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## Revision History

<table>
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<tr>
<th>Date</th>
<th>Patch</th>
<th>Pages</th>
<th>Change</th>
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<tr>
<td>7/2020</td>
<td>OR<em>3</em>525</td>
<td>334</td>
<td><strong>Active Remote Data View (RDV) update</strong></td>
<td>J. Niksich</td>
<td>C. Bernier</td>
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<td>Replaced all references to VistaWeb with JLV</td>
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<td>Updated dates on Title page and in Footers</td>
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<td>02/2020</td>
<td>OR<em>3</em>518</td>
<td>1</td>
<td>Added [Bulk Parameter Editor for Notifications User Guide (OR<em>3.0</em>518)] to Related Manuals list</td>
<td>S. Suiters</td>
<td>C. Bernier</td>
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<td></td>
<td></td>
<td>26</td>
<td>Added new items to Exported Routines:</td>
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<td><strong>ORALEAPI</strong></td>
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<td><strong>ORPARMG1</strong></td>
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<td>271</td>
<td>Updated the ‘<strong>Bulk Parameter Editor Menu</strong>’ in the “Example of How to Enable, Disable, or set a Notification as Mandatory for One or More Users and One or More Notifications”</td>
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<td>10/28/19</td>
<td>OR<em>3</em>397</td>
<td>All</td>
<td>Formatted for 508 Compliance.</td>
<td>M. Evert</td>
<td>J. Santos, A. Robinson</td>
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<td>Formatted margins and headings.</td>
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<td>Removed extra spaces between paragraphs.</td>
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<td>Removed CS Order Anomalies because of move to OR<em>3.0</em>498.</td>
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<td>65</td>
<td>Added information about the <a href="#">Clinically Indicated Date</a></td>
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<tr>
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<td>Version</td>
<td>Page</td>
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<td>09/2019</td>
<td>OR<em>3.0</em>500</td>
<td>1</td>
<td>Added <strong>Bulk Parameter Editor for Notifications User Guide (OR<em>3.0</em>500)</strong> to Related Manuals list</td>
<td>S. Suiters, C. Bernier</td>
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<td></td>
<td>Added new items to Exported Routines: ORALEAPI, ORPARMG1, ORPARMGMR</td>
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<td></td>
<td>Added Bulk Parameter Editor for Notifications ORB3_LM_1_MAIN_MENU</td>
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<td>Added RPC ORALEAPI REPORT information to the Exported Remote Procedure Calls (RPCs) list</td>
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<td>Added [DETAILED] to ‘Display Notifications User can Receive’ in the Troubleshooting Flowchart</td>
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<td>Added new section: ‘How to Enable, Disable, or set a Notification as Mandatory’</td>
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<td>11/26/18</td>
<td>OR<em>3.0</em>435</td>
<td>307</td>
<td>Added information about the parameter ORDER URGENCY ASAP ALTERNATIVE to Appendix C.</td>
<td>G. Miller, N. Muller</td>
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<tr>
<td>7/24/15</td>
<td>OR<em>3</em>350</td>
<td>221, 275, 311, 313, 315, 317, 319</td>
<td>Added information about the LAPSED UNSIGNED ORDER notification in various tables and in the main description.</td>
<td>K. Condie, T. Robinson</td>
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<tr>
<td>Date</td>
<td>OR<em>3</em>350</td>
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<td>9/24/14</td>
<td>OR<em>3</em>350</td>
<td>194, 221, 260, 275, 312, 313, 316, 317, 319, 321, 324</td>
<td>The name of notification 73 has been changed from OR PX RENEWAL to OP NON-RENEWABLE RX RENEWAL in various tables and in the main description.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<td>9/24/14</td>
<td>OR<em>3</em>350</td>
<td>192, 220, 230, 274, 321</td>
<td>Entered additional material about the notification CONSULT/PROC INTERPRETATION that seemed to be missing. Updated various tables and reentered the main definition.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>9/18/14</td>
<td>OR<em>3</em>350</td>
<td>151</td>
<td>Removed the section about Archiving and Purging because the options no longer exist. This is a documentation change not related to the features of this patch.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<td>9/18/14</td>
<td>OR<em>3</em>350</td>
<td>37</td>
<td>Removed two items from the tasked jobs that no longer exist. This is a documentation change not related to the feature of this patch.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<td>OR*</td>
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<td>7/11/13</td>
<td>OR<em>3.0</em>312</td>
<td>92</td>
<td>Added a section about reports for quick orders that have mixed case or free-text dosages, includes sections for how to correct questions and answers, and examples. This is related to Dosage Order Checks in MOCHA 2. This information was included in the CPRS Technical Manual: GUI Version with patch OR<em>3.0</em>366.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>5/2/13</td>
<td>OR<em>3</em>306</td>
<td>268</td>
<td>Added a small section about how to enable or disable a notification.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>10/23/12</td>
<td>OR<em>3</em>348</td>
<td>227</td>
<td>Added information about local notifications, their appropriate numbering, and moving a local notification, if necessary.</td>
<td>A. Ebert</td>
<td>T. Robinson</td>
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<tr>
<td>10/1/12</td>
<td>OR<em>3</em>313</td>
<td>232</td>
<td>Changed the Mechanism for the Consult/Request Updated notification to be more specific.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>9/12/12</td>
<td>OR<em>3</em>348</td>
<td>192</td>
<td>Added 4 notifications to the list of notifications in the troubleshooting table.</td>
<td>A. Ebert</td>
<td>T. Robinson</td>
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<tr>
<td>9/12/12</td>
<td>OR<em>3</em>348</td>
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<td>Added 4 notifications to the list of those in CPRS.</td>
<td>A. Ebert</td>
<td>T. Robinson</td>
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<tr>
<td>9/6/12</td>
<td>OR<em>3</em>306</td>
<td>152</td>
<td>Added an entry for the new file ORPA(101.52 – ORDER DEA ARCHIVE INFO FILE for ePCS orders.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>9/6/12</td>
<td>OR<em>3</em>306</td>
<td>182</td>
<td>Added a note about caching being disabled currently.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>Date</td>
<td>OR<em>3</em></td>
<td>Change Number</td>
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<td>7/13/12</td>
<td>OR<em>3</em>306</td>
<td>234</td>
<td>Added a description of three DEA ePCS notifications: Auto Discontinue of Controlled Substance Med Orders, PKI Certificate Expired, and PKI Certificate Revoked.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>7/13/12</td>
<td>OR<em>3</em>348</td>
<td>267</td>
<td>Added a description of the Suicide Attempted/Completed notification.</td>
<td>A. Ebert</td>
<td>T. Robinson</td>
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<tr>
<td>7/13/12</td>
<td>OR<em>3</em>243</td>
<td>230</td>
<td>Added a description of the Anatomic Pathology Results notification.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>7/13/12</td>
<td>OR<em>3</em>243</td>
<td>256</td>
<td>Added a description of the Mammogram Results notification.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>7/13/12</td>
<td>OR<em>3</em>243</td>
<td>264</td>
<td>Added a description of the Pap Smear Results notification.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<td>2/15/11</td>
<td>OR<em>3</em>337</td>
<td>128</td>
<td>Added a section describing the IV Quick Order Additive Frequency Conversion Utility and how it works.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>1/14/11</td>
<td>OR<em>3</em>280</td>
<td>208</td>
<td>Clarified how tab access works in CPRS for giving users access to reports tab or all tabs.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>7/16/10</td>
<td>OR<em>3</em>280</td>
<td>330</td>
<td>Removed a customization suggestion that was not working.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>7/16/10</td>
<td>OR<em>3</em>280</td>
<td>338, 346</td>
<td>Changed that the No Allergy Assessment order check is triggered on acceptance and under the order check definition.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>6/30/10</td>
<td>OR<em>3</em>280</td>
<td>332</td>
<td>Added a list of order checks that follow the rule of not firing for 5 minutes (300 seconds) after each time it fires.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>Date</td>
<td>Version</td>
<td>Description</td>
<td>Author</td>
<td>Reviewer</td>
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<td>6/30/10</td>
<td>OR<em>3</em>280</td>
<td><strong>Error! Book mark not define d.</strong> Added a table that explains from which system order checks are generated.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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| 6/3/2010   | OR*3*336| **Note:** This patch has the same functionality as OR*3.0*290, which was marked as “Entered in Error”, but also addresses an installation error for sites that do not have the class III routine VEXRX, which is related to telephone prescription renewal, in their system.

Added information about a new notification: OP RX RENEWAL REQUEST: in list of available notifications, in the troubleshooting list, in the list of notifications as parameters, with the description of the alert, in the trigger summary list, in the list for archive period, in the list of delete mechanisms, in the list for forwarding to supervisors, in the list for forwarding to surrogates, in the list for the parameter ORB PROCESSING FLAG, in the list for ORB PROVIDER RECIPIENTS, in the list for ORB URGENCY. |

<p>|               |         |                                                                                                                                                    | M. Montali     | T. Robinson |</p>
<table>
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<td>6/3/2010</td>
<td>OR<em>3</em>290 260, 317</td>
<td>Added information about a new notification: OP RX RENEWAL REQUEST: in list of available notifications, in the troubleshooting list, in the list of notifications as parameters, with the description of the alert, in the trigger summary list, in the list for archive period, in the list of delete mechanisms, in the list for forwarding to supervisors, in the list for forwarding to surrogates, in the list for the parameter ORB PROCESSING FLAG, in the list for ORB PROVIDER RECIPIENTS, in the list for ORB URGENCY.</td>
<td>M. Montali</td>
<td>T. Robinson</td>
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<td>1/11/10</td>
<td>OR<em>3</em>280 384</td>
<td>Made a change to the description of file 100.5, field 2 about manually releasing events.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<td>7/28/09</td>
<td>OR<em>3</em>296 variou s</td>
<td>Made changes based on reviewer’s comments.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>9/26/08</td>
<td>OR<em>3</em>296 76</td>
<td>Updated the section on creating Continuous IV quick orders.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>9/26/08</td>
<td>OR<em>3</em>296</td>
<td>Updated the section on creating Intermittent IV quick orders.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>9/26/08</td>
<td>OR<em>3</em>301 124</td>
<td>Added a section about the new IV quick order to Infusion quick order conversion utility.</td>
<td>K. Condie</td>
<td>T. Robinson</td>
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<tr>
<td>8/14/08</td>
<td>OR<em>3</em>243 183</td>
<td>Added information about the graphing resource device.</td>
<td>A. Ebert</td>
<td>T. Robinson</td>
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<td>8/4/08</td>
<td>OR<em>3</em>268</td>
<td>Changed the names of two notifications: from IMAGING RESULTS to IMAGING RESULTS, NON CRITICAL and from ABNORMAL IMAGING RESULTS to ABNL IMAGING RESLT, NEEDS ATTN.</td>
<td>A. Ebert</td>
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<tr>
<td>7/3/08</td>
<td>OR<em>3</em>243</td>
<td>Removed reference to an old parameter ORW ADDORD INPT that is no longer used.</td>
<td>A. Ebert</td>
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<td>5/21/08</td>
<td>OR<em>3</em>243</td>
<td>64 Added a small comment about generic orders.</td>
<td>A. Ebert</td>
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<td>5/21/08</td>
<td>OR<em>3</em>243</td>
<td>64 Added a section about quick orders.</td>
<td>A. Ebert</td>
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<tr>
<td>4/30/08</td>
<td>OR<em>3</em>243</td>
<td>184 Added a small section to about troubleshooting missing provider names in the provider selection lists and possible reindexing of the AUSER cross-reference.</td>
<td>A. Ebert</td>
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<td>4/23/08</td>
<td>OR<em>3</em>243</td>
<td>283 Revised some information about XQALERT DELETE OLD, which deletes alerts.</td>
<td>A. Ebert</td>
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<tr>
<td>12/31/07</td>
<td>OR<em>3</em>243</td>
<td>384, 402, 406 Changed references from TIME PAT OUT OR to TIME PAT IN OR as triggers for discontinuing orders and with delayed orders.</td>
<td>A. Ebert</td>
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<td>12/31/07</td>
<td>OR<em>3</em>243</td>
<td>90 Added a section on the IV Medication Quick Order Report.</td>
<td>A. Ebert</td>
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<td>5/16/07</td>
<td>OR<em>3</em>243</td>
<td>131 Order check reason for override report.</td>
<td>A. Ebert</td>
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<td>4/4/07</td>
<td>OR<em>3</em>232</td>
<td>334 Added reviewers’ changes.</td>
<td>D. Rickard</td>
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Computerized Patient Record System (CPRS) Technical Manual

July 2020
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<th>Description</th>
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<th>Reviewer</th>
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<tr>
<td>7/6/06</td>
<td>OR<em>3</em>232</td>
<td>336</td>
<td>Added information about Remote Data Interoperability (remote order checking) only being set through the OR RDI PARAMS menus.</td>
<td>D. Rickard</td>
<td>T. Robinson</td>
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<tr>
<td>6/12/06</td>
<td>OR<em>3</em>232</td>
<td>334</td>
<td>Added information regarding how Remote Data Interoperability (remote order checking) works.</td>
<td>D. Rickard</td>
<td>T. Robinson</td>
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<td>11/28/06</td>
<td>OR<em>3</em>242</td>
<td>23</td>
<td>Added some information about the Nature of Order file and how it is now edited.</td>
<td>S. Madsen</td>
<td>T. Robinson</td>
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<td>3/29/05</td>
<td>OR<em>3</em>215</td>
<td>325</td>
<td>Clarified the description under ORK CLINICAL DANGER LEVEL of when a provider would need to enter a justification for override.</td>
<td>A. Ebert</td>
<td>T. Robinson</td>
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<tr>
<td>3/8/05</td>
<td>OR<em>3</em>215</td>
<td>193, 221, 257, 275, 311, 313, 316, 317, 319, 321, 324, 317</td>
<td>Added information regarding the new MEDICATIONS EXPIRING – OUPT alert and minor changes to the name of MEDICATIONS EXPIRING to MEDICATIONS EXPIRING – INPT.</td>
<td>A. Ebert</td>
<td>T. Robinson</td>
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<td>8/2/05</td>
<td>OR<em>3</em>215</td>
<td>204</td>
<td>Expanding the section that talks about signature keys and ordering.</td>
<td>M. Hendry</td>
<td>T. Robinson</td>
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<tr>
<td>7/7/05</td>
<td>OR<em>3</em>215</td>
<td>257</td>
<td>Put in the description for the MEDICATIONS EXPIRING – OUTPT notification.</td>
<td>M. Hendry</td>
<td>T. Robinson</td>
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<tr>
<td>7/5/05</td>
<td>OR<em>3</em>220</td>
<td>280</td>
<td>Made changes to the Notification Processing Flowchart.</td>
<td>M. Hendry</td>
<td>T. Robinson</td>
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<td>6/24/05</td>
<td>OR<em>3</em>221</td>
<td>341, 345</td>
<td>Added the formula used to calculate estimated creatinine clearance for the <strong>Aminoglycoside Ordered</strong> and <strong>Estimated Creatinine Clearance</strong> order checks.</td>
<td>M. Hendry, T. Robinson</td>
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<td>6/24/05</td>
<td>OR<em>3</em>220</td>
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<td>Added new options for Provider recipients.</td>
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<td>10/27/04</td>
<td>OR<em>3.0</em>222</td>
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<td>Added small note about <strong>Group Note</strong> application and reference to the appropriate manual.</td>
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<td>10/1/04</td>
<td>OR<em>3.0</em>225</td>
<td>137</td>
<td>Added the fact that the Performance Monitor now filters Non-VA Meds and revised this section slightly.</td>
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<td>7/30/04</td>
<td>OR<em>3.0</em>190</td>
<td>N/A</td>
<td>Removed information about inpatient medications for outpatients (IMO) functionality. This functionality is not available in CPRS GUI 24.</td>
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<td>4/1/04</td>
<td>OR<em>3.0</em>190</td>
<td>338</td>
<td>Added the exceptions or non-VA meds allergies and duplicate drug class order checks.</td>
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<td>8/18/03</td>
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<td>149</td>
<td>Added information about Code Set Versioning and ORCM GMRC CSV EVENT and ORCM GMRC CSV TASK to get information on inactive codes in consults and procedures quick orders.</td>
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<td>1/24/03</td>
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<td>236-237, 288</td>
<td>Added changes for Forwarding Alerts to a backup reviewer. Also, added a change for analgesics.</td>
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<td>10/1/02</td>
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<td>296-331</td>
<td>Updated appendix F, “Creating, Editing, and Viewing Release Events”</td>
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<td>10/1/02</td>
<td>332-351</td>
<td>Updated appendix G, “Automatically Discontinuing Orders”</td>
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<tr>
<td>10/1/02</td>
<td>352-354</td>
<td>Added appendix H: Frequently Asked Questions about Event-Delayed Orders and Automatically Discontinuing Orders (Auto-DC Rules)</td>
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<td>10/1/02</td>
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<td>Updated the CPRS Configuration Menu (Clin Coord) options.</td>
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<td>10/1/02</td>
<td>72</td>
<td>Added OE/RR PATIENT EVENT FILE, OE/RR RELEASE EVENTS, and OE/RR AUTO-DC RULES to the file list.</td>
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<td>9/1/02</td>
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<td>Updated exported routines.</td>
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<td>Added a description of the OE/RR RELEASE EVENTS (#100.5) file under the “Files Associated with Release Events” heading.</td>
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<td>Added a description of the OE/RR AUTO-DC RULES (#100.6) file and the OE/RR PATIENT EVENTS (#100.2) file under the heading “Files Associated with Auto-DC Rules.”</td>
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<td>Added brief explanation for information on the patch OR<em>3.0</em>139 change of recipients for orderer-flagged results. Also added information on the Notification ORB Forward Backup Reviewer.</td>
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<td>8/28/02</td>
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<td>Added information about Order Check Data.</td>
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<td>Added “CPRS Tab Access and Reports-Only Access” section.</td>
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<tr>
<td>3/20/02</td>
<td>Added steps for assigning keys including an example.</td>
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<td>2/11/02</td>
<td>Added information to Appendix E about how order checks work and descriptions of the order checks. Related patches are OR<em>3</em>127 and OR<em>3</em>128.</td>
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<td>12/10/01</td>
<td>Added information about changes to UNVERIFIED ORDER and UNVERIFIED MEDICATION ORDER alerts.</td>
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<td>12/10/01</td>
<td>Added information about the IMAGING REQUEST CHANGED alert.</td>
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<td>11/29/01</td>
<td>Deleted references to ORB SURROGATE RECIPIENT parameter.</td>
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<td>11/29/01</td>
<td>Added new alert: LAB THRESHOLD EXCEEDED.</td>
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<td>11/29/01</td>
<td>Added functionality that sends alerts to devices on an OE/RR team.</td>
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<td>11/29/01</td>
<td>Added description of ORK CONTRAST MEDIA CREATININE parameter.</td>
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<tr>
<td>9/25/01</td>
<td>Added description of changes for Performance Monitor Report.</td>
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<td>5/10/01</td>
<td>Added description of functions for Performance Monitor Report in CPRS Configuration (Clin Coord).</td>
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<tr>
<td>5/3/01</td>
<td>Added Appendix D entitled “Exported (Default) Values for Notification Parameters”</td>
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<tr>
<td>2/15/01</td>
<td>Added a new appendix on how notifications work.</td>
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<td>Added a number of new notifications including Flagged orderable items expiring from patch 0R <em>3</em>88.</td>
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<tr>
<td>7/24/00</td>
<td>Updated appendix with new material from patches.</td>
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<td>7/24/00</td>
<td>Included a new version of the parameters appendix that was formerly Appendix B.</td>
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<tr>
<td>6/29/00</td>
<td>Changed example of DGPM movement sequence.</td>
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<td>6/28/00</td>
<td>Changed references to drug-drug interaction to read critical drug interaction.</td>
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1. Introduction

The Computerized Patient Record System (CPRS) v. 1.0 is a Veterans Health Information Systems and Technology Architecture (VISTA) software application. CPRS enables clinicians, nurses, clerks, and others to enter, review, and continuously update all information connected with any patient.

Developing a computerized patient record is a long-term goal of the Veterans Health Administration (VHA) as part of its mission to provide high quality healthcare for America’s veterans. New information needs are emerging as VHA continues to shift into a primary care, ambulatory healthcare delivery model. In the new clinical information environment, all information relevant to treating any given patient will be readily available to healthcare providers, clinical and management decision-makers, educators, and researchers through a secure platform on a need-to-know basis.

With CPRS, care providers can quickly flip through electronic “pages” of the chart to add new orders, review or add problems, write progress notes, or see results. Alerts, notifications, cautions, warnings, advanced directives, future appointments, demographic data, medications, and orders are all available. Order entry now includes quick orders, order sets, and order checking.

Purpose and Contents of This Manual

This manual provides technical information about packages installed with CPRS. Packages that integrate with CPRS, but were released prior to the CPRS installation (such as Dietetics, Lab patches, and Radiology), are described in separate package documentation. Pharmacy (Inpatient Meds and Outpatient Pharmacy) and Consult/Result Tracking are installed with CPRS, but have separate Technical and User Manuals. See those manuals for set-up instructions, lists of routines and files, additional technical information, and user information.

Related Manuals

Computerized Patient Record System v. 1.0 Clinician Guide (GUI)

Computerized Patient Record System v. 1.0 Clinician Guide (LM)

Computerized Patient Record System v. 1.0 Setup Guide

Computerized Patient Record System v. 1.0 Technical Manual

Bulk Parameter Editor for Notifications User Guide (OR*3.0*500)

Bulk Parameter Editor for Notifications User Guide (OR*3.0*518)
### Differences between OE/RR 2.5 and CPRS 1.0

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<th>CPRS 1.0</th>
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<td>Features a screen-like interface.</td>
<td>Features the List Manager interface.</td>
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<td>&quot;Backdoor&quot; packages control ordering dialogs.</td>
<td>CPRS controls all ordering dialogs.</td>
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<tr>
<td>Multiple patient selection is available.</td>
<td>Only single patient selection is available except through the Results Reporting Menu.</td>
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<tr>
<td>You must select an action, then an item.</td>
<td>You must select an item, then an action.</td>
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<td>Navigation of electronic record takes place through a menu structure of options and protocols.</td>
<td>The List Manager version allows navigation through the electronic record by way of actions that are equivalent to the tabs of a chart. The GUI version allows navigation by clicking on tabs.</td>
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<td>Outpatient Pharmacy ordering is not available through OE/RR.</td>
<td>Outpatient Pharmacy is now available.</td>
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<tr>
<td>Consults resulting, and tracking are not available through OE/RR.</td>
<td>Consults resulting is available through TIU.</td>
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<tr>
<td>There is no access to Discharge Summary.</td>
<td>Discharge Summary is available thru CPRS.</td>
</tr>
<tr>
<td>There is no time-delay ordering capability.</td>
<td>Time-delayed orders are available (admission, discharge, and transfer).</td>
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<td><strong>Additional actions available for orders:</strong></td>
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<td>• Copy</td>
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<tr>
<td>• Edit Orders</td>
<td>• Discontinue</td>
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</tr>
<tr>
<td>• Comments for Ward/Clinic</td>
<td>• Flag</td>
</tr>
<tr>
<td>• Signature on Chart</td>
<td>• Unflag</td>
</tr>
<tr>
<td>• Results Display</td>
<td>• Renew</td>
</tr>
<tr>
<td>• Long/Short Order Format</td>
<td>• Verify</td>
</tr>
<tr>
<td>• Detailed Order Display</td>
<td>• Ward Comments</td>
</tr>
<tr>
<td>• Print Orders</td>
<td>• Sign/On Chart</td>
</tr>
<tr>
<td>• Print Labels</td>
<td>• Results</td>
</tr>
<tr>
<td>• Requisition Print</td>
<td>• Details</td>
</tr>
<tr>
<td>• Print Chart Copy</td>
<td>• Print List and Print Screen (List Manager actions)</td>
</tr>
<tr>
<td>• Print Service Copy</td>
<td>• Print Labels</td>
</tr>
<tr>
<td>• Accept Orders</td>
<td>• Print Requisitions</td>
</tr>
<tr>
<td></td>
<td>• Print Chart Copies</td>
</tr>
<tr>
<td></td>
<td>• Print Service Copies</td>
</tr>
<tr>
<td></td>
<td>• Print Work Copies</td>
</tr>
</tbody>
</table>
| Duplicate order is the only order check. | Twenty-one order checks are available:  
ALLERGY-CONTRAST MEDIA INTERACTION  
ALLERGY-DRUG INTERACTION  
AMINOGLYCOSIDE ORDERED  
BIOCHEM ABNORMALITY FOR CONTRA  
CLOZAPINE APPROPRIATENESS  
CRITICAL DRUG INTERACTION  
CT & MRI PHYSICAL LIMITATIONS  
DISPENSE DRUG NOT SELECTED  
DUPLICATE DRUG CLASS ORDER  
DUPLICATE DRUG ORDER  
DUPLICATE ORDER  
ERROR MESSAGE  
ESTIMATED CREATININE CLEARANCE  
GLUCOPHAGE-CONTRAST MEDIA  
LAB ORDER FREQ RESTRICTIONS  
MISSING LAB TESTS FOR ANGIOGRA  
ORDER CHECKING NOT AVAILABLE  
POLYPHARMACY  
RECENT BARIUM STUDY  
RECENT ORAL CHOLECYSTOGRAM  
RENAL FUNCTIONS OVER AGE 65 |
| --- | --- |
| 23 Notifications are available. | 57 Active Notifications are available (inactive are also listed below):  
ABNL IMAGING RESLT, NEEDS ATTN  
ABNORMAL LAB RESULT (INFO)  
ABNORMAL LAB RESULTS (ACTION)  
ADMISSION  
ANATOMIC PATHOLOGY  
CONSULT/PROC INTERPRETATION  
CONSULT/REQUEST CANCEL/HOLD  
CONSULT/REQUEST RESOLUTION  
CONSULT/REQUEST UPDATED  
CRITICAL LAB RESULT (INFO)  
CRITICAL LAB RESULTS (ACTION)  
DEA AUTO DC CS MED ORDER  
DEA CERTIFICATE EXPIRED  
DEA CERTIFICATE REVOKED  
DC ORDER  
DECEASED PATIENT  
DISCHARGE |
<table>
<thead>
<tr>
<th>DNR EXPIRING</th>
</tr>
</thead>
<tbody>
<tr>
<td>ERROR MESSAGE</td>
</tr>
<tr>
<td>FLAG ORDER FOR CLARIFICATION</td>
</tr>
<tr>
<td>FLAGGED OI EXPIRING – INPT</td>
</tr>
<tr>
<td>FLAGGED OI EXPIRING – OUTPT</td>
</tr>
<tr>
<td>FLAGGED OI ORDER – INPT</td>
</tr>
<tr>
<td>FLAGGED OI ORDER – OUTPT</td>
</tr>
<tr>
<td>FLAGGED OI RESULTS – INPT</td>
</tr>
<tr>
<td>FLAGGED OI RESULTS – OUTPT</td>
</tr>
<tr>
<td>FOOD/DRUG INTERACTION</td>
</tr>
<tr>
<td>FREE TEXT (INACTIVE)</td>
</tr>
<tr>
<td>IMAGING PATIENT EXAMINED</td>
</tr>
<tr>
<td>IMAGING REQUEST CANCEL/HELD</td>
</tr>
<tr>
<td>IMAGING REQUEST CHANGED</td>
</tr>
<tr>
<td>IMAGING RESULTS, NON CRITICAL</td>
</tr>
<tr>
<td>IMAGING RESULTS AMENDED</td>
</tr>
<tr>
<td>LAB ORDER CANCELED</td>
</tr>
<tr>
<td>LAB RESULTS</td>
</tr>
<tr>
<td>LAB THRESHOLD EXCEEDED</td>
</tr>
<tr>
<td>LAPSED UNSIGNED ORDER</td>
</tr>
<tr>
<td>MAMMOGRAM RESULTS</td>
</tr>
<tr>
<td>MEDICATIONS EXPIRING - INPT</td>
</tr>
<tr>
<td>MEDICATIONS EXPIRING - OUTPT</td>
</tr>
<tr>
<td>NEW ORDER</td>
</tr>
<tr>
<td>NEW SERVICE CONSULT/REQUEST</td>
</tr>
<tr>
<td>NPO DIET MORE THAN 72 HRS</td>
</tr>
<tr>
<td>OP NON-RENEWABLE RX RENEWAL</td>
</tr>
<tr>
<td>ORDER CHECK</td>
</tr>
<tr>
<td>ORDER REQUIRES CHART SIGNATURE     (INACTIVE)</td>
</tr>
<tr>
<td>ORDER REQUIRES CO-SIGNATURE        (INACTIVE)</td>
</tr>
<tr>
<td>ORDER REQUIRES ELEC SIGNATURE</td>
</tr>
<tr>
<td>ORDERER-FLAGGED RESULTS</td>
</tr>
<tr>
<td>PAP SMEAR RESULTS</td>
</tr>
<tr>
<td>SERVICE ORDER REQ CHART SIGN        (INACTIVE)</td>
</tr>
<tr>
<td>STAT IMAGING REQUEST</td>
</tr>
<tr>
<td>STAT ORDER</td>
</tr>
<tr>
<td>STAT RESULTS</td>
</tr>
<tr>
<td>SUICIDE ATTEMPTED/COMPLETED</td>
</tr>
<tr>
<td>TRANSFER FROM PSYCHIATRY</td>
</tr>
<tr>
<td>UNSCHEDULED VISIT</td>
</tr>
<tr>
<td>UNVERIFIED MEDICATION ORDER</td>
</tr>
<tr>
<td>UNVERIFIED ORDER</td>
</tr>
<tr>
<td>-------------------</td>
</tr>
<tr>
<td>URGENT IMAGING REQUEST</td>
</tr>
<tr>
<td>Processing action for notifications is exported by OE/RR.</td>
</tr>
<tr>
<td>Problem lists are available only outside OE/RR.</td>
</tr>
<tr>
<td>There is no patient data overview available.</td>
</tr>
</tbody>
</table>
2. Implementation & Maintenance

See the CPRS Setup Guide for more detailed instructions about planning and setting up CPRS.

1. Summary of CPRS Setup

The options on the CPRS Configuration Menus (Clin Coord and IRM) let IRMS staff and Clinical Coordinators set and modify various parameters that control the behavior of the package. These options are described in the following pages of this section.

- After installation of CPRS, check CPRS parameters to ensure that they are all appropriate for your site (particularly Print parameters)
- Set up Pharmacy (Inpatient and Outpatient) parameters (Pharmacy ADPAC). See the CPRS Setup Guide or the Pharmacy Technical Manuals for details
- Use Enable or Disable Notification System [ORB3 SYSTEM ENABLE/DISABLE] on the Notification Mgt Menu on the CPRS Manager Menu to turn on Notifications
- Turn on Order Checking and set up its parameters
- Use the option Edit Site Local Terms [OCX LOCAL TERM EDIT] on the Order Checking Management Menu to link the lab, radiology, and DNR terms used for order checking to local terms
- Review and assign sequence numbers to protocols in the DGPM Movement Events field of the Protocol file

<table>
<thead>
<tr>
<th>ITEM: DGOERR NOTE</th>
<th>SEQUENCE: 13</th>
</tr>
</thead>
<tbody>
<tr>
<td>ITEM: FHWMAS</td>
<td>SEQUENCE: 14</td>
</tr>
<tr>
<td>ITEM: LR70 MOVEMENT EVENT</td>
<td>SEQUENCE: 15</td>
</tr>
<tr>
<td>ITEM: OCX ORDER CHECK PATIENT MOVE</td>
<td>SEQUENCE: 16</td>
</tr>
<tr>
<td>ITEM: PSJ OR PAT ADT</td>
<td>SEQUENCE: 19</td>
</tr>
<tr>
<td>ITEM: ORU AUTOLIST</td>
<td>SEQUENCE: 21</td>
</tr>
<tr>
<td>ITEM: ORU REVIEW DELAYED ORDERS</td>
<td>SEQUENCE: 22</td>
</tr>
<tr>
<td>ITEM: ORU PATIENT MOVMT</td>
<td>SEQUENCE: 100</td>
</tr>
<tr>
<td>ITEM: OR GUA EVENT PROCESSOR NOTASK</td>
<td>SEQUENCE: 999</td>
</tr>
</tbody>
</table>

- Assign menus and keys for all packages distributed with CPRS, as described in the CPRS Set-up Guide or the Package Security Guide section of this manual and also the other packages’ Technical Manuals
- Review patient and team lists to ensure that they are what you will still use. Add or modify patient or team lists as needed, using options on the Patient/Team List menu
- Set up Consult/Request Tracking parameters and the SERVICE/SECTION hierarchy. See the CPRS Setup Guide or the Consult/Request Tracking Technical Manual for details
- Set up the GUI executable (install on client computers [PCs])
2. Patch OR*2.5*49

Patch OR*2.5*49—installed prior to CPRS to help prepare VAMCs for CPRS implementation—converts menus, orderable items, generic orders, and quick orders set up locally by sites currently using OE/RR 2.5. The Order Menu Management menu exported with Patch 49 is also on the CPRS Configuration Menu (Clin Coord) on the CPRS Management Menu, and can be used after CPRS is installed to create and edit CPRS orderable items, menus, quick orders, and order sets. Other components of CPRS (Pharmacy, Lab, Radiology, Consult/Request Tracking, etc.) run their own conversions.

Patch 49 begins the transition from the PROTOCOL file (#101) to new files that have been created to handle the ordering mechanism: ORDER DIALOG (#101.41), and ORDERABLE ITEMS (#101.43). Patch 49 installs the data dictionaries. When the patch is installed, these files are automatically populated.

The setup steps for patch 49 in preparation for CPRS include:

- using options on the Protocol Conversion menu to prepare for conversion of menus to the new CPRS files
- conversion of menus
- using options on the Menu Management Menu to create or modify menus, quick orders, order sets, etc

**Protocol Conversion**


**Protocol Conversion Utilities**

<table>
<thead>
<tr>
<th>Option</th>
<th>Option Name</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Review protocol file</td>
<td>ORCM REVIEW PROTOCOLS</td>
<td>This option queues three tasks to examine the PROTOCOL (#101) file for potential problems that may occur with the conversion of protocols to the ORDER DIALOG (#101.41) file. In addition a task will be queued to examine the PACKAGE (#9.4) file for problems with the entries for packages that interface with CPRS. A report of each search will be printed to a selected device.</td>
</tr>
<tr>
<td>Convert Protocol Menus to Order Dialogs</td>
<td>ORCM CONVERT MENUS</td>
<td>This option converts “add order” protocol menus that are currently in use to the ORDER DIALOG (#101.41) file for use in CPRS. All items on the menus will be converted to this file as well. A mail message will be sent to the individual running the option regarding any protocols that could not be successfully converted.</td>
</tr>
<tr>
<td>Locate protocols</td>
<td>ORCM FIND PROTOCOL</td>
<td>This option allows the Clinical Coordinator or IRM staff to see which protocols contain another protocol as an item. This option may be especially useful after the protocol conversion has completed. If one or more protocols must be recreated using the Order Menu Management tools, this option can be used to see where the recreated item should be replaced in the ORDER DIALOG (#101.41) file.</td>
</tr>
</tbody>
</table>
**Estimate global growth for CPRS**

<table>
<thead>
<tr>
<th>ORCM ESTIMATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>This option estimates the number of outpatient prescriptions that will be backfilled into the ORDER (#100) file upon installation of CPRS. This figure, along with the current number of entries in the ^OR global and the ^PSRX global, will be used to estimate the amount of global blocks that will be consumed by the installation of CPRS and the subsequent conversion of orders. NOTE: This is only an estimate. There are many variables that can affect the actual space consumption.</td>
</tr>
</tbody>
</table>

**Order Menu Management**

<table>
<thead>
<tr>
<th>ORCM MGMT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Options on this menu can be used for editing and modifying options and menus for CPRS.</td>
</tr>
</tbody>
</table>

**Checks and Tasks Triggered When Using ORCM REVIEW PROTOCOLS**

**Extended Action Order Set Check**

Patch OR*2.5*49 will not convert order sets to the ORDER DIALOG (#101.41) file in the proper sequence if the COLUMN WIDTH field is defined for the specific protocol. This will check all extended action protocols and report any with this problem. This is a common occurrence if an order set was created as a menu and then changed to an extended action protocol.

**Corrective Action**

Deletes the entry in the COLUMN WIDTH field of the listed protocols. This will not affect the protocol and will keep a problem from occurring when converted to file 101.41.

**Namespace Check**

The conversion of protocols to the ORDER DIALOG (#101.41) file relies heavily on the national namespaces to convert quick orders. This check will identify protocols that belong to a national package, but begin with a namespace differing from that package.

**Corrective Action**

For conversion of these quick orders to take place, the name must begin with the national namespace of the package to which it belongs.

**Duplicate Item Check**

Generic orders in CPRS can’t use the same item within an order dialog more than once. This check looks at all dialog type protocols and lists any that have an item that is used more than one time in the ITEM multiple.

**Corrective Action**

The duplicate item must be removed or replaced with a similar item with a different name.

**Package File Check**

This check looks at your PACKAGE file and makes sure that the packages required by CPRS are present, have the correct prefixes, and are not duplicated.
Corrective Action

Due to the variability of problems and the significance of the PACKAGE (#9.4) file to proper VISTA functioning, the recommendation is to contact National VISTA Support for assistance in correction of any problems.

Order Menu Management

See the Patch OR*2.5*49 Installation/Implementation Guide for further descriptions and examples of the options on the CPRS Order Menu Management menu.

<table>
<thead>
<tr>
<th>Option Name</th>
<th>Menu Text</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>ORCM ORDERABLES</td>
<td>Enter/edit orderable items</td>
<td>Lets you enter or edit generic order items.</td>
</tr>
<tr>
<td>ORCM PROMPTS</td>
<td>Enter/edit prompts</td>
<td>Lets you add or edit prompts for generic order dialogs.</td>
</tr>
<tr>
<td>ORCM ORDERS</td>
<td>Enter/edit generic orders</td>
<td>Lets you add or edit free-text orders.</td>
</tr>
<tr>
<td>ORCM QUICK ORDERS</td>
<td>Enter/edit quick orders</td>
<td>Lets you create or modify quick orders.</td>
</tr>
<tr>
<td>ORCM ORDER SETS</td>
<td>Enter/edit order sets</td>
<td>Lets you create or modify order sets.</td>
</tr>
<tr>
<td>ORCM ACTIONS</td>
<td>Enter/edit actions</td>
<td>Lets you enter or edit entry and exit actions for order dialogs.</td>
</tr>
<tr>
<td>ORCM MENU</td>
<td>Enter/edit order menus</td>
<td>Lets you modify the current order menus or create new ones for your site.</td>
</tr>
<tr>
<td>OR PARAM ADD MENU</td>
<td>Assign primary order menu</td>
<td>Lets you assign ordering menus (including ones you might have created through options here).</td>
</tr>
<tr>
<td>ORCM PROTOCOLS</td>
<td>Convert protocols</td>
<td>Lets you convert any protocols that didn’t get automatically converted by the installation.</td>
</tr>
<tr>
<td>ORCM SEARCH/REPLACE</td>
<td>Search/Replace Components</td>
<td>Lets you search for specific components on menus and replace them with new ones.</td>
</tr>
</tbody>
</table>
## 3. Setting CPRS Parameters

CPRS Parameters are set through the following menus and options:

### CPRS Configuration Menu (Clin Coord)

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Menu Text</th>
<th>Option Name (in Option file #19)</th>
</tr>
</thead>
<tbody>
<tr>
<td>AL</td>
<td>Allocate OE/RR Security Keys</td>
<td>ORCL KEY ALLOCATION</td>
</tr>
<tr>
<td>KK</td>
<td>Check for Multiple Keys</td>
<td>ORE KEY CHECK</td>
</tr>
<tr>
<td>DC</td>
<td>Edit DC Reasons</td>
<td>ORCL ORDER REASON</td>
</tr>
<tr>
<td>GP</td>
<td>GUI Parameters ...</td>
<td>ORW PARAM GUI</td>
</tr>
<tr>
<td>GA</td>
<td>GUI Access - Tabs, RPL</td>
<td>ORCL CPRS ACCESS</td>
</tr>
<tr>
<td>MI</td>
<td>Miscellaneous Parameter</td>
<td>OR PARAM ORDER MISC</td>
</tr>
<tr>
<td>NO</td>
<td>Notification Mgmt Menu ...</td>
<td>ORB NOT COORD MENU</td>
</tr>
<tr>
<td>OC</td>
<td>Order Checking Mgmt Menu</td>
<td>ORK ORDER CHK MGMT MENU</td>
</tr>
<tr>
<td>MM</td>
<td>Order Menu Management</td>
<td>ORCM MGMT</td>
</tr>
<tr>
<td>LI</td>
<td>Patient List Mgmt Menu ...</td>
<td>ORLP PATIENT LIST MGMT</td>
</tr>
<tr>
<td>FP</td>
<td>Print Formats</td>
<td>ORCL PRINT FORMAT</td>
</tr>
<tr>
<td>PR</td>
<td>Print/Report Parameters ...</td>
<td>OR PARAM PRINTS</td>
</tr>
<tr>
<td>RE</td>
<td>Release/Cancel Delayed Orders</td>
<td>ORC DELAYED ORDERS</td>
</tr>
<tr>
<td>US</td>
<td>Unsigned orders search</td>
<td>OR UNSIGNED ORDERS</td>
</tr>
<tr>
<td>EX</td>
<td>Set Unsigned Orders View on Exit</td>
<td>OR PARAM UNSIGNED ORDERS VIEW</td>
</tr>
<tr>
<td>NA</td>
<td>Search orders by Nature or Status</td>
<td>OR NATURE/STATUS ORDER SEARCH</td>
</tr>
<tr>
<td>DO</td>
<td>Event Delayed Orders Menu</td>
<td>OR DELAYED ORDERS</td>
</tr>
<tr>
<td>PM</td>
<td>Performance Monitor Report</td>
<td>OR PERFORMANCE MONITOR</td>
</tr>
</tbody>
</table>
See the CPRS Set-up Guide for descriptions of these options.

- **CPRS Configuration (IRM)**
  
  CPRS Clean-up Utilities Menu [ORE MGR]
  ORMTIME Main Menu [ORMTIME MAIN]
  Order Check Expert System Main Menu [OCX MAIN]
  General Parameters Tools [ XPAR MENU TOOLS]

- **Personal Preferences**
- **Nature of Order file**
- **Parameter options in packages related to CPRS**

The behavior of CPRS is also affected by parameters set through the following options in other applications:

**Consults**

- Define Service Hierarchy
- Set up Consults Services
- Set Up Consult Protocols
- Set Up Consult Site Parameters

**Imaging**

- Common Procedure Enter/Edit
- Rad/NM Procedure Entry/Edit
- Modifier List
- Procedure Modifier Entry
- Division Parameter Set-up
- Location Parameter Set-up
- Device Specifications for Imaging Locations
- Location Parameter List
- Sharing Agreement/Contract Entry/Edit
- Active Procedure List (Long)
- Examination Status Entry/Edit
- Examination Status List
- Rad/NM Diagnostic Code Enter/Edit
- Diagnostic Code List
Lab

- Domain Level Parameter Edit
- Location Level Parameter Edit
- Package Level Parameter Edit
- Update CPRS Parameters
- Update CPRS with Lab order parameters
- Update CPRS with Single Lab test
- Update CPRS with all Lab test parameters
- Merge Accessions

Pharmacy

Pharmacy Data Management Menu

- Pharmacy/VA Generic Orderable Item Report
- VA Generic Orderable Item Report
- Create Pharmacy Orderable Items
- Manually Match Dispense Drugs
- Orderable Item Matching Status
- Edit Orderable Items
- Dispense Drug/Orderable Item Maintenance
- Additive/Solutions, Orderable Item
- Orderable Item Report
- Drug Enter/Edit
- Lookup into Dispense Drug File
- Med Route/Instructions Table Maintenance
- Med. Route/Instruction File Add/Edit
- Medication Instruction File Add/Edit
- Standard Schedule Edit
- Electrolyte File (IV)
- Enter/Edit Local Drug Interaction
- Edit Drug Interaction Severity
- Primary Drug Edit
- Edit IV Identifier
- CMOP Mark/Unmark (Single drug)
- Locked with PSXCMOPMGR
Outpatient Pharmacy

- Site Parameter Enter/Edit [PSO SITE PARAMETERS]
- Sets system parameter, ADMISSION CANCEL OF RXS, to discontinue med orders 72 hours after admission
- Function call to determine if Outpatient Pharmacy orders can be renewed: $X=$\texttt{RENEW^PSORENW(ORIFN)}. Returned $X=-1,1$ or 0_"^"_\text{reason} (-1=invalid order, 1=renewable, 0=not renewable)

Maintenance (Outpatient Pharmacy) Menu

- Site Parameter Enter/Edit
- Edit Provider
- Add New Providers
- Queue Background Jobs
- Autocancel Rx's on Admission
- Bingo Board Manager
- Edit Data for a Patient in the Clozapine Program
- Enter/Edit Clinic Sort Groups
- Initialize Rx Cost Statistics
- Edit Pharmacy Intervention
- Delete Intervention
- Auto-delete from Suspense
- Delete a Prescription
- Expire Prescriptions
- Purge Drug Cost Data
- Purge External Batches
- Recompile AMIS Data

Inpatient Meds

Options

- Auto-Discontinue Set-Up (to auto-discontinue patients’ orders whenever patients are transferred between wards, services, or to Authorized or Unauthorized Absence)
- Inpatient Ward Parameters Edit (to edit MAR Parameters)
- Site Parameters (IV)

Files

Inpatient Meds uses the following fields from the Pharmacy System file (^PS(59.7)): 
• **NON-FORMULARY MESSAGE:** This is a message that will be shown to non-pharmacists when they order patient drugs that are not currently stocked by the pharmacy. This is typically a warning and/or a procedure the non-pharmacist must follow before pharmacy will dispense the non-formulary drug.

• **ALLOW THE CHANGE OF ORDER TYPES ON ORDERS FROM OERR:** This field is a site parameter that will allow the pharmacist to change the type of order from what is received from CPRS. If this field is set to yes, it will be possible to change the order type on orders where the Orderable Item has data in the CORRESPONDING IV ITEM field for unit dose orders or data in the CORRESPONDING UD ITEM for IV orders.

• **IV IDENTIFIER:** This is a free text field that can be up to 30 characters. If the Orderable Item is marked for IV usage, this text will display next to the Orderable Item to distinguish a Unit dose from an IV drug.

• These fields can be accessed through the Systems Parameters Edit [PSJ SYS EDIT] option.

### 4. CPRS Configuration (IRM) [OR PARAM IRM MENU]

This menu is only available to those with Programmer access (holders of the XUPROG key).

<table>
<thead>
<tr>
<th>Option</th>
<th>Menu Text</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>OCX MAIN</td>
<td>Order Check Expert System Main Menu</td>
<td>These options are used for troubleshooting Order Checking and Notifications, for compiling the expert system rules, and for linking local terms with national terms for order checking.</td>
</tr>
<tr>
<td>ORMTIME MAIN</td>
<td>ORMTIME Main Menu</td>
<td>These options are intended for IRMS only, and are used in conjunction with the ORTASK routines.</td>
</tr>
<tr>
<td>ORE MGR</td>
<td>CPRS Clean-up Utilities</td>
<td>This menu contains a menu that contains utilities for checking consistency between lab files and OE/RR files.</td>
</tr>
<tr>
<td>XPAR MENU TOOLS</td>
<td>General Parameter Tools</td>
<td>This menu contains general purpose tools for managing parameters.</td>
</tr>
</tbody>
</table>

**Order Check Expert System**

Order Checking and Notifications both rely on a subset of CPRS called the Order Check Expert System. This includes a library of rules, elements, and a data dictionary, as well as facilities to maintain these data sets. Eventually the Expert System may be used for clinicians and others to create rules of their own by combining entities, elements, and rules.

**How It Works**

The Order Check Expert System is based on a set of Rules or Medical Logic Modules (MLM). The term Medical Logic Module, synonymous with rule or frame, is derived from the Arden Syntax, a standard for sharing MLMs and knowledge bases among decision support developers. The Order Check Expert System will support the Arden Syntax and will be able to share knowledge bases with other nonprofit entities.
At this point, the Expert System is mostly used as a compiler and as a tool for monitoring and debugging Order Checking and Notifications. The options on the Order Check Expert System Main Menu can be used to perform these functions.

Compiler

The compiler generates routines. The OCX post-install routine runs the compiler to generate an initial set of Order Checking routines. The post-install runs the compiler with default compiler options. One of the options is called Execution Trace. The default for this option is NO. When this option is set to YES, the compiler adds write statements to the compiled code that displays various aspects of the runtime environment. It displays information about the runtime data stream as well as the sequence of line labels as the compiled routine set executes. When this option is set to NO it does not add these additional statements. Adding this extra code makes the compiled routines bigger. However, since the compiler has a routine size limit (4k) imposed on it, it tends to make more routines instead. Thus, you may end up with more routines.

Order Check Expert System Main Menu

1      Compile Rules [OCX RUN COMPILER]
2      Expert System Rule Activate/Inactivate [OCX RULE ACTIVATE]
3      Edit Site Local Terms [OCX LOCAL TERM EDIT]
4      Expert System Inquire [OCX EXPERT SYSTEM INQUIRE]

After CPRS installation, each site must run this option to link terms used in the expert system to local terms. Some terms like DNR and NPO diet must be mapped to one or more entries in the orderable item file. Other terms like Serum Creatinine must be mapped to the lab test file.

Edit Site Local Terms Example

Select OPTION NAME: OCX MAIN   Order Check Expert System Main Menu
  1  Compile Rules
  2  Expert System Rule Activate/Inactivate
  3  Edit Site Local Terms
  4  Expert System Inquire

Select Order Check Expert System Main Menu Option: 3  Edit Site Local Terms

Order Check National Terms
    SERUM CREATININE
    SERUM UREA NITROGEN
    DNR
    PROTHROMBIN TIME
    THROMBOPLASTIN TIME PARTIAL
    NPO
    SERUM SPECIMEN
    PARTIAL THROMBOPLASTIN TIME
    ANGIOGRAM (PERIPHERAL)
    WBC

    < Enter ?? to see the rest of the national terms on this list>

Select National Term: PROTHROMBIN TIME

National Term: PROTHROMBIN TIME
    Translated from file: 'LABORATORY TEST'  60

    PT   (467)
    Select LABORATORY TEST NAME: PTT
    468. PTT

Select LABORATORY TEST name: <Enter>
Mail Message

Subj: Order Check Compiler Status  [#16691] 13 Jan 98 10:53  14 Lines
From: POSTMASTER (Sender: CPRSPROVIDER,ONE)  in 'IN' basket. Page 1  **NEW**

The Order Check routine compiler has completed normally on JAN 13,1998 at 10:53 by [15] CPRSPROVIDER,ONE.

ORDER CHECK EXPERT version 1.0 (rev15) released DEC 15,1997 at 12:18

Elapsed time: 6 minutes 50 seconds
Queued
Execution Trace Mode: ON
Elapsed time Logging Mode: Raw Data Logging Mode: ON Keep data for 3 days then purge.
Lines of code generated: 7835

Select MESSAGE Action: IGNORE (in IN basket)//

Expert System Inquire

This option lets you display the components that make up the rules that control order checking and notifications.

Select Order Check Expert System Main Menu Option: 4 Expert System Inquire

Choose an Option: R
Select ORDER CHECK RULE NAME: ?
Answer with ORDER CHECK RULE NAME
Do you want the entire 38-Entry ORDER CHECK RULE List? Y (Yes)
Choose from:

ABNORMAL LAB RESULTS
ALLERGY - CONTRAST MEDIA REACTION
AMINOLYCOISIDE ORDER
BIOCHEM ABNORMALITIES/CONTRAST MEDIA CHECK
CLOZAPINE
CONCURRENT LAB ORDERS FOR ANGIOGRAM, CATH - PERIPHERAL
CONSULT/REQUEST CANCELED/HELD  ***INACTIVE
CONSULT/REQUEST RESOLUTION  ***INACTIVE
CREATININE CLEARANCE ESTIMATION
CRITICAL HIGH LAB RESULTS
CRITICAL LOW LAB RESULTS
CT OR MRI PHYSICAL LIMIT CHECK
FOOD/DRUG INTERACTION
GLUCOPHAGE - CONTRAST MEDIA
IMAGING REQUEST CANCELLED/HELD
LAB ORDER CANCELLED
LAB RESULTS
NEW ORDER PLACED
NPO DIET FOR MORE THAN 72 HOURS ***INACTIVE
ORDER FLAGGED FOR CLARIFICATION
ORDER REQUIRES CHART SIGNATURE
ORDER REQUIRES CO-SIGNATURE
ORDER REQUIRES ELECTRONIC SIGNATURE
ORDERABLE ITEM MESSAGE
ORDERER FLAGGED RESULTS AVAILABLE
PATIENT ADMISSION
PATIENT DISCHARGE
PATIENT TRANSFERRED FROM PSYCHIATRY TO ANOTHER UNIT
POLYPHARMACY
RECENT BARIUM STUDY
RECENT CHOLECYSTOGRAM ORDER
RENAL FUNCTIONS OVER AGE 65 CHECK
SERVICE ORDER REQUIRES CHART SIGNATURE
SITE FLAGGED ORDER
SITE FLAGGED RESULT

STAT ORDER PLACED
STAT RESULTS AVAILABLE
ZZ TEST RULE ***INACTIVE

Select ORDER CHECK RULE NAME: L
1 LAB ORDER CANCELLED
2 LAB RESULTS
CHOOSE 1-2: 2
DEVICE: HOME// <Enter> ALPHA

Rule: LAB RESULTS (ACTIVE Status)
Rule Element Label: HL7 LAB RESULTS
Element: HL7 FINAL LAB RESULT

Event-Element Name: HL7 FINAL LAB RESULT
Data Context: GENERIC HL7 MESSAGE ARRAY
Compiled Routine:
Expression #3: IF |CONTROL CODE| EQUALS ELEMENT IN SET'RE'
Expression #4: IF |FILLER| STARTS WITH 'LR'
Expression #5: IF |REQUEST STATUS (OBR)| EQ FREE TEXT'F'

Data Field Name: CONTROL CODE
Abbreviation:
Data Context: GENERIC HL7 MESSAGE ARRAY
Metadictionary Link: PATIENT.HL7_CONTROL_CODE
Attribute: HL7 CONTROL_CODE
Data Type: FREE TEXT
OCXO VARIABLE NAME: OCXODATA("ORC",1)
OCXO UP-ARROW PIECE NUMBER: 1
OCXO DATA DRIVE SOURCE: HL7

Data Field Name: FILLER
Abbreviation: FILL
Data Context: GENERIC HL7 MESSAGE ARRAY

Metadictionary Link: PATIENT.HL7_FILLER
Attribute: HL7 FILLER
Data Type: FREE TEXT
OCXO UP-ARROW PIECE NUMBER: 2
OCXO VARIABLE NAME: OCXODATA("ORC",3)
OCXO DATA DRIVE SOURCE: HL7
Data Field Name: REQUEST STATUS (OBR)
  Abbreviation: GENERIC HL7 MESSAGE ARRAY
  Metadictionary Link: PATIENT.HL7_REQUEST_STATUS
  Attribute: REQUEST STATUS
  Data Type: FREE TEXT
  OCXO VARIABLE NAME: OCXODATA("OBR",25)
  OCXO UP-ARROW PIECE NUMBER: 1
  OCXO DATA DRIVE SOURCE: HL7

Relation Expression: HL7 LAB RESULTS
  Notification: LAB RESULTS
  Notification Message: Lab results: |ORDERABLE ITEM NAME|

Data Field Name: ORDERABLE ITEM NAME
  Abbreviation: DATABASE LOOKUP
  Metadictionary Link: PATIENT.ORD_ITEM_NAME
  Attribute: ORDERABLE ITEM
  Data Type: FREE TEXT
  OCXO EXTERNAL FUNCTION CALL: ORDITEM(|ORDER NUMBER|)

Press <enter> to continue... <Enter>

Expert System Display

Rule    Display a Rule
Element Display an Element
Field    Display a Data Field

Option List -> Element, Field, Rule
Choose an Option:

ORMTIME

ORMTIME is a background processor that is used in conjunction with the ORTASK routines to manage background jobs for order processing. They are intended for IRMS only.

ORMTIME is automatically scheduled once the Orders conversion is done. REQUEUE^ORMTIME is called from CLEANUP^OR3CONV1, which occurs when the conversion completes.

The following notifications/alerts are triggered via ORMTIME. If ORMTIME is not running/queued, they will not be sent.

DNR Expiring
Medications Expiring – Inpt
Medications Expiring – Outpt
NPO Diet > 72 Hours
Unverified Medication Order
Unverified Order
ORMTIME Main Menu [ORMTIME MAIN]

This menu contains options that are used for managing ORMTIME.

<table>
<thead>
<tr>
<th>Option</th>
<th>Name</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reschedule Background Processor</td>
<td>ORMTIME REQUEUE BACKGROUND JOB</td>
<td>Use this option to Queue or Require ORMTIME. It is safe to run this option if ORMTIME is already queued. There is a check in the queuing code to see if the job is already queued and will not queue another if it finds one already there.</td>
</tr>
<tr>
<td>Get Background Job Status</td>
<td>ORMTIME BACKGROUND JOB STATUS</td>
<td>This option gives a status report of when ORMTIME last ran and also indicates when it is next scheduled to run. It also indicates when each of the seven ORMTIME failsafe jobs are supposed to run.</td>
</tr>
<tr>
<td>Kill all ORMTIME Driven Tasks</td>
<td>ORMTIME KILL ALL TASKS</td>
<td>This option is used to stop ORMTIME and all of its failsafe jobs. BE VERY CAREFUL WITH THIS OPTION. There are several Expert System purges that depend on ORMTIME and if ORMTIME is not running then the Expert System will eventually fill up the Volume Set it resides in.</td>
</tr>
</tbody>
</table>

CPRS Clean-up Utilities

This menu contains ORE LAB ORDER CHECKS, which has utilities for checking consistency between lab files and OE/RR files. These utilities can help you clean up some files as you move from OE/RR 2.5 to CPRS.

**NOTE:** The developers intend to add other options to this menu for checking the consistency for other packages.

Select CPRS Manager Menu Option: IR  CPRS Configuration (IRM)

OC  Order Check Expert System Main Menu ...
UT  CPRS Clean-up Utilities ...

Select CPRS Configuration (IRM) Option: UT  CPRS Clean-up Utilities
LA  Lab Order Checks ...

Select CPRS Clean-up Utilities Option: LA  Lab Order Checks
1  Check Lab orders from file 69 to 100
   **> Out of order: UNDER CONSTRUCTION
2  Check Lab orders from file 100 to 69

Select Lab Order Checks Option: 2  Check Lab orders from file 100 to 69
This utility will look for inconsistencies between OE/RR 3.0 and Lab files. It will compare records in the Orders file (100) with the Lab Order file (69).

Problems identified Resolution
-------------------
^OR(100,IFN,0) does not exist  ^OR(100,IFN) killed
Bad pointers on child orders  Pointers removed
Child orders with no parent order  Pointer removed
Child order missing parent pointer  Pointer restored
Incorrect status on parent order  Status corrected
Old veiled orders Purged
Unrecognized pointer to file 69 Order cancelled
Unconverted orders from OE/RR 2.5 Order lapsed
Invalid pointer to file 69 Order cancelled
Incorrect status on uncollected specimens Status updated
Incorrect status on completed orders Status updated
Missing reference to file 69 Cancelled (optional)
Old pending, active & unreleased orders Status changed

Any problems will be displayed. Continue? No// Y (Yes)
Check for CPRS orders that no longer exist in the Lab Order file? No// Y (Yes)
Do you want to remove old PENDING, ACTIVE and UNRELEASED orders? No// ?
Unreleased orders are removed from the system.
Old pending orders are changed to a Lapsed status, which will
remove them from the current orders context.
Active orders that no longer have corresponding entries in the lab files
are changed to Lapsed
Do you want to remove old PENDING, ACTIVE and UNRELEASED orders? No// Y (Yes)
Remove old orders with Start dates before: T-30// <Enter> (AUG 29, 1998)
Do you want me to correct the inconsistencies now? No// Y (Yes)p
2.2=>GLUCOSE BLOOD S<2961022.115121>6 Didn't get converted, NOT IN 69
5.2=>DIGOXIN BLOOD S<2961022.131419>6 Didn't get converted, NOT IN 69
12.2=>DIGOXIN BLOOD S<2961029.154314>6 Didn't get converted, NOT IN 69
23.2=>PT (Profile) B<2961031.164613>6 Didn't get converted, NOT IN 69
24.2=>COAGULATION (PT<2961031.164613>6 Didn't get converted, NOT IN 69
32.2=>COAGULATION (PT<2961101.095846>6 Didn't get converted, NOT IN 69
34.2=>SMAC (CHEM 20)<2961101.101734>6 Didn't get converted, NOT IN 69
37.2=>COAGULATION (PT<2961101.101814>6 Didn't get converted, NOT IN 69
89.1=>CHOLESTEROL BLOOD<2941129.154843>6 Didn't get converted, NOT IN 69
90.1=>GLUCOSE BLOOD S<2941129.154843>6 Didn't get converted, NOT IN 69
91.1=>HDL BLOOD SERUM<2941129.154843>6 Didn't get converted, NOT IN 69
96.1=>CHOLESTEROL BLOOD S<2941129.155258>6 Didn't get converted, NOT IN 69
97.1=>GLUCOSE BLOOD S<2941129.155258>6 Didn't get converted, NOT IN 69
101.1=>TRANSFUSION REQUEST<2950120.120443>6 Status should be Complete
102.1=>TRANSFUSION REQUEST<2950120.125307>6 Status should be Complete
178=>OCCULT BLOOD (S<2911120.0936>5 Status should be Complete
277=>CHOLESTEROL BLOOD<2911120.154>5 Status should be Complete
278=>GLUCOSE BLOOD S<2911120.154>5 Status should be Complete
281=>GLUCOSE BLOOD S<2911121.1127>5 Status should be Complete
304=>TRANSFUSION REQUEST<2931217.1327>5 Status should be Complete
306=>Consult to PULM<> No package defined
307=>Consult to PULM<> No package defined
308=>Consult to PULM<> No package defined
309=>Consult to PULM<> No package defined
310=>Consult to PULM<> No package defined
311=>Consult to PULM<> No package defined
394=>CHEM 7 BLOOD SERUM<2980317.142517>6 Status should be Complete
409=>CO2 BLOOD SERUM<2980317.142527>6 Status should be Complete
445=>TRANSFUSION REQUEST<2980317.144511>6 Status should be Complete
472=>CO2 BLOOD SERUM<2980611.120016>6 Status should be Complete
560=>GLUCOSE BLOOD S<2980616.142934>6 Status should be Complete

Total inconsistencies: 221
Old Pending orders total: 185
Old Unreleased orders total: 5
Unconverted 2.5 orders total: 13
Status应该 be complete: 12

1 Check Lab orders from file 69 to 100
2 Check Lab orders from file 100 to 69

Select Lab Order Checks Option:
General Parameter Tools

Options on this menu let you display or edit the “values” for selected parameters, entities, packages, and templates. The Parameter File (8989.1) has four fields:

- **Entity** is the person, place, or thing for which the parameter is being defined
- **Parameter** is the definition of this particular parameter
- **Instance** is for multi-division or integrated sites
- **Value** is what you define or set for this parameter

<table>
<thead>
<tr>
<th>Name</th>
<th>Text</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>XPAR LIST BY PARAM</td>
<td>List Values for a Selected Parameter</td>
<td>This option prompts for a parameter (defined in the PARAMETER DEFINITION file) and lists all value instances for that parameter.</td>
</tr>
<tr>
<td>XPAR LIST BY ENTITY</td>
<td>List Values for a Selected Entity</td>
<td>This option prompts for the entry of an entity (location, user, etc.) and lists all value instances for that entity.</td>
</tr>
<tr>
<td>XPAR LIST BY PACKAGE</td>
<td>List Values for a Selected Package</td>
<td>This option prompts for a package and lists all parameter values for the selected package.</td>
</tr>
<tr>
<td>XPAR LIST BY TEMPLATE</td>
<td>List Values for a Selected Template</td>
<td>This option prompts for a parameter template. Depending on the definition of the template, additional information may be prompted for and then the parameter values defined by the template are displayed.</td>
</tr>
<tr>
<td>XPAR EDIT PARAMETER</td>
<td>Edit Parameter Values</td>
<td>The option calls the low level parameter editor, which allows you to edit the values for every parameter. Normally packages supply other means of editing parameters.</td>
</tr>
<tr>
<td>XPAR EDIT BY TEMPLATE</td>
<td>Edit Parameter Values with Template</td>
<td>This option prompts for a Parameter Template and then uses the selected template to edit parameter values.</td>
</tr>
</tbody>
</table>

**List Values for a Selected Parameter**

Select CPRS Configuration (IRM) Option: **XX** General Parameter Tools

LV     List Values for a Selected Parameter
LE     List Values for a Selected Entity
LP     List Values for a Selected Package
LT     List Values for a Selected Template
EP     Edit Parameter Values
ET     Edit Parameter Values with Template

Select General Parameter Tools Option: **LV** List Values for a Selected Parameter
Select PARAMETER DEFINITION NAME: ORPF SERVICE COPY FORMAT

Values for ORPF SERVICE COPY FORMAT
SYS: OEX.ISC-SLC.VA.GOV PHARMACY DOCTOR'S ORDERS
SYS: OEX.ISC-SLC.VA.GOV LAB SERVICE DOCTOR’S ORDERS
SYS: OEX.ISC-SLC.VA.GOV RADIOLOGY/NUCLEAR ME DOCTOR’S ORDERS
SYS: OEX.ISC-SLC.VA.GOV OUTPATIENT PHARMACY DOCTOR’S ORDERS
SYS: OEX.ISC-SLC.VA.GOV CONSULT/REQUEST TRAC CONSULTATION BODY
SYS: OEX.ISC-SLC.VA.GOV CONSULT TRACKING CONSULTATION BODY

Enter RETURN to continue or '^' to exit:
List Values for a Selected Template

List templates have been created for many parameters, to ensure a consistent format for displaying and editing parameters. You can view the default values or local settings for any of these templates through these options.

Select General Parameter Tools Option:  List Values for a Selected Template
Select PARAMETER TEMPLATE NAME:  ?
Answer with PARAMETER TEMPLATE NAME
Do you want the entire 23-Entry PARAMETER TEMPLATE List? y (Yes)
Choose from:
- LR DOMAIN  Lab Domain Level Parameters
- LR LOC    Lab Location Level Parameters
- LR PKG    Lab Package Level Parameters
- ORP CHART COPY  Chart Copy Definition
- ORP ORDER MISC Miscellaneous OE/RR Definition
- ORP PRINTS (HOSP)  Miscellaneous Hospital Prints
- ORP PRINTS (LOC)  Print Definition (Loc)
- ORP REQUISITIONS/LABELS Requisition/Label Definition
- ORP SERVICE COPY  Service Copy Definition
- ORP SUMMARY REPORTS Summary Report Definition
- ORP WORK COPY    Work Copy Definition
- ORQQ SEARCH RANGE (DIVISION) GUI Cover Sheet - Division
- ORQQ SEARCH RANGE (LOCATION) GUI Cover Sheet - Location
- ORQQ SEARCH RANGE (SERVICE) GUI Cover Sheet - Service
- ORQQ SEARCH RANGE (SYSTEM) GUI Cover Sheet - System
- ORQQ SEARCH RANGE (USER) GUI Cover Sheet - User
- XPAR TEST 2    TEST 2
- XPAR TEST TEMPLATE Parameter Tools Test Template
- ZZORQQ SEARCH RANGE (DIVISION) GUI Cover Sheet - Division
- ZZORQQ SEARCH RANGE (LOCATION) GUI Cover Sheet - Location
- ZZORQQ SEARCH RANGE (SERVICE) GUI Cover Sheet - Service
- ZZORQQ SEARCH RANGE (SYSTEM) GUI Cover Sheet - System
- ZZTEST GUI Cover Sheet Display Parm U

Select PARAMETER TEMPLATE NAME:  ORP ORDER MISC  Miscellaneous OE/RR Definition

Miscellaneous OE/RR Definition for System: OEX.ISC-SLC.VA.GOV

Active Orders Context Hours 24
Auto Unflag YES
Confirm Provider YES (Exclude ORES)
Default Provider YES
Error Days 2
Grace Days before Purge 30
Restrict Requestor YES (ORELSE & OREMAS)
Review on Patient Movement YES
Show Status Description YES
Signed on Chart Default NO

Enter RETURN to continue or '^' to exit:

5. Other CPRS Configuration

List Manager Terminal Set-Up

Check the List Manager Attributes file. You may need to update the Terminal Type file for the VT100's; If the “Insert Line” field is empty, this will cause List Manager to revert back to scroll mode.
List Manager uses 11 video attributes, which are in the Terminal Type file. These are listed (along with recommended values) in the Site Preparation section of the List Manager Developer’s Guide.

<table>
<thead>
<tr>
<th>Attribute</th>
<th>Value for a VT series terminal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form Feed</td>
<td>#$C(27,91,50,74, 27,91,72)</td>
</tr>
<tr>
<td>XY CRT</td>
<td>W $C(27,91)<em>((DY+1))</em>$C(59)<em>((DX+1))</em>$C(72)</td>
</tr>
<tr>
<td>Erase to End of Page</td>
<td>$C(27,91,74)</td>
</tr>
<tr>
<td>Insert Line</td>
<td>$C(27),&quot;L&quot;</td>
</tr>
<tr>
<td>Underline On</td>
<td>$C(27,91,52,109)</td>
</tr>
<tr>
<td>Underline Off</td>
<td>$C(27,91,109)</td>
</tr>
<tr>
<td>High Intensity</td>
<td>$C(27,91,49,109)</td>
</tr>
<tr>
<td>Normal Intensity</td>
<td>$C(27,91,109)</td>
</tr>
<tr>
<td>Save Cursor Pos</td>
<td>$C(27,55)</td>
</tr>
<tr>
<td>Restore Cursor Pos</td>
<td>$C(27,56)</td>
</tr>
<tr>
<td>Set Top/Bottom Marg</td>
<td>$C(27,91)<em>(+IOTM)</em>$(59)<em>(+IOBM)</em>$C(114)</td>
</tr>
</tbody>
</table>

**Nature of Order File**

This file determines the actions that are to be taken based on the nature of an order or change to an order.

Per VHA Directive 2005-044, this file has been "locked down" by Data Standardization (DS). The file definition (i.e., data dictionary) shall not be modified. All additions, changes and deletions to entries in the file shall be done by Enterprise Reference Terminology (ERT) using the Master File Server (MFS), provided by Common Services (CS). Creating and/or editing locally defined fields in the file are not permitted. Use of locally defined fields that were created prior to VHA Directive 2005-044 shall not be supported.

The Orders Domain has approved editing of the following fields in this file:

- PRINT CHART COPY (#.12)
- PRINT DAILY SUMMARY (#.13)
- PRINT WORK COPY (#.15)
- INCLUDE IN ACTIVE ORDERS (#.16)

**Below is a sample execution of the new option**

```
Select Print/Report Parameters Option: NA  Print Parameters for Nature of Order
Select NATURE OF ORDER: AUTO       A
PRINT CHART COPY: NO//
PRINT DAILY SUMMARY: NO//
PRINT WORK COPY: NO//
```
INCLUDE IN ACTIVE ORDERS: NO/

Select NATURE OF ORDER:

These fields include

<table>
<thead>
<tr>
<th>Field #</th>
<th>Field Name</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>100.02,.03</td>
<td>NON-INTERACTIVE</td>
<td>This field identifies this entry for interactive or non-interactive use.</td>
</tr>
<tr>
<td>100.02,.04</td>
<td>INACTIVE</td>
<td>This field is used to inactivate a nature of order.</td>
</tr>
<tr>
<td>100.02,.05</td>
<td>FRONT/BACKDOOR</td>
<td>This field is used to identify entries that are used during an OE/RR dialog (frontdoor), and entries that are used by ancillary services (backdoor).</td>
</tr>
<tr>
<td>100.02,.06</td>
<td>DC ONLY</td>
<td>Enter YES if this entry is only used for DC actions.</td>
</tr>
<tr>
<td>100.02,.11</td>
<td>CREATE ACTION</td>
<td>Enter YES if an order action should be created and signed, or NO to simply update the status of this order.</td>
</tr>
<tr>
<td>100.02,.12</td>
<td>PRINT CHART COPY</td>
<td>This field determines if this entry/action should generate a Chart copy.</td>
</tr>
<tr>
<td>100.02,.13</td>
<td>PRINT DAILY SUMMARY</td>
<td>This field determines if this entry/action should appear on the Daily Order Summary.</td>
</tr>
<tr>
<td>100.02,.14</td>
<td>DEFAULT SIGNATURE STATUS</td>
<td>'0' FOR ON CHART w/written orders;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>'1' FOR ELECTRONIC;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>'2' FOR NOT SIGNED;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>'3' FOR NOT REQUIRED;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>'4' FOR ON CHART w/printed orders;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>'5' FOR NOT REQUIRED due to cancel;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>'6' FOR SERVICE CORRECTION to signed order;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>This is the signature status that will be assigned to an order having this nature; if a signature is not applicable, this field should be null.</td>
</tr>
<tr>
<td>100.02,.15</td>
<td>PRINT WORK COPY</td>
<td>This field determines if this entry/action should generate a Work Copy.</td>
</tr>
</tbody>
</table>

Tasked Jobs

Schedule the following tasks, as appropriate for your site:

1. ORTASK 24HR CHART COPIES Task 24hr Chart Copy Print by Location run routine
2. ORTASK 24HR SUMMARY Task 24hr Order Summary by Location run routine
More information is included in the Archiving/Purging section of this manual on the last two tasks.

**Example**

Select Driven Management Option: **schedule/Unschedule** Options

Select OPTION to schedule or reschedule: **ortask** 24HR CHART COPIES

Chart Copy Print by Location run routine

...OK? Yes// <Enter> (Yes)

(R)

Edit Option Schedule

Option Name: ORTASK 24HR CHART COPIES

Menu Text: Task 24hr Chart Copy Print by Lo

TASK ID: 385010

---

QUEUED TO RUN AT WHAT TIME: OCT 18,1997@00:05

DEVICE FOR QUEUED JOB OUTPUT: WORK;P-DOC132;132;64

QUEUED TO RUN ON VOLUME SET:

RESCHEDULING FREQUENCY: 1D

TASK PARAMETERS:

SPECIAL QUEUEING:

---

COMMAND: Press <PF1>H for help Insert
3. Exported Routines

OR        ; slc/dcm - OE/RR
OR1       ; slc/dcm - OE/RR

OR2549PC  ; SLC/MLI - Clean-up package names/namespaces ; 3/28/95@1340
OR3C100   ; SLC/MKB - Orders file conversion for CPRS/OE3 ; 8/8/97 15:27
OR3C100A  ; SLC/MKB - Orders file conversion cont ; 8/8/97 15:28
OR3C101   ; SLC/MKB - Cleanup unused protocols ; 8/20/97 08:30
OR3CONV   ; SLC/MLI-OE/RR v3 conversion entry points ; 8/2/97
OR3CONV1  ; SLC/MLI - Conversion utilities and cleanup ; 8/2/97 [5/25/99 9:33am]
OR3POST   ; SLC/MLI - Post-install for CPRS install ; 8/2/97
Oraleapi  ; SPFO/AJB - View Alerts Optimization API ; Aug 07, 2019@10:51:02
Oralehlp  ; SPFO/AJB - Alert Enhancements Reports ; Dec 18, 2019@08:58:32
Oraerpt   ; SPFO/AJB - Alert Enhancements Reports ; Dec 18, 2019@08:09:39
Oraerpt1  ; SPFO/AJB - Alert Enhancements Reports ; Nov 07, 2019@07:37:39
Oraleapi  ; SPFO/AJB - View Alerts Optimization API ; Dec 16, 2019@06:15:40
Orparmgl  ; SPFO/AJB - ListManager Parameter Display for Notifications ; Dec 18, 2019@08:15:15
ORB        ; slc/CLA - Main routine for OE/RR notifications ; 7/18/91 14:34
ORB3       ; slc/CLA - Main routine for OE/RR 3 notifications ; 6/6/01 10:46
ORB31      ; slc/CLA - Routine to support OE/RR 3 notifications ; 6/28/00 12:00 [04/02/97 11:12 AM]
ORB3C0     ; slc/CLA - Routine to stub in notifications for parameter conversion to CPRS ; 3/23/97 21:22
ORB3C1     ; slc/CLA - Routine to pre-convert OE/RR 2.5 to OE/RR 3 notifications ; 7/3/96 15:16 [04/03/97 1:41 PM]
ORB3C2     ; slc/CLA - Routine to post-convert OE/RR 2.5 to OE/RR 3 notifications ; 12/2/97 9:52 [04/03/97 1:41 PM]
ORB3ENV    ; slc/CLA - OE/RR 3 Notifications/Order Check Environment Check Routine ; 9/19/01 14:29
ORB3F1 ; slc/CLA - Extrinsic functions to support OE/RR 3 notifications ;5/8/95 15:16
ORB3FN ; slc/CLA - Functions which return OE/RR Notification information ;12/15/97
ORB3FUP1 ; slc/CLA - Routine to support notification follow-up actions ;7/15/95 17:23
ORB3FUP2 ; slc/CLA - Routine to support notification follow-up actions ;6/28/00 12:00
ORB3MGR1 ; SLC/AEB - Manager Options - Notifications Parameters ;9/22/97
ORB3MGR2 ; SLC/AEB - Utilities for Manager Options - Notifications Parameters ;4/23/96 16:53
ORB3REC ; SLC/AEB - Notification Management Options for Recipients/Users ;4/30/01 09:52
ORB3REG ; slc/CLA - Support routine for ORB3 ;6/28/00 12:00 [ 04/02/97 2:16 PM ]
ORB3SPEC ; slc/CLA - Support routine for ORB3 ;4/4/02 14:40
ORB3TIM1 ; slc/CLA - Routine to trigger time-related notifications ;6/28/00 12:00 [ 04/02/97 11:12 AM ]
ORB3TIM2 ; slc/CLA - Routine to trigger time-related notifications ;3/30/01 07:41
ORB3TI21 ; slc/CLA - Routine to trigger time-related notifications ;4/19/02 15:56
ORB3U1 ; slc/CLA - Utilities which support OE/RR 3 Notifications ;12/15/97
ORB3U2 ; slc/CLA - OE/RR 3 Notifications Utilities routine two ;5/19/97 11:07 [ 04/02/97 2:09 PM ]
ORB3USER ; slc/CLA - Alert recipient algorithms for OE/RR 3 notifications; 1/19/00 14:45
ORB3X74 ; slc/CLA - Patch OR*3*74 Pre-INIT cleans up notification parameters ;12/6/99
ORBCMA1 ; SLC/JLI - Pharmacy Calls for Windows Dialog [ 2/11/02 4:30PM ]
ORBCMA2 ; API for BCMA
ORBCMA32 ; SLC/JLI - Pharmacy Calls for GUI Dialog 1/17/02
ORBCMA5 ; SLC/JDL - BCMA Order utility ;2/18/02 13:37
ORBSTAT ; slc/CLA - OE/RR Notifications stats ;10/6/95 09:25
ORBU ; slc/CLA - Mgmt utilities for OE/RR notifications ;8/22/91 18:34
ORBUTL ; slc/CLA - Modified for K8.0 by JLI/ISC-SF.SEA - Utilities for OE/RR notifications ;10/24/94 10:41
ORBX31 ; SLC/CLA - Export Package Level Parameters ; Sep 30, 1998@11:03:28
ORBX3101 ; SLC/CLA - Data for Pkg Level Parameters; Sep 30, 1998@11:03:28
ORCACT ; SLC/MKB - Act on orders ;4/2/02 16:41
ORCACT0 ; SLC/MKB-Validate order action ;02:46 PM 26 Jan 2001
ORCACT01 ; SLC/MKB-Validate order actions cont ;3/12/02 13:14
ORCACT02 ; SLC/MKB-Validation dose conversion for POE
ORCACT1 ; SLC/MKB-Act on orders cont ;7/29/97 08:26
ORCACT2 ; SLC/MKB-DC orders ; 08 May 2002 2:12 PM
ORCACT3 ; SLC/MKB-Delayed Orders ; 08 May 2002 2:12 PM
ORCACT4 ; SLC/MKB-Act on orders cont ; 08 May 2002 2:12 PM
ORCB ; SLC/MKB-Notifications followup for LMgr chart ;4/5/01 21:32
ORCD ; SLC/MKB - Order Dialog utilities ; 08 May 2002 2:12 PM
ORCDAKT ; SLC/MKB-Utility functions for ADT dialogs ;7/9/02 09:04
ORCDFH ; SLC/MKB-Utility functions for FH dialogs ; 08 May 2002 2:12 PM
ORCDFH1 ; SLC/MKB,DKM - Utility functions for FH dialogs cont ; 8/24/01 10:22
ORCDFHTF ; SLC/MKB - Utility functions for FH Tubefeeding dialog ; 08 May 2002 2:12 PM
ORCDGMRA ; SLC/MKB-Utility functions for GMRA dialogs ;4/25/01 16:20
ORCDGMRC ; SLC/MKB-Utility functions for GMRC dialogs ; 6/7/01 07:34
ORCDLG ; SLC/MKB-Order dialogs ; 08 May 2002 2:12 PM
ORCDLG1 ; SLC/MKB - Order dialogs cont ;11/21/01 08:03
ORCDLG2 ; SLC/MKB - Order dialogs cont ; 9/7/01  14:24
ORCDLGH ; SLC/MKB - Help for Order Dialogs ; 4/7/97  10:00
ORCDLR ; SLC/MKB - Utility functions for LR dialogs ; 6/11/97  11:47
ORCDLR1 ; SLC/MKB, JFR - Utility fcns for LR dialogs cont ; 08 May 2002  2:12 PM
ORCDPS ; SLC/MKB - Pharmacy dialog utilities ; 02:36 PM  2 Apr 2001
ORCDPS1 ; SLC/MKB - Pharmacy dialog utilities ; 08 May 2002  2:12 PM
ORCDPS2 ; SLC/MKB - Pharmacy dialog utilities ; 07:24 AM  5 Apr 2001 [12/31/01 6:37 pm]
ORCDPS3 ; SLC/MKB - Pharmacy dialog utilities ; 09:14 AM  5 Apr 2001
ORCDPSIV ; SLC/MKB - Pharmacy IV dialog utilities ; 6/30/97  11:01
ORCDRA ; SLC/MKB - Utility functions for RA dialogs ; 7/23/01  11:47
ORCDRA1 ; SLC/MKB - Utility functions for RA dialogs ; 08 May 2002  2:12 PM
ORCENV ; SLC/MLI - Environment check routine ; 18 March 97
ORCFLAG ; SLC/MKB - Flag orders ; 6/2/97  10:44
ORCHANG1 ; SLC/KCM, MKB - Navigate Display Groups ; 9/19/95 15:27 [10/2/00 2:51pm]
ORCHANG2 ; SLC/MKB - Change View status ; 08 May 2002  2:12 PM
ORCHANG3 ; SLC/MKB - Change view by event ; 08 May 2002  2:12 PM
ORCHANGE ; SLC/MKB - Change View utilities ; 08 May 2002  2:12 PM
ORCHART ; SLC/MKB - OE/RR ; 08 May 2002  2:12 PM
ORCHECK ; SLC/MKB - Order checking calls ; 08 May 2002  2:12 PM
ORCHTAB ; SLC/MKB - Build Chart tab listings ; 05:58 PM  23 Aug 2000
ORCHTAB1 ; SLC/MKB - Build Chart-tabs cont ; 6/14/02  12:49
ORCHTAB2 ; SLC/MKB - Add item to tab listing cont ; 6/4/98  11:17
ORCHTAB3 ; SLC/MKB, dcm - Add item to tab listing ; 08 May 2002  2:12 PM
ORCHTAB4 ; SLC/MKB, dcm - Add item to tab listing ; 4/17/97  11:08
ORCHTAB5 ; SLC/dcm - Add item to tab listing ; 4/17/97  11:08
ORCHTRE1 ; SLC/JER - Expand/collapse LM views ; 14-NOV-2000 16:34:18
ORCHTRE2 ; SLC/JER - Expand/collapse LM views ; 14-NOV-2000 09:46:35
ORCSEND1  ; SLC/MKB - Release cont; 3/21/02  14:19
ORCSIGN   ; SLC/MKB - Sign/Release orders; 10/29/01  11:44
ORCXPND   ; SLC/MKB - Expanded Display; 6/3/97  11:04
ORCXPND1  ; SLC/MKB - Expanded Display cont; 11:58 AM  13 Mar 2001
ORCXPND2  ; SLC/MKB - Expanded display cont; 8 May 2002  2:12 PM
ORCXPND3  ; SLC/MKB, dcm - Expanded display of Reports; 2/21/01  14:08
ORCXPND4  ; SLC/MKB, MA - Expanded Display cont; 9/10/99  13:16
ORCXPNDR  ; SLC/MKB, dcm - Expanded display of Reports; 2/12/97  13:48
ORD1      ; DRIVER FOR COMPILED XREFS FOR FILE #101; 11/02/98
ORD11     ; COMPILED XREF FOR FILE #101; 11/02/98
ORD110    ; COMPILED XREF FOR FILE #101.021; 11/02/98
ORD111    ; COMPILED XREF FOR FILE #101.03; 11/02/98
ORD112    ; COMPILED XREF FOR FILE #101.07; 11/02/98
ORD12     ; COMPILED XREF FOR FILE #101.01; 11/02/98
ORD13     ; COMPILED XREF FOR FILE #101.02; 11/02/98
ORD14     ; COMPILED XREF FOR FILE #101.021; 11/02/98
ORD15     ; COMPILED XREF FOR FILE #101.03; 11/02/98
ORD16     ; COMPILED XREF FOR FILE #101.07; 11/02/98
ORD17     ; COMPILED XREF FOR FILE #101; 11/02/98
ORD18     ; COMPILED XREF FOR FILE #101.01; 11/02/98
ORD19     ; COMPILED XREF FOR FILE #101.02; 11/02/98
ORD2      ; DRIVER FOR COMPILED XREFS FOR FILE #100; 06/12/02
ORD21     ; COMPILED XREF FOR FILE #100; 06/12/02
ORD210    ; COMPILED XREF FOR FILE #100.008; 06/12/02
ORD211    ; COMPILED XREF FOR FILE #100.045; 06/12/02
ORD212    ; COMPILED XREF FOR FILE #100.09; 06/12/02
ORD213    ; COMPILED XREF FOR FILE #100.09; 07/29/00
ORD214    ; COMPILED XREF FOR FILE #100.0084; 07/29/00
ORD22     ; COMPILED XREF FOR FILE #100.001; 06/12/02
ORD23  ; COMPILED XREF FOR FILE #100.002 ; 06/12/02
ORD24  ; COMPILED XREF FOR FILE #100.008 ; 06/12/02
ORD25  ; COMPILED XREF FOR FILE #100.045 ; 06/12/02
ORD26  ; COMPILED XREF FOR FILE #100.09 ; 06/12/02
ORD27  ; COMPILED XREF FOR FILE #100 ; 06/12/02
ORD28  ; COMPILED XREF FOR FILE #100.001 ; 06/12/02
ORD29  ; COMPILED XREF FOR FILE #100.002 ; 06/12/02
ORDD1  ; slc/dcm - Calls from OE/RR DD ;8/20/92 12:13 ;
ORDD100 ; slc/dcm - DD entries for file 100 ;3/12/97 10:00
ORDD100A ; slc/dcm-DD entries for file 100 ;3/12/02 10:30
ORDD101 ; slc/KCM - Build menus in XUTL (file 101) ;8/23/00 09:30
ORDD41  ; slc/KCM,MKB-Build menus in XUTL (file 101.41) ;12/22/00 09:55
ORDD43  ; SLC/MKB - Build xrefs for file 101.43 ;7/2/97 10:52
ORDIALOG ; slc/KCM/JDL - Utilites for Order Actions;05:33 AM 20 May 1998;2/23/98 16:18 [12/31/01 6:36pm];Jan 19 2002
ORDV01  ; slc/dcm - OE/RR Report Extracts ;8/31/01 10:24
ORDV02  ; slc/dcm - OE/RR Report Extracts ; 11 Jul 2001 7:44 AM
ORDV03  ; slc/dcm - OE/RR Report Extracts ;8/2/01 08:12
ORDV04  ; slc/dan - OE/RR ; 11 Jul 2001 7:44 AM
ORDV04A ; SLC/DAN - OE/RR ;7/30/01 14:33
ORDV05  ; slc/jdl - OE/RR Report Extracts ; 11 Jul 2001 7:44 AM
ORDV05E ; slc/jdl - Microbiology Extract Routine ;6/13/01 11:49
ORDV05T ; slc/jdl- Interim report rpc memo micro ;6/20/2001 18:52 [7/2/01 7:28am]
ORDV05X ; slc/jdl - Microbiology Extended Extracts ;6/13/2001 11:59AM
ORDV06  ; slc/dkm - OE/RR Report Extracts ; 11 Jul 2001 7:44 AM
ORDV07  ; SLC/DAN - OE/RR Report extracts ; 11 Jul 2001 7:44 AM
ORDV08  ; DAN/SLC Testing new component ;8/22/01 11:30
ORDV08A ; slc/dan Medicine procedure component ;8/13/01 14:42
ORDV09  ; DAN/SLC Testing new component ; 9/6/01 09:20
ORDVU  ; slc/dcm - OE/RR Report Extracts ; 08 May 2001 13:32PM
ORECS01 ; SLC/JDL-CPRS utility for Event Capture System; 5/21/02 10:00AM ; 6/14/02 13:04
OREL    ; slc/dcm - Lab Enforcer
OREL1   ; slc/dcm - Cross check/update file 100 with file 69
OREL2   ; slc/dcm - Cross check file 100 with file 69 ;2/21/96 13:30 ;
OREL3   ; slc/dcm - Cross check file 100 with file 69 ;2/21/96 13:30 ;
OREL5   ; slc/dcm - Check 69 against 100 ;
OREOR0  ; slc/dcm - Check things ; 7/23/97 12:49
ORERR   ; RJS/SLC-ISC - Order Entry Error Logger ; 8/21/98 13:45
OREV    ; SLC/DAN Event delayed orders set up ; 6/26/02 14:47
OREV0E  ;
OREV1   ; DAN/SLC Event delayed orders set up continued ; 7/9/02 09:33
OREV2   ; SLC/DAN Event delayed orders set up ; 7/3/02 11:10
OREVNT  ; SLC/MKB - Event delayed orders ; 25 Apr 2002 10:07 PM
OREVNT1 ; SLC/MKB - Release delayed orders ; 08 May 2002 2:12 PM
OREVNTX ; SLC/MKB - Event delayed orders RPC's ; 08 May 2002 2:12 PM
OREVNTX1; SLC/JLI - Event delayed orders RPC's ; 6/14/02 12:51
ORUEM   ; slc/KCM - Set Up Formatted Protocol Menus ; 5/28/92 14:41
ORUEM1  ; slc/KCM - Build menu in seq #, name format ; 2/5/92 17:16;
ORUEM2  ; slc/KCM - Set Up Formatted Protocol Menus (cont) ; 6/1/92 17:08
ORUEM3  ; slc/KCM - Setup Formatted Protocol Menus (cont) ; 7/13/92 15:40
ORKCHK   ; slc/CLA - Main routine called by OE/RR to initiate order checks ; 7/2 4/96 17:55
ORKCHK2 ; slc/CLA - Order Checking support routine to do OCX-related order checks ; 8/8/96 [04/02/97 1:08 PM]
ORKCHK3 ; slc/CLA - Support routine called by ORKCHK to do DISPLAY mode order checks ; 3/6/97 9:35
ORKCHK4   ; slc/CLA - Support routine called by ORKCHK to do SELECT mode order checks ;3/6/97  9:35
ORKCHK5   ; slc/CLA - Support routine called by ORKCHK to do ACCEPT mode order checks ;3/6/97  9:35
ORKCHK6   ; slc/CLA - Support routine called by ORKCHK to do SESSION mode order checks ;3/6/97  9:35
ORKLR     ; slc/CLA - Order checking support procedure for lab orders ;7/23/96 14:31
ORKLR2    ; slc/CLA - Order checking support proc for lab orders, part 2;2/13/97 10:01
ORKMGR    ; SLC/AEB,CLA - Manager Options - Order Checking Parameters ;9/22/97
ORKOR     ; slc/CLA - Order checking support procedure for orders ;12/15/97 [ 04/02/97  2:55 PM ]
ORKPMNT   ; SLC/STAFF CHECK CHANGES IN EDITABLE ORDER CHECKS ;9/19/01  14:12
ORKPS     ; slc/CLA - Order checking support procedures for medications ;12/15/97
ORKRA     ; slc/CLA - Order checking support procedure for Radiology ;12/15/97
ORKREC    ; SLC/AEB - Recipient Options - Order Checking Parameters Management ;9/22/97
ORKUTL    ; slc/CLA - Utility routine for order checking ;5/21/97  16:25
ORKXX32   ; slc/CLA - Export Package Level Parameters ; Dec 11, 1998@14:57:23
ORKXX3201 ; slc/CLA - Package Level Parameter Data ; Dec 11, 1998@14:57:23
ORLA1     ; slc/dcm,cla - Order activity alerts ;11/7/95 10:00 [5/15/00 10:44am]
ORLA11    ; slc/MKB - Order activity alerts cont ;11/7/95 10:00
ORLP      ; SLC/CLA - Manager for Team List options ; [1/12/01 1:54pm]
ORLP0     ; SLC/DCM,CLA - Edit Patient Lists ; 11/18/92 [11/21/00 10:36am]
ORLP00    ; slc/dcm,cla - Modify Patient Lists ;8/13/91  15:06 [11/8/00 4:58pm]
ORLP01    ; SLC/MKB,CLA - Edit Patient Lists cont ;9/27/93  09:54 [3/15/00 2:51 pm]
ORLP1 ; SLC/DCM,CLA - Patient Lists, Store ; [1/3/01 1:37pm]
ORLP2 ; SLC/Staff - Remove Autolinks from Team List ; [1/2/01 11:43am]
ORLP3AC1 ; SLC/PKS - ADD and DELETE a patient to clinic Team List Autolinks. [6/27/00 10:08am]
ORLP3AUC ; SLC/CLA - Automatically load clinic patients into team lists ;9/11/96 [12/28/99 2:45pm]
ORLP3AUT ; slc/CLA - Automatically load patients into team lists ;7/21/96 [6/18/99 11:04am]
ORLP3C1 ; slc/CLA - Utilities to convert OE/RR 2.5 lists ;12/15/97 [04/03/97 10:50 AM]
ORLP3MGR ; SLC/AEB - Manager Options - Patient List Defaults ;9/22/97 [4/25/00 3:25pm]
ORLP3U1 ; SLC/CLA - Utilities which support OE/RR 3 Team/Patient Lists ; [1/3/01 1:38pm]
ORLP3U2 ; SLC/PKS - Team List routines. [3/27/00 4:01pm]
ORLP3USR ; SLC/AEB,CLA - User Options - Pt. List Defaults ;9/22/97 [9/12/00 12:17pm]
ORLPAUTO ; slc/CLA - Automatically load patients into lists ;2/12/92 [7/14/99 3:06pm]
ORLPL ; slc/CLA - Display/Edit Patient Lists; 8/8/91 [11/8/00 4:58pm]
ORLPR ; slc/CLA - Report formatter for patient lists ;11/27/91 [7/20/00 10:33am]
ORLPRO ; SLC/CLA - Report formatter for patient lists ;11/27/91 [11/8/00 4:43pm]
ORLPTU ; SLC/PKS OE/RR - Terminated users, pointer removal. ; [3/13/00 1:04pm]
ORLPURG ; slc/dcm - Purge Patient Lists ;8/13/90 12:27
ORM ; SLC/MKB - ORM msg router ;4/13/01 10:04
ORMBLD ; SLC/MKB - Build outgoing ORM msgs ;11/24/00 13:09
ORMBLDAL ; SLC/MKB, JFR - Build outgoing GMRA ORM msgs ; 11/17/00  11:05
ORMBLDFH ; SLC/MKB - Build outgoing Dietetics ORM msgs ; 11/17/00  11:06
ORMBLDGM ; SLC/MKB - Build outgoing GMR* ORM msgs ; 11/17/00  11:07
ORMBLDLR ; SLC/MKB - Build outgoing Lab ORM msgs ; 11/17/00  11:10
ORMBLDOR ; SLC/MKB - Build outgoing OR msgs ; 11/17/00  11:11
ORMBLDPS ; SLC/MKB - Build outgoing Pharmacy ORM msgs ; 11:26 AM  2 Apr 2001
ORMBLDRA ; SLC/MKB - Build outgoing Radiology ORM msgs ; 11/17/00  11:14
ORMEVNT ; SLC/MKB - Trigger HL7 msg off MAS events ; 25 Apr 2002 10:07 PM
ORMEVNT1 ; SLC/MKB - Trigger HL7 msg off OR events, ORMTIME ; 08 May 2002  2:12 PM
ORMFH ; SLC/MKB - Process Dietetics ORM msgs ; 02:49 PM  26 Jul 2000
ORMFN ; SLC/MKB - MFN msg router ; 04:29 PM  19 Dec 2000
ORMGMRA ; SLC/JFR - ALLERGY ORDER UTILITIES ; 11/19/98  11:25
ORMGMRC ; SLC/MKB - Process Consult ORM msgs ; 12:03 PM  26 Jul 2000
ORMLR ; SLC/MKB - Process Lab ORM msgs ; 11:59 AM  26 Jul 2000
ORMLR1 ; SLC/MKB - Process Lab ORM msgs cont ; 3/20/97  08:22
ORMORC ; SLC/MKB - Receive Generic Orders messages ; 08 May 2002  2:12 PM
ORMPS ; SLC/MKB - Process Pharmacy ORM msgs ; 3/8/02  13:05
ORMPS1 ; SLC/MKB - Process Pharmacy ORM msgs cont ; 11:25 AM  2 Apr 2001
ORMPS2 ; SLC/MKB - Process Pharmacy ORM msgs cont; 10:53 AM  16 May 2001 [9/28/01 1:50pm]
ORMRA ; SLC/MKB - Process Radiology ORM msgs ; 2/21/02  15:44
ORMTIME01 ; RJS/SLC-ISC - PROCESS TIME BASED EVENT ; 9/19/01  14:11
ORMTIME ; SLC/RJS - PROCESS TIME BASED EVENT ; 9/29/99  09:35 [2/1/00 9:30am]
ORMX40 ; SLC/PKS - Post-init Pkg Level Parameter Entry ; 5/01/99  13:00 [9/27/99 11:36am]
ORMX4001 ; SLC/PKS - Post-init Pkg Parameter Subroutine ; 5/01/99  13:00 [9/27/99 11:36am]
ORPPFCNVT ; SLC/AEB - Convert Order Parameter File (100.99) to Parameter Definitions(8989.51) ; 3/17/97  12:17
ORPRS10 ; slc/dcm - Summary time, when the livin is easy... ;10/19/98  13:50
ORPRS11 ; slc/dcm - Alternate lifestyle for Summary Reports ;12/7/00  13:13
ORPRS12 ; slc/dcm - Interactive Chart Sum by loc, pat or chris ;6/10/97  15:50
ORPRS13 ; slc/dcm,JER - Health Summary Report & Driver (HSR&D) ;6/10/97  15:52
ORPRS14 ; slc/dcm,JER - Show me your vitals ;6/10/97  15:53
ORQ1 ;slc/dcm-Get orders for a patient. ; 08 May 2002  2:12 PM
ORQ10 ; slc/dcm - Test this utility
ORQ11 ;slc/dcm-Get patient orders in context ; 08 May 2002  2:12 PM
ORQ12 ; slc/dcm - Get patient orders in context ;10/24/00  10:49
ORQ13 ;slc/dcm-Get patient orders in context ; 08 May 2002  2:12 PM
ORQ2 ; SLC/MKB - Detailed Order Report ; 08 May 2002  2:12 PM
ORQ20 ; SLC/MKB - Detailed Order Report cont ;6/27/02  08:46
ORQQR1 ; slc/CLA - Functions which return order information ;12/15/97 [ 04/02
/97  3:01 PM ]
ORQQR2 ; slc/CLA - Extrinsic functions which return order information ;6/14/9
   6  10:15 [ 04/02/97  1:35 PM ]
ORQQRB ; slc/CLA - Functions which return OE/RR Notification information ;12/
   15/97
ORQPT ; SLC/MKB - Patient Selection ;8/8/97  13:07 [6/5/01 12:12pm]
ORQPT1 ; SLC/MKB - Change Patient Selection List ;1/10/97  13:41 [6/5/01 12:1
   2pm]
ORQPT2 ; HIRMFO/DAD-Patient Look-Up Security Check and Notification ;1/31/97
   07:57
ORQPTQ1 ; SLC/CLA - Functs which return OR patient lists and sources pt 1 ;12/
   15/97 [ 04/02/97  3:32 PM ] [6/6/01 11:34am]
ORQPTQ11 ; SLC/CLA - Functs which return patient lists and sources pt 1B ;12/15
   /97 [ 08/04/97  3:32 PM ] [3/25/02 9:44am]
ORQPTQ2 ; slc/CLA - Functions which return patient lists and list sources pt 2
   ;12/15/97 [ 04/02/97  3:41 PM ] [6/5/01 12:34pm]
ORQPTQ3 ; slc/CLA - Functions which return patient demographic data ; 12/15/97
ORQPTQ4 ; slc/CLA - Extrinsic functions for patient information ; 12/15/97
ORQPTQ5 ; SLC/PKS - Functions for Patient Selection Lists. [6/5/01 12:35pm]
ORQPTQ6 ; SLC/PKS [6/5/01 12:35pm]
ORQQAL ; slc/CLA, JFR - Functions which return patient allergy data ; 9/18/97 [ 04/02/97 3:43 PM ]
ORQQCN ; slc/CLA/RE - Functions which return patient consult requests and results ; 08:19 AM 20 FEB 2001
ORQQCN1 ; slc/REV - Functions for GUI consult actions - RPCs for GMRCGUIA ; 8-NOV-2000 14:49:16 [1/9/01 10:39am]
ORQQCN2 ; slc/REV - Functions for GUI consult actions ; 18 Dec 2001 09:02AM [ 12/31/01 6:37pm]
ORQQCN3 ; slc/REV - RPCs for Consults/Medicine Resulting ; 01:56 PM 12 May 2000
ORQQLR ; slc/CLA - Functions which return patient lab results ; 12/15/97 [ 04/02/97 3:46 PM ]
ORQQLR1 ; slc/CLA - Extrinsic functions and procedures which return patient lab results ; 7/23/96 12:47
ORQQPL ; slc/CLA/RE - Functions which return patient problem list data ; 12/15/97 [ 04/02/97 3:46 PM ]
ORQQPL1 ; ALB/PDR/REV - PROBLEM LIST FOR CPRS GUI ; 03/12/02
ORQQPL2 ; ALB/PDR/REV - RPCs FOR CPRS GUI IMPLEMENTATION ; 09:49 AM 29 Feb 2000
ORQQPL3 ; ALB/PDR/REV; Problem List RPC's ; 8-OCT-1998 09:08:49.29
ORQQPP ; slc/CLA - Functions which return patient postings ; 8/31/01 10:02
ORQQPS ; slc/CLA - Functions which return patient medication data ; 12/15/97 [ 04/02/97 3:52 PM ]
ORQQPX ; SLC/JM - PCE and Reminder routines ; 3/19/2001
ORQQPXRM ; SLC/PJH - Functions for reminder data ; 27/08/01
ORQQRA ; slc/CLA - Functions which return patient radiology/nuclear med data ;12/15/97
ORQQVI ; slc/CLA,STAFF - Functions which return vital and I/O data ;6/13/2000
ORQQVI1 ; SLC/STAFF- Vitals rpc grid ; 2/4/99 21:11
ORQQVI2 ; SLC/dee- RFC calls to GMRVPC0, Vitals data event drivers ;2/2/98
ORQQVS ; slc/CLA,STAFF - Functions which return patient visits ;8/19/98@13:36:57
ORQQXQA ; slc/CLA - Functions which return patient/user alert and mailman data ; 5/27/98
ORQTTL1 ; SLC/PKS - Functions returning Team List data. [1/9/01 4:05pm]
ORQTTL2 ; SLC/PKS - Functions returning Team List data. [1/9/01 4:02pm]
ORRCAUTH ; SLC/JER - Authentication calls for CM ;11-JUN-2002 08:20:30
ORRCLL ; SLC/JER - Clinic/Pt lists for CM ; 4-JUN-2002 13:03:32
ORRCLLPT ; SLC/JER - Clinic/Pt lists for CM ; 4-JUN-2002 13:16:47
ORRCERR ; SLC/JER - Error Table ; 4-JUN-2002 13:25:03
ORRCLNP ; SLC/JER - Person functions for CM ; 5-APR-2002 10:38:20
ORRCLLPT ; SLC/JER - Pt functions for CM ;16-APR-2002 13:46:56
ORRCLXM ; SLC/JER - XML Library calls for CM ; 8-APR-2002 12:15:00
ORRCPR ; SLC/JER - Provider/Pt lists for CM ; 4-JUN-2002 13:27:31
ORRCPRPT ; SLC/JER - Provider/Pt lists for CM ; 4-JUN-2002 13:28:18
ORRCPRXY ; SLC/JER - SharedBroker Proxy for VistALink ;12-JUN-2002 15:46:14
ORRCPT ; SLC/JER - Pt lists for CM ; 4-JUN-2002 13:33:20
ORRCPTH ; SLC/SRM - Pt lists for CM ; 28-MAY-2002
ORRCRSEN ;; SLC/SRM - User Reports; 05/29/2002
ORRCRUS1 ;; SLC/SRM - User Reports; 06/04/2002
ORRCRUS2 ;; SLC/SRM - User Report Saves; 06/04/2002
ORRCRUSR ;; SLC/SRM - User Reports; 05/20/2002
ORRCRL ; SLC/JER - Specialty/Pt lists for CM ; 4-JUN-2002 13:41:51
ORRCSPPT ; SLC/JER - Specialty/Pt lists for CM ; 4-JUN-2002 13:49:18
ORUPREF1 ; slc/dcm - Key allocation ;12/11/91  08:12 [3/13/02 11:42am]
ORUS    ; slc/KCM - Display List of Items ;6/2/92  08:09
ORUS1   ; slc/KCM - Select Items from List ;3/24/92  08:56
ORUS2   ; slc/KCM - Process Selected Items ;11/7/90  18:21 ;
ORUS3   ; slc/KCM - Help for Display Lists ;11/7/90  16:21 ;
ORUS4   ; slc/KCM - Select Items from List ;11/7/90  16:57
ORUS5   ; slc/KCM - Display List of Items ;1/3/91  10:01 ;
ORUTL   ; slc/dcm,RWF - Order utilities; ;5/15/02  08:20
ORUTL1  ; slc/dcm - OE/RR Utilities ;6/7/91  08:47
ORVOM   ; slc/dcm - Generate ONITS- for OE/RR ;1/22/91  15:39
ORVOM0  ; slc/dcm - Gathers parts to send ;1/23/91  06:47 ;
ORVOM1  ; slc/dcm - Creates rtns for Protocol export ;1/23/91  07:13
ORVOM11 ; slc/dcm - Creates RTN ending in ONIT1 ;1/22/91  15:53
ORVOM2  ; slc/dcm - Creates rtns ending in 'ONIT1' ;12/11/90  14:28
ORVOM3  ; slc/dcm - Creates rtn ending in 'ONIT2' ;1/23/91  07:15
ORVOM4  ; slc/dcm - Creates rtn ending in 'ONIT3' ;9/16/91  15:51 ;
ORVOM5  ; slc/dcm - ONIT creation ;1/14/91  09:55 ;
ORVOM6  ; slc/dcm - ONIT creation ;12/11/90  14:30 ;
ORVOMH  ; slc/dcm - Help for ORVOM ;12/11/90  14:30 ;
ORWCH   ; SLC/KCM/SCM - GUI calls specific to CPRS Chart;01:34 PM  15 Dec 1997
          [10:52 AM 13 JUN 2002]
ORWCIRN ; slc/dcm,REV - Functions for GUI CIRN ACTIONS ;22-NOV-1999 07:27:24
ORWCOM  ;SLC/JM - Wraps RPCs for COM Objects Hooks ;8/02/2001
ORWCS   ; ALB/MJK - Consult Tab Calls ;9/18/96  15:02
ORWCSLP ; ALB/MJK - Background Consult Report Print Driver ;1/24/95  15:49
ORWCV   ; SLC/KCM - Background Cover Sheet Load;1/5/2001
ORWCV1  ; slc/dcm - CoverSheet calls continued ;12:30 PM  4 Oct 2000
ORWD    ; SLC/KCM - Utilities for Windows Dialogs ;7/2/01  13:31
ORWD1   ; SLC/KCM/REV - GUI Prints; 28-JAN-1999 12:51
ORX76 ; slc/CLA - Export Package Level Parameters for patch OR*3*76; Dec 20, 1999@16:21:18
ORX8 ; slc/dcm,MKB - OE/RR Orders file extracts ; 08 May 2002  2:12 PM
ORX87 ; slc/CLA - Export Package Level Parameters for patch OR*3*87 ; Jun 05 , 2000@14:48:45
ORX88 ; slc/CLA - Export Package Level Parameters for patch OR*3*88 ; 6/28/00 12:00
ORXD ;SLC/MKB-OE/RR Order Dialog entry points ;3/25/97  09:46
ORXP ; SLC/KCM - Parameters File Calls
ORXPAR ; Export Package Level Parameters ; Dec 17, 1997@11:35:35
ORXPAR01 ; ; Dec 17, 1997@11:35:35
ORXPAR02 ; ; Dec 17, 1997@11:35:35
ORXPAR03 ; ; Dec 17, 1997@11:35:35
ORXPAR04 ; ; Dec 17, 1997@11:35:35
ORXPAR05 ; ; Dec 17, 1997@11:35:35
ORXPAR06 ; ; Dec 17, 1997@11:35:35
ORXPAR07 ; ; Dec 17, 1997@11:35:35
ORXPAR08 ; ; Dec 17, 1997@11:35:35
ORXPAR09 ; ; Dec 17, 1997@11:35:35
ORXTABS ; SLC/PKS - Edit tab parameters preferences. [4/9/01 9:46am]
ORXTABS1 ; SLC/PKS - Edit tab parameters preferences. [9/11/00 1:40pm]
ORXTABS2 ; SLC/PKS - Edit calls, tab parameters preferences. [10/2/00 3:53pm]
ORXTABS3 ; SLC/PKS - Edit calls, tab parameters preferences. [10/17/00 2:39pm]
ORXTABS4 ; SLC/PKS - Edit calls, tab parameters preferences. [9/28/00 3:05pm]
ORXTABS5 ; SLC/PKS - Edit calls, tab parameters preferences. [11/22/00 11:16am]
ORXU ; SLC/MKB - Order Urgency utilities ;5/25/99  16:23
ORXURG ; SLC/MKB - Order Urgency utilities ;9/23/99  14:33
ORY10 ; SLC/KCM - Patch 10 conversions ;03:16 PM  2 Sep 1998
ORY105 ; slc/CLA - Export Package Level Parameters for patch OR*3*105 ; Sep 0
5, 2001@11:20:54
ORY1050  ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Instal
l of OR*3*105) ;OCT 16,2001 at 15:39
ORY10501 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Instal
l of OR*3*105) ;OCT 16,2001 at 15:39
ORY10502 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Instal
l of OR*3*105) ;OCT 16,2001 at 15:39
ORY10503 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Instal
l of OR*3*105) ;OCT 16,2001 at 15:39
ORY10504 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Instal
l of OR*3*105) ;OCT 16,2001 at 15:39
ORY10505 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Instal
l of OR*3*105) ;OCT 16,2001 at 15:39
ORY10506 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Instal
l of OR*3*105) ;OCT 16,2001 at 15:39
ORY10507 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Instal
l of OR*3*105) ;OCT 16,2001 at 15:39
ORY10508 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Instal
l of OR*3*105) ;OCT 16,2001 at 15:39
ORY10509 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Instal
l of OR*3*105) ;OCT 16,2001 at 15:39
ORY1050A ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Instal
l of OR*3*105) ;OCT 16,2001 at 15:39
ORY1050B ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Instal
l of OR*3*105) ;OCT 16,2001 at 15:39
ORY1050C ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Instal
l of OR*3*105) ;OCT 16,2001 at 15:39
ORY1051  ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Instal
l of OR*3*105) ;OCT 16,2001 at 15:39
ORY1052 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*105); OCT 16,2001 at 15:39
ORY1053 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*105); OCT 16,2001 at 15:39
ORY1054 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*105); OCT 16,2001 at 15:39
ORY105ES ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*105); OCT 16,2001 at 15:39
ORY106 ;SLC/DAN - Postinit for patch OR*3*92 ;2/1/01 16:18
ORY107 ;DAN/SLC Clean up non-canonic dates ;4/18/01 13:14
ORY109 ;SLC/dcm - Patch 109 Post/Pre-init ;06/19/01 16:09 [9/6/01 3:49pm]
ORY110 ;SLC/DAN -- Clean up orderable items file ;1/4/02 13:57
ORY112 ;SLC/CLA - Export Package Level Parameters for patch OR*3*112; Sep 05 , 2001@11:39:17
ORY115 ;SLC/CLA - Patch 115 Post-init ;9/6/01 13:52
ORY116 ;SLC/MKB -- postinit rtn for OR*3*116 ;9/27/01 16:39 [11/27/01 1:28pm ]
ORY117 ;SLC/MKB -- post-install for OR*3*117; 02:56 PM 8 May 2001
ORY118 ;SLC/dcm - Patch 118 Post/Pre-init ;08/27/01 10:09
ORY120 ;SLC/dcm - Patch 120 Post/Pre-init ;08/27/01 10:09
ORY124 ;SLC/DAN -- Find potentially erroneous complex orders ;10/25/01 14:36
ORY127 ;SLC/CLA - Export Package Level Parameters and install Expert System rule for OR*3*127; Jan 07, 2002@14:08:07
ORY1270 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*127); JUN 13,2002 at 15:01
ORY12701 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*127); JUN 13,2002 at 15:00
ORY12702 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*127); JUN 13,2002 at 15:01
ORY12804 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install)
ORY12805 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install)
ORY12806 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install)
ORY12807 ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install)
ORY1281  ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install)
ORY1282  ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install)
ORY1283  ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install)
ORY1284  ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install)
ORY128ES ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install)
ORY129   ;SLC/MKB - Postinit for patch OR*3*129 ; 12/11/01 11:04
ORY130   ;SLC/CLA - Special routine to report mirrored and cyclical Kernel Ale
ORY132   ;SLC/REV -- postinit rtn for OR*3*132 ; 12/13/01 06:25 [4/29/02 4:53pm
ORY133   ;SLC/MKB - Postinit for patch OR*3*133 ; 1/18/02 12:20
ORY134   ;SLC/DAN ; 3/28/02 12:35
ORY138   ;SLC/DAN ; 3/14/02 15:31
ORY139   ;SLC/CLA - Export Package Level Parameters ; Apr 08, 2002;16:33:25
ORY141   ;SLC/REV/JLI -- postinit rtn for OR*3*141 ; 12/13/01 06:25 [5/21/02 2:
ORY141EC ; SLC/JDL Event Capture Report ;6/14/02 13:06
ORY141ED ; SLC/MKB - EDO inits for patch OR*3*141 ;4/26/02 11:42
ORY142 ; SLC/MKB - inits for ED pre-patch OR*3*142 ;7/3/02 13:57
ORY144 ; Slc/CLA - Install Expert System changes for OR*3*144 ; Apr 15, 2002@ 11:08:07
ORY1440 ; SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*144) ; JUN 12,2002 at 12:20
ORY14401 ; SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*144) ; JUN 12,2002 at 12:20
ORY14402 ; SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*144) ; JUN 12,2002 at 12:20
ORY14403 ; SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*144) ; JUN 12,2002 at 12:20
ORY14404 ; SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*144) ; JUN 12,2002 at 12:20
ORY14405 ; SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*144) ; JUN 12,2002 at 12:20
ORY14406 ; SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*144) ; JUN 12,2002 at 12:20
ORY14407 ; SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*144) ; JUN 12,2002 at 12:20
ORY1441 ; SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*144) ; JUN 12,2002 at 12:20
ORY1442 ; SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*144) ; JUN 12,2002 at 12:20
ORY1443 ; SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install 1 of OR*3*144) ; JUN 12,2002 at 12:20
ORY1444 ; SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install
ORY144ES ;SLC/RJS,CLA - OCX PACKAGE RULE TRANSPORT ROUTINE (Delete after Install
ORY145 ;SLC/DAN ;4/5/02  07:10
ORY147 ;slc/dcm - postinit for OR*3*147 ;5/17/02  12:17
ORY148 ;SLC/PKS -- postinit rtn for OR*3*148 ;12/13/01  06:25 [7/9/02 11:12am
ORY149 ;SLC/PKS -- postinit rtn for OR*3*149 ;12/13/01  06:25 [6/11/02 11:19a
ORY24 ;SLC/MKB-Postinit for OR*3*24 ;4/16/98  16:18
ORY26 ;SLC/MKB-Postinit for patch OR*3*26
ORY27 ;SLC/MKB-Postinit for OR*3*27 ;5/11/98  08:28
ORY36 ;SLC/MKB-Postinit for patch OR*3*36 ;10/9/98  15:10
ORY38 ;SLC/MKB-Postinit for patch OR*3*38 ;11/20/98  09:24
ORY39 ;SLC/JFR - POST-INSTALL OR*3*39 11/24/98 13:15
ORY4 ;SLB/MKB-postinit for OR*3.0*4 ;4/30/98  15:52
ORY40 ; SLC/PKS Remove Parameter Entries ; [2/10/00 1:40pm]
ORY44 ; SLC/PKS-KR Remove Terminated Users ; [4/8/02 11:11am]
ORY44B ; SLC/PKS-KR Remove Terminated Users (get DD info) ; [11/8/99 1:45pm]
ORY44C ; SLC/PKS  OE/RR - Delete Personal lists for terminated users. ; [2/21
ORY45 ;SLC/MKB-Postinit for patch OR*3*45 ;2/22/99  15:17
ORY46 ;SLC/MKB-Preinit for patch OR*3*46;04:21 PM  12 Feb 1999
ORY48 ;SLC/MKB-Postinit for patch OR*3*48 ;7/9/99  14:22
ORY56 ; SLC/MKB - Postinit for patch OR*3*56 ;5/20/99  15:37
ORY57 ;SLC/MKB - Postinit for patch OR*3*57 ;6/2/99  15:35
ORY60 ; SLC/MKB - Postinit for patch OR*3*60 ;6/17/99  10:42
ORY61 ; SLC/MKB - Postinit for patch OR*3*61 ;7/16/99  15:31
ORY62 ; SLC/MKB - Postinit for patch OR*3*62 ;7/20/99  12:02
## 4. Menus and Options

### Options

| OCX EXPERT SYSTEM INQUIRE | OCX FUNCT LIB REPORT BRIEF |
| OCX FUNCT LIB REPORT EXT CALLS | OCX LOCAL TERM EDIT |
| OCX RUN COMPILER | OR ADD MENU CLINICIAN |
| OR ADD MENU NURSE | OR ADD MENU WARD CLERK |
| OR ADD ORDERS | OR CPRS GUI CHART |
| OR MAIN MENU CLINICIAN | OR MAIN MENU NURSE |
| OR MAIN MENU WARD CLERK | OR OE/RR MENU CLINICIAN |
| OR OE/RR MENU NURSE | OR OE/RR MENU WARD CLERK |
| OR PARAM ADD MENU | OR PARAM CHART COPY |
| OR PARAM COORDINATOR MENU | OR PARAM IBM MENU |
| OR PARAM ORDER MISC | OR PARAM PRINTS |
| OR PARAM PRINTS (HOSP) | OR PARAM PRINTS (LOC) |
| OR PARAM REQ/LABEL | OR PARAM SERVICE COPY |
| OR PARAM SUMMARY REPORTS | OR PARAM WORK COPY |
| OR REVIEW ORDERS | ORB NOT COORD MENU |
| ORB NOT MENU | ORB NOT MGR MENU |
| ORB3 ALERT RECIPIENTS | ORB3 ALERT TRACKING MENU |
| ORB3 ALERT TRACKING REPORT | ORB3 ALERT TRACKING REPORT 2 |
| ORB3 ARCHIVE PERIOD | ORB3 ARCHIVE DEL |
| ORB3 DEFAULT RECIPIENT DEVICES | ORB3 DEFAULT RECIPIENTS |
| ORB3 DELETE MECHANISM | ORB3 DETERMINE RECIPIENTS |
| ORB3 ERASE NOTIFICATIONS | ORB3 FLAG ORDERABLE ITEMS |
| ORB3 FLAGGED ORDERS BULLETIN | ORB3 FORWARD SUPERVISOR |
| ORB3 FORWARD SURrogates | ORB3 PROCESSING FLAG |
| ORB3 PROVIDER RECIPIENTS | ORB3 REC ERASE NOTIFICATIONS |
| ORB3 REC RECIP NOTIFICATIONS | ORB3 REC SORT METHOD |
| ORB3 RECIP NOTIFICATIONS | ORB3 SORT METHOD |
| ORB3 SYSTEM ENABLE/DISABLE | ORB3 URGENCY |
| ORB3 LM 1 MAIN MENU | ORB3 LM 01 E/D NOTIFICATIONS |
| ORB3 LM 02 SET URGENCY | ORB3 LM 03 DEL PARAM |
| ORB3 LM 04 DEF RECIPIENTS | ORB3 LM 05 DEF RECIP DEV |
| ORB3 LM 06 SET URGENCY | ORB3 LM 07 SET DELAYS MENU |
| ORB3 LM 07A FLAG INPT ORD | ORB3 LM 07B FLAG INPT ORD PR |
| ORB3 LM 07C FLAG INPT RESULTS | ORB3 LM 07D FLAG INPT RSLTS PR |
| ORB3 LM 07E FLAG INPT EXP ORD | ORB3 LM 07F FLAG INPT EO PR |
| ORB3 LM 07G FLAG OUTPT ORD | ORB3 LM 07H FLAG OUTPT ORD PR |
| ORB3 LM 07I FLAG OUTPT RESULTS | ORB3 LM 07J FLAG OUTPT RSLT PR |
| ORB3 LM 07K FLAG OUTPT EXP ORD | ORB3 LM 07L FLAG OUTPT EO PR |
| ORB3 LM 08 ARCHIVE DEL | ORB3 LM 09 FORWARD NOTIF MENU |
| ORB3 LM 09A FOR UNP NOT SUP | ORB3 LM 09B FOR UNP NOT SUR |
| ORB3 LM 09C FOR UNP NOT BKR | ORB3 LM 10 SET DELAYS MENU |
| ORB3 LM 10A DELAY UNV ORDERS | ORB3 LM 10B DEL UNV MED ORDERS |
| ORB3 LM 11 FLAG ORD BULLETIN | ORB3 LM 12 E/D SYSTEM |
| ORB3 LM 14 NOTS FOR USERS | ORCL KEY ALLOCATION |
| ORC DELAYED ORDERS | ORCL ORDER REASON |
| ORCL MENU | ORCL PRINT FORMAT |
| ORCL PRINT FORMAT | ORCM MENU |
| ORCM MGMT | ORCM ORDER SETS |
| ORCM ORDERABLES | ORCM ORDERS |
| ORCM PROMPTS | ORCM PROTOCOLS |
| ORCM QUICK ORDERS | ORDERS MENU |
| ORC KEY CHECK | ORE LAB ORDER CHECKS |
| ORE LAB ORDERS CHECK 100=>69 | ORE LAB ORDERS CHECK 69=>100 |
| ORE MGR | ORK CLINICAL DANGER LEVEL |
| ORK CT LIMIT HT | ORK CT LIMIT WT |
| ORK DEBUG ENABLE/DISABLE | ORK DUP ORDER RANGE LAB |
| ORK DUP ORDER RANGE OI | ORK DUP ORDER RANGE RADIOLOGY |
| ORK MRI LIMIT HT | ORK MRI LIMIT WT |
| ORK ORDER CHK MGMT MENU | ORK ORDER CHECK RECIP MENU |
Menu Assignment

CPRS Manager Menu [ORMGR MENU]

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

We recommend that you assign menus as follows

<table>
<thead>
<tr>
<th>Menu Text</th>
<th>Option Name</th>
<th>Assignment</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPRS Manager Menu</td>
<td>ORMGR MENU</td>
<td>IRMS specialists assigned to CPRS</td>
</tr>
<tr>
<td>Clinician Menu</td>
<td>OR MAIN MENU CLINICIAN</td>
<td>Clinicians (physicians, psychologists, social workers, nurse practitioners, PAs, etc.)</td>
</tr>
<tr>
<td>Menu Type</td>
<td>OR Menu Name</td>
<td>User Group</td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>-------------------------------</td>
<td>------------------------------------------------</td>
</tr>
<tr>
<td>Nurse Menu</td>
<td>OR MAIN MENU NURSE</td>
<td>Nurses</td>
</tr>
<tr>
<td>Ward Clerk Menu</td>
<td>OR MAIN MENU WARD CLERK</td>
<td>Ward Clerks, MAS personnel</td>
</tr>
<tr>
<td>CPRS Configuration Menu (Clin Coord)</td>
<td>ORCL MENU</td>
<td>Clinical Coordinators, ADPACS,</td>
</tr>
<tr>
<td>CPRS Configuration Menu (IRM)</td>
<td>ORE MGR</td>
<td>IRMS CPRS specialist (locked with XUPROG key)</td>
</tr>
</tbody>
</table>
## Menu Descriptions

### CPRS Configuration Menu (Clin Coord) [OR PARAM COORDINATOR MENU]

<table>
<thead>
<tr>
<th>Menu Text</th>
<th>Option Name</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auto-DC Parameters</td>
<td>OR PARAM AUTODC</td>
<td>This option is for editing hospital-wide parameters that control how CPRS will automatically discontinue orders on patient movements.</td>
</tr>
<tr>
<td>Allocate OE/RR Security Keys</td>
<td>ORCL KEY ALLOCATION</td>
<td>This option lets Clinical Coordinators allocate security keys to CPRS clinicians, nurses, ward clerks, or CPRS Read-Only users.</td>
</tr>
<tr>
<td>Check for Multiple Keys</td>
<td>OR PARAM SYSTEM</td>
<td>This menu, for IRMS and coordinators, lets you set various parameters, including order checking and notification parameters. It also lets you allocate security keys.</td>
</tr>
<tr>
<td>Edit DC Reasons</td>
<td>ORCL ORDER REASON</td>
<td>This option allows access to the Order Reason file to enter or edit reasons for discontinuing an order.</td>
</tr>
<tr>
<td>GUI Parameters...</td>
<td>ORW PARAM GUI</td>
<td>Configuration parameters for the CPRS GUI</td>
</tr>
<tr>
<td>Miscellaneous Parameters</td>
<td>OR PARAM ORDER MISC</td>
<td>This option is for editing miscellaneous hospital wide CPRS parameters, such as active orders time range, grace days before purge, whether to automatically unflag orders, confirm providers, review on patient movement, etc.</td>
</tr>
<tr>
<td>Notification Mgmt Menu</td>
<td>ORB NOT COORD MENU</td>
<td>This menu is used by clinical coordinators and IRM staff to turn notifications on or off for a provider. It prompts the coordinator for the user, then calls other notification mgmt options. It also contains options that can purge existing notifications.</td>
</tr>
<tr>
<td>Order Checking Management</td>
<td>ORK ORDER CHK MGMT MENU</td>
<td>Options on this menu allow IRMS to set order checking parameters for each of the possible entities: System, Division, Service, Location, Team, Class, or User, as applicable.</td>
</tr>
<tr>
<td>Order Menu Management ...</td>
<td>ORCM MGMT</td>
<td>Options on this menu let you enter or edit orderable items, prompts, generic orders, quick orders, order sets, and order menus. It also lets you convert protocols.</td>
</tr>
<tr>
<td>Patient List Mgmt Menu..</td>
<td>ORLP PATIENT LIST MGMT MENU</td>
<td>This menu allows coordinators and IRMS to create and manage personal and patient team lists and to set default patient list parameters.</td>
</tr>
<tr>
<td>Print Formats</td>
<td>ORCL PRINT FORMAT</td>
<td>This option allows the user to define formats for printing labels and requisitions for orders.</td>
</tr>
<tr>
<td>Print/Report Parameters</td>
<td>OR PARAM PRINTS</td>
<td>This menu is for editing print parameters. It should be available to the clinical coordinator and IRM Staff.</td>
</tr>
<tr>
<td>Release/Cancel Delayed Orders</td>
<td>ORC DELAYED ORDERS</td>
<td>This option allows clinical coordinators to release or cancel orders that have been put on delay, but then weren’t ever released for some reason.</td>
</tr>
<tr>
<td>Unsigned Orders Search</td>
<td>OR UNSIGNED ORDERS</td>
<td>This option provides the user with three choices to search for unsigned orders. Each search criteria will allow a choice of six sort parameters, a start</td>
</tr>
<tr>
<td>Feature</td>
<td>Command</td>
<td>Description</td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Set Unsigned Orders View on Exit</td>
<td>OR PARAM UNSIGNED ORDERS VIEW</td>
<td>This option may be used to set the default view of unsigned orders that ORES key holders will see when exiting a patient's chart. Possible views are only those orders entered during the current session, all of the current user's unsigned orders, or all unsigned orders for the patient.</td>
</tr>
<tr>
<td>Search Orders by Nature or Status</td>
<td>OR NATURE/STATUS ORDER SEARCH</td>
<td>This option provides the user with a way to review orders by either the nature of the order or the status of the order. These options are generally used for quality assurance purposes to monitor ordering trends but may also be useful in meeting JCAHO requests.</td>
</tr>
<tr>
<td>Event Delayed Orders Menu</td>
<td>OR DELAYED ORDERS</td>
<td>This option allows you to set up release events for event-delayed orders and also allows you to configure the auto-discontinue feature for orders.</td>
</tr>
</tbody>
</table>
Unsigned Orders Search

This option provides the user with three choices to search for unsigned orders. Each search criteria will allow a choice of six sort parameters, a starting date, an ending date, the option to print only the orders summary, and an output device.

Search Criteria Option

Released/Unsigned: These are orders that have been released to the service but remain unsigned by the requesting clinician. Only released but unsigned orders will be found using this search option.

Unsigned: These are orders that have not been signed by the requesting clinician, regardless of whether they have been released or not. This option will include all orders displayed in options 1 and 3.

Unsigned/Unreleased: These are orders that have not been released to the service and remain unsigned by the requesting clinician. Only unreleased and unsigned orders will be found using this search option.

Sort Criteria

Service/Section: This sort will allow the user to find unsigned orders for all service/sections, a single service/section, or multiple selected service/sections.

Provider: This sort will allow the user to find unsigned orders associated with all providers, a single provider, or multiple selected providers.

Patient: This sort will allow the user to find unsigned orders for all patients, a single patient, or multiple selected patients.

Location: This sort will allow the user to find unsigned orders associated with all locations, a single location, or multiple selected locations.

Entered By: This sort will allow the user to find unsigned orders entered by all entering persons, a single entering person, or multiple selected entering persons.

Division: This sort will allow the user to find unsigned orders for all divisions, a single division, or multiple selected divisions.

Other Criteria

Starting Date: Enter the most recent date you would like the search to begin with. For example, if your site has a 48 hours grace period for signing orders, you can ignore those orders placed and left unsigned within the last 48 hours by entering a T-2 or a date/time. Entries in this field follow FileMan conventions.

Ending Date: Enter the oldest date you would like the search to consider. For example, when running this option for the first time, you may want to use the date/time of the installation of CPRS onto your system in order to avoid listing left over orders from the previous version, OERR 2.5. Entries in this field follow FileMan conventions.

Print Summary Only: Enter YES at this prompt to print only the final summary report statistics of the orders count.

Device: The output of this option is formatted for 132-column and will be much easier to read if sent to a device capable of handling 132 or greater columns.
Example of Unsigned Orders Search

Select CPRS Configuration (Clin Coord) Option: US Unsigned orders search

Unsigned Orders Search

This report is formatted for a 132 column output.

Select one of the following:
1 Released/Unsigned
2 Unsigned
3 Unsigned/Unreleased

Enter the type of orders to search: 2 Unsigned

Select one of the following:
1 Service/Section
2 Provider
3 Patient
4 Location
5 Entered By
6 Division

Enter the sort criteria: 2 Provider

Would you like a specific Provider? NO//

Enter a starting date: T (NOV 21, 2000)

Enter an ending date: T-30 (OCT 22, 2000)

Print summary only? NO//

DEVICE: HOME// ;132;999 ANYWHERE

The resulting reports would appear similar to the following examples

<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>PROVIDER</td>
<td>ENTERED BY</td>
</tr>
<tr>
<td>CPRSPROVIDER,EIGHT</td>
<td>CPRSPROVIDER,ONE</td>
</tr>
<tr>
<td>CPRSPROVIDER,FOUR</td>
<td>CPRSPROVIDER,THREE</td>
</tr>
<tr>
<td>CPRSPROVIDER,FIVE</td>
<td>CPRSPROVIDER,NINE</td>
</tr>
<tr>
<td>CPRSPROVIDER,ONE</td>
<td>CPRSPROVIDER,TEN</td>
</tr>
<tr>
<td>CPRSPROVIDER,SIX</td>
<td>CPRSPROVIDER,FOUR</td>
</tr>
<tr>
<td>CPRSPROVIDER,TEN</td>
<td>CPRSPROVIDER,TWO</td>
</tr>
</tbody>
</table>

The following is an example of the data included on the report that is generated when you select “Print Summary Only.”

<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>PROVIDER</td>
<td>ENTERED BY</td>
</tr>
<tr>
<td>CPRSPROVIDER,EIGHT</td>
<td>CPRSPROVIDER,ONE</td>
</tr>
<tr>
<td>CPRSPROVIDER,FOUR</td>
<td>CPRSPROVIDER,THREE</td>
</tr>
<tr>
<td>CPRSPROVIDER,FIVE</td>
<td>CPRSPROVIDER,NINE</td>
</tr>
<tr>
<td>CPRSPROVIDER,ONE</td>
<td>CPRSPROVIDER,TEN</td>
</tr>
<tr>
<td>CPRSPROVIDER,SIX</td>
<td>CPRSPROVIDER,FOUR</td>
</tr>
<tr>
<td>CPRSPROVIDER,TEN</td>
<td>CPRSPROVIDER,TWO</td>
</tr>
</tbody>
</table>
Search Orders by Nature or Status

This option provides the user with a way to review orders by either the nature of order or the status. These options are generally used for quality assurance purposes to monitor ordering trends but may also be useful in meeting JCAHO requests.

Search Criteria

Nature of Order: This search criterion will enable the user to select one of the entries from the NATURE OF ORDER file. This will allow a report of orders based on a specific nature such as POLICY.

Order Status: This search criterion will enable the user to select one of the order statuses from the ORDER STATUS file. This will allow a report of orders based on a specific status such as DISCONTINUED/EDIT.

Other Search Criteria

Starting Date: Enter the date that you wish to mark the beginning of the search period. This date needs to be earlier than the ending date. Enter an ^ to exit the option. Entries in this field follow Fileman conventions.

Ending Date: Enter the date that you wish to use to mark the end of the search period. This date needs to be more recent than the start date. Enter an ^ to exit the option. Entries in this field follow Fileman conventions.

Output Format

The user has the choice of two output formats: detailed format or columnar format.

Detailed format will provide information from the following fields:

- **Order Status**: This field will display the status of the order.
- **Order Action**: This field will display the action to be taken on the order. Type a question mark to view a list of possible entries.
- **ORIFN**: This is the internal entry number of the order from File 100. This number is equivalent to the ORDER # in the detailed display while in CPRS. When you use Fileman to edit an order in File 100, type a reverse apostrophe (‘) before the number to jump directly to the order.
- **Object of Order**: This is the patient’s name
- **SSN**: This will display the last four of the patient’s Social Security number.
- **Ordered By**: This will display the name of the user who originated the order.
- **Veiled**: Orders placed prior to OERR 3.0 may have this field set to YES which hides the order from the end users. You must use Fileman to set this field to NO in order gain access to it thru CPRS.
• **Entered By**: This will display the name of the user who entered the order.
• **Released By**: This will display the name of the user who released the order.
• **Signed By**: This will display the name of the user who signed the order.
• **Order Text**: This will display the text of the order.
**Columnar format** produces an output similar to the unsigned orders format only with the following headings:

- Provider
- Patient
- SSN
- Status
- Order #
- Order Date
- Signed

**Additional Search Choices**

- **Output by Service**: Entering a YES at this prompt will allow the user to sort the output by service section for all service sections, a single service, or multiple selected services.
- **Specific Service/Section**: Entering a NO at this prompt will, by default, select all services. Entering a YES at this prompt will allow the user to enter a single service or a combination of services.
- **Device**: When using the columnar format, it is best viewed using a device capable of displaying a 132-column format. The detailed display will work well with an 80-column display.

**Example of Searching for Orders by Nature or Status**

Select CPRS Configuration (Clin Coord) Option: NA  Search Orders by Nature or Status

Nature of Order or Order Status Search.
This report is formatted for 132 column output.

Select one of the following:

1   Nature of order
2   Order Status

Enter the search criteria: 2  Order Status
Select Order Status: DISCONTINUED/EDIT   dce
Enter a starting date: T-30  (OCT 28, 2000)
Enter a ending date: T  (NOV 27, 2000)

Select one of the following:

1   Detailed format
2   Columnar format

Select output format: 2  Columnar format
Would you like to sort the output by service? NO// YES
Would you like to search for specific SERVICE/SECTIONS? NO//
DEVICE: HOME// ;132;999  ANYWHERE
The resulting report would appear similar to the following example

```
Report Date: Nov 27, 2000@11:50:19
Sort Range From: Oct 00, 2000@23:59 TO: Nov 00, 2000@00:01
Search for orders with a status of DISCONTINUED/EDIT

<table>
<thead>
<tr>
<th>Provider</th>
<th>Patient</th>
<th>SSN</th>
<th>Status</th>
<th>Order #</th>
<th>Order Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

----------------------------------------------------------------------------------
-------

Service/Section: OTHER

Entered by: PSJPROVIDER,TEN

PSJPROVIDER,TEN    CPRSPATIENT,ONE 3333 DISCONTINUED/E 7095898  Nov 02, 2000@13:18

Entered by: CPRSPROVIDER,TEN

CPRSPROVIDER,TEN  CPRSPATIENT,TWO 4423 DISCONTINUED/E 7095944  Oct 23, 2000@15:12
Oct 23, 2000@15:15

CPRSPROVIDER,TEN  CPRSPATIENT,TWO 3333 DISCONTINUED/E 7095858  Oct 30, 2000@09:29
Oct 30, 2000@09:29

CPRSPROVIDER,TEN  CPRSPATIENT,TWO 3333 DISCONTINUED/E 7095290  Nov 02, 2000@13:02
Nov 02, 2000@13:05

CPRSPROVIDER,TEN  CPRSPATIENT,TWO 3333 DISCONTINUED/E 7095098  Nov 02, 2000@13:30
Nov 02, 2000@13:33

CPRSPROVIDER,TEN  CPRSPATIENT,TWO 3333 DISCONTINUED/E 7095299  Nov 02, 2000@13:32
Nov 02, 2000@13:36
```

**CPRS Configuration (IRM) [OR PARAM IRM MENU]**

<table>
<thead>
<tr>
<th>Option</th>
<th>Menu Text</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>OCX MAIN</td>
<td>Order Check Expert System Main Menu</td>
<td>These options are used for troubleshooting Order Checking and Notifications, for compiling the expert system rules, and for linking local terms with national terms for order checking.</td>
</tr>
<tr>
<td>ORMTIME MAIN</td>
<td>ORMTIME Main Menu</td>
<td>These options are intended for IRMS only, and are used in conjunction with the ORTASK routines.</td>
</tr>
<tr>
<td>ORE MGR</td>
<td>CPRS Clean-up Utilities</td>
<td>This menu contains an option that checks consistency between lab files and OE/RR files.</td>
</tr>
<tr>
<td>XPAR MENU TOOLS</td>
<td>General Parameter Tools</td>
<td>This menu contains general purpose tools for managing parameters.</td>
</tr>
</tbody>
</table>
5. Creating Orders

The following sections discuss how to create orders for users at the site. These orders include:

- Generic orders
- Various quick orders
- Order sets

Creating Generic Orders

Generic orders are orders created by a Clinical Applications Coordinator (CAC) or similar individual at your facility. A CAC creates generic orders using existing dialog definitions and places them on order menus. Because they are based on the dialog definitions, the prompts for each generic order are different.

Generic orders do not follow the Inpatient Medications for Outpatients (IMO) rules in that the orders do not work differently for an inpatient location versus an outpatient location. To have generic orders appear under the Clinic Orders display group, users have to define the correct display group. However, when it is defined here, it will always display under Clinic Orders unlike other types of IMO orders.

CPRS Quick Orders and Order Sets

Clinical Application Coordinators (CACs) and others with appropriate access to the CPRS Configuration (Clin Coord) and the Order Menu Management option can create quick orders. A quick order is an order in which a creator has predefined some or all of the fields for an order. For example, in an inpatient medication quick order, the CAC might define the drug, dosage, route, schedule, and other fields.

Once the order is created, the CAC can assign the quick order to an order menu using the option Order Menu Management | Enter/edit order menus. Once the item is listed on an order menu, the user can select the quick order.

Using quick orders for frequently ordered items can significantly speed up the ordering process for clinicians. Quick orders can be set up so that they require CPRS to display the order dialog and the user to accept it—giving the provider a chance to review the order. Or, if the creator of the quick order enters all required fields and makes the quick order an auto-accept quick order, CPRS will place the order without displaying the dialog.

Several quick orders can then be combined in an order set. Order sets enable a group of quick orders to be executed in a sequence without having to select each quick order individually. So, for example, three quick orders might be placed in an order set. When the user selects the order set, CPRS would execute the quick orders in the orders that the creator places them in the order sets.

Because the prompts for orders from each package are different, each kind of quick order is slightly different. Quick orders can be created for the following types of orders:

- Activity
- Blood Products
- Clinic Orders
• Condition
• Consults
• Diagnosis
• Diet Additional Orders
• Diet Orders
• Early/Late Trays
• General Radiology
• Imaging
• IV Medications
• Laboratory
• M.A.S.
• Non-VA Medications
• Nursing
• Outpatient Meals
• Outpatient Medications
• Precautions
• Procedures
• Supplies/Devices
• Tube feedings
• Unit Dose Medications
• Vitals/Measurements

During the creation of quick orders, many prompts are not required. The instructions below are written as if the user was going to enter all the values for the prompts.

**Creating an Activity Quick Order**

To create an activity quick order, a CAC or similar person should follow these steps:

1. In the List Manager interface, select CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] PE and press <Enter>.
2. Go to MM Order Menu Management and press <Enter>.
3. Select the QO Enter/edit quick orders option and press <Enter>.
4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.
5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.
6. Type ACTIVITY for the TYPE OF QUICK ORDER and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>. 
8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.

9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.

10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.

11. At the Instructions prompt, type any necessary instructions (for example, the order will say “Activity” so to further define it, you add text like “Ambulate” or “Patient may use bathroom”, etc.) and press <Enter>.

12. Enter a start date (NOW is the default) and press <Enter>.

13. Enter a stop date if needed and press <Enter>.

14. If the order is correct, select Place. If the order is wrong, select Cancel or Edit. If you choose Edit, correct the items that need to be corrected. Then, press <Enter>.

15. If you choose Place, indicate if the order will be auto-accepted (choose Yes) or not (choose No) and press <Enter>.

Creating a Blood Products Quick Order

1. In the List Manager interface, select PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.

2. Go to MM Order Menu Management and press <Enter>.

3. Select the QO Enter/edit quick orders option and press <Enter>.

4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.

5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.

6. Type BLOOD PRODUCTS for the TYPE OF QUICK ORDER and press <Enter>.

7. Confirm the name of the quick order by pressing <Enter>.

8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.

9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.

10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.

11. At the ENTRY ACTION prompt, the creator can enter some M code that will be executed at the top of the dialog in the List Manager interface. If wanted, enter the necessary M code.

12. At the Component or Test prompt, enter the type of blood product or the necessary diagnostic test and then press <Enter>:
   - Blood component:
     - Cryoprecipitate
     - Fresh Frozen Plasma
     - Other
     - Platelets
- Red Blood Cells
- Whole Blood
- Diagnostic test:
  - ABO/Rh
  - Antibody Screen
  - Direct Antiglobulin Test
  - Transfusion Reaction Workup
  - Type & Screen

13. At the Additional Requirements prompt, enter any necessary requirement from the following and then press <Enter>:
   - Washed
   - Irradiated
   - Leuko Reduced
   - Volume Reduced
   - Divided
   - Leuko Reduced/Irradiated

14. Enter the number of units, if blood products are ordered and press <Enter>.

15. If needed, select another blood component (use steps 12-14) or test. If no additional items are needed, press <Enter>.

16. At the Collected By prompt, select how the blood specimen will be collected if it is needed and then press <Enter>:
   - SP Send patient to lab
   - WC Ward collect & deliver
   - LC Lab blood team
   - I Immediate collect by blood team

17. Enter a collection date and time and press <Enter>.

18. Enter an Urgency and press <Enter>.

19. At the Surgery prompt, enter the surgical procedure if this is for a surgery and press <Enter>.

20. Enter a date and time wanted and press <Enter>.

21. Type a reason for request and press <Enter>.

22. Type comments if needed and press <Enter>.

23. If the order is ready, select Place and press <Enter>.

24. At the Auto-accept this order prompt, indicate if the order should be accepted without user intervention after being selected (choose Yes) or if the user should have to check the order before acceptance (choose No) and then press <Enter>.

**Creating a Clinic Order Quick Order**

1. In the List Manager interface, select PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.
2. Go to MM Order Menu Management and press <Enter>.
3. Select the **QO** Enter/edit quick orders option and press `<Enter>`.
4. At the **QUICK ORDER NAME** prompt, type the name for the quick order and press `<Enter>`.
5. At the **Are you adding 'name' as a new ORDER DIALOG?** prompt, type **Y** and press `<Enter>`.
6. Type **CLINIC ORDERS** for the TYPE OF QUICK ORDER and press `<Enter>`.
7. Confirm the name of the quick order by pressing `<Enter>`.
8. At the **DISPLAY TEXT** prompt, type the text that will display on the order menu and press `<Enter>`.
9. At the **VERIFY** prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press `<Enter>`.
10. At the **DESCRIPTION** prompt, you may type in a description of this order and press `<Enter>`.
11. At the **Medication** prompt, type the name of the medication and press `<Enter>`.
12. Indicate if this will be a **Complex Dose**, type **Y** for a complex dose or **N** for a simple dose and press `<Enter>`.
13. Indicate the **Dose** by choosing from the list of typing in a dose and pressing `<Enter>`.
14. Type in the medication route and press `<Enter>`.
15. Indicate if this will be a **Complex Dose**, type **Y** for a complex dose or **N** for a simple dose and press `<Enter>`.
16. For a complex dose, enter the number of days or hours this medication should be given and press `<Enter>`. For a simple dose, go to step 19.
17. For a complex dose, choose the appropriate conjunction (Then or And) and press `<Enter>`.
18. For a complex dose with another line, choose another dosage or type in the appropriate dose and press `<Enter>`. Then repeat steps 13-18 as needed to create the complex dose.
19. At the **Priority** prompt, indicate the priority and press `<Enter>`.
20. Type any needed comments and press `<Enter>`.
21. Review the order text that displays for accuracy. If incorrect, select **Edit**, press `<Enter>`, and make the necessary changes. To not save the order at all, select **Cancel** and press `<Enter>`. If the order is correct, select **Place** and press `<Enter>`.
22. At the **Auto-accept this order?** prompt, choose whether this should be an auto-accept order. To make it auto-accept, type **Y** and press `<Enter>`. To make the user review the order before it is accepted, type **N** and press `<Enter>`.

**Creating a Condition Quick Order**

**Note:** Although it is possible to create a quick order for **Condition**, it is probably not something sites would often do. **Condition** is very specific to the patient and a quick order may not be very helpful. But because it is possible, the steps are below.

1. In the List Manager interface, select **PE CPRS Configuration (Clin Coord)** [OR PARAM COORDINATOR MENU] and press `<Enter>`.
2. Go to **MM** Order Menu Management and press `<Enter>`.
3. Select the **QO** Enter/edit quick orders option and press `<Enter>`.
4. At the **QUICK ORDER NAME** prompt, type the name for the quick order and press `<Enter>`.
5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.
6. Type CONDITION for the TYPE OF QUICK ORDER and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>.
8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.
9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.
10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.
11. At the Condition prompt, type the text describing the patient’s condition (critical, serious, fair, etc.). This field can be up to 240 characters in length and press <Enter>.
12. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.
13. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

Creating a Consult Quick Order

1. In the List Manager interface, select PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.
2. Go to MM Order Menu Management and press <Enter>.
3. Select the QO Enter/edit quick orders option and press <Enter>.
4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.
5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.
6. Type CONSULTS for the TYPE OF QUICK ORDER and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>.
8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.
9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.
10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.
11. At the Consult to Service/Specialty prompt, type the service or specialty name where the consult request should go and press <Enter>. (To get a list of services and specialties, type two question marks and press <Enter>.)
12. At the Consult Type prompt, indicate the type of consult (this can be a free-text response) and press <Enter>.
13. At the Reason for Request prompt, if you want to enter a reason for request, type Y and enter the necessary text and then exit the word processing area.
14. At the Category prompt, type an I for inpatient or an O for outpatient and press <Enter>. 
15. The Urgency prompt choices vary based on the Category defined as Inpatient or Outpatient Input the desired value and press <Enter>. Available urgencies are

- EMERGENCY (Inpatient only)
- NEXT AVAILABLE (Outpatient only)
- ROUTINE
- STAT
- TODAY (Outpatient only)
- WITHIN 1 MONTH (Outpatient only)
- WITHIN 1 WEEK (Outpatient only)
- WITHIN 24 HOURS (Outpatient only)
- WITHIN 48 HOURS (Inpatient only)
- WITHIN 72 HOURS

16. At the Clinically Indicated Date prompt, you may enter a date value greater than or equal to TODAY. Typically, this field is left blank to ensure providers actively choose a clinically relevant date value when placing the order.

17. At the Place of Consultation prompt, type where the consults should take place (Emergency Room or Consult’s Choice for outpatients, or Bedside or Consultant’s Choice for inpatients) and press <Enter>.

18. At the Attention prompt, type the name of the person to whom the consult should be sent and press <Enter>.

19. Type the Provisional Diagnosis and press <Enter>.

20. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.

21. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

**Creating a Diagnosis Quick Order**

**Note:** Although it is possible to create a quick order for Diagnosis, it is probably not something sites would often do. Diagnosis is very specific to the patient and a quick order may not be very helpful. But because it is possible, the steps are below.

1. In the List Manager interface, select PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.
2. Go to MM Order Menu Management and press <Enter>.
3. Select the QO Enter/edit quick orders option and press <Enter>.
4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.
5. At the Are you adding ’name’ as a new ORDER DIALOG? prompt, type Y and press <Enter>.
6. Type DIAGNOSIS for the TYPE OF QUICK ORDER and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>.
8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.
9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.

10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.

11. At the Diagnosis prompt, type the text describing the patient’s diagnosis. This field can be up to 240 characters in length and press <Enter>.

12. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.

13. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

Creating an Additional Diet Quick Order

1. In the List Manager interface, select PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.

2. Go to MM Order Menu Management and press <Enter>.

3. Select the QO Enter/edit quick orders option and press <Enter>.

4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.

5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.

6. Type DIET ADDITIONAL ORDERS for the TYPE OF QUICK ORDER and press <Enter>.

7. Confirm the name of the quick order by pressing <Enter>.

8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.

9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.

10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.

11. At the Additional Orders prompt, type the Additional Diet Order. This field can be up to 80 characters in length and press <Enter>.

12. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.

13. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

Creating a Diet Quick Order

1. In the List Manager interface, select PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.

2. Go to MM Order Menu Management and press <Enter>.

3. Select the QO Enter/edit quick orders option and press <Enter>. 
4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.
5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.
6. Type DIET ORDERS for the TYPE OF QUICK ORDER and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>.
8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.
9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.
10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.
11. At the Diet prompt, type the type of diet and press <Enter>:
   - 1GM SODIUM
   - 2GM SODIUM
   - CARDIAC
   - CLEAR LIQUID
   - DIABETIC
   - FLUID RESTRICTION
   - FULL LIQUID
   - KOSHER DIET
   - LOW CALORIE
   - LOW CHOL/FAT
   - LOW POTASSIUM
   - LOW PROTEIN
   - LOW SODIUM
   - MECHANICAL
   - NEW ADMIT/REGULAR
   - NPO
   - REGULAR
   - VEGETARIAN
12. If needed, enter Another diet and press <Enter>. Repeat this step until the appropriate diet for the patient has been entered. (Up to 5 diets are allowed.)
   **Note:** If a diet conflicts with what has been selected, CPRS displays a message reading: This diet is not orderable with those already selected!
13. At the Effective Date/Time prompt, enter the time when the selected diet should take effect, which should be greater than or equal to Now, and press <Enter>.
14. Select the method for Delivery and press <Enter>:
   - T TRAY
   - C CAFETERIA
   - D DINING ROOM
   - B BAGGED
15. Enter any Special Instructions (1-80 characters in length) and press <Enter>.
16. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.
17. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

**Creating an Early/Late Tray Quick Order**

1. In the List Manager interface, select **PCPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU]** and press <Enter>.  
2. Go to **MM Order Menu Management** and press <Enter>.  
3. Select the **QO Enter/edit quick orders** option and press <Enter>.  
4. At the **QUICK ORDER NAME** prompt, type the name for the quick order and press <Enter>.  
5. At the **Are you adding 'name' as a new ORDER DIALOG?** prompt, type Y and press <Enter>.  
6. Type **EARLY/LATE TRAYS** for the **TYPE OF QUICK ORDER** and press <Enter>.  
7. Confirm the name of the quick order by pressing <Enter>.  
8. At the **DISPLAY TEXT** prompt, type the text that will display on the order menu and press <Enter>.  
9. At the **VERIFY** prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.  
10. At the **DESCRIPTION** prompt, you may type in a description of this order and press <Enter>.  
11. At the **Start Date** prompt, enter the date when the Early/Late Trays should be ready and press <Enter>.  
12. At the **End Date** prompt, enter the date when the early/late tray should stop and press <Enter>.  
13. At the **Days of the Week** prompt, enter the days of the week that the early/late tray should be delivered (This response can be free text, from 1-70 characters in length. Enter the days of the week to deliver this tray, e.g. MWF; choose from (M)onday, (T)uesday, (W)ednesday, (T)hursday, (F)riday, (S)aturday, and Sunday(X)). Then, press <Enter>.  
14. At the **Meal** prompt, select which meal this order is for and then press <Enter>:  
   - B  BREAKFAST  
   - N  NOON  
   - E  EVENING  
15. Select the **Early or Late tray** and press <Enter>.  
16. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.  
17. At the **Auto-accept this order?** prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

**Creating a General Radiology Quick Order**

1. In the List Manager interface, select **PCPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU]** and press <Enter>.  
2. Go to **MM Order Menu Management** and press <Enter>.
3. Select the **QO** Enter/edit quick orders option and press <Enter>.
4. At the **QUICK ORDER NAME** prompt, type the name for the quick order and press <Enter>.
5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type **Y** and press <Enter>.
6. Type **RADIOMETRY** for the **TYPE OF QUICK ORDER** and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>.
8. At the **DISPLAY TEXT** prompt, type the text that will display on the order menu and press <Enter>.
9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.
10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.
11. At the Radiology Procedure prompt, enter the procedure and press <Enter>.
12. At the Procedure Modifier prompt, enter a modifier and press <Enter>. Repeat this step at the Another Modifier prompt if necessary.
13. Enter the Reason for Study (3-64 characters) and press <Enter>.
14. At the Clinical History prompt, type in the clinical history, if desired.
15. Enter the Category and then press <Enter>:
   - I INPATIENT
   - O OUTPATIENT
   - C CONTRACT
   - S SHARING
   - E EMPLOYEE
   - R RESEARCH
16. Indicate if the patient is scheduled for pre-Op, Yes or No and press <Enter>. If yes, enter the Pre-Op scheduled date and time and press <Enter>.
17. Enter the Date Desired and press <Enter>.
18. At the Mode of Transport prompt, indicate how the patient will get to the exam and press <Enter>:
   - A AMBULATORY
   - P PORTABLE
   - S STRETCHER
   - W WHEELCHAIR
19. At the next prompt, enter the necessary information (ordering location, contract, contract/sharing source, or research source) and press <Enter>.
20. Indicate whether the patient is on isolation procedures, Yes or No and press <Enter>.
21. Indicate the Urgency by making the appropriate entry and then pressing <Enter>:
   - ASAP
   - ROUTINE
   - STAT
22. At the Submit Request to prompt, indicate where this request should go (you can type two question marks and press <Enter> for a list of locations) and then press <Enter>. 
23. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.

24. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

Creating an Imaging Quick Order

1. In the List Manager interface, select PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.
2. Go to MM Order Menu Management and press <Enter>.
3. Select the QO Enter/edit quick orders option and press <Enter>.
4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.
5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.
6. Type IMAGING for the TYPE OF QUICK ORDER and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>.
8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.
9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.
10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.
11. At the Imaging Type prompt, enter the type and press <Enter>:
   - CT SCAN
   - MAMMOGRAPHY
   - MAGNETIC RESONANCE IMAGING
   - NUCLEAR MEDICINE
   - GENERAL RADIOLOGY
   - ULTRASOUND
12. At the procedure prompt, select the appropriate procedure and then press <Enter>. (A listing of procedures may display automatically. If not, type two question marks and press <Enter> to get a listing.)
13. At the Modifier prompt, enter a modifier and press <Enter>. Repeat this step at the Another Modifier prompt if necessary.
14. Enter the Reason for Study (3-64 characters) and press <Enter>.
15. At the Clinical History prompt, type in the clinical history, if desired.
16. Enter the Category and then press <Enter>:
   - I INPATIENT
   - O OUTPATIENT
   - C CONTRACT
   - S SHARING
   - E EMPLOYEE
• R RESEARCH

17. At the next prompt, enter the necessary information (ordering location, contract, contract/sharing source, or research source) and press <Enter>.

18. Indicate if the patient is scheduled for pre-Op, Yes or No and press <Enter>. If yes, enter the Pre-Op scheduled date and time and press <Enter>.

19. Enter the Date Desired and press <Enter>.

20. At the Mode of Transport prompt, indicate how the patient will get to the exam and press <Enter>:
   • A AMBULATORY
   • P PORTABLE
   • S STRETCHER
   • W WHEELCHAIR

21. Indicate whether the patient is on isolation procedures, Yes or No and press <Enter>.

22. Indicate the Urgency by making the appropriate entry and then pressing <Enter>:
   • ASAP
   • ROUTINE
   • STAT

23. At the Submit Request to or Location prompt, indicate where this request should go (you can type two question marks and press <Enter> for a list of locations) and then press <Enter>.

24. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.

25. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

Creating a Continuous IV Medication Quick Order

1. In the List Manager interface, select PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.

2. Go to MM Order Menu Management and press <Enter>.

3. Select the QO Enter/edit quick orders option and press <Enter>.

4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.

5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.

6. Type IV MEDICATION for the TYPE OF QUICK ORDER and press <Enter>.

7. Confirm the name of the quick order by pressing <Enter>.

8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.

9. At the VERIFY ORDER prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.

10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>. 
11. At the ENTRY ACTION prompt, if you or your programmer has defined an action that should occur when the user enters this dialog, enter the appropriate MUMPS code or the call to the routine and press <Enter>.

12. At the Type prompt, select C for Continuous and press <Enter>.

13. At the Solution prompt, enter the type of solution (to get a listing, type two question marks and press <Enter>, but when ready to exit the list, type the up caret “^” and type the solution) and then press <Enter>.

14. If you enter a solution and more than one volume is defined, select the volume and press <Enter>.

15. At the ADDITIVE prompt, (to get a listing, type two question marks and press <Enter> or “^” to get out of the list), type the Additive and then press <Enter>.

16. At the Strength prompt, enter the numerical value for the strength and press <Enter>.

17. If wanted, enter an additional additive at the Another Additive prompt and press <Enter>.

18. If you entered an additional additive, enter the strength for the additional additive and press <Enter>.

19. At the Route prompt, select the appropriate route (to get a listing, type two question marks and press <Enter> or “^” to get out of the list) type the Route and then press <Enter>.

20. At the Infusion Rate (ml/hr) prompt, enter the appropriate number of ml/hr or text@number of labels per day, and press <Enter>.

   Note: The infusion rate may contain a decimal for fractional amounts, such as 5.5).

21. At the Limitation prompt, enter the total length of time or the total volume that the fluid should be administered followed by ML for milliliters, L for liters, H for hours, D for days, or DOSES and press <Enter>.

22. Select a Priority and press <Enter>:
   - ASAP
   - ROUTINE
   - STAT

23. At the Provider Comments prompt, type a comment if necessary.

24. Review the order text that displays for accuracy. If incorrect, select (E)dit, press <Enter>, and make the necessary changes. To not save the order at all, select (C)ancel and press <Enter>. If the order is correct, select (P)lace and press <Enter>.

25. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

Creating an Intermittent IV Medication Quick Order

1. In the List Manager interface, select PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.

2. Go to MM Order Menu Management and press <Enter>.

3. Select the QO Enter/edit quick orders option and press <Enter>.

4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.
5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.
6. Type IV MEDICATION for the TYPE OF QUICK ORDER and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>.
8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.
9. At the VERIFY ORDER prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.
10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.
11. At the ENTRY ACTION prompt, if you or your programmer has defined an action that should occur when the user enters this dialog, enter the appropriate MUMPS code or the call to the routine and press <Enter>.
12. At the Type prompt, select I for Intermittent and press <Enter>.
13. At the Solution prompt, enter the type of solution (to get a listing, type two question marks and press <Enter>, but when ready to exit the list, type the up caret “^” and type the solution) and then press <Enter>.
14. At the Route prompt, select the appropriate route (to get a listing, type two question marks and press <Enter>, but when ready to exit the list, type the up caret “^” and type the route) and then press <Enter>.
15. At the Infuse over time (min) prompt, enter the number of minutes over which to infuse this medication and press <Enter>.
16. At the Schedule prompt, select the appropriate schedule (to get a listing, type two question marks and press <Enter>, but when ready to exit the list, type the up caret “^” and type the additive) and press <Enter>.
17. At the Limitation prompt, enter the total length of time or the total volume that the fluid should be administered and press <Enter>.
18. At the Additive prompt, enter the type of additive (to get a listing, type two question marks and press <Enter>, but when ready to exit the list, type the up caret “^” and type the additive) and then press <Enter>. Repeat this step, if necessary.
19. Select a Priority and press <Enter>:
   - ASAP
   - ROUTINE
   - STAT
20. At the Provider Comments prompt, type a comment if necessary.
21. Review the order text that displays for accuracy. If incorrect, select (E)dit, press <Enter>, and make the necessary changes. To not save the order at all, select (C)ancel and press <Enter>. If the order is correct, select (P)lace and press <Enter>.
22. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.
Creating a Laboratory Quick Order
1. In the List Manager interface, select **PE CPRS Configuration (Clin Coord)** [OR PARAM COORDINATOR MENU] and press <Enter>.
2. Go to **MM Order Menu Management** and press <Enter>.
3. Select the **QO Enter/edit quick orders** option and press <Enter>.
4. At the **QUICK ORDER NAME** prompt, type the name for the quick order and press <Enter>.
5. At the **Are you adding 'name' as a new ORDER DIALOG?** prompt, type **Y** and press <Enter>.
6. Type **LAB** for the **TYPE OF QUICK ORDER** and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>.
8. At the **DISPLAY TEXT** prompt, type the text that will display on the order menu and press <Enter>.
9. At the **VERIFY** prompt, choose whether the user will be required to Verify the order before it is accepted. Type **0** (zero) for no or **1** for yes and press <Enter>.
10. At the **DESCRIPTION** prompt, you may type in a description of this order and press <Enter>.
11. At the **Lab Test** prompt, type the name of the lab test (to get a listing, type two question marks and press <Enter>) and then press <Enter>.
12. At the **Collected By** prompt, select how the sample should be collected (to get a listing, type two question marks and press <Enter>) and then press <Enter>, such as the following:
   - **SP** Send patient to lab
   - **WC** Ward collect & deliver
   - **LC** Lab blood team
   - **I** Immediate collect by blood team
13. At the **Collection Sample** prompt, indicate what sample should be collected (to get a listing, type two question marks and press <Enter>) and press <Enter>.
14. Enter a **Collection Date/Time** and press <Enter>.
15. At the **Urgency** prompt, select the appropriate urgency (to get a listing, type two question marks and press <Enter>) and then press <Enter>.
16. At the **How Often** prompt, how many days or how many times the test should be administered (to get a listing, type two question marks and press <Enter>) and press <Enter>.
17. Review the order text that displays for accuracy. If incorrect, select **Edit**, press <Enter>, and make the necessary changes. To not save the order at all, select **Cancel** and press <Enter>. If the order is correct, select **Place** and press <Enter>.
18. At the **Auto-accept this order?** prompt, choose whether this should be an auto-accept order. To make it auto-accept, type **Y** and press <Enter>. To make the user review the order before it is accepted, type **N** and press <Enter>.

Creating a Non-VA Medication Quick Order
1. In the List Manager interface, select **PE CPRS Configuration (Clin Coord)** [OR PARAM COORDINATOR MENU] and press <Enter>.
2. Go to **MM Order Menu Management** and press <Enter>.
3. Select the **QO** Enter/edit quick orders option and press <Enter>.
4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.
5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.
6. Type NON for the TYPE OF QUICK ORDER and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>.
8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.
9. At the VERIFY ORDER prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.
10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.
11. At the ENTRY ACTION prompt, if you or your programmer has defined an action that should occur when the user enters this dialog, enter the appropriate MUMPS code or the call to the routine and press <Enter>.
12. At the Herbal/OTC/Non VA Medication prompt, type the name of the herbal or non-VA medication (to get a listing, type two question marks and press <Enter>) and then press <Enter>.
13. Indicate whether this is a complex dose: Type Yes if it is a complex dose or No if it is not and then press <Enter>.
14. If CPRS has doses in the system, it will display those doses, select or enter the appropriate dose and press <Enter>. If asked to confirm, review the dose is correct and confirm if correct by typing Yes and pressing <Enter>.
15. Select the appropriate route and press <Enter>.
16. Select the appropriate schedule and press <Enter>.
17. If this is a complex dose, repeat steps 13-15 as needed. When you have entered all necessary dosages, proceed to step 17.
18. Enter a Start Date/Time and press <Enter>.
19. To enter Comments, type Yes and press <Enter> and then type the comments.
20. To enter a statement or explanation, type Yes and press <Enter> and then type the needed text.
21. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.
22. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

**Creating a Nursing Quick Order**

1. In the List Manager interface, select **PE** CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.
2. Go to **MM** Order Menu Management and press <Enter>.
3. Select the **QO** Enter/edit quick orders option and press <Enter>.
4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.
5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.
6. Type NURSING for the TYPE OF QUICK ORDER and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>.
8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.
9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.
10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.
11. At the Patient Care prompt, type the kind of patient care (to get a listing, type two question marks and press <Enter>) and then press <Enter>.
12. At the Instructions prompt, type the necessary instructions and press <Enter>.
13. Enter a Start Date/Time and press <Enter>.
14. Enter a Stop Date/Time and press <Enter>.
15. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.
16. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

Creating an Outpatient Meal Quick Order

1. In the List Manager interface, select PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.
2. Go to MM Order Menu Management and press <Enter>.
3. Select the QO Enter/edit quick orders option and press <Enter>.
4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.
5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.
6. Type OUTPATIENT MEALS for the TYPE OF QUICK ORDER and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>.
8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.
9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.
10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.
11. At the Diet prompt, select the appropriate diet (to get a listing, type two question marks and press <Enter>) and then press <Enter>.
12. Enter a Start Date and press <Enter>.
13. Enter an End Date and press <Enter>.
14. At the Meal prompt, select which meal this order is for and then press <Enter>:
15. At the Delivery prompt, select the how the person will receive the meal and then press <Enter>.
   - B BREAKFAST
   - N NOON
   - E EVENING

16. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.

17. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

Creating an Outpatient Medication Quick Order
1. In the List Manager interface, select PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.
2. Go to MM Order Menu Management and press <Enter>.
3. Select the QO Enter/edit quick orders option and press <Enter>.
4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.
5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.
6. Type OUTPATIENT MEDICATIONS for the TYPE OF QUICK ORDER and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>.
8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.
9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.
10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.
11. At the Medication prompt, select the appropriate medication (to get a listing, type two question marks and press <Enter>) and then press <Enter>.
12. Indicate whether this is a complex dose: Type Yes if it is a complex dose or No if it is not and then press <Enter>.
13. If CPRS has doses in the system, it will display those doses, select or enter the appropriate dose and press <Enter>. If asked to confirm, review the dose is correct and confirm if correct by typing Yes and pressing <Enter>.
14. Select the appropriate route and press <Enter>.
15. Select the appropriate schedule and press <Enter>.
16. At the How Long prompt, enter the number of days this dosage should be given and press <Enter>.
17. Select the appropriate conjunction (And, Then, or Except) or for the last dosage, select nothing and then press <Enter>.

18. If this is a complex dose, repeat steps 13-17 as needed. When you have entered all necessary dosages, proceed to step 19.

19. Enter the Days Supply and press <Enter>.

20. Enter the Quantity and press <Enter>.

21. Enter the number of Refills and press <Enter>.

22. Select the Pick Up method and then press <Enter>:

- W WINDOW
- M MAIL
- C ADMINISTERED IN CLINIC

23. Select the Priority for the medication and then press <Enter>:

- ASAP
- DONE
- ROUTINE
- STAT

24. To enter Comments, type Yes and press <Enter> and then type the comments.

25. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.

26. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

Creating a Precautions Quick Order

1. In the List Manager interface, select PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.

2. Go to MM Order Menu Management and press <Enter>.

3. Select the QO Enter/edit quick orders option and press <Enter>.

4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.

5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.

6. Type PRECAUTIONS for the TYPE OF QUICK ORDER and press <Enter>.

7. Confirm the name of the quick order by pressing <Enter>.

8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.

9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.

10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.

11. At the Isolation/Precaution Type prompt, select the type of isolation or precaution and then press <Enter>:
12. At the Instructions prompt, type any special instructions for this order, up to 240 characters, and press <Enter>.

13. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.

14. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

Creating a Procedure Quick Order

1. In the List Manager interface, select PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.
2. Go to MM Order Menu Management and press <Enter>.
3. Select the QO Enter/edit quick orders option and press <Enter>.
4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.
5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.
6. Type PROCEDURES for the TYPE OF QUICK ORDER and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>.
8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.
9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.
10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.
11. At the Procedure prompt, enter the type of procedure.
12. At the Service prompt, type the service or specialty name where the procedure will occur and press <Enter>. (To get a list of services and specialties, type two question marks and press <Enter>.)
13. At the Reason for Request prompt, if you want to enter a reason for request, type Y and enter the necessary text and then exit the word processing area.
14. At the Category prompt, type an I for inpatient or an O for outpatient and press <Enter>.
15. The Urgency prompt choices vary based on the Category defined as Inpatient or Outpatient Input the desired value and press <Enter>. Available urgencies are
   - EMERGENCY (Inpatient only)
   - NEXT AVAILABLE
   - ROUTINE
   - STAT
   - TODAY
16. At the Clinically Indicated Date prompt, you may enter a date value greater than or equal to TODAY. Typically, this field is left blank to ensure providers actively choose a clinically relevant date value when placing the order.

17. At the Place of Consultation prompt, type where the consults should take place (Emergency Room or Consult’s Choice for outpatients, or Bedside or Consultant’s Choice for inpatients) and press <Enter>.

18. At the Attention prompt, type the name of the person to whom the consult should be sent and press <Enter>.

19. Type the Provisional Diagnosis and press <Enter>.

20. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.

21. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

**Creating a Supplies/Devices Quick Order**

1. In the List Manager interface, select **PE CPRS Configuration (Clin Coord)** [OR PARAM COORDINATOR MENU] and press <Enter>.

2. Go to MM Order Menu Management and press <Enter>.

3. Select the QO Enter/edit quick orders option and press <Enter>.

4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.

5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.

6. Type SUPPLIES for the TYPE OF QUICK ORDER and press <Enter>.

7. Confirm the name of the quick order by pressing <Enter>.

8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.

9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.

10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.

11. At the Medication prompt, select the supply or device (to get a listing, type two question marks and press <Enter>) and then press <Enter>.

12. Indicate whether this is a complex dose: Type Yes if it is a complex dose or No if it is not and then press <Enter>.

13. Enter a Dose and press <Enter>.

14. Enter a Route and press <Enter>.  

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15. Enter a Schedule and press <Enter>.
16. For a simple dose, go to step 19. (For complex dose) At the How long prompt, enter the number of days for this dosage and press <Enter>.
17. (For complex dose only) At the And/then/except prompt, indicated the appropriate conjunction and press <Enter>.
18. (For complex dose only) At the Instructions prompt, enter another dose if needed and then press <Enter>. Then repeat steps 13-18.
19. Enter the Days Supply and press <Enter>.
20. Enter the Quantity and press <Enter>.
21. Enter the number of Refills (0-11) and press <Enter>.
22. At the Pick Up prompt, indicate how the user will get the supplies and then press <Enter>:
   - W WINDOW
   - M MAIL
   - C ADMINISTERED IN CLINIC
23. Indicate the Priority and then press <Enter>:
   - ASAP
   - DONE
   - ROUTINE
   - STAT
24. At the Comments prompt, enter any necessary comments by typing Yes and pressing <Enter>. Then, type the comments as needed.
25. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.
26. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

Creating a Tubefeeding Quick Order

1. In the List Manager interface, select PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.
2. Go to MM Order Menu Management and press <Enter>.
3. Select the QO Enter/edit quick orders option and press <Enter>.
4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.
5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.
6. Type TUBEFEEDING for the TYPE OF QUICK ORDER and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>.
8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.
9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.
10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.
11. At the Product prompt, select the tubefeeding product (to get a listing, type two question marks and press <Enter>) and then press <Enter>.
12. At the Strength prompt, enter the strength and press <Enter>.
13. Enter the Quantity for the tubefeeding and press <Enter>. (For additional help, type ? and press <Enter>.
14. At the Another Product prompt, to add more to the order, indicate another tubefeeding product and press <Enter>. If you indicate a product, repeat steps 11-14 until you have added all necessary products. If you do not want to add another product, simply press <Enter>.
15. At the Instructions prompt, type any special instructions for this order, up to 240 characters and press <Enter>.
16. Indicate whether to cancel all current or future tray orders, type Y to cancel or no to retain the orders and press <Enter>.
17. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.
18. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

**Creating a Unit Dose Medication Quick Order**

1. In the List Manager interface, select PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.
2. Go to MM Order Menu Management and press <Enter>.
3. Select the QO Enter/edit quick orders option and press <Enter>.
4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.
5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.
6. Type UNIT for the TYPE OF QUICK ORDER and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>.
8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.
9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.
10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.
11. At the Medication prompt, select the unit dose medication (to get a listing, type two question marks and press <Enter>) and then press <Enter>.
12. Indicate whether this is a complex dose: Type Yes if it is a complex dose or No if it is not and then press <Enter>.
13. Enter a Dose (for a list of doses, if available, type a question mark, ?, and press <Enter>) and then press <Enter>.
14. Enter a Route and press <Enter>.
15. Enter a Schedule and press <Enter>.
16. For a simple dose, go to step 19. (For complex dose) At the How long prompt, enter the number of days for this dosage and press <Enter>.
17. (For complex dose only) At the And/then/except prompt, indicated the appropriate conjunction and press <Enter>.
18. (For complex dose only) At the Another Dose prompt, enter another dose if needed and then press <Enter>. Then repeat steps 13-18.
19. Indicate the Priority and then press <Enter>:
   - ASAP
   - DONE
   - ROUTINE
   - STAT
20. At the Comments prompt, enter any necessary comments by typing Yes and pressing <Enter>. Then, type the comments as needed.
21. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.
22. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.

Creating a Vitals/Measurements Quick Order

1. In the List Manager interface, select PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] and press <Enter>.
2. Go to MM Order Menu Management and press <Enter>.
3. Select the QO Enter/edit quick orders option and press <Enter>.
4. At the QUICK ORDER NAME prompt, type the name for the quick order and press <Enter>.
5. At the Are you adding 'name' as a new ORDER DIALOG? prompt, type Y and press <Enter>.
6. Type VITALS for the TYPE OF QUICK ORDER and press <Enter>.
7. Confirm the name of the quick order by pressing <Enter>.
8. At the DISPLAY TEXT prompt, type the text that will display on the order menu and press <Enter>.
9. At the VERIFY prompt, choose whether the user will be required to Verify the order before it is accepted. Type 0 (zero) for no or 1 for yes and press <Enter>.
10. At the DESCRIPTION prompt, you may type in a description of this order and press <Enter>.
11. At the Vital Sign prompt, select the type of vital sign or measurement to be taken (to get a listing, type a question mark, ?, and press <Enter>) and then press <Enter>.
12. Enter the Start Date/Time and press <Enter>.
13. Enter a Schedule and press <Enter>.
14. Enter a Stop Date/Time and press <Enter>.

15. At the Special Instructions prompt, type any special instructions for this order, up to 240 characters and then press <Enter>.

16. Review the order text that displays for accuracy. If incorrect, select Edit, press <Enter>, and make the necessary changes. To not save the order at all, select Cancel and press <Enter>. If the order is correct, select Place and press <Enter>.

17. At the Auto-accept this order? prompt, choose whether this should be an auto-accept order. To make it auto-accept, type Y and press <Enter>. To make the user review the order before it is accepted, type N and press <Enter>.
6. Ordering Reports and Utilities

The following sections provide information about reports and utilities regarding orders. The following items are covered:

- IV Medication Quick order Report
- Quick Order Reports to Correct Dosages for Order Checks
- IV Inpatient Quick Order to Infusion Quick Order Utility
- IV Quick Order Additive Frequency Utility
- Order Check Override Reason Report
- Performance Monitor Report

**IV Medication Quick Order Report**

With CPRS v.27 (patch OR*3.0*243), three new fields were added to IV Medication ordering: Route, IV Type, and Schedule. The Route and IV Type are now required for all IV orders. In addition, for Intermittent IV orders, the Schedule field must also be defined. CPRS does not process the orders unless these fields are defined.

Therefore after CPRS v.27 is installed, sites may have quick orders (QO) that cannot be processed unless they are edited to define the Route, IV Type, and if necessary, the Schedule. To help sites identify which IV medication quick orders need to be edited, CPRS has a new QO Report that is produced upon the installation of CPRS v.27 that shows the IV medication QO that need editing. Additionally, Auto Accept QO are converted from an Auto Accept QO to a non-Auto Accept QO, if they have an invalid data field or fields.

After this report is created when CPRS v.27 installs, the QO Report can be run manually from the “ORDER MENU MANAGEMENT” menu, option ‘MR’ Medication Quick Order Report.

The report is compiled real time and sent to the MailMan mail box of the requester (if run manually) or the individual installing CPRS v.27 (upon install).

The Quick Order report shows the list of quick orders that need to be edited. Each entry in the list shows the quick order’s internal entry number (IEN), name, display name, and legend. The letters in the legend represent the problem with the quick order. Please see below for a brief explanation of the problem and the required action:

A. Problem: Either the IV type is not defined, or the route is not defined.
   
   Action: Please edit the IV Type or route fields with the appropriate information.

B. Problem: The IV type is ‘I’, but there is no schedule defined.
   
   Action: For Intermittent IV Orders a schedule is needed to process the order. Enter a schedule for the Intermittent IV dose.

C. Problem: The IV type is not ‘C’, is not defined, or the rate is not between 1 and 9999.9, a whole number, or ‘@’.
   
   Action: If the IV Type field is null, the Quick Order needs to be reviewed to determine if this order should be considered a Continuous or Intermittent IV Order. If the IV Type is defined as ‘C’, then the Infusion Rate does not validate. A correct Infusion Rate must be assigned to the Quick Order.
The infusion rate must be a number with 1 to 4 digits before the decimal (1-9999) and may have one digit after the decimal, e.g., 9999.9.

D. Problem: The IV type is ‘I’, but the rate is not a whole number of minutes or hours, but there is something in the rate field.

Action: A valid “Infuse Over” value must be assigned to the Quick Order. Using the Quick Order Editor, add an “Infuse Over” value in the number of minutes (maximum of 9999).

E. Problem: The IV limit or duration (limitation) value is defined, but is not a whole number.

Action: This field is not required but if it exists, it must be a whole number. To correct this, follow the Help Text for the Limitation Prompt in the Quick Order editor for this Quick Order.

F. Problem: The Order Dialogs with ‘MM’ in the display text.

Action: MMOL (millimole) has been added as a unit of measure. Please replace ‘MM’ with ‘MMOL’.

G. Problem: Auto Accept Quick Order which was ‘Y’es and now set to ‘N’o.

Action: These Quick Orders were converted from an Auto Accept Quick Order to a non-Auto Accept Quick because they have at least one invalid field. Please correct the problems identified by the Legend code(s) for the Quick Order before setting the Quick Order back to an Auto-Accept Quick Order.

Note: Some examples of valid entries for ‘Rate’ and ‘Limit’. In the examples below Rate and Limit must be whole numbers.

‘Rate’:
- ‘# ml/hr’ for number of milliliters per hour, such as 50ml/hr
- ‘#.# ml/hr’, such as 100.5 ml/hr
- anything with an '@' in it
- # Minutes, such as 90 minutes
- # Hours, such as 2 hours

‘Limit’:
- ‘#D’ for number of Days, such as 2D
- ‘#ML’ for number of Milliliters, such as 250ML
- ‘#H’ for number of Hours, such as 24H
- ‘#L’ for number of Liters, such as 5L
- ‘for # days’ text for number of days, such as for 3 days
- ‘for a total of # doses’ text for number of doses, such as for a total of 4 doses
- ‘with total volume #L’ text for total volume in liters, such as with total volume 4L
- ‘with total volume #ml’ text for total volume in milliliters, such as with total volume 2000ml
- ‘for # hours’ text for number of hours, such as for 6 hours
Below is an example of what this report might look like

<table>
<thead>
<tr>
<th>IEN</th>
<th>Name</th>
<th>Display Name</th>
<th>Legend</th>
</tr>
</thead>
<tbody>
<tr>
<td>669</td>
<td>AGP AUTO ACCEPT 2</td>
<td></td>
<td>BD</td>
</tr>
<tr>
<td>668</td>
<td>AGP AUTO-ACCEPT 1</td>
<td></td>
<td>A</td>
</tr>
<tr>
<td>696</td>
<td>AGP DEFAULT ROUTE TEST</td>
<td></td>
<td>C</td>
</tr>
<tr>
<td>694</td>
<td>AGP INFUSION TEST</td>
<td></td>
<td>AC</td>
</tr>
<tr>
<td>666</td>
<td>AGP INT NO SCH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>667</td>
<td>AGP INT NO SCH 1</td>
<td></td>
<td>AB</td>
</tr>
<tr>
<td>688</td>
<td>AGP INTERMITTENT DOSE QO</td>
<td></td>
<td>AC</td>
</tr>
<tr>
<td>635</td>
<td>AGP IV DISPLAY GROUP TEST</td>
<td>AGP IV DISPLAY GROUP TEST</td>
<td>B</td>
</tr>
<tr>
<td>763</td>
<td>AGP IV ROUTE HELP</td>
<td></td>
<td>AC</td>
</tr>
<tr>
<td>15805</td>
<td>AGP IV PROMPT</td>
<td>AGP IV PROMPT</td>
<td>A</td>
</tr>
<tr>
<td>15799</td>
<td>AGP IV QUICK ORDER</td>
<td>AGP IV QUICK ORDER</td>
<td>A</td>
</tr>
</tbody>
</table>

Quick Order Reports to Correct Dosages for Order Checks

CPRS has two quick order reports to help users check on the dosages so that they will function correctly with Medication Order Check HealthCare Application version 2 (MOCHA 2) Dosage Checks. The reports check CPRS quick orders for mixed case and free text dosages so that they can be corrected to comply with a local possible dose on the system. The reports are:

- Quick Order Mixed-Case Report (OR QO CASE REPORT)
- Quick Order Free Text Report (OR QO FREE TEXT)

**Quick Order Mixed-Case Report**

The accuracy of local dosage setup is vitally important to a site’s success with MOCHA v2.0 Dosage Checks. Dosage and medication route reviews were first introduced with the MOCHA Pre-Implementation patch PSS*1*129 in 2009. Additionally, Quick Orders (QO) contain dosages which may need to be updated.

A Quick Order Mixed-Case Report is provided with the OR*3*366 patch and will be displayed on the Order Menu Management [ORCM MGMT] menu option. It will identify medication quick orders that are on an ordering menu and contain problematic dosages that do not match any of the Local Possible Dosages (LPD) because of case differences in the drug name. This report specifically looks at Dispense Drugs that have had a change in mixed-case (Tall Man Lettering) since the QO was created.
To run this report, use the follow steps:

1. In the List Manager interface, if you can enter an option without navigating menus, skip to step 2 or navigate to the option using the following:
   a. Go to the CPRS Manager Menu by typing ORMGR and pressing <Enter>.
   b. Select the CPRS Configuration (Clin Coord) by typing PE and pressing <Enter>.
   c. Select the Order Menu Management by typing MM and pressing <Enter>.
2. Select the option CA Quick Order Mixed-Case Report or type OR QO CASE REPORT and press <Enter>.
3. At the Device prompt, enter the device where the report should be sent.
4. The report will run.

**Display of Sample Report**

**Quick Order Mixed-Case Report [OR QO CASE REPORT]**

<table>
<thead>
<tr>
<th>Select OPTION NAME: ORMGR</th>
<th>CPRS Manager Menu</th>
</tr>
</thead>
<tbody>
<tr>
<td>CL</td>
<td>Clinician Menu ...</td>
</tr>
<tr>
<td>NM</td>
<td>Nurse Menu ...</td>
</tr>
<tr>
<td>WC</td>
<td>Ward Clerk Menu ...</td>
</tr>
<tr>
<td>PE</td>
<td>CPRS Configuration (Clin Coord) ...</td>
</tr>
<tr>
<td>IR</td>
<td>CPRS Configuration (IRM) ...</td>
</tr>
</tbody>
</table>

Select CPRS Manager Menu <TEST ACCOUNT> 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
CM  Care Management Menu ...
DO  Event Delayed Orders Menu ...
LO  Lapsed Orders search
PM  Performance Monitor Report

Select CPRS Configuration (Clin Coord) <TEST ACCOUNT> Option: MM Order Menu Management

OI  Manage orderable items ...
PM  Enter/edit prompts
GO  Enter/edit generic orders
QO  Enter/edit quick orders
QU  Edit personal quick orders by user
ST  Enter/edit order sets
AC  Enter/edit actions
MN  Enter/edit order menus
AO  Assign Primary Order Menu
CP  Convert protocols
SR  Search/replace components
LM  List Primary Order Menus
DS  Disable/Enable order dialogs
CS  Review Quick Orders for Inactive ICD9 Codes
MR  Medication Quick Order Report
CA  Quick Order Mixed-Case Report
CV  Convert IV Inpatient QO to Infusion QO
DF  Quick Order Free-Text Report
<table>
<thead>
<tr>
<th>FR</th>
<th>IV Additive Frequency Utility</th>
</tr>
</thead>
</table>

Select Order Menu Management <TEST ACCOUNT> Option: CA Quick Order Mixed-Case Report
This report identifies quick orders that have potentially had the DRUG name edited such that when the quick order is loaded in CPRS the dosage that is saved with the quick order does not match any of the dosages available for selection in the list. This causes the dosage checks not to be able to be performed correctly. The edit to the drug that this specifically looks for is a case change to the DRUG name. If the name is changed so that it contains different characters that are not just case changes, this report will not identify them.

DEVICE: TELNET TERMINAL

QUICK ORDER MIXED-CASE REPORT JAN 1, 2013 07:56 PAGE 1

------------------------------------------------------------------------
QUICK ORDER (IEN): AMLODIPINE/ATORVASTATIN 10MG/40MG DAILY (602)
DISPLAY GROUP: OUTPATIENT MEDICATIONS
ORDERABLE ITEM IEN: 6882
ORDERABLE ITEM NAME: AMLODIPINE/ATORVASTATIN TAB
DRUG IEN: 94402
DRUG TEXT: amLODIPine 10MG/ATORVASTATIN 40MG TAB
QO INSTRUCTIONS: 1 TAB(10/40MG) OF AMLODIPINE 10MG/ATORVASTATIN 40MG TAB
1 Quick Orders Found

Purpose of Report

This report is used to identify which Quick Orders will cause the following type of order check message in CPRS until it is corrected:

Generic Message

Maximum Single Dose Check could not be done for Drug: <<DRUG NAME HERE>>, please complete a manual check for appropriate Dosing.

Example Message

Maximum Single Dose Check could not be done for Drug: amLODIPine 10MG/ATORVASTATIN 40MG TAB, please complete a manual check for appropriate Dosing.

Note: If there are no results displayed when running this report then there is nothing to update and no further action is required
Example Display in CPRS

The dosage from the drop down box should have been highlighted automatically. Since it is not, this is an indication that the Quick Order is not selecting the dispense drug. This will cause the dosage to be interpreted as a free text dosage and a manual dosing check may be required.

When does this happen?

This occurs when a site updates a dispense drug name to/from Tall Man Lettering.

Example of a drug being changed from all capital letters to mixed-case

```
Select DRUG GENERIC NAME:  AMLODIPINE 10MG/ATORVASTATIN 40MG TAB     CV200

...OK? Yes//   (Yes)

************************************************************************
This entry is marked for the following PHARMACY packages:
Outpatient
Unit Dose
```
Non-VA Med

GENERIC NAME: AMLODIPINE 10MG/ATORVASTATIN 40MG TAB

Replace ... With aMLODIPine 10MG/ATORVASTATIN 40MG TAB

Replace

Is this an issue for all drugs that are changed to/from Tall Man Lettering?

No, this only applies to quick orders when the name of the drug is part of the dose. This name is displayed after the “OF” conjunction (those without a metric dose unit).

Example of Quick Order with mixed-cased that will not show up on the report:

Note: This example is listed here to explain why a mixed-case dispense drug may not be displayed on the report when you may expect it to be. These will not cause a manual dose check, due to mixed-case and thus no editing of the quick order is required.

Select Order Menu Management Option:

Enter/edit quick orders

Select QUICK ORDER NAME: PSJQOS GLYBURIDE 5MG BID

NAME: PSJQOS GLYBURIDE 5MG BID Replace

DISPLAY TEXT: GLYBURIDE 5MG BID/

VERIFY ORDER:

DESCRIPTION:

ENTRY ACTION:

Medication: glyBURIDE TAB //

Patients with existing sulfa compound allergies may react to this medication.

Complex dose? NO/

Dose: 1 TABLET OF 5MG// ??

Choose from (or enter another):

1  1 TABLET OF 5MG $0.0496
2  1 TABLET OF 2.5MG $0.0324

Enter the dosage instructions for this order, as a dose or amount.

Dose: 1 TABLET OF 5MG//

This will not need to be updated since there is NO drug name and only a strength after the OF.

The LPDs only have the strength listed after the OF.
Route: ORAL//
Schedule: BID-AC//
Give additional dose NOW? NO//
Priority: ROUTINE//
Comments:

Medication: glyBURIDE TAB 5MG
Instructions: 1 TABLET OF 5MG ORAL BID-AC
Priority: ROUTINE

Fixing the Quick Orders listed the report

QUICK ORDER MIXED-CASE REPORT JAN 1, 2013 07:56 PAGE 1

QUICK ORDER (IEN): AMLODIPINE/ATORVASTATIN 10MG/40MG DAILY (602)
DISPLAY GROUP: OUTPATIENT MEDICATIONS
ORDERABLE ITEM IEN: 6882
ORDERABLE ITEM NAME: AMLODIPINE/ATORVASTATIN TAB
DRUG IEN: 94402
DRUG TEXT: amLODIPine 10MG/ATORVASTATIN 40MG TAB
QO INSTRUCTIONS: 1 TAB(10/40MG) OF AMLODIPINE 10MG/ATORVASTATIN 40MG TAB
1 Quick Orders Found

1. Use Option - Enter/edit quick orders [ORCM QUICK ORDERS] located on the Order Menu Management menu option [ORCM MGMT]

Select QUICK ORDER NAME:
2. Type back quote (grave accent) then the Quick Order (IEN)

Select QUICK ORDER NAME: `602  PSJOZ AMLODIPINE/ATORVASTATIN 10MG/40MG DAILY
NAME: PSJOZ AMLODIPINE/ATORVASTATIN 10MG/40MG DAILY
Replace

3. Press Enter until you reach the following prompt:

(P)lace, (E)dit, or (C)ancel this quick order? PLACE//

**Note:** Once you make changes to the dose, some of the data will be over-written so it is important to have a screen shot or have the ability to scroll back. This step allows you to see the order before any changes.
VERIFY ORDER:
DESCRIPTION:

ENTRY ACTION:
Medication: AMLODIPINE/ATORVASTATIN TAB //
Complex dose? NO/
Dose: 1 TABLET OF AMLODIPINE 10MG/ATORVASTATIN 40MG TAB
Replace
Route: ORAL (BY MOUTH) //
Schedule: QPM /
Days Supply: 90 //
Quantity (TAB): 90 //
Refills (0-3): 1 //
Pick Up: WINDOW //
Priority: ROUTINE //
Comments: 

---------------------------------------------------------------------
Medication: AMLODIPINE/ATORVASTATIN TAB
Dispense Drug: amLODIPine 10MG/ATORVASTATIN 40MG TAB
Instructions: 1 TABLET OF amLODIPine 10MG/ATORVASTATIN 40MG TAB
ORAL (BY MOUTH) QPM
Days Supply: 90
Quantity (TAB): 90
Refills (0-3): 1
Pick Up: WINDOW
Priority: ROUTINE

---------------------------------------------------------------------

4. Type E to Edit
(P)lace, (E)dit, or (C)ancel this quick order? PLACE // EDIT

5. Press Enter until you reach the Dose Prompt

6. Update the Dose (If you know the desired Local Possible Dose then use A. if not then use B.)
   • Change the Dose:
     1. Type ...
     2. Press Enter
     3. Enter a Local Possible Dose
     4. Press Enter Twice

   Dose: 1 TABLET OF amLODIPine 10MG/ATORVASTATIN 40MG TAB
   Replace ... With 1 TABLET Replace
   1 TABLET OF amLODIPine 10MG/ATORVASTATIN 40MG TAB $0.2346

   **Note that the Dispense Drug Name does not match the Name

   Dose: 2 TABLETS
   WARNING: Dosage check may not occur.
   Route: ORAL (BY MOUTH) //
   Schedule: QPM
   Cannot determine dispense drug - some defaults and order checks may not occur!

   This line may not show until MOCHA v2.0 is installed
Option A. Complete - skip to step 11

- Delete the Dose:
  1. Type @
  2. Press Enter

Dose: 1 TABLET OF AMLODIPINE 10MG/ATORVASTATIN 40MG TAB
Replace @

Option B. Complete - continue to step 7

7. Press Enter until you reach the following prompt:

(P)lace, (E)dit, or (C)ancel this quick order? PLACE//
Are you sure you want to delete this value? NO// y YES
Days Supply: 90//
Quantity: 90//
Refills (0-3): 1//
Pick Up: WINDOW//
Priority: ROUTINE//
Comments:
1>
Medication: AMLODIPINE/ATORVASTATIN TAB
Dispense Drug: amLODIPine 10MG/ATORVASTATIN 40MG TAB
Days Supply: 90
Quantity: 90
Refills (0-3): 1
Pick Up: WINDOW
Priority: ROUTINE

8. Type E to Edit

(P)lace, (E)dit, or (C)ancel this quick order? PLACE// E EDIT

9. Press enter until Dose Prompt

Medication: AMLODIPINE/ATORVASTATIN TAB //
Choose from (or enter another):
1 1 TABLET OF amLODIPine 10MG/ATORVASTATIN 40MG TAB $0.2346

10. Select dose from above

**Note:** If desired dose not listed then go to the Drug Enter/Edit [PSS DRUG ENTER/EDIT] Option or Enter/Edit Dosages [PSS EDIT DOSAGES] to add a new local possible dose.

Dose: 1 1 TABLET OF amLODIPine 10MG/ATORVASTATIN 40MG TAB $0.2346
(non-formulary)
...OK? YES//

**Note:** If Dose is not a Local Possible Dose, then a warning will appear

Dose: 2 TABLETS
WARNING: Dosage check may not occur. This line may not show until MOCHA v2.0 is installed
Route: ORAL (EY MOUTH)//
Schedule: QPM
Cannot determine dispense drug - some defaults and order checks may not occur!
11. Enter the Route, Schedule, Days Supply and Refills based the data you obtained from step 3.

Route: ORAL (BY MOUTH)/
Schedule: QPM
Days Supply: 90
Quantity (TAB): 90
Refills (0-3): 1
Pick Up: WINDOW/
Priority: ROUTINE/
Comments:

12. Verify that it looks correct and type P to Place it

(P)lace, (E)dit, or (C)ancel this quick order? PLACE// PLACE

---

**Quick Order Free Text Report**

The accuracy of local dosage setup is vitally important to a site’s success with MOCHA v2.0 Dosage Checks. Dosage and medication route reviews were first introduced with the MOCHA Pre-Implementation patch PSS*1*129 in 2009. Additionally, Quick Orders contain dosages that may need to be updated.

A Quick Order Free Text Report is provided in the OR*3*366 patch. It will identify medication quick orders that potentially contain problematic dosages that do not match any of the Possible Dosages (PD) or Local Possible Dosages (LPD) that are associated with the defined Orderable Item.

When a match cannot be determined, then the dose is considered a free text dose. Dosage checks are possible with free text doses, but if improperly formatted they are more prone to Dose Check failures than orders associated with PDs and LPDs. After initial reviews are completed, the reports may be run periodically.

The Quick Order Free Text Report is designed to be run in a variety of ways, based on the type of quick order (System Level and Personal) and the type of dosage (PD and LPD). The intent is to group similar issues together in order help users to determine if/where an edit needs to occur and to expedite the review process.

To understand and perform the review process, users must have knowledge of and access to both quick orders and pharmacy dosage setup. As quick order roles and responsibilities vary from site to site, it is anticipated that a collaborative effort between Pharmacy Informatics and Clinical Coordinators will likely be required at most sites.
Report Options

Sample Report Output

Example 1 System Quick Orders with Local Possible Doses

Quick Order Free-Text Report

This report identifies Medication Quick orders that have a free text dosage that does not match exactly one of the Local Dosages from Pharmacy.

Select one of the following:

S     System Quick Orders

P     Personal Quick Orders

PS    Personal and System Quick Orders

SELECT THE TYPE OF QUICK ORDER: PS// S System Quick Orders

Select one of the following:

L     Local Possible Dosages

P     Possible Dosages

N     No Local Possible and No Possible Dosages

SELECT THE TYPE OF DOSAGE: L// L Local Possible Dosages

DEVICE: 0;80;9999  TELNET TERMINAL

QUICK ORDER FREE-TEXT REPORT       MAY 16, 2013  08:55   PAGE 1

-----------------------------------------------

QUICK ORDER (IEN):      PSJQOS MARTIN 1 (509)
QO DISPLAY NAME:        ALBUTEROL SOLN,INHL
DISPLAY GROUP:          UNIT DOSE MEDICATIONSORDERABLE ITEM IEN:   1987
ORDERABLE ITEM NAME:   ALBUTEROL SOLN,INHL
QO INSTRUCTIONS:       1ML NEB SOL
<table>
<thead>
<tr>
<th><strong>Dispense:</strong></th>
<th>ALBUTEROL 0.5% INHL SOLN</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CPRS Dosage List:</strong></td>
<td></td>
</tr>
<tr>
<td>1 MILLILITER OF 0.5%</td>
<td></td>
</tr>
<tr>
<td><strong>Quick Order (IEN):</strong></td>
<td>PSJQOS AUGMENTIN 500 PO TID 1 (512)</td>
</tr>
<tr>
<td><strong>QO Display Name:</strong></td>
<td>AMOXICILLIN/CLAVULANATE TAB</td>
</tr>
<tr>
<td><strong>Display Group:</strong></td>
<td>UNIT DOSE MEDICATIONS</td>
</tr>
<tr>
<td><strong>Orderable Item IEN:</strong></td>
<td>2032</td>
</tr>
<tr>
<td><strong>Orderable Item Name:</strong></td>
<td>AMOXICILLIN/CLAVULANATE TAB</td>
</tr>
<tr>
<td><strong>QO Instructions:</strong></td>
<td>250MG/62.5MG TAB</td>
</tr>
<tr>
<td><strong>Dispense:</strong></td>
<td>AMOXICILLIN 500/CLAV K 125MG TAB</td>
</tr>
<tr>
<td><strong>CPRS Dosage List:</strong></td>
<td></td>
</tr>
<tr>
<td>ONE TABLET OF AMOXICILLIN 500/CLAV K 125MG TAB</td>
<td></td>
</tr>
</tbody>
</table>

A new Local Possible Dosage of ‘ONE-HALF TABLET’ should be created.
Example 2 System Quick Orders with Possible Doses

Quick Order Free-Text Report

This report identifies Medication Quick orders that have a free text dosage that does not match exactly one of the Local Dosages from Pharmacy.

Select one of the following:

S  System Quick Orders
P  Personal Quick Orders
PS  Personal and System Quick Orders

SELECT THE TYPE OF QUICK ORDER: PS//  S  System Quick Orders

Select one of the following:

L  Local Possible Dosages
P  Possible Dosages
N  No Local Possible and No Possible Dosages

SELECT THE TYPE OF DOSAGE: L//  P  Possible Dosages

DEVICE:  TELNET TERMINAL

QUICK ORDER FREE-TEXT REPORT    MAY 15, 2013  15:27    PAGE 1

--------------------------------------------------------------------------------
QUICK ORDER (IEN):      P  SUZ AMOXICILLIN 500MG PO TID (605)
QO DISPLAY NAME:        Amoxicillin 500mg po TID
DISPLAY GROUP:        UNIT DOSE MEDICATIONS
ORDERABLE ITEM IEN:   2033
ORDERABLE ITEM NAME:  AMOXICILLIN CAP,ORAL
QO INSTRUCTIONS:      1 CAPSULE
DISPENSE:             AMOXICILLIN 500MG CAP
CPRS DOSAGE LIST:
1000MG
250MG
500MG

Quick Order IEN. The report is sorted by

This dosage of this Quick Order should be edited to the Possible Dosage of 500MG or 0;80;9999 or Printer
<table>
<thead>
<tr>
<th>QUICK ORDER (IEN):</th>
<th>ONDANSETRON 8MG PO 60 MIN PRE CHEMO (1816)</th>
</tr>
</thead>
<tbody>
<tr>
<td>QO DISPLAY NAME:</td>
<td>ONDANSETRON 8MG PO 60 MIN PRE-CHEMO</td>
</tr>
<tr>
<td>DISPLAY GROUP:</td>
<td>UNIT DOSE MEDICATIONS</td>
</tr>
<tr>
<td>ORDERABLE ITEM IEN:</td>
<td>2835</td>
</tr>
<tr>
<td>ORDERABLE ITEM NAME:</td>
<td>ONDANSETRON HCL TAB</td>
</tr>
<tr>
<td>QO INSTRUCTIONS:</td>
<td>8MG</td>
</tr>
<tr>
<td>DISPENSE:</td>
<td>ONDANSETRON HCL 8MG TAB</td>
</tr>
</tbody>
</table>

CPRS DOSAGE LIST:

| 16MG | 4MG |

This Quick Order does not need to be edited, but a new Possible Dosage of 8MG should be added to Quick Order IEN. The order of the Quick Order Report display is based on IEN numbers.
Example 3 Personal Quick Orders with Possible Doses

Quick Order Free-Text Report

This report identifies Medication Quick orders that have a free text dosage that does not match exactly one of the Local Dosages from Pharmacy.

Select one of the following:

S  System Quick Orders
P  Personal Quick Orders
PS  Personal and System Quick Orders

SELECT THE TYPE OF QUICK ORDER: PS//  P  Personal Quick Orders

Select one of the following:

L  Local Possible Dosages
P  Possible Dosages
N  No Local Possible and No Possible Dosages

SELECT THE TYPE OF DOSAGE: L//  P  Possible Dosages

DEVICE:  TELNET TERMINAL

Press Enter or 0;80;9999 or Printer name

QUICK ORDER FREE-TEXT REPORT  MAY 15, 2013  15:27  PAGE 1

-------------------------------------------------------------------------

QUICK ORDER (IEN):  ORWDQ 7C406F44 (1339)
QO DISPLAY NAME:  ASA 81mg
OWNER(S):  PROVIDER, A
DISPLAY GROUP:  UNIT DOSE MEDICATIONS
ORDERABLE ITEM IEN:  2056
ORDERABLE ITEM NAME:  ASPIRIN TAB, CHEWABLE

Note: this is a different case than the CPRS Dosage
QO INSTRUCTIONS:     81mg
DISPENSE:             ASPIRIN 81MG CHEW TAB
CPRS DOSAGE LIST:
  162MG
  81MG

QUICK ORDER (IEN):   ORWDQ 70CA3BA1 (1448)
QO DISPLAY NAME:     lisinopril 5 mg daily
OWNER(S):            PROVIDER, B
DISPLAY GROUP:       UNIT DOSE MEDICATIONS
ORDERABLE ITEM IEN:  2680
ORDERABLE ITEM NAME: LISINOPRIL TAB
QO INSTRUCTIONS:     5 MG
DISPENSE:            LISINOPRIL 20MG TAB
CPRS DOSAGE LIST:
  10MG
  20MG
  40MG
  5MG

Note: there is a space between numeric dose and unit while the CPRS Dosage does not have one
## Comparison of System and Personal Type Quick Orders on two Sample Orders

<table>
<thead>
<tr>
<th>Report</th>
<th>System Quick Orders</th>
<th>Personal Quick Orders</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Field Name</strong></td>
<td>Sample Data</td>
<td>Description</td>
</tr>
<tr>
<td><strong>Quick Order Name</strong></td>
<td>PSOZ AMOX 500MG TID (605)</td>
<td>Name is manually entered based on local naming convention, relevant order data, and the Quick Order IEN</td>
</tr>
<tr>
<td><strong>Display Name</strong></td>
<td>Amoxicillin 500mg TID</td>
<td>This is the display text. Name is manually entered at each site based relevant order data.</td>
</tr>
<tr>
<td><strong>Owner(s)</strong></td>
<td>Not Applicable</td>
<td></td>
</tr>
<tr>
<td><strong>Display Group</strong></td>
<td>OUTPATIENT MEDICATIONS</td>
<td>Identifies applicable VistA package (IV MEDICATIONS, NON-VA MEDICATIONS, OUTPATIENT MEDICATIONS, UNIT DOSE MEDICATIONS)</td>
</tr>
<tr>
<td><strong>Orderable Item IEN</strong></td>
<td>2033</td>
<td>Internal Entry Number ORDERABLE ITEMS File #101.43, not the PHARMACY ORDERABLE ITEM file</td>
</tr>
<tr>
<td><strong>Orderable Item Name</strong></td>
<td>AMOXICILLIN CAP,ORAL</td>
<td>This name also comes from the ORDERABLE ITEMS File #101.43</td>
</tr>
<tr>
<td><strong>QO Instructions</strong></td>
<td>1 CAPSULE</td>
<td>The dosage that is entered for the quick order. For complex orders, then this is the first dose listed. Either an invalid free text dose or a Local Possible Dosage which was deleted after Quick Order creation. Orderable Item is associated with Possible Doses, so even if a Local Possible Dose for “1 Capsule” existed, it wouldn’t be an available dosage in CPRS. This dose is therefore a “mismatch”.</td>
</tr>
<tr>
<td><strong>Dispense Drug</strong></td>
<td>AMOXICILLIN 500MG CAP</td>
<td>This is the Dispense Drug from DRUG file #50</td>
</tr>
<tr>
<td><strong>CPRS Dosage List</strong></td>
<td>1000mg 500MG</td>
<td>This is the list of dosages associated with the Orderable Item and displayed in CPRS for the respective package. It may contain Possible Dosages and/or Local Possible Dosages. The format in this sample indicates that they are Possible Doses. This quick order will show up on the Quick Order report that is sorted for System Quick Orders (S) and Possible Doses (P).</td>
</tr>
<tr>
<td><strong>How to fix Quick Orders for dose check success</strong></td>
<td>1. Edit the dosage to an available Possible Dose or 2. Enter a free text dose consistent with the Possible Dose format (1500mg) and consider whether it would be appropriate to add a new Possible Dose 3. Refer to additional advice in Tutorial Section</td>
<td>Provider edits Personal quick order, or edit is done via the option &quot;Edit personal quick orders by user&quot; as follows: 1. Edit the dosage to an available Local Possible Dose or 2. Enter free text dose consistent with the Local Possible Dosage format (TEASPOONFUL) or that will match a newly entered Local Possible Dosage 3. Refer to additional advice in Tutorial Section</td>
</tr>
</tbody>
</table>
Dosage Basics for CPRS Displays

The CPRS dosage list and the Quick Order report share the same display rules

For Dosages to display the Dispense Drug must be marked and Dosage assigned to the same package as the Quick Order type being used.

If:

1. PDs are assigned for Inpatient package (250MG, 500MG, 1000MG)
2. LPDs are assigned for Outpatient package (1 CAPSULE, 2 CAPSULES)
3. QO type is for entered for Unit Dose Medications

Then:

4. The selectable dosages will be PDs (250MG, 500MG, 1000MG)

If an orderable item (OI) has multiple dispense drugs, and at least one of those dispense drugs has PDs set for a specific package, then PDs will be the only type of dose that is available for any Quick Order entered for that same package.

If no PD is marked for the package that is being used by a QO, then any available LPDs will display as choices during both CPRS ordering and listed on the QO LPD reports.

Free text doses can be entered on QO’s, but PDs and/or LPDs should be used whenever possible. Free-text rules apply for dosage checks.
**Dosage Scenarios**

**Example 1:** System Quick Orders with Possible Dosages in the CPRS Dosage list

*Local Possible Dosages may also be present and assigned to the Orderable Item and assigned to both packages, but may not be viewable in the CPRS Dosage List because of the display rules for CPRS dosages.*

<table>
<thead>
<tr>
<th>Orderable Item</th>
<th>ACETAMINOPHEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>dosage Form</td>
<td>TAB</td>
</tr>
</tbody>
</table>

Dispense Drugs:

- ACETAMINOPHEN 325MG TAB       MAY 10, 2013
- ACETAMINOPHEN 500MG TAB U.D.  JAN 30, 2013
- ACETAMINOPHEN 500MG TAB
- ACETAMINOPHEN 325MG TAB U.D.  FEB 12, 2013
- ACETAMINOPHEN 500MG TAB

**POSSIBLE DOSAGES:**

- DISPENSE UNITS PER DOSE: 1   DOSE: 500MG   PACKAGE: IO
- DISPENSE UNITS PER DOSE: 2   DOSE: 1000MG  PACKAGE: IO

**LOCAL POSSIBLE DOSAGES:**

- 1 TABLET   IO
- 1 TABLET OF 500MG   IO
- 2 TABLETS   IO

This entry is marked for the following PHARMACY packages:

- Outpatient
- Unit Dose
- Ward Stock
- Non-VA Med
The following Quick Orders are all using the Orderable Item: ACETAMINOPHEN TAB which has a single active dispense drug ‘ACETAMINOPHEN 500MG TAB’ assigned to the respective package. For each display group (Outpatient Medications and Unit Dose Medications) there is either a ‘FREE TEXT’ dosage or a selected LPD.

```
1  PSUZ APAP IP FREE TEXT
2  PSUZ APAP IP LPD USED
3  PSOZ APAP OP FREE TEXT
4  PSOZ APAP OP LPD USED
```

Since none of the free text dosages in the QO INSTRUCTIONS match any of the Possible Dosages in the CPRS Dosage List, this report prints all four Quick Orders. Possible Dosages are available for both packages, so any Local Possible Dosages will not be seen.

If available, additional Possible Dosages from other Dispense Drugs(s) tied to the same Orderable Item (such as ACETAMINOPHEN 325MG TAB) would be displayed in the CPRS Dosage List. In this example, ACETAMINOPHEN 325MG TAB has Possible Dosages, but is inactive; therefore, none of the Possible Dosages (325MG or 650MG) are showing.

```
QUICK ORDER (IEN): PSOZ APAP OP LPD USED (560)
QO DISPLAY NAME: APAP OP
DISPLAY GROUP: OUTPATIENT MEDICATIONS
ORDERABLE ITEM IEN: 1964
ORDERABLE ITEM NAME: ACETAMINOPHEN TAB
QO INSTRUCTIONS: 1 TABLET
DISPENSE: ACETAMINOPHEN 500MG TAB
CPRS DOSAGE LIST:
  1000MG
  500MG
QUICK ORDER (IEN): PSOZ APAP OP FREE TEXT (561)
QO DISPLAY NAME: APAP OP FREE TEXT
DISPLAY GROUP: OUTPATIENT MEDICATIONS
ORDERABLE ITEM IEN: 1964
ORDERABLE ITEM NAME: ACETAMINOPHEN TAB
QO INSTRUCTIONS: FREE TEXT
DISPENSE: ACETAMINOPHEN 500MG TAB
```
CPRS DOSAGE LIST:

1000MG

500MG

QUICK ORDER (IEN):   PSUZ APAP IP LPD USED (562)

QO DISPLAY NAME:     APAP IP LPD USED

DISPLAY GROUP:       UNIT DOSE MEDICATIONS

ORDERABLE ITEM IEN:  1964

ORDERABLE ITEM NAME: ACETAMINOPHEN TAB

QO INSTRUCTIONS:     1 TABLET OF 500MG

DISPENSE:             ACETAMINOPHEN 500MG TAB

CPRS DOSAGE LIST:

1000MG

500MG

QUICK ORDER (IEN):   PSUZ APAP IP FREE TEXT (563)

QO DISPLAY NAME:     APAP IP FREE TEXT

DISPLAY GROUP:       UNIT DOSE MEDICATIONS

ORDERABLE ITEM IEN:  1964

ORDERABLE ITEM NAME: ACETAMINOPHEN TAB

QO INSTRUCTIONS:     FREE TEXT

DISPENSE:             ACETAMINOPHEN 500MG TAB

CPRS DOSAGE LIST:

1000MG

500MG
Editing Dosages of Quick Orders

Editing the dosages to match an available dosage in CPRS should prevent a Quick Order from appearing on the report.

System Quick Order Edits

Enter/edit quick orders [ORCM QUICK ORDERS] (QO)

Select QUICK ORDER NAME: PSUZ APAP

1  PSUZ APAP IP FREE TEXT
2  PSUZ APAP IP LPD USED
3  PSOZ APAP OP FREE TEXT
4  PSOZ APAP OP LPD USED

CHOOSE 1-4: 2  PSUZ APAP IP LPD USED

NAME: APAP IP LPD USED/
DISPLAY TEXT: APAP IP LPD USED/
VERIFY ORDER: YES/
DESCRIPTION:
1>
ENTRY ACTION:

Medication: ACETAMINOPHEN TAB //
Complex dose? NO/
Dose: 1 TABLET OF 500MG// 500MG
Route: ORAL (BY MOUTH)//
Schedule: Q4H PRN//
Give additional dose NOW? NO/
Priority: ROUTINE/
Comments:

Enter the QO name or the IEN can be used to access a quick order, by entering the ` (grave accent, key to the left of the 1 on a qwerty keyboard) followed by the IEN.

If you edit the dose on a Quick Order, it removes the information below the dosage field, so be sure to capture field entries such as Days Supply, Quantity, and Refills.
Since the Quick Order using the dosage ‘1 TABLET OF 500MG’ was edited and matched to a Possible Dosage of ‘500MG’, the Quick Order ‘APAP IP LPD USED’ is now removed from the report.

<table>
<thead>
<tr>
<th>QUICK ORDER (IEN)</th>
<th>PSOZ APAP OP LPD USED (560)</th>
</tr>
</thead>
<tbody>
<tr>
<td>QO DISPLAY NAME:</td>
<td>APAP OP</td>
</tr>
<tr>
<td>DISPLAY GROUP:</td>
<td>OUTPATIENT MEDICATIONS</td>
</tr>
<tr>
<td>ORDERABLE ITEM IEN:</td>
<td>1964</td>
</tr>
<tr>
<td>ORDERABLE ITEM NAME:</td>
<td>ACETAMINOPHEN TAB</td>
</tr>
<tr>
<td>QO INSTRUCTIONS:</td>
<td>1 TABLET</td>
</tr>
<tr>
<td>DISPENSE:</td>
<td>ACETAMINOPHEN 500MG TAB</td>
</tr>
<tr>
<td>CPRS DOSAGE LIST:</td>
<td></td>
</tr>
<tr>
<td>1000MG</td>
<td></td>
</tr>
<tr>
<td>500MG</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>QUICK ORDER (IEN)</th>
<th>PSOZ APAP OP FREE TEXT (561)</th>
</tr>
</thead>
<tbody>
<tr>
<td>QO DISPLAY NAME:</td>
<td>APAP OP FREE TEXT</td>
</tr>
<tr>
<td>DISPLAY GROUP:</td>
<td>OUTPATIENT MEDICATIONS</td>
</tr>
<tr>
<td>ORDERABLE ITEM IEN:</td>
<td>1964</td>
</tr>
<tr>
<td>ORDERABLE ITEM NAME:</td>
<td>ACETAMINOPHEN TAB</td>
</tr>
<tr>
<td>QO INSTRUCTIONS:</td>
<td>FREE TEXT</td>
</tr>
<tr>
<td>DISPENSE:</td>
<td>ACETAMINOPHEN 500MG TAB</td>
</tr>
<tr>
<td>CPRS DOSAGE LIST:</td>
<td></td>
</tr>
<tr>
<td>1000MG</td>
<td></td>
</tr>
<tr>
<td>500MG</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>QUICK ORDER (IEN)</th>
<th>PSUZ APAP IP FREE TEXT (563)</th>
</tr>
</thead>
<tbody>
<tr>
<td>QO DISPLAY NAME:</td>
<td>APAP IP FREE TEXT</td>
</tr>
<tr>
<td>DISPLAY GROUP:</td>
<td>UNIT DOSE MEDICATIONS</td>
</tr>
<tr>
<td>ORDERABLE ITEM IEN:</td>
<td>1964</td>
</tr>
<tr>
<td>ORDERABLE ITEM NAME:</td>
<td>ACETAMINOPHEN TAB</td>
</tr>
<tr>
<td>QO INSTRUCTIONS:</td>
<td>FREE TEXT</td>
</tr>
<tr>
<td>DISPENSE:</td>
<td>ACETAMINOPHEN 500MG TAB</td>
</tr>
</tbody>
</table>
Personal Quick Order Edits

Edit Personal Quick Orders by User [ORCM QUICK ORDERS BY USER]

The Edit personal quick orders by user allows you to retrieve and edit personal quick orders by the user that created them.

Personal Quick Order Displayed on Report

<table>
<thead>
<tr>
<th>QUICK ORDER FREE-TEXT REPORT</th>
<th>JUN 06, 2013 10:12 PAGE 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>QUICK ORDER (IEN): ORWDQ E5209ACB (608)</td>
<td></td>
</tr>
<tr>
<td>QO DISPLAY NAME: Augmentin Oral Solution BID</td>
<td></td>
</tr>
<tr>
<td>OWNER(S): PROVIDER, A</td>
<td></td>
</tr>
<tr>
<td>DISPLAY GROUP: OUTPATIENT MEDICATION</td>
<td></td>
</tr>
<tr>
<td>ORDERABLE ITEM IEN: 2031</td>
<td></td>
</tr>
<tr>
<td>ORDERABLE ITEM NAME: AMOXICILLIN/CLAVULANATE PWDR,RENS-ORAL</td>
<td></td>
</tr>
<tr>
<td>QO INSTRUCTIONS: 1 SPOONFUL</td>
<td></td>
</tr>
<tr>
<td>DISPENSE: AMOXICILLIN/CLAVUL 400MG/5ML SUSP</td>
<td></td>
</tr>
<tr>
<td>CPRS DOSAGE LIST:</td>
<td></td>
</tr>
<tr>
<td>ONE TEASPOONFUL (400MG) OF AMOXICILLIN/CLAVUL 400MG/5ML SUSP</td>
<td></td>
</tr>
<tr>
<td>ONE-HALF TEASPOONFUL (200MG) OF AMOXICILLIN/CLAVUL 400MG/5ML SUSP</td>
<td></td>
</tr>
</tbody>
</table>

Note the mismatch between QO dosage and available CPRS dosages.

Edit personal quick order by user
DESCRIPTION:

ENTRY ACTION:

Medication: AMOXICILLIN/CLAVULANATE PWDR, RENST-ORAL //

Complex dose? NO//

Dose: 1 SPOONFUL // ONE TEASPOONFUL (400MG) OF AMOXICILLIN/CLAVUL 400MG/5ML SUSP

$0.12

WARNING: Dosage check may not occur.

Route: ORAL (BY MOUTH) //

Schedule: BID-WF //

Days Supply: 10 //

Quantity: 100 //

Refills (0-11): 0 //

Pick Up: MAIL //

Priority: ROUTINE //

Comments:

1>
Medication: AMOXICILLIN/CLAVULANATE PWDR, RENST-ORAL

Instructions: 1 SPOONFUL ORAL (BY MOUTH) BID-WF

Sig: TAKE 1 SPOONFUL BY MOUTH TWICE A DAY WIT ...

Days Supply: 10
Quantity: 100
Refills (0-11): 0
Pick Up: MAIL
Priority: ROUTINE

(P)lace, (E)dit, or (C)ancel this quick order? PLACE//

Determining Menu(s) of Quick Orders

System Quick Orders that are not placed on a menu will be excluded from this report since a user is not able to order it until it is placed. Personal Quick Orders are not required to be placed on a menu but do require active owner(s).

The Search/replace components option allows you to find what menu a quick order is on and either replace or remove the quick order from a menu.

Search/replace components [ORCM SEARCH/REPLACE] (SR)

Select Order Menu Management <TEST ACCOUNT> Option: SR Search/replace components

Search for: PSUZ APAP

1  PSUZ APAP IP FREE TEXT
2  PSUZ APAP IP LPD USED
3  PSOZ APAP OP FREE TEXT
4  PSOZ APAP OP LPD USED
5  APAP - NO PDS ORWDQ CC07A0B4

CHOOSE 1-5: 1  PSUZ APAP IP FREE TEXT

Menu items of PSUZ APAP IP FREE TEXT

Name                                      Type
-------------------------------------------
1  OR GMENU ORDER SETS                      menu
Quick Order Report FAQs

Q: Does this report filter out Personal Quick Orders for Terminated Employees?
A: The code examines all of the owners of a personal quick order. If all of the owners are inactive (either DISUSERED, TERMINATED, or do not have an access code), the personal quick order will not be listed on the report.

Q: Does this report Exclude QO’s not used within specific time frame?
A: This is not possible because we do not track usage of quick orders. However, a Fileman Report could be created to find these.

Q: Does this report screen out QO’s that are not on any active menu?
A: The code excludes quick orders that are either not on a menu, not a personal quick order, or not part of a reminder dialog.
Q: How does the dispense drug get chosen? I am seeing several examples of some funny entries with wrong dispense drugs:

<table>
<thead>
<tr>
<th>QUICK ORDER (IEN):</th>
<th>ORWDQ EC331281 (6123)</th>
</tr>
</thead>
<tbody>
<tr>
<td>QO DISPLAY NAME:</td>
<td>etodolac</td>
</tr>
<tr>
<td>OWNER(S):</td>
<td>PROVIDER, A</td>
</tr>
<tr>
<td>DISPLAY GROUP:</td>
<td>OUTPATIENT MEDICATIONS</td>
</tr>
<tr>
<td>ORDERABLE ITEM IEN:</td>
<td>4155</td>
</tr>
<tr>
<td>ORDERABLE ITEM NAME:</td>
<td>ETODOLAC CAP, ORAL</td>
</tr>
<tr>
<td>QO INSTRUCTIONS:</td>
<td>400MG</td>
</tr>
<tr>
<td>DISPENSE:</td>
<td>ETODOLAC 300MG CAP</td>
</tr>
<tr>
<td>CPRS DOSAGE LIST:</td>
<td>200MG</td>
</tr>
<tr>
<td></td>
<td>300MG</td>
</tr>
</tbody>
</table>

Why ETODOLAC 300MG?

A: CPRS builds a list of dispense drugs associated with an orderable item. In this case the OI comes from the quick order so we build the list of dispense drugs and since this is a free text entry we can’t determine what the dispense drug is yet on the CPRS side. So any dispense drugs under that OI show on this report but do not necessarily reflect the dispense drug sent to pharmacy, it is a best guess.

Q: Is there any way to tell who created the quick orders? I’d like to know if anyone still uses them or not.

A: It doesn’t store who created the quick order, but there is a way to determine if it is on a user’s list.

<table>
<thead>
<tr>
<th>Option: Order Menu Management menu option.</th>
</tr>
</thead>
<tbody>
<tr>
<td>OI</td>
</tr>
<tr>
<td>PM</td>
</tr>
<tr>
<td>GO</td>
</tr>
<tr>
<td>QO</td>
</tr>
<tr>
<td>QU</td>
</tr>
<tr>
<td>ST</td>
</tr>
<tr>
<td>AC</td>
</tr>
<tr>
<td>MN</td>
</tr>
<tr>
<td>AO</td>
</tr>
</tbody>
</table>

Q: Is there a way to determine which quick orders are on a user’s list?

A: Yes – By using the Order Menu Management menu option you can see all personal quick orders by a user

Q: If you edit the dose on a Quick Order, it removes the information below the field. How is this issue addressed?

A: You have to review each quick order entirely and then perform the edit. See example below:
Current QO

NAME: APAP OP LPD USED/
DISPLAY TEXT: APAP OP/
VERIFY ORDER: YES/
DESCRIPTION:

ENTRY ACTION:

Medication: ACETAMINOPHEN TAB //
Complex dose? NO//
Dose: 1 TABLET (325MG) OF 325MG Replace
Route: ORAL (BY MOUTH)//
Schedule: Q4H PRN//

Days Supply: 30
TAB (100/BT ONLY)
Quantity (TAB): 30
Refills (0-11): 2
Pick Up: WINDOW/
Priority: ROUTINE/
Comments:

Edited QO

NAME: APAP OP LPD USED/
DISPLAY TEXT: APAP OP/
VERIFY ORDER: YES/

Medication: ACETAMINOPHEN TAB //
Complex dose? NO//
Dose: 1 TABLET (325MG) OF 325MG Replace ... With 2 TABLETS
  Replace
  2 TABLETS (650MG) OF 325MG $0.0074
Route: ORAL (BY MOUTH)//
Schedule: Q4H PRN//

Days Supply:
TAB (100/BT ONLY)
Quantity (TAB):
Refills (0-11):
Pick Up: WINDOW/
Priority: ROUTINE/
Comments:

Free Text Formatting

Basic logic for successful dose checks when using free text doses

The following logic can be used to ensure free text dose entries perform dose checks, but may not prevent quick orders from appearing on this report.

Compatible Free Text Logic - will generate a successful dosing check

- Whole numbers (2, two) followed by a valid dose unit (mg, tablet)
- Numbers with decimal points and commas (10.5, 1,000)
- Sequential Ranges (2-3, 2 – 3, 2 or 3, two to three, two or three, two-three, two – three)
- Fractions (1 and ½, one and one half, one and one-half, 1 and one half, 1 and one-half)
Incompatible Free Text Logic - will generate a manual dose check alert

• More than one space between the numeric value and the dose unit
• Trailing spaces or additional trailing data (10mg<space>)
• Special characters (- &/) and extraneous textual information
• Fractions less than ¼ or greater than 10 and ½
• Ranges greater than 10 (10-11)
• Non-sequential ranges (1-3, 2-5)
• Metric ranges (1mg-2mg, 1mL-2mL)

Examples

<table>
<thead>
<tr>
<th>Valid Format</th>
<th>Invalid Format</th>
</tr>
</thead>
<tbody>
<tr>
<td>10mg</td>
<td>10mg&lt;space&gt;</td>
</tr>
<tr>
<td>10 mg</td>
<td>10  mg (has 2 spaces between text)</td>
</tr>
<tr>
<td>10mL</td>
<td>1 tablet (has 2 spaces)</td>
</tr>
<tr>
<td>1 tablet</td>
<td>10mg (1 tablet) or 10mg (10mL) or 10mg/10mL*</td>
</tr>
<tr>
<td>1tablet</td>
<td></td>
</tr>
</tbody>
</table>

*This format will only work if a Local Possible Dosage is created. Name the Local Possible Dosage with the full text, but define the numeric dose (10) and dose unit (mg)

Quick Order Free Text Report Checklist

Review your hospital’s quick order policies prior to editing System Quick Orders.

Determine an action plan for editing Personal Quick Orders, whether the edit will be performed directly by the provider or alternatively via the Edit Personal Quick Orders by User option

Run each of the following report combinations:

• Personal Quick Orders
  • Local Possible Dosages
  • Possible Dosages
  • No Local Possible and No Possible Dosages

• System Quick Orders
  • Local Possible Dosages
  • Possible Dosages
  • No Local Possible and No Possible Dosages

For each Quick Order that displays on the report, look into Orderable Item and Drug File to determine what packages the Dispense Drug(s) and available dosages are marked/assigned to.
Review available/applicable Possible Dosages and Local Possible Dosages

Assign the most appropriate dosage to the Quick Order.

- In some cases an existing Possible Dosage or Local Possible Dosage can be selected
- In some cases the existing Local Possible Dosage may need to be edited to a format that is compatible with MOCHA Dosage Checks, and then the Quick Order dosage can also be updated
- In some cases a new Possible Dosage or Local Possible Dosage may need to be added to the Drug File #50
- In some cases, the most appropriate dosage will be the one that already exists on that Quick Order, and no change is needed
- In some cases a new free text dose will need to be entered. Ensure that a compatible free text format is used whenever possible

If a drug file edit is required, then other Quick Orders associated with that dispense drug or orderable item may also be affected by the edit. You may consider running a Fileman to identify the other Quick Orders using the drug.

**NOTE:** Not all Quick Orders listed on the report represent MOCHA Dose Check issues; they simply reveal mismatches between doses in quick orders and locally available possible and/or local possible dosages, which is a common cause for manual dose checks alerts.

**Convert IV Inpatient Quick Order to Infusion Quick Order**

The new option Convert IV Inpatient QO to Infusion QO [OR CONVERT INP TO QO] is now on the ORDER MENU MANAGEMENT [ORCM MENU] menu. This option enables CACs at sites to convert an IV quick order that is set up as an Inpatient quick order to the new Infusion quick order format.

This option has three selections to convert quick orders:

- **QUICK ORDERS USED IN OTHER ITEMS** (in order menus, order sets, or reminder dialogs)
- **QUICK ORDERS NOT USED IN OTHER ITEMS** (quick orders not assigned to order menus, order sets, or reminder dialogs)
- **SPECIFIC QUICK ORDER**

Each option prompts for information to convert one quick order at a time. If the user wants to convert all the quick orders that are assigned to order menus, order sets, or a reminder dialog first, the user would select the **QUICK ORDERS USED IN OTHER ITEMS** prompt.

If the user wants to convert quick order that are NOT assigned to an order menu, order sets, or a reminder dialog, the user would select the **QUICK ORDERS NOT USED IN OTHER ITEMS** prompt.

If the user wants to convert specific quick orders, the user would select the **SPECIFIC QUICK ORDER** prompt.
Personal Quick Order Exception

This utility will not convert personal IV quick orders. However, after it has converted the quick orders that it can convert, the utility will then list the personal IV quick orders by user. The user running the utility can copy this information and forward this information in a mailman message. The utility will completely ignore any personal quick order assigned to a terminated user.

Criteria to Convert IV Quick Orders

To be converted to an Infusion quick order, the order needs to meet the following conditions:

1. The quick order must have the Inpatient Medication dialog [PSJ OR PAT OE] as the default dialog.
2. The orderable item assigned to the quick order must have the IV BASE field defined as “Yes” or the IV ADDITIVE fields defined as “Yes”.

Conversion Process Overview

There are two parts to the conversion process. The first part is a set of questions that populate the minimum fields needed to convert to the Infusion quick order. The second part puts the user in the standard quick order editor where the user can add any additional Infusion quick order information if needed.

Part One: Minimum Conversion Prompts

Once the process is started, for each quick order, the user will see a detailed description of the quick order. Then, the user is presented with the following prompt:

Convert the above Quick Order to an Infusion Quick Order?

Select one of the following:

Y YES
N NO
S SKIP THIS QUICK ORDER
Q QUIT THE CONVERSION UTILITY

Convert?:

Answering “Yes” begins the conversion process.

Answering “No” does not begin the process for the specified order, but the conversion option then moves on to the next quick order.

The next prompt determines the IV Type:

Select the IV Type for this Quick Order.

Select one of the following:

C CONTINUOUS
This prompt is used to define the IV Type value that should be assigned to the infusion quick order.

The next prompt is dependent on the orderable item setup.

Change orderable item NAME to an additive?

Select one of the following:

Y     YES
N     NO
S     SKIP THIS QUICK ORDER
Q     QUIT THE CONVERSION UTILITY

Convert to Additive?:

This prompt will only appear if both the IV BASE and IV ADDITIVE fields are set to “Yes”.

If only the IV BASE field is set to “Yes”, the user will not see this prompt, and the orderable item will automatically be assigned to the solution value of the Infusion quick order.

If only the IV ADDITIVE field is set to “Yes”, the user will see the following message:

Orderable item NAME is not marked as a solution.
This orderable item will be moved to the additive value.

The IV BASE and IV ADDITIVE fields control in which list box the orderable item should appear in the Infusion order dialog. The user should not be able to override these values when converting the quick order to an infusion quick order.

The next prompt lists the changes that the user has selected and asks the user if CPRS should continue and convert the quick order.

Please confirm the selected changes below.

If these changes are accepted, the Quick Order will be converted to an Infusion Quick Order.
This Quick Order will not be able to be converted back to an Inpatient Quick Order.
Convert to Infusion Quick Order: YES
IV TYPE: Intermittent
Change orderable item MORPHINE INJ to an additive: YES
Select one of the following:

<table>
<thead>
<tr>
<th>Y</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>N</td>
<td>NO</td>
</tr>
<tr>
<td>S</td>
<td>SKIP THIS QUICK ORDER</td>
</tr>
<tr>
<td>Q</td>
<td>QUIT THE CONVERSION UTILITY</td>
</tr>
</tbody>
</table>

Confirm Changes?:

Up to this point, the user has the option to Skip this Quick Order and not convert the quick order by selecting the SKIP THIS QUICK ORDER prompt. Also, the user has the option to stop the entire process and exit the conversion option by selecting the QUIT THE CONVERSION UTILITY prompt.

**Warning:** If the user enters “Yes” at this prompt, the IV quick order will be converted to an infusion quick order, and it CANNOT be converted back to inpatient medication quick order.

**Conversion Warning Messages**

After the conversion process, the user may see up to two warning messages.

- **Check the strength associated with the additive value in the editor.** This warning message displays if the orderable item is converted to the additive value. When this conversion is done, the conversion utility may be unable to select the correct additive strength from the inpatient quick order, so the user will need to select the strength in the editor.

- **Check the limitation value assigned to the quick order in the editor.** This warning message displays if the inpatient medication order is a complex order with a duration defined. In this case, the infusion quick order can have only one duration value, and the user may need to adjust the value—especially if there was more than one duration value defined in the complex inpatient quick order.

**Part Two: Filling in Additional Fields in the Quick Order Editor**

When the minimum conversion is done, the conversion utility places the user into the standard quick order editor. At this point, the user can walk through the quick order editor to verify that the values are correct in the Infusion quick order. If corrections are needed, the user can make corrections. In addition, the user can add values, as needed, to the other Infusion quick order fields.

If the user does not need to make changes to the quick order after the conversion is done, it is still recommended that user walk all the way through the quick order in the editor. If the user exits out of the editor without going all the way through, then the fields that are specific to the inpatient medication dialog will not be removed from the quick order. This should have no impact on CPRS, but it can cause confusion if there is a need to debug the quick order at a later time.

**Note:** Both the IV BASE and the IV ADDITIVE fields’ values are populated from the USED IN IV FLUID ORDER ENTRY prompt in the corresponding files: the IV SOLUTIONS file, file #52.7, and the IV ADDITIVES file, file# 52.6. When the USED IN IV FLUID ORDER ENTRY prompt is edited in one of these files, an update is sent to the CPRS ORDERABLE ITEM file, file# 101.43. There may be a delay in this update and this delay can affect the conversion option. If the USED IN IV FLUID ORDER ENTRY value is not set to “Yes”, then the quick orders that point to these items will be skipped by this conversion utility. The user will still be able to place the order in CPRS using the current quick order format. However, if pharmacy finishes the order as an IV order, then
the CPRS user will NOT be able to take an action (Copy, Change, or Renew) on the order in CPRS.

**Update IV Quick Order Additive Frequency Utility**

The new option IV Additive Frequency Utility [OR IV ADD FREQ UTILITY] is now on the ORDER MENU MANAGEMENT [ORCM MENU] menu. This option enables CACs at sites to define a value for the additive frequency field for continuous IV quick orders.
This option has three selections to convert quick orders:

- QO ASSIGNED TO ORDER MENUS, ORDER SETS, OR REMINDER DIALOGS
- QO NOT ASSIGNED TO ANY OF THESE ITEMS (quick orders not assigned to order menus, order sets, or reminder dialogs)
- SPECIFIC QUICK ORDER (to change a specific quick order that the user knows needs to be changed)

Each option prompts for information to convert one quick order at a time. If the user wants to convert all the quick orders that are assigned to order menus, order sets, or a reminder dialog first, the user would select the QO ASSIGNED TO ORDER MENUS, ORDER SETS, OR REMINDER DIALOGS prompt.

If the user wants to convert quick orders that are NOT assigned to an order menu, order sets, or a reminder dialog, the user would select the QO NOT ASSIGNED TO ANY OF THESE ITEMS prompt. If the user wants to convert specific quick orders, the user would select the SPECIFIC QUICK ORDER prompt.

**Personal Quick Order Exception**

This utility will not convert personal IV quick orders. However, after it has converted the quick orders that it can convert, the utility will then list the personal IV quick orders by user. The user running the utility can copy this information and forward this information in a mailman message. The utility will completely ignore any personal quick order assigned to a terminated user.

**Criteria to Update IV Quick Orders with This Utility**

To be converted to an Infusion quick order using this utility, the order needs to meet the following conditions:

1. The quick order must have the IV Medication dialog [PSJI OR PAT FLUID OE] as the default dialog.
2. The quick order must have at least one Additive defined.
3. It must not have values defined for the associated additive frequency fields.

**Conversion Process Overview**

There are two parts to the conversion process. The first part enables the user to set the value for the additive frequency. The second part puts the user in the standard quick order editor where the user can add any additional information to the Infusion quick order.

**Part One: Minimum Conversion Prompts**

Once the process is started, for each quick order, the user will see a detailed description of the quick order. Then, the user is presented with the following prompt:

```
Add additive frequency to the above Quick Order?

Select one of the following:

Y    YES
N    NO
```
Answering “Yes” begins the conversion process.

Answering “No” does not begin the process for the specified order, but the conversion option then moves on to the next quick order.

The next prompt displays the Additive value and the default additive frequency defined for the additive in the Pharmacy package. If a default value is defined, then it will be the default for the question "Select Additive Frequency:"

Additive: ACETAZOLAMIDE INJ
Default value: All Bags
Select one of the following:
A ALL Bags
1 1 Bag/Day
S See Comments
K SKIP THIS QUICK ORDER
Q QUIT THE CONVERSATION UTILITY
Select Additive Frequency: All Bags//

The next prompt lists the changes that the user has selected and asks the user if CPRS should update the quick order.

Please confirm the selected changes below.
If these changes are accepted, the Quick Order will be updated
Additive: ACETAZOLAMIDE INJ
Additive Frequency: ALL Bags
Additive: MULTIVITAMINS INJ
Additive Frequency: 1 Bag/Day
Additive: MORPHINE INJ
Additive Frequency: ALL Bags
Select one of the following:
Y YES
N NO
Up to this point, the user has the option to Skip this Quick Order and not convert the quick order by selecting the SKIP THIS QUICK ORDER prompt. Also, the user has the option to stop the entire process and exit the conversion option by selecting the QUIT THE CONVERSION UTILITY prompt.

**Warning:** If the user enters “Yes” at this prompt, the IV quick order will be updated immediately. If a mistake is made, the user will need to go into the quick order editor and correct the quick order manually.

### Part Two: Filling in Additional Fields in the Quick Order Editor

When the minimum conversion is done, the conversion utility places the user into the standard quick order editor. At this point, the user can walk through the quick order editor to verify that the values are correct in the Infusion quick order. If corrections are needed, the user can make corrections. In addition, the user can add values, as needed, to the other Infusion quick order fields.

**Note:** Even if the user feels that there is no need to make changes to the quick order after the conversion is done, it is still recommended that the user review the entire contents of the quick order in the editor. This is a chance to see that the order is complete and correct.

### Order Check Override Reason Report

When a user receives a critical order check, the user must enter an override reason before CPRS accepts the order. Developers created a report to enable users to review the critical order check override reasons. The report can contain the following types of data DATE/TIME ORDERED, DIVISION, DISPLAY GROUP, ORDER CHECK, & OVERRIDDEN BY.

The report will be sorted in *ascending* order by any combination of these fields depending on what search option is chosen. The following options are available:

<table>
<thead>
<tr>
<th>Select one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. DATE/TIME ORDERED &amp; OVERRIDDEN BY</td>
</tr>
<tr>
<td>2. DATE/TIME ORDERED &amp; ORDER CHECK</td>
</tr>
<tr>
<td>3. DATE/TIME ORDERED &amp; DIVISION</td>
</tr>
<tr>
<td>4. DATE/TIME ORDERED &amp; DISPLAY GROUP</td>
</tr>
<tr>
<td>5. DATE/TIME ORDERED, DIVISION, &amp; DISPLAY GROUP</td>
</tr>
</tbody>
</table>

The following sort orders correspond to the chosen search options:

1. Date/Time Ordered, Division, Display Group, Order Check, & Order #.
2. Order Check, Division, Display Group, Date/Time Ordered, & Order #.
3. Division, Display Group, Order Check, Date/Time Ordered, & Order #.
4. Display Group, Division, Order Check, Date/Time Ordered, & Order #.
5. Date/Time Ordered, Division, Display Group, Order Check, & Order #.

There are two types of reports: summary and delimited. The delimited report is formatted such that it can be exported to a text file, which with a little work can then be imported into an Excel spreadsheet.

The header of every report whether summary or delimited will display the following information:

- the CURRENT USER who ran the report
- the CURRENT DATE/Time when the report was run
- the DATE RANGE of the Date/Time Ordered to be searched

Other search criteria will be displayed as well depending on which search option the user selects. For example, for option 1, the name of the person who overrode the order check and his/her title will be displayed, for option 2, the type of order check will be displayed, etc. Below is an example of the header for option 1:

```
Order Check Override Reason Report

Sorted in Ascending order by:

Date/Time Ordered, Division, Display Group, Order Chk, & Order#

Current User:  CPRSPROVIDER,TEN           Current Date:  May 21, 2007@11:59:04
Date Range Searched:  May 21, 2006 - May 21, 2007     WHERE
Order Chks are Overridden By:  CPRSPROVIDER,TEN
Title:  PHYSICIAN

If a search finds no records, the message “NO RECORDS FOUND!” is displayed.

Running Order Check Reason for Override Reports

Users can create either the summary report or the delimited report. If the user plans to export the data to a text file that can be used, the user should follow the steps under Creating a Delimited Report. The user should be aware that some additional work is required to import that data in an Excel spreadsheet for example.

Creating a Summary Reason for Override Report

1. Select the Order Check Override Reason Report option [ORK ORD CHK OVERRIDE REPORT] from the Order Checking Mgmt Menu [ORK ORDER CHK MGMT MENU].
2. At the FILTER SEARCH by:  1// prompt, select the appropriate number for the kind of report you want (a number between 1 and 5) and press <Enter>.
1. At the SEARCH Orders Beginning prompt:, enter the beginning date (the date in the past to begin from) and press <Enter>.
2. At the Thru: prompt, enter the ending date for the search (how close to the present) and press <Enter>. 
3. At this point, each report option will present different prompts. For the report type selected, enter the appropriate responses (users can always type two question marks and press <Enter> to get a list of possible selections, although this list can be quite long):

- At option 1’s SEARCH Order Chks Overridden By: prompt, enter the name of the person who overrode the order checks that you want to review and press <Enter>.
- At option 2’s Select ORDER CHECKS NAME: prompt, type the name of the order check to review and press <Enter>.
- At option 3’s Select MEDICAL CENTER DIVISION NAME: prompt, type the name of the division to review and press <Enter>.
- At option 4’s Select DISPLAY GROUP NAME: prompt, type the name of the Orders tab display group to review and press <Enter>.
- At options 5’s Select MEDICAL CENTER DIVISION NAME: prompt, type the name of the division to review and press <Enter>, then at the Select DISPLAY GROUP NAME: prompt, type the name of the Orders tab display group and press <Enter>.

4. At the Print delimited output only? NO/ prompt, accept the default by pressing <Enter>.

5. At the DEVICE: HOME// prompt, do one of the following:

- To print to the terminal screen, accept the default of ‘HOME’ by pressing <Enter>.
- To directly print or queue to a network printer, type the network printer name or ‘Q’ followed by the network printer name, respectively and press <Enter>.
- To print to a spooler, select a spool/spooler and then enter the spool document name and press <Enter>.
- To print to a host file, type ‘HFS’ and then type the host file name and press <Enter>.

6. If printing to the terminal screen, once the report has completed printing, press <Enter> to exit at the prompt, Report Completed. Please Press ENTER to EXIT.

### Creating a Delimited Reason for Override Report

Users can export a delimited report, one that uses a character, space, or tab to signify each piece of data, so that the data can be used in an outside application, such as Excel. This section contains instructions on how to create a delimited report, how to export that report, and how to import the report into Excel. Most steps are the same for each kind of report, but because prompts are different, some of the steps may be different as well.

Listed below are two methods for exporting the data to a text file. There are two ways that the user can export the delimited report depending on the user’s preference: A) export all the fields and dialog in between into one text file or B) export the non-word processing fields into one text file and then export each of the three remaining word processing fields in their own text files.

Both methods will require the user to clean up the text file for easy importation into Excel. The user will have to:

- Scan over all the delimited records (especially those of the word-processing fields) and make sure they all print on one line
- Ensure that they all have the same number of records before importation, which will ensure that every record will be related in the table and makes it easier to manipulate once imported.
- Clean up the dialog prompts in between and after the delimited sections
- Remove the report title and header from the text files before importing (the user can choose to keep those items)
NOTE: DO NOT copy and paste the delimited sections directly off the terminal screen. A right margin of 80 columns will retain and transfer into the text file and will cause most of the records to wrap to the next line. This will require more work for the user to fix and clean up so that each record falls on one line and imports nicely.

1. Select the Order Check Override Reason Report option [ORK ORD CHK OVERRIDE REPORT] from the Order Checking Mgmt Menu [ORK ORDER CHK MGMT MENU] and press <Enter>.

2. At the FILTER SEARCH by: // prompt, select the appropriate number for the kind of report you want (a number between 1 and 5) and press <Enter>.

3. At the SEARCH Orders Beginning prompt:, enter the beginning date (the date in the past to begin from) and press <Enter>.

4. At the Thru: prompt, enter the ending date for the search (how close to the present) and press <Enter>.

5. At this point, each report option will present different prompts. For the report type selected, enter the appropriate responses (users can always type two question marks and press <Enter> to get a list of possible selections, although this list can be quite long):
   • At option 1’s SEARCH Order Chks Overridden By: prompt, enter the name of the person who overrode the order checks that you want to review and press <Enter>.
   • At option 2’s Select ORDER CHECKS NAME: prompt, type the name of the order check to review and press <Enter>.
   • At option 3’s Select MEDICAL CENTER DIVISION NAME: prompt, type the name of the division to review and press <Enter>.
   • At option 4’s Select DISPLAY GROUP NAME: prompt, type the name of the Orders tab display group to review and press <Enter>.
   • At options 5’s Select MEDICAL CENTER DIVISION NAME: prompt, type the name of the division to review and press <Enter>, then at the Select DISPLAY GROUP NAME: prompt, type the name of the Orders tab display group and press <Enter>.

6. At the Print delimited output only? NO// prompt, type YES and press <Enter>.

7. At the Specify REPORT DELIMITER CHARACTER: U// prompt, select a delimiter to use in the report: P for Pipe, T for Tilde, or U for Up Arrow and press <Enter>.

8. At the DEVICE: HOME// prompt, enter in ‘;300;9999’ and DO NOT press <Enter> yet.

   Note: A right margin of 255 or greater will ensure that every record gets printed on a line without any wrapping, unless the word processing field is greater than 255 characters.

Exporting and Importing a Delimited Report Using a Single Text File

8. Capture the report or incoming data (for example, in KEA!, the user would select Tools | Capture Incoming Data) before pressing <Enter> and save it as a text file under a meaningful name (i.e., DELIMITRPT.TXT) and location that you will remember.

9. At the Continue to export the ORDER TEXT field only? YES// prompt, accept the default YES by pressing <Enter>.

10. At the Continue to export the ORDER CHK field only? YES// prompt, accept the default YES by pressing <Enter>.

11. At the Continue to export the OVERRIDE REASON field only? YES// prompt, accept the default YES by pressing <Enter>.

12. End the capture (for example in KEA!, select Tools | End Capture) and at the Report Completed. Please Press ENTER to EXIT: prompt, press <Enter>.
13. Prepare the text file for importation
   a) Open the saved text file in Notepad or WordPad
   b) Remove the text before the title and remove the dialog/prompts (the prompts are listed in steps 9-12) in between and after the delimited sections, leave a blank line in between each section.
   c) Ensure that the record count is the same in each delimited section.
   d) Save the file when done.
14. Open Microsoft Excel and import the text file by selecting Data | Import External Data | Import Data…
15. Find the text file in the location you saved it under and open it.
16. At Step 1 of the Text Import Wizard window, under Original Data Type, ensure that ‘Delimited’ is selected and click <Next>.
17. At Step 2 of the Text Import Wizard window, uncheck the ‘Tab’ checkbox, check the ‘Other’ checkbox, and type in the delimiter character that you specified when creating the report. The select <Next>.
18. At Step 3 of the Text Import Wizard window, accept the defaults and select <Finish>.
19. At the Import Data window, accept the default and select <OK>.
20. Adjust the widths of the RECNO and Date/Time Ordered columns to a better fit if needed.
21. Cut and paste the ORDER TEXT data right next to the D/T Overridden cell (G column).
22. Cut and paste the ORDER CHK data right next to the ORDER TEXT cell (H column).
23. Cut and paste the OVERRIDE REASON data right next to the ORDER CHK cell (I column).
24. Delete the RECNO columns of the 3 fields that were cut from steps 21-23.
25. Sort, filter, and manipulate the data as you choose.

Exporting and Importing a Delimited Report
9. Capture the report or incoming data (for example, in KEA!, the user would select Tools | Capture Incoming Data) before pressing <Enter> and save it as a text file under a meaningful name (i.e., DELIMITRPT1.TXT) and location that you will remember. Then, ensure that YES is the answer to the prompt and press <Enter>.
10. At the Continue to export the ORDER TEXT field only? YES// prompt, end the previous capture (DELIMITRPT1.TXT—for example in KEA!, select Tools | End Capture), then start a new capture (for example, in KEA!, the user would select Tools | Capture Incoming Data), and save it under a new name (i.e., ORDER TEXT). Ensure that YES is the answer to the prompt and press <Enter>.
11. At the Continue to export the ORDER CHK field only? YES// prompt, end the previous capture (ORDER TEXT—for example in KEA!, select Tools | End Capture), then start a new capture (for example, in KEA!, the user would select Tools | Capture Incoming Data), and save it under a new name (i.e., ORDER CHK). Ensure that YES is the answer to the prompt and press <Enter>.
12. At the Continue to export the OVERRIDE REASON field only? YES// prompt, end the previous capture (ORDER CHK—for example in KEA!, select Tools | End Capture), then start a new capture (for example, in KEA!, the user would select Tools | Capture Incoming Data), and save it under a new name (i.e., OVERRIDE REASON). Ensure that YES is the answer to the prompt and press <Enter>.
13. End the capture (for example in KEA!, select Tools \ End Capture) and at the Report Completed. Please Press ENTER to EXIT: prompt, press <Enter>.

14. Prepare the text files for importation
   a. Open each saved text file in Notepad or WordPad
   b. Remove the text before the title and remove the dialog/prompts (the prompts are listed in steps 9-12) in between and after the delimited sections, leave a blank line in between each section.
   c. Ensure that the record count is the same in each delimited section.
   d. Save the files when done.

15. For the following steps, repeat steps 17-22 to import the four text files in the order that they were captured.

16. Open Microsoft Excel.

17. Import the text file by going to Data \ Import External Data \ Import Data....

18. Find the text file in the location where you saved it and open it.

19. At Step 1 of the Text Import Wizard window, under Original Data Type, ensure that ‘Delimited’ is selected and click <Next>.

20. At Step 2 of the Text Import Wizard window, uncheck the ‘Tab’ checkbox, check the ‘Other’ checkbox, and type in the delimiter character that you specified when creating the report. The select <Next>.

21. At Step 3 of the Text Import Wizard window, accept the defaults and select <Finish>.

22. At the Import Data window, for each file, see the instruction below:
   - For the DELIMITRPT1 text file, accept the default and select <OK>.
   - For the ORDER TEXT file, change the cell location to the cell right next to the D/T Overridden column header and select <OK>.
   - For the ORDER CHK file, change the cell location to the cell right next to the ORDER TEXT column header and select <OK>.
   - For the OVERRIDE REASON file, change the cell location to the cell right next to the ORDER CHK column header and select <OK>.

23. Delete the RECNO columns in between the column headers mentioned above.

24. Sort, filter, and manipulate the data as you choose.

Performance Monitor Reports

The Performance Monitor Reports option on the Clinical Coordinator menu produces reports that can be used to monitor overall physician order entry to show whether physicians are entering their own orders.

The logic for determining whether a provider entered his or her own order has changed slightly. A provider must hold the ORES key in order to be included on the report. By checking for the existence of the ORES key certain providers, such as fee basis providers or any other outside providers that might adversely affect the overall hospital compliance with provider-entered orders, do not appear on the report.
In addition, the report previously counted the order as being entered by the provider if the ENTERED BY field of the ORDERS file also held the ORES key. Now, the ENTERED BY field and the PROVIDER field must match.

**Note:** For consistency, the ORES key should not be deleted when a user is no longer an active user on the system.

The Performance Monitor provides four reports:

- Detail report
- Summary report
- Both (includes the Detail and Summary report)
- Summary Report Totals Only (shows only the totals for the selected group of providers but does not list providers individually)

To improve accuracy of the reports, the report filters out test patients. Also, the Performance Monitor now filters out Non-VA medication entries.

Changes were made to the information displayed in the Summary and Summary Report Totals Only options to better represent the orders that the provider could have entered directly. The changes will be discussed in the sections describing those reports.

Sites can use the Summary Report Totals Only to quickly obtain the numbers that are sent to Office of Quality Management.

**Detail Report Format**

The Detail report provides a list of all orders connected with each provider known as the “universe of orders.” The universe of orders refers to all orders for which the provider has been identified in the PROVIDER field of the ORDERS file.

The Detail report is first sorted alphabetically by provider name. Under each provider’s listing, the report includes an entry for each order in the date range specified. The entries are listed earliest to most recent.

Each entry under the provider’s name includes the following information:

- order date
- order number
- patient identification
- first orderable item
- order type
- patient location
- package
- whether the order was entered by an individual having the ORES key
The first orderable item can help identify orders when more than one order was given for the same patient on the same date. Order Type indicates whether the order was submitted as a written, verbal, telephone, electronic, or policy. The ORD TYPE column will include an abbreviation indicating the type. The abbreviations are

- WRI for written orders
- TEL for telephone orders
- VER for verbal orders
- ELE for electronic orders
- POL for policy orders
### Example of a Detailed Performance Report

<table>
<thead>
<tr>
<th>Date</th>
<th>Order #</th>
<th>Patient ID</th>
<th>First Order Item</th>
<th>Type</th>
<th>Location</th>
<th>Package</th>
<th>Ores?</th>
</tr>
</thead>
<tbody>
<tr>
<td>5/3/01</td>
<td>7096701</td>
<td>H2591</td>
<td>GLUCOSE</td>
<td>ELE</td>
<td>2B MED</td>
<td>LAB SERVICE</td>
<td>Y</td>
</tr>
</tbody>
</table>

**Provider:** CPRSPROVIDER, FIVE

<table>
<thead>
<tr>
<th>Date</th>
<th>Order #</th>
<th>Patient ID</th>
<th>First Order Item</th>
<th>Type</th>
<th>Location</th>
<th>Package</th>
<th>Ores?</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/30/01</td>
<td>7096685</td>
<td>A0999</td>
<td>WRI 2B MED</td>
<td>ADVERSE REA</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4/30/01</td>
<td>7096686</td>
<td>A0999</td>
<td>WRI 2B MED</td>
<td>ADVERSE REA</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4/30/01</td>
<td>7096687</td>
<td>A0999</td>
<td>WRI 2B MED</td>
<td>ADVERSE REA</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4/30/01</td>
<td>7096688</td>
<td>A0999</td>
<td>WRI 2B MED</td>
<td>ADVERSE REA</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4/30/01</td>
<td>7096689</td>
<td>A0999</td>
<td>WRI 2B MED</td>
<td>ADVERSE REA</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4/30/01</td>
<td>7096690</td>
<td>A0999</td>
<td>WRI 2B MED</td>
<td>ADVERSE REA</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4/30/01</td>
<td>7096691</td>
<td>A0999</td>
<td>WRI 2B MED</td>
<td>ADVERSE REA</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5/1/01</td>
<td>7096692</td>
<td>B8832</td>
<td>CARDIOLOGY</td>
<td>ELE 1A(1&amp;2)</td>
<td>CONSULT/REQ</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>5/1/01</td>
<td>7096693</td>
<td>B8832</td>
<td>CARDIOLOGY</td>
<td>ELE 1A(1&amp;2)</td>
<td>CONSULT/REQ</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>5/1/01</td>
<td>7096694</td>
<td>B8832</td>
<td>CARDIOLOGY</td>
<td>ELE 1A(1&amp;2)</td>
<td>CONSULT/REQ</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>5/1/01</td>
<td>7096695</td>
<td>B8832</td>
<td>CARDIOLOGY</td>
<td>ELE 1A(1&amp;2)</td>
<td>CONSULT/REQ</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>5/3/01</td>
<td>7096699</td>
<td>B8832</td>
<td>FOOT CLINIC</td>
<td>ELE 1A(1&amp;2)</td>
<td>CONSULT/REQ</td>
<td>Y</td>
<td></td>
</tr>
</tbody>
</table>

**Provider:** CPRSPROVIDER, TEN

<table>
<thead>
<tr>
<th>Date</th>
<th>Order #</th>
<th>Patient ID</th>
<th>First Order Item</th>
<th>Type</th>
<th>Location</th>
<th>Package</th>
<th>Ores?</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/30/01</td>
<td>7096682</td>
<td>H2591</td>
<td>ABDOMEN 3</td>
<td>ELE</td>
<td>2B MED</td>
<td>RADIOLOGY/N</td>
<td>Y</td>
</tr>
<tr>
<td>4/30/01</td>
<td>7096683</td>
<td>H2591</td>
<td>1000 CAL ADA</td>
<td>ELE</td>
<td>2B MED</td>
<td>DIETETICS</td>
<td>Y</td>
</tr>
<tr>
<td>4/30/01</td>
<td>7096684</td>
<td>H2591</td>
<td>REGULAR</td>
<td>ELE</td>
<td>2B MED</td>
<td>DIETETICS</td>
<td>Y</td>
</tr>
<tr>
<td>5/3/01</td>
<td>7096696</td>
<td>T3412</td>
<td>ANKLE 3 OR</td>
<td>ELE 1A(1&amp;2)</td>
<td>RADIOLOGY/N</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>5/3/01</td>
<td>7096697</td>
<td>T3412</td>
<td>COLON BAR</td>
<td>ELE 1A(1&amp;2)</td>
<td>RADIOLOGY/N</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>5/3/01</td>
<td>7096698</td>
<td>S4423</td>
<td>COLON BAR</td>
<td>ELE 1A(1&amp;2)</td>
<td>RADIOLOGY/N</td>
<td>Y</td>
<td></td>
</tr>
</tbody>
</table>

**Provider:** CPRSPROVIDER, THIRTY

<table>
<thead>
<tr>
<th>Date</th>
<th>Order #</th>
<th>Patient ID</th>
<th>First Order Item</th>
<th>Type</th>
<th>Location</th>
<th>Package</th>
<th>Ores?</th>
</tr>
</thead>
<tbody>
<tr>
<td>5/4/01</td>
<td>7096708</td>
<td>W1321</td>
<td>DIAZEPAM</td>
<td>ELE</td>
<td>NOT 2B</td>
<td>INPATIENT M</td>
<td>Y</td>
</tr>
</tbody>
</table>

**Provider:** CPRSPROVIDER, TWO

### Performance Monitor Summary Reports Format

The CPRS Performance Monitor reports include two summary reports.

- The Summary report gives a summary for each provider selected and includes a total for the selected group on the bottom of the report.
- The Summary Report Totals Only shows only the totals for the providers selected as a group rather than listing individual providers.

The format for these reports has changed slightly.
Changes to the Summary Format

The Performance Monitor summary reports have been modified to better represent which orders physicians can enter directly and which they would not enter directly. Below is a simple capture that shows the report format.

The Provider column shows the name and the rows for Inpatient, Outpatient, and Subtotal.

The Universe column introduces the concept of a “universe of orders.” The universe of orders refers to all orders for which the provider has been identified in the PROVIDER field of the ORDERS file.

In the next column under the heading DEA/STU/POL, three new exceptions have been added to identify those orders that the provider would not be expected to enter directly. The exceptions are as follows:

• outpatient pharmacy orders for which the DEA requires a wet signature
• orders entered by students
• policy orders

For the student exception in this report, a student will be a user who has either the PROVIDER CLASS field (53.5) of the NEW PERSON file (200) set to STUDENT or has had a user class (or subclass) of STUDENT assigned through the Authorization/Subscription Utility (ASU) software.

**NOTE:** For consistency, it is recommended that you assign an expiration date for a user class rather than deleting or removing the user class from the user when the class no longer applies.

The Providers Orders column represents the number of orders that a provider could have entered directly. To get the number in this column, the DEA, student, and policy orders are subtracted from the universe of orders.

The Provider Entered column shows how many orders the provider entered directly.

The % column expresses the ratio of orders entered as a percentage (Provider entered / provider ordered). The word "NONE" may also appear in the % column. "NONE" indicates that the provider had no orders during the selected time frame, which is different than having a 0%, which indicates that they did not enter any of their own orders.
The Breakdown column shows the nature of order for those orders not directly entered by the provider. There are four groups represented here: Written (WR), Verbal (VE), Telephone (TE) and Electronically Entered (EL). Previously, policy orders were shown in this column but as stated above they are now on the exceptions side of the report.

**Summary Report**

Like the Detail Report, the Summary Report sorts the data by provider first. For each provider, it displays the total number of orders for which the provider is responsible (the universe) for the selected time period, the exceptions broken down by category (DEA/Student/Policy), the number of orders the provider could have entered, the number actually entered by the provider, the percentage (actual/possible), and the breakdown of orders not self-entered by category: WR indicates written orders, VE indicates verbal orders, TE indicates telephone orders, EL indicates electronic orders.

**Example of Summary Report**

<table>
<thead>
<tr>
<th>PROVIDER</th>
<th>PROVIDER</th>
<th>NOT SELF ENTERED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>UNIVERSE</td>
<td>DEA/STU/POL ORDERS</td>
</tr>
<tr>
<td>CPRSPROVIDER,TEN</td>
<td>Inpt Tot 26</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>Outpt Tot 5</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Sub-tot 31</td>
<td>31</td>
</tr>
<tr>
<td>CPRSPROVIDER,TWO</td>
<td>Inpt Tot 5</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Outpt Tot 34</td>
<td>34</td>
</tr>
<tr>
<td></td>
<td>Sub-tot 39</td>
<td>39</td>
</tr>
<tr>
<td>INPT</td>
<td>31</td>
<td>0/0/0</td>
</tr>
<tr>
<td>OUTPT</td>
<td>39</td>
<td>0/0/0</td>
</tr>
<tr>
<td>TOTAL</td>
<td>70</td>
<td>0/0/0</td>
</tr>
</tbody>
</table>

**Summary Report Totals Only**

The Summary Report Totals Only has the same format as the Summary report, except that it does not show any individual provider information. It displays a simple summary for the selected providers as a group.

**An example of a Summary Report Totals Only is shown**

<table>
<thead>
<tr>
<th>PROVIDER</th>
<th>PROVIDER</th>
<th>NOT SELF ENTERED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>UNIVERSE</td>
<td>DEA/STU/POL ORDERS</td>
</tr>
<tr>
<td>INPT</td>
<td>56</td>
<td>0/3/0</td>
</tr>
<tr>
<td>OUTPT</td>
<td>78</td>
<td>1/2/0</td>
</tr>
<tr>
<td>TOTAL</td>
<td>134</td>
<td>1/5/0</td>
</tr>
</tbody>
</table>

**Selecting Criteria for the Performance Monitor Report**

To create a CPRS Performance Monitor Report, select Performance Monitor Report (PM) from the CPRS Configuration (Clin Coord) Option menu. Then use the steps below to define the report criteria.
1. **Enter starting date.** You may type in a specific date in standard month-day-year format (APR 30, 2001) or a specific number of days from today using the standard “T-minus” format (T-7 for all orders generates one week ago or less).

2. **Enter ending date.** You may type in a specific date in standard month-day-year format (MAY 07, 2001) or specific number of days from today using the standard “T-minus” format (T for all orders generates through today). You may not select a date that is before the start date you entered in Step 1. In this field, you are limited to the dates after the start date you selected and the current date (today).

3. **Do you want ALL providers to appear on this report?** The default is “Yes.” Type “NO” to select specific providers.

4. **Select provider.** This prompt appears only if you select “NO” in Step 3. Type in the name of the provider you wish to select.

5. **Select another provider.** This prompt appears only if you select “NO” in step 3. Type in the name of the next provider you wish to select. This prompt will repeat each time you select an additional provider. To end provider selection, press ENTER on a blank “Select another provider” prompt.

6. **Select order category.**
   - A  All Orders
   - P  Pharmacy orders only

Type an “A” to select all orders or type a “P” (default) to select pharmacy orders only.

7. **Select patient status.**
   - I  Inpatient
   - O  Outpatient
   - B  Both

Type an “I” to select inpatient orders. Type an “O” to select only outpatient orders. Type a “B” (default) to select both inpatient and outpatient orders.

8. **Select report.**
   - S  Summary (includes provider details)
   - D  Detail (includes order details)
   - B  Both (Summary & Detail)
   - T  Summary Report Totals Only (no provider details)

Type an “S” (default) to select the summary report. Type a “D” to select the detail report. Type a “B” to select both versions of the report. Type a “T” to get a Summary Report Totals Only.

9. **DEVICE: HOME/.** The default is HOME, which will print the report to your computer screen. Type two question marks (“??”) to view a list of printers available to you. You can select a printer and send the report. This report can also be queued.
Example of Selecting the Criteria for a CPRS Performance Monitor Report

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 ...
PM     Performance Monitor Report

Select CPRS Configuration (Clin Coord) Option: PM  Performance Monitor Report
Enter starting date:  6/1/01  (JUN 01, 2001)
Enter ending date: T  (SEP 21, 2001)
Do you want ALL providers to appear on this report? Y// NO
Select provider: CPRSPROVIDER,TEN   CLA   PHYSICIAN
Select another provider: CPRSPROVIDER,TWO  KMA   COMPUTER SPECIALIST
Select another provider: CPRSPROVIDER,FIVE   JL
Select another provider: CPRSPROVIDER,SIXTY  MW   CHIEF, MEDICAL SERVICE
Select another provider: CPRSPROVIDER,EIGHT  TR   PHYSICIAN
Select another provider:

Select one of the following:
A   All orders
P   Pharmacy orders only

Select order category: P// Pharmacy orders only

Select one of the following:
I   Inpatient
O   Outpatient
B   Both

Select patient status: B// Both

Select one of the following:
S   Summary (includes provider details)
D   Detail (includes order details)
B   Both (Summary & Detail)
T   Summary Report Totals Only (no provider details)

Select report: S// Summary (includes provider details)
DEVICE: HOME//   ANYWHERE
7. Copy/Paste Reports and Parameters

This section discusses several areas about how CPRS tracks text that is pasted into clinical documents. Specifically, it addresses:

- What does CPRS define as copied and pasted text and which areas within CPRS where text or data that is copied will be tracked?
- What parameters govern copy/paste actions?
- What reports are available and what is contained in the reports.

What does CPRS Define as a Copy and Paste?

CPRS can recognize several sources from Vista or CPRS that users might copy data from and then paste it into a clinical document. The areas are the following:

- Cover Sheet Tab (Active Problems, Allergies / Adverse Reactions, Postings, Active Medications, Clinical Reminders, Lab Results, Appointments/Visits/Admissions),
- Meds Tab (Med details, Med admin report)
- Notes Tab (Note details, View Template Notes)
- Labs (Chart details)
- Patient Selection (Alert Comments)
- Problems Tab (Problem details)
- View Menu/Information (Demographics, Primary Care, Flags, Reminders, Postings)
- Vitals (Details)
- Consults (Consults, Consult Details, Display SF &513)
- Edit/Resubmit a Cancelled Consult (Cancellation Comments, Added Comments)
- Edit and resubmit a cancelled procedure (Cancellation Comments, Added Comments)
- Reminders (Clinical Maintenance, Education, Inquiry, Procedure Report, Women Health Notification, Primary Care, Insurance Subscriber Name)
- Progress Note Properties (Consult Details)
- Boilerplate Text (Boilerplate Text Preview)
- Consult Medicine Result (Details)
- Templates (Preview)
- Orders Tab (Invalid Action Warning, Order Details, Order results, Order Results History)
- Lab Orders (Lab Procedure, Changed Orders)
- Medication Outlines (Restrictions/Guidelines)
- Signature on Chart (Changed Orders)
- Release Orders to Service(s) (Changed Orders)
- Sign Orders (Changed Orders)
- Display Patient Info
- Release to Service (Changed Orders)
- Notifications (IMAGING REQUEST CHANGED)
- Document Herbal/OTC/Non-VA Medications (Restrictions/Guidelines)
- Review Sing Changes (Changed Orders)
• Enter Allergy or Adverse Reaction (Current Allergies/Adverse Reactions, View previous comments, View previous observations)
• Graph(Graph Results, Label Clicks, Selected Items, Details)
• Graph Defines (Views and Lab Groups)
• DC Summary Tab (Summaries)
• Surgery Tab (Surgery documents)
• Reports Tab (Reports)

**Copy/Paste Parameters in VistA**

This parameter defines how pasted text is displayed in a note:

• **Copy/Paste Identifier (ORQQTIU COPY/PASTE IDENT)**: This parameter is defined by the user in CPRS using Tools | Options | Notes. The user can choose Underline, Italics, Bold, or Highlight (with its color selection) or any combination of the four attributes.

Several parameters that determine what is considered text that is pasted into CPRS are set under the TIU BASIC EDIT option:

• **Minimum Copy/Paste**: This parameter determines the number of words necessary for CPRS to consider the text to be pasted and mark it. For example, if this number is set at 20 words and the user pastes only 19, CPRS will not display that as pasted text. The default is 5 words unless changed by your site.

• **Copy/Paste Verify Percentage**: Because providers often edit text after it is pasted, this parameter enables sites to determine what percentage of the original paste must be in the document to be considered pasted. For example, if this percentage is set at 85 percent and the user pastes some text but then edits it so that only 75 percent of the original text remains, it will not display as pasted text. The default is 90% unless changed by your site.

• **Days to Store Copy Text**: Sites can use this parameter to specify how many days text that was copied from within VistA should be stored so that it can be considered a paste. If the sites set it for 7 days, the text will be stored for 7 days and compared to any paste that occurs into a clinical document. For example, this determines how long the copied text is stored. If this is set at 5 days, the text that was copied from VistA will be stored and compared for a past for up to 5 days to show that it was pasted. The default is 7 days unless you site changes it.

• **Userclass to View Copy/Paste**: With this parameter, sites can designate which user classes can view pasted text in clinical documents. Sites can add user classes that can view the pasted text to the two default groups: Chief of MIS and Privacy Act Officer. The default groups are Chief of MIS and Privacy Act Officer. Those who can view the pasted text will see it in their own notes if they create them. The items in the pane will read “New” until the note is saved and will then be replaced with the date/time. Also, the text they paste will only display as such when pasted, but not when the note is then further edited. It will again show as pasted text after the note is saved.

To exclude a note title from being tracked by the copy/paste feature, CACs or others can set the following by using the TIU DOCUMENT PARAMETER EDIT option:

• **Exclude from Copy/Paste**: This parameter allows sites to exclude the document titles they designate from being tracked by the copy and paste features. No title are excluded unless your site adds them.

Clinical Application Coordinators (CACs) set the values for these parameters.
Detailed and Summary Copy/Paste Reports

Two reports enable sites to review the items that have been pasted into clinical documents:

- Copy/Paste Tracking Detail Report: The detail report lists for the dates the user specified and whether the report is for all patients or an individual patient. The entry for each paste then contains the following information:
  - Pasted Date/Time
  - Copy Patient
  - Paste Patient
  - Copy Date/Time
  - Copy Author
  - Copy Document Title
  - Paste Patient
  - Paste Date/Time
  - Paste Provider
  - Paste Document Title
  - Paste Percentage
  - Actual Percentage
  - Original Pasted Text

The report would look something like the following although this is for a single note

<table>
<thead>
<tr>
<th>PASTED DATE/TIME</th>
<th>COPY PATIENT</th>
<th>PASTE PATIENT</th>
<th>COPY DATE/TIME</th>
<th>COPY AUTHOR</th>
<th>COPY DOCUMENT TITLE</th>
<th>PASTE DATE/TIME</th>
<th>PASTE PROVIDER</th>
<th>PASTE DOCUMENT TITLE</th>
<th>PSTPCT</th>
<th>ACTPCT</th>
<th>ORIGINAL PASTED TEXT</th>
</tr>
</thead>
<tbody>
<tr>
<td>OCT 23, 2013@10:29:09</td>
<td>BCMA,FIFTY-PATIENT</td>
<td>BCMA,FIVE-PATIENT</td>
<td>SEP 10, 2008@14:50</td>
<td>CPRSPROVIDER,NINE</td>
<td>ADVANCE DIRECTIVE</td>
<td>OCT 23, 2013@08:28</td>
<td>CPRSPROVIDER,THREE</td>
<td>ADVANCE DIRECTIVE</td>
<td>100%</td>
<td>100%</td>
<td>*** ADVANCE DIRECTIVE Has ADDENDA ***</td>
</tr>
</tbody>
</table>

This is a new Advanced Directive for this patient. BCMA,FIFTY-PATIENT has requested that he not be resuscitated in the event that he goes into respiratory distress. See attached scanned document for patient's signature.

/es/ NINE CPRSPROVIDER
<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Signed By</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>09/10/2008</td>
<td>14:51</td>
<td>Three CPRS Provider</td>
<td></td>
</tr>
<tr>
<td>09/10/2008</td>
<td>14:54</td>
<td></td>
<td>COMPLETED</td>
</tr>
<tr>
<td>09/10/2008 ADDENDUM</td>
<td></td>
<td></td>
<td>STATUS:</td>
</tr>
</tbody>
</table>
• Copy/Paste Tracking Summary Report: The summary report simply lists the number of pastes for the defined date range and the total number of notes as shown below:

```
SUMMARY COPY/PASTE REPORT
FOR ALL PATIENTS
FROM AUG 24, 2013 TO OCT 23, 2013

TOTAL PASTES FOR DATE RANGE: 57
TOTAL NOTES FOR DATE RANGE: 232
```
9. HIPAA Code Set Versioning (CSV)

Code set versioning (CSV) modifies VistA to comply with the Health Insurance Portability and Accessibility Act (HIPAA) stipulations that diagnostic and procedure codes used for billing purposes must be the codes that were applicable at the time the service was provided. Because the codes change, CPRS currently checks ICD and CPT code validity as of a specified date when codes are entered, when a new code set is implemented, and whenever Clinical Application Coordinators (CACs) or IRM personnel choose to run the option.

CPRS GUI users will see indicators for inactive codes on the Cover Sheet, Problems tab, Encounter form, and in Clinical Reminders (although the Clinical Reminders changes may be less apparent).

In the CPRS List Manger software, a protocol and an option have been created to identify potential problems with inactive diagnoses or procedures codes in consults or procedures quick orders. These provisional diagnoses are predefined in Consult and Procedure Quick Order Dialogs.

The first protocol, ORCM GMRC CSV EVENT, as shown in the capture below, is a background job that is activated when a new ICD9 code set version is implemented. This protocol checks consults and procedures quick orders for inactive codes or codes that will become inactive. It then puts the information in a MailMan message that is sent to the mail group ORCM CSV EVENT.

```
NAME: ORCM GMRC CSV EVENT
ITEM TEXT: Quick order code set version event
TYPE: action
CREATOR: CPRSPROVIDER,TEN
PACKAGE: ORDER ENTRY/RESULTS REPORTING
DESCRIPTION: This protocol will be invoked by the ICD event protocol upon installation of a new code set version. The protocol will be responsible for generating a mail message to a mail group containing any consult or procedure quick orders that have provisional diagnoses with inactive ICD9 codes or codes that will be inactivated in the future.
ENTRY ACTION: D CSVPEP^ORCMGMCK
TIMESTAMP: 59239,49834
```

CACs can manually run the option, ORCM GMRC CSV CHECK, at any time to check for any inactive consults or procedures codes in quick orders. Running this option will create a report with provisional diagnoses or procedure codes in consults and procedure quick orders. Here is the description of the option:

```
NAME: ORCM GMRC CSV CHECK
MENU TEXT: Review Quick Orders for Inactive ICD9 Codes
TYPE: run routine
CREATOR: CPRSPROVIDER,ONE
PACKAGE: ORDER ENTRY/RESULTS REPORTING
DESCRIPTION: This option may be run at any time to produce a report of Consult or Procedure quick orders that have a provisional diagnosis code that has been inactivated or will be inactivated in the future.
```
Running this option will produce a report such as the following

Select OPTION NAME: ORCM

1   ORCM ACTIONS Enter/edit actions run routine
2   ORCM DISABLE Disable/Enable order dialogs run routine
3   ORCM GMRC CSV CHECK Review Quick Orders for Inactive ICD9 Codes run routine
4   ORCM LIST ORDER MENUS List Primary Order Menus run routine
5   ORCM MENU Enter/edit order menus run routine

Press <RETURN> to see more, '^' to exit this list, OR

CHOOSE 1-5: 3   ORCM GMRC CSV CHECK Review Quick Orders for Inactive ICD9 Codes run routine

Review Quick Orders for Inactive ICD9 Codes

DEVICE: HOME// ANYWHERE Right Margin: 80//

Code Set Version  review of Consult/Procedure Quick Orders Page: 1

The following Consult or Procedure quick orders were found that currently have a provisional diagnosis code that is inactive. These should be edited as soon as possible to reduce interruption of ordering these quick orders.

Quick order name: ZZJFR CARD CSLT QO IEN: 1188
Provisional Diagnosis code: 633.2

Quick order name: ORWDQ 3242B943 IEN: 1621
Provisional Diagnosis code:

Quick order name: ORWDQ 929E4ADA IEN: 1627
Provisional Diagnosis code:
# CPRS Files

<table>
<thead>
<tr>
<th>File #</th>
<th>File Name</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>44</td>
<td>HOSPITAL LOCATION</td>
<td>This file contains information about hospital locations.</td>
</tr>
<tr>
<td>100</td>
<td>ORDER</td>
<td>This is the file of orders/requisitions made for any package through the Order Entry Option (OR).</td>
</tr>
<tr>
<td>100.01</td>
<td>ORDER STATUS</td>
<td>This file contains the possible statuses that may be associated with an order.</td>
</tr>
<tr>
<td>100.02</td>
<td>NATURE OF ORDER</td>
<td>This file should not be added to or deleted from. It determines the actions that are to be taken based on the nature of an order or change to an order. The file is initially populated with data that seems the most appropriate. Sites may find it necessary to change some of the fields for entries in this file.</td>
</tr>
<tr>
<td>100.03</td>
<td>ORDER REASON</td>
<td>This file is used to define the possible reasons for DC/ing/canceling an order. The entries are identified by package so that each package can have its own set of reasons. Sites may wish to modify the entries in this file to fit their needs. It is important to maintain the correct links to the Radiology Reason file if modifications are made. These links are maintained in the CODE field. For Radiology Reasons, the code field is the internal # of the Radiology Reason file, followed by the characters RA. This file points to the Nature of Order file. This relationship is what identifies the appropriate actions to take for any DC reason.</td>
</tr>
<tr>
<td>100.05</td>
<td>ORDER CHECK INSTANCES</td>
<td>This file contains records of order checks that were presented to the user at the time of accepting or signing an order.</td>
</tr>
<tr>
<td>100.2</td>
<td>OE/RR PATIENT EVENT FILE</td>
<td>This file is used by CPRS to track what happened to a patient's orders as a result of an event, such as an MAS movement or returning from the OR.</td>
</tr>
<tr>
<td>100.22</td>
<td>OE/RR PRINT FIELDS</td>
<td>Entries in this file with an internal number &gt;1000 have been exported with the OE/RR package. Every time a new version of OE/RR is installed, the entries above are removed and overwritten. If you want to use one of these exported entries, transfer the entry to a number less than 1000 and give it a new name so that it can be differentiated from the exported entry.</td>
</tr>
<tr>
<td>100.23</td>
<td>OE/RR PRINT FORMATS</td>
<td>Entries in this file with an internal number &gt;1000 have been exported with the OE/RR package. Every time a new version of OE/RR is installed, the entries above 1000 are removed and overwritten. If you want to use one of these exported entries, transfer the entry to a number less than 1000 and give it a new name so that it can be differentiated from the exported entry.</td>
</tr>
<tr>
<td>100.24</td>
<td>OE/RR PT SEL COMBO</td>
<td>This file is used by CPRS to store a user's &quot;Combination&quot; default patient selection settings. It</td>
</tr>
<tr>
<td>Section</td>
<td>Description</td>
<td></td>
</tr>
<tr>
<td>-----------</td>
<td>-----------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>100.4</td>
<td><strong>OE/RR ERRORS</strong> This file contains a record of events that failed or errored out during the use of OE/RR. This file is not to be edited. It is for debugging purposes. Entries in this file are automatically purged. The life of an entry depends on the parameter ERROR DAYS in the Parameters file.</td>
<td></td>
</tr>
<tr>
<td>100.5</td>
<td><strong>OE/RR RELEASE EVENTS</strong> This file contains the locally-defined events that can release delayed orders within each division. It is strongly recommended that this file not be edited with File Manager. Please use the edit options provided within CPRS.</td>
<td></td>
</tr>
<tr>
<td>100.6</td>
<td><strong>OE/RR AUTO-DC RULES</strong> This file contains the locally-defined rules that control if and when active orders are automatically discontinued within each division. It is strongly recommended that this file not be edited using File Manager. Please use the edit options provided in CPRS.</td>
<td></td>
</tr>
<tr>
<td>100.7</td>
<td><strong>OE/RR EPCS PARAMETERS</strong> This file stores the electronic Prescribing of Controlled Substances (e-PCS) parameters used by CPRS.</td>
<td></td>
</tr>
<tr>
<td>100.8</td>
<td><strong>ORDER CHECKS</strong> This file contains the Order Checks used in CPRS.</td>
<td></td>
</tr>
<tr>
<td>100.9</td>
<td><strong>OE/RR NOTIFICATIONS</strong> This file contains data used to generate notifications. Packages determine if a notification should be sent, then send the patient ID and notification ID (IEN in this file) to order entry routines. Based on the notification IEN, data from this file is used to generate the notification and help determine its recipients.</td>
<td></td>
</tr>
<tr>
<td>100.98</td>
<td><strong>DISPLAY GROUP</strong> This file allows orders to be clustered in groups other than by package. It is similar in structure to the OPTION File (19). This allows display groups to be arranged in a hierarchy. The main entry in this file should be ALL SERVICES. Other entries should be logically subordinate to the ALL SERVICES entry.</td>
<td></td>
</tr>
<tr>
<td>100.99</td>
<td><strong>ORDER PARAMETERS</strong> This file contains site specific parameters for OE/RR. It has only one entry, Hospital.</td>
<td></td>
</tr>
<tr>
<td>101</td>
<td><strong>PROTOCOL</strong> This file contains the orderables and methods for accomplishing orders (protocols) within CPRS.</td>
<td></td>
</tr>
<tr>
<td>101.41</td>
<td><strong>ORDER DIALOG</strong> This file contains the information needed to define how to prompt for each order, what values are acceptable, etc.</td>
<td></td>
</tr>
<tr>
<td>101.42</td>
<td><strong>ORDER URGENCY</strong> This file contains the urgencies to assign to an order.</td>
<td></td>
</tr>
<tr>
<td>101.43</td>
<td><strong>ORDERABLE ITEMS</strong> This file contains the orderable items to use in CPRS.</td>
<td></td>
</tr>
<tr>
<td>101.52</td>
<td><strong>ORDER DEA ARCHIVE INFO FILE</strong> This file contains the Drug Enforcement Agency (DEA) required prescription information for outpatient controlled substances at the time of signature. This</td>
<td></td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
<td>Details</td>
</tr>
<tr>
<td>------</td>
<td>--------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>860.1</td>
<td>ORDER CHECK PATIENT ACTIVE DATA FILE</td>
<td>This file temporarily holds patient data that is used to trigger rules. This file is only edited by the compiled inferencing routine.</td>
</tr>
<tr>
<td>860.2</td>
<td>ORDER CHECK RULE</td>
<td>This file holds the rules that determine the conditions necessary for a notification or some other action to be performed. Rules consist of a set of Conditional Elements and a set of Element relationship expressions. When an element is found to be TRUE for a patient, it is compared to the other TRUE elements for the patient by evaluating all the Element relation expressions that contain it. If an expression is found to be TRUE then all of the actions defined for that relation are performed.</td>
</tr>
<tr>
<td>860.3</td>
<td>ORDER CHECK ELEMENT</td>
<td>This file holds the definitions for the rule elements. A rule element consists of a set of Boolean expressions. This takes the form of Data Field -&gt; Comparison Operator -&gt; 1 or 2 Comparison fields depending on the Operator.</td>
</tr>
<tr>
<td>860.4</td>
<td>ORDER CHECK DATA FIELD</td>
<td>This file holds a list of all data fields known to the order check system. It is also the link to the metadictionary, where the Order check system goes to get navigation and data type information.</td>
</tr>
<tr>
<td>860.5</td>
<td>ORDER CHECK DATA SOURCE</td>
<td>This file is just for documentation so the rule editor can keep data fields manageable.</td>
</tr>
<tr>
<td>860.6</td>
<td>ORDER CHECK DATA CONTEXT</td>
<td>This file keeps a list of data contexts. A rule event/element can only compare data fields from the same context. A context may involve several data sources. For example the data context of 'HL7' has a data source for each hl7 segment.</td>
</tr>
<tr>
<td>860.7</td>
<td>ORDER CHECK PATIENT RULE EVENT</td>
<td>This is a short term data archive that holds historical information about triggered rules.</td>
</tr>
<tr>
<td>860.8</td>
<td>ORDER CHECK COMPILER FUNCTIONS</td>
<td>This file holds names of national terms used for order checking; these must be matched to local terms from the Orderable Item or Laboratory Test files.</td>
</tr>
<tr>
<td>861</td>
<td>ORDER CHECK RAW DATA LOG</td>
<td>This file is used primarily by developers and IRM staff to troubleshoot HL7 and other related problems.</td>
</tr>
</tbody>
</table>

863  OCX MDD CLASS  Metadictionary classes
863.1 OCX MDD APPLICATION  Metadictionary file
863.2 OCX MDD SUBJECT  Metadictionary
863.3 OCX MDD LINK  Metadictionary
863.4 OCX MDD ATTRIBUTE  Metadictionary
863.5 OCX MDD VALUES  Metadictionary
<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>863.6</td>
<td>OCX MDD METHOD</td>
<td>Metadictionary</td>
</tr>
<tr>
<td>863.7</td>
<td>OCX MDD PUBLIC FUNCTION</td>
<td>Metadictionary</td>
</tr>
<tr>
<td>863.8</td>
<td>OCX MDD PARAMETER</td>
<td>Metadictionary</td>
</tr>
<tr>
<td>863.9</td>
<td>OCS MDD CONDITION/FUNCTION</td>
<td>Metadictionary</td>
</tr>
<tr>
<td>864</td>
<td>OCX MDD SITE PARAMETERS</td>
<td>Metadictionary</td>
</tr>
<tr>
<td>864.1</td>
<td>OCX MDD DATATYPE</td>
<td>Metadictionary</td>
</tr>
<tr>
<td>8989.5</td>
<td>PARAMETERS</td>
<td></td>
</tr>
<tr>
<td>8989.51</td>
<td>PARAMETER DEFINITION</td>
<td></td>
</tr>
<tr>
<td>8989.52</td>
<td>PARAMETER TEMPLATE</td>
<td></td>
</tr>
<tr>
<td>8989.53</td>
<td>PARAMETER ENTITY</td>
<td></td>
</tr>
</tbody>
</table>
12. Cross-References

The following unique cross-references are included in CPRS.

**ORDER File (#100)**

AC  This is the individual object of the order. Depending on the parent file entry, this would be the Patient, Control Point, etc.

AV  Allows retrieval of orders associated with a patient MAS movement.

AS  Used to identify unsigned orders.

AW  For sorting by display group

AO  Allows retrieval of patients for whom this item has been ordered.

ACT  Allows retrieval of orders by patient, inverse-date of action, and display group.

AE  Allows retrieval of orders by expiration date; set only for orders that have not already completed, expired, or been discontinued or canceled.

**OE/RR PATIENT (100.2)**

AHLD  Locks patient orders to prevent simultaneous editing

**NOTIFICATIONS (100.9)**

E  Used to look-up users/recipients who have indicated they want to receive the notification.

**ORDER DIALOG (101.41)**

DAD  This MUMPS-type cross-reference allows retrieval of “child” prompts in sequence by parent.

ATXT  Used to build order text.

AC  The “AC” cross-reference puts in window controls in order by creation sequence

**ORDER URGENCY (101.42)**

**ORDER CHECK PATIENT ACTIVE DATA (860.1)**

TIME

**ORDER CHECK PATIENT ACTIVE DATA (860.2)**

ATELM

**ORDER CHECK PATIENT ACTIVE DATA (860.3)**

APGM

**ORDER CHECK DATA CONTEXT (860.7)**
OCX MDD CLASS (863)
ACLS Parent of Subclass
APAR Index to rapidly find the parameters in this class
MN Used to rapidly look up a class by its mnemonic
UID Enables rapid lookup of an object by its UID

OCX MDD APPLICATION (863.1)
APAR Index to rapidly find the parameters associated with this class
SYN Look up the application by its synonym
^^TRIGGER^863.1^4 Triggers a unique ID for this object

OCX MDD SUBJECT (863.2)
APAR Index to rapidly find the parameters in this class
UID Enables rapid lookup of an object by its UID
SYN This index supports a synonym lookup of the subject

OCX MDD LINK (863.3)
AC Rapidly identify links associated with a descendant subject
AE Rapidly identify links associated with a parent menu group
AD Rapidly find links associated with an attribute
ALO
F
SYN This index supports synonym lookup
APAR Index to rapidly find the parameters associated with this class
UID Enables rapid lookup of an object by its UID

OCX MDD ATTRIBUTE (863.4)
APAR Rapidly identify parameters associated with this class
AP Quickly find the offspring of an attribute
UID Enables rapid lookup of an object by its ID

OCX MDD VALUES (863.5)
AC Rapidly associate a list of values with a context name
APAR Rapidly identify all parameters associated with this class
**OCX MDD METHOD (863.6)**

- **AC**: Rapidly associate a list of values with a context name
- **APAR**: Rapidly identify all parameters associated with this class
- **UID**: Enables rapid lookup of an object by its ID

**OCX MDD PUBLIC FUNCTION (863.7)**

- **^^TRIGGER^863.6^4**: Triggers a unique ID
- **APAR**: Rapidly identify all parameters associated with this class
- **UID**: Enables rapid lookup of an object by its ID

**OCX MDD PARAMETER (863.8)**

- **^^TRIGGER^863.8^3**: Triggers a unique object ID
- **DD**: Identifies the set of "primary" parameters; i.e., those which define other parameters
- **UID**: Enables rapid location of an object by its ID
- **APAR**: Rapidly identify all parameters associated with this file

**OCS MDD CONDITION/FUNCTION (863.9)**

- **^^TRIGGER^863.9^3**: Triggers a unique ID for an object
- **AFUN**: Rapidly identify conditions associated with a certain function
- **APAR**: Rapidly identify all parameters associated with this class
- **SYN**: This index supports synonym lookup
- **UID**: Enables rapid lookup of an object by its ID
13. **External Relations**

Before CPRS 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>Minimum Version</th>
</tr>
</thead>
<tbody>
<tr>
<td>Automated Information Collection System (AICS)</td>
<td>V 3.0</td>
</tr>
<tr>
<td>Adverse Reaction Tracking (ART)</td>
<td>V 4.0</td>
</tr>
<tr>
<td>Authorization/Subscription Utility (ASU)</td>
<td>V 1.0</td>
</tr>
<tr>
<td><strong>Consolidated Mail Outpatient Pharmacy (CMOP)</strong></td>
<td>V 2.0</td>
</tr>
<tr>
<td>*Consult/Request Tracking</td>
<td>V 2.5</td>
</tr>
<tr>
<td>Dietetics</td>
<td>V 5.0</td>
</tr>
<tr>
<td>Gen. Med. Rec.-Vitals</td>
<td>V. 3.0</td>
</tr>
<tr>
<td>Health Summary</td>
<td>V. 2.7</td>
</tr>
<tr>
<td>HL7</td>
<td>V. 1.6</td>
</tr>
<tr>
<td>Integrated Funds Distribution, Control Point Activity, Accounting &amp; Procurement (IFCAP)</td>
<td>V. 4.0</td>
</tr>
<tr>
<td>*Inpatient Medications (IM)</td>
<td>V. 4.5</td>
</tr>
<tr>
<td>Integrated Billing (IB)</td>
<td>V. 2.0</td>
</tr>
<tr>
<td>Kernel</td>
<td>V. 8.0</td>
</tr>
<tr>
<td>Laboratory</td>
<td>V. 5.2</td>
</tr>
<tr>
<td>Lexicon Utility</td>
<td>V. 2.0</td>
</tr>
<tr>
<td>National Drug File (NDF)</td>
<td>V. 3.17</td>
</tr>
<tr>
<td>*Order Entry/Results Reporting (OE/RR)</td>
<td>V. 2.5</td>
</tr>
<tr>
<td>*Outpatient Pharmacy</td>
<td>V. 6.0</td>
</tr>
<tr>
<td>Patient Care Encounter (PCE)</td>
<td>V. 1.0</td>
</tr>
<tr>
<td>Pharmacy Data Management (PDM)</td>
<td>V. 1.0</td>
</tr>
<tr>
<td>Problem List</td>
<td>V 2.0</td>
</tr>
<tr>
<td>Radiology/Nuclear Medicine</td>
<td>V 4.5</td>
</tr>
<tr>
<td>RPC Broker</td>
<td>V 1.1</td>
</tr>
<tr>
<td>Registration</td>
<td>V 5.3</td>
</tr>
<tr>
<td>Scheduling</td>
<td>V 5.3</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. 21.0</td>
</tr>
<tr>
<td>Visit Tracking</td>
<td>V 2.0</td>
</tr>
</tbody>
</table>

* If the package is installed on your system prior to CPRS, the required version and patches must be installed. If they are not installed, the package will be installed with CPRS.

** Patch PSX*2*3 is required if you have CMOP installed.
Database Integration Agreements

Database Integration Agreements (DBIA) are available on the DBA menu on MailMan.

Callable routines, entry points, Application Program Interfaces (APIs), and Remote Procedure Calls (RPCs) can be subscribed to. Lists of these will be available on the DBA menu on the Forum.
14. **CPRS Remote Procedure Calls (RPCs)**

A remote procedure call (RPC) is M code that can take optional parameters to do some task and then return either a single value or an array to the client application. In the message sent to VISTA, client applications will include the name of the requested RPC to be activated. These RPCs will be registered in the REMOTE PROCEDURE file (#8994) containing available and authorized RPCs.

The following four “key” fields of the REMOTE PROCEDURE file (#8994) must be populated

<table>
<thead>
<tr>
<th>Field Name</th>
<th>Entry</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME (#.01)</td>
<td>Required</td>
<td>The name that identifies the RPC (this entry should be namespaced in the package namespace).</td>
</tr>
<tr>
<td>TAG (#.02)</td>
<td>Required</td>
<td>The tag at which the remote procedure call begins.</td>
</tr>
<tr>
<td>ROUTINE (#.03)</td>
<td>Required</td>
<td>The name of the routine which should be invoked to start the RPC.</td>
</tr>
<tr>
<td>RETURN VALUE TYPE (#.04)</td>
<td>Required</td>
<td>This indicates to the Broker how to format the return values. For example, if RETURN VALUE TYPE is WORD PROCESSING, then each entry in the returning list will have a &lt;CR&gt;&lt;LF&gt; (&lt;carriage return&gt;&lt;line feed&gt;) appended.</td>
</tr>
</tbody>
</table>

**How to Register an RPC**

Because of security concerns, all RPCs run via the RPC Broker and used internally by any VISTA package must be “registered” to each package application that uses those RPCs. The Broker on the server will check each RPC that it receives whether or not the RPC is registered to the application that the user is running on the client workstation. If the RPC has not been registered, the Broker will reject it and send an appropriate error message to the client. It is highly desirable to make RPCs as generic as possible so they can be utilized by as many packages as possible. Therefore, an individual RPC can be registered to and used by multiple packages.

To register an RPC to a package, the following procedures must be performed:

1. Select the entry in the OPTION file (#19) which corresponds to your client/server application.
2. Verify the client/server application TYPE field is a B type option.
   
   **NOTE:** The OPTION TYPE "B" represents a Broker client/server type option.

3. In the RPC multiple for this option type, the following information is entered:

<table>
<thead>
<tr>
<th>Field Name</th>
<th>Entry</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>RPC (#.01)</td>
<td>Required</td>
<td>This field is used to enter a pointer to the REMOTE PROCEDURE file (#8994).</td>
</tr>
<tr>
<td></td>
<td></td>
<td>This field links the remote procedure call in the REMOTE PROCEDURE file (#8994) to the package option.</td>
</tr>
<tr>
<td>RPKETY (#1)</td>
<td>Optional</td>
<td>field is used to restrict the use of a remote procedure call to a particular package option. The RPKETY field is a free-text pointer to the SECURITY KEY file (#19.1).</td>
</tr>
<tr>
<td>RULES (#2)</td>
<td>Optional</td>
<td>This field is used to enter M code that is executed when an RPC request is made to verify whether the request should be honored.</td>
</tr>
</tbody>
</table>
4. You provide access to the option of your client/server application the same way as any other in VISTA. You can even place it on the System Command Options menu [XUCOMMAND], if you want everyone to have it, however, don’t forget to rebuild the menu trees!

**NOTE:** RPC to package registration can be automated via the KIDS install of the package.

### Exported Remote Procedure Calls (RPCs)

**NOTE:** This list is not complete.

<table>
<thead>
<tr>
<th>RPC</th>
<th>Description</th>
<th>Tag</th>
<th>Routine</th>
<th>Return Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>ORALEAPI REPORT</td>
<td>REPORT ORALEAPI ARRAY</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>This RPC returns TIU and OR notification data from the ALERT TRACKING file for a given date range.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>INPUT PARAMETER: SDT</td>
<td>PARAMETER TYPE: LITERAL</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>REQUIRED: NO</td>
<td>SEQUENCE NUMBER: 1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DESCRIPTION:</td>
<td>This is the starting date of the date range in FM format.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>INPUT PARAMETER: EDT</td>
<td>PARAMETER TYPE: LITERAL</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>REQUIRED: NO</td>
<td>SEQUENCE NUMBER: 2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DESCRIPTION:</td>
<td>This is the ending date of the date range in FM format.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>INPUT PARAMETER: TYP</td>
<td>PARAMETER TYPE: LITERAL</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>REQUIRED: NO</td>
<td>SEQUENCE NUMBER: 3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DESCRIPTION:</td>
<td>This is the type of report data requested. Default data returned is both OR and TIU alert data. &quot;OR&quot; or &quot;TIU&quot; if only one type is requested.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RETURN PARAMETER DESCRIPTION:</td>
<td>Data returned: IEN^RECIPIENT^TITLE^SERVICE/SECTION^TIME^DATE^NOTIFICATION^DIVISION[LOCATION]</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ORB DELETE ALERT</td>
<td>DEL ORB3FUP1 SINGLE VALUE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>This function deletes an alert.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Function returns the current user's default patient list.

**ORQPT PATIENT TEAM PROVIDERS**

Function returns a list of providers linked to a patient via teams.

**ORQPT PROVIDER PATIENTS**

Function returns an array of patients linked to a provider/user.

**ORQPT PROVIDERS**

Function returns an array of providers.

**ORQPT SPECIALTIES**

Function returns an array of treating specialties.

**ORQPT SPECIALTY PATIENTS**

Function returns an array of patients linked to a treating specialty.

**ORQPT TEAM PATIENTS**

Function returns an array of patients on a team.

**ORQPT TEAMS**

Function returns a list of teams.

**ORQPT WARD PATIENTS**

Function returns a list of patients on a ward.

**ORQPT WARDRMBED**

Returns the ward, room-bed for a patient.

**ORQPT WARDS**

Function returns a list of wards.

---

<table>
<thead>
<tr>
<th>Description</th>
<th>Tag</th>
<th>Routine</th>
<th>Return Value</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ORQQAL DETAIL</strong></td>
<td>DETAIL</td>
<td>ORQQAL</td>
<td>ARRAY</td>
</tr>
<tr>
<td>This function returns a string of information for a specific allergy/adverse reaction. Returned data is delimited by &quot;^&quot; and includes: allergen/reactant, originator, originator title, verified/not verified, observed/historical, &lt;blank&gt;, type, observation date, severity, drug class, symptoms/reactions (multiple symptoms possible - delimited by &quot;,&quot;), comments.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ORQQAL LIST</strong></td>
<td>LIST</td>
<td>ORQQAL</td>
<td>ARRAY</td>
</tr>
<tr>
<td>Returns a list of allergies for a patient.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ORQQAL LIST REPORT</strong></td>
<td>LRPT</td>
<td>ORQQAL</td>
<td>ARRAY</td>
</tr>
<tr>
<td>Returns a list of allergens, severity and signs/symptoms in a report format which can be used in a &quot;detailed&quot; display. This RPC was set up to support the listing of allergies when selected from the Patient Postings list.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ORQQCN ADDCMT</strong></td>
<td>CMT</td>
<td>ORQQCN2</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>Allows addition of a comment to a consult request/consult without changing its status. Optionally, allows sending of an alert to the requesting provider and others.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ORQQCN DETAIL</strong></td>
<td>DETAIL</td>
<td>ORQQCN</td>
<td>ARRAY</td>
</tr>
<tr>
<td>Returns formatted detailed information regarding the consult request, including result report if available.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ORQQCN DISCONTINUE</strong></td>
<td>DC</td>
<td>ORQQCN1</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>Discontinue a consult or deny a consult request.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ORQQCN FORWARD</strong></td>
<td>FR</td>
<td>ORQQCN1</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>Forwards a consult to a subservice of the forwarding service, as defined in file 123.5.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ORQQCN GET CONSULT</strong></td>
<td>GETCSLT</td>
<td>ORQQCN1</td>
<td>ARRAY</td>
</tr>
<tr>
<td>Given a Consult ID from file 123, return the zero node to the client for loading into a consult record in RESULTS[0]. If the consult has any associated TIU records (completion, addenda) these will be returned in RESULTS[1..j].</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ORQQCN LIST</strong></td>
<td>LIST</td>
<td>ORQQCN</td>
<td>ARRAY</td>
</tr>
<tr>
<td>Returns a list of consult requests for a patient within optional date range and optional service.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ORQQCN MED RESULTS</strong></td>
<td>MEDRSLT</td>
<td>ORQQCN2</td>
<td>ARRAY</td>
</tr>
<tr>
<td>Returns a display of Medicine Package results, followed by any TIU results.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ORQQCN PRINT SF513</strong></td>
<td>PRT513</td>
<td>ORQQCN2</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>Test version of RECEIVE CONSULT for use with GUI. (REV - 8/22/97)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ORQQCN RECEIVE</strong></td>
<td>RC</td>
<td>ORQQCN1</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Based on the IEN of the consult passed in, returns a value of 1, 2, or 3, allowing dynamic enabling/disabling of GUI menus based on user access level for that particular consult. See CPRS^GMRCACTM for return value explanations.

ORQQCN SHOW SF513 SHOW513 ORQQCN2 ARRAY
ORQQCN STATUS STATUS ORQQCN2 ARRAY
Returns a list of consult statuses currently in use, as reflected in the "AC" XREF of ^GMR(123.1).

ORQQCN SVCTREE SVCTREE ORQQCN2 ARRAY
Returns a specially formatted list of consult services for use in populating a GUI TreeView control.

ORQQCN URGENCIES URG ORQQCN1 ARRAY
Returns a list of applicable urgencies from PROTOCOL file 101, given a ConsultIEN and type.
<table>
<thead>
<tr>
<th>RPC</th>
<th>Description</th>
<th>Tag</th>
<th>Routine</th>
<th>Return Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>ORQQLR DETAIL</td>
<td>Returns the details of a lab order.</td>
<td>DETAIL</td>
<td>ORQQLR</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQLR SEARCH RANGE INPT</td>
<td>Returns the date range in search before today. For example, a value of 2 would indicate to limit the search between two days and today. Limited to inpatients.</td>
<td>SRIN</td>
<td>ORQQLR</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORQQLR SEARCH RANGE OUTPT</td>
<td>Returns the date range in search before today. For example, a value of 90 would indicate to limit the search between ninety day. Limited to Outpatients.</td>
<td>SROUT</td>
<td>ORQQLR</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORQQPL ADD SAVE</td>
<td>Add new problem record</td>
<td>ADDSAVE</td>
<td>ORQQPL1</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORQQPL AUDIT HIST</td>
<td>Return problem audit history</td>
<td>HIST</td>
<td>ORQQPL2</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPL CLIN FILTER LIST</td>
<td>Returns array of IEN^NAME for an array of IEN passed in.</td>
<td>GETCLIN</td>
<td>ORQQPL3</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPL CLIN SRCH</td>
<td>Returns list of clinics for problem list. Should be replaced by CLIN^ORQPT</td>
<td>CLINSRCH</td>
<td>ORQQPL1</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPL DELETE</td>
<td>Deletes a problem</td>
<td>DELETE</td>
<td>ORQQPL2</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORQQPL DETAIL</td>
<td>Function returns a string of detailed information for a problem.</td>
<td>DETAIL</td>
<td>ORQQPL</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPL EDIT LOAD</td>
<td>Return array of default fields and original fields - GMPFLD() and GMPORIG()</td>
<td>EDLOAD</td>
<td>ORQQPL1</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPL EDIT SAVE</td>
<td>Saves edited problem record</td>
<td>EDSAVE</td>
<td>ORQQPL1</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORQQPL INIT PT</td>
<td>Returns death indicator, sc and exposures</td>
<td>INITPT</td>
<td>ORQQPL1</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPL INIT USER</td>
<td>Returns user parameters for problem list</td>
<td>INITUSER</td>
<td>ORQQPL1</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPL LIST</td>
<td>Function returns a list of problems for a patient.</td>
<td>LIST</td>
<td>ORQQPL</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPL PROBLEM LEX SEARCH</td>
<td>Get a list from clinical lexicon for display in list or combo box</td>
<td>LEXSRCH</td>
<td>ORQQPL1</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPL PROBLEM LIST</td>
<td>Problem list for CPRS GUI client</td>
<td>PROBL</td>
<td>ORQQPL3</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPL PROV FILTER LIST</td>
<td>Returns a list of providers corresponding to input array of IEN</td>
<td>GETRPRV</td>
<td>ORQQPL3</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPL PROVIDER LIST</td>
<td>Returns array of providers matching input</td>
<td>PROVSRC</td>
<td>ORQQPL1</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPL REPLACE</td>
<td>Replaces a problem that was previously deleted</td>
<td>REPLACE</td>
<td>ORQQPL2</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORQQPL SERV FILTER LIST</td>
<td>Returns array of IEN^NAME for input array of IEN</td>
<td>GETSRVC</td>
<td>ORQQPL3</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPL SRVC SRCH</td>
<td>Get list of available services</td>
<td>SRVC SRCH</td>
<td>ORQQPL1</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPP LIST</td>
<td>Returns a list of active Patient Postings for a patient.</td>
<td>LIST</td>
<td>ORQQPP</td>
<td>ARRAY</td>
</tr>
<tr>
<td>RPC</td>
<td>Description</td>
<td>Tag</td>
<td>Routine</td>
<td>Return Value</td>
</tr>
<tr>
<td>----------------</td>
<td>------------------------------------</td>
<td>--------</td>
<td>---------</td>
<td>--------------</td>
</tr>
<tr>
<td>ORQQPS DETAIL</td>
<td>Returns the details of a medication order.</td>
<td>DETAIL</td>
<td>ORQQPS</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPS LIST</td>
<td>Function returns a list of a patient's medications.</td>
<td>LIST</td>
<td>ORQQPS</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPX IMMUN LIST</td>
<td>Returns a list of patient immunizations.</td>
<td>IMMUN LIST</td>
<td>ORQQPX</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPX REMINDER DETAIL</td>
<td>Returns the details of a clinical reminder.</td>
<td>REMINDER DETAIL</td>
<td>ORQQPX</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQPX REMINDERS LIST</td>
<td>Returns a list of clinical reminders.</td>
<td>REMINDERS LIST</td>
<td>ORQQPX</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQVI VITALS</td>
<td>Function returns a patient's vital measurements between start date and stop date.</td>
<td>FASTVIT</td>
<td>ORQQVI</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQVI VITALS FOR DATE RANGE</td>
<td>Function returns a patient's vital measurements between start date and stop date.</td>
<td>VITALS</td>
<td>ORQQVI</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQVI1 GRID</td>
<td>Returns discharge summary for a visit.</td>
<td>GRID</td>
<td>ORQQVI1</td>
<td>GLOBAL ARRAY</td>
</tr>
<tr>
<td>ORQQVI2 VITALS HELP</td>
<td>Function returns a list of notifications for a patient for the current user.</td>
<td>HELP</td>
<td>ORQQVI2</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQVI2 VITALS RATE CHECK</td>
<td>Returns the progress notes based on patient and visit identifier.</td>
<td>RATECHECK</td>
<td>ORQQVI2</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORQQVI2 VITALS STORE</td>
<td>Returns a list of patient appointments and visits for a date/time range.</td>
<td>VALSTORE</td>
<td>ORQQVI2</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQVI2 VITALS VALIDATE</td>
<td>Returns mail groups in a system.</td>
<td>VALIDATE</td>
<td>ORQQVI2</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORQQVI2 VITALS VALIDATE TYPE</td>
<td>This remote procedure call returns a list on consult reports for a specific patient.</td>
<td>VMTYPES</td>
<td>ORQQVI2</td>
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<tr>
<td>ORQQVS DETAIL NOTES</td>
<td>This rpc is used to print a consult report on the Consult tab in CPRS.</td>
<td>DETNOTE</td>
<td>ORQQVS</td>
<td>ARRAY</td>
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<tr>
<td>ORQQVS DETAIL SUMMARY</td>
<td>This remote procedure call returns an array containing a formatted consult report. This array matches exactly the report format on the roll 'n scroll version of CPRS.</td>
<td>DETSUM</td>
<td>ORQQVS</td>
<td>ARRAY</td>
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<tr>
<td>ORWCH LOADALL</td>
<td>Returns a date in internal Fileman format.</td>
<td>LOADALL</td>
<td>ORWCH</td>
<td>ARRAY</td>
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<tr>
<td>ORWCH SAVEALL</td>
<td>Returns the Form ID (mapping to a windows form) for an ordering dialog.</td>
<td>SAVEALL</td>
<td>ORWCH</td>
<td>SINGLE VALUE</td>
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<tr>
<td>ORWCH SAVESIZ</td>
<td>Returns the Form ID (mapping to a windows form) for an ordering dialog.</td>
<td>SAVESIZ</td>
<td>ORWCH</td>
<td>SINGLE VALUE</td>
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<td>ORWC LIST OF CONSULT REPORTS</td>
<td>This remote procedure call returns a list on consult reports for a specific patient.</td>
<td>LIST</td>
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<td>GLOBAL ARRAY</td>
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<td>ORWC PRINT REPORT</td>
<td>This rpc is used to print a consult report on the Consult tab in CPRS.</td>
<td>PRINT</td>
<td>ORWCSP</td>
<td>SINGLE VALUE</td>
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<td>ORWC REPORT TEXT</td>
<td>This remote procedure call returns an array containing a formatted consult report. This array matches exactly the report format on the roll 'n scroll version of CPRS.</td>
<td>RPT</td>
<td>ORWCS</td>
<td>GLOBAL ARRAY</td>
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<td>Returns the formatting definition for an ordering dialog from the ORDER DIALOG file (101.41).</td>
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<td>ORWD</td>
<td>ARRAY</td>
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<td>ORWD DT</td>
<td>Returns a date in internal Fileman format.</td>
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<td>ORWD</td>
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<td>Returns the Form ID (mapping to a windows form) for an ordering dialog.</td>
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</table>

Loads dialog data (lists & defaults) for a radiology order.

ORWDRA32 APPROVAL | APPROVAL     | ORWDRA32       | ARRAY                 |
| ORWDRA32 DEF | DEF                                   | DEF   | ORWDRA32      | ARRAY                    |

Loads dialog data (lists & defaults) for a radiology order.

ORWDRA32 IMTYPSEL | IMTYPSEL   | ORWDRA32     | ARRAY                |
| ORWDRA32 ISOLATN | ISOLATN    | ORWDRA32     | SINGLE VALUE         |
| ORWDRA32 PROCMSG | PROCMSG    | ORWDRA32     | ARRAY                |
| ORWDRA32 RADSRC | RADSRC     | ORWDRA32     | ARRAY                |
| ORWDRA32 RAORDITM | RAORDITM  | ORWDRA32     | ARRAY                |
| ORWX DLGDEF | DLGDEF       | DLGDEF       | ORWX                  | ARRAY                    |
| ORWX DLQUIK | DLQUIK       | DLQUIK       | ORWX                  | ARRAY                    |
| ORWX FORMID | FORMID       | FORMID       | ORWX                  | SINGLE VALUE             |
| ORWX LOADRSP | LOADRSP     | LOADRSP      | ORWX                  | ARRAY                    |
| ORWX ORDITM | ORDITM       | ORDITM       | ORWX                  | ARRAY                    |
| ORWX SAVE | SAVE         | SAVE         | ORWX                  | ARRAY                    |
| ORWX SEND | SEND         | SEND         | ORWX                  | ARRAY                    |
| ORWX WRLST | WRLST        | WRLST        | ORWX                  | ARRAY                    |
| ORWXA ALERT | ALERT        | ALERT        | ORWXA                 | SINGLE VALUE             |
| ORWXA COMPLETE | COMPLETE   | COMPLETE     | ORWXA                 | ARRAY                    |
| ORWXA DCF | DCF          | DCF          | ORWXA                 | ARRAY                    |
| ORWXA DCREASON | DCREASON   | DCREASON    | ORWXA                 | ARRAY                    |
| ORWXA FLAG | FLAG         | FLAG         | ORWXA                 | ARRAY                    |
| ORWXA FLAGTXT | FLAGTXT     | FLAGTXT      | ORWXA                 | ARRAY                    |
| ORWXA HOLD | HOLD         | HOLD         | ORWXA                 | ARRAY                    |
| ORWXA UNFLAG | UNFLAG      | UNFLAG       | ORWXA                 | ARRAY                    |
| ORWXA UNHOLD | UNHOLD     | UNHOLD       | ORWXA                 | ARRAY                    |
| ORWXA VALID | VALID        | VALID        | ORWXA                 | SINGLE VALUE             |
| ORWXA VERIFY | VERIFY      | VERIFY       | ORWXA                 | ARRAY                    |
| ORWXA WCGET | WCGET        | WCGET        | ORWXA                 | ARRAY                    |
| ORWXA WCPUT | WCPUT        | WCPUT        | ORWXA                 | SINGLE VALUE             |
| ORWXQ DLQNAME | DLQNAME     | DLQNAME      | ORWXQ                 | SINGLE VALUE             |
| ORWXQ DLQSAVE | DLQSAVE     | DLQSAVE      | ORWXQ                 | SINGLE VALUE             |
| ORWXQ GETQLST | GETQLST     | GETQLST      | ORWXQ                 | ARRAY                    |
| ORWXQ GETQNM | GETQNM       | GETQNM       | ORWXQ                 | SINGLE VALUE             |
| ORWXQ PUTQLST | PUTQLST     | PUTQLST      | ORWXQ                 | SINGLE VALUE             |
| ORWXQ PUTQNM | PUTQNM       | PUTQNM       | ORWXQ                 | SINGLE VALUE             |
| ORWXR ISREL | ISREL        | ISREL        | ORWXR                 | SINGLE VALUE             |
| ORWXR RENEW | RENEW        | RENEW        | ORWXR                 | ARRAY                    |
| ORWXR RWFRLDS | RWFRLDS    | RWFRLDS     | ORWXR                 | ARRAY                    |
| ORWLR CUMULATIVE REPORT | CUM | ORWLR        | ARRAY               |

This call returns an up to date laboratory cumulative report for a given patient.

ORWLR CUMULATIVE SECTION | RPT | ORWLR        | GLOBAL ARRAY |

This rpc retrieves the part of the lab cumulative report selected by the user on the Labs tab.
<table>
<thead>
<tr>
<th>RPC</th>
<th>Description</th>
<th>Tag</th>
<th>Routine</th>
<th>Return Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>ORWLR REPORT LISTS</td>
<td>This remote procedure call returns a list of lab cumulative sections, and date ranges that can be displayed at the workstation. There are no input parameters for this rpc.</td>
<td>LIST</td>
<td>ORWLR</td>
<td>GLOBAL ARRAY</td>
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<tr>
<td>ORWLRR ALLTESTS</td>
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<td>This calls the PCE API $$ACTIVPRV^PXAPI(provider ien, encounter d/t) to see if the provider can be stored by PCE. Returns a 1 if provider is good and 0 if the provider is not active or does not have an active person class.</td>
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<td>SINGLE VALUE</td>
<td></td>
</tr>
<tr>
<td>ORWPCE SK</td>
<td>SK</td>
<td>ORWPCE</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td>ORWPCE TRT</td>
<td>TRT</td>
<td>ORWPCE</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td>ORWPCE VISIT</td>
<td>VISIT</td>
<td>ORWPCE</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td>ORWPCE XAM</td>
<td>XAM</td>
<td>ORWPCE</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td>ORWPS ACTIVE</td>
<td>ACTIVE</td>
<td>ORWPS</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td>ORWPS COVER</td>
<td>COVER</td>
<td>ORWPS</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td>ORWPS DETAIL</td>
<td>DETAIL</td>
<td>ORWPS</td>
<td>GLOBAL ARRAY</td>
<td></td>
</tr>
<tr>
<td>ORWPT ADMITLST</td>
<td>ADMITLST</td>
<td>ORWPT</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Returns a list of admissions for a patient (for visit selection).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ORWPT APPTLST</td>
<td>APPTLST</td>
<td>ORWPT</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Returns a list of appointments for a patient (for visit selection).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ORWPT CLINRNG</td>
<td>CLINRNG</td>
<td>ORWPT</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td>ORWPT DFLTSRC</td>
<td>DFLTSRC</td>
<td>ORWPT</td>
<td>SINGLE VALUE</td>
<td></td>
</tr>
<tr>
<td>ORWPT DISCHARGE</td>
<td>DISCHARGE</td>
<td>ORWPT</td>
<td>SINGLE VALUE</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Given a patient and an admission date, return the discharge date/time.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ORWPT ENCTITL</td>
<td>ENCTITL</td>
<td>ORWPT</td>
<td>SINGLE VALUE</td>
<td></td>
</tr>
<tr>
<td>ORWPT ID INFO</td>
<td>ID INFO</td>
<td>ORWPT</td>
<td>SINGLE VALUE</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Returns identifying information for a patient.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ORWPT LAST5</td>
<td>LAST5</td>
<td>ORWPT</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td>ORWPT LIST ALL</td>
<td>LIST ALL</td>
<td>ORWPT</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Returns a set of patient names for use with a long list box.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ORWPT PFINQ</td>
<td>PFINQ</td>
<td>ORWPT</td>
<td>GLOBAL ARRAY</td>
<td></td>
</tr>
<tr>
<td>ORWPT SELCHK</td>
<td>SELCHK</td>
<td>ORWPT</td>
<td>SINGLE VALUE</td>
<td></td>
</tr>
<tr>
<td>ORWPT SELECT</td>
<td>SELECT</td>
<td>ORWPT</td>
<td>SINGLE VALUE</td>
<td></td>
</tr>
<tr>
<td>ORWPT SHARE</td>
<td>SHARE</td>
<td>ORWPT</td>
<td>SINGLE VALUE</td>
<td></td>
</tr>
<tr>
<td>ORWPT TOP</td>
<td>TOP</td>
<td>ORWPT</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td>ORWPT16 ADMITLST</td>
<td>ADMITLST</td>
<td>ORWPT16</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td>ORWPT16 APPTLST</td>
<td>APPTLST</td>
<td>ORWPT16</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td>ORWPT16 DEMOG</td>
<td>DEMOG</td>
<td>ORWPT16</td>
<td>SINGLE VALUE</td>
<td></td>
</tr>
<tr>
<td>ORWPT16 GETVSIT</td>
<td>GETVSIT</td>
<td>ORWPT16</td>
<td>SINGLE VALUE</td>
<td></td>
</tr>
<tr>
<td>ORWPT16 ID INFO</td>
<td>ID INFO</td>
<td>ORWPT16</td>
<td>SINGLE VALUE</td>
<td></td>
</tr>
<tr>
<td>ORWPT16 LIST ALL</td>
<td>LISTALL</td>
<td>ORWPT16</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td>ORWPT16 LOOKUP</td>
<td>LOOKUP</td>
<td>ORWPT16</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td>ORWPT16 PSCNVT</td>
<td>PSCNVT</td>
<td>ORWPT16</td>
<td>SINGLE VALUE</td>
<td></td>
</tr>
<tr>
<td>ORWRA IMAGING EXAMS</td>
<td>EXAMS</td>
<td>ORWRA</td>
<td>GLOBAL ARRAY</td>
<td></td>
</tr>
<tr>
<td></td>
<td>This remote procedure call returns a list on imaging exams for a specific patient.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ORWRA PRINT REPORT</td>
<td>PRINT</td>
<td>ORWRAP</td>
<td>SINGLE VALUE</td>
<td></td>
</tr>
<tr>
<td></td>
<td>This rpc is used to print an imaging report on the Imaging tab in CPRS.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ORWRA REPORT TEXT</td>
<td>RPT</td>
<td>ORWRA</td>
<td>GLOBAL ARRAY</td>
<td></td>
</tr>
<tr>
<td></td>
<td>This remote procedure call returns an array containing a formatted imaging report. This array matches exactly the report format on the roll 'n scroll version of CPRS.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ORWRP PRINT REPORT</td>
<td>PRINT</td>
<td>ORWRPP</td>
<td>SINGLE VALUE</td>
<td></td>
</tr>
<tr>
<td></td>
<td>This rpc is used to print a report on the Report tab in CPRS.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ORWRP REPORT LISTS</td>
<td>LIST</td>
<td>ORWRP</td>
<td>ARRAY</td>
<td></td>
</tr>
<tr>
<td></td>
<td>This remote procedure call returns a list of reports, Health Summary types and date ranges that can be displayed at the workstation.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>There are no input parameters for this rpc.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RPC</td>
<td>Description</td>
<td>Tag</td>
<td>Routine</td>
<td>Return Value</td>
</tr>
<tr>
<td>-----</td>
<td>-------------</td>
<td>-------</td>
<td>---------</td>
<td>--------------</td>
</tr>
<tr>
<td>ORWRP REPORT TEXT</td>
<td>This rpc retrieves the report text for a report selected on the Report tab. the report format on the roll 'n scroll version of CPRS.</td>
<td>RPT</td>
<td>ORWRP</td>
<td>GLOBAL ARRAY</td>
</tr>
<tr>
<td>ORWRP1 LISTNUTR</td>
<td>This remote procedure call returns a list of reports, Health Summary types and date ranges that can be displayed at the workstation.</td>
<td>LISTNUTR</td>
<td>ORWRP1</td>
<td>GLOBAL ARRAY</td>
</tr>
<tr>
<td>ORWRP16 REPORT LISTS</td>
<td>This rpc retrieves the report text for a report selected on the Report tab. the report format on the roll 'n scroll version of CPRS.</td>
<td>LIST</td>
<td>ORWRP16</td>
<td>GLOBAL ARRAY</td>
</tr>
<tr>
<td>ORWU CLINLOC</td>
<td>Returns a list of print devices.</td>
<td>CLINLOC</td>
<td>ORWU</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORWU DEVICE</td>
<td>Returns a list of New Person file entries for use in a long list box.</td>
<td>DEVICE</td>
<td>ORWU</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORWU DT</td>
<td>Returns preferences for the current user.</td>
<td>DT</td>
<td>ORWU</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORWU EXTNAME</td>
<td>Validates a broker encrypted electronic signature.</td>
<td>EXTNAME</td>
<td>ORWU</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORWU GENERIC</td>
<td>Retrieves the &quot;What's This&quot; text for a given control.</td>
<td>GENERIC</td>
<td>ORWU</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORWU HASKEY</td>
<td>Retrieves the &quot;What's This&quot; text for a given control.</td>
<td>HASKEY</td>
<td>ORWU</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORWU HOSPLOC</td>
<td>Returns a set of hospital locations for use in a long list box.</td>
<td>HOSPLOC</td>
<td>ORWU</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORWU NEWPERS</td>
<td>Returns a set of hospital locations for use in a long list box.</td>
<td>NEWPERS</td>
<td>ORWU</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORWU PATCH</td>
<td>Returns a set of New Person file entries for use in a long list box.</td>
<td>PATCH</td>
<td>ORWU</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORWU TOOLMENU</td>
<td>Returns preferences for the current user.</td>
<td>TOOLMENU</td>
<td>ORWU</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORWU USERINFO</td>
<td>Validates a broker encrypted electronic signature.</td>
<td>USERINFO</td>
<td>ORWU</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORWU VALDT</td>
<td>Validates a broker encrypted electronic signature.</td>
<td>VALDT</td>
<td>ORWU</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORWU VALIDSIG</td>
<td>Validates a broker encrypted electronic signature.</td>
<td>VALIDSIG</td>
<td>ORWU</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORWU16 DEVICE</td>
<td>Retrieves the &quot;What's This&quot; text for a given control.</td>
<td>DEVICE</td>
<td>ORWU16</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORWU16 HOSPLOC</td>
<td>Retrieves the &quot;What's This&quot; text for a given control.</td>
<td>HOSPLOC</td>
<td>ORWU16</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORWU16 NEWPERS</td>
<td>Retrieves the &quot;What's This&quot; text for a given control.</td>
<td>NEWPERS</td>
<td>ORWU16</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORWU16 USERINFO</td>
<td>Validates a broker encrypted electronic signature.</td>
<td>USERINFO</td>
<td>ORWU16</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORWU16 VALDT</td>
<td>Validates a broker encrypted electronic signature.</td>
<td>VALDT</td>
<td>ORWU16</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORWU16 VALIDSIG</td>
<td>Validates a broker encrypted electronic signature.</td>
<td>VALIDSIG</td>
<td>ORWU16</td>
<td>SINGLE VALUE</td>
</tr>
<tr>
<td>ORWUH POPUP</td>
<td>Retrieves the &quot;What's This&quot; text for a given control.</td>
<td>POPUP</td>
<td>ORWUH</td>
<td>ARRAY</td>
</tr>
<tr>
<td>ORWUX SYMTAB</td>
<td>Validates a broker encrypted electronic signature.</td>
<td>SYMTAB</td>
<td>ORWUX</td>
<td>GLOBAL ARRAY</td>
</tr>
</tbody>
</table>
15. Package-Wide Variables

CPRS has no package-wide variables.
17. How to Get Online Documentation


Retrieving Online Help Using Question Marks

Entering question marks within the menu system provides help about options and menus.

? If you enter one question mark at a prompt, the program displays a brief explanation of what kind of information you should enter.

?? If you enter two question marks, the program shows a list of possible responses (if appropriate) or a more detailed description, and also the hidden actions available, if you are in a List Manager screen.

?? Three question marks cause more complete descriptions to be displayed.

KIDS Install Print Options

Print a List of Package Components

Use the KIDS Build File Print option if you would like a complete listing of package components (e.g., routines and options) exported with this software.

Print Results of the Installation Process

Use the KIDS Install File Print option if you’d like to print out the results of the installation process.
Other Kernel Print Options

Besides using the Kernel Installation & Distribution (KIDS) options to get lists of routines, files, etc., you can also use other Kernel options to print online technical information.

Routines

XUPRROU (List Routines) prints a list of any or all of the TIU routines. This option is found on the XUPR-ROUTINE-TOOLS menu on the XUPROG (Programmer Options) menu, which is a sub-menu of the EVE (Systems Manager Menu) option.

Select Systems Manager Menu Option: programmer Options
Select Programmer Options Option: routine Tools
Select Routine Tools Option: list Routines
Routine Print
Want to start each routine on a new page: No// [ENTER]
routine(s) ?   > TIU*

The first line of each routine contains a brief description of the general function of the routine. Use the Kernel option XU FIRST LINE PRINT (First Line Routine Print) to print a list of just the first line of each TIU subset routine.

Select Systems Manager Menu Option: programmer Options
Select Programmer Options Option: routine Tools
Select Routine Tools Option: First Line Routine Print
PRINTS FIRST LINES
routine(s) ?   >TIU*

Globals

Select Systems Manager Menu Option: programmer Options
Select Programmer Options Option: LIST Global
Global ^PX*
XINDEX

XINDEX is a routine that produces a report called the VA Cross-Referencer. This report is a technical and cross-reference listing of one routine or a group of routines. XINDEX provides a summary of errors and warnings for routines that do not comply with VA programming standards and conventions, a list of local and global variables and what routines they are referenced in, and a list of internal and external routine calls.

XINDEX is invoked from programmer mode: D ^XINDEX.

When selecting routines, select OR* and OC*.

Data Dictionaries/Files

The number-spaces for CPRS files are 100-101 and 860-864. Use the VA FileMan DATA DICTIONARY UTILITIES, option #8 (DILIST, List File Attributes), to print a list of these files. Depending on the FileMan template used to print the list, this option will print out all or part of the data dictionary for the TIU files.

List File Attributes

The FileMan List File Attributes option [DILIST] lets you generate documentation about files and file structure. If you choose the “Standard” format, you can see the following Data Dictionary information for a specified file(s):

• File name and description.
• Identifiers.
• Cross-references.
• Files pointed to by the file specified.
• Files that point to the file specified.
• Input templates.
• Print templates.
• Sort templates.

Example

```>D P^DI
VA FileMan 21.0
Select OPTION: DATA DICTIONARY UTILITIES
Select DATA DICTIONARY UTILITY OPTION: LIST FILE ATTRIBUTES
START WITH WHAT FILE: 8925
GO TO WHAT FILE: 8925// 8926*
Select LISTING FORMAT: STANDARD// [Enter]
DEVICE: PRINTER```

In addition, the following applicable data is supplied for each field in the file: field name, number, title, global location, description, help prompt, cross-reference(s), input transform, date last edited, and notes.
The “Global Map” format of this option generates an output that lists all cross-references for the file selected, global location of each field in the file, input templates, print templates, and sort templates.

**Inquire to Option File**

The Kernel Inquire option [XUINQUIRE] provides the following information about a specified option(s):

- Option name
- Menu text
- Option description
- Type of option
- Lock (if any)

In addition, all items on the menu are listed for each menu option.
## 18. Glossary

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASU</strong></td>
<td>Authorization/Subscription Utility, a utility that allows sites to associate users with user classes, allowing them to specify the level of authorization needed to sign or order specific document types and orderables.</td>
</tr>
<tr>
<td><strong>ACTION</strong></td>
<td>A functional process that a clinician or clerk uses in the List Manager computer program. “Edit,” “Create,” and “Find” are examples of actions.</td>
</tr>
<tr>
<td><strong>ACTIVATE</strong></td>
<td>To make an inactive window active by clicking anywhere in it.</td>
</tr>
<tr>
<td><strong>AICS</strong></td>
<td>Automated Information Collection System, formerly Integrated Billing; software developed at Albany IRMFO, supported by MCCR, producing scannable Encounter Forms.</td>
</tr>
<tr>
<td><strong>ALERTS</strong></td>
<td>Brief online notices that are issued to users as they complete a cycle through the menu system. Alerts are designed to provide interactive notification of pending computing activities, such as the need to reorder supplies or review a patient's clinical test results. Along with the alert message is an indication that the View Alerts common option should be chosen to take further action.</td>
</tr>
<tr>
<td><strong>APPLICATION COORDINATOR (ADPAC)</strong></td>
<td>A person at a hospital or clinic assigned to coordinate the ADP activities in a specific department. This person is usually a specialist in his department (e.g., a medical technologist or a pharmacist) first and the applications coordinator second.</td>
</tr>
<tr>
<td><strong>APPLICATION PROGRAMMING INTERFACE (API)</strong></td>
<td>Programmer calls provided for use by application programmers. APIs allow programmers to carry out standard computing activities without needing to duplicate Kernel utilities in their own packages. APIs also further DBA goals of system integration by channeling activities, such as adding new users, through a limited number of callable entry points.</td>
</tr>
<tr>
<td><strong>BOILERPLATE TEXT</strong></td>
<td>A pre-defined Progress Notes or Discharge Summary template containing standard text, with blanks to fill in for specific data about a patient.</td>
</tr>
<tr>
<td><strong>BOOT</strong></td>
<td>To load instructions into main memory to get a computer operational.</td>
</tr>
</tbody>
</table>
CIO FIELD OFFICE

Chief Information Office Field Office (formerly known as IRMFO: Information Resource Management Field Office (formerly ISC). VISTA has nine CIOFOs, each responsible for developing assigned application packages and for supporting the medical centers' VISNs within the IRMFO region.

CLIENT

A single term used interchangeably to refer to the user, the workstation, and the portion of the program that runs on the workstation. In an object-oriented environment, a client is a member of a group that uses the services of an unrelated group. If the client is on a local area network (LAN), it can share resources with another computer (server).

CLIENT-SERVER ARCHITECTURE

A Network consisting of a workstation (client) and a central computer holding the database, linked by TCP/IP.

CLINICIAN

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

COMPONENT

In Progress Notes, Components are "sections" or "pieces" of documents, such as Subjective, Objective, Assessment, and Plan in a SOAP Progress Components may have (sub)Components as items. They may have Boilerplate Text. Components may be designated SHARED.

CONSULTS

A component or package of the CPRS (it can function as part of CPRS, independently as a standalone package, or as part of TIU). Consults are referrals of patients by the primary care physician to another hospital service/specialty, to obtain a medical opinion based on patient evaluation and completion of any procedures, modalities, or treatments the consulting specialist deems necessary to render a medical opinion. For instance, if a primary care physician orders a patient evaluation from Cardiology Service, and the cardiology specialist orders an Electrocardiogram (EKG) to complete the evaluation and provide an opinion concerning the patient’s condition, this type of order is considered a “Consult.”

CONTROL

An object in a window on the screen which the user can cause action with visible results or change settings to modify a future action.

COTS

Commercial Off the Shelf; products not developed by VISTA.
A screen of the CPRS patient chart which displays an overview of the patient’s record, with tabs at the bottom representing components of a patient’s chart.

CWAD

Crisis, Warnings, Allergies/Adverse Reactions, and Advance Directives.

DISCHARGE SUMMARY

A discharge summary is a formal synopsis of a patient’s medical care during a single hospitalization. It includes the pertinent diagnostic and therapeutic tests and procedures as well as the conclusions generated by those tests. A discharge summary is prepared for all discharges and transfers from a VA medical center or domiciliary or from nursing home care. The automated Discharge Summary module provides an efficient and immediate mechanism for clinicians to capture transcribed patient discharge summaries online, where they’re available for review, signing, adding addendum, etc.

DLL

Dynamic Link Library. A DLL allows executable routines to be stored separately as files with a DLL extension. These routines are only loaded when a program calls for them. DLLs provide several advantages:

1. DLLs help save on computer memory, since memory is only consumed when a DLL is loaded.
2. DLLs ease maintenance tasks. Because the DLL is a separate file, any modifications made to the DLL will not affect the operation of the calling program or any other DLL.
3. DLLs help avoid redundant routines. They provide generic functions that can be utilized by a variety of programs.

EVENTS

An object-oriented term that represents user actions that a GUI application interface recognizes, such as a mouse click or pressing the down arrow key.

GUI

Graphical User Interface. A type of display format that enables users to choose commands, initiate programs, and other options by selecting pictorial representations (icons) via a mouse or a keyboard.

HEALTH SUMMARY

A VISTA product which can be viewed through CPRS. It includes snapshots of part or all of a patient’s tests and results (based on how the site has it set up).

HL-7

Hospital Level 7, communications standards/protocols to link different computer systems together.
ICON  A picture or symbol that graphically represents an object or a concept.

IDCU  The Integrated Data Communications Utility which is a wide area network used by VA for transmitting data between VA sites.

IMAGING  A component of the patient chart; includes Radiology, X-rays, Nuclear Medicine, etc.

IRM  Information Resource Management Service. A service at VA medical centers responsible for computer management and system security.

KERNEL DATA BROKER  See RPC Broker.

MODAL  A state or "mode" in which the user can only act or respond to a single dialogue box or window. You must select a response before you can exit or do anything else in the program.

MODELESS  The user is free to select and act in any window.

NAMESPACE  A convention for naming VISTA package elements. The Database Administrator (DBA) assigns unique character strings for package developers to use in naming routines, options, and other package elements so that packages may coexist. The DBA also assigns a separate range of file numbers to each package.

NOTIFICATIONS  Alerts regarding specific patients that appear on the CPRS patient chart.

OCIO  Office of the Chief Information Officer, located in Washington, D.C. All CIO Field Offices ultimately report to this entity, which is subordinate to the Office of the Undersecretary for Health.

OBJECT-BASED PROGRAMMING  Involves the use of components.

OBJECT-ORIENTED PROGRAMMING  Involves the creation of components. These components are self-contained collections of data structures and routines that interact with other components or objects.

OE/RR  Order Entry/Results Reporting; a package developed to interface with all VISTA packages, now part of CPRS.

PATIENT POSTINGS  A component of the patient chart; includes messages about patient; an expanded version of CWAD (see above).

PCE  Patient Care Encounter; a VISTA program that’s part of the Ambulatory Data Capture Project (ADCP), and also
provides Clinical Reminders, which appear on Health Summaries.

**PCMM**

Patient Care Management Module, a VISTA product that manages patient/provider lists.

**PROGRESS NOTES**

The Progress Notes module of TIU is used by health care givers to enter and sign online patient progress notes and by transcriptionists to enter notes to be signed by caregivers at a later date. Caregivers may review progress notes online or print progress notes in chart format for filing in the patient’s record.

**REMOTE PROCEDURE CALL**

A remote procedure call (RPC) is essentially some M code that may take optional parameters to do some work and then return either a single value or an array back to the client application.

**RESOURCE**

In VISTA, a method that enables sequential processing of tasks. The processing is accomplished with a RES device type designed by the application programmer and implemented by IRM. The process is controlled via the RESOURCE file (#3.54).

**RPC BROKER**

The RPC Broker acts as a bridge connecting the client application front-end on the workstation (e.g., Delphi GUI applications) to the M-based data and business rules on the server. It serves as the communications medium for messaging between VISTA client/server applications.

**RUBBER BAND JUMP**

In roll and scroll mode of VISTA, a menu jump used to go out to an option and then return, in a bouncing motion. The syntax of the jump is two up-arrows followed by an option's menu text or synonym (e.g., ^^Print Option File). If the two up-arrows are not followed by an option specification, the user is returned to the primary menu (see Go-home Jump).

**SEMI-MODAL**

A window or dialogue box that will yield focus to the parent window for some limited processing. Typically, semi-modal dialogue boxes remain in the foreground even after yielding focus.

**SERVER**

The computer where the data and the Business Rules reside. It makes resources available to client workstations on the network. In VISTA, it is an entry in the OPTION file (#19). An automated mail protocol that is activated by sending a message to a server at another location with the "S.server" syntax. A server's activity is specified in the
OPTION file (#19) and can be the running of a routine or the placement of data into a file.

**TIU**  
Text Integration Utilities, a VISTA application interfacing with CPRS that manages document-oriented modules such as Progress Notes, Discharge Summary, and Consults.

**USABILITY**  
The ease and comfort a program provides to people. Programs that are user-centered rather than machine or programmer-centered.

**USER CLASS**  
The basic component of ASU (Authorization/Subscription Utility). The User Class file contains the different categories of users within a hospital. ASU allows sites to designate who is authorized to do what.

**USER-CENTERED**  
A program designed to match the way people do things.

**USER INTERFACE**  
The way the package is presented to the user, such as Graphical User Interfaces that display option prompts, help messages, and menu choices, the List Manager User Interface (described at the beginning of this manual), and the roll and scroll interface, the traditional VISTA terminal-based user interface.

**VHA**  
Veterans Health Administration

**VISN**  
Veterans Integrated Service Networks, geographic groupings of VA Medical Centers which together share resources and collaborate to maximize use of resources and efficiently meet the needs of veterans in their service areas.

**VISTA**  
VHA Information Systems & Technology Architecture, formerly DHCP (Decentralized Hospital Computer Program), the VA's comprehensive, integrated, medical center computer system. It consists of hardware, software packages, and comprehensive support for system-wide and station-specific, clinical and administrative automation needs.

**WINDOW**  
An object on the screen that presents information such as a document or message.
20. Troubleshooting & Helpful Hints

Here are a few hints and troubleshooting items to help those supporting CPRS.

**CPRS Use of HL7**
- Standard HL7 protocol is used, but not VA HL7 package.
- Package protocol links facilitate HL7 communications.
- HL7 messaging updates ancillary packages from CPRS and vice versa.
- If protocols are unlinked, status updates between packages will fail.
- HL7 is also used to update package orderables.

**Protocol Linkage**
Each interfacing package has protocols that communicate with OE/RR. Order Communications via Protocols/HL7:
- User places an order.
- Order sent by CPRS to the receiving package.
- The receiving package processes the order.
- The receiving package sends a message to CPRS.

**Multiple Sign-On**
Clinical staff may want to have both GUI CPRS and VISTA terminal sessions open.
- Single sign-on is available with Broker 1.1.
- PC must have broker client agent running.
- User enters Access/Verify only once for VISTA logon (via GUI or roll-and-scroll).
- It only works for Telnet-based roll and scroll sessions.
- Parameters control availability at system and user levels.

**Resource Devices**
CPRS adds the following resource devices:
- OR MOVEMENT RESOURCE
- ORB NOTIFICATION RESOURCE
- ORW THREAD RESOURCE
- ORW/PXAPI RESOURCE
- ORWG GRAPHING RESOURCE

**New Graphing Resource Device**

*Note:* In CPRS v.29, caching for graphing is disabled.
CPRS v.27 has improved performance on graphing patient data by using a “cache”, or gathering the patient’s data in advance of using graphing functions. Gathering the data avoids always fetching the data. When caching is not used, the graphing functions extract data when items are selected.

Caching is only used under specific conditions, and is transparent to any actions by the user. Caching happens only when a user has previously graphed results on a specific patient. When Provider A is reviewing Patient Z for the first time, graphing will extract data only when items are selected. If Provider A selects Patient Z again and uses graphing, the following sequence happens:

1. A job is started in the background, this job checks to see if the patient already has cached data. If the patient has cached data, then only recent data is extracted to update that cache. If not, then all data on the patient is extracted to create a new cache. This ensures that the cache has all data on the patient.
2. The cache is transferred to the CPRS application for use with graphing.
3. While the user is graphing data, the application is always checking to see if the cache has been transferred. The application uses cached data if it is available. Otherwise, it continues using the old method of extracting from selected items.

In order to make sure that there is not excessive system processing of extracting data, a new resource device (ORWG GRAPHING RESOURCE) is included in CPRS v27. It is initially set to only allow 3 processes to be running at one time. The Resource Slots field can be changed to allow more or less processes to occur.

<table>
<thead>
<tr>
<th>NAME: ORWG GRAPHING RESOURCE</th>
<th>$I: ORWG GRAPHING RESOURCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>LOCATION OF TERMINAL: CPRS GUI graphing data retrieval</td>
<td></td>
</tr>
<tr>
<td>RESOURCE SLOTS: 3</td>
<td>SUBTYPE: P-OTHER</td>
</tr>
<tr>
<td>TYPE: RESOURCES</td>
<td></td>
</tr>
</tbody>
</table>

**Clearing a Resource Device**

Errors can cause resources to “plug.” You should monitor resources using TaskMan. KERNEL tools “unplug” resources as shown in the example below.

<table>
<thead>
<tr>
<th>Select Device Management Option: CLEAR ONE&lt;Enter&gt;Resource</th>
</tr>
</thead>
<tbody>
<tr>
<td>Select RESOURCE NAME: HLCS RESO&lt;Enter&gt;URCE</td>
</tr>
<tr>
<td>Select SLOTS IN USE SLOT IN USE: ?&lt; &lt;Enter&gt;1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>Select SLOTS IN USE SLOT IN USE: 1&lt;Enter&gt;</td>
</tr>
</tbody>
</table>

**Use of KERNEL HFS Files**

- CPRS uses host file capabilities to display VISTA reports in ListMan and GUI.
- HFS files require ZIS-related KERNEL patches (especially OpenM sites!).
• Ensure KERNEL parameter DEFAULT DIRECTORY FOR HFS is set appropriately.
• Ensure directory has read, write, and delete privileges enabled.

**Time-Delay Order Issues**
• Time delay orders for admission, transfer, or discharge are available.
• Time delay admission and transfer orders are based on treating specialty.
• If MAS Movement is entered with different specialty, orders will NOT release!
• Option exists to release or cancel time delay orders.
• Discharge medications release to pharmacy immediately.

**Provider Selection List Missing Names**
During CPRS GUI v27 testing, a test site identified a problem with the AUSER cross reference affecting the provider selection list, e.g., providers that should have been on the list were not included. The site re-indexed the AUSER cross reference on the NEW PERSON file (#200), and the problem was resolved.

If a site notices that providers that should be on the list are not there, the site should enter a Remedy ticket and may want to re-index the AUSER cross reference. Sites should consider the side effects of re-indexing before re-indexing AUSER. The AUSER cross reference may be re-indexed using VA FileMan. Sites may want to re-index during off hours to minimize impacts. If someone is using the cross reference during the re-index, names on the list will disappear and may reappear as a partial list.

**GUI Debugging Tools**
The main debugging tools that are built into the CPRS executable itself are:

1. **DEBUG command line parameter**—This uses the broker Debug property. If the keyword DEBUG is on the CPRS executable command line, it sets the debug property to true. This allows Customer Support to step through M code without accessing Delphi source code.
2. **Last Broker Call**—CPRS has a wrapper around the broker component. This is mostly so it can treat broker calls as functions and procedures that accept a variable number of parameters of any type. The call allows you to use strong typing on the Delphi side while eliminating the tedium of constant type conversions when calling the broker. This wrapper also logs broker calls, so that the user can step back and see the data that was exchanged in each call. The “wrapper” is part of CPRS, in the ORNet.pas unit. For this to appear on the Help menu in the CPRS GUI, the user must have the XUROGMODE key.
3. **Show ListBox Data**—CPRS uses its own custom controls extensively. These controls allow you to store strings of information along with listbox items. This call will show the data “hidden” behind each listbox item.

These are the main things we use when debugging from within the CPRS executable itself. When debugging from the Delphi environment, where there is access to the source, we use the regular Delphi debugger. Sometimes we use some additional debugging tricks when debugging from the source code—like setting up timers to continuously display state information (a poor man’s ZWATCH) or calls to the Windows function “OutputDebugString” (a poor man’s ZWRITE).
Configuring the Client HOSTS File

The workstation can be configured in such a way that the client HOSTS file is not used for RPC Broker connections or other TELNET connections. Set up the WinNT or Win95/98 client as follows:

1. Right-click Network Neighborhood and select Properties.
2. Select the Protocols tab.
4. Select Properties.
5. Select the DNS tab.
6. In the Domain box enter the local Bind Server Domain Name, i.e. SiteName.MED.VA.GOV
7. In the DNS Service Search Order box, add the Bind Server numeric address as the top entry.
8. Remove any existing entries and add entries in the DNS search order appropriate for your site as stated in FORUM message Subj: VA Intranet Gateway Status [#25087701].
9. Click Apply.
10. Click OK.
11. Shutdown & Re-Start the client workstation.
12. Connect to VISTA via the terminal emulator you choose.

Most terminal emulators can be configured (with a macro) so that the Username prompt is stuffed with the appropriate Username and the end-user only sees the Access/Verify code prompt.

OE/RR Error File

ORERR Routine — Purpose

1. Log errors in the data stream without generating hard errors that would cause Users to be thrown off the system.
2. Puts the runtime information into a Fileman compatible file that support people can search with Fileman tools.

   DO ^ORERR(ORTYP,ORMSG,ORVAR)
Where...

ORTYP is copied verbatim into the ‘ERROR TYPE’ field.

ORMSG either names the HL7 message array or is the HL7 message array.

ORVAR is an array that has as its subscripts the names of local variables that are to be saved in the error record. If the local variable named happens to be an array then the entire local array is saved.

Example 1:  ORM+5 → I '$O(@ORMSG(0)) D ^ORERR("Missing HL7 message",.ORMSG) Q
Example 2:  ORM+7 → I 'MSH D ^ORERR("Missing or invalid MSH segment",.ORMSG) Q
Example 3:  ORM+9 → I '$L(ORMMSP) D ^ORERR("Missing or invalid sending application",.ORMSG) Q
Example 4:  ORM+10 → D PID I '$G(ORVP) D ^ORERR("Missing or invalid patient ID",.ORMSG) Q
Example 5:  EN1+10^ORM. → S ORTN="EN^ORM" ORNMSP D @ORTN
(OPTN in this example is equal to ‘ORMRA’)

EN+1^ORMRA → I '$L($T(@ORDCNTRL)) S ORERR="Invalid order control code" Q
(OOPS... ORDCNTRL has an invalid value so back to ^ORM)

EN+11^ORM → D:$D(ORERR) ERROR K ^TMP("ORWORD",$J)
(Error detected... Do error subroutine)

ERROR+2^ORM → N ORV S ORV("XQY0")="" D ^ORERR(ORERR,.ORMSG,.ORV)
(While you’re at it, save the value of 'XQY0’, too..)

The following appears in the OE/RR ERRORS (100.4) File after Example 5

DATE/TIME: JUL 23, 1997@1024
ION: TNA:
DUZ: CPRSPROVIDER,ONE
ERROR TYPE: Invalid order control code
ERROR TEXT: (word processing)
HL7 Array:
1: MSH|^~\&|LABORATORY|5000|||ORM
2: PID||37|37;DPT([APPLESEED,JOHNNY]
3: PV1|I|1||||| |
4: ORC|ZZTOP|10633^OR|1557;2970723;1^LRCH||IP|"^^^19970723082138^|19970723082138|
5^CPRSPATIENT,ONE|5^ CPRSPATIENT,ONE |||19970723082138|
5: OBR|1|84295.0000^Sodium^99NLT^176^SODIUM^99LRT|19970723082138||O||19970
723082235|OX500;SERUM;SNM;1;BLOOD ;99LRS|||CH 0723
Local Variables:
XQY0: ORMGR^CPRS Manager Menu^M*5^~~~~~~~1^1

Purposes of the Order Check Raw Data Log

1. To store samples of the raw HL7 data so any package that deals with HL7 can have a resource for troubleshooting problems.
2. To help establish a chronology of HL7 events for a particular patient or user.
3. To store sample of all raw data that passes through the expert system.
## Elements of the Raw Data Log

A record from the ORDER CHECK RAW DATA LOG File (#861)...

<table>
<thead>
<tr>
<th>TIMESTAMP: 19971104.084910</th>
<th>(Year Month Day '.' Hour Minute Second When the data was intercepted.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DATA ARRAY NAME: ^TMP(&quot;HLS&quot;,&quot;J,&quot;PS&quot;)</td>
<td>(Variable name of the HL7 array.)</td>
</tr>
<tr>
<td>DATA:</td>
<td>(The HL7 array data in a word processing field)</td>
</tr>
<tr>
<td>MSH</td>
<td>^~&amp;</td>
</tr>
<tr>
<td>PID</td>
<td></td>
</tr>
<tr>
<td>PV1</td>
<td>I</td>
</tr>
<tr>
<td>ORC</td>
<td>OK</td>
</tr>
<tr>
<td>PROCESS ID: 549463468</td>
<td>(Job Number of the job that was affected)</td>
</tr>
<tr>
<td>PATIENT: [66] CPRSPATIENT,ONE</td>
<td>([DFN] and Name of the patient that was affected)</td>
</tr>
<tr>
<td>SOURCE: HL7</td>
<td>(Source of the data. Currently 4 sources: ORERR, OREPS, DGPM PATIENT MOVEMENTS, AND HL7.)</td>
</tr>
<tr>
<td>USER: [1311] CPRSPROVIDER,ONE</td>
<td>([DUZ] and name of the user that was affected.)</td>
</tr>
<tr>
<td>VERSION: 3.0T14 released on: Oct 28, 1997</td>
<td>(Version of the expert system that was running at the time)</td>
</tr>
</tbody>
</table>
Notifications Troubleshooting Guide

Problem: Why is a user not receiving a notification for CPRSPATIENT,ONE?

Solution: Follow the notification trouble-shooting flowchart below:

Is the Notification System Enabled?
Yes  No [Enable it.]

Is TaskMan blocked by the ORB NOTIFICATION RESOURCE entry in the RESOURCE file?
Yes [D RELONE\XUDHRES to release it.
Or delete all slots in use for the resource.]

No

Determine Provider Recipients
Is the Provider Recipients parameter set up correctly for the notification?
Yes  No [Set proper values.]

Display Notifications User Can Receive [DETAILED]
Is the notification in question ON (Enabled)?
Yes  No [Enable it.]

Display Patient Alerts and Alert Recipients
Did the user appear on the list of recipients?
Yes [They did receive the alert or
the alert was reviewed and deleted by another user before this user saw alert. Look in the patient’s chart for the order.]

No [If the alert is order-related,
note the order# (in brackets) of the
order.]

If the notification requires an order#, enter the order # noted above.

Determine Recipients for a Notification
Did the user appear on the list of recipients?
Yes [Something may have changed since the original notification was triggered. Check team list membership, patient’s providers or notification-related parameter values.]

No

Examine Notification Algorithm Source and Notifications – How It Works documents
How is the notification processed?

Expert System Rule (MLM)
1. Examine the related rule.
2. Search in Fileman for the ORDER CHECK RAW DATA LOG file for entries that trigger the rule.
   [e.g. SOURCE equals <DATA SOURCE from algo doc>
   PATIENT contains CPRSPATIENT,ONE
   TIMESTAMP contains 19971106.]
3. Review related entries in ORDER CHECK COMPILER FUNCTIONS.

M Code
1. Examine related M code.
2. Ask pkg developer for assistance.
Problem: The follow-up action for a notification is not working.

Solution: Follow the steps below:

1. Obtain an instance of the alert in question. You may want to ask a recipient of the alert to forward the alert to you via the View Alerts action.
2. Search in the Kernel Alert file for the entry corresponding to the alert.
   a. $D^G$
   b. $^XTV(8992,\text{DUZ};"XQA","date alert was triggered in FM format – e.g. \text{2971106:2971107}\}$

You should get strings that look something like this:

```
^XTV(8992,13,"XQA",2971105.115326,0) =
2971105.115326^OR,66,50;1311;2971105.115326^CPRSPATIE (C0005)

^XTV(8992,13,"XQA",2971105.115326,1) = @OR|164V@PS
```

In the 0 node, the important pieces are:

2: XQAID^OR,<dfn>,<100.9 ien>;<triggering duz>;<alert fm d/t>
3: alert message
7: tag for follow-up action
8: routine for follow-up action
13: days before forwarding alert to user’s mailman surrogate*
14: days before forwarding alert to user’s service/section chief (supervisor)*
* forwarding alerts to surrogates/supervisors triggered via option XQALERT DELETE OLD

The 1 node contains data which may or may not be used in the follow-up action.
3. Check the follow-up M code and data used to see if the follow-up action occurs properly.

Problem: I cannot figure out what providers are linked to a patient via Teams.

Solution: D TPTPR^ORQPTQ1(.ORY,<dfn>) ZW ORY This will list all providers linked to the patient via Teams. [Hint: Look at the routine ORQPTQ1 for other entry points related to team lists and patient data.]

Problem: After an alert is processed, it goes away. Where does it go?

Solution: Kernel stores alerts that have been processed or deleted in the Alert Tracking file [^XTV(8992.1]. You can use FileMan to search or inquire regarding entries in this file. For a FileMan inquire you can enter the user’s name, patient’s name or FileMan date/time to obtain results.

Problem: The user had an alert but now it is gone and they did nothing to cause the alert to go away.

Solution: To clean up old alerts, sites should run the Kernel option XQALERT DELETE OLD on a daily basis. If the alert is older than the allotted number of days in the Kernel option, the alert would have been deleted. If the alert does not meet the criteria for Kernel option deletion, another user may have performed the action necessary to delete the alert. Check the parameter value for the alert to determine if it should be deleted for all recipients when one recipient performs the follow-up action or reviews the alert. This value
Problem: A user wants you to delete one or more alerts.

Solution: Give yourself the XQAL-DELETE key. Run the option XQALERT BY USER DELETE. You’ll get a list of pending alerts for the user. Select those you wish to delete.

Problem: I’m not getting notifications for some lab results.

Solution: Some lab tests are not meant to be resulted. This is indicated in the Lab test file (#60) and the Orderable Items file (#101.43). In both files there is a field called TYPE. The field in both files is a set of codes which indicates if the lab test is to be resulted or not. The codes consist of I:Input, O:Output, B:Both and N:Neither. If the TYPE for a lab test in the Lab file or Orderable Item file is set to “I” or “N,” results will not be sent by lab. This may sometimes be set incorrectly and should be looked at when troubleshooting lab results-related notifications/alerts such as Lab Results, Abnormal Lab Results, Critical Lab Results, and STAT Results Available. If a lab results-related notification is not firing for a particular lab test, check the TYPE field for that test in the Lab Test and Orderable Items files. If it is “I” or “N” in either file, the results will not be posted via HL7 and the alert will not be sent.

Problem: None of our users are getting several notifications they should be getting. Are there any other reasons besides those listed above?

Solution: Check ORMTIME. ORMTIME is automatically scheduled once the Orders conversion is done. The following notifications/alerts are triggered via ORMTIME. If ORMTIME is not running/queued, they will not be sent.

- DNR Expiring
- Medications Expiring – Inpt
- Medications Expiring – Outpt
- NPO Diet > 72 Hours
- Unverified Medication Order
- Unverified Order

Notification Recipient Determination

The OE/RR Notifications utility determines recipients of a patient’s particular notification/alert in the following order:

1. Check the value of the parameter ORB SYSTEM ENABLE/DISABLE. If it is ‘D’isabled, do not process or send any notifications. If it is ‘E’nabled, process notifications as outlined below.

2. Get the default/regular recipients for this notification regardless of patient from the parameter ORB DEFAULT RECIPIENTS. Accessed via the Option ORB3 DEFAULT RECIPIENTS, teams or individuals can be set up to automatically always get a notification. If a team is identified, every user on that team (regardless of other parameter, option settings), will receive
the notification/alert. Good uses of this parameter include troubleshooting notifications and delivering the Food/Drug Interaction notification [for all patients] to a team of dietitians.

3. Obtain the default/regular device recipients for this notification regardless of patient from the parameter ORB DEFAULT DEVICE RECIPIENTS. Accessed via the Option ORB3 DEFAULT DEVICE RECIPIENTS, one or more devices can be set up to automatically always get a notification. The device may be a printer, file or any other device defined at the site. This is useful if every instance of an alert across all patients is desired for QA, JCAHO or research purposes.

4. Additional potential recipients are obtained from:
   a. A recipient list identified by the service triggering the alert. For example, Radiology sends OE/RR Notifications a list of potential recipients when its STAT Imaging Request notification is triggered.
   b. Provider-related recipients indicated in the parameter ORB PROVIDER RECIPIENTS. Accessed via the Option ORB3 PROVIDER RECIPIENTS, the Primary provider, Attending physician, patient care Teams, or Ordering/requesting provider can be set to receive a notification. If set for Teams, all teams to which the patient belongs will be evaluated to obtained potential recipients. If set for Orderer and an order number is passed by the service triggering the alert, the ordering/requesting provider will be determined and added to the potential list. In addition, if the Orderer does not have signature authority (does not hold the ORES key) and the notification either Order Requires Electronic Signature or Order Requires Co-signature, the teams to which the Orderer belongs will be evaluated and every user on those teams (which also include the patient), will be added to the potential recipient list.

5. Each user on the potential recipient list is evaluated according to values set for entities identified in the parameter ORB PROCESSING FLAG. These entity values are accessed via the Option ORB3 PROCESSING FLAG also called Enable/Disable Notifications. These entity values are processed in the following order to determine if that particular user should receive the notification/alert or not. The first condition met stops the processing and determines whether or not the user will receive the notification. Processing order:
   a. If the USER’s value for the notification is set to Mandatory or Enabled, the user will receive the notification.
   b. If the user’s TEAM value for the notification is set to Mandatory, the user will receive the notification.
   c. If the user’s SERVICE/SECTION value for the notification is set to Mandatory, the user will receive the notification.
   d. If the PATIENT’s HOSPITAL LOCATION (inpatients only) value for the notification is set to Mandatory, the user will receive the notification.
   e. If the PATIENT’s HOSPITAL LOCATION (inpatients only) value for the notification is set to Disabled, the user will NOT receive the notification.
   f. If the user’s DIVISION value for the notification is set to Mandatory, the user will receive the notification.
   g. If the SYSTEM value for the notification is set to Mandatory and DIVISION has no value, the user will receive the notification.
   h. If the PACKAGE (OERR-exported) value for the notification is set to Mandatory and SYSTEM and DIVISION have no value, the user will receive the notification.
i. If the USER’s value for the notification is set to Disabled, the user will NOT receive the notification.

j. If the user’s TEAM value for the notification is set to Disabled, the user will NOT receive the notification.

k. If the user’s SERVICE/SECTION value for the notification is set to Disabled, the user will NOT receive the notification.

l. If the user’s DIVISION value for the notification is set to Disabled, the user will NOT receive the notification.

m. If the SYSTEM value for the notification is set to Disabled and DIVISION has no value, the user will NOT receive the notification.

n. If the PACKAGE (OERR-exported) value for the notification is set to Disabled and SYSTEM and DIVISION have no value, the user will NOT receive the notification.

o. If none of the above parameter values are found, the notification is processed as Disabled and the user will NOT receive the notification.

<table>
<thead>
<tr>
<th>Notification</th>
<th>Expert Rule (Mlm)</th>
<th>M Code</th>
<th>Data Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABNL IMAGING RESLT, NEEDS ATTN</td>
<td></td>
<td>Radiology Pkg</td>
<td>Radiology Pkg</td>
</tr>
<tr>
<td>ABNORMAL LAB RESULTS (ACTION)</td>
<td>ABNORMAL LAB RESULTS</td>
<td></td>
<td>HL7</td>
</tr>
<tr>
<td>ABNORMAL LAB RESULT (INFO)</td>
<td>ABNORMAL LAB RESULTS</td>
<td></td>
<td>HL7</td>
</tr>
<tr>
<td>ADMISSION</td>
<td>PATIENT ADMISSION</td>
<td></td>
<td>DGPM</td>
</tr>
<tr>
<td>ANATOMIC PATHOLOGY RESULTS</td>
<td></td>
<td>Lab Pkg</td>
<td>Lab Pkg</td>
</tr>
<tr>
<td>CONSULT/PROC INTERPRETATION</td>
<td></td>
<td>Consults Pkg</td>
<td>Consults Pkg</td>
</tr>
<tr>
<td>CONSULT/REQUEST CANCEL/HOLD</td>
<td></td>
<td>Consults Pkg</td>
<td>Consults Pkg</td>
</tr>
<tr>
<td>CONSULT/REQUEST RESOLUTION</td>
<td></td>
<td>Consults Pkg</td>
<td>Consults Pkg</td>
</tr>
<tr>
<td>CRITICAL LAB RESULT (INFO)</td>
<td>CRITICAL HIGH/LOW LAB RESULTS</td>
<td></td>
<td>HL7</td>
</tr>
<tr>
<td>CRITICAL LAB RESULTS (ACTION)</td>
<td>CRITICAL HIGH/LOW LAB RESULTS</td>
<td></td>
<td>HL7</td>
</tr>
<tr>
<td>DECEASED PATIENT</td>
<td>NOTE^ORX3</td>
<td></td>
<td>MAS protocols, fields</td>
</tr>
<tr>
<td>DISCHARGE</td>
<td>PATIENT DISCHARGE</td>
<td>DGPM</td>
<td></td>
</tr>
<tr>
<td>-----------</td>
<td>------------------</td>
<td>------</td>
<td></td>
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<tr>
<td>DEA AUTO DC CS MED ORDER</td>
<td>AUTO DCED CONTROLLED SUBSTANCE ORDERS</td>
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<td>DEA CERTIFICATE EXPIRED</td>
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<td>AUTO DCED CONTROLLED SUBSTANCE ORDERS</td>
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<td>DNR EXPIRING</td>
<td>EXPIR^ORB31</td>
<td>ORMTIME (TaskMan)</td>
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<td>ERROR MESSAGE</td>
<td>^OCX RTNS</td>
<td>Expert System</td>
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<td>ORDER FLAGGED FOR CLARIFICATION</td>
<td>OERR</td>
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<td>FOOD/DRUG INTERACTION</td>
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<td>IMAGING REQUEST CANCEL/HELD</td>
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<td>IMAGING RESULTS, NON CRITICAL</td>
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<td>IMAGING RESULTS AMENDED</td>
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<td>LAB ORDER CANCELLED</td>
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<td>LAB RESULTS</td>
<td>LAB RESULTS</td>
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<td>MAMMOGRAM RESULTS</td>
<td>Women’s Health Pkg</td>
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<td>EXPIR^ORB3TI M2</td>
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<td>NEW ORDER</td>
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<td>NEW SERVICE CONSULT/REQUEST</td>
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<td>Event Description</td>
<td>Code/Location</td>
<td>Implementation Details</td>
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<td>NPO DIET MORE THAN 72 HRS</td>
<td>NPO^ORB31</td>
<td>ORMTIME (TaskMan)</td>
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<td>OP NON-RENEWABLE RX RENEWAL</td>
<td>EN^ORB3</td>
<td>OERR</td>
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<td>ORDER CHECK</td>
<td>EN^ORKCHK</td>
<td>Order Checking</td>
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<td>ORDER REQUIRES CHART SIGNATURE</td>
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<td>ORDER REQUIRES CO-SIGNATURE</td>
<td>ORDER REQUIRES CO-SIGNATURE</td>
<td>OERR</td>
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<td>ORDER REQUIRES ELECTRONIC SIGN.</td>
<td>OERR</td>
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<td>ORDERER FLAGGED RESULTS AVAILABLE</td>
<td>OERR</td>
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<td>PAP SMEAR RESULTS</td>
<td>Women's Health Pkg</td>
<td>Women's Health Pkg</td>
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<td>SERVICE ORDER REQUIRES CHART SIGN.</td>
<td>OERR</td>
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<tr>
<td>SITE-FLAGGED ORDER</td>
<td>SITE FLAGGED ORDER</td>
<td>HL7</td>
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</tr>
<tr>
<td>SITE-FLAGGED RESULTS</td>
<td>SITE FLAGGED RESULT</td>
<td>HL7</td>
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<tr>
<td>STAT IMAGING REQUEST</td>
<td>Radiology Pkg</td>
<td>Radiology Pkg</td>
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<tr>
<td>STAT ORDER</td>
<td>STAT ORDER PLACED</td>
<td>HL7</td>
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<tr>
<td>STAT RESULTS</td>
<td>STAT RESULTS AVAILABLE</td>
<td>HL7</td>
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<td>SUICIDE ATTEMPTED/COMPLETED</td>
<td>Clinical Reminders Pkg</td>
<td>Clinical Reminders Pkg</td>
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<td>TRANSFER FROM PSYCHIATRY</td>
<td>PATIENT TRANSFERRED FROM PSYCH.</td>
<td>DGPM</td>
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<td>UNSCHEDULED VISIT</td>
<td>NOTE^ORX3</td>
<td>MAS protocols, fields</td>
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<td>UNVERIFIED MEDICATION ORDER</td>
<td>UNVER^ORB31</td>
<td>ORMTIME (TaskMan)</td>
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</tr>
<tr>
<td>URGENT IMAGING REQUEST</td>
<td>Radiology Pkg</td>
<td>Radiology Pkg</td>
<td></td>
</tr>
</tbody>
</table>
**Order Checking Troubleshooting Guide**

**Problem:** Not getting order checks

**Trouble-shooting Flowchart**

```
Is the OC System Enabled?
  Yes            
  No [Enable it.]

Display OCs User Can Receive
Is the OC in question ON (Enabled?)
  Yes            
  No [Enable it.]

Examine OC Log File for Related Entries
Is message logging enabled?
  Yes            
  No [Enable it. You must wait until
       after an order check has been
       triggered again to log an entry.]

^XTMP("ORKLOG",<date range>,<patient id>
  e.g. (^XTMP("ORKLOG",2971106:2971107,16)

Is there a related order check?
  Yes [If an entry matches that patient,
        oc and user, then for some reason,
        OERR did not display the message.]
  No

Examine OC Algorithm Source
How is the OC processed?
```

**Expert System Rule (MLM)**
1. Examine the related rule.
2. Search the ORDER CHECK RAW DATA LOG file for entries that trigger the rule: SOURCE equals OEPS PATIENT contains CPRSPATIENT,ONE TIMESTAMP contains 19971106.
3. Review related entries in ORDER CHECK COMPILER FUNCTIONS.
4. Check linkages used in OC Term Lookup.

**M Code**
1. Determine main routine for OC’s mode.
2. Examine related M code.
3. Re-examine ^XTMP("ORKLOG") for entries/data used in the M code.
4. Test by plugging data from ^XTMP log file into M code.

**Possible Reasons:**

1. Orderer does not select a dispense drug when ordering a medication. Critical drug interactions, duplicate drug and duplicate drug class order checks will not occur.
2. Orderer places an order for an IV solution. Duplicate drug order check will not occur.
3. During recompilation of the CPRS Expert System rules, expert system-based order checks will not occur.
4. If the CPRS Expert System encounters an error, expert system-based order checks will not occur.
5. Ordered medication does not have a corresponding entry (pointer) in the Nat’l Drug File. Drug-allergy interaction order check will not occur.
6. Ordered lab procedure does not have an entry in the Lab file [#60] MAX. ORDER FREQ. field (under the COLLECTION SAMPLE multiple). The Maximum Order Frequency portion of the Lab Order Freq Restrictions order check will not occur.
7. Ordered lab procedure does not have an entry in the Lab file [#60] SINGLE DAY MAX ORDER FREQ field (under the COLLECTION SAMPLE multiple). The Single Day Maximum Order Frequency portion of the Lab Order Freq Restrictions order check will not occur.
8. Ordered lab procedure has entries in the Lab file [#60] for both MAX. ORDER FREQ. and SINGLE DAY MAX ORDER FREQ fields (under the COLLECTION SAMPLE multiple). The Single Day Maximum Order Frequency portion of the Lab Order Freq Restrictions order check will not occur.
9. Local terms at site not linked (or linked incorrectly) to Nat’l CPRS Expert System terms. See instructions.

<table>
<thead>
<tr>
<th>Nat'l Expert System Term</th>
<th>Linked File</th>
<th>Order Check</th>
</tr>
</thead>
<tbody>
<tr>
<td>SERUM CREATININE</td>
<td>LAB [60]</td>
<td>AMINOGLYCOSIDE ORDERED</td>
</tr>
<tr>
<td></td>
<td></td>
<td>BIOCHEM ABNORMALITY FOR CONTRAST MEDIA</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ESTIMATED CREATININE CLEARANCE</td>
</tr>
<tr>
<td></td>
<td></td>
<td>RENAL FUNCTIONS OVER AGE 65</td>
</tr>
<tr>
<td>SERUM UREA NITROGEN</td>
<td>LAB [60]</td>
<td>AMINOGLYCOSIDE ORDERED</td>
</tr>
<tr>
<td></td>
<td></td>
<td>BIOCHEM ABNORMALITY FOR CONTRAST MEDIA</td>
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<td></td>
<td>RENAL FUNCTIONS OVER AGE 65</td>
</tr>
<tr>
<td>ANGIOGRAM,CATH – PERIPHERAL</td>
<td>OI [101.43]</td>
<td>MISSING LAB TESTS FOR ANGIOGRAM PROCEDUR</td>
</tr>
<tr>
<td>PROTHROMBIN TIME</td>
<td>OI [101.43]</td>
<td>MISSING LAB TESTS FOR ANGIOGRAM PROCEDUR</td>
</tr>
<tr>
<td>THROMBOPLASTIN TIME PARTIAL</td>
<td>OI [101.43]</td>
<td>MISSING LAB TESTS FOR ANGIOGRAM PROCEDUR</td>
</tr>
<tr>
<td>WHITE BLOOD COUNT (WBC)</td>
<td>LAB [60]</td>
<td>CLOZAPINE APPROPRIATENESS</td>
</tr>
<tr>
<td>BLOOD SPECIMEN</td>
<td>TOPOG [61]</td>
<td>CLOZAPINE APPROPRIATENESS</td>
</tr>
<tr>
<td>SERUM SPECIMEN</td>
<td>TOPOG [61]</td>
<td>AMINOGLYCOSIDE ORDERED</td>
</tr>
<tr>
<td></td>
<td></td>
<td>BIOCHEM ABNORMALITY FOR CONTRAST MEDIA</td>
</tr>
</tbody>
</table>
Order Checking and OE/RR Dialogs

Mechanism

1. OE/RR calls EN^ORKCHK at the trigger events.
   a. Routines which call EN^ORKCHK: ORCDLG, ORCDPS, ORCMENU1
   b. Events:
      • Ordering dialog/display
      • Orderable item selection
      • Order acceptance
      • Ordering session completion
      • Special events:
         − Delayed/time-release orders initiated
         − Orders Renewed or Edited
         − Orders signed in a later session (delayed signature)

2. EN^ORKCHK Parameters:
   a. Array of return messages in format: order number^order check ien[#100.8]^clinical danger level^message
      • return array will be sorted by clinical danger level, order number, then sequence processed
      • clinical danger levels are expressed as integers: 1 = High, 2 = Moderate, 3 = Low
      • DISPLAY mode order checks return a clinical danger level of “” (null)
   b. Patient dfn
   c. Array of ordering information in format: orderable item ien|filler application (PS, RA, FH, LR, etc.)|nat’l id|nat’l text|nat’l coding system|local id|local text|local coding system|order effective date/time|order number|filler-specific data
      Filler -specific data:
      LR: specimen of the lab test ordered in the format: ien of Topography (specimen) file [*LAB(61,]
      PS: medications ordered during this session in the format:
      med1^med2^med3^…
   d. Mode/event trigger (DISPLAY,SELECT,ACCEPT,SESSION,NOTIF,ALL)

3. Event Examples (this example covers the List Manager interface; a similar process will occur in the GUI where the ORK TRIGGER remote procedure call will be invoked):
   a. DISPLAY example:
S OCINFO(1)="|PS||"
S OCINFO=1
D EN^ORKCHK(.RTN,1234,.OCINFO,"DISPLAY")

b. SELECT example:

```
S OCINFO(1)="1385|PS|576.4^DIGOXIN 0.5MG TAB^99NDF^4213^DIGOXIN 0.5MG TAB^99PSD|||
" S OCINFO=1
D
EN^ORKCHK(.RTN,1234,.OCINFO,"SELECT")
```

c. ACCEPT example:

```
S OCINFO(1)="1385|PS|576.4^DIGOXIN 0.5MG TAB^99NDF^4213^DIGOXIN 0.5MG TAB^99PSD|2960229.103021||" S OCINFO=1
D
EN^ORKCHK(.RTN,1234,.OCINFO,"ACCEPT")
* order d/t not available for PS orders due to PS restrictions
```

d. SESSION example:

```
S OCINFO(1)="1385|PS|576.4^DIGOXIN 0.5MG TAB^99NDF^4213^DIGOXIN 0.5MG TAB^99PSD|2960229.103021|4332|"
S OCINFO(2)="
2244|PS|355.2^PENICILLIN 250MG TAB^99NDF^1334^PENICILLIN 250MG TAB^99PSD|2960229.103151|4333|med1"
S OCINFO(3)="57|RA|71020^CHEST X-RAY^CPT4^58^Chest 2 views PA&LAT^99RAP|2960229.103410|4333|"
S OCINFO(4)="2730|LR|84330.0000^^NLT^175^GLUCOSE^99LRT| 2970211.1601|8119|72"
S OCINFO=4
D
EN^ORKCHK(.RTN,1234,.OCINFO,"SESSION")
```

e. NOTIF (delayed/time release orders) example:

```
S OCINFO(1)="1385|PS|576.4^DIGOXIN 0.5MG TAB^99NDF^4213^DIGOXIN 0.5MG TAB^99PSD|2960229.103021|4332|"
S OCINFO=1
D
EN^ORKCHK(.RTN,1234,.OCINFO,"NOTIF")
```
f. ALL (renew, edit and signature delayed orders) example:

```
S
OCINFO(1)="1385|PS|576.4^DIGOXIN 0.5MG TAB^99NDF^4213^DIGOXIN 0.5MG TAB^99PSD
|2960229.103021||"
S
OCINFO=1
D
EN*ORKCHK(.RTN,1234,.OCINFO,"ALL")
```

4. For each member of the order information array:
   a. Initiate non-MLM order checks designated as appropriate for that mode/event trigger
   b. Initiate MLM order checks designated as appropriate for that mode/event trigger (each MLM created for order checking will have a mode/event trigger data element indicating when the MLM is to be processed)

**Order Checks Categorized by Event:**

1. Ordering dialog/display - including
   - Estimated creatinine clearance, for patients <50 [MLM]
   - Order checking not available/supported
   - Renal functions for patients over 65 [MLM]
   - Polypharmacy [MLM]

2. Orderable item selection
   - Duplicate drug orders (against existing meds)
   - Duplicate drug class orders (against existing meds)
   - Critical drug interactions (against existing meds)
   - Clozapine appropriateness [MLM]
   - Allergy-contrast media interactions [MLM]
   - Physical limitations for CT and MRI scanners [MLM]
   - Biochem abnormality for contrast media [MLM]
   - Glucophage-contrast media interaction [MLM]
   - Dispense drug not selected
   - Recent barium study [MLM]

3. Order acceptance (includes checks where time is a factor in reducing false positives)
   - Duplicate orders (non-med)
   - Allergy-drug interactions
   - Recent oral cholecystogram [MLM]
   - Lab order frequency restrictions

4. Ordering session completion
   - Aminoglycosides [MLM]
   - Labs req’d with radiology orders [MLM]
• Duplicate drug orders (against meds placed in same session)
• Duplicate drug class orders (against meds placed in same session)
• Critical drug interactions (against meds placed in same session)

**Order Checking Dialog and Override Mechanism:**

1. List of Order Check messages presented to user sorted by clinical danger level
2. Based on the Order Check’s clinical danger level and user’s OE/RR 2.5 elec signature key:
   a. User holds OREMAS key:
      • Process without prompting for justification but allow them to ‘Cancel’ or ‘OK’ the order.
   b. User does not hold OREMAS key and clinical danger level is ‘2’ (Moderate) or ‘3’ (Low):
      • Process without prompting for justification but allow them to ‘Cancel’ or ‘OK’ the order.
   c. User does not hold OREMAS key and clinical danger level is ‘1’ (High):
      • Prompt for justification by prompting to ‘Cancel’ or ‘Override’. If select ‘Override’, prompt for justification (allow selection from a list or to enter free text). If a justification is entered, allow them to ‘Cancel’ or ‘OK’.
3. Order check messages and any accompanying over-ride justifications are sent with the order to the filling package and are displayed in the order’s detailed display. If the clinical danger level for an order check message is “High” (value of ‘1’), the order check message and justification are stored in the Order file [#100] under the ‘9’ node.

**FAQs (Frequently Asked Questions)**
These frequently-asked questions are based on questions received from CPRS test sites.

**Q.** What is the relationship between OE/RR and CPRS? I sometimes hear references to OE/RR 3.0 and much of the CPRS package just seems to be an enhanced OE/RR 2.5.

**A.** This distinction does get fuzzy at times. CPRS is the umbrella package for a much more comprehensive suite of software. OE/RR 3.0 is a component of CPRS, and can't be used outside of CPRS. Many of the packages contained within CPRS still have independent lives, for use by their services for administrative and other purposes, and occasionally to add and review orders (known as “backdoor” ordering). The CPRS documentation set mainly documents the OE/RR portion of CPRS (files and routines in the OR, OEX, and XPAR namespaces).

**Q.** How do sites handle document verification (nurse and clerk)? Do they still print 24-hour summaries, chart copies, etc. for nurses and clerks to initial? How would they know, otherwise, what’s been done?

**A.** West Palm Beach requires online verification. Nurses do the majority of the verification, and they do this online, periodically throughout the day, at designated workstations on the wards or clinics. Some copies are printed and put in the chart for contingencies and backup, but basically, it is a paperless system.

**Q.** What are the benefits of a GUI over the traditional VISTA programs or the List Manager version of CPRS?

**A.** A Windows-type environment (GUI) allows you to do many things easier and more efficiently. The visibility and accessibility of many components of a patient record allow you to move among them more
freely to review and link data. You can choose your own workflow rather than having it dictated by the computer in a sequential way. Sometimes, the traditional roll-and-scroll and List Manager have advantages. For straightforward data entry, these methods can be faster and less complex.

Q. When I write an order for digoxin and quinidine at the same time, the order check does not seem to take place until after it would with an order check between a new med and an old one. Did I understand that correctly?

A. Your observations are correct regarding the order checking against new meds vs. old meds. Almost all medication-related order checks are performed by querying the pharmacy package. During the ordering process, pharmacy doesn't know about the meds placed during the ordering session. Meds are not "released" to the pharmacy service until they have been signed so checks between meds placed in the session cannot occur. Checks against meds already released to Pharmacy occur within the ordering process. Being unable to check against meds placed in a session was not acceptable so we devised a method where at the end of the ordering session all meds placed during the session are passed to the pharmacy package and they perform the med vs. med checks as if the patient were already receiving them. We waited until after the session is completed (just before electronic signature), because order checks are fairly resource-intensive and this approach minimizes the delays between prompts.

Q. You used to be able to get a readout for lab alerts. Now, I get "abn: ldl 160" and that's it, not the whole lipid profile. Plus, you can't get into the lab/note file without re-entering the patient name.

A. The way lab results (abnormal/critical) are displayed in the View Alerts list has been changed. In the old version, they required you to select the alert (a follow-up action) which displayed the abnormal/critical results along with other results associated with that lab order. In CPRS, each abnormal/critical lab result has its own alert, including abbreviated lab test name and result value but without the follow-up display of other associated results. There were many requests for this change from OE/RR 2.5 users. We hope you can get used to it and in the end find it to be better.

You can set yourself up to get a Lab Results alert that will display all lab results for a lab order. This alert is not given to everyone because it triggers with every lab result and can be a great annoyance. In CPRS, you have more flexibility to turn notifications on or off and at different levels—site, division, service, or by user).

Q: Why don’t I get notifications for some lab results?

A: Some lab tests are not meant to be resulted. This is indicated in the Lab test file (#60) and the Orderable Items file (#101.43). In both files there is a field called TYPE. The field in both files is a set of codes which indicates if the lab test is to be resulted or not. The codes consist of I:Input, O:Output, B:Both and N:Neither. If the TYPE for a lab test in the Lab file or Orderable Item file is set to “I” or “N,” results will not be sent by lab. This may sometimes be set incorrectly and should be looked at when troubleshooting lab results-related notifications/alerts such as Lab Results, Abnormal Lab Results, Critical Lab Results, and STAT Results Available. If a lab results-related notification is not firing for a particular lab test, check the TYPE field for that test in the Lab Test and Orderable Items files. If it is “I” or “N” in either file, the results will not be posted via HL7 and the alert will not be sent.
Notes on Notifications and Order Checks

NOTE: All alerts and order checks are a nuisance to some and a benefit to others. That is why they were designed with the flexibility to enable or disable them at many different levels.

NOTE: Try disabling the objectionable order checks at the patient location level. The check will not be displayed for patients in that location (inpatient only) unless the user specifically has the order check enabled.

NOTE: Another approach would be to disable the order check for your site (VAMC level) then enable it for the locations or users where the check is desired. You can also screen (enable or disable) order checks based on the user’s service/specialty.

NOTE: For order checks, the order of precedence when determining if order check should be performed or not is USER -> PT LOCATION -> SERVICE -> VAMC. The user’s level has priority over patient location which priority over the user's service/specialty and so on. If a value does not exist for the user (they have not enabled or disabled the order check), the software looks up the chain for a value at the patient location level. The software looks up the chain until a value is found. If nothing exists for the VAMC, a value released with CPRS is used.

NOTE: While notifications use a similar hierarchy for determining whether or not an alert should be sent, it is more complicated because a notification/alert can be set to “mandatory.” A value of “mandatory” overrides most other values for that notification/alert.
Server Access

Problem: Setting up or Accessing A Server.

Solution: Use PING to test access.

```
# Additionally, comments (such as these) may be inserted on individual
# lines or following the machine name denoted by a '#' symbol.
# For example:
#  #  102.54.94.97    rhino.acme.com    # source server
#  #  38.25.63.10    x.acme.com    # x client host
127.0.0.1    localhost
152.131.2.1    OERRDEMO    # OE/RR demo system (SLC)
152.131.2.2    OERRDEMO-ALT    # OE/RR demo system (alternate)
152.130.11.1    DHCPSERVER-DEMO    # Tuscaloosa demo system

C:\>ping 152.131.2.2
Pinging 152.131.2.2 with 32 bytes of data:
Reply from 152.131.2.2: bytes=32 time=3ms TTL=254
Reply from 152.131.2.2: bytes=32 time=2ms TTL=254
Reply from 152.131.2.2: bytes=32 time=3ms TTL=254
Reply from 152.131.2.2: bytes=32 time=3ms TTL=254

C:\>
```
22. **Appendix A - CPRS Package Security**

CPRS security is maintained through security keys, menu assignment, and VA FileMan protection. The following keys, parameters, and settings determine who can enter or sign orders and who can enter Group Notes.

**Controlling Which Users Can Enter and Sign Medication Orders**

Several items control who can enter or sign medication orders:

- file entries
- keys
- identification numbers
- Order Entry (OR) signature keys
- CPRS parameters

CPRS uses the following OR signature keys:

- ORES
- ORELSE
- OREMAS

Warning: A user who holds NO keys can enter medication orders in CPRS.

Sites can also control who can write medication orders using the following:

**The provider key**

The “authorized to write meds” entry in the NEW PERSON file (200).

To place outpatient controlled substance medication orders, a provider must have proper credentials such as a Drug Enforcement Administration (DEA) number for the individual provider, or a VA facility DEA number along with an individual identifier (commonly called a VA number), or a Detox/Maintenance number.

To further control orders for outpatient controlled substances, sites have the ability to specify for which controlled substances pharmacy schedules a provider may write medication orders.

In addition, each provider must have a Personal Identification Verification (PIV) card or smart card to order outpatient controlled substances medications. Use of this card with ordering creates the ability to digitally sign the outpatient controlled substances orders.
Several parameters in CPRS help govern who can write medication orders and non-VA medication information:

- **ORWOR DISABLE ORDERING**—This parameter disables all clinical ordering.
- **OR OREMAS MED ORDERS**—This parameter controls whether OREMAS key holders can act on medication orders.
- **OR OREMAS NON-VA MED ORDERS**—This parameter controls whether OREMAS holders can enter Non-VA medication information.

In CPRS, only the following users MAY NOT place orders:

- Users whose ordering capability was disabled by parameter “ORWOR DISABLE ORDERING”
- Users who hold more than one ordering signature key: OREMAS, ORELSE, ORES (multiple key conflict)

**Warning:** A user who holds NO keys can enter medication orders in CPRS.

Other than the above users, regardless of what key users hold (no key, “provider”, or OR* key), they are all allowed to place orders. But users without an ORE key cannot sign and release orders; the medication orders would remain unreleased until signed by a valid provider.

For a no-key user, CPRS cannot tell whether the user is a medical clerk, a medical student, or an outpatient clerk. Medical students and outpatient clerks may need to enter medication orders that would be signed later by a provider.

Sites can control ordering by administrative staff and clerks in the following ways:

- To prevent a clerk from entering medication orders, sites can assign the user the OREMAS key.
- To disable an individual user’s capability to enter any clinical order, sites can use the parameter “ORWOR DISABLE ORDERING”.

**Order Entry Signature Keys**

The following three keys determine who can sign orders in CPRS.

- **ORES**
- **ORELSE**
- **OREMAS**

Do not assign more than one of the ORES, ORELSE, or OREMAS keys per user.

**ORES Key**

- Assigned to users authorized to write and sign orders
- Typically assigned to licensed physicians
- Allows holders to electronically sign orders; available to service immediately
ORELSE Key

- Assigned to users authorized to release physician’s orders
- Typically assigned to RNs or other advanced practice clinicians
- Releases orders to service for immediate action

OREMAS Key

- Assigned to users authorized to release patient orders as signed on chart
- Typically assigned to Ward Clerks
- Releases orders to service for immediate action

Allocating Signature Keys

Below is one way to assign Signature keys using the Clinical Coordinator menu. Remember that this should be done when creating or editing a user.

You must have Clinical Coordinator access to assign keys.

1. In the appropriate account, bring up the Clinical Coordinator menu by typing ORCL MENU and pressing <Enter>.
2. Choose CPRS Configuration (Clin Coord) … by typing PE and <Enter>.
4. Locate the key you want to assign (ORES, ORELSE, or OREMAS). To advance to the next key, type N and <Enter> at the Edit Holders: prompt.
5. When you locate the key you want to assign, at its Edit Holders prompt select Y and press <Enter>.
6. At the Select HOLDER: prompt, type the name of person to whom you will give the key and press <Enter>.
7. To give the key to additional users, continue typing the users’ names and pressing <Enter>.
8. When finished giving keys, press <Enter> at the Select HOLDER prompt to exit.
9. If necessary, type N and press <Enter> at the Edit Holders prompt to exit the Allocate OE/RR Key option.
Example of allocating signature keys

Select OPTION NAME: ORCL MENU Clinical Coordinator's Menu menu
Select Clinical Coordinator's Menu Option: PE CPRS Configuration (Clin Coord)
Select CPRS Configuration (Clin Coord) Option: AL Allocate OE/RR Security Keys

KEY: ORES
This key is given to users that are authorized to write orders in the chart. Users with this key can verify with their electronic signature patient orders.

This key is typically given to licensed Physicians.

Orders entered by users with this key can be released to the ancillary service for immediate action.

DO NOT give users both the ORES key and the ORELSE key.

Edit Holders? Yes/<Enter> (Yes)
Select HOLDER: CPRSPROVIDER,ONE
Added.
Select HOLDER: <Enter>
==============================================================================

KEY: ORELSE
This key is given to users that are authorized to release doctors orders to an ancillary service for action.

This key is typically given to Nurses.
Users with this key are allowed to put verbal orders in the system and release them to the service for action.

DO NOT give users both the ORES key and the ORELSE key.

Edit Holders? Yes/<Enter> (Yes)
Select HOLDER: CPRSPROVIDER,SIXNURSE BC
Added.
Select HOLDER: <Enter>
==============================================================================

KEY: OREMAS
This is the key given to MAS Ward Clerks. It allows the user to specify patient orders as 'signed on chart' when entered, which releases the orders to the service for action. Users with this key are not allowed to put verbal orders in the system.

Edit Holders? Yes/<Y> (Yes)
Select HOLDER: CPRSPROVIDER,TECNCERK SBW
Added.
Select HOLDER: <Enter>
==============================================================================
Group Note Entry Keys

The OR GN ACCESS key determines which providers can enter Group Notes using the new Group Notes application. To further enable sites to control creation of Group Notes, the Group Notes application restricts creation to designated locations that must be entered in the OR GN LOCATIONS parameter.

Note: For instructions on allocating this key and setting locations for group notes, please see the Group Notes/Encounter Implementation Guide under Group Notes on the Vista Documentation Library (http://www.va.gov/vdl/).

CPRS Tab Access and Reports-Only Access

To use the CPRS GUI, each user now must be given access to either all tabs or to only the CPRS Reports tab. If tabs are not assigned to the user in their NEW PERSON file or if the RESTRICT PATIENT SELECTION prompt does not contain a Yes or No, the CPRS GUI will abort when the user tries to login. This change is part of the Read-Only project and will give sites greater control over who has access to patient records during what time period and is in anticipation of further enhancements to CPRS.

Note: Post-install code contained in a patch should set the “RESTRICTED PATIENT SELECTION” entry to “N” for all current CPRS GUI users, and create a default “COR” tab entry for them as well so that their access remains the same.

After the post-install routine has run, each time a new user is added to the system or if restricted access is needed for existing users, a Clinical Application Coordinator (CAC) or whoever is responsible for granting access to the CPRS GUI at each site, will have to assign the appropriate access. The settings to choose from are

<table>
<thead>
<tr>
<th>Access</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>COR</td>
<td>All current CPRS GUI tabs</td>
</tr>
<tr>
<td>RPT</td>
<td>Reports tab</td>
</tr>
</tbody>
</table>

Sites should assign either access to all tabs (COR) or just the Reports tab (RPT), but not both. Although CPRS will allow CACs or others to give both COR and RPT access at the same time, doing so it the same as giving the user access to all tabs.

Note: If tab access is given for both COR and RPT with concurrent effective dates, the core tab access overrides the reports only access.

One of the following four types of access would normally be granted:

**Full Access to CPRS GUI for All Patients** – The user has no restrictions on which patients they can select (No) and the user can see all CPRS tabs, core access (COR).

**Full Access to the CPRS GUI for a Restricted Patient List Only** – The user can only see a select group of patients (Yes with valid patient list specified) but can view all CPRS GUI tabs, core access (COR).

**Reports Tab Access for a Restricted Patient List** – The user can only see a select group of patients, a restricted patient list (YES) with a valid patient list (valid list entered) and can view only the Reports tab (RPT).

**Reports Tab Access for All Patients** – The user can see all patients (No), but can view only the Reports tab (RPT).

The user will NOT be able to access CPRS if the site does not assign tabs (COR or RPT) or the setting has expired
The following table is for reference only and shows all possible combinations

<table>
<thead>
<tr>
<th>Restrict Patient List?</th>
<th>OE/RR Team List</th>
<th>Tabs Assigned</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Left blank</td>
<td>None</td>
<td>None</td>
<td>No access to the CPRS GUI</td>
</tr>
<tr>
<td>Left blank</td>
<td>XYZ Team</td>
<td>None</td>
<td>No access to the CPRS GUI</td>
</tr>
<tr>
<td>Left blank</td>
<td>XYZ Team</td>
<td>RPT</td>
<td>No access to the CPRS GUI</td>
</tr>
<tr>
<td>Yes</td>
<td>None/invalid</td>
<td>RPT</td>
<td>No access to the CPRS GUI</td>
</tr>
<tr>
<td>Yes</td>
<td>XYZ Team</td>
<td>RPT</td>
<td>User can access only the CPRS GUI Reports tab. Patient Selection only options under the Tools</td>
</tr>
<tr>
<td>No</td>
<td>XYZ Team</td>
<td>RPT</td>
<td>User gets access to the Reports tab only. The full patient list is available.</td>
</tr>
<tr>
<td>No</td>
<td>Any patient list or blank</td>
<td>COR, RPT</td>
<td>User sees all tabs and can access all patients</td>
</tr>
<tr>
<td>Yes</td>
<td>Any patient list</td>
<td>COR, RPT</td>
<td>User sees all tabs but can access only patients in specified list</td>
</tr>
<tr>
<td>Yes</td>
<td>None/Invalid</td>
<td>COR</td>
<td>No Access to CPRS GUI</td>
</tr>
<tr>
<td>No</td>
<td>Any patient list or blank</td>
<td>COR</td>
<td>User sees all tabs and can access all patients</td>
</tr>
<tr>
<td>Left blank</td>
<td>Any patient list or blank</td>
<td>COR</td>
<td>No access to the CPRS GUI</td>
</tr>
<tr>
<td>Left blank</td>
<td>Any patient list or blank</td>
<td>COR, RPT</td>
<td>No access to the CPRS GUI</td>
</tr>
</tbody>
</table>

**How Sites Can Restrict Access**

Even with core access, sites can use the effective and expiration dates to control access to CPRS GUI. A CAC can assign the user core access for a specific period of time that the user will be at the site. Later, if access is needed again, the CAC can edit the existing entry to change the dates or leave that entry as a record and create a new tab access entry for the same tab with new dates. The user then has access to all CPRS GUI tabs and the full patient list for the period of time during which access is granted. To create a duplicate entry of the same tab, the user must select “No” when prompted for the new entry on a blank line.

Restricting core access by dates might be helpful if the CAC knows that a user will do a 90-day rotation. The CAC can set the user up to have core access for the period of time the user will be at the facility using the effective (or starting) date and the expiration date. Currently, an effective date is required for tab settings, but the expiration date is not.
However, of the two, read-only access is the more anticipated. Granting read-only access to CPRS involves assigning the reports tab only. In addition, the user can be assigned a restricted patient list, which is a previously created list in the OE/RR LIST FILE (#100.21). The purpose of this feature is to allow non-clinical users, such as veterans’ service organizations (VSOs) or others who need to review the chart, to have access to the chart without being able to view the whole chart or make any changes to the chart. Setting the tab and a restricted list would allow these individuals to view only the reports tab of those patients they are assigned.

Technical Information

Kernel patches, XU*8*214 and XU*8*230, provide several new fields in the NEW PERSON (#200) file for the following:

- Whether the user’s access is restricted – RESTRICT PATIENT SELECTION (#101.01)
- Which restricted patient list (team list) the user is assigned – PATIENT SELECTION LIST (#101.02)
- Which tabs the user has been given access to and the dates – CPRS TAB (#101.13 multiple)

Within the CPRS TAB (#101.13) multiple, is the CPRS TAB (#.01) field which is a pointer to the new OR CPRS TABS (#101.13) file. Additional fields within the CPRS TAB (#101.13) multiple are EFFECTIVE DATE (#.02) and EXPIRATION DATE (#.03). The entries are made through the Clinical Coordinator menu using the GUI Access – Tabs, PL [ORCL CPRS ACCESS] option. In connection with the “Read Only” functionality, the Patient List utilized, which is based on an OE/RR LIST, is stored, displayed, scrolled, and refreshed fully from a ^TMP global.

Assigning CPRS GUI Tab Access

In order to assign CPRS tab access, you must be able to use the Clinical Coordinator menu in the List Manager interface. To grant restricted access to the CPRS GUI, an OERR List (file #100.21) must be defined to contain the selected patients.

A new option has been added to the PE CPRS Configuration (Clin Coord) [OR PARAM COORDINATOR MENU] entitled GA GUI Access - Tabs, PL [ORCL CPRS ACCESS].

To assign CPRS tab access for user, follow these steps:

1. At the CPRS Configuration (Clinical Coordinator) Option prompt, type GA (for GUI Access – Tabs, PL) and press <Enter>.
2. At the Select NEW PERSON prompt, type the last name of the user and press <Enter>. If necessary, select from the choices given.
3. At the RESTRICTED PATIENT SELECTION prompt, type Y if you want to assign the user a specific Team List and press <Enter>. If you do not want to restrict the user’s access to a specific team list, type N and press <Enter>.

   **Note:** This prompt must be answered with a Yes or No. You can skip it, but if it is not answered, CPRS will abort when the user tries to run CPRS.

4. If you answered Yes to the prompt in step 5, at the PATIENT SELECTION LIST prompt, type the name of the list that was previously defined and assigned to the user using the Patient List Management Menu and press <Enter>. 
5. Type the letters representing the tab or tab set (COR or RPT) that you want to assign to this user and press <Enter>.

   **Note:** To get the tab entry options, type ?? and press <Enter> as necessary. Remember that if you assign the user access to the core tabs (COR) that the user will have full access to CPRS. Also, if you are making a duplicate entry for the same tab such as “RPT” when an “RPT” already exists, you will need to answer N, to the REPORTS TAB? OK? Yes// prompt to make the duplicate entry.

6. When asked if you are adding it as tab and no other entry exists, type Y and press <Enter>.

7. At the EFFECTIVE DATE prompt, type a date and press <Enter>.

8. At the EXPIRATION DATE prompt, you can type a date on which you want the access to expire and press <Enter> or you may press <Enter> without entering a date to bypass this prompt.

9. At the Select CPRS TAB prompt, if you have more editing to do, type which tab you want to edit or add. If you are done editing access press <Enter>.
## Example of Creating a New Tab Entry for the CPRS GUI

<table>
<thead>
<tr>
<th>Option Name</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CL</td>
<td>Clinician Menu ...</td>
</tr>
<tr>
<td>NM</td>
<td>Nurse Menu ...</td>
</tr>
<tr>
<td>WC</td>
<td>Ward Clerk Menu ...</td>
</tr>
<tr>
<td>XC</td>
<td>Check for Multiple Keys</td>
</tr>
<tr>
<td>PE</td>
<td>CPRS Configuration (Clin Coord) ...</td>
</tr>
<tr>
<td>RD</td>
<td>Release/Cancel Delayed Orders</td>
</tr>
</tbody>
</table>

Select Clinical Coordinator's Menu Option: PE  CPRS Configuration (Clin Coord)

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

Select CPRS Configuration (Clin Coord) Option: GA  GUI Access - Tabs, PL

Select NEW PERSON NAME: CPRSPROVIDER,ONE  AB
RESTRICT PATIENT SELECTION: YES//

PATIENT SELECTION LIST: restricted list 5//

Select CPRS TAB: RPT REPORTS TAB.

Are you adding 'RPT' as a new CPRS TAB (the 1ST for this NEW PERSON)? No// Y

(Yes)

EFFECTIVE DATE: T  (MAY 30, 2002)

EXPIRATION DATE: T+365  (MAY 30, 2003)

Select CPRS TAB:
Electronic Signature

An electronic signature is the private code that an authorized user types into the system after performing certain actions. For CPRS, it’s used by clinicians entering orders. This signature has the same validity as the written signature on the chart.

Implementing electronic signature for CPRS is a four-step process:

1. Define the clinician as a provider in the NEW PERSON file.
2. Assign the clinician the Provider key (while in the NEW PERSON file).
3. Assign the ORES key to clinicians who have signature authority.
4. Assign electronic signature codes (this can be done by the coordinator, at the same time as defining the clinician as a provider in the NEW PERSON file, or by the clinician, using *Electronic Signature Code Edit* on the User’s Toolbox menu. See instructions on following pages).

Users may have the ORES key but not have an electronic signature code, and will, therefore, not be allowed to electronically sign orders on the system.

**NOTE:** Until ORES key holders have an electronic signature code, the system assumes that orders entered have been entered and manually signed “on chart”; orders are automatically released to the ancillary service for action.

Once ORES key holders have an electronic signature code, they will be prompted to enter the electronic signature after accepting the orders. If the electronic signature code is entered correctly, the orders are released to the ancillary services for action. If the electronic signature code is not entered, or is entered incorrectly, the orders are not released to the ancillary services for action, but are held in an unreleased/unsigned status. Key holders are given three chances to correctly enter their signature codes.

GUI Review and Sign Works as Follows, According to Signature Status:

- **User has provider key only** (med student)
  If there are notes the user can sign, the ES panel appears in Review/Sign Changes; otherwise it is hidden. Orders appear on the list with the checkbox grayed. If the ES is entered for documents, it is NOT applied to the orders.

- **User has OREMAS key**
  If users (clerks) have entered notes for which they are the author AND orders on behalf of a provider, TWO review screens will appear—one prompting for ES for the things the clerk can sign (a note), and one to allow the clerk to process the orders (mark signed on chart).

- **User has ORELSE key**
  Works the same as for clerks, but the user can also release the orders.

- **User has ORES key**
  Sees the review screen with the ES prompting, both for notes and orders.
Electronic Signature Edit Option

Key holders may enter or edit their electronic signature codes through the option, “Electronic Signature Edit,” on the User’s Toolbox menu. To change an existing code, the user must type in the current code and then enter the new one.

Setup of Electronic Signature

If key holders forget their electronic signature codes, they must contact their IRM Service so that the old code can be deleted. Once this has been done, the user will be allowed to enter a new code without having to know the old code. IRM staff can delete the electronic signature code by editing the field, ELECTRONIC SIGNATURE CODE (20.4) in the NEW PERSON file (200), or by using the option, “Clear Electronic Signature Code [XUSESIG CLEAR].”
ORDER PARAMETERS File (100.99)

Field 100.99,21 ELECTRONIC SIGNATURE

'0' FOR NO;

'1' FOR YES;

This field allows electronic signature functionality to be used. Use of this functionality requires some initial setup before it can be turned on. Users have to be assigned keys that allow them to perform verification steps in the order entry process. They also have to be given an electronic signature code. This also has an effect on who can be selected as the person requesting the order.

Field 100.99,22 ELECTRONIC RECORD

'3' FOR YES (ALLOW S.O.C & WRITTEN);

'4' FOR YES (Exempt Service Entered);

A site can use this field to select 1 of 4 modes for Electronic Signature:

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0&gt;</td>
<td>No change from current Electronic Signature functionality.</td>
</tr>
<tr>
<td>1&gt;</td>
<td>Yes (All orders must be signed online.) Signature on chart is not allowed. All orders are filed initially with a signature status of Unsigned and a notification for electronic signature is sent to the ordering provider.</td>
</tr>
<tr>
<td>2&gt;</td>
<td>Yes (Allow S.O.C) All orders are signed online, but for those cases where an order is written and signed on the paper chart, you can so specify. Backdoor orders send a notification for electronic signature and require a signature, unless the order has a Nature of Order set to null.</td>
</tr>
<tr>
<td>3&gt;</td>
<td>Yes (Allow S.O.C. &amp; Written) Is the same as option 2 except that it will allow orders sent from the ancillary packages with a nature of order of Written to be entered without requiring an electronic signature.</td>
</tr>
<tr>
<td>4&gt;</td>
<td>Yes (Exempt Service Entered) Is the same as option 2 except that it will allow orders sent from the ancillary packages that have not defined a nature of order to be entered without requiring an electronic signature. This is the way 'backdoor' orders were handled before the changes introduced with this new field (added with patch OR<em>2.5</em>46) were added. As of the release of patch OR<em>2.5</em>46 only Pharmacy and Lab have a way of dealing with the nature of order from the backdoor. So until the rest of the backdoor interfaces can deal with this, option 4 is the least disruptive method of evolution, and still get the enhancements for notification and signing of verbal orders.</td>
</tr>
</tbody>
</table>

For options 1, 2, 3 and 4, the default for the prompt "Do you want to mark these orders as 'Signed on Chart'" is changed to NO.
Setup of Electronic Signature

CPRS Configuration Menu (Clin Coord)

<table>
<thead>
<tr>
<th>Option</th>
<th>Option Name</th>
<th>Synonym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allocate OE/RR</td>
<td>ORCL KEY ALLOCATION</td>
<td>KA</td>
<td>This option is to assist the CPRS Clinical Coordinator when allocating Security keys to users of the OE/RR system.</td>
</tr>
<tr>
<td>Security Keys</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Check for Multiple Key</td>
<td>ORE KEY CHECK</td>
<td>XC</td>
<td>This option will identify users that have more than one OR key. Users must only have one OR key to correctly use the software. Any users identified need to have their keys edited so that only one of the OR keys remain (ORES, OREMAS, ORELSE).</td>
</tr>
</tbody>
</table>

1. Assign the appropriate keys to the appropriate users, using the CPRS Configuration Menu (Clin Coord) option, Allocate CPRS Security Keys.

2. Turn electronic signature on in the PARAMETERS file, to make electronic signature requirements active. If the ELECTRONIC SIGNATURE parameter is turned off (set to '0'), orders become active automatically after they’re entered.

3. Users with the ORES key will not see the electronic signature prompts until they add their signature code (through the option Edit Electronic Signature). If they have the ORES key, but haven’t added a signature code, they will be prompted:

   ...you do not have an electronic signature code
   Do you want to give yourself a code now? YES//<Enter>  (YES)

   If the ORES key holder answers no to the above prompt, this dialogue will appear:

   You did not enter a signature code!
   ...orders requiring signature will be marked as 'SIGNED ON CHART'.
Once ORES key holders add their signature codes, they will see:

To electronically sign these orders...
Enter Signature Code: (xxxxxxx) <hidden>
SIGNED

4. Users with the ORELSE and OREMAS keys will see the following prompts after entering orders:

Select Action: Accept Orders// <Enter>   Accept Orders
...insufficient signature authority
NOT SIGNED
Do you want to mark these orders as 'Signed on Chart'? YES// <RET> (YES)

a. If OREELSE key holders answer no, the computer dialogue will be:

...insufficient signature authority
NOT SIGNED
Do you want to mark these orders as 'Signed on Chart'? YES// n  (NO)
These orders have not been signed by an authorized physician
Do you still want to release these orders to the service? YES// <RET> (YES)
NATURE OF ORDER: VERBAL// <RET>

b. If OREMAS key holders answer no, the dialogue will be:

...insufficient signature authority
NOT SIGNED
Do you want to mark these orders as 'Signed on Chart'? YES// n  (NO)
UNRELEASED ORDERS:
$     PROTHROMBIN TIME BLOOD PLASMA LB #1971 WC

Example of “Allocate CPRS Security Keys”

Select CPRS Configuration Menu (Clin Coord): ka Allocate CPRS Security Keys
User
Security Key Edit
KEY: ORES
This key is given to users that are authorized to write orders in the chart.
Users with this key can verify with their electronic signature patient orders.

Edit Holders? YES//<Enter>   (YES)
Select HOLDER: CPRSPROVIDER,ONE // CPRSPROVIDER,ONE
   HOLDER: CPRSPROVIDER,ONE //<Enter>
Select HOLDER: <Enter>
=====================================================================

KEY: ORELSE
This key is given to users that are authorized to release doctors’ orders to an ancillary service for action.
This key is typically given to Nurses.
Users with this key are allowed to put verbal orders in the system and release them to the service for action.

Edit Holders? YES// n  (NO)
=====================================================================

KEY: OREMAS
This is the key given to MAS Ward Clerks. It allows the user to specify patient orders as 'signed on chart' when entered, which releases the orders to the service for action. Users with this key are not allowed to put verbal orders in the system.

Edit Holders? YES// n  (NO)
## Menu Assignments

<table>
<thead>
<tr>
<th>Menu Text</th>
<th>Option Name</th>
<th>Assignment</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPRS Manager Menu</td>
<td>ORMGR MENU</td>
<td>IRMS specialists assigned to CPRS</td>
</tr>
<tr>
<td>Clinician Menu</td>
<td>OR MAIN MENU CLINICIAN</td>
<td>Clinicians (physicians, psychologists, social workers, nurse practitioners, PAs, etc.)</td>
</tr>
<tr>
<td>Nurse Menu</td>
<td>OR MAIN MENU NURSE</td>
<td>Nurses</td>
</tr>
<tr>
<td>Ward Clerk Menu</td>
<td>OR MAIN MENU WARD CLERK</td>
<td>Ward Clerks, MAS personnel</td>
</tr>
<tr>
<td>CPRS Configuration Menu</td>
<td>ORCL MENU</td>
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<tr>
<td>CPRS Configuration Menu (Clin Coord)</td>
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</tr>
</tbody>
</table>

## Digital Signature

As part of the Drug Enforcement Agency Electronic Prescription of Controlled Substances (DEA ePCS) project, CPRS uses digital signatures for outpatient controlled substance medication orders. To digitally sign the outpatient controlled substance order, a provider must have a Personal Identification Verification card (PIV) or smart card, a computer that accepts the card, and a Personal Identification Number (PIN). In addition, to electronically place the outpatient controlled substance orders, a provider must be correctly set up in VistA with several credential items, such as a DEA, VA, or Detox/Maintenance number, keys, entries in file, and other items.

Orders that require digital signatures go through the electronic signature process first. Then, providers must acknowledge the text on the dialog by entering their PIV (also referred to as a smart card) and entering their PIN when prompted.

Introduction

In CPRS, most Notifications will be triggered by examining data in HL7 messages. (In limited cases, they will be triggered within individual packages.) As packages update and pass pertinent data in HL7 arrays via protocol event points, the CPRS Expert System will capture and examine those messages and data to determine if a notification should be triggered. The HL7 message data capture and review process is similar to that required by Order Checking which also uses the CPRS Expert System. When compared with order checks, the delivery mechanism for notifications is non-real time with a different destination. (For a detailed comparison of Notifications and Order Checks, refer to the Notifications document entitled, “Notifications, Order Checks and Kernel Alerts”.) To support this new direction for notifications, the Notifications file has been altered. Some of the information that used to reside in the Notifications file has been moved to the Parameter files.

<table>
<thead>
<tr>
<th>Notification</th>
<th>^ORD(100.9 ien</th>
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<td>ORDER REQUIRES ELEC SIGNATURE</td>
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<tr>
<td>STAT RESULTS</td>
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<tr>
<td>UNSCHEDULED VISIT</td>
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<td>UNVERIFIED MEDICATION ORDER</td>
<td>48</td>
<td>✓</td>
</tr>
<tr>
<td>UNVERIFIED ORDER</td>
<td>59</td>
<td>✓</td>
</tr>
<tr>
<td>URGENT IMAGING REQUEST</td>
<td>52</td>
<td>✓</td>
</tr>
</tbody>
</table>
**Trigger Methods**

Notifications are triggered via six methods:

1. Hard coded triggers within packages; for example: Imaging Patient Examined
2. Time (TaskMan)-driven processes; for example: Medications Expiring - Inpt
3. Expert system rules monitoring HL7 messages; for example: Critical Lab Results
4. Expert system rules monitoring DGPM Movement Events protocol; for example: Discharge
5. Expert system rules monitoring OE/RR Events; for example: Order Requires Elec Signature
6. Order checking system; for example: Order Check

The processing of notifications is determined by information evaluated during the triggering process and the values of parameters set by options in the ORB namespace. For a description of these parameters, refer to Parameters document "Notification Parameters in CPRS 1 - Technical Overview".

**Recipient Determination**

CPRS Notifications determines recipients of a patient’s particular notification/alert in the following order.

- **NOTE:** Terminated users will not receive notifications/alerts.

1. Check the value of the parameter ORB SYSTEM ENABLE/ DISABLE. If it is ‘D’isabled, do not process or send any notifications. If it is ‘E’nabled, process notifications as outlined below.
   - **NOTE:** You can check the value of this parameter via option “Enable or Disable Notification System.”

2. Obtain the default/regular recipients for this notification regardless of patient from the parameter ORB DEFAULT RECIPIENTS.
   - **NOTE:** You can access this parameter via option “Set Default Recipients for Notifications.” With this option, teams and individuals can be set up to automatically always receive a particular notification. If a team is identified, every user on that team (regardless of other parameter and option settings), will receive the notification/alert. Good uses of this parameter include troubleshooting notifications and delivering the Food/Drug Interaction notification (for all patients), to a team of dietitians.

3. Obtain the default/regular device recipients for this notification regardless of patient from the parameter ORB DEFAULT DEVICE RECIPIENTS.
   - **NOTE:** This parameter is accessed via option “Set Default Recipient Device(s) for Notifications.” One or more devices can be set up to automatically always receive a notification. The device may be a printer, file or any other device defined at the site. This is useful if every instance of an alert across all patients is desired for QA, JCAHO or research purposes.
4. After default recipients are determined, a list of potential alert recipients is obtained from:

a. Special, notification-specific recipients:

1) If the notification processed is FLAGGED OI RESULTS - INPT/OUTPT (usually triggered by an HL7 result message from Lab, Imaging or Consults), the orderable item associated with the notification’s order number is found. The parameter ORB OI RESULTS – INPT/OUTPT is then evaluated to determine if users, teams or devices have flagged that orderable item. If the value for the orderable item flag is "YES", the entity (user, team, device), flagging the orderable item becomes a potential alert recipient for ALL patients. If the value is "NO", the entity (user, team, device), flagging the orderable item only becomes a potential alert recipient if that entity is "linked" to the patient. Users are linked to a patient if the user is the patient’s attending physician, primary inpatient provider, PCMM primary care practitioner or PCMM associate provider. In addition, users are linked to a patient if the user shares an OE/RR team with the patient or holds a team position assignment on the patient’s primary PCMM team. OE/RR teams are linked to a patient if the patient is on the OE/RR team. (If a patient is on an OE/RR team that has flagged an orderable item, all users on that team become potential alert recipients.) Devices (printers, etc.) are linked to a patient if the device and patient are on the same OE/RR team.

**NOTE:** If a device is added to the potential recipient list, it will always receive the alert.

**NOTE:** You can check for users or teams linked to flagged orderable item results via option “Flag Orderable Item(s) to Send Notifications”.

2) If the notification processed is FLAGGED OI ORDER - INPT/OUTPT (usually triggered by an HL7 order message from OE/RR or a backdoor ancillary package order), the orderable item associated with the notification’s order number is found. The parameter ORB OI ORDERED – INPT/OUTPT is then evaluated to determine if users or teams have flagged that orderable item. If the value for the orderable item flag is "YES", the entity (user, team, device), flagging the orderable item becomes a potential alert recipient for ALL patients. If the value is "NO", the entity (user, team, device), flagging the orderable item only becomes a potential alert recipient if that entity is "linked" to the patient. Users are linked to a patient if the user is the patient’s attending physician, primary inpatient provider, PCMM primary care practitioner or PCMM associate provider. In addition, users are linked to a patient if the user shares an OE/RR team with the patient or holds a team position assignment on the patient’s primary PCMM team. OE/RR teams are linked to a patient if the patient is on the OE/RR team. (If a patient is on an OE/RR team that has flagged an orderable item, all users on that team become potential alert recipients.)

**NOTE:** If a patient is on an OE/RR team that has flagged an orderable item, all users on that team become potential alert recipients.

Devices (printers, etc.) are linked to a patient if the device and patient are on the same OE/RR team.

**NOTE:** If a device is added to the potential recipient list, it will always receive the alert.

**NOTE:** You can check for users or teams linked to flagged orderable item orders via option “Flag Orderable Item(s) to Send Notifications”.

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3) If the notification processed is FLAGGED OI EXPIRING - INPT/OUTPT (triggered when an order will expire before midnight on the next working day), the orderable item associated with the notification’s order number is found. The parameter ORB OI EXPIRING – INPT/OUTPT is then evaluated to determine if users or teams have flagged that orderable item. If the value for the orderable item flag is "YES", the entity (user, team, device), flagging the orderable item becomes a potential alert recipient for ALL patients. If the value is "NO", the entity (user, team, device), flagging the orderable item only becomes a potential alert recipient if that entity is "linked" to the patient. Users are linked to a patient if the user is the patient's attending physician, primary inpatient provider, PCMM primary care practitioner or PCMM associate provider. In addition, users are linked to a patient if the user shares an OE/RR team with the patient or holds a team position assignment on the patient’s primary PCMM team. OE/RR teams are linked to a patient if the patient is on the OE/RR team.

☞ NOTE: If a patient is on an OE/RR team that has flagged an orderable item, all users on that team become potential alert recipients.

Devices (printers, etc.) are linked to a patient if the device and patient are on the same OE/RR team.

☞ NOTE: If a device is added to the potential recipient list, it will always receive the alert.

☞ NOTE: You can check for users or teams linked to expiring flagged orderable items via option “Flag Orderable Item(s) to Send Notifications”.

4) If a lab results notification is processed (LAB RESULTS, ABNORMAL LAB RESULTS (ACTION), STAT RESULTS, CRITICAL LAB RESULTS (ACTION)), the unique lab ID (e.g., “1916;2990506;9;CH;7009492.9046”), for the notification is obtained. The patient’s existing alerts are then reviewed for matching notifications and unique lab IDs. If a matching alert is found, that alert’s recipients are added to the potential recipient list. In addition, the matching alert’s message text is prefixed to the current alert’s message text and the matching alert is deleted.

b. The optional recipient list identified by the service triggering the alert. For example, Radiology sends Notifications a list of potential recipients when its STAT Imaging Request notification is triggered.

c. Provider-related recipients indicated in the parameter ORB PROVIDER RECIPIENTS:

   1) “P” – Primary Provider (inpatient)
   2) “A” – Attending Physician
   3) “T” – Teams. If set for Teams, all OE/RR teams to which the patient belongs will be evaluated to obtain potential recipients from the set of users also on the teams. A user on multiple teams with the patient will be processed for each team that has an Enabled, Disabled or Mandatory value for that notification. Thus it is possible for one team membership to “disable” a user’s alert whereas another team membership “enables” the user’s alert, all for the same patient.
   4) “O” – Ordering Provider. If set for ordering/requesting provider and an order number is passed by the service/HL7 message triggering the alert, the ordering/requesting provider will be determined and added to the potential list.
NOTE: If the notification is either Order Requires Electronic Signature or Order Requires Co-signature and the ordering/requesting provider does not have signature authority (does not hold the ORES key), the teams that contain both the ordering/requesting provider and patient will be evaluated. Every user with the ORES key on those teams will be added to the potential recipient list.

5) “M” – PCMM Team. If set for PCMM Teams, adds users/providers linked to the patient’s primary PCMM team via PCMM Team Position assignments to the potential recipient list.

6) “E” – Entering User. If set for entering user and an order number is passed by the service/HL7 message triggering the alert, the user/provider who entered the order’s most recent activity will be added to the potential recipient list.

7) “R” – PCMM Primary Care Practitioner (PCP)

8) “S” – PCMM Associate Provider

NOTE: You can access the ORB PROVIDER RECEPIENTS parameter value via option “Set Provider Recipients for Notifications”.

5. Obtain a list of the previous "single instance" alert recipients who have NOT deleted the alert and add them as potential recipients to the new alert. As potential recipients, these previous recipients go through the same "ON/OFF" algorithm to determine if they should actually receive the new alert or not. Single instance notifications/alerts that delete the previous instance of the alert and obtain potential recipients for the new alert include:

   DC ORDER
   DNR EXPIRING
   FLAG ORDER FOR CLARIFICATION
   MEDICATIONS EXPIRING – INPT
   MEDICATIONS EXPIRING – OUTPT
   NEW ORDER
   NPO DIET MORE THAN 72 HRS
   ORDER REQUIRES ELEC SIGNATURE
   UNVERIFIED MEDICATION ORDER
   UNVERIFIED ORDER

6. Each user on the potential recipient list is evaluated according to values set for entities identified in the parameter ORB PROCESSING FLAG.

NOTE: You can access these entity values via options “Enable/Disable Notifications” and “Display the Notifications a User Can Receive.”

The parameter’s entity values are processed in the following order to determine if that particular user should receive the notification/alert or not.

NOTE: Terminated users will not receive notifications/alerts.

If a user on the recipient list has the notification “ON” (they will receive the alert). If the user has Kernal Alert surrogate, the surrogate will receive the alert. The original user will not receive the alert if he has a surrogate!
The first condition met below stops the processing and determines whether or not the user will receive the notification. These conditions are summarized as a matrix in Appendix A.

Processing order:

a. If the USER’s value for the notification is Mandatory or Enabled, the user will receive the alert.

b. If the user’s TEAM value for the notification is Mandatory, the user will receive the alert.

c. If the user’s TEAM value for the notification is Disabled, the user will NOT receive the alert.

d. If the user’s SERVICE/SECTION value for the notification is Mandatory, the user will receive the alert.

e. If the PATIENT’s HOSPITAL LOCATION (inpatients only) value for the notification is Mandatory, the user will receive the alert.

f. If the PATIENT’s HOSPITAL LOCATION (inpatients only) value for the notification is Disabled, the user will NOT receive the alert.

g. If the user’s DIVISION* value for the notification is Mandatory (and PATIENT’s HOSPITAL LOCATION has no value), the user will receive the alert.

h. If the SYSTEM value for the notification is Mandatory (and DIVISION and PATIENT’s HOSPITAL LOCATION have no value), the user will receive the alert.

i. If the PACKAGE (OERR-exported) value for the notification is Mandatory (and SYSTEM, DIVISION*, and PATIENT’s HOSPITAL LOCATION have no value), the user will receive the alert.

j. If the USER’s value for the notification is Disabled, the user will NOT receive the alert.

k. If the user’s TEAM value for the notification is Enabled, the user will receive the alert.

l. If the user’s SERVICE/SECTION value for the notification is Disabled, the user will NOT receive the alert.

m. If the user’s SERVICE/SECTION value for the notification is Enabled, the user will receive the alert.

n. If the PATIENT’s HOSPITAL LOCATION (inpatients only) value for the notification is Enabled, the user will receive the alert.

o. If the user’s DIVISION* value for the notification is Disabled, the user will NOT receive the alert.

p. If the user’s DIVISION* value for the notification is Enabled, the user will receive the alert.

q. If the SYSTEM value for the notification is Disabled, the user will NOT receive the alert.

r. If the SYSTEM value for the notification is Enabled, the user will receive the alert.

s. If the PACKAGE (OERR-exported) value for the notification is Disabled, the user will NOT receive the alert.

t. If the PACKAGE (OERR-exported) value for the notification is Enabled, the user will receive the alert.

u. If none of the above parameter values are found, the notification is processed as Disabled and the user will NOT receive the alert.
NOTE: All notifications will have a value (Enabled, Disabled or Mandatory), at the package level when exported.

NOTE: "If the user has multiple divisions, the first division found with a “Mandatory” value is used. If no mandatory division values exist and a division has an “Enabled” value, that division is used. If neither mandatory nor enabled division values exist and a division has a “Disabled” value, that division is used.

Notification Specifics

Each notification and how it works is described below. In most cases, Recipients, Urgency and Deletion can be set at the site via ORB options/parameters. The values indicated below for Recipients, Urgency and Deletion are those exported by CPRS as package entity, (OE/RR) defaults.

Local Notifications

It is possible for sites to create their own local notifications. Sites that create their own notifications are responsible for the content and maintenance of them. Part of creating a local notification is creating a number for that notification. A range of national numbers is set aside for nationally released notifications.

Local notifications must be assigned a number in the local site range.

Warning: If a local notification has a national number, it could be overwritten when a national notification is released. You could lose your local notification.

Renumbering a Site-Defined Notification

Create an entry in the OE/RR Notifications file [#100.9]. This entry must have a unique, descriptive name and unique internal entry number. In addition, the internal entry number must be specific to your VAMC in the following format:

<your station number><incremental notification number ranging from 01-99>

For example, if your site is number 456, your first locally created notification would be 45601. All "site-defined" notifications must be defined similarly to the following example:

| NUMBER: <site number><incremental number> |
| NAME: <unique site name> |
| PACKAGE ID: OR | MESSAGE TEXT: <alert message text> |
| MESSAGE TYPE: PACKAGE PROVIDES A VARIABLE MESSAGE |
| ACTION FLAG: RUN ROUTINE | ENTRY POINT: INFODEL |
| ROUTINE NAME: ORB3FUP2 |
| *RECIPIENT RESTRICTIONS: RESTRICTED TO PACKAGE-DEFINED RECIPIENTS |
| RELATED PACKAGE: OR |
| *PROCESSING FLAG: ENABLED |
DESCRIPTION: <description of the notification>

Note: Site-defined notifications CANNOT have follow-up actions. (Notifications with follow-up actions must have follow-up action code written for both the ListMgr and GUI interfaces. Currently, this requires the source code to the GUI which is not available.) Therefore, the entry point must be INFODEL and routine name ORB3FUP2.

National Notifications
Nationally released notifications have a specific number range. These national notifications are described below.

Abnormal Imaging Result [ABNL IMAGING RESLT, NEEDS ATTN]

Trigger: Within Radiology package
Mechanism: Radiology package determines an abnormal imaging result has been verified.
Message: Abnl Imaging Reslt, Needs Attn: <procedure>
Follow-up: Display Abnormal Radiology Report
Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Note: Both 22 - IMAGING RESULTS, NON CRITICAL and 25 - ABNL IMAGING RESLT, NEED ATTN must be enabled in order for users to receive all notifications regarding imaging results.

Abnormal Lab Result for Single Test [ABNORMAL LAB RESULT (INFO)]

Trigger: Expert system rule intercepts HL7 message.
Mechanism: If final abnormal lab results

☞ NOTE: According to the lab developer it is not possible for lab to determine abnormal results for non-analyze lab tests, therefore this notification will never trigger for non-‘CH’ labs.

Message: Abnormal lab: <lab test> < value> <collection D/T>
Follow-up: NA
Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an
option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

*NOTE:* To prevent redundant alerts, both Abnormal Lab Result(s) notifications should not be concurrently turned on for a user. Check concurrency via the ‘Display the Notifications a User Can Receive’ option.

**Abnormal Lab Results with Follow-Up Action [ABNORMAL LAB RESULTS (ACTION)]**

**Trigger:** Expert system rule intercepts HL7 message.

**Mechanism:** If final abnormal lab results

*NOTE:* According to the lab developer it is not possible for lab to determine abnormal results for non-analyze lab tests, therefore this notification will never trigger for non-'CH'emistry labs.

**Message:** Abnormal labs - [<orderable item name>]

**Follow-up:** Display order results.

**Recipients:** Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

*NOTE:* To prevent redundant alerts, both Abnormal Lab Result(s) notifications should not be concurrently turned-on for a user. Check concurrency via the ‘Display the Notifications a User Can Receive’ option.
Patient Admission [ADMISSION]

**Trigger:** Expert system rule intercepts DGPM Movement Events protocol.

**Mechanism:** If DGPM Movement is “new” and Type is “admission”

**Message:** Admitted on <Admission D/T> to <ward room-bed>

**Follow-up:** NA

**Recipients:** Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Anatomic Pathology Lab Results [ANATOMIC PATHOLOGY RESULTS]

**Trigger:** Within Lab package.

**Mechanism:** Anatomic pathology lab results become available.

**Message:** Anatomic Pathology/Autopsy/Cytology/Electron Microscopy/Surgical Pathology results available.

**Follow-up:** Display Anatomic Pathology results.

**Recipients:** Determined by parameter ORB PROVIDER RECIPIENTS. There is no exported value for this notification. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Consult/Procedure Interpretation [CONSULT/PROC INTERPRETATION]

**Trigger:** Within Consults package (*** Won’t begin working until Clinical Procedures is installed and implemented.)
Mechanism: When a Clinical Procedure result is linked to a procedure request in Consults an alert is sent to inform recipients a Clinical Procedure is available for interpretation.

Message: Consult/Procedure ready for interpretation.

Follow-up: Display consult/request. If appropriate, possible actions: detailed display, results display, print form 513.

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Recipients: Determined by Consults package (consultants/update users for the receiving service) and parameter ORB PROVIDER RECEIPIENTS. The exported value for this notification is Ordering Provider. ORB PROVIDER RECEIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Consult/Request Canceled/Held [CONSULT/REQUEST CANCEL/HOLD]

Trigger: Within Consults package

Mechanism: Consults package determines a consult/request was canceled or held.

Message: <Cancelled/Discontinued/On hold> consult <consult name or type>

Follow-up: Display consult/request. If appropriate, possible actions: receive, forward, cancel (deny), discontinue, add comments, complete/update, make addendum, detailed display, results display, print form 513.

Recipients: Determined by Consults package and parameter ORB PROVIDER RECEIPIENTS. The exported value for this notification is Ordering Provider. ORB PROVIDER RECEIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.
Consult/Request Resolution [CONSULT/REQUEST RESOLUTION]

**Trigger:** Within Consults package

**Mechanism:** Consults package determines a consult has been completed.

**Message:** Completed consult <consult name or type>

**Follow-up:** Display consult/request. If appropriate, possible actions: detailed display, results display, print form SF 513.

**Recipients:** Determined by Consults package and parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Consult/Request Updated [CONSULT/REQUEST UPDATED]

**Trigger:** Within Consults package

**Mechanism:** Consult package determines the consult had a comment added or the consult was scheduled.

**Message:** <varies but indicates some form of updating> consult <consult name or type>

**Follow-up:** Display consult/request. If appropriate, possible actions: detailed display, results display, print form SF 513

**Recipients:** Determined by Consults package and parameter ORB PROVIDER RECIPIENTS. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.
Critical Lab Result for Single Test [CRITICAL LAB RESULT (INFO)]

Trigger: Expert system rule intercepts HL7 message.

Mechanism: If final critical lab results

⚠️ NOTE: According to the lab developer it is not possible for lab to determine critical results for non-analyze lab tests, therefore this notification will never trigger for non-‘CH’ labs.

Message: Critical lab: <lab test> < value> <collection D/T>

Follow-up: NA

Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

⚠️ NOTE: To prevent redundant alerts, both Critical Lab Result(s) notifications should not be concurrently turned-on for a user. Check concurrency via the ‘Display the Notifications a User Can Receive’ option.

Critical Lab Results with Follow-Up Action [CRITICAL LAB RESULTS (ACTION)]

Trigger: Expert system rule intercepts HL7 message.

Mechanism: If final critical lab results

⚠️ NOTE: According to the lab developer it is not possible for lab to determine critical results for non-analyze lab tests, therefore this notification will never trigger for non-‘CH’ labs.

Message: Critical labs - [<orderable item name>]

Follow-up: Display order results.

Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.
Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action(s)). ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

⚠️ NOTE: To prevent redundant alerts, both Critical Lab Result(s) notifications should not be concurrently turned-on for a user. Check concurrency via the ‘Display the Notifications a User Can Receive’ option.

DC Order Placed [DC ORDER]

Trigger: Expert system rule intercepts HL7 message.
Mechanism: If order is cancelled or discontinued
Message: [pt location] New DC order(s) placed
Follow-up: Display patient’s recent orders (including DCed orders).
Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU. This notification was designed to allow nurses (and perhaps clerks), on teams to be notified when a physician enters a new DC order for a patient cared for by that team. This notification is triggered with every new DC order placed, so it should be disabled for the site with the exception of the nurse/clerk teams when it should be enabled. Enabling and disabling of notifications is accomplished via the parameter ORB PROCESSING FLAG which can be set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU. This alert is deleted when a recipient reviews the patient’s new DC orders via the View Alert follow-up action.

⚠️ NOTE: The DC Order notification is exported as ‘Disabled’ due to the high volume of alerts it generates. Sites can selectively enable this notification for individuals, teams, etc.

Auto Discontinue of Controlled Substance Med Orders [DEA AUTO DC CS MED ORDER]

Trigger: Expert system rule intercepts HL7 message.
Mechanism: If ORC 1 piece 1 (order control code) is ‘OC’ or ‘OD’, ORC 3 piece 2 (filler) is Pharmacy (PS), and ORC 16 (order control reason) contains 16 (Hash mismatch).
Message: Med order(s) DCed. Resubmit or contact Pharmacy.
Follow-up: Display patient’s recent auto-Dced orders.
Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is the Patient Care Team & Ordering Provider. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action). ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU. This alert is also deleted when a recipient reviews the patient’s new auto-DC orders via the View Alert follow-up action.

□ NOTE: The Auto DC CS Med Order notification is exported as ‘Disabled’ due to the possible high volume of alerts it can generate. Sites can selectively enable this notification for individuals, teams, etc.

PKI Certificate Expired [DEA CERTIFICATE EXPIRED]

Trigger: Within Outpatient Pharmacy package.
Mechanism: Outpatient Pharmacy determines that a prescribers PKI certificate has expired after the order is submitted in CPRS, but prior to Pharmacy processing the order.
Message: DEA certificate expired. Renew your certificate.
Follow-up: NA.
Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is the Ordering Provider. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts). ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

□ NOTE: The PKI Certificate Expired notification is exported as ‘Disabled’. Sites can selectively enable this notification for individuals, teams, etc.

PKI Certificate Revoked [DEA CERTIFICATE REVOKED]

Trigger: Expert system rule intercepts HL7 message.
Mechanism: If ORC 1 piece 1 (order control code) is ‘OC’ or ‘OD’, ORC 3 piece 2 (filler) is Pharmacy (PS), and ORC 16 (order control reason) contains 17 (Certificate Revoked).
Message: Med order(s) DCed. Cert revoked. Contact Pharm.

Follow-up: Display patient’s recent auto-DCed orders.

Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is the Patient Care Team & Ordering Provider. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action). ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU. This alert is also deleted when a recipient reviews the patient’s new auto-DC orders via the View Alert follow-up action.

NOTE: The PKI Certificate Revoked notification is exported as ‘Disabled’. Sites can selectively enable this notification for individuals, teams, etc.

Deceased Patient [DECEASED PATIENT]

Trigger: DGPM Movement Events Protocol and Date of Death field in Patient file

Mechanism: DGPM protocol or Date of Death field invokes DGOERNOT routine which calls ORX3.

Message: Died while an inpatient on <Deceased D/T> or Died on <Deceased D/T>

Follow-up: NA

Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Attending, Primary, Teams.

NOTE: Alert does not go to Attending and Primary because when deceased, a patient does not have an attending and primary.

ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Patient Discharged [DISCHARGE]

Trigger: Expert system rule intercepts DGPM Movement Events protocol.
Mechanism: If DGPM Movement Type is discharge
Message: Discharged on <Discharge D/T>
Follow-up: NA
Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Attending, Primary, Teams.

NOTE: Alert does not go to Attending and Primary because at time of discharge, a patient does not have an inpatient attending and primary.

ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

DNR Order Nearing Expiration [DNR EXPIRING]

Trigger: TaskMan monitored process (currently every 15 minutes).
Mechanism: DNR order expiring within 24 hours (72 hours on Fridays)

NOTE: For this notification to work, two site setups must be completed:

- A link must exist between the national term “DNR” and each site's local orderable item that denotes DNR.
- One or more order dialogs must use the DNR orderable items.

Therefore when an order with a DNR orderable item linked to the national term “DNR” is found to be expiring within 24 hours (72 hours on Fridays), the alert is sent.

Message: DNR order nearing expiration
Follow-up: Display DNR order and allow renewal.
Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.
Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is All Recipients (Completion of follow-up action, which is renewal or DCing of the DNR order, by one recipient deletes the alert for all recipients.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Error Message [ERROR MESSAGE]

Trigger: Error in CPRS Expert System processes
Mechanism: Problem in CPRS Expert System
Message: Error occurred.
Follow-up: NA
Recipients: Recipients for this notification are not based on patient. Recipients can be identified via the parameter ORB DEFAULT RECIPIENTS. There is no exported recipient value for this notification. ORB DEFAULT RECIPIENTS can be set at the User and Team levels. Devices can be identified as recipients via the option ORB DEFAULT RECIPIENT DEVICES. ORB DEFAULT RECIPIENT DEVICES can be set at the Division and System levels. There is no exported recipient device value for this notification. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Low. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is All Recipients (Deletion for all recipients when one recipient reviews the alert via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Order Flagged [FLAG ORDER FOR CLARIFICATION]

Trigger: Expert system rules monitoring OE/RR Events
Mechanism: OE/RR determines an order has been flagged.
Message: Order(s) needing clarification: Flagged <date/time>
Follow-up: Display flagged orders and allow user to unflag and/or edit the orders.
Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.
Deletion:  Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is All Recipients (Completion of follow-up action, which is unflagging all of the patient’s flagged orders, by one recipient deletes the alert for all recipients.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Flagged Orderable Item Expiring - Inpatient [FLAGGED OI EXPIRING – INPT]

Trigger:  TaskMan monitored process (currently every 15 minutes).

Mechanism:  The date range to search is based upon day of week and entries in the Holiday file. The range is extended to include all expiring med orders through the next working day (excluding holidays and weekends.) Alert is not triggered if patient is deceased or an outpatient.

Message:  [<pt location>] Order expiring: <oi name> <order start D/T>

Follow-up:  Display orders expiring through the next working day and allow renewal.

Recipients:  Recipients for this notification are not based specifically on patient. They are based on orderable item. Users, OE/RR Teams and Devices can receive this alert for specific orderable items by flagging the orderable items via parameter ORB OI EXPIRING - INPT. If the value for the orderable item flag is "YES", the entity (user, team, device), flagging the orderable item becomes a potential alert recipient for ALL patients. If the value is "NO", the entity (user, team, device), flagging the orderable item only becomes a potential alert recipient if that entity is "linked" to the patient.

☞ NOTE:  If a device is added to the potential recipient list, it will always receive the alert.

Users are linked to a patient if the user is the patient's attending physician, primary inpatient provider, PCMM primary care practitioner or PCMM associate provider. In addition, users are linked to a patient if the user shares an OE/RR team with the patient or holds a team position assignment on the patient’s primary PCMM team. OE/RR teams are linked to a patient if the patient is on the OE/RR team.

☞ NOTE:  If a patient is on an OE/RR team that has flagged an orderable item, all users on that team become potential alert recipients.

Devices (printers, etc.) are linked to a patient if the device and patient are on the same OE/RR team. Recipients can also be identified via the parameter ORB DEFAULT RECIPIENTS. ORB DEFAULT RECIPIENTS can be set at the User and Team levels. Devices can be identified as recipients via the option ORB DEFAULT RECIPIENT DEVICES. ORB DEFAULT RECIPIENT DEVICES can be set at the Division and System levels. Like other notifications, recipients can also be identified via parameter ORB PROVIDER RECIPIENTS. Values are set for these parameters by an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency:  Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Flagged Orderable Item Expiring – Inpatient, cont’d
Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Flagged Orderable Item Expiring - Outpatient [FLAGGED OI EXPIRING – OUTPT]

Trigger: TaskMan monitored process (currently every 15 minutes).

Mechanism: The date range to search is based upon day of week and entries in the Holiday file. The range is extended to include all expiring med orders through the next working day (excluding holidays and weekends,) Alert is not triggered if patient is deceased or an inpatient.

Message: [<pt location>] Order expiring: <oi name> <order start D/T>

Follow-up: Display orders expiring through the next working day and allow renewal.

Recipients: Recipients for this notification are not based specifically on patient. They are based on orderable item. Users, OE/RR Teams and Devices can receive this alert for specific orderable items by flagging the orderable items via parameter ORB OI EXPIRING - OUTPT. If the value for the orderable item flag is "YES", the entity (user, team, device), flagging the orderable item becomes a potential alert recipient for ALL patients. If the value is "NO", the entity (user, team, device), flagging the orderable item only becomes a potential alert recipient if that entity is "linked" to the patient.

☞ NOTE: If a device is added to the potential recipient list, it will always receive the alert.

Users are linked to a patient if the user is the patient's attending physician, primary inpatient provider, PCMM primary care practitioner or PCMM associate provider. In addition, users are linked to a patient if the user shares an OE/RR team with the patient or holds a team position assignment on the patient’s primary PCMM team. OE/RR teams are linked to a patient if the patient is on the OE/RR team.

☞ NOTE: If a patient is on an OE/RR team that has flagged an orderable item, all users on that team become potential alert recipients.

Flagged Orderable Item Expiring - Outpatient

Devices (printers, etc.) are linked to a patient if the device and patient are on the same OE/RR team. Recipients can also be identified via the parameter ORB DEFAULT RECIPIENTS. ORB DEFAULT RECIPIENTS can be set at the User and Team levels. Devices can be identified as recipients via the option ORB DEFAULT RECIPIENT DEVICES. ORB DEFAULT RECIPIENT DEVICES can be set at the Division and System levels. Like other notifications, recipients can also be identified via parameter ORB PROVIDER RECIPIENTS. Values are set for these parameters by an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.
Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Flagged Orderable Item Ordered - Inpatient [FLAGGED OI ORDER – INPT]

Trigger: Expert system rule intercepts HL7 message.

Mechanism: Expert system checks the parameter ORB OI ORDERED - INPT to determine if the orderable item for the order has been flagged to trigger a notification when it is ordered. The expert system also checks to insure the order is new. If the order was placed via the “backdoor” (through lab, pharmacy, etc.) and not through CPRS, an OE/RR order must be included with the HL7 message, often it is not. Therefore, in many backdoor order cases (such as lab backdoor orders), the alert is not sent because an order number is not in the HL7 message. Also the patient must be an INPATIENT.

NOTE: The orderable item identified via the parameter must match the order’s orderable item. Orders are linked to orderable items through the order dialog setup.

Message: [pt location>] Order placed: <oi name> <order start D/T>

Follow-up: NA

Recipients: Recipients for this notification are not based specifically on patient. They are based on orderable item. Users, OE/RR Teams and Devices can receive this alert for specific orderable items by flagging the orderable items via parameter ORB OI ORDERED - INPT. If the value for the orderable item flag is "YES", the entity (user, team, device), flagging the orderable item becomes a potential alert recipient for ALL patients. If the value is "NO", the entity (user, team, device), flagging the orderable item only becomes a potential alert recipient if that entity is "linked" to the patient.

NOTE: If a device is added to the potential recipient list, it will always receive the alert.

Users are linked to a patient if the user is the patient’s attending physician, primary inpatient provider, PCMM primary care practitioner or PCMM associate provider. In addition, users are linked to a patient if the user shares an OE/RR team with the patient or holds a team position assignment on the patient’s primary PCMM team. OE/RR teams are linked to a patient if the patient is on the OE/RR team.

NOTE: If a patient is on an OE/RR team that has flagged an orderable item, all users on that team become potential alert recipients.

Flagged Orderable Item Ordered - Inpatient, cont’d

Devices (printers, etc.) are linked to a patient if the device and patient are on the same OE/RR team. Recipients can also be identified via the parameter ORB DEFAULT RECIPIENTS. ORB DEFAULT RECIPIENTS can be set at the User and Team levels. Some VAMCs set this notification to go to a team of quality assurance specialists. Devices can be identified as recipients via the option ORB DEFAULT RECIPIENT DEVICES. ORB DEFAULT RECIPIENT DEVICES can be set at the Division and System levels. Like other notifications, recipients can also be identified via parameter
ORB PROVIDER RECIPIENTS. Values are set for these parameters by an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:**
Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:**
Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Flagged Orderable Item Ordered - Outpatient [FLAGGED OI ORDER – OUTPT]**

**Trigger:**
Expert system rule intercepts HL7 message.

**Mechanism:**
Expert system checks the parameter ORB OI ORDERED - OUTPT to determine if the orderable item for the order has been flagged to trigger a notification when it is ordered. The expert system also checks to insure the order is new. If the order was placed via the “backdoor” (through lab, pharmacy, etc.) and not through CPRS, an OE/RR order must be included with the HL7 message, often it is not. Therefore, in many backdoor order cases (such as lab backdoor orders), the alert is not sent because an order number is not in the HL7 message. Also the patient must be an OUTPATIENT.

**NOTE:**
The orderable item identified via the parameter must match the order’s orderable item. Orders are linked to orderable items through the order dialog setup.

**Message:**
[<pt location>] Order placed: <oi name> <order start D/T>

**Follow-up:**
NA

**Recipients:**
Recipients for this notification are not based specifically on patient. They are based on orderable item. Users, OE/RR Teams and Devices can receive this alert for specific orderable items by flagging the orderable items via parameter ORB OI ORDERED - OUTPT. If the value for the orderable item flag is "YES", the entity (user, team, device), flagging the orderable item becomes a potential alert recipient for ALL patients. If the value is "NO", the entity (user, team, device), flagging the orderable item only becomes a potential alert recipient if that entity is "linked" to the patient.

**NOTE:**
If a device is added to the potential recipient list, it will always receive the alert.

Users are linked to a patient if the user is the patient's attending physician, primary inpatient provider, PCMM primary care practitioner or PCMM associate provider. In addition, users are linked to a patient if the user shares an OE/RR team with the patient or holds a team position assignment on the patient’s primary PCMM team. OE/RR teams are linked to a patient if the patient is on the OE/RR team.

**NOTE:**
If a patient is on an OE/RR team that has flagged an orderable item, all users on that team become potential alert recipients.
Devices (printers, etc.) are linked to a patient if the device and patient are on the same OE/RR team. Recipients can also be identified via the parameter ORB DEFAULT RECEIPIENTS. ORB DEFAULT RECEIPIENTS can be set at the User and Team levels. Some VAMCs set this notification to go to a team of quality assurance specialists. Devices can be identified as recipients via the option ORB DEFAULT RECIPIENT DEVICES. ORB DEFAULT RECIPIENT DEVICES can be set at the Division and System levels. Like other notifications, recipients can also be identified via parameter ORB PROVIDER RECEIPIENTS. Values are set for these parameters by an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Flagged Orderable Item Result(s) Available – Inpatient [FLAGGED OI RESULTS - INPT]**

**Trigger:** Expert system rule intercepts HL7 message.

**Mechanism:** This notification only functions for Lab, Radiology and Consult results. The expert system checks the parameter ORB OI RESULTS – INPT to determine if the orderable item for the order has been flagged to trigger a notification when it is resulted. The expert system tracks that order by checking HL7 messages. The notification is triggered when the final HL7 results are returned from the filling package. (This notification is currently available for lab, consults and radiology results only.) Also the patient must be an INPATIENT.

**NOTE:** Note: The orderable item identified via the parameter must match the order’s orderable item. Orders are linked to orderable items through the order dialog setup.

**Message:** [<pt location>] Result available: <orderable item name> < order start D/T>

**Follow-up:** Display lab, consults or radiology results

**Recipients:** Recipients for this notification are not based specifically on patient. They are based on orderable item. Users, OE/RR Teams and Devices can receive this alert for specific orderable items by flagging the orderable items via parameter ORB OI RESULTS - INPT. If the value for the orderable item flag is "YES", the entity (user, team, device), flagging the orderable item becomes a potential alert recipient for ALL patients. If the value is "NO", the entity (user, team, device), flagging the orderable item only becomes a potential alert recipient if that entity is "linked" to the patient.

**NOTE:** If a device is added to the potential recipient list, it will always receive the alert.

Users are linked to a patient if the user is the patient's attending physician, primary inpatient provider, PCMM primary care practitioner or PCMM associate provider. In addition, users are linked to a patient if the user shares an OE/RR team with the patient.
or holds a team position assignment on the patient’s primary PCMM team. OE/RR teams are linked to a patient if the patient is on the OE/RR team.

**NOTE:** If a patient is on an OE/RR team that has flagged an orderable item, all users on that team become potential alert recipients.

*Flagged Orderable Item Result(s) Available – Inpatient, cont’d*

Devices (printers, etc.) are linked to a patient if the device and patient are on the same OE/RR team. Recipients can also be identified via the parameter ORB DEFAULT RECEPIENTS. ORB DEFAULT RECEPIENTS can be set at the User and Team levels. Some VAMCs set this notification to go to a team of quality assurance specialists. Devices can be identified as recipients via the option ORB DEFAULT RECIPIENT DEVICES. ORB DEFAULT RECIPIENT DEVICES can be set at the Division and System levels. Like other notifications, recipients can also be identified via parameter ORB PROVIDER RECEPIENTS. Values are set for these parameters by an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

*Flagged Orderable Item Result(s) Available – Outpatient [FLAGGED OI RESULTS - OUTPT]*

**Trigger:** Expert system rule intercepts HL7 message.

**Mechanism:** This notification only functions for Lab, Radiology and Consult results. The expert system checks the parameter ORB OI RESULTS – OUTPT to determine if the orderable item for the order has been flagged to trigger a notification when it is resulted. The expert system tracks that order by checking HL7 messages. The notification is triggered when the final HL7 results are returned from the filling package. (This notification is currently available for lab, consults and radiology results only.) Also the patient must be an OUTPATIENT.

**NOTE:** The orderable item identified via the parameter must match the order’s orderable item. Orders are linked to orderable items through the order dialog setup.

**Message:** [{pt location}] Result available: <orderable item name> < order start D/T>

**Follow-up:** Display lab, consults or radiology results

**Recipients:** Recipients for this notification are not based specifically on patient. They are based on orderable item. Users, OE/RR Teams and Devices can receive this alert for specific orderable items by flagging the orderable items via parameter ORB OI RESULTS - OUTPT. If the value for the orderable item flag is "YES", the entity (user, team, device), flagging the orderable item becomes a potential alert recipient for ALL patients. If the value is "NO", the entity (user, team, device), flagging the orderable item only becomes a potential alert recipient if that entity is "linked" to the patient.
NOTE: If a device is added to the potential recipient list, it will always receive the alert.

Users are linked to a patient if the user is the patient's attending physician, primary inpatient provider, PCMM primary care practitioner or PCMM associate provider. In addition, users are linked to a patient if the user shares an OE/RR team with the patient or holds a team position assignment on the patient’s primary PCMM team. OE/RR teams are linked to a patient if the patient is on the OE/RR team.

NOTE: If a patient is on an OE/RR team that has flagged an orderable item, all users on that team become potential alert recipients.

Flagged Orderable Item Result(s) Available – Outpatient, cont’d

Devices (printers, etc.) are linked to a patient if the device and patient are on the same OE/RR team. Recipients can also be identified via the parameter ORB DEFAULT RECIPIENTS. ORB DEFAULT RECIPIENTS can be set at the User and Team levels. Some VAMCs set this notification to go to a team of quality assurance specialists. Devices can be identified as recipients via the option ORB DEFAULT RECIPIENT DEVICES. ORB DEFAULT RECIPIENT DEVICES can be set at the Division and System levels. Like other notifications, recipients can also be identified via parameter ORB PROVIDER RECIPIENTS. Values are set for these parameters by an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Food/Drug Interaction [FOOD/DRUG INTERACTION]

Trigger: Expert system rule intercepts HL7 message.

Mechanism: If the patient is an inpatient (has a ward/room-bed) and a new medication order is for warfarin/coumadin, disulfiram, phenelzine, tranylcypromine, or parnate.

Message: [<pt location>] <medication> ordered - adjust diet accordingly

Follow-up: NA

Recipients: Recipients for this notification are not based specifically on patient. Recipients can be identified via the parameter ORB DEFAULT RECIPIENTS. There is no exported recipient value for this notification. ORB DEFAULT RECIPIENTS can be set at the User and Team levels. Some VAMCs have set this notification to go to a team of dieticians (regardless of patient). Devices can be identified as recipients via the option ORB DEFAULT RECIPIENT DEVICES. ORB DEFAULT RECIPIENT DEVICES can be set at the Division and System levels. There is no exported recipient device value for this notification. Like other notifications, recipients can also be identified via parameter ORB PROVIDER RECIPIENTS. Values are set for these parameters by an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.
Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

NOTE: Sites have requested the ability to add and remove non-hard coded medication terms to the Food/Drug Interaction notification. Sites can accomplish this by mapping local medication orderable items to the CPRS Expert System national term FOOD-DRUG INTERACTION MED as explained below. Mapping local terms should be done during off hours because the CPRS Expert System is recompiled every time a local term is added, modified, or removed.

When a site installs patch OR*3*96, the patch removes existing medication terms used in the Food/Drug Interaction notification/alert, and these terms must be added after installation. You will add the CPRS default list of COUMADIN/WARFARIN, DISULFIRAM, PHENELZINE, TRANYLCYPROMINE, and PARNATE. You can also add other terms as desired, but you may need assistance from a pharmacist to make the appropriate mapping.

How to Edit Local Site Terms

Before you edit the Local Site Terms, you may want to check what terms are currently mapped.

The following is an example of an inquiry into the file using Fileman.

```
VA FileMan 22.0
Select OPTION NAME: INQUIRE TO FILE ENTRIES

OUTPUT FROM WHAT FILE: ORDER CHECK ELEMENT//
Select ORDER CHECK ELEMENT NAME: INPATIENT FOOD-DRUG REACTION

NAME: INPATIENT FOOD-DRUG REACTION
ELEMENT CONTEXT: GENERIC HL7 MESSAGE ARRAY
EXPRESSION SEQUENCE NUMBER: 1           DATA FIELD 1: FOOD-DRUG INTERACTION MED
  OPERATOR/FUNCTION: LOGICAL TRUE
  CONDITIONAL VALUE 1: COUMADIN,WARFARIN, DISULFIRAM, PHENELZINE, TRANYLCYPROMINE, PARNATE
<======
EXPRESSION SEQUENCE NUMBER: 3           DATA FIELD 1: CONTROL CODE
  OPERATOR/FUNCTION: EQUALS ELEMENT IN SET
  CONDITIONAL VALUE 1: NW,SN
EXPRESSION SEQUENCE NUMBER: 4           DATA FIELD 1: INPATIENT
  OPERATOR/FUNCTION: LOGICAL TRUE
```

You must use the Order Check Mgmt option "Edit Site Local Terms" to re-add the hard-coded medication terms. (The CPRS default list included COUMADIN/WARFARIN, DISULFIRAM, PHENELZINE, TRANYLCYPROMINE and PARNATE.) You can also use the option to add any new medications desired by your site. When mapping the old, default medication terms to
the new national term FOOD-DRUG INTERACTION MED, the default medication terms may not map directly to medication orderable items. You may need assistance from a pharmacist to make the appropriate mapping. For example, mapping "WARFARIN" to "WARFARIN TAB" is straightforward but there may be other orderable item forms of warfarin in your system that should also be mapped. It is best to do this mapping during off-peak hours because the CPRS Expert System is automatically recompiled after a local term is added, modified or removed. During compilation, some order checks and notifications/alerts are taken off-line.
Editing or Adding Site Local Terms

Here is an example using the option "Edit Site Local Terms" to re-add the hard-coded medication terms. The same process can be used to add new medication terms.

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

Select CPRS Configuration (Clin Coord) Option: OC  Order Checking Mgmt Menu

Select Order Checking Mgmt Menu Option: 13  Edit Site Local Terms

Select National Term: ?? <=== Enter "??" for next screen
Choose from:
ANGIOGRAM (PERIPHERAL)
BLOOD SPECIMEN
DANGEROUS MEDS FOR PTS > 64
DNR
FOOD-DRUG INTERACTION MED
NPO
ONE TIME MED
PARTIAL THROMBOPLASTIN TIME
PROTHROMBIN TIME
SERUM CREATININE
SERUM SPECIMEN
SERUM UREA NITROGEN
WBC

Select National Term: FOOD-DRUG INTERACTION MED

National Term: FOOD-DRUG INTERACTION MED

Translated from file: 'ORDERABLE ITEMS' 101.43

Select ORDERABLE ITEMS NAME: COUMADIN WARFARIN TAB (2113) <=>

National Term: FOOD-DRUG INTERACTION MED

Translated from file: 'ORDERABLE ITEMS' 101.43

WARFARIN TAB (2113)

Select ORDERABLE ITEMS NAME: DISULFIRAM TAB (1400) <=>

National Term: FOOD-DRUG INTERACTION MED

Translated from file: 'ORDERABLE ITEMS' 101.43

DISULFIRAM TAB (1400)
WARFARIN TAB (2113)

Select ORDERABLE ITEMS NAME: PHENELZINE SULFATE TAB (1846) <=>

National Term: FOOD-DRUG INTERACTION MED

Translated from file: 'ORDERABLE ITEMS' 101.43

DISULFIRAM TAB (1400)
PHENELZINE SULFATE TAB (1846)
WARFARIN TAB (2113)

Select ORDERABLE ITEMS NAME: TRANYLCYPROMINE TAB (2059) <=>

National Term: FOOD-DRUG INTERACTION MED

Translated from file: 'ORDERABLE ITEMS' 101.43

DISULFIRAM TAB (1400)
PHENELZINE SULFATE TAB (1846)
TRANYLCYPROMINE TAB (2059)
WARFARIN TAB (2113)
Select ORDERABLE ITEMS NAME:

Order Check National Terms

SERUM CREATININE
SERUM UREA NITROGEN
DNR
PROTHROMBIN TIME
NPO
SERUM SPECIMEN
PARTIAL THROMBOPLASTIN TIME
ANGIOGRAM (PERIPHERAL)
WBC
BLOOD SPECIMEN

< Enter ?? to see the rest of the national terms on this list>

Select National Term:

NOTE: The CPRS Expert System automatically recompiles when a local term is added, modified or removed.

Expert system compiler queued to run in 30 seconds.
You will be sent a MailMan bulletin when it has finished.

Removing a Local Site Terms

********************************************************************************
* TO DELETE/REMOVE A TERM, ENTER THE TERM'S NUMBER AT THE ORDERABLE ITEMS NAME: PROMPT AS IN THE FOLLOWING EXAMPLE: *
* *
********************************************************************************

National Term: FOOD-DRUG INTERACTION MED

Translated from file: 'ORDERABLE ITEMS' 101.43

DISULFIRAM TAB     (1400)
PHENELZINE SULFATE TAB     (1846)
TRANYLCYPROMINE TAB     (2059)
WARFARIN TAB     (2113)

Select ORDERABLE ITEMS NAME: 2059 <= TRANYLCYPROMINE TAB (2059)

...OK? Yes// (Yes)

Do you want remove 'TRANYLCYPROMINE TAB (2059)' from the list ? NO//
YES  removed

Imaging Patient Examined [IMAGING PATIENT EXAMINED]

Trigger: Within Radiology package

Mechanism: Radiology package determines a patient has been examined.

Message: Examined: <procedure> <proc D/T> (results pending)

Follow-up: NA

Recipients: Determined and passed by Radiology package and by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.
Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Imaging Request Canceled/Held [IMAGING REQUEST CANCEL/HELD]

Trigger: Expert system rule intercept HL7 message.

Mechanism: If an imaging order has been canceled or discontinued and user canceling the order did not place original order

✓ NOTE: This notification is triggered only if the order is cancelled by the non-original ordering provider. (If Dr. A cancels a chest x-ray ordered by Dr. B, the notification is triggered and sent to potential recipients identified via the ORB PROVIDER RECIPIENTS parameter. If Dr. B cancels his chest x-ray order, the notification is not triggered.)

Message: Imaging request canceled/held/discontinued: <order text (truncated to 51 characters)>

Follow-up: Display order details which will include reason for cancel/held/dced and allow a new order to be placed.

Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Imaging Request Changed [IMAGING REQUEST CHANGED]

Trigger: From within Radiology package
Mechanism: If an imaging request is changed, the alert is triggered from within the Radiology package.

Message: Imaging Exam Changed: <procedure name>

Follow-up: Displays the request before and after the change.

Recipients: Recipients are determined from either the parameter ORB PROVIDER RECEIPIENTS for this alert or by Imaging. Imaging will provide the requesting providers before and after the change. Recipients in the parameter ORB PROVIDER RECEIPIENTS can be set at the Division and System levels. Values for the parameter ORB PROVIDER RECEIPIENTS are set through an option under the menu options ORB NOT MGR MENU and ORB NOT COORD MENU. There is not exported, package-level value for ORB PROVIDER RECEIPIENTS for this notification.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Imaging Result Verified [IMAGING RESULTS, NON CRITICAL]

Trigger: Within Radiology package

Mechanism: Radiology package determines a result has been verified.

Message: Imaging results, Non Critical: <procedure> <proc D/T>

Follow-up: Display Radiology Report

Recipients: Determined and passed by Radiology package. Recipients can also be identified via the parameter ORB DEFAULT RECEIPIENTS. There is no exported recipient value for this notification. ORB PROVIDER RECEIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.
Note: Both 22 - IMAGING RESULTS, NON CRITICAL and 25 - ABNL IMAGING RESLT, NEED ATTN must be enabled in order for users to receive all notifications regarding imaging results.

Imaging Result Amended [IMAGING RESULTS AMENDED]

**Trigger:** Within Radiology package

**Mechanism:** Radiology package determines a result has been amended.

**Message:** Amended Imaging Results: <procedure>

**Follow-up:** Display Radiology Report

**Recipients:** Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Lab Order Canceled [LAB ORDER CANCELED]

**Trigger:** Expert system rule intercepts HL7 message.

**Mechanism:** If a lab order has been canceled or discontinued and user canceling the order did not place original order.

*NOTE:* This notification is triggered only if the order is cancelled by the non-original ordering provider. (If Dr. A cancels a Chem 7 ordered by Dr. B, the notification is triggered and sent to potential recipients identified via the ORB PROVIDER RECIPIENTS parameter. If Dr B cancels his Chem 7 order, the notification is not triggered.)

**Message:** Lab order canceled: <order text (truncated to 51 characters)>

**Follow-up:** Display order details which will include reason for cancellation and allow a new order to be placed.

**Recipients:** Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.
Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Lab Results Available [LAB RESULTS]

Trigger: Expert system rule intercepts HL7 message.
Mechanism: If final lab results
Message: Lab results: <orderable item name>
Follow-up: Display lab order results.
Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review or results via follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

NOTE: The Lab Results notification is exported as ‘Disabled’ due to the high volume of alerts it generates. Sites can selectively enable this notification for individuals, teams, etc.

Lab Threshold Exceeded [#68 - LAB THRESHOLD EXCEEDED]

Trigger: Expert system rule intercepts HL7 message.
Mechanism: The expert system checks the parameters ORB LAB > THRESHOLD and ORB LAB < THRESHOLD for greater and less than threshold values for the resulted lab test. If a threshold value is found and the result value exceeds the parameter’s threshold value, a notification/alert is triggered.
Message: [<pt location>] Lab threshold exceeded - [<orderable item name>]
Follow-up: Display lab results.

Recipients: Recipients for this notification are not based specifically on patient. Target recipients are determined within the Lab Threshold expert system rule. Recipients are users who have indicated upper and/or lower threshold values for lab tests and are linked to the patient. A user is considered linked to the patient if they are the patient's Inpatient Primary Provider, Attending Physician, PCMM Primary Provider or PCMM Associate Provider. A user is also considered linked if they share an OE/RR or PCMM team with the patient. When a result exceeds a threshold value, the user setting the threshold receives an alert message (if they are linked to the patient.) Recipients can also be identified via the parameter ORB DEFAULT RECIPIENTS. ORB DEFAULT RECIPIENTS can be set at the User and Team levels. Devices can be identified as recipients via the option ORB DEFAULT RECIPIENT DEVICES. ORB DEFAULT RECIPIENT DEVICES can be set at the Division and System levels. Like other notifications, recipients can also be identified via parameter ORB PROVIDER RECIPIENTS. Values are set for these parameters by an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Lapsed Unsigned Order(s) [LAPSED UNSIGNED ORDER(S)]

Trigger: Within Order Entry/Results Reporting package

Mechanism: Order Entry/Results Reporting package lapses an unsigned order that was not signed within the number of days specified by the OR LAPSE ORDERS or the OR LAPSE ORDERS DFLT parameters. If both parameters specify a value for a display group, the value stored in the OR LAPSE ORDERS parameter takes precedence.

Message: Lapsed Unsigned Order(s)

Follow-up: Display orders that were lapsed

Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service,
Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Mammogram Results [MAMMOGRAM RESULTS]

Trigger: Within Women’s Health package.
Mechanism: Mammogram results become available.
Message: Mammogram results available.
Follow-up: Display Mammogram results.
Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. There is no exported value for this notification. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Medications Nearing Expiration [EXPIRING MEDICATIONS - INPT]

Trigger: TaskMan monitored process (currently every 15 minutes).
Mechanism: The date range to search is based upon day of week and entries in the Holiday file. The range is extended to include all expiring med orders through the next working day (excluding holidays and weekends.) Alert is not triggered if patient is deceased or an outpatient, order is a one-time medication, or medication is not renewable.
Message: Medications nearing expiration.
Follow-up: Display medication orders expiring through the next working day and allow renewal.
Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values
are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is All Recipients (Completion of follow-up action, which is renewal or DCing of all medication orders nearing expiration, by one recipient deletes the alert for all recipients.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Medications Nearing Expiration [MEDICATIONS EXPIRING - OUTPT]**

**Trigger:** ORMTIME monitored process (site determined - commonly 30 minutes).

**Mechanism:** Taskman searches for expiring medication orders for the patient based on entries in an ORDERS file cross-reference. The date range to search is based upon day of week and entries in the Holiday file. The range is extended to include all expiring med orders through the next working day (excluding holidays and weekends). Alert is triggered if patient is an outpatient. The alert is triggered only for medications orders that have renewable statuses: ACTIVE, EXPIRED, and HOLD. The new alert also deletes the previous instance of this alert if the previous alert is undeleted. (Only one instance of this alert can exist for the patient at any one time.)

**Message:** Medications nearing expiration.

**Follow-up:** Display medication orders expiring through the next working day and allow renewal.

**Recipients:** Determined by parameter ORB PROVIDER RECEIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, and Teams. ORB PROVIDER RECEIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU. The alert is also sent to previous recipients of this patient/alert if the previous alert is undeleted and recipient is still linked to the patient.

**Note:** ORMTIME-driven alerts use the System Postmaster’s DUZ as the triggering DUZ. The standard for Postmaster DUZ is a value less than one. When processing alerts for triggering users with a DUZ less than one, the DUZ of the Ordering Provider (based upon order number), is used to determine which Division to use for parameters.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.
**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is All Recipients (Completion of a follow-up action, which is renewal or discontinuing of all medication orders nearing expiration, by one recipient deletes the alert for all recipients.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**New Order Placed [NEW ORDER]**

**Trigger:** Expert system rule intercepts HL7 message.

**Mechanism:** If a new order is placed through OE/RR or “backdoor” package

**Message:** [<pt location>] New order(s) placed

**Follow-up:** Display active orders for that patient.

**Recipients:** Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU. This notification was designed to allow nurses (and perhaps clerks), on teams to be notified when a physician enters a new order for a patient cared for by that team. This notification is triggered with every new order placed (it happens often), so it should be disabled for the site with the exception of the nurse/clerk teams when it should be enabled. Enabling and disabling of notifications is accomplished via the parameter ORB PROCESSING FLAG which can be set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

 대하여: The New Order notification is exported as ‘Disabled’ due to the high volume of alerts it generates. Sites can selectively enable this notification for individuals, teams, etc.

**New Service Consult/Request [NEW SERVICE CONSULT/REQUEST]**

**Trigger:** Within Consults package

**Mechanism:** Consults package determines a new consult has been requested.

**Message:** New consult <consult name or type> (<urgency>)

**Follow-up:** Display Consult/Request and allow user to act on it.
**Recipients:** “Attention:” provider passed in call from Consults and determined by parameter ORB PROVIDER RECIPIENTS. There is no exported recipient value for this notification. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**NPO Diet for More Than 72 Hours** [NPO DIET MORE THAN 72 HRS]

**Trigger:** TaskMan monitored process (currently every 15 minutes).

**Mechanism:** Triggered for NPO orders that have existed for more than 72 hours. Orders with a status of DC, Expired, Cancelled, Lapsed, Complete, Changed, and Released do not trigger this notification/alert.

**NOTE:** For this notification to work, two site setups must be completed: 1) a link must exist between the national term “NPO” and each site's local orderable item that denotes NPO, and 2) one or more order dialogs must use the NPO orderable items. Therefore when an order with a NPO orderable item linked to the national term “NPO” is found to be expiring within 72 hours, the alert is sent.

**Message:** NPO Diet for more than 72 hours

**Follow-up:** NA

**Recipients:** Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.
Rx Renewal Request [OP NON-RENEWABLE RX RENEWAL]

Trigger: A3A PHONE REFILLS Process Telephone Refills
Mechanism: Renewal request is for non-renewable drug

NOTE: For this notification to work, sites must be using the standard API, RENEW, to interface with third party refill/renewal systems to process Outpatient prescription renewals.

Message: Non-Renewable RX Request for [DRUG NAME], where [DRUG NAME] is replaced by the name of the drug.

Follow-up: Display non-renewable order for which a renewal request was made; displays until recipient processes

Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

NOTE: When considering OE/RR or PCMM teams for potential recipients, only those teams linked to the patient are evaluated for potential recipients. If the ordering provider does not have the ORES key, users that hold the ORES key on OE/RR teams linked to the ordering provider and patient are added to the potential recipient list.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is All Recipients. All Recipients means that the alert is deleted for each user when the user processes the alert; processing by one recipient does not delete the alert for all recipients. ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Order Check [ORDER CHECK]

Trigger: Order checking system
Mechanism: When an order check cannot be delivered real-time, it is bundled and sent to notifications.

Message: Variable
Follow-up: NA
Recipients: If an order exists, the Ordering Provider. If no order exists, the inpatient primary provider (first choice) or the outpatient primary provider (second choice). It is also possible to identify potential recipients via parameter ORB PROVIDER RECIPIENTS. There is no exported recipient value for this notification. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

NOTE: The Order Check notification is exported as ‘Disabled’ due to the high volume of alerts it generates. Sites can selectively enable this notification for individuals, teams, etc.

Order Requires Chart Signature [ORDER REQUIRES CHART SIGNATURE]

*** INACTIVE ***

Trigger: Expert system rules monitoring OE/RR Events.

Mechanism: OE/RR determines an order requires chart signature.

Message: Order released - requires chart signature.

Follow-up: NA

Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.
Order(s) Require Co-Signature [ORDER REQUIRES CO-SIGNATURE]

*** INACTIVE ***

**Trigger:** Expert system rules monitoring OE/RR Events

**Mechanism:** OE/RR determines an order requires co-signature.

**Message:** Orders require co-signature.

**Follow-up:** Display orders requiring co-signature and allow co-signature.

**Recipients:** Determined by parameter ORB PROVIDER RECEIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, Teams. ORB PROVIDER RECEIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is All Recipients (Completion of follow-up action, which is co-signature of all orders requiring co-signature, by one recipient deletes the alert for all recipients.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**NOTE:** This alert will not work until ASU is incorporated into CPRS.

Order(s) Require Electronic Signature [ORDER REQUIRES ELEC SIGNATURE]

**Trigger:** Expert system rules monitoring OE/RR Events

**Mechanism:** OE/RR determines an order requires electronic signature.

**Message:** Order requires electronic signature.

**Follow-up:** Display orders requiring electronic signature and allow electronic signature.

**Recipients:** Determined by parameter ORB PROVIDER RECEIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, Teams. ORB PROVIDER RECEIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**NOTE:** When considering OE/RR or PCMM teams for potential recipients, only those teams linked to the patient are evaluated for potential recipients. If the ordering provider does not have the ORES key, users on OE/RR teams linked to the ordering provider and patient are added to the potential recipient list (if the user has ORES.)
**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is All Recipients (Completion of follow-up action, which is electronic signature of all orders requiring electronic signature, by one recipient deletes the alert for all recipients.) Also deleted on print event when notification is changed from Order Requires Electronic Signature to Order Requires Chart Signature and resent. ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**NOTE:** The following two exception conditions exist when determining how alert deletion will occur. In all other cases, alert deletion will occur when the patient has no unsigned orders.

1) If the recipient of this alert does NOT have the ORES key, the alert will be deleted for that recipient after he reviews the unsigned orders.

2) If the recipient has the ORES key and is NOT linked to the patient as attending physician, inpatient primary provider, PCMM primary care practitioner, PCMM associate provider or via OE/RR or PCMM teams, his alert will be deleted when his unsigned orders are signed. (If unsigned orders written by other providers for the patient remain, alerts for these other providers will not be deleted.) For example, a consulting surgeon (with ORES) places three unsigned orders for a patient. He then receives an “Order requires electronic signature” alert for the patient. He uses the View Alerts follow-up action and is presented with ten unsigned orders for the patient. Only three of the ten orders are his. The surgeon signs his three unsigned orders. If the surgeon is not linked to the patient as attending, inpatient primary provider, PCMM primary care practitioner, PCMM associate provider or via OE/RR or PCMM teams, the alert will be deleted (for him only.)

In most cases alert deletion will occur when the patient has no unsigned orders. For example, if a recipient has the ORES key and is linked to the patient as attending, inpatient primary provider, PCMM primary care practitioner, PCMM associate provider or via OE/RR...
or PCMM teams, all unsigned orders for the patient must be signed before his alert is deleted.]

Orderer-Flagged Order Result(s) Available [ORDERER-FLAGGED RESULTS]

Trigger: Expert system rules monitoring OE/RR Events

Mechanism: User selects an order then action ‘Alert Results’ from OE/RR Orders screen. The user then enters the name of the intended recipient. OE/RR determines that an order has been flagged and invokes the CPRS Expert System. The expert system tracks that order by checking HL7 messages. The notification is triggered when the final HL7 results are returned from the filling package. (This notifications is currently available for lab, consults and radiology results only.)

Message: Requested results available: <orderable item, order D/T>

Follow-up: Display lab, consults, or radiology results

Recipients: Determined by user input through a GUI list box and parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review or results via follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Pap Smear Results [PAP SMEAR RESULTS]

Trigger: Within Women’s Health package.

Mechanism: Pap smear results become available.

Message: Pap smear results available.

Follow-up: Display Pap Smear results.

Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. There is no exported value for this notification. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service,
Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Service Order Requires Chart Signature [SERVICE ORDER REQ CHART SIGN]*** INACTIVE ***

**Trigger:** Expert system rules monitoring OE/RR Events

**Mechanism:** OE/RR determines an order placed via a service option requires chart signature.

**Message:** Service order requires chart signature.

**Follow-up:** NA

**Recipients:** Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider, Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**STAT Imaging Request [STAT IMAGING REQUEST]**

**Trigger:** Within Radiology package

**Mechanism:** Radiology package determines a STAT imaging procedure has been requested.

**Message:** Imaging Request Urgency: STAT

**Follow-up:** NA

**Recipients:** Determined and passed by Radiology package. This notification was developed with the primary intention of alerting radiology technicians and clerical personnel when a STAT imaging request was made. Like other notifications, recipients can also be identified via parameter ORB PROVIDER RECIPIENTS.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service,
Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**STAT Order Placed [STAT ORDER]**

**Trigger:** Expert system rule intercepts HL7 message

**Mechanism:** If a new order has an urgency of ‘STAT’

**Message:** STAT order: <orderable item local text>

**Follow-up:** NA

**Recipients:** Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU. This notification was designed to allow nurses (and perhaps clerks), on teams to be notified when a physician enters a STAT order for a patient cared for by that team. This notification is triggered with every STAT order placed, so it should be disabled for the site with the exception of the nurse/clerk teams when it should be enabled. Enabling and disabling of notifications is accomplished via the parameter ORB PROCESSING FLAG which can be set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**NOTE:** The STAT Order Placed notification is exported as ‘Disabled’ due to the high volume of alerts it generates. Sites can selectively enable this notification for individuals, teams, etc.

**STAT Result Available [STAT RESULT]**

**Trigger:** Expert system rule intercepts HL7 message.

**Mechanism:** This notification only functions for Lab, Radiology and Consult STAT results. The expert system checks for final STAT results in HL7 messages.
Message: STAT lab/imaging/consult results: <orderable item local text>

Follow-up: Display lab or radiology results.

Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Ordering Provider. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual completion of follow-up action.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Suicide Attempted/Completed [SUICIDE ATTEMPTED/COMPLETED]

Trigger: Within Clinical Reminders package.

Mechanism: If Clinical Reminders determines that a MH SUICIDE ATTEMPTED or MH SUICIDE COMPLETED health factor has been documented in PCE.

Message: Suicide attempted/completed on [PCE visit date/time].

Follow-up: NA.

Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is the Mental Health Treatment Coordinator (MHTC) and Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts). ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

NOTE: The Suicide Attempted/Completed notification is exported as ‘Disabled’. Sites can selectively enable this notification for individuals, teams, etc.
Patient Transferred from Psychiatry to Another Unit [TRANSFER FROM PSYCHIATRY]

**Trigger:** Expert system rule intercepts DGPM Movement Events protocol.

**Mechanism:** If DGPM Movement Type is transfer and old location/treating specialty was psychiatry

**Message:** Transfer from Psych ward: <pt’s previous ward> to ward: <pt’s current ward>

**Follow-up:** NA

**Recipients:** Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Unscheduled Patient Visit [UNSCHEDULED VISIT]

**Trigger:** Disposition field in Patient file

**Mechanism:** When an unscheduled visit occurs

**Message:** Unscheduled patient visit <Visit D/T>

**Follow-up:** NA

**Recipients:** Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Attending, Primary, Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels.
Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Unverified Medication Order(s) [UNVERIFIED MEDICATION ORDER]

Trigger: TaskMan monitored process (currently every 15 minutes).

Mechanism: TaskMan process searches for unverified inpatient medication orders. If a medication order was placed more than x hours previously, where x is determined by the parameter ORB UNVERIFIED MED ORDER, the alert is triggered. The parameter can be accessed via options Notification Mgmt Menu -> Set Delays for Unverified Orders… -> Set Delays for Unverified Medication Orders.

Message: Medication order(s) unverified by nurse.

Follow-up: Displays unverified orders from the current admission. If a current admission cannot be determined, displays unverified orders for the last 30 days.

Recipients: Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU. This notification was designed to allow nurses on teams to be notified when a medication order for a patient has not been verified. This notification should be disabled for the site with the exception of the nurse teams wishing to receive it. Enabling and disabling of notifications is accomplished via the parameter ORB PROCESSING FLAG which can be set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Urgency: Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

Deletion: Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is All Recipients (completion of follow-up action, which is verification of all orders requiring verification, by one recipient deletes the alert for all recipients.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

This alert is deleted when all unverified med orders from the current admission have been verified, cancelled or no longer have a status of unverified. If current admission cannot be determined, then unverified med orders from the past 30 days are used in the deletion criteria.

NOTE: The Unverified Medications notification is exported as ‘Disabled’. Sites can selectively enable this notification for individuals, teams, etc.
Unverified Order(s) [UNVERIFIED ORDER]

**Trigger:** TaskMan monitored process (currently every 15 minutes).

**Mechanism:** TaskMan process searches for unverified inpatient orders. If an order was placed more than $x$ hours previously, where $x$ is determined by the parameter ORB UNVERIFIED ORDER, the alert is triggered. This notification will be triggered for ALL unverified orders (including medication orders.) The parameter can be accessed via options Notification Mgmt Menu -> Set Delays for Unverified Orders… -> Set Delays for All Unverified Orders.

**Message:** Order(s) unverified by nurse.

**Follow-up:** Displays unverified orders from the current admission. If a current admission cannot be determined, displays unverified orders for the last 30 days.

**Recipients:** Determined by parameter ORB PROVIDER RECIPIENTS. The exported value for this notification is Teams. ORB PROVIDER RECIPIENTS can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU. This notification was designed to allow nurses on teams to be notified when an order for a patient has not been verified. This notification should be disabled for the site with the exception of the nurse teams wishing to receive it. Enabling and disabling of notifications is accomplished via the parameter ORB PROCESSING FLAG which can be set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is High. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is All Recipients (completion of follow-up action, which is verification of all orders requiring verification, by one recipient deletes the alert for all recipients.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

This alert is deleted when all unverified med orders from the current admission have been verified, cancelled or otherwise no longer have a status of unverified. If current admission cannot be determined, then unverified med orders from the past 30 days are used in the deletion criteria.

☞ **NOTE:** The Unverified Orders notification is exported as ‘Disabled’. Sites can selectively enable this notification for individuals, teams, etc.

URGENT Imaging Request [URGENT IMAGING REQUEST]

**Trigger:** Within Radiology package
**Mechanism:** Radiology package determines an URGENT imaging procedure has been requested.

**Message:** URGENT Imaging request: <procedure> <proc D/T>.

**Follow-up:** NA

**Recipients:** Determined and passed by Radiology package. This notification was developed with the primary intention of alerting radiology technicians and clerical personnel when an urgent imaging request was made. Like other notifications, recipients can also be identified via parameter ORB PROVIDER RECIPIENTS.

**Urgency:** Determined by parameter ORB URGENCY. The exported value for this notification is Moderate. ORB URGENCY can be set at the User, Service, Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.

**Deletion:** Determined by parameter ORB DELETE MECHANISM. The exported value for this notification is Individual Recipient (Individual review via View Alerts.) ORB DELETE MECHANISM can be set at the Division and System levels. Values are set via an option under menu options ORB NOT MGR MENU and ORB NOT COORD MENU.
## Notification Processing Matrix

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</table>

**D = Disabled**

**E = Enabled**

**M = Mandatory**

Note: Unless otherwise noted, the Processing Flag will be considered "Disabled".

Blank = no value.
Lab Result Notifications

OE/RR 2.5 lab result notifications/alerts were modified to fit into the CPRS scheme. CPRS exports seven lab result-related notifications:

- **Lab Results**: follow-up action displays all results for that order
- **Abnormal Lab Results (Action)**: follow-up action displays all results for that order
- **Abnormal Lab Result (Info)**: information only, results and collection date/time in alert msg
- **Critical Lab Results (Action)**: follow-up action displays all results for that order
- **Critical Lab Result (Info)**: information only, results and collection date/time in alert msg
- **Lab Threshold Exceeded**: follow-up action displays all results for that order, including results that exceeded the threshold.
- **STAT Lab Results**: follow-up action displays all results for that order

If the parameter controlling notification recipients (ORB PROCESSING FLAG), is set up improperly, it is possible for a user to receive six different alerts for one lab order (they will get Lab Results when it is resulted, Abnormal Lab Results (Action) and Abnormal Lab Result (Info) if the result is 'H' or 'L', Critical Lab Results (Action) and Critical Lab Result (Info) if the result is 'HH' or 'LL', and STAT Lab Results if the urgency for the order was STAT. [Clue: To review how a user is set up to receive notifications/alerts, use the Notifications Mgmt menu option ‘Display the Notifications a User Can Receive’] For example, if a Chem 7 has three abnormal results, users with Abnormal Lab Results (Action) as ‘Mandatory’ will get one alert for the Chem 7. The alert’s follow-up action will display all results for the Chem 7. Users with Abnormal Lab Result (Info) as ‘Mandatory’ will get three “Information” alerts. The abnormal values and collection date/times will be in the alert message. A similar scenario exists for the two Critical Lab Result(s) notifications. In most cases, users should NOT have Lab Results and either Abnormal Lab Result(s) notification set to ‘Mandatory’.

**NOTE:** If any notification is set to ‘Mandatory’ for the user’s Team, user’s Service, patient’s Location, site’s Division, or site’s System, the user will get the notification. With the exception where the patient’s Location (inpatient only) is set to ‘Disabled’. All instances of the notification for patients in that location will be ‘Disabled’ and not processed. Whereas the notification for patients in other hospital locations will be processed as ‘Mandatory’. This feature of CPRS was specifically included to reduce the number of abnormal and critical lab alerts for patients in critical care units like ICU. Patient location notifications are disabled via the Enable/Disable Notifications option then selecting 'Location' and the notification. This option is only available on ORMGR and clinical coordinator menus.

To prevent multiple lab alert problems, the following setups are recommended:

- Users who want to see ALL lab results (some users process all lab alerts as part of their job), should set the Lab Results notification to ‘Mandatory’. ‘Disable’ the other lab results notifications for the user.
• Providers who do not want to get all lab result alerts may find it best to set Abnormal Lab Results (Action) and Critical Lab Result (Info) to ‘Mandatory’. There may be some duplication at times but the docs will be alerted to critical labs and also be able to review Abnormal Labs when desired. STAT Lab Results may also be a notification they wish to set to ‘Mandatory’, depending on how they plan to use the notifications/alerts to follow-up lab orders. Also, set Abnormal Lab Results (Info) and Critical Lab Results (Action) to ‘Disabled’.

**NOTE:** If any notification is set to ‘Mandatory’ for the user’s Team, user’s Service, patient’s Location, site’s Division, or site’s System, the user will get the notification.

• Other providers will wish to get only information alerts with no follow-up action. For these users, set Abnormal Lab Result (Info) and Critical Lab Result (Info) to ‘Mandatory’ and the other three lab result notifications to ‘Disabled’. (They may want to set the STAT Lab Results to ‘Mandatory’.)

• Some providers may want to set Critical Lab Results (Action) or (Info) to ‘Mandatory’ and ‘Disable’ all other lab result notifications.

### Notifications Trigger Summary

<table>
<thead>
<tr>
<th>Notification</th>
<th>Expert Rule (Mlm)</th>
<th>Data Source</th>
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<tbody>
<tr>
<td>ABNLD IMAGING RESULTS, NEEDS ATTN</td>
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<td>Radiology Pkg</td>
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<tr>
<td>ABNORMAL LAB RESULT (INFO)</td>
<td>ABNORMAL LAB RESULTS</td>
<td>HL7</td>
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<tr>
<td>ABNORMAL LAB RESULTS (ACTION)</td>
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<td>HL7</td>
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<tr>
<td>ADMISSION</td>
<td>PATIENT ADMISSION</td>
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<td>ANATOMIC PATHOLOGY RESULTS</td>
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<td>Lab Pkg</td>
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<td>CONSULT/PROC INTERPRETATION</td>
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<td>Consults Pkg</td>
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<td>CONSULT/REQUEST CANCEL/HOLD</td>
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<td>Consults Pkg</td>
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<tr>
<td>CONSULT/REQUEST RESOLUTION</td>
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<td>NEW ORDER PLACED</td>
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<td>AUTO DCED CONTROLLED SUBSTANCE ORDERS</td>
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</tr>
<tr>
<td>STAT ORDER</td>
<td>STAT ORDER PLACED</td>
<td>HL7</td>
</tr>
<tr>
<td>STAT RESULTS</td>
<td>STAT RESULTS AVAILABLE</td>
<td>HL7</td>
</tr>
<tr>
<td>SUICIDE ATTEMPTED/COMPLETED</td>
<td>Clinical Reminders Pkg</td>
<td></td>
</tr>
<tr>
<td>TRANSFER FROM PSYCHIATRY</td>
<td>PATIENT TRANSFERRED FROM PSYCH.</td>
<td>DGPM</td>
</tr>
<tr>
<td>UNSCHEDULED VISIT</td>
<td>MAS protocols, fields</td>
<td></td>
</tr>
<tr>
<td>UNVERIFIED MEDICATION ORDER</td>
<td>ORMTIME (TaskMan)</td>
<td></td>
</tr>
<tr>
<td>UNVERIFIED ORDER</td>
<td>ORMTIME (TaskMan)</td>
<td></td>
</tr>
<tr>
<td>URGENT IMAGING REQUEST</td>
<td>Radiology Pkg</td>
<td></td>
</tr>
</tbody>
</table>
Forwarding Alerts to Supervisors/Surrogates

The forwarding of alerts to supervisors and surrogates works as follows:

1. Identify the number of days you want an alert to be held before it is sent to the user's supervisor and/or MailMan surrogate(s). (Supervisor is determined by Kernel to be the service chief of the user’s service section.) This number of days value is set in the Notification Mgmt Menu options.

2. When the alert/notification is triggered, the number of days values for forwarding to supervisor and/or surrogate are sent with the alert to the Kernel Alert utility.

3. Whenever the option XQALERT DELETE OLD is triggered, alerts older than 14 days are deleted. In addition, the algorithm searches for alerts with the forward to surrogate/supervisor number of days values greater than zero. If forwarding values are found and the recipient has not responded to the alert within the set number of days, it is forwarded to the recipient's supervisor and/or mailman surrogates.

4. If forwarding is to occur with regularity, the option XQALERT DELETE OLD must be triggered regularly. Most often this is accomplished via TaskMan. Because this option also cleans up old alerts (the archives are still kept) it should be run daily/nightly. If you want forwarding to surrogates and supervisors to occur, the XQALERT DELETE OLD option must be queued to run regularly.

5. No mail message or bulletin is sent to the surrogate(s) or supervisor. The alert is “forwarded” to the surrogate(s) and/or supervisor. The alert will be similar to those noted below.

Example of Forwarded Alerts

<table>
<thead>
<tr>
<th></th>
<th>CPRSPATIENT,ONE (C0005): New order(s) placed.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Forwarded by: CPRSPROVIDER,TEN Generated: 07/00/97 16:26:36</td>
</tr>
<tr>
<td></td>
<td>ALERT NOT PROCESSED BY CPRSPROVIDER,TEN</td>
</tr>
<tr>
<td></td>
<td>CPRSPATIENT,FOUR (C0004): New order(s) placed.</td>
</tr>
<tr>
<td></td>
<td>Forwarded by: CPRSPROVIDER,TEN Generated: 07/00/97 14:40:32</td>
</tr>
<tr>
<td></td>
<td>ALERT NOT PROCESSED BY CPRSPROVIDER,TEN</td>
</tr>
</tbody>
</table>

Parameter Descriptions

**ORB FORWARD SUPERVISOR: Hold Days before Forward to Supervisor**

This parameter is the number of days before a notification is forwarded to a recipient's supervisor. The maximum is 30 days. If not indicted or zero, the notification will not be forwarded. For example, if a notification has a value of 14 for this parameter, it will be forwarded to the supervisor of each recipient who has'nt processed the notification after 14 days. Determination of recipients who have not processed the notification/alert is made when the option XQALERT DELETE OLD is processed. Supervisors are determined by the Kernel Alert Utility to be the user’s service/section chief. Alerts are not forwarded to supervisors of recipients who have processed the alert within 14 days or who have processed the alert within the number of days identified in the parameter. If the value of this parameter is zero or non-existent, the alert/notification is never forwarded.

**ORB FORWARD SURROGATES: Hold Days before Forward to Surrogates**

This parameter is the number of days before a notification is forwarded to a recipient's surrogates. The maximum is 30 days. If not indicated or zero, the notification will not be forwarded. For example, if a notification has a value of 14 for this parameter, it will be forwarded to the surrogates of each recipient who haven't processed the notification after 14 days. Determination of recipients who have not processed the notification/alert is made when the option XQALERT DELETE OLD is processed. Surrogates are determined by the Kernel Alert Utility to be the
user’s MailMan surrogates. Alerts are not forwarded to surrogates of recipients who have processed the alert within 14 days or who have processed the alert within the number of days identified in the parameter. If the value of this parameter is zero or non-existent, the alert/notification is never forwarded.

**Debugging Time-Driven Notifications**

Usually the reason time-driven alerts are not triggering is the national term is not mapped and/or the expiring or unverified orders do not exist within the correct time range with the correct order status. Here are some useful steps in troubleshooting time-driven notifications/alerts.

1. Review the mechanism and logic for the notification in the notification description above. Make sure all mapping (if appropriate) is complete and accurate.

2. Check to make sure the notification system is enabled:
   
   W $$GET^XPAR("SYS^PKG","ORB SYSTEM ENABLE/DISABLE",1,"I")
   
   It should return an "E".

3. Check the last time the process was queued:
   
   W $$GET^XPAR("SYS","ORB LAST QUEUE DATE",1,"I")
   
   **HINT:** You can use ^XPAREDIT to change this value back to an earlier date time so you will process a wider date/time range. Otherwise it only looks at orders since the last time the process was queued.

4. For Unverified Order notifications, check to see how long an order had to go unverified before it would trigger the alert (the delay period):
   
   W $$GET^XPAR("ALL","ORB UNVERIFIED ORDER",1,"I")
   
   Also, this notification will not be present for orders older than 30 days or from a previous admission.
   
   **HINT:** You can use Notification mgmt options or ^XPAREDIT to modify this value to be 0 (zero) hours so you can place an order then run the time-driven alerts code. You can also run the code directly via TNOTIFS^ORB3TIM1 and bypass ORMTIME. The code looks for unverified orders between the last queue date/time and the delay date/time. The exceptions can be found in the notification’s description. (Order status, outpatient order, etc.) Finally, EN^ORB3 is called to determine recipients and send the alert.

5. For DNR Expiring notifications, check to see if the DNR term has been mapped properly:
   
   W $$TERMLKUP^ORB31(.ORBY,"DNR")
   
   The function should return "101.43", with ORBY equal to something like "ORBY(1)=2581^Do Not Resuscitate". (101.43 is the Orderable Item file.) Orders with a status noted in the notification’s description or for a deceased patient are screened out. Finally, check to see if the orderable item of the expiring order is the same as the orderable item for the mapped DNR term:
   
   W $$OI^ORQOR2(<expiring order number>)
   
   If the returned orderable item equals the mapped DNR term’s orderable item, EN^ORB3 is called to determine recipients and send the alert.
   
   Remember, you can trigger time-driven notifications/alerts directly via TNOTIFS^ORB3TIM1 and bypass ORMTIME.
Notification Processing Flowchart with Related Parameters

Package data or HL7 event initiates process

Package identifies list of potential recipients (optional)

Package or HL7 event invokes main notification processing algorithm

Continue if parameter ORB SYSTEM ENABLE/DISABLE = “Enabled”
[option “Enable or Disable Notification System”]

Continue if potential recipients exist for the notification – true if any of the following conditions exist:
Parameter ORB PROCESSING FLAG has one or more “Enabled” or “Mandatory” values for the notification
[option “Enable/Disable Notifications”]
Parameter ORB DEFAULT RECIPIENT DEVICES has a value for the notification
[option "Set Default Recipient Device(s) for Notifications”]
Parameter ORB DEFAULT RECIPIENTS has a “Yes” value for the notification
[option “Set Default Recipients for Notifications”]

Queue notification processing off to TaskMan via Resource file entry ORB NOTIFICATION RESOURCE

TaskMan initiates queued notification processing when resources become available

Send alert to devices indicated for this notification in parameter ORB DEFAULT RECIPIENT DEVICES
[option “Set Default Recipient Device(s) for Notifications”]

Send alert to users and OE/RR team users indicated for this notification in parameter ORB DEFAULT RECIPIENTS
[option “Set Default Recipient(s) for Notifications”]

Obtain a list of notification/alert recipients based on the Orderable Item of the Order being flagged by the Parameters below:
ORB OI ORDERED - INPT (Add users/team users/devices* that flagged this orderable item upon new order for inpatients)

ORB OI ORDERED - INPT PR (Add provider recipients that flagged this orderable item upon new order for inpatients)

ORB OI RESULTS - INPT (Add users/team users/devices* that flagged this orderable item upon results entered for inpatients)

ORB OI RESULTS - INPT PR (Add provider recipients that flagged this orderable item upon results entered for inpatients)

ORB OI EXPIRING - INPT (Add users/team users/devices* that flagged this orderable item upon expiration for inpatients)

ORB OI EXPIRING - INPT PR (Add provider recipients that flagged this orderable item upon expiration for inpatients)

ORB OI ORDERED - OUPT (Add users/team users/devices* that flagged this orderable item upon new order for outpatients)

ORB OI ORDERED - OUPT PR (Add provider recipients that flagged this orderable item upon new order for outpatients)

ORB OI RESULTS - OUPT (Add users/team users/devices* that flagged this orderable item upon results entered for outpatients)

ORB OI RESULTS - OUPT PR (Add provider recipients that flagged this orderable item upon results entered for outpatients)

ORB OI EXPIRING - OUPT (Add users/team users/devices* that flagged this orderable item upon expiration for outpatients)

ORB OI EXPIRING - OUPT PR (Add provider recipients that flagged this orderable item upon expiration for outpatients)

Provider recipient parameter values can contain the following values:

P (Primary Provider): deliver notification to the patient's Primary Provider.


T (Patient Care Team): deliver notification to the patient's primary care Team.

O (Ordering Provider): deliver notification to the provider who placed the order which trigger the notification.

M (PCMM Team): deliver notification to users/providers linked to the patient via PCMM Team Position assignments.

E (Entering User): deliver notification to the user/provider who entered the order's most recent activity.

R (PCMM Primary Care Practitioner): deliver notification to the patient's PCMM Primary Care Practitioner.
S (PCMM Associate Provider): deliver notification to the patient's PCMM Associate Provider.

* Devices that flag an orderable item will always receive the alert for that orderable item.

Use parameter ORB PROCESSING FLAG and on/off algorithm to determine each potential recipient’s “On/Off” value – send alert to users with “On” value [option “Enable/Disable Notifications”]

Refer to “Notification Algorithm for Processing Potential Recipients” document for more information.
Notification Algorithm for Processing Potential Recipients

Each user on the potential recipient list is evaluated according to values set for entities identified in the parameter ORB PROCESSING FLAG. The parameter’s entity values are processed in the following order to determine if that particular user should receive the notification/alert or not. If a user on the recipient list has the notification “ON” (they will receive the alert). If the user has a Kernel Alert surrogate, the surrogate will receive the alert. The original user will not receive the alert if he has a surrogate!

**NOTE:** You can access these entity values via options “Enable/Disable Notifications” and “Display the Notifications a User Can Receive.”

The first condition met below stops the processing and determines whether or not the user will receive the notification/alert. Processing order:

a. If the USER’s value for the notification is Mandatory or Enabled, the user will receive the alert.
b. If the user’s TEAM value for the notification is Mandatory, the user will receive the alert.
c. If the user’s TEAM value for the notification is Disabled, the user will NOT receive the alert.
d. If the user’s SERVICE/SECTION value for the notification is Mandatory, the user will receive the alert.
e. If the PATIENT’s HOSPITAL LOCATION (inpatients only) value for the notification is Mandatory, the user will receive the alert.
f. If the PATIENT’s HOSPITAL LOCATION (inpatients only) value for the notification is Disabled, the user will NOT receive the alert.
g. If the user’s DIVISION* value for the notification is Mandatory (and PATIENT’s HOSPITAL LOCATION has no value), the user will receive the alert.
h. If the SYSTEM value for the notification is Mandatory (and DIVISION and PATIENT’s HOSPITAL LOCATION have no value), the user will receive the alert.
i. If the PACKAGE (OERR-exported) value for the notification is Mandatory (and SYSTEM, DIVISION*, and PATIENT’s HOSPITAL LOCATION have no value), the user will receive the alert.
j. If the USER’s value for the notification is Disabled, the user will NOT receive the alert.
k. If the user’s TEAM value for the notification is Enabled, the user will receive the alert.
l. If the user’s SERVICE/SECTION value for the notification is Disabled, the user will NOT receive the alert.
m. If the user’s SERVICE/SECTION value for the notification is Enabled, the user will receive the alert.
n. If the PATIENT’s HOSPITAL LOCATION (inpatients only) value for the notification is Enabled, the user will receive the alert.
o. If the user’s DIVISION* value for the notification is Disabled, the user will NOT receive the alert.
p. If the user’s DIVISION* value for the notification is Enabled, the user will receive the alert.
q. If the SYSTEM value for the notification is Disabled, the user will NOT receive the alert.
r. If the SYSTEM value for the notification is Enabled, the user will receive the alert.

s. If the PACKAGE (OERR-exported) value for the notification is Disabled, the user will NOT receive the alert.

t. If the PACKAGE (OERR-exported) value for the notification is Enabled, the user will receive the alert.

u. If none of the above parameter values are found, the notification is processed as Disabled and the user will NOT receive the alert.

 NOTE: All notifications will have a value (Enabled, Disabled or Mandatory), at the package level when exported.

 NOTE: * If the user has multiple divisions, the first division found with a “Mandatory” value is used. If no mandatory division values exist and a division has an “Enabled” value, that division is used. If neither mandatory nor enabled division values exist and a division has a “Disabled” value, that division is used.

Using Kernel Alert Option XQALERT DELETE OLD

The Kernel Alert option XQALERT DELETE OLD is used to perform several alert clean-up and management jobs. These jobs include:

1. Delete alerts unprocessed after 14 days (unless a different time period is specified).
2. Purge alerts from the Alert Tracking file.
3. Forward alerts to supervisors.
4. Forward alerts to MailMan surrogates.
5. Forward alerts to Backup Reviewers.

The option XQALERT DELETE OLD can be run directly or as a queued job. As a queued job, the option should be setup to run through TaskMan on a regular basis, preferably once per day. This is accomplished by adding XQALERT DELETE OLD as an entry in the OPTION SCHEDULING file.

Delete Alerts Unprocessed after a Number of Days

All alerts unprocessed after a specified number of days are deleted and will no longer appear on the “View Alerts” display. The default number of days is 14. However, the number of days can be set as described in the note below. The date/time of deletion by this method is noted in the “Auto deleted:” field of the Alert Tracking file.

Note: If the alerts are deleted at the default 14 days, the alerts will continue to be stored in the Alert Tracking file for another 16 days. (Unless specified otherwise, alerts are deleted from the Alert Tracking file after 30 days.)

Note: The 14 days retention period before deletion is a default value. This value can be changed through the TASK PARAMETERS field of the OPTION SCHEDULING file. A numeric value in the TASK PARAMETERS field will replace the default alert retention value of 14 days.
Purge Alerts from the Alert Tracking File

XQALERT DELETE OLD purges all alerts older than 30 days from the Alert Tracking file. If the alert also exists in the Alert file, it is deleted from there as well. The 30 day default value can be modified by using the Notification Mgmt option “9 Archive (delete) after <x> Days” (option ORB3 ARCHIVE PERIOD) to enter a value for parameter ORB ARCHIVE PERIOD. This value is delivered with the alert to Kernel and calculates a value for the RETENTION DATE field of the Alert Tracking file. Purging alerts from the alerts files is especially useful to sites with a high volume of alerts in that it saves disk space and response time.

Forward Alerts to Supervisors

Alerts unprocessed after a specified period are forwarded to the alert recipient’s supervisor (service/section chief.) If no forwarding value exists, the alert is not forwarded. The forwarding value can be set by using Notification Mgmt option “10 Forward Notifications ...” then selection “1 Forward Unprocessed Notification to Supervisor” (option ORB3 FORWARD SUPERVISOR), to enter a value for parameter ORB FORWARD SUPERVISOR.

Forward Alerts to MailMan Surrogates

Alerts unprocessed after a specified period are forwarded to the alert recipient’s MailMan surrogates. If no forwarding value exists, the alert is not forwarded. The forwarding value can be set by using Notification Mgmt option “10 Forward Notifications ...” then selection “2 Forward Unprocessed Notification to Surrogates” (option ORB3 FORWARD SURROGATES), to enter a value for parameter ORB FORWARD SURROGATES.

Example of a Forwarded Alert

1. CPRSPATIENT,TWO (CO002): New order(s) placed.
   Forwarded by: CPRSPROVIDER,SIX Generated: 07/02/00 16:26:36
   ALERT NOT PROCESSED BY CPRSPROVIDER,SIX

Forward Alerts to Backup Reviewers

Alerts unprocessed after a specified period are forwarded to the Backup Reviewer as designated by the ALERT BACKUP REVIEWER parameter. If no forwarding value exists, the alert is not forwarded. The forwarding value, which is the number of days the user has to respond to the alert. After the forwarding value, or number of days elapses, CPRS forwards the alert to another reviewer. You can enter a forwarding value for parameter ORB FORWARD BACKUP REVIEWER using Notification Mgmt option “10 Forward Notifications ...” then selection “3 Forward Unprocessed Notification to Bkup Reviewer” (option ORB3 FORWARD BACKUP REVIEWER). The maximum is 30 days. If not indicated or zero, the notification will not be forwarded. The Backup Reviewer, the individual who will receive the alert, can be set via the option “Set Backup Reviewer for Alerts” (XQAL SET BACKUP REVIEWER) on the Alert Management (XQALERT MGR) menu.

For example, if you set the ORB FORWARD BACKUP REVIEWER parameter to 14, the alert will be forwarded to the backup reviewer of each recipient who hasn't processed the notification after 14 days. The Kernel Alert Utility determines which recipients have not processed their alerts in the specified time and who the backup reviewer for each recipient is.
How to Enable, Disable, or set a Notification as Mandatory

This section explains how to enable, disable, or set a notification as mandatory. Sites should use caution when enabling, disabling, or setting a notification to mandatory. Sites must do their best to provide the right level of information for providers. Providers can receive numerous notifications, to the point where they begin to feel that responding to notifications is all they do.

However, notifications and the timely actions they require or information they convey can help providers better serve their patients.

There are two options to enable/disable or set notifications as mandatory.

The first example allows for selection of one user and one notification to enable, disable, or set as mandatory. The second example allows for selection of one or more users and one or more notifications to enable, disable, or set as mandatory.

1. **Use the following steps to enable, disable, or set a notification as mandatory for one user and one notification in CPRS:**

   a. In the List Manager interface, choose the ORMGR CPRS Manager menu.
   
   b. Select the PE CPRS Configuration (Clin Coord) option.
   
   c. Select the NO Notification Mgmt Menu option.
   
   d. Select Enable/Disable Notifications option.
   
   e. Select the level for which you are setting this parameter:

      - User USR [choose from NEW PERSON]
      - Team (OE/RR) OTL [choose from OE/RR LIST]
      - Service SRV [choose from SERVICE/SECTION]
      - Location LOC [choose from HOSPITAL LOCATION]
      - Division DIV [choose from INSTITUTION]
      - System SYS [xxxxx.FO-SLC.MED.VA.GOV]
      - Package PKG [ORDER ENTRY/RESULTS REPORTING]

   1. Type the name of the notification you want to enable. (You can also type two question marks and press <Enter> to get a list of ALL notifications.)
   
   2. When prompted if you are adding the notification as a new notification, type Y and press <Enter>.
   
   3. At the Notification prompt, if the correct notification is listed, press <Enter>.
   
   4. At the Value prompt, enable, disable or set the notification as mandatory. To enable, type E and press <Enter>. To make the notification Mandatory, type M and press <Enter>. To disable, type D and press <Enter>.

      The notification should now be enabled, disabled or mandatory.

**Example of How to Enable, Disable, or set a Notification as Mandatory**
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 <TEST ACCOUNT> 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
CM  Care Management Menu ...
DO  Event Delayed Orders Menu ...
LO  Lapsed Orders search
PM  Performance Monitor Report

Select CPRS Configuration (Clin Coord) <TEST ACCOUNT> Option: NO  Notification Mgmt Menu

1  Enable/Disable Notifications
2  Erase Notifications
3  Set Urgency for Notifications (GUI)
4  Set Deletion Parameters for Notifications
5  Set Default Recipient(s) for Notifications
6  Set Default Recipient Device(s) for Notifications
7  Set Provider Recipients for Notifications
8  Flag Orderable Item(s) to Send Notifications
9  Archive(delete) after <x> Days
10  Forward Notifications ...
11  Set Delays for Unverified Orders ...
12  Send Flagged Orders Bulletin
13  Determine Recipients for a Notification
14  Display Patient Alerts and Alert Recipients
15  Enable or Disable Notification System
16  Display the Notifications a User Can Receive

Select Notification Mgmt Menu <TEST ACCOUNT> Option: 1  Enable/Disable Notifications

   Set PROCESSING FLAG Parameters for Notifications
Processing Flag may be set for the following:

1. User (USR) [choose from NEW PERSON]
2. Team (OE/RR) (OTL) [choose from OE/RR LIST]
3. Service (SRV) [choose from SERVICE/SECTION]
4. Location (LOC) [choose from HOSPITAL LOCATION]
5. Division (DIV) [choose from INSTITUTION]
6. System (SYS) [xxxxxxxx.FO-SLC.MED.VA.GOV]
7. Package (PKG) [ORDER ENTRY/RESULTS REPORTING]

Enter selection: 6 System xxxxx.FO-SLC.MED.VA.GOV

------- Setting Processing Flag for System: xxxxx.FO-SLC.MED.VA.GOV --------

Select Notification: DEA

1. DEA AUTO DC CS MED ORDER
2. DEA CERTIFICATE EXPIRED
3. DEA CERTIFICATE REVOKED

CHOOSE 1-3: 1 DEA AUTO DC CS MED ORDER

Are you adding DEA AUTO DC CS MED ORDER as a new Notification? Yes/ No  YES

Notification: DEA AUTO DC CS MED ORDER
Value: ?

Code indicating processing flag for the entity and notification.

Select one of the following:

M Mandatory
E Enabled
2. Use the following steps to enable, disable, or set a notification as mandatory for one or more users and one or more notification in CPRS:

1. In the List Manager interface, choose the ORMGR CPRS Manager menu.
2. Select the PE CPRS Configuration (Clin Coord) option.
3. Select the NO Notification Mgmt Menu option.
4. Select the Bulk Parameter Editor for Notifications …
5. Select Enable/Disable Notifications option.
6. Select the level for which you are setting this parameter:
   1. User [choose via ListManager]
   2. Team (OE/RR) [choose via ListManager]
   3. Service [choose via ListManager]
   4. Location [choose via ListManager]
   5. Division [choose via ListManager]
   6. System [CPRS32.FO-SLC.MED.VA.GOV]
5. Add Users to the list by selecting Team, Service, Division, or ALL or New Person.
6. Enter the number(s) of the notifications you want to enable.
7. At the Value prompt, enable the notification or set it as mandatory. To enable, type E and press <Enter>. To make the notification Mandatory, type M and press <Enter>. The notification(s) should now be enabled for the selected users.

Example of How to Enable, Disable, or set a Notification as Mandatory for One or More Users and One or More Notifications

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 <TEST ACCOUNT> 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
CM  Care Management Menu ...
DO  Event Delayed Orders Menu ...
LO  Lapsed Orders search
PM  Performance Monitor Report

Select CPRS Configuration (Clin Coord) <TEST ACCOUNT> Option: NO  Notification Mgmt Menu
1  Enable/Disable Notifications
2  Erase Notifications
3  Set Urgency for Notifications (GUI)
4  Set Deletion Parameters for Notifications
5  Set Default Recipient(s) for Notifications
6  Set Default Recipient Device(s) for Notifications
7  Set Provider Recipients for Notifications
8  Flag Orderable Item(s) to Send Notifications
9  Archive(delete) after <x> Days
10  Forward Notifications ...
11  Set Delays for Unverified Orders ...
12  Send Flagged Orders Bulletin
13  Determine Recipients for a Notification
14  Display Patient Alerts and Alert Recipients
15  Enable or Disable Notification System
16  Display the Notifications a User Can Receive
17  Bulk Parameter Editor for Notifications ...

BULK PARAMETER EDITOR MENU

1  Enable/Disable Notifications
2  Erase Notifications
3  Set Urgency for Notifications (GUI)
4  Set Deletion Parameters for Notifications
5  Set Default Recipient(s) for Notifications
6  Set Default Recipient Device(s) for Notifications
Set Provider Recipients for Notifications
Flag Orderable Item(s) to Send Notifications ...
Archive(delete) after <x> Days
Forward Notifications ...
Set Delays for Unverified Orders ...
Send Flagged Orders Bulletin
Determine Recipients for a Notification
Display Patient Alerts and Alert Recipients
Notifications a User can Receive [DETAILED]
Enable or Disable Notification System
Alert Tracking Reports
Report Menu for Alerts ...

Select Bulk Parameter Editor for Notifications <TEST ACCOUNT> Option: 1 Enable/Disable Notifications

Processing Flag may be set for the following:

1 User [choose via ListManager]
2 Team (OE/RR) [choose via ListManager]
3 Service [choose via ListManager]
4 Location [choose via ListManager]
5 Division [choose via ListManager]
6 System [CPRS32.FO-SLC.MED.VA.GOV]

Enter selection: 1 User
Parameter Manager  Sep 12, 2019@16:28:29  Page: 1 of 5

Parameter: PROCESSING FLAG

Entity: USER [choose via Add/Remove]

Instance

1  ABNL IMAGING RESLT, NEEDS ATTN
2  ABNORMAL LAB RESULT (INFO)
3  ABNORMAL LAB RESULTS (ACTION)
4  ADMISSION
5  ANATOMIC PATHOLOGY RESULTS
6  APPOINTMENT REQUEST CANCELLED
7  CONSULT/PROC INTERPRETATION
8  CONSULT/REQUEST CANCEL/HOLD
9  CONSULT/REQUEST RESOLUTION
10  CONSULT/REQUEST UPDATED
11  CRITICAL LAB RESULT (INFO)
12  CRITICAL LAB RESULTS (ACTION)
13  DC ORDER
14  DEA AUTO DC CS MED ORDER
15  DEA CERTIFICATE EXPIRED
+  Enter ?? for more actions

Edit Instance Value  Add/Remove/View Entities
View Instance Value(s)  Show All Instances
Quit

Select Action:Next Screen// a  Add/Remove/View Entities
Entity Management  

Sep 12, 2019@16:28:33  

Page: 1 of 0

User [NEW PERSON] List

Entity

<NONE>

Enter ?? for more actions

Add Entity  
Remove Entity

Clear Entity List  
View Entity Details

Quit

Select Action: Quit // a  
Add Entity

Add USERS to the ENTITY List by Team, Service, Division, or ALL? NO // Nope

Select NEW PERSON NAME: cprsprovider,eight  
CPRSPROVIDER,EIGHT  
CAR PHYSICIAN

Select NEW PERSON NAME: cprsprovider,fifty  
CPRSPROVIDER,FIfty  
PHYSICIAN
Select NEW PERSON NAME: cprsprovider, fiftyone  CPRSPROVIDER,FIFTYONE  PHYSICIAN

<table>
<thead>
<tr>
<th>Entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1  CPRSPROVIDER,EIGHT</td>
</tr>
<tr>
<td>2  CPRSPROVIDER,FIFTY</td>
</tr>
<tr>
<td>3  CPRSPROVIDER,FIFTYONE</td>
</tr>
</tbody>
</table>
Enter ?? for more actions

Add Entity Remove Entity

Clear Entity List View Entity Details

Quit

Select Action: Quit/

Quit
+ Enter ?? for more actions

Edit Instance Value Add/Remove/View Entities

View Instance Value(s) Show All Instances

Quit

Select Action: Next Screen// e  Edit Instance Value

Select Instance(s) (1-75): 1-4

[EDIT] Multiple Values and/or Entries Selected.

Value: e  Enabled

Updating entries...DONE!
25. Appendix C: Notification Parameters in CPRS 1 – Technical Overview

Introduction

CPRS Notifications uses the Parameter file [#8989.5] to export values for parameters that determine how notifications are processed. Some of these parameters replaced fields in the Notifications file [#100.9]; others are new in CPRS. When each parameter is defined and set up via the Parameter Definition file [#8989.51], a set of entity relationships is established. Most CPRS Notification parameters were set up with links to the “Package” entity. Hence, the exported notification “defaults” are found as parameter values for package entity “Order Entry/Results Reporting.” Notification parameter values for package entities (Order Entry/Results Reporting) should never be modified. Changes specific to your site can be made for system, division, and other entities depending on how each parameter is defined. (Refer to CPRS Install documents for a listing of exported default values.)

NOTE: Some parameters have a “Location” entity type. Only inpatient location entities are used. Outpatient location entities are ignored because a patient’s outpatient location cannot be reliably determined and a patient can have several simultaneous outpatient locations.

Parameters

ORB ARCHIVE PERIOD [Option: ORB3 ARCHIVE PERIOD]

This parameter indicates the number of days to archive a notification in the Alert Tracking file [#8992.1]. If not indicated, the default period of 30 days is used. The maximum number of days is 100,000 or about 220 years. When a notification/alert is triggered, this value is passed to the Kernel Alert Utility. Kernel Alerts stores the value with each individual alert in the Alert Tracking File [^XTV(8992.1]. The Kernel Alert Utility handles the actual display, archiving, and deletion of alerts.

| ENTITY PRECEDENCE: 1 | ENTITY TYPE: Division |
| ENTITY PRECEDENCE: 2 | ENTITY TYPE: System |

Customization Suggestion:

- If you wish to keep alerts for a notification as long as possible, set this value to its maximum of 100,000 (about 220 years.)

ORB DEFAULT RECIPIENT DEVICES [Option: ORB3 DEFAULT DEVICE RECIPIENTS]

This parameter sets devices as default recipients of a notification, regardless of patient. A value of “Yes” indicates the device always receives the notification when it is triggered. Example devices include printers, terminals, and files.

| ENTITY PRECEDENCE: 1 | ENTITY TYPE: Division |
| ENTITY PRECEDENCE: 2 | ENTITY TYPE: System |

Customization Suggestions:

- Set a file to receive every instance of a notification useful in meeting JCAHO requirements.
- Troubleshoot notification occurrences by sending them to a printer or a file.
• Set a file to receive every instance of a notification for research purposes. Later parse the file removing key data for use in a spreadsheet or research database.

**ORB DEFAULT RECIPIENTS [Option: ORB3 DEFAULT RECIPIENTS]**

This parameter sets teams and/or users as default recipients of a notification, regardless of patient. A value of “Yes” indicates the team/user always receives the notification when it is triggered – despite values in the ORB PROCESSING FLAG parameter.

| ENTITY PRECEDENCE: 1 | ENTITY TYPE: User |
| ENTITY PRECEDENCE: 2 | ENTITY TYPE: Team (OE/RR) |

**Customization Suggestions:**

• Set up a dietician team to receive all instances of the Food/Drug Interaction alert by using this parameter to set that team as a “Default Recipient” for the Food/Drug Interaction notification.

**NOTE:** Do not add patients to these teams. If patients exist on these teams, the dieticians will also receive alerts for notifications with an ORB PROVIDER RECIPIENT value containing “T”. To prevent dieticians on this team from receiving unwanted alerts, set the team’s ORB PROCESSING FLAG parameter values to Disabled for all Mandatory notifications. (With patch OR*3*74, Disabled Team values take precedence over Mandatory values at all entity levels except User.)

• Set up a QA team to receive all instances of a notification.

**ORB DELETE MECHANISM [Option: ORB3 DELETE MECHANISM]**

This parameter determines how alerts are deleted when a successful alert follow-up action is taken or a user views an “Information Only” alert. It is a set of codes including:

• **I** (Individual Recipient): delete the notification for an individual recipient when:
  • That individual completes the follow-up action on notifications with associated follow-up action.
  • That individual reviews notifications without follow-up actions.

• **A** (All Recipients): delete the notification for all recipients when:
  • Any recipient completes the follow-up action on notifications with follow-up actions.
  • Any recipient reviews notifications without follow-up actions.

| ENTITY PRECEDENCE: 1 | ENTITY TYPE: Division |
| ENTITY PRECEDENCE: 2 | ENTITY TYPE: System |
ORB FLAGGED ORDERS BULLETIN [Option: ORB3 FLAGGED ORDERS BULLETIN]

This parameter is used to determine if a bulletin should be sent when an order is “flagged for clarification.” A “Yes” indicates a MailMan bulletin is sent to the order’s Current Provider (usually the Ordering Provider) when the order is flagged. This option has no effect on the Flagged Order for Clarification notification that is also triggered when an order is flagged for clarification.

<table>
<thead>
<tr>
<th>ENTITY PRECEDENCE</th>
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<tbody>
<tr>
<td>1</td>
<td>User</td>
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<td>2</td>
<td>Service</td>
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<tr>
<td>3</td>
<td>Division</td>
</tr>
<tr>
<td>4</td>
<td>System</td>
</tr>
</tbody>
</table>

Customization Suggestion:

- If you have a service that prefers bulletins over notifications/alerts when an order is flagged, set this parameter to “Yes” for the service and “Disable” the notification “Flagged Order for Clarification” for the service via the ORB PROCESSING FLAG parameter. Furthermore, if you have a user within that service who prefers notifications/alerts over bulletins when an order is flagged, set this parameter to “No” for the user and set the user’s processing flag value for the notification “Flagged Order for Clarification” to be “Mandatory.”

ORB FORWARD BACKUP REVIEWER [Option: ORB3 FORWARD BACKUP REVIEWER]

This new parameter supports Kernel Alert functionality that allows users to identify a user (backup reviewer) to receive unattended alerts after x days. The new parameter indicates how many days to wait before forwarding an alert to the backup reviewer. (Specifying a user's backup reviewer is accomplished via Kernel Alert option XQAL SET BACKUP REVIEWER.) This is similar to current functionality that forwards alerts to a user's surrogate or supervisor. The value exported with this patch for each OE/RR notification/alert on your system is 0 (zero.) A zero indicates the notification/alert will never be forwarded to the backup reviewer. This new parameter does not affect TIU and non-OE/RR alerts.

Note: You must change the parameter value for each notification/alert your site intends to be forwarded to the backup reviewer.

<table>
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<tr>
<td>1</td>
<td>Division</td>
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<tr>
<td>2</td>
<td>System</td>
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</tbody>
</table>

ORB FORWARD SUPERVISOR [Option: ORB3 FORWARD SUPERVISOR]

This parameter indicates how many days to hold an unprocessed alert before forwarding it to the user’s supervisor. The maximum is 30 days. If not indicated or zero, the notification is never forwarded. For example, if a notification has a value of “14” for this parameter, it is forwarded to the supervisor of each recipient who hasn’t processed the notification within 14 days. Determination of recipients who have not processed the notification and their supervisors is made by the Kernel Alert Utility. For this purpose, Kernel Alerts recognizes the user’s service/section chief as supervisor.

<table>
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<tr>
<th>ENTITY PRECEDENCE</th>
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<tbody>
<tr>
<td>1</td>
<td>Division</td>
</tr>
<tr>
<td>2</td>
<td>System</td>
</tr>
</tbody>
</table>
ORB FORWARD SURROGATES [Option: ORB3 FORWARD SURROGATES]

This parameter indicates how many days to hold an unprocessed alert before forwarding it to the user’s MailMan surrogates. The maximum is 30 days. If not indicated or zero, the notification is never forwarded. For example, if a notification has a value of 14 for this parameter, it is forwarded to the MailMan surrogates of each recipient who hasn’t processed the notification within 14 days. Determination of recipients who have not processed the notification and their surrogates is made by the Kernel Alert Utility.

| ENTITY PRECEDENCE: 1 | ENTITY TYPE: Division |
| ENTITY PRECEDENCE: 2 | ENTITY TYPE: System |

ORB LAST QUEUE DATE [Option: No User Interaction]

This parameter indicates the last date/time the Driven-driven notifications were triggered.

| ENTITY PRECEDENCE: 1 | ENTITY TYPE: System |

Customization Suggestion:

- Do not modify this parameter unless you desire an unrelenting hail of expiring order alerts and riotous user behavior.

ORB OI EXPIRING – INPT [Option: ORB3 FLAG ORDERABLE ITEMS]

This parameter is used to trigger the FLAGGED OI EXPIRING - INPT notification/alert when a specific orderable item is expiring for an inpatient. For this notification to be triggered, the orderable item selected via this parameter must match the order’s orderable item and the patient must be an inpatient. Orders are linked to orderable items through the order dialog setup. OE/RR Teams, individual users or devices can be set up to receive the alert for one or more orderable items by selecting the desired team, user or device via this parameter. If the value for the orderable item flag is "YES", the entity (user, team, device), flagging the orderable item becomes a potential alert recipient for ALL inpatients. (If a device is added to the potential recipient list, it will always receive the alert.) If the value is "NO", the entity (user, team, device), flagging the orderable item only becomes a potential alert recipient if that entity is "linked" to the patient. Users are linked to a patient if the user is the patient's attending physician, primary inpatient provider, PCMM primary care practitioner or PCMM associate provider. In addition, users are linked to a patient if the user shares an OE/RR team with the patient or holds a team position assignment on the patient’s primary PCMM team. OE/RR teams are linked to a patient if the patient is on the OE/RR team. (If a patient is on an OE/RR team that has flagged an orderable item, all users on that team become potential alert recipients.) Devices (printers, etc.) are linked to a patient if the device and patient are on the same OE/RR team.

| ENTITY PRECEDENCE: 1 | ENTITY TYPE: User |
| ENTITY PRECEDENCE: 2 | ENTITY TYPE: Team (OE/RR) |
| ENTITY PRECEDENCE: 3 | ENTITY TYPE: Device |

Customization Suggestions:

- Flag orderable items for restraints/protective devices that need to be renewed every 24 hours.
- Flag orderable items of importance to JCAHO.
- Flag orderable items for telemetry orders.
- Send an alert to a printer whenever a particular orderable item is ordered.
ORB OI EXPIRING – OUTPT [Option: ORB3 FLAG ORDERABLE ITEMS]

This parameter is used to trigger the FLAGGED OI EXPIRING - OUTPT notification/alert when a specific orderable item is expiring for an outpatient. For the notification to be triggered, the orderable item selected via this parameter must match the order’s orderable item and the patient must be an outpatient. Orders are linked to orderable items through the order dialog setup. OE/RR Teams, individual users or devices can be set up to receive the alert for one or more orderable items by selecting the desired team, user or device via this parameter. If the value for the orderable item flag is "YES", the entity (user, team, device), flagging the orderable item becomes a potential alert recipient for ALL inpatients. (If a device is added to the potential recipient list, it will always receive the alert.) If the value is "NO", the entity (user, team, device), flagging the orderable item only becomes a potential alert recipient if that entity is "linked" to the patient. Users are linked to a patient if the user is the patient's attending physician, primary inpatient provider, PCMM primary care practitioner or PCMM associate provider. In addition, users are linked to a patient if the user shares an OE/RR team with the patient or holds a team position assignment on the patient’s primary PCMM team. OE/RR teams are linked to a patient if the patient is on the OE/RR team. (If a patient is on an OE/RR team that has flagged an orderable item, all users on that team become potential alert recipients.) Devices (printers, etc.) are linked to a patient if the device and patient are on the same OE/RR team.

Customization Suggestions:

- Flag orderable items for HBHC orders.
- Flag orderable items of importance to JCAHO.
- Send an alert to a printer whenever a particular orderable item is ordered.

ORB OI ORDERED – INPT [Option: ORB3 FLAG ORDERABLE ITEMS]

This parameter identifies or “flags” an orderable item to trigger the FLAGGED OI ORDER - INPT notification/alert when the orderable item is ordered for an inpatient. For the notification to be triggered, the orderable item selected via this parameter must match the order’s orderable item and the patient must be an inpatient. Orders are linked to orderable items through the order dialog setup. OE/RR Teams, individual users or devices can be set up to receive the alert for one or more orderable items by selecting the desired team, user or device via this parameter. If the value for the orderable item flag is "YES", the entity (user, team, device), flagging the orderable item becomes a potential alert recipient for ALL inpatients. (If a device is added to the potential recipient list, it will always receive the alert.) If the value is "NO", the entity (user, team, device), flagging the orderable item only becomes a potential alert recipient if that entity is "linked" to the patient. Users are linked to a patient if the user is the patient's attending physician, primary inpatient provider, PCMM primary care practitioner or PCMM associate provider. In addition, users are linked to a patient if the user shares an OE/RR team with the patient or holds a team position assignment on the patient’s primary PCMM team. OE/RR teams are linked to a patient if the patient is on the OE/RR team. (If a patient is on an OE/RR team that has flagged an orderable item, all users on that team become potential alert recipients.) Devices (printers, etc.) are linked to a patient if the device and patient are on the same OE/RR team.

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<tr>
<td>3</td>
<td>Device</td>
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<tr>
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<td>Team (OE/RR)</td>
</tr>
<tr>
<td>3</td>
<td>Device</td>
</tr>
</tbody>
</table>
**Customization Suggestions:**

- If an infection control officer wants to receive an alert any time a special antibiotic is ordered, identify that user as the entity, then select the antibiotic’s orderable item. (The orderable item must be linked with applicable order dialogs.)
- Alert the chief of radiology whenever a particularly expensive imaging procedure is ordered.
- Alert a QA team whenever special lab tests are ordered.
- Send an alert to a printer whenever a particular orderable item is ordered.

**ORB OI ORDERED – OUTPT [Option: ORB3 FLAG ORDERABLE ITEMS]**

This parameter identifies or “flags” an orderable item to trigger the FLAGGED OI ORDER - OUTPT notification/alert when the orderable item is ordered for an outpatient. For the notification to be triggered, the orderable item selected via this parameter must match the order’s orderable item and the patient must be an outpatient. Orders are linked to orderable items through the order dialog setup. OE/RR Teams, individual users or devices can be set up to receive the alert for one or more orderable items by selecting the desired team, user or device via this parameter. If the value for the orderable item flag is "YES", the entity (user, team, device), flagging the orderable item becomes a potential alert recipient for ALL outpatients. (If a device is added to the potential recipient list, it will always receive the alert.) If the value is "NO", the entity (user, team, device), flagging the orderable item only becomes a potential alert recipient if that entity is "linked" to the patient. Users are linked to a patient if the user is the patient's attending physician, primary inpatient provider, PCMM primary care practitioner or PCMM associate provider. In addition, users are linked to a patient if the user shares an OE/RR team with the patient or holds a team position assignment on the patient’s primary PCMM team. OE/RR teams are linked to a patient if the patient is on the OE/RR team. (If a patient is on an OE/RR team that has flagged an orderable item, all users on that team become potential alert recipients.) Devices (printers, etc.) are linked to a patient if the device and patient are on the same OE/RR team.

| ENTITY PRECEDENCE: 1 | ENTITY TYPE: User |
| ENTITY PRECEDENCE: 2 | ENTITY TYPE: Team (OE/RR) |
| ENTITY PRECEDENCE: 3 | ENTITY TYPE: Device |

**Customization Suggestions:**

- Alert a clinician whenever a particular orderable item is ordered for patients on his team.
- Send an alert to a printer whenever a particular orderable item is ordered.

**ORB OI RESULTS – INPT [Option: ORB3 FLAG ORDERABLE ITEMS]**

This parameter identifies or “flags” an orderable item to trigger the FLAGGED OI RESULTS - INPT notification/alert when a related order is resulted for an inpatient. This only works for results-based orderable items (Lab, Imaging, and Consults.) For the notification to be triggered, the orderable item selected via this parameter must match the related order’s orderable item and the patient must be an inpatient. Orders are linked to orderable items through the order dialog setup. OE/RR Teams, individual users or devices can be set up to receive the alert for one or more orderable items by selecting the desired team, user or device via this parameter. If the value for the orderable item flag is "YES", the entity (user, team, device), flagging the orderable item becomes a potential alert recipient for ALL outpatients. (If a device is added to the potential recipient list, it will always receive the alert.) If the value is "NO", the entity (user, team, device), flagging the orderable item only becomes a potential alert recipient if that entity is "linked" to the patient. Users are linked to a patient if the user is the patient's attending physician, primary inpatient provider, PCMM primary care practitioner or PCMM associate provider. In addition, users are linked to a patient if the user shares an OE/RR team with the patient or
holds a team position assignment on the patient’s primary PCMM team. OE/RR teams are linked to a patient if the patient is on the OE/RR team. (If a patient is on an OE/RR team that has flagged an orderable item, all users on that team become potential alert recipients.) Devices (printers, etc.) are linked to a patient if the device and patient are on the same OE/RR team.

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</tr>
<tr>
<td>ENTITY PRECEDENCE: 3</td>
<td>ENTITY TYPE: Device</td>
</tr>
</tbody>
</table>

Customization Suggestions:

- If an infection control officer wants to receive an alert any time a particular lab procedure is resulted, identify that user as the entity then select the procedure’s orderable item. (The orderable item must be linked with applicable order dialogs.)
- Send an alert to a file whenever a particular orderable item is resulted.

ORB OI RESULTS – OUTPT [Option: ORB3 FLAG ORDERABLE ITEMS]

This parameter identifies or “flags” an orderable item to trigger the FLAGGED OI RESULTS - OUTPT notification/alert when a related order is resulted for an outpatient. This only works for results-based orderable items (Lab, Imaging, and Consults.) For the notification to be triggered, the orderable item selected via this parameter must match the related order’s orderable item and the patient must be an outpatient. Orders are linked to orderable items through the order dialog setup. OE/RR Teams, individual users or devices can be set up to receive the alert for one or more orderable items by selecting the desired team, user or device via this parameter. If the value for the orderable item flag is "YES", the entity (user, team, device), flagging the orderable item becomes a potential alert recipient for ALL outpatients. (If a device is added to the potential recipient list, it will always receive the alert.) If the value is "NO", the entity (user, team, device), flagging the orderable item only becomes a potential alert recipient if that entity is "linked" to the patient. Users are linked to a patient if the user is the patient's attending physician, primary inpatient provider, PCMM primary care practitioner or PCMM associate provider. In addition, users are linked to a patient if the user shares an OE/RR team with the patient or holds a team position assignment on the patient’s primary PCMM team. OE/RR teams are linked to a patient if the patient is on the OE/RR team. (If a patient is on an OE/RR team that has flagged an orderable item, all users on that team become potential alert recipients.) Devices (printers, etc.) are linked to a patient if the device and patient are on the same OE/RR team.

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</tr>
<tr>
<td>ENTITY PRECEDENCE: 3</td>
<td>ENTITY TYPE: Device</td>
</tr>
</tbody>
</table>

Customization Suggestions:

- Alert a clinician whenever a particular orderable item is resulted for patients on his team.
- Send an alert to a file whenever a particular orderable item is resulted.

ORB PROCESSING FLAG [Option: ORB3 PROCESSING FLAG]

This parameter determines notification/alert recipients. It replaces the Notifications file Processing Flag field. Whereas the field contained the set of codes “D”isabled, “E”nabled, “M”andatory, and “N”avigation, the parameter contains “E”nabled, “D”isabled and “M”andatory. Unlike most parameters, ORB PROCESSING FLAG is not used to determine an overall value based on Entity Precedence. Instead, a Notifications algorithm obtains the ORB PROCESSING FLAG value for all entity levels when determining alert recipients. (Refer to Notifications documents for a detailed explanation of this process.)
NOTE: If a team’s or user’s ORB DEFAULT RECEPIENTS parameter value for a notification is “True,” that Team or User will always receive that notification/alert, regardless of any ORB PROCESSING FLAG value. This is also true for devices identified via the ORB DEFAULT RECIPIENT DEVICES parameter.

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<td>4</td>
<td>Location</td>
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<td>5</td>
<td>Division</td>
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<tr>
<td>6</td>
<td>System</td>
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**Customization Suggestions:**

- Disable Critical Lab Result alerts for ICU patients by setting the ICU (Location entity), value of this parameter to “Disabled” for the Critical Lab Results notifications. (For this parameter, Location entity values take precedence over Division and System entity values, even if those values are “Mandatory.”) If a critical lab result now occurs for a patient in ICU, the alert will not be triggered. Critical Lab Result alerts continue to be possible for patients in other locations.

- To send only one particular notification/alert (and no others) to an OE/RR team, set the team’s parameter value to Mandatory for that notification and all set other team notification parameter values to Disabled. If a user on the team wants to receive additional notifications/alerts, the user can set his parameter value to Enabled or Mandatory for each desired notification.

**ORB PROVIDER RECIPIENTS [Option: ORB3 PROVIDER RECIPIENTS]**

This parameter determines if the ordering provider, attending physician, inpatient primary provider, OE/RR patient-related teams, PCMM teams, PCMM primary care practitioner, PCMM associate provider or user entering the order are considered for potential alert recipients. This parameter replaces the Recipient Restrictions, Exclude Attending and Exclude Primary fields in the Notifications file and the Notification to Physician field in the Order Parameter file. The value for this parameter can be any one or combination of the codes listed below. These codes indicate a site’s preferred notification recipients by the user title or relationship to the patient. The codes include:

- **P** (Primary Provider): deliver notification to the patient's (inpatient) Primary Provider.
- **A** (Attending Physician): deliver notification to the patient's Attending Physician.
- **T** (Patient Care Teams): deliver notification to the patient's OE/RR Teams (personal patient and team lists are evaluated for potential recipients) and to devices on an OE/RR team.
- **O** (Ordering Provider): deliver notification to the provider who placed/requested the order (if the notification is order-based.)
- **M** (PCMM Team): deliver notification to the users/providers linked to the patient via PCMM Team Position assignments.
- **E** (Entering User): deliver notification to the user/provider who entered the order’s most recent activity.
- **R** (PCMM PCP): deliver notification to the patient’s PCMM Primary Care Practitioner (PCP).
- **S** (PCMM Assoc Prov.): deliver notification to the patient’s PCMM Associate Provider.
C (PCMM Mental Health Treatment Coordinator): deliver notification to the patient's PCMM Mental Health Treatment Coordinator.

**NOTE:** The providers, physicians, and teams must be set up properly and accurately for correct recipient determination.

**Customization Suggestion:**

- Create teams for inpatient nurses and/or clerks to receive an alert when new orders are placed on patients in their ward. When creating the team, set up an auto link to the desired ward(s). This will automatically add and remove patients to the team when they are admitted, transferred or discharged. Next, set this parameter to “T” for the New Order notification to indicate the alert should only go to teams. (Most attendings, primary providers, and ordering providers will not want to receive an alert every time one of their patients has a new order placed.) [Please remember a “T” indicates all team and personal lists that include the patient will be evaluated for potential alert recipients.]

Next, use the parameter ORB PROCESSING FLAG to set the value for the New Order notification to “Disabled” for your System or Division. (Disabling the notification for the System/Division will prevent most teams, personal lists and users from receiving the alert.)

Finally, use the ORB PROCESSING FLAG parameter to set the New Order notification value to “Mandatory” or “Enabled” for the teams you created. (A setting of “Enabled” will allow users on the team to disable the notification/alert if desired whereas “Mandatory” will send the alert to all users on that team.)

**ORB SORT METHOD [Option: ORB3 SORT METHOD]**

This parameter determines how notifications are sorted in the GUI display. Possibilities include:

- **P**: Patient: sort by patient name.
- **T**: Type: sort by notification type (Name field in file 100.9.)
- **U**: Urgency: sort by notification’s value in the ORB URGENCY parameter.

Within these sort methods notifications are presented in reverse chronological order.

**ORB SYSTEM ENABLE/DISABLE [Option: ORB3 SYSTEM ENABLE/DISABLE]**

This parameter determines if any CPRS Notification processing will occur. In effect, it enables or disables all notification processing.
NOTE: This parameter disables all types of notifications. Additional functionality exists in the CPRS Expert System to inactivate specific rule-based notifications.

ORB URGENCY [Option: ORB3 URGENCY]

The ORB URGENCY parameter is used in the GUI display. If an entity’s ORB SORT METHOD parameter value is set to “Urgency,” notifications displayed in the GUI are sorted by their value in this parameter. Possible values include:

1: High: display these notifications at the top of the GUI alert list.
2: Moderate: display these notifications in the middle of the GUI alert list.
3: Low: display these notifications at the bottom of the GUI alert list.

| ENTITY PRECEDENCE: 1 | ENTITY TYPE: User |
| ENTITY PRECEDENCE: 2 | ENTITY TYPE: Service |
| ENTITY PRECEDENCE: 3 | ENTITY TYPE: Division |
| ENTITY PRECEDENCE: 4 | ENTITY TYPE: System |

ORBC CONVERSION [Option: No User Interaction]

This parameter indicates whether or not the notification conversion from OE/RR 2.5 has occurred. It prevents overwriting of existing parameter values if CPRS must be installed multiple times.

| ENTITY PRECEDENCE: 1 | ENTITY TYPE: System |

NOTE: Do not modify this parameter – unless, of course, you desire a maelstrom of user discontent.

ORDER URGENCY ASAP ALTERNATIVE [Option: No User Interaction]

This parameter sets the Pharmacy order urgency replacement for “ASAP” if a site does not use the exact order urgency name “ASAP” in the Order Urgency file (#101.42). This parameter is delivered blank; if the installation software does not detect the order urgency “ASAP” in the Order Urgency file, then the installer is asked to designate an alternative from existing entries in the file.

If a site decides to make any modification to the order urgency entry “ASAP” after installation of patch OR*3.0*435, then this parameter must be edited to specify the replacement for “ASAP.” Using the General Parameter Tools [ XPAR MENU TOOLS] menu, select the Edit Parameter Values [ XPAR EDIT PARAMETER] option, and then modify the ORDER URGENCY ASAP ALTERNATIVE parameter to use an alternative to “ASAP” from entries present in the Order Urgency file.

| ENTITY PRECEDENCE: 1 | ENTITY TYPE: System |

NOTE: If a site renames the order urgency “ASAP” and this parameter is not set, then Pharmacy orders from CPRS might fail.
Option -> Parameter Mapping

CPRS Manager Menu
PE CPRS Configuration (Clin Coord) ...
NO Notification Mgmt Menu ... Parameter

1. Enable/Disable Notifications
   Parameter: ORB PROCESSING FLAG
2. Erase Notifications
3. Set Urgency for Notifications (GUI)
   Parameter: ORB URGENCY
4. Set Deletion Parameters for Notifications
   Parameter: ORB DELETE MECHANISM
5. Set Default Recipient(s) for Notifications
   Parameter: ORB DEFAULT RECEIPIENTS
6. Set Default Recipient Device(s) for Notifications
   Parameter: ORB DEFAULT RECIPIENT DEVICES
7. Set Provider Recipients for Notifications
   Parameter: ORB PROVIDER RECEIPIENTS
8. Flag Orderable Item(s) to Send Notifications
   a. Flag INPATIENT orders/results/expiring orders.
      1) Flag Inpatient ORDERS.
      Parameter: ORB OI ORDERED - INPT
      2) Flag Inpatient ORDERS for PROVIDER RECEIPIENTS.
      Parameter: ORB OI ORDERED - INPT PR
      3) Flag Inpatient RESULTS.
      Parameter: ORB OI RESULTS - INPT
      4) Flag Inpatient RESULTS for PROVIDER RECEIPIENTS.
      Parameter: ORB OI RESULTS - INPT PR
      5) Flag Inpatient EXPIRING orders.
      Parameter: ORB OI EXPIRING - INPT
      6) Flag Inpatient EXPIRING orders for PROVIDER RECEIPIENTS.
      Parameter: ORB OI EXPIRING - INPT PR
   b. Flag OUTPATIENT orders/results/expiring orders.
      1) Flag Outpatient ORDERS.
      Parameter: ORB OI ORDERED - OUTPT
      2) Flag Outpatient ORDERS for PROVIDER RECEIPIENTS.
      Parameter: ORB OI ORDERED - OUTPT PR
      3) Flag Outpatient RESULTS.
      Parameter: ORB OI RESULTS - OUTPT
      4) Flag Outpatient RESULTS for PROVIDER RECEIPIENTS.
      Parameter: ORB OI RESULTS - OUTPT PR
      5) Flag Outpatient EXPIRING orders.
      Parameter: ORB OI EXPIRING - OUTPT
      6) Flag Outpatient EXPIRING orders for PROVIDER RECEIPIENTS.
      Parameter: ORB OI EXPIRING - OUTPT PR
9. Archive(delete) after <x> Days
   Parameter: ORB ARCHIVE PERIOD
10. Forward Notifications...
    a. Forward Unprocessed Notification to Supervisor
       Parameter: ORB FORWARD SUPERVISOR
    b. Forward Unprocessed Notification to Surrogates
       Parameter: ORB FORWARD SURROGATES
11. Set Delays for Unverified Orders...
    a. Set Delay for All Unverified Orders
       Parameter: ORB UNVERIFIED ORDER
    b. Set Delay for Unverified Medication Orders
       Parameter: ORB UNVERIFIED MED ORDER
12. Set Notification Display Sort Method (GUI)
    Parameter: ORB SORT METHOD
13. Send Flagged Orders Bulletin
    Parameter: ORB FLAGGED ORDERS BULLETIN
14. Determine Recipients for a Notification
15. Display Patient Alerts and Alert Recipients
16. Enable or Disable Notification System
    Parameter: ORB SYSTEM ENABLE/DISABLE
17. Display the Notifications a User Can Receive

PP Personal Preferences

NO Notification Mgmt Menu ...

1. Enable/Disable My Notifications
   Parameter: ORB PROCESSING FLAG
2. Erase All of My Notifications
3. Set Notification Display Sort Method (GUI)
   Parameter: ORB SORT METHOD
4. Send me a MailMan bulletin for Flagged Orders
   Parameter: ORB FLAGGED ORDERS BULLETIN
5. Show Me the Notifications I Can Receive
27. Appendix D: Exported (Default) Values for Notification Parameters

Introduction
CPRS Notifications use the Parameter file [#8989.5] to export values for parameters that determine how notifications will be processed. Some of these parameters replaced fields in the Notifications file [#100.9]; others are new in CPRS. When each parameter is defined and set up via the Parameter Definition file [#8989.51], a set of entity relationships is established. Most CPRS Notification parameters were set up with links to the “Package” entity in order to export default values with CPRS. Hence, the exported notification “defaults” are found as parameter values for package entity “Order Entry/Results Reporting.” Notification parameter values for package entities (Order Entry/Results Reporting) should never be modified. Changes specific to your site can be made for system, division, and other entities depending on how each parameter is defined. (For additional information regarding notification parameters, refer to the Parameters documents.)

Overview
The ORB ARCHIVE PERIOD parameter indicates the number of days to archive the notification in the Alert Tracking file [#8992.1]. CPRS exports a value of “30” days for all notifications to indicate all alerts derived from OE/RR Notifications will be deleted after 30 days.

The ORB DELETE MECHANISM parameter is used to determine how alerts are deleted when a successful alert follow-up action is taken or a user views an “Information Only” alert. The exported default value for the Notifications Expert Panel determined each notification and test site experience.

The ORB ERASE ALL parameter is used to indicate if a user will have access to an option that allows the user to delete alerts. A value of “Yes” indicates that the user can delete all of the user’s alerts. This parameter will become available with Patch OR*3*85.

The ORB FLAGGED ORDERS BULLETIN parameter is used to determine if a bulletin should be sent when an order is flagged. The exported default value is “No,” the bulletin will not be sent.

The ORB FORWARD SUPERVISOR parameter indicates how many days to hold an unprocessed alert before forwarding it to the user’s service/section supervisor. The exported value for all notifications is “0” days, indicating the related alerts will never be forwarded.

The ORB FORWARD SURROGATES parameter indicates how many days to hold an unprocessed alert before forwarding it to the user’s MailMan surrogates. The exported value for all notifications is “0” days, indicating the related alerts will never be forwarded.

The ORB PROCESSING FLAG parameter determines notification/alert recipients. It replaces the Processing Flag field in the Notifications file. Whereas the field contained the set of codes “D” for Disabled, “E” for Enabled, “M” for Mandatory, and “N” Navigation, the parameter only contains “D” for Disabled and “M” for Mandatory. The exported values for all notifications new in CPRS are “D” for Disabled. Experience has shown that bringing these notifications gradually online is better than flooding users with new alerts right after CPRS is installed. Several different entity relationships exist for this parameter enabling sites to selectively “turn on” the new notifications. Exported values for “Mandatory” OE/RR 2.5 notifications remain “Mandatory.” “Enabled” OE/RR 2.5 notifications are exported without any value for this parameter. (Refer to the Parameters documents for additional information.)
The **ORB PROVIDER RECIPIENTS** parameter determines if the ordering provider, attending physician, primary provider, or patient-related teams will be considered for potential alert recipients. This parameter replaces the Recipient Restrictions, Exclude Attending, and Exclude Primary fields in the Notifications file and the Notification to Physician field in the Order Parameter file. The Notifications Expert Panel and test site experience determined the exported value for each notification.

The **ORB SORT METHOD** is used to determine how notifications will be sorted in the GUI display. The exported value is “Type” indicating notifications will be sorted by notification.

The **ORB SYSTEM ENABLE/DISABLE** parameter determines if any CPRS Notification processing will occur. In effect, it enables or disables all notification processing. The exported default value is “Disabled” – no notifications will be processed, no OE/RR alerts will be delivered. (The default value is “Disabled” to speed-up conversions during CPRS installation.) Sites are encouraged to “Enable” this parameter at the System or Division entity as soon as possible after CPRS installation. (It is NOT necessary to wait until all CPRS conversions have completed.) Once this parameter is enabled, OE/RR 2.5 notifications/alerts will resume. However, new CPRS notifications will remain disabled until enabled (set to “Mandatory” at one or more entities), via the ORB PROCESSING FLAG parameter.

The **ORB UNVERIFIED MED ORDER** parameter sets the number of hours delay after a medication order has been placed before triggering the notification/alert Unverified Medication Order. The exported value is “2” hours - if a medication order has not been verified by a nurse within two hours after the order was placed, the notification is triggered and an alert is sent. Sites can modify this value at the System or Division entity.

The **ORB UNVERIFIED ORDER** parameter sets the number of hours delay after an order has been placed before triggering the notification/alert Unverified Order. The exported value is “2” hours - if an order has not been verified by a nurse within two hours after the order was placed, the notification is triggered and an alert is sent. Sites can modify this value at the System or Division entity.

The **ORB URGENCY** parameter is used in the GUI display. If an entity’s ORB SORT METHOD parameter value is set to “Urgency,” notifications displayed in the GUI are sorted by their value in this parameter. The Notification Expert Panel determined the exported default value for each notification.

Additional CPRS Notification parameters exist that do not have exported default values. These are discussed in the Parameters documents. A list of CPRS Notification parameters with exported default values follows.
## Parameters

PARAMETER: ORB ARCHIVE PERIOD

**ENTITY:** ORDER ENTRY/RESULTS REPORTING

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PARAMETER: ORB DELETE MECHANISM

ENTITY: ORDER ENTRY/RESULTS REPORTING

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PARAMETER: ORB ERASE ALL

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PARAMETER: ORB FLAGGED ORDERS BULLETIN

ENTITY: ORDER ENTRY/RESULTS REPORTING  No

PARAMETER: ORB FORWARD SUPERVISOR

ENTITY: ORDER ENTRY/RESULTS REPORTING

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**PARAMETER: ORB FORWARD SURROGATES**

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PARAMETER: ORB UNVERIFIED MED ORDER

ENTITY: ORDER ENTRY/RESULTS REPORTING  2

PARAMETER: ORB UNVERIFIED ORDER

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PARAMETER: ORB URGENCY

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<tr>
<td>MEDICATIONS EXPIRING - OUTPT</td>
<td>High</td>
</tr>
<tr>
<td>NEW ORDER</td>
<td>Moderate</td>
</tr>
<tr>
<td>NEW SERVICE CONSULT/REQUEST</td>
<td>Moderate</td>
</tr>
<tr>
<td>NPO DIET MORE THAN 72 HRS</td>
<td>Moderate</td>
</tr>
<tr>
<td>OP NON-RENEWABLE RX RENEWAL</td>
<td>High</td>
</tr>
<tr>
<td>ORDER CHECK</td>
<td>High</td>
</tr>
<tr>
<td>ORDER REQUIRES CHART SIGNATURE</td>
<td>Moderate</td>
</tr>
<tr>
<td>ORDER REQUIRES CO-SIGNATURE</td>
<td>High</td>
</tr>
<tr>
<td>ORDER REQUIRES ELEC SIGNATURE</td>
<td>High</td>
</tr>
<tr>
<td>ORDERER-FLAGGED RESULTS</td>
<td>High</td>
</tr>
<tr>
<td>PAP SMEAR RESULTS</td>
<td>Moderate</td>
</tr>
<tr>
<td>SERVICE ORDER REQ CHART SIGN</td>
<td>High</td>
</tr>
<tr>
<td>SITE-FLAGGED ORDER</td>
<td>High</td>
</tr>
<tr>
<td>SITE-FLAGGED RESULTS</td>
<td>High</td>
</tr>
<tr>
<td>STAT IMAGING REQUEST</td>
<td>Moderate</td>
</tr>
<tr>
<td>STAT ORDER</td>
<td>High</td>
</tr>
<tr>
<td>STAT RESULTS</td>
<td>High</td>
</tr>
<tr>
<td>SUICIDE ATTEMPTED/COMPLETED</td>
<td>High</td>
</tr>
<tr>
<td>TRANSFER FROM PSYCHIATRY</td>
<td>Moderate</td>
</tr>
<tr>
<td>UNSCHEDULED VISIT</td>
<td>Moderate</td>
</tr>
<tr>
<td>UNVERIFIED MEDICATION ORDER</td>
<td>Moderate</td>
</tr>
<tr>
<td>UNVERIFIED ORDER</td>
<td>High</td>
</tr>
<tr>
<td>URGENT IMAGING REQUEST</td>
<td>Moderate</td>
</tr>
</tbody>
</table>
29. Appendix E: Order Check

Order Check Parameters in CPRS 1 - Technical Overview

Introduction

CPRS Order Checks use the Parameter file [#8989.5] to export values for parameters that determine how order checks are processed. All of these parameters are new in CPRS. When each parameter is defined and set up via the Parameter Definition file [#8989.51], a set of entity relationships is established. Most CPRS Order Check parameters were set up with links to the “Package” entity in order to export default values with CPRS. Hence, the exported order checking “defaults” are parameter values for package entity “Order Entry/Results Reporting.” Order Check parameter values for package entities (Order Entry/Results Reporting) should never be modified. Changes specific to your site can be made for system, division, and other entities, depending on how each parameter is defined. (Refer to CPRS Install documents for a listing of exported default values.)

NOTE: Some parameters have a “Location” entity type. Only inpatient location entities are used. Outpatient location entities are ignored because a patient’s outpatient location cannot be reliably determined and a patient can have several simultaneous outpatient locations.

Parameters

ORK CLINICAL DANGER LEVEL [Option: ORK CLINICAL DANGER LEVEL]

This parameter indicates an order check’s potential clinical danger to the patient. Potential values are a set of codes:

1. (High): Order check indicates a potentially high danger to the patient.
2. (Moderate): Order check indicates a moderate danger to the patient.
3. (Low): Order check indicates a low danger to the patient.

For a High value, the order check will be displayed when the provider goes to accept the order. If the provider accepts the order with High clinical danger, CPRS will require the provider to enter a justification for overriding when the provider attempts to sign the order. The order cannot be signed without a justification.

Customization Suggestion:

- CPRS exports the Duplicate Drug Order order check with a “High” clinical danger level. This indicates duplicate medication orders do display an order check message, then prompt users for an override reason. To prevent the override prompt, set the Clinical Danger Level for this order check to “Moderate.” Providers get the order check message, but will not be prompted for an override reason.
ORK CONTRAST MEDIA CREATININE [Option: ORK CONTRAST MEDIA CREATININE]

This option is used by the Biochem Abnormality for Contrast Media order check. This order check displays a message if the patient doesn’t have a serum creatinine result within the past X days, where the number of days is determined by the value of this parameter. The exported value is 30 [days].

ORK CT LIMIT HT [Option: ORK CT LIMIT HT]

This parameter is used by order checking to determine if a patient is too tall to be examined by the CT scanner. The value indicates the maximum height (in inches) allowed.

ORK CT LIMIT WT [Option: ORK CT LIMIT WT]

This parameter is used by order checking to determine if a patient weighs too much to be safely examined by the CT scanner. The value indicates the maximum weight (in pounds) allowed.

ORK DEBUG ENABLE/DISABLE [Option: ORK DEBUG ENABLE/DISABLE]

This parameter determines if order checking logs debug messages into ^XTMP("ORKLOG"). The possible values are a set of codes:

E (Enabled): Indicates the Order Checking debug log is activated.
D (Disabled): Indicates the Order Checking debug log is inactivated and deleted.

Information passed to order checking from OE/RR is stored in the zero node. The zero node is in the format:

^XTMP("ORKLOG",<order check date/time>,<pt id>,<orderable item>,<dlog mode>, <user id>,0)= <orderable item>|<filler>|<natl id"natl text"natl sys"local id"local text"local sys>|<order effective date/time>|<order number>|<filler data>|.
The data for non-zero node entries is the information passed from order checking back to OE/RR. It is the order check messages plus other info to enhance OE/RR processing. It is in the format:

```
^XTMP("ORKLOG",<order check date/time>,<pt id>,<orderable item>,<dlog mode>, <userid>,<non-zero>)=<order number>^<order check id-864.5 ien>^<clin danger level>^<message>
```

This parameter is used primarily for troubleshooting. Under normal circumstances it should be “Disabled.” When this debug global exceeds 5,000 entries, it is killed and begins adding new entries.

**Customization Suggestion:**

- To determine if a particular type of order check is occurring, set this parameter to be “Enabled” and check the debug log global periodically.

**ORK DUP ORDER RANGE LAB [Option: ORK DUP ORDER RANGE LAB]**

This parameter indicates how many hours back in time to look for duplicate lab orders. If a similar lab order has been placed within the number of hours indicated in this parameter, an order check message is displayed. Lab orders with an OE/RR order status of “Canceled,” “Discontinued,” “Expired,” “Lapsed,” “Discontinued/Edit,” or “Delayed” are not evaluated when looking for duplicates.

**NOTE:** This parameter is superseded if the ordered lab procedure has a corresponding orderable item entered in the ORK DUP ORDER RANGE OI parameter.

**ORK DUP ORDER RANGE OI [Option: ORK DUP ORDER RANGE OI]**

This parameter indicates how many hours back in time to look for duplicate orders with a matching orderable item. If an order with the same orderable item has been placed within the number of hours indicated in this parameter, an order check message is displayed. For the order check to occur, the orderable item selected via this parameter must match both the orderable item of the order being placed and the duplicate order’s orderable item. Orders are linked to orderable items through the order dialog setup. Use this parameter to set duplicate order search ranges for special orderable items. This parameter does not affect medication duplicate order ranges. Medication
order duplicates are determined within the Pharmacy package. A value of “0” (zero) indicates duplicate order checking for this orderable item does not occur.

**NOTE:** If the orderable item of the order being placed has a value in this parameter, this parameter’s value supersedes values entered in the ORK DUP ORDER RANGE LAB/RADIOLOGY parameters.

<table>
<thead>
<tr>
<th>ENTITY PRECEDENCE</th>
<th>ENTITY TYPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Location</td>
</tr>
<tr>
<td>2</td>
<td>Service</td>
</tr>
<tr>
<td>3</td>
<td>Division</td>
</tr>
<tr>
<td>4</td>
<td>System</td>
</tr>
</tbody>
</table>

Customization Suggestions:

- Use the ORK DUP ORDER RANGE LAB parameter to set a duplicate order value for the majority of lab procedures, then use ORK DUP ORDER RANGE OI to set duplicate order values for lab tests with special duplicate order ranges. For example, the exported default value for ORK DUP ORDER RANGE LAB is “48” hours. Use ORK DUP ORDER RANGE LAB to change that value to “24” hours for your System entity. Next, use ORK DUP ORDER RANGE OI at your System entity level to set the duplicate order range for the CBC orderable item to “12” hours. The order check message indicating a duplicate CBC order will now occur if the patient has a previous CBC order within the past 12 hours.

**NOTE:** The order being placed and the duplicate order must each have an orderable item that matches the CBC orderable item entered via this parameter.

The order check for CBC will not occur if the patient’s most recent CBC order occurred 13 hours previously. However, if the order is for a different lab test (and no parameter value for that test exists), the order check message will occur if the patient’s most recent lab test was within the past 24 hours.

- In addition to the suggestion above, set the ICU (Location entity), value of ORK DUP ORDER RANGE OI to “3” hours for orderable item CBC. Now, if the CBC order is for a patient in ICU, the order check occurs only if the most recent order is within the past three hours. CBC orders older than three hours do not trigger the order check for patients in ICU. For non-ICU patients the duplicate range value remains “12” hours.

- To prevent duplicate order checks on generic nursing orders placed by General Medicine providers (Service entity), use this parameter to set General Medicine’s value of the generic nursing orderable item to “0” (zero.) Remember, the generic nursing orderable item identified in the parameter must match the orderable item of the order dialog used to place generic nursing orders.

**ORK DUP ORDER RANGE RADIOLOGY [Option: ORK DUP ORDER RANGE RADIOLOGY]**

This parameter indicates how many hours back in time to look for duplicate imaging orders. If a similar imaging procedure has been placed within the number of hours indicated in this parameter, an order check message is displayed. Imaging orders with an OE/RR order status of “Canceled,” “Discontinued,” “Expired,” “Lapsed,” “Discontinued/Edit,” or “Delayed” are not evaluated when looking for duplicates.

**NOTE:** This parameter is superseded if the ordered imaging procedure has a corresponding orderable item entered in the ORK DUP ORDER RANGE OI parameter.

<table>
<thead>
<tr>
<th>ENTITY PRECEDENCE</th>
<th>ENTITY TYPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Location</td>
</tr>
</tbody>
</table>
Customization Suggestion:

- Use this parameter to set a duplicate order value for the majority of imaging procedures then use ORK DUP ORDER RANGE OI to set duplicate order values for imaging procedures with special duplicate order ranges. (Refer to ORK DUP ORDER RANGE OI customization suggestions for a similar example with lab procedures.)

ORK MRI LIMIT HT [Option: ORK MRI LIMIT HT]

This parameter is used by order checking to determine if a patient is too tall to be examined in the MRI scanner. The value indicates the maximum height (in inches) allowed.

Customization Suggestion:

- For systems with MRI scanners at more than one division, set the value of this parameter at the division level to correspond to that division’s scanner height limit.

ORK MRI LIMIT WT [Option: ORK MRI LIMIT WT]

This parameter is used by order checking to determine if a patient weighs too much to be safely examined by the MRI scanner. The value indicates the maximum weight (in pounds) allowed.

Customization Suggestion:

- For systems with MRI scanners at more than one division, set the value of this parameter at the division level to correspond to that division’s scanner weight limit.

ORK PROCESSING FLAG [Option: ORK PROCESSING FLAG]

This parameter determines if an order check will be processed. Potential values are a set of codes:

- **E (Enabled):** Order check enabled for the entity unless an entity of higher precedence has the order check disabled (e.g. Enabled at System level and Disabled at User level—order check will not be processed for that user.)

- **D (Disabled):** Order check disabled for entity unless entity of higher precedence has order check Enabled (e.g. Disabled at System level and Enabled at User level—order check will be processed for that user.)
ORK SYSTEM ENABLE/DISABLE [Option: ORK SYSTEM ENABLE/DISABLE]

This parameter determines if any CPRS Order Check processing will occur. In effect, it enables or disables all order check processing.

- **E** (Enabled): Order checking is enabled and running.
- **D** (Disabled): Order checking is disabled and not running.

**NOTE:** This parameter disables all types of order checks. Additional functionality exists in the CPRS Expert System to inactivate specific rule-based order checks.

<table>
<thead>
<tr>
<th>Option</th>
<th>Parameter</th>
</tr>
</thead>
<tbody>
<tr>
<td>PE CPRS Configuration (Clinical Coordinator) ...</td>
<td>ORK SYSTEM ENABLE/DISABLE</td>
</tr>
<tr>
<td>OC Order Checking Mgmt Menu ...</td>
<td>ORK PROCESSING FLAG</td>
</tr>
<tr>
<td>1 Enable/Disable an Order Check</td>
<td>ORK CLINICAL DANGER LEVEL</td>
</tr>
<tr>
<td>2 Set Clinical Danger Level for an Order Check</td>
<td>ORK CT LIMIT HT</td>
</tr>
<tr>
<td>3 CT Scanner Height Limit</td>
<td>ORK CT LIMIT WT</td>
</tr>
<tr>
<td>4 CT Scanner Weight Limit</td>
<td>ORK MRI LIMIT HT</td>
</tr>
<tr>
<td>5 MRI Scanning Height Limit</td>
<td>ORK MRI LIMIT WT</td>
</tr>
<tr>
<td>6 MRI Scanning Weight Limit</td>
<td>ORK Duplicates Order Range IOI</td>
</tr>
<tr>
<td>7 Orderable Item Duplicate Order Range</td>
<td>ORK Duplicates Order Range LAB</td>
</tr>
<tr>
<td>8 Lab Duplicate Order Range</td>
<td>ORK Duplicates Order Range RADIOLOGY</td>
</tr>
<tr>
<td>9 Radiology Duplicate Order Range</td>
<td>ORK SYSTEM ENABLE/DISABLE</td>
</tr>
<tr>
<td>10 Enable or Disable Order Checking System</td>
<td>ORK DEBUG ENABLE/DISABLE</td>
</tr>
<tr>
<td>11 Enable or Disable Debug Message Logging</td>
<td>ORK DEBUG ENABLE/DISABLE</td>
</tr>
<tr>
<td>12 Display the Order Checks a User Can Receive</td>
<td></td>
</tr>
<tr>
<td>13 Edit Site Local Terms</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Option</th>
<th>Parameter</th>
</tr>
</thead>
<tbody>
<tr>
<td>PP Personal Preferences</td>
<td>ORK PROCESSING FLAG</td>
</tr>
<tr>
<td>OC Order Checking Mgmt Menu ...</td>
<td>ORK PROCESSING FLAG</td>
</tr>
<tr>
<td>1 Enable/Disable My Order Checks</td>
<td></td>
</tr>
<tr>
<td>2 Show Me the Order Checks I Can Receive</td>
<td></td>
</tr>
</tbody>
</table>
CPRS Order Checks: How They Work

Introduction

In CPRS, Order Checks occur by evaluating a requested order against existing patient data. Most order checks are processed via the CPRS Expert System. A few are processed within the Pharmacy, Allergy Tracking System, and Order Entry packages. See the table below to determine how an order check is generated:

<table>
<thead>
<tr>
<th>Order Check Name</th>
<th>Order Check Generated</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ALLERGY-CONTRAST MEDIA INTERACTION</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>ALLERGY-DRUG INTERACTION</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>AMINOGLYCOSIDE ORDERED</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>BIOCHEM ABNORMALITY FOR CONTRAST MEDIA</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>CLOZAPINE APPROPRIATENESS</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>CRITICAL DRUG INTERACTION</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>CT &amp; MRI PHYSICAL LIMITATIONS</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>DANGEROUS MEDS FOR PT &gt; 64</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>DISPENSE DRUG NOT SELECTED</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>DUPLICATE DRUG CLASS ORDER\Duplicate Therapy as of v28 pre</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>DUPLICATE DRUG ORDER</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>DUPLICATE OPIOID MEDICATIONS</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>DUPLICATE ORDER (Non Med)</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>ERROR MESSAGE</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>ESTIMATED CREATININE CLEARANCE</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>GLUCOPHAGE-CONTRAST MEDIA</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>GLUCOPHAGE-LAB RESULTS</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>LAB ORDER FREQ RESTRICTIONS</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>MISSING LAB TESTS FOR Angiogram PROCEDURE</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>NO ALLERGY ASSESSMENT</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>ORDER CHECKING NOT AVAILABLE</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>POLYPHARMACY</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>RECENT BARIUM STUDY</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>RECENT ORAL CHOLECYSTOGRAM</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>RENAL FUNCTIONS OVER AGE 65</strong></td>
<td>X</td>
</tr>
<tr>
<td><strong>SIGNIFICANT DRUG INTERACTION</strong></td>
<td>X</td>
</tr>
</tbody>
</table>
Order Checks are a real-time process that occurs during the ordering session and is driven by responses entered by the ordering provider. Order Check messages are displayed interactively in the ordering session.

Order Checks review existing data and current events to produce a relevant message, which is presented to patient caregivers. Order Checks use the CPRS Expert System (OCX namespace), to define logical expressions for this evaluation and message creation. In addition to the expert system Order Checks have some hard-coded algorithms. For example, the drug-drug interaction order check is made via an entry point in the pharmacy package whereas Renal Functions for Patients Over 65 is defined as a rule in the CPRS Expert System.

Once some order checks have fired, they do not fire again for 5 minutes to save the system from making multiple calls. So, once these order checks have fired, they will not fire again for 5 minutes (300 seconds) for any reason. Logging off or refreshing the patient will have no impact. The following order checks follow this rule:

- ALLERGY-CONTRAST MEDIA INTERACTION
- AMINOGLYCOSIDE ORDERED
- BIOCHEM ABNORMALITY FOR CONTRAST MEDIA
- CLOZAPINE APPROPRIATENESS
- CT & MRI PHYSICAL LIMITATIONS
- DANGEROUS MEDS FOR PT > 64
- ESTIMATED CREATININE CLEARANCE
- GLUCOPHAGE-CONTRAST MEDIA
- GLUCOPHAGE-LAB RESULTS
- MISSING LAB TESTS FOR ANGIOGRAM PROCEDURE
- NO ALLERGY ASSESSMENT
- POLYPHARMACY
- RECENT BARIUM STUDY
- RECENT ORAL CHOLECYSTOGRAM
- RENAL FUNCTIONS OVER AGE 65

**Order Check Data Caching**

Data caching was recently added to improve the speed of order checks. Before data caching, order checks could be slow because each order check retrieved data from the other VISTA packages—even if the order checks used the same data. With data caching, the first order check in an ordering session retrieves data from other VISTA packages, uses the data to evaluate whether it should display a warning, and then stores the retrieved data in the ^XTMP(“OCXCACHE” global for five minutes. The order checks that occur in the next five minutes can use the cached data, if it is the appropriate data, instead of retrieving data from the other packages. After five minutes, the cached data expires, and order checks must retrieve new data from the VISTA packages.
For example, before data caching was implemented, if an order check took 3 seconds to retrieve data from other VISTA packages, and there were 12 order checks, clinicians might wait 36 seconds to sign orders. With data caching, the first order check might take 3 seconds to retrieve the data, but subsequent order checks could use the cache and might take only .03 seconds each. That would be 3.33 seconds compared to 36 seconds. The numbers in this example are for illustration only and do not reflect real system speed. However, data caching should speed up order checks.

To avoid using all available disk space for storing data from order checks, there are several ways to clear the ^XTMP(“OCXCACHE” global. ORMTIME removes data from the global when it runs. The suggested frequency for running ORMTIME is every 30 minutes, but not every site runs it that frequently. Kernel clean up utilities also remove data from the cache when they run, which is usually every 24 hours. If needed, users that have access to the programmer’s prompt can manually clear the cache from that prompt by using PURGE^OCXCACHE.

Below is an example of what the ^XTMP(“OCXCACHE” global looks like:

```
^XTMP("OCXCACHE",0) = 3020815.111506^3020814.111506
^XTMP("OCXCACHE",16,"$$LOCLC^ORQQLR1(16,173,70)","DATA") = 173^CREAT^19^mg/dL^.
9-20^3020411.135803
^XTMP("OCXCACHE",16,"$$LOCLC^ORQQLR1(16,173,70)","TIME") = 5099625091
^XTMP("OCXCACHE",16,"$$LOCLC^ORQQLR1(16,173,72)","DATA") = 173^CREAT^10^mg/dL^H
.9-NEGATIVE^3020411.134653
^XTMP("OCXCACHE",16,"$$LOCLC^ORQQLR1(16,173,72)","TIME") = 5099625091
^XTMP("OCXCACHE",16,"$$LOCLC^ORQQLR1(16,173,73)","DATA") = 173^CREAT^13^mg/dL^.
9-400^3020411.140823
^XTMP("OCXCACHE",16,"$$LOCLC^ORQQLR1(16,173,73)","TIME") = 5099625091
^XTMP("OCXCACHE",16,"$$LOCLC^ORQQLR1(16,174,70)","DATA") =
^XTMP("OCXCACHE",16,"$$LOCLC^ORQQLR1(16,174,70)","TIME") = 5099625092
^XTMP("OCXCACHE",16,"$$LOCLC^ORQQLR1(16,174,72)","DATA") = 174^BUN^3^mg/dL^L^11
24^3010927.101804
^XTMP("OCXCACHE",16,"$$LOCLC^ORQQLR1(16,174,72)","TIME") = 5099625092
^XTMP("OCXCACHE",16,"$$LOCLC^ORQQLR1(16,174,73)","DATA") =
^XTMP("OCXCACHE",16,"$$LOCLC^ORQQLR1(16,174,73)","TIME") = 5099625092
```

Remote Order Checking

Note: Remote order checks will be available at sites when the RDI software, including patches OR*3.0*232, OR*3.0*238, OR*3.0*267, GMRA*4.0*26, and GMRA*4.0*37, is installed at each site. The RDI rollout is planned as a phased roll out that will last several months until all
sites have the software installed. In addition, data from Department of Defense (DoD) facilities will not be available until the CHDR project is released.

Remote Data Interoperability (RDI) enables CPRS to do drug-drug, drug-drug class, duplicate drug, drug-allergy, and contrast media allergy order checks against data from VA sites, and from participating DoD sites, that is stored in the Health Data Repository (HDR).

RDI uses the same order checks that currently exist in CPRS and adds the benefit of doing those checks against remote Outpatient Pharmacy and remote Allergy data stored in the HDR.

The order checks look very similar to the current order check display in CPRS. For remote medications, the display now includes the date of last refill, quantity dispensed, and the name of the remote location. The display for remote allergies has the words “remote site(s)”.

**When Will RDI Be Enabled?**

RDI features being enabled depends on two things:

The value of the parameter OR RDI HAVE HDR

The existence and configuration of the logical link ORHDR

The menu option to change the value of the OR RDI HAVE HDR parameter will be available in patch OR*3.0*238. Until then, the remote order checking features of RDI will be dormant.

**Note:** Sites should not enable the OR RDI HAVE HDR parameter until they receive official instructions.

**How Does RDI Work?**

When an order check is needed either because a CPRS user is writing orders or because CPRS receives a request from Outpatient Pharmacy, CPRS sends a request to Clinical Data Service (CDS) for outpatient medication and allergy information.

The request includes the following data, not necessarily in this order:

- patient internal control number (ICN)
- dates (t-30 for outpatient medications with an expired or discontinued status, plus all other statuses—all allergies are returned)
- domain (such as outpatient medications)

**Which Items Are NOT Used in Remote Order Checks?**

Some items are not used in remote order checking because they are not stored in the HDR. Others have a high annoyance factor and therefore were not included at the request of field sites. The following items are not included in remote order checks:

- Inpatient Medications
- Non-VA Meds
- Supply items
- Local drugs that are not matched to the National Drug File
Note: The HDR II contains prescriptions with drugs that are not matched to the National Drug File (NDF). This prescription data should be used in remote order checking for duplicate drug classes. Because the National Drug File is updated regularly, these missing order checks could be resolved whenever the NDF is updated. Some drugs may never be matched, especially drugs used in research.

What Happens when CPRS Receives Data from the HDR?

If CPRS receives data from CDS, CPRS stores the data in the global \(^{XTMP("ORRDI")}\) for the amount of time specified in the OR RDI CACHE TIME parameter; the default is 120 minutes, but sites can change this value. CPRS does not request data from CDS again during the order session unless more than the specified time has elapsed.

Order checks from CPRS can happen several times during a CPRS session:

- Beginning to write/copy/change orders – When a user selects an order menu to begin writing orders, CPRS requests some order checks, such as polypharmacy, renal function, or creatinine clearance, for example.
- On order acceptance – When the user selects Accept, CPRS requests the order checks.
- Signature of orders – When a user signs the order, CPRS requests order checks.

Outpatient Pharmacy and Adverse Reaction Tracking process the information CPRS provides and sends all drug-drug, drug-drug class, contrast media allergy, and drug-allergy order checks back to CPRS for display to the user. For drug-drug and drug-drug class interactions, the message CPRS displays also shows the last refill date, quantity dispensed, and the facility name where the medication was prescribed; allergy information and information about local order checks do not include the facility name. The facility information is provided as a convenience to the user.

With RDI, when a user writes an inpatient or outpatient medication order, an order check against remote outpatient medications is done. The order check is done against all active outpatient medications and all outpatient medications that expired or were discontinued less than 30 days in the past. If the user records that the patient is taking a Non-VA medication, the order check will happen against remote outpatient medication data. However, neither Non-VA medications nor inpatient medications on other systems (remote Non-VA medications nor remote inpatient medications) can be used for order checking because they are not in the HDR.

What If CPRS Receives No Data from the HDR?

If CPRS does not receive a response from CDS within the amount of time specified in the logical link ORHDR, the order checks will be done against local data only. In this case, CPRS displays a “Remote Order Checking not available – checks done on local data only” message at the bottom of the order check screen once during the ordering session (so it will appear once for each patient if there is a problem receiving HDR data) to inform the user that order checks are using only local data. However, in the background, CPRS continues to attempt to communicate with the HDR (by pinging). When communication with the HDR is reestablished, users will begin to see remote order checks again.

Note: A national announcement (“Automated Notification Report” or ANR) is sent out when problems with the HDR might be occurring or when scheduled maintenance will occur that would create situations when the HDR will not be available. Someone at your site should monitor ANR messages so that your site will be aware of these outages and can prepare for them or alert staff as needed.

There are several reasons why CPRS might not receive data from the HDR:
The HDR could be down – The HDR is a database that stores a great deal of data about VHA patients. Because it is new, the HDR may experience some problems. There are many pieces to the communication that takes place between the HDR and a local site, both software and hardware, including Clinical Data Service (CDS) and the database itself, just to name a few; failure of any piece may disrupt communication with the HDR. This might also cause a site to see the “Remote Order Checking not available – checks done on local data only” message.

The site may experience local area network (LAN) or wide area network (WAN) problems – In addition to the HDR software and hardware, each site has a LAN and connections to the WAN that could be having problems. This might also cause a site to see the “Remote Order Checking not available – checks done on local data only” message.

The patient may not have a national identifier – Each patient should have a unique number (called an Integration Control Number (ICN)) that identifies the patient nationally. This number is used by the Master Patient Index (MPI), Remote Data View (RDV), Joint Legacy Viewer (JLV), and other applications. If a patient does not have an ICN, CPRS displays the “Remote Order Checking not available – checks done on local data only” message. In addition, none of the applications mentioned can get data for the patient from other sites, including from the HDR.

Setting RDI Parameters

Patch OR*3.0*238 activates the menu OR RDI PARAMS. This menu sets two parameters:

**OR RDI HAVE HDR** – This parameter defines whether CPRS should query the HDR for remote allergy and Outpatient Pharmacy data. If set to NO, CPRS will not request any remote data for order checking from the HDR. The default is NO, but this parameter is set to YES when patch OR*3.0*238 is installed.

**OR RDI CACHE TIME** – This parameter defines how long (the number of minutes) CPRS should cache the remote allergy and outpatient pharmacy data after it is retrieved so it can used for order checks. The default is 120 minutes, but can be from 0 to 9999 minutes. A setting of 0 (zero) means that data will be requested every time an order check is needed, which would increase WAN traffic significantly. If the data is older than the time set in this parameter, CPRS will request the data from the HDR again when one of the triggers described above occurs, such as an order being accepted.

Note: To edit the values of these parameters, users must use the OR RDI PARAMS menu. Users will not be able to use the general parameter editing menu options, such as XPAR EDIT.

**Order Check Name ^ORD(100.8 ien**

- ALLERGY-CONTRAST MEDIA INTERACTION 4
- ALLERGY-DRUG INTERACTION 3
- AMINOGLYCOSIDE ORDERED 20
- BIOCHEM ABNORMALITY FOR CONTRAST MEDIA 9
- CLOZAPINE APPROPRIATENESS 19
- CRITICAL DRUG INTERACTION 18
- CT & MRI PHYSICAL LIMITATIONS 8
- DANGEROUS MEDS FOR PT > 64 30
- DISPENSE DRUG NOT SELECTED 27
- DUPLICATE DRUG CLASS ORDER 17
- DUPLICATE DRUG ORDER 16


**Trigger Methods**

Order checks are triggered via four main ordering events:

1. Ordering dialog/display
2. Orderable item selection
3. Order acceptance
4. Ordering session completion

In addition, order checking is triggered by three special events:

26. Delayed/time-release orders initiated
27. Orders Renewed or Edited
28. Orders signed in a later session (delayed signature)

**Order Checks Categorized by Event**

Ordering dialog/display

- Estimated creatinine clearance if < 50
- Order checking not available/supported
- Renal functions for patients over 65
- Polypharmacy

**Orderable item selection**

- Duplicate drug orders (against existing meds)
- Duplicate drug class orders (against existing meds)
Drug-drug interactions (against existing meds)
Clozapine appropriateness
Allergy-contrast media interactions
Physical limitations for CT and MRI scanners
Biochem abnormality for contrast media
Glucophage-contrast media interaction
Glucophage-lab results interaction
Dispense drug not selected
Recent barium study
Duplicate Opioid Medications

**Order Acceptance**
(includes checks where time is a factor in reducing false positives)
Duplicate orders (non-medication)
Allergy-drug interactions
Recent oral cholecystogram
Lab order frequency restrictions
Dangerous Meds for Pt > 64
No Allergy Assessment (CPRS checks to see if an assessment is done between acceptance and signature so that if one is done, the message does not show again.)

**Ordering session completion**
Allergy-drug interactions (This was added to catch any allergies entered between the time the order is accepted and when it is signed.)
Aminoglycosides
Missing lab tests for angiogram procedure
Duplicate drug orders (against meds placed in same session)
Duplicate drug class orders (against meds placed in same session)
Drug-drug interactions (against meds placed in same session)

**Non-VA Medications Order Check Exceptions**

Ordering non-VA meds triggers the following order checks:

Duplicate Drug (seen as Duplicate Order check)
Duplicate Drug Class
Critical Drug Interaction
Significant Drug Interaction
Allergy

These order checks can appear at the end of the session or on selection based on the trigger. Two differences exist for non-VA medications:

5. **Duplicate Drug Class**—CPRS does not perform a Duplicate Drug Class order check for interactions between inpatient medications and non-VA medications.

29. **Allergies**—Allergies checks for non-VA medications are slightly different. The following three rules apply:
• **Allergy to Medications Designated as Herbals**—If a clinician enters an allergy to an herbal (e.g., Gingko) that is in the drug class HA000 in a patient’s record, users should get an allergy-drug interaction order check when they enter that same herbal as a non-VA medication for that patient.

• **Allergy for Herbal Drug Class**—If a clinician enters an allergy to an herbal (e.g., Gingko - class HA000) in a patient’s record, users should NOT get an allergy-drug interaction order check when they enter another item (e.g., Ginger) with that same **drug class**. All herbal medications have the same drug class HA000, which makes that order check ineffective.

• **Allergy for Non-VA Meds from Other Drug Classes**—However, if a clinician enters an allergy to a drug (e.g., famotidine - class GA301) into a patient’s record and then enters another drug from that same class as a non-VA med (e.g., Ranitidine), users should get the allergy-drug interaction order check.

**Recipient Determination**

In general, order check processing is determined via the **ORK SYSTEM ENABLE/DISABLE** and **ORK PROCESSING FLAG** parameters. Specific order checks can also be affected by other parameters in the **ORK** namespace. These are discussed with the individual order checks later in this document. Order check determination occurs in the following order:

1. Check the value of the parameter **ORK SYSTEM ENABLE/DISABLE**. If it is ‘D’isabled, do not process or send any order checks (other than indicating the order checking system is disabled.) If it is ‘E’nabled, process order checks as outlined below.

2. Processing is evaluated according to values set for entities identified in the parameter **ORK PROCESSING FLAG**. These entity values are accessed via the Option **ORK PROCESSING FLAG** also called Enable/Disable an Order Check. These entity values are processed in the following order to determine if that order check should be processed or not.

   **highest entity**
   
   user -> inpatient location -> user service/specialty -> division -> system -> OERR

   **lowest entity**

**Dialog with User**

The order check user dialog occurs in the following steps:

1) List of order check messages are presented to user sorted by clinical danger level.

2) Based on the order check’s clinical danger level and user’s OE/RR 2.5 elec signature key:

   - User holds OREMAS key:
     Process without prompting for justification but allow them to ‘Cancel’ or ‘OK’ the order

   - User does not hold OREMAS key and clinical danger level is ‘2’ (Moderate) or ‘3’ (Low):
     Process without prompting for justification but allow them to ‘Cancel’ or ‘OK’ the order

   - User does not hold OREMAS key and clinical danger level is ‘1’ (High):
     Prompt for justification by prompting to ‘Cancel’ or ‘Override’. If the user selects ‘Override’, prompt for justification (enter free text). If a justification is entered, allow them to ‘Cancel’ or ‘OK’
3) Order check messages and any accompanying over-ride justifications are sent with the order to the filling package and are displayed in the order’s detailed display. If the clinical danger level for an order check message is “High” (value of ‘1’), the order check message and justification are stored in the Order file [#100] under the ‘9’ node.
Order Check Specifics

Each order check and how it works is described below.

Allergy-Contrast Media Interactions
Trigger: Selection of a Radiology orderable item.
Mechanism: The CPRS Expert System checks the radiology orderable item against the orderable item file to determine if it uses a contrast media. If it does, the Allergy Tracking System (ATS) is requested to determine if the patient has a known allergy to contrast media. If both of these conditions are true, OERR is notified and the warning message is displayed.
Message: Patient allergic to contrast medi: <list of contrast media allergens (barium or unspecified)>.
Danger Lvl: This order check is exported with a High clinical danger level.

Allergy-Drug Interactions
Trigger: Acceptance of a pharmacy order and signature of pharmacy order.
Mechanism: The Allergy Tracking System (ATS) is requested to determine if the patient has a known allergy to an ingredient in the medication ordered and/or a VA Drug Class to which the medication ordered belongs. If ATS finds an allergy/adverse reaction, OERR is notified and the warning message is displayed.
In addition, the VA Drug Class of the medication ordered is compared against the VA Drug Class of existing drug allergens. The comparison is made of the first four characters of the drug classes. The exception is the Analgesics class where the first five characters are compared. For example, CN101 will NOT match CN103 and the order check will NOT occur.
Message: Previous adverse reaction to: <list of med allergens>.
Danger Lvl: This order check is exported with a High clinical danger level.

Aminoglycoside Ordered
Trigger: Ordering session completion.
Mechanism: For each medication order placed during this ordering session, the CPRS Expert System requests the pharmacy package to determine if the medication belongs to the VA Drug Class ‘Aminoglycosides’. If so, the patient’s most recent BUN results are used to calculate the creatinine clearance then OERR is notified and the warning message is displayed.
[Note: The creatinine clearance value displayed in some order check messages is an estimate based on adjusted body weight if patient height is > 60 inches. Approved by the CPRS Clinical Workgroup 8/11/04, it is based on a modified Cockcroft-Gault formula and was installed with patch OR*3*221.
CrCl (male) = (140 - age) x (adj body weight* in kg)

----------------------------------------------
(serum creatinine) x 72

* If patient height is not greater than 60 inches, actual body weight is used.

- CrCl (female) = 0.85 x CrCl (male)
- To calculate adjusted body weight, the following equations are used:
- Ideal body weight (IBW) = 50 kg x (for men) or 45 kg x (for women) + 2.3 x (height in inches - 60)
- Adjusted body weight (Adj. BW) if the ratio of actual BW/IBW > 1.3 = (0.3 x (Actual BW - IBW)) + IBW
- Adjusted body weight if the ratio of actual BW/IBW is not > 1.3 = IBW or Actual BW (whichever is less)
Message: Aminoglycoside - est. CrCl: <value calculated from most recent serum creatinine>, (CREAT: <result> BUN: <result>).

Danger Lvl: This order check is exported with a High clinical danger level.

**Biochem (BUN, creatinine) Abnormality For Contrast Media**

**Trigger**: Selection of Radiology orderable item.

**Mechanism**: The CPRS Expert System checks the radiology orderable item against the orderable item file to determine if it uses a contrast media. If so:

a) the patient’s BUN and creatinine results are checked for abnormal or critical values. If abnormal or critical values exist, OERR is notified and warning message “a)” is displayed.

b) the patient’s creatinine results are checked to determine if they occurred within x days. (“X” is obtained from the ORK CONTRAST MEDIA CREATININE parameter.) If no results within x days exist, OERR is notified and warning message “b)” is displayed.

**Message**: a) Procedure uses contrast media - abnormal biochem result: <BUN and/or creatinine results with D/T>.
b) Procedure uses non-barium contrast media - no creatinine results within X days

Danger Lvl: This order check is exported with a High clinical danger level.

**Clozapine appropriateness**

**Trigger**: Selection of Clozapine orderable item.

**Mechanism**: The CPRS Expert System asks Pharmacy api (EN^PSODRG) if the medication is clozapine. If so, it checks for WBC and/or ANC results within past x days then notifies OERR and the warning message is displayed.

**Message**: Clozapine – Most recent WBC result: <WBC result & collection d/t> else:

No WBC past fourteen days - pharmacy cannot fill clozapine order. Most recent WBC result: <WBC result & collection d/t>

Danger Lvl: This order check is exported with a High clinical danger level.

**Critical Drug interaction**

**Trigger**: Selection of Pharmacy orderable item for existing medications and at the conclusion of an ordering session against meds placed in that session.

**Mechanism**: The Pharmacy package is requested to determine if the patient is currently receiving a medication which will interact in a critical manner with the drug selected for ordering. If Pharmacy finds a drug-drug interaction, OERR is notified and the warning message is displayed.

**Message**: Critical drug-drug interaction: <drug1> & <drug2> (text and status of offending medication order)

Danger Lvl: This order check is exported with a High clinical danger level.

**CT and MRI physical limitations**

**Trigger**: Selection of Radiology orderable item.

**Mechanism**: The CPRS Expert System checks the radiology orderable item’s imaging type. If it is “CT” or “MRI”, patient height and weight are retrieved from the Vitals package and compared against parameter values related to the maximum height and weight tolerances of CT and/or MRI devices at the site or division. If the patient height is greater than the value for parameter ORK CT LIMIT HT the message “Patient may be too tall for the CT scanner”, is sent to OERR and displayed. If the patient height is greater than the value for parameter ORK MRI LIMIT HT the message “Patient may be too tall for the MRI scanner”, is sent to OERR and displayed. If the patient weight is greater than the value for parameter ORK CT LIMIT WT the message “Patient may be too heavy for the CT scanner”, is sent to OERR and displayed. If the patient weight is greater than the value for parameter ORK MRI LIMIT WT the message “Patient may be too heavy for the MRI scanner”, is sent to OERR and displayed. These parameter values are not exported with CPRS so they must be set at the site for this order check to function. Values are set via options under the menu option ORK ORDER CHK MGMT MENU. They should be set at the System level for single division sites and multi-division sites with one device (CT and/or MRI). Values should be set at the Division level for multi-division sites with more than one CT and/or MRI device. For example, a three division site with three CT devices and one MRI device would set the values for the CT-related parameters at the Division level and the values for the MRI-related parameters at the System level.
Message: Patient may be too <tall/heavy> for the <CT/MRI>.
Danger Lvl: This order check is exported with a High clinical danger level.

**Dangerous Meds for Pt > 64**

**Trigger:** Acceptance of pharmacy orderable items amitriptyline, chlorpropamide or dipyridamole.

**Mechanism:** The CPRS Expert System determines if the patient is greater than 64 years old. It then checks the orderable item of the medication ordered to determine if it is mapped as a local term to the national term DANGEROUS MEDS FOR PTS > 64.

**Message:**
- If the orderable item text contains **AMITRIPTYLINE** this message is displayed:
  - Patient is <age>. Amitriptyline can cause cognitive impairment and loss of balance in older patients. Consider other antidepressant medications on formulary.
- If the orderable item text contains **CHLORPROPAMIDE** this message is displayed:
  - Patient is <age>. Older patients may experience hypoglycemia with Chlorpropamide due to its long duration and variable renal secretion. They may also be at increased risk for Chlorpropamide-induced SIADH.
- If the orderable item text contains **DIPYRIDAMOLE** this message is displayed:
  - Patient is <age>. Older patients can experience adverse reactions at high doses of Dipyridamole (e.g., headache, dizziness, syncope, GI intolerance.) There is also questionable efficacy at lower doses.

Danger Lvl: This order check is exported with a High clinical danger level.

**Dispense Drug Not Selected**

**Trigger:** Selection of Pharmacy orderable item.

**Mechanism:** The person entering the order does not select a entry from the Dispense Drug file [#50], OERR is notified and the warning message is displayed.

**Message:** The order checks: drug interaction, duplicate drug, duplicate drug class and drug allergy were not processed because the medication order was not based on dispense drug.

Danger Lvl: This order check is exported with a Moderate clinical danger level.

**Duplicate Drug Class Order**

**Trigger:** Selection of Pharmacy orderable item for existing medications and at the conclusion of an ordering session against meds placed in that session.

**Mechanism:** The Pharmacy package is requested to determine if the patient is currently receiving a medication which will belongs to a VA Drug Class to which the drug selected for ordering belongs. If so, OERR is notified and the warning message is displayed.

**Message:** Duplicate drug class order: <class> (text and status of offending medication order)

Danger Lvl: This order check is exported with a High clinical danger level.

**Duplicate Drug order**

**Trigger:** Selection of Pharmacy orderable item for existing medications and at the conclusion of an ordering session against meds placed in that session.

**Mechanism:** The Pharmacy package is requested to determine if the patient is currently receiving a medication which matches the drug selected for ordering. Inpatient med orders only check against the patient’s inpatient meds. Outpatient med orders only consider outpatient orders. The comparison is done at the local, dispense drug level so an order for Aminophylline 100mg will trigger this order check if the patient is already receiving Aminophylline 100mg but not if the patient is already receiving Aminophylline 200mg. (However, a duplicate drug class order message will be displayed because Aminophylline 100mg and Aminophylline 200mg are in the same VA Drug Class.) If a duplicate is returned by Pharmacy, OERR is notified and the warning message is displayed.

**Message:** Duplicate order: <text and status of offending medication order>

Danger Lvl: This order check is exported with a High clinical danger level.

**Duplicate Opioid Medications**

**Trigger:** Selection of Pharmacy orderable item.
Mechanism: The medication ordered is evaluated to determine if it is an opioid medication based upon VA Drug Classes “Opioid Analgesics” and “Opioid Antagonist Analgesics”. If the medication belongs in either drug class (is an opioid), the patient’s active pharmacy orders are evaluated for other orders belonging to an opioid drug class. If the patient already has an existing opioid order, OERR is notified and the warning message is displayed.

Message: Duplicate opioid medications: <text and status of duplicate opioid orders>

Danger Lvl: This order check is exported with a Moderate clinical danger level.

Duplicate Order (Non-Medication)

Trigger: Acceptance of non-pharmacy orderable item.

Mechanism: If it’s a Lab order, the parameter ORK DUP ORDER RANGE OI is checked for a value for this orderable item. If so this value is used to determine how many hours back in time to search for duplicate orders. Values for this parameter are not exported with CPRS. They can be set at the site at the Service, Division and System levels. Values are set via an option under the menu option ORK ORDER CHK MGMT MENU. If a value for the orderable item cannot be found in the ORK DUP ORDER RANGE OI parameter, the value for parameter ORK DUP ORDER RANGE LAB is used. The exported value for this parameter is 48 [hours]. ORK DUP ORDER RANGE LAB can be set at the Service, Division and System levels. Values are set via an option under the menu option ORK ORDER CHK MGMT MENU. After the search range hours are determined, the lab orderable item is equated with the equivalent local lab procedures, split into atomic lab procedures (if appropriate) then appended to the order’s specimen. Order Entry is then requested to provide a list of all lab orders placed for the patient from the current order’s date/time to the current order’s date/time minus the number of hours provided by the duplicate order range parameters. Orders with a status of Canceled, Discontinued, Expired, Lapsed, Replaced, or Delayed are ignored. The lab orders returned from Order Entry are equated with equivalent local lab procedures and if necessary, split into atomic lab procedures. The lab order being placed (and atomic procedures) are compared with previous orders (and atomic procedures) for duplicates. If found, OERR is notified and a warning message is displayed.

If it’s a Radiology order, the parameter ORK DUP ORDER RANGE OI is checked for a value for this orderable item. If so this value is used to determine how many hours back in time to search for duplicate orders. Values for this parameter are not exported with CPRS. They can be set at the site at the Service, Division and System levels. Values are set via an option under the menu option ORK ORDER CHK MGMT MENU. If a value for the orderable item cannot be found in the ORK DUP ORDER RANGE OI parameter, the value for parameter ORK DUP ORDER RANGE RADIOLOGY is used. The exported value for this parameter is 48 [hours]. ORK DUP ORDER RANGE RADIOLOGY can be set at the Service, Division and System levels. Values are set via an option under the menu option ORK ORDER CHK MGMT MENU. After the search range hours are determined, the Order file is searched for the same orderable item ordered for the patient from the current order’s date/time to the current order’s date/time minus the number of hours provided by the duplicate order range parameters. Orders with a status of Canceled, Discontinued, Expired, Lapsed, Replaced, or Delayed are ignored. If a duplicate is found, OERR is notified and a warning message is displayed.

If it’s not a Pharmacy, Lab or Radiology order, the parameter ORK DUP ORDER RANGE OI is checked for a value for this orderable item. If none exists, 48 [hours] is the value used to determine the duplicate search range. The Order file is searched for the same orderable item ordered for the patient from the current order’s date/time to the current order’s date/time minus 48 hours. Orders with a status of Canceled, Discontinued, Expired, Lapsed, Replaced, or Delayed are ignored. If a duplicate is found, OERR is notified and a warning message is displayed.

Message: Duplicate order: <order text truncated to 60 characters> <last ordered date/time> [<order status>] (if lab order; *Most recent result: <most recent result>*)

Danger Lvl: This order check is exported with a Moderate clinical danger level.

Error Message

Trigger: Entry of ordering dialog, selection of orderable item, acceptance or order, completion of ordering session.

Mechanism: The CPRS Expert System is recompiling rules and is momentarily disabled, OERR is notified and a warning message is displayed.

Message: Order checking is recompiling and momentarily disabled.
Estimated Creatinine Clearance If < 50

**Trigger:** Entry of pharmacy ordering dialog

**Mechanism:** The CPRS Expert System calculates the creatinine clearance based on the most recent serum creatinine results. If the value is less than 50 or it cannot be calculated, OERR is notified and a warning message is displayed.

*[Note:] The creatinine clearance value displayed in some order check messages is an estimate based on adjusted body weight if patient height is > 60 inches. Approved by the CPRS Clinical Workgroup 8/11/04, it is based on a modified Cockcroft-Gault formula and was installed with patch OR*3*221.


\[
CrCl (male) = \frac{(140 - \text{age}) \times \text{adj body weight in kg}}{\text{serum creatinine}} \times 72
\]

* If patient height is not greater than 60 inches, actual body weight is used.

- **CrCl (female) = 0.85 \times CrCl (male)**
- To calculate adjusted body weight, the following equations are used:
  - Ideal body weight (IBW) = 50 kg x (for men) or 45 kg x (for women) + 2.3 x (height in inches - 60)
  - Adjusted body weight (Adj. BW) if the ratio of actual BW/IBW > 1.3 = (0.3 x (Actual BW - IBW)) + IBW
  - Adjusted body weight if the ratio of actual BW/IBW is not > 1.3 = IBW or Actual BW (whichever is less)

**Message:** Est. CrCl: <value calculated from most recent serum creatinine>. (CREAT: <result>  BUN: <result>)

**Danger Lvl:** This order check is exported with a Low clinical danger level.

### Glucophage-Contrast Media Interactions

**Trigger:** Selection of a Radiology orderable item.

**Mechanism:** The CPRS Expert System checks the radiology orderable item against the orderable item file to determine if it uses a non-barium contrast media. If it does, the Pharmacy package is requested to return a list of all medications the patient is currently receiving. If one of these is glucophage/metformin OERR is notified and the warning message is displayed.

**Message:** Procedure uses non-barium contrast media and patient is taking glucophage.

**Danger Lvl:** This order check is exported with a Moderate clinical danger level.

### Glucophage-Lab Results Interactions

**Trigger:** Selection of a Pharmacy orderable item.

**Mechanism:** The CPRS Expert System checks the pharmacy orderable item’s local text (from the Dispense Drug file [#50]) to determine if it contains “glucophage” or “metformin”. The expert system next searches for a serum creatinine result within the past x number of days as determined by parameter ORK GLUCOPHAGE CREATININE. If the patient’s creatinine result was greater than 1.5 or does not exist, OE/RR is notified and the warning message is displayed.

**Message:** Glucophage – no serum creatinine within past <x> days. else: Glucophage – Creatinine results: <creatinine greater than 1.5 w/in past <x> days>

**Danger Lvl:** This order check is exported with a High clinical danger level.

### Lab Order Frequency Restrictions

**Trigger:** Acceptance of a Lab orderable item.
Mechanism: The lab order is equated with equivalent local lab procedures and split into atomic lab procedures (if appropriate). Lab file fields Max Order Freq and Single Day Max Order Freq are checked for values and equated with the lab procedure/specimen.

If a procedure/specimen contains a value for Max Order Freq, Order Entry is requested to provide a list of all lab orders placed for the patient from the current order’s date/time to the current order’s date/time minus the number of days indicated in field Max Order Freq. Orders with a status of Canceled, Discontinued, Expired, Lapsed, Replaced, Changed, or Delayed are ignored. The lab orders returned by Order Entry are equated with equivalent local lab procedures and split into atomic lab procedures (if appropriate). If the equivalent local lab procedure of a lab order returned by Order Entry equals an equivalent local lab procedure of the current order and the lab order returned by Order Entry was placed within the past $X$ number of days (where $X$ is the value of Max Order Freq), OERR is notified and a warning message is displayed. If Max Order Freq exists for a lab procedure/specimen, Single Day Max Order Freq is not processed. If a procedure/specimen does not contain a value for Max Order Freq but does have a Single Day Max Order Freq value, Order Entry is requested to provide a list of all lab orders placed on the same date as the current order’s date/time. Orders with a status of Canceled, Discontinued, Expired, Lapsed, Replaced, Changed, or Delayed are ignored. The lab orders are equated with equivalent local lab procedures and split into atomic lab procedures (if appropriate). If more duplicates than the value of Single Day Max Order Freq are found, OERR is notified and a warning message is displayed.

Message: Max lab test order freq exceeded for: <lab test> or: Lab test daily order max exceeded for: <lab test>.

Danger Lvl: This order check is exported with a Moderate clinical danger level.

**Missing Lab Tests For Angiogram Procedure**

**Trigger:** At the conclusion of an ordering session.

**Mechanism:** The CPRS Expert System checks the radiology orderable item to determine if it is linked to OCX nat’l term ANGIOGRAM (PERIPHERAL) then determines if the required concurrent lab tests PROTHROMBIN TIME and THROMBOPLASTIN have been ordered in the same ordering session.

**Message:** Missing labs for angiogram <missing lab tests>.

**Danger Lvl:** This order check is exported with a High clinical danger level.

**No Allergy Assessment**

**Trigger:** Acceptance of a Radiology, Pharmacy or Dietetics orderable item.

**Mechanism:** The CPRS Expert System calls into the Allergy Tracking System (ATS). If the patient has no allergy data on file, OERR is notified and the warning message is displayed.

**Message:** Patient has no allergy assessment.

**Danger Lvl:** This order check is exported with a Moderate clinical danger level.

**Order Checking Not Available/Supported**

**Trigger:** Entry of any ordering dialog [Note: this order check is currently not triggered.]

**Mechanism:** OERR checks the value of parameter ORK SYSTEM ENABLE/DISABLE. If it is ‘Disabled’, the message is displayed and no further order check processing occurs. The exported value for this parameter is ‘Disabled’. This prevents order checking from processing HL7 messages exchanged during conversions. It can be set at the Division and System levels. Values are set via an option under the menu option ORK ORDER CHK MGMT MENU.

**Message:** Order checking currently not available/supported.

**Danger Lvl:** This order check is exported with a Low clinical danger level.

**Polypharmacy**

**Trigger:** Entry of pharmacy ordering dialog

**Mechanism:** The CPRS Expert System calculates the number of active medications the patient is receiving. For inpatients, only inpatient meds are counted. If the patient is an outpatient, only outpatient meds are counted. Medications with a status of Expired, Discontinue, Deleted, or Renewed are not counted. Supplies are not counted. If the number is greater than number x, as determined by parameter ORK POLYPHARMACY, OERR is notified and a warning message is displayed.
Message: Potential polypharmacy – patient is currently receiving <number of meds> medications.
Danger Lvl: This order check is exported with a Moderate clinical danger level.

**Recent Barium Study (w/in 2 Days)**
Trigger: Selection of Radiology orderable item.
Mechanism: The CPRS Expert System checks the radiology orderable item against the orderable item file to determine if it uses a barium contrast media. If so, Order Entry is requested to provide a list of all radiology orders placed for the patient within the past 48 hours. Each radiology order is checked to determine if its related orderable item uses barium contrast media. If it does, OERR is notified and the warning message is displayed.
Message: Recent barium study: <order text truncated to 60 characters> <last ordered date/time> [<order status>].
Danger Lvl: This order check is exported with a High clinical danger level.

**Recent Cholecystogram (w/in 7 days)**
Trigger: Acceptance of Radiology orderable item.
Mechanism: The CPRS Expert System checks the radiology orderable item against the orderable item file to determine if it is a cholecystogram. If so, Order Entry is requested to provide a list of all radiology orders placed for the patient within the past 7 days. Each radiology order is checked to determine if its related orderable item is a cholecystogram. If it does, OERR is notified and the warning message is displayed.
Message: Recent cholecystogram: <order text truncated to 60 characters> <last ordered date/time> [<order status>].
Danger Lvl: This order check is exported with a High clinical danger level.

**Renal Function (BUN, Creatinine) For Patients Over 65**
Trigger: Entry of pharmacy ordering dialog
Mechanism: The CPRS Expert System checks the patient age. If it is greater than 65, OERR is notified and a warning message is displayed.
Message: Patient > 65. Renal results: <BUN and/or creatinine results with D/T>
Danger Lvl: This order check is exported with a Moderate clinical danger level.

**Significant Drug Interaction**
Trigger: Selection of Pharmacy orderable item for existing medications and at the conclusion of an ordering session against meds placed in that session.
Mechanism: The Pharmacy package is requested to determine if the patient is currently receiving a medication which will interact in a significant manner with the drug selected for ordering. If Pharmacy finds a drug-drug interaction, OERR is notified and the warning message is displayed.
Message: Significant drug-drug interaction: <drug1> & <drug2> (text and status of offending medication order)
Danger Lvl: This order check is exported with a Moderate clinical danger level.
31. Appendix F: Creating, Editing, and Viewing Release Events

This appendix describes how to create, edit, and view a release event. Creating a release event allows CPRS users to write event-delayed orders that are not executed until the release event occurs. For example, you could create a release event called “Transfer to Medicine Treating Specialty” that includes three different, but related treating specialties. A clinician could then write an order that would be delayed until the “Transfer to Medicine Treating Specialty” release event occurred (i.e., the patient is transferred to one of the treating specialties). After the “Transfer to Medicine Treating Specialty” event occurred, the order would be released.

Creating a Release Event

*NOTE: Release events are stored in the OE/RR RELEASE EVENTS file (#100.5)*

To create a release event, follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].

   AL Allocate OE/RR Security Keys [ORCL KEY ALLOCATION]
   KK Check for Multiple Keys [OR CL KEY CHECK]
   DC Edit DC Reasons [ORCL ORDER REASON]
   GP GUI Parameters ... [ORW PARAM GUI]
   GA GUI Access - Tabs, RPL [ORCL CPRS ACCESS]
   MI Miscellaneous Parameters [OR PARAM ORDER MISC]
   NO Notification Mgmt Menu ... [ORB NOT COORD MENU]
   OC Order Checking Mgmt Menu ... [ORK ORDER CHK MGMT MENU]
   MM Order Menu Management ... [ORCM MGMT]
   LI Patient List Mgmt Menu ... [ORLP PATIENT LIST MGMT]
   FP Print Formats [ORCL PRINT FORMAT]
   PR Print/Report Parameters ... [OR PARAM PRINTS]
   RE Release/Cancel Delayed Orders [ORC DELAYED ORDERS]
   US Unsigned orders search [OR UNSIGNED ORDERS]
   EX Set Unsigned Orders View on Exit [OR PARAM UNSIGNED ORDERS VIEW]
   NA Search orders by Nature or Status [OR NATURE/STATUS ORDER SEARCH]
   DO Event Delayed Orders Menu ... [OR DELAYED ORDERS]
   PM Performance Monitor Report [OR PERFORMANCE MONITOR]
2. Select the Event Delayed Orders Menu by typing **DO**.
The following menu will appear:

```
DO Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR]
EP Parameters for event delayed orders [OR EVENT PARAMETERS]
IN Inquire to OE/RR Patient Event File [OR PATINET EVENT INQUIRY]
```

3. Select Delayed Orders/Auto-DC Set-up by typing **DO**.
The following menu will appear:

```
Select one of the following:

1. Auto-DC Rules
2. Release Events
```

```
Enter response:
```

4. Select Release Events by typing **2**.
The existing release events will appear in a numbered list.

5. Select Add/Edit by typing **AE**.

6. Press **Return** at the Select item(s) prompt.

7. Type a name for the release event at the Select **OE/RR RELEASE EVENTS NAME** prompt and press **Return**.

8. Type **Y** or **Yes** at the *Are you adding [event name] as a new OE/RR RELEASE EVENTS?* prompt.

9. Enter one of these letters at the **OE/RR RELEASE EVENTS TYPE OF EVENT** prompt:
   - **A** for an admission event.
   - **T** for a transfer event.
   - **D** for a discharge event.
   - **O.R.** for an O.R. event.
   - **M** for a manual release event.

10. Enter a division at the **OE/RR RELEASE EVENTS DIVISION** prompt:
    - For admission events, enter the location where the patient will be admitted.
    - For transfer events, enter the location where the patient will be transferred.
    - For discharge events, enter the location the patient will be leaving.
    - For O.R. events, enter the location where the patient will have the procedure.
    - For manual release events, enter the location where the patient will be located.

11. Enter **Y** or **N** at the *Do you want to copy from an existing entry?* prompt.

12. You will now be prompted to enter additional required information. For an explanation of additional prompts and fields you may encounter, see the **Explanation of Release Event Prompts (Fields in the OE/RR RELEASE EVENTS file #100.5)** topic.
13. Once you have entered all of the required information, the *You have now entered the required fields and may ^ to exit* prompt will appear. If you do not wish to further define this event, type ^ to exit.

**NOTE:** You can also create a new release event from the detailed display screen.

**NOTE:** New release events are inactive by default and must be activated (by following the steps in the Activating / Inactivating a Release Event topic) before they are used.

### Creating a Child Release Event

A child release event is a variation of a main or parent release event. A child release event shares the same trigger event as its parent; however, a child release event can be assigned to a different order menu than its parent release event.

For example, suppose your facility has a release event named “transfer to surgery ICU” that releases orders when a patient is transferred to the surgery ICU. This release event is appropriate for most of your needs; however, when a clinician writes delayed orders for a transfer to the orthopedic surgery ICU, you would like the clinician to be presented with a slightly different order menu. In this example, you could create a child release event called “transfer to orthopedic surgery ICU”. This child event would share the same trigger event as its parent; however, clinicians who selected the “transfer to orthopedic surgery ICU” child release event would be presented with a different order menu.

To create a child release event, follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].

```plaintext
AL Allocate OE/RR Security Keys [ORCL KEY ALLOCATION]
KK Check for Multiple Keys [ORE KEY CHECK]
DC Edit DC Reasons [ORCL ORDER REASON]
GP GUI Parameters ... [ORW PARAM GUI]
GA GUI Access - Tabs, RPL [ORCL CPRS ACCESS]
MI Miscellaneous Parameters [OR PARAM ORDER MISC]
NO Notification Mgmt Menu ... [ORB NOT COORD MENU]
OC Order Checking Mgmt Menu ... [ORK ORDER CHK MGMT MENU]
MM Order Menu Management ... [ORCM MGMT]
LI Patient List Mgmt Menu ... [ORLP PATIENT LIST MGMT]
FP Print Formats [ORCL PRINT FORMAT]
PR Print/Report Parameters ... [OR PARAM PRINTS]
RE Release/Cancel Delayed Orders [ORC DELAYED ORDERS]
US Unsigned orders search [OR UNSIGNED ORDERS]
```
2. Select the Event Delayed Orders Menu by typing **DO**.

   The following menu will appear:

   DO Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR]
   EP Parameters for event delayed orders [OR EVENT PARAMETERS]
   IN Inquire to OE/RR Patient Event File [OR PATINET EVENT INQUIRY]

3. Select Delayed Orders/Auto-DC Set-up by typing **DO**.

   The following menu will appear

   Select one of the following:
   1. Auto-DC Rules
   2. Release Events

   Enter response:

4. Select Release Events by typing **2**.

   The existing release events will appear in a numbered list.

5. Select Create Child Event by typing **CC**.

6. At the *Select item(s)* prompt, enter the number of the parent event that you want to associate with the new child release event.

7. At the *Select OE/RR CHILD RELEASE EVENTS NAME* prompt, type a name for the new child release event.

8. The name that you entered in step 6 will appear. Verify that you entered the name correctly and press Return.

9. Enter the name that you would like displayed to CPRS users at the *DISPLAY TEXT* prompt.

10. Once you have entered all of the required information, the *You have now entered the required fields and may ^ to exit* prompt will appear. If you do not wish to further define this child event, type ^ to exit. If you would like to enter additional information, please refer to the *Explanation of Release Event Prompts (Fields in the OE/RR RELEASE EVENTS file #100.5)* topic.

    ☞ **NOTE:** New child release events are inactive by default and must be activated (by following the steps in the *Activating / Inactivating a Release Event* topic) before they are used.

    ☞ **NOTE:** Child release events are indented and displayed under the associated parent event.
Items 3, 4, and 5 are child release events of the Admit to Medicine parent release event.

**Explanation of Release Event Prompts (Fields in the OE/RR RELEASE EVENTS file #100.5)**

The list below explains the additional prompts (fields) that you may encounter when entering a new release event:

- **Display Text** – the name of the release event as it appears to CPRS users.
- **Type of Event** – the type of release event. The value of this field can be A (admission event), T (transfer event), D (discharge event), O (O.R. event), or M (manual release event).
- **Division** – the division to which the release event will apply.
  - For admission events the division is the admitting location.
  - For discharge events the division is the location the patient is leaving.
  - For transfer events the division is the receiving location where the patient will be transferred.
  - For O.R. events the division is the location where the patient will have the procedure.
  - For manual release events the division is where the patient will be located.

<table>
<thead>
<tr>
<th>Event Name</th>
<th>Display Text</th>
<th>Active?</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADMIT TO MEDICAL OBSERVATION (5000)</td>
<td>ADMIT TO MEDICAL OBS</td>
<td>Y</td>
<td>0</td>
</tr>
<tr>
<td>ADMIT TO MEDICINE (5000)</td>
<td>ADMIT TO MEDICINE</td>
<td>Y</td>
<td>0</td>
</tr>
<tr>
<td>ADMIT TO MEDICINE CHILD1</td>
<td>ADMIT TO MEDICINE CH</td>
<td>Y</td>
<td>0</td>
</tr>
<tr>
<td>ADMIT TO MEDICINE CHILD2</td>
<td>ADMIT TO MEDICINE CH</td>
<td>Y</td>
<td>0</td>
</tr>
<tr>
<td>ADMIT TO SURGICAL OBSERVATION (5000)</td>
<td>ADMIT TO SURGICAL OB</td>
<td>N</td>
<td>0</td>
</tr>
<tr>
<td>ADMIT TO BLIND REHAB OBSERVATION (5000)</td>
<td>ADMIT TO BLIND REHAB</td>
<td>Y</td>
<td>0</td>
</tr>
</tbody>
</table>

**Select number or enter action desired**

AE Add/Edit  CC Create Child Event  DD Detailed Display
AI Activate/Inactivate  CD Change display  EP Edit Event Delay Params
Select action: Next Screen/
**MAS Movement Type** – the MAS movement type that will trigger this release event.

- For admission and discharge events it is recommended that this field be left blank unless you have a need for a very specific admission/discharge event. This way, any admission/discharge type will release delayed orders.
- For O.R. events a MAS Movement type is not required.

**Select Included Locations** – the locations included in the release event.

**Select Included Treating Specialties** – the treating specialties included in the release event.

- For OR events a treating specialty is not required.

**Short Name** – a short name for the release event (used when space is limited on the Orders tab).

**Event Order Dialog** – the name of the dialog that appears when a user writes an event-delayed order assigned to the release event.

- For admission events use OR(Z) MOVE EVENT or ADMIT PATIENT.
- For discharge events use OR(Z) GXMOVE EVENT or DISCHARGE.
- For transfer events use OR(Z) GXMOVE EVENT or TRANSFER.

The OR GXMOVE EVENT dialog

**Order Set Menu** – the order set/menu that will appear when a user writes an event-delayed order assigned to the release event.

**NOTE:** Order sets listed in this field should be part of an order menu.

**Lapse in # Days** – the number of days that an event-delayed order assigned to the release event will remain active. Once the number of days specified is exceeded, you can no longer release orders assigned to this release event.

**Ordering Parameters Location** – the location that the release event will use to retrieve its ordering parameters.
For admission, transfer, O.R., and manual release events, be sure to specify a representative location so that the appropriate parameter values for dialogs (such as dietetics and lab) are used.

For discharge events it is recommended that you specify a representative location so that the appropriate parameter values for dialogs are used. However, this is not required because the patient will be leaving the facility.

*Copy Active Orders* – indicates whether a user should be permitted to copy existing active orders to new event-delayed orders.

- For admission and discharge events this field is usually set to no.
- For transfer events this field is usually set to yes.

**NOTE:** You can configure the OREVNT EXCLUDE DGRP parameter to prevent orders belonging to specific display groups from being copied. For more information, refer to Excluding Display Groups from the Copy Active Orders Dialog Box

### Sample Release Events

**Sample Admission Event**

This sample release event uses the OR GXMOVE EVENT dialog and does not specify a MAS movement type.
Sample Discharge Event

A sample discharge event

Sample Transfer Event: Ward or Division Change

A sample transfer event for a ward or division change
Sample Transfer Event: From PASS

Name: RETURN FROM PASS
Short name: FROM PASS
Inactivated:
Type of event: TRANSFER
Division: REGION 5
Event order dialog:
Order set/menu:
Lapse in #days:
Mas movement type: FROM AUTH. ABSENCE OF 96 HOURS OR LESS
Display text: RETURN FROM PASS
Ordering parameters location:
Copy active orders:

Activation History:
Activated: May 20, 2002@21:38:16 Inactivated:

Add/Edit History:
Added on May 20, 2002@21:38 by CPRSPROVIDER,FIVE

The MAS movement type specified in this event distinguishes the type of transfer

Sample Transfer Event: to ASIH

Name: TO ASIH
Short name: TO ASIH
Inactivated: MAY 20, 2002@21:39:51
Type of event: TRANSFER
Division: REGION 5
Event order dialog: OR GXMOVE EVENT
Order set/menu: ZZREL MENU
Lapse in #days:
Mas movement type: TO ASIH (VAH)
Display text: TO ASIH
Ordering parameters location:
Copy active orders:

Included Treating Specialties:
MEDICINE
SURGERY

Add/Edit History:
Added on May 20, 2002@21:41:45 by CPRSPROVIDER,FIVE

Sample transfer event: to ASIH
Sample Transfer Event: to NHCU

Sample transfer event: to NHCU

Sample O.R. Event

A sample O.R. event
Sample Manual Release Event

Activating/Inactivating a Release Event

NOTE: If a parent release event is inactive, all child release events will also be inactive. However, a child release event can be inactive while the parent release event is active.

To activate/inactivate a release event, follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].
2. Select the Event Delayed Orders Menu by typing DO.
   The following menu will appear:

   DO Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR]
   EP Parameters for event delayed orders [OR EVENT PARAMETERS]
   IN Inquire to OE/RR Patient Event File [OR PATINET EVENT INQUIRY]

3. Select Delayed Orders/Auto-DC Set-up by typing DO.
   The following menu will appear

   Select one of the following:
   1. Auto-DC Rules
   2. Release Events

   Enter response:

4. Select Release Events by typing 2.
   The existing release events will appear in a numbered list.

5. Select Activate/Inactivate by typing AI.

6. Type the number of the release event you would like to activate/inactivate at the Select items prompt.

7. The computer will display a message asking if you are sure you want to activate/inactivate this release event. Type the appropriate response.

   ✔ NOTE: You can also activate/inactivate a release event from the detailed display screen.

   ✔ NOTE: Once you have activated a release event, the event will appear on the Event Delayed Orders dialog in the CPRS GUI. Users can now write orders that are delayed until the release event occurs.
Detailed Display of a Release Event

To view a detailed display of a release event, follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].

   AL Allocate OE/RR Security Keys [ORCL KEY ALLOCATION]
   KK Check for Multiple Keys [ORE KEY CHECK]
   DC Edit DC Reasons [ORCL ORDER REASON]
   GP GUI Parameters ... [ORW PARAM GUI]
   GA GUI Access - Tabs, RPL [ORCL CPRS ACCESS]
   MI Miscellaneous Parameters [OR PARAM ORDER MISC]
   NO Notification Mgmt Menu ... [ORB NOT COORD MENU]
   OC Order Checking Mgmt Menu ... [ORK ORDER CHK MGMT MENU]
   MM Order Menu Management ... [ORCM MGMT]
   LI Patient List Mgmt Menu ... [ORLP PATIENT LIST MGMT]
   FP Print Formats [ORCL PRINT FORMAT]
   PR Print/Report Parameters ... [OR PARAM PRINTS]
   RE Release/Cancel Delayed Orders [ORC DELAYED ORDERS]
   US Unsigned orders search [OR UNSIGNED ORDERS]
   EX Set Unsigned Orders View on Exit [OR PARAM UNSIGNED ORDERS VIEW]
   NA Search orders by Nature or Status [OR NATURE/STATUS ORDER SEARCH]
   DO Event Delayed Orders Menu ... [OR DELAYED ORDERS]
   PM Performance Monitor Report [OR PERFORMANCE MONITOR]

2. Select the Event Delayed Orders Menu by typing DO.
   The following menu will appear:

   DO Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR]
   EP Parameters for event delayed orders [OR EVENT PARAMETERS]
   IN Inquire to OE/RR Patient Event File [OR PATINET EVENT INQUIRY]

3. Select Delayed Orders/Auto-DC Set-up by typing DO.
   The following menu will appear:

   Select one of the following:
1. Auto-DC Rules
2. Release Events

Enter response:

5. Select Detailed Display by typing DD.
6. At the Select item(s) prompt, type the number of the release event that you would like to display.
   A detailed display of the release event will appear.

The release event detailed display
Audit and Activation History

The audit and activation histories on the detailed display can be toggled on or off depending on your preferences.

To toggle the audit and activation histories on or off, follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].

2. Select the Event Delayed Orders Menu by typing DO. The following menu will appear:

   DO Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR]
   EP Parameters for event delayed orders [OR EVENT PARAMETERS]
   IN Inquire to OE/RR Patient Event File [OR PATINET EVENT INQUIRY]

3. Select Delayed Orders/Auto-DC Set-up by typing DO.
The following menu will appear:

Select one of the following:

1. Auto-DC Rules
2. Release Events

Enter response:

4. Type 1 to select Auto-DC Rules or 2 to select Release Events.
5. Type DD to select Detailed Display.
6. At the Select item(s) prompt, type the number of the release event or auto-DC rule that you would like to display.
   A detailed display of the release event or auto-DC rule will appear.
7. Type H to select Add/Remove Histories
8. At the Do you want to include them on the detailed display? prompt, type Y to include the audit and activation histories on the detailed display. Type N if you do not wish to display the audit and activation histories.

The audit and activation history can be toggled on or off on the detailed display screen.
Tracking Event-Delayed Orders (OE/RR PATIENT EVENTS file #100.2)

You can use the information stored in the OE/RR PATIENT EVENTS file (#100.2) to determine which orders were released as the result of a release event.

To retrieve information from the OE/RR PATIENT EVENTS file (#100.2), follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].

2. Select the Event Delayed Orders Menu by typing DO.

   The following menu will appear:

   DO Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR]
   EP Parameters for event delayed orders [OR EVENT PARAMETERS]
   IN Inquire to OE/RR Patient Event File [OR PATINET EVENT INQUIRY]
3. Select Inquire to OE/RR Patient Event File by typing **IN**.
4. Enter either the name of the release event, the name of the patient, or the patient’s social security number at the *Select OE/RR PATIENT EVENT* prompt.

   The records that match the criteria you specified will appear in a numbered list.
5. If necessary, type the number of the record you would like to view.
6. Choose the output device at the *DEVICE* prompt.

   The details of the record will be sent to the appropriate device.

**Creating a List of Commonly Used Release Events**

The OREVNT COMMON LIST parameter allows a CAC to create a list of commonly used release events that will be displayed at the top of a user’s release event list.

To define a list of commonly used release events, follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].

   ```
   AL Allocate OE/RR Security Keys [ORCL KEY ALLOCATION]
   KK Check for Multiple Keys [ORE KEY CHECK]
   DC Edit DC Reasons [ORCL ORDER REASON]
   GP GUI Parameters ... [ORW PARAM GUI]
   GA GUI Access - Tabs, RPL [ORCL CPRS ACCESS]
   MI Miscellaneous Parameters [OR PARAM ORDER MISC]
   NO Notification Mgmt Menu ... [ORB NOT COORD MENU]
   OC Order Checking Mgmt Menu ... [ORK ORDER CHK MGMT MENU]
   MM Order Menu Management ... [ORCM MGMT]
   LI Patient List Mgmt Menu ... [ORLP PATIENT LIST MGMT]
   FP Print Formats [ORCL PRINT FORMAT]
   PR Print/Report Parameters ... [OR PARAM PRINTS]
   RE Release/Cancel Delayed Orders [ORC DELAYED ORDERS]
   US Unsigned orders search [OR UNSIGNED ORDERS]
   EX Set Unsigned Orders View on Exit [OR PARAM UNSIGNED ORDERS VIEW]
   NA Search orders by Nature or Status [OR NATURE/STATUS ORDER SEARCH]
   DO Event Delayed Orders Menu ... [OR DELAYED ORDERS]
   PM Performance Monitor Report [OR PERFORMANCE MONITOR]
   ```
30. Select the Event Delayed Orders Menu by typing **DO**.

The following menu will appear:

```
DO Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR]
EP Parameters for event delayed orders [OR EVENT PARAMETERS]
IN Inquire to OE/RR Patient Event File [OR PATINET EVENT INQUIRY]
```

31. Select Parameters for event delayed orders by typing **EP**.

32. Type **3** to choose Common release event list.

33. Choose how you would like to set the OREVNT COMMON LIST parameter by typing one of the following at the **Enter Selection** prompt:

   1 – for user level  
   2 – for class level  
   3 – for team level  
   4 – for location level  
   5 – for service level  
   6 – for division level

34. If you selected 1, the **Select NEW PERSON NAME** prompt will appear. If you selected 2, the **Select USR CLASS** prompt will appear. If you selected 3, the **OE/RR LIST NAME** prompt will appear. If you selected 4, the **Select HOSPITAL LOCATION NAME** prompt will appear. If you selected 5, the **Select SERVICE/SECTION NAME** prompt will appear. If you selected 6, the **Select INSTITUTION NAME** prompt will appear. Type the appropriate response.

35. At the **Select Entry Number** prompt, type a number for the entry. The number you enter is simply a placeholder and does not represent the position the release event will occupy in the common list. Rather, the list of commonly used release events will be displayed in alphabetical order.

36. The number you entered in step 6 will be displayed. Verify that the number is correct and press **Return**.

37. Type the name of the release event you would like to add to the common list at the **RELEASE EVENT** prompt.

38. Repeat steps 6-8 if you would like to add additional release events to the list.

39. When you have finished adding release events to the list, press Return at the **RELEASE EVENT** prompt.

40. If you have not yet defined a default release event (set the OREVNT DEFAULT parameter), you will be prompted to do so.

```
Setting OREVNT COMMON LIST for User: CPRSPROVIDER,FIVE

Select Entry number: 1
Entry number: 1//  1
Release Event: TRANSFER TO MEDICINE (5000)// TRANSFER TO MEDICINE (5000)  TT
TRANSFER     SALT LAKE CITY HCS
Select Entry number: 2
Entry number: 2//  2
```
<table>
<thead>
<tr>
<th>Release Event: POST OP//</th>
<th>POST OP</th>
<th>O.R.</th>
<th>ELY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Select Entry number:</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Entry number:</td>
<td>3//</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Release Event: TRANSFER TO ICU//</td>
<td>TRANSFER TO ICU</td>
<td>TRANSFER</td>
<td>SALT LAKE CITY OIFO</td>
</tr>
</tbody>
</table>

In the example above, the Transfer to Medicine (5000), Post OP, and Transfer to ICU release events have been assigned to the list of commonly used release events for CPRSPROVIDER,FIVE.

**NOTE:** A release event will only appear on the common list if it is context appropriate. For example, the release event “Transfer to Medicine” will not appear on the list if the current patient is an outpatient.
Defining a Default Release Event

The OREVNT DEFAULT parameter allows a CAC to control which event is presented as the default release event when a user writes a new event-delayed order (in both the CPRS GUI and List Manager).

💡 NOTE: Before a default release event can be defined for a class, team, location, service, or division, you must define a list of commonly used release events for that level. (In other words, you must set the OREVNT DEFAULT LIST parameter.)

To define a default release event, follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].

   - AL Allocate OE/RR Security Keys [ORCL KEY ALLOCATION]
   - KK Check for Multiple Keys [ORE KEY CHECK]
   - DC Edit DC Reasons [ORCL ORDER REASON]
   - GP GUI Parameters ... [ORW PARAM GUI]
   - GA GUI Access - Tabs, RFL [ORCL CPRS ACCESS]
   - MI Miscellaneous Parameters [OR PARAM ORDER MISC]
   - NO Notification Mgmt Menu ... [ORB NOT COORD MENU]
   - OC Order Checking Mgmt Menu ... [ORK ORDER CHK MGMT MENU]
   - MM Order Menu Management ... [ORCM MGMT]
   - LI Patient List Mgmt Menu ... [ORLP PATIENT LIST MGMT]
   - FP Print Formats [ORCL PRINT FORMAT]
   - PR Print/Report Parameters ... [OR PARAM PRINTS]
   - RE Release/Cancel Delayed Orders [ORC DELAYED ORDERS]
   - US Unsigned orders search [OR UNSIGNED ORDERS]
   - EX Set Unsigned Orders View on Exit [OR PARAM UNSIGNED ORDERS VIEW]
   - NA Search orders by Nature or Status [OR NATURE/STATUS ORDER SEARCH]
   - DO Event Delayed Orders Menu ... [OR DELAYED ORDERS]
   - PM Performance Monitor Report [OR PERFORMANCE MONITOR]

2. Select the Event Delayed Orders Menu by typing DO.

   The following menu will appear:

   - DO Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR]
   - EP Parameters for event delayed orders [OR EVENT PARAMETERS]
3. Select Parameters for event delayed orders by typing EP.

4. Select 2 to choose Default release event.

5. Choose how you would like to set the OREVNT DEFAULT parameter by typing one of the following at the Enter Selection prompt:

   1 – for user level
   2 – for class level
   3 – for team level
   4 – for location level
   5 – for service level
   6 – for division level

6. If you selected 1, the Select NEW PERSON NAME prompt will appear. If you selected 2, the Select USR CLASS NAME prompt will appear. If you selected 3, the Select OE/RR LIST NAME prompt will appear. If you selected 4, the Select HOSPITAL LOCATION NAME prompt will appear. If you selected 5, the Select SERVICE/SECTION prompt will appear. If you selected 6, the Select INSTITUTION NAME prompt will appear. Type the appropriate response.

   A list of available release events will appear.

<table>
<thead>
<tr>
<th>OREVNT DEFAULT may be set for the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 User USR [choose from NEW PERSON]</td>
</tr>
<tr>
<td>2 Class CLS [choose from USR CLASS]</td>
</tr>
<tr>
<td>3 Team (OE/RR) OTL [choose from OE/RR LIST]</td>
</tr>
<tr>
<td>4 Location LOC [choose from HOSPITAL LOCATION]</td>
</tr>
<tr>
<td>5 Service SRV [choose from SERVICE/SECTION]</td>
</tr>
<tr>
<td>6 Division DIV [choose from INSTITUTION]</td>
</tr>
</tbody>
</table>

The OREVNT DEFAULT parameter may be set at the user, class, team, location, service, or division level.

7. Type the number of the release event that you would like to set as the default.

   Enter selection: 2 Class USR CLASS

   Select USR CLASS NAME: INTERN PHYSICIAN

   No DEFAULT has been set yet.

   1) TRANSFER TO BLIND REHAB OBSERVATION (5000)
   2) ADMIT TO SURGERY (5000)
   3) POST OP (*INACTIVE*)

   Select default release event: (1-3): 1
In this example, the Transfer to Blind Rehab Observation (5000) release event is set as the default event for the Intern Physician user class.

NOTE: When a user is writing an event-delayed order, the default release event will appear only if it is context appropriate. For example, the default release event “Transfer to Medicine” will not appear if the current patient is an outpatient.

The default release event, Transfer to Blind Rehab Observation (5000) is highlighted on the Release Orders dialog box in the CPRS GUI.

The default release event, Transfer to Blind Rehab Observation (5000) is automatically selected in the List Manager version of CPRS.
Defining the Orders Menu for a Release Event

You can define which orders menu appears in the Write Orders pane (in the GUI) for a particular release event. You can do this by setting the ORWDX WRITE ORDERS EVENT LIST parameter.

The ORWDX WRITE ORDERS EVENT LIST parameter determines which orders menu appears in the Write Orders pane.

---

The ORWDX WRITE ORDERS EVENT LIST parameter determines which orders menu appears in the Write Orders pane.
To set the ORWDX WRITE ORDERS EVENT LIST parameter, follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].

   AL Allocate OE/RR Security Keys [ORCL KEY ALLOCATION]
   KK Check for Multiple Keys [ORE KEY CHECK]
   DC Edit DC Reasons [ORCL ORDER REASON]
   GP GUI Parameters ... [ORW PARAM GUI]
   GA GUI Access - Tabs, RPL [ORCL CPRS ACCESS]
   MI Miscellaneous Parameters [OR PARAM ORDER MISC]
   NO Notification Mgmt Menu ... [ORB NOT COORD MENU]
   OC Order Checking Mgmt Menu ... [ORK ORDER CHK MGMT MENU]
   MM Order Menu Management ... [ORCM MGMT]
   LI Patient List Mgmt Menu ... [ORLP PATIENT LIST MGMT]
   FP Print Formats [ORCL PRINT FORMAT]
   PR Print/Report Parameters ... [OR PARAM PRINTS]
   RE Release/Cancel Delayed Orders [ORC DELAYED ORDERS]
   US Unsigned orders search [OR UNSIGNED ORDERS]
   EX Set Unsigned Orders View on Exit [OR PARAM UNSIGNED ORDERS VIEW]
   NA Search orders by Nature or Status [OR NATURE/STATUS ORDER SEARCH]
   DO Event Delayed Orders Menu ... [OR DELAYED ORDERS]
   PM Performance Monitor Report [OR PERFORMANCE MONITOR]

2. Select the Event Delayed Orders Menu by typing DO.

   The following menu will appear:

   DO Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR]
   EP Parameters for event delayed orders [OR EVENT PARAMETERS]
   IN Inquire to OE/RR Patient Event File [OR PATINET EVENT INQUIRY]

3. Select Parameters for event delayed orders by typing EP.

4. Select Write orders list by event by typing 1.

5. Choose how you would like to edit the ORWDX WRITE ORDERS EVENT LIST parameter by typing one of the following at the Enter Selection prompt:

   2 – for user level
   4 – for location level
5 – for service level
7 – for division level
8 – for system level

6. If you selected 2, the Select NEW PERSON NAME prompt will appear. If you selected 4, the Select HOSPITAL LOCATION NAME prompt will appear. If you selected 5, the Select SERVICE/SECTION NAME prompt will appear. If you selected 7, the Select INSTITUTION NAME prompt will appear. Type the appropriate response. If you selected 8, skip to step 6.

7. At the Select Release Event prompt, type the name of the release event.


9. The release event you entered in step 6 will appear. Verify that this is the correct release event and press Return.

10. Type the name of the order dialog or the display text at the Value prompt.

11. Repeat steps 6-9 for additional release events. When you are finished, press Return at the Select Release Event prompt.

**Controlling who can Manually Release Orders**

The OREVNT MANUAL RELEASE CONTROL and OREVNT MANUAL RELEASE parameters determine who can manually release an event-delayed order.

The OREVNT MANUAL RELEASE CONTROL parameter determines if the permission to manually release an event-delayed order is granted by:

- the ORES and ORELSE keys (keys only).
- the OREVNT MANUAL RELEASE parameter (manual release parameter only).-or-
- the ORES and ORELSE keys and the OREVNT MANUAL RELEASE parameter (both keys and parameter).

The OREVNT MANUAL RELEASE parameter must also be set if the OREVNT MANUAL RELEASE CONTROL parameter is set to “manual release parameter only” or to “both keys and parameter.”

To set the OREVENT MANUAL RELEASE CONTROL parameter, follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].
2. Select the Event Delayed Orders Menu by typing DO.
   The following menu will appear:

   | DO Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR] |
   | EP Parameters for event delayed orders [OR EVENT PARAMETERS] |
   | IN Inquire to OE/RR Patient Event File [OR PATINET EVENT INQUIRY] |

3. Select Parameters for event delayed orders by typing EP.
   The following menu will appear:

   Select one of the following:
   1. Write orders list by event
   2. Default release event
   3. Default release event list
   4. Manual release controlled by
   5. Set manual release parameter

4. Type 4 to select Manual release controlled by.

5. Choose how you would like to set the OREVNT MANUAL RELEASE CONTROL parameter by typing one of the following at the Enter Selection prompt:
   1 – for division level
   2 – for system level

6. If you selected 1, the Select INSTITUTION NAME prompt will appear. Type the appropriate response. If you selected 2, skip to step 6.

7. At the Manual release controlled by prompt, type one of the following responses:
• **K (for Keys Only)** Use this setting if you would like only users who are assigned the ORES and ORELSE key to manually release event-delayed orders. This is the default setting and the setting that CPRS used prior to the release of patch OR*3.0*141.

• **P (Manual Release Parameter Only)** Use this setting if you want the OREVTN MANUAL RELEASE parameter (discussed below) to control who can manually release an event-delayed order.

• **B (Both Keys and Parameter)** If you choose this option, CPRS will first check to see if the user has the ORES or ORELSE key. If they do, they will be allowed to manually release an event-delayed order. If the user does not have the ORES or ORELSE key, CPRS will then check the OREVTN MANUAL RELEASE parameter to see if they should be allowed to manually release the order.

**NOTE:** If you select P or B, you will also need to set the OREVTN MANUAL RELEASE parameter by following the instructions below in the Setting the Manual Release Parameter (OREVTN MANUAL RELEASE) section.
Setting the Manual Release Parameter (OREVNT MANUAL RELEASE)

NOTE: If the OREVNT MANUAL RELEASE CONTROL parameter is set to either P or B, users will be unable to manually release event-delayed orders until the OREVNT MANUAL RELEASE parameter is set. (It is distributed with the system level set to NO).

To set the OREVNT MANUAL RELEASE parameter, follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].

2. Select the Event Delayed Orders Menu by typing DO.

The following menu will appear:

2. Select the Event Delayed Orders Menu by typing **DO**.

The following menu will appear:

- **DO Delayed Orders/Auto-DC Set-up** [OR DELAYED ORDERS EDITOR]
- **EP Parameters for event delayed orders** [OR EVENT PARAMETERS]
3. Select Parameters for event delayed orders by typing EP.

The following menu will appear:

Select one of the following:

1. Write orders list by event
2. Default release event
3. Default release event list
4. Manual release controlled by
5. Set manual release parameter

4. Type 5 to select Set manual release parameter.

5. Choose how you would like to edit the manual release parameter (OREVNT MANUAL RELEASE) by typing one of the following at the Enter Selection prompt:
   - 1 – for user level
   - 2 – for class level
   - 3 – for team level
   - 4 – for location level
   - 5 – for service level
   - 6 – for division level
   - 7 – for system level

6. If you selected 1, the Select NEW PERSON NAME prompt will appear. If you selected 2, the Select USR CLASS NAME prompt will appear. If you selected 3, the Select OE/RR LIST NAME prompt will appear. If you selected 4, the Select HOSPITAL LOCATION NAME prompt will appear. If you selected 5, the Select SERVICE/SECTION NAME prompt will appear. If you selected 6, the Select INSTITUTION NAME prompt will appear. If you selected 7, skip to step 6.

7. At the Allow manual release prompt, type Y (yes) to allow users to manually release event-delayed orders or type N (no) to prevent users from manually releasing event-delayed orders.
Excluding Display Groups from the *Copy Active Orders* Dialog Box

The OREVTN EXCLUDE DGRP parameter allows you to prevent orders that belong to certain display groups from appearing on the *Copy Active Orders* dialog box.

To set the OREVTN EXCLUDE DGRP parameter, follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].

   AL Allocate OE/RR Security Keys [ORCL KEY ALLOCATION]
   KK Check for Multiple Keys [ORE KEY CHECK]
   DC Edit DC Reasons [ORCL ORDER REASON]
   GP GUI Parameters ... [ORW PARAM GUI]
   GA GUI Access - Tabs, RPL [ORCL CPRS ACCESS]
   MI Miscellaneous Parameters [OR PARAM ORDER MISC]
   NO Notification Mgmt Menu ... [ORB NOT COORD MENU]
   OC Order Checking Mgmt Menu ... [ORK ORDER CHK MGMT MENU]
   MM Order Menu Management ... [ORCM MGMT]
   LI Patient List Mgmt Menu ... [ORLP PATIENT LIST MGMT]
   FP Print Formats [ORCL PRINT FORMAT]
   PR Print/Report Parameters ... [OR PARAM PRINTS]
   RE Release/Cancel Delayed Orders [ORC DELAYED ORDERS]
   US Unsigned orders search [OR UNSIGNED ORDERS]
   EX Set Unsigned Orders View on Exit [OR PARAM UNSIGNED ORDERS VIEW]
   NA Search orders by Nature or Status [OR NATURE/STATUS ORDER SEARCH]
   DO Event Delayed Orders Menu ... [OR DELAYED ORDERS]
   PM Performance Monitor Report [OR PERFORMANCE MONITOR]

2. Select the Event Delayed Orders Menu by typing **DO**.

   The following menu will appear:

   DO Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR]
   EP Parameters for event delayed orders [OR EVENT PARAMETERS]
   IN Inquire to OE/RR Patient Event File [OR PATINET EVENT INQUIRY]
3. Select Parameters for event delayed orders by typing EP.

The following menu will appear:

<table>
<thead>
<tr>
<th>Number</th>
<th>Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Write orders list by event</td>
</tr>
<tr>
<td>2</td>
<td>Default release event</td>
</tr>
<tr>
<td>3</td>
<td>Default release event list</td>
</tr>
<tr>
<td>4</td>
<td>Manual release controlled by</td>
</tr>
<tr>
<td>5</td>
<td>Set manual release parameter</td>
</tr>
<tr>
<td>6</td>
<td>Exclude display groups from copy</td>
</tr>
</tbody>
</table>

4. Type 6 to select Exclude display groups from copy.

5. Choose how you would like to edit the OREVNT EXCLUDE RELEASE parameter by typing one of the following at the Enter Selection prompt:

- 1 – for division level
- 2 – for system level

6. If you selected 1, the Select INSTITUTION NAME prompt will appear. Enter the name for the institution. If you selected 2, continue to step 6.

7. At the Select Entry Number prompt, type a number for the entry. The number you enter is simply a placeholder.

8. If necessary, type Y or Yes at the Are you adding [number] as a new Entry Number? prompt.


10. Select the display group that you wish to exclude from the Copy Active Orders dialog.
Changing the Display

The change display function allows you to adjust the size of the Delayed Orders / Auto-DC Set-up editor and configure the display to show active entries, inactive entries, or all entries.

To change the size or content of the display, follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].

2. Select the Event Delayed Orders Menu by typing **DO**.
   The following menu will appear:

   **DO** Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR]

   **EP** Parameters for event delayed orders [OR EVENT PARAMETERS]

   **IN** Inquire to OE/RR Patient Event File [OR PATINET EVENT INQUIRY]

3. Select Delayed Orders/Auto-DC Set-up by typing **DO**.
4. Select either Auto-DC rules or Release Events by typing either 1 or 2.
5. Select Change display by typing CD.
6. Type Y or N at the Do you want to truncate/expand this display? Prompt.
7. Type Y or N at the Terminal emulator in 80-column mode? prompt.
8. At the Select which entries should appear on the list prompt type one of the following numbers:
   - 1 for active entries only
   - 2 for inactive entries only
   - 3 for all entries
The orders that you specified will be displayed.

Files Associated with Release Events

**OE/RR RELEASE EVENTS (#100.5)**

This file contains the locally-defined events that can release delayed orders within each division. It is strongly recommended that this file not be edited with File Manager. Instead, CACs should use the event-delayed orders menu [OR DELAYED ORDERS]

**Fields in OE/RR RELEASE EVENTS (#100.5)**

<table>
<thead>
<tr>
<th>Field Number</th>
<th>Field Name</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>.1</td>
<td>SHORT NAME</td>
<td>This field contains a shorter version of the Display Text field. The Short Name is used to display and group delayed orders on the Orders tab when space is limited.</td>
</tr>
<tr>
<td>1</td>
<td>INACTIVATED</td>
<td>This field contains the date and time that this release event will become inactive. Once this date/time has passed, you will no longer be able to delay new orders to this release event. However, any event-delayed orders that are already associated with this release event will still be released when the event occurs.</td>
</tr>
<tr>
<td>,1.5</td>
<td>ACTIVATION HISTORY</td>
<td></td>
</tr>
<tr>
<td>100.52 , .01</td>
<td>ACTIVATION DATE/TIME</td>
<td>The date/time that this event was activated.</td>
</tr>
<tr>
<td>100.52 ,1</td>
<td>INACTIVATION DATE/TIME</td>
<td>The date/time that this event was inactivated.</td>
</tr>
<tr>
<td>2</td>
<td>TYPE OF EVENT</td>
<td>This is the event that should cause delayed orders to be released to the service(s) for action. For OR events, the orders will be released when the TIME PAT IN OR field is entered in the Surgery package. Orders delayed for Manual Release will not be automatically released by CPRS at all and can only be released via the &quot;Release to Service&quot; action by a user who is authorized to do so. Authorization is controlled by the parameter OREVNT MANUAL RELEASE CONTROL, which lets sites choose whether release is...</td>
</tr>
</tbody>
</table>
controlled by keys or by the parameter OREVNT MANUAL RELEASE or both.

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>DIVISION</td>
<td>This is the division that this event will apply to. For transfers across divisions, this field should be the new division that the patient is going to.</td>
</tr>
<tr>
<td>4</td>
<td>EVENT ORDER DIALOG</td>
<td>This field contains the name of the dialog that will appear when you are writing a generic event-delayed order that requests this release event. If such an order is not necessary for this event, leave this field empty. Unlike other delayed orders, the order created by this dialog will become active right away when signed and be visible on the Active Orders view as well as with the delayed orders on the Orders tab.</td>
</tr>
<tr>
<td>5</td>
<td>ORDER SET/MENU</td>
<td>This is a menu or order set containing items that are either necessary or commonly ordered when this event occurs. The menu or order specified in this field will be invoked when first placing delayed orders for this event. If an EVENT ORDER DIALOG was defined for this event, this order set/menu will be presented to the user immediately following that dialog. This field may be any type of order dialog except prompt types. Note: Order sets listed in this field should be part of an order menu.</td>
</tr>
<tr>
<td>6</td>
<td>LAPSE IN #DAYS</td>
<td>Patient events are evaluated whenever delayed orders are acted upon or viewed. If the number of days specified in this field have passed since delayed orders were entered for this event and for this patient, then the status of all orders delayed for this event will be changed to &quot;lapsed&quot; and the patient event itself will be terminated. The orders can no longer be released to the service.</td>
</tr>
<tr>
<td>7</td>
<td>MAS MOVEMENT TYPE</td>
<td>This is an MAS Movement Type that can further define this event. This field is optional, but if it is defined then it must match the patient's movement data to satisfy the event and cause any delayed orders to be released. For example, to have delayed orders released when a patient returns from pass, enter the movement type of AUTH ABSENCE 96 HOURS OR LESS, or leave this field empty to have the transfer event defined by other criteria such as treating specialty or ward location.</td>
</tr>
<tr>
<td>8</td>
<td>DISPLAY TEXT</td>
<td>This field is the name of the event as it will appear to the user in CPRS.</td>
</tr>
<tr>
<td>9</td>
<td>ORDERING PARAMETERS LOCATION</td>
<td>Many order dialogs use parameters that depend on location. The location specified in the Ordering Parameters Location field is used as the default location for retrieving those parameter values when delaying orders to this event. The patient's actual location will be saved with the order at the time of its release.</td>
</tr>
<tr>
<td>10</td>
<td>INCLUDED TREATING SPECIALTIES</td>
<td>The treating specialties in this field are the treating specialties that can satisfy this event. If the patient's new specialty matches a specialty in this field, then orders delayed for this event may be released.</td>
</tr>
<tr>
<td>100.51,.01</td>
<td>INCLUDED TREATING SPECIALTIES</td>
<td>This is a treating specialty that can satisfy this event. If the treating specialty is defined, then the patient's new specialty must match one in this list in order for any delayed orders to be released. A</td>
</tr>
</tbody>
</table>
specialty may only be included in one active release event at a time.
If locations are also defined for this event then both the treating specialty and the location must match for orders to be released.

11  INCLUDED LOCATIONS These are ward locations that can satisfy this event. If the patient's new location matches a location in this list, then orders delayed for this event may be released.

100.511,.01  INCLUDED LOCATIONS This is a ward location that can satisfy this event. If defined, then the patient's new location must match a location in this list for any delayed orders to be released.
A location may only be included in one active release event at a time. If this event also has treating specialties defined, then both the location and the treating specialty must match for orders to be released.

12  EDIT HISTORY This field tracks when an event was added. It also tracks when the edit options were used on this event.

100.512,.01  EDIT HISTORY This field identifies the person who entered or edited the release event.

13  COPY ACTIVE ORDERS This field determines whether or not the user is presented with a list of patient's active orders, which may be copied to the new release event.
If this field is set to no then the user will not see the patient's active orders and will not be allowed to copy any current orders.
If this field is set to yes then the user will see the patient's active orders and may select orders to copy to the release event.
The list of active orders will be presented to the user after the ORDER DIALOG for the release event is processed (if it exists) and before the ORDER SET/MENU for the release event is processed (if it exists).
33. Appendix G: Automatically Discontinuing Orders (Auto-DC Rules)

A CAC can set up rules that will automatically discontinue an order when a specific event occurs. These rules are known as auto-DC rules. For example, a CAC can set up an auto-DC rule named “Transfer to Medicine Treating Specialty” that automatically discontinues all lab, pharmacy, and diet orders when a patient is transferred to a medicine treating specialty. Although the auto-DC rule will discontinue lab, pharmacy, and diet orders, all other orders will remain active. A number of variables can be used in auto-DC rules, including specific divisions, orderable items, locations, and MAS movement types.

Prior to the release of OR*3*142 and OR*3*141, you could not specify which orders would be automatically discontinued when the specified event occurred. Instead, all of the orders would be discontinued.

 NOTE: OR*3.0*142 changes the way auto-DC rules are created and processed. After OR*3.0*142 is installed, existing auto-DC parameters will be converted into entries in the OE/RR Auto-DC Rules file (#100.6). The entries in the OE/RR Auto-DC Rules are for your division. Multidivisional sites will need to make copies of these rules for the other divisions in the system.

Creating a New Auto-DC Rule

 NOTE: Auto-DC rules are stored in the OE/RR AUTO-DC RULES file (#100.6)

To create a new auto-DC rule, follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].

   AL Allocate OE/RR Security Keys [ORCL KEY ALLOCATION]
   KK Check for Multiple Keys [ORE KEY CHECK]
   DC Edit DC Reasons [ORCL ORDER REASON]
   GP GUI Parameters … [ORW PARAM GUI]
   GA GUI Access - Tabs, RPL [ORCL CPRS ACCESS]
   MI Miscellaneous Parameters [OR PARAM ORDER MISC]
   NO Notification Mgmt Menu … [ORB NOT COORD MENU]
   OC Order Checking Mgmt Menu … [ORK ORDER CHK MGMT MENU]
   MM Order Menu Management … [ORCM MGMT]
   LI Patient List Mgmt Menu … [ORLP PATIENT LIST MGMT]
   FP Print Formats [ORCL PRINT FORMAT]
   PR Print/Report Parameters … [OR PARAM PRINTS]
   RE Release/Cancel Delayed Orders [ORC DELAYED ORDERS]
2. Select the Event Delayed Orders Menu by typing **DO**.

The following menu will appear:

- **DO** Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR]
- EP Parameters for event delayed orders [OR EVENT PARAMETERS]
- IN Inquire to OE/RR Patient Event File [OR PATINET EVENT INQUIRY]

3. Select Delayed Orders/Auto-DC Set-up by typing **DO**.

4. Type **1**.

   The existing auto-DC rules will appear.

5. Select Add/Edit by typing **AE**.

6. Press **Return** at the Select item(s) prompt.

7. Type a name for the new rule at the Select OE/RR AUTO-DC RULES NAME prompt.

   ✷ **NOTE:** The name should uniquely identify the rule. This is especially important at multidivisional sites.

8. Type Y or Yes at the Are you adding [rule name] as a new OE/RR AUTO-DC RULES? prompt.

9. Enter one of the following letters at the OE/RR AUTO-DC RULES TYPE OF EVENT prompt:

   - **A** for an admission event.
   - **T** for a transfer event.
   - **D** for a discharge event.
   - **S** for a specialty transfer event.
   - **O** for an O.R. event.

   **NOTE:** Patch SR*3.0*110 is required to create O.R. rules.

10. Enter the division that this auto-dc rule will apply to at the OE/RR AUTO-DC RULES DIVISION prompt.

    For admission rules, enter the admitting location.
    For discharge rules, enter the location the patient will be discharged from.
    For O.R. rules, enter the location where the patient will have the procedure.

11. For transfer and specialty transfer events the division reflects the receiving location.

12. Enter Y or N at the Do you want to copy from an existing entry? prompt.

13. You will be prompted to enter additional required information. Once you have entered all the required information, the You have now entered the required fields and may ^ to exit prompt will appear. If you do not wish to further define this auto-DC rule, type ^ to exit. If you would like to
enter additional information, please refer to the Explanation of Auto-DC Rules Prompts (fields in the OE/RR AUTO-DC RULES file #100.6) topic below.

☞ NOTE: You can also create a new auto-DC rule from the detailed display screen.

☞ NOTE: New auto-DC rules are inactive by default and must be activated by following the steps in Activating/Inactivating an Auto-DC rule before they are used.
Explanation of Auto-DC Rules Prompts (fields in the OE/RR AUTO-DC RULES FILE #100.6)

The list below explains the additional prompts (fields) that you may encounter when entering a new auto-DC rule:

*Display Text* – The name of the auto-DC rule as it will appear to CPRS users.

*Division* – The division that the auto-DC rule will apply to.

- For admission rules, the division reflects the admitting location.
- For discharge rules, the division reflects the location the patient is discharged from.
- For O.R. rules, the division reflects the location where the patient is having the procedure.
- For transfer and specialty transfer events, the division reflects the receiving location.

*DC Reason* – The reason that this auto-DC rule will discontinue an order.

*Excluded Display Groups* – The groups of orders (often subsets of the included packages) that are exceptions to this rule (should not cause the order to be discontinued).

*Excluded Treating Specialties* – The specific sending and receiving specialties that are exceptions to the rule (should not cause an order to be discontinued). This prompt (field) is specific to specialty transfer events.

*Except for Orderable Item* – An orderable item that is an exception to the rule (should not cause an order to be discontinued).

*Except from Observation* – The field indicates whether a patient leaving an observation treating specialty should be an exception to this rule. This field is only used in discharge rules.

This field can be set in the following ways:

- Yes – if you set the field to yes, a discharge from an observation treating specialty will always be an exception to this rule (should not cause an order to be discontinued).
- No – if you set this field to no, this rule will be applied regardless of whether the patient is discharged from an observation treating specialty.
- If Readmitting – If you set this field to If Readmitting, the user will be prompted to enter whether the patient will be immediately readmitted. If the user answers yes, the order will not be automatically discontinued. If the user answers no, the rule will be applied.

*Inactivated* – After the date/time listed in this field, the rule will no longer be applied.

*Included Divisions* – For multidivisional sites, the specific sending divisions that are included in this rule.
Included Locations – The specific sending and receiving wards that the auto-DC rule will apply to. This prompt (field) is only used with transfer events (no specialty change).

MAS Movement Type – The MAS movement type that will trigger the auto-DC rule.

- For a specialty transfer rule, the only movement type allowed is “Provider Specialty Change”. However, any transfer that includes a specialty change will trigger this rule, even if another movement type is entered.

Type of Event – The type of event that will trigger the auto-DC rule. The value of this field can be A (admission event), T (transfer event), D (discharge event), S (specialty transfer event), or O (O. R event).

Type of Orders to DC – Orders generated by the VistA package specified in this field will be discontinued.

Sample Rules

Sample Admission Rule

A sample admission rule
Sample Discharge Rule

The *Except from observation* field is specific to discharge auto-DC rules.

Sample Discharge/Death Rule

You can enter death and death with autopsy movement types for discharge/death rules.
Sample Specialty Change Rule

- **Name:** SPECIALTY CHANGE
- **Type of event:** SPECIALTY TRANSFER
- **Division:** REGION 5
- **Doc reason:** Treating Specialty Change
- **Display text:** SPECIALTY CHANGE

**Movement Types:**
- PROVIDER/SPECIALTY CHANGE

**Included Packages:**
- LAB SERVICE
- ORDER ENTRY RESULTS REPORTING
- INPATIENT MEDICATIONS

**Excluding From Treating Specialties:**
- MEDICAL OBSERVATION

**To Treating Specialties:**
- MEDICINE

**Activation History:**
- Activated: May 06, 2002@11:40
- Inactivated: Enter ?? for more actions
- Select Item(s): Next Screen/

A Specialty change rule

Sample Transfer Rule: On PASS

**Movement Types:**
- AUTH ABSENCE 96 HOURS OR LESS
- AUTHORIZED ABSENCE
- UNAUTHORIZED ABSENCE

**Activation History:**
- Activated: May 19, 2002@16:08
- Inactivated: Add/Edit History:
  - Added on May 06, 2002@11:40 by CPRS PROVIDER, TEN

**Select Item(s):** Quit/

Note the movement types and the lack of included locations or divisions. Also notice the activation and add/edit histories.
Sample Transfer Rule: ASIH

A sample ASIH transfer rule

Sample O.R. Rule

A sample OR rule
Activating/Inactivating an Auto-DC Rule

To activate/inactivate an auto-DC rule, follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].

2. Select the Event Delayed Orders Menu by typing **DO**.

   The following menu will appear:

   **DO** Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR]
   EP Parameters for event delayed orders [OR EVENT PARAMETERS]
   **IN** Inquire to OE/RR Patient Event File [OR PATINET EVENT INQUIRY]

3. Select Delayed Orders/Auto-DC Set-up by typing **DO**.

4. Type **1** to select Auto-DC Rules

   The available auto-DC rules will appear in a numbered list.
5. Select Activate/Inactivate by typing AI.
6. Type the number of the rule you would like to activate/inactivate at the Select item(s) prompt.
7. The computer will display a message asking you if you are sure you want to activate/inactivate this auto-DC rule. Type the appropriate response.

◆ NOTE: You can also activate/inactivate an auto-DC rule from the detailed display screen.

**Editing an Auto-DC Rule**

To edit an auto-DC rule, follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].

   | AL Allocate OE/RR Security Keys [ORCL KEY ALLOCATION] |
   | KK Check for Multiple Keys [ORE KEY CHECK] |
   | DC Edit DC Reasons [ORCL ORDER REASON] |
   | GP GUI Parameters ... [ORW PARAM GUI] |
   | GA GUI Access - Tabs, RPL [ORCL CPRS ACCESS] |
   | MI Miscellaneous Parameters [OR PARAM ORDER MISC] |
   | NO Notification Mgmt Menu ... [ORB NOT COORD MENU] |
   | OC Order Checking Mgmt Menu ... [ORK ORDER CHK MGMT MENU] |
   | MM Order Menu Management ... [ORCM MGMT] |
   | LI Patient List Mgmt Menu ... [ORLP PATIENT LIST MGMT] |
   | FP Print Formats [ORCL PRINT FORMAT] |
   | PR Print/Report Parameters ... [OR PARAM PRINTS] |
   | RE Release/Cancel Delayed Orders [ORC DELAYED ORDERS] |
   | US Unsigned orders search [OR UNSIGNED ORDERS] |
   | EX Set Unsigned Orders View on Exit [OR PARAM UNSIGNED ORDERS VIEW] |
   | NA Search orders by Nature or Status [OR NATURE/STATUS ORDER SEARCH] |
   | DO Event Delayed Orders Menu ... [OR DELAYED ORDERS] |
   | PM Performance Monitor Report [OR PERFORMANCE MONITOR] |

2. Select the Event Delayed Orders Menu by typing DO.

   The following menu will appear:

   | DO Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR] |
   | EP Parameters for event delayed orders [OR EVENT PARAMETERS] |
3. Select Delayed Orders/Auto-DC Set-up by typing DO.

4. Type 1 to select Auto-DC Rules
   The available auto-DC rules will appear in a numbered list.

5. Select Add/Edit by typing AE.

6. Type the number of the rule that you wish to edit at the Select item(s) prompt.

7. The content of each of the rule’s fields will be displayed. You can either change the contents of the field, or press Return to advance to the next field. Press ^ to exit.

☞ NOTE: You can also add or release an existing auto-DC rule from the detailed display screen.
Viewing Details of an Auto-DC Rule

To view details of an auto-DC rule, follow these steps:

1. From the CPRS Configuration (Clin Coord) menu, select the Event Delayed Orders Menu by typing **DO**
   The following menu will appear:

<table>
<thead>
<tr>
<th>DO</th>
<th>Delayed Orders/Auto-DC Set-up</th>
</tr>
</thead>
<tbody>
<tr>
<td>EP</td>
<td>Parameters for event delayed orders</td>
</tr>
<tr>
<td>IN</td>
<td>Inquire to OE/RR Patient Event File</td>
</tr>
</tbody>
</table>

2. Select Delayed Orders/Auto-DC Set-up by typing **DO**.
3. Select Auto-DC Rules by typing **1**.
   A numbered list of the current auto-DC rules will appear.
4. Choose Detailed Display by typing **DD**.
5. Enter the number of the rule you wish to view at the Select item(s) prompt.
   A detailed display of the event or rule will appear.
The detailed display screen

Audit and Activation History

The audit and activation histories on the detailed display can be toggled on or off depending on your preferences.

To toggle the audit and activation histories on or off, follow these steps:
1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].

2. Select the Event Delayed Orders Menu by typing DO.
   The following menu will appear:

   DO Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR]
   EP Parameters for event delayed orders [OR EVENT PARAMETERS]
   IN Inquire to OE/RR Patient Event File [OR PATINET EVENT INQUIRY]

3. Select Delayed Orders/Auto-DC Set-up by typing DO.
The following menu will appear:

```
Select one of the following:
1. Auto-DC Rules
2. Release Events

Enter response:
```

4. Type 1 to select Auto-DC Rules or 2 to select Release Events.
5. Type DD to select Detailed Display.
6. At the Select item(s) prompt, type the number of the release event or auto-DC rule that you would like to display.

A detailed display of the release event or auto-DC rule will appear.
7. Type H to select Add/Remove Histories
8. At the Do you want to include them on the detailed display? prompt, type Y to include the audit and activation histories on the detailed display. Type N if you do not wish to display the audit and activation histories.

The audit and activation history can be toggled on or off on the detailed display screen.
Changing the Display

The change display function allows you to adjust the size of the Delayed Orders / Auto-DC Set-up editor and configure the display to show active entries, inactive entries, or all entries.

To change the size or content of the display, follow these steps:

1. Open the CPRS Configuration (Clin Coord) menu [OR PARAM COORDINATOR MENU].

2. Select the Event Delayed Orders Menu by typing **DO**.

   The following menu will appear:

   - **DO** Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR]
   - **EP** Parameters for event delayed orders [OR EVENT PARAMETERS]
   - **IN** Inquire to OE/RR Patient Event File [OR PATINET EVENT INQUIRY]

41. Select Delayed Orders/Auto-DC Set-up by typing **DO**.

   The following menu will appear:
DO Delayed Orders/Auto-DC Set-up [OR DELAYED ORDERS EDITOR]

EP Parameters for event delayed orders [OR EVENT PARAMETERS]

IN Inquire to OE/RR Patient Event File [OR PATINET EVENT INQUIRY]

3. Select Delayed Orders/Auto-DC Set-up by typing **DO**.
4. Select either Auto-DC Rules or Release Events by typing either **1** or **2**.
5. Select Change display by typing **CD**.
6. Type **Y** or **N** at the Do you want to truncate/expand this display? prompt.
7. Type **Y** or **N** at the Terminal emulator in 80-column mode? prompt.
8. At the Select which entries should appear on the list prompt, type one of the following numbers:
   1 - for active entries only
   2 - for inactive entries only
   3 - for all entries

The orders that you specified will be displayed.

**Files Associated with Auto-DC Rules**

**OE/RR AUTO-DC RULES (#100.6)**

This file contains the locally-defined rules that control if and when active orders are automatically discontinued within each division. It is strongly recommended that CACs use the event-delayed orders menu [OR DELAYED ORDERS] to edit this file rather than using File Manager.

**Fields in OE/RR AUTO-DC RULES (#100.6)**

<table>
<thead>
<tr>
<th>Field Number</th>
<th>Field Name</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>.01</td>
<td>NAME</td>
<td>This is the name of the auto-DC rule. It is visible in the Rule Editor only.</td>
</tr>
<tr>
<td>.1</td>
<td>INACTIVATED</td>
<td>This rule will no longer apply after the date listed in this field.</td>
</tr>
<tr>
<td>1.5</td>
<td>ACTIVATION HISTORY</td>
<td></td>
</tr>
<tr>
<td>100.61,.01</td>
<td>ACTIVATION DATE/TIME</td>
<td>The date/time that this event was activated.</td>
</tr>
<tr>
<td>100.61,1</td>
<td>INACTIVATION DATE/TIME</td>
<td>This date/time that this event was inactivated.</td>
</tr>
<tr>
<td>.2</td>
<td>TYPE OF EVENT</td>
<td>This is the event that should cause orders to be automatically discontinued. For OR events, the orders will be discontinued when the TIME PAT IN OR field is entered in the Surgery package.</td>
</tr>
<tr>
<td>.3</td>
<td>DIVISION</td>
<td>This is the division that this auto-dc rule should be applied to. For a transfer across divisions, this field should contain the division that the patient is going to.</td>
</tr>
<tr>
<td>.4</td>
<td>DC REASON</td>
<td>This field contains the reason the order was automatically discontinued.</td>
</tr>
<tr>
<td>.5</td>
<td>DISPLAY TEXT</td>
<td>This field contains the name of the rule as it will appear to CPRS users.</td>
</tr>
<tr>
<td>.6</td>
<td>EXCEPT FROM OBSERVATION</td>
<td>This field indicates if an observation treating specialty should prevent this rule from being applied when the patient is discharged from the observation treating specialty. If the field is set to YES then any discharge from an observation treating specialty will not auto-dc orders. If the field is set to NO then any discharge from an observation treating specialty will auto-dc orders. If this field is set to if readmitting then the person entering the discharge movement will be asked whether or not the patient will be readmitted immediately following this discharge (if the CPRS protocol is the no-task one). The appropriate action will be taken based on his or her answer.</td>
</tr>
<tr>
<td>.30</td>
<td>MAS MOVEMENT TYPES</td>
<td>When the MAS movement types defined in this field occur, this rule will be processed (if it is active).</td>
</tr>
<tr>
<td>100.63, .01</td>
<td>MAS MOVEMENT TYPE</td>
<td>The MAS Movement Type field further defines the trigger event for this rule. This allows for different rules for various types of MAS events. For example, to define a rule for canceling orders when a patient dies, enter the movement types DEATH and DEATH WITH AUTOPSY. A MAS movement type may only be used in one active rule.</td>
</tr>
<tr>
<td>40</td>
<td>EXCLUDED TREATING SPECIALTIES</td>
<td>These are treating specialties that will cause this rule to not be processed if the EXCEPT FROM and TO specialties match the patient's transfer.</td>
</tr>
<tr>
<td>100.64, .01</td>
<td>EXCEPT FROM SPECIALTY</td>
<td>This is a treating specialty that will prevent this rule from being applied. Specialty transfer rules will discontinue active orders unless the patient is being transferred from this specialty to one listed in the TO SPECIALTY multiple.</td>
</tr>
<tr>
<td>100.64,1</td>
<td>TO SPECIALTY</td>
<td>These are treating specialties that will cause this rule to not be processed, if the EXCEPT FROM and TO specialties match the patient's transfer.</td>
</tr>
<tr>
<td>100.641, .01</td>
<td>TO SPECIALTY</td>
<td>This is a treating specialty that will prevent this rule from being applied; specialty transfer rules will discontinue active orders unless the patient is being transferred to this specialty from the EXCEPT FROM SPECIALTY.</td>
</tr>
<tr>
<td>50</td>
<td>INCLUDED LOCATIONS</td>
<td>Enter an ID (free text) that will represent an entry in the FROM - TO location matrix. The value of the ID field is insignificant as it simply represents a placeholder. You can use any naming or numbering convention that you want. Orders will not auto-dc for location (ward) type transfers unless the transfer from and transfer to locations are identified within the INCLUDED LOCATIONS from - to entries. If the transfer from and to locations are found in this multiple then orders will auto-dc.</td>
</tr>
<tr>
<td>100.62,.01</td>
<td>INCLUDED LOCATIONS ID</td>
<td>If you did not select YES for the FROM ALL LOCATIONS field then you must select an individual field for the patient to be coming from.</td>
</tr>
<tr>
<td>100.62,3</td>
<td>TO ALL LOCATIONS</td>
<td>If this field is set to yes, it identifies all locations as possible “to” locations for the from-to pair.</td>
</tr>
<tr>
<td>100.62,4</td>
<td>TO LOCATION</td>
<td>If you did not select YES for the TO ALL LOCATIONS field then you must select an individual field for the patient to be going to.</td>
</tr>
<tr>
<td>60</td>
<td>INCLUDED DIVISIONS</td>
<td>If the division the patient was transferred from matches a value in this field, and the division has changed, the rule will be processed.</td>
</tr>
<tr>
<td>100.66, 01</td>
<td>FROM DIVISION</td>
<td>This is a division that will cause this rule to be applied. If a specialty change did not occur with the transfer, and the division has changed, then the patient must be moving from the division specified in this field in order for active orders to be discontinued.</td>
</tr>
<tr>
<td>70</td>
<td>INCLUDED PACKAGES</td>
<td>Orders associated with the packages specified in this field will be automatically discontinued when this rule is processed.</td>
</tr>
<tr>
<td>100.67,.01</td>
<td>TYPE OF ORDERS TO DC</td>
<td>This is a package whose active orders are to be automatically discontinued when the conditions of this rule are satisfied.</td>
</tr>
<tr>
<td>80</td>
<td>EXCLUDED ORDERABLE ITEMS</td>
<td>These are the orderable items that will not be automatically discontinued when this rule is processed.</td>
</tr>
<tr>
<td>100.68,.01</td>
<td>EXCEPT FOR ORDERABLE ITEM</td>
<td>The orderable items specified in this field are the orderable items that will not be automatically discontinued when this rule is processed.</td>
</tr>
<tr>
<td>81</td>
<td>EDIT HISTORY</td>
<td>This field tracks the entering and editing of rules.</td>
</tr>
<tr>
<td>100.681,.01</td>
<td>EDIT HISTORY</td>
<td>Name of person who added or edited this rule</td>
</tr>
<tr>
<td>100.681,1</td>
<td>WHO ENTERED/EDITED</td>
<td>This field contains what action was taken on the rule</td>
</tr>
<tr>
<td>100</td>
<td>EXCLUDED DISPLAY GROUP</td>
<td>Any order related to the display group entered in the EXCLUDED DISPLAY GROUP multiple will be exempt from any auto-discontinuing normally triggered by this rule. You can use the excluded display group to protect a group of orders from being auto-discontinued. If an order belonging to this display group is found while processing this rule, it will be skipped and will not be auto-discontinued.</td>
</tr>
<tr>
<td>100.65,.01</td>
<td>EXCEPT ORDERS IN DISPLAY GROUP</td>
<td>Orders related to this display group will not be auto-discontinued</td>
</tr>
</tbody>
</table>
OE/RR PATIENT EVENTS (#100.2)

This file is used by CPRS to track what happened to a patient's orders as a result of an event, such as an MAS movement or returning from the OR.

Fields in OE/RR PATIENT EVENTS FILE (#100.2)

<table>
<thead>
<tr>
<th>Field Number</th>
<th>Field Name</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>.01</td>
<td>Patient</td>
<td>This is a pointer to the patient file</td>
</tr>
<tr>
<td>.1</td>
<td>Activity</td>
<td>This multiple contains a log of actions taken on this event that are relevant to the release or discontinuance of orders.</td>
</tr>
<tr>
<td>100.25.01</td>
<td>Date/Time of Activity</td>
<td>This is the actual date and time that activity occurred.</td>
</tr>
<tr>
<td>100.25.2</td>
<td>Type of Event Activity</td>
<td>This field is a code indicating the type of activity that occurred. This may be new, edited, re-entered, manually released, deleted, or cancelled. An event may also be &quot;lapsed&quot; if it stays unprocessed beyond the time frame defined by the &quot;Lapse in #Days&quot; field of the OE/RR RELEASE EVENTS file #100.5 for this event.</td>
</tr>
<tr>
<td>100.25.3</td>
<td>User</td>
<td>This field is the user who entered or modified the activity.</td>
</tr>
<tr>
<td>100.25.4</td>
<td>Event Type</td>
<td>This field is the type of event that was processed. This could be an admission, discharge, transfer, out of O.R., or specialty change event.</td>
</tr>
<tr>
<td>100.25.5</td>
<td>MAS Movement Type</td>
<td>This field is the MAS Movement Type of the activity that was processed, if it was a MAS patient movement.</td>
</tr>
<tr>
<td>100.25.6</td>
<td>Treating Specialty</td>
<td>This field is the treating specialty associated with this activity, if it is a MAS patient movement.</td>
</tr>
<tr>
<td>100.25.7</td>
<td>Ward Location</td>
<td>This field is the ward location associated with this activity, if it is a MAS patient movement.</td>
</tr>
<tr>
<td>.2</td>
<td>Event</td>
<td>This field is a pointer to the OE/RR RELEASE EVENTS file, which defines the conditions under which delayed orders are to be released for this patient event, if delayed orders are related to this event.</td>
</tr>
<tr>
<td>.3</td>
<td>Admission</td>
<td>This field is a pointer to the Admission movement for which this event is valid. If the patient is an inpatient when delayed orders are written, this field will be the current admission. Otherwise, the admission movement will be recorded when the patient is admitted and the orders are released. If the patient is discharged without this event occurring, it will be retired and any orders still delayed will be lapsed.</td>
</tr>
<tr>
<td>.4</td>
<td>Order</td>
<td>This field is a pointer to the doctor's order requesting that this event occur for this patient when delayed orders are written.</td>
</tr>
<tr>
<td>.5</td>
<td>Created On</td>
<td>This field is the timestamp of when this event was entered into the file for this patient.</td>
</tr>
<tr>
<td>.6</td>
<td>Created By</td>
<td>This field is a pointer to the user who entered this event into the file for this patient.</td>
</tr>
<tr>
<td>.11</td>
<td>Event Date/Time</td>
<td>This field is the date and time that this event occurred for this patient; if the event is a MAS movement, this time will be the DATE/TIME from the MAS movement file.</td>
</tr>
<tr>
<td>.12</td>
<td>Patient Movement</td>
<td>This field is a pointer to the MAS Patient Movement that satisfied this event for this patient; any changes to this movement that alter the conditions of the event will be tracked in the activity log.</td>
</tr>
<tr>
<td>.13</td>
<td>Auto-DC Rule</td>
<td>This field is the Auto-DC Rule from file #100.6 that was used to automatically discontinue active orders when this event occurred. Those orders that were dc'd are listed in the Discontinued Orders multiple of this file.</td>
</tr>
<tr>
<td>.14</td>
<td>Surgery</td>
<td>This field is a pointer to the Surgery case that satisfied this event for this patient when the TIME PAT IN OR field was entered; any changes to this field will be tracked in the Activity log.</td>
</tr>
<tr>
<td>.20</td>
<td>Released Orders</td>
<td>This multiple field contains the orders that were released based on the release event defined in the OE/RR RELEASE EVENTS file #100.5 when this event occurred.</td>
</tr>
<tr>
<td>100.26.01</td>
<td>Released Orders</td>
<td>This field is a pointer to the Orders file #100 of an order that was released as a result of the event occurring.</td>
</tr>
<tr>
<td>.30</td>
<td>Discontinued Orders</td>
<td>This multiple contains the orders that were automatically discontinued based on the rules defined in the OE/RR AUTO-DC RULES file #100.6 when this event occurred.</td>
</tr>
<tr>
<td>100.27.01</td>
<td>Discontinued Orders</td>
<td>This field is the number of the order in the Orders file #100.</td>
</tr>
<tr>
<td>100.62, 3</td>
<td>To all Locations</td>
<td>This is a hospital location that will cause this rule to be applied; if no specialty change occurs with the transfer, then the patient must be moving to this location from the FROM LOCATION for active orders to be discontinued.</td>
</tr>
<tr>
<td>100.62, 4</td>
<td>To Location</td>
<td>If you did not set the TO ALL LOCATIONS field to YES then you must specify the location the patient is moving TO that will match with the selection made for the FROM location (either all or individual). This is a hospital location that will cause this rule to be applied; if no specialty change occurs with the transfer, then the patient must be moving to this location from</td>
</tr>
<tr>
<td>60</td>
<td>Included Divisions</td>
<td>These are the divisions that will cause this rule to be processed, if the FROM division matches the patient's transfer.</td>
</tr>
<tr>
<td>100.66,.01</td>
<td>From Division</td>
<td>This is a division that will cause this rule to be applied; if no specialty change occurs with the transfer, then the patient must be moving from this division for active orders to be discontinued.</td>
</tr>
<tr>
<td>70</td>
<td>Included Packages</td>
<td>These are the packages whose orders are to be automatically discontinued when this rule is processed.</td>
</tr>
<tr>
<td>100.67,.01</td>
<td>Type of Orders to DC</td>
<td>This is a package whose active orders are to be automatically discontinued when the conditions of this rule are satisfied.</td>
</tr>
<tr>
<td>80</td>
<td>EXCLUDED ORDERABLE ITEMS</td>
<td>These are the orderable items that are NOT to be automatically discontinued when this rule is processed, even if an order for it belongs to a package in the INCLUDED PACKAGES multiple.</td>
</tr>
<tr>
<td>100.68,.01</td>
<td>EXCEPT FOR ORDERABLE ITEM</td>
<td>This is an orderable item that will be exempt from any automatic discontinuing of orders normally triggered by this rule; if an active order for this item is encountered while processing this rule, it will be skipped and not discontinued.</td>
</tr>
<tr>
<td>81</td>
<td>Edit History</td>
<td>Tracks the entering and editing of rules.</td>
</tr>
<tr>
<td>100.681,.01</td>
<td>Edit History</td>
<td>Tracks the entering and editing of rules.</td>
</tr>
<tr>
<td>100.681,1</td>
<td>WHO ENTERED/EDITED</td>
<td>Name of person who added or edited this rule</td>
</tr>
<tr>
<td>----------</td>
<td>------------------</td>
<td>---------------------------------------------</td>
</tr>
<tr>
<td>100.681,2</td>
<td>Action</td>
<td>What action was taken on the rule?</td>
</tr>
<tr>
<td>100</td>
<td>Excluded Display Group</td>
<td></td>
</tr>
<tr>
<td>100.65, .01</td>
<td>Except Orders in Display Group</td>
<td>Any order related to the display group entered in the excluded display group multiple will be exempt from any auto-discontinuing normally triggered by this rule.</td>
</tr>
</tbody>
</table>
34. Appendix H: Event Delayed Order FAQ

1. Can you disable the ability to write delayed orders?

Yes. If a user does not have any active release events he or she will not be able to write delayed orders.

2. Other packages (such as the Pharmacy package) have parameters that are related to events. Which parameters take precedence CPRS parameters or package parameters?

The package parameters are evaluated first and take precedence. If you want CPRS parameters to take precedence, turn off package parameters.

3. Can release events be created for non-MAS events?

Release events can be created for outpatient and other non-MAS events. However, because these types of events do not have a MAS trigger, you will have to release them manually.

4. Some sites have created service-display groups to sort generic text orders (for example, PCA and respiratory). Are auto-DC rules related to the service or the display group?

To identify orders, CPRS looks at the package (OE/RR for all generic orders regardless of display group). If you define the OE/RR package as an included package for auto-DC, all generic orders will be discontinued regardless of the display group. However, if the excluded display group field is populated, the generic orders that are associated with the display group will not be auto-discontinued.

5. What happens if there is an excluded orderable item identified in the auto-DC file and the orderable item is changed in the host package?

The excluded orderable items field should not be used to specify pharmacy items that may change frequently. If the orderable item is changed, the exception will not have any effect.

6. Should we remove our generic “transfer to” order dialog from the add orders menus?

Yes, remove it from your add orders menus. However, you can use the “transfer to” order dialog as the order dialog for your transfer release events. You may also use the new OR GXMOVE EVENT dialog which prompts for the release event rather than the treating specialty.

7. Our Chief of Surgery does not feel that “Admit to Intensive Care Surgical” is an appropriate name for a release event. She would prefer that the release event be named “Admit to Vascular Surgery Intensive Care” What do you suggest?

You can create an “Admit to Intensive Care Surgical” release event and an “Admit to Vascular Surgery Intensive Care” child release event (or vice versa). Both of these release events would be tied to the same trigger event. When the trigger event occurred, orders tied to either of these release events would be released.

8. Treating specialty choices are controlled by MAS. Which parameters should I look at or change to add a treating specialty?
Facility treating specialties are usually edited by the HIMS staff. Please consult with your site staff.

9. A patient is transferred from a ward to O.R. to PACU to a ward. The patient is still on ward location when orders are written (e.g., patient is not transferred in the computer). How do we write orders to start in PACU?

Create a release event called OR to PACU (of type “Surgery”). Set up a print location for each OR room and define the printer in PACU. When the OR nurse enters time out of OR, the post-op orders will release and print to PACU.

If you have other orders that need to be released when the patient goes to ward, use the manual release function.

10. Do surgery events auto-DC in real-time? What happens if the system is down, the surgery information is entered later, and the patient has already returned to the ward?

Yes, surgery events auto-DC in real-time. When the system is back online, coordinate recovery efforts between surgery staff members who are backloading data and clinicians who are processing orders. If necessary, inactivate the rule while time out of OR is backloaded and then reactivate.

11. Can you set lapse days differently for each ward or specialty?

Yes.

12. Is there a field or other identifier on the Orders tab that indicates an active order was originally entered as a delayed order?

No; however, this information is included in the detailed order display.

13. Can you make an auto-DC rule that does not automatically discontinue specific generic text orders (e.g., DNR orders) and remains active throughout the patient’s hospitalizations?

Yes, define it as an excluded orderable item in the appropriate auto-DC rule. You could also create a special display group for this type of order and then add that display group to the “excluded display group” field so that orders belonging to this display group would not be auto-discontinued.

14. Can MAS discontinue orders when a patient goes to surgery without a treating specialty or ward location change?

Yes. You can define an auto-DC rule for a surgery type that will discontinue orders based on the time-out of OR.

15. What is the status of a delayed order that has lapsed?

The status will be “Lapsed”.


### 36. Appendix I: CPRS Parameters vs. OE/RR Parameters: File Locations

<table>
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<tr>
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| 8989.51 | ORPF REVIEW ON PATIENT MVMT | [OR PARAM ORDER MISC] Miscellaneous Parameters |
| 8989.51 | ORPF ACTIVE ORDERS CONTEXT HRS | [OR PARAM ORDER MISC] Miscellaneous Parameters |
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| 8989.51 | ORPF RESTRICT REQUESTOR | [OR PARAM ORDER MISC] Miscellaneous Parameters |
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| 8989.51 | ORPF WORK SUMMARY SORT | [OR PARAM SUMMARY REPORTS] Summary Report Parameters |</p>
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38. Appendix J: Tracking Completed Text (Nursing) Orders

Order Complete

There are Commercial Off-The-Shelf (COTS) products that need to know when certain text (nursing) orders are completed. To make this information available to both COTS or VistA packages, a new protocol has been created. The OR COMPLETE ORDER is called whenever a text (nursing) order is completed via CPRS. Any application or product that needs to be notified of complete orders may subscribe to this protocol.

The protocol is invoked for every text order when it is completed. The subscriber will have to make the decision which ones affect their application. The following information will be available for the subscribing application:

- ORINFO(“OR0”) will be ^OR(100,ORID,0)
- ORINFO(“OR3”) will be ^OR(100,ORID,3)
- ORINFO(“OR4”) will be ^OR(100,ORID,4)
- ORINFO(“OR6”) will be ^OR(100,ORID,6)
- ORINFO(“OR7”) will be ^OR(100,ORID,7)
- ORINFO(“DIALOG”) will be the Order Dialog name used to create the order
- ORINFO(“RESPONSES”) will hold the responses to the order dialog prompts (formatted as in GETDLG^ORCD and GETORDER^ORCD)
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