



CPRS PATCH# OR*3.0*277
RELEASE NOTES

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Table of Contents

Table of Contents	2
Installation Requirements	3
Required Patches.....	3
New Functionality.....	3

Installation Requirements

Required Patches

Before you can install patch OR*3.0*277, you must install the following required patches:

- OR*3.0*270

Note: CPRS GUI version 27 requires Internet Explorer 4.0 (IE4) or later. However, PKI functionality requires IE 5.5 or later with 128-bit encryption.

New Functionality

The Veterans Health Administration is treating an increasing number of veterans designated with Combat Veteran status, those veterans who have served in Afghanistan and Iraq within a specified period of time. However, the numbers of veterans served may currently be underreported as a result of how the electronic medical care record works. Based upon the recommendations from the Task Force on Returning Global War on Terror Heroes Report, this patch modifies the Computerized Patient Record System (CPRS) so that when users enter encounter information for Combat Veteran status patients, CPRS presumes the care is related to the combat experience.

For patients designated with Combat Veteran status in the Registration package, this patch changes the default on the CPRS Encounter form and on the electronic signature forms reached from the Sign... menu item, the Review / Sign Changes... menu item, and when changing patients or exiting the chart. Previously, if a patient qualified had Combat Veteran status, the check boxes in the CPRS graphical user interface (GUI) displayed a question mark in the Combat Veterans check box, prompting the clinician to select whether the episode of care or order was related to the veteran's combat service. However to indicate the care was related to the veteran's combat, the provider had to click twice on the checkbox.

Now, instead of the question mark, the check box will have a check. If the care is not related to the veteran's combat service, the clinician will need to remove the check mark.

The change from a default value of unknown (question mark) to one of yes (a check) will have two effects: It will

- presume combat experience to assure that combat veterans do not pay co-payments for health care provided for care of combat-related conditions and
- eliminate the need for VA providers to annotate that each episode of care was related to combat experience, saving time and provider resources.