

CPRS v28

Functionality Changes

High Level Information

- 1020 RPC assigned to OR CPRS GUI CHART option
- Delphi Source Code size approx. 57 MB
- Executable size approx. 5.29 MB
- Approx. 435 M routines
- Approx. 300 parameter
- 16 DDs for CPRS
- 22 DDs for Order Checks

High Level Information

- OR*3.0*280 (CPRS 28) contains:
 - 80 M routines changes
 - 10 new or modified parameters
 - 14 new or RPC
 -

High Level Information

■ Interfaces with twenty-eight VistA applications

Adverse Reaction Tracking	Mental Health
Authorization/Subscription	Order Checks
Automated Info Collection Sys	Outpatient Pharmacy
Bar Code Med Admin	Patient Care Encounter
Clinical Reminders	Pharmacy Data Management
Consult/Request Tracking	Problem List
Dietetics	Radiology/Nuclear Medicine
Discharge Summary	Registration
Health Summary	Scheduling
Herbal/OTC/Non-VA Meds	Surgery
Inpatient Medications	Text Integration Utilities
IV Medications	VBECS
Lab Service	Vitals
Lexicon Utility	Women's Health

Functionality Changes

- Project Initiatives (6)
 - Clinical Reminders Order Checks
 - Pharmacy Re-engineering Support
 - CPRS Lab Status Display
 - OIF/OEF SF513 updates
 - Consults Earliest Appropriate Date (Consults)
 - 508 changes
- Patient Safety Issues (17)
- Remedy tickets (83)

Clinical Reminders Order Checks

Clinical Reminder Order Checks

- Sites can create local order checks using the reminder tools
 - Reminder Definition
 - Reminder Term
 - Reminder Exchange
- Possible model for future National Order Checks
-

Clinical Reminder Order Checks

- Two areas of a setup
- Orderable Item Group
 - The orderable item groups consist of a list of orderable items the rules should be applied to.
- Rules
 - The rule is equivalent to an order check. If the rule evaluates as true, the rule will show in CPRS. An orderable item can have multiple rules evaluated against it.

Rule Setup

- Consists of multiple fields
 - Rule Name
 - Display Name
 - Active Flag
 - Testing Flag
 - Severity
 - Reminder Term or Reminder definition
 - Order Check Text

Testing Field and the Order Check Rules

- Two new Order Check rules will be released with CPRS 28
 - Clinical Reminder Order Checks Production
 - Active rules with a value of false in the testing flag field will be evaluated by this rule
 - Clinical Reminder Order Checks Testing
 - Active rules with a value of true in the testing field will be evaluated by this rule.

Order Check	On/Off	Comment
<input checked="" type="checkbox"/> Clinical Reminder Live	On	
<input checked="" type="checkbox"/> Clinical Reminder Test	On	

Reminder Term Example

Drug Class List:

- . CN302
- . CN309
- . CN400
- . CN601
- . CN709

Orderable Item List:

- . LORAZEPAM TAB
- . CHLORDIAZEPOXIDE CAP,ORAL
- . CHLORDIAZEPOXIDE INJ
-
- . CLOZAPINE (FAZACLO) TAB,RAPID DISINTEGRATE
- . DIAZPAM TAB
- . ARIPIPRAZOLE INJ,SOLN
- . PALIPERIDONE TAB,SA
- . trazODONE TAB

Reminder Rule List:

- . Rule Name: FALL RISK
- . Display Name: Fall Risk
- . Active Flag: Yes
- . Testing Flag: No
- . Severity: Medium

- . Reminder Term: HIGH FALL RISK Reminder Term Status: TRUE

Order Check Text:

- . Patient at high risk of falls. This medication may
- . increase the fall risk.

Rule Description:

- . Patients at high risk of falls should have these
- . medications ordered with careful consideration.

Reminder Order Check - Diazepam

Order Checking

(1 of 1) Fall Risk

Patient at high risk of falls.

This medication may increase the fall risk.

Accept Order

Cancel Order

See Monograph

Only displays for patients with a fall in the past year or a high risk diagnosis

Reminder Definition Example

Drug Class List:

- AH102
- CN601
-

Orderable Item List:

- diMENHYDRINATE TAB
- diPHENHYDRAMINE CAP,ORAL
-
- traZODONE TAB
-

Reminder Rule List:

- Rule Name: ANGLE CLOSURE GLAUCOMA
- Display Name: Risk for Acute Angle-Closure Glaucoma
- Active Flag: Yes
- Testing Flag: No
- Severity: High
-

Reminder Definition: OC GLAUCOMA CLOSED ANGLE

- Definition Status: Due
- Output Text: Both Order Check and Definition Text
- Order Check Text:
 - This medication has the potential to trigger acute glaucoma in this patient with a prior diagnosis of angle-closure glaucoma.
 -
 - An acute rise in intra-ocular pressure may occur in susceptible individuals when anti-cholinergic or adrenergic medications are used.
- Rule Description:
 - Patients with angle-closure glaucoma may have an acute rise in intra-ocular pressure in susceptible individuals.
 -
-

Reminder Order Check - Diphenhydramine

Order Checking

{1 of 2} Risk for Acute Angle-Closure Glaucoma

This medication has the potential to trigger acute glaucoma in this patient with a prior diagnosis of angle-closure glaucoma.

An acute rise in intra-ocular pressure may occur in susceptible individuals when anti-cholinergic or adrenergic medications are used.

Reminder Term: GLAUCOMA, ANGLE-CLOSURE

Problem Diagnosis:

05/03/2010 365.20 PRIM ANGL-CLOS GLAUC NOS Priority: CHRONIC Status:

ACTIVE

Prov. Narr. - Glaucoma, Angle-Closure

{2 of 2} Previous adverse reaction to: ANTIDEPRESSANTS,OTHER: (LOCAL)

Accept Order

Cancel Order

See Monograph

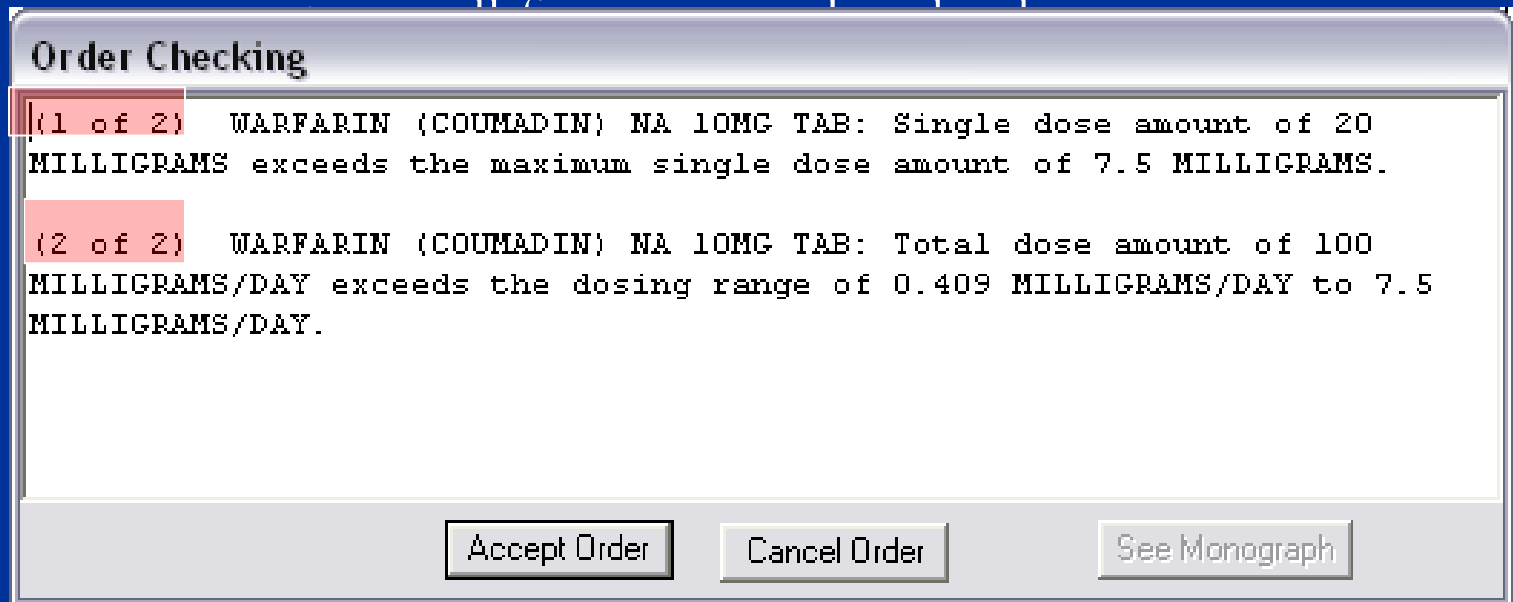
Pharmacy Re- engineering Support

Changes currently underway

- In CPRS GUI v28 (OR*3*280)
 - Display Enhancements for Order Checks
 -
- In PRE 0.5 (OR*3*272)
 - Removal of Duplicate Class Order Checks
 - Addition of Duplicate Therapy Order Checks
 - Addition of Dosage Order Checks
 - Enhancement to Drug Interaction Order Checks to also include Monograph

Display Enhancements (CPRS v28)

- Acceptance Dialog (first alert appearance)
 - Changes
 - Shows (x of y) so provider knows if he/she needs



Order Check Dialog on Signature

Order Checks

To cancel an order select the order by checking the checkbox and press the "Cancel Checked Order(s)" button.

Cancel	Order/Order Check Text
<input type="checkbox"/>	AMIODARONE TAB 100MG PO BID *UNSIGNED*
	High Clinical Danger Level (1 of 3) AMIODARONE TAB: Total dose amount of 200 MILLIGRAMS/DAY is below the dosing range of 400 MILLIGRAMS/DAY to 800 MILLIGRAMS/DAY. High Clinical Danger Level (2 of 3) CRITICAL drug-drug interaction: AMIODARONE HCL (PACERONE) 100MG TAB and WARFARIN (COUMADIN) NA 10MG TAB [UNRELEASED] - The concurrent administration of amiodarone and an anticoagulant may result in an increase in the clinical effects of the anticoagulant and an increased risk of bleeding.(1-22) It may take several weeks of concurrent therapy before the full effects of this interaction are noted. The effect of amiodarone on anticoagulant levels may continue for several months after amiodarone is discontinued. - Monograph Available (3 of 3) SIGNIFICANT drug-drug interaction: AMIODARONE HCL (PACERONE) 100MG TAB and ONDANSETRON TAB [PENDING] - ADDITIVE SIDE EFFECTS FROM BOTH DRUGS.'NO MONOGRAPH EXISTS FOR THIS DRUG INTERACTION.USE COMBINATION CAUTIOUSLY, MAY REQUIRE DOSE REDUCTION OF ONE OR BOTH MEDICATIONS. - Monograph Available
<input type="checkbox"/>	WARFARIN TAB 20MG PO BID *UNSIGNED*
	High Clinical Danger Level (1 of 4) WARFARIN TAB: Single dose amount of 20 MILLIGRAMS exceeds the maximum single dose amount of 7.5 MILLIGRAMS. High Clinical Danger Level (2 of 4) WARFARIN TAB: Total dose amount of 40 MILLIGRAMS/DAY exceeds the dosing range of 0.409 MILLIGRAMS/DAY to 7.5 MILLIGRAMS/DAY.

NOTE: The override justification is for tracking purposes and does not change or place new order(s).

Enter justification for overriding critical order checks:

Changes to IV Ordering Dialog

Infusion Order [Close]

Solutions | Additives

Solution/Additive*	Volume/Strength*	Additive Frequency*
SODIUM CHLORIDE 0.45% INJ	1000 ML	N/A
MULTIVITAMINS INJ	30 ML	1 Bag/Day
AMPICILLIN INJ	25 GM	See Comments

Remove

Comments

Give Ampicillin in the second bag.

Route* (Expanded Med Route List) | Type* (IV Type Help) | Schedule* | Infusion Rate (ml/hr)*

INTRAVENOUS | Continuous | [] PRN | 150

Priority* | Duration or Total Volume (Optional)

ROUTINE | [] []

* Indicates a Required Field

MULTIVITAMINS INJ 30 ML 1 Bag/Day, AMPICILLIN INJ 25 GM See Comments in
 SODIUM CHLORIDE 0.45% INJ 1000 ml INTRAVENOUS 150 ml/hr
 Give Ampicillin in the second bag.

Accept Order

Quit

Copy/Change Order Dialog

Infusion Order ✖

Solutions	Additives	Solution/Additive*	Volume/Strength*	Additive Frequency*	Prev. Add. Freq.
		SODIUM CHLORIDE 0.45% INJ	1000 ML	N/A	
test3		MULTIVITAMINS INJ	30 ML	1 Bag/Day	1 Bag/Day
test1		AMPICILLIN INJ	25 GM		in bag 2
test					

AMINO ACIDS 10% INJ
 AMINO ACIDS 5% INJ
 AMINO ACIDS 5.2%-RF INJ
 AMINO ACIDS 5.4% INJ
 AMINO ACIDS 5.5% INJ
 AMINO ACIDS 7% INJ

Comments Remove

Route* [\(Expanded Med Route List\)](#) Type* [\(IV Type Help\)](#) Schedule* PRN Infusion Rate (ml/hr)*

INTRAVENOUS Continuous 150

Priority* Duration or Total Volume (Optional)

ROUTINE

* Indicates a Required Field

MULTIVITAMINS INJ 30 ML 1 Bag/Day, AMPICILLIN INJ 25 GM in
 SODIUM CHLORIDE 0.45% INJ 1000 ml INTRAVENOUS 150 ml/hr

Accept Order
 Cancel

Orders Tab Display

Service	Order	Start / Stop
Infusion	*MULTIVITAMINS INJ 30 ML 1 Bag/Day, AMPICILLIN INJ 25 GM in bag 2 in SODIUM CHLORIDE 0.45% INJ 1000 ml IV 150 ml/hr	Start: 04/08/10 07:54 Stop: 04/11/10 23:59

Order Details - 22608;2

Order:
Type: Continuous
Solutions: SODIUM CHLORIDE 0.45% INJ 1000
Additives: MULTIVITAMINS INJ 30 ML 1 Bag/Day
AMPICILLIN INJ 25 GM in bag 2
Route: INTRAVENOUS
Infusion Rate: 150 ml/hr
Priority: ROUTINE
Total Dose: 30 ML
IV Print Name: SODIUM CHLORIDE 0.45%

Dosage Order Checks

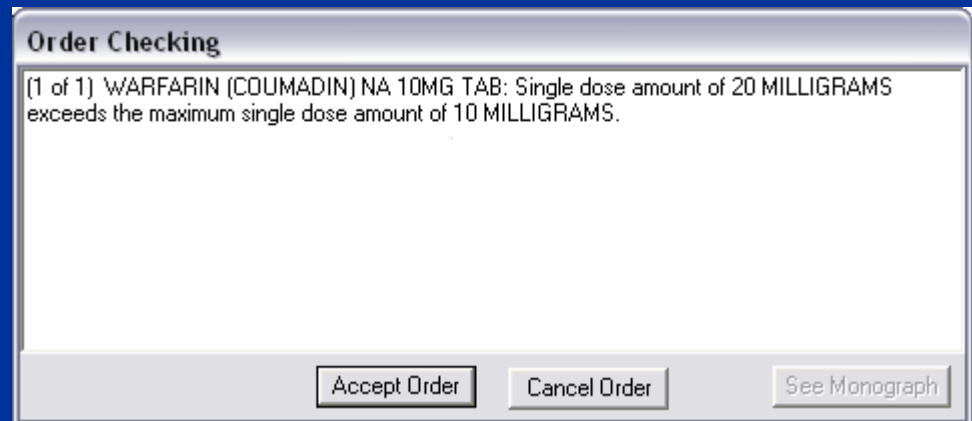
Dosage Order Check

- This order check is new to CPRS in version 28
- This check happens on acceptance of a Medication order
- There are basically three checks that are part of the more generically defined “Dosage Order Check”
 - Maximum Single Dose
 - Maximum Range Dose
 - General Dosing Information
- There are also Exceptions and Errors that can be displayed as order checks related to the dosing processing
- All of the possible order checks related to dosing are controlled centrally by the settings for the generically defined “DRUG DOSAGE” entry in the ORDER CHECKS file

Dosage Order Checks

- Single Dose

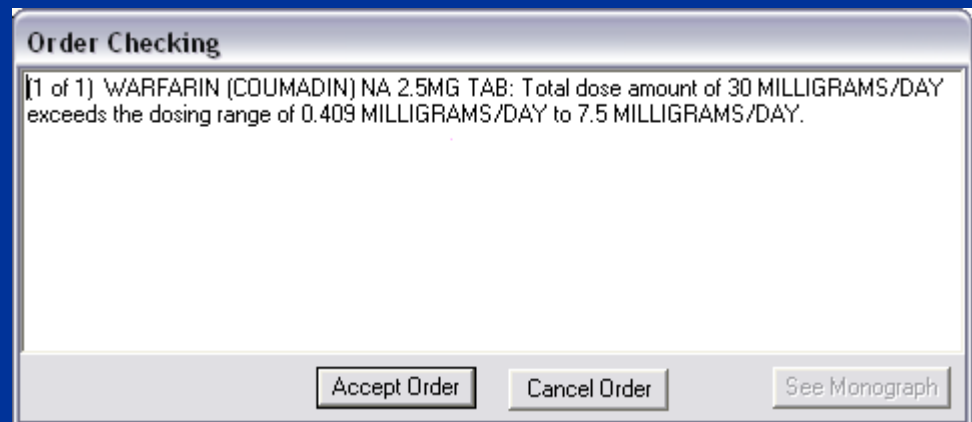
- This order check is caused by the dosage of a single administration being above or below a therapeutic level for the specific drug. Patient factors such as height and weight can be included in determining the appropriate level for the drug.



Dosage Order Checks

- Dose Range

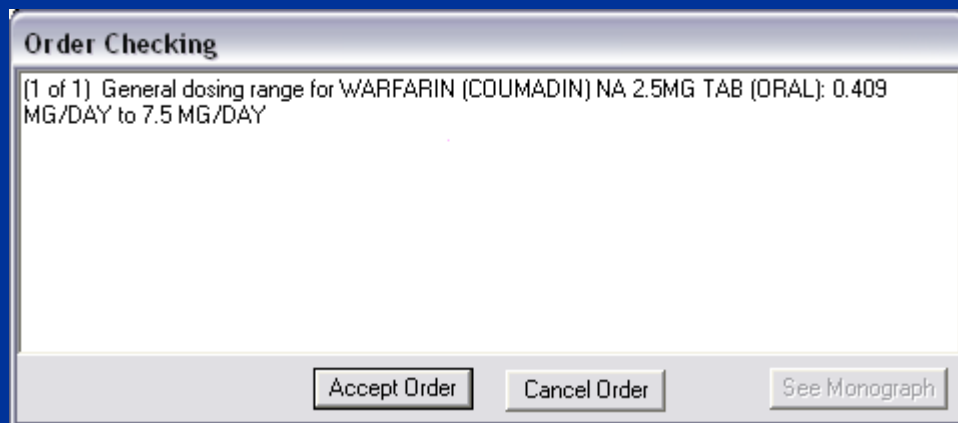
- This order check is caused by the combined dosage during a period of time being above or below a set range for the specific drug being ordered. Patient factors such as height and weight can be included in determining the range for the drug.



Dosage Order Checks

General Dosing Information

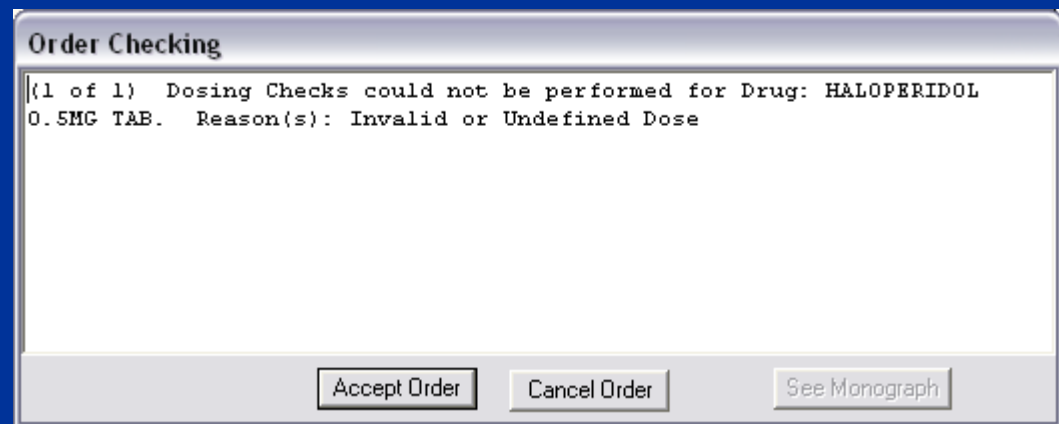
- This order check can display when for some reason the Single Dose and Range Dose order checks cannot be performed.
- Some scenarios include:
 - Scenario 1: Identify drugs that require a weight where patient does not have weight defined. ie. Gentamicin (put in a IVPB order for a maintenance dose) OR Cyclophosphamide 50mg tab
 - Scenario 2: Identify drugs that require a BSA (no height or weight defined)...i.e. Etoposide PO;
 - Scenario 3: Put in an order with a schedule that does not have a frequency defined. That should also give you a general dosing range.



Dosage Order Checks

- Exceptions and Errors

- These dosage related order checks can occur when data is missing or some other problem came up when trying to perform the dosage checks.



Enhanced Order Checks

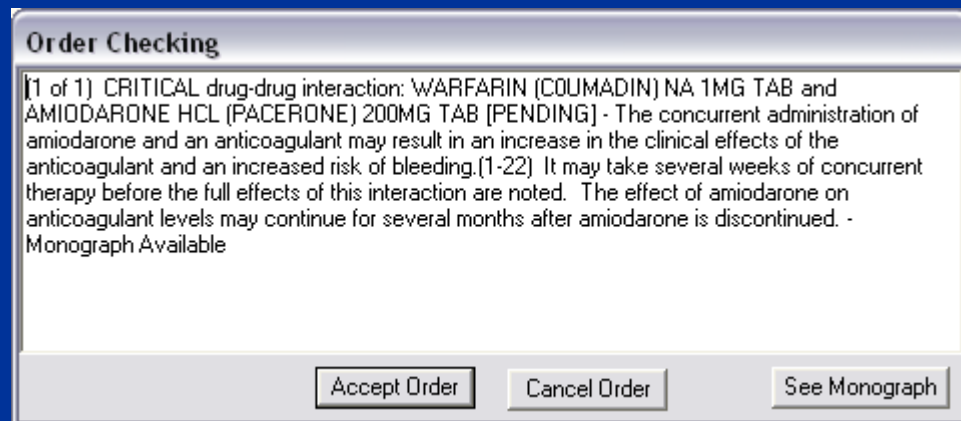
Enhanced Order Checks

- The Drug-Drug order checks include the following
 - Drug-Drug Interaction
 - Duplicate Therapy
 - Duplicate Drug Order
- These order checks have been enhanced to make use of First Data Bank (FDB) to process the order checks

Enhanced Order Checks

• Drug-Drug Interaction

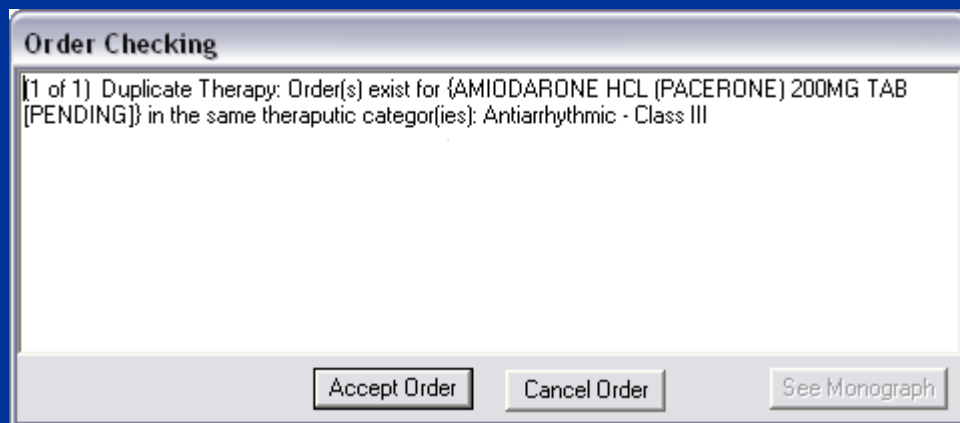
- While this order check and the conditions that cause it to occur remain the same, the text has been updated to include more useful information such as the clinical effects of the drug interaction.
- Also there is further information available in a separate Monograph as indicated by the “Monograph Available” text at the end of the order check



Enhanced Order Checks

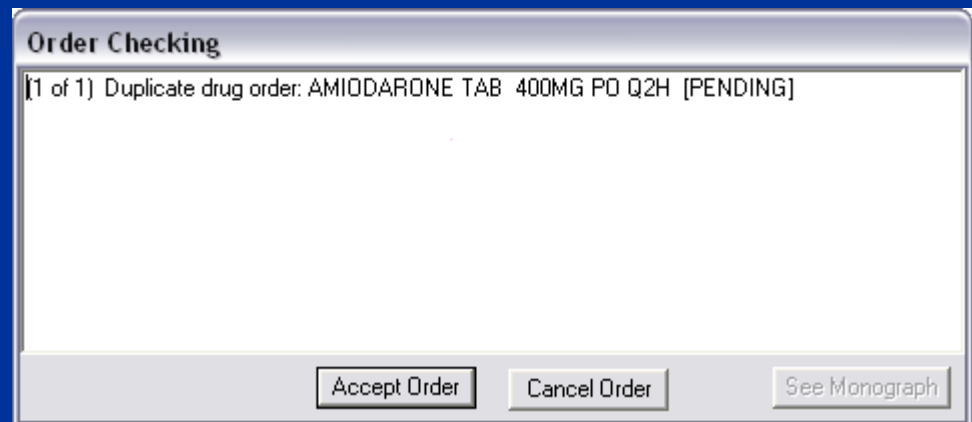
• Duplicate Therapy

- This order check replaces the previous Duplicate Drug Class order check
- This order check occurs when a drug in the same therapeutic categor(ies) exists already
- If a drug of the same type and dosage is ordered then a Duplicate Drug Order will fire and the Duplicate Therapy order check will not show. However if the drug is of the same type but a different dosage then the Duplicate Therapy only will show.



Enhanced Order Checks

- Duplicate Drug Order
 - This order check has not changed
 - This occurs when a drug with the same dosage exists already



Monograph Display

Order Checking

(3 of 7) Previous adverse reaction to: WARFARIN (LOCAL)

(4 of 7) WARFARIN (COUMADIN) NA 10MG TAB: Single dose amount of 20 MILLIGRAMS exceeds the maximum single dose amount of 10 MILLIGRAMS.

(5 of 7) SIGNIFICANT drug-drug interaction: WARFARIN (COUMADIN) NA 10MG TAB and ASPIRIN 325MG EC TAB [ACTIVE] - The concurrent use of anticoagulants and salicylates may result in increased INR values and increase the risk of bleeding. - Monograph Available

(6 of 7) SIGNIFICANT drug-drug interaction: WARFARIN (COUMADIN) NA 10MG TAB and

Monographs for Order Checks

Choose a Monograph to view

ANTICOAGULANTS/NSAIDS

ANTICOAGULANTS/NSAIDS

ANTICOAGULANTS/SALICYLATES

This information is generalized and not intended as specific medical advice. Consult your healthcare professional before taking or discontinuing any drug or commencing any course of treatment.

MONOGRAPH TITLE: Anticoagulants/NSAIDs

SEVERITY LEVEL: 3-Moderate Interaction: Assess the risk to the patient and take action as needed.

MECHANISM OF ACTION: The exact mechanism is unknown. Some NSAIDs may displace anticoagulants from plasma protein binding sites. NSAIDs also have the potential to produce gastrointestinal ulceration and bleeding. Some NSAIDs may impair platelet function and prolong bleeding times.

CLINICAL EFFECTS: In some patients, NSAIDs have been associated with an increase in the hypoprothrombinemic effect to anticoagulants.

PREDISPOSING FACTORS: None determined.

PATIENT MANAGEMENT: If concurrent therapy with anticoagulants and NSAIDs is warranted, patients should be monitored for an increased hypoprothrombinemic response when NSAIDs are added to the patient's drug regimen. In addition to routine monitoring of INR values, the patient should be observed for signs of increased effect, including bruising or bleeding. The time of highest risk for a coumarin-type drug interaction is when the precipitant drug is initiated or discontinued. Consult with the prescriber before initiating, altering the dose of, or discontinuing either drug.

DISCUSSION: The effects of NSAIDs on the hypoprothrombinemic response to anticoagulants appears to vary between patients as well as with different NSAIDs. Documentation is frequently contradictory - while studies have shown several NSAIDs to have no effect on the pharmacokinetics of warfarin, case reports have documented increased effects with and without bleeding when these same NSAIDs were administered concurrently with warfarin. While celecoxib has been shown not to affect platelet aggregation or bleeding times and had no effects on the anticoagulant effect of warfarin in healthy

VBECS

New CPRS/VBECS Order Dialog Parameters

1. OR VBECS DIAGNOSTIC PANEL 1ST –
 - Show Diagnostic Panel 1st
- 2. OR VBECS DIAGNOSTIC TEST ORDER
 - _ List of Diagnostic Tests for VBECS
- 3. OR VBECS REMOVE COLL TIME –
 - Remove Collection Time Default

CPRS BLOOD BANK ORDER DIALOG, with OR*3*212

Blood Component and Diagnostic Test Order Form

Patient Information | **Blood Bank Orders** | Lab Results

Blood Components Quantity*

[Dropdown] [Input]

Modifiers
[Dropdown]

Date/Time Wanted*
NOW [Dropdown]

Diagnostic Tests

TYPE & SCREEN [Dropdown]

Collection Type*
Send Patient to Lab [Dropdown]

Collection Date/Time*
NOW [Dropdown]

Urgency* Surgery
ROUTINE [Dropdown] [Dropdown]

Reason for Request* Comment
[Dropdown] [Text Area]

* Indicates a required field

Selected Components and Tests

Test/Component	Qty	Modifiers
TYPE & SCREEN		

[Remove] [Remove All]

TYPE & SCREEN SP [Dropdown] [Accept Order] [Quit]

OR VBECS DIAGNOSTIC PANEL 1ST

Blood Component and Diagnostic Test Order Form

Patient Information | Blood Bank Orders | Lab Results

Personal Quick Orders

Diagnostic Tests

Collection Type
Send Patient to Lab
Collection Date/Time

Blood Components Quantity
Modifiers
Date/Time Wanted

Urgency* Surgery

Reason for Request* * Indicates a required field

RBC Perioperative patient. Hgb less than 10g/dL & Hemodynamically unstable
low hgb
Diabetic
No reason

Comment

Selected Components and Tests

Test/Component	Qty	Modifiers
----------------	-----	-----------

Remove
Remove All

Accept Order
Quit

Switch the Component
and Diagnostic sides

OR VBECS REMOVE COLL TIME

Allows
Provider
entry

Blood Component and Diagnostic Test Order Form

Patient Information | Blood Bank Orders | Lab Results

Diagnostic Tests

TYPE & SCREEN
Collection Type*
Send Patient to Lab
Collection Date/Time*

Blood Components Quantity
Modifiers
Date/Time Wanted

Urgency* Surgery
ROUTINE

Reason for Request* * Indicates a required field
RBC Perioperative patient. Hgb less than 10g/dL & Hemodynamically unstable
low hgb
Diabetic
No reason

Comment

Selected Components and Tests

Test/Component	Qty	Modifiers
TYPE & SCREEN		

Remove
Remove All

TYPE & SCREEN SP
Accept Order
Quit

OR VBECS DIAGNOSTIC TEST ORDER

Allows site configuration

The screenshot shows a software window titled "Blood Component and Diagnostic Test Order Form" with a blue header bar. The window contains several sections:

- Navigation Tabs:** "Patient Information", "Blood Bank Orders", and "Lab Results".
- Personal Quick Orders:** A dropdown menu.
- Diagnostic Tests:** A list box containing "TYPE & SCREEN", "ABO/RH", and "ANTIBODY SCREEN".
- Blood Components:** A dropdown menu, a "Quantity" input field, a "Modifiers" dropdown, and a "Date/Time Wanted" dropdown.
- Urgency*:** A dropdown menu.
- Surgery:** A dropdown menu.
- Reason for Request*:** A text area containing "RBC Perioperative patient. Hgb less than 10g/dL & Hemodynamically unstable", "low hgb", "Diabetic", and "No reason".
- Comment:** A large text area.
- Selected Components and Tests:** A table with columns "Test/Component", "Qty", and "Modifiers".
- Buttons:** "Remove", "Remove All", "Accept Order", and "Quit".

Enhance Reason for Request and Comments fields

Blood Component and Diagnostic Test Order Form

Patient Information | Blood Bank Orders | Lab Results

Diagnostic Tests

TYPE & SCREEN
Collection Type*
Send Patient to Lab
Collection Date/Time*

Blood Components Quantity
Modifiers
Date/Time Wanted

Urgency* Surgery
ROUTINE

Reason for Request* * Indicates a required field

RBC Perioperative patient. Hgb less than 10g/dL & Hemodynamically unstable
low hgb
Diabetic
No reason

Comment

Selected Components and Tests

Test/Component	Qty	Modifiers
TYPE & SCREEN		

Remove
Remove All

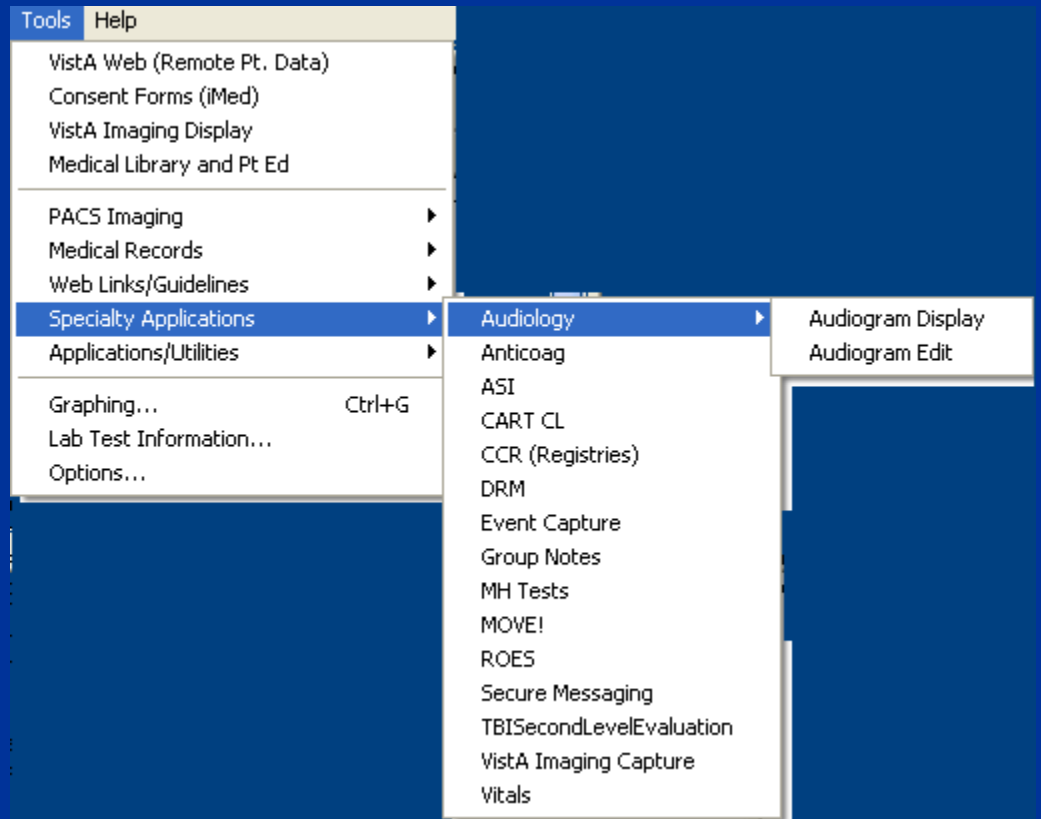
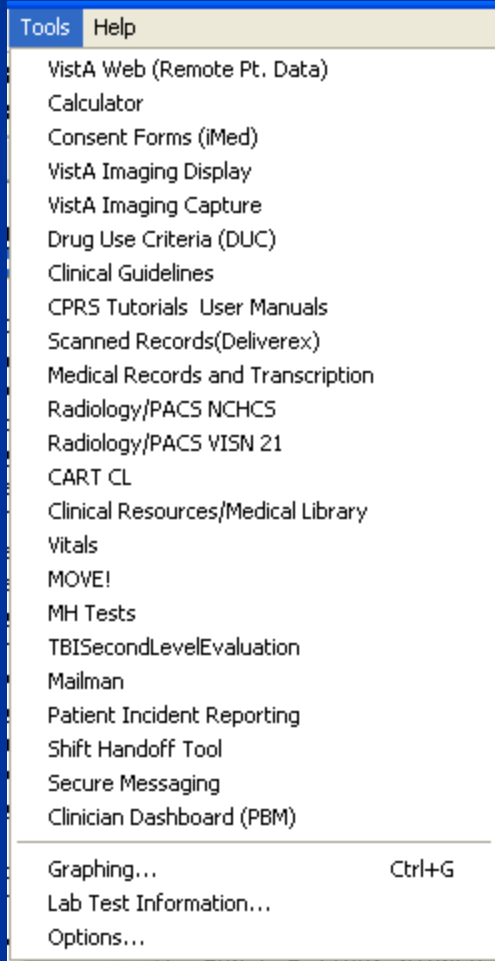
TYPE & SCREEN SP
Accept Order
Quit

Lengthened Reason for Request and Comment fields

Tools Menu

CPRS 27

CPRS 28



Patient Safety Issues

- PSPO 308: RDV may not display all notes for a selected date range--max # notes trumps date range
- PSPO 444: When the order is signed the recently entered allergy is not assessed
- PSPO 538: Patient Display Status (inpatient vs. outpatient)
- PSPO 542: Delayed orders did not lapse in 24hr; MD rewrote so there were two sets of orders
- PSPO 735: ATTENTION line is not displayed to user when Consult Request is forwarded (GUI)
- PSPO 834: 'Invalid Procedure' Error Message Needs Additional Information
- PSPO 849: Out Patient Pharmacy Complex Dosage not selecting correct number of capsules in the sig
- PSPO 850: Using (IMO) and appt crosses midnight, appt not available to order Unit Dose Med in CPRS
- PSPO 852: Incorrect Med Routes Display for Dispense Drug
- PSPO 908: Due to Single Spacing of the CPRS Medication List, Provider Selected Wrong Medication
-

Patient Safety Issues

- PSPO 921: If font size is OTHER THAN 8 in CPRS GUI, Critical order checks may not display correctly
- PSPO 1087: Order prints at old location
- PSPO 1149: Admin Time of complex inpt order may be used for next part of complex order
- PSPO 1157: Non-VA meds displayed on CPRS-Orders tab-Custom Order View-All Non-VA Meds, but not on CPRS Meds Tab
- PSPO 1187: Short-term--Reword the "pop-up box" to make the tube feeding order clearer to the user
- PSPO 1190: When add recipient listed on FLAG ORDER FOR CLARIFICATION & recipient unflags, flag removes Provider
- PSPO 1426: Patient Inquiry displays different patient Info
- PSPO 1525: Category II Patient Flags are not displaying in CPRS. Changed with V27.90

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-
-
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CPRS Lab Status Display

CPRS Lab Status Display

The screenshot shows a software interface for displaying laboratory results. On the left is a sidebar with a tree view containing categories like 'Most Recent', 'Cumulative', 'All Tests by Date', 'Selected Tests', 'Worksheet', 'Graph', 'Microbiology', 'Anatomic Pathology', 'Blood Bank', and 'Lab Status'. The main area is titled 'Most Recent Laboratory Results' and features four navigation buttons: '<< Oldest', '< Previous', 'Next >', and 'Newest >>'. A red box highlights these buttons and a 'Most Recent Lab Data' label. Below the buttons, the specimen is identified as 'SERUM'. A table displays the following data:

Collection Date/Time	Test	Result	Flag	Units	Ref Range
Apr 24, 2007 07:30	LDL CHOLESTEROL	129		MG/DL	0 - 130

Below the table, the following text is displayed: 'Specimen: SERUM; Accession: CH 0424 3019; Provider: LABTECH, SEVENTEEN; Report Released Date/Time: Apr 24, 2007@13:35; Performing Lab: ALBANY VA MEDICAL CENTER VA MEDICAL CENTER ALBANY, NY 12180-0097'. At the bottom, a key explains symbols: 'KEY: "L" = Abnormal Low, "H" = Abnormal High, "*" = Critical Value'. A navigation bar at the very bottom includes buttons for 'Cover Sheet', 'Problems', 'Meds', 'Orders', 'Notes', 'Consults', 'Surgery', 'D/C Summ', 'Labs', and 'Reports'.

1. Added Oldest, Previous, Next, and Newest as labels to the Most Recent buttons
2. Added "Most Recent Lab Data" to display if data is Most Recent
3. Added "Oldest Lab Data" to display if data is the oldest
4. Added Collection Date/Time column to the Most Recent Lab Report

Earliest Appropriate Date (Project Initiative)

- Implement Earliest Appropriate Date:
 - Consult/Procedure Order Dialogs
 - Order Details on Consults/Orders Tabs
 - SF 513

Purpose:

Monitor the electronic closure of consults in CPRS and ensure that patients are seen within the clinically necessary timeframes in specialty care.

Earliest Appropriate Date

The screenshot shows a software window titled "Order a Consult". It contains several input fields and a list of services. The "Urgency" field is set to "ROUTINE". The "Attention" field is empty. The "Earliest appropriate date:" field is disabled, indicated by a grey background and a three-dot icon. The "Patient will be seen as an:" field has "Outpatient" selected. The "Place of Consultation" field is set to "CONSULTANT'S CHOICE". The "Provisional Dx (REQUIRED)" field is empty. The "Reason for Request" field contains the following text:

```
(HOME OXYGEN)
REASON FOR REQUEST (complaints and findings):

1.  RESULTS OF ARTERIAL BLOOD GASES OR PULSE OXIMETRY

        Room Air at Rest:
        Room Air with Exercise:
            O2@ LPM of:
        O2@ LPM with exercise of:

?  PRESCRIPTION FOR HOME OXYGEN
```

The "Home Oxygen Request Cons" field is set to "CONSULTANT'S CHOICE". The "Accept Order" and "Quit" buttons are visible at the bottom right.

Earliest Appropriate Date field is disabled if the selected service is a Prosthetics service.

Earliest Appropriate Date

Order Details - 10004461;1

PSYCHOLOGY - BOISE Cons Consultant's Choice

Activity:
09/25/2007 13:38 New Order entered by [REDACTED]

Order Text: PSYCHOLOGY - BOISE Cons Consultant's Choice
Nature of Order: ELECTRONICALLY ENTERED
Elec Signature: [REDACTED] (DEVELOPER) on 09/25/2007 13:53

Current Data:
Current Attending Physician: [REDACTED]
Treating Specialty: MEDICAL ICU
Ordering Location: SE REHAB MED
Start Date/Time: 09/25/2007 13:54
Stop Date/Time:
Current Status: PENDING
Order #10004461

Order:
Consult to Service/Specialty: PSYCHOLOGY - BOISE
Reason for Request:
FIRST TEST OF IFC CONSULT 9/25/07 WAT
Category: INPATIENT
Urgency: ROUTINE
Earliest appropriate date: TOMORROW
Place of Consultation: Consultant's Choice
Attention: [REDACTED]
Provisional Diagnosis: DEPRESSION
Consult No.: 20070925135302

Print Close

Order details as viewed from the Orders tab; Earliest Appropriate Date appears under the Urgency value.

Earliest Appropriate Date

```
Sep 25.07  [p]  PSYCHOLOGY - BOISE Cons  Consult #: 10901
Current Pat. Status:  Inpatient
Ward:                 SE REHAB MED
Primary Eligibility:  SC LESS THAN 50%

Order Information
To Service:          PSYCHOLOGY - BOISE
Attention:           ██████████
From Service:        SE REHAB MED
Requesting Provider: ██████████
Service is to be rendered on an INPATIENT basis
Place:              Consultant's choice
Urgency:            Routine
Earliest Appr. Date: Oct 25, 2007
Orderable Item:     PSYCHOLOGY - BOISE
Consult:            Consult Request
Provisional Diagnosis: DEPRESSION
Reason For Request: FIRST TEST OF IPC CONSULT 9/25/07 WAT

Inter-facility Information
-----
Remote Facility:     BOISE
Ordering Provider:   ██████████
Remote Consult #:    10877
Remote Service name: PSYCHOLOGY
Role:               Requesting facility

Status:              PENDING
Last Action:         CPRS RELEASED ORDER

Facility
Activity              Date/Time/Zone      Responsible Person  Entered By
-----
CPRS RELEASED ORDER  09/25/07 13:53    ██████████         ██████████

Note: TIME ZONE is local if not indicated

Inter-facility Results: No results available for this consult request.
No local TIU results or Medicine results available for this consult
***** END *****
```

Consult details from Consults tab; Earliest Appropriate Date displays under the Urgency value.

Earliest Appropriate Date

Nov 30,09 (p) VEHU IMAGING CONSULT SERVICE Cons Consult #: 840

MEDICAL RECORD | CONSULTATION SHEET

SEVENTY, PATIENT | SC LESS THAN 50%
666- | SC VETERAN
Phone: |

Consult Request: Consult | Consult No.: 840

To: VEHU IMAGING CONSULT SERVICE | Requested: 11/30/2009 11:47 am
From: 20 MINUTE

Requesting Facility: CAMP MASTER | ATTENTION: |

REASON FOR REQUEST: (Complaints and findings)
Vista Imaging DICOM Healthcare Providers Demonstration

PROVISIONAL DIAG:

REQUESTED BY: | PLACE: | URGENCY:
COMPUTER SPECIALIST | Consultant's choice | Routine
(Pager:) | SERVICE RENDERED AS: | EARLIEST DATE:
(Phone:) | Outpatient | Nov 30, 2009

WORKING COPY

No Consultation Results available.

AUTHOR & TITLE: | DATE:

ID #: | ORGANIZATION: CAMP MASTER | REG #: | LOC: 20 MINUTE

Standard Form 513 (Rev 9-77)

Close

SF513; Earliest Appropriate Date is displayed under the Urgency value.