

Computerized Patient Record System (CPRS) TRAINING MANUAL

VA

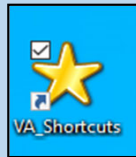


U.S. Department
of Veterans Affairs

Signing Into CPRS

To log into CPRS click on the VA shortcuts and open from the computer desktop

Select CPRChart FRE for latest CPR Version

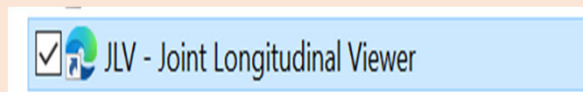


Icon	Name	Date/Time	Type	Size
	ClinicalCaseRegistries FRE	3/24/2021 4:35 AM	Shortcut	3 KB
	CPRS_Launcher	4/14/2021 10:35 AM	Shortcut	3 KB
	CPRChart FRE	3/25/2021 8:16 AM	Shortcut	3 KB

CPRS will begin to open and ask for PIV information / Access Verification Code:

Contingency

If CPRS/Vista is down use this icon located in the VA Shortcuts gold star folder to access patient information



For More Information on JLV Please refer to slide 6

Opening a Patient Record

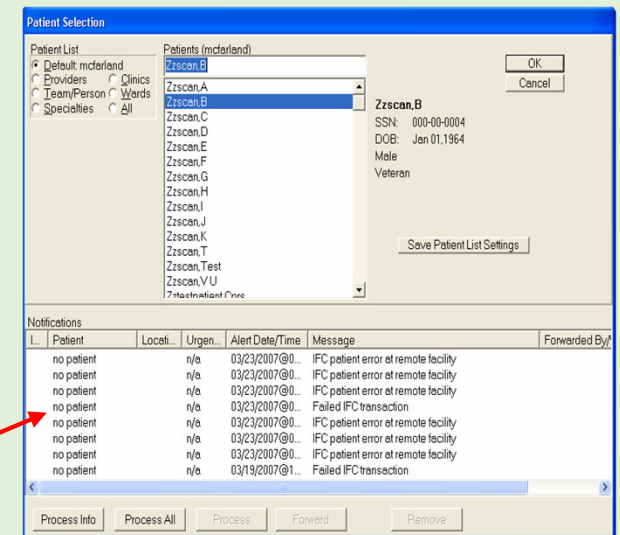
The patient selection dialog box appears:

To select a patient record:

- Type the first letter of the patient's last name and the last four digits of the patient's social.
- To select a patient you can also select from one of the patient list radio buttons (i.e. clinic/ward)

Notifications and Alerts

- This will display at the bottom of the Patient Selection screen.
- These should be processed daily to ensure labs and other pending orders and consults etc.. are viewed in a timely manner 😊



Notifications

- Alerts and Notifications are messages that provide information or prompt you to act on a clinical event.
- Clinical events, such as a critical lab value or a change in orders, trigger a notification
- Alerts can be generated for critical lab results, abnormal lab and Xray results, and a variety of consults actions (cancelled, denied, completed consults, etc..)
- The highest priority alerts are set for "high". Critical Alerts are set as mandatory for all users and cannot be turned off. Some non-critical alerts are also set to mandatory.**

Action Alerts

- If you have unsigned progress notes, or if you have been designated as an expected cosigner for progress notes, or if your patient has unsigned electronic orders, you will receive an action alert.
- Action alerts when processed allow you to complete the action -- i.e. sign the note, sign the orders, view the results, etc..

Viewing and Processing Alert

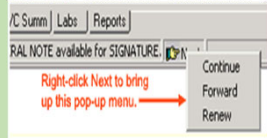
When you log on to CPRS on the Patient Selection window you will see the Notifications list box.

- To process a single alert, just double click on it.
- Processing the alert will take you to the CPRS tab the alert is associated with (labs, orders, notes, etc..)
 - You can click on the Process All button and go thru all your alerts, one after another.
 - If you just want to process selected alerts, hold down the control (Ctrl) button and click on the alerts you want to see and then click the Process Selected button or double click on appropriate alert.

On the CPRS tab associated with the alert, at the lower right of the screen a "Next" button is displayed.



Click that button to return to the Patient Selection window or go on to the next alert if you are processing several view alerts or right-click the "next" button to select Renew (keeps the alert in your list of alerts) or Forward the alert to another provider



Info	Patient	Location	Urgency	Alert Date/Time	Message	Forward
Moderate				06/06/2016@23:22	COMPLETED Addendum Dated 04/26/16 OVERDUE for ADD'L SIGNATURE	
Moderate				06/06/2016@23:22	COMPLETED Addendum Dated 04/26/16 OVERDUE for ADD'L SIGNATURE	
Moderate				06/06/2016@23:23	COMPLETED Addendum Dated 05/16/16 OVERDUE for ADD'L SIGNATURE	
Moderate				06/06/2016@23:25	COMPLETED Addendum Dated 05/26/16 OVERDUE for ADD'L SIGNATURE	
Moderate				06/06/2016@23:24	COMPLETED Clinical (Primary Care) Scheduling Note Dated 05/19	
Moderate				06/06/2016@23:23	COMPLETED Clinical (Specialty) Scheduling Note Dated 05/14/1	

Clinical Context

Is an integral component that allows CPRS to interface with other applications such as Vista Imaging.

Once a patient is selected, look at the upper right corner of CPRS for the following icons

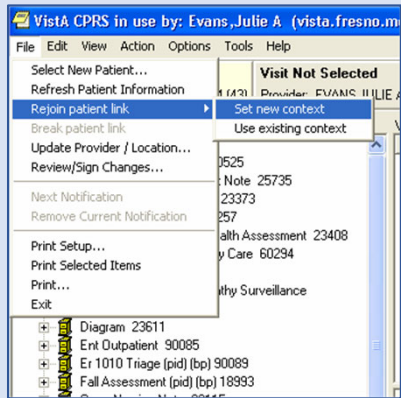
GOOD



BAD



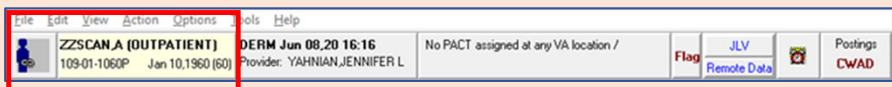
If the link is broken (bad) go to: File, Rejoin Patient Link, Set New Context



Understanding the Header Bar

The Patient Inquiry button is located on the far left side of the chart. Once you click on the button the patient's information will be displayed.

This includes: patient name, SSN, date of birth, age, admission info, address, NOK, etc.

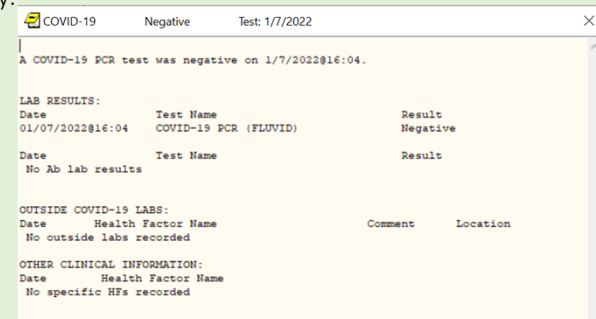


COVID-19 CPRS Banner

Provides quick information on the general COVID-19 status of a patient. The COVID-19 Status Indicator in CPRS displays various statuses: COVID-19 POSITIVE, COVID-19 Clinically POSITIVE, COVID-19 Presumed Positive, COVID-19 Pending, COVID-19 Negative Test, COVID-19 Prior Positive, COVID-19 Resolved Clinically, COVID-19 Testing Completed - see Labs, COVID-19 Not Tested, COVID-19 Status unknown- see labs/notes. The status is triggered by clinical documentation and/or laboratory tests.

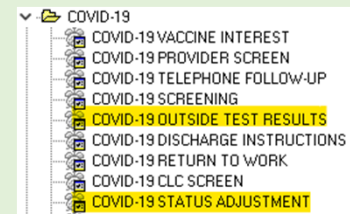


Click on the COVID banner to see the history of patient's COVID tests that have been entered locally.



To update a patient's chart with COVID testing you can use the shared template "COVID 19 Outside Test Result" and add it to your note- found in the notes tab.

To update the banner status, select the "COVID-19 Status adjustment" template.



Visit Encounter Information

The encounter provider and location for the visit are listed here.

If an encounter provider or location has not been assigned, CPRS will prompt you for this information when you try to enter progress notes, create orders, and perform other tasks.

For inpatients, the visit location will default to the admitted ward

It is important to select the right visit location- whether it is VVC, telephone, or face to face clinic you are seeing the patient in.



Primary Care Information

The Primary Care button displays the primary care provider, associate provider, attending physician, inpatient provider, and mental health treatment coordinator assigned to the patient. It will also display if there is no PACT team assignment.



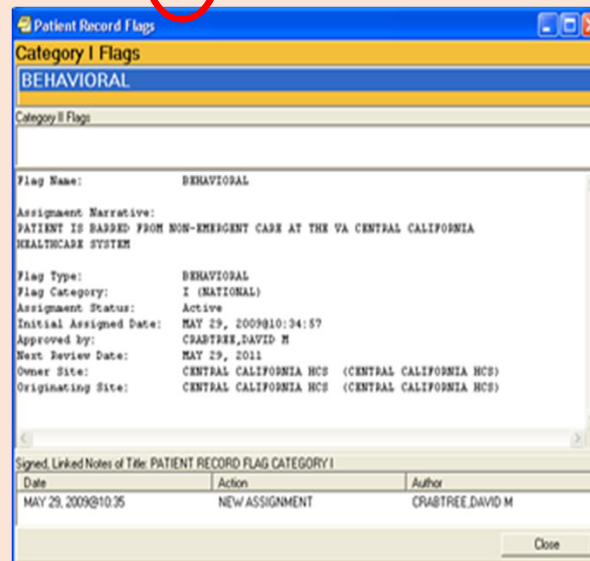
Patient Record Flag Information

Clicking this button will bring up a detailed display containing the patient record flag information



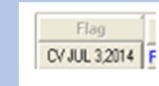
Patient Record Flags (PRF) are advisories that authorized users place on a patient's chart to improve employee safety and the efficient delivery of health care.

Each advisory or flag includes a narrative that describes the reason for the flag and may include some suggested actions for users to take when they encounter the patient.



Additional Indicators That May Display

Combat Veteran



Veteran enrolled in MyHealtheVet- Veterans enrolled in this can participate in secure messaging if enrolled in the premium account

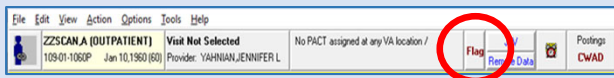


Joint Legacy Viewer (JLV)/Remote Data Available

When the JLV button is **highlighted in blue**, this indicates that the patient has data at other VA sites, DOD sites, or data at a Community Partner site.

When the Remote Data button is highlighted in blue this indicates that the patient has remote data at other VA sites or DOD sites.

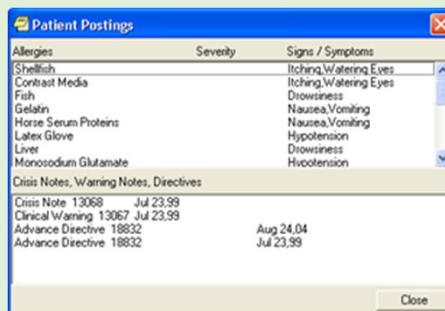
Selecting the JLV button will open the JLV website. Remote Data will allow you to select only VA or DOD sites that the patient has been seen and you will then have to select a clinical report on the reports tab of CPRS.



Many Community Care Records can also be found by going into JLV

Postings (CWAD)

Postings contain critical information that staff need to be aware of.



C (Crisis Notes) – Cautionary information about critical behavior or health.

Example: Life Sustaining Treatment (LST)

W (Warnings) – Notifications about possible risks.

Example: Aberrant Behavior, Foreign Body

A (Adverse Reactions/Allergies) – Medications, foods, and other conditions the patient is allergic or may have an adverse reaction to.

D (Directives) – Advanced directives.

Clinical Reminders

CPRS includes the ability to view Clinical Reminders. The button shows you at a glance whether the patient has reminders that are due. Reminders are used to aid physicians in performing tasks to fulfill Clinical Practice Guidelines and periodic procedures or education as needed for veteran patients. Reminders that are due can also be seen on the Coversheet or by clicking on the alarm clock



Reminders that are due should be completed during outpatient clinic visits that occur over the telephone, through VVC, and face to face.

Examples of Clinical Reminder

A screenshot of the 'Available Reminders' dialog box. It shows a list of reminders with columns for Due Date, Last Occurrence, and Priority. The reminders include: Alcohol Abuse Screen (AUDIT-C), Breast Exam, CHF Wt Monitor Instructions, Diabetic Foot Exam (V), F/U of Positive AUDIT-C, HgbA1c Screen (V), HTN Lifestyle Education, HbA1c for Diabetes, Pain Assessment Needed (P= > 4), PAP Smear Screening, Tobacco Counseling by Provider FY07, Screen for Depression, Screen for PTSD, Tetanus/Diph/Perussis (TDAP), Tobacco Counseling FY07, and Advanced Directives Screen (V). The 'All Evaluated' button is also visible.

Reminder	Due Date	Last Occurrence	Priority
Alcohol Abuse Screen (AUDIT-C)	05/16/2007	05/16/2006	
Breast Exam	11/15/2002	11/15/2001	
CHF Wt Monitor Instructions	06/28/2007	06/28/2006	
Diabetic Foot Exam (V)	01/01/2002	//2001	
F/U of Positive AUDIT-C	DUE NOW		
HgbA1c Screen (V)	DUE NOW		High
HTN Lifestyle Education	DUE NOW		
HbA1c for Diabetes	DUE NOW		
Pain Assessment Needed (P= > 4)	12/15/2003	09/15/2003	High
PAP Smear Screening	DUE NOW		
Tobacco Counseling by Provider FY07	DUE NOW		
Screen for Depression	DUE NOW		
Screen for PTSD	DUE NOW		
Tetanus/Diph/Perussis (TDAP)	DUE NOW		
Tobacco Counseling FY07	DUE NOW		
Advanced Directives Screen (V)	DUE NOW		

Cover Sheet Tab

Provides a quick overview of patient information including:

1. Active Problems
2. Allergies/Adverse Reactions
3. Postings
4. Active Medications (including Non-VA & clinic meds)
5. Clinical Reminders
6. Women's Health if Applicable
7. Immunizations
8. Vital Signs
9. Appointments/Visits/Admissions

The screenshot shows the CPRS Cover Sheet Tab interface with the following sections and callouts:

- 1:** Active Problems list (e.g., Alcohol dependence, AF- Atrial Fibrillation).
- 2:** Allergies / Adverse Reactions table (e.g., Contrast Media, Morphine, Diphenhydramine).
- 3:** Postings list (e.g., ALLERGIES, Life-Sustaining Treatment).
- 4:** Active Medications table (e.g., Non-VA Atenolol Tab, Docosate Na).
- 5:** Clinical Reminders table (e.g., Advanced Directives Screen, Alcohol Use Screen).
- 6:** Women's Health section (Not Applicable).
- 7:** Recent Immunizations table (e.g., Bcg P, Covid-19, DTPa).
- 8:** Vitals table (e.g., T 110 F, P 30, R 14, BP 130/80).
- 9:** Appointments/Visits/Admissions table (e.g., Jun 04, 2021@13:00, May 25, 2021@11:00).

Allergies, Women's Health data, Immunizations, & Vital Signs can be entered on the coversheet.

1. Click on any of text in the Vitals box
2. Click on enter vitals

Clicking on the display text will give additional information

Tabs in CPRS

Listed below are the various tabs utilized in CPRS

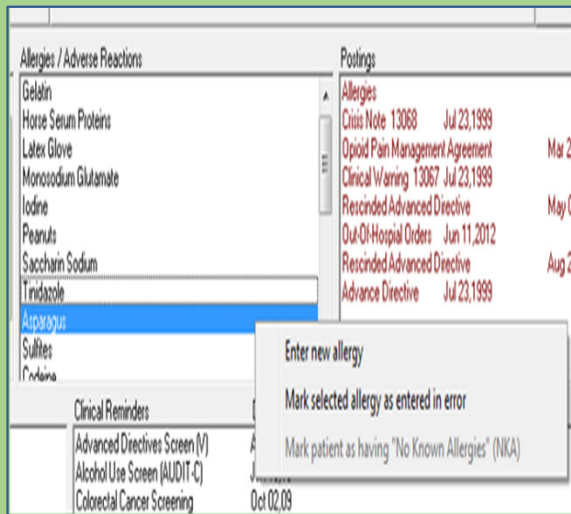


Allergies/Adverse Reactions

A list of causative agents associated with patients' allergies or adverse reactions. If patients have causative agents listed in this pane, CPRS also displays the word *Allergies* in the **Postings** pane and the letter **A** (for allergies) on the **Postings** button.

Entering Allergies

1. You can enter or remove Allergies/Adverse Reactions from the **Cover Sheet** tab by right clicking in the Allergies/Adverse Reactions box.

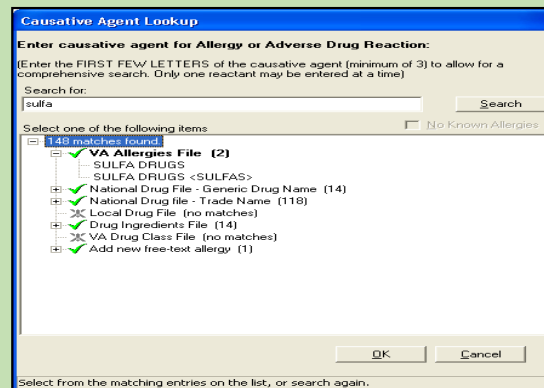


2. Type in 3-4 letters/partial word i.e. Pen for Penicillin to prevent spelling errors.

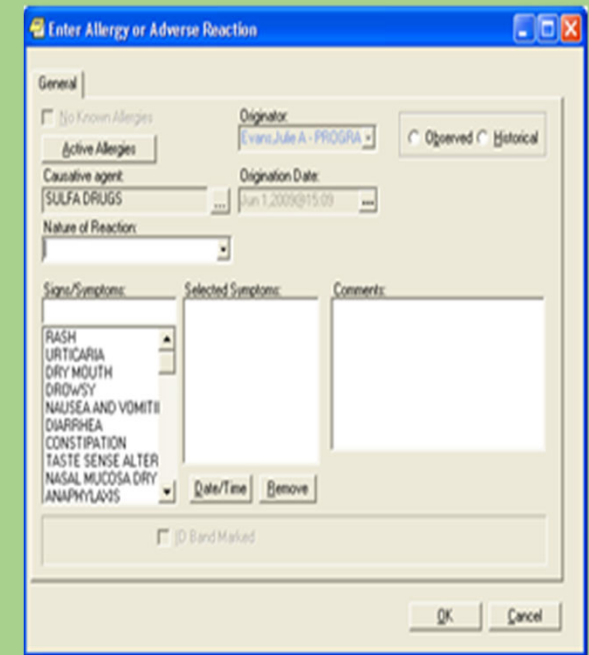
Let the system present you with matching items for selection.

Make sure to select the causative agent under VA Allergies File or as HIGH UP in the tree as possible to get comprehensive order and allergy checks.

Enter causative agent click "OK"



3. Enter appropriate data – historical is a self reported allergy- click "OK"



Active Medications with an Allergy Identified

If the patient has an active medication to the allergy, an alert will be generated to the original ordering provider that an allergy was entered for a medication that is active.

You can also add additional recipients to be alerted by typing in their names in the optional participant's box and clicking add

There is also a report of these medications listed in the Reports Tab under Pharmacy:

Active Medications with Allergies:

Removing Allergies

To remove an allergy click on the item in the Allergy/Adverse Reactions box on the Cover Sheet. A new dialog will display

Enter the reason the Allergy/Adverse Reaction was entered in error then click OK. This will generate an unsigned CPRS Note. The note including the reason will need to be signed for documentation purposes.

Entering Immunizations from the Cover Tab

In order to enter Immunizations from Cover sheet right click on the immunization box.

Covid -19 immunizations can not be entered this way and will need to be entered using the clinical reminder or the "immunization and injection" note.

Once inside the immunization form you can document:

- Administration
- Historical
- Refusal
- Contraindication/Precaution

Right click on the vaccine you wish to document on and select add immunization.

Complete all Mandatory fields that have an *asterisk

Immunization	Reaction	Date/Time	Vital	Value	D
Covid-19 (janssen), Vector-Nr, Rs-Ad26, Pf, 0.5 MI		Feb 02, 20	T	98.5 F	D
Influenza, High-Dose, Quadrivalent		Nov 17, 20	P	75	D
			R	16	D

Enter Immunization

Immunization Evaluation Statuses:

Reminder Name	Status	Date Done	Date Due	N.	Administration Date	Series	Facility/Source
Tdap Immunization	DUE NOW	unknown	DUE NOW				
Herpes Zoster (Shi...	DUE NOW						
Influenza Immuniz...	DUE NOW						
Pneumococcal PPS...	DUE NOW						
Td / Tdap Immuniz...	N/A						
Human Papillomavi...	N/A						
Meningococcal B E...	N/A						
Meningococcal AC...	N/A						
Hepatitis B Serolog...	N/A						
Hepatitis B Immuni...	N/A						
Pneumococcal PCV...	N/A						
Hepatitis A Vaccine	N/A						

Immunization List

Immunization Selection

Select Documentation Type*

Administered Contraindication/Precaution Historical Refused

Select an Immunization*

ZOSTER RECOMBINANT

Editor/Detail Viewer

Lot Number* Expiration Date Manufacturer

Administration Date* Administered by* Administering by Policy Ordered by*

Route* Anatomic Location* Series Dosage in ml.*

Save Finish

Once you are done filling out the required fields you can select save and document additional immunizations from the form.

Select "finish" when completed and this will generate your immunization note to sign.

Immunization Evaluation Statuses:

Reminder Name	Status	Date Done	Date Due	N.	Administration Date	Series	Facility/Source
Tdap Immunization	DUE NOW	unknown	DUE NOW				
Herpes Zoster (Shi...	DUE NOW	unknown	DUE NOW				

Immunization List

Immunization Selection

Select Documentation Type*

Administered Contraindication/Precaution Historical Refused

Select an Immunization*

ZOSTER RECOMBINANT

Editor/Detail Viewer

Lot Number* Expiration Date Manufacturer

Administration Date* Administered by* Administering by Policy Ordered by*

Route* Anatomic Location* Series Dosage in ml.*

Save Finish

Problems Tab

The problems list on the Problems tab displays a patient's current and historical health care problems utilizing Systematized Nomenclature of Medicine (SNOMED) codes. New Problems can be added by selecting NEW PROBLEM button.

VISTA CPSIS in use by: Evans, Julie A (vista.fresno.med.va.gov)

File Edit View Action Tools Help

ZZSCAN.D 000-00-0006 Jan 01, 1960 (47) **Visit Not Selected** Provider: EVANS, JULIE A Primary Care Team Unassigned **Postings CWAD**

View options: Active and Inactive Problems (13 of 13)

Active
Inactive
Both active and inactive
Removed

New problem

Stat/Ver	Description	Onset Date	Last Updated	Location
A	SPINAL STENOSIS L5-S1 by MRI 2/06		Aug 14 2006	Neurology
A	Depression outcome: pt will verbalize stability of depressed mood and will not display si review by: 9/5/02 int: medication management by Dr. Howsepian		Aug 14 2006	Mhc-Care
A	Arthritis, Rheumatoid PT IS ON REMICADE		Aug 14 2006	Pcc-Nalav
A	Primary Obesity (ICD-9-CM 278.00)		Aug 14 2006	Pcc-Nalav
A *	Postsurgical Aorticoronary Bypass Status (ICD-9-CM V45.81) Surgery @ St Agnes 1/1/00 not active problem		Aug 14 2006	
A (u)	UNSPECIFIED DENTAL CARIES (MST)		Feb 04 2006	Dental-Dt
A	Breast Mass (ICD-9-CM 611.72)		Nov 15 2001	Neurology
A	Seizures (ICD-9-CM 780.39)		Nov 15 2001	Neurology
A	ANTISOCIAL PERSONALITY		Aug 02 2001	Mhc-Pape
A	ADJUSTMENT DISORDER, UNSPECIFIED		Aug 02 2001	Mhc-Pape
A	Hepatitis C carrier Long term IV drug abuse.		Jun 25 2001	Zz-Ms
A (u)	Diabetes		Mar 29 2001	Zz-Pc Abpl
A (u)	Hypertension	1988	Mar 29 2001	Zz-Pc Abpl

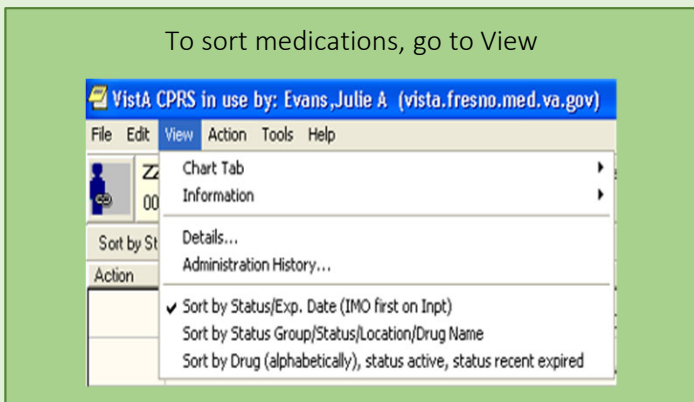
Cover Sheet Problems Meds Orders Notes Consults Surgery D/C Summ Labs Reports

Microsoft FrontPage - http://vista.fresno.med.va.gov/News/news2.htm

Meds Tab

- The Meds tab contains a list of active and recently expired/discontinued medications for the selected patient. Inpatient/Clinic, outpatient, and Non-VA medications are listed in separate sections of the window.
- The first window lists Outpatient medications. Outpatient medications can be quickly copied into the inpatient pharmacy package by highlighting the medications desired and select action and Transfer to Inpatient. NON-VA meds are for documentation only. These are medications the patient may be taking Over the Counter, receiving from outside VA and we would like them to be in their medication profile.
- The third window will list Inpatient medications when a patient is admitted. Meds prescribed to be given in an Outpatient Clinic/procedure will display in the Inpatient Meds section and an Outpatient location will display next to medication. If the patient is admitted the top pane will display inpatient and outpatient medications will move to the bottom pane automatically.

To sort medications, go to View



The screenshot shows the VistA Meds Tab for patient 'MCANAN (OUTPATIENT)'. The table lists various medications with columns for Name, Expires, Status, Last Filled, and Fields Rem. A red arrow points to the 'View' menu in the top-left corner of the application window.

Sort by	Status/Exp. Date (Clinic Orders first on Inpt)	Expires	Status	Last Filled	Fields Rem.
Outpatient Medications					
LIORIPROLE 200MG TAB Qdy: 180 for 90 days	Sig: TAKE TWO TABLETS BY MOUTH EVERY DAY FOR HEART/BLOOD PRESSURE	05/20/17	Active	Mar 25, 17	0
INSULIN REG MIXED/TOULIN/AS NOVOLIN R Qdy: 1 for 30 days	Sig: INJECT 1 UNIT SUBCUTANEOUSLY ONCE EVERYDAY TO CONTROL BLOOD SUGAR. ADMINISTER 30 MINUTES BEFORE MEALS AS DIRECTED BY ENDOCRINOLOGIST. DISCARD 28 DAYS AFTER OPENING(S)	05/11/17	Expired	Mar 10, 17	0
DOCLUSATE NA 100MG CAP Qdy: 1 for 1 days	Sig: TAKE ONE CAPSULE BY MOUTH ONCE EVERYDAY THIS IS TEST TO SEE IF THE PATIENT SINTRUCTIONS AWILL	04/18/17	Expired	Apr 17, 17	0
LEVOHYDRODNE NA (SYNTHROID) 0.1MG TAB Qdy: 1 for 1 days	Sig: TAKE ONE TABLET BY MOUTH EVERY MORNING ON AN EMPTY STOMACH THIS IS A TEST TO SEE IF THE WRAPPING OF COMMENTS IN THE SCREEN DOES IT WRAP OR DOES IT STAY	03/06/17	Expired	Mar 07, 17	0
DOCLUSATE NA 100MG CAP Qdy: 90 for 90 days	Sig: TAKE ONE CAPSULE BY MOUTH ONCE EVERYDAY TO SOFTEN STOOL	05/20/18	Discontinued	Mar 19, 17	3
DOCLUSATE NA 100MG CAP Qdy: 90 for 90 days	Sig: TAKE ONE CAPSULE BY MOUTH ONCE EVERYDAY TO SOFTEN STOOL	05/20/18	Discontinued	Mar 19, 17	3
DOCLUSATE NA 100MG CAP Qdy: 90 for 90 days	Sig: TAKE ONE CAPSULE BY MOUTH ONCE EVERYDAY TO SOFTEN STOOL	05/20/18	Discontinued	Mar 19, 17	3
NOF RISUVASTATIN CA 40MG TAB Qdy: 45 for 90 days	Sig: TAKE ONE HALF TABLET BY MOUTH AT BEDTIME FOR CHOLESTEROL. CAN BE TAKEN WITH OR WITHOUT FOOD.	04/11/18	Discontinued	Apr 10, 17	3
NOF RISUVASTATIN CA 40MG TAB Qdy: 90 for 90 days	Sig: TAKE ONE TABLET BY MOUTH AT BEDTIME FOR CHOLESTEROL. CAN BE TAKEN WITH OR WITHOUT FOOD.	04/11/18	Discontinued	Apr 10, 17	3
CITALOPRAM HYDROBROMIDE 20MG TAB Qdy: 3 for 5 days	Sig: TAKE ONE HALF TABLET BY MOUTH EVERY MORNING FOR DEPRESSION.	10/15/17	Discontinued	Dec 14, 16	0
DOCLUSATE NA 100MG CAP Qdy: 1 for 90 days	Sig: TAKE ONE CAPSULE BY MOUTH ONCE EVERYDAY TESTING	10/12/17	Discontinued	Oct 11, 16	2
CITALOPRAM HYDROBROMIDE 40MG TAB Qdy: 3 for 5 days	Sig: TAKE ONE HALF TABLET BY MOUTH EVERY MORNING FOR DEPRESSION.	10/06/17	Discontinued	Oct 07, 16	1
CITALOPRAM HYDROBROMIDE 40MG TAB Qdy: 3 for 5 days	Sig: TAKE ONE HALF TABLET BY MOUTH EVERY MORNING FOR DEPRESSION.	10/06/17	Discontinued	Oct 05, 16	1
LEVOHYDRODNE NA (SYNTHROID) 0.1MG TAB Qdy: 90 for 90 days	Sig: TAKE ONE TABLET BY MOUTH EVERY MORNING ON AN EMPTY STOMACH FOR THYROID. TAKE ON AN EMPTY	05/09/17	Discontinued	Sep 08, 16	3
Non-VA Medications		Start Date	Status		
Non-VA SERTRALINE HCL 100MG TAB	50MG MOUTH EVERY MORNING VA Rx: Written for patient to obtain from outside pharmacy		Active		
Non-VA FLUDOCINE HCL 10MG CAP	10MG MOUTH ONCE EVERYDAY VA Rx: Written for patient to obtain from outside pharmacy		Active		
Non-VA ALPRICOLOAM 0.25MG TAB	0.25MG MOUTH ONCE EVERYDAY AS NEEDED VA Rx: Written for patient to obtain from outside pharmacy		Active		
Non-VA STOMA HOLE CUTTER (NUJIBRI) #2034 HOLE CUTTER DEVICE	AS DIRECTED VA Rx: Written for patient to obtain from outside pharmacy		Active		
Non-VA SODIUM FLUORIDE 1.1% DENTAL CREAM	SMALL AMOUNT TOOTHBRUSH AND BRUSH TEETH TWICE A DAY VA Rx: Written for patient to obtain from outside pharmacy. Non-VA medication recommended by VA provider		Active		
Inpatient Medications		Stop Date	Status	Location	
NOF BOTULINUM TOXIN TYPE A (NUJIBRI)	Give: 200UNT/2VSL IM ONCE		Pending	CC/Free Max Test	

You can change, discontinue, refill and document NON-VA meds directly from the MEDS Tab: Right click on med to see actions available:

The screenshot shows a list of medications with a context menu open over the first medication. The menu options are:

- Details...
- Administration History...
- Change...
- Discontinue...
- Refill...
- Renew...
- Document Non-VA Meds
- New Medication...

Action	Inpatient Medications
	*ACETAMINOPHEN 325MG TAB Give: 850MG PO Q4H PRN AS NEEDED
	ALFUZOSIN TAB SA Give: 10MG PO EVERY DAY (MEAL)

Action	Non-VA Medications (Documentation)
	Non-VA ASPIRIN 81MG EC TAB 81MG MOUTH EVERY MORNING OTC
	Non-VA CALCIUM 250MG/VITAMIN D 125 1 TABLET MOUTH ONCE EVERY DAY

Orders Tab

From the Orders tab, you can write new orders and view existing orders for the selected patient. You can also create quick orders (from the Options drop down) and order sets (by holding the CTRL key and clicking on multiple orders) that make the ordering process more efficient.

The Orders tab also allows you to quickly access information about each order such as which services the orders are associated with, the start and stop dates for each order, the name of the provider (or nurse or clerk) that entered the order, and the status of the order.

Service Column – these are some of the Display Groups for the orders i.e. type and responsible service:

- A/D/T - Admission, discharge and transfer orders are displayed.
 - Activity - Order for patient's activity (ex. Ad lib, Bed rest, etc..)
 - Nursing - Text orders to be carried out by nursing staff (ex. Vital sign parameters, Wound care, etc..)
 - Respiratory - Respiratory therapy (ex. Neb treatments, oxygen etc..)
 - Diet - Diet specific to patient needs carried out by Nutrition service (ex. Full liquid, ADA, NPO, etc..)
 - Infusion - Ordered intravenous fluids.
 - Inpatient Meds - Ordered patient medications.
 - Out Meds - Outpatient orders.
 - Lab - Ordered laboratory specimens (ex. CBC, BMP, etc..)
 - Imaging - Ordered imaging (ex. X-ray, CT Scan, etc..)
 - Consults - Consulting services (chaplain, social work, urology, etc..)
 - Clinic Meds/Infusions – Emergency Department orders, meds given in procedure/outpatient clinic
 - Clinic Scheduling- Return to Clinic orders
 - Life Sustaining Treatment orders- Code Status – if Veteran is DNR/DNI that order will display at the top or the orders tab - if Patient is FULL CODE no order will display.
- Please make sure current LST note and orders match.**

Service	Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location
Non-VA GINSENG CAP/TAB TAKE ONE TABLET BY MOUTH ONCE EVERYDAY pt buys as an OTC		Kothary,V				active	Pharma
Out. Med: AMOXICILLIN CAP. ORAL 500MG TAKE ONE CAPSULE BY MOUTH EVERY 8 HOURS FOR INFECTION. TAKE UNTIL GONE. Quantity: 30 Refills: 0	Start: 05/16/07 Stop: 06/15/07	Kothary,V				active	0
DOCUSATE NA 100MG CAP. ORAL 100MG TAKE ONE CAPSULE BY MOUTH EVERY DAY TO SOFTEN STOOL. Quantity: 30 Refills: 3	Start: 04/12/07 Stop: 04/12/08	Manzo,B				active	Pharma
Non-VA ST. JOHN'S WORT CAP/TAB ST JOHN'S WORT CAP/TAB TAKE ONE CAP/TAB BY MOUTH TWICE A DAY		Carbone,J				active	Dental
Non-VA ABACAVIR TAB 300MG TAKE ONE TABLET BY MOUTH ONCE EVERYDAY Medication prescribed by non-VA provider		Kator,S				active	Yosemit
Out. Med: GABAPENTIN TAB 100MG TAKE ONE TABLET/CAPSULE BY MOUTH EVERY DAY FOR PAIN. *DUE TO MANUFACTURER CHANGE - CAPSULES MAY BE SUBSTITUTED FOR TABLETS TEMPORARILY ** Quantity: 30 Refills: 3	Start: 09/25/06 Stop: 09/25/07	Manzo,B	CAL			active	0
*TERAZOSIN CAP. ORAL 1MG TAKE ONE CAPSULE BY MOUTH AT BEDTIME FOR 7 DAYS. THEN TAKE TWO CAPSULES AT BEDTIME FOR PROSTATE. OR AS DIRECTED or as directed Quantity: 60 Refills: 5	Start: 09/21/06	Kator,S	CAL			active	Pcs-Nal
Non-VA XNF ATORVASTATIN TAB TAKE AT BEDTIME		Kator,S	CAL			active	Mai Te
Non-VA ACETAMINOPHEN 500MG TAB 500MG TAKE ONE TABLET BY MOUTH ONCE EVERYDAY sell ex		Peabody,C	CAL			active	Add-C
Lab BLOOD GASES ARTERIAL BLOOD SP LB #129966	Start: 08/12/05 02:40	Sobenes,J	CAL			active	Er UnkH
Nursing >> TEDS	Start: 07/05/05 15:01	Eaton,E	LES			active	Med Se
Non-VA AZITHROMYCIN TAB 250MG TAKE TWO TABLETS BY MOUTH EVERY DAY Non-VA medication recommended by VA provider		Santiago,V				active	Pcs-Sar

Status Column

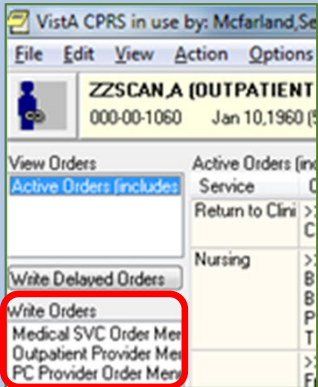
This column shows the status of the orders that are displayed. The above screenshot shows the different Order Status that may display. i.e. ACTIVE, PENDING, DISCONTINUED

Right clicking on any order will allow you to change, Discontinue, Renew, Flag, Unflag, and Verify the orders

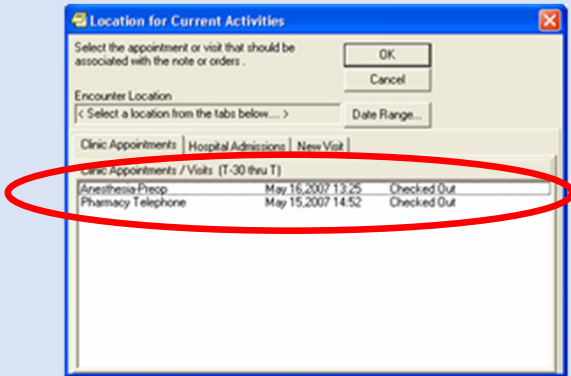
- Details...
- Results...
- Results History...
- Change...
- Change Release Event
- Copy to New Order...
- Discontinue Order
- Renew...
- Park
- Unpark - Generates a request to Fill/Refill
- Verify...
- Chart Review
- Flag...
- Flag Comment...
- Unflag...
- Allow Multiple Assignment

Writing Orders

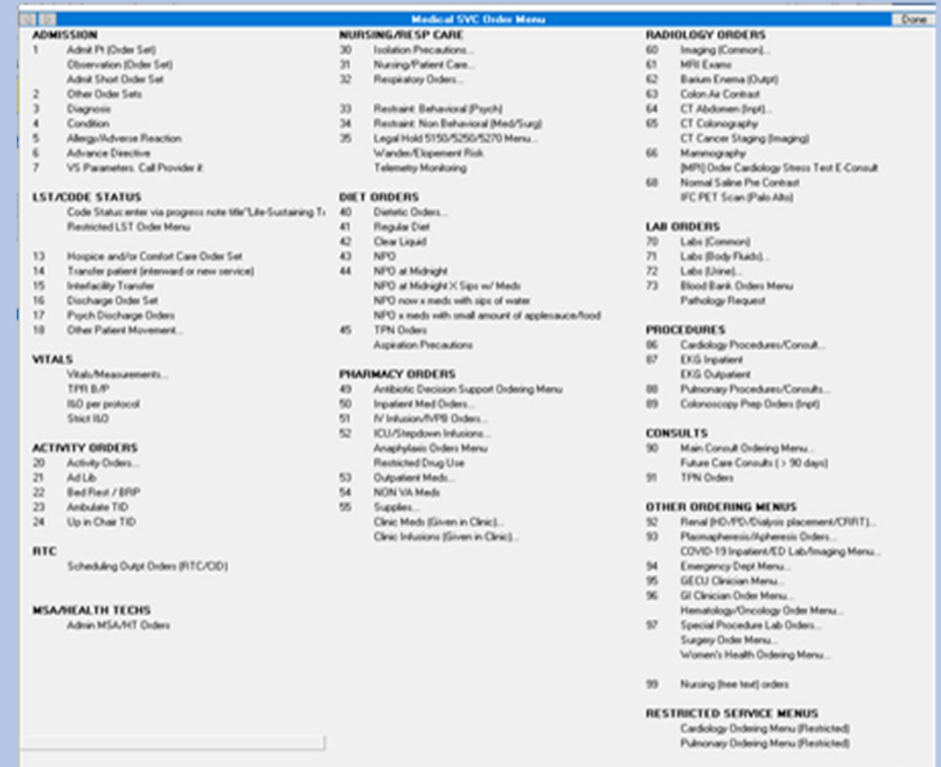
On the upper, left hand side of the Orders tab display is the Write Orders Pane. This pane will display the ordering menus as assigned to each user. There are multiple menus that can be assigned. For the majority of clinicians the main ordering menu is the MEDICAL SVC ORDER MENU.



If the patient does not have a scheduled appointment for the day of visit a dialog box will appear. Either select a location from the list of clinic appointments, or select from the list of admissions, or enter a new visit. The LOCATION selected should be where the care is being delivered.



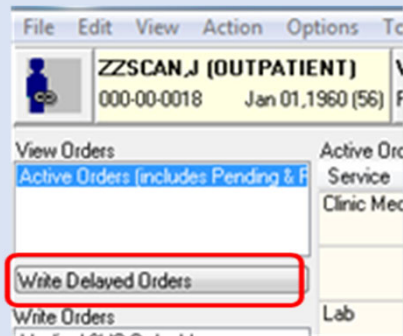
Orders must be submitted through the appropriate package. For example, Labs must be ordered through the lab package



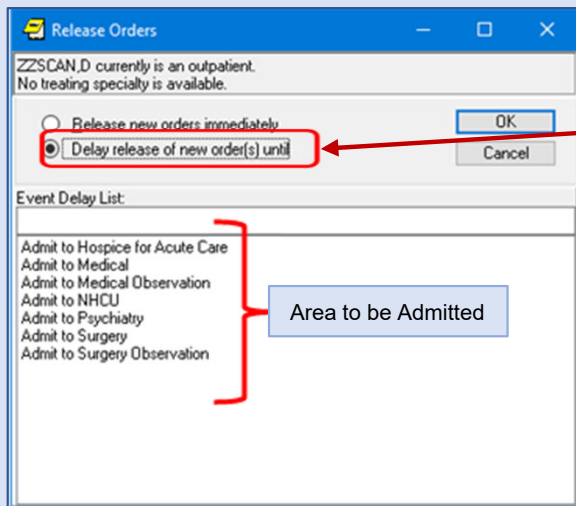
Writing Delayed Orders for Inpatient Admissions

These are orders written **before** the patient is admitted; they are released (activated) after the admission action in Vista by the Ward Clerk or AOD.

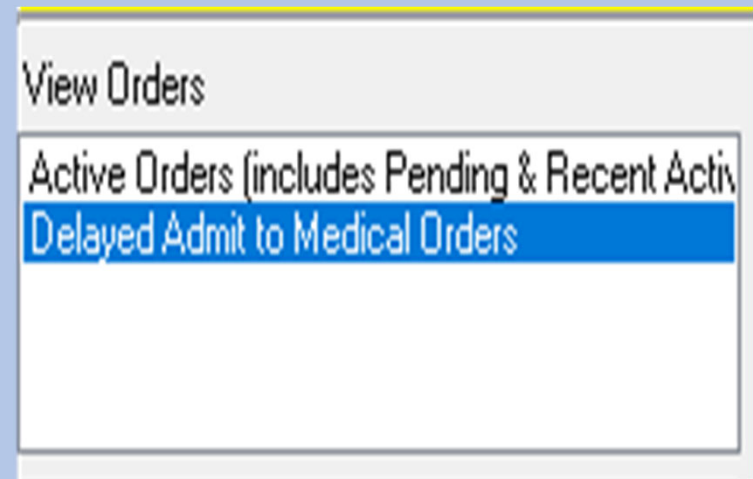
1. Select "Write Delayed Orders" button



2. Select the "Admit to" area where the patient is being admitted. The order MUST be Delay Release.
Do NOT select otherwise.



3. Write Admission Orders that follow
4. Sign delayed orders
5. Delayed orders will be released after the patient is admitted into a ward by the clerical staff.
6. Delayed orders are in a separate section from active orders. You can view them or add to them by selecting the delayed orders section as shown



Medication Orders

4 Types of Medication Orders:

1. INPATIENT MEDICATIONS
2. OUTPATIENT MEDICATION
3. CLINIC MEDICATIONS
4. NON-VA MEDICATIONS (DOCUMENTATION ONLY)

To prescribe medications for Inpatients, please order **Inpatient Meds**

Inpatient Med Orders...

To prescribe medications for the Veteran to take at home, please order **Outpatient Meds**

Outpatient Meds...

To Prescribe medications for medications administered in clinic, please use **Clinic Meds**

Clinic Meds (Given in Clinic)...
Clinic Infusions (Given in Clinic)...

To document medications that the patient is taking outside of the VA, please use **NON-VA Meds**

NON VA Meds

Ordering Inpatient Medications

PHARMACY ORDERS

- 49 Antibiotic Decision Support Ordering Menu
- 50 Inpatient Med Orders...
- 51 IV Infusion/IVPB Orders...
- 52 ICU/Stepdown Infusions...
Anaphylaxis Orders Menu

Select Schedule and provider may check PRN box as indicated.

Review the **administration time** associated with the selected schedule. If the time is in the past i.e. 1000 and it is 1400 when ordered, the patient will receive the dose the following day. The ordering Provider may select "Give additional dose now" to begin therapy and the next dose will be given as scheduled

Always read final instructions for accuracy

The screenshot shows the 'Inpatient Medications' window. At the top, there is a 'PHARMACY ORDERS' menu with options 49, 50, 51, and 52. Below this is a table of medication options:

Dosage	Complex	Route	Schedule (Day-Of-Week)
20MG		ORAL	DAILY
10MG		ORAL	5X-DAY
20MG		PEG TUBE	ANTICOAG
40MG		G TUBE	AT BEDTIME
60MG		NG TUBE	BID
80MG		J TUBE	BID AC
120MG			BID PC
			BID W/MEALS
			CONTINUOUS VIA PUMP
			DAILY
			EVERY DAY
			EVERY DAY (DIABETIC)
			EVERY DAY (MEAL)
			EVERY DAY (PRED)
			EVERY DAY (WARFARIN)
			EVERY OTHER DAY
			FINGER STICK (5X-DAY)

Below the table, there are fields for 'Comments:', 'Give additional dose now' (checkbox), 'Admin Time: 1000', and 'Expected First Dose: TOMORROW (May 29, 20) at 10:00'. At the bottom, there is a 'Priority' dropdown menu set to 'ROUTINE' and a 'FUROSEMIDE TAB 20MG PO DAILY' entry. Buttons for 'Accept Order' and 'Quit' are also visible.

Select Priority to change medication priority.

The dropdown menu shows the following options: ROUTINE (selected), ASAP, ROUTINE, and STAT.

Enter comment for special instructions for indication for PRN orders

Guidelines for Medication Priorities

The schedule types for NOW and STAT orders must be ONE-TIME.

STAT orders should be written when failure to provide the medication immediately could result in harm/injury to the patient, prolong pain, lengthen hospital stay or result in other adverse outcomes.

The order should be interpreted as "drop" everything (else) to dispense and administer a dose of medication" MD will notify nursing of any stat orders.

NOW/ASAP orders are interpreted as non-urgent (as opposed to a STAT order above), but that the provider wants the medication to begin as soon as possible within a 2-hour window.

The default order START time will be NOW.

The default STOP time for ONE-TIME orders will be 12 hours and 24 hours for vaccinations. (Pharmacy will do a service correction to provide the correct stop time.)



MSA and/or RN will alert pharmacy of stat medication orders they have been informed about.

Pharmacy guidelines are to dispense as soon as possible, within 15 minutes.

Nursing/RT guidelines are to administer as soon as available/delivered, but within 15 minutes of availability.

The nurse will be notified of the delivery/availability of STAT medication on the unit by pharmacy.

Outpatient Medication Order

Starting a Medication Order from the Orders Tab:

Click "Medical SVC Order Menu"

Click "Outpatient Medications" for commonly prescribed medications.

Orderable Item

PRN

Dosage choices -can be free text if desired dosage is not on list. For free-text, specify the drug strength in the comment field. Otherwise pharmacy won't know if it is 1-3 tabs of a 50mg or 100mg or 200mg,ect.

Dosage	Complex	Route	Schedule
50MG		ORAL (BY MOUTH)	BID
6.25MG	\$0.005 Tier 1	ORAL (BY MOUTH)	3ID
12.5MG	\$0.010 Tier 1		3xW
25MG	\$0.020 Tier 1		5xD
37.5MG	\$0.030 Tier 1		AT ONSET
50MG	\$0.014 Tier 1		BID
75MG	\$0.021 Tier 1		BID AC
100MG	\$0.119 Tier 1		CONTINUOUS DRIP
150MG	\$0.041 Tier 1		ENS
200MG	\$0.238 Tier 1		HS
			MO+TU+WE
			MO+WE-FR
			NOw
			ON CALL
			ONCE
			PER FS-ORDER
			Q12H

Indication: FOR ANOTHER TEST REASON

Comments:

Days Supply: 30 Qty (TAB): 60 Refills: 0

Pick Up: Mail Window

Priority: ROUTIN

METOPROLOL TARTRATE TAB 50MG
TAKE ONE TABLET BY MOUTH TWICE A DAY
Quantity: 60 Refills: 0
Indication: FOR ANOTHER TEST REASON

Accept Order Quit

Read this box before accepting the order. If it doesn't make sense to you it won't make sense to the pharmacist or the patient.

It is strongly encouraged to use routing of "Mail" (with a 90-day supply if appropriate). But for NEW medication that must be started immediately, please make sure "Window" is selected. The patient will need counseling. Pharmacy will hold the drug for patient to pick up for five days before mailing it.

If the medication is to be administered in Clinic, you must use the Clinic Medication Ordering pathway in CPRS - "Clinic Infusions" or "Clinic Medications" from the order menu.

Click "Accept Order" when the form is complete (you will still need to sign the order).

Entering Indications

Indications

Providers can enter free text of 3-40 characters- however drop downs should be used if available .

Be sure to precede the Indication with the word “For” so that the SIG reads clearly.

Indication are required for medication ordering except NON-VA meds and Supplies

Important: Use your clinical judgement on whether to use medical terminology or layman’s language in the indication because the Veteran/Caregiver will see the indication on the medication label. It is important that they understand the reason for the medication.

1. The most common indication is shown first, if available.
2. There is a separation line from the most common indication and the rest of the indications.
3. The rest of the indications are sorted in alphabetical order.

Outpatient Medications

METOPROLOL TARTRATE TAB Change

Dosage	Complex	Route	Schedule	PRN
50MG		ORAL (BY MOUTH)	BID	<input type="checkbox"/>
6.25MG	\$0.005 Tier 1	ORAL (BY MOUTH)	3ID	
12.5MG	\$0.010 Tier 1		3xW	
25MG	\$0.020 Tier 1		5xD	
37.5MG	\$0.030 Tier 1		AT ONSET	
50MG	\$0.014 Tier 1		BID	
75MG	\$0.021 Tier 1		BID AC	
100MG	\$0.119 Tier 1		CONTINUOUS DRIP	
150MG	\$0.041 Tier 1		ENS	
200MG	\$0.238 Tier 1		HS	
			MO+TU+WE	
			MO-WE-FR	
			NOW	
			ON CALL	
			ONCE	
			PER FS-ORDER	
			Q12H	

Indication:
FOR HIGH BLOOD PRESSURE
FOR HIGH BLOOD PRESSURE
FOR ANGINA
FOR ATRIAL FIBRILLATION
FOR CHEST PAIN
FOR HEART RATE
FOR HYPERTENSION

Priority: ROUTIN

METOPROLOL TARTRATE TAB 50MG
TAKE ONE TABLET BY MOUTH TWICE A DAY
Quantity: 60 Refills: 0
Indication: FOR HIGH BLOOD PRESSURE

Accept Order
Quit

Complex Medication Order Dialog

A different Dosage & Schedule can be entered in each row.

The “then/and” column represents the relationship of each row.

AND is used for separate dosages within a day or within a week

THEN is used for tapering the dosages and can be used in conjunction with the duration column.

Complex medication orders can be entered for both inpatient and outpatient. Click on “Complex” tab to order a medication that requires variations in dosages/schedules/admin days

Once THEN is selected the titration box will appear- once checked the order will contain this message.

PredniSDNE TAB 1MG
 TAKE ONE TABLET BY MOUTH EVERY EVENING FOR 15 DAYS THEN TAKE TWO TABLETS BY MOUTH EVERY EVENING FOR 15 DAYS THEN TAKE THREE TABLETS BY MOUTH EVERY EVENING FOR 15 DAYS THEN TAKE FOUR TABLETS BY MOUTH EVERY EVENING
 Quantity: 270 Refills: 3
 Indication: FOR MIGRAINE HEADACHES
 *** This Rx contains a separate titration and maintenance component to its schedule and instructions ***

The dash between the days of the week is used solely as a separator and not as a range of days

This box shows how the prescription label will appear based on the instructions entered in the dosage/route/etc.. rows and columns above. Please **do not** add in complex instructions AND type in free text alternate instructions in the comments section

If the order cannot adequately be entered using the “complex instructions” area, change the dosage entry to “As directed” and type instructions in the comments section. (Unclear instructions may lead to a Pharmacist contacting you for clarification before the order can be processed.)

Dosage	Complex	Route	Schedule	Duration
5MG		ORAL	MO-WE-FR	
2.5MG		ORAL	TU-TH-SA	

Complex med ordering should also be utilized for NON VA Med documentation to capture the appropriate order to ensure patient's med list is accurate and complete.

Clinic Medication Order

Clinic Meds and Clinic Infusions for Outpatients guidelines:

- Change Location to the location where the patient is seen BEFORE ordering (i.e. FRE PC MD 11)
- Visit date must not be older than 24 hours in the past
- Follow usual workflow for notifying nurses of a new order
- Clinic meds will display in their own section on the orders tab
- Clinic meds can be found under the “Inpatient Medications” section on the Meds tab
- Clinic meds will not appear on the Medication Reconciliation notes.
- Clinic meds will not appear in the Outpatient Meds patient data objects.

LOCATION LOCATION LOCATION...

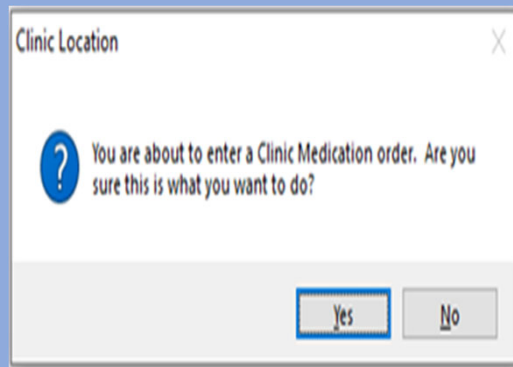
To prescribe medications to be administered in the clinic, please ensure your CLINIC LOCATION is the clinic area in which the patient is to receive the medication. i.e. Ambulatory Infusion Clinic.



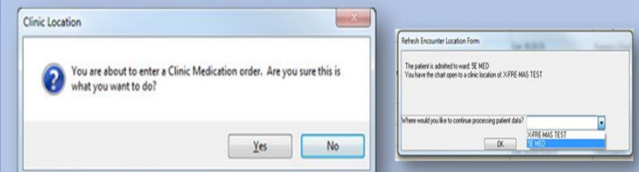
To continue order, on the CPRS Main ordering menu display, select “Clinic Meds” or the “Clinic Infusions



The ordering Provider will be presented with a question, please review this carefully before answering. This is the last warning that a Clinic Medication order is being entered. Select Yes to continue to order a Clinic medication.



CAUTION for Inpatient Ordering Error If you intend to write an **INPATIENT Medication Order**, and you see the warning message shown below (on the left) **YOU ARE ORDERING FROM AN OUTPATIENT LOCATION**, select **“NO”** and **Refresh** (File-->Refresh Patient Information), then select the correct **INPATIENT Ward location** i.e. 5E MED (as shown below on the right) and continue ordering the Inpatient medications.



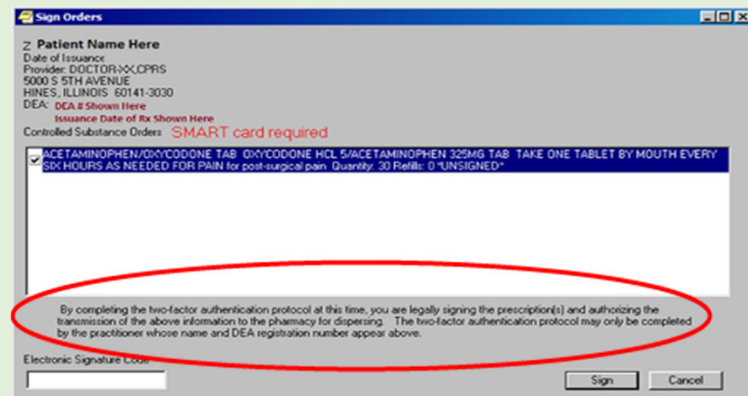
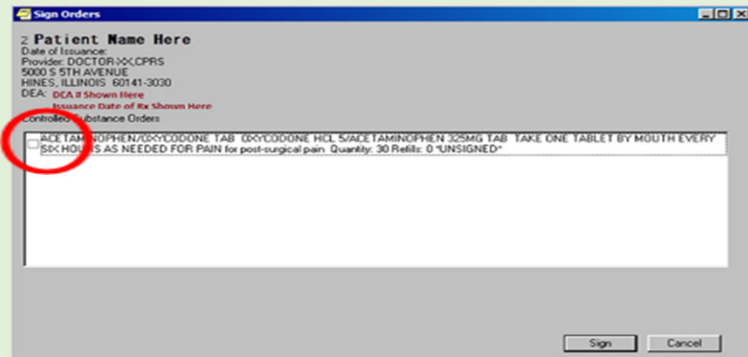
Ordering Outpatient Controlled Substance

When entering an **OUTPATIENT CONTROLLED SUBSTANCE** medication orders a PIV card will be required to sign the order.

Note: a small box will display **UNCHECKED**. This box must be checked to continue with the order.

Once the provider checks the box for the Controlled Substance order a disclaimer/statement will display.

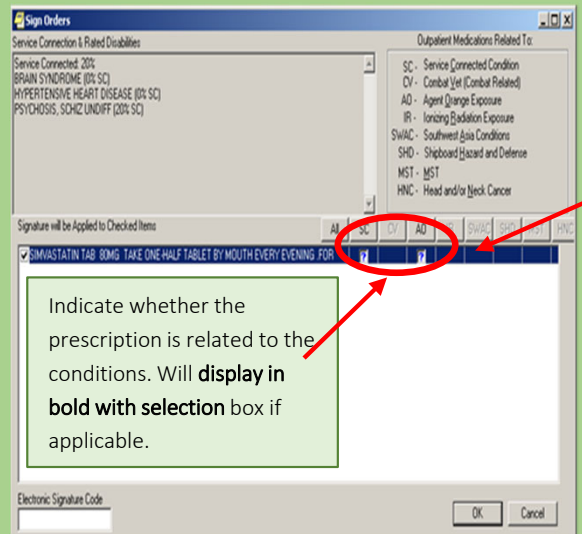
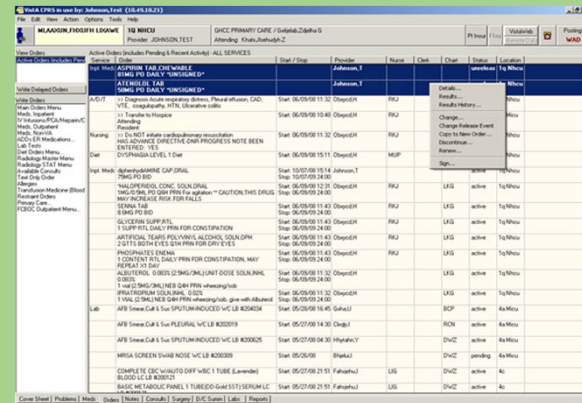
The provider is agreeing to the statement once the order is signed.



Signing an Order

Highlight blue text order(s), right click, then click "Sign."

Or, highlight blue text order(s), click the "Action" drop down menu, then click "Sign."



Indicate whether the prescription is related to the conditions. Will display in bold with selection box if applicable.

After you enter an order, this window may appear. This relates to VA service connected conditions and/or environmental indicators.

The question(s) are required to be answered to continue. By clicking on the ?, the provider can document if the medication ordered is being used to treat the SC condition or if it is related to the environmental indicator i.e. Agent Orange.

Single click = Not related (Blank box, no check mark)

Double click = Related (check mark)

Order Checks

A few of the order check types include:

- Drug/drug interactions
- Duplicate drug class
- Drug/allergy interaction
- Remote meds from another VA

There are 2 degrees of order checks:

Significant – for information only

Critical – requires justification and signature for acceptance.

The justification entered should be clear to the verifying pharmacist

CPRS Order Checks Screen

Includes instructions on how to view the screen (1)

Selecting the check box next to each order (2)

Allows the user to input a reason for overriding each individual order (3)

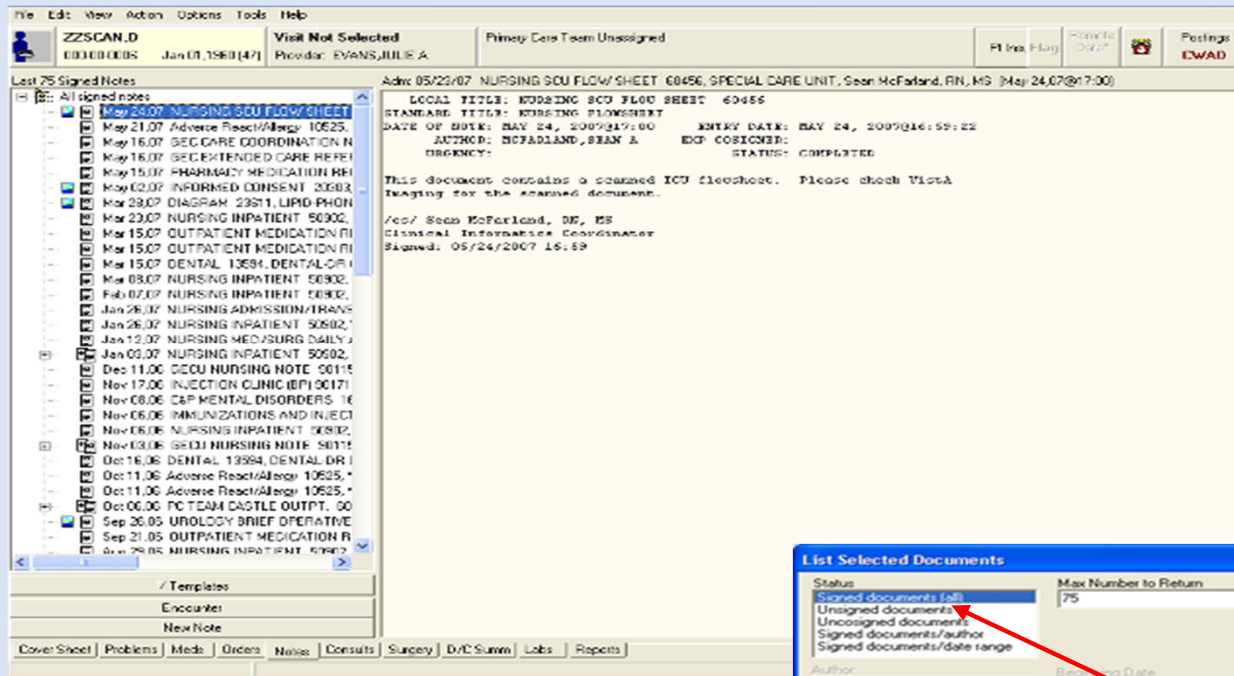
Displays detailed information about each order check as it relates to each of the selected orders (4)

Allows user to perform Allergy Assessment from the order checks screen if no allergy assessment is noted

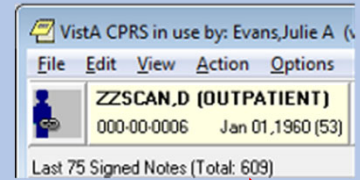
The screenshot shows the 'Order Checks' interface. At the top, a red box labeled '1' points to the window title. Below the title, instructions state: 'Move through the list on the left side. The right side displays the associated order checks and reason for override, when available. All orders require a reason for override. To cancel an individual order use the checkbox.' A table on the left lists orders with checkboxes. A red box labeled '2' points to the checkboxes. The table has columns for 'Cancel', 'Status', and 'Order'. The 'Order' column contains: 'WARFARIN TAB 1MG - TAKE ONE TABLET BY MOUTH EVERY DAY', 'WARFARIN TAB 4MG - TAKE ONE TABLET BY MOUTH EVERY DAY', and 'CT ABDOMEN W/IV/D CONT "UNSIGNED"'. The right side of the screen displays detailed information for the selected orders. A red box labeled '3' points to the 'Reason for overriding order check(s):' field. A red box labeled '4' points to the detailed check information, which includes: 'Order Checks for: WARFARIN TAB 4MG - TAKE ONE TABLET BY MOUTH EVERY DAY AT 1 PM - Quantity: 30 Refills: 0 - Indication: TO THIN BLOOD "UNSIGNED"', 'Checks marked with "*" require reason for override', '(1 of 2) [Check Level: High] "*" Duplicate Therapy: Order(s) exist for [WARFARIN (COUMADIN) NA 1MG TAB [UNRELEASED]] in the same therapeutic category(ies): Dual Anticoagulants, Antiplatelet Drugs-excluding ASA 325 mg and below, Antiplatelet and Antithrombotic Drugs (Selected Group 2)', and '(2 of 2) [Check Level: Moderate] Remote Order Checking not available - checks done on local data only'. At the bottom, a red box labeled '5' points to the 'Perform Allergy Assessment' button. Other buttons include 'View Monograph', 'Cancel Checked Order(s)', 'Accept', and 'Return to Orders'. A status bar at the bottom indicates '2 Remaining Critical High Order Check Overrides' and provides icons for 'Action is required', 'All requirements have been met', 'Order will be cancelled', and 'Information dialogue'.

Notes Tab

From the Notes tab you can create new progress notes for a patient and view existing progress notes and documents. Documents on the Notes tab are organized in a tree structure on the left side of the screen.

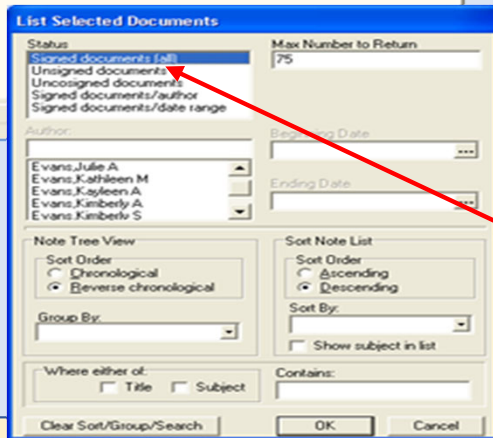


The view may be sorted by selecting "View", "Custom View". Sorting by note title and visit date are the most common options selected. To make a particular view the default click on OK then go the menu bar "View" and click on "Save as Default View".

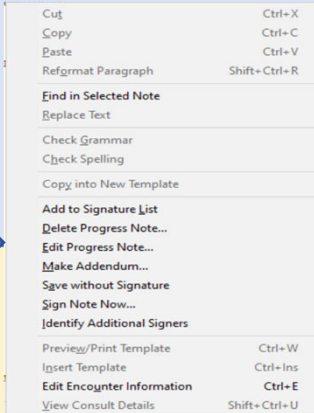


CPRS does display total number of notes a veteran has in their record.

On the toolbar it is set the only view the last 75 notes entered. To view older notes, you can change "Max Number to Return" to desired number. Do not leave this blank otherwise you will pull in ALL signed notes. Some patients have over a thousand note titles.



Right clicking on note allows you to sign note, save for later, delete note if unsigned, edit note if unsigned, make an addendum to the note, or add additional signers to the note



Consults Tab

Consults are requests from one clinician to a hospital, service or specialty for a procedure or other service.

When a consult is entered for a patient, it can be viewed on the order screen. Once the consult is completed, the note is viewed on the consult tab and the notes tab.

Examples of consults include Physical Therapy, Nutrition, Psychiatry, etc.

Vista CPSIS In use by: Evans, Julie A. (vista.fresno.med.va.gov)

ZZSCAN.D 000-00-0006 Jan 01,1960 (48) Visit Not Selected Primary Care Team Unassigned

All Consults

- May 12,06 (c) NON FORMULARY DRUG REQUEST Cons Consult # 572401
- May 12,06 (c) NON FORMULARY DRUG REQUEST C
- Apr 01,06 (c) NON FORMULARY DRUG REQUEST C
- Mar 28,06 (c) NEUROLOGY Cons Consult # 563267
- Mar 25,06 (c) DENTAL IMAGE Proc Consult # 562499
- Feb 20,06 (c) PCS CASE MGT-CARLSON Cons Cons.
- Jan 15,06 (c) PSYCHIATRY OUTPATIENT Cons Cons.
- Sep 12,07 (dc) ENT Cons Consult # 521012
- Sep 12,07 (dc) ENT Cons Consult # 521011
- Aug 06,07 (c) DIABETIC TELERETINAL IMAGING (PRI
- Aug 06,07 (c) DIABETIC RETINOPATHY SURVEILLAN
- Aug 03,07 (c) ENT Cons Consult # 513322
- Jul 02,07 (dc) MOVE Cons Consult # 507103
- Jun 28,07 (c) DIET CONSULT Cons Consult # 506636

Current Pat. Status: Outpatient
Primary Eligibility: NRC

Order Information
To Service: NON FORMULARY DRUG REQUEST
From Service: PHARMACY TELEPHONE
Requesting Provider: YAJANTAN, JENNIFER L
Service is to be rendered on an OUTPATIENT basis
Place: Consultant's choice
Urgency: Routine
Orderable Item: NON FORMULARY DRUG REQUEST
Consult: Consult Request

Reason For Request:
Clinical Data Justification
Non formulary Drug Request

Medical condition being treated: TESTING

Drug requested:
Strength:
Schedule:

Drugs already tried:
Outcome:
Reason Non formulary agent required (Check one and provide explanation):
() Treatment failure with formulary agent
() Adverse drug event
() Only treatment option available for specific indication
() Other: (Please provide explanation):

Inter-facility Information
This is not an inter-facility consult request.

Status: COMPLETE

** In order to close a consult, you must have permissions to act on the consult, and write the note using a consult note title associated with that consult.

Surgery Tab

Vista CPSIS In use by: Evans, Julie A. (vista.fresno.med.va.gov)

ZZSCAN.D 000-00-0006 Jan 01,1960 (47) Visit Not Selected Primary Care Team Unassigned

All Surgery Cases

- Jun 14,2006 INCISION AND DRAINAGE RIGHT ARM, YAMAGUCHI,KENT T, Case # 58904
- Jun 14,06 ANESTHESIA REPORT 30001 (#3859787)

Cover Sheet | Problems | Meds | Orders | Notes | Consults | Surgery | D/C Summ | Labs | Reports

Discharge Summary Tab

The Discharge Summary Tab gives quick access to Discharge Summary(ies). The list of documents in the D/C Summary tab is in a tree structure instead of a simple list.

Vista CPSIS In use by: Evans, Julie A. (vista.fresno.med.va.gov)

ZZSCAN.G 000-00-0013 Jan 01,1960 (57) Visit Not Selected Primary Care Team Unassigned

All Signed Summaries

- May 17,07 Addendum to Discharge Summary 20000, MED SE, JULIE A EVANS (completed) Adv: 05/17/07 Doc
- May 17,07 Discharge Summary

LOCAL TITLE: Addendum
STANDARD TITLE: ADDENDUM
SICR DATE: MAY 17, 2007 10:41 ENTRY DATE: MAY 17, 2007 10:41:03
DICTATED BY: EVANS, JULIE A ATTENDING: McFARLAND, KEAN A
URGENCY: routine STATUS: COMPLETED

This is a text:
/s/ JULIE A EVANS
PROGRAM SPECIALIST
Signed: 05/17/2007 10:42
/s/ Sean McFarland, MD, MS
Clinical Application Coordinator
Co-signed: 05/17/2007 10:54

--- Original Document ---
05/17/07 Discharge Summary 20000:
STANDARD:
This is a text to see if we can do addendms.
OPERATIONS/PROCEDURES:
/s/ JULIE A EVANS
PROGRAM SPECIALIST
Signed: 05/17/2007 10:16
/s/ Sean McFarland, MD, MS
Clinical Application Coordinator
Co-signed: 05/17/2007 10:17

New Summary

Cover Sheet | Problems | Meds | Orders | Notes | Consults | Surgery | D/C Summ | Labs | Reports

Labs Tab

On the Labs tab, you can view the results of lab tests that were ordered for a selected patient. Ordering of lab tests is performed on the Orders tab. The Cover Sheet tab displays results of some of the patient's most recent orders. Some of the lab reports are also found on the Reports tab. The fields on the left side of the Labs tab list available lab results. For some reports, you may need to specify a date range or other criteria. Some reports will prompt for specific tests to be displayed. You can double-click on a result to graph the results

The Lab Results Pane provides several ways to view Lab Results.

- Most Recent – shows the latest lab test and allows the user to move back through the most recent results or items collected.
- Lab Overview (Collected Specimens) – shows which Lab orders have been collected.
- Pending Lab Orders – Shows items that are pending so that healthcare providers will know what lab orders are pending and not ordered again.
- Graph – allows the option of graphing data such as labs, orders, medications, etc....
- Anatomic Pathology – allows the option of viewing the results of specimens.
- Lab Orders (All) – gives the ability to view the status of labs.
- Cumulative - the most comprehensive lab report. It displays all of the patient's lab results.

Collection Date/Time	Test	Result / Status	Flag	Units	Ref Range
Jan 08, 2020 13:10	APTT	50	H	secs	26 - 40
	PTT 1:1 MIX	35		secs	26 - 40
	PTT 1:1 MIX 1HR	36		secs	26 - 40
	PTT INHIBITOR ASSAY INTERPRETATION	comment			

Reports Tab

The Reports tab provides information from several disciplines. The entire list of available reports is provided on the left column of the tab. Most common include the following:

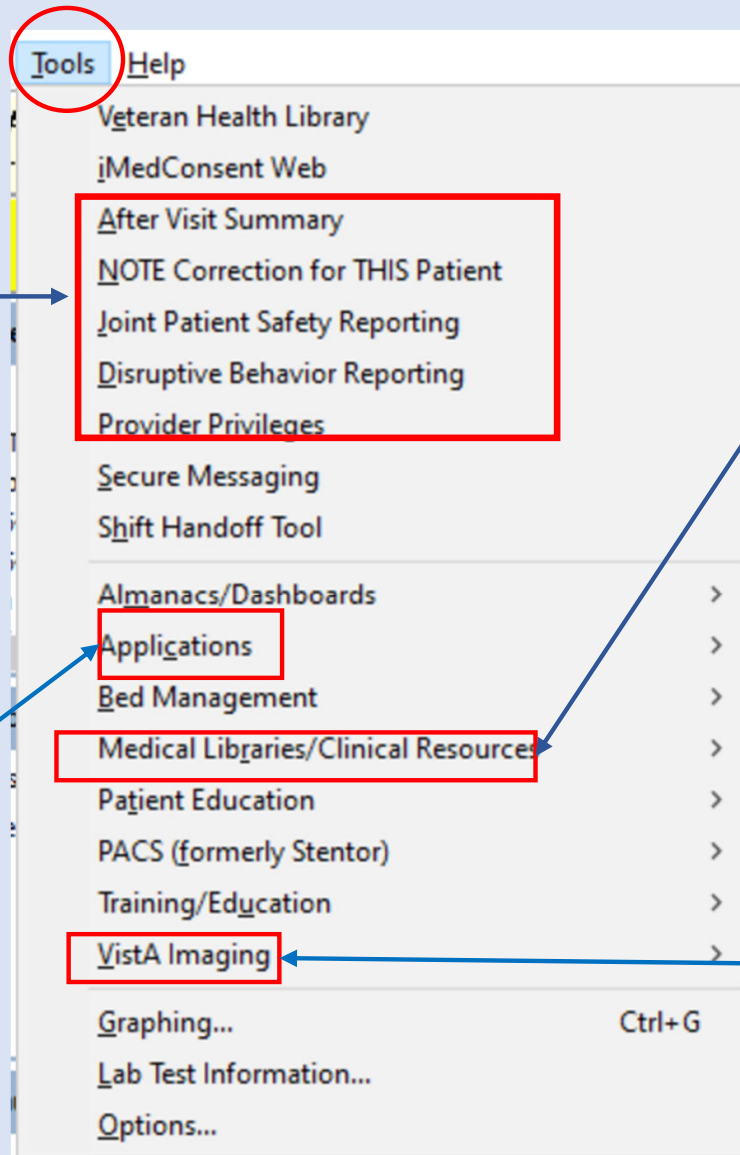
- Imaging (local only)
- Health Summary:
 - Immunization And Injections
 - Essential med List for review
- Clinical Reports:
 - PHARMACY: and pharmacy reports to view the patient's complete medication history
- Med Admin History (BCMA)

Additional Tools In CPRS

To find additional resources in CPRS select the tools option:

Tools that are included:

- Imed Consent for Informed consent capture
- Joint Patient Safety And Disruptive Behavior Reporting
- Shift Handoff tool- for inpatient settings for physician to physician hand off
- NOTE Correction for THIS Patient can be used to send an email to Health Informatics to remove and change clinic locations if the note has already been signed.



Inside Medical Libraries/Clinical Resources are resources such as

- Journals
- Micromedex to look up medications
- Nursing skills tools
- Up to Date
- Inside Patient Education there are many resources to print out information for patients at discharge regarding their medical conditions.

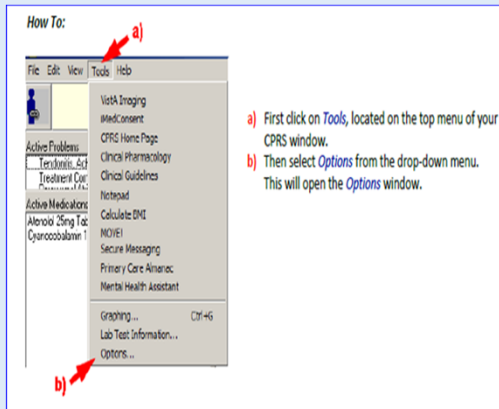
Inside Applications you will find:

- Care Portal for Discharging patients in the inpatient setting.
- After Visit Summary tool
- BCMA which is used for scanning medications

Inside Vista Imaging is where you will find

- Informed consents that are completed
- Images that have been uploaded
- Community care records that are uploaded,
- EKG images

Adjusting Your Notification Settings



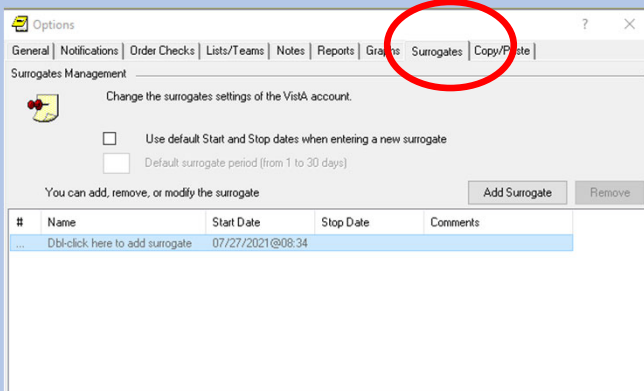
Once you open the options tab you will be able to customize several things:

- Notifications/Alerts: Select the checkbox next to the notifications you want to be alerted to
- Lists/Team: use this section to pick what patients you have on your team to see alerts for.
- Notes: Use section to customize your default notes list that you use most often

Setting a Surrogate

When you are away or plan to be away you can set a surrogate, who will be receiving your alerts for you while you are gone.

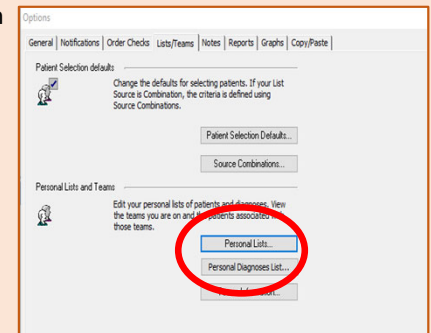
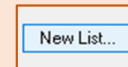
Within the notifications tab you can select surrogate settings to select the surrogate and date range for when you will not be here. Different Surrogates can now be set for different periods of time- to ensure your alerts are covered



Creating Personal List

Open the Personal List section

and select new List:

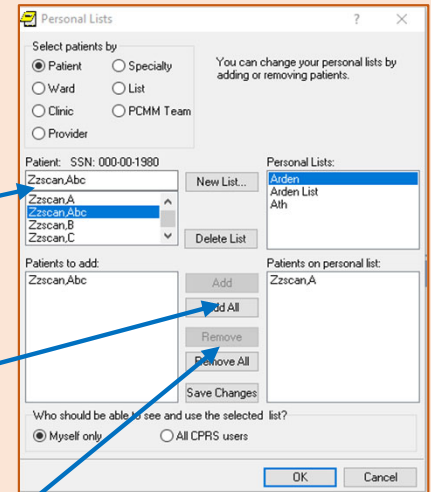


Once that new list is created start selecting the patients to place on the team. Note patient's placed on the list will also generate some view alerts.

You can search patients name by selecting patient name, ward, or clinic name and typing in first initial of last name and last four.

Select the patient you wish to add and it will add them to the list on left- Once you select **add all** these patients will be able to select and in which you see alerts for.

At the end of the rotation or shift (for nursing) don't forget to come back to your list and select **remove all**. This will remove all the patients, so you don't come back to 100s of alerts to process!!!



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