## Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Description (Patch # if applicable)</th>
<th>Project Manager</th>
<th>Technical Writer</th>
</tr>
</thead>
<tbody>
<tr>
<td>August 2014</td>
<td>LR<em>5.2</em>422 – Updates for ICD-10</td>
<td>VA PM: Kathy Krause</td>
<td>Bob Thomas</td>
</tr>
<tr>
<td></td>
<td>Updated Title page</td>
<td>HP PM: Dave Getman</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Added Revision History (pp. i-ii)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Updated Table of Contents (pp. ix-x)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>General Note added regarding updates for the Laboratory Anatomic Pathology (AP) International Classification of Diseases, Tenth Revision (ICD-10) Class 1 Remediation Project Patch LR<em>5.2</em>422 (p. xi)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Note added: VistA AP ICD-10 Remediation Patch LR<em>5.2</em>422 replaced &quot;ICD9CM&quot; with &quot;ICD&quot; in various Menu Options (pp. 23, 26, 31, 34, 37)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Updated ICD-9 to ICD (pp. 4, 5, 21, 27, 29, 30, 32, 35, 37, 38)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Overall: Ensured all screen captures followed the SSN guidelines specified in Displaying Sensitive Data Guide.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Updated Glossary with ICD-10 definition (p. 43)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>05/2007</td>
<td>Initial document published</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Preface

The Veterans Health Information Systems and Architecture (VistA) Laboratory Anatomic Pathology (AP) Current Procedural Terminology (CPT) Code Corrections Patch LR*5.2*308 User Guide Version 5.2 provides the Department of Veterans Affairs Medical Center (DVAMC) Information Resource Management (IRM) staff, Laboratory Information Manager (LIM), and other DVAMC users with a straightforward means for using the software application.

**Intended Audience:**

The intended audience for this documentation includes users of the VistA Laboratory Anatomic Pathology software application, Laboratory Application Coordinators, Veterans Health Information Systems and Technology Architecture (VistA) sites' Information Resource Management (IRM), VHA Office of Information (OI) Health Systems Design & Development (HSD&D), and Enterprise VistA Support (EVS).
Vista Blood Bank Clearance

VISTA BLOOD BANK SOFTWARE V5.2 DEVICE PRODUCT LABELING STATEMENT

EFFECT ON BLOOD BANK FUNCTIONAL REQUIREMENTS: Patch LR*5.2*308 does not contain any changes to the VISTA BLOOD BANK Software as defined by VHA DIRECTIVE 99-053 titled VISTA BLOOD BANK SOFTWARE VERSION 5.2.

EFFECT ON BLOOD BANK FUNCTIONAL REQUIREMENTS: Patch LR*5.2*308 does not alter or modify any software design safeguards or safety critical elements functions.

RISK ANALYSIS: Changes made by patch LR*5.2*308 have no effect on Blood Bank software functionality, therefore RISK is none.

VALIDATION REQUIREMENTS BY OPTION: Because of the nature of the changes made, no specific validation requirements exist as a result of installation of this patch.
Orientation

This section addresses package-or audience-specific notations or directions (e.g., symbols used to indicate terminal dialogues or user responses) and software and documentation retrieval information.

Screen Captures
The computer dialogue appears in Courier font, no larger than 10 points.

Example: Courier font 10 points

User Response
User entry response appears in boldface type Courier font, no larger than 10 points.

Example: Boldface type

Return Symbol
User response to computer dialogue is followed by the <ENTER> symbol that appears in Courier font, no larger than 10 points, and bolded.

Example: <ENTER>

Tab Symbol
User response to computer dialogue is followed by the symbol that appears in Courier font, no larger than 10 points, and bolded.

Example: <Tab>

References

http://www.va.gov/vdl/application.asp?appid=72
Software and Documentation Retrieval Information

VistA Laboratory AP CPT Code Corrections Patch LR*5.2*308 User Guide and software/distributions are as follows:

NOTE: All sites are encouraged to use the File Transfer Protocol (FTP) capability. Use the FTP address “download.vista.med.va.gov” (without the quotes) to connect to the first available FTP server where the files are located.

NOTE: This document also contains updates for the Laboratory Anatomic Pathology (AP) International Classification of Diseases, Tenth Revision (ICD-10) Class 1 Remediation Project Patch LR*5.2*422, which is also distributed by PackMan.

Software Retrieval

VistA Laboratory AP CPT Code Corrections Patch LR*5.2*308 software is distributed by Packman.

Documentation Retrieval

VistA Laboratory AP CPT Code Corrections Patch LR*5.2*308 User Guide is available at the following Office of Information Field Offices (OIFOs) ANONYMOUS.SOFTWARE directories:

<table>
<thead>
<tr>
<th>OI Field Office</th>
<th>FTP Address</th>
<th>Directory</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALBANY</td>
<td>ftp.fo-albany.med.va.gov</td>
<td>[ANONYMOUS.SOFTWARE]</td>
</tr>
<tr>
<td>HINES</td>
<td>ftp.fo-hines.med.va.gov</td>
<td>[ANONYMOUS.SOFTWARE]</td>
</tr>
<tr>
<td>SALT LAKE CITY</td>
<td>ftp.fo-slc.med.va.gov</td>
<td>[ANONYMOUS.SOFTWARE]</td>
</tr>
</tbody>
</table>
Documentation Retrieval Formats

VistA Laboratory AP CPT Code Corrections Patch LR*5.2*308 User Guide files are exported in the following retrieval formats:

<table>
<thead>
<tr>
<th>File Names</th>
<th>Contents</th>
<th>Retrieval Formats</th>
</tr>
</thead>
</table>

VistA Website Locations:

VistA Laboratory AP CPT Code Corrections Patch LR*5.2*308 User Guide is accessible in MS Word (.doc) and Portable Document Format (.pdf) at the following VistA locations:

Laboratory Version 5.2 Home Page

http://vista.med.va.gov/ClinicalSpecialties/lab/

VistA Documentation Library (VDL)

www.va.gov/vdl/
Orientation

(This page intentionally left blank for two-sided copying)
# Table of Contents

## Preface ..........................................................................................................................  III

**Intended Audience:** ................................................................................................... III

**Vista Blood Bank Clearance:** .................................................................................... IV

**Vista Blood Bank Software V5.2 Device Product Labeling Statement:** ................... iv

## Orientation .................................................................................................................. V

- **Screen Captures:** ....................................................................................................... v
- **User Response:** .......................................................................................................... v
- **Return Symbol:** ......................................................................................................... v
- **Tab Symbol:** ............................................................................................................... v
- **References:** ............................................................................................................... v

## Software and Documentation Retrieval Information ................................................... VI

- **Software Retrieval:** ................................................................................................... vi
- **Documentation Retrieval:** ........................................................................................ vi
- **Documentation Retrieval Formats:** ........................................................................... vii

## Vista Website Locations: .............................................................................................. VII

- **Laboratory Version 5.2 Home Page:** ........................................................................ vii
- **Vista Documentation Library (VDL):** ....................................................................... viii

## Introduction ................................................................................................................ 1

- **Overview:** ................................................................................................................ 1
- **Test Sites:** ................................................................................................................. 2

## Enhancements and Modifications ................................................................................. 3

- **Enhancements:** ......................................................................................................... 3
- **Modifications:** .......................................................................................................... 4
- **Data Dictionary Changes:** ........................................................................................ 6
  - **WKLD CODE file (#64):** ...................................................................................... 6

## Use of the Software .................................................................................................... 7

- **Required Security Keys:** .......................................................................................... 7
- **Laboratory DHCP [LRMENU] Menu:** .................................................................... 8
  - **Anatomic Pathology [LRAP] Menu:** .................................................................... 8
  - **Anatomical Pathology Options Changes and Examples:** ....................................... 9
    - **Lab CPT Billing [LRCAPES] option:** ................................................................. 9
    - **Provisional anatomic diagnoses [LRAPAUPAD] option:** ................................. 20
    - **Autopsy protocol [LRAPAUDAP] option:** ......................................................... 23
    - **Autopsy protocol & SNOMED coding [LRAPAUDAB] option:** .................... 26
    - **Autopsy protocol & ICD coding [LRAPAUDAA] option:** .............................. 29
    - **FS/Gross/Micro/Dx [LRAPDGM] option:** ......................................................... 31
    - **FS/Gross/Micro/Dx/SNOMED Coding [LRAPDGS] option:** ......................... 34
    - **FS/Gross/Micro/Dx/ICD Coding [LRAPDGI] option:** .................................... 37
    - **Log-in, anat path [LRAPLG] option:** ............................................................... 40

## Glossary ....................................................................................................................... 41
Introduction

Overview

The purpose of the VistA Laboratory Anatomical Pathology (AP) CPT Coding Corrections Patch LR*5.2*308 software release correct the problems that have been identified after the installation of the VistA Laboratory Anatomical Pathology (AP) Clinical Procedural Terminology (CPT) Coding and (&) National Laboratory Test (NLT) Code Update Patch LR*5.2*274. The modifications and enhancements included in this patch address AP CPT & NLT coding issues that enables the Pathology and Laboratory Medicine Service (P&LMS) AP application to optimally utilize these coding systems within the VistA system.
Test Sites

VistA Laboratory AP CPT Code Corrections Patch LR*5.2*308 software is tested by the following Veteran Affairs Medical Centers (VAMCs) and Health Care Systems (HCS):

<table>
<thead>
<tr>
<th>VA Test Sites</th>
<th>Operating System Platform</th>
<th>Test Site Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boston HCS</td>
<td>CACHE/VMS</td>
<td>Large/Integrated</td>
</tr>
<tr>
<td>Durham VAMC</td>
<td>CACHE/VMS</td>
<td>Large</td>
</tr>
<tr>
<td>Iowa City (Central Plains Network)</td>
<td>CACHE/VMS</td>
<td>Large</td>
</tr>
<tr>
<td>Long Beach VAMC</td>
<td>CACHE/VMS</td>
<td>Large</td>
</tr>
</tbody>
</table>
Enhancements and Modifications

Enhancements

VistA Laboratory AP CPT Code Corrections Patch LR*5.2*308 software release contains the following enhancements:

1. The software is enhanced so that informational messages are displayed to the user when inactive CPT codes are found in CPT file (#81). Informational messages are also displayed when a CPT code is not found in CPT file (#81). All CPT codes that are inactive or not found in CPT file (#81) will not be passed to PCE.

2. The software is enhanced so that when a user selects a CPT code that is inactive in the WKLD CODE file (#64), the software generates a search for an active CPT code replacement that is linked to the same workload code. If no active replacement is found, then no CPT code is transmitted to PCE for that workload code. If an active replacement is found, the active CPT code is transmitted to PCE in place of the inactive CPT code.

3. The software is enhanced so that when a CPT code is found inactive in the WKLD CODE file (#64), a search is generated for another active replacement CPT code linked to the same workload code. If another active CPT code is found, the active CPT code replaces the inactive CPT code. If no active replacement CPT code is found, the original CPT code is not passed to PCE, and no misleading mail message is generated.

4. The software is enhanced so that all subsequent CPT code quantities entered for an accession is added to existing quantities stored in PCE and displaying the cumulative quantities.

5. The software is enhanced so that when the selected CPT codes are not linked to a workload code in the WKLD CODE file (#64), the CPT code will not be passed to PCE and an informational message is displayed.

6. The software is enhanced by increasing the number of allowed Electronic Signature (ES) Display Order numbers that can be assigned to a specific CPT/workload code combination.

7. The software is enhanced so that within the AP Login, the "Date/time Specimen taken:" default prompt has been changed from TODAY (date only) to NOW (date and time). This will reduce the chances of having the same encounter number assigned to more than one accession entered on the same patient, on the same date, and at the same location.
Modifications:

The VistA Laboratory AP CPT Code Corrections Patch LR*5.2*308 national software release contains the following option modifications:

1. **Provisional anatomic diagnoses [LRAPAUPAD] option**
   The Provisional anatomic diagnoses [LRAPAUPAD] option allows entering preliminary autopsy diagnoses for an unreleased report. CPT coding is permitted regardless of the release status of the report. Within the CPT coding selection, the “Releasing Pathologist:” prompt has been **changed** to “Provider:” because the name entered at this prompt **must** be an active provider. The pathologist or cytotechnologist name (if entered) on the accession, is now **included** in the header information that displays at the time CPT coding is entered.

2. **Autopsy protocol [LRAPAUDAP] option:**
   The Autopsy protocol [LRAPAUDAP] option is use for entry of clinical diagnoses including operations and pathological diagnoses for later printing of the AUTOPSY PROTOCOL Standard Form 503. Within the CPT coding selection, the “Releasing Pathologist:” has been **changed** to “Provider:” because the name entered at this prompt **must** be an active provider. The pathologist or cytotechnologist name (if entered) on the accession, is now **included** in the header information that displays at the time CPT coding is entered.

3. **Autopsy protocol & SNOMED coding [LRAPAUDAB] option**
   The Autopsy protocol & SNOMED coding [LRAPAUDAB] option allows enter/edit of an autopsy summary for an unreleased report. SNOMED and CPT coding is permitted regardless of the release status of the report. Within the CPT coding selection, the “Releasing Pathologist:” has been **changed** to “Provider:” because the name entered at this prompt **must** be an active provider. The pathologist or cytotechnologist name (if entered) on the accession, is now **included** in the header information that displays at the time CPT coding is entered.

4. **Autopsy protocol & ICD coding [LRAPAUDAA] option**
   The Autopsy protocol & ICD coding [LRAPAUDAA] option allows entry and edit of autopsy summary and ICD codes for an unreleased report. CPT coding is also permitted regardless of the release status of the report. Within the CPT coding selection, the “Releasing Pathologist:” has been **changed** to “Provider:” because the name entered at this prompt **must** be an active provider. The pathologist or cytotechnologist name (if entered) on the accession, is now **included** in the header information that displays at the time CPT coding is entered.

5. **FS/Gross/Micro/Dx [LRAPDGM] option**
   The FS/Gross/Micro/Dx [LRAPDGM] option is use to edit the frozen section and gross descriptions and to enter the microscopic and diagnosis descriptions for an unreleased report. CPT coding may be entered regardless of the release status of the report. Within the CPT coding selection, the “Releasing Pathologist:” prompt has been **changed** to “Provider:” because the name entered at this prompt **must** be an active provider. The pathologist or cytotechnologist
name (if entered) on the accession, is now included in the header information that displays at the time CPT coding is entered.

6. FS/Gross/Micro/Dx/SNOMED Coding [LRAPDGS] option
The FS/Gross/Micro/Dx/SNOMED Coding [LRAPDGS] option allows review of gross specimen and frozen section descriptions and entry of microscopic description and diagnoses for an unreleased report. SNOMED coding and CPT coding are permitted regardless of the release status of the report. Within the CPT coding selection, the “Releasing Pathologist:” prompt has been changed to “Provider:” because the name entered at this prompt must be an active provider. The pathologist or cytotechnologist name (if entered) on the accession, is now included in the header information that displays at the time CPT coding is entered.

7. FS/Gross/Micro/Dx/ICD Coding [LRAPDGI] option
The FS/Gross/Micro/Dx/ICD Coding [LRAPDGI] option allows review of gross specimen and frozen descriptions and entry of microscopic and diagnosis descriptions and ICD-CM coding for each accession number. This is permitted for unreleased reports only. CPT coding is permitted regardless of the release status of the report. Within the CPT coding selection, the “Releasing Pathologist:” prompt has been changed to “Provider:” because the name entered at this prompt must be an active provider. The pathologist or cytotechnologist name (if entered) on the accession, is now included in the header information that displays at the time CPT coding is entered.

8. Lab CPT Billing [LRCAPES] option
This option is used to perform the following two functions using accessioned tests identified in the ACCESSION file (#68).

It allows the manual assignment of CPT codes for billing if the ordering location is an out patient location type as indicated in the HOSPITAL LOCATION file (#44). It also allows the recording of laboratory workload for all HOSPITAL LOCATION types.

If the ES DISPLAY ORDER field (#26), of the WKLD CODE file (#64) is populated, the user can select from a picklist of predefined WKLD CODES. In addition, the user is able to enter any valid CPT code directly. If the location is appropriate, CPT billing codes will passed to the LAB PCE API. The WKLD CODE associated with the CPT code will be added to the laboratory workload for an accessioned test.

NOTE: Lab CPT Billing [LRCAPES] option is locked with the LRVERIFY security key.

Lab CPT Billing [LRCAPES] option contains the following changes:
Enhancements and Modifications

- Within the ‘Select Accession:’ area, the ‘Releasing Pathologist:’ prompt has been changed to ‘Provider:’ Note: The name entered at this new ‘Provider’ prompt must be an active provider.

- Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name entered within the ‘Select Accession:’ area is displayed in the selected CPT coding data.

- Displays a new message to the user when CPT code(s) are ‘not found’ in CPT file (#81)

- Displays a new message to the user when CPT code(s) are ‘inactive’ in CPT file (#81)

- Displays the new message to the user when CPT code(s) are ‘inactive’ in WKLD CODE file (#64)

- Displays the new message to the user when CPT code(s) are ‘not linked’ to workload

NOTE: CPT codes that are not found in CPT file (#81), inactive in CPT file (#81), inactive in WKLD CODE file (#64), and not linked to workload will not be passed to PATIENT CARE ENCOUNTER (PCE).

9. Log-in, anat path [LRAPLG] option
This option is used to log-in accessions in anatomic pathology. The user must hold the appropriate key to the accession area. The option has been enhanced to list the primary care physician as the default name in the SPECIMEN SUBMITTED BY prompt.

The Log-in, anat path [LRAPLG] option contains the following change:
The ‘Date/time Specimen taken:’ prompt default has been changed from TODAY (date only) to NOW (date and time).

Data Dictionary Changes

VistA Laboratory AP CPT Code Corrections Patch LR*5.2*308 software release contains the following data dictionary changes:

WKLD CODE file (#64):
WKLD CODE file (#64), ES DISPLAY ORDER field (#26) has been modified to increase the allowed quantity from 100 to 1000.
Use of the Software

VistA Laboratory AP CPT Code Corrections Patch LR*5.2*308 User Guide provides users with straight-forward directions to successfully operate this national software product.

Required Security Keys

Security keys are used to restrict user’s access to specific areas/options of Anatomic Pathology. The following security keys must be assigned to authorized users requiring access to the VistA Laboratory Anatomic Pathology functionality:

<table>
<thead>
<tr>
<th>Security Key</th>
<th>Access</th>
</tr>
</thead>
<tbody>
<tr>
<td>LRLAB security key:</td>
<td>Allows access to the main Laboratory [LRMENU] menu.</td>
</tr>
<tr>
<td>LRANAT security key:</td>
<td>Allows access to the main Anatomic Pathology [LRAP] menu where the Turn Electronic Signature On/Off [LRAP ESIG SWITCH] and Modify released pathology report [LRAPMRL] options reside.</td>
</tr>
<tr>
<td>LRAPSUPER security key:</td>
<td>Gives an authorized user access to the Supervisor, anat path [LRAPSUPER] submenu where the Turn Electronic Signature On/Off [LRAP ESIG SWITCH] option is located.</td>
</tr>
<tr>
<td>LRLIASON security key:</td>
<td>Gives an authorized user access to the Turn Electronic Signature On/Off [LRAP ESIG SWITCH] option.</td>
</tr>
<tr>
<td>LRAPMOD security key:</td>
<td>This security key gives an authorized user access to the Modify released pathology report [LRAPMRL] option.</td>
</tr>
<tr>
<td>LRVERIFY security key:</td>
<td>Gives an authorized user access to anatomic pathology setup tasks and gives authorization to electronically sign Autopsy Protocol, SF 515, and supplementary released reports.</td>
</tr>
<tr>
<td>PROVIDER security key:</td>
<td>Gives an authorized user access to anatomic pathology setup tasks and gives authorization to electronically sign Autopsy Protocol, SF 515, and supplementary released reports. It also enables the authorized signer to be listed as the Provider of the pathology case in the TIU report document. Without this key, the authorized signer is not allowed to sign or release a report.</td>
</tr>
</tbody>
</table>
Use of the Software

**Laboratory DHCP [LRMENU] Menu**

The Laboratory DHCP [LRMENU] menu is the main laboratory menu containing the following menus, submenus, and options:

**Example:** Laboratory DHCP [LRMENU] menu

```
Select Laboratory DHCP Menu Option: \?<ENTER>

1   Phlebotomy menu ...
2   Accessioning menu ...
3   Process data in lab menu ...
4   Quality control menu ...
5   Results menu ...
6   Information-help menu ...
7   Ward lab menu ...
8   Anatomic pathology ...
9   Blood bank ...
10  Microbiology menu ...
11  Supervisor menu ...
LSM Lab Shipping Menu ...

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.
```

**Anatomic Pathology [LRAP] Menu**

The Anatomic Pathology [LRAP] menu contains the main AP submenus and options. Shortcut numbers and synonyms used to quickly access menus and options.

**Example:** Anatomic Pathology [LRAP] menu

```
Select Laboratory DHCP Menu Option: 8<ENTER> Anatomic pathology

ANATOMIC PATHOLOGY MENU
Select Anatomic pathology Option: \?<ENTER>

D   Data entry, anat path ...
E   Edit/modify data, anat path ...
I   Inquiries, anat path ...
L   Log-in menu, anat path ...
P   Print, anat path ...
R   SNOMED field references ...
S   Supervisor, anat path ...
V   Verify/release menu, anat path ...
C   Clinician options, anat path ...
W   Workload, anat path ...
```
Anatomical Pathology Options Changes and Examples

The following Anatomical Pathology (AP) options has been changed to correct problems identified after the national release of the VistA Laboratory Anatomical Pathology (AP) Clinical Procedural Terminology (CPT) Coding and (&) National Laboratory Test (NLT) Code Update Patch LR*5.2*274. Detail instructions and screen captures examples are provided for users to competently operate the VistA Laboratory Anatomic Pathology (AP) CPT Code Corrections Patch LR*5.2*308 national software release.

Lab CPT Billing [LRCAPES] option

This option is used to perform the following two functions using accessioned tests identified in the ACCESSION file (#68).

It allows the manual assignment of CPT codes for billing if the ordering location is an out patient location type as indicated in the HOSPITAL LOCATION file (#44). It also allows the recording of laboratory workload for all HOSPITAL LOCATION types.

If the ES DISPLAY ORDER field (#26), of the WKLD CODE file (#64) is populated, the user can select from a picklist of predefined WKLD CODES. In addition, the user is able to enter any valid CPT code directly. If the location is appropriate, CPT billing codes will passed to the LAB PCE API. The WKLD CODE associated with the CPT code will be added to the laboratory workload for an accessioned test.

**NOTE:** Lab CPT Billing [LRCAPES] option is locked with the LRVERIFY security key.

The Lab CPT Billing [LRCAPES] option contains the following changes:

- Within the ‘Select Accession:’ area, the ‘Releasing Pathologist:’ prompt has been changed to ‘Provider:’ **Note:** The name entered at this new ‘Provider’ prompt must be an active provider.
- Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name entered within the ‘Select Accession:’ area is displayed in the selected CPT coding data.
- Displays a new message to the user when CPT code(s) are ‘not found’ in CPT file (#81)
- Displays a new message to the user when CPT code(s) are ‘inactive’ in CPT file (#81)
- Displays the new message to the user when CPT code(s) are ‘inactive’ in WKLD CODE file (#64)
- Displays the new message to the user when CPT code(s) are ‘not linked’ to workload

**NOTE:** CPT codes that are not found in CPT file (#81), inactive in CPT file (#81), inactive in WKLD CODE file (#64), and not linked to workload will not be passed to PATIENT CARE ENCOUNTER (PCE).
Use of the Software

Example #1: Lab CPT Billing [LRCAPES] option contains the following changes:

Within the ‘Select Accession:’ area, the ‘Releasing Pathologist:’ prompt has been changed to ‘Provider:’

Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name entered within the ‘Select Accession:’ area is displayed in the selected CPT coding data.

Select Laboratory DHCP Menu Option: 8<ENTER> Anatomic pathology

ANATOMIC PATHOLOGY MENU

Select Anatomic pathology Option: ?<ENTER>

D Data entry, anat path ...
E Edit/modify data, anat path ...
I Inquiries, anat path ...
L Log-in menu, anat path ...
P Print, anat path ...
R SNOMED field references ...
S Supervisor, anat path ...
V Verify/release menu, anat path ...
C Clinician options, anat path ...
W Workload, anat path ...

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select Anatomic pathology Option: V<ENTER> Verify/release menu, anat path

Select Verify/release menu, anat path Option: ?<ENTER>

RR Verify/release reports, anat path
RS Supplementary report release, anat path
LU List of unverified pathology reports
CPT LAB CPT BILLING

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select Verify/release menu, anat path Option: CPT<ENTER> LAB CPT BILLING

Select Accession: <ENTER>

LRAPPATIENT,ONE 000-00-1111 DOB: Mar 02, 1955
Collection Date: Feb 27, 2007@14:53
Acc #: NSP 07 1 Loc: BB
PCE ENC # 779;779;779;779;779;779;
Specimen:
Tissue Specimens:
tissue
Test(s); SURGICAL PATHOLOGY LOG-IN/ <ENTER>
Pathologist: LRAPPATHOLOGIST,ONE
Provider: LRAPPROVIDER,ONE // LRA
Would you like to see PCE CPT Information? No/<ENTER> NO

Select CPT codes: 88304<ENTER>

LRAPPATIENT,ONE 000-00-1111 DOB: Mar 02, 1955
Collection Date: Feb 27, 2007@14:53
Acc #: NSP 07 1 Loc: BB
PCE ENC # 779;779;779;779;779;779;
Specimen:
Tissue Specimens:
tissue
Test(s): SURGICAL PATHOLOGY LOG-IN/
Pathologist: LRAPPATHOLOGIST,ONE

Selected CPT Codes
(1) 88304 TISSUE EXAM BY PATHOLOGIST

Is this correct? Yes/<ENTER> YES
Sending PCE Workload
Visit # 779
Storing LMIP Workload

Select Accession: ^<ENTER>
Example #2: Lab CPT Billing [LRCAPES] option contains the following change:

This example displays the new message “The following CPT Code(s) are not selected: Not found in #81:”

Select Laboratory DHCP Menu Option: 8<ENTER>  Anatomic pathology

ANATOMIC PATHOLOGY MENU

Select Anatomic pathology Option: ?<ENTER>

D Data entry, anat path ...
E Edit/modify data, anat path ...
I Inquiries, anat path ...
L Log-in menu, anat path ...
P Print, anat path ...
R SNOMED field references ...
S Supervisor, anat path ...
V Verify/release menu, anat path ...
C Clinician options, anat path ...
W Workload, anat path ...

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select Anatomic pathology Option: V<ENTER>  Verify/release menu, anat path

Select Verify/release menu, anat path Option: ? <ENTER>

RR Verify/release reports, anat path
RS Supplementary report release, anat path
LU List of unverified pathology reports
CPT LAB CPT BILLING

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select Verify/release menu, anat path Option: CPT<ENTER>  LAB CPT BILLING

Release/Electronically Sign Pathology Reports

Select one of the following: <ENTER>

C CPT Coding
E Electronically Sign Reports
V View SNOMED Codes

Selection: CPT Coding<ENTER>

Select ANATOMIC PATHOLOGY SECTION: CYTOPATHOLOGY<ENTER>

CYTOPATHOLOGY (NCY)

Data entry for 2007 ? YES// (YES)<ENTER>
Select Accession Number/Pt name: 3<ENTER> for 2007

LRAPPATIENT, ONE 000-00-1111 DOB: Mar 02, 1955
Collection Date: Feb 27, 2007@10:21
Acc #: NCY 07 3

Tissue Specimen(s):
CYTOLO
Test(s): CYTOLOGY

Provider: LRAPPROVIDER,ONE// LRA

Select CPT codes: 88350<ENTER>

The following CPT Code(s) are not selected:
Not found in #81: 88350
Example #3: Lab CPT Billing [LRCAPES] option contains the following change:

This example is displaying the new message to the user when CPT code(s) are ‘inactive’ in CPT file (#81).

Select Laboratory DHCP Menu Option: 8<ENTER>  Anatomic pathology

ANATOMIC PATHOLOGY MENU

Select Anatomic pathology Option: ?<ENTER>

D     Data entry, anat path ...
E     Edit/modify data, anat path ...
I     Inquiries, anat path ...
L     Log-in menu, anat path ...
P     Print, anat path ...
R     SNOMED field references ...
S     Supervisor, anat path ...
V     Verify/release menu, anat path ...
C     Clinician options, anat path ...
W     Workload, anat path ...

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select Anatomic pathology Option: V<ENTER>  Verify/release menu, anat path

Select Verify/release menu, anat path Option: ?<ENTER>

RR    Verify/release reports, anat path
RS    Supplementary report release, anat path
LU    List of unverified pathology reports
CPT   LAB CPT BILLING

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select Verify/release menu, anat path Option: CPT<ENTER>  LAB CPT BILLING

Select Accession: <ENTER>
nsp  SURGICAL PATHOLOGY
SURGICAL PATHOLOGY (2007)  1

LRAPPATIENT,TWO  000-00-2222  DOB: Mar 02, 1955
Collection Date: Feb 27, 2007@14:53
Acc #: NSP 07 1  Loc: BB
PCE ENC # 779;779;779;779;779;779;779;
Specimen:
tissue
Test(s):  SURGICAL PATHOLOGY LOG-IN/
Pathologist: LRAPPATHOLOGIST,TWO

Provider: LRAPPROVIDER,TWO // LRA
Would you like to see PCE CPT Information? No// <ENTER>  NO

Select CPT codes:  85590<ENTER>

The following CPT Code(s) are not selected:
Inactive in #81: 85590

Select Accession: ^<ENTER>
Example #4: Lab CPT Billing [LRCAPES] option contains the following change:

This example displays the new message “The following CPT Code(s) are not selected: Inactive in #64:”

Select Laboratory DHCP Menu Option: 8<ENTER>  Anatomic pathology

ANATOMIC PATHOLOGY MENU

Select Anatomic pathology Option:  ?<ENTER>

D      Data entry, anat path ...
E      Edit/modify data, anat path ...
I      Inquiries, anat path ...
L      Log-in menu, anat path ...
P      Print, anat path ...
R      SNOMED field references ...
S      Supervisor, anat path ...
V      Verify/release menu, anat path ...
C      Clinician options, anat path ...
W      Workload, anat path ...

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select Anatomic pathology Option:  V<ENTER>  Verify/release menu, anat path

Select Verify/release menu, anat path Option:  ? <ENTER>

RR     Verify/release reports, anat path
RS     Supplementary report release, anat path
LU     List of unverified pathology reports
CPT    LAB CPT BILLING

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select Verify/release menu, anat path Option:  CPT<ENTER>  LAB CPT BILLING

Release/Electronically Sign Pathology Reports

Select one of the following:

C      CPT Coding
E      Electronically Sign Reports
V      View SNOMED Codes

Selection:  CPT Coding<ENTER>
Select ANATOMIC PATHOLOGY SECTION: **CYTOPATHOLOGY**

**CYTOPATHOLOGY (NCY)**

Data entry for 2007? **YES**

Select Accession Number/Pt name: **3**

<table>
<thead>
<tr>
<th>LRAPPATIENT, ONE</th>
<th>000-00-1111</th>
<th>DOB: Mar 02, 1955</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collection Date</td>
<td>Feb 27, 2007@10:21</td>
<td></td>
</tr>
<tr>
<td>Acc #: NCY 07 3</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Tissue Specimen(s): |
| CYTOLO |
| Test(s): CYTOLOGY |

| LRAPPROVIDER, ONE// LRP |

Select CPT codes: **83890**

The following CPT Code(s) are not selected:

**Inactive in #64: 83890**
Use of the Software

Example #5: Lab CPT Billing [LRCAPES] option contains the following change:

This example displays the new message “The following CPT Code(s) are not selected:
Not linked to workload:”

Select Laboratory DHCP Menu Option: 8<ENTER> Anatomic pathology

ANATOMIC PATHOLOGY MENU

Select Anatomic pathology Option: ?<ENTER>

D Data entry, anat path ...
E Edit/modify data, anat path ...
I Inquiries, anat path ...
L Log-in menu, anat path ...
P Print, anat path ...
R SNOMED field references ...
S Supervisor, anat path ...
V Verify/release menu, anat path ...
C Clinician options, anat path ...
W Workload, anat path ...

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select Anatomic pathology Option: V<ENTER> Verify/release menu, anat path

Select Verify/release menu, anat path Option: ?<ENTER>

RR Verify/release reports, anat path
RS Supplementary report release, anat path
LU List of unverified pathology reports
CPT LAB CPT BILLING

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select Verify/release menu, anat path Option: CPT<ENTER> LAB CPT BILLING

Release/Electronically Sign Pathology Reports

Select one of the following:<ENTER>

C CPT Coding
E Electronically Sign Reports
V View SNOMED Codes

Selection: CPT Coding<ENTER>
Select ANATOMIC PATHOLOGY SECTION: CYTOPATHOLOGY<ENTER>

CYTOPATHOLOGY (NCY)

Data entry for 2007 ? YES// (YES)<ENTER>

Select Accession Number/Pt name: 3<ENTER> for 2007

LRAPPATIENT,ONE 000-00-1111 DOB: Mar 02, 1955
Collection Date: Feb 27, 2007@10:21
Acc #: NCY 07 3

Tissue Specimen(s): <ENTER>
CYTOLO
Test(s): CYTOLOGY

LRAPPROVIDER,ONE// LRP
Select CPT codes: 82075<ENTER>

The following CPT Code(s) are not selected:
Not linked to workload: 82075
Use of the Software

**Provisional anatomic diagnoses [LRAPAUPAD] option**

The Provisional anatomic diagnoses [LRAPAUPAD] option allows entering of preliminary autopsy diagnoses for an unreleased report. CPT coding is permitted regardless of the release status of the report.

- Within the ‘Select Accession Number/Pt name:’ area, the ‘Releasing Pathologist:’ prompt has been **changed** to ‘Provider:’ **Note:** The name entered at this **new** ‘Provider’ prompt **must** be an active provider.
- Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name is **displayed** on the selected CPT coding data.

**Example:** The Provisional anatomic diagnoses [LRAPAUPAD] option contains the following changes:

Within the ‘Select Accession Number/Pt name:’ area, the prompt ‘Releasing Pathologist:’ has been **changed** to ‘Provider:’

Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name is **displayed** in the selected CPT coding data.

---

Select Core Applications Option: **LAB<ENTER>** Laboratory DHCP Menu

Select Laboratory DHCP Menu Option: **8<ENTER>** Anatomic pathology

ANATOMIC PATHOLOGY MENU

Select Anatomic pathology Option: **? <ENTER>**

D Data entry, anat path ...
E Edit/modify data, anat path ...
I Inquiries, anat path ...
L Log-in menu, anat path ...
P Print, anat path ...
R SNOMED field references ...
S Supervisor, anat path ...
V Verify/release menu, anat path ...
C Clinician options, anat path ...
W Workload, anat path ...

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select *SITE SYNONYM* Anatomic pathology Option: **D<ENTER>** Data entry, anat path
Select *SITE SYNONYM* Data entry, anat path Option: ?<ENTER>

**AU**  Data entry for autopsies ...  
BS  Blocks, Stains, Procedures, anat path  
CO  Coding, anat path ...  
GD  Clinical Hx/Gross Description/FS  
GM  FS/Gross/Micro/Dx  
GS  FS/Gross/Micro/Dx/SNOMED Coding  
GI  FS/Gross/Micro/Dx/ICD Coding  
OR  Enter old anat path records  
SR  Supplementary Report, Anat Path  
SS  Spec Studies-EM;Immuno;Consult;Pic, Anat Path

Select Data entry for autopsies Option: AU<ENTER> Data entry for autopsies AUTOPSY (NAU)

Select *SITE SYNONYM* Data entry for autopsies Option: ?<ENTER>

**PD**  Provisional anatomic diagnoses  
AP  Autopsy protocol  
AS  Autopsy protocol & SNOMED coding  
AI  Autopsy protocol & ICD coding  
AF  Final autopsy diagnoses date  
SR  Autopsy supplementary report  
SS  Special studies, autopsy

Select *SITE SYNONYM* Data entry for autopsies Option: PD<ENTER> Provisional anatomic diagnoses

Select ANATOMIC PATHOLOGY SECTION: Autopsy<ENTER>

AUTOPSY (NAU)

Data entry for 2007 ? YES// N<ENTER> (NO)  

Select Accession Number/Pt name: 2<ENTER> for 2006  
LRAPPATIENT,ONE ID: 000-00-1111

CLINICAL DIAGNOSES:<ENTER>  
1>CLINICAL DIAGNOSES TESTING. <ENTER>  
EDIT Option: <ENTER>  
PATHOLOGICAL DIAGNOSES: <ENTER>  
1>PATHOLOGICAL DIAGNOSES TESTING. <ENTER>  
EDIT Option: <ENTER>  
PROVISIONAL ANAT DX DATE: OCT 26,2006//<ENTER>  
Enter CPT coding? NO// Y<ENTER> YES  

Provider: LRAPPROVIDER,ONE<ENTER> LRA
Use of the Software

Select CPT codes: 88304<ENTER>

LRAPPATIENT,ONE 000-00-1111 DOB: Jan 01, 1900
Collection Date: Oct 12, 2006
Acc #: NAU 06 2
Specimen:
Pathologist: LRAPPATHOLOGIST,ONE

Selected CPT Codes

(1) 88304 TISSUE EXAM BY PATHOLOGIST

Is this correct? Yes/<ENTER> YES

Storing LMIP Workload

Select Accession Number/Pt name: ^<ENTER>
Autopsy protocol [LRAPAUDAP] option

The Autopsy protocol [LRAPAUDAP] option is use for entry of clinical diagnoses including operations and pathological diagnoses for later printing of the AUTOPSY PROTOCOL Standard Form 503.

- Within the ‘Select Accession Number/Pt name:’ area, the ‘Releasing Pathologist:’ prompt has been changed to ‘Provider:’ Note: The name entered at this new ‘Provider’ prompt must be an active provider.

- Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name is now displayed in the selected CPT coding data.

Example: Autopsy protocol [LRAPAUDAP] option contains the following changes:

Within the ‘Select Accession Number/Pt name:’ area, the prompt ‘Releasing Pathologist:’ has been changed to ‘Provider:’

Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name is displayed in the selected CPT coding data.

NOTE: VistA AP ICD-10 Remediation Patch LR*5.2*422 replaces "ICD9CM" with "ICD" in the following Menu Options:
- "Autopsy protocol & ICD9CM coding [LRAPAUDAA]" is now "Autopsy protocol & ICD coding [LRAPAUDAA]".
- FS/Gross/Micro/Dx/ICD9CM Coding [LRAPDGI]" is now "FS/Gross/Micro/Dx/ICD Coding [LRAPDGI]."

Select Laboratory DHCP Menu Option: 8<ENTER> Anatomic pathology

ANATOMIC PATHOLOGY MENU

Select Anatomic pathology Option: ?<ENTER>

D  Data entry, anat path ...
E  Edit/modify data, anat path ...
I  Inquiries, anat path ...
L  Log-in menu, anat path ...
P  Print, anat path ...
R  SNOMED field references ...
S  Supervisor, anat path ...
V  Verify/release menu, anat path ...
C  Clinician options, anat path ...
W  Workload, anat path ...
Use of the Software

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select Anatomic pathology Option: D<ENTER> Data entry, anat path

Select Data entry, anat path Option: ?

AU Data entry for autopsies ...
BS Blocks, Stains, Procedures, anat path
CO Coding, anat path ...
GD Clinical Hx/Gross Description/FS
GM FS/Gross/Micro/Dx
GS FS/Gross/Micro/Dx/SNOMED Coding
GI FS/Gross/Micro/Dx/ICD Coding
OR Enter old anat path records
SR Supplementary Report, Anat Path
SS Spec Studies-EM;Immuno;Consult;Pic, Anat Path

Select Data entry, anat path Option: AU<ENTER> Data entry for autopsies

Select Data entry for autopsies Option: ?<ENTER>

PD Provisional anatomic diagnoses
AP Autopsy protocol
AS Autopsy protocol & SNOMED coding
AI Autopsy protocol & ICD coding
AF Final autopsy diagnoses date
SR Autopsy supplementary report
SS Special studies, autopsy

Select Data entry for autopsies Option: AP<ENTER> Autopsy protocol

AUTOPSY (NAU)

Data entry for 2007 ? YES// N<ENTER> (NO)

Select Accession Number/Pt name: 1<ENTER> for 2006
LRPATIENT,TWO ID: 000-00-2222

DATE AUTOPSY REPORT COMPLETED: OCT 26,2006@11:44//<ENTER>
Select AUTOPSY COMMENTS: TESTING FOR UNDEFINED ERROR
//<ENTER>
CLINICAL DIAGNOSES: <ENTER>
1>CLINICAL DIAGNOSES TESTING
EDIT Option: <ENTER>
PATHOLOGICAL DIAGNOSES:<ENTER>
1>PATHOLOGICAL DIAGNOSES TESTING.
EDIT Option:<ENTER>
Select AUTOPSY QA CODE:<ENTER>
Enter CPT coding? NO// Y<ENTER> YES

Provider: LRAPPRESSOR,ONE<ENTER> LRA

Select CPT codes: 88304<ENTER>

LRPATIENT, TWO 000-00-2222 DOB: Jan 01, 1910
Collection Date: Oct 12, 2006
Acc #: NAU 06 1
Loc: 1 TEST (NORTH)
Specimen:
Test(s):
Pathologist: LRAPPATHOLOGIST, THREE<ENTER>

Selected CPT Codes

(1) 88304 TISSUE EXAM BY PATHOLOGIST

Is this correct? Yes/<ENTER> YES
Storing LMIP Workload

Select Accession Number/Pt name:^<ENTER>
Use of the Software

Autopsy protocol & SNOMED coding [LRAPAUDAB] option

The Autopsy protocol & SNOMED coding [LRAPAUDAB] option allows enter/edit of an autopsy summary for an unreleased report. SNOMED and CPT coding is permitted regardless of the release status of the report.

- Within the ‘Select Accession Number/Pt name:’ area, the ‘Releasing Pathologist:’ prompt has been changed to ‘Provider:.’ Note: The name entered at this new ‘Provider’ prompt must be an active provider.

- Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name is now displayed CPT coding in the selected CPT coding data.

Example: Autopsy protocol & SNOMED coding [LRAPAUDAB] option contains the following changes:

Within the ‘Select Accession Number/Pt name:’ area, the prompt ‘Releasing Pathologist:’ has been changed to ‘Provider:.’

Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name is displayed in the selected CPT coding data.

NOTE: VistA AP ICD-10 Remediation Patch LR*5.2*422 replaces "ICD9CM" with "ICD" in the following Menu Options:

- "Autopsy protocol & ICD9CM coding [LRAPAUDAA]" is now "Autopsy protocol & ICD coding [LRAPAUDAA]."
- FS/Gross/Micro/Dx/ICD9CM Coding [LRAPDGI]" is now "FS/Gross/Micro/Dx/ICD Coding [LRAPDGI]."

Select Laboratory DHCP Menu Option: 8<ENTER> Anatomic pathology

Select Anatomic pathology Option: ??<ENTER>?

D Data entry, anat path ...
E Edit/modify data, anat path ...
I Inquiries, anat path ...
L Log-in menu, anat path ...
P Print, anat path ...
R SNOMED field references ...
S Supervisor, anat path ...
V Verify/release menu, anat path ...
C Clinician options, anat path ...
W Workload, anat path ...

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.
Use of the Software

Select Anatomic pathology Option: D<ENTER> Data entry, anat path

Select Data entry, anat path Option: ?<ENTER>

AU Data entry for autopsies ...
BS Blocks, Stains, Procedures, anat path
CO Coding, anat path ...
GD Clinical Hx/Gross Description/FS
GM FS/Gross/Micro/Dx
GS FS/Gross/Micro/Dx/SNOMED Coding
GI FS/Gross/Micro/Dx/ICD Coding
OR Enter old anat path records
SR Supplementary Report, Anat Path
SS Spec Studies-EM;Immuno;Consult;Pic, Anat Path

Select Data entry, anat path Option: AU<ENTER> Data entry for autopsies

Select *SITE SYNONYM* Data entry for autopsies Option: ?<ENTER>

PD Provisional anatomic diagnoses
AP Autopsy protocol
AS Autopsy protocol & SNOMED coding
AI Autopsy protocol & ICD coding
AF Final autopsy diagnoses date
SR Autopsy supplementary report
SS Special studies, autopsy

Select Data entry for autopsies Option: AS<ENTER> Autopsy protocol & SNOMED coding

AUTOPSY (NAU)

Enter Etiology, Function, Procedure & Disease? NO/<ENTER> (NO)

Data entry for 2007? YES/NO<ENTER>

Select Accession Number/Pt name: 1<ENTER> for 2006
LRAPPATIENT,ONE ID: 000-00-1111

DATE AUTOPSY REPORT COMPLETED: OCT 26,2006@11:44/<ENTER>

Select AUTOPSY COMMENTS: TESTING FOR UNDEFINED ERROR // <ENTER>
CLINICAL DIAGNOSES: <ENTER>
1>CLINICAL DIAGNOSES TESTING
EDIT Option: <ENTER>
PATHOLOGICAL DIAGNOSES: <ENTER>
  1>PATHOLOGICAL DIAGNOSES TESTING
EDIT Option: <ENTER>
Select AUTOPSY QA CODE: <ENTER>
Select AUTOPSY ORGAN/TISSUE: <ENTER>
Enter CPT coding? NO// Y<ENTER> YES

Provider: LRAPPROVIDER,TWO// LRA

Select CPT codes: 88304<ENTER>

LRAPPATIENT,ONE 000-00-1111 DOB: Jan 01, 1900
  Collection Date: Oct 12, 2006
  Acc #: NAU 06 1
  Loc: 1 TEST (NORTH)
  Specimen:
  Test(s):
  Pathologist: LRAPPATHOLOGIST,THREE

Selected CPT Codes

(1) 88304 TISSUE EXAM BY PATHOLOGIST

Is this correct ? Yes// YES<ENTER>
Storing LMIP Workload
Autopsy protocol & ICD coding [LRAPAUDAA] option

The Autopsy protocol & ICD coding [LRAPAUDAA] option allows entry and edit of autopsy summary and ICD CM codes for an unreleased report. CPT coding is also permitted regardless of the release status of the report.

- Within the ‘Select Accession Number/Pt name:’ area, the ‘Releasing Pathologist:’ prompt has been changed to ‘Provider:’ Note: The name entered at this new ‘Provider’ prompt must be an active provider.

- Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name is now displayed CPT coding in the selected CPT coding data.

Example: Autopsy protocol & ICD coding [LRAPAUDAA] option contains the following changes:

Within the ‘Select Accession Number/Pt name:’ area, the prompt ‘Releasing Pathologist:’ has been changed to ‘Provider:’

Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name is displayed in the selected CPT coding data.

NOTE: VistA AP ICD-10 Remediation Patch LR*5.2*422 replaces "ICD9CM" with "ICD" in the following Menu Option:
- "Autopsy protocol & ICD9CM coding [LRAPAUDAA]" is now "Autopsy protocol & ICD coding [LRAPAUDAA]".

Select Laboratory DHCP Menu Option: 8<ENTER> Anatomic pathology

Select Anatomic pathology Option: ??<ENTER>

D Data entry, anat path ...
E Edit/modify data, anat path ...
I Inquiries, anat path ...
L Log-in menu, anat path ...
P Print, anat path ...
R SNOMED field references ...
S Supervisor, anat path ...
V Verify/release menu, anat path ...
C Clinician options, anat path ...
W Workload, anat path ...

Enter ?? for more options, ?? for brief descriptions, ?OPTION for help text.

Select Anatomic pathology Option: D<ENTER> Data entry, anat path

Select Data entry, anat path Option: AU<ENTER> Data entry for autopsies
Use of the Software

Select Data entry for autopsies Option: **AI<ENTER>**  Autopsy protocol & **ICD** coding

**AUTOPSY (NAU)**

Data entry for 2007 ? **YES/NO<ENTER>**  (NO)

Select Accession Number/Pt name: **1<ENTER>**  for 2006
LRAPPATIENT, FOUR  ID: 000-00-4444

**DATE AUTOPSY REPORT COMPLETED: OCT 26, 2006 11:44<ENTER>**
Select **AUTOPSY COMMENTS: TESTING FOR UNDEFINED ERROR<ENTER>**

**CLINICAL DIAGNOSES:**
  1>CLINICAL DIAGNOSES TESTING
SELECT OPTION: **<ENTER>**
**PATHOLOGICAL DIAGNOSES:**
  1>PATHOLOGICAL DIAGNOSES TESTING
SELECT OPTION: **<ENTER>**
Select **AUTOPSY QA CODE:** **<ENTER>**
Select **AUTOPSY ICD CODE:** **<ENTER>**
Enter CPT coding? **NO/Y<ENTER>**  **YES**

**Provider:** LRAPPROVIDER, TWO//  **LAP**
Select CPT codes: **88304<ENTER>**

LRAPPATIENT, FIVE  000-00-8790  DOB: Jan 01, 1900  Collection Date: Oct 12, 2006
  Acc #: NAU 06 1  Loc: 1 TEST (NORTH)
  Specimen:
    Test(s);
    **Pathologist:** LRAPPATHOLOGIST, ONE

Selected CPT Codes

(1)  **88304 TISSUE EXAM BY PATHOLOGIST**

Is this correct ? **YES/<ENTER>**  **YES**
Storing LMIP Workload

Select Accession Number/Pt name:^<ENTER>
FS/Gross/Micro/Dx [LRAPDGM] option

The FS/Gross/Micro/Dx [LRAPDGM] option is used to edit the frozen section and gross descriptions and to enter the microscopic and diagnosis descriptions for an unreleased report. CPT coding may be entered regardless of the release status of the report.

- Within the ‘Select Accession Number/Pt name:’ area, the ‘Releasing Pathologist:’ prompt has been changed to ‘Provider:’ Note: The name entered at this new ‘Provider’ prompt must be an active provider.

- Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name is now displayed CPT coding in the selected CPT coding data.

Example: FS/Gross/Micro/Dx [LRAPDGM] option contains the following modifications:

Within the ‘Select Accession Number/Pt name:’ area, the prompt ‘Releasing Pathologist:’ has been changed to ‘Provider:’

Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name is displayed in the selected CPT coding data.

NOTE: VistA AP ICD-10 Remediation Patch LR*5.2*422 replaces "ICD9CM" with "ICD" in the following Menu Option:
- FS/Gross/Micro/Dx/ICD9CM Coding [LRAPDGI]" is now "FS/Gross/Micro/Dx/ICD Coding [LRAPDGI]".

Select Laboratory DHCP Menu Option: 8<ENTER> Anatomic pathology

Select Anatomic pathology Option: ? <ENTER>

D Data entry, anat path ...
E Edit/modify data, anat path ...
I Inquiries, anat path ...
L Log-in menu, anat path ...
P Print, anat path ...
R SNOMED field references ...
S Supervisor, anat path ...
V Verify/release menu, anat path ...
C Clinician options, anat path ...
PUR LR*5.2*309 DATA PURGE
PRN LR*5.2*309 DUPLICATE DATA REPORT
W Workload, anat path ...

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.
Use of the Software

Select Anatomic pathology Option: D<ENTER>  Data entry, anat path

Select Data entry, anat path Option: ?<ENTER>

  AU   Data entry for autopsies ...
  BS   Blocks, Stains, Procedures, anat path
  CO   Coding, anat path ...
  GD   Clinical Hx/Gross Description/FS
  GM   FS/Gross/Micro/Dx
  GS   FS/Gross/Micro/Dx/SNOMED Coding
  GI   FS/Gross/Micro/Dx/ICD Coding
  OR   Enter old anat path records
  SR   Supplementary Report, Anat Path
  SS   Spec Studies-EM;Immuno;Consult;Pic, Anat Path

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select Data entry, anat path Option: GM<ENTER>  FS/Gross/Micro/Dx

Select ANATOMIC PATHOLOGY SECTION: SURGICAL PATHOLOGY<ENTER>

SURGICAL PATHOLOGY (NSP)

Data entry for 2007 ? YES/<ENTER>  (YES)

Select Accession Number/Pt name: 1<ENTER>  for 2007
LRAPPATIENT,ONE  ID: 000-00-1111
Specimen(s): <ENTER>
tissue
FROZEN SECTION: <ENTER>
  1>
GROSS DESCRIPTION: <ENTER>
  1>gross description
EDIT Option: <ENTER>
MICROSCOPIC DESCRIPTION: <ENTER>
  1>microscopic description
EDIT Option: <ENTER>
SURGICAL PATH DIAGNOSIS: <ENTER>
  1>surg path diagnosis
EDIT Option: <ENTER>
PATHOLOGIST: LRAPPATHOLOGIST,ONE// <ENTER>
DATE REPORT COMPLETED: FEB 27,2007//<ENTER>
TC CODE: <ENTER>
Enter CPT coding? NO// Y<ENTER>  YES

Provider: LRAPPROVIDER, TWO //     LAP
Would you like to see PCE CPT Information? No/<ENTER>  NO
Select CPT codes: 88304<ENTER>

LRAPPATIENT,FOUR             000-00-4444         DOB: Mar 02, 1955
Collection Date: Feb 27, 2007@14:53
    Acc #: NSP 07 1
    PCE ENC # 779;
    Loc: BB
Specimen:
    Tissue Specimens:
        tissue
    Test(s): SURGICAL PATHOLOGY LOG-IN/
        Pathologist: LRAPPATHOLOGIST,ONE

Selected CPT Codes
(1) 88304 TISSUE EXAM BY PATHOLOGIST

Is this correct? Yes/<ENTER>  YES

Sending PCE Workload
Visit # 779
Storing LMIP Workload
Use of the Software

**FS/Gross/Micro/Dx/SNOMED Coding [LRAPDGS] option**

The FS/Gross/Micro/Dx/SNOMED Coding [LRAPDGS] option allows review of gross specimen and frozen section descriptions and entry of microscopic description and diagnoses for an unreleased report. SNOMED coding and CPT coding are permitted regardless of the release status of the report:

- Within the ‘Select Accession Number/Pt name:’ area, the ‘Releasing Pathologist:’ prompt has been **changed** to ‘Provider:’  **Note:** The name entered at this **new** ‘Provider’ prompt **must** be an active provider.

- Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name is now **displayed** CPT coding in the selected CPT coding data.

**Example:** FS/Gross/Micro/Dx/SNOMED Coding [LRAPDGS] option

This option contains the following **changes**:

Within the ‘Select Accession Number/Pt name:’ area, the prompt ‘Releasing Pathologist:’ has been **changed** to ‘Provider:’

Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name is **displayed** in the selected CPT coding data.

**NOTE:** VistA AP ICD-10 Remediation Patch LR*5.2*422 replaces "ICD9CM" with "ICD" in the following Menu Option:

- FS/Gross/Micro/Dx/ICD9CM Coding [LRAPDGI]" is now "FS/Gross/Micro/Dx/ICD Coding [LRAPDGI]".

Select Laboratory DHCP Menu Option: 8<ENTER>  Anatomic pathology

Select Anatomic pathology Option: ?<ENTER>

D  Data entry, anat path ...
E  Edit/modify data, anat path ...
I  Inquiries, anat path ...
L  Log-in menu, anat path ...
P  Print, anat path ...
R  SNOMED field references ...
S  Supervisor, anat path ...
V  Verify/release menu, anat path ...
C  Clinician options, anat path ...
W  Workload, anat path ...
Select Anatomic pathology Option: D<ENTER> Data entry, anat path

Select Data entry, anat path Option: {?<ENTER>}

AU     Data entry for autopsies ...
BS     Blocks, Stains, Procedures, anat path
CO     Coding, anat path ...
GD     Clinical Hx/Gross Description/FS
GM     FS/Gross/Micro/Dx
GS     FS/Gross/Micro/Dx/SNOMED Coding
GI     FS/Gross/Micro/Dx/ICD Coding
OR     Enter old anat path records
SR     Supplementary Report, Anat Path
SS     Spec Studies-EM;Immuno;Consult;Pic, Anat Path

Select Data entry, anat path Option: GS<ENTER> FS/Gross/Micro/Dx/SNOMED Coding

Select ANATOMIC PATHOLOGY SECTION: surgICAL PATHOLOGY<ENTER>

SURGICAL PATHOLOGY (NSP)

Enter Etiology, Function, Procedure & Disease ? NO//<ENTER> (NO)

Data entry for 2007 ? YES//<ENTER> (YES)

Select Accession Number/Pt name: 1<ENTER> for 2007
LRAPPATIENT,FIVE ID: 000-00-5555
Specimen(s):<ENTER>
tissue

FROZEN SECTION: <ENTER>
  1>
GROSS DESCRIPTION: <ENTER>
  1>gross description
EDIT Option: <ENTER>
MICROSCOPIC DESCRIPTION: <ENTER>
  1>microscopic description
EDIT Option: <ENTER>
SURGICAL PATH DIAGNOSIS:
  1>surg path diagnosis
EDIT Option: <ENTER>
PATHOLOGIST: LRAPPATHOLOGIST,ONE //<ENTER>
DATE REPORT COMPLETED: FEB 27,2007//<ENTER>
TC CODE: <ENTER>
Select ORGAN/TISSUE: <ENTER>
Enter CPT coding? NO// Y<ENTER> YES
Use of the Software

Provider: LRAPPROVIDER, ONE<ENTER> // LAP

Would you like to see PCE CPT Information? No/<ENTER> NO

Select CPT codes: 88304<ENTER>

LRAPPATIENT, FIVE 000-00-5555 DOB: Mar 02, 1955
Collection Date: Feb 27, 2007@14:53
Acc #: NSP 07 1 Loc: BB
PCE ENC # 779; 779;
Specimen:
Tissue Specimens:
tissue
Test(s); SURGICAL PATHOLOGY LOG-IN/
Pathologist: LRAPPATHOLOGIST, ONE

Selected CPT Codes
(1) 88304 TISSUE EXAM BY PATHOLOGIST

Is this correct? Yes/<ENTER> YES

Sending PCE Workload
Visit # 779
Storing LMIP Workload

Select Accession Number/Pt name:^<ENTER>
FS/Gross/Micro/Dx/ICD Coding [LRAPDGI] option

The FS/Gross/Micro/Dx/ICD Coding [LRAPDGI] option allows review of gross specimen and frozen descriptions and entry of microscopic and diagnosis descriptions and ICD CM coding for each accession number. This is permitted for unreleased reports only. CPT coding is permitted regardless of the release status of the report.

- Within the ‘Select Accession Number/Pt name:’ area, the ‘Releasing Pathologist:’ prompt has been **changed** to ‘Provider:’ **Note:** The name entered at this **new** ‘Provider’ prompt must be an active provider.

- Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name is now **displayed** CPT coding in the selected CPT coding data.

**Example:** FS/Gross/Micro/Dx/ICD Coding [LRAPDGI] option contains the following **changes:**

Within the ‘Select Accession Number/Pt name:’ area, the prompt ‘Releasing Pathologist:’ has been **changed** to ‘Provider:’

Within the ‘Select CPT codes:’ area, the ‘pathologist’ or ‘cytotechnologist’ name is **displayed** in the selected CPT coding data.

**NOTE:** VistA AP ICD-10 Remediation Patch LR*5.2*422 replaces "ICD9CM" with "ICD" in the following Menu Option:

- FS/Gross/Micro/Dx/ICD9CM Coding [LRAPDGI]" is now "FS/Gross/Micro/Dx/ICD Coding [LRAPDGI]".

Select Laboratory DHCP Menu Option: 8<ENTER> Anatomic pathology

Select Anatomic pathology Option: ?<ENTER>

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>D</td>
<td>Data entry, anat path ...</td>
</tr>
<tr>
<td>E</td>
<td>Edit/modify data, anat path ...</td>
</tr>
<tr>
<td>I</td>
<td>Inquiries, anat path ...</td>
</tr>
<tr>
<td>L</td>
<td>Log-in menu, anat path ...</td>
</tr>
<tr>
<td>P</td>
<td>Print, anat path ...</td>
</tr>
<tr>
<td>R</td>
<td>SNOMED field references ...</td>
</tr>
<tr>
<td>S</td>
<td>Supervisor, anat path ...</td>
</tr>
<tr>
<td>V</td>
<td>Verify/release menu, anat path ...</td>
</tr>
<tr>
<td>C</td>
<td>Clinician options, anat path ...</td>
</tr>
<tr>
<td>W</td>
<td>Workload, anat path ...</td>
</tr>
</tbody>
</table>

Select Data entry, anat path Option: D<ENTER> Data entry, anat path
Use of the Software

AU     Data entry for autopsies ...  
BS     Blocks, Stains, Procedures, anat path  
CO     Coding, anat path ...  
GD     Clinical Hx/Gross Description/FS  
GM     FS/Gross/Micro/Dx  
GS     FS/Gross/Micro/Dx/SNOMED Coding  
GI     FS/Gross/Micro/Dx/ICD Coding  
OR     Enter old anat path records  
SR     Supplementary Report, Anat Path  
SS     Spec Studies-EM;Immuno;Consult;Pic, Anat Path

Select Data entry, anat path Option: GI<ENTER>  FS/Gross/Micro/Dx/ICD Coding

Select ANATOMIC PATHOLOGY SECTION: SURICAL PATHOLOGY<ENTER>
SURICAL PATHOLOGY (NSP)

Data entry for 2007 ? YES//<ENTER>  (YES)

Select Accession Number/Pt name: 1<ENTER>  for 2007
LRAPPATIENT,Three  ID: 000-00-3333  
Specimen(s): <ENTER>  
tissue

FROZEN SECTION: <ENTER>  
1>
GROSS DESCRIPTION: <ENTER>  
1>gross description
EDIT Option: <ENTER>
MICROSCOPIC DESCRIPTION: <ENTER>  
1>microscopic description
EDIT Option: <ENTER>
SURGICAL PATH DIAGNOSIS: <ENTER>  
1>surg path diagnosis
EDIT Option: <ENTER>
PATHOLOGIST: LRAPPATHOLOGIST, THREE //<ENTER>
DATE REPORT COMPLETED: FEB 27,2007/<ENTER>
TC CODE: <ENTER>
Select ICD DIAGNOSIS: <ENTER>
Enter CPT coding? NO// y<ENTER>  YES

Provider: LRAPPROVIDER, TWO//  LRT
Would you like to see PCE CPT Information? No//<ENTER>  NO

Select CPT codes: 88304<ENTER>

LRAPPATIENT,THREE  000-00-3333  DOB: Mar 02, 1955
Collection Date: Feb 27, 2007@14:53
Acc #: NSP 07 1  Loc: BB
PCE ENC # 779;779;779;
Specimen:
Tissue Specimens:
Selected CPT Codes

(1) 88304 TISSUE EXAM BY PATHOLOGIST

Is this correct? Yes/<ENTER>  YES
Sending PCE Workload
Visit # 779
Storing LMIP Workload

Select Accession Number/Pt name:^<ENTER>
Log-in, anat path [LRAPLG] option

The Log-in, anat path [LRAPLG] option is used to log-in accessions in anatomic pathology. The user must hold the appropriate key to the accession area. The option has been enhanced to list the primary care physician as the default name in the SPECIMEN SUBMITTED BY prompt.

The Log-in, anat path [LRAPLG] option contains the following modification:
- The ‘Date/time Specimen taken:’ prompt default has been changed from TODAY (date only) to NOW (date and time).

Example: Log-in, anat path [LRAPLG] option contains the following change:

This example is displaying the ‘Date/time Specimen taken:’ prompt default change from TODAY (date only) to NOW (date and time).

```plaintext
Select Log-in menu, anat path Option: LI<ENTER>  Log-in, anat path
Select ANATOMIC PATHOLOGY SECTION:  SURGICAL PATHOLOGY
Log-In for 2007 ? YES/<ENTER>  (YES)
Select Patient Name:  LRPATIENT, TWO<ENTER>  3-2-55  0000022222
NO
NSC VETERAN
LRPATIENT, TWO ID: 000-00-2222 Physician: LRPHYSICIAN,ONE<ENTER>
AGE: 52  DATE OF BIRTH: MAR 2,1955
Ward on Adm:  Service:<ENTER>
Adm Date: OCT 8,1991@14:00  Adm DX: SDF:<ENTER>
Present Ward: BB  Primary MD: LRPHYSICIAN, ONE:<ENTER>
PATIENT LOCATION: BB/<ENTER>  BLOOD BANK
Checking surgical record for this patient...
No operations on record in the past 7 days for this patient.
Assign SURGICAL PATHOLOGY (NSP) accession #: 2 ? YES/<ENTER>  (YES)
Date/time Specimen taken: NOW/<ENTER>  (MAR 06, 2007@10:51)
SURGEON/PHYSICIAN:  LRPHYSICIAN,TWO  LRT
SPECIMEN SUBMITTED BY:
Select SPECIMEN:  tissue<ENTER>
Select SPECIMEN: <ENTER>
DATE/TIME SPECIMEN RECEIVED:  NOW/<ENTER>  (MAR 06, 2007@10:51)
PATHOLOGIST:  LRPATHOLOGIST,ONE  LRP
Select COMMENT: <ENTER>
FROZEN SECTION: <ENTER>
1><ENTER>
Select Patient Name: ^<ENTER>:
```
# Glossary

The following glossary of terms is related to VistA Laboratory Anatomic Pathology (AP) CPT Code Corrections LR*5.2*308 software release:

<table>
<thead>
<tr>
<th>Glossary of Terms</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accession Area:</td>
<td>A functional area or department in the laboratory where specific tests are performed. The accession area defines the departmental designation contained in each accession.</td>
</tr>
<tr>
<td>Accession Number:</td>
<td>A unique alpha-numeric (combination of letters and numbers) assigned to an individual patient specimen when it is received in the laboratory. The accession is assigned by the computer and contains the laboratory departmental designation, the date, and an accession number. This accession serves as identification of the specimen as it is processed through the laboratory. (Example: HE 09121). It also associates billable items with a specific billable event such as an outpatient visit or an inpatient stay.</td>
</tr>
<tr>
<td>ADPAC:</td>
<td>Automated Data Processing Application Coordinator</td>
</tr>
<tr>
<td>Alert:</td>
<td>Brief on-line notice 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>AP:</td>
<td>Anatomic Pathology</td>
</tr>
<tr>
<td>Glossary of Terms</td>
<td>Description</td>
</tr>
<tr>
<td>------------------</td>
<td>-------------</td>
</tr>
<tr>
<td><strong>Anatomic Pathology Reports:</strong></td>
<td>Anatomic Pathology reports (also called AP reports) include reports for all sections: Surgical Pathology, Cytology (Cytopathology), Electron Microscopy, and Autopsy Pathology sections.</td>
</tr>
<tr>
<td><strong>API:</strong></td>
<td>Application Programming Interface</td>
</tr>
<tr>
<td><strong>Audit Trail:</strong></td>
<td>A chronological record of computer activity automatically maintained to trace the use of the computer.</td>
</tr>
<tr>
<td><strong>Authorized Signer:</strong></td>
<td>A user who has been granted proper authority to sign out and release anatomic pathology reports. In general, authorized signers are pathologists and cytotechnologists (i.e., cytotechnologists for negative GYN only).</td>
</tr>
<tr>
<td><strong>Authorized User:</strong></td>
<td>A user who has been granted access to a menu option or options, and/or the user is properly defined in the system to perform a function.</td>
</tr>
<tr>
<td><strong>Computerized Patient Record System:</strong></td>
<td>Computerized Patient Record System (CPRS) is a VistA software application that facilitates the entry, review, and modification of patient-related information, as well as a means of ordering services such as lab tests.</td>
</tr>
<tr>
<td><strong>CPRS:</strong></td>
<td>Computerized Patient Record System</td>
</tr>
<tr>
<td><strong>CPT:</strong></td>
<td>Current Procedural Terminology</td>
</tr>
<tr>
<td><strong>Current Procedural Terminology:</strong></td>
<td>Current Procedural Terminology (CPT) is a uniform system of codes (such as identifiers) associated with specific procedures (such as tests).</td>
</tr>
<tr>
<td><strong>DBIA:</strong></td>
<td>Data Base Integration Agreement</td>
</tr>
<tr>
<td><strong>DSM:</strong></td>
<td>Digital Standard Mumps</td>
</tr>
<tr>
<td>Glossary of Terms</td>
<td>Description</td>
</tr>
<tr>
<td>------------------</td>
<td>-------------</td>
</tr>
<tr>
<td><strong>Electronic Signature:</strong></td>
<td>A code, entered by a user, which represents his or her legally binding signature.</td>
</tr>
<tr>
<td><strong>Encryption:</strong></td>
<td>Scrambling data or messages with a cipher or code so that they are unreadable without a secret key. In some cases encryption algorithms are one directional; they only encode and the resulting data cannot be unscrambled (e.g., access/verify codes).</td>
</tr>
<tr>
<td><strong>Free Text:</strong></td>
<td>The use of any combination of numbers, letters, and symbols when entering data.</td>
</tr>
<tr>
<td><strong>Global:</strong></td>
<td>In the MUMPS language, a global is a tree-structured data file stored in the common database on the disk.</td>
</tr>
<tr>
<td><strong>HSD&amp;D:</strong></td>
<td>Health Systems Design &amp; Development</td>
</tr>
<tr>
<td><strong>ICD-9:</strong></td>
<td>International Classification of Disease, 9th edition</td>
</tr>
<tr>
<td><strong>ICD-10:</strong></td>
<td>International Classification of Diseases, 10th edition</td>
</tr>
<tr>
<td><strong>NT:</strong></td>
<td>New Technology</td>
</tr>
<tr>
<td><strong>OI:</strong></td>
<td>Office of Information</td>
</tr>
<tr>
<td><strong>PCE:</strong></td>
<td>PATIENT CARE ENCOUNTER (PCE).</td>
</tr>
<tr>
<td><strong>Sections:</strong></td>
<td>Anatomic Pathology (AP) work is divided into four areas or sections: Surgical Pathology, Cytology (Cytopathology), Electron Microscopy, and Autopsy Pathology.</td>
</tr>
<tr>
<td><strong>Security Key:</strong></td>
<td>Level of security that can be applied to menu options. Options can be locked with a security key. Only users given the appropriate key can use a locked option. If the user does not have the key, then even if the locked option is on the user's menu, the user cannot to use it. Options that provide specialized or supervisory access are usually locked with a security key.</td>
</tr>
<tr>
<td>Glossary of Terms</td>
<td>Description</td>
</tr>
<tr>
<td>-------------------</td>
<td>-------------</td>
</tr>
<tr>
<td>SF 515:</td>
<td>Standard Form 515. Anatomic Pathology report format design for the Cytology, Electron Microscopy, and Surgical Pathology sections.</td>
</tr>
<tr>
<td>SNOMED:</td>
<td>Systematized Nomenclature of Medicine</td>
</tr>
<tr>
<td>SNOMED CT:</td>
<td>Systemized Nomenclature of Medicine Clinical Terms</td>
</tr>
<tr>
<td>Supplementary Report:</td>
<td>An electronically signed report that adds additional data to the original report. The additions do not change any data that had been previously verified. This supplement becomes part of the whole report.</td>
</tr>
<tr>
<td>TIU:</td>
<td>Text Integration Utility</td>
</tr>
<tr>
<td>VA:</td>
<td>Department of Veterans Affairs</td>
</tr>
<tr>
<td>VA FileMan:</td>
<td>A set of programs used to enter, maintain, access, and manipulate a (also called database management system consisting of files. A package of on-line VA FileMan) computer routines written in the MUMPS language which can be used as a stand-alone database system or as a set of application utilities. In either form, such routines can be used to define, enter, edit, and retrieve information from a set of computer-stored files.</td>
</tr>
<tr>
<td>VAMC:</td>
<td>Department of Veterans Affairs Medical Center</td>
</tr>
<tr>
<td>VC:</td>
<td>Veterans Center</td>
</tr>
<tr>
<td>VDL:</td>
<td>VistA Documentation Library</td>
</tr>
<tr>
<td>VDSI:</td>
<td>VistA Data Systems and Integration</td>
</tr>
<tr>
<td>Glossary of Terms</td>
<td>Description</td>
</tr>
<tr>
<td>------------------------</td>
<td>--------------------------------------------------------------------</td>
</tr>
<tr>
<td>VHA:</td>
<td>Veterans Health Administration</td>
</tr>
<tr>
<td>VistA:</td>
<td>Veterans Health Information Systems and Technology Architecture</td>
</tr>
<tr>
<td>VistA Laboratory:</td>
<td>Entire Laboratory application consisting of the following modules: Anatomic Pathology, Microbiology, and Routine Clinical Lab.</td>
</tr>
</tbody>
</table>

Glossary