Compensation and Pension Record Interchange (CAPRI)

CAPRI TEMPLATE & AMIE WORKSHEET UPDATES

Release Notes

Patch: DVBA*2.7*150

March 2010

Department of Veterans Affairs
Office of Enterprise Development
Management & Financial Systems
Preface

Purpose of the Release Notes

The Release Notes document describes the new features and functionality of patch DVBA*2.7*150 (CAPRI TEMPLATE & AMIE WORKSHEET UPDATES).

The information contained in this document is not intended to replace the CAPRI User Manual. The CAPRI User Manual should be used to obtain detailed information regarding specific functionality.
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1. Overview

This patch introduces changes and enhancements to the AUTOMATED MED INFO EXCHANGE (AMIE) V 2.7 package in support of Compensation and Pension Record Interchange (CAPRI) templates and Compensation and Pension (C&P) examination worksheets.

The following provides a high level overview of patch DVBA*2.7*150 (CAPRI TEMPLATE & AMIE WORKSHEET UPDATES).

1.1 CAPRI - Template Content Changes

The Veterans Benefits Administration Veterans Affairs Central Office has approved content changes for the following CAPRI exam template.

- AUDIO

1.2 C&P – AMIE Examination Worksheet Content Changes

The Veterans Benefits Administration Veterans Affairs Central Office has approved content changes for the following AMIE C&P examination worksheets.

- AUDIO
  - GENERAL MEDICAL

1.3 CAPRI Template Defects

Defects have been addressed within the following CAPRI template:

- ESOPHAGUS AND HIATAL HERNIA
- AUDIO

1.4 AUDIO Template Workflow Changes

CAPRI AUDIO Template Workflow DVBA*2.7*150 has been updated to include changes made by patch DVBA*2.7*150 (CAPRI TEMPLATE & AMIE WORKSHEET UPDATES). These changes are detailed further in the Functional Overview section.

- Section 2 – Replaced History screen shot, expanded Note to Examiners, changed Tinnitus section
- Section 3 – Replaced Physical Exam tab screen shot, Added Description of speech recognition performance section
- Section 5 – Replaced Diagnosis tab screen shot, moved For VA purposes paragraph; added tinnitus pop-up messages, changed tinnitus-related pop-up message, edited Degree of Loss
2. Associated Remedy Tickets and New Service Requests

The following section lists the Remedy tickets and/or New Service Requests associated with this patch.

2.1 Associated Remedy Ticket(s):

HD0000000359580 - Updates to the AMIE Audio C&P Exam worksheet
HD0000000384748 - Updates to the AMIE General Medical C&P Exam worksheet

2.2 Associated New Service Request(s):

NONE
3. Functional Overview

The following section contains an overview of the changes and primary functionality that are being delivered in this patch.

3.1 CAPRI - Template Content Changes

The Veterans Benefits Administration Veterans Affairs Central Office has approved content changes for the following CAPRI exam template based on updates to its corresponding C&P examination worksheet.

- AUDIO

This patch implements the content changes for this template which is accessible through the Compensation & Pension Worksheet Module (CPWM) of the CAPRI GUI.

3.1.1 History Tab

3.1.1.1. Audio: Note to Examiners text updated:

When the Note to Examiners button is selected a pop-up window labeled “Audio: Note to Examiners” displays read only text. The Audio: Note to Examiners text displayed has been enhanced and now is displayed as follows:

3.1.1.1. Audio Note to Examiners Screen Shot

![Audio Note to Examiners Screen Shot](insert_image_url)
3.1.1.2.  Tinnitus section

The Location of tinnitus (Left/Right/Bilateral/Indeterminate) question and text box labeled “Date and circumstances of onset” was removed from the template.

3.1.2.  Physical Exam Tab

The Speech Recognition performance section was updated to include a Description of speech recognition performance for the Right and Left Ear.

3.1.2.1.  The following read only text was added following the Description of speech recognition performance:

Thresholds should not exceed 100 decibels or the tolerance level. (Label/Read Only Text)

3.1.2.2.  Guidance for Pausing was provided as follows:

When the **Guidance for Pausing** button is selected, a pop-up window labeled **Audio: Pausing Guidance** is displayed:

**Figure 3.1.2.2: Audio: Pausing Guidance**

Audio: Pausing Guidance

Pausing: Examiners should pause when necessary during speech recognition tests, in order to give the veteran sufficient time to respond. This will ensure that the test results are based on actual hearing loss rather than on the effects of other problems that might slow a veteran’s response. There are a variety of problems that might require pausing, for example, the presence of cognitive impairments. It is up to the examiner to determine when to use pausing and the length of the pauses.

[Close button]

3.1.2.3.  Guidance for Modified Performance-Intensity (Label/Button)

When the **Guidance for Modified Performance-Intensity** button is selected, a pop-up window labeled **Audio: Modified Performance-Intensity Function Guidance** is displayed:

**Figure 3.1.2.3: Audio: Modified Performance-Intensity Function Guidance**

<table>
<thead>
<tr>
<th>Audio: Modified Performance-Intensity Function Guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Need for a modified performance-intensity function. The normal speech recognition performance is 94% or better for a full (50 word) list. If speech recognition is worse than 94% after presentation of a full list, then a modified performance-intensity function must be obtained to determine best performance (see Note to Examiners for description of procedures). When describing speech recognition performance use these terms:</td>
</tr>
<tr>
<td>Percent</td>
</tr>
<tr>
<td>---------</td>
</tr>
<tr>
<td>100-94%</td>
</tr>
<tr>
<td>90-80%</td>
</tr>
<tr>
<td>70-70%</td>
</tr>
<tr>
<td>Less than 70%</td>
</tr>
</tbody>
</table>

[Close button]
3.1.3. Diagnosis Tab

3.1.3.1. The responses to the question Is tinnitus as likely as not a symptom associated with the hearing loss? were modified. The new responses are:

- Yes
- No, it is as likely as not that tinnitus is associated with another medical condition
- Etiology of tinnitus cannot be determined on the basis of available information without resorting to speculation.

3.1.3.2. Pop-up message wording for any response other than Yes to the question Is tinnitus as likely as not a symptom associated with the hearing loss? was changed from:

Figure 3.1.3.2a: Audio: Modified Performance-Intensity Function Guidance

The complaint of tinnitus associated with conditions other than hearing loss requires referral to another provider (appropriate provider to be determined by VAMC C&P Director or other responsible person in the case of contractors) for determination of etiology.

… to:

Figure 3.1.3.2b: Audio: Modified Performance-Intensity Function Guidance

In this case, it will be up to the regional office to determine, based on all of the evidence of record, whether further non-audiological examination is needed to determine the etiology of tinnitus.

3.2 C&P – AMIE Examination Worksheet Content Changes

3.2.1. AUDIO Worksheet

The Veterans Benefits Administration Veterans Affairs Central Office has approved content changes for the following Automated Medical Information Exchange (AMIE) C&P examination worksheet.

- AUDIO
This patch implements the content changes for the AMIE C&P examination worksheet which is accessible through the VistA AMIE software package. The changes to the worksheet include:

a. Under Narrative, expanded information about performance intensity function.

b. Under B6, removed question about whether tinnitus is unilateral or bilateral.

c. Under B6, removed question about frequency and duration of tinnitus.

d. Under C1, changed "Measure" to "Measure and record."

e. Under C1, edited language under puretone threshold charts for clarity.

f. Under C2, added information about two procedures for examinations:
   i. When performance intensity function is needed and how it is described.
   ii. The possible need for pausing when conducting speech recognition tests.

g. Under E3, removed the statement about requiring a referral to another provider if tinnitus is associated with conditions other than hearing loss and replaced it with a description of the circumstances under which the Veterans Benefit Administration (VBA) regional office needs to determine whether further non-audiological examination is needed, based on their review of all evidence of record.

The following Remedy ticket is associated with this worksheet update:

Remedy Ticket HD00000000359580 - Updates to the AMIE Audio C&P Exam worksheet

Problem
Veterans Benefits Administration Veterans Affairs Central Office has approved content changes to the AMIE Audio C&P examination worksheet (#1305).

Solution
Post-init routine DVBA150P will deactivate the current Audio C&P examination worksheet in the AMIE EXAM (#396.6) file and activate the updated Audio worksheet in the same file. The current Internal Entry Number (IEN) is 228. The new IEN will be 233.

- Created routine DVBCWAUB which will contain the new text for the AUDIO C&P examination worksheet.
- Created routine DVBCWAUA which will access the new text routine and print the blank Audio C&P examination worksheet.

3.2.2. GENERAL MEDICAL Worksheet
The Veterans Benefits Administration Veterans Affairs Central Office has approved content changes for the following C&P examination worksheet.

- GENERAL MEDICAL
This patch implements the content changes for the C&P examination worksheet which are accessible through the AMIE software package.

The General Medical AMIE Worksheet has been changed to update the DeLuca criteria for Joint range-of-motion examinations and to bring the worksheet into closer alignment with the computerized template.

The changes to the worksheet include:

a. Under History:
   i. Removed occupational history for pension and individual unemployability claims.
   ii. Added questions about flareups of joints or muscles.
   iii. Added detailed questions about neoplasms and their treatment.

b. Under Physical Examination:
   i. Under Posture and gait, asked for name of condition requiring ambulatory aids.
   ii. Under Skin, removed item about second and third degree burns and referenced the Scars worksheet for further guidance.
   iii. Under Eyes, asked for corrected visual acuity and gross visual field assessment.
   iv. Under Ears, asked if hearing is grossly normal and added tinnitus questions.
   v. Under Nose, sinuses, mouth, throat, defined episodes of incapacitation for sinusitis.
   viii. Under Musculoskeletal, changed range of motion instructions to same as under the Joints worksheet. For disc disease, asked for total duration of incapacitating episodes.
   ix. Under Psychiatric, modified items to be described to conform to template.

c. Under Diagnostic and Clinical Tests: Moved discussion of X-rays for arthritis here from Musculoskeletal P.E.

d. Under Diagnosis: Added material concerning capacity to handle financial affairs.

e. General: Reorganized some material.

The following Remedy ticket is associated with this worksheet update:

**Remedy Ticket HD384748 - Updates to the AMIE General Medical C&P Exam worksheet**

**Problem**
Veterans Benefits Administration Veterans Affairs Central Office has approved content changes to the AMIE General Medical C&P examination worksheet (#0505).
Solution

Post-init routine DVBA150P will deactivate the current General Medical C&P examination worksheet in the AMIE EXAM (#396.6) file and activate the updated General Medical worksheet in the same file. The current Internal Entry Number (IEN) is 161. The new IEN will be 234.

Created routines DVBCWGX4 and DVBCWGX5 which will contain the new text for the GENERAL MEDICAL C&P examination worksheet. Created routine DVBCWGX3 which will access the new text routines and print the blank General Medical C&P examination worksheet.

3.3 CAPRI - Template Defects

There is no Remedy ticket associated with these template defects:

3.3.1. Defect - Merging ESOPHAGUS AND HIATAL HERNIA and RESPIRATORY DISEASES, MISCELLANEOUS Templates

Problem

A defect was reported when merging the ESOPHAGUS AND HIATAL HERNIA and RESPIRATORY DISEASES, MISCELLANEOUS templates. When data is entered into the "Other significant physical findings?" memo box on the "Physical Exam" tab of the ESOPHAGUS AND HIATAL HERNIA template, the data is incorrectly being populated in the "Other significant physical findings:" memo box on the "Physical Exam" tab of the RESPIRATORY DISEASES, MISCELLANEOUS template.

Solution

This defect has been resolved and the data being entered into the "Other significant physical findings" memo box on the "Physical Exam" tab of either the merged ESOPHAGUS AND HIATAL HERNIA and RESPIRATORY DISEASES, MISCELLANEOUS templates will be unique to the exam being performed.

3.3.2. Defect - AUDIO template report not listing "Yes" response to "Are there effects on usual daily activities" on Diagnosis tab

Problem

On the AUDIO template, Diagnosis tab, a reply of "Yes" to the question "Are there effects on usual daily activities:" does not appear on the report unless specific effects are also selected.

Solution

The report has been changed so that a "Yes" response to the question "Are there effects on usual daily activities:" without the selection of specific effects, appears on the report as: "ARE THERE EFFECTS ON USUAL DAILY ACTIVITIES? Yes, but none selected."

4. Software and Documentation Retrieval
4.1 VistA patch DVBA*2.7*150 (CAPRI TEMPLATE & AMIE WORKSHEET UPDATES)

The VistA software is being distributed as a PackMan patch message through the National Patch Module (NPM). The KIDS build for this patch is DVBA*2.7*150.

4.2 User Documentation

The user documentation for this patch may be retrieved directly using FTP. The preferred method is to FTP the files from:

download.vista.med.va.gov

This transmits the files from the first available FTP server. Sites may also elect to retrieve software directly from a specific server as follows:

<table>
<thead>
<tr>
<th>OI&amp;T 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>

The following files will be available:

<table>
<thead>
<tr>
<th>File Name</th>
<th>Format</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>DVBA_27_P150_RN.PDF</td>
<td>Binary</td>
<td>Release Notes</td>
</tr>
<tr>
<td>DVBA_27_P150_AUDIO_WF.PDF</td>
<td>Binary</td>
<td>AUDIO Template Workflow</td>
</tr>
</tbody>
</table>

Documentation may also be retrieved from the VistA Documentation Library (VDL) on the Internet at the following address. This web site is usually updated within 1-3 days of the patch release date.

http://www4.va.gov/vdl/application.asp?appid=133