



What's New in AHLTA 3.3

Overview Part 1

Outline

- Broad Overview Screen Shots Appointment Screen, Encounter Summary, and A/P Screen
- Desktop Enhancements- Sliding Folders and Health History Module
 - Current Encounter
 - Reminders Pop-up Window
 - Pregnancy History
 - Pediatric Growth Charts
 - Edit S/O Note
 - S/O Enhancements- Positive ROS to HPI
 - Encounter Summary Properties
 - S/O Enhancements- Multiple Instances of Base Terms
 - Dx Prompt Changes
 - A/P Enhancement- Dx Tab
 - A/P Enhancement- Managing Default Template
 - A/P Enhancement- Radiology Location Box
- Web Resources for AHLTA
- Tips to Speed-up AHLTA
 - Back-up slide
 - General work-flow in documenting note

Broad overview screen shots Appointment Screen, Encounter Summary, and A/P Screen



Appointment Screen 3.3*

Improved alerting showing numbers of items in various modules. Bolded for new, and red for higher priority items

New Tabbed Browsing of Open Modules

Relocated and Redesigned Alert Icons

Reminders slide from Right

Redesigned Tel Consults

Redesigned New Results for faster viewing

New patient registries for CPGs

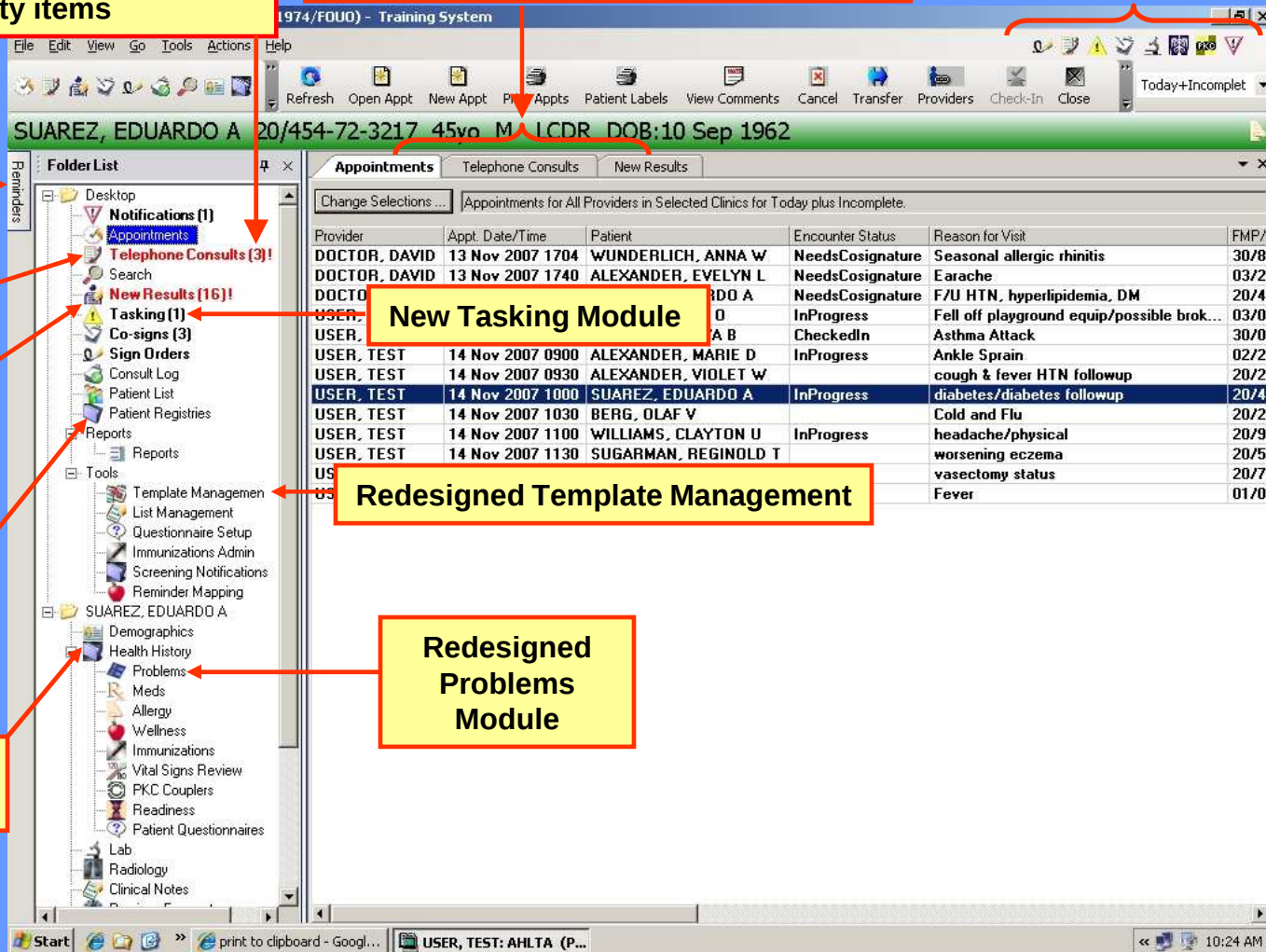
Redesigned Health History

Patient specific icons on separate line

New Tasking Module

Redesigned Template Management

Redesigned Problems Module



Encounter Summary 3.3*

The screenshot displays the 'Encounter Summary 3.3*' software interface. The patient information at the top reads: 'AREZ, EDUARDO A 20/454-72-3217 45yo M LCDR DOB:10 Sep 1962'. The 'Current Encounter' tab is active, showing a date of '30 Nov 2007 1000 EST', status of 'In Progress', and treatment facility of 'CHCSII ITT Facility'. The 'Reason for Appointment' is 'diabetes/diabetes followup'. The interface includes several sections: 'Problems' (Chronic: Hyperlipidemia, Type II diabetes mellitus, Essential hypertension), 'Family History' (No Family History Found), 'Social History' (No Social History Found), 'Allergies' (Iodine Containing Agents: Rash), 'Procedures' (A blood sugar level by fingerstick was determined), and 'Registry Items' (Glucose Tolerance Test, 3 Hours (Diabetes - Trng)). The 'AutoCites' section is refreshed by 'USER, TEST @ 04 Dec 2007 1054 EST'. The 'Screening' section shows 'Vital Signs' (144/5 EST) and a note: 'The Patient is a 45 year old male. Here for t/u of Type 2 DM, HTN, and HLP'. The 'Drawing' section shows 'A/P Last Updated by USER, TEST @ 30 Nov 2007 0910 EST'. The 'Health History' tab is also visible. Annotations with red arrows point to various features: 'Reminders and Folders slide from right' points to the left sidebar; 'Family History Auto-cites added' points to the Family History section; 'Click on "Options" to add Auto-cites' points to the 'Options' button in the top toolbar; 'Procedure History Auto-cites added' points to the Procedures section; 'Registry Goals/Results Auto-cites added' points to the Registry Items section; 'Social History Auto-cites added' points to the Social History section; 'Drawing Module added' points to the Drawing section; and 'Health History Tab added' points to the Health History tab at the bottom.

Reminders and Folders slide from right

Family History Auto-cites added

Click on "Options" to add Auto-cites

Procedure History Auto-cites added

Registry Goals/Results Auto-cites added

Social History Auto-cites added

Drawing Module added

Health History Tab added

A/P Screen 3.3*

USER, TEST: AHLTA (Privacy Act of 1974/FOUO) - Training System

File Edit View Go Tools Actions Help

Preview Save Delete Template Mgt Reminders SO Drawing Disposition Sign Modifiers Submit All Options Close

SUAREZ, EDUARDO A 20/454-72-3217 45yo M LCDR DOB:10 Sep 1962

FolderList

- Meds
- Allergy
- Wellness
- Immunizations
- Vital Signs Review
- PKC Couplers
- Readiness
- Patient Questionnaire
- Lab
- Radiology
- Clinical Notes
- Previous Encounters
- Flowsheets
- Current Encounter
- Screening
- Vital Signs Entry
- S/O

Appointments Current Encounter A/P

Priority ICD Diagnosis Chronic/Acute Type

Priority Orders & Procedures

The Diagnosis Screen is now split.

Diagnosis Order Sets Procedure Reminders Order Consults Order Lab Order Rad Order Med Other Therapies

<<>> <No Template Selected> Favorites Search Find Now

Patient Problem List / DxPrompt Selections

ICD	Diagnosis
DxPron	
465.9	Acute upper respiratory infection
Patient	
272.4	Hypertlipidemia
250.00	Type II diabetes
401.9	Essential hyper
784.0	Headache syndromes

Add to Default Template Remove from Default Template

Templates / Search Results

Description of Diagnosis
+ CARDIOVASCULAR DISORDERS
+ ENDOCRINE DISORDERS 259.9
+ ENT DISORDERS
+ EYE DISORDERS 379.90
+ GASTROINTESTINAL DISORDERS
+ HEMATOLOGIC DISORDERS 790.99
+ IMMUNOLOGIC DISORDERS 279.9
+ INFECTIOUS DISEASE 136.9
+ INJURIES / ACCIDENTS 959.9
+ METABOLIC DISORDERS 277.9
+ NEUROLOGIC DISORDERS 997.00
+ NORMAL EXAMINATION V70.0
+ PSYCHIATRIC DISORDERS

Add to Default Template

Reminders

- Anti-Tobacco Counseling
- Blood Pressure Screen
- Diabetes Questionnaire
- Glucose Tolerance Test, 3 Hours
- Healthy Diet Counseling
- Regular Activity Counseling
- Take BP

Health History

Start USER, TEST: AHLTA (Pri...

11:15 AM

List of Dx Prompts Selectable

Patient Problem List always visible

'Right-Click' Add/Remove items to/from Default Template

"Add to Default Template" added. Replaces "Add to Favorite List"

Screen Use and Workflow Enhancements

- Sliding Folders

Advantages:

1. More open screen space
2. Health history begin to load as soon as the provider clicks to open an appointment. If you set your personal options correctly this will bring 2 years of patient data to your computer for fast access.



Desktop Enhancements- Sliding Folders

Auto Hide: Folder Lists and Reminders

How these folders can
slide on & off from the
right

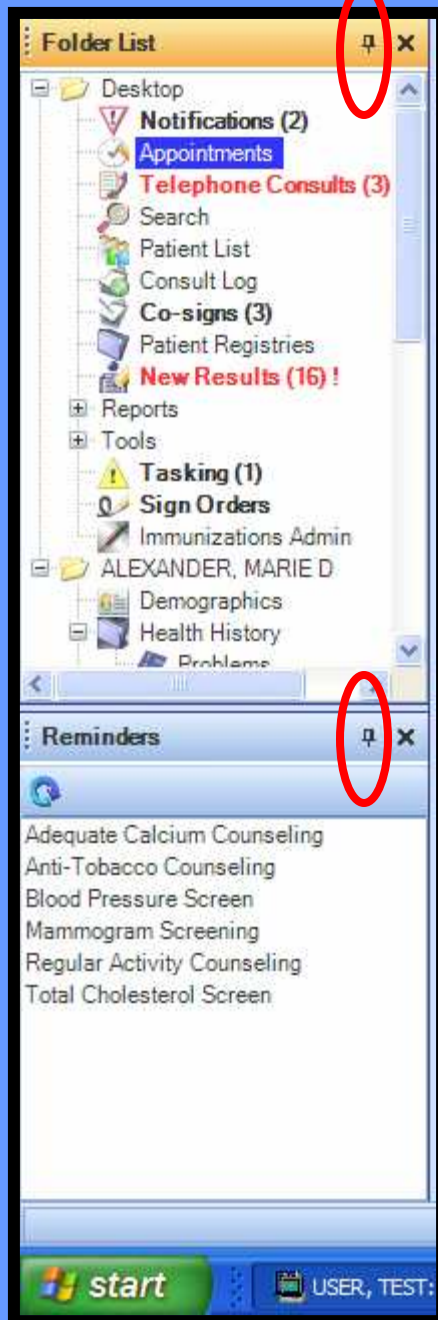
**RECOMMENDED
WORKFLOW:** use autohide
for "Folder List" when in clinic
Take time to set provider shortcuts
To your workflow

The screenshot shows a medical software interface with a 'Folder List' on the left and an 'Appointments' table in the center. The 'Folder List' includes sections like 'Notifications (2)', 'Appointments', 'Telephone Consults (3)', 'Search', 'Patient List', 'Consult Log', 'Co-signs (3)', 'Patient Registries', 'New Results (16)!', 'Reports', 'Tools', 'Tasking (1)', 'Sign Orders', 'Immunizations Admin', and a patient-specific section for 'ALEXANDER, MARIE D.' containing 'Demographics', 'Health History', and 'Problems'. The 'Reminders' section at the bottom left lists tasks like 'Adequate Calcium Counseling', 'Anti-Tobacco Counseling', 'Blood Pressure Screen', 'Mammogram Screening', 'Regular Activity Counseling', and 'Total Cholesterol Screen'. The 'Appointments' table has columns for 'Appt. Date/Time', 'Patient', 'SN', 'CheckIn Time', and 'Type'. A large yellow circle with a red outline highlights the 'Folder List' and 'Reminders' sections, with text explaining the 'Auto Hide' feature. A red line connects the text 'slide on & off from the right' to the 'Folder List' and 'Reminders' sections. A scroll-like box on the right contains a recommended workflow.

Appt. Date/Time	Patient	SN	CheckIn Time	Type
23 Aug 2007 0900	ALEXA	55743	27 Nov 2007 0530	ACUTE AF
23 Aug 2007 0930	ALEX	5743	20 Nov 2007 2242	ACUTE AF
23 Aug 2007 1000	SU	17	20 Nov 2007 2045	ESTABLIS
23 Aug 2007 1030	B	3	20 Nov 2007 0353	ACUTE AF
23 Aug 2007 1100			27 Nov 2007 0050	ROUTINE
23 Aug 2007 1130			02 Nov 2006 1155	ACUTE AF
23 Aug 2007 1200			20 Nov 2007 2019	ACUTE AF

New Slide with shortcuts and hidden

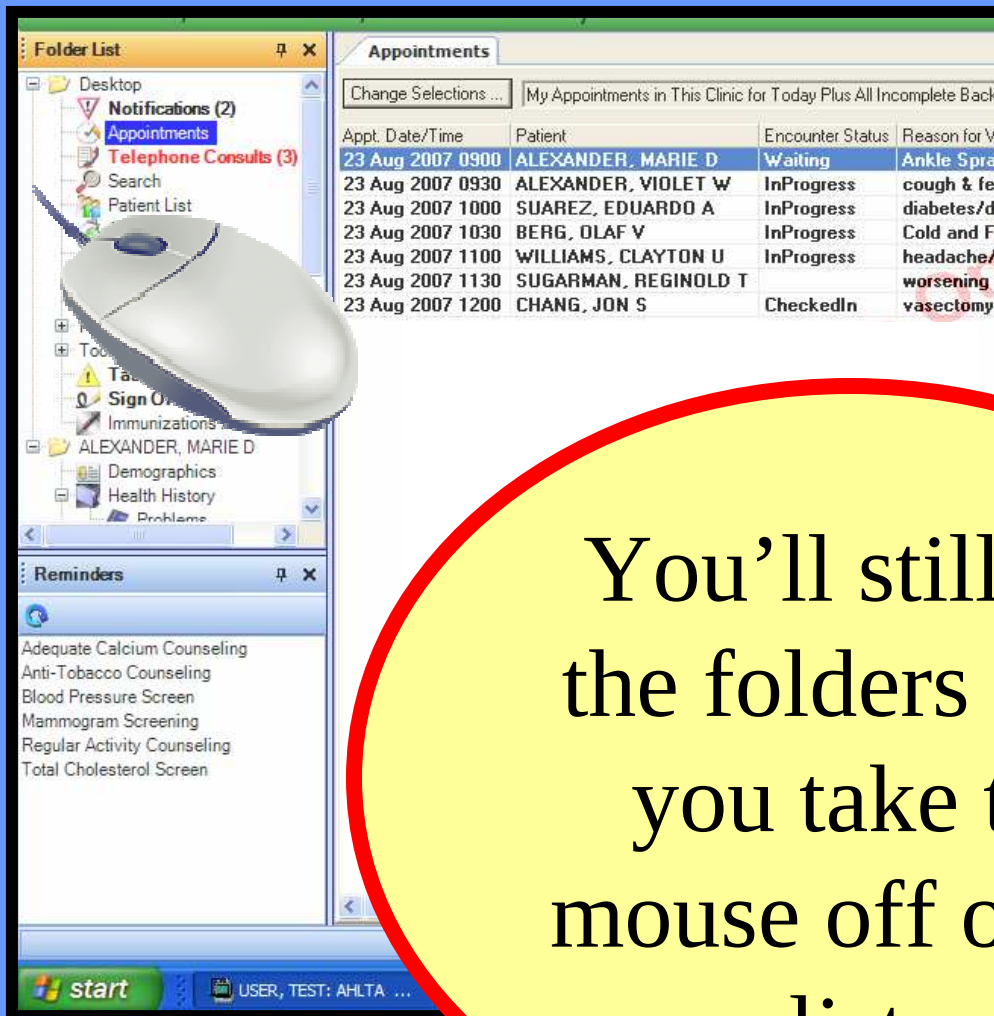
Desktop Enhancements- Sliding Folders



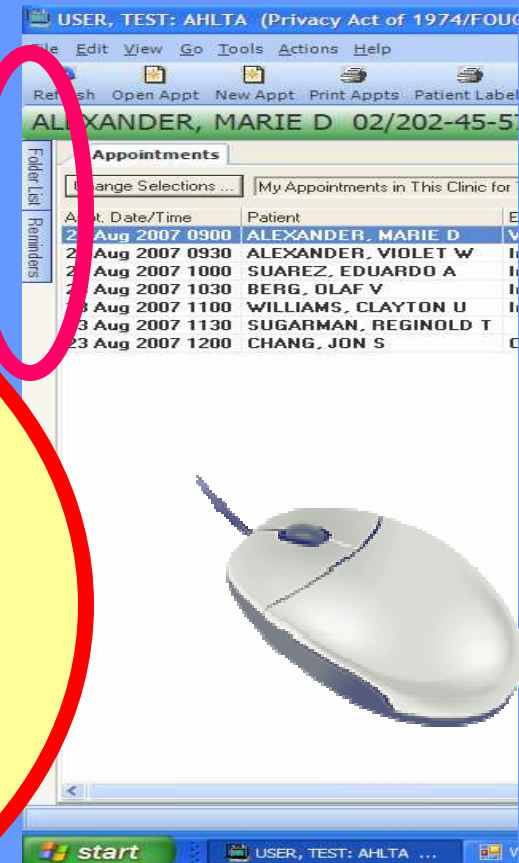
**Click on the
THUMB TACK
to make them
hide on the side**

Desktop Enhancements- Sliding Folders

Move the mouse
to the right



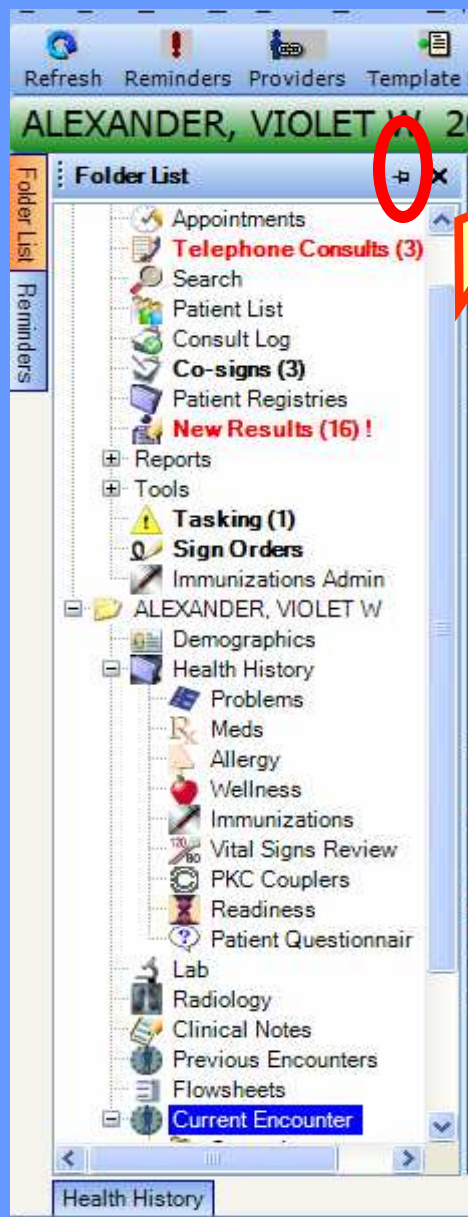
You'll still see
the folders until
you take the
mouse off of the
lists



Desktop Enhancements- Sliding Folders

To make them
REAPPEAR,
just hover the
mouse over
the tabs

Desktop Enhancements- Sliding Folders

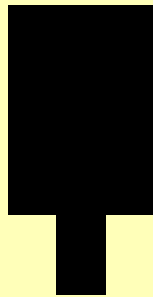


**To keep the list
on the screen,
click the tack**

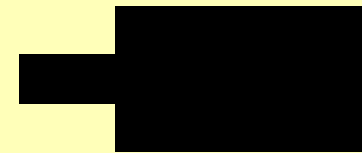
***So that tack is
standing up
again***

Desktop Enhancements- Sliding Folders

Let's Make it Easy
Think of it like this...



When tack is in
upright position
the displayed folders
will
stand there
and wait on you.



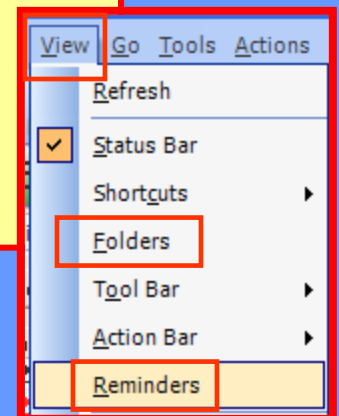
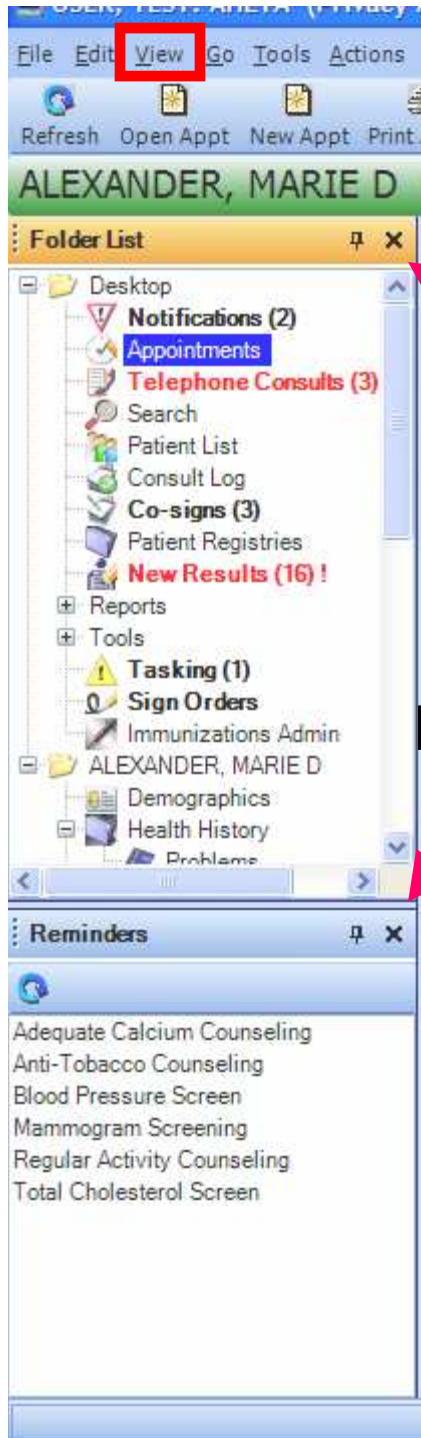
When tack is sideways, it is
**pointed toward the
side**
– which is where it is headed
to **hide** as soon as the
mouse is off of it.

Desktop Enhancements- Sliding Folders

Click the **X**,
to make them go away
(without the tabs)

Desktop Enhancements- sliding folders

To make them REAPPEAR,
You will have to go to
“VIEW” then click
“FOLDERS” and/or
“REMINDERS”



Health History Module

Remember: The health history module now begin to retrieve Patient data as soon as you open an appointment.

Although 3.3 may look like the appointment opens slower Time is saved as you do not have to wait for ancillary Result to load.

Hint: Set your preferences all at 2 years of data.



Current Encounter- Health History Module

ALEXANDER, VIOLET W 20/202-45-5743 45yo F Col DOB:25 Jan 1962

Appointments Current Encounter Screening

Date: 23 Aug 2007 0930 EST

Status: In Progress

Treatment Facility: CHCSII ITT Facility

Primary Provider: USER, TEST

Type: ACUTE

Clinic: CHCSII Test Clinic

Click on the Options Icon, to change the display

Next Slide

AutoCite... AutoCites Refreshed by USER, TEST @ 20 Nov 2007 2242 EST

Health History

Problems

Problem	Comment
Hematologic disorder (unverified...pt reported)	
Essential hypertension	patient doing well and will continue on
Metrorrhagia	
Iron deficiency	
Pulmonary disease (unverified...pt reported)	

Allergies

(DO NOT USE)	
ASPIRIN (ASPIRIN)	

Sits down here when you are in a pt encounter and pops up like this, if you hover the mouse over it

Lab Results

Date Collected	Report	
21 Aug 2007 0000	CBC W/o Diff	Hematocrit => 33 => (L*), Hemoglobin => 10.1 => (L*)
21 Aug 2007 0000	Urinalysis	Acetest => Negative => , Appearance => Clear => , Bilirubin
21 Aug 2007 0000	Chem 7	Anion Gap => 10 => , Chloride => 100 => , CO2 => 28 => ,

Radiology Results

Date	Procedure	Result Code
24 Jul 2007 0000	Ultrasound Pelvis Non Obstetric Report	ABNORMAL, PHONE REPORT
09 Aug 2007 0000	Right Ankle (Trauma) Series Report	Normal
09 Aug 2007 0000	L-Spine (1 View) Series Report	Minor Abnormality

Previous Encounters (Last Four)

Date	Clinic/Location	Provider	Appt/Note Type	Status
23 May 2007 0800	CHCSII Test Clinic	DOCTOR, DAVID	Outpatient	Complete
16 Aug 2007 0120	CHCS II ITT DENTAL	USER, TEST	Dental	Complete

Clinical Notes

Date	Type	Status	Image	Clinician	Entered By	Edited By
22 Aug 2007	Patient Notes	Resolved		USER, TEST	USER, TEST	

Health History

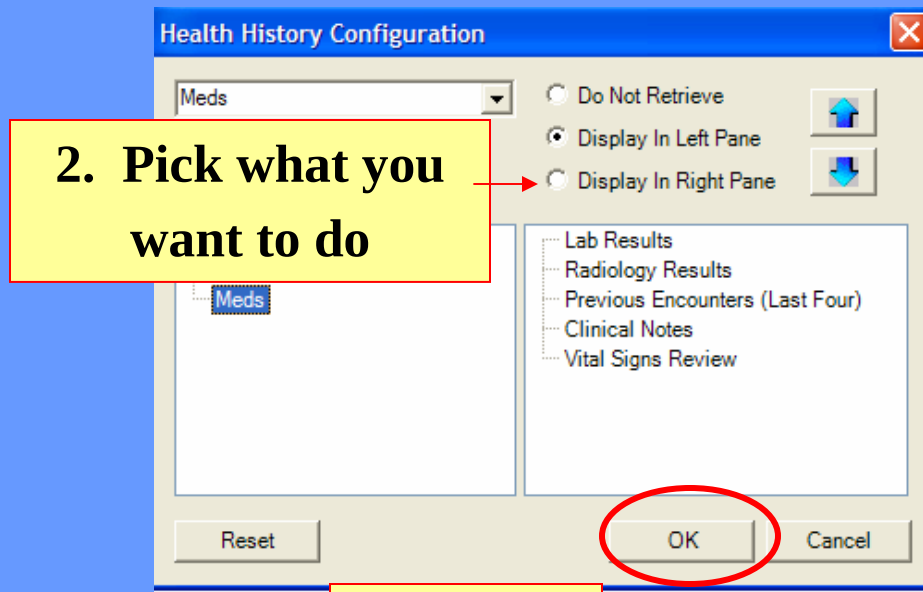
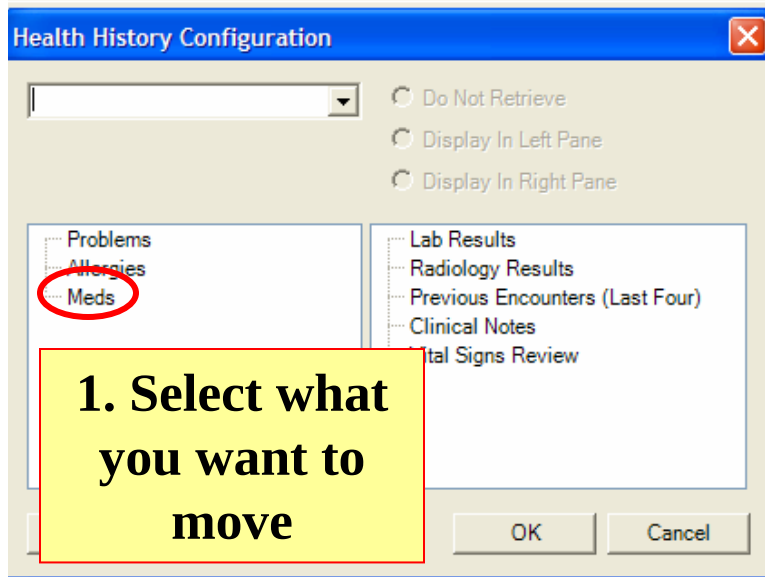
USER, TEST in CHCSII Test Clinic at CHCSII ITT Facility

Current Encounter- Health History Module

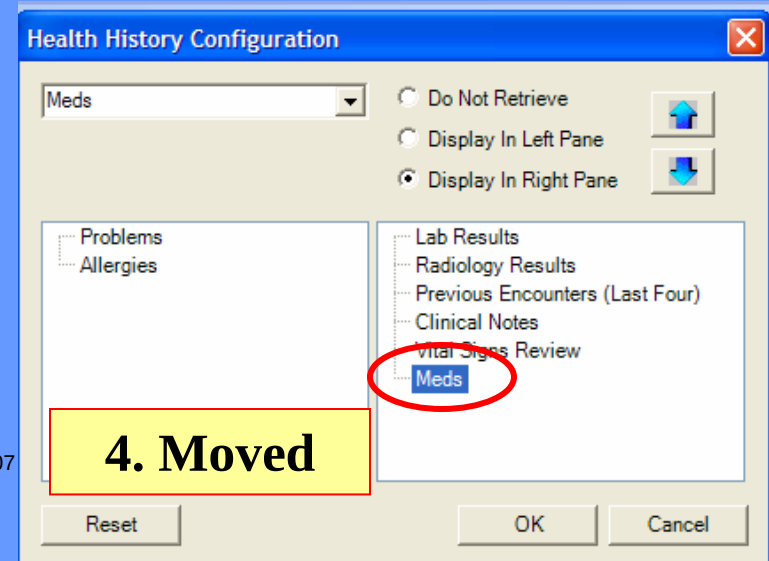
Changing the Display of Health Hx

Available Options:

1. Remove from list
2. Move Left or Right
3. Move Up or Down



3. OK



How to use the Health History Module

The HHM will be available for quick review of meds, allergies, problems, and recent lab/rads/appointment no matter what module you are in.

You can still use the lab/rad/pharm module to directly review those items. They will appear to work faster as the data was already retrieved.

The following slides show other possible uses.

1. Hover the mouse over the tab

2. Click the tack to the upright position

Next Slide

Current Encounter- Health History Module

3. When you click on the tack, the module will usually drop down to the bottom

4. Just find the top of the health hx bar, then *left click* on it to drag it up

The image is a composite of three screenshots from a medical software interface, illustrating the steps to access the Health History module.

Top Left Screenshot: Shows the 'Current Encounter' window. The 'Health History' tab is highlighted. A red box is drawn around the 'Health History' tab. A black arrow points down from the text '3. When you click on the tack, the module will usually drop down to the bottom'.

Top Right Screenshot: Shows the 'Current Encounter' window. The 'Health History' tab is highlighted. A red box is drawn around the 'Health History' tab. A dashed arrow points up from the text '4. Just find the top of the health hx bar, then *left click* on it to drag it up'.

Bottom Left Screenshot: Shows the 'Health History' window. The 'Health History' tab is highlighted. A red box is drawn around the 'Health History' tab. A red circle is drawn around a vertical double-headed arrow. Below this screenshot is the text '5. Now it will stay on the screen (this aids in reviewing the Health History)'.

Current Encounter- Health History Module

Adding Problems from the Health History Module to the PMH tab of the S/O Note

ALEXANDER, VIOLET W 20/202-45-5743 45yo F Col DOB:25 Jan 1962

Appointments / **Current Encounter** / Screening

Date: 23 Aug 2007 0930 EST Status: **In Progress** Treatment Facility: **CHCSII ITT Facility**
 Primary Provider: **USER, TEST** Type: **ACUT\$** Clinic: **CHCSII Test Clinic**
 Patient Status: **Outpatient**
 Reason for Appointment: cough & fever HTN followup
 Appointment Comments: middle age illnesses/perimenopause

AutoCite... AutoCites Refreshed by USER, TEST @ 20 Nov 2007 2242 EST

Health History

Problems

Problem	Comment
Hematologic disorder (unverified...pt reported)	
Essential hypertension	patient doing well and in continue of
Iron deficiency	

Allergies

Allergen
(DO NOT USE, NOT SCREENED) LATEX, NATURAL RUBBER ((DO NOT USE, NOT SCREENED)
ASPIRIN (ASPIRIN) (unverified...pt. reported)

Lab Results

Date Collected	Report
21 Aug 2007 0000	CBC W/...
21 Aug 2007 0000	Urinalysis
21 Aug 2007 0000	Chem 7

Radiology Results

Date	Procedure
24 Jul 2007 0000	Ultrasound Pelvis Non...
09 Aug 2007 0000	Right Ankle (Trauma) Sen...
09 Aug 2007 0000	L-Spine (1 View) Series Report

Previous Encounters (Last Four)

Date	Clinic/Location	Provider	Appt/Note Type	Status
23 May 2007 0800	CHCSII Test Clinic	DOCTOR, DAVID	Outpatient	Complete
16 Aug 2007 0120	CHCS II ITT DENTAL	USER, TEST	Dental	Complete

Clinical Notes

Date	Type	Status	Image	Clinician	Entered By	Edited By
22 Aug 2007	Patient Notes	Resolved		USER, TEST	USER, TEST	

USER, TEST in CHCSII Test Clinic at CHCSII ITT Facility

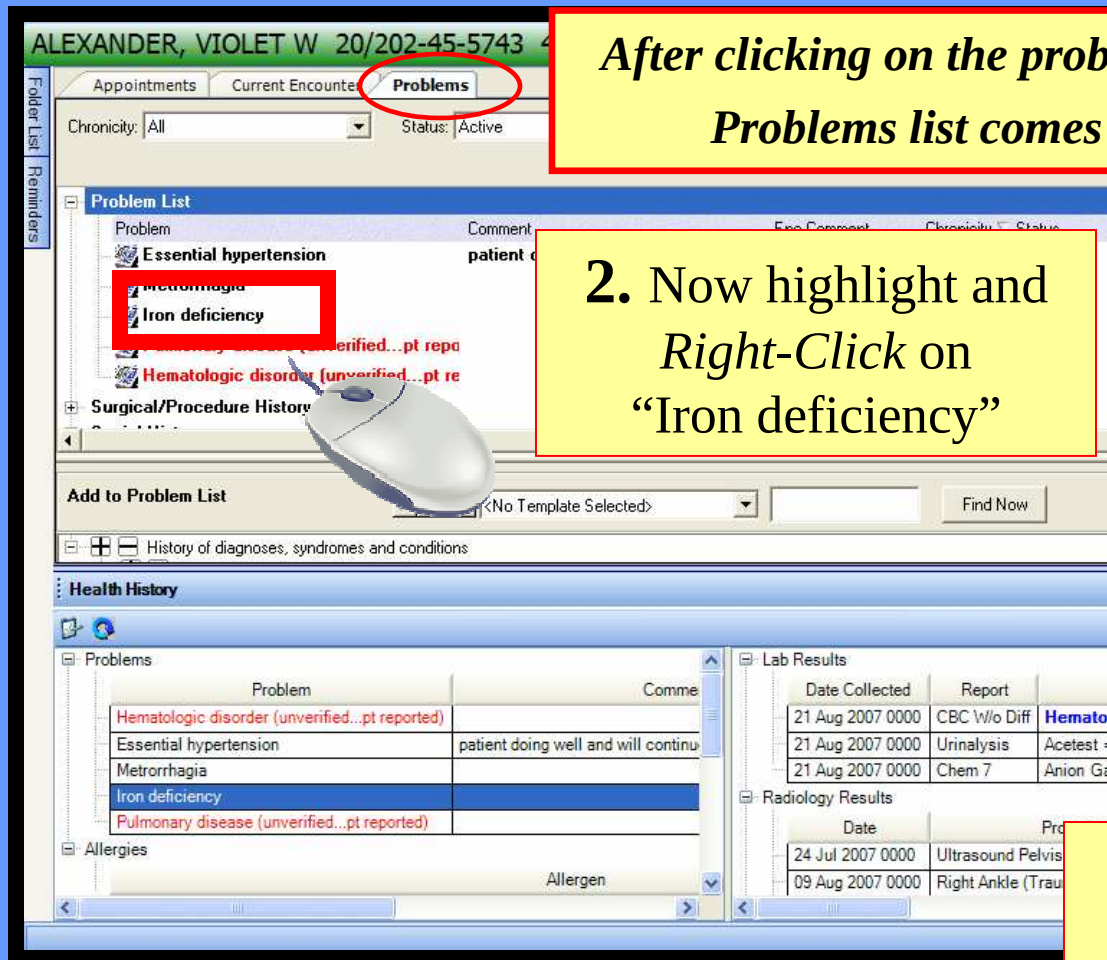
This is
their
problem
list

Let's add
**"Iron
deficiency"**
to their
PMH

1. Double-click
anywhere in the area
of the "Problems"

Next Slide

Current Encounter- Health History Module



Problems

Chronicity: All Status: Active

Problem List

Problem	Comment
Essential hypertension	
Metrorrhagia	
Iron deficiency	
Hematologic disorder (unverified...pt reported)	
Surgical/Procedure History	

Add to Problem List

<No Template Selected> Find Now

History of diagnoses, syndromes and conditions

Health History

Problems

Problem	Comment
Hematologic disorder (unverified...pt reported)	
Essential hypertension	patient doing well and will continue
Metrorrhagia	
Iron deficiency	
Pulmonary disease (unverified...pt reported)	

Allergies

Allergen

Lab Results

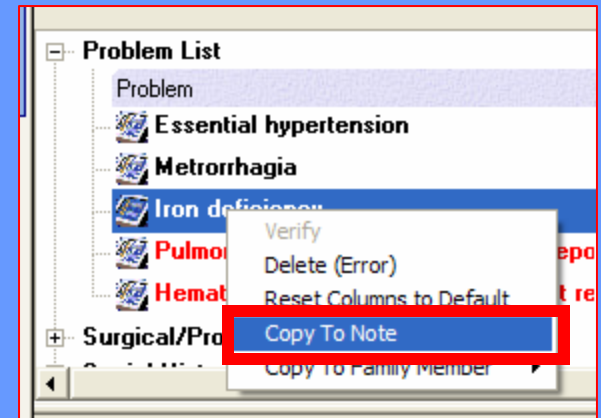
Date Collected	Report	Result
21 Aug 2007 0000	CBC w/o Diff	Hemato
21 Aug 2007 0000	Urinalysis	Acetest =
21 Aug 2007 0000	Chem 7	Anion Ga

Radiology Results

Date	Procedure
24 Jul 2007 0000	Ultrasound Pelvis
09 Aug 2007 0000	Right Ankle (Trau

After clicking on the problems, the Problems list comes up.

2. Now highlight and Right-Click on “Iron deficiency”



Problem List

Problem

- Essential hypertension
- Metrorrhagia
- Iron deficiency
- Pulmonary disease (unverified...pt reported)
- Hematologic disorder (unverified...pt reported)

Surgical/Procedure History

Context Menu:

- Verify
- Delete (Error)
- Reset Columns to Default
- Copy To Note**
- Copy to Family Member

3. You could copy to note or delete

**You can double-click on any field and it will display the module above the health hx
(you may need to hide the Health Hx in some cases)*

Current Encounter- Health History Module

Refresh Reminders Providers Template Mgt Forward Task Screen Vitals SO Drawing A/P Disposition Add Note Sign Save As Template Options Close

ALEXANDER, VIOLET W 20/202-45-5743 45yo F Col DOB:25 Jan 1962

Appointments **Current Encounter**

Date: 23 Aug 2007 0930 EST Status: **In Progress** Treatment Facility: CHCSII ITT Facility
 Primary Provider: USER, TEST Type: ACUT\$ Clinic: CHCSII Test Clinic
 Patient Status: Outpatient

Screening Screening Written by USER, TEST @ 30 Nov 2007 0554 EST
 Reason For Appointment: cough & fever HTN followup
 Reason(s) For Visit (Chief Complaint): Essential hypertension (Follow-Up);
 G0 T0 P0 A0 LC0. LMP: 01 Nov 2007. Date Basis: unknown.

Vitals Vitals Written by USER, TEST @ 30 Nov 2007 0555 EST
 BP: 122/66, HR: 66, RR: 16, Tobacco Use: No, Alcohol Use: No, Pain Scale: 0 Pain Free

S/O SO Note Written by USER, TEST @ 30 Nov 2007 0555 EST
Past medical/surgical history
 Diagnosis History:
 Iron deficiency

Health History

Problems

Problem	Comments
Hematologic disorder (unverified...pt reported)	
Essential hypertension	patient doing well and will continue
Metrorrhagia	
Iron deficiency	
Pulmonary disease (unverified...pt reported)	

Allergies

Allergen

Lab Results

Date Collected	Procedure	Result
21 Aug 2007 0000	CB	=> 10.1 => (L*)
21 Aug 2007 0000	Urinalys	=> Clear => , Bilirubin
21 Aug 2007 0000	Chem 7	=> 100 => , CO2 => 28 => ,

Radiology Results

Date	Procedure	Result
24 Jul 2007 0000	Ultrasound Pelvis Non Obstetric Report	ABNORMAL,PHONE REPORT
09 Aug 2007 0000	Right Ankle (Trauma) Series Report	Normal

Encounter 1703 SO Note was saved. USER, TEST in CHCSII Test Clinic at CHCSII ITT Facility

start Microsoft PowerPoint ... USER, TEST: AHLTA ... 8:10 AM

If you close the Problems Tab, You will see that the diagnosis has been copied into the S/O note

Current Encounter- Health History Module

COPYING LABS from the Health History Module to the S/O Note

ALEXANDER, [Name]

Appointments
Date: 23 Aug 2007
Primary Provider: US
Patient Status: Out
Reason: Appo
Appointment: middle

AutoCite... Auto

Health History

Problems

Problem	Comment
Hematologic disorder (unverified...pt reported)	
Essential hypertension	patient doing well and will continue on
Metrorrhagia	
Iron deficiency	
Pulmonary disease (unverified...pt reported)	

Allergies

Allergen
(DO NOT USE, NOT SCREENED) LATEX, NATURAL RUBBER ((DO NOT USE, NOT
ASPIRIN (ASPIRIN) (unverified...pt. reported)

Lab Results

Date Collected	Report	Result
21 Aug 2007 0000	CBC w/o Diff	Hematocrit => 33 => (L*). Hemoglobin => 10.1 => (L*).
21 Aug 2007 0000	Urinalysis	Acetest => Negative => , Appearance => Clear => , Bilirubin
21 Aug 2007 0000	Chem 7	Anion Gap => 10 => , Chloride => 100 => , CO2 => 28 => , t

Radiology Results

Date	Procedure	Result
24 Jul 2007 0000	Ultrasound Pelvis Non Obstetric Report	ABNORMAL, PHONE REPORT
09 Aug 2007 0000	Right Ankle (Trauma) Series Report	Normal
09 Aug 2007 0000	L-Spine (1 View) Series Report	Minor Abnormality

Previous Encounters (Last Four)

Appt/Note Type	Status
Outpatient	Complete
Dental	Complete

ian Entered By Edited B
TEST USER, TEST

SHI Test Clinic at CHCSII ITT Facility

start 5.3 Init Training DragonBar USER, TEST: AHLTA ... 5:05 AM

It is almost the same process as copying the problems with a few differences

Current Encounter- Health History Module

Double-click on the Lab you want to copy into the note.

Date: 23 Aug 2007 0930 EST Status: In Progress Treatment Facility: CHCSII ITT Facility
Primary Provider: USER, TEST Type: ACUT\$ Clinic: CHCSII Test Clinic
Patient Status: Outpatient
Reason for Appointment: middle age illnesses/pe
Appointment Comment: middle age illnesses/pe

AutoCite... AutoCites Refreshed b

Health History

Problems

Problem	Comment
Hematologic disorder (unverified, not reported)	
Essential hypertension	patient doing well and will continue on
Metronidazole	

Lab Results

Date Collected	Report	Result
21 Aug 2007 0000	CBC W/o Diff	Hematocrit => 33 => (L*), Hemoglobin => 10.1 => (L*)
21 Aug 2007 0000	Urinalysis	Acetest => Negative => , Appearance => Clear => , Bilirubin
21 Aug 2007 0000	Chem 7	Anion Gap => 10 => , Chloride => 100 => , CO2 => 28 => ,

Double-click here

Lab Results

Date Collected	Report	Result
21 Aug 2007 0000	CBC W/o Diff	Hematocrit => 33 => (L*), Hemoglobin => 10.1 => (L*),
21 Aug 2007 0000	Urinalysis	Acetest => Negative => , Appearance => Clear => , Bilirubin
21 Aug 2007 0000	Chem 7	Anion Gap => 10 => , Chloride => 100 => , CO2 => 28 => ,

Radiology Results

Provider	Appt/Note Type	Status
DOCTOR, DAVID	Outpatient	Complete
USER, TEST	Dental	Complete

Page Clinician Entered By Edited By

USER, TEST USER, TEST

Health History

USER, TEST in CHCSII Test Clinic at CHCSII ITT Facility

start 3.3 Init Training DragonBar USER, TEST: AHLTA ... 5 AM

Next Slide

Current Encounter- Health History Module

ALEXANDER, VIOLET W 20/202-45-5743 45yo F Col DOB:25 Jan 1962

Appointments Current Encounter Lab

Search Criteria
☒ Single Test ☐ Normal Display

DoD	Standard Lab	21 Aug 2007	21 Aug 2007	21 Aug 2007	CBC W/o Diff	Test User

Health History

Problems

Problem	Comment
Hematologic disorder (unverified...pt reported)	
Essential hypertension	patient doing well and will continue on
Metastatic	

Lab Results

Date Collected	Report	Result
21 Aug 2007 0000	CBC W/o Diff	Hematocrit => 33 => (L*), Hemoglobin => 10.1 => (L*)
21 Aug 2007 0000	Urinalysis	Acetest => Negative => , Appearance => Clear => , Bilirubin
21 Aug 2007 0000	Chem 7	Anion Gap => 10 => , Chloride => 100 => , CO2 => 28 => ,

Procedures

Procedure	Result Code
Ultrasound Pelvis Non Obstetric Report	ABNORMAL,PHONE REPORT
Right Ankle (Trauma) Series Report	Normal
L-Spine (1 View) Series Report	Minor Abnormality

(Last Four)

Clinic/Location	Provider	Appt/Note Type	Status
CHCSII Test Clinic	DOCTOR, DAVID	Outpatient	Complete
CHCS II ITT DENTAL	USER, TEST	Dental	Complete

Type Status Image Clinician Entered By Edited By

Type	Status	Image	Clinician	Entered By	Edited By
Patient Notes	Resolved		USER, TEST	USER, TEST	

Health History

Note that double clicking on the CBC only brings up the one test here

You may need to hide the health hx (click on the tack ) to see the results behind it

Next Slide

Current Encounter- Health History/Lab Module

After hiding the Health Hx Module, you can see the lab results

You can now **highlight** the results and then *Right-Click* to copy to note

Test / Result Name	Site/Specimen	Collection Date / Result Value
CBC W/o Diff	Site/Specimen	21 Aug 2007
Hematocrit	Whole Blood, NOS	33 (L*)
Hemoglobin	Whole Blood, NOS	10.1 (L*)
MCH	Whole Blood, NOS	27
MCHC	Whole Blood, NOS	
MCV	Whole Blood, NOS	
MPV	Whole Blood, NOS	
Platelet Count	Whole Blood, NOS	
RBC	Whole Blood, NOS	3.9
RDW	Whole Blood, NOS	12.0

Copy

Copy to Note

But what about the other labs?

Current Encounter- Health History/Lab Module

Refresh Options Close

ALEXANDER, VIOLET W 20/202-45-5743 45yo F Col DOB:25 Jan 1962

Reminders Folder List

Appointments Current Encounter **Lab**

Search Criteria

☒ Single Test ☐ Normal Display

☐ Display All Results For The Selected Test

☐ Display All Results

Origin	Type	Date Collected	Date Ordered	Date Resulted	Report	Ordering Provider	MTF/Facility	Site/Specimen	Sample	Priority	Status
DoD	Standard Lab	21 Aug 2007	21 Aug 2007	21 Aug 2007	CBC W/o Diff	Test User	CHCS II ITT	Whole Blood, NOS	Blood	Routine	Final

Display Criteria

☐ Ref Range/Units ☒ Vertical ☐ Horizontal Date a "Col

Test / Result Name	Site/Specimen	Collection Date
CBC W/o Diff	Site/Specimen	21 Aug 2007
Hematocrit	Whole Blood, NOS	33 (L*)
Hemoglobin	Whole Blood, NOS	10.1 (L*)
MCH	Whole Blood, NOS	27
MCHC	Whole Blood, NOS	32
MCV	Whole Blood, NOS	78 (L*)
MPV	Whole Blood, NOS	11
Platelet Count	Whole Blood, NOS	200
RBC	Whole Blood, NOS	3.9
RDW	Whole Blood, NOS	12.0

ec 2007 0051

Health History

Problems Lab Results

Next Slide

USER, TEST in CHCSII Test Clinic at CHCSII ITT Facility

Current Encounter- Health History/Lab Module

ALEXANDER, VIOLET W 20/202-45-5743 45yo F Col DOB:25 Jan 1962

Reminders Folder List

Appointments Current Encounter **Lab**

Search Criteria
Filter: All Orders Time... All time periods Tests: All ☒ Display All Results For The Selected Test ☐ Display All Results

Origin	Type	Date Collected	Date Ordered	Date Resulted	Report	Ordering Provider	MTF/Facility	Site/Specimen	Sample	Priority	Status
DoD	Standard Lab	21 Aug 2007	21 Aug 2007	21 Aug 2007	CBC W/o Diff	Test User	CHCS II ITT	Whole Blood, NOS	Blood	Routine	Final
DoD	Standard Lab	21 Aug 2007	21 Aug 2007	21 Aug 2007	Urinalysis	Test User	CHCS II ITT	Urine	Urine	Routine	Final
DoD	Standard Lab	21 Aug 2007	21 Aug 2007	21 Aug 2007	Chem 7	Test User	CHCS II ITT	Serum	Urine	Routine	Final

“Display All Results For The Selected Test”
will show the **1 selected** result here if you highlight a lab

01 Dec 2007 0117

Health History



Problems



Lab Results

Next Slide

Current Encounter- Health History/Lab Module

ALEXANDER, VIOLET W 20/202-45-5743 45yo F Col DOB:25 Jan 1962

Folder List Reminders

Appointments Current Encounter **Lab**

Search Criteria
 Filter: All Orders Time... All time periods Tests: All ☐ Display All Results For The Selected Test ☒ Display All Results

Origin	Type	Date Collected	Date Ordered	Date Resulted	Report	Ordering Provider	MTF/Facility	Site / Specimen	Sample	Priority	Status
DoD	Standard Lab	21 Aug 2007	21 Aug 2007	21 Aug 2007	CBC w/o Diff	Test User	CHCS				Final
DoD	Standard Lab	21 Aug 2007	21 Aug 2007	21 Aug 2007	Urinalysis	Test User					
DoD	Standard Lab	21 Aug 2007	21 Aug 2007	21 Aug 2007	Chem 7	Test User					

Display Criteria
☐ Ref Range/Units ☐ Vertical ☐ Horizontal

Test / Result Name	Site/Specimen	Result
CBC W/o Diff	Site/Specimen	
Hematocrit	Whole Blood, NOS	
Hemoglobin	Whole Blood, NOS	
MCH	Whole Blood, NOS	
MCHC	Whole Blood, NOS	
MCV	Whole Blood, NOS	
MPV	Whole Blood, NOS	
Platelet Count	Whole Blood, NOS	
RBC	Whole Blood, NOS	
RDW	Whole Blood, NOS	12.0
WBC	Whole Blood, NOS	7.0
Urinalysis	Site/Specimen	21 Aug 2007

Health History

01 Dec 2007 0604

“Display All Results”
 All Results shown here
 (scroll down to see them
 all)

Reminders Pop-up Window

This feature was design to help with point of care decision support.

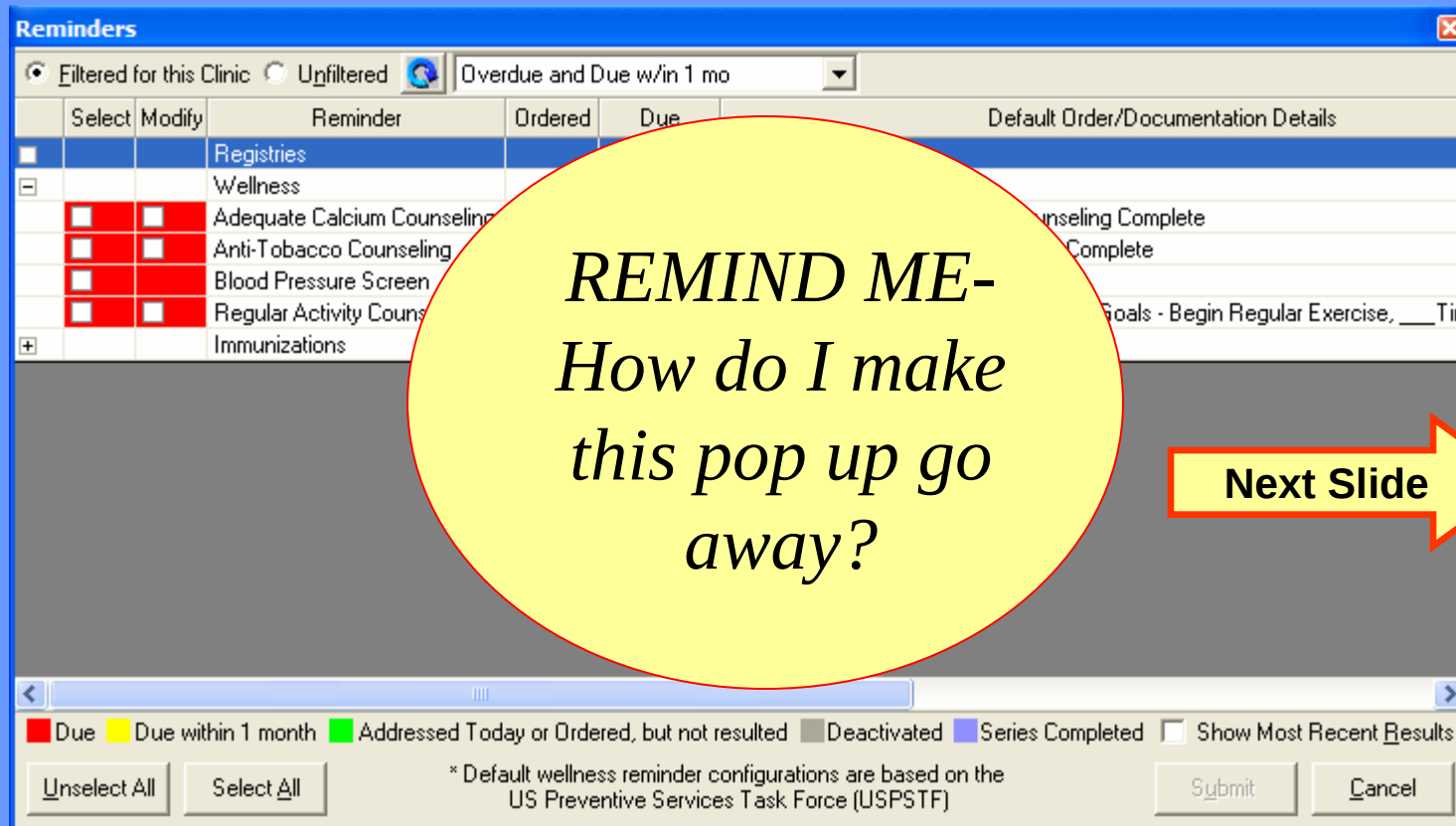
The decision support include Immunizations, a select group of US Preventive Health Task force guidelines, select military readiness items, and will include registry items as the registries (disease, condition, cohort) are built.

The Pop Up is primary intended for the screening staff as the providers see the Reminder items in the Wellness Reminder tab in the A/P module.



Current Encounter- Reminders Pop-up Window

Making Reminders Go Away



A trick guaranteed to make you their hero!

Current Encounter- Reminders Pop-up Window

USER, TEST: AHLTA (Privacy Act of 1974/FOUO) - Training System

File Edit View Go Tools Actions Help

WILLIAMS, CLAYTON U 20/967-62-8867 66yo M Ret:CAPT DOB:10 Nov 1941

Appointments **Current Encounter**

Date: 23 Aug 2007 1100 EST Status: **In Progress** Treatment Facility: CHCSII ITT Facility
 Primary Provider: USER, TEST Type: ROUT Clinic: CHCSII Test Clinic
 Patient Status: Outpatient

Reminders

Reason for

AutoCites

Problems Chronic: Conges

Screening

Reason for

Injury/Acc

Date of Ac

Place of A

Related C

Vitals

S/O

Drawing

A/P

A/P Last U

1. CRU SH

2. pain in the leg (below the knee)

3. accident caused by explosion - automobile tire

Disposition

Disposition Last Updated by USER, TEST @ 27 Nov 2007 0638 EST
 Released w/ Work/Duty Limitations
 Follow up: with PCM.
 Discussed: Diagnosis, Medication(s)/Treatment(s), Alternatives, Potential Side Effects with Patient who indicated understanding.

USER, TEST in CHCSII Test Clinic at CHCSII ITT Facility

Reminders Pop-up Window

Filtered for this Clinic Unfiltered Overdue and Due w/in 1 mo

Select	Modify	Reminder	Ordered	Due	Default Order/Documentation Details
☐	☐	Registries			
☐	☐	Wellness			
☒	☒	Adequate Calcium Counseling		8/22/2007	Document Adequate Calcium Counseling Complete
☒	☒	Anti-Tobacco Counseling		8/22/2007	Document Anti-tobacco Counseling Complete
☒	☒	Blood Pressure Screen		8/22/2007	ENTER: Blood Pressure
☒	☒	Regular Activity Counseling		8/22/2007	OTHER THERAPIES ORDER: Patient Goals - Begin Regular Exercise, ___ Tim
☐	☐	Immunizations			

1. Right-Click here in the GREY area

Due Due within 1 month Addressed Today or Ordered, but not resulted Deactivated Series Completed Show Most Recent Results

Unselect All Select All

* Default wellness reminder configurations are based on the US Preventive Services Task Force (USPSTF)

Submit Cancel

Radiology(ies): -CT, HEAD WITH AND WITHOUT CONTRAST GP (Routine) Start Date: 11/27/2007 Order Date: 11/27/2007 06:46 Impression: l;kk;kk;k

Next Slide

Current Encounter- Reminders Pop-up Window

Reminders

☒ Filtered for this Clinic
 ☐ Unfiltered
 Overdue and Due w/in 1 mo

Select	Modify	Reminder	Ordered	Due	Default Order/Documentation Details
☐		Registries			
☐		Wellness			
☒	☒	Adequate Calcium Counseling		8/22/2007	Document Adequate Calcium Counseling Complete
☒	☒	Anti-Tobacco Counseling		8/22/2007	Document Anti-tobacco Counseling Complete
☒	☒	Blood Pressure Screen		8/22/2007	ENTER: Blood Pressure
☒	☒	Regular Activity Counseling		8/22/2007	OTHER THERAPIES ORDER: Patient Goals - Begin Regular Exercise, ___ Tim
☐		Immunizations			

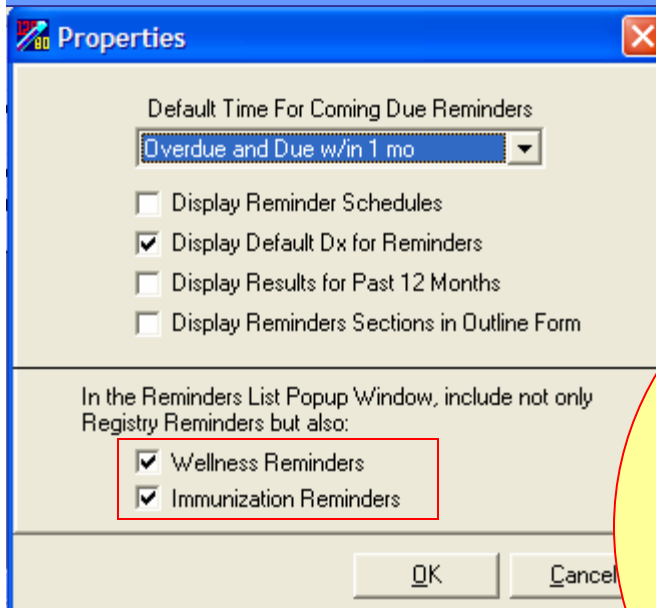
☒ Due
 ☐ Due within 1 month
 ☐ Addressed To
 ☐ Series Completed
 ☐ Show Most Recent Results

2. Click on
“Properties”

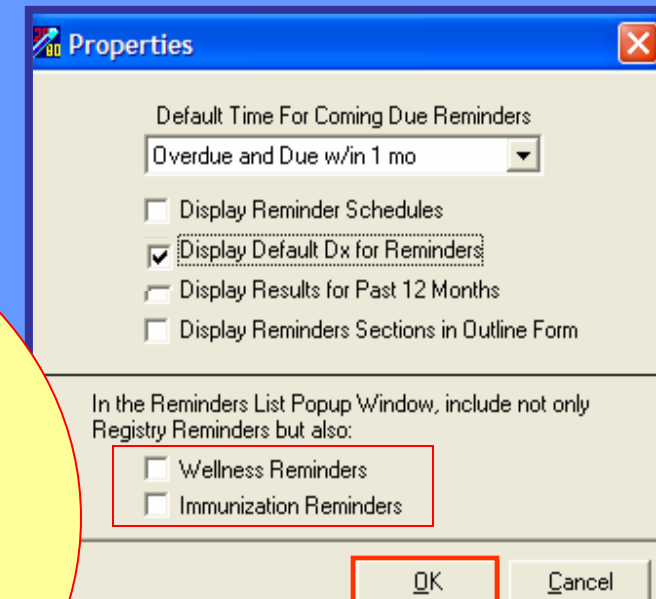
Next Slide

Current Encounter- Reminders Pop-up Window

How it is
set now



What you want it to
look like



3. Unselect
Wellness
Reminders and
Immunization
Reminders

4. OK

Current Encounter- Reminders Pop-up Window**Make Reminders Pop Up Go Away**

- 1. When the Reminder comes up, Right-Click in the Grey area**
- 2. Properties**
- 3. Deselect Wellness Reminders and Immunizations Reminders**
- 4. OK**

HINT: you cannot stop the Reminders pop-up for patients that are enrolled in a registry

HINT: Screening staff should leave the pop ups on To address issues at screening. Providers address Reminders in the A/P module – Wellness tab

Current Encounter- Reminders Pop-up Window

How to make the Reminders Pop Up Window Come Back for All Patients

2

Reminders

1

Current Encounter

1. Go to Current Encounter Module on any patient

2. Click on “Reminders” tab

The screenshot shows a medical software interface. At the top, there is a menu bar with options: Edit, View, Go, Tools, Actions, Help. Below the menu bar, there is a toolbar with icons for Reminders, Providers, Template Mgt, Forward Task, Screen, Vitals, SO, Drawing, and A/P. The main display area is divided into several sections. On the left, there is a 'Folder List' with a tree view showing various patient data categories. The 'Current Encounter' folder is selected. The main display area shows patient information for ALEXANDER, VIOLET W. The 'Reminders' tab is active, showing a list of reminders. The 'Current Encounter' tab is also visible, showing patient information and notes. The 'Reminders' tab shows a list of reminders with columns for Date, Time, and Status. The 'Current Encounter' tab shows patient information including Date, Time, Status, Primary Provider, Patient Status, Reason for Appointment, Appointment Comments, and Allergies. The 'Reminders' tab also shows a list of reminders with columns for Date, Time, and Status. The 'Current Encounter' tab also shows a list of notes with columns for Date, Time, and Status.

Folder List

- Appointments
- Telephone Consults (3)
- Search
- New Results (16)
- Tasking (1)

Reminders

Current Encounter

Date: 06 Dec 2007 11:25 EST

Status: In Progress

Primary Provider: USER, TEST

Type: ACUT\$

Patient Status: Outpatient

Reason for Appointment: cough & fever HTN followup

Appointment Comments: middle age illnesses/perimenopause

ST @ 07 Dec 2007 11:25 EST

Allergies

Screening

Vitals

S/O

Drawing

A/P

Disposition

AddNote

SO Note Written by USER, TEST @ 07 Dec 2007 16:17 EST

History of present illness

The Patient is a 45 year old female.

She reported: Fever and chills.

A/P Last Updated by USER, TEST @ 07 Dec 2007 16:16 EST

1. BREAST ABSCESS (NONPUERPERAL)

Disposition Last Updated by USER, TEST @ 07 Dec 2007 16:17 EST

Released w/o Limitations

Follow up: with PCM.

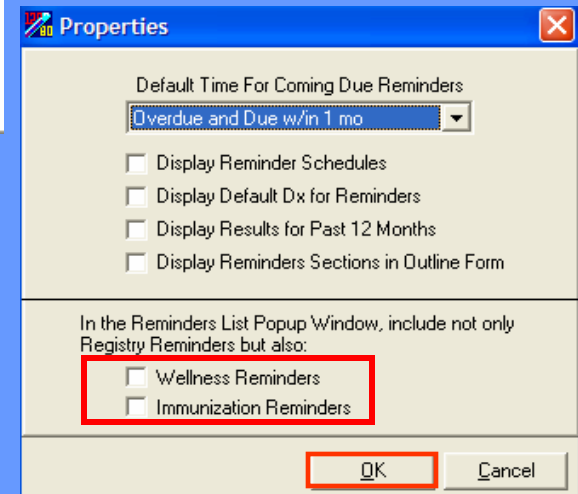
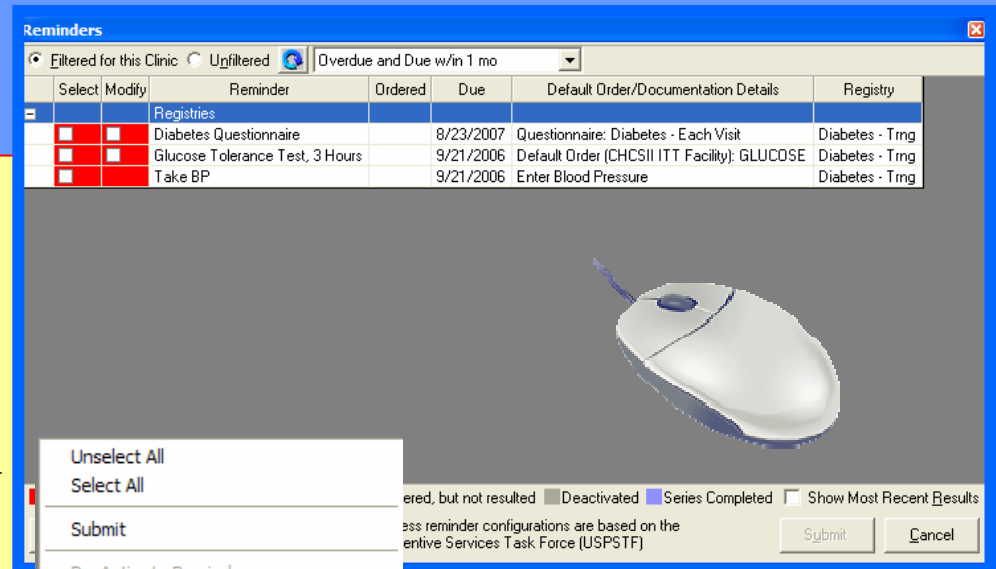
Discussed: Diagnosis, Medication(s)/Treatment(s), Alternatives, Potential Side Effects with

Next Slide

Current Encounter- Reminders Pop-up Window

How to make the Reminders Pop Up Window Come Back for All Patients

1. *Right-Click* in the Grey Area again
2. Properties
3. Reselect Wellness Reminders and Immunization Reminders
4. OK



Pregnancy History



Current Encounter- Screening Module- Pregnancy History

AHLTA 838

New Format for Documenting Pregnancy Hx

Female Only Data

☐ Pregnant ☐ Last Menstrual Period 11/30/2007

☐ Post Menopause ☐ Estimated DOB 11/30/2007

☐ Post Hysterectomy

Birth Control Method (optional)

☐ Abstinence
☐ Birth Control Pill
☐ Condom
☐ Diaphragm
☐ Foam

G P A LC

...

If the patient is pregnant, the Last Menstrual Period and EDD are required to be entered before encounter is signed. All other fields are optional.

G (gravida) = # pregnancies

T (term) = # pregnancies carried to term

P (preterm) = # pregnancies not carried to term

A (abortions) = # pregnancies that were terminated
(this field can be modified as spontaneous, elective, ectopic)

LC (living children) = # living children

AHLTA 3.3

Female Only Data

☐ Pregnant ☐ Post Menopause ☐ Post Hysterectomy

Last Menstrual Period Risk Level

EDD

G T P A LC

...

Prepregnancy Weight
 lbs kgs

If the patient is pregnant, the Last Menstrual Period and EDD are required to be entered before encounter is signed. All other fields are optional.

Current Encounter- Screening Module- Pregnancy History

The OB Wheel Reinvented

Female Only Data

☐ Pregnant ☐ Post Menopause ☐ Post Hysterectomy

Last Menstrual Period Risk Level

EDD

G T P A LC

Prepregnancy Weight lbs kgs

If the patient is pregnant, the Last Menstrual Period and EDD are required to be entered before encounter is signed. All other fields are optional.

1. EDD automatically calculates the Estimated Date of Delivery from LMP

2. You can assign a risk (if known) from drop down list

3. If you need to override the EDD, you can select what the date is based on

Female Only Data

☒ Pregnant ☐ Post Menopause ☐ Post Hysterectomy

Last Menstrual Period Risk Level

EDD

G T P A LC

Prepregnancy Weight lbs kgs

If the patient is pregnant, the Last Menstrual Period and EDD are required to be entered before encounter is signed. All other fields are optional.

Comments

LMP Known
LMP Known
Ultrasound
Outside Ultrasound
Known Conception
Based on HCG Test
Other
Unknown

Don't forget

Need OB Summary View

Pediatric Growth Charts



Current Encounter- Vital Signs Entry

Pediatric Growth Charts

The screenshot shows a medical software interface for a patient named MARCOS, FREDERICK B, born 01/013-97-9876, 17 months old, male, with a date of birth of 15 Jun 2006. The interface is divided into several sections:

- Folder List (Left):** A tree view showing various medical folders. The 'Current Encounter' folder is expanded, and the 'Vital Signs Entry' sub-folder is highlighted with a red arrow. A yellow box with the text 'Select "Vital Signs Entry" Tab' points to this sub-folder.
- Current Encounter (Top):** A tabbed interface with 'Vital Signs Entry' selected. The 'Growth Chart' sub-tab is also highlighted with a red box.
- Vital Signs Entry (Main):** A form for entering patient data. It includes fields for Date (04 Dec 2007 14:33), Visual Acuity, Oxygen Sat., and Peak Flow. Below these are sections for Standard Vital Signs (BP, HR, RR, Temperature), Habits (Tobacco, Alcohol), Head Circumference, Height/Weight, BMI, BSA, and Pain Severity (0-10 scale). A 'Display Orthostatic' button is also present.
- Comments (Bottom):** A large text area for entering patient comments.
- Buttons:** 'OK' and 'Cancel' buttons are located at the bottom right of the form.

A yellow arrow labeled 'Next Slide' points to the right, indicating the next step in the process.

Current Encounter- Vital Signs Entry

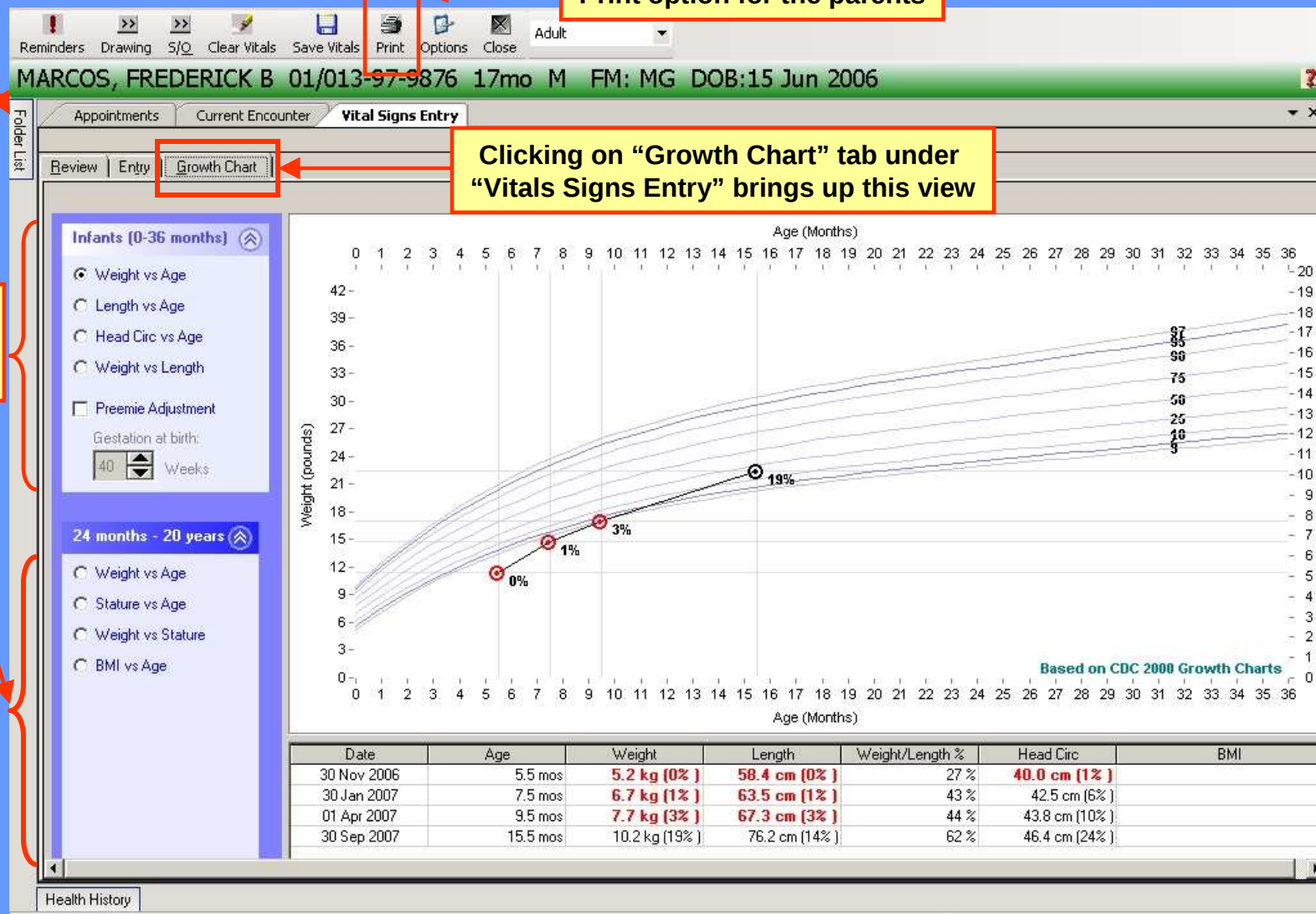
Pediatric Growth Charts

With Folder List hidden

Print option for the parents

Clicking on "Growth Chart" tab under "Vitals Signs Entry" brings up this view

Ability to Rapidly select

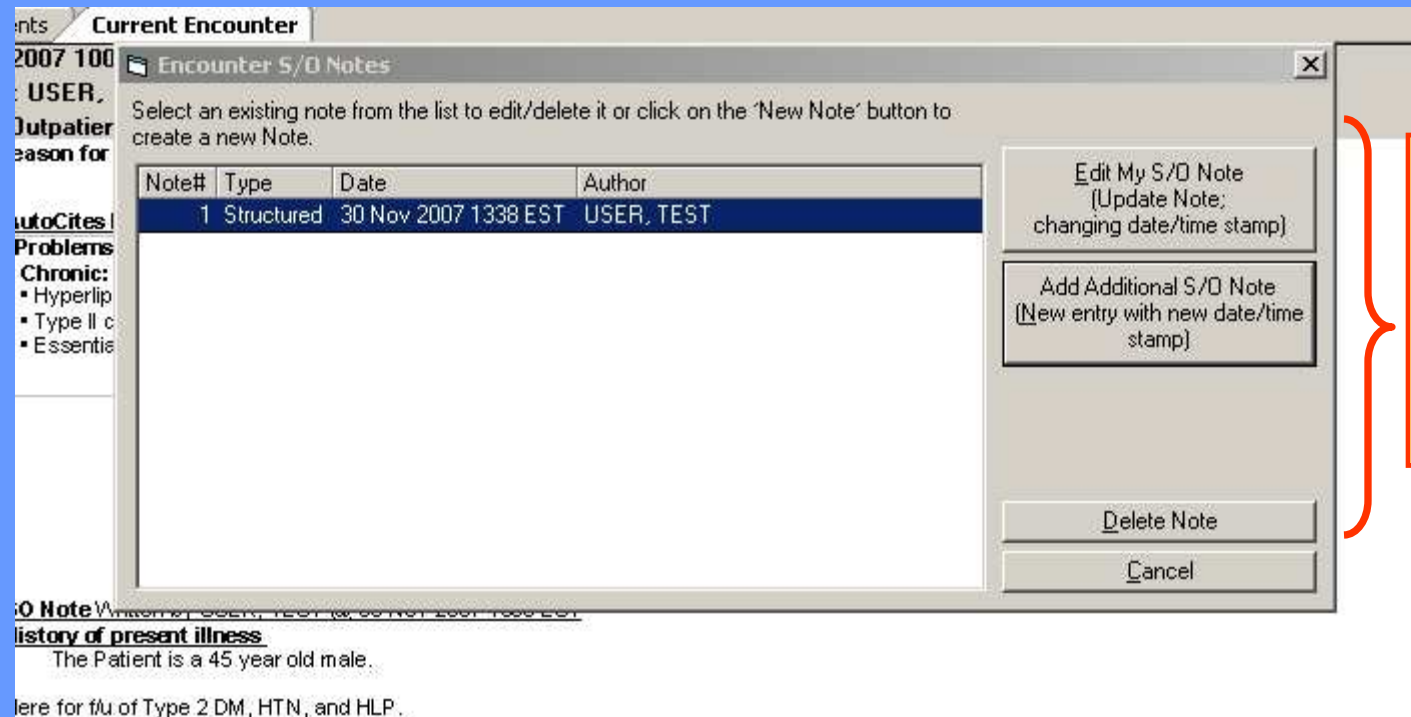


Edit S/O Note



What's New in AHLTA 3.3_Week1_7Dec07

Streamlined Method to Edit S/O Note



**Choices are
now
clearly
labeled**

If you are taking over a note started by someone else the screen will indicate that action is occurring and the previous note is being moved to change history.

S/O Enhancements: Personal Option to Automatically ADD Positive ROS to HPI

This feature helps to make a more readable note with MEDCIN as POSITIVE (abnormal) ROS items are automatically placed into the HPI section.

This will not impact the E/M coding of your note.

For many people who just use templates this can help since you can document from the ROS and complete HPI.



S/O Enhancements- Positive ROS to HPI

Save Save As Reminders Template Mgt Dx Prompt FindTerm Browse From Here Drawing A/P Disposition Sign Cancel Close

WILLIAMS, CLAYTON U 20/967-62-8867 65yo M Ret:CAPT DOB:10 Nov 1942

Appointments Current Encounter S/O

<< >> 2007 MASTER TEMPL AutoNeg ROS/HPI History FamHist Prompt I Prompt ListSize 1

Entry details for current selection:

Headache lasting for one to three days

Duration (numeric) Onset Value Unit

HPI MH ROS PE Tests Browse

Templates (Diagnoses, Syndromes And Conditions)

- ☐ Feeling tired (fatigue)
- ☐ No fever
- ☐ No chills
- ☐ Headache
- ☒ Headache located
- ☒ Headache quality
- ☒ Headache severity
- ☒ Headache lasting
- ☐ Headache lasting for a few minutes or less
- ☐ Headache lasting for a few hours
- ☒ Headache lasting for one to three days
- ☐ Headache lasting more than a week
- ☒ Headache timing
- ☒ Headache occurring
- ☐ Headache precipitated
- ☐ Headache worse
- ☐ Headache relieved
- ☐ Headache associated
- ☐ Headache preceded
- ☐ Headache preceded by aura
- ☒ Headache accompanied
- ☐ Neck pain
- ☐ Red eyes
- ☐ No hearing loss
- ☐ No earache
- ☐ Nasal discharge
- ☐ Sore throat
- ☐ Chest pain or discomfort
- ☐ Palpitations
- ☐ Dyspnea
- ☐ Cough
- ☐ Nausea
- ☐ Vomiting
- ☐ Abdominal pain
- ☐ Bright red blood per rectum
- ☐ Diarrhea

History of present illness

The Patient is a 65 year old male.
He reported: Feeling tired (fatigue).
Headache lasting for a few hours and for one to three days.

Review of systems

Systemic symptoms: No fever and no chills.
Otolaryngeal symptoms: No hearing loss and no earache.

“+” ROS findings auto-flipped to HPI

Negative ROS findings stay in ROS

Add to Default Template

S/O Enhancements- Positive ROS to HPI

File Edit View Go Tools Actions Help

Refresh Reminders Providers Template Mgt Forward Task Screen Vitals SO Drawing A/P Disposition Add Note Sign Save As Template Options Close

SUAREZ, EDUARDO A 20/454-72-3217 45yo M LCDR DOB:10 Sep 1962

Folder List

Appointments: **Current Encounter**

Date: 30 Nov 2007 1000 EST Status: In Progress Treatment Facility: CHCSII ITT Facility
 Primary Provider: USER, TEST Type: EST Clinic: CHCSII Test Clinic
 Patient Status: Outpatient
 Reason for Appointment: diabetes/diabetes followup

AutoCite... AutoCites Refreshed by USER, TEST @ 30 Nov 2007 0832 EST

Problems

Chronic:

- Hyperlipidemia
- Type II diabetes mellitus
- Essential hypertension

Allergies

Screening

Vitals

S/O **SO Note** Written by USER, TEST @ 30 Nov 2007 1406 EST
History of present illness
 The Patient is a 45 year old male.
 Here for f/u of Type 2 DM, HTN, and HLP.

Drawing

A/P **A/P** Last Updated by USER, TEST @ 30 Nov 2007 0910 EST

Disposition

AddNote

Health History

In "Current Encounter" module select "Options" button to access the "Encounter Summary Properties" to see the defaults selected by AHLTA

Next Slide

Encounter Summary Properties



S/O Enhancements- Encounter Summary Properties

“Encounter Summary Properties” from the “Options” button

By default, these boxes are NOT Selected. You should check them. It will speed work in A/P module

By default, these boxes are selected

Encounter Summary Properties

Signature Block:

Line 1: **USER, TEST**

Line 2: Training Tool Application

Line 3: CHCS/ITT Facility

Co-Signer: (Not Yet Selected) Search Clear

☐ Default to Co-Signer Required

AutoCite preferences:

☒ Problems ☐ Family Hx

☒ Allergies ☐ Questionnaires

☐ Active Medications ☐ Expired Medications

☐ Procedures ☐ Social Hx ☐ Other PMH

☐ Registry Items

☐ Vitals	Last	1	Hours	Days	Months	Years
☐ Labs	Last	1	Hours	Days	Months	Years
☐ Rads	Last	1	Hours	Days	Months	Years

A/P Active Order Default:

☐ Show Active Medication Orders Window when Opening Order Tabs

☐ Show Active Laboratory Orders Window when Opening Order Tabs

☐ Show Active Radiology Orders Window when Opening Order Tabs

S/O Default

☒ Automatically convert positive ROS findings to HPI

☒ Merge DxPrompt / Prompt with Default Template

Disposition Follow Up Discussed with Default: Patient

E&M Calculator Defaults

Setting: Outpatient Service Type: Outpatient Visit Exam Type: General Multi-System

☐ Auto-Print ☐ Sensitive

☐ Auto-save S/O every 0 Min.

Notice only 2 checked by default . Add other items you want except expired meds.

All “+” ROS findings are flipped to the HPI by default settings. This provides a more meaningful HPI

Leave as “0” or set at 10 minutes. Anything lower than 10 can really slow you down

S/O Enhancement Multiple Instances of Base Terms

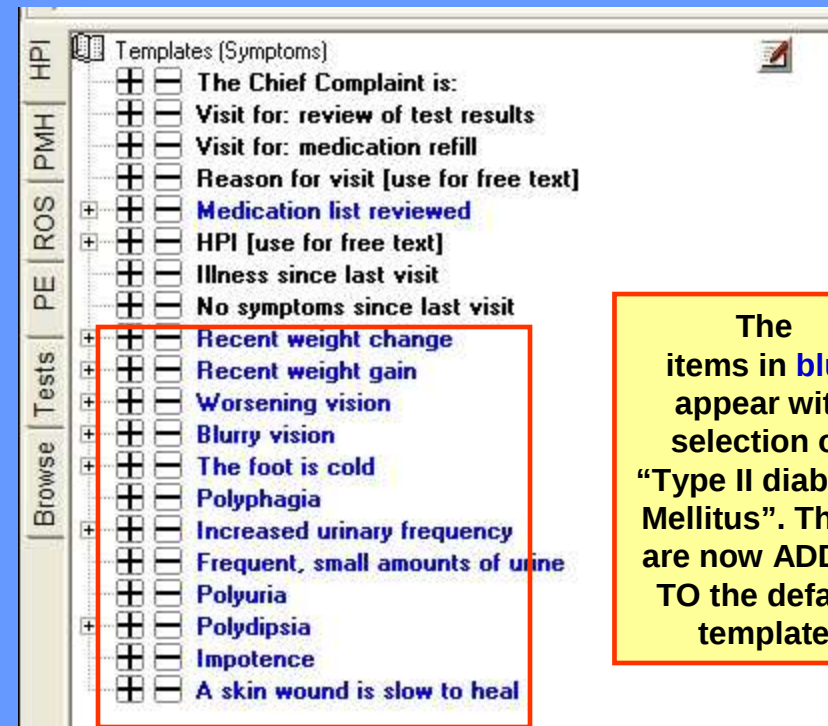
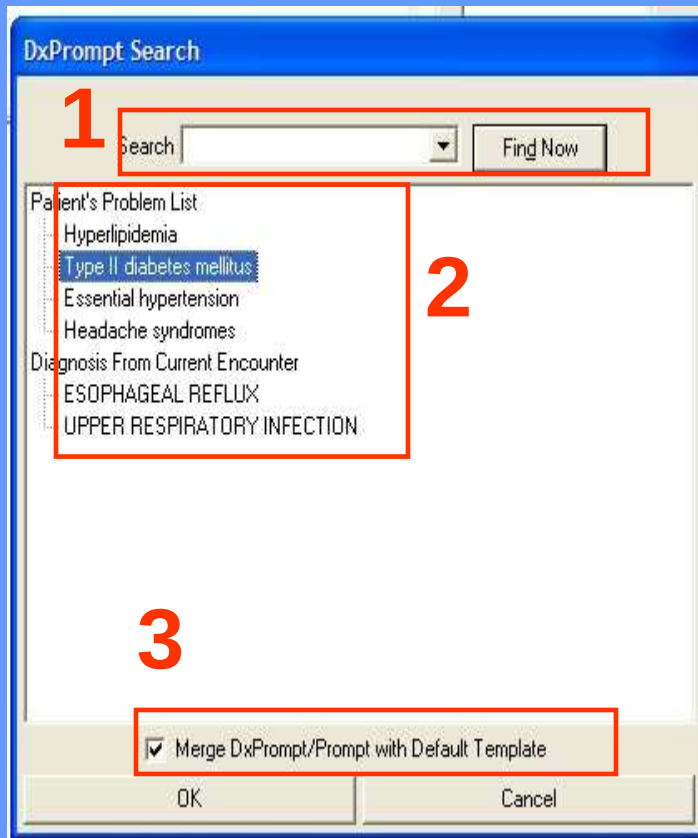


Dx Prompt Changes



S/O Enhancements- Dx Prompt Changes

1. Can now search and view in the same box
2. Patient's problem list and diagnosis from current encounter included by default
3. New checkbox to merge DxPrompt/Prompt with default template



The items in blue appear with selection of "Type II diabetes Mellitus". These are now ADDED TO the default template

S/O Enhancements- Dx Prompt with AIM Forms

"Dx Prompt" now available in AIM forms

Search results from "Dx Prompt" appear in "Note View" merged with AIM form contents

Privacy Act of 1974 (FOUO)

Actions Help

Template M... Dx Prompt FindTerm Browse From Here Drawing A/P Disposition Sign Cancel Close

DONNA 26/000-72-1119 34yo F MAJ DOB:19 Nov 1972

Appointments Current Encounter **S/O**

<< >> Home - FP--General--AMEDD AutoNeg Undo Details Browse Shift Browse **Note View** Outline View

HPI ROS Physical Exam Well Woman Colposcopy/Laryngoscopy Vasectomy Misc Minor Procedures PFTs/ECG Help

Documentation recommendations:
Under HPI document the reason for the visit with attention to the elements of duration, onset, and alleviating/exacerbating factors using free text if structured items can not be found easily.
Include pertinent positives and negatives under ROS.

☒ ☐ This is a new consult visit

HPI (con't) -- Military/Background Info

☒ ☐ This Visit is Deployment-related

Branch of Service: ☒ USA ☒ USN ☒ USAF ☒ USMC

Source of information: ☒ Patient ☐

Reliability of source of patient information: ☐

Past Medical / Surgical History

Personal History

☒ Reviewed Social Hx

☒ ☐ Tobacco Use

☒ ☐ Alcohol Use

☒ ☐ Caffeine Use

☒ ☐ Herbal Medicines

☒ ☐ Drug Use

Hint: If you completed the A/P section first, the diagnosis for this visit will be displayed so you do not have to search for it twice.

Hint: When you find a term that you use often, you can right click and add it to your default encounter template.

A/P Enhancement Dx Tab



A/P Enhancement-Dx Tab

Diagnosis tab displays the patient's problem list from Problems module and any Dx Prompt search terms from the S/O module

Diagnosis | Order Sets | Order Med | Other Therapies | Find Now

2007 MASTER

Patient Problem List / DxPrompt

ICD	Diagnosis
☐ DxPron	
250.00	Type II diabetes mellitus
☐ Patient	
272.4	Hyperlipidemia
250.00	Type II diabetes mellitus
401.9	Essential hypertension
784.0	Headache syndromes

Templates / Search Results

ICD	Diagnosis
477.9	ALLERGIC RHINITIS
493.90	ASTHMA
796.2	Blood Pressure Isolated Elevated
786.50	chest pain or discomfort
250.00	DIABETES MELLITUS TYPE II
530.81	ESOPHAGEAL REFLUX
401.9	ESSENTIAL HYPERTENSION
272.4	HYPERLIPIDEMIA
244.9	HYPOTHYROIDISM
724.2	LUMBAGO
278.00	OBESITY
719.46	PATELLOFEMORAL SYNDROME
465.9	UPPER RESPIRATORY INFECTION
079.99	VIRAL SYNDROME
V68.1	visit for: issue repeat prescription for medication
V70.3	visit for: student physical
V70.3	visit for: examination for sports competition
V68.0	visit for: issue medical certificate
V70.5	visit for: military services physical
V72.93	Visit for: preoperative exam

Add to Encounter | Add to Default Template

Hint: Use the patient current diagnosis list to enter those diagnosis addressed during the encounter.

This saves you time searching for diagnosis.

This DECREASES the clutter on the problem list from “like” diagnosis.

A/P Enhancement

Managing Default Template

Hint: You want a default template. If you have not set one you have one by default. The default is that you get the entire MEDCIN tree and NO orders.

Now with by setting a template as your default, you can add orders that you customize as you write them. They will then be available as an order set when you go to A/P module. It is your personal order set.

The default template should be the template that you either use for most visit or you can use it just to have all your favorite and high volume orders ready for quick use.

Don't waste time looking the same thing up over and over again then modifying to your liking.

Note: With a default template you can attach an AIM form for S/O documentation AND you can still use any other template or AIM form from your favorites.



A/P Enhancement-Managing Default Template

Home icon added to bring user back to Default Template at any time

Right click menu let's user add or remove items to/from Default template

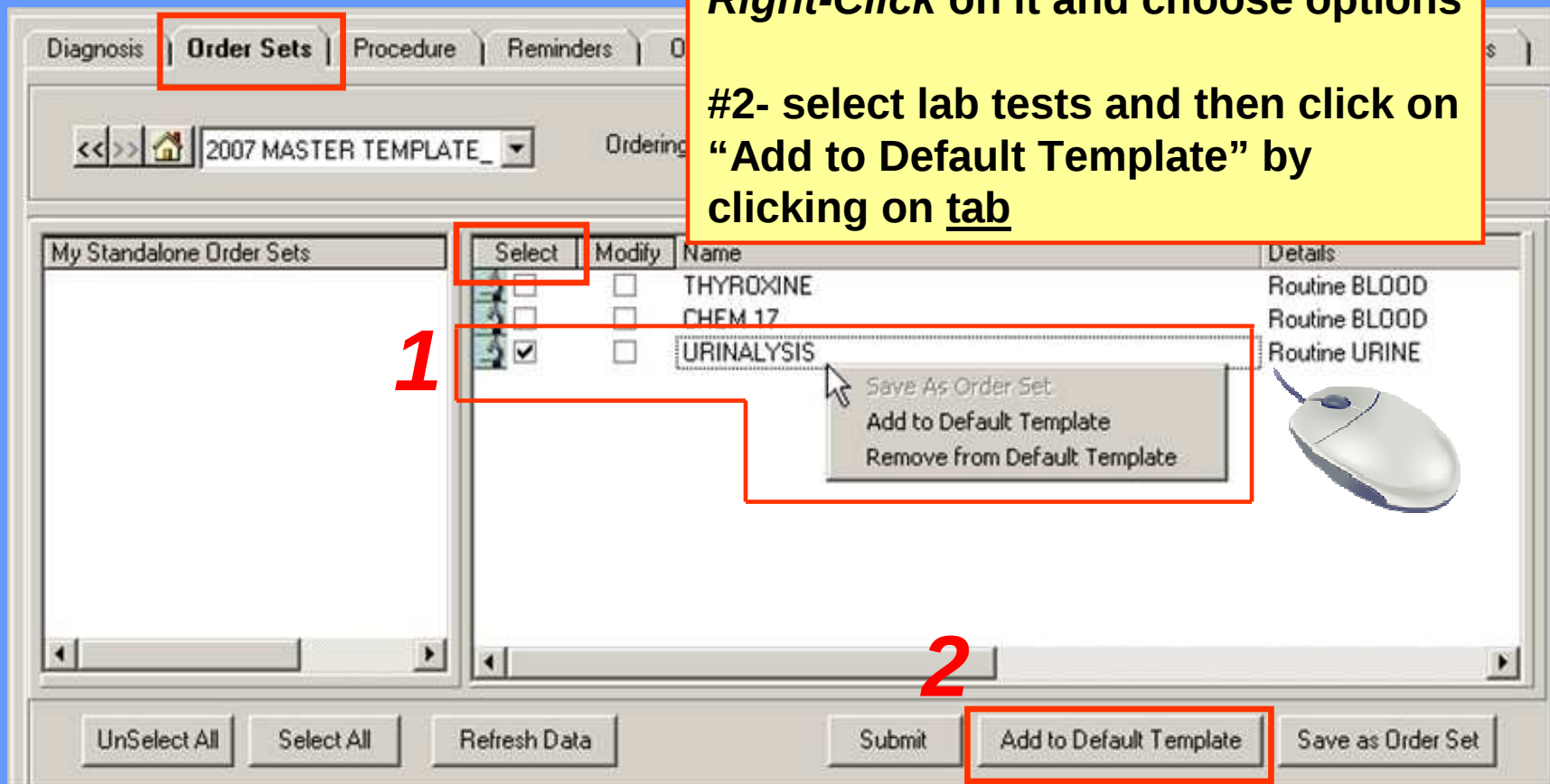
Added this tab to make changes to Default Template on-the-fly

HINT: Users may add the Diagnosis, Procedures, Order Sets, and Other Therapies to their Default Template on-the-fly from within the A/P modules during an encounter.

What's New in AHLTA 3.3_Week1_7Dec07

A/P Enhancement-Managing Default Template

There are 2 options here:
#1- first select the lab test then **Right-Click** on it and choose options
#2- select lab tests and then click on “Add to Default Template” by clicking on tab



A/P Enhancement-Managing Default Template

The screenshot displays the AHLTA A/P interface with the 'Other Therapies' module selected. A red box highlights the 'Other Therapies' tab in the top navigation bar. Another red box highlights the dropdown menu showing '<No Template Selected>'. A third red box highlights the list of patient instructions under the 'Description of Patient Instruction' section. A fourth red box highlights the 'Add to Default Template' button at the bottom right. A yellow callout box points to the dropdown menu with the text: "Other Therapies" module now pre-populated by default if "No Template Selected". A larger yellow callout box contains the text: HINT: Users may add the Diagnosis, Procedures, Order Sets, and Other Therapies to their Default Template on-the-fly from within the A/P modules during an encounter.

Diagnosis | Order Sets | Procedure | Reminders | Order Consults | Order Lab | Order Rad | Order Med | **Other Therapies**

<< >> <No Template Selected>

"Other Therapies" module now pre-populated by default if "No Template Selected"

HINT: Users may add the Diagnosis, Procedures, Order Sets, and Other Therapies to their Default Template on-the-fly from within the A/P modules during an encounter.

Description of Patient Instruction

- + Administration Of Anesthesia
- + Assessment and Complications Of Therapy
- + Basic Management Principles
- + Basic Management Procedures And Services
- + Conscious Sedation
- + Contingency Plans
- + Doctor's Orders For Patient Care
- + Explanation Of Plan
- + Free Text
- + Goals, Options, Limitations and Risks
- + Home Care
- + Management Of Patient Visit
- + Medical Supplies And Equipment
- + Nursing Care
- + Office And Lab Procedures
- + Other: [Use For Free Text]
- + Outcomes
- + Physician List

Add

Add to Default Template

A/P Enhancement Radiology Location Box



A/P Enhancement- Radiology Location Box

The screenshot displays the AHLTA A/P (Appointment/Procedure) interface. At the top, a patient header shows 'BERG, OLAF V 20/245-63-8943 55yo M Ret:VADM DOB:10 Feb 1952'. The 'A/P' tab is active, showing a table with columns for Priority, ICD, Diagnosis, Chronic/Acute, and Type. A yellow callout box highlights the text: 'New change by adding “Radiology Location” drop-down box'. Below the table, the 'Order Rad' tab is selected and highlighted with a red box. The 'New Rad Order' section contains fields for 'MRI' (Search), 'Rad Section: [ALL SECTIONS]', 'Procedure Name: MRI, ABDOMEN', and 'Clinical Impression:'. A 'Radiology Location' drop-down menu is highlighted with a red box, showing options: 'AHLTA Test Clinic' (selected), 'AHLTA Test Clinic', and 'Green Test Clinic'. The 'Priority' section has radio buttons for 'Routine', 'ASAP', 'STAT', 'Notify', and 'Preop'. A 'Show Orders' button is at the bottom. A yellow callout box at the bottom right states: 'Choice of Rad procedure will determine initial Rad location automatically (to change location, drop-down function still available)'. The bottom status bar shows 'What's New in AHLTA 3.3_Week' and 'T Facility'.

Preview Save Delete Template Mgt Reminders 50 Drawing Disposition Sign Medication Submit All Options Close

BERG, OLAF V 20/245-63-8943 55yo M Ret:VADM DOB:10 Feb 1952

Appointments Current Encounter **A/P**

Priority ICD Diagnosis Chronic/Acute Type

New change by adding “Radiology Location” drop-down box

Priority

Orders & Procedures
CBC W/O DIFF

Diagnosis Order Sets Procedure Reminders Order Consults Order Lab **Order Rad** Order Med Other Therapies

New Rad Order MRI Search

Rad Section: [ALL SECTIONS]

Procedure Name: MRI, ABDOMEN

Clinical Impression:

Priority
☒ Routine ☐ ASAP ☐ STAT ☐ Notify ☐ Preop

Radiology Location:
AHLTA Test Clinic
AHLTA Test Clinic
Green Test Clinic
Comments: (optional)

More Detail ... Clear

Radiology Orders

Show Orders

Health History

What's New in AHLTA 3.3_Week

T Facility

Choice of Rad procedure will determine initial Rad location automatically (to change location, drop-down function still available)

Other web resources for AHLTA Information/How-To's

- Uniformed Services Academy of Family Physicians (USAFP): www.usafp.org/AHLTA-Information-FAQs.html
 - AHLTA 2-minute Pearls: www.usafp.org/AHLTA-Information-FAQs.html#Pearls
- AMEDD AHLTA Homepage
 - <https://www.us.army.mil/suite/page/406> (AKO password required)
- AHLTA Video Tutorials
 - <http://www-nmcp.mar.med.navy.mil/AHLTA/AHLTA%20Training%20Tools/index.html>
- DoD Dragon NaturallySpeaking resource:
www.nuance.com/mhs/



Tips to Speed-up AHLTA

- Do not run other programs even music while in clinic.
- Limit logged on user to 4 in a multiple user PC situation.
- Set monitor to best performance
- Make sure that you are only mapped to clinics that you work in.
- Have your virtual memory setting set to a minimum of 3500 and a maximum of 3800. (Your IMD shop may need to do this for you.)
- If your facility does not automatically turn every PC on and off at night, log off and hit restart as you are leaving.
- Under internet options, occasionally delete internet folders and cookies on your personal PC.



Backup Slide

General Workflow Documenting Note in AHLTA 3.3 *

...keeping speed and efficiency in mind... Remember... do not "drill" down the tree

