



**Compensation and Pension Record
Interchange (CAPRI)**

**CAPRI Compensation and Pension
Worksheet Module (CPWM)
Templates and AMIE Worksheet
Disability Benefits Questionnaires
(DBQs)**

**Release Notes
Patch: DVBA*2.7*171**

June 2011

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*171. (CAPRI CPWM TEMPLATES AND AMIE WORKSHEET DBQs).

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.

Table of Contents

- 1. Purpose..... 1
- 2. Overview 1
- 3. Associated Remedy Tickets & New Service Requests 1
- 4. Defects Fixes 1
- 5. Enhancements 2
 - 5.1 CAPRI – DBQ Template Modifications 2
 - 5.2 AMIE–DBQ Worksheet Modifications 2
- 6. Disability Benefits Questionnaires (DBQs)..... 3
 - 6.1. DBQ Initial PTSD 3
 - 6.2. DBQ Review PTSD..... 9
 - 6.3. DBQ Mental Disorders (Other Than PTSD and Eating Disorders)..... 14
- 7. Software and Documentation Retrieval..... 15
 - 7.1 Software..... 15
 - 7.2 User Documentation 15
 - 7.3 Related Documents..... 15

1. Purpose

The purpose of this document is to provide an overview of the enhancements specifically designed for Patch DVBA*2.7*171.

Patch DVBA *2.7*171 (CAPRI CPWM TEMPLATES AND AMIE WORKSHEET DBQs) introduces enhancements and updates made to the AUTOMATED MED INFO EXCHANGE (AMIE) V 2.7 package and the Compensation & Pension Record Interchange (CAPRI) application in support of the new Compensation and Pension (C&P) Disability Benefits Questionnaires (DBQs).

2. Overview

Veterans Benefits Administration Veterans Affairs Central Office (VBAVACO) has approved implementation of the following new Disability Benefits Questionnaires:

- **DBQ INITIAL PTSD**
- **DBQ REVIEW PTSD**
- **DBQ MENTAL DISORDERS (OTHER THAN PTSD AND EATING DISORDERS)**

3. Associated Remedy Tickets & New Service Requests

There are no Remedy tickets or New Service Requests associated with patch DVBA*2.7*171.

4. Defects Fixes

There are no CAPRI DBQ Templates or AMIE – DBQ Worksheet defects fixes associated with patch DVBA*2.7*171.

5. Enhancements

This section provides an overview of the modifications and primary functionality that will be delivered in Patch DVBA*2.7*171.

5.1 CAPRI – DBQ Template Modifications

This patch includes updates made to the following CAPRI DBQ templates approved by the Veterans Benefits Administration Veterans Affairs Central Office (VBAVACO).

Modifications implemented with this patch include updating the following DBQs listed below. Each DBQ lists the changes that were made with this patch.

- **DBQ INITIAL PTSD**
- **DBQ REVIEW PTSD**
- **DBQ MENTAL DISORDERS (OTHER THAN PTSD AND EATING DISORDERS)**

5.2 AMIE–DBQ Worksheet Modifications

VBAVACO has approved modifications for the following AMIE –DBQ Worksheets.

- **DBQ INITIAL PTSD**
- **DBQ REVIEW PTSD**
- **DBQ MENTAL DISORDERS (EXCEPT PTSD AND EATING DISORDERS)**

6. Disability Benefits Questionnaires (DBQs)

The following section illustrates the content of the new questionnaires included in Patch DVBA*2.7*171.

6.1. DBQ Initial PTSD

1. Diagnostic Summary

This section should be completed based on the current examination and clinical findings.

Does the Veteran have a diagnosis of PTSD that conforms to DSM-IV criteria based on today's evaluation?

Yes No

ICD code: _____

If no diagnosis of PTSD, check all that apply:

Veteran's symptoms do not meet the diagnostic criteria for PTSD under DSM-IV criteria

Veteran does not have a mental disorder that conforms with DSM-IV criteria

Veteran has another Axis I and/or II diagnosis. Continue to complete this Questionnaire and/or the Eating Disorders Questionnaire: _____

2. Current Diagnoses

a. Diagnosis #1: _____

ICD code: _____

Indicate the Axis category:

Axis I Axis II

Comments, if any: _____

Diagnosis #2: _____

ICD code: _____

Indicate the Axis category:

Axis I Axis II

Comments, if any: _____

Diagnosis #3: _____

ICD code: _____

Indicate the Axis category:

Axis I Axis II

Comments, if any: _____

Diagnosis #4: _____

ICD code: _____

Indicate the Axis category:

Axis I Axis II

Comments, if any: _____

If additional diagnoses, describe (using above format): _____

b. Axis III - medical diagnoses (to include TBI): _____

ICD code: _____

Comments, if any: _____

c. Axis IV – Psychosocial and Environmental Problems_(describe, if any): _____

d. Axis V - Current global assessment of functioning (GAF) score: _____
Comments, if any: _____

3. Differentiation of symptoms

a. Does the Veteran have more than one Mental disorder diagnosed?

Yes No

If yes, complete the following question:

b. Is it possible to differentiate what symptom(s) is/are attributable to each diagnosis?

Yes No Not applicable (N/A)

If no, provide reason that it is not possible to differentiate what portion of each symptom is attributable to each diagnosis: _____

If yes, list which symptoms are attributable to each diagnosis: _____

c. Does the Veteran have a diagnosed traumatic brain injury (TBI)?

Yes No Not shown in records reviewed Comments, if any: _____

If yes, complete the following question:

d. Is it possible to differentiate what symptom(s) is/are attributable to each diagnosis?

Yes No Not applicable (N/A)

If no, provide reason that it is not possible to differentiate what portion of each symptom is attributable to each diagnosis: _____

If yes, list which symptoms are attributable to each diagnosis: _____

4. Occupational and social impairment

a. Which of the following best summarizes the Veteran's level of occupational and social impairment with regards to all mental diagnoses?

(Check only one)

- No mental disorder diagnosis
- A mental condition has been formally diagnosed, but symptoms are not severe enough either to interfere with occupational and social functioning or to require continuous medication
- Occupational and social impairment due to mild or transient symptoms which decrease efficiency and ability to perform occupational tasks only during periods of significant stress, or; symptoms controlled by medication
- Occupational and social impairment with occasional decrease in work efficiency and intermittent periods of inability to perform occupational tasks, although generally functioning satisfactorily, with normal routine behavior, self-care and conversation
- Occupational and social impairment with reduced reliability and productivity
- Occupational and social impairment with deficiencies in most areas, such as work, school, family relations, judgment, thinking and/or mood
- Total occupational and social impairment

b. For the indicated level of occupational and social impairment, is it possible to differentiate what portion of the occupational and social impairment indicated above is caused by each mental disorder?

Yes No No other mental disorder has been diagnosed

If no, provide reason that it is not possible to differentiate what portion of the indicated level of occupational and social impairment is attributable to each diagnosis: _____

If yes, list which portion of the indicated level of occupational and social impairment is attributable to each diagnosis: _____

c. If a diagnosis of TBI exists, is it possible to differentiate what portion of the occupational and social impairment indicated above is caused by the TBI?

Yes No No diagnosis of TBI

If no, provide reason that it is not possible to differentiate what portion of the indicated level of occupational and social impairment is attributable to each diagnosis: _____

If yes, list which portion of the indicated level of occupational and social impairment is attributable to each diagnosis: _____

SECTION II:

Clinical Findings:

1. Evidence review

In order to provide an accurate medical opinion, the Veteran's claims folder must be reviewed.

a. Records reviewed (check all that apply):

Claims folder (C-file):

Yes

No

If no, provide reason C-file was not reviewed: _____

Other, please describe: _____

No records were reviewed

b. Was pertinent information from collateral sources reviewed?

Yes No

If yes, describe: _____

2. History

a. Relevant Social/Marital/Family history (pre-military, military, and post-military): _____

b. Relevant Occupational and Educational history (pre-military, military, and post-military): _____

c. Relevant Mental Health history, to include prescribed medications and family mental health (pre-military, military, and post-military): _____

d. Relevant Legal and Behavioral history (pre-military, military, and post-military): _____

e. Relevant Substance abuse history (pre-military, military, and post-military): _____

f. Sentinel Event(s) (other than stressors): _____

g. Other, if any: _____

3. Stressors

The stressful event can be due to combat, personal trauma, other life threatening situations (non-combat related stressors).

NOTE: For VA purposes, "fear of hostile military or terrorist activity" means that a veteran experienced, witnessed, or was confronted with an event or circumstance that involved actual or threatened death or serious injury, or a threat to the physical integrity of the veteran or others, such as from an actual or potential improvised explosive device; vehicle-imbedded explosive device; incoming artillery, rocket, or mortar fire; grenade; small arms fire, including suspected sniper fire; or attack upon friendly military aircraft, and the veteran's response to the event or circumstance involved a psychological or psycho-physiological state of fear, helplessness, or horror.

Describe one or more specific stressor event (s) the Veteran considers traumatic(may be pre-military, military, or post-military):

a. Stressor #1: _____

Does this stressor meet Criterion A (i.e., is it adequate to support the diagnosis of PTSD)?

Yes No

Is the stressor related to the Veteran's fear of hostile military or terrorist activity?

Yes No

If no, explain: _____

b. Stressor #2: _____

Does this stressor meet Criterion A (i.e., is it adequate to support the diagnosis of PTSD)?

Yes No

Is the stressor related to the Veteran's fear of hostile military or terrorist activity?

Yes No

If no, explain: _____

c. Stressor #3: _____

Does this stressor meet Criterion A (i.e., is it adequate to support the diagnosis of PTSD)?

Yes No

Is the stressor related to the Veteran's fear of hostile military or terrorist activity?

Yes No

If no, explain: _____

d. Additional stressors: If additional stressors, describe (list using the above sequential format): _____

4. PTSD Diagnostic Criteria

a. **Please check criteria used for establishing the current PTSD diagnosis.** The diagnostic criteria for PTSD, referred to as Criteria A-F, are from the Diagnostic and Statistical Manual of Mental Disorders, 4th edition (DSM-IV).

Criterion A: The Veteran has been exposed to a traumatic event where both of the following were present:

- The Veteran experienced, witnessed or was confronted with an event that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others.
- The Veteran's response involved intense fear, helplessness or horror.
- No exposure to a traumatic event.

Criterion B: The traumatic event is persistently reexperienced in 1 or more of the following ways:

- Recurrent and distressing recollections of the event, including images, thoughts or perceptions
- Recurrent distressing dreams of the event
- Acting or feeling as if the traumatic event were recurring; this includes a sense of reliving the experience, illusions, hallucinations and dissociative flashback episodes, including those that occur on awakening or when intoxicated
- Intense psychological distress at exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event
- Physiological reactivity on exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event
- The traumatic event is not persistently reexperienced

Criterion C: Persistent avoidance of stimuli associated with the trauma and numbing of general responsiveness (not present before the trauma), as indicated by 3 or more of the following:

- Efforts to avoid thoughts, feelings or conversations associated with the trauma
- Efforts to avoid activities, places or people that arouse recollections of the trauma
- Inability to recall an important aspect of the trauma
- Markedly diminished interest or participation in significant activities
- Feeling of detachment or estrangement from others
- Restricted range of affect (e.g., unable to have loving feelings)
- Sense of a foreshortened future (e.g., does not expect to have a career, marriage, children or a normal life span)
- No persistent avoidance of stimuli associated with the trauma or numbing of general responsiveness

Criterion D: Persistent symptoms of increased arousal, not present before the trauma, as indicated by 2 or more of the following:

- Difficulty falling or staying asleep
- Irritability or outbursts of anger
- Difficulty concentrating
- Hypervigilance
- Exaggerated startle response
- No persistent symptoms of increased arousal

Criterion E:

- The duration of the symptoms described above in Criteria B, C and D is more than 1 month.
- The duration of the symptoms described above in Criteria B, C and D is less than 1 month.
- Veteran does not meet full criteria for PTSD

Criterion F:

- The PTSD symptoms described above cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.
- The PTSD symptoms described above do NOT cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.
- Veteran does not meet full criteria for PTSD

b. Which stressor(s) contributed to the Veterans PTSD diagnosis?:

- Stressor #1
- Stressor #2
- Stressor #3
- Other, please indicate stressor number (i.e. stressor #4, #5, etc.) as indicated above): _____

5. Symptoms

For VA rating purposes, check all symptoms that apply to the Veterans diagnoses:

- Depressed mood
- Anxiety
- Suspiciousness
- Panic attacks that occur weekly or less often
- Panic attacks more than once a week
- Near-continuous panic or depression affecting the ability to function independently, appropriately and effectively
- Chronic sleep impairment
- Mild memory loss, such as forgetting names, directions or recent events
- Impairment of short- and long-term memory, for example, retention of only highly learned material, while forgetting to complete tasks
- Memory loss for names of close relatives, own occupation, or own name
- Flattened affect
- Circumstantial, circumlocutory or stereotyped speech
- Speech intermittently illogical, obscure, or irrelevant
- Difficulty in understanding complex commands
- Impaired judgment
- Impaired abstract thinking
- Gross impairment in thought processes or communication
- Disturbances of motivation and mood
- Difficulty in establishing and maintaining effective work and social relationships
- Difficulty in adapting to stressful circumstances, including work or a worklike setting
- Inability to establish and maintain effective relationships
- Suicidal ideation
- Obsessional rituals which interfere with routine activities
- Impaired impulse control, such as unprovoked irritability with periods of violence

- Spatial disorientation
- Persistent delusions or hallucinations
- Grossly inappropriate behavior
- Persistent danger of hurting self or others
- Neglect of personal appearance and hygiene
- Intermittent inability to perform activities of daily living, including maintenance of minimal personal hygiene
- Disorientation to time or place

6. Other symptoms

Does the Veteran have any other symptoms attributable to PTSD (and other mental disorders) that are not listed above?

Yes No

If yes, describe: _____

7. Competency

Is the Veteran capable of managing his or her financial affairs?

Yes No

If no, explain: _____

8. Remarks, if any _____

Psychiatrist/Psychologist signature & title: _____ Date: _____

Psychiatrist/Psychologist printed name: _____ Phone: _____

NOTE: VA may request additional medical information, including additional examinations if necessary to complete VA's review of the Veteran's application.

6.2. DBQ Review PTSD

Name of patient/Veteran: _____ SSN: _____

SECTION I:

1. Diagnostic Summary

This section should be completed based on the current examination and clinical findings.

a. Does the Veteran now have or has he/she ever been diagnosed with PTSD?

Yes No

If yes, continue to complete this Questionnaire.

If no diagnosis of PTSD, and the Veteran has another Axis I and/or II diagnosis, then continue to complete this Questionnaire and/or the Eating Disorders Questionnaire:

2. Current Diagnoses

a. Diagnosis #1: _____

ICD code: _____

Indicate the Axis category:

Axis I Axis II

Comments, if any: _____

Diagnosis #2: _____

ICD code: _____

Indicate the Axis category:

Axis I Axis II

Comments, if any: _____

Diagnosis #3: _____

ICD code: _____

Indicate the Axis category:

Axis I Axis II

Comments, if any: _____

Diagnosis #4: _____

ICD code: _____

Indicate the Axis category:

Axis I Axis II

Comments, if any: _____

If additional diagnoses, describe (using above format): _____

b. Axis III - medical diagnoses (to include TBI): _____

ICD code: _____

Comments, if any: _____

c. Axis IV – Psychosocial and Environmental Problems_(describe, if any): _____

d. Axis V - Current global assessment of functioning (GAF) score: _____

Comments, if any: _____

3. Differentiation of symptoms

a. Does the Veteran have more than one mental disorder diagnosed?

Yes No

If yes, complete the following question:

b. Is it possible to differentiate what symptom(s) is/are attributable to each diagnosis?

Yes No Not applicable (N/A)

If no, provide reason that it is not possible to differentiate what portion of each symptom is attributable to each diagnosis: _____

If yes, list which symptoms are attributable to each diagnosis: _____

c. Does the Veteran have a diagnosed traumatic brain injury (TBI)?

Yes No Not shown in records reviewed Comments, if any: _____

If yes, complete the following question:

d. Is it possible to differentiate what symptom(s) indicated above is/are attributable to each diagnosis?

Yes No Not applicable (N/A)

If no, provide reason that it is not possible to differentiate what portion of each symptom is attributable to each diagnosis: _____

If yes, list which symptoms are attributable to each diagnosis: _____

4. Occupational and social impairment

a. Which of the following best summarizes the Veteran's level of occupational and social impairment with regards to all mental diagnoses?

(Check only one)

- No mental disorder diagnosis
- A mental condition has been formally diagnosed, but symptoms are not severe enough either to interfere with occupational and social functioning or to require continuous medication
- Occupational and social impairment due to mild or transient symptoms which decrease work efficiency and ability to perform occupational tasks only during periods of significant stress, or; symptoms controlled by medication
- Occupational and social impairment with occasional decrease in work efficiency and intermittent periods of inability to perform occupational tasks, although generally functioning satisfactorily, with normal routine behavior, self-care and conversation
- Occupational and social impairment with reduced reliability and productivity
- Occupational and social impairment with deficiencies in most areas, such as work, school, family relations, judgment, thinking and/or mood
- Total occupational and social impairment

b. For the indicated level of occupational and social impairment, is it possible to differentiate what portion of the occupational and social impairment indicated above is caused by each mental disorder?

Yes No No other mental disorder has been diagnosed

If no, provide reason that it is not possible to differentiate what portion of the indicated level of occupational and social impairment is attributable to each diagnosis: _____

If yes, list which portion of the indicated level of occupational and social impairment is attributable to each diagnosis: _____

c. If a diagnosis of TBI exists, is it possible to differentiate what portion of the occupational and social impairment indicated above is caused by the TBI?

Yes No No diagnosis of TBI

If no, provide reason that it is not possible to differentiate what portion of the indicated level of occupational and social impairment is attributable to each diagnosis: _____

If yes, list which portion of the indicated level of occupational and social impairment is attributable to each diagnosis: _____

SECTION II:

Clinical Findings:

1. Evidence review

If any records (evidence) were reviewed, please list here: _____

2. Recent History (since prior exam)

a. Relevant Social/Marital/Family history: _____

b. Relevant Occupational and Educational history: _____

c. Relevant Mental Health history, to include prescribed medications and family mental health: _____

d. Relevant Legal and Behavioral history: _____

e. Relevant Substance abuse history: _____

f. Sentinel Event(s) (other than stressors): _____

g. Other, if any: _____

3. PTSD Diagnostic Criteria

Please check criteria used for establishing the current PTSD diagnosis. The diagnostic criteria for PTSD, referred to as Criteria A-F, are from the Diagnostic and Statistical Manual of Mental Disorders, 4th edition (DSM-IV).

Criterion A: The Veteran has been exposed to a traumatic event where both of the following were present:

- The Veteran experienced, witnessed or was confronted with an event that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others.
- The Veteran's response involved intense fear, helplessness or horror.
- No exposure to a traumatic event.

Criterion B: The traumatic event is persistently re-experienced in 1 or more of the following ways:

- Recurrent and distressing recollections of the event, including images, thoughts or perceptions
- Recurrent distressing dreams of the event
- Acting or feeling as if the traumatic event were recurring; this includes a sense of reliving the experience, illusions, hallucinations and dissociative flashback episodes, including those that occur on awakening or when intoxicated
- Intense psychological distress at exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event
- Physiological reactivity on exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event
- The traumatic event is not persistently re-experienced

Criterion C: Persistent avoidance of stimuli associated with the trauma and numbing of general responsiveness (not present before the trauma), as indicated by 3 or more of the following:

- Efforts to avoid thoughts, feelings or conversations associated with the trauma
- Efforts to avoid activities, places or people that arouse recollections of the trauma
- Inability to recall an important aspect of the trauma
- Markedly diminished interest or participation in significant activities
- Feeling of detachment or estrangement from others
- Restricted range of affect (e.g., unable to have loving feelings)

- Sense of a foreshortened future (e.g., does not expect to have a career, marriage, children or a normal life span)
- No persistent avoidance of stimuli associated with the trauma or numbing of general responsiveness

Criterion D: Persistent symptoms of increased arousal, not present before the trauma, as indicated by 2 or more of the following:

- Difficulty falling or staying asleep
- Irritability or outbursts of anger
- Difficulty concentrating
- Hypervigilance
- Exaggerated startle response
- No persistent symptoms of increased arousal

Criterion E:

- The duration of the symptoms described above in Criteria B, C and D is more than 1 month.
- The duration of the symptoms described above in Criteria B, C and D is less than 1 month.
- Veteran does not meet full criteria for PTSD

Criterion F:

- The PTSD symptoms described above cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.
- The PTSD symptoms described above do NOT cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.
- Veteran does not meet full criteria for PTSD

4. Symptoms

For VA rating purposes, check all symptoms that apply to the Veterans diagnoses:

- Depressed mood
- Anxiety
- Suspiciousness
- Panic attacks that occur weekly or less often
- Panic attacks more than once a week
- Near-continuous panic or depression affecting the ability to function independently, appropriately and effectively
- Chronic sleep impairment
- Mild memory loss, such as forgetting names, directions or recent events
- Impairment of short- and long-term memory, for example, retention of only highly learned material, while forgetting to complete tasks
- Memory loss for names of close relatives, own occupation, or own name
- Flattened affect
- Circumstantial, circumlocutory or stereotyped speech
- Speech intermittently illogical, obscure, or irrelevant
- Difficulty in understanding complex commands
- Impaired judgment
- Impaired abstract thinking
- Gross impairment in thought processes or communication
- Disturbances of motivation and mood
- Difficulty in establishing and maintaining effective work and social relationships
- Difficulty in adapting to stressful circumstances, including work or a worklike setting
- Inability to establish and maintain effective relationships
- Suicidal ideation
- Obsessional rituals which interfere with routine activities
- Impaired impulse control, such as unprovoked irritability with periods of violence
- Spatial disorientation

- Persistent delusions or hallucinations
- Grossly inappropriate behavior
- Persistent danger of hurting self or others
- Neglect of personal appearance and hygiene
- Intermittent inability to perform activities of daily living, including maintenance of minimal personal hygiene
- Disorientation to time or place

5. Other symptoms

Does the Veteran have any other symptoms attributable to PTSD (and other mental disorders) that are not listed above?

- Yes No

If yes, describe: _____

6. Competency

Is the Veteran capable of managing his or her financial affairs?

- Yes No

If no, explain: _____

7. Remarks, if any: _____

Psychiatrist/Psychologist signature & title: _____ Date: _____

Psychiatrist/Psychologist printed name: _____

License #: _____ Psychiatrist/Psychologist address: _____

Phone: _____ Fax: _____

NOTE: VA may request additional medical information, including additional examinations if necessary to complete VA's review of the Veteran's application.

6.3. DBQ Mental Disorders (Other Than PTSD and Eating Disorders)

Name of patient/Veteran: _____ SSN: _____

SECTION I:

1. Diagnosis

a. Does the Veteran now have or has he/she ever been diagnosed with a mental disorder(s)?

Yes No

NOTE: If the Veteran has a diagnosis of an eating disorder, complete the Eating Disorders Questionnaire in lieu of this Questionnaire.

NOTE: If the Veteran has a diagnosis of PTSD, the Initial PTSD Questionnaire must be completed by a VHA staff or contract examiner in lieu of this Questionnaire.

If the Veteran currently has one or more mental disorders that conform to DSM-IV criteria, provide all diagnoses:

Diagnosis #1: _____

ICD code: _____

Indicate the Axis category:

Axis I Axis II

Comments, if any: _____

Diagnosis #2: _____

ICD code: _____

Indicate the Axis category:

Axis I Axis II

Comments, if any: _____

Diagnosis #3: _____

ICD code: _____

Indicate the Axis category:

Axis I Axis II

Comments, if any: _____

If additional diagnoses that pertain to mental health disorders, list using above format:

b. Axis III - medical diagnoses (to include TBI):

ICD code: _____

Comments, if any: _____

c. Axis IV – Psychosocial and Environmental Problems_(describe, if any): _____

d. Axis V - Current global assessment of functioning (GAF) score: _____

Comments, if any: _____

7. Software and Documentation Retrieval

7.1 Software

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*171.

7.2 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:

OI&T Field Office	FTP Address	Directory
Albany	ftp.fo-albany.med.va.gov	[anonymous.software]
Hines	ftp.fo-hines.med.va.gov	[anonymous.software]
Salt Lake City	ftp.fo-slc.med.va.gov	[anonymous.software]

File Name	Format	Description
DVBA_27_P171_RN.PDF	Binary	Release Notes

7.3 Related Documents

The VistA Documentation Library (VDL) web site will also contain the DVBA*2.7*171 Release Notes and related workflow documents. This web site is usually updated within 1-3 days of the patch release date.

The VDL Web address for CAPRI documentation is: <http://www.va.gov/vdl/application.asp?appid=133>

Content and/or changes to the DBQs is communicated by the Disability Examination Management Office (DEMO) through: <http://vbacodmoint1.vba.va.gov/bl/21/DBQ/default.asp>