Clinical Data Repository/ Health Data Repository (CHDR)

Release Notes

Version 2.1.3 Maintenance Release

Document Version 1.0
April 2013

Department of Veterans Affairs (VA)
Office of Information & Technology (OIT)
Virtual Lifetime Electronic Record (VLER)
## Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Description of Change</th>
<th>Author</th>
</tr>
</thead>
<tbody>
<tr>
<td>April 2013</td>
<td>Initial draft.</td>
<td>CHDR Team</td>
</tr>
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Introduction

The Department of Defense (DoD) and the Department of Veterans Affairs (VA) in partnership, designed and implemented the Clinical Data Repository/Health Data Repository (CHDR) system, which generates standards-based, computable, electronic health records (EHRs) that are exchanged between the two agencies healthcare systems for patients marked as Active Dual Consumers (ADC). Dual consumers are patients receiving healthcare or are expected to receive healthcare at both VA and DoD medical facilities.

The clinical data for patients is stored at each agency’s local healthcare systems. At the DoD, the medical data is stored in the Clinical Data Repository (CDR), a component of the Armed Forces Health Longitudinal Technology Application (AHLTA). Similarly, at the 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 can begin.

Most patients are marked active by the DoD automated process. At the VA, patients can be marked “active” manually using the CHDR Administration Application Interface (CHDR Admin GUI). After the computed clinical data is exchanged it can be used by each agency’s native healthcare 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).

Document Purpose

This document identifies the maintenance release being deployed May 1, 2013. The audience for this document includes management and development staff at DoD, and VA clinical and administrative staff located at the VA medical centers utilizing the CHDR Admin GUI.

CHDR 2.1.3 Maintenance Release

There are no new enhancements or new functionality for end-users. The following table identifies the ClearQuest tickets corrected for this maintenance release.

<table>
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<tr>
<th>Remedy Ticket</th>
<th>CQ Ticket</th>
<th>Description</th>
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<tr>
<td>541169</td>
<td>20129</td>
<td>Terminology mapping errors. Improve existing CHDR auditing with the VLER CORE Auditing Service to capture mapping errors and use the CHDR Fault Recovery Utility Suite (CFRUS) to generate the reports for mapping errors captured in the audit service.</td>
</tr>
<tr>
<td>541235</td>
<td>20225</td>
<td>Terminology requests that CHDR not drop messages where classes/ingredients fail mediation. Improve existing CHDR auditing with the VLER CORE Auditing Service to capture mediation failures and use CFRUS to generate reports for mediation errors captured in the audit service.</td>
</tr>
<tr>
<td>541252</td>
<td>11023</td>
<td>Inbound Electronic Health Record (EHR) alternatives. Improve existing CHDR auditing with the VLER CORE Auditing Service to capture dropped DoD terminology messages. Use CFRUS to determine which patients are candidates for having their clinical data re-exchanged captured in the audit service.</td>
</tr>
<tr>
<td>619846</td>
<td>20087</td>
<td>Missing Z01/Z02s in ADC Automation with DoD. Improve existing CHDR auditing with the VLER CORE Auditing Service to capture ADC related errors. Use CFRUS to determine which patients are candidates for having their clinical data re-exchanged captured in the audit service. Use the Audit/Message Replay Service capabilities of System Health Alert Monitoring Utility (SHAMU) to perform the re-exchange.</td>
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</tbody>
</table>
Related Documentation

The CHDR 2.1 User Guide is located in the following CHDR repositories: