation Discharge Note: ANTICOAGULATION DISCHARGE NOTE
Simple Phone Visit (CPT): 99364
Complex Phone Visit (CPT): 99363
Letter To Patient (CPT): 99364
Orientation Class (CPT): 99078
Initial Office Visit (CPT): 99363
Subsequent Visit (CPT): 99364
DSS Unit: ANTI-COAG CLINIC (317/160)
DSS ID: ANTI-COAGULATION CLINIC
------------------------------------------------------------------------------
Medical Center Name: Salt Lake City VAHCS Replace <Enter>
Complete path to network folder: \VHAISLMul1\OfficeCommon\Anticoagulation Flow Sheet\ Replace <Enter>
INR Quick Order: INR// <Enter> LRTZ PT WITH INR OP LRTZ PT WITH INR OP
CBC Quick Order: CBC// <Enter> LRTZ CBC SP ONCE LRTZ CBC SP ONCE

These two orderable items are quick orders set up for the Anticoagulation Clinic. They must have all values populated.

These are the note titles that the tool uses. Your site may have existing note titles or you may need to set some up for this use.

Hematocrit (HCT) or Hemoglobin (Hgb): HCT// <Enter> HCT HCT
Initial Note Title: ANTICOAGULATION INITIAL ASSESSMENT NOTE// <Enter>
ANTICOAGULATION INITIAL ASSESSMENT NOTE TITLE
Std Title: PHARMACY E & M OF ANTICOAGULATION NOTE ANTICOAGULATION INITIAL ASSESSMENT NOTE TITLE
Interim Note Title: ANTICOAGULATION E&M NOTE// <Enter>
ANTICOAGULATION E&M NOTE TITLE
Std Title: PHARMACY OUTPATIENT E & M OF ANTICOAGULATION NOTE ANTICOAGULATION OUTPATIENT E&M NOTE TITLE
Discharge Note Title: ANTICOAGULATION DISCHARGE NOTE// <Enter>
ANTICOAGULATION DISCHARGE NOTE TITLE
Std Title: E & M OF ANTICOAGULATION REPORT ANTICOAGULATION DISCHARGE NOTE TITLE
Std Title: E & M OF ANTICOAGULATION REPORT

This is the network share directory where RAV template files were placed.
These are Current Procedural Terminology (CPT) codes. You should look them up in the current American Medical Association’s Coding guidelines.

Given parameters need the VistA Decision Support System (DSS) unit. And here it’s looking for the corresponding DSS ID.

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

D Division-wide Anticoagulation Parameters
C Anticoagulation Clinic Parameters

Select GUI Anticoagulation Parameters Option:
Set up the Anticoagulation Parameters per Clinic

Next, you’ll need to set parameters for one or more clinic locations, using the same Anticoagulation Clinic Parameters option:

Note:

All that’s required to use the Anticoagulation Management Tool (AMT) for more than one clinic is to repeat the following parameter setup for each clinic.

Before starting the clinic parameter setup, gather the information you need. The following page contains a worksheet for gathering clinic-specific information. Any parameters left blank on this level inherit the Division parameter.

One major addition to the clinic parameters are the CPT codes AMT uses for different kinds of contacts. These codes may be sensitive to variables such as Inpatient or Outpatient as well as the qualifications of the provider. On close examination you may find that a clinic that is offered daily is staffed by a PharmD on Monday, Tuesday, and Friday and an MD on Wednesday and Thursday. On close examination you actually have two clinics here with a need for different CPT codes. Consult with the coding experts in your facility for guidance. (Both clinics should share the same team lists and the team lists will be processed as if there were only one clinic.)

Make a copy of it for each clinic you are setting up
## Anticoagulation Management Clinic Parameter Worksheet:

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Value (Clinic)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinic Name</td>
<td></td>
</tr>
<tr>
<td>Anticoagulation Team (All)</td>
<td></td>
</tr>
<tr>
<td>Anticoagulation Team (Complex)</td>
<td></td>
</tr>
<tr>
<td>Address Line 1</td>
<td></td>
</tr>
<tr>
<td>Address Line 2</td>
<td></td>
</tr>
<tr>
<td>Address Line 3</td>
<td></td>
</tr>
<tr>
<td>Clinic Phone Number</td>
<td></td>
</tr>
<tr>
<td>Clinic FAX Number</td>
<td></td>
</tr>
<tr>
<td>Toll Free Phone Number</td>
<td></td>
</tr>
<tr>
<td>Point of Contact Name</td>
<td></td>
</tr>
<tr>
<td>Signature Block Name or Clinic</td>
<td></td>
</tr>
<tr>
<td>Signature Block Title</td>
<td></td>
</tr>
<tr>
<td>Consult Link Enabled (Y or N)</td>
<td></td>
</tr>
<tr>
<td>Consult Request Service Name</td>
<td></td>
</tr>
<tr>
<td>PCE Link Enabled (Y or N)</td>
<td></td>
</tr>
<tr>
<td>Automatic Indication for Care (ICD9)</td>
<td></td>
</tr>
<tr>
<td>Simple Phone Visit (CPT)</td>
<td></td>
</tr>
<tr>
<td>Complex Phone Visit (CPT)</td>
<td></td>
</tr>
<tr>
<td>Letter To Patient (CPT)</td>
<td></td>
</tr>
<tr>
<td>Orientation Class (CPT)</td>
<td></td>
</tr>
<tr>
<td>Initial Office Visit (CPT)</td>
<td></td>
</tr>
<tr>
<td>Subsequent Visit (CPT)</td>
<td></td>
</tr>
<tr>
<td>Anticoagulation VISIT Clinic Location</td>
<td></td>
</tr>
<tr>
<td>Anticoagulation PHONE Clinic Location</td>
<td></td>
</tr>
<tr>
<td>Anticoagulation NON-COUNT Clinic</td>
<td></td>
</tr>
<tr>
<td>Default Pill Strength</td>
<td></td>
</tr>
<tr>
<td>Include Time with Next INR Date (Y or 0)</td>
<td></td>
</tr>
<tr>
<td>Look-back Days for Appointment Matching</td>
<td></td>
</tr>
<tr>
<td>Look-ahead Days for Appointment Matching</td>
<td></td>
</tr>
</tbody>
</table>
This is a screen capture of the clinic parameter setup:

Select GUI Parameters Option: **COAG** GUI Anticoagulation Parameters

- **D** Division-wide Anticoagulation Parameters
- **C** Anticoagulation Clinic Parameters

Select GUI Anticoagulation Parameters Option: **C** Anticoagulation Clinic Parameters

Select CLINIC: **SLC - ANTI COAGULATION** CPRSPROVIDER, SEVEN

Anticoagulation Clinic Params for Location: SLC - ANTI COAGULATION

<table>
<thead>
<tr>
<th>Clinic Name</th>
<th>Anticoagulation Team (All)</th>
<th>Anticoagulation Team (Complex)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Address Line 1: George E. Wahlen VA Medical Center
Address Line 2: 500 Foothill Drive
Address Line 3: Salt Lake City, UT 84148

Clinic Phone Number: (801)582-1565x2222
Clinic FAX Number: (801)582-1566
Toll Free Phone Number: 1-(800)613-4012

Point of Contact Name: SLC Anticoagulation Clinic
Signature Block Name or Clinic: Clinical Pharmacist
Signature Block Title: SLC Anticoagulation Clinic

Consult Link Enabled: **YES**
Consult Request Service Name: **ANTI COAGULATION MANAGEMENT**

PCE Link Enabled: **YES**
Automatic Indication for Care: **V85.83**

CPT codes entered for the clinic override the codes entered for the division. Leave these blank if the division level codes work.
Subsequent Visit (CPT) : <Enter>
Anticoagulation VISIT Clinic Location: SLC
1  SLC - ANTICOAG (NON-COUNT)  CPRSPROVIDER,SEVEN
2  SLC - ANTICOAGULATION CPRSPROVIDER,SEVEN
CHOOSE 1-2: 2  SLC - ANTICOAGULATION CPRSPROVIDER,SEVEN  SLC - ANTICOAGULATION CPRSPROVIDER,SEVEN
Anticoagulation PHONE Clinic Location: SLC
1  SLC - ANTICOAG (NON-COUNT)  CPRSPROVIDER,SEVEN
2  SLC - ANTICOAGULATION CPRSPROVIDER,SEVEN
CHOOSE 1-2: 2  SLC - ANTICOAGULATION CPRSPROVIDER,SEVEN  SLC - ANTICOAGULATION CPRSPROVIDER,SEVEN
Anticoagulation NON-COUNT Clinic: SLC
1  SLC - ANTICOAG (NON-COUNT)  CPRSPROVIDER,SEVEN
2  SLC - ANTICOAGULATION CPRSPROVIDER,SEVEN
CHOOSE 1-2: 1  SLC - ANTICOAG (NON-COUNT)  CPRSPROVIDER,SEVEN  SLC - ANTICOAG (NON-COUNT)  CPRSPROVIDER,SEVEN
Default Pill Strength: 5
Include Time with Next INR: YES
Look-back Days for Appointment Matching: <Enter>
Look-ahead Days for Appointment Matching: <Enter>

Anticoagulation Clinic Params for Location: SLC - ANTICOAGULATION is now:
----------------------------------------------------------------------------------
Clinic Name                      SLC - Anticoagulation
Anticoagulation Team (All)      SLC-ANTICOAGULATION (ALL)
Anticoagulation Team (Complex)  SLC-ANTICOAGULATION (COMPLEX)
Address Line 1                   George E. Wahlen VA Medical Center
Address Line 2                   500 Foothill Drive
Address Line 3                   Salt Lake City, UT 84148
Clinic Phone Number             (801)582-1565x2222
Clinic FAX Number               (801)582-1565x2232
Toll Free Phone Number          1-(800)613-4012
Point of Contact Name           SLC Anticoagulation Clinic
Signature Block Name or Clinic  Clinical Pharmacist
Signature Block Title           SLC Anticoagulation Clinic
Consult Link Enabled            YES
Consult Request Service Name    ANTICOAGULATION MANAGEMENT
PCE Link Enabled                YES
Automatic Indication for Care   V58.83
Simple Phone Visit (CPT)
Complex Phone Visit (CPT)
Letter To Patient (CPT)
Orientation Class (CPT)
Initial Office Visit (CPT)
Subsequent Visit (CPT)
Anticoagulation VISIT Clinic Location SLC - ANTICOAGULATION
Anticoagulation PHONE Clinic Location SLC - ANTICOAGULATION
Anticoagulation NON-COUNT Clinic SLC - ANTICOAG (NON-COUNT)
Default Pill Strength            5
Include Time with Next INR Date  Time of Day
Look-back Days for Appointment Matching
Look-ahead Days for Appointment Matching
--------------------------------------------------------------------------------------------------
Enter RETURN to continue or '^' to exit:

D Division-wide Anticoagulation Parameters
C Anticoagulation Clinic Parameters

Select GUI Anticoagulation Parameters Option:
1. Set up Tools Menu Option for Anticoagulation Management

First, the Anticoagulate.exe file to a reasonable location in your Windows directory structure (e.g., C:\Program Files\VistA\CPRS) or a network location (e.g., \vhaislmul2\Anticoagulate). This is a local a decision and placement on a network location may increase response times due to network traffic.

Next, use the GUI Tool Menu Items [ORW TOOL MENU ITEMS] option to create a link to the Executable for specific users who need to access the Anticoagulation Management application:

```
Select GUI Parameters Option: TM  GUI Tool Menu Items

CPRS GUI Tools Menu may be set for the following:

1  User          USR    [choose from NEW PERSON]
2  Location      LOC    [choose from HOSPITAL LOCATION]
2.5 Service     SRV    [choose from SERVICE/SECTION]
3  Division      DIV    [choose from INSTITUTION]
4  System        SYS    [CPRS27.FO-SLC.MED.VA.GOV]

Enter selection: 1  User   NEW PERSON
Select NEW PERSON NAME: CPRSPROVIDER,SIX  CPRSPROVIDER,SIX  CHIEF, MEDICAL SERVICE

------------- Setting CPRS GUI Tools Menu for User: IRMWORKER,TWO
Select Sequence: 1
Are you adding 1 as a new Sequence? Yes// YES
Sequence: 1/<Enter>
Name=Command: &Anticoagulation=c:\progra~1\vista\cprs\anticoagulate.exe s=%SRV p=%PORT d=%DFN u=%DUZ
Select Sequence: <Enter>
```

Remember, access to this application for specific users is controlled by assigning the option ORAM ANTICOAGULATION CONTEXT to the secondary menu or menu tree of the assigned users.

Note:

*It is important to not only install the M portion of this application, but provide for execution of the Windows component. The VA does not use a setup program to do this. Each local VA facility has their own procedures for handling GUI application distribution. It is important that you utilize this procedure to get the executable into appropriate hands.*
2. Set Daily Tasks

Run ORAM SET TEAMS

Team lists are created daily by a task job (option: ORAM SET TEAMS) that needs to be set to run every morning prior to the start of the work day. Local site needs to set this. No team lists forms if this does not run.

To set this up, use the option Schedule/Unschedule Options [XUTM SCHEDULE] in the Taskman Management [XUTM MGR] menu as in this example:

```
Select Taskman Management Option: SCHEDULE/UNSCHEDULE OPTIONS
Select OPTION to schedule or reschedule: ORAM SET TEAMS Anticoagulation Background Job
Are you adding 'ORAM SET TEAMS' as a new OPTION SCHEDULING (the 13TH)? No// Y (Yes)
```

```
Edit Option Schedule
Option Name: ORAM SET TEAMS
Menu Text: Anticoagulation Background Job

QUEUED TO RUN AT WHAT TIME: FEB 13,2010@01:00
DEVICE FOR QUEUED JOB OUTPUT:
QUEUED TO RUN ON VOLUME SET:
RESCHEDULING FREQUENCY: 1d
TASK PARAMETERS:
SPECIAL QUEUEING:
```

Enter a command or '^' followed by a caption to jump to a specific field.

COMMAND: Press <PF1>H for help Insert
Troubleshooting

Team Lists

PROBLEM: Patients with INRs scheduled do not show up on the team list.

SOLUTION: There are several things that can interfere with patients showing up on the team list. They are:

1. The nightly job is not running. The nightly job finds each patient scheduled for an INR the next day and places them on either the ALL team list or the COMPLEX team list. Patients stay on the team list until explicitly removed by the tool.

2. You’ve set as your default Patient List the Clinic and not the Team. Often there are clinics with identical names as the teams. In the CPRS Patient Selection dialog, select the radio button next to Team/Personal, then select the correct team name. Click the Save Patient List Settings to make this selection permanent.

Lab Quick Orders

PROBLEM: Lab tests missing some parameters.

While using a quick order in the Anticoagulation Management Tool (AMT), not all the order parameters are being filled out correctly. For example, if a quick order does not have the URGENCY populated, an error occurs when VistA tries to process the order.

SOLUTION: Develop quick orders as completely as possible for use in conjunction with this AMT application. This may entail building a unique quick order that will only be used by the Anticoagulation application.

Ordering a lab test is triggered by checking a box. There is no prompt to change any order parameters after this, and there really doesn’t need to be a prompt if the order is built as needed. Be sure to populate all fields with values appropriate for the clinic that will use them.
Appendix A: Alternate Workflow

Team Lists

Overview

The Anticoagulation Management Tool (AMT) was designed with certain assumptions about the best way to do things. Unfortunately, not every medical center is run the same way. Here are some of the main assumptions used in putting together this tool:

1. Most contacts through the Anticoagulation Clinic correspond to a lab order. The visits are brief and often conducted over the telephone. So appointments are set according to the timing of lab orders, not with the VistA Scheduling application.

2. It is essential that patients not be lost from the system, so AMT uses two mechanisms to keep this from happening:
   a. All patients are put on a team list corresponding to their lab appointment. The patient persists on the team list until a visit has been achieved.
   b. Missed visits are always followed up with a reminder letter to the patient.

3. Dosing schedules are easy to mess up. So the tool does several things to simplify dosing:
   a. Patients are given one strength of pill. The pill strength is kept track of in the tool.
   b. Any change in dosing schedule is followed up with a letter to the patient, thus the patient always has written instructions.

4. Most pertinent patient information is kept in the tool for easy access and reference. Progress notes are only used for initial and final visits.

The requirement is that each VA medical facility that dispenses anticoagulation drugs (specifically Warfarin) have a method in place to track patients on these drugs. You do not have to use the VistA Anticoagulation Management Tool to accomplish this, but you must have something as comprehensive as this tool. This tool does not fit perfectly into every business model, but it can be adapted.

Here are some ways AMT can be adapted to local conditions:

Multiple Anticoagulation Clinics

Some medical centers with multiple anticoagulation clinics don’t consider the team list approach to be comprehensive enough. They schedule all patients in to their clinics with the VistA Scheduling application. They can then use the reporting features of scheduling to print out Microsoft Excel® spreadsheets of the schedules. This gives a high degree of confidence that clinicians and patients are not being double booked, and provides a visual overview of each day’s schedule.
Scheduling

Some clinics use scheduling because they have more confidence in the scheduling application to help manage appointments, because they need better control over workflow reporting, or because medical center policy dictates that they do. To use scheduling with the Anticoagulation Management Tool (AMT) you must go back and forth between the tool and CPRS. Also you must take care to keep CPRS on the same patient as in AMT.

When the scheduling package is the main tool for tracking schedules, AMT is still useful to template interview questions, format progress notes, track INRs, and compare no-shows between the tool and the scheduling package. Most important, the tool tracks and displays all INRs throughout the time the patient is in the program, regardless of who ordered the INR or who the patient met with.

Clinic Setup

When you set up clinic parameters some of the values are inherited from the division. The relationship of division and clinic varies from institution to institution. Here is a representation of some of the possibilities:

```
Division
  ↓
Clinic
```

Case 1

```
Division
  ↓
Clinic1
Division
  ↓
Clinic2
```

Case 2

```
Division 1
  ↓
Clinic 1
Division 2
  ↓
Clinic 2
```

Case 3

Case 1 is the default where there is only one clinic assigned to one division. In this case setting parameters for the division and clinic are sufficient. See the Set Parameters section of this manual.

Case 2 is what one would expect in a medical center with several Community Based Outpatient Clinics (CBOCs). In this case you must set parameters for the division and for each of the clinics under it. Any parameters that are missing from the clinic setup are filled in from the corresponding parameter at the division level.

Case 3 is as common as case 2 for integrated medical centers. Before you set up a clinic you need to know what division it is assigned to. Information about clinic division assignments is available from your Medical Administration Systems (MAS) sometimes referred to as Patient Information Management System (PIMS) or Hospital Information Management System (HIMS).

However your medical center is organized you need to set up both the clinic and the division as in the Set Parameters section of this manual.