Super User Training Manual

Change History

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10/5/2004	E. Chesnut	Created	
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INTRODUCTION

The course material in this manual is developed to provide you with the fundamentals necessary to assist end users with CHCS II system functionality.

The scenarios and exercises have been created using fictitious data from the CHCS II Training System (CTS). The CTS is a training version of the CHCS II system and simulates the functionality used in a "live" environment.

The screen shots are an excellent reference point for step-by-step instructions on how to perform a particular task. Therefore, utilize this manual as a tool to support CHCS II end users.

You will be logged into the CHCS II Training System with the role of a Provider, the role assigned to you in the live CHCS II system may not allow you to perform all of the tasks covered in training.

Navigation

- Modeled on the design of Microsoft Outlook

- Provides end users with multiple navigational options

- Many icons common to Windows-based applications are also used by CHCS II

CHCS II is modeled on the design of Microsoft Outlook, with a Folder List, Workspace, File Menu, Shortcuts Bar, and an Action Bar. This design provides end users with multiple navigation options for accessing system features and functionality. Many of the icons or buttons common to a Windows-based application are also used by CHCS II. For example, the icons in the top right hand corner of the screen are Minimize, Maximize, and Close. The ⊞ and ⊟ buttons in the Folder List are used to expand and collapse folders. Note that when a topic is selected in the Folder List, the folder is highlighted.

Lesson Goal

The goal of this lesson is to enable the user to access and navigate within the CHCS II application.

Learning Objectives

Upon completion of this lesson, the student will be able to:

- Log in to the CHCS II application
- Exit the CHCS II application
- Use the three primary methods of navigation
- Customize the desktop
- Open and close an application module

Demonstration

- Log on to the system, view the current list of appointments and open and close modules

Cts.lnk

1. Double-click the CHCS II Training System icon on the computer desktop. A Role Identification screen will appear, the medical radial button is selected by default.
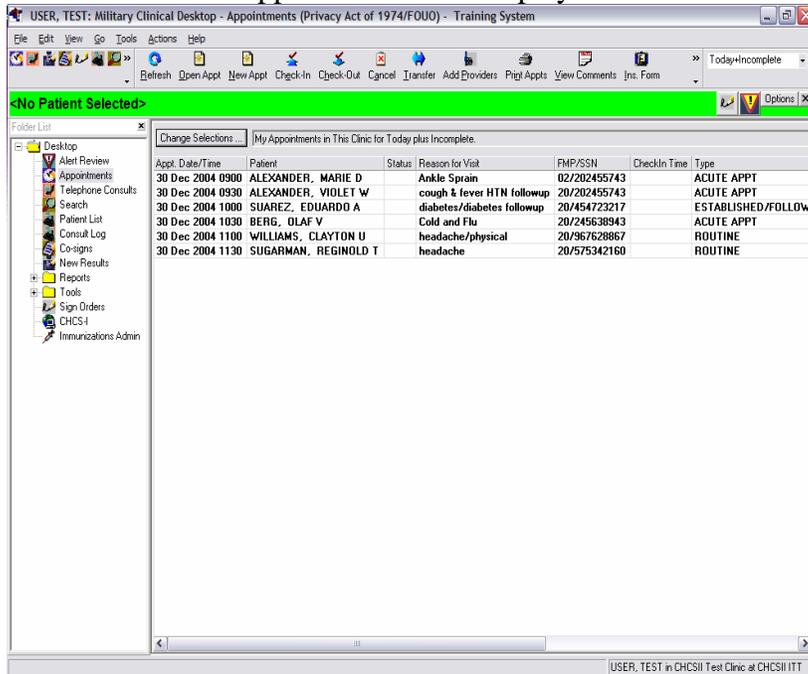

2. Click **OK**.

3. Press the escape key (Esc) on your keyboard twice to progress through the informational messages.

Note: CHCS II Training System simulates end user login. On the live System, you will be required to enter your username and password to access CHCS II.

4. Verify the Appointments module is open.

5. The list of current appointments will display

6. Click in the Folders List to open the Co-signs module. The Co-signs module will display:
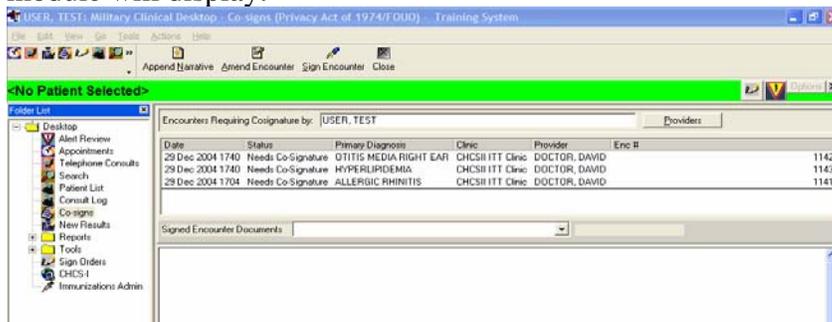
7. Click the icon on the Action Bar to close the Co-signs module.

8. Click the Close button on the upper right corner of the Title Bar to end CHCS II. A confirmation message will display.

9. Click to confirm the exit

Lesson Exercises

Open the CHCS II Training System and complete the exercises below.

Navigation Scenario 1

Practice CHCS II navigation using the CHCS II Training System by following these steps:

1. Double-click the CHCS II Training System icon on the computer desktop. A Role Identification screen will appear, the medical radial button is selected by default.

2. Click **OK**.

3. Press the escape key (Esc) on your keyboard twice to progress through the informational messages.

4. Verify the Appointments module is open.

5. Review the icons in the Action Bar for Appointments. Icons in the Action Bar are relevant to the module that is open. Icons that are used in one module might not be used in another, so what appears in the Action Bar changes.

6. Close the Appointments module by clicking the Close icon, or clicking the X to the right of the Options button in the upper right hand corner of the screen.

7. Click **Yes** to confirm the exit

Navigation Scenario 2

Setting up the CHCS II desktop to fit your daily requirements is next.

Start the CHCS II Training System

1. If any module is currently open, close it by clicking the **Close** icon.

2. Follow the menu path *Tools > Startup Options*. Set the application to open to **Telephone Consult** next time you log in by selecting the **Module** radio button and using the drop-down list to find **Telephone Consult**.

3. Close the *Startup Options* window by clicking **OK**.

4. Close the CHCS II Training System by following the menu path *File > Exit*.

5. At the exit prompt select **Yes.**

6. Start the CHCS II Training System again. This time the **Telephone Consult** module appears.

7. Using what you have just learned, change your start up settings back so the **Appointments** module opens on start up. Restart the CHCS II Training System.

8. Next, add the **Telephone Consults** icon to the toolbar.

   a. Follow the menu path **View > Tool Bar > Customize** to open the Customize ToolBar window.

   b. Scroll down on the left side of the window to locate **Telephone Consults**.

c. Highlight **Telephone Consults** and click the **Add>>** button to move it to the **Selected ToolBar Buttons** column in the right window.

d. Click the **OK** button to save your change.

e. The **Telephone Consults** icon should now appear in the top left corner of the screen.

Add or remove icons to set up your desktop to match your daily requirements. These icons allow you to quickly open a module without using the Folder List.

Appointments

Start the patient encounter process

- Locate the patient record
- Manage the appointment

This lesson covers the tasks of locating patient records and managing appointments.

The Search module enables you to locate and select a patient chart for use in CHCS II. This is synonymous with pulling a paper chart. After you open a patient chart, you have access to the range of patient-specific modules and functions.

The Appointments module is used to view, manage, and open patient appointments. This module displays appointments created in both CHCS and CHCS II. Scheduled appointments, including same-day scheduled appointments, are still created in CHCS. CHCS II pulls scheduled appointments from CHCS on a nightly basis and approximately every fifteen minutes during the day.

Lesson Goals

The goal of this lesson is to enable the student to search for, open, and close a patient record in CHCS II.

Learning Objectives

Upon completion of this lesson, the student will be able to:

- Search for a patient record.
- Set search selection display for the appointments module
- Change and save the column order
- Create a walk-in appointment
- View and Add appointment comments
- Check-in a patient
- Transfer an appointment to another provider

Demonstration

Col. Violet Alexander has come in today complaining of a cough. We need to search for Col. Alexander's record, set the appointment filters and create a new appointment.

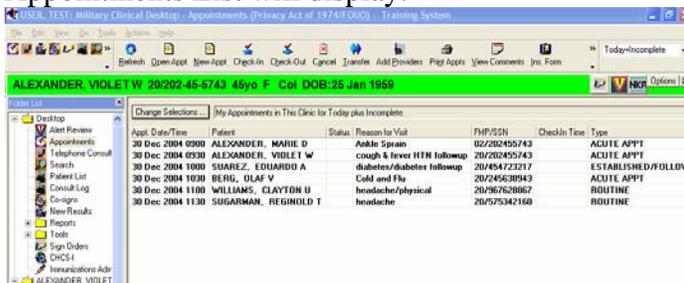1. Click ![Search] in the Folders List to search for a patient. The Patient Search window will display:
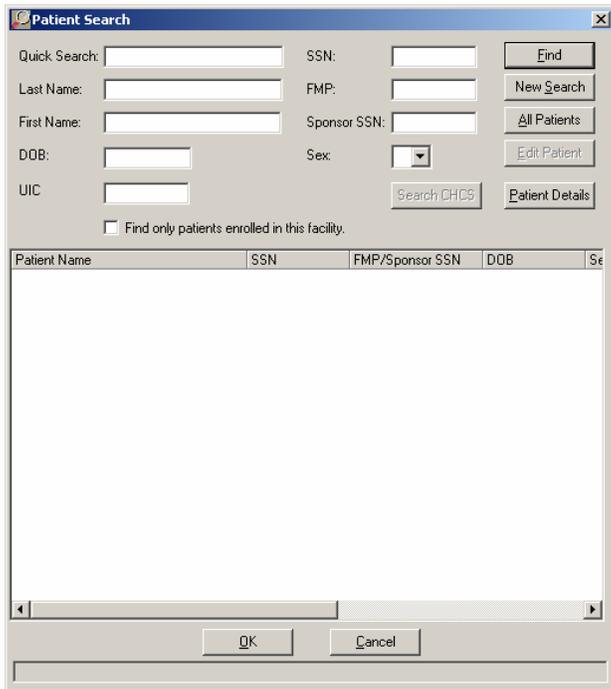
2. Type *A5743* in the **Quick Search** field and click [Find] for a list of names containing *A5743*.

3. Highlight ***ALEXANDER, VIOLET W*** in the list of names and click [OK]. Col. Violet Alexander's information will appear on the Patient ID line and the Appointments List will display.

4. To set the appointment filters, click the [Change Selections ...] button in the Appointment list Workspace. The Appointment Search Selections window will display.
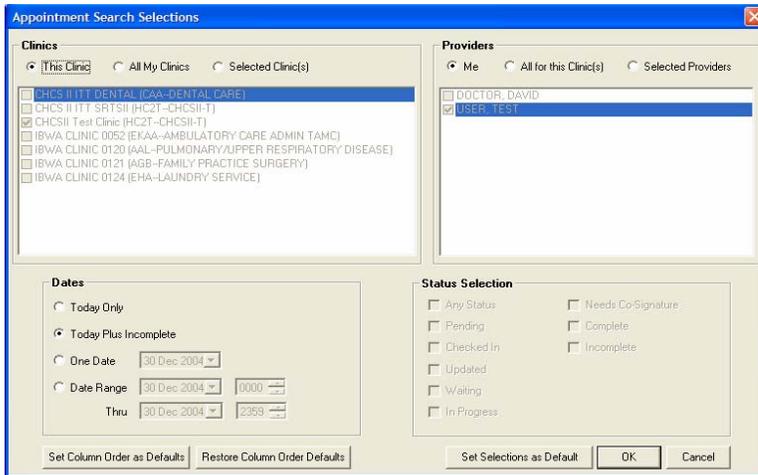
5. Verify or click the following radio buttons for the associated Field:

Field	Data [Description]
Clinics	
Providers	
Dates	

6. When the information has been completed, click the button to change the default settings. The Appointment List will re-display.

7. Click on the Action Bar to create a new appointment for Col. Violet Alexander. A New Appointment confirmation window will display.

8. Click ![Yes] so you can complete the New Appointment information for Col. Alexander.

9. Highlight *ACUTE APPT (ACUT$) 30* to select the acute appointment type. You will now be able to select the Reason for Appointment.

10. Type *cough* in the **Reason for Appointment** field and click ![OK] to complete the new appointment process for Col. Alexander.

11. Col. Violet Alexander will now appear at the bottom of the Appointment list with a status of CheckedIn.

Lesson Exercises

Open the CHCS II Training System and complete the exercises below.

Appointments Scenario 1

Today you want to set your properties for the Appointments module to display patient visits for all of your clinics, and visits for the current date plus incomplete appointments. You also wish to change the column order so that the Type of visit column is between the Patient and Status columns.

1. Click the **Change Selections…** button in the top left corner of the **Appointments** module.

    a. In the *Clinic* section, click the radio button for **All My Clinics**

    b. In the *Provider* section, select the radio button **Me**.

    c. In the *Dates* section, select the correct radio button to show Today Only

    d. Click the **Set Selections as Default** button to save your changes.

2. To move a column:

    a. Scroll to the right just until the **Type** column is visible.

    b. Click the **Type** column heading and hold down the left mouse button.

    c. Drag the **Type** column horizontally right (or left).

Release the left mouse button when the **Type** column is between the **Patient** and **Status** columns. Practice moving columns until the *Appointments* screen is most useful for you.

If you wish to save the new column arrangement, click the **Change Selections** button. Then click the **Set Column Order as Defaults**.

Appointments Scenario 2

Set up an acute walk-in appointment for **Bonita Suarez (S3217)**. Add a comment to the appointment that the patient needs a wheelchair for mobility within the clinic.

1. Click the **New Appt** icon on the Action Bar.

2. The *Patient Search* window appears.

    a. Click in the **Last Name** field, type **Suarez**.

    b. Click the **Find** button.

    c. Select to highlight Ms. Suarez' name if it is not already highlighted.

    d. Click **OK**.

3. The New Unscheduled Appointment/Telcon Visit screen displays.

a. Highlight **ACUTE** appointment type.

b. Enter *ankle injury* in the **Reason for Appointment** field.

c. In the **Comments** section, state that the patient needs a wheelchair for mobility within the clinic.

d. Click **OK**.

You had answered the telephone and assisted two other patients while completing the comment for this appointment and would like to verify that you entered the comment about the wheelchair correctly.

4. Highlight Ms. Suarez's appointment.

5. Click the **View Comments** icon on the Action Bar.

Note there is an **Edit** button available here, so the note about the wheelchair could be changed.

6. Click the **Cancel** button.

Note: The Comments section is used for interoffice communication, such as if a patient called and will be late because of traffic. These comments currently print on the SF 600, but will not do so in the future.

Appointments Scenario 3

Maria Alexander (a5743) arrives at the clinic for her scheduled appointment, she has a sprained ankle. You check her in CHCS II.

1. Highlight Maria Alexander's appointment in the appointment list.

2. Click **Check-in** on the Action Bar.

Notice the Status Column has changed to **CheckIn Status.**

Appointments Scenario 4

Maria Alexander (a5743) arrives at the clinic for her scheduled appointment, she has a sprained ankle. You check her in CHCS II.

3. Highlight Maria Alexander's appointment in the appointment list.

4. Click **Check-in** on the Action Bar.

Notice the Status Column has changed to **CheckIn Status.**

Appointments Scenario 5

Marie Alexander's (a5743) Provider had an emergency, so it is necessary to transfer her appointment to a different Provider. Use the **Transfer** icon on the Action Bar to transfer the appointment.

1. In the appointment list, select to highlight Marie Alexander's appointment.

2. Click the **Transfer** icon on the Action Bar.

3. Select **DOCTOR, DAVID** from the dropdown list.

4. Click **OK**.

5. Click the **Refresh** icon on the Action Bar to refresh your screen.

Notice that Ms. Alexander's Appointment has been transferred to Doctor, David. See the Provider column in the Appointment List.

Appointments Scenario 6

To Clear the patient from the Patient ID line.

1. Click **Go** on the Menu Bar to display the dropdown menu.

2. Select **Patient >** to display the sub-menu.

3. On the sub-menu click **Clear Patient**.

Notice that the Patient ID displays *No Patient Selected* and the Folder List no longer displays the patient specific information.

Telephone Consults

- Enables telephone calls to be tracked and recorded

The Telephone Consults module enables telephone calls to be recorded and tracked. The Telephone Consult (Telcons) window displays telephone consults for specified clinics, end users, dates and statuses. From the Telephone Consults module, Telcons can be created, viewed, transferred to another end user, and cancelled. Phone numbers can be edited, notes viewed and an encounter can be opened for that appointment.

Lesson Goals

The goal of this lesson is to enable the student to use the Telcon function in CHCS II.

Learning Objectives

Upon completion of this lesson, the student will be able to:

- Set search selections for the telephone consults module
- Create a Telcon
- Transfer a Telcon to a different provider
- View clerk notes for an appointment from the Appointment screen
- Edit a call back phone number

Demonstration

An end user just received a telephone call from Ester Chang's mother, stating that Ester has a fever of 100.2° F. Ester's mother wants to know what to do. During the call, the mother indicated there were no other symptoms. Based on this information, the end user diagnosed a low-grade fever (a level one telephone consult). The end user told the mother to give the child Children's Tylenol and a cool bath. If the patient's temperature has not gone down by morning, the mother should make an appointment for Ester. Assist the end user in documenting this telephone call.

1. Click ![Telephone Consults] in the Folder List. The Telephone Consult window will display:

2. Click the [New Telcon icon] icon on the Action Bar. The Patient Search window will display:
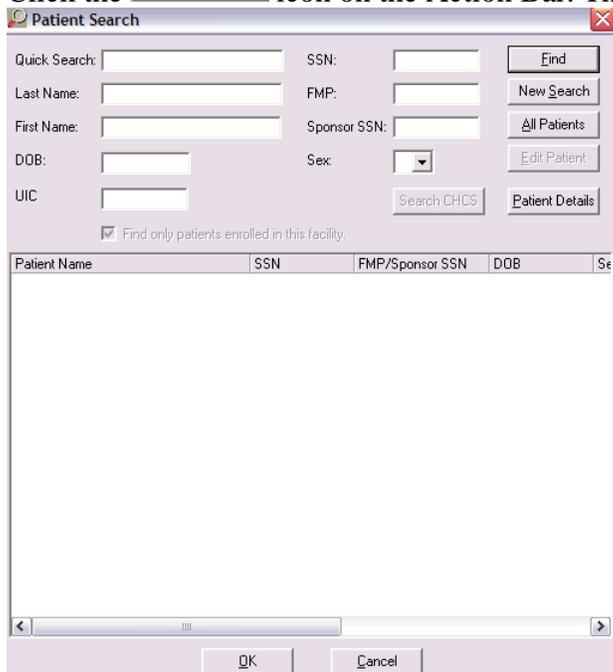
3. Click in **Last Name** Field and type CHANG and ESTER in the **First Name** field and click the [Find] button. The Patient Search window will re-display with Ester Chang's name in the Patient Name area:
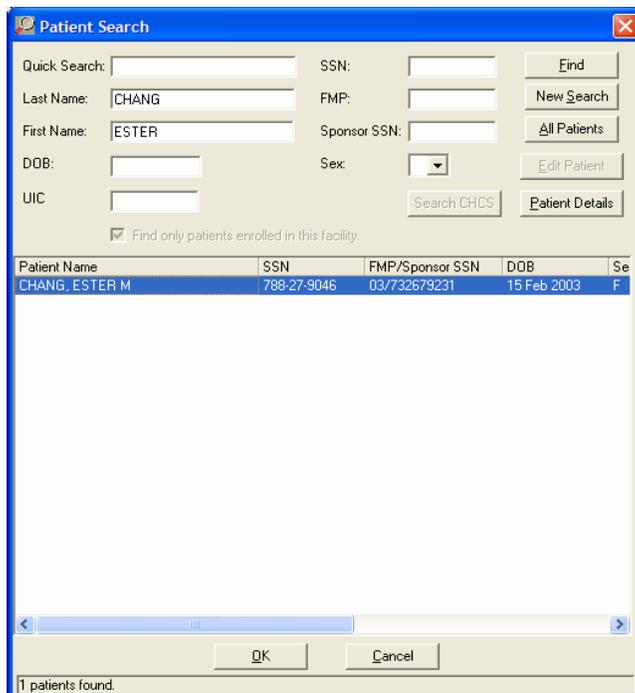
4. Click on Ester's name and click [OK]. The New Telcon window will display for Ester:
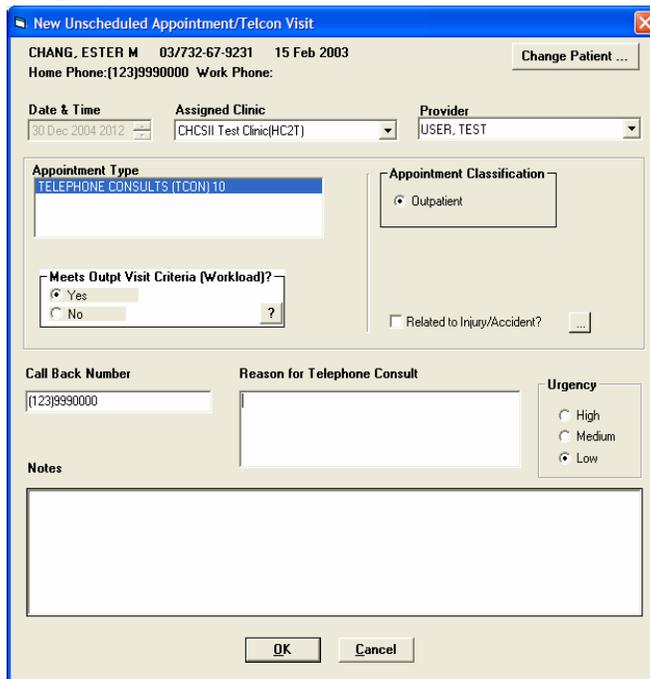
Type FEVER in the Reason for Telephone Consult field, type *PT HAS A FEVER OF 100.2 DEGREES F. WITH NO OTHER SYMPTOMS* in the Notes area and click on the [OK] button, the Allergy Synchronization box appears.
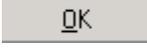
5. The Telcon Quick Entry screen displays.

NOTE: if the end user has the provider role assigned to their log on, they will receive the Quick Entry Screen after clicking OK. Any other end user will be taken back to the Telephone Consults module:

6. In the Provider Note area type *GIVE PT CHILDREN'S TYLENOL AND A COOL BATH. IF TEMPERATURE HAS NOT GONE DOWN BY MORNING, MAKE AN APPOINTMENT FOR PT*., type FEVER in the **Search field** and click [Find Now]. A list of terms containing or related to fever will display:

7. Click on a *fever (as a symptom) 780.6* to select it and click [Add]. *'a fever (as a symptom)*, will display in the Selected Diagnosis field.

8. Click the [▼] (drop-down) on the right of the E&M field to view a list of possible E&M codes for the Telephone Consult:

9. 99371 Telcon: Lvl I, Simple/Brief is already selected by default.

10. Click the **Save and Sign** radio button, and click [OK]. The Sign Encounter window will display:

11. Click [Sign] to sign the order and complete the process and return to the Telephone Consults window. The Telephone Consult for Ester Chang will indicate it is Complete:

12. Click the [Close] icon on the Action Bar to close the module.

Lesson Exercises

Open the CHCS II Training System and complete the exercises.

Telcon Scenario 1

To set Telcon display properties:

1. Click **Telephone Consults** from the Folder List. The Telephone Consults module opens.
2. Click the **Urgency** column and drag it to the left of the Status column.
3. Click **Change Selections**. The Telephone Consults Search Selections window opens.
4. In the Clinics area, select **This Clinic**.
5. In Provider area, select **All for this Clinic(s)**.
6. In Dates area, select the **Today Only** radial button.
7. Click **Set Selections as Default**.

Telcon Scenario 2

You receive a call from retired **CAPT Clayton Williams (w8867).** He states that he needs a refill for his Hypertension medication, Lisinopril. You create a level one telephone consult for a Med refill. You ask CAPT Williams if the phone number listed in the callback field is correct. He indicates that he has moved and provides a new number: (123) 223-4444.

1. Click the **New Telcon** icon on the Action Bar. The Patient Search window will display:
2. Type **(w8867)** in the Quick Search Field and click the **Find** button. Highlight CAPT Clayton Williams' name in the Patient Name area.
3. Click **OK**. The New Telcon window will display.
4. Change the Callback Phone Number to (123) 223-4444.

Remember to verify the call back number. An entry in this field will not change the phone number listed in the Demographics module. This allows the patient to leave a number where they can be reached immediately.

5. Type *Med Refill* in the Reason for Telcon Consult field.
6. Type *Pt request refill, Lisinopril PO 20mg T* in the notes field and click **OK**. (The Allergy synchronization simulation from CHCS will begin.)
7. The Telcon Quick Entry screen will display.
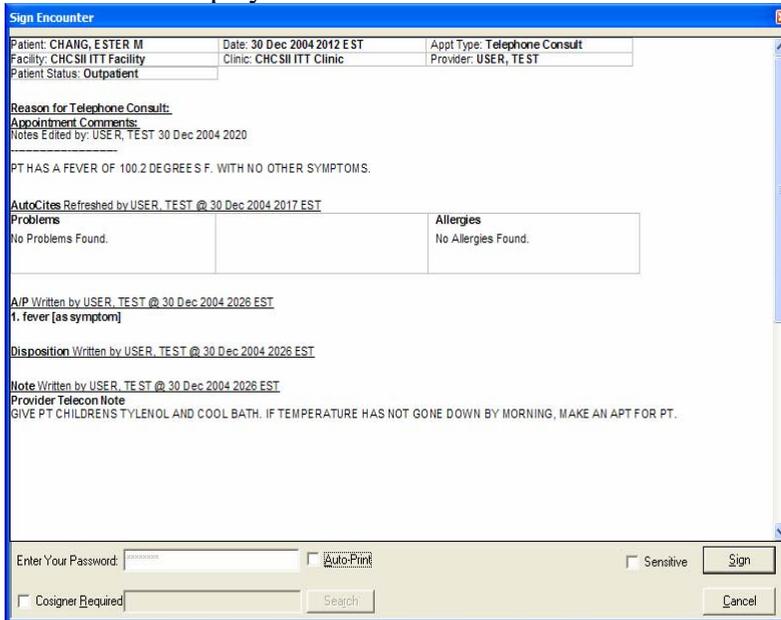8. Click **Cancel** to close the Telcon Quick Entry screen.

NOTE: If the user has the provider role assigned to their log on, they will receive the Quick Entry Screen after clicking OK. Any other user will be taken back to the Telephone Consults module

9. The encounter note displays. Click **Close** on the Action Bar to return to the Telephone

Consults module.

10. Click the **Transfer** icon on the Action Bar.

11. Select **DOCTOR, DAVID** from the dropdown list.

12. Click **OK**.

13. Notice that CAPT William's Telcon has been transferred to Doctor, David. See the Provider column in the Telcon List.

Review the other options available when the user right-clicks on a patient in the appointment list (New Telcon, Cancel Telcon, Transfer Telcon, Open Telcon, View Notes, Change Phone Number).

Telcon Scenario 3

Anna Wunderlich (w8118) phones the clinic to report that she has lost her Zyrtec allergy medication. She indicates that she is leaving her office and wants her call returned at a different number: 555-9999.

1. Select Anna Wunderlich's Telcon appointment.

2. Click **Notes** on the Action bar to view appointment comments. Click **Cancel** to close appointment comment window.

3. Click **Edit Phone #** on the Action bar.

4. Change the Callback Phone Number to (123) 555-9999.

5. Click **OK**. Notice that the Callback Phone has changed.

6. Click **Close** on the Action bar.

Demographics

- Contains pertinent patient information
- Pulled from CHCS I
- Some fields are read only

The demographics module contains pertinent information about the patient pulled from CHCS. Certain information such as the patient's home address, city, state, zip code, country, home and work phone numbers, religion, email address, and location of the patient's medical records can be updated within the demographics module. The end user is also able to view and/or edit the patient's Third Party Insurance, special work status, required fields (for the Standard Ambulatory Data Record or SADR), primary care manager and DEERS eligibility.

Lesson Goals

The goal of this lesson is to enable the student to verify third-party insurance and demographic information in CHCS II.

Learning Objectives

Upon completion of this lesson, the student will be able to:

- Verify third party insurance information
- Verify patient demographic information

Demonstration

LCDR Eduardo Suarez informs you that he has moved since his last visit and you must edit his demographic information. He has also acquired additional health insurance for his family and this information also needs to be added.

1. Click **Appointments** from the Folder List

2. In the Appointment List, highlight LCDR Eduardo Suarez's Diabetes follow up appointment.

3. Open encounter for Eduardo Suarez, click on the Demographics folder in the Folder List. The Demographics module will display:
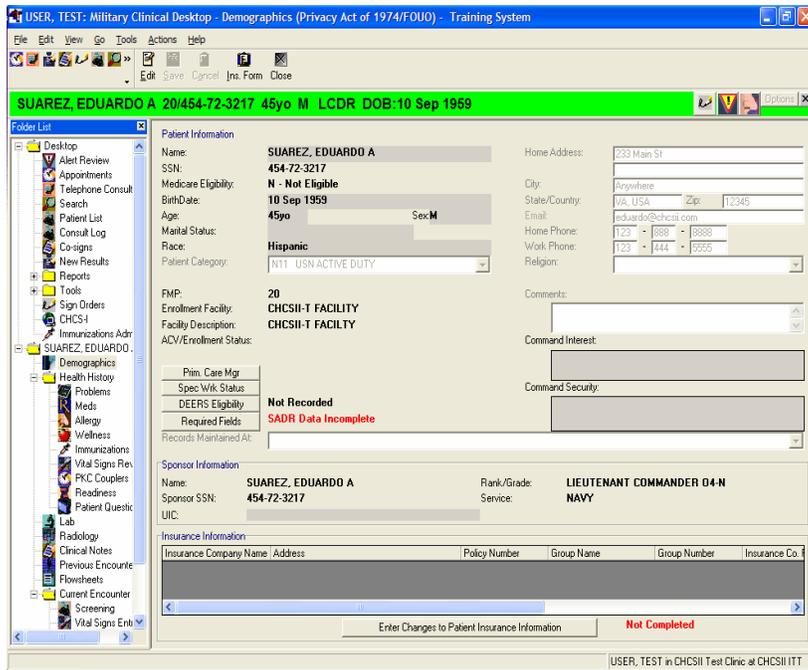
4. Click ![Edit icon] Edit on the Action Bar to be able to edit the demographic information and complete the following information:

Module or Field	Data or [Description of Data]
Home Address	1234 My Street
City	Chantilly
State/Country	VA
Zip	20151
Home Phone	703-444-4848
Religion	Catholic

5. To enter the Third-Party Insurance information, click the ![Enter Changes to Patient Insurance Information] button on the bottom of the window.

The Patient Insurance Information window will display:

Enter the following information:

6. Click the **Yes** radio button for 'Does Patient have health insurance other than Medicare or Champus?'

7. Click the **Yes** radio button for 'Has any health insurance information been changed since last visit?'

8. Insurance Company Name: *Blue Cross Blue Shield*

9. Insurance Company Telephone: *888-888-8888*

10. Insurance Company Address: *234 Nowhere Street My Town, NJ 00220*

11. Insurance ID Number: *1311-2323-111*

12. Group Name: *CHCS II*

13. Group Number: *ABC 123*

14. Subscriber's Name: *Eduardo Suarez*

15. Patient's Relationship to Subscriber: *Self*

16. Effective Date: (Enter one month ago today)

17. Expiration Date: (Enter one year from Effective Date)

18. Person Capturing Information: (Enter your name)

19. Information Source: *Patient*

20. The 3rd party Insurance window displays. Click **OK**

21. Click the [Save] on the bottom of the window to save the information. The insurance information will display as follows:

22. Click [Save] on the Action Bar to save the updates

23. Click the [Close] icon on the Action Bar to close the module.

Note: If third party information does not display, close Demographics and encounter.

Re-open encounter, view Demographics.

Lesson Exercises

Open the CHCS II Training System and complete the exercises.

Demographics Scenario

CAPT. Clayton Williams has arrived for his physical and informs you that he has moved since his last visit, and you want to verify that you have his latest demographic information.

1. Highlight CAPT William's appointment.

2. CAPT William's patient information is loaded to the Folder List. Click **Demographics** in the Folder List to open the module.

3. Click the **DEERS Eligibility** button to perform a DEERS check for the patient.

4. Click Close

5. Click the **Prim. Care Mgr** button to verify the patient's PCM.

6. Click Close

7. Note the *Insurance Information* section at the bottom of the screen. If the patient has other health insurance (OHI), the information displays here.

8. Click **Close** in the Action Bar to exit the Demographics module and return to the appointment list.

9. Clear Patient

Note: Changes to demographics or insurance information should not be made in CHCS II, as these changes do not write back to CHCS. Follow your MTF's normal business rules to make any required changes.

Patient List

- ▪ Allows the end user to create a list of their frequently seen patients
- ▪ Allows easy access to patient records

The Patient List module allows you to display your customized list of patients. Your list can contain your frequently seen patients or patients that are specific to your caseload. Patient records can be accessed from this list.

Lesson Goals

The goal of this lesson is to enable the student to create a patient list in CHCS II.

Learning Objectives

Upon completion of this lesson, the student will be able to

- • Add patients to a patient list
- • Delete a patient from a patient list
- • Delete the patient list

Demonstration

The end user would like to create a list of their frequently seen patients.

Creating a patient list

1. Click ![Patient List icon] Patient List in the Folder List to open the Patient List. The Patient List window will display:
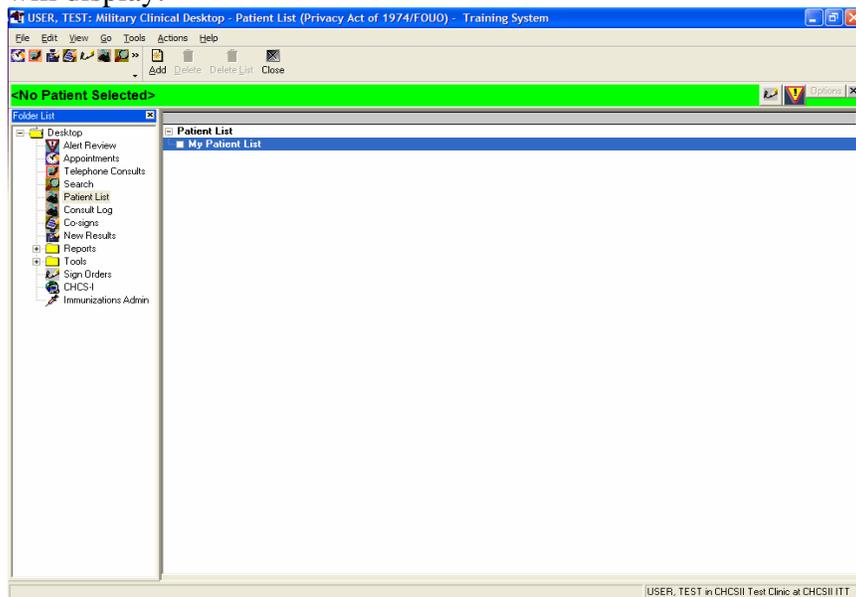
2. Click the [Add] icon on the Action Bar to open the Patient Search window.

3. Type *W8118* in the Quick Search field and click the [Find] button.

4. Highlight WUNDERLICH, ANNA W and click [OK].

5. Repeat steps 2-4 to add the whole Wunderlich family to the patient list.

Deleting a patient from the list

1. With the Patient List module open, highlight *WUNDERLICH,* **HERMAN**.

2. Click the [Delete] icon on the Action Bar. A Delete patient from list window will appear.

3. Click [OK]. The Patient List module will redisplay with Herman Wunderlich's name removed.

Deleting the entire patient list

4. With the Patient List module open, click the [Delete List] icon on the Action Bar.

5. A Delete All Patients window will appear asking if you want to delete all patients from the current list.

6. Click [OK]. The Patient List module will redisplay with all the names removed.

7. Click [Close] on the Action Bar to close the Patient List module.

8. Clear Patient

Lesson Exercises

Open the CHCS II Training System and complete the exercises.

Patient List Scenario 1

You are asked to ensure that patients seen for hypertension are keeping their follow-up appointments. You decide to make a patient list to help you keep track of patients who need to have follow-up appointments. **Col. Violet Alexander (a5743)** needs to be added to your list.

1. Click **Patient List** in the *Folder Menu*.

2. Click **Add** on the Action Bar. The *Patient Search* window opens.

3. Conduct a patient search for **Col. Violet Alexander (a5743)**, and then click **Find**.

4. Highlight Col. Violet Alexander name, then click **OK**.

5. Repeat steps 2-4 to add **LCDR Eduardo Suarez (s3217)** to the patient list.

Note: You can repeat this process until all desired patient names have been added.

Close the Patient List module

Patient List Scenario 2

LCDR Suarez is no longer being seen in your clinic for hypertension. You need to remove him from your Patient List.

1. Click on the **Patient List** in the *Folder Menu*.

2. Select **LCDR Eduardo Suarez** from the *Patient List* window.

3. Click **Delete** on the Action Bar.

4. The *Delete patient from list* confirmation window appears. Click **OK.**

5. LCDR Suarez has now disappeared from the list.

6. **Close** the Patient List module.

Patient List Scenario 3

Deleting the entire patient list

1. With the Patient List module open, click the **Delete List** icon on the Action Bar.

2. A **Delete All Patients** window will appear asking if you want to delete all patients from the current list.

3. Click **OK**. The Patient List module will redisplay with all the names removed.

4. Click **Close** on the Action Bar to close the Patient List module.

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Patient Encounter

- Screen the patient

- Perform and record vital signs

- Determine patient history

- Perform the physical exam

- Determine diagnosis/diagnoses

- Determine the treatment plan

- Verify E&M code

- Document and sign the encounter note

The patient encounter consists of the processes indicated. We will be going over each of these steps in detail.

Lesson Goals

The goal of this lesson is to document the patient encounter in CHCS II and create electronic record.

Learning Objectives

Upon completion of this lesson, the student will be able to:

- Open the encounter
- Document "reason for visit"
- Verify patient's allergies
- Document patient's vital signs
- Document S/O using MEDCIN
- Document A/P
- Complete Disposition and verify E&M code
- Sign Encounter

Screening and Vitals

- Screening
- Vital signs

Once the patient has been checked in, it is now time to open an encounter document for the patient. Appointments with a status of Checked-in, indicates that the patient is ready for screening. The appointment, or encounter for the patient can be opened. During this portion of the encounter, you will set the AutoCite properties, screen the patient including entry of the reason for visit and verifying allergies, enter the vital signs and review the results in the electronic SF600.

Demonstration

Anna Wunderlich (w8118) has come in for a pregnancy test, you create a new appointment. You begin screening along with verifying her allergy information and documenting her vitals.

1. Create a walk-in appointment for **Anna Wunderlich (w8118)**.

    a. Select **ACUTE APPT (ACUT$) 30**

    b. Reason for appointment Type Pregnancy Test

2. Click **OK.**

3. Click *WUNDERLICH, ANNA W* (the appointment you just created) in the

    Appointment list and click the ![Open Appt] icon on the Action Bar, to open the electronic SF600.
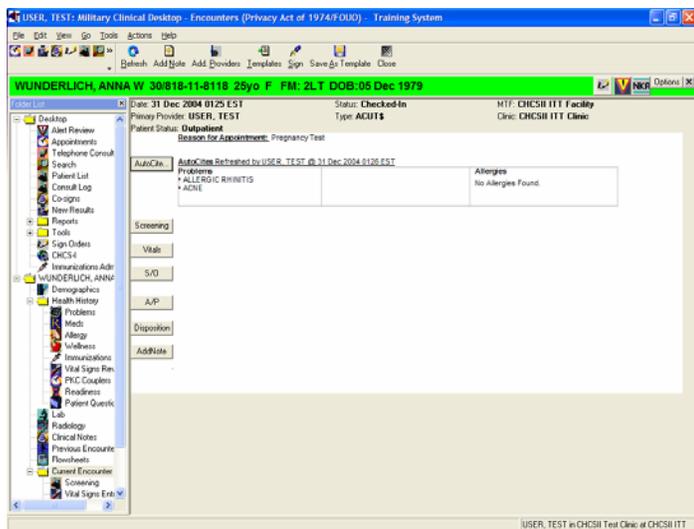
4. Click ⬚Options⬚ on the right side of the Patient ID line to open the Encounter Summary Properties window:

5. Click to select the following check boxes:

   ☐ Active Medications

   ☐ Active Family History

6. Click ⬚ OK ⬚ to update the AutoCite properties. The SF600 will re-display with the updated AutoCite information.

7. Click ⬚Screening⬚ on the electronic SF600 to open the Screening module
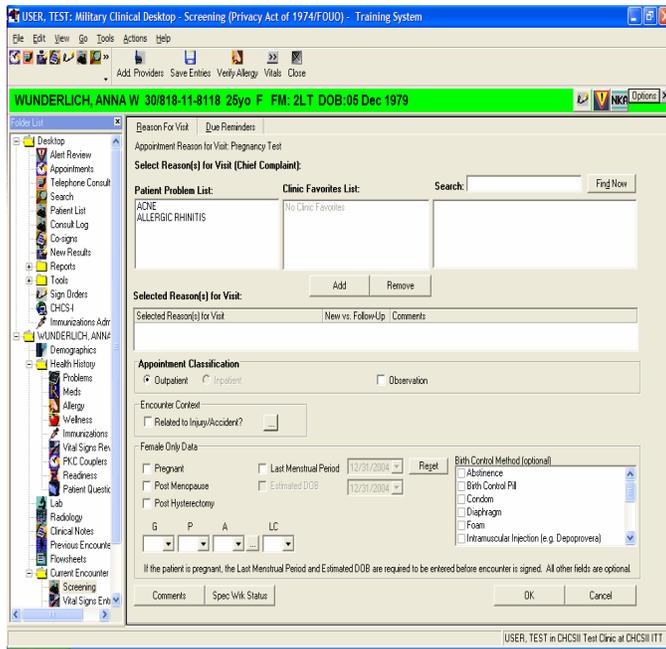
8. Type *pregnancy test* in the **Search** field and click to locate pregnancy test in MEDCIN. Terms containing 'pregnancy' will be displayed. Scroll down list to find *'pregnancy test.*

9. Click on *Pregnancy Test* in the results field and click to add Pregnancy Test as the Selected Reason for Visit. The Screening module window will re-display.

10. In the "For Females Only" section, enter the following:

    a. G= **4**, P= **4**, A= **0**, LC= **4**

    b. Click the Last Menstrual Period box. Select the Last Menstrual period radio button and Enter two months prior.
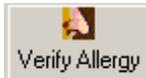
11. Click the [Verify Allergy] icon on the Action Bar. The Allergy Synchronization Box will appear briefly. The Allergy module will display the following screen:

12. Click the [ ] Verified This Encounter check box and click [Close] on the Action Bar to indicate that allergies have been verified during this encounter. You will be returned to the Screening module.
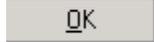
13. Click [OK] to return to the electronic SF600.

14. Click [Vitals] on the electronic SF600 to open the Vital Signs Entry module. The Vital Signs Entry module window will display.
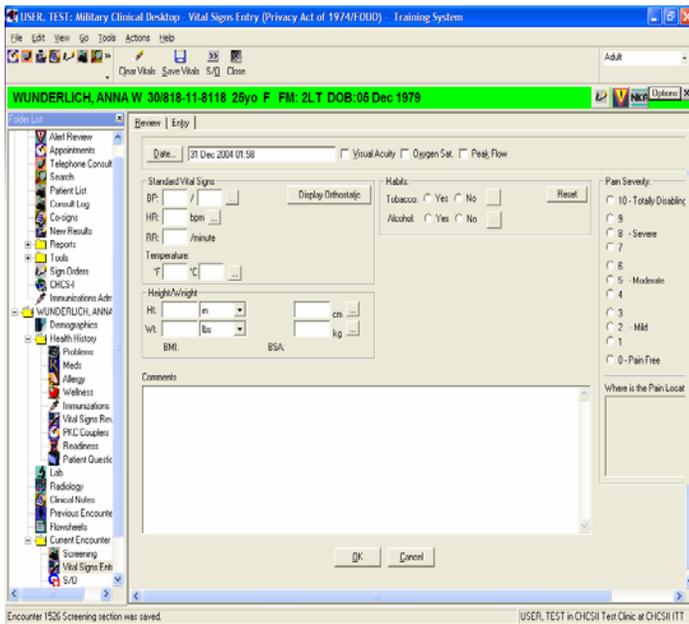
15. Enter the following information in the field indicated:

Field	Data [Description]
Habits	
Tobacco	No
Alcohol	No
Standard Vital Signs	
BP	130/70
HR	80
RR	16

Field	Data [Description]
Temperature F	96.7
Height & Weight	
Ht	5'5"
Wt	132 lbs
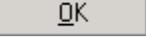
16. Click ___OK___ to save the current information and close the window. The SF600 will re-display.

17. Review the SF600 to confirm the information has been collected properly.

Subjective/Objective

- Subjective - what the patient told the end user
- Objective - what the end user observed during physical exam

The Subjective portion of the note includes the History of Present Illness (HPI), Past Medical History (PMH) and Review of Systems (ROS). This information comes from the patient and is organized by the end user.

The Objective portion of the note includes the Physical Examination (PE) and is what the end user observes.

MEDCIN

- Medical terminology whose subject is the encounter
- Over 250,000 terms with 5.5 million semantic links
- Linked to ICD-9 and CPT codes in A/P
- Narrative engine used in S/O, A/P, Disposition, Template Management, Screening, and Problems modules

Demonstration

Anna Wunderlich's results were positive with a home pregnancy test, and she is now ready to be seen. We need to document the following:

To load an S/O template to document an encounter:
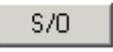
1. Click the ___S/O___ button on the electronic SF600 to open the S/O module. The S/O screen will display (the parts of the screen have been annotated for easy reference).
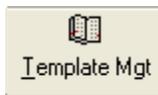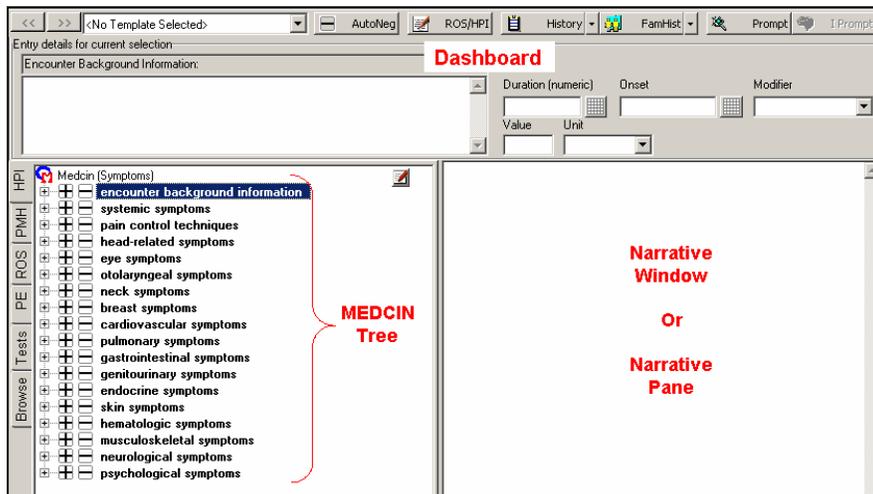
2. Click ![Template Mgt] on the Action bar.

3. In the Name Contains field, enter TRAINING and click **Find Now**.

4. Select the TRAINING--ECP—PREGNANCY TEST--VISIT template. You can review the template in the Template Preview pane.
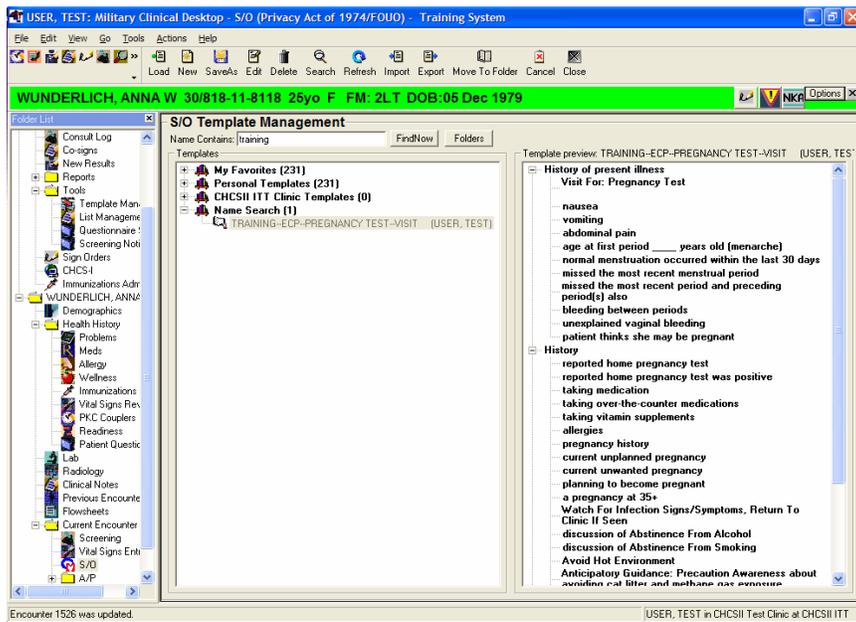
5. Click **Load** on the Action bar.

Once the template is loaded, the S/O module starts with the ![HPI] tab selected

HPI

- Click ⊞ to select *The reason for visit is: Pregnancy Test* as a positive finding.

- Click the **Notepad** 📝 icon, enter *HOME TEST RESULTS POSITIVE* and Click **OK**.

- Click ⊞ to select *nausea* as a positive finding.

- Click the 🗔 **FindTerm** button on the Action bar. In the search field, enter *Fatigue* and click **OK**. Add *feeling tired (fatigue)* as a positive finding.

- Click the **<< Go Back** button to return to the template. Click the ⊟ **AutoNeg** button on the dashboard.
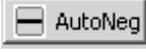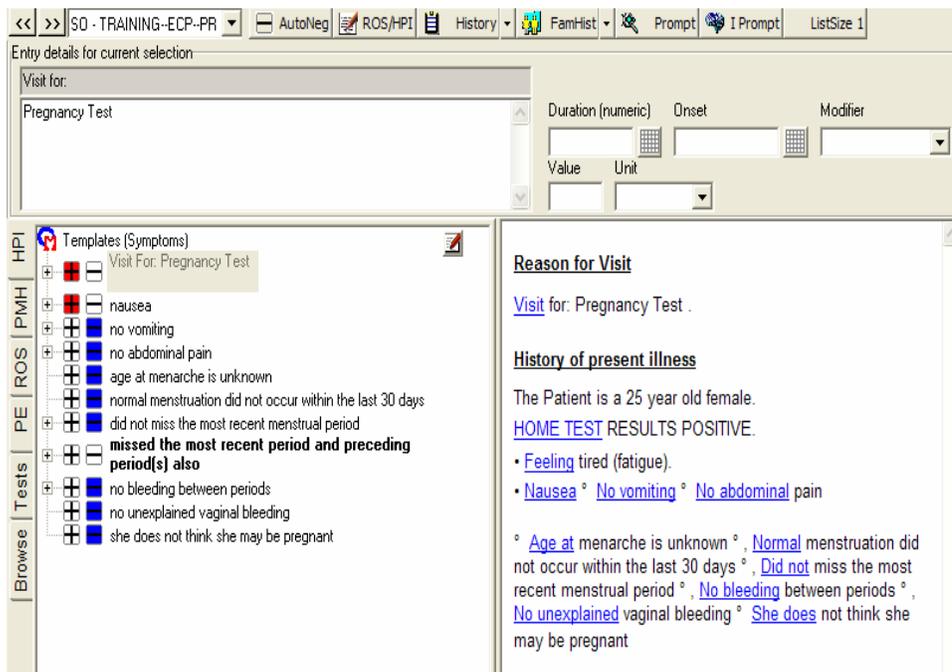
Once the HPI is complete, click the **PMH** tab in the S/O window to document the Past Medical History.

PMH

- Click ⊞ to select *Reported home pregnancy* test as a positive finding.

- Taking vitamin supplements as a positive finding. In the Free Text field, enter *CALCIUM 500mg DAILY* and press Enter on your keyboard.

- Expand pregnancy history. Add age at first pregnancy years old as a positive finding. In the **Value** field, enter 20 and press Enter on your keyboard.

- Click ⊟ to select *Planning to become pregnant* as a negative finding.

- Click the [FindTerm] button on the Action bar.

- In the **Search** field, enter DOWN SYNDROME and click **OK**. Expand History of Diagnoses, Syndromes And Conditions. Add history of DOWN'S SYNDROME (TRISOMY-21 MONGOLISM) as a positive finding. Click the [FamHist ▾] button on the Dashboard.

Click the **<< Go Back** button to return to the template.

The end user is now ready to perform the physical examination, so click the [PE] tab.

PE

- Click ⊞ to select Pain Level (0-10) as a positive finding. In the **Value** field, enter 0 and press Enter on your keyboard.

- Click the **Notepad** 🖉 icon. In the note field, enter **EDUCATION**: Pt instructed to make OB appt. Pick-up prenatal vitamins from pharmacy. Pt instructed not to drink alcohol or take other medications and click **OK**.
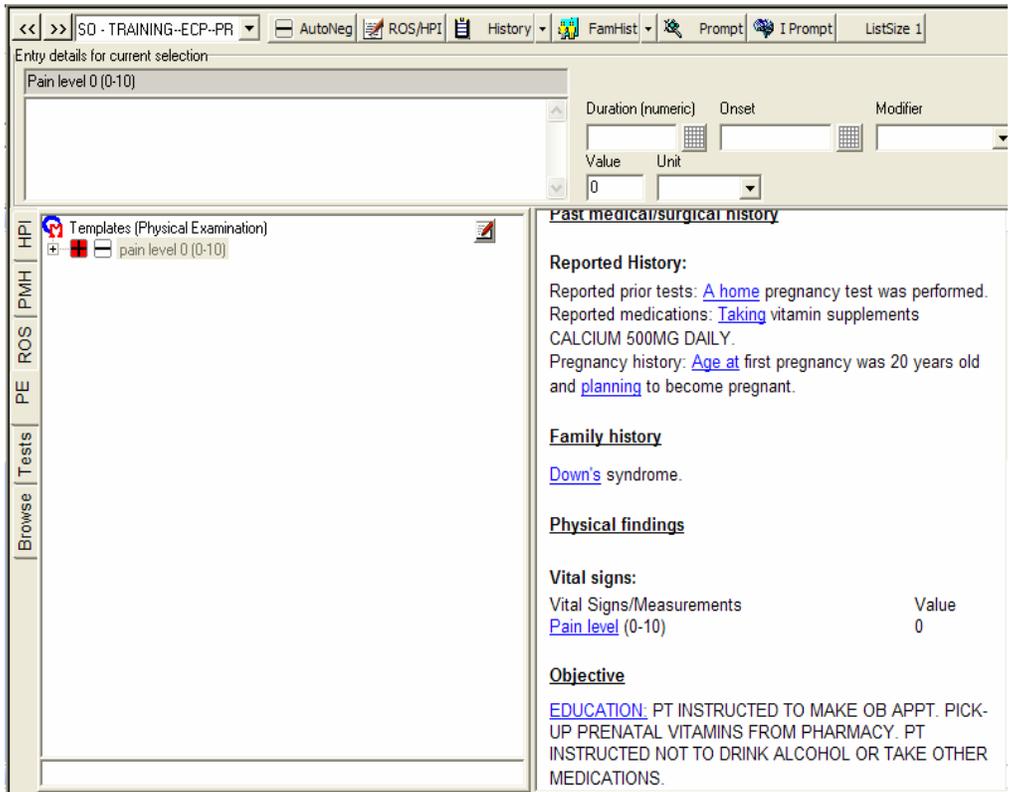
6. Click **Close** on the Action bar.

Assessment/Plan

- Assessment – knowledge gained from the S/O determines diagnosis

- Plan – what needs to be accomplished to treat the patient

The Assessment and Plan module allows you to document your assessment of a patient's condition and the plan for treatment by entering diagnoses, procedures, patient instructions and order consults, laboratory and radiology procedures and medications.

A/P Processes

- Codes are captured with diagnoses and procedures

- Procedures, orders and other therapies must be associated to a logical diagnosis

- Consults, labs, rads and meds can be submitted or saved to queue

ICD-9 and CPT codes are automatically included with the appropriate terms in MEDCIN. When diagnosis/diagnoses is added to the encounter the associated ICD-9 code is also added. When a procedure is added, the associated CPT code is included.

Demonstration

The end-user is ready to order a Pregnancy Test for Mrs. Wunderlich.

1. To document these items, click [A/P] on the electronic SF600 to open the A/P module. The A/P screen will display with the Diagnosis tab selected:
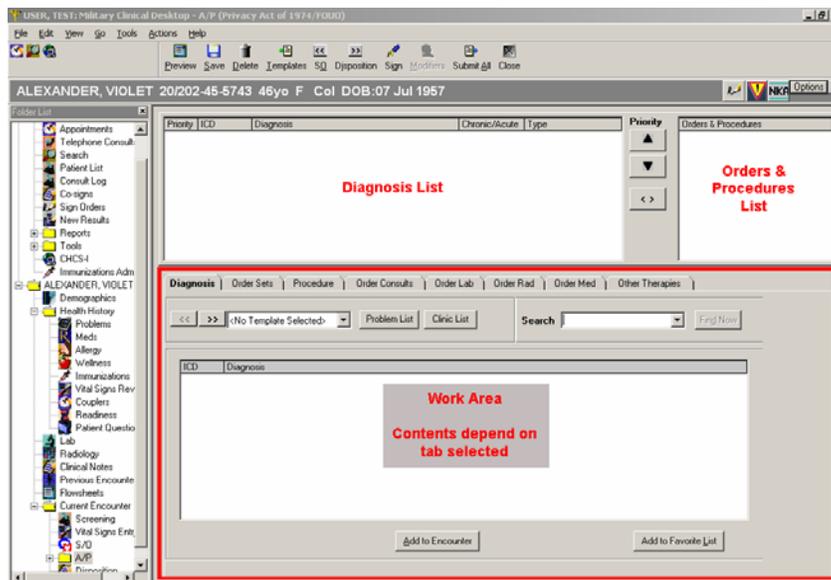
2. In the **Search** field, enter *Pregnancy Test* and click [Find Now].

3. Select **Pregnancy Test V72.9** and click [Add to Encounter].
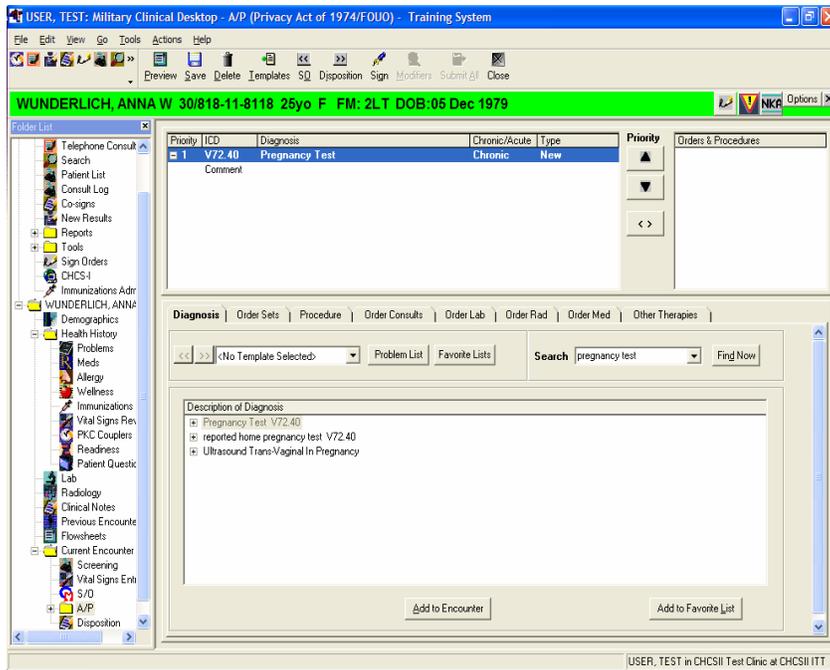
4. Click the **Order Lab** tab.

5. In the **New Lab Order** field, enter *HCG* and click **Search**.

6. Select *HCG QL*.
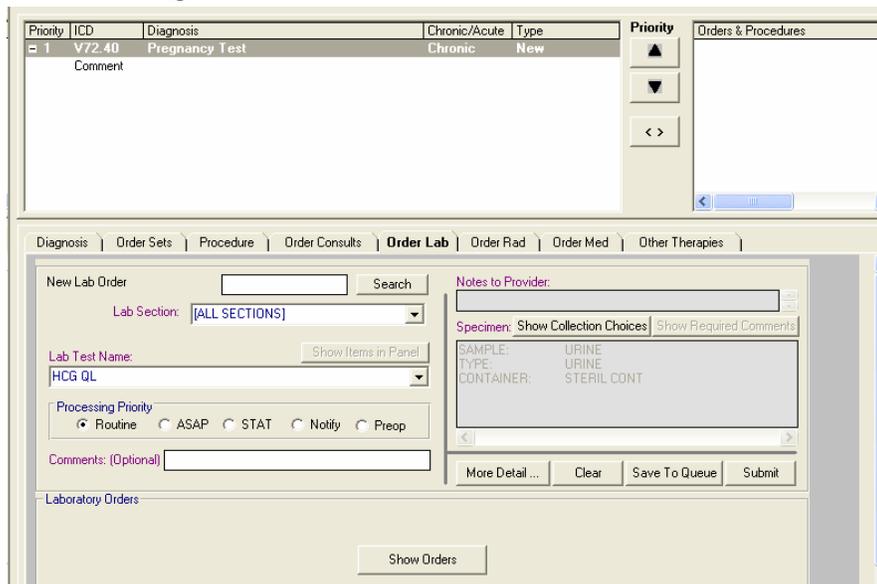
7. Click the **More Detail ...** button to select the Processing Priority ASAP radio button.

8. Click **Submit**.

7. Click **Close** on the Action bar.

Disposition and Signing

- Release of the patient
- Follow-up information
- Items discussed
- E&M code
- Review the note
- Assign a co-signer if required
- Enter password

Demonstration

We are now ready to discharge the patient. In this case we want to release the patient without limitations and have the patient follow up with PCM. All items were discussed with the patient who indicated an understanding of the items discussed. We want to see the effect of filters on the E&M code before signing the encounter.

1. Click Disposition button on the electronic SF600 to open the Disposition module. The Disposition screen will display:
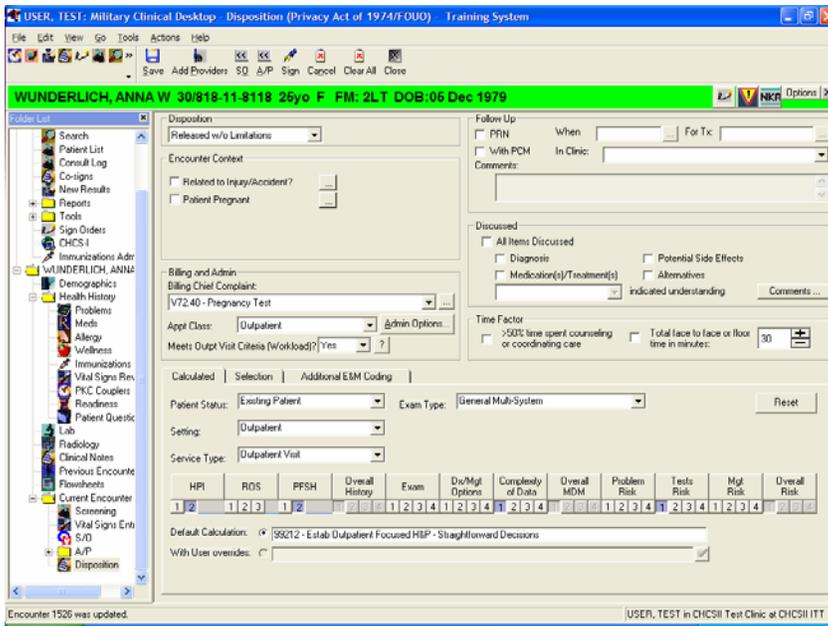
2. Accept the default Disposition, **Released w/o Limitations**.

3. In the Follow Up area, select the [With PCM] checkbox.

4. In the Comments field, enter *Call tomorrow for pregnancy test results.*

5. Accept the default E&M value, 99212.

6. Click [Sign] button on the Action bar.
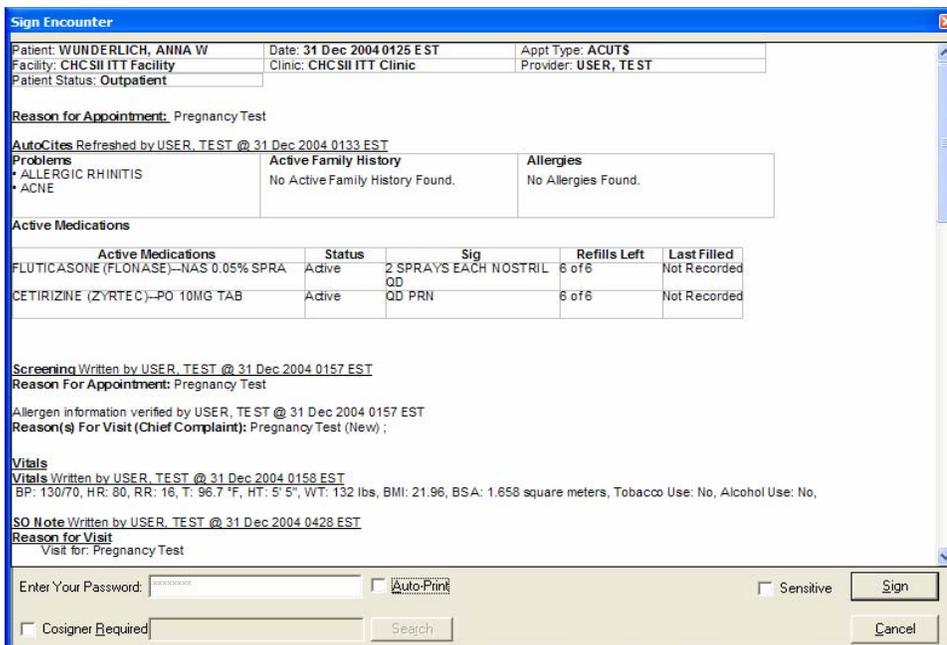
7. Review the note to ensure that everything is complete and accurate. Enter your password in the field provided and click [Sign] to complete the patient encounter process.

Note: The CHCS II Training System simulates entering a password. If you have signing privileges, you will be required to enter your personal password.

Lesson Exercises

Open the CHCS II Training System and complete the exercises.

Patient Encounter Scenario

Col Violet Alexander (a5743) has come in today complaining of a cough. You are short-staffed today, and your available support is busy with other patients. You decide to begin the encounter yourself. Ordinarily she would see Dr. David Doctor, who is out of the office. Because she is a new patient for you, you take a look at her family history, medications and problems. You find no family history in the system, so you ask some relevant history questions and document them. As you review the note, you do not see your diagnosis or the medications you just ordered listed in AutoCite, so you refresh the screen. Use the information below to handle this appointment.

Clinical data:

Field	Data
Patient Search	
Last name or Quick Search	Alexander or a5743
New Unscheduled Appointment/Telcon Visit	
Appointment Type	Acute Appt (Acut$) 30
Reason for Appointment	cough
Encounter Summary Properties	
Active Problems	[Accept default]
Allergies	[Accept default]
Active Family	[Select]
Active Dispensed Medications	[Select]
Screening	
Select Reason(s) for Visit (Chief Complaint)	a cough
Verified This Encounter	[Select to verify allergies]
Female Only Data	
G	3
P	3
LC	3
Last menstrual period	[Two weeks ago]
Vitals	
BP	120/70
Rt arm	[Select]
Adult cuff	[Select]

Field	Data
HR	72
Radial	[Select]
Regular	[Select]
RR	18
Temperature F	99.6 F
Oral	[Select]
Peak flow	[Select]
Peak flow__l/min	420
Habits	
Tobacco Yes	[Select]
What type of tobacco product?	Cigarettes
Would you like to quit? Yes	[Select]
Amount of tobacco product used per day/duration?	2 packs a day/ 6 years
Alcohol Yes	[Select]
Do you want to cut down? No	[Select]
Do you annoy others you? No	[Select]
Do you feel bad or Guilty? No	[Select]
Do you need an eyeopener? No	[Select]
Enter Frequency/Use/ Duration Comments	occasional beer or glass of wine each week
Pain Severity	
Where is the Pain Located?	[Select] 2- Mild Throat is sore
S/O	
HPI Notepad (Preliminary	cc: cough for three days; hacking

Field	Data
Background HPI)	
PMH Notepad (Subjective…)	Tonsillectomy; family history of CAD
PE Notepad (Objective…)	Vital signs reviewed; Findings: bilateral mucoid nasal discharge; no pharyngeal mucosa inflammation; lungs clear bilaterally
A/P	

Diagnoses
  Clinic List
  Comment
	[Select] Essential Hypertension 401.9
	Pt indicates a need for new script for HCTZ
	[Select] URI 465.9

Procedure	Peak flow Electrocardiogram (add to favorites)

Order Lab
  Processing Priority
 	
  Comment
	CBC W/ Auto diff
	Routine
	
	[Your option]
	(Associate with URI and save to queue)

Order Rad
  Clinical Impression
  Priority
	Chest
	R/O pneumonia
	ASAP
	(Associate with URI and save to queue)

Order Med
  New Med Order
 	
  Sig
 	
  New Med Order
  Sig
	
	HCTZ
	[Your option]
	(Submit and associate with Essential Hypertension)
	
	Sudafed
	[Your option]
	(Associate with URI, save to queue, and submit all)

Disposition	
Released without limitations	[Select]
Follow Up PRN	 [Select]

Discussed
  All Items Discussed
 	
  [Patient] indicated
  understanding
	
	[Select]
	
	[Select]

LESSON 7:   MEDICOMP FORMS TOOLS

Medicomp Form Tools is an alternative mode of documentation during an encounter. The Medicomp Form Tool also provides enterprise management capability for forms that emulates Template Management functionality within the S/O portion of the encounter.

Lesson Goal:
The goal of this lesson is to locate and use available Medicomp Forms in CHCS II.

Learning Objectives:
Upon completion of this lesson, you will be able to:

- Search for a Form
- Load Form
- Document the S/O using a Form

Exercises – CHCS II Training System

Open the CHCS II Training System and complete the exercises below.

Scenario 1

Marie Alexander has come in with ankle pain. You wish to document the S/O portion of the note using Forms.

1. In the list of appointments in the appointment module, highlight and open the encounter for Marie Alexander.

2. Click the **S/O** tab.

3. Click the **Template Mgmt** tab on the Action Bar.

4. In the Name Contains field enter **Ankle pain**.

5. The Name Search should provide one AIM Form for Ankle pain.

6. Highlight the form and click **Load** on the Action Bar.

7. The AIM Form will load

8. Verify the right ankle History Tab is selected before documenting the Note.

9. Click the **Y** under the Chief Complaint section to indicate right ankle pain.

10. Select the **T** to indicate Local Tissue Swelling Right Ankle.

11. Click in the square beside the term you just selected. This will open up a dialog box to add free text or insert text to the note.

12. Type in the following: *Patient states she was playing tennis when she twisted her ankle and feels it is sprained.*

Note: You will notice and arrow with a question mark beside it. When you right mouse click on it the child terms under Local Tissue Swelling Right Ankle will appear.

13. Select the child terms – **Medial right ankle soft tissue swelling**, and Right ankle soft tissue swelling with black and blue discoloration, to be more specific with your documentation.

14. Next go to **PMH.**

15. Select **T** to indicate previous Ankle Fracture under the Previous Diagnosis section.

16. Once you complete documentation of the patient's HPI, PMH and ROS, click on the **Right Ankle** Physical Exam Tab

17. Document the Vital Signs reviewed

18. Select **F** in the In No Acute Distress box**.**

19. Click the **Note** box to the right of the statement.

20. A free text box will appear. In this box type in: *Pt. States ankle very painful to walk on.*

21. In the Examination of the Right Lower Leg section click **T** for each item in this section.

22. In the Appearance of the Right Ankle section select **F** for the first four entries. Leave the others blank.

23. In the Tenderness of the Right Ankle section check **F** Medial Palpation without Tenderness

24. In the Motion of the Right Ankle section check **F** Right Ankle without Abnormal Motion.

25. In the Pain of the Right Ankle section check **F** No Pain Elicited by Motion.

26. In the Examination of the Right Foot section check **F** Right Foot Not Swollen and **F** Right Foot Not Tender to Palpation.

27. In the Test Results section, under the Results of Right Ankle X-Ray, free text *Fractured right ankle.*

28. Select **AutoNeg** from the Dashboard to indicate a "normal" result for the rest of the history.

29. Click **Close** to save and close the S/O Forms note.

S/O Template Management

- ▪ Allows an end user to search for available templates within CHCS II

- ▪ Enables an end user to personalize available S/O templates

- ▪ Easier than building from scratch

- ▪ Enables end user to save most commonly used personal and clinic templates

Editing a visit template is easier than building a new template. CHCS II has numerous templates available to the end user and each service has selected templates for their end users. Once a template has been created, editing is simple.

Lesson Goals

The goal of this lesson is to locate available S/O templates in CHCS II and edit templates using MEDCIN.

Learning Objectives

Upon completion of this lesson, the student will be able to:

- • Search for Visit Template
- • Use Template Edit Mode
- • Use FindTerm
- • Use Browse from Here
- • Save the Template

Demonstration

UTI encounters are among your most frequent clinic visit types. You decide to customize a UTI S/O template for your clinic.

1. Create an appointment for **CPT Heather Cloud (c0058)**.

   — Appointment Type: **ACUTE APPT (ACUT$) 30**
   — Reason for Appointment: **Test Patient**

2. Open the encounter.
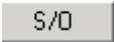
3. Click S/O on the SF600.

4. Click Template Mgt on the Action bar.

5. In the Name Contains field, enter *UTI* and click ![FindNow] .

6. Highlight **VISIT--UTI**.

7. Click ![Edit] on the Action bar.
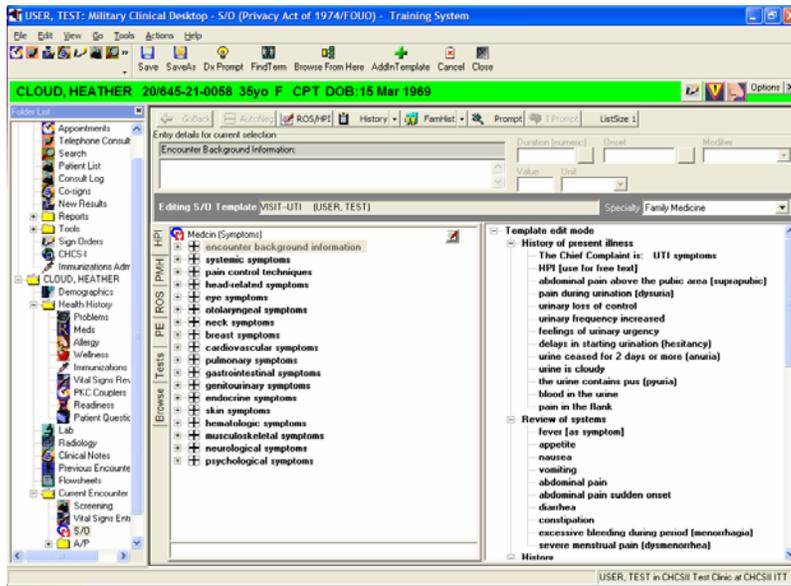
8. In the right pane, under Review of Systems, highlight a *vaginal discharge*.

9. Click ![ROS/HPI] on the dashboard. The term is flipped into the **HPI**.

10. Click ![FindTerm] on the Action bar.

11. In the search field, enter *incomplete emptying of bladder* and click **OK**.

12. Click ![+] to add *incomplete emptying of bladder* to the template.

13. Click ![Browse From Here] on the Action bar.

14. Click ![+] to add *a vaginal discharge of urine*.

15. Click **Save As** on the Action bar.

16. In the Template Name field, enter **VISIT--UTI FEMALE--[Your Initials]** and click **Save**.

17. Click **Close** on the Action bar. To return to the S/O Template Management module.

18. Click **No** on the warning window.

19. Click **Close** on the Action bar to return to the S/O module.

20. Click **Close** on the Action bar to return to the SF600.

Lesson Exercises

Open the CHCS II Training System and complete the exercises below.

Edit an S/O Template Scenario 1

1. Create and open appointment for test patient at PMT or test clinic.

2. Click **S/O** and, on Action Bar, click **Template Mgt**.

3. From the list displayed or from search results, single-click to select template and, on Action Bar, click **Edit**.

4. To remove a term from template, in *Template Edit mode* pane, select term you want to remove.

5. In *Edit View* pane (left side) click the red plus next to the term.

Note: Verify in *Template Edit mode* pane (right side) that the term is gone.

6. To add a term, use **Find Term, Prompt, Dx Prompt**, or **Browse from Here** to locate term.

Note: The prompt features can be adjusted for number of results to choose from by using **List Size** on the Dashboard. You may need to close *Folder List* to access **List Size** button. Use **View** menu to reopen *Folder List*.

7. From search results, in *Edit View* pane on left, click the plus beside terms you want to add.

Note: Look to right side of screen at template contents to ensure terms have been added.

8. To save as a new template, click **Save As** and enter new name of template in **Template Name** field. Review the check boxes for accuracy and follow guidelines of your Service for naming and sharing of templates.

Template Management

- Streamlines the encounter documentation process
- Contains placeholders for:
- Diagnosis
- Procedures
- Other Therapies
- Orders
- Notes Templates
- Items to AutoCite into Note
- Associated reasons for visit

Templates are used to streamline the encounter documentation process. Each encounter template contains placeholders for diagnoses, procedures, orders, Notes templates, AutoCited items, and the associated reason for visit. Once an encounter template has been selected and loaded into the encounter, the pre-positioned lists are available within S/O and A/P modules. The Template Management module can be accessed while in an encounter after the screening process and before any charting is completed, or by the folder list. The Encounter templates can be viewed and edited without an open encounter.

Lesson Goal

The goal of this lesson is to enable the end user to create encounter templates and commonly used Order Sets.

Learning Objectives

Upon completion of this lesson, the student will be able to
- Use an Encounter template
- Edit an Encounter template
- Create an Order Set
- Merge an Order Set with an Encounter template

Demonstration

CPT Heather Cloud (c0058) is calling the clinic because she is experiencing UTI symptoms. The end-user taking the call needs to document the findings and assessment.

1. Click ![Telephone Consult] on the Folder List.

2. Create a ![New Telcon] appointment for **CPT Cloud (c0058)**.

   — Appointment Type: **TELEPHONE CONSULTS (TCON) 10**.

   — Reason for Telephone Consult: **UTI symptoms**.

3. Click **OK**. The Telcon Quick Entry window opens.

4. On the Telcon Quick Entry window, click **Cancel**. The SF600 opens.

5. Click ![Templates] on the Action bar.

6. Expand the **My Favorites folder.**
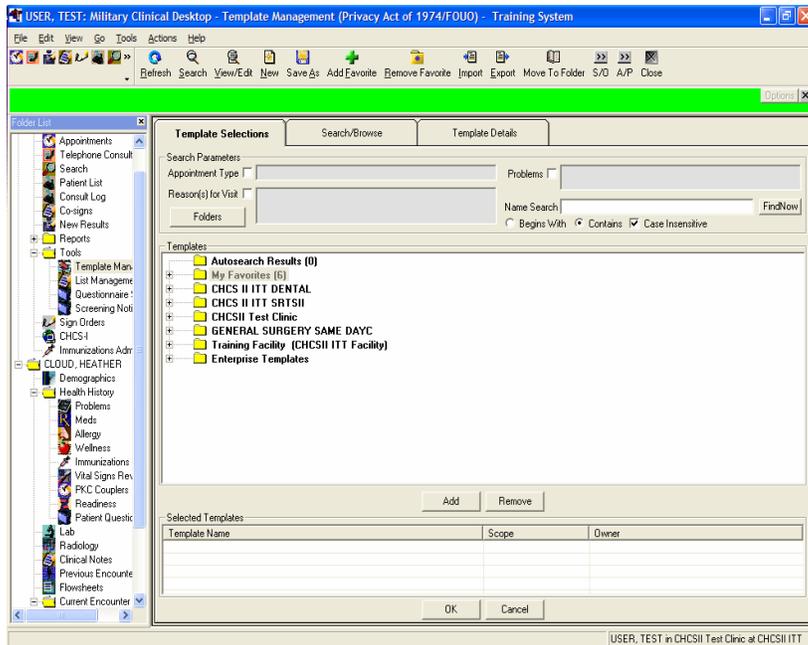
7. Select the **TRAINING--ECP--UTI--ENC** template and click Add.

8. Click **OK**.

9. Click **S/O** on the SF600.

10. Add The Chief Complaint is: *UTI symptoms* as a positive finding.

11. Add *pain during urination (dysuria)* as a positive finding.

12. Click the **Duration (numeric)** grid and then click **2** and **Days**.

13. Add feelings of *urinary urgency* as a positive finding.

14. Add *diarrhea* as a positive finding.

15. Click the **Duration (numeric)** grid and then click **1** and **Days**.

16. Click **AutoNeg**.
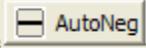
17. Click the **PE** tab.

18. Add *Pain Level (0-10)* as a positive finding.

19. In the Value field, enter **4** and press Enter on your keyboard.

20. In the Free Text field, enter *As reported by patient* and press Enter on your keyboard.

21. Click the **PMH** tab.

22. Expand *sexually active*.

23. Add *trying to become pregnant* as a positive finding.

24. Click the **Notepad** icon.

25. In the Note field, enter *Pt. reports she has been previously diagnosed with a UTI* and click **OK**.

26. Add *Disposition of Patient* as a positive finding.

27. In the Free Text field, enter an **X** next to *WITHIN 24 HOURS*.

28. Click **A/P** on the Action bar.

29. Select urinary symptoms and click **Add to Encounter**.
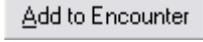
30. Click the **Order Lab**.

31. In the New Lab Order field, enter *urinalysis* and click **Search**.

32. Select **URINALYSIS**.

33. Select the **ASAP** radio button.

34. Click **Submit**.

35. Click **>> Disposition** on the Action bar.

36. In the Follow Up area, click the **In Clinic** drop-down list and select **CHCS II Test Clinic**.

37. In the Comments field, enter *Walk in for UTI*.

38. In the E&M Codes area, select **99371 PHYSICIAN PHONE CONSULTATION**.

39. Click **Sign** on the Action bar.

40. Click **Sign** to complete encounter.

To personalize an encounter template:

1. Expand Tools on the Folder List and select **Template Management** .

2. The **Search/Browse** displays by default.

3. Click **Search** on the Action bar.

4. In Template Name type UTI and click **Search.**

5. Highlight the **TRAINING-- ECP--UTI--ENC** template.

Template Selections	Search/Browse	Template Details					
Template Name			ID	Scope	Owner	Shared	Favorite
TRAINING--ECP--UTI--ENC			1413	User	USER, TEST	Yes	Yes
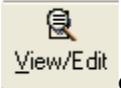
6. Click **View/Edit** on the Action bar. The Template Details tab opens.
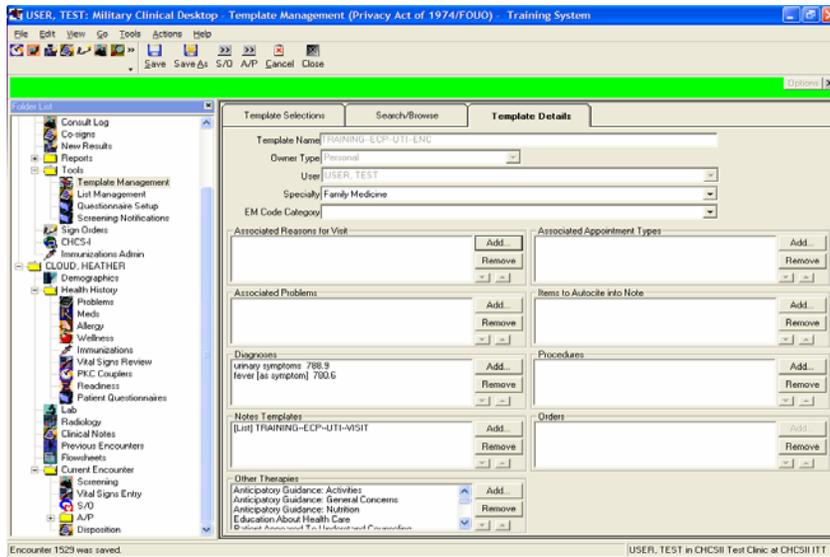
7. In the **Diagnose**s area, click **Add**.

8. In the Search Term field, enter *pain during urination* and click **Search**.

9. Select *pain during urination (dysuria) 788.1* and click **Add Items**.

10. Click **Done**.

11. In the **Other Therapies** area, click **Add**.

12. In the Search Term field, enter *frequent oral fluids* and click **Search**.

13. Select *Oral Fluids Frequent* and click **Add Items**.

14. Click **Done**.

15. In the Notes Template area, highlight [List] **TRAINING--ECP-- UTI--VISIT** and click **Remove**.

16. Click **Add**.

17. Click **Search** on the Notes Template Lookup.

18. In the Template Name field, enter **VISIT--UTI FEMALE--TEST**.

19. Click **Search** on the Medcin Template Search.

20. Select **VISIT--UTI FEMALE--TEST** and click **Add Items**.

21. Click **Done**.

22. Click **Save As** on the Action bar.
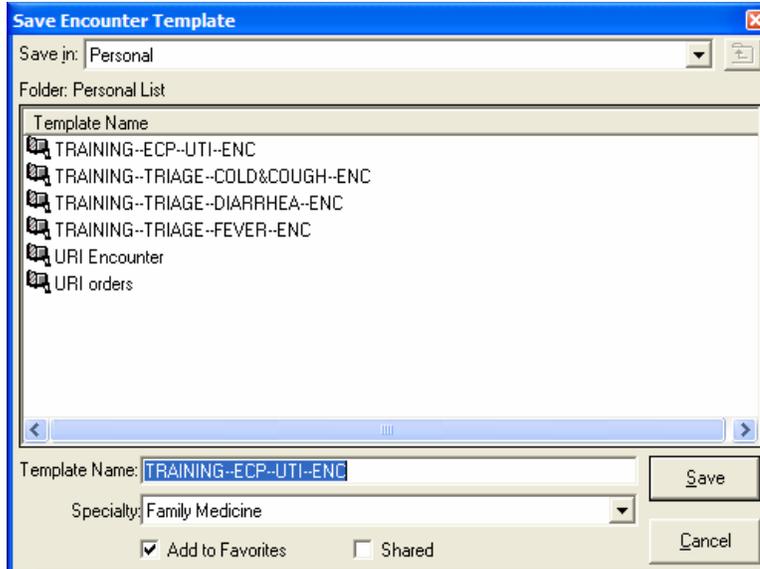
23. In the Template Name field, enter **ECP--UTI--ENC--TEST** and click **Save**.

24. Click **Close** on the Action bar.

You have just personalized a UTI encounter template and you want to complete it by adding a UTI Order Set.

To create an order set:

1. Click **A/P** on the SF600.

2. Click the **Order Lab** tab.

3. In the **New Lab Order** field, enter *Urinalysis* and click **Search**.

4. Select *URINALYSIS*.

5. Select the **ASAP** radio button.

6. Click [Save To Queue].

7. In the **New Lab Order** field, enter *HCG QL* and click **Search**.

8. Select **HCG QL**.

9. Click **Save to Queue**.
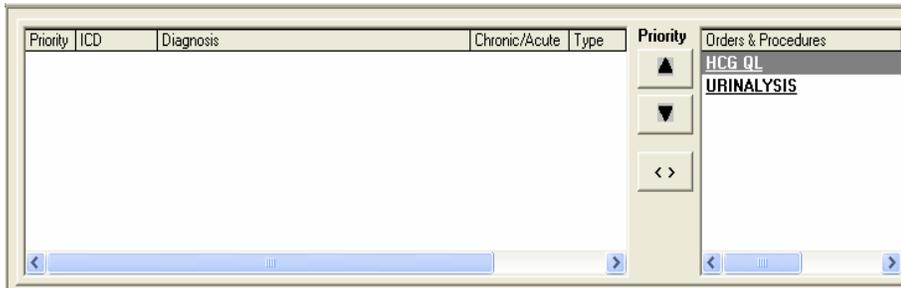
10. In the **New Lab Order** field, enter *urine culture* and click **Search**.

11. Select *URINE CULTURE*.

12. Click **Save to Queue**.

13. Click the **Order Sets** tab.
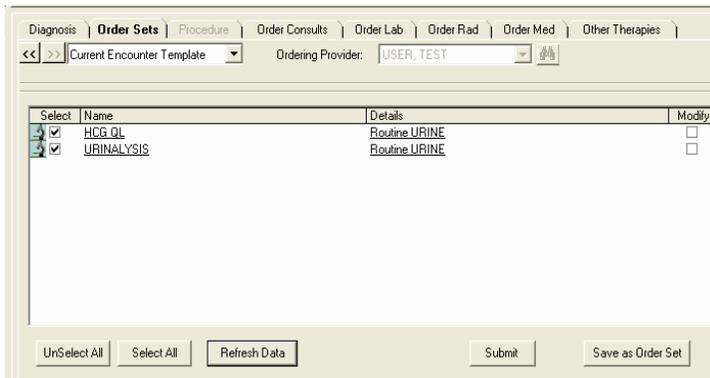
14. Click **Save As Order Set**. The Save Encounter Template window opens.

15. In the **Template Name** field, enter **UTI--Orders--Test** and click **Save**.

16. Close the A/P module.

17. Click **Yes** on the A/P Warning window. You are returned to the SF600.

To merge an order set with an Encounter template:

1. Expand Tools on the *Folder List* and select **Template Management**.

2. Click Search on the Action bar.

3. In the Template Name field, enter UTI.

4. Click Search.

5. Press and hold Ctrl on your keyboard and select UTI--Orders-- Test and ECP—UTI ENC--TEST**.**
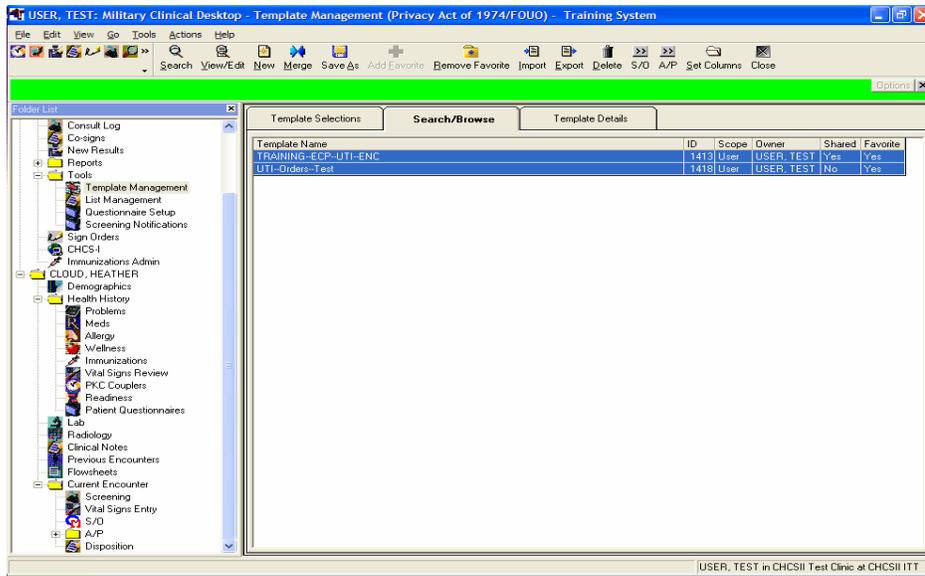
6. Click ![Merge] on the Action bar.

7. Click **Save As** on the Action bar.

8. In the Template Name field, enter **ENC--UTI with Orders** and click **Save**.

9. Click **Cancel** on the Action bar to go back to the Search/Display window.

10. Click **Search** on the Action bar.

11. In the Template Name field, enter **ENC--UTI with Orders** and click **Search**.

12. Highlight **ENC--UTI with Orders** Template.

13. Click **View/Edit** on the Action bar to verify both templates merged.

14. Click **Close** on the Action bar to close SF600.

Lesson Exercises

Open the CHCS II Training System and complete the exercise below.

Encounter Scenario 1

Create a Template

1. Create the encounter template.
2. Add diagnoses:
    a. **LOW BACK PAIN (LUMBAGO)**
    b. **SCIATICA**
    c. **LOWER BACK SPRAIN**
3. Add S/O template: **VISIT--LBP**.
4. Add other therapies:
    a. **Heat/Cold application**
    b. **Other Physical Therapy**
    c. **Physical Therapy Massage**
5. Add procedures:
    a. Enter Search: **Modalities**
    b. Expand**: Physical Therapy Modalities**
    c. Select: **Electrical Stimulation 97032**
    d. Expand: **Heat**
    e. Select: **Hot Packs 97010**
    f. Scroll down and select: **Traction 97012**
6. Save as: **ENC--LBP**.
7. Close the module.

Encounter Scenario 2

Create an Order Sets

You need an order set for the LBP encounter template you are building for use in your clinic. Use a test patient, **Capt Heather Cloud (c0058**) to create order set for LBP.

1. Create a new acute appointment for **Capt. Heather Cloud** (test patient).
2. Open the Encounter.
3. Open A/P.
4. Order Lab: **Urinalysis**; save to queue
5. Order Rad:
    a. Search: **Lumbar**

    b.   Select: **CT, LUMBAR SPI WITH AND WITHOUT CONTRAST GP**

    c.   Clinical Impression: **LBP**

    d.   Save to queue

6.   Order Med:

    a.   Search: **Motrin**

    b.   Select: **IBUPROFEN (MOTRIN) 800MG (U/D)--PO 800MG**

    c.   SIG: **T1 PO TID PRN #40 RF0**

    d.   Save to queue

    e.   Search: **Flexeril**

    f.   Select: **CYCLOBENZAPRINE (FLEXERIL)--PO 10MG TAB**

    g.   SIG: **T1 PO TID PRN #20 RF0**

    h.   Save to queue

7.   On the *Order Set* tab, point out the **Save as Order Set** button.

8.   Right click and click the **Save as Order Set** command.

9.   Save template as: **ORDERS--LBP**

10. Close A/P to return to the encounter.

11. Close the encounter.

Encounter Scenario 3

Merging two templates

1.   From the *Folder List,* open Template Management.

2.   From the Action Bar, click the **Search** icon.

3.   Search for **LBP**.

4.   Press and hold the **Ctrl** key and click to select:

    a.   **ORDERS--LBP**

    b.   **ENC--LBP**

5.   From Action Bar, click the **Merge** icon.

6.   Note that orders have been added to encounter template.

7.   Save as: **ENC--LBP with Orders**

8.   Clear the **Shared** check box.

9.   Close the encounter.

10. Cancel the appointment to clear the system.

Encounter Scenario 4

Loading an Encounter Template

Heather Cloud appears at the desk. She is complaining of pain in the lower portion of her back.

- Create a new appointment for **CPT Heather Cloud (c0058)**.
  Appointment Type: **ACUTE APPT (ACUT$) 30**
  Reason for Appointment: **lower back pain**
- Load the **ENC--LBP with Orders** template just created.
- View the content of the tabs in the S/O.
- View the contents of the appropriate tabs in the A/P: *Diagnosis*, *Order Sets*, *Procedures*, *Other Therapies*.
- In the *Order Sets* tab:
  - Select the **Modify** check box for the radiology order.
    Explain: This should always be done for radiology orders to modify the clinical impression.
  - Select the **Modify** check box for one of the medications.
- Submit the orders; enter changes for selected modifications.
- Close the encounter.

Health History

Displays a patient's historical data

- Allergy
- Clinical Notes
- Previous Encounter
- Lab
- Meds
- Problems
- Radiology
- Vital Signs
- Wellness

The Health History module displays patient historical data from various modules in one window. The window can be customized to show different modules containing the patient's historical information based on end user preference.

Lesson Goal

The goal of this lesson is to allow the end user to setup and customize the Health History module.

Learning Objective

Upon completion of this lesson, the student will be able to:

- Setup Health History patient data modules

Demonstration

You would like to set-up the Health History modules to display only Problems, Allergies, and Lab. You will need to pull LCDR Eduardo Suarez's record.

1. Click the **Health History** folder in the Folders List.
2. The Health History module displays with default modules selected.
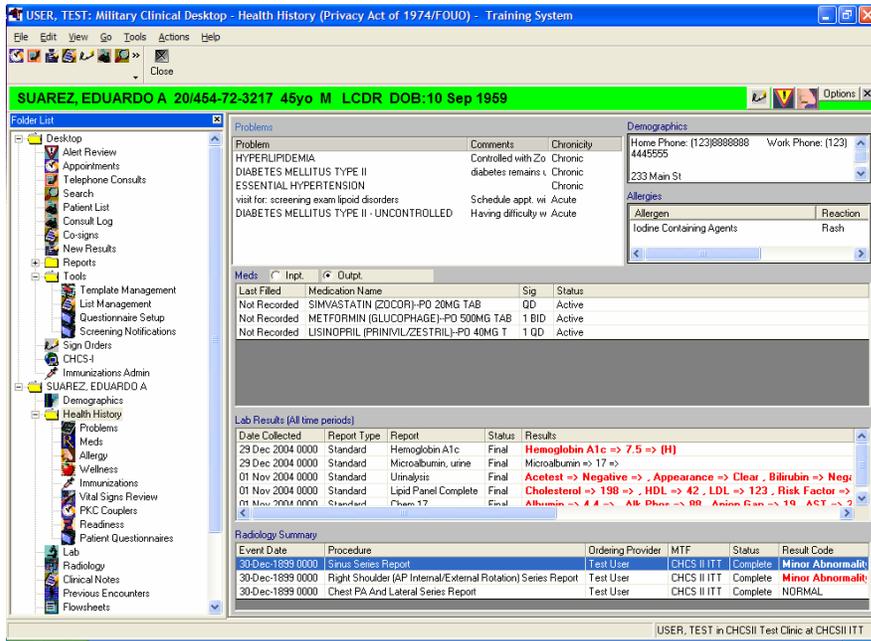
To customize the Health History folder:

1. Click the **Options** button on the Patient ID line. The Health History Design Summary screen will display.
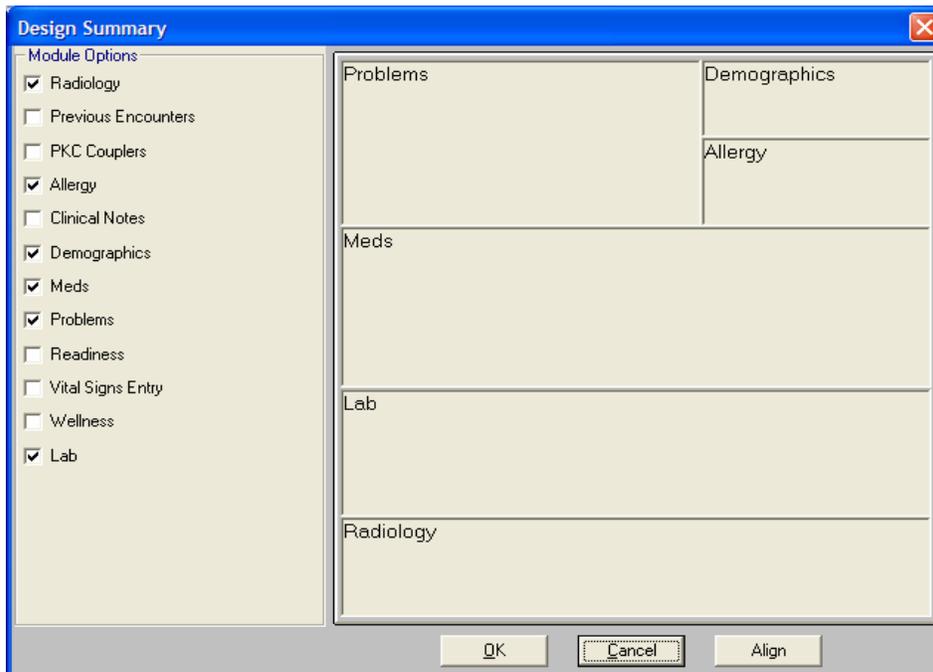
2. Uncheck the box next to **Demographics**.

3. Click the **Align** button to view the format.

4. Click the **OK** button to view the results.

5. Click the **Close** icon on the Action Bar to close the module.

6. Click the [OK] button to view the results:

Date Collected	Report Type	Report	Status	Results
25 Dec 2003 0000	Standard	Hemoglobin A1c	Final	Hemoglobin A1c => 7.5 => (H)
25 Dec 2003 0000	Standard	Microalbumin, urine	Final	Microalbumin => 17 =>
28 Oct 2003 0000	Standard	Urinalysis	Final	Acetest => Negative => , Appearance => Clear , Bilirubin => Negative , Blood => Negati
28 Oct 2003 0000	Standard	Lipid Panel Complete	Final	Cholesterol => 198 => , HDL => 42 , LDL => 123 , Risk Factor => 4.7 (H), Triglycerides
28 Oct 2003 0000	Standard	Chem 17	Final	Albumin => 4.4 => , Alk Phos => 88 , Anion Gap => 19 , AST => 28 , Bilirubin => 1.1 , C

Allergies

Allergen	Reaction	
Iodine Containing Agents	Rash	

Problems

Problem	Comments	Chronicity
HYPERLIPIDEMIA	Controlled with Zocor. Next LFT due in one year with lipid recheck.	Chronic
DIABETES MELLITUS TYPE II	Uncontrolled. Send to RN Diabetic clinic for education on diet and home monitoring. Start glucovance.	Chronic
ESSENTIAL HYPERTENSION	Uncontrolled. Start on lisinopril. Will adjust in 2-4 weeks with a goal of 40 mg daily.	Chronic
reason for visit: screening exam lipoid disorders	Schedule appt. with PCM and request PCM refill cholesterol medication to cover patient until visit.	Acute

7. Click the [Close] icon on the Action Bar to close the module.

Problems

- ▪ Displays patient's list of previous Problems, Health Care Maintenance, Dental Readiness Classification, Historical Procedures, and Family History
- ▪ Dental readiness is read only

The Problems module displays a patient's problem list, health care maintenance, dental readiness classification, historical procedures, and family history information. The problem list and family history list is populated when an encounter is signed. Dental readiness classification information is populated by the dental module and is read only.

Lesson Goal

The goal of this lesson is to enable the student to add and update patient problems in CHCS II.

Learning Objectives

Upon completion of this module, the student will be able to:

- Add a problem, family history, or historical procedure
- Update a problem, family history, or historical procedure
- Set and reset the viewing options
- Display all information in all categories at once

Demonstration

After seeing Eduardo Suarez for his chest pain, we documented he had a tonsillectomy in 2003. This information is not currently in the patient's record and needs to be added to the patient's Historical Procedure list. His diabetes is now under control so we need to inactivate this problem.

Add a Historical Procedure

10. Highlight Eduardo Suarez's name.

11. Click on the [Problems] folder in the Folder List. The Problems window will display:
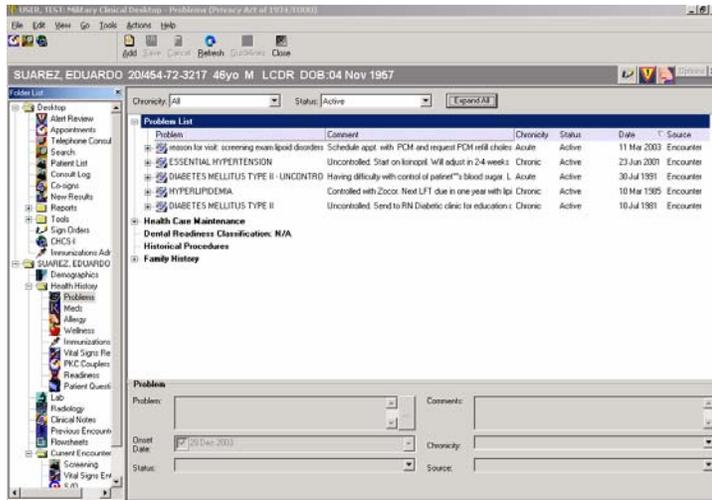
12. Click on the Historical Procedures header and click the Add icon on the Action Bar. The Select Procedure window will display:
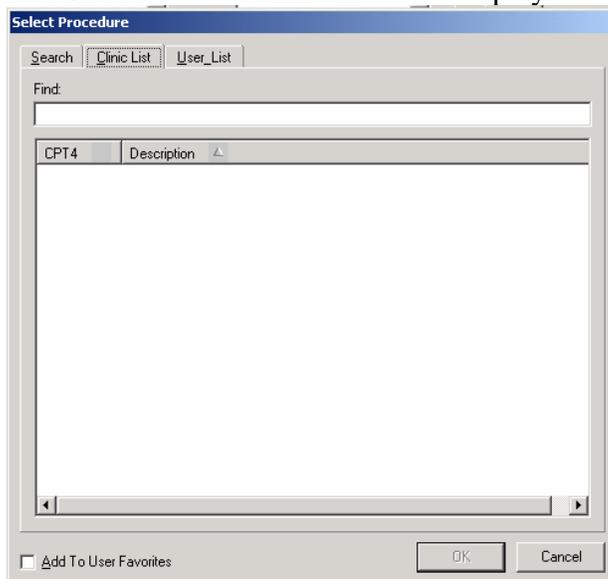
13. Click the Search tab and type TONSILLECTOMY in the MEDCIN Search field and click the Search button. Tonsillectomy terms will populate the search results area.
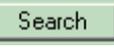
14. Click on TONSILLECTOMY 42825 and click the OK button. The New Procedure area of the Procedures window will display:
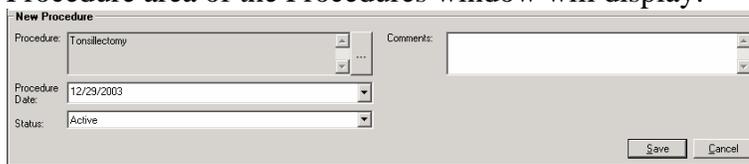
15. Click the Procedure Date drop-down, and click on December and select June.

16. Then select 06/29/2003.

17. Click the [Save] button and tonsillectomy will be added to the historical procedures list.
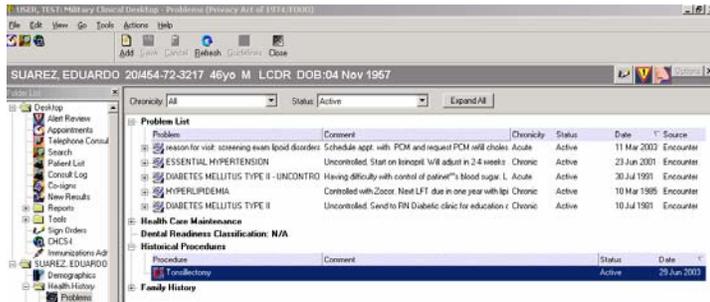
18.

Inactivate a Problem

19. Select the Diabetes Mellitus Type ii – Uncontrolled problem from Mr. Suarez's Problem list.
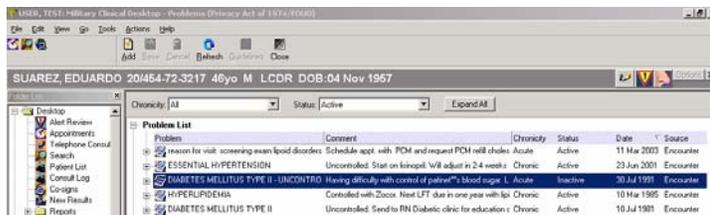
20. Click the status drop-down and select **Inactivate**.

21. Click Close to close the problem list

22. Click Close to close the SF 600

23. Clear patient

Lesson Exercises

Open the CHCS II Training System and complete the exercise.

Problems Scenario

CAPT Clayton Williams (W8867) has previously been diagnosed with cancer of the gallbladder. This needs to be added to his Problems List in the Problems module under Health History.

24. Select (highlight) CAPT Williams' name in the list of appointments. The patient's name must show in the ID line.

25. In the Folder List, click the Problems module located under Health History.

26. Problem List is highlighted by default. Click the Add button on the Action Bar to add Gallbladder Neoplasm Malignant to his list of problems.

27. The Select Diagnosis window appears and defaults to the clinic list role.

28. Click the Search tab and enter gallbladder neoplasm malignant in the MEDCIN Search field.

29. Click the Search button.

30. Highlight Gallbladder Neoplasm Malignant and click OK.

31. Complete the remaining fields in the New Problem section with the following information:

Field	Data
Problem	Gallbladder Neoplasm Malignant
Onset Date	06 Dec 2000
Chronicity	Chronic
Status	Active
Source	Patient

Hint: Click the year on the calendar to quickly select the year.

32. Click **Save**.

33. Close the **Problems** module.

Meds

- ▪ Lists patient's past and present medications
- ▪ Includes over-the-counter (OTC), outside and prescription medications

The Meds module lists the patient's past and present medications. The list includes all over-the-counter (OTC), outside, and CHCS II-ordered medications. Current medications can be viewed, re-ordered, or modified and new medications can be added and ordered. Only OTC medications can be added without a patient encounter opened. To renew, discontinue or order medications a patient's current encounter must be opened.

Lesson Goal

The goal of this lesson is to enable the end user to view patient meds and discontinue or add OTC and prescription medications.

Learning Objectives

Upon completion of this lesson, the student will be able to:

- • Add over-the-counter medications
- • Change the temporary display filter
- • Discontinue a medication
- • Review the details of a selected medication

Demonstration

During Eduardo Suarez's examination, it was determined he has been taking an adult low dose aspirin everyday for the past year. He usually buys them in a 250-tablet bottle. We need to record this information in Mr. Suarez's record:

34. Click Meds in the folder list

35. Click the Add icon on the Action Bar to display the Select Type of New Medication window:
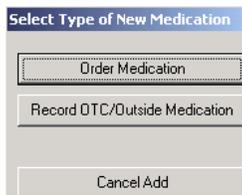
36. Click on the [Record OTC/Outside Medication] button to display the New OTC Outside Medication window:

37. Click on the [Medications...] button so you can search the Health Data Dictionary for the Tums. The Healthcare Data Dictionary Search window will display:

38. Type Tums in the search field and click [Search].

39. Click on Calcium Carbonate (TUMS) PO 500 MG TAB to select it and click

   [OK]. The New OTC Outside Medication window will re-display with the
   Tums included.

40. Complete the following fields as shown:

Field	Data or [Description of Data]
SIG	*Take one tablet daily*
Ordering End user	*Self*
Order Start Date	*One year ago*

41. Click [Ok] to add the OTC medication to the Eduardo's record. The TUMS will
   display.

42. Click the Close icon on the Action Bar to close the Meds module and return to the
   SF600.

43. Click the [AutoCite...] button to refresh the AutoCite properties (the Refresh icon on the
   Action Bar will not refresh the AutoCite properties). The aspirin will be shown in the
   Active Dispensed Medications area.

44. Click Close to return to Appointment Screen

45. Clear patient

Lesson Exercises

Open the CHCS II Training System and complete the exercises below.

Meds Scenario

Col Violet Alexander (a5743) seems to have caught the cough that many of the clinic's patients are exhibiting. She tells you that she has added taking one enteric-coated aspirin each day to her daily routine as suggested by earlier by Dr. David Doctor. Check her medication health history and update it with the new medication.

46. Make a new appointment for **Col Violet Alexander (a5743)**. Use Appointment Type, **ACUTE APPT (ACUT$) 30**.

47. Open the encounter and complete the screening.

48. In the *Folder List* under Health History, click the **Meds** icon. In the Meds module, the **Search Filter** field default is **Outpatient Current**.

49. Review the functions available using the Action Bar icons: **Add**, **Details**, **Discontinue**, **Modify** and **Renew**.

50. Click the drop-down arrow for the **Search Filter** field and review the options. Change the selection to **All**.

51. Select an existing medication and, on the Action Bar, click the **Details** icon.

52. Click Discontinue

Medications Box appears stating the medication had successfully been discontinued.

53. Click OK

54. Click Refresh.

How can you view the discontinued medication? (Select **All Discontinued** in the **Search Filter** field.) Note that the **Status** column entry is now **(Out) Discontinued**.

55. Change the **Search Filter** selection back to **Outpatient Current**.

56. Click the **Add** icon to record the addition of the TUMS.

57. Click the Record OTC/Outside Medication button.

58. Click the **Medications** button to begin searching for TUMS in the *Healthcare Data Dictionary Search* window.

59. Select CALCIUM CARBONATE (TUMS) PO, 500 MG, TABLET click the OK button.

60. Complete all required fields (including the **Sig: 1 tab QD**) and add a comment that it was a suggestion by her doctor for secondary prevention of GERD.

61. Click the **OK** button. Note the √ in the **OTC** column to indicate this is an over-the-counter medication.

62. Close the Meds module.

63. Close the encounter.

Allergy

- Maintains a list of patient allergies and reactions
- Information pulled from CHCS and synchronized at different times during the encounter documentation

The Allergy Module maintains a list of the patient's reactions to specified allergens. This information is pulled from CHCS and synchronized at the time the CHCS II encounter is opened. The information is stored as coded data from the Health Data Dictionary (HDD) and can be modified as needed.

Lesson Goal

The goal of this lesson is to enable the student to update patient allergy information in CHCS II.

Learning Objectives

Upon completion of these modules, you will be able to:

- Review and verify allergy information
- Add, edit, or delete patient allergy information
- Search for and select common allergens to add to the allergen drop-down list
- Delete allergens from the drop-down list

Demonstration

After talking to Eduardo Suarez, you discover he is allergic to peanuts, but this is not annotated in his medical record. He also states the last time he came into contact with iodine he had a reaction of hives (urticaria) instead of a rash. He is also allergic to Sulfa drugs. Add the allergy of peanuts and sulfa drugs to his allergen list and change the reaction with the iodine.

Using the open encounter for Eduardo Suarez:

64. Click on the [icon] Allergy folder in the Folder List. The New Allergy window will display:
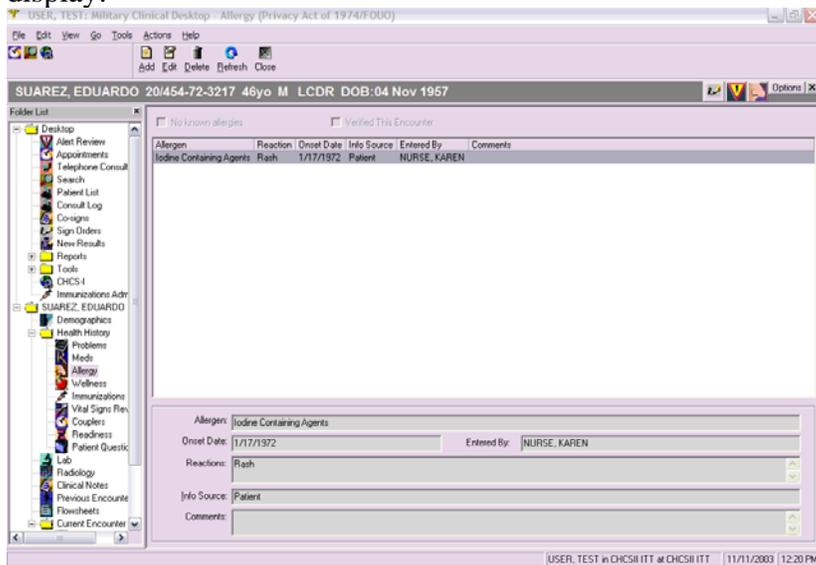
65. To add a new allergen, click the [icon] Add icon on the Action Bar. The New Allergy window will display:
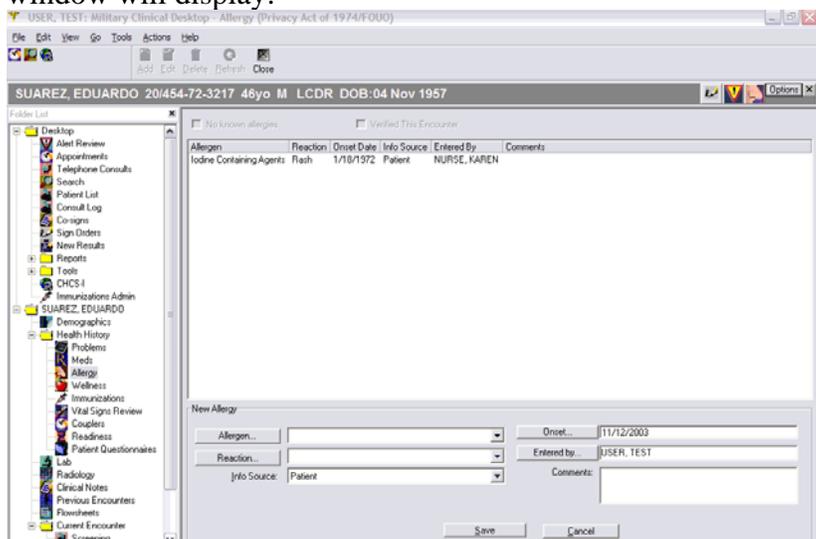
66. To search for a new allergen, click the [Allergen...] button. The Healthcare Data Dictionary window will display:
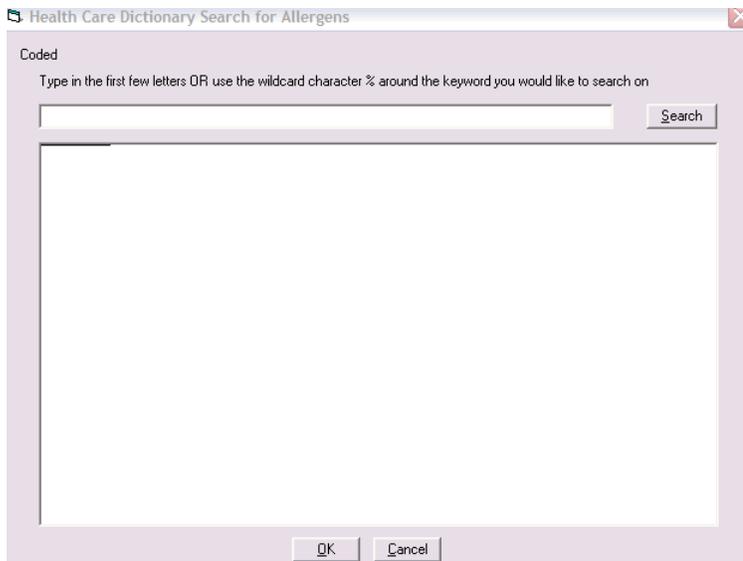
67. Type **PEANUT** in the search field and click the [Search] button. Health Care Dictionary words containing peanut will be displayed:
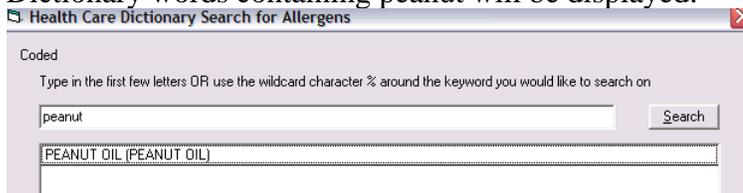
68. Click on **PEANUT OIL (PEANUT OIL)** to select it and click the [OK] button. The Allergy window will re-display with the Peanut Oil allergy noted:
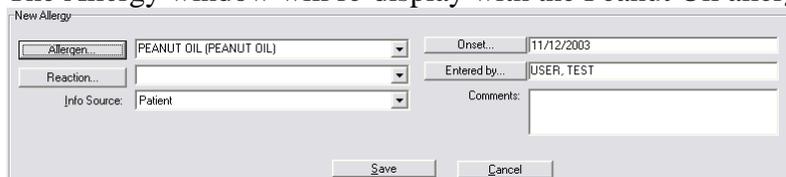
69. Click the Reaction drop-down [▼] to get a list of common reactions:

70. Click on Rash to select it. The New Allergy window will re-display with the Rash noted.
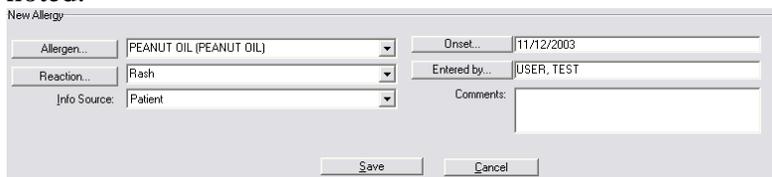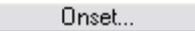
71. Click the [Onset...] button and select a date of one month ago. The new date will be displayed

72. Click the [Save] button to save the information. The Allergy list will be re-displayed with the new allergen:

Add an Allergy with multiple reactions

73. Click the **Add** icon on the Action Bar. The New Allergy window will display:
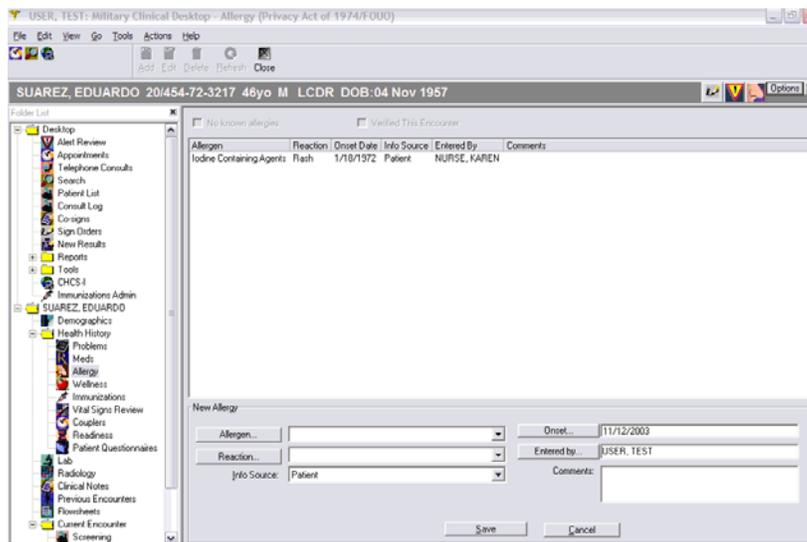
74. Click the *Allergen* drop-down ▼ to get a list of common allergies:

75. Click *Sulfa-Drugs* to select it. The New Allergy window will re-display with Sulfa-Drugs noted

76. To annotate multiple reactions, click the [Reaction...] button. The Healthcare Data Dictionary window will display:
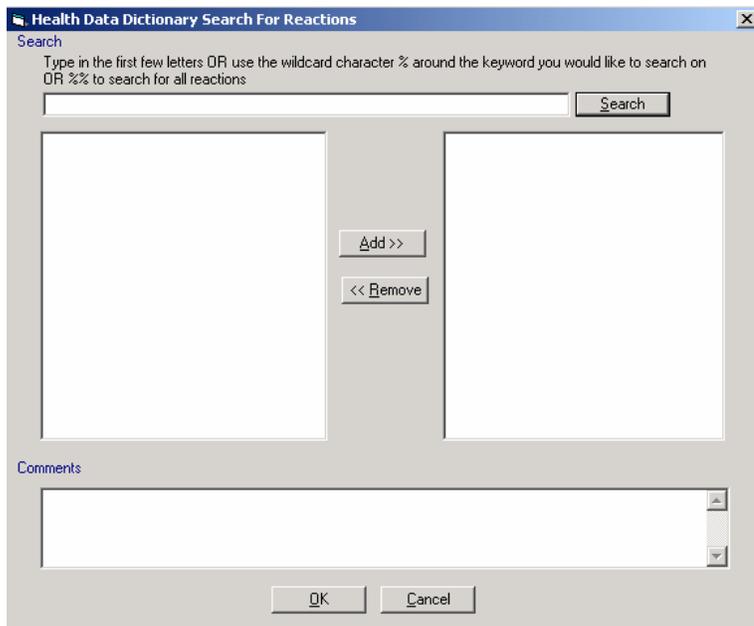
77. Type *NAUSEA* in the search field and click the [Search] button. Health Care Dictionary words containing nausea will be displayed.
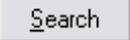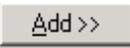
78. Click the [Add >>] button to move the terms to the right pane.

79. Type *VOMITING* in the search field and click the [Search] button. Health Care Dictionary words containing vomiting will be displayed:
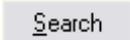
80. Click the [Add >>] button to move the terms to the right pane.
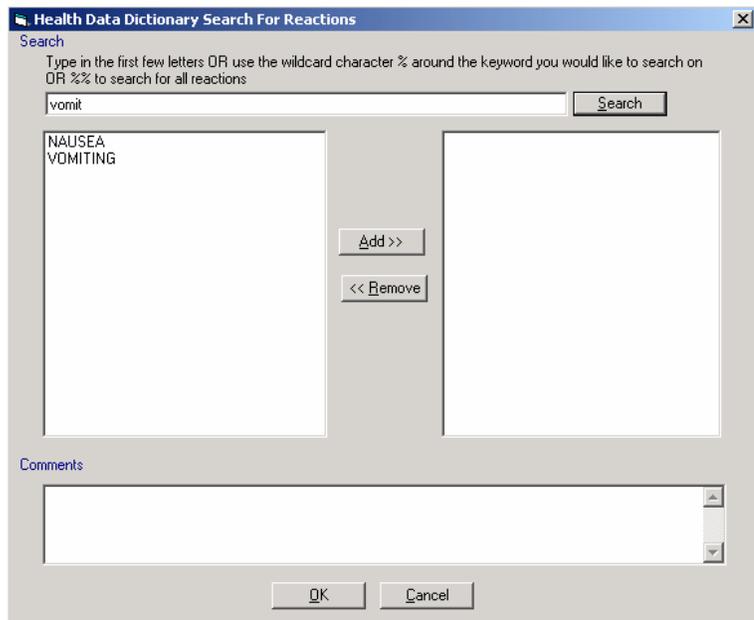
81. Click the [OK] button. The Allergy window will re-display with the nausea and vomiting reactions noted:
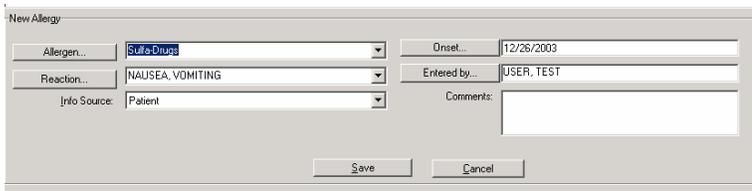
82. Click the [Onset...] button and select a date of one week ago. The new date will be displayed

83. Click the [Save] button to save the information. The Allergy list will be re-displayed with the new allergen:
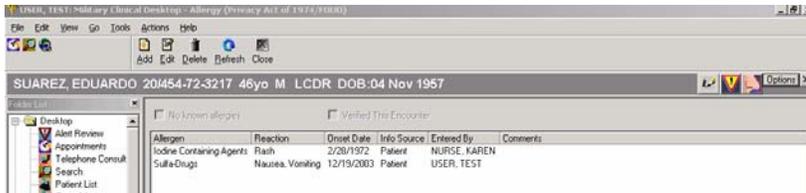
Editing an Allergy

To edit the Iodine Containing Agents reaction:

84. From the Allergen list, click *Iodine Containing Agents* to select it and click the Edit icon on the Action Bar.
Note: the Allergen field is not editable

85. Click the Reaction drop-down [▼] to get a list of common reactions:

```
Anaphylaxis
Rash
Urticaria
Nausea
Vomiting
Unknown
```

86. Click Urticaria to select. The New Allergy window will re-display with Urticaria noted.

87. Click the [Save] button to save the information. The Allergy list will be re-displayed with the new reaction noted.

88. Close Allergy Module

89. Close SF 600

Lesson Exercises

Open the CHCS II Training System and complete the exercises below.

Allergy Scenario

MG Ramona Marcos (m9876) is on the telephone requesting that her CHCS II allergies record be updated. She was stung by a wasp last month and had a reaction to the sting.

90. Search for MG Marcos' patient record and load her name to the patient ID line.

91. Open the **Allergy** module from the Folder List.

92. Click the **Add** button to display the *New Allergy* section.

93. Click the **Allergen** button and search for **wasp venom** in the *Health Care Dictionary Search for Allergens* window.

94. Double-click **WASP VENOM (WASP VENOM)** to add it as an allergen.

95. Click the **Reaction** button and search for **BRONCHOCONSTRICTION** as a reaction.

96. Highlight **BRONCHOCONSTRICTION** in the left column of the *Health Data Dictionary Search for Reactions* window and click the **Add>>** button to move it to the right column.

97. Click the **OK** button to close the window.

98. Enter the following information:

Field	Data
Info Source	Patient
Onset	[four weeks ago]
Entered by	[accept default]

99. Click the **Save** button.

The clinic has had several patients recently report an allergic reaction to wasp venom, so it needs to be added to the drop-down list of common allergens.

100.   Click **Options** to open the *Properties* window.

101.   Click **Add** to open the *Add Common List Items* window. Search for and select to highlight *wasp* and click the **Add to Common List** button.

102.   Click **Close**.

103.   Click **Save** and **OK** the *Properties* window.

104.   Click the **Add** button in the Action Bar, and review the **Allergen** drop-down list. Notice that **WASP VENOM (WASP VENOM)** has been added.

Note: In the live CHCS II system, allergens can also be deleted using **Options**.

105.   Close the **Allergy** module and return to the **Appointments** module.

Wellness

- ▪ Generates preventive wellness health reminders
- ▪ Available in Wellness, Screening and Problems Modules

The Wellness module generates preventive wellness health reminders for patients. These reminders are tied to the United States Preventive Services Task Force Guidelines for the general population. Additionally, text-based reminders can be created to notify an end user of special information on a particular patient. Active wellness reminders are available within the patient's Problems Folder under Health Maintenance.

Lesson Goal

The goal of this lesson is to enable the student to work within the Wellness module in CHCS II.

Learning Objectives

Upon completion of this module the student will be able to:

- • Use due reminders
- • Use documentation histories
- • Use reminder histories
- • Use wellness schedules
- • Set the default time periods for display due reminders, reminder history and documentation history
- • Create a status display filter

Demonstration

After talking to Eduardo Suarez, he informs you he attended an Anti-Tobacco class a month ago and that he is refusing to complete his Blood Pressure screen because he does not have time to come into the clinic. Due to his diagnosis of Hyperlipidemia, we need to add a Total Cholesterol Screen to his wellness schedule and the Rh Screen can be inactivated.

Documenting a Due Reminder in the Due Reminders Tab

To start the Wellness module, click the 🍎 Wellness folder in the Folder List. The Wellness window will display.

106.   Click the *Due Reminders* tab to select it. The Due Reminders window will display.

107. Scroll to the bottom of the list and click ⊞ to expand *Counseling* and click on *Anti-Tobacco Counseling* to select it.

108. Click Document on the Action Bar. The Document Anti-Tobacco Counseling window will display.

109. Select the *Completed* radio button for the Status (if not already selected).

110. Click the Coded: drop-down ▾ in the Comments area and click *Patient states Preventive Service Complete* to select it.
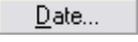
111. Click the Date... button and enter a date of one month ago

112. Click the Information Source drop-down ▾ and click *Patient* (may have to scroll down) to select and click Save. The Wellness window will re-display

113. Click the *Documentation History* tab to see the completed Anti-Tobacco Counseling.

Adding a Reminder History in the Documentation History Tab

To add a reminder history in the Documentation History tab:

114. Click the *Documentation History* tab to select it. The Documentation History window will display.

115. Click Add History on the Action Bar. The Select History Type window opens.

116. Click **Blood Pressure Screen** to select it and click OK. The Blood Pressure Screen History Window will display.

117. Note: The *Date*, *Information Source* and *Status* are required fields.

    a. Complete the following fields.

    b. Status: Click the *Refused* radio button to select it

    c. Date: enter today's date

    d. Information Source: Click *Patient* from the drop-down list

    e. Freetext Comments: Type - Patient states blood pressure is under control and he does not have time to come into the clinic for the next 5 days

118. Click Save to add this reminder history information to the documentation history list.

119. Click OK to accept Eduardo's refusal. The Blood Pressure screen will display in the Documentation History window.

Adding a Wellness Schedule Reminder in the Wellness Schedule Tab

To add a wellness schedule reminder in the Wellness Schedule tab:

1. Click the *Wellness Schedule* tab. The Wellness Schedule Window will display.

2. Click the ![Add] icon on the Action Bar. The Add Wellness Schedule window will display.

3. Click Healthy Diet Counseling to select it from the Select A Wellness Item drop-down list.

4. Click *2* and click *years* using the Specify A Patient Specific Schedule drop-down lists and click ![Save].

5. The Health Diet Counseling will be added to Eduardo's Wellness Schedule.

Activating/Inactivating a Wellness Reminder in the Wellness Schedule Tab

The Activate/Inactivate button toggles between activate and inactivate depending on the state of the selected reminder. If the reminder is already active, the **Inactivate** button is seen. If the reminder is inactive, the **Activate** button is seen.

To inactivate a reminder in the Wellness Schedule tab:

6. Click the *Wellness Schedule* tab (if not already selected). The Wellness Schedule window will display.

7. Click the **Regular Activity Counseling** reminder to select it and click ![Inactivate] on the Action Bar. The Confirm Inactivation window will display.
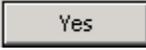
8. Click ![Yes] on the Confirm Inactivation window. The Inactivate Rh Type Screen will display.

9. Click *Clinician does not agree with the Reminder* from the Coded: drop-down and click ![OK]. The Wellness Schedule information will be updated.

10. Click the ![Close] icon on the Action Bar to close the module.

Lesson Exercises

Open the CHCS II Training System and complete the exercise below.

Wellness Scenario 1

You want to record that the Thyroid Screen and HIV Screen for **MG Ramona Marcos (m9876)** are complete. You also want to set the filter and preferences for the Wellness module. These settings determine what information is displayed for a patient's health history.

1. Search for **MG Ramona Marcos (m9876)** and load her record.

2. In the *Folder List*, click the Wellness icon.

3. Click Documentation History Tab

4. Click Add History on the Action Bar

5. In the Select History box use the drop down box to select Thyroid Screen

6. The Thyroid Screen window will open

7. In the *Status* section, accept the default status **Completed**.

8. In the *Comments* section, click the drop-down arrow for the **Coded** field and select **Screening Completed**

9. Accept the defaults for the **Clinician** and **Date** fields and click the **Save** button.

10. Confirm History Complete box will appear – click yes

11. Repeat Steps 4 - 9 for the **HIV Screen**.

12. Click the Wellness Schedule Tab

13. Click Add on the Action Bar

14. Select Thyroid Screen in the drop down box

15. In the patient specific schedule add for 1 year

16. Click Save

17. Click Add on the Action Bar

18. Select HIV Screen in the drop down box

19. In the patient specific schedule add for 6 months

20. Click Save

21. On the Action Bar, click the **Refresh** icon.

22. Click the **Options** button to open the *Properties* window.

23. On the *Filter* tab of the *Properties* window, select the **Specific Statuses** radio button.

24. Highlight **Completed** and click the **Add>>** button to move **Completed** to the **Selected Statuses** column.

25. Highlight **Given** and click the **Add>>** button.

26. Click the **Save as…** button.

27. Enter **Completed and Given** in the **Filter Name** field and click the **Save** button.

28. Click the *Preferences* tab in the *Properties* window.

29. In both the *Reminder Time Option* and *Documentation Time Option* sections, accept the defaults **All time periods**.

Note: You can use the **Default Time…** buttons to specify types of time frames. Default time periods can be set in the same way for the Wellness module tabs *Due Reminders, Documentation History* and *Reminder History*.

30. Click the **OK** button to close the *Properties* window.

31. In the **Filter** field, click the drop-down and select the filter you just created, titled **Completed and Given**. Any services with a status of either **Completed** or **Given** will be in the resulting list.

32. Click the *Wellness Schedule* tab to review the schedule for generating reminders.

33. Do <u>not</u> close the Wellness module.

Wellness Scenario 2

It is now necessary to modify the Due Reminder and Document History. The record for **MG Ramona Marcos (m9876)** should still be active. Start in the Wellness module on the *Due Reminders* tab. Expand Screening and follow the steps below.

1. Double-click Total Cholesterol Screen.

2. Change the status to **Refused**

3. In free text state refused this month due to illness.

4. Click the **Save** button.

5. Read the statement on the Wellness window regarding the refusal of the preventive service and click the **OK** button.

6. Click the *Documentation History* tab. The history has been updated

7. Click the Wellness Schedule Tab

Note: Reminder still set to generate next month. To inactivate a reminder, select the reminder and, on the Action Bar, click the **Inactivate** icon.

8. Click the **Options** button to open the *Properties* window.

9. From the drop-down list in the **Filter Name** field, select **Completed and Given**.

10. In the **Selected Statuses** field, highlight **Given** and click the **<<Remove** button.

11. Click the **Save as…** button.

12. In the **Name** field, enter **Completed** and click the **Save** button.

13. Click the **Save** button.

14. Click the **OK** button to close the *Properties* window.

15. Review what displays using the **Wellness Documentation** filter vs. the **Completed** filter on the *Documentation History* tab.

16. Close the Wellness module.

17. Clear patient

PKC Couplers

- Allows the capture of patient information from pre-defined questionnaires
- Run the Health Evaluation, Assessment and Review (HEAR) questionnaire

The PKC (Problem Knowledge) Couplers module associated with questionnaires automate the collection of demographic and health data for patients. The questionnaires provide the end user with a "snapshot" of the patient's health, habits and other factors that can affect their overall health. The data is then used to assess preventive service needs, identify services routinely used and determine the appropriate level of medical expertise/care required for each patient. Couplers are patient specific. Accordingly, a patient's record must be loaded to the Military Clinical Desktop before the PKC Couplers module is available. The functions available upon accessing the PKC Coupler module depend on security access roles.

Lesson Goal

The goal of this lesson is to enable the student to acquire basic skills in using the Couplers modules.

Learning Objectives

Upon completion of this lesson, the student will understand how the Couplers module is used to:

- View a coupler
- Run a coupler
- Run a finding summary report
- Resolving a finding error summary report

Demonstration

An end user would like to administer the HEAR Questionnaire for Eduardo Suarez. Once Eduardo has completed the HEAR Questionnaire, the end user would like to review it.

1. Highlight Eduardo Suarez from Appointment List

2. Click the ⟨icon⟩ **Couplers** folder in the Folder List. The **PKC Couplers** window will display with the Military tab selected:
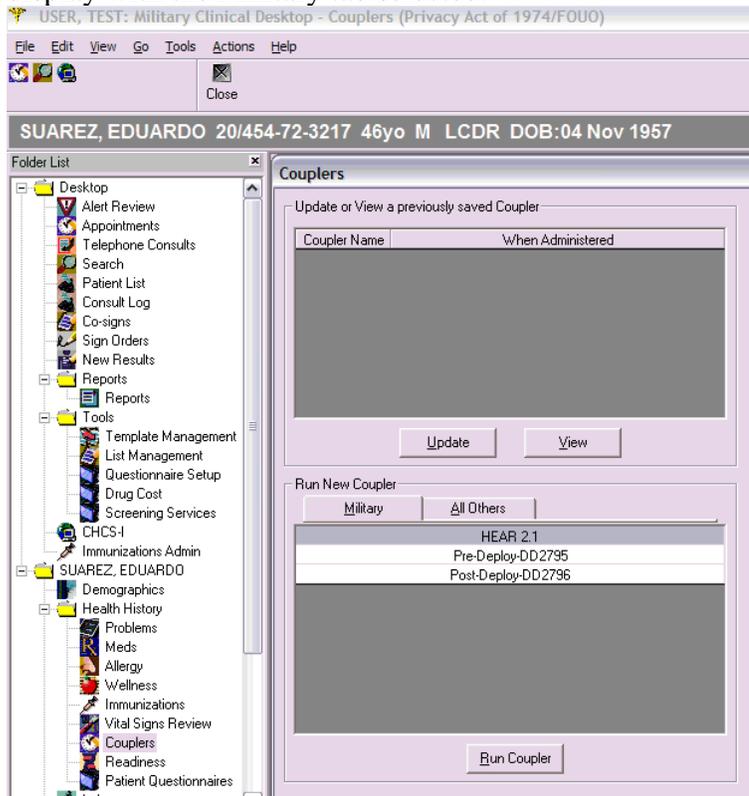
3. In the Run New Coupler section, click on the HEAR questionnaire to select it (if not already selected) and click ⟨Run Coupler⟩. The Coupler session will display:
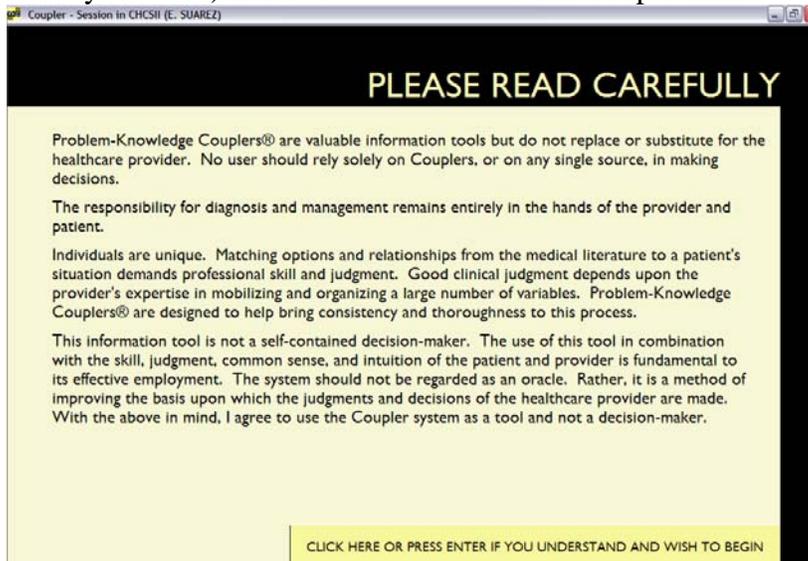
4. Press the [Enter] key or click in the space provided at the bottom of the window to begin. The HEAR Overview window will display**: NEW SCREEN SHOT**
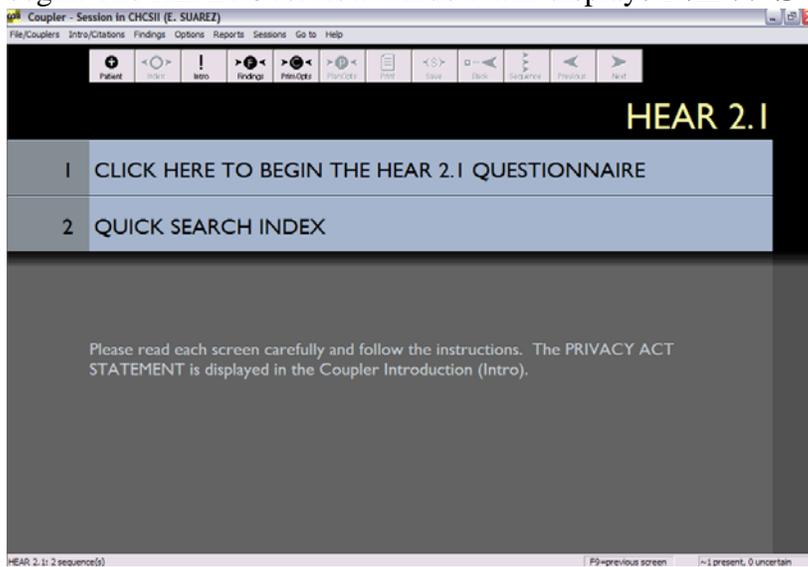
5. Click the CLICK HERE area to begin the questionnaire. The HEAR Welcome window will display: **NEW SCREEN SHOT**
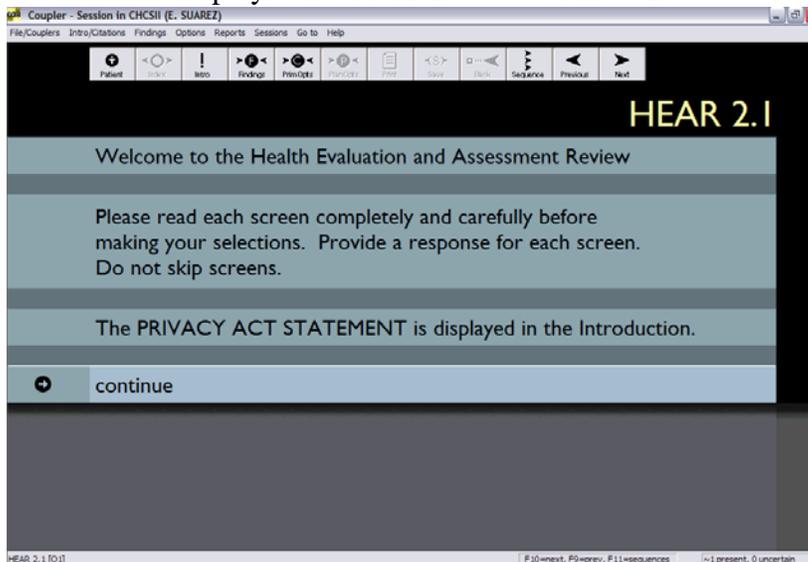
6. You can continue to the next page of the questionnaire by doing one of the following:

   Clicking on the 'continue' bar

   a. Pressing the [F10] key

   b. Clicking the [Next] icon on PKC Couplers Military Action Bar.

7. Answer approximately 10 of the questions (the HEAR questionnaire is rather lengthy) and then click on the [Save] icon on the PKC Couplers Action Bar. The Coupler will be saved (the Coupler Save icon will become dim).

8. Click the File/Couplers button on the Coupler Menu bar. The File/Couplers drop-down will display:

Coupler Index   Ctrl+O
Coupler Directories...
Recent Couplers
Clear List
Settings...
Exit & Return to CHCSII
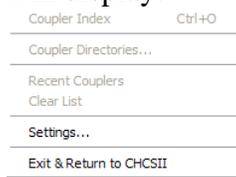
9. Click Exit & Return to CHCSII .

10. Click on the HEAR coupler just administered, and click View . The completed questionnaire is available for review.

11. Once the review is complete, click the File/Couplers button on the Coupler Menu bar. The File/Couplers drop-down will display:

Coupler Index   Ctrl+O
Coupler Directories...
Recent Couplers
Clear List
Settings...
Exit & Return to CHCSII
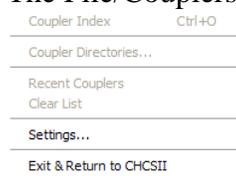
12. Click the Exit & Return to CHCSII button on the drop-down. The PKC Couplers module will re-display

13. Click the Close icon on the Action Bar to close the module.

14. Clear Patient

Lesson Exercises

Open the CHCS II Training System and complete the exercise below.

2LT Herman Wunderlich (w8118) has a scheduled appointment for his annual Preventive Health Assessment (PHA). In addition to LT Wunderlich's annual PHA, you will walk him through the Wellness coupler.

1. Load LT Wunderlich's patient record.

2. Open PKC Couplers from the Folder List.

3. In the *Run New Coupler* section, click the *All Others* **tab**.

4. Select **Wellness** and click **Run Coupler**.

5. Click the **Click Here** link or press the **Enter** key.

6. On the Menu Bar, click **Sessions**.

7. Select **Define Session Data**. Verify patient information and add the name of the PCM (Dr. Doctor).

8. Click on **1 Eating Habits**, select one or more and then click the **Next** button.

9. Special Diets – select one or more and then click the **Next** button.

When you finish this first section, the Coupler will move you right to the next section. To return to the menu, click **Sequence** and you will notice a check is now beside #1.

10. Click the **Findings** icon at the top of the screen and review results.

11. Click the **Prim Opts** icon and review results.

12. Click the **Save** icon.

13. Click **File/Couplers** on the menu bar at top left and select **File/Exit & Return to CHCSII**.

The coupler name and the date administered appear in the Update or View a previously saved Coupler section.

Vital Signs Review

- Allows past vital signs to be viewed and/or graphed
- The Vital Signs Review module allows past vital signs to be viewed and/or graphed

Lesson Goal

The goal of this lesson is to enable the student to record and graph vital sign information in CHCS II.

Learning Objectives

Upon completion of this module, the student will be able to:

- Set and review the properties for the Vital Signs module
- Select appropriate screen options for the category of patient
- Enter vital signs and related information
- Graph vital signs

Demonstration

Vital Signs Review Module

After talking to Eduardo Suarez, you would like to view his past blood pressure and heart rate values. You need to graph them to get a better feel for the results.

Reviewing Vital Signs

To review Eduardo Suarez's past vital signs:

1. Click [icon] Vital Signs Review in the Folder List. The Vital Signs Review window will display.

2. Highlight all of his past blood pressure **BP** and heart rate **HR** values (click in the upper left **BP** cell and drag the mouse to the lower right **HR** cell).

3. Click the ![Graph Vitals] icon on the Action Bar. The Graph Vitals window will display a 2-D Line chart.

4. Click the *3-D Bar* radio button to display the results as a 3-D Bar Chart and click [OK] to close the graph window.

5. Click the ![Close] Icon on the Action Bar to complete the process

6. Clear patient

Lesson Exercises

Open the CHCS II Training System and complete the exercises.

Vital Signs Scenario 1

Klaus Wunderlich (W8118) is the next patient. He is three years old and has an earache.

1. Make an appointment for Klaus Wunderlich.

2. Double-click the appointment to open the encounter.

   Identify three ways to open the screen to record vital signs:

   - Folder List - Current Encounter folder – Vital Sign Entry

   - Menu path Go > Vital Signs Entry

   - Vitals on the patient encounter note (SF 600)

3. Click Vitals on SF 600, **Entry** tab is defaulted.

4. Use the **Options** button to review the *Properties* screen. Click **OK**.

5. Klaus is three (3) years old; select **Pediatric** in the upper right hand corner drop-down list. Note that a field to record head circumference is added and the *Pain Severity* section changes.

6. Enter the following information in the *Standard Vital Signs* section:

Field	Data
BP	100/60
HR	100
RR	24
Temperature	101.6

7. Click the Ellipsis button (three dots) to the right of the temperature fields.

8. Select the Ear radio button and click OK.

9. In the Height/Weight section enter Ht of 40 in, Wt of 40 lbs.
   Head circumference is not needed for this visit.

10. Scroll the Vital Signs Entry window to the right and click the Ellipsis button in the Pain Severity section. Klaus says his ear "hurts a whole lot," which corresponds with the Wong-

Baker FACES Pain Rating Scale.

11. Select the 4 radio button and click OK.

12. Enter right ear in the Where is the Pain Located? field in the Pain Severity section.

13. Click OK to save the vital signs.

Review the information written to the encounter note for Klaus.

14. Close the encounter.

15. Clear patient

Vital Signs Scenario 2

CAPT Clayton Williams (W8867) is ready for his physical exam. Open CAPT Williams' encounter and prepare to record the Vitals. Click **Vitals** on the SF 600.

1. Verify that **Adult** is selected in the drop-down list in the top right corner.

2. Select the **Oxygen Sat**. and **Peak Flow** check boxes.

3. Enter the following values for *Standard Vital Signs* and *Height/Weight* sections. Also, use the **Ellipsis** buttons to specify how each measurement is taken:

Field	Data	Ellipsis
BP	120/70	R Arm, Adult Cuff
HR	80	Radial, Regular
RR	16	NA
Temperature	98.6	Ear
Height	71 in	
Weight	180 lbs	NA

4. CAPT Williams states he smokes and has a "couple" of drinks daily. Select the **Yes** radio buttons for both in the *Habits* section on the Entry tab.

5. Click the **Ellipsis** for **Tobacco**. CAPT Williams smokes half a pack of cigarettes daily and does not want to quit. Enter this information and click **OK**.

6. Click the **Ellipsis** for **Alcohol**. CAPT Williams answers "no" to each question in the *Frequency/Duration* window and says his alcohol usage is declining as he ages. Complete this information and click **OK**.

7. Enter *150* in the **Oxygen Saturation** field and click the **Peak Flow** field; note the message questioning the out-of-range entry for oxygen saturation.

8. Click **No** in response to the message asking whether the oxygen saturation value is correct. Enter *99* as the new value.

9. Click the **Peak Flow** field. Enter *420* as the peak flow value.

10. Scroll the *Vital Signs Entry* window to the right and click the **Ellipsis** button in the *Pain Severity* section to review the *Adult Pain Scale* window. CAPT Williams says his knees ache

mildly most of the time; select the **2** radio button and click **OK**.

11. Enter *knees* in the **Where is the Pain Located?** field in the *Pain Severity* section.

12. Enter a comment that CAPT Williams regularly uses the blood pressure devices at drug stores and click the **Save Vitals** icon on Action Bar to save the *Vital Signs Entry* screen data.

13. **Do not** close the encounter.

Vital Signs Review Scenario

Continuation of Scenario 2 using CAPT Williams' encounter and the **Vitals** module.

1. You have been working on the Entry role of the *Vital Signs Entry* screen. Click the **Review** tab.

2. Click the **Search Type** button to open the *Time Search* screen.

3. Select the **Sliding Time Range** radio button and select **2 months** as the time range.

4. Click **OK**.

5. Click the **Refresh** button to the right of the time period display. (This may not work correctly in the CHCS II Training System.)

If the vital signs screen was saved more than once in Scenario 2, there may be multiple lines of data entry. There should only be one line of data entry per patient encounter.

Review the buttons available: **Edit Vitals**, **Delete Vitals**, **Graph Vitals**, and (toggle between) **F/C Temp**. If appropriate, select a line and delete the entry.

6. Highlight a single line and click the **Graph Vitals** icon on the Action Bar to open the *Graph Vitals* window.

7. Select each of the **Graph Options**, **Chart Types**, and **Vitals Keys** in turn to review their functions.

Note: The graphs can be printed from the live CHCS II system.

8. Click **OK** to exit and return to the Review role with CAPT Williams' vitals.

9. Press the **Shift** key on your keyboard and select the entries in the **BP** and **HR** columns. Click the **Graph Vitals** button.

Review the display options available.

10. Return to the *Vital Signs Entry* screen.

11. Click the **Close** button.

12. Click **Close** to close the encounter.

13. Clear Patient

Readiness Module

- Displays information pertaining to deployment readiness
- Information is received from other sources

The Readiness module displays information to determine whether the patient is ready for deployment. An encounter must be open to access the Readiness module. Most of the data displayed on the Readiness window is received from other sources. Data edited in the Readiness window does not update data in its original source.

Lesson Goal

The goal of this lesson is to learn how to work within the Readiness module in CHCS II.

Learning Objectives

Upon completion of this lesson the student will be able to:

- View the readiness module
- Edit the readiness information

Demonstration

An end user's appointments for this afternoon are all yearly physicals. The end user would like to see the readiness of his patients prior to their appointments. He notes his patient had a recent HIV test and sickle cell drawn. He would like to update Mr. Suarez's Readiness module.

1. Pull Eduardo Suarez's record.

2. Click the ![icon] Readiness folder in the Folders List. The Readiness window will display:

3. Click on the Edit icon on the Action Bar to activate the window.

4. Click the HIV Done drop-down, and select *25 November 2003* from the associated Date drop-down fields.

5. Click the Sickle Cell drop-down, and select *25 November 2003* from the associated Date drop-down fields.

6. Click the Sickle Cell Result drop-down, and select *Positive* from the drop-down.

7. Click Save on the Action Bar to save the information entered.

8. Click Close on the Action Bar to close the module.

Lesson Exercises

Open the CHCS II Training System and complete the exercise below.

Readiness Scenario

Your task is to update the **Readiness** module for LCDR Eduardo Suarez (S3217). After a record review, you discover the patient had a G6PD done 18 SEP 03 with a normal result.

1. Verify LCDR Suarez's name appears in the patient ID line.

2. Click the **Readiness** module in the Folders List.

3. Click the **Edit** icon on the Action Bar.

4. Update the G6PD information in the *Lab Tests* section by clicking the dropdown in the **Date** field and selecting the appropriate date.

5. Select **Normal** in the **Result** field.

6. Click **Save** on the Action Bar.

7. Close the **Readiness** module.

Note: Readiness data can be entered in CHCS II, but also must be entered in PIMR.

Laboratory

- Displays the results of laboratory tests

- Results are pulled from CHCS

- Can copy results into patient encounter

The Lab module is designed to display the results of laboratory tests. Results are viewed, not ordered, from this module. Lab results are pulled from CHCS and an alert is triggered when new results are received.

Lesson Goal

The goal of this lesson is to enable the student to set Lab module properties and copy lab results in CHCS II.

Learning Objectives

Upon completion of this module, the student will be able to:

- Select lab results search criteria
- Select a default time period for searching
- Select preferences for display of abnormal results
- Select lab results display criteria
- Select various display criteria and preferences
- View laboratory test results
- Copy lab results into a patient encounter

Demonstration

We want to view Eduardo Suarez's Lipid Panel Complete lab results and copy the result to his encounter.

1. To start the Lab module, click the Lab folder in the Folder List. The Lab module window will display.

2. Click on *Lipid Panel Complete*. The Lab result will display in the Display Criteria section of the window.

3. Click the *Ref Range/Units* check box to display the reference ranges for the test.

4. Drag the mouse from Lipid Panel Complete in the upper left of the lab result area to the lower right of the area (this selects the entire lab result).

5. [Right Click] on the highlighted area. A window will appear containing options to

   Copy and Copy to Note.
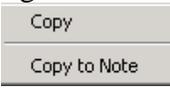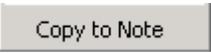
6. Since we want to copy these lab results to the note, click the [Copy to Note] button.

7. The lab result will re-display, with the lab result no longer highlighted (the result has been copied to the note).

8. Click the Close icon on the Action Bar

Lesson Exercises

Open the CHCS II Training System and complete the exercise.

Laboratory Results Scenario

Provider Test User is out of the office today. He has called in, however, and asked if the results of lab tests ordered for LCDR Eduardo Suarez (S3217) are available.

1. Create a new appointment for LCDR Suarez.

   Note: Loading the patient name to the patient ID line is sufficient for viewing lab results. An appointment is created in this exercise to illustrate additional features of CHCS II.

2. Open the encounter.

3. Click **Lab** in the Folder List.

   Review what appears based upon the default settings.

4. Provider User is specifically interested in the results of a urinalysis test. Change the properties and the filter to locate this test. (**Hint:** Change **Time** to **All time periods,** if not selected)

5. Highlight the urinalysis lab result. The result details display in the lower section of the screen. Use the **Display Criteria** check boxes and radio buttons to select the optimal view of the test results.

6. Highlight the result details and right-click. Note the two options:
   Copy: puts the results onto the clipboard and they can be pasted into another document
   Copy to Note: enters the results onto the patient encounter in the S/O portion

The live CHCS II database has a menu option under *File > Print* to print the selected (highlighted) laboratory results. This is not available in the CHCS II Training System.

7. Select Copy to Note.

8. Close the **Lab** module and the highlighted urinalysis results appear in the S/O portion of the encounter note.

9. Close the encounter.

Radiology

- Displays the results of radiology procedures

- Results are pulled from CHCS I

- Can copy results into a patient encounter

The Radiology module is designed to display radiology test result data for desired patients. Results are viewed, not ordered, from this module. Radiology results are pulled from CHCS. An alert is triggered when new results are received.

Lesson Goal

The goal of this lesson is to enable the student to set Radiology module properties and to copy Radiology results into the encounter in CHCS II.

Learning Objectives

Upon completion of this module, the student will be able to:

- View radiology test results
- Set the search criteria for the radiology results
- Set the display criteria for the radiology results
- Set the default time period for searching results
- Copy radiology results into an encounter

Demonstration

We want to view Eduardo Suarez's Chest PA And Lateral Series Report result and copy the result to his encounter

1. To start the Radiology module, click the ![icon] Radiology folder in the Folder List. The Radiology module window will display.

2. To view the *Chest PA And Lateral Series Report*, click to select it. The result will display in the results section of the window.

3. Place the cursor in front of the word Report and drag the mouse to highlight the Report Text and Impression of the result.

4. [Right Click] on the highlighted area. A window will appear containing options to
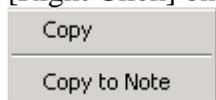
   Copy

   Copy to Note
   .

5. Since we want to copy this radiology result to the note, click the Copy to Note button.
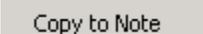
6. Click the ⊠ Close icon on the Action Bar.

7. View the lab result in S/O section of the SF600, under the S/O note.

Lesson Exercises

Open the CHCS II Training System and complete the exercises below.

Radiology Scenario

The Provider is still on the phone and would now like you to check on the results of radiology tests ordered for **LCDR Suarez (s3217)**.

1. Verify that name for LCDR Suarez appears in the patient ID line.

2. In the *Folder List*, click the **Radiology** icon. The results of three tests appear.

3. Click each test in turn; note that the **Result Code** appears in red when the results are not normal, but the color change is not visible when that report is selected.

4. In the *Display Criteria* section, select the **Select All Results** check box.

5. Scroll through the results that appear in the lower section of the window.

6. Clear the **Select All Results** check box. Press and hold the **Ctrl** key (on your keyboard) and select both the **Sinus Series Report** and the **Chest PA and Lateral Series Report**.

7. Review what appears in the lower section. (Scroll down to view the results of both of the selected tests.)

8. Use your mouse to highlight all, or a portion of, the test results and right-click. This allows you to copy to an open encounter note, or copy to the clipboard and paste in another document.

   Do not copy the note.

9. Close the Radiology module

10. Close the encounter.

11. Clear patient

Clinical Notes

- Enter and display patient-specific notes not associated with current encounter

The Clinical Notes module is used to enter and displays patient-specific notes that are not associated with an encounter, or when an encounter is not available for documentation. Clinical notes can be copied into the AddNote portion of the SF600.

Lesson Goal

The goal of this lesson is to enable the student to view and edit clinical notes in CHCS II.

Learning Objectives

Upon completion of this lesson, the student will be able to:

- View a clinical note
- Add a clinical note
- Edit a clinical note
- Save a clinical note

Demonstration

An end user specializing in Ear Nose and Throat (ENT) performed minor surgery yesterday on Klaus Wunderlich, who had an object lodged in his ear. The end user saw the patient in the hall today and examined his ear. He now wants to add the following note with graphic to the patient's record. Open Klaus Wunderlich's appointment for earache.

The end user would also like to insert a graphic of the ear. Assist the end user in performing these tasks. The graphic of the ear is located on your CD of materials.

Creating a Clinical Note

1. Click on the 🔲 Clinical Notes folder in the Folder List. The Clinical Notes module will display:
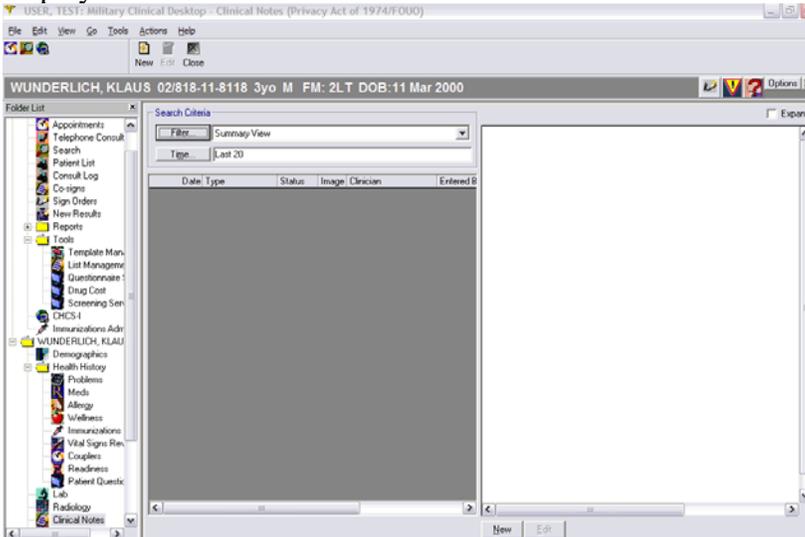
2. Click the 🔲 New icon on the Action Bar to create the new note. The New Clinical Note window will display:
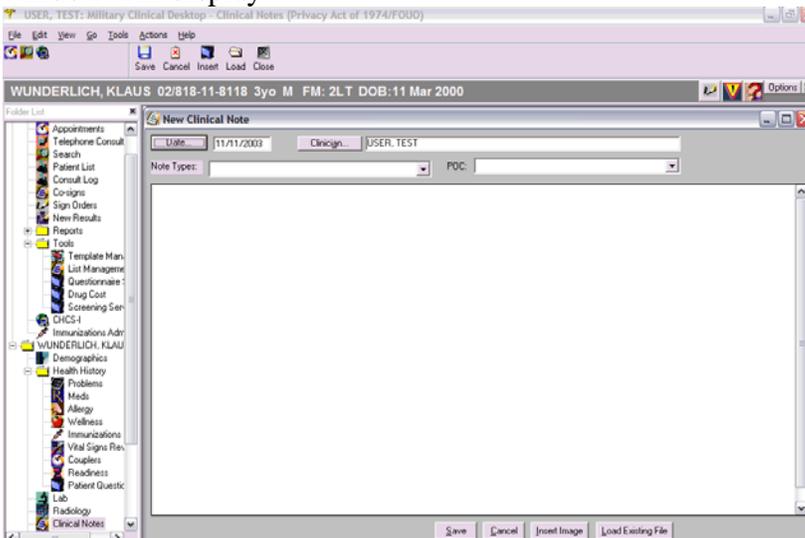
3. Select *Physician Progress Notes:* from the Note Types drop-down list.

4. Select ***CHCS II ITT*** from the POC: drop-down list.

5. Type 3-YEAR-OLD MALE WITH PENCIL ERASER LODGED IN AUDITORY CANAL. REMOVED OBJECT YESTERDAY. SAW PATIENT TODAY. EAR HEALING WELL. WILL CONTINUE WITH FOLLOW-UP PLAN. in the documentation area. Press [Enter].
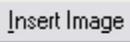
6. Click the Insert Image button on the bottom of the window. Locate and load the ear image into the Clinical Note.
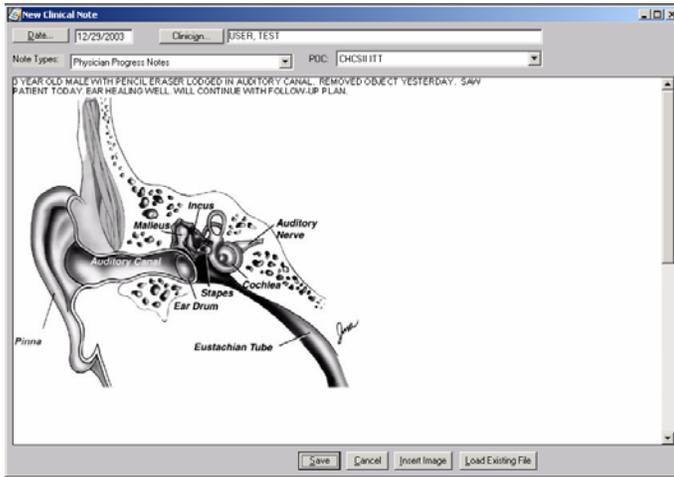
7. Click either the ![Save] icon on the Action Bar or the ![Save] button to save the information. The Clinical Note Window will re-display with the updated information.

Copying a Clinical Note

8. With Klaus Wunderlich's encounter opened, highlight the Clinical Note you just created.

9. Perform the copy process by using [Ctrl] C.

10. Click the ![Close] icon on the Action Bar to close the module.
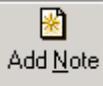
11. Click the ![Add Note] icon on the Action Bar.

12. Select ![New Note] on the Select Note field.

| Copy |
| Cut |
| Paste |

13. With cursor in the documentation area, right click and select paste ![Copy Cut Paste].
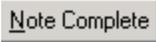
14. Click ![Note Complete] button.

15. Review the SF600.

16. Click the ![Close] icon on the Action Bar to close the SF600.

17. Clear patient

Lesson Exercises

Open the CHCS II Training System and complete the exercises below.

Clinical Notes Scenario 1

The Provider called in and requested that you add a note to the file for a patient, **LCDR Eduardo Suarez (s3217).** LCDR Suarez has been advised of test results and told to come to the clinic at his earliest convenience.

18. Load the patient record for **LCDR Eduardo Suarez (s3217)**.

19. Verify that the patient's name appears on the patient ID line.

20. In the *Folder List*, click the **Clinical Notes** icon.

21. Click the **Options** button and, in the *Properties* window, review the defaults for the *Filter* and *Preferences* tabs.

22. Close the *Properties* window.

23. On the Action Bar, click the **New** icon to create a new clinical note.

24. In the **Note Type** field, select **Text Notes** from the drop-down list.

25. In the **POC** field, select **CHCS II**.

26. Enter the information given in the scenario. Before saving, review the buttons at the bottom of the screen: **Save**, **Cancel**, **Insert Image** and **Load Existing File**.
    Insert Image allows the importation of an image with the file extension .tif, .bmp or .wmf
    Load Existing File allows the importation of a file with the extension .txt, .rtf, .htm or .html.

27. Save your note. The newest file appears at the top of the Clinical Notes list.

28. In the upper-right corner, select the **Expand** check box to view the full text of the clinical note.

29. Clear the **Expand** check box.

30. Close the Clinical Notes module.

Clinical Notes Scenario 2

You just finish saving the note when the Provider calls again and wants to add **LCDR Suarez (s3217)** has been advised to have someone else drive him to the clinic, rather than coming alone.

31. Select the note you just finished.

32. On the Action Bar, click the **Edit** icon.

33. Add the new information in the scenario.

34. Save the note and close the Clinical Notes module.

Previous Encounters

- Displays a list of completed encounters for a specific patient

- Can be amended or appended if necessary

The Previous Encounter module displays a list of a patient's completed encounters. You can append a narrative, amend an encounter, create a new template from the completed encounter and "copy forward" the results of a previous encounter to the current encounter easing effort and saving time in documenting follow-up visits.

Lesson Goal

The goal of this lesson is to enable the student to use the Previous Encounters module in CHCS II.

Learning Objectives

Upon completion of these modules, the student will be able to:

- Display a previous patient encounter
- Amend a completed encounter
- Append a narrative to a completed encounter

Demonstration

The end user needs to annotate Eduardo Suarez's diabetes is now controlled by adding a note to his Diabetes Mellitus Type II – Uncontrolled encounter

Appending a Narrative

1. From the list of appointments, click on any of Eduardo Suarez's appointments to pull his record.

2. Click the ![icon] Previous Encounters icon in the Folder List. The Previous Encounters window will display:
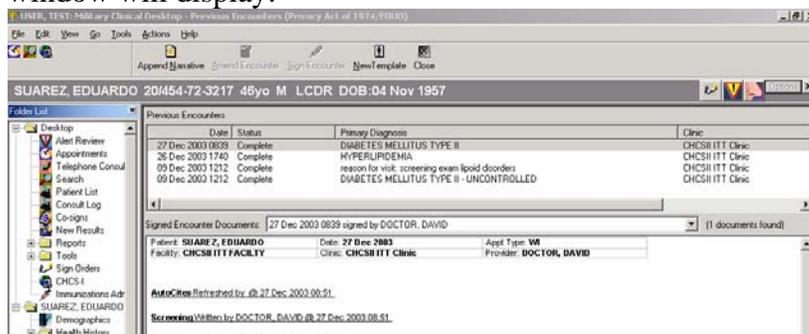
3. Click the **Append Narrative** icon on the Action Bar. The Encounter Note window will display:

4. Type *DIABETES* in the Note Category field.

5. Type *DIABETES CONTROLLED* in the Note Title field

6. Type PATIENT HAS HIS DIABETES MELLITUS TYPE II UNDER CONTROL. in

the text area.

7. Click the **Save and Sign** button. The Sign Appended Note window will display:

8. Click the ⬛ Sign button to sign the encounter. The Previous Encounters window will re-display.
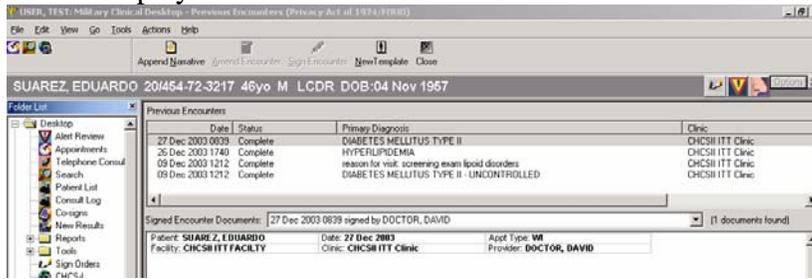
9. Click the ⬛ Close icon on the Action Bar to close the module.

10. Click Close to close SF600 and return to Appointment module

Copy Forward a Previous Encounter

11. Select the *diabetes follow-up* appointment for Eduardo Suarez.

12. Click the ⬛ Open Appt icon on the Action Bar. Eduardo Suarez's SF600 will open.

13. Click the ⬛ Previous Encounters icon in the Folder List. The Previous Encounters window will display:

14. Highlight Mr. Suarez's *Diabetes Mellitus Type II* encounter.
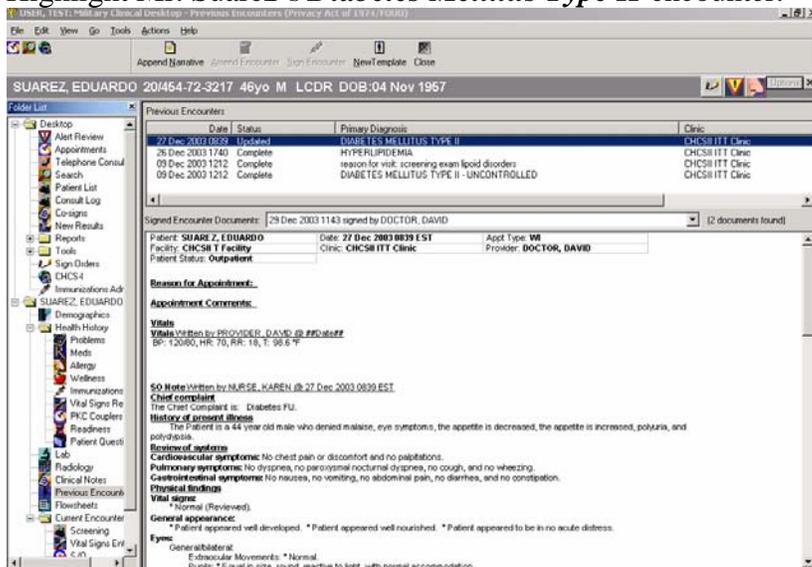
15. Right click on the highlighted appointment.

16. Click the ⬛ Copy Forward button. The Previous Encounters window will close.

17. Click the SO button on the SF600. The copy forward template will display.
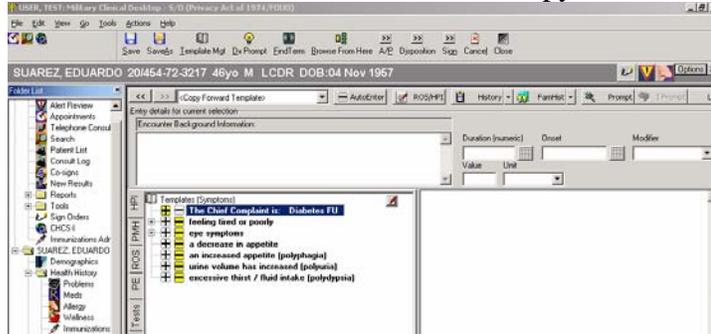
18. Since none of Mr. Suarez's symptoms or findings has changed we can quickly document the abnormal and normal findings in all tabs by clicking the ![AutoEnter] button.

19. Click the ![Close] icon on the Action Bar to close the S/O.

20. Click the ![Close] icon on the Action Bar to close the SF600.

Lesson Exercises

Open the CHCS II Training System and complete the exercises below.

Previous Encounters Scenario

You've been asked by a Provider to demonstrate how to view previous encounters for a patient, **LCDR Eduardo Suarez (s3217)**.

1. Search for **LCDR Eduardo Suarez (s3217)** and load the patient's record. His name appears in the Patient ID line.

2. In the *Folder List*, click the **Previous Encounters** icon. As each previous encounter for the patient is highlighted in the upper window, details of that encounter appear in the lower window.

The Provider would now like to print a DD2766 for this patient to take to an appointment with a civilian provider. Step the Provider through the process.

3. Follow the menu path File > Print Preview > DD2766.

4. Review the document image in the preview window. The live CHCS II database has an option available to print the open previous encounter.

Note: A patient must be selected and the patient's name must appear in the patient ID line, but the Previous Encounters module need not be open to preview or print a DD2766.

5. Click the **Close** icon to exit the Previous Encounters module.

6. Clear Patient

Alert Review

- Displays a list of items needing the end user's attention
- Alerts may include:

    New Results

    Encounters requiring a co-signature

    Orders to be signed

The Alert Review module displays items that need immediate attention. It lists both primary end user alerts and surrogate end user alerts. A surrogate end user is authorized to act on behalf of another end user. Unresolved alerts are in bold text and resolved alerts are in regular text. Blinking alerts indicate that there is a new alert and the alert list needs to be refreshed.

Lesson Goal

The goal of this lesson is to enable the end user to review and respond to notifications of diagnostic results and to orders and encounters requiring the end user's signature.

Learning Objectives

Upon completion of this lesson, the student will be able to:

- Access alerts:
  - *Folder List*
  - **Alerts** icon
- Address an alert from the Alert Review module
- Delete alerts that have been resolved

Demonstration

An end user needs to address the alert for a new result that has been posted. Review the result and delete the alert.

1. Click either the ![icon] Alert Review folder in the Folder List or the ![icon] icon on the Action Bar. The Alert Review window will display:
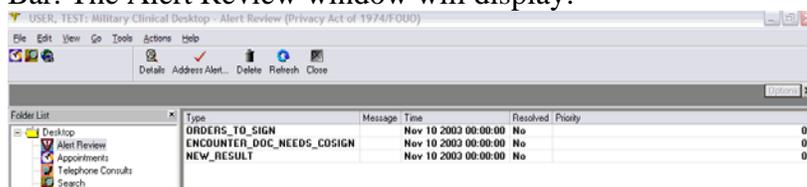
2. Click to select the *New Result* alert and click the ✓ Address Alert... icon on the Action Bar. The New Result window will open:
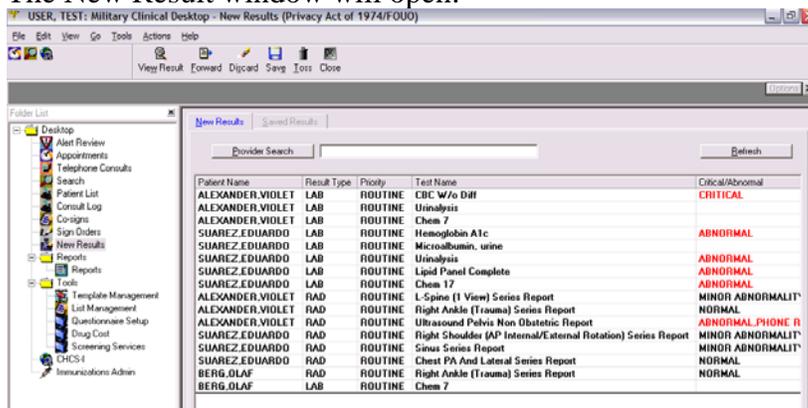
3. Click to select *Olaf Berg's Chem 7* result and click the **View Results** icon on the Action Bar. The Lab module will display.

4. View the result and click the **Close** icon on the Action Bar. The New Results window will re-display.

5. Click the **Toss** icon on the Action Bar. A confirmation message will be displayed:

6. Click **Yes** to confirm the Toss. The New Results window will be re-displayed less the New Result just tossed.

7. Click the **Close** icon on the Action Bar to close the New Results window. The Alert Review window will re-display indicating the New Results alert has been resolved:

8. Click on the New Result line to select it and click the **Discard** icon on the Action Bar. The Alert Review window will re-display with the New Result alert deleted

9. Click the **Close** icon on the Action Bar to close the module.

10. Clear patient

Lesson Exercises

There are no exercises for this lesson.

New Results

- Provides an interface to manage lists of new and saved results
- View lab and radiology results

The New Results module provides an interface to manage your lists of new and saved results. The module lets you view ordered laboratory and radiology results returned to from CHCS I. You can either view high-level summary or detailed result information for a specific order. Viewing detailed information automatically opens the Lab or Radiology module, depending on the selected order.

Lesson Goal

The goal of this lesson is to enable the end user to review and process new lab and radiology results.

Learning Objectives

Upon completion of this lesson, the student will be able to:

- Access the labs or rads modules from the New Results module to view new results
- Discard a lab or rad result
- Toss a new lab or rad result
- Save a new lab or rad result
- Move a new result into saved results
- Forwarding new results to another provider

Demonstration

To view results:

1. Click the [New Results] folder in the Folder List. The New Results window will display.

2. Click to select the *New Results* tab if not already selected

3. Click the *Lipid Panel Complete* lab test result for Eduardo Suarez. The line will be highlighted.

4. Click the [View Result] icon on the Action Bar to view the result. The Lab module will display the result.

5. When you are finished viewing the detailed result information in the Lab module, click the [Close] icon on the Action Bar. The New Results module window will re-display.

To discard results:

6. Click to select the *New Results* tab if not already selected.

7. Click the *Urinalysis* lab test result for Eduardo Suarez. The line will be highlighted.

8. Click the Discard icon on the Action Bar. A Discard comfirmation window will display.
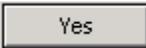
9. Click [Yes] to discard the Urinalysis lab test. The New Results window will re-display.

To save results

1. Click the *Lipid Panel Complete* lab test result for Eduardo Suarez. The line will be highlighted.

2. Click the Save icon on the Action Bar. A CHCS II Results window will display, asking if you want to move this result(s) to your saved result list?
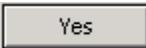
3. Click [Yes] to save the Lipid Panel Complete lab test. The New Results window will re-display and the Lipid Panel Complete result will disappear.

To forward a new result to an end user:
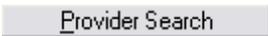
1. Click on the [Provider Search] button. The Clinician Search window will display.

2. Type *DOCTOR* in the Last Name field and click the [Find] button at the bottom of the window. Clinicians matching the search criteria will display.

3. Click to select *DOCTOR, DAVID* in the results area and click the [Select] button at the bottom of the window. The New Results window will be re-displayed.

4. Click to select the *CBC W/o Diff* lab test for Violet Alexander and click the Forward icon to forward the lab test result. A confirmation message will display.

5. Click [Yes] to forward the result. The New Results window will re-display.

6. Click the Close icon to terminate the process.

Note: The system creates a signature to confirm that an end user has viewed the new result information.

Lesson Exercises

Open the CHCS II Training System and complete the exercise below.

New Results Scenario

It is the middle of your day and you have set aside some time to review your alerts. You begin by viewing the details in each category of your alerts. You have been waiting for the new results, so you decide to address them first.

Begin by viewing and tossing the three normal results. You are very concerned about Col Violet Alexander's (a5743) critical results, as well as LCDR Eduardo Suarez's (s3217) abnormal results. You quickly view and save the results with minor abnormalities for LCDR Suarez.

You also view Col Alexander's L-Spine report that has minor abnormalities. David Doctor is consulting with you on Col Alexander's condition and you want him to review this, as well, so you forward it to him. Then, you toss it. Your next appointment is ready and you have no more time. You close the module and access the appointments screen.

Co-Signs

- List of encounters an end user needs to co-sign

- Encounters may be amended or a narrative appended

The Co-Signs module displays a list of all encounters that an individual end user needs to co-sign. The end user can co-sign the appropriate encounters from this window as well as view encounter details, amend the encounter, and add a narrative. The top of the window displays a list of all the encounters requiring co-signatures for the end user logged in.

Lesson Goal

The goal of this lesson is to enable the end user to review and refine encounters requiring the Provider's signature.

Learning Objectives

Upon completion of this lesson, the student will be able to:

- Review encounters needing co-signatures
- Co-sign an encounter completed by another Provider
- Append a narrative to an encounter prior to co-signing

Demonstration

The end user notices three encounters requiring their co-signature. The Allergic Rhinitis encounter needs a co-signature. The encounter for Eduardo Suarez's hyperlipidemia visit, is missing the lab result within the encounter. Assist the end user in amending this encounter to include this report. The end user is then ready to sign the encounter.

Co-Sign an encounter

1. Click the [icon] Co-signs icon in the Folder List. The Co-Sign window will display:
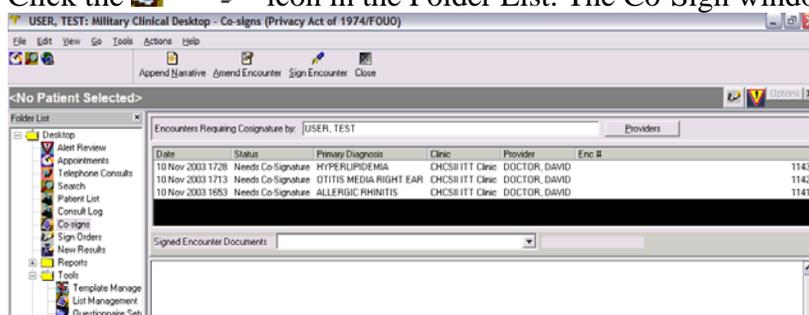
2. Click to select the Allergic Rhinitis encounter or Anna Wunderlich. The encounter information will display in the encounter window.

3. Review the encounter.

4. Click icon on the Action Bar.

5. Review the note again and click the button to sign the encounter. The Co-Signs window will re-display

Amend an encounter

6. Click the icon in the Folder List. The Co-Sign window will display:
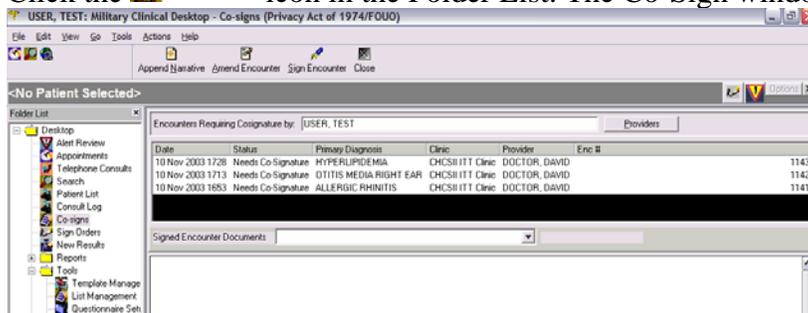
7. Click to select the **HYPERLIPIDEMIA** encounter of Eduardo Suarez. The encounter information will display in the encounter window.
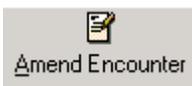
8. Click the icon on the Action Bar. The SF600 will display.

9. Click the folder in the Folder List. The Lab module window will display.

10. Click on **Lipid Panel Complete**. The Lab result will display in the Display Criteria section of the window.

11. Click the **Ref Range/Units** check box to display the reference ranges for the test.

12. Drag the mouse from Lipid Panel Complete in the upper left of the lab result area to the lower right of the area (this selects the entire lab result).

13. [Right Click] on the highlighted area. A window will appear containing options to

Copy and Copy to Note.
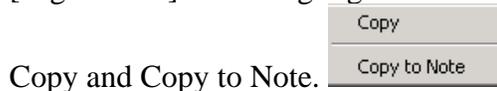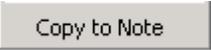
14. Since we want to copy these lab results to the note, click the [Copy to Note] button.

15. The lab result will re-display, with the lab result no longer highlighted (the result has been copied to the note).

16. Click the Close icon on the Action Bar.

17. View the lab result in S/O section of the SF600, under the S/O note.

18. Click the Sign icon on the Action Bar. The Co-Sign Encounter window will display.

19. Review the note again and click the [Sign] button to sign the encounter. The Appointments window will re-display.

Lesson Exercises

Open the CHCS II Training System and complete the exercise below.

Co-Signs Scenario

It is mid-afternoon and you have a little more time to review alerts, so you access the alerts module once again. You still need to review LCDR Suarez's (s3217) abnormal results, but you decide to see what orders are waiting for your signature and what needs cosigning.

You look at the orders requiring signature and expand all so you can review the entire group at once. You review and collapse them and close the module to review the co-signs waiting. You see there are three, one of which is for LCDR Suarez. You decide to come back to these after you have reviewed LCDR Suarez's results. You close the module and return to the orders needing to be signed. You select all orders for LCDR Suarez and sign them. You have another appointment, so you close the Co-signs module and open the Appointments module.

Sign Orders

- Validate orders submitted by non-end users
- Order status is pending until the order is signed

The Sign Orders module allows you to validate orders submitted by non-end users. When a non-end user submits a consult, lab order, radiology procedure, or medication for a patient encounter in the A/P module, the assigned end user receives notification that a non-end user entered an order. The order's status is pending until you sign the order.

Lesson Goal

The goal of this lesson is to enable the end user to access, review and sign orders created by non-providers.

Learning Objectives

Upon completion of this lesson, the student will be able to:

- Display details of non-Provider orders needing signing:
  - One at a time
  - All at once
- Sign non-Provider orders:
  - One at a time
  - Several selected orders at one time
  - All at one time
- Cancel non-Provider orders

Demonstration

The end user notices the icon in the Patient ID line. Assist the end user in signing the orders for Eduardo Suarez. The end user would also like to cancel the Chem 7 Panel ordered for Clayton Williams.

Signing non-end user orders

1. Click either the [icon] icon in the Patient ID line, or the [icon] Sign Orders folder in the Folder List to open the Sign Orders process. The Sign Orders window will display:
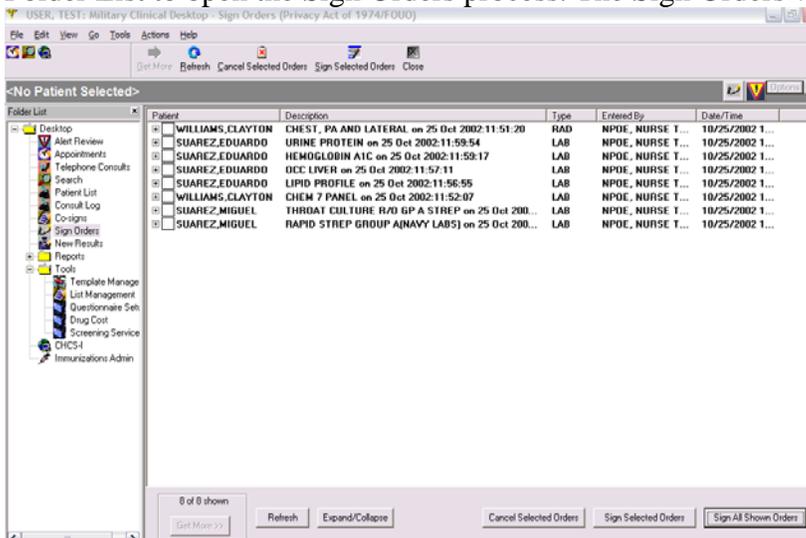
2. Click the check boxes to the left of Eduardo Suarez's name.

3. Click either the [icon] Sign Selected Orders icon on the Action Bar or [Sign Selected Orders] button. The window will re-display with the sign orders removed.

4. Click [Close] on the Action Bar to close the module.

Canceling a Non-End user Order

5. Click the check box to the left of Clayton William's name.

6. Click either the [icon] Cancel Selected Orders icon on the Action Bar or [Cancel Selected Orders]. The window will re-display with the canceled order removed.

7. Click [Close] on the Action Bar to close the Sign Orders module.

Lesson Exercises

Open the CHCS II Training System and complete the exercise below.

Sign Orders Scenario

It is the end of your day and you need to sign the remaining orders and co-sign some encounters. You open the Sign Orders module and sign all shown orders. Then, you open the Co-signs module and review each of the encounters. Amend one of the encounters and append a narrative to another. You can go home now.

List Management

- Create and manage various lists

    Diagnosis

    Procedure

- Available within Problems and A/P modules

- Tied to individual profile

The List Management module allows you to create and manage various lists within the system. These lists include Diagnosis and Procedure lists. The customized lists are available within the Problems and the Assessment and Plan modules to streamline the selection process. The end user-specific lists are tied to the individual end user's profile.

Lesson Goal

The goal of this lesson is to enable the student to create and manage Favorites Lists of diagnoses and procedures for streamlining selection in the Screening, Problems and A/P modules.

Learning Objectives

Upon completion of this lesson, the student will be able to:

- Create lists of favorites for use in the application:
  - Diagnoses
  - Procedures
  - Clinic Favorites
- Delete items from lists.

Demonstration

After talking to the end user, it is decided they do not want Upper Respiratory Infection on their favorites list. They would like to add flu shot to their procedures list and have electrocardiogram as the last procedure on the list

8. To begin, click the ![List Management] folder in the Folder List The List Management screen will display.
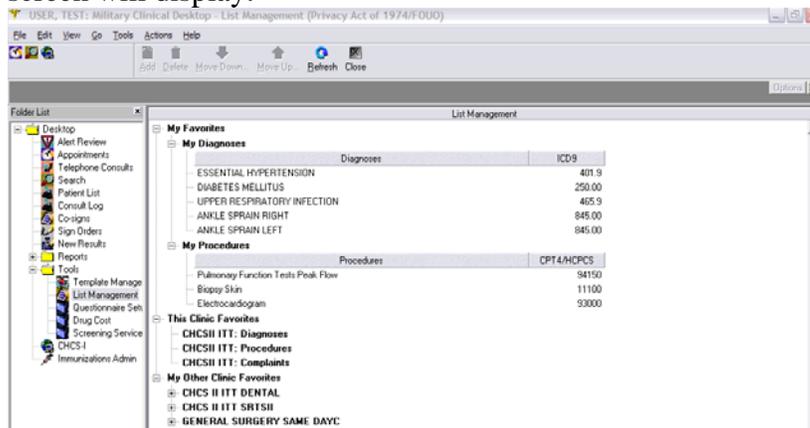
9. To Delete Upper Respiratory Infection from the Diagnosis favorites list, click ⊞ to expand *My Favorites* (if not already expanded) and click ⊞ to expand *My Diagnosis* if not already expanded. A list of favorite diagnoses will be displayed.

10. Click on *UPPER RESPIRATORY INFECTION* to select it and click the ![Delete] icon on the Action Bar. Upper Respiratory Infection will be deleted from the Favorite List.

11. To add a flu shot to the procedures favorites list, click to highlight *My Procedures* and click the ![Add] icon on the Action Bar. The Select Procedure window will display.

12. Type *flu shot* in the Search field and click ![Search]. Terms related to flu shot will be displayed.
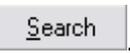
13. Click ⊞ to expand Vaccines Viral Influenza

14. Click ⊞ to expand *Whole Virus*

15. Click *For Intramuscular Use 90659* to select it and click ![OK]. The For Intramuscular Use procedure will be added to the Procedure Favorite List.

16. To move the electrocardiogram procedure to the bottom of the Procedures favorites list, click *Electrocardiogram* in the Procedures favorites list.

17. Click the ![Move Down...] icon on the Action Bar. Electrocardiogram will be moved to the bottom of the list.

Lesson Exercises

Open the CHCS II Training System and complete the exercise below.

List Management Scenario

You have been using the system for a few weeks now and you now have a good idea of the lists you want to create for use in CHCS II. Create a favorites list of diagnoses and one of procedures. Also, see if you can find a way to create a list of your patients.

Patient Questionnaires

- Two separate modules

    Questionnaire Set Up

    Patient Questionnaires

- Allows the end user to create specific questionnaires

- Can be AutoCited into a patient encounter

Questionnaires in CHCS II consist of two separate modules – the Questionnaires Setup module and the Patient Questionnaires module. The Questionnaire Setup module allows you to create questionnaires. Once created, you can modify, copy, delete, and mark as obsolete these questionnaires. An open encounter is not required for questionnaires to be created or modified.

The Patient Questionnaires module is used to administer questionnaires.

Lesson Goal:

The goal of this lesson is to enable the student to set up patient questionnaires in CHCS II.

Learning Objectives

Upon completion of this lesson, the student will be able to:

- Create and release a questionnaire
- Edit an existing questionnaire
- Change the status of a questionnaire

Demonstration

The Headache Clinic has just been brought up on CHCS II. When screening patients for the first time, the clinic has a form they ask the patients to complete prior to being seen by an end user. The clinic would like to name the questionnaire Headache Initial Visit.

Building the Questionnaire

1. Click ![Questionnaire Setup] in the Folder List (you may have to expand the Tools folder). The Questionnaire Setup window will display:
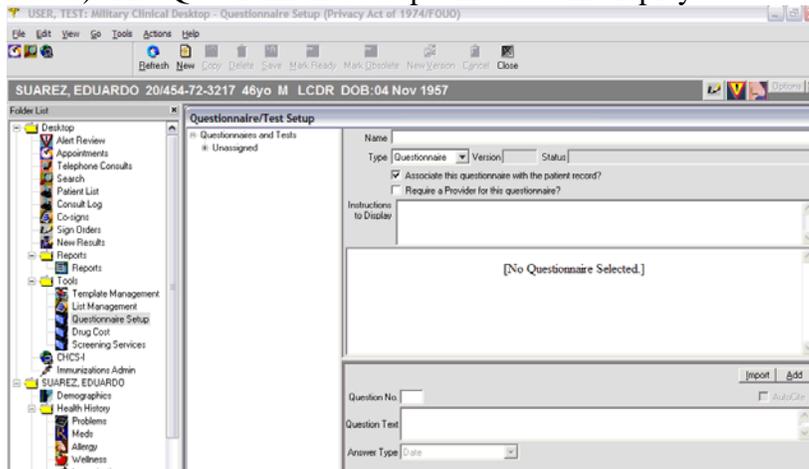
2. Click the ![New] icon on the Action Bar to create a new questionnaire. The Questionnaire Setup window will re-display with the [New] in the Name field and in the large, center window:
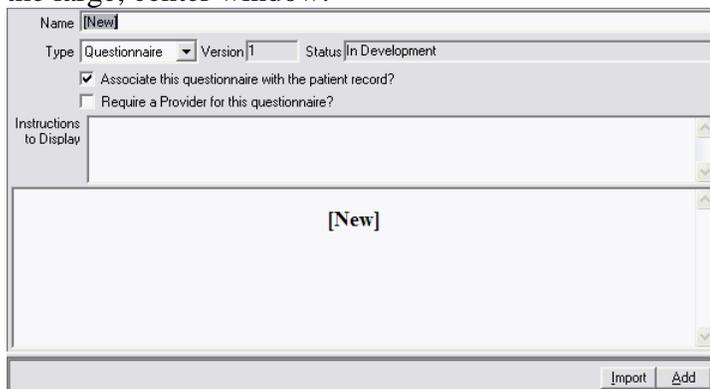
3. Overtype [New] in the Name field with *HEADACHE INITIAL VISIT*. The name will appear in the large, center window.

4. For Level select personal from drop down box

5. Click the **Add** button on the right side of the window. The input area for question one will display

Name	Headache Initial Visit			
Type	Questionnaire ▼	Version 1	Status	In Development

☑ Associate this questionnaire with the patient record?
☐ Require a Provider for this questionnaire?

Instructions to Display

Headache Initial Visit

1. [New Question]
   Answer: _____

	Import	Copy	Delete	Add	▲	▼

Question No. 1   ☑ AutoCite

Question Text: [New Question]

Answer Type: Date ▼

6. In the Question Text area, overtype [New Question] with ***DO YOU HAVE A HEADACHE RIGHT NOW?***, click ***Yes/No*** in the Answer Type drop-down and click **Add** to add a new question. The Questionnaire input area will re-display:

Name	Headache Initial Visit			
Type	Questionnaire ▼	Version 1	Status	In Development

☑ Associate this questionnaire with the patient record?
☐ Require a Provider for this questionnaire?

Instructions to Display

Headache Initial Visit

1. Do you have a headache right now?
   ○ Yes   ○ No
2. [New Question]
   ○ Yes   ○ No

	Import	Copy	Delete	Add	▲	▼

Question No. 2   ☑ AutoCite

Question Text: [New Question]

Answer Type: Yes/No ▼   Normal Answer: _____

Choice	Text	Skip To
1	Yes	
2	No	

7. In the Question Text area, overtype [New Question] with ***WHEN WAS THE LAST TIME YOU HAD A HEADACHE?***, click ***Date*** in the Answer Type drop-down and click **Add** to add a new question. The Questionnaire input area will re-display.

8. In the Question Text area, overtype [New Question] with ***HOW LONG HAVE YOU BEEN HAVING HEADACHES?***, click ***Multiple-Choice*** in the Answer Type drop-down. In the Multiple-Choice area type:
   LESS THAN 1 MONTH and press the [Enter] key
   1-6 MONTHS and press the [Enter] key
   7-12 MONTHS and press the [Enter] key

GREATER THAN 1 YEAR and click <u>Add</u> to add a new question. The Questionnaire input area will re-display.

9. In the Question Text area, overtype [New Question] with ***HAVE THE HEADACHES GOTTEN WORSE OR BETTER?***, click ***Multiple-Choice*** in the Answer Type drop-down. In the Multiple Choice area type:
   WORSE and press the [Enter] key
   BETTER and click <u>Add</u> to add a new question. The Questionnaire input area will re-display.

10. In the Question Text area, overtype [New Question] with ***ARE YOU TAKING ANY MEDICATION FOR THE HEADACHES?***, click ***Yes/No*** in the Answer Type drop-down, type *7* in the Skip To field associated with No, and click <u>Add</u> to add a new question. The Questionnaire input area will re-display.

11. In the Question Text area, overtype [New Question] with ***DOES THE MEDICATION HELP THE HEADACHES?***, click ***Yes/No*** in the Answer Type drop-down and click <u>Add</u> to add a new question. The Questionnaire input area will re-display.

12. In the Question Text area, overtype [New Question] with ***HAVE YOU SEEN A MEDICAL END USER REGARDING THESE HEADACHES IN THE LAST YEAR?***, click ***Yes/No*** in the Answer Type drop-down and click <u>Add</u> to add a new question. The Questionnaire input area will re-display.

13. In the Question Text area, overtype [New Question] with ***DOES ANYONE ELSE IN YOUR FAMILY SUFFER FROM HEADACHES?***, click ***Yes/No*** in the Answer Type drop-down, type *10* in the Skip To field associated with no, and click <u>Add</u> to add a new question. The Questionnaire input area will re-display.

14. In the Question Text area, overtype [New Question] with ***IF SO, WHO SUFFERS FROM HEADACHES?*** click ***Multi-Select*** in the Answer Type drop-down and type the following in the Multi-Select area:
   MOTHER and press the [Enter] key
   FATHER and press the [Enter] key
   SIBLINGS and press the [Enter] key
   GRANDPARENTS and press the [Enter] key click <u>Add</u> to add a new question. The Questionnaire input area will re-display.

15. In the Question Text area, overtype [New Question] with ***IS THERE A LOT OF STRESS IN YOUR NORMAL DAY?*** click ***Yes/No*** in the Answer Type drop-down.

   Click the Save on the Action Bar (do not click the <u>Add</u> button to add another question) to save the questionnaire.

16. The questionnaire will appear in the list of questionnaires with a status of In Development:

   Questionnaire/Test Setup
   ⊟ Questionnaires and Tests
     ⊟ Unassigned
       ⊟ Questionnaires
         └ Headache Initial Visit - In Development
       └ Tests
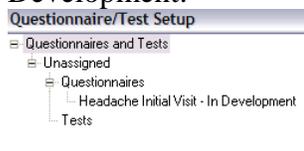
17. Click the *Headache Initial Visit* questionnaire to select it and click the Mark Ready icon on the Action Bar. The questionnaire status will change from In development to Ready for Use.

18. Click Close on the Action Bar to complete the questionnaire setup process.

We will now complete the Headache Initial Visit questionnaire with Eduardo Suarez. Answer each question as if you were completing the questionnaire for Mr. Suarez:

19. Open the appointment

20. Click the Patient Questionnaires folder in the Folder List. The Patient Questionnaires window will display:

21. Click the Interview icon on the Action Bar to begin the questionnaire. The questionnaire will display:
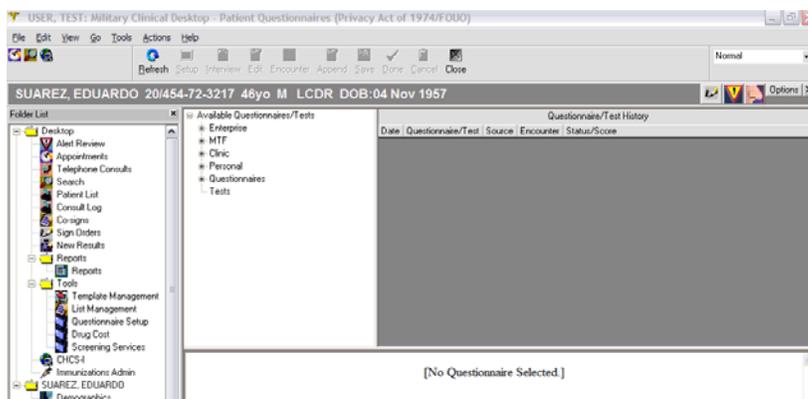
22. To locate the questionnaire:

    a. Click ⊞ to expand the folder next to the Level you saved the questionnaire in

    b. Click *Headache Initial Visit* to select it. The questionnaire will be displayed:
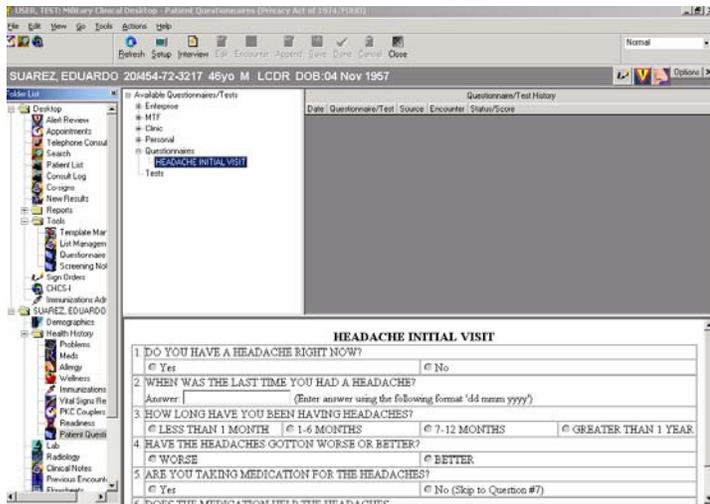
23. Click Select

24. Click the Options button on the Patient ID line to select the Properties for administering the Patient Questionnaire. The Patient Questionnaire Properties window will display:
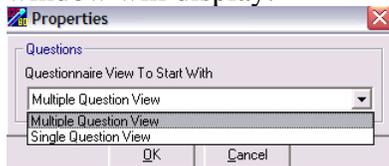
25. Click on *Single Question View* from the drop-down to select it and click OK. The questionnaire will re-display.

26. Answer each question and click *Next Question*

27. When the last question is displayed:
    answer the question and click *Mark Questionnaire As Done*.

28. The Patient Questionnaire window will be re-displayed showing the questionnaire that has just been completed:

29. Close icon on the Action Bar to close the module.

Lesson Exercises

Open the CHCS II Training System and complete the exercise below.

The Headache Clinic has just been brought up on CHCS II. When screening patients for the first time, the clinic has a form for patients to complete prior to seeing a Provider. You have been asked to add this form as a questionnaire in CHCS II.

30. Clear any patient data from your screen. (Follow the menu path *Go > Patient > Clear Patient*.)

31. In the *Folder List* under the Tools folder, click the **Questionnaire Setup** icon.

32. On the Action Bar, click the **New** icon to create a new questionnaire.

33. In the Name field, enter: Headache – Initial Visit.

34. In the Instructions to Display field, enter these instructions: Please complete all questions.

35. Click the **Add** button.

36. In the **Question Text** field, add each question below, click the **Answer Type** field drop-down arrow to select the answer type, and enter each possible answer in the space provided.

Question

Answer Type

Possible Answers

Do you have a headache right now?

Yes/No

Yes

No

When was the last time you had a headache?

Multiple Choice

Less than 1 month

1-6 months

7-12 months

Greater than 1 year

Have the headaches gotten worse or better?

Multiple Choice

Worse

Better

Are you taking any medication for the headaches?

Yes/No

Yes

No

Does the medication help the headaches?

Yes/No

Yes

No

Have you seen a medical provider regarding these headaches within the last year?

Yes/No

Yes

No

Does anyone else in your family suffer from headaches?

Yes/No

Yes

No

If so, who suffers from headaches?

Multi Select

Mother

Father

Sibling

Grandparent

No One

Is there a lot of stress in your normal day?

Yes/No

Yes

No

37. Save the questionnaire.

38. Select the second to last question and change the possible answer **Sibling** to **Male Sibling**

and **Female Sibling** (for a total of six possible answers).

39. Highlight the last question and click the **Delete** button.

40. Note that the **AutoCite** check box is selected by default. When the questionnaire is administered to a patient, the questions and responses load to the open patient encounter note if an encounter template with this feature is used.

41. On the Action Bar, click the **Save** icon to save the questionnaire.

42. Highlight the questionnaire just saved and click the **Mark Ready** icon.

43. Refresh the screen and locate the **Headache** questionnaire under **Questionnaires** in the side bar panel (expand the **Questionnaires and Tests** hierarchy).

44. Close the Questionnaires Setup module.

Screening Notifications

- Allows patients to be notified when a wellness reminder is scheduled
- Notified by e-mail or letter

The Screening Notifications window allows you to notify patients via e-mail or letter when a wellness reminder is scheduled. The Screening Notifications module interfaces with the Wellness module in tracking wellness reminders.

Lesson Goal

The goal of this lesson is to enable the student to perform screening services in CHCS II.

Learning Objectives

Upon completion of this module the student will be able to:

- Select properties for the screening notification module
- Set screening search properties for a specific notification
- Select or deselect search results

Demonstration

You have been instructed to mail a notification to all patients requiring the Anti-Tobacco Counseling.

To select Screening Notifications reminder search options:

1. Click the ![] Screening Notifications folder in the Folder List (you may have to expand the Tools folder). The Screening Notifications window will display

2. Click ![] Change Selections at the top of the window. The Screening Notifications Reminder Search Options screen will display.

3. In the Available Reminder(s) list, click the **Anti-Tobacco Counseling** reminder to

   select it and click the ![] icon. Anti-Tobacco Counseling will display in the Selected Reminder(s) list.

Note: To select multiple reminders, select the reminders while pressing the [Ctrl] key on your keyboard and click the associated icon or individually select each reminder.

4. You can click to select the **PCM** radio button (if not already selected) and search for the end user.
   Note: Performing a search for patients associated with an MTF may take an extended period of time.

5. Click **Letter** as the Method of notification from the drop-down list

6. Click _____ OK _____. The Screening Notifications window will re-display. Patients listed in the Screening Notifications window have a date in the corresponding wellness reminder column that determines when they need to be notified, either by e-mail, letter, or both. To notify patients about future Screening Notifications:

7. Click Select All on the Action Bar to select all the patients. The check box associated with each patient, will be selected.

8. Click Notify on the Action Bar to notify the selected patients of the wellness reminder. A Notification Options window will display.

9. Click the ***Print letter now*** radio button to indicate use of a pre-printed letter. The Screening Notifications window will re-display.

Note: A Print Preview window opens when printing, displaying the letter for the patient(s) being notified.

10. Click the Close icon on the Action Bar to close the module.

Lesson Exercises

Open the CHCS II Training System and complete the exercise below.

Screening Notification Scenario

It's Wednesday again, time to send out screening service notifications. Clear the patient name from the Patient ID line and follow the steps below.

1. In the *Folder List* under the Tools folder, click the **Screening Notification** icon.

2. Click the **Change Selections** button to open the *Screening Service Reminder Search Options* window.

3. Select the following reminders and click the arrow buttons to move them into the *Selected Reminder(s)* section:

>> **Anti-Tobacco Counseling**
>>
>> **Blood Pressure Screen**
>>
>> **Healthy Diet Counseling**
>>
>> **Height & Weight Screen**

You read the list incorrectly and the **Anti-Tobacco Counseling** reminder was already sent.

4. Remove the **Anti-Tobacco Counseling** reminder from the list.

The reminders are to be sent for **PCM Test User**.

5. Verify that the Provider name User Test appears in the **PCM** field.

6. If the name does not appear in the **PCM** field, use the **Search** button to add **User, Test**.

Reminders were sent to some patients two weeks ago.

7. Clear the **Include Patients Who Have Been Previously Notified** check box to exclude patients who were previously notified.

8. Click the **OK** button.

9. Review the Search Criteria at the top of the resulting list.

10. Click the **Select All** icon.

11. Click the **Notify** icon. A print preview is available in the CHCS II Training System.

12. Cancel any further printing.

13. Close the Screening Notification module.

Reports

- Allows the end user to run pre-defined reports
- Reports can be standard, customized, preventive health or population health

The Reports module consists of different types of pre-defined reports used to collect statistical data to determine the needs of MTFs, Clinics, or End users.

Lesson Goal

The goal of this lesson is to understand how to run and print reports.

Learning Objectives

Upon completion of this lesson, the student will be able to:

- Run a report
- View a Report

Demonstration

An end user wants to run a customized Appointments report for the clinic/lab for the last year. The report should be run in a separate window and should be grouped by end user.
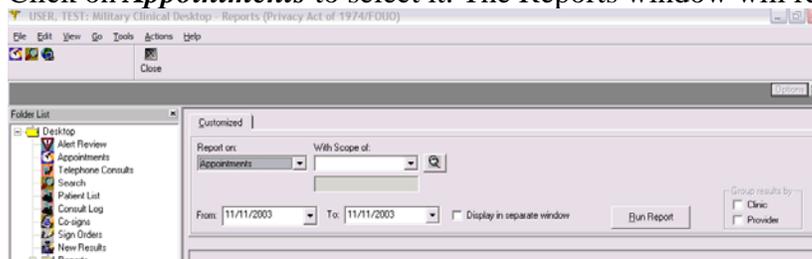
14. Click the 📗 Reports folder in the Folder List. The Reports window will display:
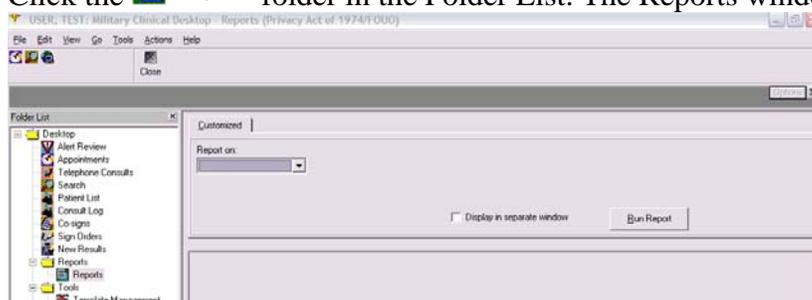
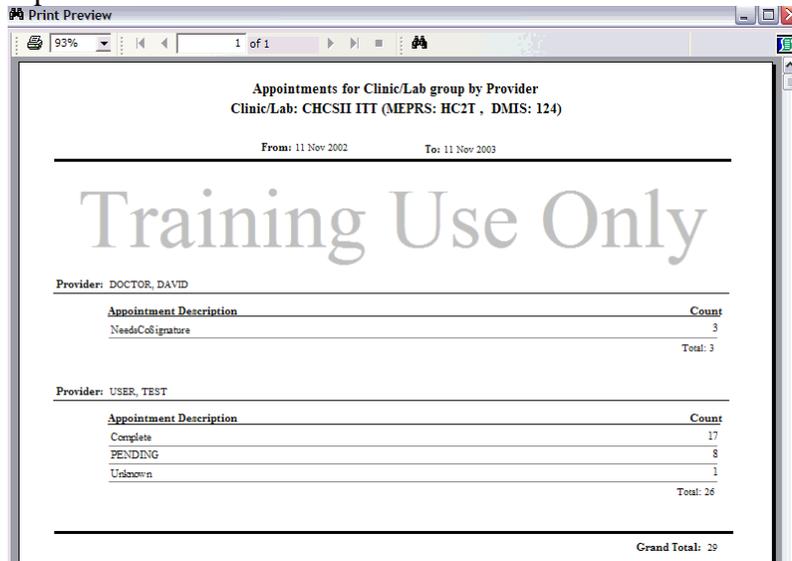15. Click the *Report on*: drop-down 🔽 to get a list of report types

.

16. Click on *Appointments* to select it. The Reports window will re-display:

17. Complete the following fields:

- With Scope of: - *Clinic/Lab*

- From: field - One year prior to the To: field

- Click to select the ☐ Display in separate window check box

- Click to select the ☐ Provider check box

18. Click the Run Report button. The report will be run and the result displayed in a separate window:

19. Click the ⊠ icon in the upper right of the screen to close the Print Preview window. The Reports window will re-display.

20. Click the Close icon on the Action Bar to close the module.

Lesson Exercises

Open the CHCS II Training System and complete the exercise below.

Reports Scenario

This is the day you need to run one of your routine reports. Clear any patient names from the CHCS II Training System and follow the steps below.

1. Open the **Reports** folder in the Folder List.

2. Click on **Reports**.

3. From the drop-down selection for **Report On** field, select **Appointments**.

4. From the drop-down selection for **With Scope Of field**, select **Clinic/Lab**.

5. Select **From** and **To** dates that start two months prior to today's date.

6. In the **Group by Results** section, select the checkbox for **Clinic**.

7. Click the **Run Report** button.

8. Close the Reports module.

Immunizations

- Two separate modules

    Immunization Admin

    Immunizations

- Allows the documentation of immunizations for a patient.

CHCS II Immunization consists of two modules:

- The Immunization Admin module is used to administer and manage vaccines, end users, reports, end user groups, and refrigeration temperature logs. The module is also used to document multiple vaccine entries for selected patients. The Immunizations Admin module can be accessed without having a patient's record open.

- The Patient Immunizations Module is used to manage and track patient immunization records and vaccine history. The Immunization module is patient-specific; therefore, a patient's record must be loaded to the desktop to access this module.

Lesson Goal

The goal of this lesson is to introduce the student to Immunizations Administration.

Learning Objectives

Upon completion of these modules the student will be able to:

- Define vaccine groups
- Track vaccines in stock
- Add details to in-stock vaccines
- Maintain groups
- Document multiple patient vaccines
- Manage providers
- Produce reports

Demonstration

Create a group of immunizations for a battalion that is being deployed:

Add the following list of immunizations to your group. Define the group with your full name.

- Hep A – Hep B

- Influenza
- MMR
- Anthrax

Ensure the following vaccines are in stock and contain the following information:

Vaccine	Mfg Code	Lot Nbr	Dosage	Route
Anthrax	Ortho Diagnostic	OD13579	0.25 ml	IM
Hep A – Hep B	Abbott	4444444	0.1 ml	IM
Influenza	Baxter	BA 12345	0.1 ml	IM
MMR	Merck	ME67890	0.5 ml	IM

1. Click the ✒ Immunizations Admin folder in the in the Folder List. The Immunization Admin screen will display with the **Admin** tab selected:
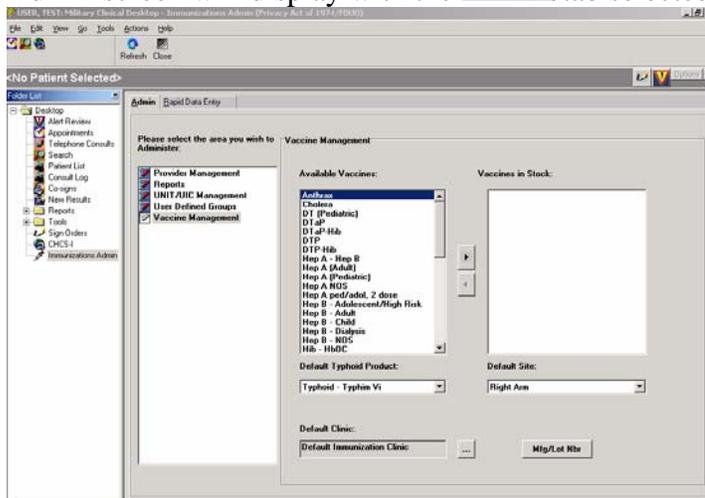
2. Click on *User Defined Groups* in the 'Please select the area you wish to Administer' area. The User Defined Groups window will display:
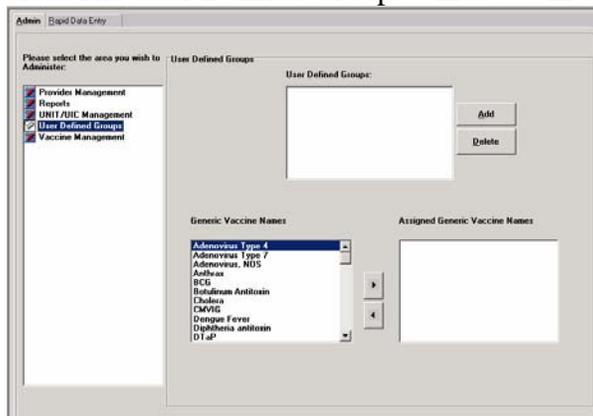
3. Click the [Add] button to add a new group. The Add User Defined Groups window will display:
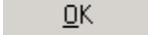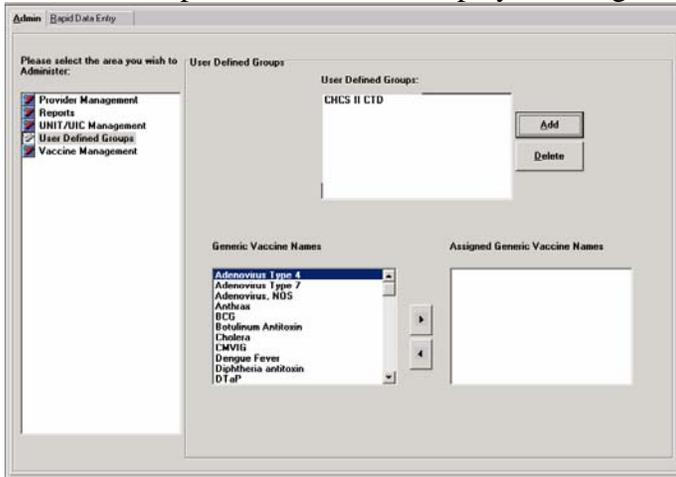
Add User Defined Group

Please enter a new User Defined Group Name:

[OK]

[Cancel]

4. Type your first and last name in the entry area and click [OK]. The User Defined Groups window will re-display showing the newly defined group:

5. Click to select the name of your end user group in the User Defined Groups window and select the following from the Generic Vaccine Names list:

    a. Click on *Anthrax* and click ▶

    b. Click on *Hep A - Hep B* and click ▶

    c. Click on *Influenza* and click ▶

    d. Click on *MMR* and click ▶

The resulting screen will display as follows:
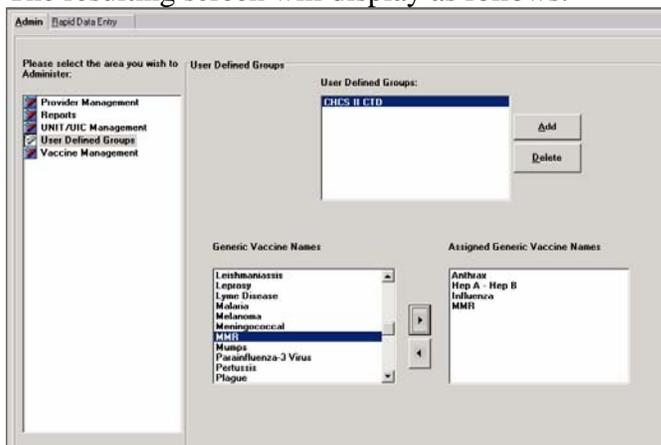
You have now successfully added the list of immunizations to your group.

6. To ensure these medications are in stock, click *Vaccine Management* in the 'Please select the area you wish to administer' section if not already selected. In the Available Vaccines area, do the following:

    a. Click on *Anthrax* and click ▶

    b. Click on *Hep A - Hep B* and click ▶

    c. Click on *Influenza* and click ▶
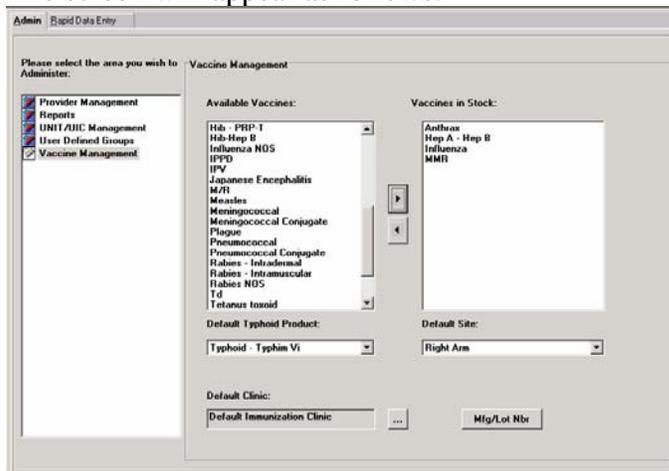
    d. Click on *MMR* and click ▶

The screen will appear as follows:

7. Click on the **Mfg/Lot Nbr** button. The Vaccinations In Stock Information screen will display.

8. Complete the Vaccines In Stock Information with the following data (click in the table cell to get a drop-down for data entry):

Vaccine	Mfg Code	Lot Nbr	Dosage	Route
Anthrax	Ortho Diagnostic	OD13579	0.25 ml	IM
Hep A – Hep B	Abbott	4444444	0.1 ml	IM
Influenza	Baxter	BA 12345	0.1 ml	IM
MMR	Merck	ME67890	0.5 ml	IM

The completed Vaccines In Stock Information will appear as follows:
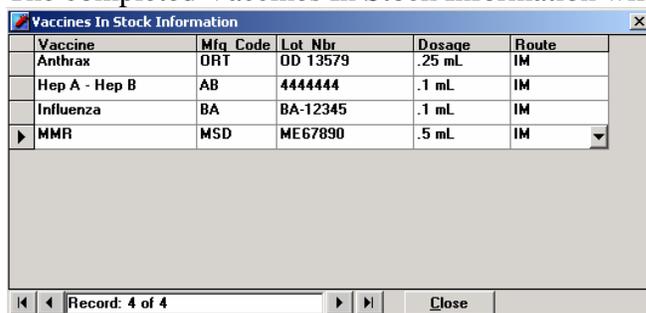
9. Click the **Close** button to complete the Vaccines In Stock Information and close the window.

10. Click the icon on the Action Bar to close the module.

Lesson Exercises

Open the CHCS II Training System and complete the exercises below.

Immunization Administration Scenario

Next, you need to ensure these vaccines are in stock and have the correct information. To do this, you need to move some available vaccines into stock.

1. In the **Please select the area you wish to Administer** field, select **Vaccine Management**.

2. In the **Available Vaccines** box, select each one of the following vaccines, one by one, and click the **Right arrow** (>>) button to move it to the **Vaccines in Stock** box:

Data
Anthrax
Hep A – Hep B
Influenza
MMR

3. Click the **MFG/LOT NBR** button to open the *Vaccines in Stock Information* window.

4. To enter the information in the table below, click in a field and use the drop-down arrow buttons to make selections. (For example, click the **Mfg Code** field in the line for **Anthrax**. The *Manufacture List* window opens. Highlight **Ortho Diagnostic Systems, Inc.** and click the **Select** button.)

Note: This data is representational only.

Vaccine	Mfg Code	Lot Nbr	Dosage	Route
Anthrax	Ortho Diagnostics	OD13579	0.25 ml	IM
Hep A – Hep B	Abbott	44444	0.1 ml	IM
Influenza	Baxter	VA 12345	0.1 ml	IM
MMR	Merck	ME67890	0.5 ml	IM

5. Click the **Close** button to close the *Vaccines in Stock Information* window.

6. Close the Immunizations Admin module and return to the *Appointments* screen.

CLASSROOM INSTRUCTION

Preparation for Delivery

This is intended to assist the Trainer who teaches any CHCS II Users.

Materials Needed

- CHCS II Sign-In Roster. This may be in paper form; or, at some sites, there may be an electronic version of the roster.
- CHCS II Course Lesson Plan.
- CHCS II PowerPoint presentation.
- CHCS II Training templates (if applicable).
- CHCS II User Manual (one per seat).
- CHCS II QRC's (one per student).
- CHCS II Student Guide (one per classroom).
- Addendum to the Release Notes (supplied by MTF; one per instructor).

Tasks to be Completed Prior to Class

- Set up classroom with one workstation per student and one for the instructor, each loaded with the following:
  - CHCS II Training System (CTS)
  - CHCS II Training Tools Video (instructor workstation only)
  - Training templates
  - CHCS II Sustainment Training Course presentation (instructor workstation only) completed with current date and location
- Reset data (**Encounter Data** button) for each CTS prior to starting class daily. **Note**: The entire database should be refreshed weekly after the last class to ensure that CHCS II does not generate messages saying that templates created during class already exist because students created them in a previous class.
- Import the following training templates to all training systems:
  - TRAINING--VISIT--URI MEDCIN
  - TRAINING--VISIT--CHEST PAIN MEDCIN
  - TRAINING--VISIT--RASH MEDCIN
  - TRAINING--URI ENCOUNTER
- Become aware of policies and variations with respect to such things as template naming conventions, pharmacy locations and other similar factors relevant to training.

OJT Checklists Guidelines

There is a standard set of actions that should be reviewed with CHCS II users for purposes of On-the-Job-Training (OJT) . The actions to be reviewed are dependent on the role of the user. We have identified these roles for which we have developed checklists:
Clerks
Support Staff
Nurse
Provider

These checklists should be completed for each OJT and support encounter and they should be signed by the user who received the OJT training

OJT Exercises

This exercise is intended to introduce Super Users to CHCS II within the live environment. This will include utilization of the TEST clinics, patients and end users, etc…

List management preparation setup process

This is intended to assist Super Users who need to create and manage Clinic Favorites Lists of Diagnoses, Common Complaints, and Procedures. This will enforce Template use and simplify term selection within the Screening and A/P modules.

Note: You will need access privileges in order to complete this task**.**

Additional information needed:
Have current copy of clinic Superbill or ADM List printout handy
Complete clinic favorites list: Diagnosis/procedures
Complete common complaints list

Questions to consider
Will the SuperUsers have access to the list mgmt module?
Will time be allowed for superUsers to setup list mgmt in clinic(s)
Who will be responsible for gathering each clinics Superbill

Note: You can obtain IDC 9 and CPT coding information by contacting a Coding and Billing Representative.

List Management Exercise

Complete List Management for MTF clinics using CHCS II, Reference Lesson 26 for instruction.

Supporting End Users

Over-the-Shoulder Support

When assisting End Users:

- Follow MTF business practices
- Never use live clinics or real patients to demonstrate or practice using CHCS II
- Use Test Clinic to edit Templates, build Order Sets, and demonstrate CHCS II features
- A patient's right to privacy should always be enforced.

Troubleshooting:

- Never use live patients to recreate errors in CHCS II
- Make sure End User is mapped to assigned clinic(s) and given the correct role in CHCS II
- Log any issues and send it to Help Desk for further assistance. Try to give as much detail as possible.